

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois State Police Act is amended by
5 changing Section 40 as follows:

6 (20 ILCS 2610/40)

7 Sec. 40. Administration of epinephrine.

8 (a) This Section, along with Section 10.19 of the Illinois
9 Police Training Act, may be referred to as the Annie LeGere
10 Law.

11 (b) For the purposes of this Section, "epinephrine
12 delivery system" ~~"epinephrine auto-injector"~~ means a
13 single-use device used for the automatic injection of a
14 pre-measured dose of epinephrine into the human body
15 prescribed in the name of the Illinois State Police.

16 (c) The Illinois State Police may conduct or approve a
17 training program for State Police officers to recognize and
18 respond to anaphylaxis, including, but not limited to:

19 (1) how to recognize symptoms of an allergic reaction;

20 (2) how to respond to an emergency involving an
21 allergic reaction;

22 (3) how to administer an epinephrine delivery system
23 ~~epinephrine auto-injector~~;

1 (4) how to respond to an individual with a known
2 allergy as well as an individual with a previously unknown
3 allergy;

4 (5) a test demonstrating competency of the knowledge
5 required to recognize anaphylaxis and administer an
6 epinephrine delivery system ~~epinephrine auto injector~~; and

7 (6) other criteria as determined in rules adopted by
8 the Illinois State Police.

9 (d) The Illinois State Police may authorize a State Police
10 officer who has completed the training program under
11 subsection (c) to carry, administer, or assist with the
12 administration of epinephrine delivery systems ~~epinephrine~~
13 ~~auto injectors~~ whenever he or she is performing official
14 duties.

15 (e) The Illinois State Police must establish a written
16 policy to control the acquisition, storage, transportation,
17 administration, and disposal of epinephrine delivery systems
18 ~~epinephrine auto injectors~~ before it allows any State Police
19 officer to carry and administer epinephrine delivery systems
20 ~~epinephrine auto injectors~~.

21 (f) A physician, physician assistant with prescriptive
22 authority, or advanced practice registered nurse with
23 prescriptive authority may provide a standing protocol or
24 prescription for epinephrine delivery systems ~~epinephrine~~
25 ~~auto injectors~~ in the name of the Illinois State Police to be
26 maintained for use when necessary.

1 (g) When a State Police officer administers an epinephrine
2 delivery system ~~epinephrine auto-injector~~ in good faith, the
3 officer and the Illinois State Police, and its employees and
4 agents, including a physician, physician assistant with
5 prescriptive authority, or advanced practice registered nurse
6 with prescriptive authority who provides a standing order or
7 prescription for an epinephrine delivery system ~~epinephrine~~
8 ~~auto-injector~~, incur no civil or professional liability,
9 except for willful and wanton conduct, as a result of any
10 injury or death arising from the use of an epinephrine
11 delivery system ~~epinephrine auto-injector~~.

12 (Source: P.A. 104-24, eff. 1-1-26.)

13 Section 10. The Illinois Police Training Act is amended by
14 changing Section 10.19 as follows:

15 (50 ILCS 705/10.19)

16 Sec. 10.19. Training; administration of epinephrine.

17 (a) This Section, along with Section 40 of the Illinois
18 State Police Act, may be referred to as the Annie LeGere Law.

19 (b) For purposes of this Section, "epinephrine delivery
20 system" ~~"epinephrine auto-injector"~~ means a single-use device
21 used for the automatic injection of a pre-measured dose of
22 epinephrine into the human body prescribed in the name of a
23 local law enforcement agency.

24 (c) The Board shall conduct or approve an optional

1 advanced training program for law enforcement officers to
2 recognize and respond to anaphylaxis, including the
3 administration of an epinephrine delivery system ~~epinephrine~~
4 ~~auto-injector~~. The training must include, but is not limited
5 to:

6 (1) how to recognize symptoms of an allergic reaction;

7 (2) how to respond to an emergency involving an
8 allergic reaction;

9 (3) how to administer an epinephrine delivery system
10 ~~epinephrine auto-injector~~;

11 (4) how to respond to an individual with a known
12 allergy as well as an individual with a previously unknown
13 allergy;

14 (5) a test demonstrating competency of the knowledge
15 required to recognize anaphylaxis and administer an
16 epinephrine delivery system ~~epinephrine auto-injector~~; and

17 (6) other criteria as determined in rules adopted by
18 the Board.

19 (d) A local law enforcement agency may authorize a law
20 enforcement officer who has completed an optional advanced
21 training program under subsection (c) to carry, administer, or
22 assist with the administration of epinephrine delivery systems
23 ~~epinephrine auto-injectors~~ provided by the local law
24 enforcement agency whenever the officer is performing official
25 duties.

26 (e) A local law enforcement agency that authorizes its

1 officers to carry and administer epinephrine delivery systems
2 ~~epinephrine auto-injectors~~ under subsection (d) must establish
3 a policy to control the acquisition, storage, transportation,
4 administration, and disposal of epinephrine delivery systems
5 ~~epinephrine auto-injectors~~ and to provide continued training
6 in the administration of epinephrine delivery systems
7 ~~epinephrine auto-injectors~~.

8 (f) A physician, physician assistant with prescriptive
9 authority, or advanced practice registered nurse with
10 prescriptive authority may provide a standing protocol or
11 prescription for epinephrine delivery systems ~~epinephrine~~
12 ~~auto-injectors~~ in the name of a local law enforcement agency
13 to be maintained for use when necessary.

14 (g) When a law enforcement officer administers an
15 epinephrine delivery system ~~epinephrine auto-injector~~ in good
16 faith, the law enforcement officer and local law enforcement
17 agency, and its employees and agents, including a physician,
18 physician assistant with prescriptive authority, or advanced
19 practice registered nurse with prescriptive authority who
20 provides a standing order or prescription for an epinephrine
21 delivery system ~~epinephrine auto-injector~~, incur no civil or
22 professional liability, except for willful and wanton conduct,
23 or as a result of any injury or death arising from the use of
24 an epinephrine delivery system ~~epinephrine auto-injector~~.

25 (Source: P.A. 102-538, eff. 8-20-21; 102-694, eff. 1-7-22;
26 103-154, eff. 6-30-23.)

