WHEREAS, on March 13, 2020, I declared the existence of a state public health emergency based on the appearance of the 2019 novel coronavirus known as COVID-19 in the State of Alabama;

WHEREAS that initial proclamation included provisions designed to assist in preventing the spread of COVID-19 and in mitigating the consequences of COVID-19;

WHEREAS, on March 18, 20, 23, and 26 of 2020, I issued supplemental proclamations to further address the occurrence of COVID-19 in the State of Alabama; and

WHEREAS new implications of COVID-19 come to light on a continual basis, requiring flexibility and adaptability by all levels of government within the State of Alabama;

NOW THEREFORE, I, Kay Ivey, Governor of the State of Alabama, pursuant to the relevant provisions of the Alabama Emergency Management Act of 1955, as amended, Ala. Code §§ 31-9-1, et seq., do hereby proclaim the existence of conditions that warrant implementation of additional extraordinary measures and relief during the state public health emergency now in effect in order to guard public health and protect human life. I therefore proclaim and direct all of the following:

I. Cutting red tape for health care providers

Because of an anticipated “surge” of COVID-19 patients requiring treatment by health care facilities and providers, I find that it would promote the safety and protection of the civilian population to adopt measures that expand the capacity of the health care workforce. To that end:

A. Expanded scope of practice for certain health care professionals.

1. Certified Registered Nurse Practitioners, Certified Nurse Midwives, Certified Registered Nurse Anesthetists, physician assistants, and anesthesia assistants may practice in a licensed health care facility as follows during the period of the public health emergency I declared on March 13, 2020:

   a. Certified Registered Nurse Practitioners and Certified Nurse Midwives who possess an active, unencumbered Certificate of Qualification to engage in advanced practice nursing pursuant to Ala. Code § 34-21-84—or who possess an active, unencumbered registered nurse license and equivalent advanced practice approval issued by the appropriate licensing board of another state, the District of Columbia, a territory of the United States, or a province of Canada—are authorized to practice to the full scope of their practice as determined by their education, training, and current national certification(s) from a national certifying agency recognized by the
b. Certified Registered Nurse Anesthetists who possess an active, unencumbered Certificate of Qualification to engage in advanced practice nursing pursuant to Ala. Code § 34-21-84— or who possess an active, unencumbered registered nurse license and equivalent advanced practice approval issued by the appropriate licensing board of another state, the District of Columbia, a territory of the United States, or a province of Canada—are authorized to practice to the full scope of their practice as determined by their education, training, and current national certification(s) by the National Board of Certification and Recertification for Nurse Anesthetists or other certifying body approved by the Board of Nursing.

c. Certified Registered Nurse Anesthetists practicing under this subsection are authorized to determine, prepare, monitor, or administer such legend and controlled medications as are necessary for the performance of anesthesia-related services, airway management services (whether or not associated with the provision of anesthesia), and other acute care services within the scope of their practice as determined by their education, training, and current national certification(s) by the National Board of Certification and Recertification for Nurse Anesthetists or other certifying body approved by the Board of Nursing.

d. The chief of the medical staff or medical director of a licensed health care facility, or his or her designee, may serve as the collaborating physician for an unlimited number of Certified Registered Nurse Practitioners and Certified Nurse Midwives, provide direction to an unlimited number of Certified Registered Nurse Anesthetists, and supervise an unlimited number of physician assistants and anesthesia assistants.

e. Certified Registered Nurse Practitioners and Certified Nurse Midwives under collaborative practice with, and physician assistants practicing under a registration with the chief of the medical staff or medical director, or his or her designee shall be authorized to perform all skills as authorized under the licensed health care facility’s protocols and to prescribe all drugs listed in the licensed health care facility’s protocols and formulary as may be necessary to provide health care to patients; provided that the Certified Registered Nurse Practitioner, Certified Nurse Midwife, or physician assistant must possess an active registration from the United States Drug Enforcement Administration and a Qualified Alabama Controlled Substances Certificate to prescribe controlled substances.

f. Certified Registered Nurse Anesthetists practicing under the direction of, and anesthesia assistants practicing under a registration with, the chief of the medical staff or medical director, or his or her designee shall be authorized to perform all skills as authorized under the licensed health care facility’s protocols as may be necessary to provide health care to patients.

g. The licensed healthcare facility implementing these arrangements shall be charged with keeping accurate records thereof.

