



March 10, 2026

The Honorable Members of the Senate Committee on Health and Human Services
Chair – Senator Melissa A. Murray
Vice Chair – Senator Pamela J. Lauria
Secretary – Senator Lori Urso

RE: Support for Senate Bill 2855

Chairwomen Murray and Members of the Committee:

Thank you for the opportunity to provide comments in support of Senate Bill 2855 sponsored by Senator Lauria. The American Lung Association strongly supports this bill as it will allow schools in Rhode Island to provide more immediate access to medications for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately. This bill has the potential to save lives and keep kids safe in schools.

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education and advocacy. The work of the American Lung Association is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 27.8 million Americans, including 4.8 million children have asthma.¹ In Rhode Island, 15,795 children have asthma.² Asthma is also responsible for more than \$80 billion annually in economic costs and causes more than 5.2 million missed school days and 8.7 million missed days of work nationwide.³

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Unfortunately, when children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport costing \$500 or more and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can purchase a single inhaler containing a short-acting bronchodilator along with spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

It is critical as outlined in the proposed legislation that school staff other than school nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the rescue medications. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, we believe it is imperative that we train other staff to assess, access and administer the required medication that would potentially save a student's life.

This legislation also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before the medication used for treatment of asthma attacks is safe and effective. In addition, as part of a research project in the Sunnyside Unified School District in Tucson, Arizona that evaluated a stock asthma inhaler project there, researchers found that school nurses were afraid that giving the medication could potentially expose them to liability, so it is imperative that the liability protections as outlined in the bill remain.

S2855 represents a simple and low-cost solution to a problem that could save both lives and money. In total, [25 states](#) have passed legislation or have administrative guidelines in place allowing schools to stock asthma medications. However, there are key provisions that should be included in this legislation to ensure it will be as effective as possible. These include:

- Making sure the legislation applies to all public and nonpublic schools.
- Applying the legislation to both students who have been diagnosed with asthma and students suffering from respiratory distress that may not have been diagnosed yet.
- Ensuring that school staff other than school health officials are required to be properly trained in the proper use and administration of the stock asthma medication.
- Making certain that all school staff, officials or health care providers involved in administration or prescribing of stock asthma medication receive liability protection except in cases of willful or gross negligence.

The Lung Association thanks the Rhode Island General Assembly for their continued commitment to the health and wellbeing of the residents of our state and the desire to protect Rhode Island's students. The Lung Association strongly supports S2855 as drafted and encourages swift action to move the bill out of committee and passage by the General Assembly.

Sincerely,



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¹ CDC. National Center for Health Statistics. National Health Interview Survey, 2023. Analysis by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

² CDC. Behavioral Risk Factor Surveillance System 2023. Analysis by the American Lung Association Epidemiology and Statistics Unit.

³ Nurmagambetov TA, Kuwahara R, Garbe P. The Economic Burden of Asthma in the United States, 2008-2013. *Annals of the American Thoracic Society*, 2018; doi: 10.1513/AnnalsATS.201703-259OC..