## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## **HOUSE BILL**

No. 126

Session of 2017

INTRODUCED BY BAKER, DEAN, DRISCOLL, D. COSTA, PICKETT, ROZZI, O'BRIEN, JAMES, READSHAW, WATSON, SAYLOR, BARRAR, NEILSON, MOUL, MURT, STAATS, MILLARD, HELM, PHILLIPS-HILL, GILLEN, ZIMMERMAN, WARD, TALLMAN, HEFFLEY, LAWRENCE, MARSICO, B. MILLER, GABLER, FREEMAN, PASHINSKI, KORTZ AND DAVIS, JANUARY 23, 2017

AS AMENDED ON THIRD CONSIDERATION, IN SENATE, JUNE 22, 2018

## AN ACT

1	<del>Providing</del> Amending Title 35 (Health and Safety) Of the	<
2	PENNSYLVANIA CONSOLIDATED STATUTES, PROVIDING FOR REIMBURSEMENT OF PATIENT EXPENSES ASSOCIATED WITH	
4	PARTICIPATION IN CANCER CLINICAL TRIALS AND FOR DUTIES OF THE	
5	DEPARTMENT OF HEALTH; IMPOSING A PENALTY; PROVIDING for the	
6	use of epinephrine auto-injectors by certain entities and	
7 8	organizations; and conferring powers and imposing duties on the Department of Health.	
9	The General Assembly of the Commonwealth of Pennsylvania	
10	hereby enacts as follows:	
11	Section 1. Short title.	<
12	This act shall be known and may be cited as the Epinephrine	
13	Auto Injector Entity Act.	
14	Section 2. Definitions.	
15	The following words and phrases when used in this act shall	
16	have the meanings given to them in this section unless the	
17	context clearly indicates otherwise:	
18	"Administer." The direct application of an epinephrine auto-	

- 1 injector to the body of an individual.
- 2 "Authorized entity." Any entity or organization, other than
- 3 a school entity or a nonpublic school under section 1414.2 of
- 4 the act of March 10, 1949 (P.L.30, No.14), known as the Public
- 5 School Code of 1949, which has an employee or agent who has
- 6 completed the required training and at which allergens capable
- 7 of causing anaphylaxis may be present, including, but not
- 8 <del>limited to:</del>
- 9 <del>(1) recreation camps;</del>
- 10 (2) colleges and universities;
- 11 (3) day-care facilities;
- 12 <del>(4) youth sports leagues;</del>
- 13 <del>(5) amusement parks;</del>
- 14 <del>(6) restaurants;</del>
- 15 (7) places of employment; and
- 16 <del>(8) sports arenas.</del>
- 17 "Department." The Department of Health of the Commonwealth.
- 18 "Epinephrine auto-injector." A single-use device used for-
- 19 the automatic injection of a premeasured dose of epinephrine-
- 20 into the human body.
- 21 "Health care practitioner." An individual who is authorized
- 22 to practice some component of the healing arts by a license,
- 23 permit, certificate or registration issued by a Commonwealth
- 24 licensing agency or board.
- 25 Section 3. Epinephrine auto injectors for authorized entities.
- 26 (a) Prescribing and dispensing. Notwithstanding any
- 27 provision of law to the contrary, a health care practitioner
- 28 with prescriptive authority may prescribe epinephrine auto-
- 29 injectors in the name of an authorized entity for use in
- 30 accordance with this section. Pharmacists and health care

	practitioners may dispense opiniophiline duto injection pursuant
2	to a prescription issued in the name of an authorized entity.
3	(b) Supply.—
4	(1) An authorized entity may acquire and stock a supply-
5	of epinephrine auto-injectors pursuant to a prescription-
6	issued in accordance with this section. The epinephrine auto-
7	injectors shall be stored:
8	(i) in a location readily accessible in an
9	emergency; and
10	(ii) in accordance with:
11	(A) the epinephrine auto-injector's instructions
12	for use; and
13	(B) any additional requirements that may be
14	established by the department.
15	(2) An authorized entity shall designate employees or
16	agents who have completed the training required under
17	subsection (d) to be responsible for the storage,
18	maintenance, control and general oversight of epinephrine
19	auto-injectors acquired by the authorized entity.
20	(c) Use. An employee or agent of an authorized entity or
21	other individual associated with the entity who has completed
22	the training required under subsection (d) may use epinephrine
23	auto-injectors prescribed under subsection (a) to do any of the-
24	following:
25	(1) Provide an epinephrine auto injector for immediate
26	administration to any individual, or the parent, guardian or
27	caregiver of the individual, who the employee, agent or other
28	individual associated with the entity believes, in good-
29	faith, is experiencing anaphylaxis, regardless of whether the
30	individual has a prescription for an epinephrine auto-

injector or has previously been diagnosed with an allergy.

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

## (d) Training.--

(1) An employee or agent of the authorized entity or other individual associated with the entity shall complete an anaphylaxis training program as required by the department.

