BILL ANALYSIS

C.S.S.B. 1827 By: Menéndez Public Health Committee Report (Substituted)

BACKGROUND AND PURPOSE

It has been noted that, when people experience an allergic reaction or anaphylaxis from bee stings, drug reactions, food allergies, or other induced shock, epinephrine is a common drug that helps combat the symptoms and that epinephrine auto-injectors are used to reverse the effects of these reactions. It has also been noted that peace officers in Texas are not allowed to administer epinephrine to individuals who are experiencing a life-threatening allergic reaction, even though they are often the first on the scene when an emergency call is made. C.S.S.B. 1827 seeks to address this issue by providing for peace officer administration of an epinephrine auto-injector to an individual who is in an emergency situation and for the possession of epinephrine auto-injectors by law enforcement agencies.

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.S.B. 1827 amends the Occupations Code to require the Texas Commission on Law Enforcement (TCOLE), in consultation with the Department of State Health Services (DSHS), to approve a training course on the administration of an epinephrine auto-injector. The bill authorizes a law enforcement agency to acquire and possess epinephrine auto-injectors and authorizes a peace officer who has successfully completed training in the use of such devices in a TCOLE-approved course to possess and administer an epinephrine auto-injector in accordance with the bill's provisions. The bill authorizes a physician, or a person who has been delegated prescriptive authority by a physician, to prescribe epinephrine auto-injectors in the name of a law enforcement agency and requires the physician or other person to provide the agency with a standing order for such administration to a person reasonably believed to be experiencing anaphylaxis. The bill establishes that the standing order is not required to be patient-specific and that an epinephrine auto-injector may be administered under the bill's provisions to a person without a previously established physician-patient relationship. The bill sets out the conditions under which supervision or delegation by a physician is considered adequate and sets out the required contents of the standing order. The bill authorizes a pharmacist to dispense an epinephrine auto-injector to a law enforcement agency without requiring the name of or any other identifying information relating to the user.

C.S.S.B. 1827 requires a law enforcement agency that acquires and possesses epinephrine auto-injectors to adopt and implement a policy regarding the maintenance, administration, and

disposal of the auto-injectors. The bill requires the policy to require that the auto-injectors be stored in a secure location and to establish a process for the agency to check the inventory of auto-injectors at regular intervals for expiration and replacement.

C.S.S.B. 1827 requires a law enforcement agency, after an officer administers an epinephrine auto-injector, to notify the physician or other person who prescribed the auto-injector of the age of the person to whom it was administered and the number of doses administered to the person. The bill authorizes a law enforcement agency to accept gifts, grants, donations, and federal and local money to implement the bill's provisions. The bill establishes the following:

- that a peace officer's administration of an epinephrine auto-injector to a person in accordance with the bill's requirements or TCOLE rules does not constitute the unlawful practice of any health care profession;
- that a person who in good faith takes, or fails to take, action relating to the prescription of an epinephrine auto-injector to a law enforcement agency or the administration of an epinephrine auto-injector by a peace officer is immune from civil or criminal liability or disciplinary action resulting from that action or failure to act;
- that the immunities and protections provided by the bill are in addition to other immunities or limitations of liability provided by law; and
- that an act or omission described by the bill does not create a cause of action.

The bill's provisions expressly do not:

- create a civil, criminal, or administrative cause of action or liability;
- 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; or
- waive governmental immunity from suit or liability.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 1827 may differ from the engrossed in minor or nonsubstantive ways, the following summarizes the substantial differences between the engrossed and committee substitute versions of the bill.

The substitute includes the following provisions:

- a provision limiting the authority of a peace officer to possess and administer an epinephrine auto-injector to officers who have successfully completed training in the use of the device in a TCOLE-approved course;
- requirements for a law enforcement agency that acquires and possesses epinephrine auto-injectors to adopt and implement a policy regarding the maintenance, administration, and disposal of the auto-injectors and for the policy to include a certain inventory process and secure storage requirement;
- a requirement for a law enforcement agency, after an officer administers an epinephrine auto-injector, to notify the physician or other person who prescribed the auto-injector of the age of the person to whom it was administered and the number of doses administered; and
- an authorization for a law enforcement agency to accept gifts, grants, donations, and federal and local money to implement the bill's provisions.

The substitute does not include a provision requiring TCOLE, in consultation with DSHS, to develop reporting requirements concerning a peace officer's administration of an epinephrine auto-injector.