1 Section 15. The School Code is amended by changing Section
2 22-30 as follows:

3 (105 ILCS 5/22-30)

4 Sec. 22-30. Self-administration and self-carry of asthma
5 medication and epinephrine delivery systems ~~injectors~~;
6 administration of undesignated epinephrine delivery systems
7 ~~injectors~~; administration of an opioid antagonist;
8 administration of undesignated asthma medication; supply of
9 undesignated oxygen tanks; asthma episode emergency response
10 protocol.

11 (a) For the purpose of this Section only, the following
12 terms shall have the meanings set forth below:

13 "Asthma action plan" means a written plan developed with a
14 pupil's medical provider to help control the pupil's asthma.
15 The goal of an asthma action plan is to reduce or prevent
16 flare-ups and emergency department visits through day-to-day
17 management and to serve as a student-specific document to be
18 referenced in the event of an asthma episode.

19 "Asthma episode emergency response protocol" means a
20 procedure to provide assistance to a pupil experiencing
21 symptoms of wheezing, coughing, shortness of breath, chest
22 tightness, or breathing difficulty.

23 "Epinephrine delivery system" means any form of
24 epinephrine that is approved by the United States Food and

1 Drug Administration, including any device that contains a dose
2 of epinephrine, and that is used to administer epinephrine
3 into the human body to prevent or treat a life-threatening
4 allergic reaction injector" includes an auto injector approved
5 by the United States Food and Drug Administration for the
6 administration of epinephrine and a pre filled syringe
7 approved by the United States Food and Drug Administration and
8 used for the administration of epinephrine that contains a
9 pre measured dose of epinephrine that is equivalent to the
10 dosages used in an auto injector.

11 "Asthma medication" means quick-relief asthma medication,
12 including albuterol or other short-acting bronchodilators,
13 that is approved by the United States Food and Drug
14 Administration for the treatment of respiratory distress.

15 "Asthma medication" includes medication delivered through a
16 device, including a metered dose inhaler with a reusable or
17 disposable spacer or a nebulizer with a mouthpiece or mask.

18 "Opioid antagonist" means a drug that binds to opioid
19 receptors and blocks or inhibits the effect of opioids acting
20 on those receptors, including, but not limited to, naloxone
21 hydrochloride or any other similarly acting drug approved by
22 the U.S. Food and Drug Administration.

23 "Respiratory distress" means the perceived or actual
24 presence of wheezing, coughing, shortness of breath, chest
25 tightness, breathing difficulty, or any other symptoms
26 consistent with asthma. Respiratory distress may be

1 categorized as "mild-to-moderate" or "severe".

2 "School nurse" means a registered nurse working in a
3 school with or without licensure endorsed in school nursing.

4 "Self-administration" means a pupil's discretionary use of
5 his or her prescribed asthma medication or epinephrine
6 delivery system injector.

7 "Self-carry" means a pupil's ability to carry his or her
8 prescribed asthma medication or epinephrine delivery system
9 injector.

10 "Standing protocol" may be issued by (i) a physician
11 licensed to practice medicine in all its branches, (ii) a
12 licensed physician assistant with prescriptive authority, or
13 (iii) a licensed advanced practice registered nurse with
14 prescriptive authority.

15 "Trained personnel" means any school employee or volunteer
16 personnel authorized in Sections 10-22.34, 10-22.34a, and
17 10-22.34b of this Code who has completed training under
18 subsection (g) of this Section to recognize and respond to
19 anaphylaxis, an opioid overdose, or respiratory distress.

20 "Undesignated asthma medication" means asthma medication
21 prescribed in the name of a school district, public school,
22 charter school, or nonpublic school.

23 "Undesignated epinephrine delivery system injector" means
24 an epinephrine delivery system injector prescribed in the name
25 of a school district, public school, charter school, or
26 nonpublic school.

1 (b) A school, whether public, charter, or nonpublic, must
2 permit the self-administration and self-carry of asthma
3 medication by a pupil with asthma or the self-administration
4 and self-carry of an epinephrine delivery system ~~injector~~ by a
5 pupil, provided that:

6 (1) the parents or guardians of the pupil provide to
7 the school (i) written authorization from the parents or
8 guardians for (A) the self-administration and self-carry
9 of asthma medication or (B) the self-carry of asthma
10 medication or (ii) for (A) the self-administration and
11 self-carry of an epinephrine delivery system ~~injector~~ or
12 (B) the self-carry of an epinephrine delivery system
13 ~~injector~~, written authorization from the pupil's
14 physician, physician assistant, or advanced practice
15 registered nurse; and

16 (2) the parents or guardians of the pupil provide to
17 the school (i) the prescription label, which must contain
18 the name of the asthma medication, the prescribed dosage,
19 and the time at which or circumstances under which the
20 asthma medication is to be administered, or (ii) for the
21 self-administration or self-carry of an epinephrine
22 delivery system ~~injector~~, a written statement from the
23 pupil's physician, physician assistant, or advanced
24 practice registered nurse containing the following
25 information:

26 (A) the name and purpose of the epinephrine

1 delivery system injector;

2 (B) the prescribed dosage; and

3 (C) the time or times at which or the special
4 circumstances under which the epinephrine delivery
5 system injector is to be administered.

6 The information provided shall be kept on file in the office of
7 the school nurse or, in the absence of a school nurse, the
8 school's administrator.

9 (b-5) A school district, public school, charter school, or
10 nonpublic school may authorize the provision of a
11 student-specific or undesignated epinephrine delivery system
12 ~~injector~~ to a student or any personnel authorized under a
13 student's Individual Health Care Action Plan, allergy
14 emergency action plan, or plan pursuant to Section 504 of the
15 federal Rehabilitation Act of 1973 to administer an
16 epinephrine delivery system ~~injector~~ to the student, that
17 meets the student's prescription on file.

