ACT #2026-561

HB533

EJILI92-2

By Representative Wilcox

RFD: Health

First Read: 03-Mar-26



Enrolled, An Act,

Relating to public health; to amend Sections 16-1-39, 16-1-48, and 22-1-16, Code of Alabama 1975, to expand the form of epinephrine approved to be carried and self-administered by students, and stocked and administered by schools, authorized entities, and certain staff members.

BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

Section 1. Sections 16-1-39, 16-1-48, and 22-1-16, Code of Alabama 1975, are amended to read as follows:

"§16-1-39

(a) Commencing with the 2007-2008 scholastic year, each local board of education and the governing body of each nonpublic school in the state shall permit the self-administration of medications by a student for chronic conditions if conducted in compliance with the State Department of Education and State Board of Nursing Medication Curriculum, as may be amended from time to time by the department and board. Approved medications may be self-administered if the parent or legal guardian of the student provides all of the information outlined in the medication curriculum, including, but not limited to, all of the following:

(1) Written and signed authorization for the self-administration to the chief executive officer of the school.

(2) Written and signed ~~acknowledgement~~ acknowledgment that the school shall incur no liability and that the parent

or legal guardian shall indemnify and hold harmless the school and the employees and agents of the school against any claims that may arise relating to the self-administration of approved medications.

(3) Written medical authorization that includes all of the following:

a. The signature of the attending physician, or his or her authorized agent.

b. Confirmation that the student has been instructed in the proper self-administration of the approved medication.

c. The name, purpose, and prescribed dosage of the medications to be self-administered.

d. The frequency with which the prescribed medications are to be administered.

e. Any special instructions or circumstances under which the medications should be administered.

f. The length of time for which the medications are prescribed.

(b) All documents provided to a school pursuant to subsection (a) shall be kept on file in the office of the school nurse or chief executive officer of the school.

(c) The local board of education or the governing body of the nonpublic school shall incur no liability and is immune from any liability exposure created by this section.

(d) Permission for the self-administration of approved medications shall only be effective for the school year in which permission is granted. Permission for self-administration of approved medications may be granted in

subsequent years provided all requirements of this section are satisfied.

(e) Upon obtaining permission to self-administer approved medications pursuant to this section, a student shall be permitted to possess and self-administer approved medications, according to the orders of the prescriber, at any time while on school property or while attending a school-sponsored event.

(f) Nothing in this section shall be interpreted as permitting a student to possess a controlled substance, as defined in the medication curriculum, on school property.

(g) ~~Single dose autoinjectable~~ An epinephrine delivery system, as defined in ~~subsection (c) of~~ Section 16-1-48(c), is an approved medication for purposes of subsection (a) that may be carried on the person of and self-administered by a student."

"§16-1-48

(a) The State Department of Education shall develop an anaphylaxis preparedness program to be adopted by each local board of education and implemented in each K-12 public school commencing with the 2015-2016 scholastic year. The Alabama State Board of Pharmacy shall provide guidance, direction, and advice to the State Department of Education in developing and administering the anaphylaxis preparedness program.

(b) The anaphylaxis preparedness program shall incorporate the following three levels of prevention initiated by licensed public school nurses as a part of the health services program:

(1) Level I, primary prevention: Education programs that address food allergies and anaphylaxis through both classroom and individual instruction for staff and students.

(2) Level II, secondary prevention: Identification and management of chronic illness.

(3) Level III, tertiary prevention: The development of a planned response to anaphylaxis-related emergencies in the school setting.

(c) Each local board of education may collaborate with a physician to develop and maintain a protocol for emergency response that shall include a supply of ~~premeasured, single dose autoinjectable~~ epinephrine delivery systems on each public school campus to treat potentially life threatening allergic reactions. ~~Single dose autoinjectable~~ An epinephrine delivery system consists of a single use device ~~used for automatic injection of~~ that is approved by the federal Food and Drug Administration, that contains a premeasured dose of epinephrine, and that is used to administer epinephrine into the human body ~~or another epinephrine system approved by the federal Food and Drug Administration for public use~~ to prevent or treat a life-threatening allergic reaction. ~~Single dose autoinjectable epinephrine~~ Epinephrine delivery systems may be self-administered at school by a student pursuant to Section 16-1-39 or may be administered or provided to school children by the school nurse, or unlicensed school personnel who have completed an anaphylaxis training program conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment or other medication

administration program approved by the State Department of Education and State Board of Nursing. Training may be conducted online or in person and, at a minimum, shall cover each 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 ~~single dose autoinjectable~~ epinephrine delivery systems.

(3) Emergency follow-up procedures.