The training shall be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment, A HEALTH CARE PRACTITIONER EMPLOYED OR CONTRACTED BY THE AUTHORIZED ENTITY or an entity or individual approved by the department. The department may approve specific entities or individuals or may approve classes of entities or individuals to conduct the training.

Training may be conducted online or in person and, at a minimum, shall cover:

(i) how to recognize signs and symptoms of severeallergic reactions, including anaphylaxis;

(ii) standards and procedures for the storage and administration of an epinephrine auto injector; and (iii) emergency follow-up procedures.

(2) The entity OR INDIVIDUAL that conducts the training <-shall issue a certificate, on a form developed or approved by
the department, to each individual who successfully completes
the anaphylaxis training program.

(e) Good Samaritan protections.

1	(1) The following shall not be liable for any injuries
2	or related damages that result from any act or omission taken
3	under this section:
4	(i) An authorized entity that possesses and makes
5	available epinephrine auto-injectors and its employees,
6	agents and other individuals associated with the entity;
7	(ii) a health care practitioner that prescribes or
8	dispenses epinephrine auto injectors to an authorized
9	entity;
10	(iii) a pharmacist or health care practitioner that
11	dispenses epinephrine auto-injectors to an authorized-
12	entity; and
13	(iv) an individual or entity that conducts the
14	training described under subsection (d).
15	(2) The immunity provided under paragraph (1) shall not-
16	apply to acts or omissions constituting intentional
17	misconduct or gross negligence.
18	(3) The administration of an epinephrine auto injector
19	in accordance with this section shall not be considered the
20	practice of medicine or any other profession that otherwise
21	requires licensure.
22	(4) This subsection shall not eliminate, limit or reduce
23	any other immunity or defense that may be available under-
24	law, including that provided under 42 Pa.C.S. § 8332
25	(relating to emergency response provider and bystander good
26	Samaritan civil immunity).
27	(5) An entity located in this Commonwealth shall not be
28	liable for any injuries or related damages that result from
29	the provision or administration of an epinephrine auto-
30	injector outside of this Commonwealth if the entity:

1 (i) would not have been liable for the injuries or 2 related damages had the provision or administration-3 occurred within this Commonwealth; or (ii) is not liable for the injuries or related 4 5 damages under the law of the state in which the provision-6 or administration occurred. Section 4. Effective date. 7 8 This act shall take effect in 60 days. 9 SECTION 1. TITLE 35 OF THE PENNSYLVANIA CONSOLIDATED <--STATUTES IS AMENDED BY ADDING CHAPTERS TO READ: 10 11 CHAPTER 54 12 CANCER TRIAL ACCESS FOR PENNSYLVANIA PATIENTS 13 SEC. 14 5401. SCOPE. 15 5402. LEGISLATIVE FINDINGS AND INTENT. 5403. DEFINITIONS. 16 17 5404. IMPROVING ACCESS TO CANCER CLINICAL TRIALS. § <u>54</u>01. SCOPE. 18 19 THIS CHAPTER RELATES TO CANCER TRIAL ACCESS FOR PENNSYLVANIA 20 PATIENTS. 21 § 5402. LEGISLATIVE FINDINGS AND INTENT. 2.2 (A) FINDINGS AND DECLARATIONS. -- THE GENERAL ASSEMBLY FINDS 23 AND DECLARES AS FOLLOWS: (1) A PENNSYLVANIAN WILL BE DIAGNOSED WITH CANCER 24 25 APPROXIMATELY EVERY FOUR MINUTES, AND A PENNSYLVANIAN WILL DIE OF CANCER EVERY 10 MINUTES. AFRICAN-AMERICAN 26 27 PENNSYLVANIANS IN PARTICULAR FACE HIGHER RATES OF CANCER INCIDENCE AND MORTALITY COMPARED TO OTHER RACES AND 28 29 ETHNICITIES. (2) THE ABILITY TO TRANSLATE MEDICAL FINDINGS FROM