18 (b-10) The school district, public school, charter school,
19 or nonpublic school may authorize a school nurse or trained
20 personnel to do the following: (i) provide an undesignated
21 epinephrine delivery system ~~injector~~ to a student for
22 self-administration only or any personnel authorized under a
23 student's Individual Health Care Action Plan, allergy
24 emergency action plan, plan pursuant to Section 504 of the
25 federal Rehabilitation Act of 1973, or individualized
26 education program plan to administer to the student that meets

1 the student's prescription on file; (ii) administer an
2 undesignated epinephrine delivery system ~~injector~~ that meets
3 the prescription on file to any student who has an Individual
4 Health Care Action Plan, allergy emergency action plan, plan
5 pursuant to Section 504 of the federal Rehabilitation Act of
6 1973, or individualized education program plan that authorizes
7 the use of an epinephrine delivery system ~~injector~~; (iii)
8 administer an undesignated epinephrine delivery system
9 ~~injector~~ to any person that the school nurse or trained
10 personnel in good faith believes is having an anaphylactic
11 reaction; (iv) administer an opioid antagonist to any person
12 that the school nurse or trained personnel in good faith
13 believes is having an opioid overdose; (v) provide
14 undesignated asthma medication to a student for
15 self-administration only or to any personnel authorized under
16 a student's Individual Health Care Action Plan or asthma
17 action plan, plan pursuant to Section 504 of the federal
18 Rehabilitation Act of 1973, or individualized education
19 program plan to administer to the student that meets the
20 student's prescription on file; (vi) administer undesignated
21 asthma medication that meets the prescription on file to any
22 student who has an Individual Health Care Action Plan or
23 asthma action plan, plan pursuant to Section 504 of the
24 federal Rehabilitation Act of 1973, or individualized
25 education program plan that authorizes the use of asthma
26 medication; and (vii) administer undesignated asthma

1 medication to any person that the school nurse or trained
2 personnel believes in good faith is having respiratory
3 distress.

4 (c) The school district, public school, charter school, or
5 nonpublic school must inform the parents or guardians of the
6 pupil, in writing, that the school district, public school,
7 charter school, or nonpublic school and its employees and
8 agents, including a physician, physician assistant, or
9 advanced practice registered nurse providing standing protocol
10 and a prescription for school epinephrine delivery systems
11 ~~injectors~~, an opioid antagonist, or undesignated asthma
12 medication, are to incur no liability or professional
13 discipline, except for willful and wanton conduct, as a result
14 of any injury arising from the administration of asthma
15 medication, an epinephrine delivery system ~~injector~~, or an
16 opioid antagonist regardless of whether authorization was
17 given by the pupil's parents or guardians or by the pupil's
18 physician, physician assistant, or advanced practice
19 registered nurse. The parents or guardians of the pupil must
20 sign a statement acknowledging that the school district,
21 public school, charter school, or nonpublic school and its
22 employees and agents are to incur no liability, except for
23 willful and wanton conduct, as a result of any injury arising
24 from the administration of asthma medication, an epinephrine
25 delivery system ~~injector~~, or an opioid antagonist regardless
26 of whether authorization was given by the pupil's parents or

1 guardians or by the pupil's physician, physician assistant, or
2 advanced practice registered nurse and that the parents or
3 guardians must indemnify and hold harmless the school
4 district, public school, charter school, or nonpublic school
5 and its employees and agents against any claims, except a
6 claim based on willful and wanton conduct, arising out of the
7 administration of asthma medication, an epinephrine delivery
8 system injector, or an opioid antagonist regardless of whether
9 authorization was given by the pupil's parents or guardians or
10 by the pupil's physician, physician assistant, or advanced
11 practice registered nurse.

12 (c-5) When a school nurse or trained personnel administers
13 an undesignated epinephrine delivery system injector to a
14 person whom the school nurse or trained personnel in good
15 faith believes is having an anaphylactic reaction, administers
16 an opioid antagonist to a person whom the school nurse or
17 trained personnel in good faith believes is having an opioid
18 overdose, or administers undesignated asthma medication to a
19 person whom the school nurse or trained personnel in good
20 faith believes is having respiratory distress, notwithstanding
21 the lack of notice to the parents or guardians of the pupil or
22 the absence of the parents or guardians signed statement
23 acknowledging no liability, except for willful and wanton
24 conduct, the school district, public school, charter school,
25 or nonpublic school and its employees and agents, and a
26 physician, a physician assistant, or an advanced practice

1 registered nurse providing standing protocol and a
2 prescription for undesignated epinephrine delivery systems
3 ~~injectors~~, an opioid antagonist, or undesignated asthma
4 medication, are to incur no liability or professional
5 discipline, except for willful and wanton conduct, as a result
6 of any injury arising from the use of an undesignated
7 epinephrine delivery system ~~injector~~, the use of an opioid
8 antagonist, or the use of undesignated asthma medication,
9 regardless of whether authorization was given by the pupil's
10 parents or guardians or by the pupil's physician, physician
11 assistant, or advanced practice registered nurse.

12 (d) The permission for self-administration and self-carry
13 of asthma medication or the self-administration and self-carry
14 of an epinephrine delivery system ~~injector~~ is effective for
15 the school year for which it is granted and shall be renewed
16 each subsequent school year upon fulfillment of the
17 requirements of this Section.

18 (e) Provided that the requirements of this Section are
19 fulfilled, a pupil with asthma may self-administer and
20 self-carry his or her asthma medication or a pupil may
21 self-administer and self-carry an epinephrine delivery system
22 ~~injector~~ (i) while in school, (ii) while at a school-sponsored
23 activity, (iii) while under the supervision of school
24 personnel, or (iv) before or after normal school activities,
25 such as while in before-school or after-school care on
26 school-operated property or while being transported on a

1 school bus.

2 (e-5) Provided that the requirements of this Section are
3 fulfilled, a school nurse or trained personnel may administer
4 an undesignated epinephrine delivery system ~~injector~~ to any
5 person whom the school nurse or trained personnel in good
6 faith believes to be having an anaphylactic reaction (i) while
7 in school, (ii) while at a school-sponsored activity, (iii)
8 while under the supervision of school personnel, or (iv)
9 before or after normal school activities, such as while in
10 before-school or after-school care on school-operated property
11 or while being transported on a school bus. A school nurse or
12 trained personnel may carry undesignated epinephrine delivery
13 systems ~~injectors~~ on his or her person while in school or at a
14 school-sponsored activity.

15 (e-10) Provided that the requirements of this Section are
16 fulfilled, a school nurse or trained personnel may administer
17 an opioid antagonist to any person whom the school nurse or
18 trained personnel in good faith believes to be having an
19 opioid overdose (i) while in school, (ii) while at a
20 school-sponsored activity, (iii) while under the supervision
21 of school personnel, or (iv) before or after normal school
22 activities, such as while in before-school or after-school
23 care on school-operated property. A school nurse or trained
24 personnel may carry an opioid antagonist on his or her person
25 while in school or at a school-sponsored activity.