(d) A school that possesses and makes available ~~single dose autoinjectable~~ epinephrine delivery systems and its employees, agents, and other trained personnel, and any person who conducts the training described in subsection (c), shall be immune from suit and not liable for any civil damages resulting from any acts or omissions in the supervision or rendering of services, care, or assistance to a student under this section, nor for any civil damages resulting from any act, or failure to act, to provide or arrange for further treatment, care, or assistance. No information or protocols produced related to this section shall be construed to establish a standard of care for physicians or otherwise modify, amend, or supersede any provision of the Alabama Medical Liability Act of 1996, commencing with Section 6-5-540, or any amendment thereto, or any judicial interpretation thereof. Any provision of law to the contrary notwithstanding, a physician who is consulted or participates in regard to anaphylaxis-related emergencies, or develops,

maintains, or is otherwise associated with, a protocol under this section, or takes any other action associated with, or related to, this section, is immune from all civil and criminal liability for any such acts.

(e) The requirement that a supply of ~~premeasured, single dose autoinjectable~~ epinephrine delivery systems be secured and maintained on each public school campus shall only be enforced if funding is provided by the state."

"§22-1-16

(a) As used in this section, the following words ~~shall~~ have the following meanings:

(1) ADMINISTER. The direct application of an epinephrine ~~auto-injector~~ delivery system to the body of an individual.

(2) AUTHORIZED ENTITY. Any entity or organization other than a K-12 public school subject to Section 16-1-48, in connection with or at which allergens capable of causing anaphylaxis may be present, including, but not limited to, recreation camps, colleges and universities, day care facilities, youth sport leagues, amusement parks, restaurants, places of employment, and sports arenas.

(3) EPINEPHRINE ~~AUTO-INJECTOR~~ DELIVERY SYSTEM. A single-use device that is approved by the federal Food and Drug Administration, that contains ~~used for the automatic injection of~~ a premeasured dose of epinephrine, and that is used to administer epinephrine into the human body to prevent or treat a life-threatening allergic reaction.

(4) MEDICAL PRACTITIONER. A physician or other

individual licensed under Title 34 authorized to treat, use, or prescribe medicine and drugs for sick and injured humans in this state.

(5) PROVIDE. The supply of one or more epinephrine ~~auto-injectors~~ delivery systems to an individual. As used in this section, the term should not be construed to include any managerial authority on behalf of the medical practitioner.

(b) A medical practitioner may prescribe epinephrine ~~auto-injectors~~ delivery systems in the name of an authorized entity for use in accordance with this section, and pharmacists and medical providers may dispense epinephrine ~~auto-injectors~~ delivery systems pursuant to a prescription issued in the name of any authorized entity. A prescription issued pursuant to this section shall be valid for two years.

(c) An authorized entity may acquire and stock a supply of epinephrine ~~auto-injectors~~ delivery systems pursuant to a prescription issued in accordance with this section. Epinephrine ~~auto-injectors~~ delivery systems shall be stored in a location readily accessible in an emergency and in accordance with the epinephrine ~~auto-injector's~~ delivery system's instructions for use and any additional requirements that may be established by the State ~~Board~~ Committee of Public Health. An authorized entity shall designate employees or agents who have completed training required by this section to be responsible for the storage, maintenance, control, and general oversight of epinephrine ~~auto-injectors~~ delivery systems acquired by the authorized entity.

(d) An employee or agent of an authorized entity, or

other individual who has completed the training required by this section, may use epinephrine ~~auto-injectors~~ delivery systems prescribed pursuant to this section to do either of the following:

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

(2) Administer an epinephrine ~~auto-injector~~ delivery system 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~~ delivery system or has previously been diagnosed with an allergy.

(e) An employee, agent, or other individual described in subsection (c) or (d) shall complete an initial anaphylaxis training program and shall complete subsequent training programs at least every two years thereafter. Training shall be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment or an entity or individual approved by the Department of Public Health. The Department of Public Health may approve specific entities or individuals or may approve classes of entities or individuals to conduct training. The entity that conducts the training shall issue a certificate,

on a form developed by the Department of Public Health, to each individual who successfully completes the anaphylaxis training program. Training may be conducted online or in person and, at a minimum, shall cover all of the following:

(1) How to recognize signs and symptoms of severe allergic reactions, including anaphylaxis.

(2) Standards and procedures for the storage and administration of an epinephrine ~~auto-injector~~ delivery system.

(3) Emergency follow-up procedures.