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1	RESEARCH TO PRACTICE RELIES LARGELY ON HAVING ROBUST AND
2	DIVERSE PATIENT PARTICIPATION IN CANCER CLINICAL TRIALS.
3	(3) A LOW PARTICIPATION RATE OR A HOMOGENOUS PARTICIPANT
4	GROUP PREVENTS SEGMENTS OF THE POPULATION FROM BENEFITING
5	FROM ADVANCES ACHIEVED THROUGH CLINICAL RESEARCH, CREATES
6	UNCERTAINTIES OVER THE APPLICABILITY OF RESEARCH FINDINGS AND
7	HAS PROVEN TO DEVELOP LIFESAVING DRUGS THAT WORK FOR SOME
8	ETHNIC POPULATIONS BUT NOT OTHERS.
9	(4) CONVERSELY, SOME DRUG TRIALS ARE CANCELED BECAUSE
10	THEY DO NOT SHOW PROMISE FOR THE CURRENT HOMOGENOUS STUDY
11	POPULATION OF PATIENTS BUT COULD BE BENEFICIAL TO OTHER
12	ETHNICITIES WHO ARE NOT RECEIVING THE TRIAL DRUG BECAUSE OF
13	POOR PARTICIPATION RATES.
14	(5) DIVERSE PATIENT PARTICIPATION IN CANCER CLINICAL
15	TRIALS DEPENDS, IN PART, ON WHETHER A PARTICIPANT CAN AFFORD
16	ANCILLARY MEDICAL AND OTHER COSTS, INCLUDING TRANSPORTATION
17	FOR CLINICAL VISITS REQUIRED BY TRIAL PARTICIPATION, WHICH
18	ARE NOT COVERED BY STANDARD OF CARE, OR LODGING DURING THE
19	COURSE OF HIS OR HER PARTICIPATION. A NATIONAL STUDY IN 2015
20	FOUND THAT PATIENT HOUSEHOLDS MAKING LESS THAN \$50,000
21	ANNUALLY WERE ALMOST 30% LESS LIKELY TO PARTICIPATE IN
22	CLINICAL TRIALS.
23	(6) ANOTHER BARRIER TO CANCER CLINICAL TRIAL
24	PARTICIPATION IS THE COST OF TRAVEL, LODGING AND OTHER
25	EXPENSES FOR A PATIENT'S TRAVEL COMPANION, INCLUDING A FAMILY
26	MEMBER, FRIEND, HEALTH CARE PROVIDER OR CHAPERONES THAT
27	ATTEND CANCER CLINICAL TRIAL TREATMENTS TO PROVIDE EMOTIONAL,
28	PHYSICAL AND MENTAL SUPPORT TO THE TRIAL PARTICIPANT. SOME
29	TRIAL PARTICIPANTS ARE TOO OLD, TOO YOUNG OR TOO ILL TO
30	SIMPLY TRAVEL ON THEIR OWN.

Τ	(/) CANCER CLINICAL TRIALS OFTEN ONLY COVER THE ACTUAL
2	COST OF THE DRUG BEING TESTED AND VERY RARELY THE DIRECT
3	COSTS OF PARTICIPATION BY A PATIENT-SUBJECT. THERE ARE OFTEN
4	SIGNIFICANT EXPENSES ASSOCIATED WITH ENROLLMENT IN A CLINICAL
5	TRIAL THAT ARE NOT COVERED BY THE CLINICAL TRIAL SITE OR
6	SPONSOR. THESE INCLUDE TRAVEL EXPENSES TO AND FROM THE
7	CLINICAL SITES WHETHER BY AIR, CAR, BUS, TRAIN, TAXI OR
8	PUBLIC TRANSPORTATION ALONG WITH THE TRAVEL COSTS OF PARKING,
9	CAR RENTAL, GAS, TOLLS AND LODGING.
LO	(8) THIS DISPARITY THREATENS ONE OF THE MOST BASIC
11	ETHICAL UNDERPINNINGS OF CLINICAL RESEARCH, THE REQUIREMENT
12	THAT THE BENEFITS OF RESEARCH BE MADE AVAILABLE EQUITABLY
13	AMONG ALL ELIGIBLE INDIVIDUALS.
L 4	(9) ACCORDING TO THE NATIONAL CANCER INSTITUTE, CANCER
L 5	CLINICAL TRIALS RESOURCE GUIDE, SOME OF THE BARRIERS
L 6	PREVENTING INDIVIDUALS, WITH CANCER OR AT HIGH RISK OF
17	DEVELOPING CANCER, FROM PARTICIPATING IN CLINICAL TRIALS ARE
18	DIRECT AND INDIRECT FINANCIAL AND PERSONAL COSTS, INCLUDING
19	TRAVEL.
20	(10) SOME CORPORATIONS, INDIVIDUALS, PUBLIC AND PRIVATE
21	FOUNDATIONS, HEALTH CARE PROVIDERS AND OTHER STAKEHOLDERS ARE
22	HESITANT TO CONTRIBUTE TO OR ACCEPT FUNDS FROM PROGRAMS THAT
23	ARE ORGANIZED TO ALLEVIATE FINANCIAL BURDENS FACED BY
24	PATIENTS WHO WISH TO PARTICIPATE IN CLINICAL TRIALS AND THEIR
25	CAREGIVERS DUE TO CONCERNS THAT THE UNITED STATES FOOD AND
26	DRUG ADMINISTRATION OR OTHER FEDERAL REGULATORS WOULD VIEW
27	THE PAYMENTS MADE FROM THOSE FUNDS AS PROHIBITED INDUCEMENTS
28	FOR PATIENTS TO RECEIVE THE HEALTH CARE SERVICES PROVIDED
29	DURING CLINICAL TRIALS.
30	(11) WHILE THE UNITED STATES FOOD AND DRUG