26 (e-15) If the requirements of this Section are met, a

1 school nurse or trained personnel may administer undesignated
2 asthma medication to any person whom the school nurse or
3 trained personnel in good faith believes to be experiencing
4 respiratory distress (i) while in school, (ii) while at a
5 school-sponsored activity, (iii) while under the supervision
6 of school personnel, or (iv) before or after normal school
7 activities, including before-school or after-school care on
8 school-operated property. A school nurse or trained personnel
9 may carry undesignated asthma medication on his or her person
10 while in school or at a school-sponsored activity.

11 (f) The school district, public school, charter school, or
12 nonpublic school may maintain a supply of undesignated
13 epinephrine delivery systems ~~injectors~~ in any secure location
14 that is accessible before, during, and after school where an
15 allergic person is most at risk, including, but not limited
16 to, classrooms and lunchrooms. A physician, a physician
17 assistant who has prescriptive authority in accordance with
18 Section 7.5 of the Physician Assistant Practice Act of 1987,
19 or an advanced practice registered nurse who has prescriptive
20 authority in accordance with Section 65-40 of the Nurse
21 Practice Act may prescribe undesignated epinephrine delivery
22 systems ~~injectors~~ in the name of the school district, public
23 school, charter school, or nonpublic school to be maintained
24 for use when necessary. Any supply of epinephrine delivery
25 systems ~~injectors~~ shall be maintained in accordance with the
26 manufacturer's instructions.

1 The school district, public school, charter school, or
2 nonpublic school shall maintain a supply of an opioid
3 antagonist in any secure location where an individual may have
4 an opioid overdose, unless there is a shortage of opioid
5 antagonists, in which case the school district, public school,
6 charter school, or nonpublic school shall make a reasonable
7 effort to maintain a supply of an opioid antagonist. Unless
8 the school district, public school, charter school, or
9 nonpublic school is able to obtain opioid antagonists without
10 a prescription, a health care professional who has been
11 delegated prescriptive authority for opioid antagonists in
12 accordance with Section 5-23 of the Substance Use Disorder Act
13 shall prescribe opioid antagonists in the name of the school
14 district, public school, charter school, or nonpublic school,
15 to be maintained for use when necessary. Any supply of opioid
16 antagonists shall be maintained in accordance with the
17 manufacturer's instructions.

18 The school district, public school, charter school, or
19 nonpublic school may maintain a supply of asthma medication in
20 any secure location that is accessible before, during, or
21 after school where a person is most at risk, including, but not
22 limited to, a classroom or the nurse's office. A physician, a
23 physician assistant who has prescriptive authority under
24 Section 7.5 of the Physician Assistant Practice Act of 1987,
25 or an advanced practice registered nurse who has prescriptive
26 authority under Section 65-40 of the Nurse Practice Act may

1 prescribe undesignated asthma medication in the name of the
2 school district, public school, charter school, or nonpublic
3 school to be maintained for use when necessary. Any supply of
4 undesignated asthma medication must be maintained in
5 accordance with the manufacturer's instructions.

6 A school district that provides special educational
7 facilities for children with disabilities under Section
8 14-4.01 of this Code may maintain a supply of undesignated
9 oxygen tanks in any secure location that is accessible before,
10 during, and after school where a person with developmental
11 disabilities is most at risk, including, but not limited to,
12 classrooms and lunchrooms. A physician, a physician assistant
13 who has prescriptive authority in accordance with Section 7.5
14 of the Physician Assistant Practice Act of 1987, or an
15 advanced practice registered nurse who has prescriptive
16 authority in accordance with Section 65-40 of the Nurse
17 Practice Act may prescribe undesignated oxygen tanks in the
18 name of the school district that provides special educational
19 facilities for children with disabilities under Section
20 14-4.01 of this Code to be maintained for use when necessary.
21 Any supply of oxygen tanks shall be maintained in accordance
22 with the manufacturer's instructions and with the local fire
23 department's rules.

24 (f-3) Whichever entity initiates the process of obtaining
25 undesignated epinephrine delivery systems ~~injectors~~ and
26 providing training to personnel for carrying and administering

1 undesignated epinephrine delivery systems ~~injectors~~ shall pay
2 for the costs of the undesignated epinephrine delivery systems
3 ~~injectors~~.

4 (f-5) Upon any administration of an epinephrine delivery
5 system ~~injector~~, a school district, public school, charter
6 school, or nonpublic school must immediately activate the EMS
7 system and notify the student's parent, guardian, or emergency
8 contact, if known.

9 Upon any administration of an opioid antagonist, a school
10 district, public school, charter school, or nonpublic school
11 must immediately activate the EMS system and notify the
12 student's parent, guardian, or emergency contact, if known.

13 (f-10) Within 24 hours of the administration of an
14 undesignated epinephrine delivery system ~~injector~~, a school
15 district, public school, charter school, or nonpublic school
16 must notify the physician, physician assistant, or advanced
17 practice registered nurse who provided the standing protocol
18 and a prescription for the undesignated epinephrine delivery
19 system ~~injector~~ of its use.

20 Within 24 hours after the administration of an opioid
21 antagonist, a school district, public school, charter school,
22 or nonpublic school must notify the health care professional
23 who provided the prescription for the opioid antagonist of its
24 use.

25 Within 24 hours after the administration of undesignated
26 asthma medication, a school district, public school, charter

1 school, or nonpublic school must notify the student's parent
2 or guardian or emergency contact, if known, and the physician,
3 physician assistant, or advanced practice registered nurse who
4 provided the standing protocol and a prescription for the
5 undesignated asthma medication of its use. The district or
6 school must follow up with the school nurse, if available, and
7 may, with the consent of the child's parent or guardian,
8 notify the child's health care provider of record, as
9 determined under this Section, of its use.

10 (g) Prior to the administration of an undesignated
11 epinephrine delivery system ~~injector~~, trained personnel must
12 submit to the school's administration proof of completion of a
13 training curriculum to recognize and respond to anaphylaxis
14 that meets the requirements of subsection (h) of this Section.
15 Training must be completed annually. The school district,
16 public school, charter school, or nonpublic school must
17 maintain records related to the training curriculum and
18 trained personnel.

