



To: Senate Committee on Health  
From: Senator Mark Spreitzer  
Re: Testimony on Assembly Bill 782  
Date: January 18, 2024

Chair Cabral-Guevara and committee members:

Thank you for hearing Senate Bill 782, and for the opportunity to provide testimony in favor of this bill. This bill creates a program to reimburse ambulance service providers for epinephrine auto-injectors or draw-up epinephrine kits if the provider ensures that every ambulance for which the provider is reimbursed is staffed with an emergency medical services practitioner qualified to administer the type of epinephrine that has been reimbursed by the state.

SB 782 was inspired by a constituent of the 15th Senate District who contacted my Assembly office in 2019. He could not join us today due to a scheduling conflict, but I have attached a short letter from him to my testimony. My constituent was mowing his property on a lawn tractor in the summer of 2019 when he ran into a hornet nest. He was stung dozens of times and fell unconscious. He needed epinephrine, but the ambulance that arrived either did not have epinephrine or did not have staff who understood they were authorized to administer it. His life was saved when the ambulance met a physician on the side of the highway who administered epinephrine. SB 782 came out of my office's research following this constituent's contact with me after his life was put in jeopardy.

Currently, emergency responders at the lowest level of the state's scope of practice -- Emergency Medical Responders -- can optionally become certified to administer epinephrine. The 2023 Wisconsin EMS Scope of Practice specifies that EMRs may be certified to provide intramuscular injections specifically for administering doses of epinephrine for anaphylaxis or vaccine administration, but it is not a required skill. On ambulances, epinephrine autoinjectors are often not available due to their cost. Instead, many rural services stock vials of epinephrine and use syringes to administer epinephrine, which is far more cost effective, but harder to administer. SB 782 aims to both incentivize emergency medical service providers working with entry-level first responders to become certified to administer epinephrine while also eliminating cost as a barrier to carrying epinephrine on ambulances in Wisconsin, including autoinjectors. Regardless of cost, every ambulance in Wisconsin should be stocked with epinephrine in a form that its crew is certified to provide and ready to administer.

Thank you again for the opportunity to submit testimony on this bill. Please do not hesitate to reach out to my office with any questions.

Sincerely,

  
Mark Spreitzer  
State Senator  
15th Senate District

**15th SENATE DISTRICT**

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Dear Senator Spreitzer,

I want to give you and your staff a heartfelt thank you for keeping this issue in your memory and not letting it go without creating something positive. I originally wrote you back in 2019. I will recap the situation.

I was mowing the lawn on a riding lawnmower. A recently built unknown bald-faced hornet nest was in a pine tree about 3 feet off the ground. With my mower I ran into the nest. I was subsequently stung dozens of times. Although I was not allergic to bees, with the amount of venom, I very quickly went into anaphylactic shock and lost consciousness. Anaphylaxis is the body's severe overreaction to bee venom that releases a flood of chemicals that causes the body to go into shock. Symptoms of anaphylaxis include severe itching of skin, nausea and vomiting, tingling of tongue and lips with swelling and potentially closing of the throat, lower blood pressure, and heart failure. Symptoms may take hours or minutes and are potentially life-threatening. My reaction progressed through the stages to life-threatening very quickly.

The antidote to an anaphylactic episode is a dose of epinephrine. Epinephrine reduces the symptoms very quickly and helps keep airways open.

As I lay unconscious, there was confusion among the EMS volunteers on whether they could administer epinephrine. My wife remembers them saying they didn't have any. Their solution, to make sure they did not break any rules they were unsure of, was to have a doctor meet us in another ambulance and administer the epinephrine between Evansville and Janesville. It saved my life, but it could have turned out differently because my blood pressure had dangerously dropped, and I was having difficulty breathing. According to the Harvard Medical School, the quicker the treatment with epinephrine the better. Furthermore, they state that delays in administering can lead to more severe reactions and potentially death. There are no medical consequences for wrongly administering epinephrine.

In the emergency room a breathing tube was inserted down my throat, and I was put in a drug induced coma for the first evening. I stayed in the hospital for 3 nights before being released. Due to my severe reaction, I now must have 3 bee venom immunotherapy shots every 8-10 weeks for the rest of my life.

I know of at least 2 other individuals in the area that were not so lucky with their encounter with bees. Because they were alone, they were not able to contact medical help. Mine is not an isolated incident.

I contacted then Representative Spreitzer to explain the situation and to make sure other people didn't find themselves in an easily avoidable life-threatening situation because of a lack of epinephrine or confusion on who can administer it.

I have come to find out that epi-pens are tremendously expensive and expire yearly. Knowing budgetary constraints on small towns and rural EMS Services, his bill would be a tremendous help in insuring they always have the proper, up to date, epinephrine available.