- 1 ADMINISTRATION RECENTLY CONFIRMED TO CONGRESS AND PROVIDED
- 2 GUIDANCE THAT, IN FACT, REIMBURSEMENT OF DIRECT PATIENT-
- 3 INCURRED EXPENSES IS NOT INDUCEMENT, MANY ORGANIZATIONS,
- 4 PHARMACEUTICAL COMPANIES, PHILANTHROPIC INDIVIDUALS,
- 5 CHARITABLE ORGANIZATIONS, GOVERNMENT ENTITIES AND OTHERS
- 6 STILL OPERATE UNDER THE UNDERSTANDING THAT SUCH REIMBURSEMENT
- 7 COULD BE, IN FACT, CONSIDERED INDUCEMENT.
- 8 (B) INTENT.--IT IS THE INTENT OF THE GENERAL ASSEMBLY TO
- 9 ENACT LEGISLATION TO DEFINE AND ESTABLISH A CLEAR DIFFERENCE
- 10 BETWEEN WHAT IS CONSIDERED INDUCEMENT FOR A PATIENT TO
- 11 PARTICIPATE IN A CLINICAL TRIAL AND DIRECT REIMBURSEMENT OF
- 12 PATIENT-INCURRED EXPENSES FOR PARTICIPATING IN A CANCER CLINICAL
- 13 TRIAL.
- 14 § 5403. DEFINITIONS.
- THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
- 16 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
- 17 CONTEXT CLEARLY INDICATES OTHERWISE:
- 18 "CANCER CLINICAL TRIALS." RESEARCH STUDIES THAT TEST NEW
- 19 CANCER TREATMENTS ON PEOPLE, INCLUDING CHEMOTHERAPIES, STEM CELL
- 20 THERAPIES AND OTHER NEW TREATMENTS.
- 21 "DEPARTMENT." THE DEPARTMENT OF HEALTH OF THE COMMONWEALTH.
- 22 "INDUCEMENT." PAYING A PERSON MONEY, INCLUDING A LUMP SUM OR
- 23 SALARY PAYMENT, TO PARTICIPATE IN A CANCER CLINICAL TRIAL.
- 24 "IRB." AN INSTITUTIONAL REVIEW BOARD THAT IS AN
- 25 APPROPRIATELY CONSTITUTED GROUP FORMALLY ESTABLISHED IN
- 26 ACCORDANCE WITH APPLICABLE UNITED STATES FOOD AND DRUG
- 27 ADMINISTRATION REGULATIONS OR OUTSIDE THE UNITED STATES BY OTHER
- 28 EQUIVALENT AND APPLICABLE INTERNATIONAL REGULATIONS AND
- 29 GUIDELINES IN ORDER TO REVIEW AND MONITOR BIOMEDICAL RESEARCH
- 30 INVOLVING HUMAN SUBJECTS, AND SPECIFICALLY HAVING THE AUTHORITY

- 1 TO APPROVE OR DISAPPROVE RESEARCH OR TO REQUIRE MODIFICATIONS IN
- 2 RESEARCH TO SECURE APPROVAL.
- 3 "IEC." AN INDEPENDENT ETHICS REVIEW COMMITTEE THAT IS AN
- 4 APPROPRIATELY CONSTITUTED GROUP FORMALLY ESTABLISHED IN
- 5 ACCORDANCE WITH APPLICABLE UNITED STATES FOOD AND DRUG
- 6 ADMINISTRATION REGULATIONS OR OUTSIDE THE UNITED STATES BY OTHER
- 7 EQUIVALENT AND APPLICABLE INTERNATIONAL REGULATIONS AND
- 8 GUIDELINES IN ORDER TO REVIEW AND MONITOR BIOMEDICAL RESEARCH
- 9 <u>INVOLVING HUMAN SUBJECTS</u>, AND SPECIFICALLY HAVING THE AUTHORITY
- 10 TO APPROVE OR DISAPPROVE RESEARCH OR TO REQUIRE MODIFICATIONS IN
- 11 RESEARCH TO SECURE APPROVAL.
- 12 "PATIENT-SUBJECT." A PERSON PARTICIPATING IN A CANCER
- 13 CLINICAL TRIAL.
- 14 "THIRD-PARTY REIMBURSEMENT ENTITY." A THIRD-PARTY NONPROFIT
- 15 <u>CORPORATION OR PUBLIC CHARITY THAT SPECIALIZES IN ASSISTING</u>
- 16 CANCER PATIENTS AND INCREASING ENROLLMENT, RETENTION AND
- 17 MINORITY PARTICIPATION IN CANCER CLINICAL TRIALS.
- 18 § 5404. IMPROVING ACCESS TO CANCER CLINICAL TRIALS.
- 19 (A) INDUCEMENT. -- ALL SPONSORS OF CANCER CLINICAL TRIALS
- 20 SHALL INFORM POTENTIAL PATIENT-SUBJECTS AT THE TIME OF THE
- 21 INFORMED CONSENT PROCESS OF THE FOLLOWING:
- 22 (1) REIMBURSEMENT FOR TRAVEL AND ANCILLARY COSTS IS
- 23 <u>AVAILABLE TO ALL ENROLLEES BASED ON FINANCIAL NEED.</u>
- 24 (2) COVERAGE OF THE TRAVEL AND OTHER ANCILLARY COSTS IS
- 25 <u>DONE TO ELIMINATE FINANCIAL BARRIERS TO ENROLLMENT IN ORDER</u>
- 26 TO RETAIN PATIENT-SUBJECTS IN THE CLINICAL TRIAL.
- 27 (3) FAMILY, FRIENDS OR CHAPERONES THAT ATTEND THE CANCER
- 28 CLINICAL TRIAL TREATMENTS TO SUPPORT THE PATIENT-SUBJECT ARE
- 29 ELIGIBLE FOR REIMBURSEMENT OF THEIR TRAVEL AND ANCILLARY
- 30 EXPENSES.