19 Prior to the administration of an opioid antagonist,
20 trained personnel must submit to the school's administration
21 proof of completion of a training curriculum to recognize and
22 respond to an opioid overdose, which curriculum must meet the
23 requirements of subsection (h-5) of this Section. The school
24 district, public school, charter school, or nonpublic school
25 must maintain records relating to the training curriculum and
26 the trained personnel.

1 Prior to the administration of undesignated asthma
2 medication, trained personnel must submit to the school's
3 administration proof of completion of a training curriculum to
4 recognize and respond to respiratory distress, which must meet
5 the requirements of subsection (h-10) of this Section.
6 Training must be completed annually, and the school district,
7 public school, charter school, or nonpublic school must
8 maintain records relating to the training curriculum and the
9 trained personnel.

10 (h) A training curriculum to recognize and respond to
11 anaphylaxis, including the administration of an undesignated
12 epinephrine delivery system ~~injector~~, may be conducted online
13 or in person.

14 Training shall include, but is not limited to:

15 (1) how to recognize signs and symptoms of an allergic
16 reaction, including anaphylaxis;

17 (2) how to administer an epinephrine delivery system
18 ~~injector~~; and

19 (3) a test demonstrating competency of the knowledge
20 required to recognize anaphylaxis and administer an
21 epinephrine delivery system ~~injector~~.

22 Training may also include, but is not limited to:

23 (A) a review of high-risk areas within a school and
24 its related facilities;

25 (B) steps to take to prevent exposure to allergens;

26 (C) emergency follow-up procedures, including the

1 importance of calling 9-1-1 or, if 9-1-1 is not available,
2 other local emergency medical services;

3 (D) how to respond to a student with a known allergy,
4 as well as a student with a previously unknown allergy;

5 (E) other criteria as determined in rules adopted
6 pursuant to this Section; and

7 (F) any policy developed by the State Board of
8 Education under Section 2-3.190.

9 In consultation with statewide professional organizations
10 representing physicians licensed to practice medicine in all
11 of its branches, registered nurses, and school nurses, the
12 State Board of Education shall make available resource
13 materials consistent with criteria in this subsection (h) for
14 educating trained personnel to recognize and respond to
15 anaphylaxis. The State Board may take into consideration the
16 curriculum on this subject developed by other states, as well
17 as any other curricular materials suggested by medical experts
18 and other groups that work on life-threatening allergy issues.
19 The State Board is not required to create new resource
20 materials. The State Board shall make these resource materials
21 available on its Internet website.

22 (h-5) A training curriculum to recognize and respond to an
23 opioid overdose, including the administration of an opioid
24 antagonist, may be conducted online or in person. The training
25 must comply with any training requirements under Section 5-23
26 of the Substance Use Disorder Act and the corresponding rules.

1 It must include, but is not limited to:

- 2 (1) how to recognize symptoms of an opioid overdose;
- 3 (2) information on drug overdose prevention and
- 4 recognition;
- 5 (3) how to perform rescue breathing and resuscitation;
- 6 (4) how to respond to an emergency involving an opioid
- 7 overdose;
- 8 (5) opioid antagonist dosage and administration;
- 9 (6) the importance of calling 9-1-1 or, if 9-1-1 is
- 10 not available, other local emergency medical services;
- 11 (7) care for the overdose victim after administration
- 12 of the overdose antagonist;
- 13 (8) a test demonstrating competency of the knowledge
- 14 required to recognize an opioid overdose and administer a
- 15 dose of an opioid antagonist; and
- 16 (9) other criteria as determined in rules adopted
- 17 pursuant to this Section.

18 (h-10) A training curriculum to recognize and respond to

19 respiratory distress, including the administration of

20 undesignated asthma medication, may be conducted online or in

21 person. The training must include, but is not limited to:

- 22 (1) how to recognize symptoms of respiratory distress
- 23 and how to distinguish respiratory distress from
- 24 anaphylaxis;
- 25 (2) how to respond to an emergency involving
- 26 respiratory distress;

1 (3) asthma medication dosage and administration;

2 (4) the importance of calling 9-1-1 or, if 9-1-1 is
3 not available, other local emergency medical services;

4 (5) a test demonstrating competency of the knowledge
5 required to recognize respiratory distress and administer
6 asthma medication; and

7 (6) other criteria as determined in rules adopted
8 under this Section.

9 (i) Within 3 days after the administration of an
10 undesignated epinephrine delivery system ~~injector~~ by a school
11 nurse, trained personnel, or a student at a school or
12 school-sponsored activity, the school must report to the State
13 Board of Education in a form and manner prescribed by the State
14 Board the following information:

15 (1) age and type of person receiving epinephrine
16 (student, staff, visitor);

17 (2) any previously known diagnosis of a severe
18 allergy;

19 (3) trigger that precipitated allergic episode;

20 (4) location where symptoms developed;

21 (5) number of doses administered;

22 (6) type of person administering epinephrine (school
23 nurse, trained personnel, student); and

24 (7) any other information required by the State Board.

25 If a school district, public school, charter school, or
26 nonpublic school maintains or has an independent contractor

1 providing transportation to students who maintains a supply of
2 undesignated epinephrine delivery systems ~~injectors~~, then the
3 school district, public school, charter school, or nonpublic
4 school must report that information to the State Board of
5 Education upon adoption or change of the policy of the school
6 district, public school, charter school, nonpublic school, or
7 independent contractor, in a manner as prescribed by the State
8 Board. The report must include the number of undesignated
9 epinephrine delivery systems ~~injectors~~ in supply.

10 (i-5) Within 3 days after the administration of an opioid
11 antagonist by a school nurse or trained personnel, the school
12 must report to the State Board of Education, in a form and
13 manner prescribed by the State Board, the following
14 information:

15 (1) the age and type of person receiving the opioid
16 antagonist (student, staff, or visitor);

17 (2) the location where symptoms developed;

18 (3) the type of person administering the opioid
19 antagonist (school nurse or trained personnel); and

20 (4) any other information required by the State Board.

21 (i-10) Within 3 days after the administration of
22 undesignated asthma medication by a school nurse, trained
23 personnel, or a student at a school or school-sponsored
24 activity, the school must report to the State Board of
25 Education, on a form and in a manner prescribed by the State
26 Board of Education, the following information:

1 (1) the age and type of person receiving the asthma
2 medication (student, staff, or visitor);

3 (2) any previously known diagnosis of asthma for the
4 person;

5 (3) the trigger that precipitated respiratory
6 distress, if identifiable;

7 (4) the location of where the symptoms developed;

8 (5) the number of doses administered;

9 (6) the type of person administering the asthma
10 medication (school nurse, trained personnel, or student);

11 (7) the outcome of the asthma medication
12 administration; and

13 (8) any other information required by the State Board.

