1	State of Arkansas	A D'11	
2	93rd General Assembly	A Bill	
3	Regular Session, 2021		HOUSE BILL 1521
4			
5	By: Representatives McColl	um, Gonzales	
6	By: Senator Gilmore		
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8		For An Act To Be Entitled	
9	AN ACT TO	O CODIFY EXECUTIVE ORDERS 20-18 AND 20-3	34 TO
10	ENSURE HE	CALTHCARE PROFESSIONALS ARE EQUIPPED WIT	ГН ТНЕ
11	TOOLS NEC	CESSARY TO COMBAT COVID-19 AND HAVE ACCH	ESS TO
12	HEALTHCAF	RE RESOURCES TO TREAT COVID-19; TO DECLA	ARE AN
13	EMERGENCY	; AND FOR OTHER PURPOSES.	
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16		Subtitle	
17	ТО	CODIFY EXECUTIVE ORDERS 20-18 AND 20-	
18	34	TO ENSURE HEALTHCARE PROFESSIONALS ARE	
19	EQU	IPPED WITH THE TOOLS NECESSARY TO	
20	COM	BAT COVID-19; AND TO DECLARE AN	
21	EME	RGENCY.	
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24	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF ARKANS	SAS:
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26	SECTION 1. Ark	ansas Code Title 12, Chapter 75, Subcha	apter l, is
27	amended to add an add	ditional section to read as follows:	
28	<u>12-75-134.</u> COV	/ID-19 pandemic — Definitions — Healthca	are providers —
29	Immunity.		
30	<u>(a)</u> As used in	this section:	
31	<u>(1)</u> "COV	/ID-19" means severe acute respiratory s	<u>syndrome</u>
32	<u>coronavirus 2 (SARS-C</u>	CoV-2), coronavirus disease 2019 (COVID-	-19), or any other
33	<u>disease, health condi</u>	ition, or threat caused by severe acute	respiratory
34	<u>syndrome coronavirus</u>	2 (SARS-CoV-2) or by any virus mutated	from severe acute
35	respiratory syndrome	coronavirus 2 (SARS-CoV-2);	
36	<u>(2)</u> "Eme	ergency management functions" means fund	ctions that



1	<u>include:</u>
2	(A) Triage, diagnostic testing, or treatment, or a
3	combination of triage, diagnostic testing, or treatment, provided to
4	individuals who are known to have or suspected to have COVID-19;
5	(B) Cancelling, postponing, or denying elective procedures
6	or other routine care for an illness or condition that does not fall within
7	the scope of the COVID-19 pandemic;
8	(C) Redeploying of employees or contractors outside of
9	their usual practice areas or not typically assigned to duties as described
10	in subdivision (2)(A) or subdivision (2)(B) of this section, or both, within
11	the employee's or contractor's licensure, certification, or scope of practice
12	to the extent necessary to respond to staff shortages related to the COVID-19
13	pandemic;
14	(D) Planning to enact or enacting crisis standard-of-care
15	measures, consistent with federal regulations and guidance, including without
16	limitation waiving restrictions on numbers or locations of patient beds or
17	staff-to-patient ratios, modifying the number of beds available, preserving
18	personal protective equipment, and triaging or rationing access to
19	treatments, services, or equipment; and
20	(E) Reducing recordkeeping requirements to the extent
21	necessary for healthcare providers to perform tasks as may be necessary to
22	respond to the COVID-19 pandemic;
23	(3) "Healthcare provider" means:
24	(A) An individual who is licensed, certified, or otherwise
25	authorized by law to administer health care in the ordinary course of the
26	practice of his or her profession; or
27	(B) A partnership, association, corporation, or other
28	facility or institution that employs or contracts with individuals to provide
29	healthcare services in the normal course and scope of business or operation,
30	whether for profit or not for profit; and
31	(4) "Healthcare service" means any care, treatment, service, or
32	procedure performed by any healthcare provider to diagnose, treat, cure,
33	mitigate, or prevent the illness or health condition that is causing a public
34	health emergency.
35	(b) In response to the COVID-19 pandemic, all healthcare providers
36	licensed and permitted to practice in the state are requested to and may