1	(B) REIMBURSEMENT
2	(1) REIMBURSEMENT OF TRAVEL, ANCILLARY MEDICAL COSTS AND
3	OTHER DIRECT PATIENT-INCURRED EXPENSES RELATED TO TRIAL
4	PARTICIPATION SHALL NOT BE CONSIDERED AN INDUCEMENT TO
5	PARTICIPATE IN A CANCER CLINICAL TRIAL.
6	(2) REIMBURSEMENT FOR TRAVEL AND ANCILLARY EXPENSES
7	SHALL NOT BE CONSIDERED COERCIVE OR EXERTING UNDUE INFLUENCE
8	TO PARTICIPATE IN A TRIAL; INSTEAD REIMBURSEMENT SHALL BE
9	CONSIDERED A MEANS TO CREATE PARITY IN CLINICAL TRIAL ACCESS
10	AND REMOVE A BARRIER TO PARTICIPATION FOR FINANCIALLY
11	BURDENED PATIENT-SUBJECTS.
12	(C) EXPENSES AND REGISTRATION THE FOLLOWING APPLY:
13	(1) GOVERNMENT, INDUSTRY, PUBLIC AND PRIVATE
14	FOUNDATIONS, CORPORATIONS AND INDIVIDUALS MAY OFFER FINANCIAL
15	SUPPORT TO PATIENT-SUBJECTS, OR THE FAMILY, FRIENDS OR
16	CHAPERONES OF PATIENT-SUBJECTS, TO COVER ANCILLARY COSTS
17	THROUGH THEIR SUPPORT OF A THIRD-PARTY REIMBURSEMENT ENTITY.
18	(2) A THIRD-PARTY REIMBURSEMENT ENTITY SHALL REGISTER
19	WITH A DEPARTMENT-APPROVED PENNSYLVANIA COLLEGE OR UNIVERSITY
20	WITH A SCHOOL OF PUBLIC HEALTH. REGISTRATION MUST OCCUR
21	WITHIN 30 DAYS OF THE DATE THE THIRD-PARTY REIMBURSEMENT
22	ENTITY FIRST REIMBURSED A PATIENT-SUBJECT, OR THE PATIENT-
23	SUBJECT'S FAMILY, FRIENDS OR CHAPERONES, FOR TRAVEL OR
24	ANCILLARY EXPENSES RELATED TO A CANCER CLINICAL TRIAL
25	CONDUCTED WITHIN THIS COMMONWEALTH.
26	(3) REGISTRATION UNDER PARAGRAPH (2) SHALL INCLUDE:
27	(I) THE NAME OF THE THIRD-PARTY REIMBURSEMENT
28	ENTITY.
29	(II) THE THIRD-PARTY REIMBURSEMENT ENTITY'S LEGAL
30	AND TAX STATUS.

