BILL ANALYSIS

BACKGROUND AND PURPOSE

There have been calls to authorize day-care centers to stock and administer epinephrine auto-injectors to treat individuals suffering from anaphylaxis. C.S.H.B. 1849 seeks to answer these calls by authorizing a physician to prescribe epinephrine auto-injectors in the name of a day-care center.

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

C.S.H.B. 1849 amends the Human Resources Code to authorize a state licensed physician, or a person who has been delegated prescriptive authority, to prescribe epinephrine auto-injectors in the name of a day-care center. The bill requires the physician or other person who prescribes the 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 sets out the required contents of the standing order, establishes that the order is not required to be patient-specific, and authorizes an epinephrine auto-injector to be administered under the order to a person without a previously established physician-patient relationship.

C.S.H.B. 1849 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 makes each day-care center responsible for training employees in the administration of an epinephrine auto-injector, sets out requirements for the training, requires each day-care center to maintain records on the training, and authorizes the auto-injector to be dispensed by a pharmacist without requiring any identifying information relating to the user.

C.S.H.B. 1849 requires the day-care center, not later than the 10th business day after the date a an employee administers an epinephrine auto-injector, to report certain information prescribed by the bill about that administration to the following:

- the day-care center's owner;
- the physician or other person who prescribed the epinephrine auto-injector;
- the Health and Human Services Commission; and

- the Department of State Health Services.

C.S.H.B. 1849 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. Those immunities and protections are in addition to other immunities or limitations of liability provided by law. The bill establishes that its provisions do 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 and that an act or omission described by those provisions does not create a cause of action.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1849 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute includes a provision that requires a day-care center to report certain information after an epinephrine auto-injector is administered.