
DIGEST

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Henry Burns

HB No. 99

Abstract: Authorizes certain entities to supply and administer epinephrine auto-injectors to persons experiencing anaphylaxis.

Proposed law may be cited as the "Safe Access to Vital Epinephrine Act".

Proposed law defines the following terms: "administer"; "authorized entity"; "authorized health care provider"; "department"; "epinephrine auto-injector"; "provide"; and "self-administration".

Proposed law provides that an authorized health care provider may prescribe epinephrine auto-injectors in the name of an authorized entity for use in accordance with proposed law.

Proposed law authorizes any person licensed under the laws of this state to dispense a prescription drug order to dispense epinephrine auto-injectors pursuant to a prescription issued in the name of an authorized entity.

Proposed law provides that an authorized entity may acquire and stock a supply of epinephrine auto-injectors pursuant to a prescription issued in accordance with proposed law.

Proposed law requires the epinephrine auto-injectors to be stored in a location readily accessible in an emergency and in accordance with the epinephrine auto-injector's instructions for use and any additional requirements that may be established by the Dept. of Health and Hospitals (DHH).

Proposed law requires an authorized entity to designate employees or agents who have completed the training required by proposed law to be responsible for the storage, maintenance, and general oversight of epinephrine auto-injectors acquired by the authorized entity.

Proposed law authorizes an employee or agent of an authorized entity, or other individual, who has completed the training required by proposed law to use, on the premises of or in connection with the authorized entity, epinephrine auto-injectors prescribed pursuant to proposed law to do any of the following:

- (1) Provide an epinephrine auto-injector to any person who the employee, agent, or other individual believes in good faith is experiencing anaphylaxis for immediate self-administration, regardless of whether the person has a prescription for an epinephrine auto-injector or has previously been diagnosed with an allergy.

- (2) Administer an epinephrine auto-injector to any person who the employee, agent, or other individual believes in good faith is experiencing anaphylaxis, regardless of whether the person has a prescription for an epinephrine auto-injector or has previously been diagnosed with an allergy.

Proposed law requires an employee, agent, or other individual to complete an anaphylaxis training program prior to providing or administering an epinephrine auto-injector made available by an authorized entity and at least every two years following completion of the initial anaphylaxis training program.

Proposed law requires the training to be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment or other entity or individual approved by DHH.

Proposed law authorizes training to be conducted online or in person and requires the training, at a minimum, to cover all of the following:

- (1) Techniques on how to recognize symptoms of severe allergic reactions, including anaphylaxis.
- (2) Standards and procedures for the storage and administration of an epinephrine auto-injector.
- (3) Emergency follow-up procedures.

Proposed law requires the entity that conducts the training to issue a certificate, on a form developed or approved by DHH, to each person who successfully completes the anaphylaxis training program.

Proposed law provides that the following persons shall not be liable for any injuries or related damages that result from the administration of, self-administration of, or failure to administer an epinephrine auto-injector in accordance with proposed law that may constitute ordinary negligence:

- (1) An authorized entity that possesses and makes available epinephrine auto-injectors and its employees, agents, and other trained individuals.
- (2) An individual who uses an epinephrine auto-injector made available upon remote authorization by an authorized health care provider pursuant to proposed law.
- (3) An authorized health care provider that prescribes epinephrine auto-injectors to an authorized entity.
- (4) An individual or entity that conducts the training required by proposed law.

The immunity provided by proposed law shall not apply to acts or omissions constituting gross,

willful, or wanton negligence.

The administration of an epinephrine auto-injector in accordance with proposed law shall not be deemed the practice of medicine.

The immunity from liability provided by proposed law is in addition to and not in lieu of the protection provided by the Good Samaritan Law.

Proposed law provides that an entity located in La. shall not be liable for any injuries or related damages that result from the provision or administration of an epinephrine auto-injector by its employees or agents outside of La. if the entity or its employee or agent would not have been liable for such injuries or related damages had the provision or administration occurred within La.

Proposed law requires an authorized entity that possesses and makes available epinephrine auto-injectors to submit to DHH, on a form developed by DHH, a report of each incident on the authorized entity's premises that involves the administration of an epinephrine auto-injector.

Proposed law requires DHH to annually publish a report that summarizes and analyzes all incident reports submitted to it pursuant to proposed law. Proposed law further requires DHH to make the report publicly available on the department's Internet website.

Proposed law provides that an authorized entity that acquires a stock supply of epinephrine auto-injectors pursuant to a prescription issued in accordance with proposed law may make the epinephrine auto-injectors available to individuals other than those individuals trained pursuant to proposed law if the epinephrine auto-injectors are stored in a locked, secure container and are made available only upon remote authorization by an authorized health care provider after consultation with the authorized health care provider by audio, televideo, or other similar means of electronic communication.

Proposed law provides that consultation with an authorized health care provider pursuant to proposed law shall not be considered the practice of telemedicine or otherwise be construed as violating any law or rule regulating the authorized health care provider's professional practice.

(Adds R.S. 40:1300.361-1300.369)