1	(III) THE THIRD-PARTY REIMBURSEMENT ENTITY'S
2	EMPLOYER OR OTHER SIMILAR IDENTIFICATION NUMBER.
3	(IV) THE NAMES OF THE THIRD-PARTY REIMBURSEMENT
4	ENTITY'S PRINCIPAL OFFICERS AND DIRECTORS.
5	(V) THE NAMES OF DONORS OF \$5,000 OR MORE TO THE
6	THIRD-PARTY REIMBURSEMENT ENTITY.
7	(VI) APPROPRIATE IDENTIFYING INFORMATION, AS
8	DETERMINED BY THE DEPARTMENT, REGARDING OTHER SOURCES OF
9	FUNDING FROM A SOURCE OF \$5,000 OR MORE.
10	(VII) OTHER INFORMATION AS THE DEPARTMENT DEEMS
11	NECESSARY OR APPROPRIATE.
12	(4) A THIRD-PARTY REIMBURSEMENT ENTITY REGISTERING UNDER
13	PARAGRAPH (2) SHALL UPDATE THE REGISTRATION NO LESS THAN ONCE
14	ANNUALLY UTILIZING FORMS AND REGULATIONS DEVELOPED BY THE
15	DEPARTMENT.
16	(5) A THIRD-PARTY REIMBURSEMENT ENTITY THAT FAILS TO
17	REGISTER AS REQUIRED BY THIS SUBSECTION SHALL BE SUBJECT TO A
18	PENALTY OF NO MORE THAN \$300 IMPOSED BY THE DEPARTMENT.
19	(D) REIMBURSEMENT PROGRAMS REIMBURSEMENT PROGRAMS MUST
20	COMPLY WITH THE FOLLOWING:
21	(1) REIMBURSEMENT PROGRAMS THAT COVER ANCILLARY MEDICAL
22	AND TRAVEL EXPENSES MUST BE REVIEWED AND APPROVED BY THE IRB
23	OR IEC IN CONJUNCTION WITH THEIR REVIEW OF THE PROPOSED
24	CLINICAL TRIAL. THE IRB OR IEC MUST CONSIDER WHETHER THE
25	REIMBURSED PATIENT-SUBJECTS ARE RECRUITED FAIRLY, INFORMED
26	ADEQUATELY AND PAID APPROPRIATELY.
27	(2) THE NATURE OF THE ANCILLARY SUPPORT AND GENERAL
28	GUIDELINES ON FINANCIAL ELIGIBILITY MUST BE DISCLOSED IN THE
29	INFORMED CONSENT PROCESS.
30	(3) THE REIMBURSEMENT PROCESS MUST CONFORM TO FEDERAL

- 1 AND STATE LAWS AND GUIDANCE.
- 2 CHAPTER 55
- 3 EPINEPHRINE AUTO-INJECTOR ENTITIES
- 4 <u>SEC.</u>
- 5 5501. SCOPE.
- 6 <u>5502.</u> DEFINITIONS.
- 7 5503. EPINEPHRINE AUTO-INJECTORS FOR AUTHORIZED ENTITIES.
- 8 § 5501. SCOPE.
- 9 THIS CHAPTER RELATES TO EPINEPHRINE AUTO-INJECTOR ENTITIES.
- 10 § 5502. DEFINITIONS.
- 11 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
- 12 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
- 13 CONTEXT CLEARLY INDICATES OTHERWISE:
- 14 "ADMINISTER." THE DIRECT APPLICATION OF AN EPINEPHRINE AUTO-
- 15 INJECTOR TO THE BODY OF AN INDIVIDUAL.
- 16 "AUTHORIZED ENTITY." ANY ENTITY OR ORGANIZATION, OTHER THAN
- 17 A SCHOOL ENTITY OR A NONPUBLIC SCHOOL UNDER SECTION 1414.2 OF
- 18 THE ACT OF MARCH 10, 1949 (P.L.30, NO.14), KNOWN AS THE PUBLIC
- 19 SCHOOL CODE OF 1949, WHICH HAS AN EMPLOYEE OR AGENT WHO HAS
- 20 COMPLETED THE REQUIRED TRAINING AND AT WHICH ALLERGENS CAPABLE
- 21 OF CAUSING ANAPHYLAXIS MAY BE PRESENT, INCLUDING, BUT NOT
- 22 LIMITED TO:
- 23 (1) RECREATION CAMPS;
- 24 (2) COLLEGES AND UNIVERSITIES;
- 25 (3) DAY-CARE FACILITIES;
- 26 <u>(4) YOUTH SPORTS LEAGUES;</u>
- 27 (5) AMUSEMENT PARKS;
- 28 (6) RESTAURANTS;
- 29 (7) PLACES OF EMPLOYMENT; AND
- 30 <u>(8) SPORTS ARENAS.</u>