(f) The following persons shall not be liable for any injuries or related damages that result from any act or omission taken pursuant to this section~~:~~, provided~~, however,~~ this immunity does not apply to an act or omission constituting willful or wanton conduct:

(1) An authorized entity that possesses and makes available epinephrine ~~auto-injectors~~ delivery systems and its employees, agents, and other individuals.

(2) An individual or entity that conducts the training described in this section, but only to the extent the injuries or related damages arise from the training conducted by the individual or entity. Notwithstanding subsection (g), a health care provider who or which administers an epinephrine ~~auto-injector~~ delivery system shall be subject to and afforded the protections provided by the Alabama Medical Liability Act, Sections 6-5-480 to 6-5-488, inclusive, and Sections 6-5-540 to 6-5-552, inclusive, and any amendments thereto. The immunity provided in this subsection does not affect a

manufacturer's liability regarding the design, manufacture, instructions regarding the use of, or training regarding the use of, an epinephrine ~~auto-injector~~ delivery system.

(g) All of the following individuals are immune from any civil or criminal liability for actions authorized under this section:

(1) A physician who prescribes or dispenses an epinephrine ~~auto-injector~~ delivery system pursuant to this section, or who is consulted pursuant to this section, and who has no managerial authority over the individual administering the epinephrine ~~auto-injector~~ delivery system.

(2) A pharmacist who dispenses an epinephrine ~~auto-injector pursuant~~ delivery system to this section and who has no managerial authority over the individual administering the epinephrine ~~auto-injector~~ delivery system.

(h) The administration of an epinephrine ~~auto-injector~~ delivery system in accordance with this section is not the practice of medicine, except for licensed health care professionals, nor is it the practice of another profession that otherwise requires licensure. This section does not alter or replace any other immunity or defense that may be available under state law.

(i)(1) An authorized entity that possesses and makes available epinephrine ~~auto-injectors~~ delivery systems shall submit to the Department of Public Health, on a form developed by the Department of Public Health, a report of each incident on the authorized entity's premises that involves the administration of an epinephrine ~~auto-injector~~ delivery system

pursuant to subsection (c). The Department of Public Health shall annually publish a report that summarizes and analyzes all reports submitted to it under this subsection.

(2) The State ~~Board~~ Committee of Public Health may adopt rules necessary to carry out the intent of this section."

Section 2. This act shall become effective on October 1, 2026.

Speaker of the House of Representatives

President and Presiding Officer of the Senate

House of Representatives

I hereby certify that the within Act originated in and was passed by the House 17-Mar-26.

John Treadwell
Clerk

Senate 08-Apr-26 Passed

APPROVED 4-16-2026

TIME 10:00 am

Kay Ivey
GOVERNOR

Alabama Secretary Of State

Act Num....: 2026-561
Bill Num...: H-533

Recv'd 04/16/26 12:21pmKCW

ORIGINAL
House Bill No. 533
Project No. EJILI92-1
Prefile Date

SPONSOR
1 [signature] DIST. NO. 104

CO-SPONSORS

2 [signature]	28
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HOUSE ACTION

DATE: 3-3 2026
RD 1 RFD Health

REPORT OF STANDING COMMITTEE
This bill having been referred by the House to its standing committee on Health was acted upon by such committee in session, and returned therefrom to the House with the recommendation that it be Passed, w/amend(s)____ w/sub____
this 11th day of March, 2026.
[signature], Chair

DATE: 3-11 2026
RF RD 2 CAL

DATE: 20___
RE-REFERRED ☐ RE-COMMITTED ☐
Committee____

DATE: 20___
RE-REFERRED ☐ RE-COMMITTED ☐
Committee____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, HB 533.
YEAS 105 NAYS 0
JOHN TREADWELL, Clerk

FURTHER HOUSE ACTION (OVER)

SENATE ACTION

DATE: 3-31 2026
RD 1 RFD HEALTH.

This Bill was referred to the Standing Committee of the Senate on Healthcare and was acted upon by such Committee in session and is by order of the Committee returned therefrom with a favorable report w/amd(s)____ w/sub____ w/eng sub____ by a vote of yeas 9 nays 0 abstain____ this 1st day of April 20 26
[signature], Chair

DATE: 4-1 2026
RF [signature] RD2 ☐ CAL ☐

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, HB____.
YEAS____ NAYS____
PATRICK HARRIS, Secretary

DATE: 4-8-26 RD 3 at length
PASSED ☑ PASSED AS AMENDED ☐
YEAS 30 NAYS 0
And was ordered returned forthwith to the House
PATRICK HARRIS, Secretary

DATE: 20___
INDEFINITELY POSTPONED YEAS NAYS

DATE: 20___
RECONSIDERED YEAS NAYS

FURTHER SENATE ACTION (OVER)