



**Senate Fiscal Agency**  
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**BILL ANALYSIS**

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House Bill 4438 (Substitute H-1 as reported without amendment)  
Sponsor: Representative Lisa Posthumus Lyons  
House Committee: Health Policy  
Senate Committee: Health Policy

**CONTENT**

The bill would amend the Public Health Code to extend to any person or governmental entity that operates a business or activity at which anaphylaxis-causing allergens may be present, provisions applicable to a school board regarding the prescription and dispensing of auto-injectable epinephrine. The bill also would do the following with respect to such a person or governmental entity:

- Prescribe conditions for the storage, maintenance, and oversight of auto-injectable epinephrine, as well as training requirements for people who would provide or administer epinephrine.
- Allow an employee or agent of the person or governmental entity or another individual who had completed the required training to administer epinephrine to a person who was experiencing anaphylaxis, or give it to the person for self-administration.
- Allow the person or governmental entity to make epinephrine available to another individual to administer it, if it were stored in a locked, secure container and were made available only after consultation with a health care provider via electronic communication.
- Provide for immunity from liability for injuries or damages resulting from the administration or self-administration of auto-injectable epinephrine, the failure to administer it, or any other related act or omission.
- Require a report of each incident involving the administration of auto-injectable epinephrine to be submitted to the Department of Licensing and Regulatory Affairs (LARA).
- Require LARA to publish an annual report that summarized and analyzed all of the incident reports.

The bill would take effect 90 days after its enactment.

MCL 333.17744a et al.

Legislative Analyst: Julie Cassidy

**FISCAL IMPACT**

The bill would increase the cost of State government by a minimal amount, and would have an indeterminate fiscal impact on local government that would depend on local decisions and circumstances. It would increase the costs of a local government or authority that determined to acquire and stock auto-injectable epinephrine for allergic emergencies, train one or more employees in the use of that medication, provide updated training at least every two years, and report incidents of use to the Department of Licensing and Regulatory Affairs. The local cost would vary depending on the number of doses acquired, the cost of the medication, the length of time before the medication expired, the number of people trained, and the cost of the training. The cost of two doses of epinephrine in auto-injectors is approximately \$555 at a retail pharmacy. The medication is available in different dosages for adults and children. The American Red Cross offers online training in signs and symptoms of anaphylaxis and the

use of an epinephrine auto-injector for \$20; however, this course may not cover the material required by the bill or offer the certificate required. To the extent that the immunity provision would preclude potential liability, the bill could result in savings to local units.

The bill would increase costs of LARA by a minimal amount due to the requirements to develop and make available forms for certificates to be awarded by trainers, receive reports of use of auto-injectable epinephrine pursuant to the bill, summarize and analyze the data, and publish an annual report.

Date Completed: 11-13-15

Fiscal Analyst: Elizabeth Pratt  
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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.