14 (j) By October 1, 2015 and every year thereafter, the
15 State Board of Education shall submit a report to the General
16 Assembly identifying the frequency and circumstances of
17 undesignated epinephrine and undesignated asthma medication
18 administration during the preceding academic year. Beginning
19 with the 2017 report, the report shall also contain
20 information on which school districts, public schools, charter
21 schools, and nonpublic schools maintain or have independent
22 contractors providing transportation to students who maintain
23 a supply of undesignated epinephrine delivery systems
24 ~~injectors~~. This report shall be published on the State Board's
25 Internet website on the date the report is delivered to the
26 General Assembly.

1 (j-5) Annually, each school district, public school,
2 charter school, or nonpublic school shall request an asthma
3 action plan from the parents or guardians of a pupil with
4 asthma. If provided, the asthma action plan must be kept on
5 file in the office of the school nurse or, in the absence of a
6 school nurse, the school administrator. Copies of the asthma
7 action plan may be distributed to appropriate school staff who
8 interact with the pupil on a regular basis, and, if
9 applicable, may be attached to the pupil's federal Section 504
10 plan or individualized education program plan.

11 (j-10) To assist schools with emergency response
12 procedures for asthma, the State Board of Education, in
13 consultation with statewide professional organizations with
14 expertise in asthma management and a statewide organization
15 representing school administrators, shall develop a model
16 asthma episode emergency response protocol before September 1,
17 2016. Each school district, charter school, and nonpublic
18 school shall adopt an asthma episode emergency response
19 protocol before January 1, 2017 that includes all of the
20 components of the State Board's model protocol.

21 (j-15) (Blank).

22 (j-20) On or before October 1, 2016 and every year
23 thereafter, the State Board of Education shall submit a report
24 to the General Assembly and the Department of Public Health
25 identifying the frequency and circumstances of opioid
26 antagonist administration during the preceding academic year.

1 This report shall be published on the State Board's Internet
2 website on the date the report is delivered to the General
3 Assembly.

4 (k) The State Board of Education may adopt rules necessary
5 to implement this Section.

6 (l) Nothing in this Section shall limit the amount of
7 epinephrine delivery systems ~~injectors~~ that any type of school
8 or student may carry or maintain a supply of.

9 (Source: P.A. 102-413, eff. 8-20-21; 102-813, eff. 5-13-22;
10 103-175, eff. 6-30-23; 103-196, eff. 1-1-24; 103-348, eff.
11 1-1-24; 103-542, eff. 7-1-24 (see Section 905 of P.A. 103-563
12 for effective date of P.A. 103-542); 103-605, eff. 7-1-24.)

13 Section 20. The Illinois Insurance Code is amended by
14 changing Section 356z.33 as follows:

15 (215 ILCS 5/356z.33)

16 Sec. 356z.33. Coverage for epinephrine delivery systems
17 ~~epinephrine injectors~~.

18 (a) A group or individual policy of accident and health
19 insurance or a managed care plan that is amended, delivered,
20 issued, or renewed on or after January 1, 2020 (the effective
21 date of Public Act 101-281) shall provide coverage for
22 medically necessary epinephrine delivery systems ~~epinephrine~~
23 ~~injectors~~ for persons 18 years of age or under. As used in this
24 Section, "epinephrine delivery system" ~~"epinephrine injector"~~

1 has the meaning given to that term in Section 5 of the
2 Epinephrine Delivery System ~~Epinephrine Injector~~ Act.

3 (b) An insurer that provides coverage for medically
4 necessary epinephrine delivery systems ~~epinephrine injectors~~
5 shall limit the total amount that an insured is required to pay
6 for a twin-pack of medically necessary epinephrine delivery
7 systems ~~epinephrine injectors~~ at an amount not to exceed \$60,
8 regardless of the type of epinephrine delivery system
9 ~~epinephrine injector~~; except that this provision does not
10 apply to the extent such coverage would disqualify a
11 high-deductible health plan from eligibility for a health
12 savings account pursuant to Section 223 of the Internal
13 Revenue Code (26 U.S.C. 223).

14 (c) Nothing in this Section prevents an insurer from
15 reducing an insured's cost sharing by an amount greater than
16 the amount specified in subsection (b).

17 (d) The Department may adopt rules as necessary to
18 implement and administer this Section.

19 (Source: P.A. 102-558, eff. 8-20-21; 103-454, eff. 1-1-25;
20 103-718, eff. 7-19-24.)

21 Section 25. The Medical Practice Act of 1987 is amended by
22 changing Section 65 as follows:

23 (225 ILCS 60/65)

24 (Section scheduled to be repealed on January 1, 2027)

1 Sec. 65. Annie LeGere Law; epinephrine delivery system
2 ~~epinephrine auto-injector~~. A licensee under this Act may not
3 be subject to discipline for providing a standing order or
4 prescription for an epinephrine delivery system ~~epinephrine~~
5 ~~auto-injector~~ in accordance with Section 40 of the Illinois
6 State Police Act or Section 10.19 of the Illinois Police
7 Training Act.

8 (Source: P.A. 102-538, eff. 8-20-21.)

9 Section 30. The Epinephrine Injector Act is amended by
10 changing Sections 1, 5, 10, 15, and 20 as follows:

11 (410 ILCS 27/1)

12 Sec. 1. Short title. This Act may be cited as the
13 Epinephrine Delivery System ~~Epinephrine Injector~~ Act.

14 (Source: P.A. 99-711, eff. 1-1-17; 100-799, eff. 1-1-19.)

15 (410 ILCS 27/5)

16 Sec. 5. Definitions. As used in this Act:

17 "Administer" means to directly apply an epinephrine
18 delivery system to the body of an individual.

19 "Authorized entity" means any entity or organization,
20 other than a school covered under Section 22-30 of the School
21 Code, in connection with or at which allergens capable of
22 causing anaphylaxis may be present, including, but not limited
23 to, independent contractors who provide student transportation

1 to schools, recreation camps, colleges and universities, day
2 care facilities, youth sports leagues, amusement parks,
3 restaurants, sports arenas, and places of employment. The
4 Department shall, by rule, determine what constitutes a day
5 care facility under this definition.