2. Physicians practicing outside of a licensed health care facility shall have temporary emergency approval for collaboration agreements with Certified
Registered Nurse Practitioners and Certified Nurse Midwives, and registration agreements with anesthesia assistants and physician assistants, not to exceed a cumulative three hundred and sixty hours (nine full-time equivalents or 'FTEs') per week, unless further expansion of this FTE limit is deemed necessary to address the public health emergency and is authorized by emergency rules promulgated by both the Board of Medical Examiners and the Board of Nursing. Emergency collaborations and registration agreements between physicians and Certified Registered Nurse Practitioners, Certified Nurse Midwives, anesthesia assistants, and physician assistants practicing outside of a licensed health care facility shall be limited to the applicable standard protocol and formulary approved by the Alabama Board of Nursing and the Board of Medical Examiners, except that practitioners who have previously been approved for additional skills or drugs shall retain those authorizations.

3. Emergency collaboration and registration agreements shall be deemed approved upon submission to the Alabama Board of Nursing and the State Board of Medical Examiners.

4. Certified Registered Nurse Practitioners and Certified Nurse Midwives practicing pursuant to an existing Alabama collaborative practice agreement or an Alabama emergency collaboration are authorized to provide all services within their scope of practice via telehealth services. Advanced Practice Registered Nurses licensed or approved as such in another state, territory, the District of Columbia, or a province of Canada who currently provide services to Alabama residents at practice sites physically located in another state, territory, the District of Columbia or a province of Canada may, during the period of this declared public health emergency, provide telehealth services incident to continuity of care for their existing Alabama patients without obtaining an emergency collaboration in Alabama.

B. Practice by out-of-state health care practitioners. The Board of Pharmacy, the Board of Nursing, the Medical Licensure Commission, and the State Board of Medical Examiners shall adopt emergency rules within three business days of the issuance of this proclamation to allow expedited licensures and/or temporary permits for the practice of pharmacy, nursing, and medicine in Alabama by individuals in possession of active, unencumbered licenses in other states, if not already authorized by rule.

C. Expedited reinstatement of medical licenses. Notwithstanding the procedure governing the reinstatement of medical licenses found in Alabama Code section 34-24-337, the Alabama State Board of Medical Examiners and the Medical Licensure Commission of Alabama shall adopt a joint emergency rule within three business days of the issuance of this proclamation to provide for the expedited reinstatement of medical licenses to qualified physicians who desire to provide health care to people in Alabama suffering from and affected by the COVID-19 pandemic. This rule shall allow for the expedited reinstatement of medical licenses for a time period to be determined by the Board of Medical Examiners and the Medical Licensure Commission to individuals who maintained good standing while they practiced in Alabama, who have no disciplinary history in Alabama or elsewhere, and who, in the judgment of the Board of Medical Examiners and Medical Licensure Commission, are competent to practice medicine with reasonable skill and safety to patients.

II. Expanding capacity of health care facilities

Because the increasing number of patients requiring treatment for COVID-19 is placing a strain on the resources of healthcare facilities and pharmacies, I find that it would promote the safety and protection of the civilian population to adopt measures to
expedite permitting and provide temporary relief from certain laws and rules concerning the State’s healthcare infrastructure. To that end:

A. The State Health Planning and Development Agency and, as appropriate, the Statewide Health Coordinating Council and the Certificate of Need Review Board, is hereby authorized and directed to promulgate emergency rules to provide for temporary waivers to the Certificate of Need process to permit new services, facilities, and other resources needed for the treatment of patients affected by the appearance of COVID-19, or to free up bed and treatment space at existing health care facilities to permit such needed treatment.

B. The Alabama Board of Pharmacy shall adopt emergency rules to allow expedited temporary pharmacy permits.

III. Notaries and witnesses

My supplemental emergency proclamation issued March 26, 2020, is hereby amended to address the remote notarization of documents by unsupervised, non-attorney notaries and to enhance record-keeping requirements. Specifically, the relevant section of that supplemental proclamation is amended to read as follows:

* * *

Because person-to-person contact increases the risk of transmitting COVID-19, I find that it would promote the safety and protection of the civilian population to adopt measures that reduce the necessity of in-person meetings. To that end:

A. Notaries appointed in Alabama may notarize signatures through videoconferencing programs, and confirm the signatures of witnesses who participate virtually through videoconferencing, as though they were physically present at the signing—provided that they maintain a recording of the audio-visual communication for a period of five years following the date the recording is noted in the notary’s logbook.