Thank you,

Harold "Butch" Beedle  
Evansville, WI



# CLINTON STATE REPRESENTATIVE

# ANDERSON

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To: Senate Committee on Health  
From: Representative Clinton Anderson  
Re: Testimony on Senate Bills 782  
Date: January 18, 2024

Senator Cabral-Guevara and Members of the Senate Committee on Health,

SB 782 aims to require the Department of Health Services to reimburse ambulance service providers for a set of two epinephrine auto-injectors or a set of two draw-up epinephrine kits for each ambulance operating in the state. This legislation is of utmost importance as it addresses a critical aspect of emergency medical response and provides a solution to the current challenges faced by ambulance service providers.

The need for SB 782 became evident when a constituent from the 45th Assembly District faced a life-threatening situation due to a hornet attack. Despite the urgency of requiring epinephrine, the ambulance on the scene was unable to administer epinephrine. This incident underscores the vital role that epinephrine plays in saving lives during emergencies.

The bill not only seeks to eliminate cost barriers by reimbursing ambulance service providers for epinephrine but also encourages emergency medical service providers to become certified to administer this life-saving medication. The distinction between epinephrine auto-injectors and draw-up epinephrine kits allows flexibility for providers to choose the most suitable option for their ambulances, considering both cost-effectiveness and ease of administration.

I strongly urge the Senate Committee on Health to support and pass SB 782 for the betterment of our healthcare system. Thank you once again for your dedication to the well-being of Wisconsinites.

Sincerely,



Clinton Anderson  
State Representative  
45th Assembly District



# JEFF SMITH

WISCONSIN STATE SENATOR – 31<sup>ST</sup> DISTRICT



**To:** Senate Committee on Health

**From:** Senator Jeff Smith

**Date:** January 18<sup>th</sup>, 2023, 10:00 AM

**RE:** Testimony in Support of Senate Bill 782: epinephrine for ambulances and making an appropriation.

Chair Cabral-Guevara and members of the committee, thank you for agreeing to hear this bill, and for giving me the opportunity to speak on its behalf.

Senate Bill 782 directs the Department of Health Services to reimburse ambulance service providers for a set of two epinephrine auto-injectors or a set of two draw-up epinephrine kits for each ambulance in Wisconsin.

On ambulances, epinephrine autoinjectors are often not available due to their cost. Instead, many rural services stock vials of epinephrine and use syringes to administer, which is harder to administer.

Regardless of cost, every ambulance in Wisconsin should be stocked with epinephrine in a form that its crew is certified and feels comfortable to administer.

This bill ensures that the cost of epinephrine autoinjectors or draw-up epinephrine are available to be reimbursed for emergency responders across Wisconsin. It also requires that ambulance providers can only receive reimbursement if each ambulance is staffed with an emergency medical service provider who is qualified to administer the lifesaving drug.

Such as the case with Senator Spreitzer's constituent who was stung, this bill will ensure that those with severe, life-threatening allergies have access to the healthcare and medication they need to survive.



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Kirsten L. Johnson, Secretary

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**TO:** Members of the Senate Committee on Health

**FROM:** HJ Waukau, Legislative Director

**DATE:** January 18, 2024

**RE:** SB 782 relating to: epinephrine for ambulances and making an appropriation

The Wisconsin Department of Health Services (DHS) would like to submit written testimony in support of Senate Bill 782 (SB 782), relating to providing reimbursement for epinephrine for ambulance service providers. Under SB 782 DHS would be required to reimburse ambulance service providers for a set of two epinephrine auto-injectors or draw-up epinephrine kits, for each ambulance service provider in the state. Upon request, DHS must also reimburse ambulance service providers for replacement sets or kits, but only if they are staffed by an emergency medical service provider who is qualified to administer epinephrine. SB 782 also creates a sum sufficient appropriation for DHS to reimburse ambulance service providers for epinephrine.

Governor Evers' 2023-25 biennial budget proposal included an almost identical proposal to reimburse ambulance service providers for stocking epinephrine in ambulances. Epinephrine is used for emergency treatment of severe allergic reactions, known as anaphylaxis, for insect bites or stings, medicine, foods, or other substances.

Epinephrine can be costly to procure and stock with costs ranging from \$300 to \$600 for a package of two auto-injectors. Auto-injectors also need to be replaced annually if they are not used, otherwise they expire. Governor Evers' initial proposal was for \$1,440,000 over the biennium and was removed by the Joint Committee on Finance in omnibus motion #10. Through its reevaluation of the provisions of SB 782 DHS determined that 1.0 FTE at an annual cost of \$71,600 GPR is necessary to administer an ambulance service provider epinephrine program. DHS has the position authority necessary to create the new 1.0 FTE position, however it does not currently have any appropriated funds for the position. With the costs of the FTE position the newly estimated fiscal impact of SB 782 is \$791,600 GPR annually.

DHS thanks the Committee for the opportunity to provide written testimony in support of SB 782 and offers itself as resource.