6 "Authorized individual" means an individual who has
7 successfully completed the training program under Section 10
8 of this Act.

9 "Department" means the Department of Public Health.

10 "Epinephrine delivery system" means any form of
11 epinephrine that is approved by the United States Food and
12 Drug Administration, including any device that contains a dose
13 of epinephrine, and that is used to administer epinephrine
14 into the human body to prevent or treat a life-threatening
15 allergic reaction.

16 "Health care practitioner" means a physician licensed to
17 practice medicine in all its branches under the Medical
18 Practice Act of 1987, a physician assistant under the
19 Physician Assistant Practice Act of 1987 with prescriptive
20 authority, or an advanced practice registered nurse with
21 prescribing authority under Article 65 of the Nurse Practice
22 Act.

23 "Pharmacist" has the meaning given to that term under
24 subsection (k-5) of Section 3 of the Pharmacy Practice Act.

25 "Undesignated epinephrine delivery system ~~injector~~" means
26 an epinephrine delivery system ~~injector~~ prescribed in the name

1 of an authorized entity.

2 (Source: P.A. 104-229, eff. 1-1-26.)

3 (410 ILCS 27/10)

4 Sec. 10. Prescription to authorized entity; use; training.

5 (a) A health care practitioner may prescribe epinephrine
6 delivery systems ~~injectors~~ in the name of an authorized entity
7 or authorized individual for use in accordance with this Act,
8 and pharmacists and health care practitioners may dispense
9 epinephrine delivery systems pursuant to a prescription issued
10 in the name of an authorized entity or authorized individual.
11 Such prescriptions shall be valid for a period of 2 years.

12 (a-1) A health care provider with prescribing authority
13 who is employed by or under contract with the Department may
14 issue a statewide standing order for the dispensing of
15 epinephrine delivery systems for use under subsection (c) by
16 authorized individuals or by employees or agents of authorized
17 entities who have completed the training required by
18 subsection (d).

19 (b) An authorized entity or authorized individual may
20 acquire and stock a supply of undesignated epinephrine
21 delivery systems pursuant to a prescription issued under
22 subsection (a) of this Section. Such undesignated epinephrine
23 delivery systems shall be stored in a location readily
24 accessible in an emergency and in accordance with the
25 instructions for use of the epinephrine delivery systems. The

1 Department may establish any additional requirements an
2 authorized entity or authorized individual must follow under
3 this Act.

4 (c) An employee or agent of an authorized entity who is an
5 authorized individual or any other individual who is an
6 authorized individual may:

7 (1) anywhere allergens capable of causing anaphylaxis
8 may be present provide an epinephrine delivery system to
9 any individual whom the employee, agent, or other
10 individual believes in good faith is experiencing
11 anaphylaxis, or to the parent, guardian, or caregiver of
12 such individual, for immediate administration, regardless
13 of whether the individual has a prescription for an
14 epinephrine delivery system or has previously been
15 diagnosed with an allergy; or

16 (2) anywhere allergens capable of causing anaphylaxis
17 may be present administer an epinephrine delivery system
18 to any individual whom the employee, agent, or other
19 individual believes in good faith is experiencing
20 anaphylaxis, regardless of whether the individual has a
21 prescription for an epinephrine delivery system or has
22 previously been diagnosed with an allergy.

23 (d) An employee, agent, or other individual authorized
24 must complete an anaphylaxis training program before he or she
25 is able to provide or administer an epinephrine delivery
26 system under this Section. Such training shall be valid for a

1 period of 2 years and shall be conducted by a nationally
2 recognized organization experienced in training laypersons in
3 emergency health treatment. The Department shall include links
4 to training providers' websites on its website.

5 Training shall include, but is not limited to:

6 (1) how to recognize signs and symptoms of an allergic
7 reaction, including anaphylaxis;

8 (2) how to administer an epinephrine delivery system;
9 and

10 (3) a test demonstrating competency of the knowledge
11 required to recognize anaphylaxis and administer an
12 epinephrine delivery system.

13 Training may also include, but is not limited to:

14 (A) a review of high-risk areas on the authorized
15 entity's property and its related facilities;

16 (B) steps to take to prevent exposure to allergens;

17 (C) emergency follow-up procedures; and

18 (D) other criteria as determined in rules adopted
19 pursuant to this Act.

20 Training may be conducted either online or in person. The
21 entity or individual conducting the training shall issue a
22 certificate to each person who successfully completes the
23 anaphylaxis training program. The Department shall approve
24 training programs and list permitted training programs on the
25 Department's Internet website.

26 (Source: P.A. 104-229, eff. 1-1-26.)

1 (410 ILCS 27/15)

2 Sec. 15. Costs. Whichever entity initiates the process of
3 obtaining undesignated epinephrine delivery systems and
4 providing training to personnel for carrying and administering
5 undesignated epinephrine delivery systems shall pay for the
6 costs of the undesignated epinephrine delivery systems.

7 (Source: P.A. 104-229, eff. 1-1-26.)

8 (410 ILCS 27/20)

9 Sec. 20. Limitations. The use of an undesignated
10 epinephrine delivery system in accordance with the
11 requirements of this Act does not constitute the practice of
12 medicine or any other profession that requires medical
13 licensure.

14 Nothing in this Act shall limit the amount of epinephrine
15 delivery systems that an authorized entity or individual may
16 carry or maintain a supply of.

17 (Source: P.A. 104-229, eff. 1-1-26.)

18 Section 35. The Emergency Asthma Inhalers and Allergy
19 Treatment for Children Act is amended by changing Section 10
20 as follows:

21 (410 ILCS 607/10)

22 Sec. 10. Possession, self-administration, and use of

1 epinephrine delivery systems ~~epinephrine auto-injectors~~ or
2 inhalers at recreation camps and after-school care programs.

3 (a) A recreation camp or an after-school care program
4 shall permit a child with severe, potentially life-threatening
5 allergies to possess, self-administer, and use an epinephrine
6 delivery system ~~epinephrine auto-injector~~ or inhaler, if the
7 following conditions are satisfied:

8 (1) The child has the written approval of his or her
9 parent or guardian.