B. Any person who witnesses a document through videoconference technology may be considered an “in person” witness, provided that the presence and identity of such witnesses are validated by the notary at the time of the signing by the same identifications required under current law.

C. The official date and time of the notarization shall be the date and time when the notary witnesses the signature via the videoconference technology. All documents must be returned to the notary for certification and execution.

D. The provisions of this section shall take effect tomorrow, April 3, 2020. Any notarizations previously performed under section III of my supplemental proclamation dated March 26, 2020, are valid.

IV. Public meetings

Because person-to-person contact increases the risk of transmitting COVID-19, I find that it would promote the safety and protection of the civilian population to adopt measures that reduce the necessity of in-person meetings. To that end:

A. Notwithstanding any provision of state law, any governmental entity or quasi-governmental entity created pursuant to a state statute or municipal ordinance need not meet in person to establish a quorum if the entity complies with the Open Meetings Act procedures established by section III of the supplemental emergency proclamation I issued on March 18, 2020.

B. Notwithstanding any provision of state law, any meeting or public hearing of an entity described in subsection A that is scheduled by law to occur during this state
public health emergency may be postponed by the chair or other person responsible for setting it. The chair or other person shall provide notice of the postponement in a manner consistent with the provisions of section 36-23A-3 of the Open Meetings Act and shall reschedule the meeting or public hearing as soon as practicable.

V. Remote shareholder meetings

Because person-to-person contact increases the risk of transmitting COVID-19, I find that it would promote the safety and protection of the civilian population to adopt measures that reduce the necessity of in-person meetings. To that end:

A. Notwithstanding any other provision of law, corporations governed by Chapter 2 of Title 10A of the Code of Alabama (1975) and Chapter 2A of Title 10A of the Code of Alabama (1975), may provide an alternate means of meeting for eligible stockholders via remote participation pursuant to guidelines and procedures adopted by the corporation’s board of directors.

B. Stockholders remotely participating in a stockholders’ meeting shall be deemed present and may vote at that meeting if:

1. The corporation has implemented reasonable measures to verify membership of each person participating; and

2. The corporation has provided stockholders participating remotely a reasonable opportunity to participate in the meeting and to vote on matters submitted to the stockholders, including an opportunity to communicate, and to read or hear the proceedings of the meeting, substantially concurrently with the proceedings.

C. Any guidelines and procedures adopted under this section must provide for pre-meeting notice to the stockholders that describes the means of remote communication to be used during the meeting and the notice must include the record date for determining the stockholders entitled to vote at the meeting, if that date is different from the record date for determining stockholders entitled to notice of the meeting.

D. The corporation shall make the list of stockholders entitled to vote available at the meeting, and any stockholder, or the stockholder’s agent or attorney, is entitled to inspect the list at any time during the meeting on a reasonably accessible electronic network, and the information required to access such list shall be provided with the notice of the meeting.

VI. Slowing COVID-19 transmission in jails

Because the conditions of jails inherently heighten the possibility of COVID-19 transmission, I find that it would promote the safety and protection of the civilian population to allow local officials to reduce the number of local inmates being held in county jails in a way that does not jeopardize public safety. To that end:

A. With the exception of alleged probation and parole violations based upon new criminal charges, any alleged probation or parole violator who has been in the custody of a jail for more than 20 days without a probation or parole hearing shall be released. If the hearing is not held within the specified time, the sheriff shall release the alleged probation or parole violator unless he or she is being held for other criminal charges.

B. For technical violations punishable by no more than 45 days as set out in Alabama Code section 15-22-54(e) or section 15-22-32(b), credit TO SATISFY ANY SUCH VIOLATION shall be given for all time served in county and municipal jails after entering custody for the violation at issue.
C. Nothing in this section shall be construed to preclude the use of communications technology in the conduct of probation or parole revocation hearings.

FURTHER, to the extent a provision in this supplemental proclamation conflicts with any provision of state law, that law is hereby suspended for the duration of this state of emergency, and this proclamation shall control.

FURTHER, I declare that this proclamation and all subsequent orders, laws, rules, or regulations issued pursuant hereto shall remain in full force and effect for the duration of the public health emergency unless rescinded or extended by proclamation.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal to be affixed by the Secretary of State at the State Capitol in the City of Montgomery on this 2nd day of April, 2020.

Kay Ivey
Governor

ATTEST:

John H. Merrill
Secretary of State