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| BILL ANALYSIS |

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| S.B. 1101 |
| By: Taylor, Van |
| Public Health |
| Committee Report (Unamended) |

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| **BACKGROUND AND PURPOSE** Concerned parties have expressed a need for day-care centers to stock and administer epinephrine auto-injectors to treat individuals suffering from anaphylaxis. S.B. 1101 seeks to address this concern, in part, by authorizing a physician to prescribe epinephrine auto-injectors in the name of a day-care center and providing for the administration of an epinephrine auto‑injector to a person reasonably believed to be experiencing anaphylaxis.  |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS** S.B. 1101 amends the Human Resources Code to authorize a physician, or a person who has been delegated prescriptive authority by a physician, to prescribe epinephrine auto-injectors in the name of a day-care center. The bill requires a physician or other person who so prescribes epinephrine auto-injectors to provide the day-care center with a standing order for the administration of an epinephrine auto-injector to a person reasonably believed to be experiencing anaphylaxis. The bill expressly does not require the standing order to be patient-specific and authorizes the administration of an epinephrine auto-injector to a person without a previously established physician-patient relationship. The bill establishes that supervision or delegation by a physician is considered adequate if the physician periodically reviews the order and is available through direct telecommunication as needed for consultation, assistance, and direction. The bill sets out the required contents of a standing order. The bill authorizes a pharmacist to dispense an epinephrine auto-injector to a day-care center without requiring the name or any other identifying information relating to the user. S.B. 1101 makes each day-care center responsible for training personnel in the administration of an epinephrine auto-injector, sets out requirements for the training, and requires each day-care center to maintain records on the training. The bill grants a person who in good faith takes, or fails to take, action relating to the prescription of an epinephrine auto-injector to a day-care center or the administration of an epinephrine auto-injector in a day-care center immunity from civil or criminal liability or disciplinary action resulting from that action or failure to act. The bill establishes that such immunities and protections are in addition to other immunities or limitations of liability provided by law. The bill expressly does not create a civil, criminal, or administrative cause of action or liability or create a standard of care, obligation, or duty that provides a basis for a cause of action for an act or omission under the bill's provisions. The bill establishes that an act or omission relating to an epinephrine auto-injector under the bill's provisions does not create a cause of action. |
| **EFFECTIVE DATE** On passage, or, if the bill does not receive the necessary vote, September 1, 2017. |