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1	provide:
2	(1) Services in support of this state and the administrators of
3	this state; and
4	(2) Healthcare services, assistance, and advice.
5	(c) When necessary, a healthcare provider affected by COVID-19 shall
6	remove limits on working hours for physicians, physician assistants,
7	specialist assistants, nurse practitioners, licensed registered nurses, and
8	licensed practical nurses to maintain adequate staffing and otherwise respond
9	to COVID-19.
10	(d) For the purposes of diagnosing, treating, mitigating, or curing
11	COVID-19, a healthcare provider may use any drug, device, or product:
12	(1) Approved or cleared under the Federal Food, Drug, and
13	Cosmetic Act, 21 U.S.C. §§ 301-392, as existing on January 1, 2021;
14	(2) Licensed under the Public Health Service Act, 42 U.S.C. §§
15	201-291n, as existing on January 1, 2021; and
16	(3) Authorized for emergency use under an Investigational Device
17	Exemption or Investigational New Drug Application of the Federal Food, Drug,
18	and Cosmetic Act, 21 U.S.C. §§ 301-392, as existing on January 1, 2021.
19	(e)(l) A healthcare provider may:
20	(A) Provide healthcare services that are directed at the
21	treatment or mitigation of COVID-19 or its symptoms in response to the COVID-
22	19 pandemic;
23	(B) Perform healthcare services directed at the
24	prevention, treatment, mitigation, or cure of COVID-19; and
25	(C) Perform other emergency management functions related
26	to COVID-19 within the scope of his or her licensure.
27	(2) A healthcare provider shall be considered an emergency
28	responder when providing or performing healthcare services or functions as
29	described by subdivision (e)(l) of this section and is subject to the same
30	immunity from liability as provided in § 12-75-128.
31	(f) In addition to immunity under § 12-75-128, a healthcare provider
32	is immune from liability:
33	(1)(A) For death, injury, or property damage alleged to have
34	been sustained as a result of any act or omission by the healthcare provider
35	in the course of performing emergency management functions related to COVID-
36	19 if the act or omission:

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1	(i) Occurs as a result of a good faith effort of the
2	healthcare provider to provide a healthcare service for the diagnosis,
3	treatment, cure, mitigation, or prevention of COVID-19; and
4	(ii) Was the direct result of the healthcare
5	provider's providing a healthcare service to a patient for the treatment and
6	mitigation of COVID-19 or its symptoms.
7	(B) However, the immunity under subdivision (f)(1)(A) of
8	this section does not apply to an act or omission that is willful, reckless,
9	or intentional misconduct; and
10	(2) For using any prescription drug or device to treat a patient
11	who is known to have or suspected to have COVID-19 if:
12	(A) The prescription of the drug or device is within the
13	scope of the healthcare provider's license;
14	(B) The healthcare provider prescribes the drug or device
15	in accordance with the most current written recommendations of a United
16	States Government agency; and
17	(C) The healthcare provider informs the patient of known
18	positive and negative outcomes of the prescription drug or device and
19	documents the informed consent of the patient to the treatment in the
20	patient's medical record.
21	(g) This section expires on May 1, 2023, unless extended by the
22	General Assembly.
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24	SECTION 2. EMERGENCY CLAUSE. It is found and determined by the
25	General Assembly of the State of Arkansas that the healthcare providers need
26	flexibility and emergency procedures in place to combat COVID-19 and other
27	medical pandemics; that healthcare providers should be shielded from lawsuits
28	during the COVID-19 pandemic so as to protect them from potentially frivolous
29	actions while the healthcare providers are battling to save lives; and that
30	this act is immediately necessary because healthcare providers need legal
31	protections, flexibility, and emergency procedures in place for pandemics in
32	order to provide proper healthcare services, assistance, and advice during
33	the COVID-19 pandemic. Therefore, an emergency is declared to exist, and this
34	act being immediately necessary for the preservation of the public peace,
35	health, and safety shall become effective on:
36	(1) The date of its approval by the Governor;

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1	(2) If the bill is neither approved nor vetoed by the Governor,
2	the expiration of the period of time during which the Governor may veto the
3	bill; or
4	(3) If the bill is vetoed by the Governor and the veto is
5	overridden, the date the last house overrides the veto.
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