- 1 "DEPARTMENT." THE DEPARTMENT OF HEALTH OF THE COMMONWEALTH.
- 2 "EPINEPHRINE AUTO-INJECTOR." A SINGLE-USE DEVICE USED FOR
- 3 THE AUTOMATIC INJECTION OF A PREMEASURED DOSE OF EPINEPHRINE
- 4 INTO THE HUMAN BODY.
- 5 "HEALTH CARE PRACTITIONER." AN INDIVIDUAL WHO IS AUTHORIZED
- 6 TO PRACTICE SOME COMPONENT OF THE HEALING ARTS BY A LICENSE,
- 7 PERMIT, CERTIFICATE OR REGISTRATION ISSUED BY A COMMONWEALTH
- 8 LICENSING AGENCY OR BOARD.
- 9 § 5503. EPINEPHRINE AUTO-INJECTORS FOR AUTHORIZED ENTITIES.
- 10 (A) PRESCRIBING AND DISPENSING. -- NOTWITHSTANDING ANY
- 11 PROVISION OF LAW TO THE CONTRARY, A HEALTH CARE PRACTITIONER
- 12 <u>WITH PRESCRIPTIVE AUTHORITY MAY PRESCRIBE EPINEPHRINE AUTO-</u>
- 13 <u>INJECTORS IN THE NAME OF AN AUTHORIZED ENTITY FOR USE IN</u>
- 14 ACCORDANCE WITH THIS SECTION. PHARMACISTS AND HEALTH CARE
- 15 PRACTITIONERS MAY DISPENSE EPINEPHRINE AUTO-INJECTORS PURSUANT
- 16 TO A PRESCRIPTION ISSUED IN THE NAME OF AN AUTHORIZED ENTITY.
- 17 (B) SUPPLY.--
- 18 (1) AN AUTHORIZED ENTITY MAY ACQUIRE AND STOCK A SUPPLY
- 19 OF EPINEPHRINE AUTO-INJECTORS PURSUANT TO A PRESCRIPTION
- 20 ISSUED IN ACCORDANCE WITH THIS SECTION. THE EPINEPHRINE AUTO-
- 21 INJECTORS SHALL BE STORED:
- 22 (I) IN A LOCATION READILY ACCESSIBLE IN AN
- 23 EMERGENCY; AND
- 24 (II) IN ACCORDANCE WITH:
- 25 (A) THE EPINEPHRINE AUTO-INJECTOR'S INSTRUCTIONS
- FOR USE; AND
- 27 (B) ANY ADDITIONAL REQUIREMENTS THAT MAY BE
- 28 ESTABLISHED BY THE DEPARTMENT.
- 29 (2) AN AUTHORIZED ENTITY SHALL DESIGNATE EMPLOYEES OR
- 30 AGENTS WHO HAVE COMPLETED THE TRAINING REQUIRED UNDER

- 1 SUBSECTION (D) TO BE RESPONSIBLE FOR THE STORAGE,
- 2 MAINTENANCE, CONTROL AND GENERAL OVERSIGHT OF EPINEPHRINE
- 3 AUTO-INJECTORS ACQUIRED BY THE AUTHORIZED ENTITY.
- 4 (C) USE.--AN EMPLOYEE OR AGENT OF AN AUTHORIZED ENTITY OR
- 5 OTHER INDIVIDUAL ASSOCIATED WITH THE ENTITY WHO HAS COMPLETED
- 6 THE TRAINING REQUIRED UNDER SUBSECTION (D) MAY USE EPINEPHRINE
- 7 AUTO-INJECTORS PRESCRIBED UNDER SUBSECTION (A) TO DO ANY OF THE
- 8 FOLLOWING:
- 9 <u>(1) PROVIDE AN EPINEPHRINE AUTO-INJECTOR FOR IMMEDIATE</u>
- 10 <u>ADMINISTRATION TO ANY INDIVIDUAL, OR THE PARENT, GUARDIAN OR</u>
- 11 CAREGIVER OF THE INDIVIDUAL, WHO THE EMPLOYEE, AGENT OR OTHER
- 12 <u>INDIVIDUAL ASSOCIATED WITH THE ENTITY BELIEVES, IN GOOD</u>
- 13 <u>FAITH, IS EXPERIENCING ANAPHYLAXIS, REGARDLESS OF WHETHER THE</u>
- 14 INDIVIDUAL HAS A PRESCRIPTION FOR AN EPINEPHRINE AUTO-
- 15 INJECTOR OR HAS PREVIOUSLY BEEN DIAGNOSED WITH AN ALLERGY.
- 16 (2) ADMINISTER AN EPINEPHRINE AUTO-INJECTOR TO ANY
- 17 INDIVIDUAL WHO THE EMPLOYEE, AGENT OR OTHER INDIVIDUAL
- 18 BELIEVES, IN GOOD FAITH, IS EXPERIENCING ANAPHYLAXIS,
- 19 REGARDLESS OF WHETHER THE INDIVIDUAL HAS A PRESCRIPTION FOR
- 20 AN EPINEPHRINE AUTO-INJECTOR OR HAS PREVIOUSLY BEEN DIAGNOSED
- 21 <u>WITH AN ALLERGY.</u>
- 22 <u>(D) TRAINING.--</u>
- 23 (1) AN EMPLOYEE OR AGENT OF THE AUTHORIZED ENTITY OR
- 24 OTHER INDIVIDUAL ASSOCIATED WITH THE ENTITY SHALL COMPLETE AN
- 25 <u>ANAPHYLAXIS TRAINING PROGRAM AS REQUIRED BY THE DEPARTMENT.</u>
- 26 THE TRAINING SHALL BE CONDUCTED BY A NATIONALLY RECOGNIZED
- 27 <u>ORGANIZATION EXPERIENCED IN TRAINING LAYPERSONS IN EMERGENCY</u>
- 28 HEALTH TREATMENT, A HEALTH CARE PRACTITIONER EMPLOYED OR
- 29 <u>CONTRACTED BY THE AUTHORIZED ENTITY OR AN ENTITY OR</u>
- 30 <u>INDIVIDUAL APPROVED BY THE DEPARTMENT. THE DEPARTMENT MAY</u>