10 (2) The recreational camp or after-school care program
11 administrator or, if a nurse is assigned to the camp or
12 program, the nurse shall receive copies of the written
13 approvals required under paragraph (1) of subsection (a)
14 of this Section.

15 (3) The child's parent or guardian shall submit
16 written verification confirming that the child has the
17 knowledge and skills to safely possess, self-administer,
18 and use an epinephrine delivery system ~~epinephrine~~
19 ~~auto-injector~~ or inhaler in a camp or an after-school care
20 program setting.

21 (b) The child's parent or guardian shall provide the camp
22 or program with the following information:

23 (1) the child's name;

24 (2) the name, route, and dosage of medication;

25 (3) the frequency and time of medication
26 administration or assistance;

1 (4) the date of the order;

2 (5) a diagnosis and any other medical conditions
3 requiring medications, if not a violation of
4 confidentiality or if not contrary to the request of the
5 parent or guardian to keep confidential;

6 (6) specific recommendations for administration;

7 (7) any special side effects, contraindications, and
8 adverse reactions to be observed;

9 (8) the name of each required medication; and

10 (9) any severe adverse reactions that may occur to
11 another child, for whom the epinephrine delivery system
12 ~~epinephrine auto-injector~~ or inhaler is not prescribed,
13 should the other child receive a dose of the medication.

14 (c) If the conditions of this Act are satisfied, the child
15 may possess, self-administer, and use an epinephrine delivery
16 system ~~epinephrine auto-injector~~ or inhaler at the camp or
17 after-school care program or at any camp-sponsored or
18 program-sponsored activity, event, or program.

19 (d) The recreational camp or after-school care program
20 must inform the parents or guardians of the child, in writing,
21 that the recreational camp or after-school care program and
22 its employees and agents are to incur no liability, as
23 applicable, except for willful and wanton conduct, as a result
24 of any injury arising from the self-administration of
25 medication to the child. The parents or guardians of the child
26 must sign a statement acknowledging that the recreational camp

1 or after-school care program is to incur no liability, except
2 for willful and wanton conduct, as a result of any injury
3 arising from the self-administration of medication by the
4 child and that the parents or guardians must indemnify and
5 hold harmless the recreational camp or after-school care
6 program and its employees and agents, as applicable, against
7 any claims, except a claim based on willful and wanton
8 conduct, arising out of the self-administration of medication
9 by the child.

10 (e) After-school care program personnel who have completed
11 an anaphylaxis training program as identified under the
12 Epinephrine Delivery System ~~Epinephrine Injector~~ Act may
13 administer an undesignated epinephrine injection to any child
14 if the after-school care program personnel believe in good
15 faith that the child is having an anaphylactic reaction while
16 in the after-school care program. After-school care program
17 personnel may carry undesignated epinephrine delivery systems
18 ~~epinephrine injectors~~ on their person while in the
19 after-school care program.

20 (f) After-school care program personnel may administer
21 undesignated asthma medication to any child if the
22 after-school care program personnel believe in good faith that
23 the child is experiencing respiratory distress while in the
24 after-school care program. After-school care program personnel
25 may carry undesignated asthma medication on their person while
26 in the after-school care program.

1 (g) If after-school care program personnel are to
2 administer an undesignated epinephrine injection or an
3 undesignated asthma medication to a child, the after-school
4 care program personnel must inform the parents or guardians of
5 the child, in writing, that the after-school care program and
6 its employees and agents, acting in accordance with standard
7 protocols and the prescription for the injection or
8 medication, shall incur no liability, except for willful and
9 wanton conduct, as a result of any injury arising from the
10 administration of the injection or medication, notwithstanding
11 whether authorization was given by the child's parents or
12 guardians or by the child's physician, physician assistant, or
13 advanced practice registered nurse. A parent or guardian of
14 the child must sign a statement acknowledging that the
15 after-school care program and its employees and agents are to
16 incur no liability, except for willful and wanton conduct, as
17 a result of any injury arising from the administration of the
18 medication or injection, regardless of whether authorization
19 was given by a parent or guardian of the child or by the
20 child's physician, physician assistant, or advanced practice
21 registered nurse, and that the parent or guardian must also
22 indemnify and hold harmless the after-school care program and
23 its employees and agents against any claims, except a claim
24 based on willful and wanton conduct, arising out of the
25 administration of the medication or injection, regardless of
26 whether authorization was given by the child's parent or

1 guardian or by the child's physician, physician assistant, or
2 advanced practice registered nurse.

3 (h) If after-school care program personnel administer an
4 undesignated epinephrine injection to a person and the
5 after-school care program personnel believe in good faith the
6 person is having an anaphylactic reaction or administer
7 undesignated asthma medication to a person and believe in good
8 faith the person is experiencing respiratory distress, then
9 the after-school care program and its employees and agents,
10 acting in accordance with standard protocols and the
11 prescription for the injection or medication, shall not incur
12 any liability or be subject to professional discipline, except
13 for willful and wanton conduct, as a result of any injury
14 arising from the use of the injection or medication,
15 notwithstanding whether notice was given to or authorization
16 was given by the child's parent or guardian or by the child's
17 physician, physician assistant, or advanced practice
18 registered nurse and notwithstanding the absence of the
19 parent's or guardian's signed statement acknowledging release
20 from liability.

21 (i) The changes made to this Section by this amendatory
22 Act of the 103rd General Assembly apply to actions filed on or
23 after the effective date of this amendatory Act of the 103rd
24 General Assembly.

25 (Source: P.A. 103-438, eff. 8-4-23.)

1 Section 40. The Illinois Food, Drug and Cosmetic Act is
2 amended by changing Section 3.21 as follows:

3 (410 ILCS 620/3.21) (from Ch. 56 1/2, par. 503.21)

4 Sec. 3.21. Except as authorized by this Act, the Illinois
5 Controlled Substances Act, the Pharmacy Practice Act, the
6 Dental Practice Act, the Medical Practice Act of 1987, the
7 Veterinary Medicine and Surgery Practice Act of 2004, the
8 Podiatric Medical Practice Act of 1987, Section 22-30 of the
9 School Code, Section 40 of the Illinois State Police Act,
10 Section 10.19 of the Illinois Police Training Act, or the
11 Epinephrine Delivery System ~~Epinephrine Injector~~ Act, to sell
12 or dispense a prescription drug without a prescription.

13 (Source: P.A. 102-538, eff. 8-20-21.)