1	APPROVE SPECIFIC ENTITIES OR INDIVIDUALS OR MAY APPROVE
2	CLASSES OF ENTITIES OR INDIVIDUALS TO CONDUCT THE TRAINING.
3	TRAINING MAY BE CONDUCTED ONLINE OR IN PERSON AND, AT A
4	MINIMUM, SHALL COVER:
5	(I) HOW TO RECOGNIZE SIGNS AND SYMPTOMS OF SEVERE
6	ALLERGIC REACTIONS, INCLUDING ANAPHYLAXIS;
7	(II) STANDARDS AND PROCEDURES FOR THE STORAGE AND
8	ADMINISTRATION OF AN EPINEPHRINE AUTO-INJECTOR; AND
9	(III) EMERGENCY FOLLOW-UP PROCEDURES.
10	(2) THE ENTITY OR INDIVIDUAL THAT CONDUCTS THE TRAINING
11	SHALL ISSUE A CERTIFICATE, ON A FORM DEVELOPED OR APPROVED BY
12	THE DEPARTMENT, TO EACH INDIVIDUAL WHO SUCCESSFULLY COMPLETES
13	THE ANAPHYLAXIS TRAINING PROGRAM.
14	(E) GOOD SAMARITAN PROTECTIONS
15	(1) THE FOLLOWING SHALL NOT BE LIABLE FOR ANY INJURIES
16	OR RELATED DAMAGES THAT RESULT FROM ANY ACT OR OMISSION TAKEN
17	UNDER THIS SECTION:
18	(I) AN AUTHORIZED ENTITY THAT POSSESSES AND MAKES
19	AVAILABLE EPINEPHRINE AUTO-INJECTORS AND ITS EMPLOYEES,
20	AGENTS AND OTHER INDIVIDUALS ASSOCIATED WITH THE ENTITY;
21	(II) A HEALTH CARE PRACTITIONER THAT PRESCRIBES OR
22	DISPENSES EPINEPHRINE AUTO-INJECTORS TO AN AUTHORIZED
23	ENTITY;
24	(III) A PHARMACIST OR HEALTH CARE PRACTITIONER THAT
25	DISPENSES EPINEPHRINE AUTO-INJECTORS TO AN AUTHORIZED
26	ENTITY; AND
27	(IV) AN INDIVIDUAL OR ENTITY THAT CONDUCTS THE
28	TRAINING DESCRIBED UNDER SUBSECTION (D).
29	(2) THE IMMUNITY PROVIDED UNDER PARAGRAPH (1) SHALL NOT
30	APPLY TO ACTS OR OMISSIONS CONSTITUTING INTENTIONAL

1	MISCONDUCT OR GROSS NEGLIGENCE.
2	(3) THE ADMINISTRATION OF AN EPINEPHRINE AUTO-INJECTOR
3	IN ACCORDANCE WITH THIS SECTION SHALL NOT BE CONSIDERED THE
4	PRACTICE OF MEDICINE OR ANY OTHER PROFESSION THAT OTHERWISE
5	REQUIRES LICENSURE.
6	(4) THIS SUBSECTION SHALL NOT ELIMINATE, LIMIT OR REDUCE
7	ANY OTHER IMMUNITY OR DEFENSE THAT MAY BE AVAILABLE UNDER
8	LAW, INCLUDING THAT PROVIDED UNDER 42 PA.C.S. § 8332
9	(RELATING TO EMERGENCY RESPONSE PROVIDER AND BYSTANDER GOOD
10	SAMARITAN CIVIL IMMUNITY).
11	(5) AN ENTITY LOCATED IN THIS COMMONWEALTH SHALL NOT BE
12	LIABLE FOR ANY INJURIES OR RELATED DAMAGES THAT RESULT FROM
13	THE PROVISION OR ADMINISTRATION OF AN EPINEPHRINE AUTO-
14	INJECTOR OUTSIDE OF THIS COMMONWEALTH IF THE ENTITY:
15	(I) WOULD NOT HAVE BEEN LIABLE FOR THE INJURIES OR
16	RELATED DAMAGES HAD THE PROVISION OR ADMINISTRATION
17	OCCURRED WITHIN THIS COMMONWEALTH; OR
18	(II) IS NOT LIABLE FOR THE INJURIES OR RELATED
19	DAMAGES UNDER THE LAW OF THE STATE IN WHICH THE PROVISION
20	OR ADMINISTRATION OCCURRED.
21	SECTION 2. THIS ACT SHALL TAKE EFFECT AS FOLLOWS:
22	(1) THE ADDITION OF 35 PA.C.S. CH. 54 SHALL TAKE EFFECT
23	IN SIX MONTHS.
24	(2) THIS SECTION SHALL TAKE EFFECT IMMEDIATELY.
25	(3) THE REMAINDER OF THIS ACT SHALL TAKE EFFECT IN 60

26 DAYS.