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SENATE BILL 636 Second Edition Engrossed 4/29/97

Short Title: Public Health Authority Act.

Sponsors: Senators Hartsell; Forrester, Lucas, and Martin of Guilford.

Referred to: Children and Human Resources.

April 1, 1997

1	A BILL TO BE ENTITLED
2	AN ACT TO AUTHORIZE THE ESTABLISHMENT OF LOCAL PUBLIC HEALTH
3	AUTHORITIES, AS RECOMMENDED BY THE NORTH CAROLINA PUBLIC
4	HEALTH COMMISSION.
5	The General Assembly of North Carolina enacts:
6	Section 1. Article 2 of Chapter 130A of the General Statutes is amended by
7	adding a new Part to read:
8	" <u>PART 1A. PUBLIC HEALTH AUTHORITIES AUTHORIZED.</u>
9	" <u>§ 130A-43. Title and purpose.</u>
10	(a) This Part shall be known and may be cited as the 'Public Health Authorities
11	<u>Act'.</u>
12	(b) The purpose of this Part is to provide an additional and alternative method for
13	counties to provide public health services. This Part shall not be regarded as repealing
14	any powers now existing under any other law, either general, special, or local.
15	(c) It is the policy of the General Assembly that Public Health Authorities should
16	have adequate authority to exercise the powers, rights, duties, functions, privileges, and
17	immunities conferred upon them by law.
18	"§ 130A-44. Definitions.
10	A guard in this Dart unlage otherwise specified:

As used in this Part, unless otherwise specified: 19

1	<u>(1)</u>	'Authority service area' means area within the boundaries of the
2		authority as provided for in G.S. 130A-45.4.
3	<u>(2)</u>	'Board' means a public health authority board created under this Part.
4	<u>(3)</u>	'Department' means the Department of Environment, Health, and
5		Natural Resources.
6	<u>(4)</u>	'County board of commissioners' means the legislative body charged
7		with governing the county.
8	<u>(5)</u>	'County' means the county which is, or is about to be, included in the
9		territorial boundaries of a public health authority when created
10		hereunder.
11	<u>(6)</u>	'Federal government' means the United States of America, or any
12		agency, instrumentality, corporate or otherwise, of the United States of
13		<u>America.</u>
14	<u>(7)</u>	'Government' means the State and federal governments and any
15		subdivision, agency, or instrumentality, corporate or otherwise, of either
16		of them.
17	<u>(8)</u>	'Public health authority' means a public body and a body corporate and
18		politic organized under the provisions of this Part.
19	<u>(9)</u>	'Public health facility' means any one or more buildings, structures,
20		additions, extensions, improvements, or other facilities, whether or not
21		located on the same site or sites, machinery, equipment, furnishings or
22		other real or personal property suitable for providing public health
23		services; and includes, without limitation, local public health
24		departments or centers; public health clinics and outpatient facilities;
25		nursing homes, including skilled nursing facilities and intermediate care
26		facilities, adult care homes for the aged and disabled; public health
27		laboratories; administration buildings, central service and other
28		administrative facilities; communication, computer and other electronic
29		facilities; pharmaceutical facilities; storage space; vehicular parking lots
30		and other such public health facilities, customarily under the jurisdiction
31		of or provided by public health departments, or any combination of the
32		foregoing, with all necessary, convenient or related interests in land,
33		machinery, apparatus, appliances, equipment, furnishings,
34		appurtenances, site preparation, landscaping, and physical amenities.
35	(10)	'Real property' means lands, lands under water, structures, and any and
36		all easements, franchises and incorporeal hereditaments and every estate
37		and right therein, legal and equitable, including terms for years and liens
38		by way of judgment, mortgage or otherwise.
39	(11)	'State' means the State of North Carolina.
40	. , , , , , , , , , , , , , , , , , , ,	ceation of a public health authority.
41		blic health authority may be created whenever a county board of
42	commissioners	finds and adopts a resolution finding that it is in the interest of the public

1	health and welfare to create a public health authority to provide public health services as
2	required under G.S. 130A-34.
3	(b) <u>A public health authority including more than one county may be formed upon</u>
4	joint resolution of the county boards of commissioners and local boards of health having
5	jurisdiction over each of the counties involved.
6	(c) After the adoption of a resolution creating a public health authority, a public
7	health authority board shall be appointed in accordance with G.S. 130A-45.1.
8	(d) A county may join a public health authority upon joint resolution of the boards
9	of commissioners and local boards of health having jurisdiction over each of the counties
10	involved.
11	(e) <u>A public health authority board shall govern the public health authority</u> . All
12	powers, duties, functions, rights, privileges, or immunities conferred on the public health
13	authority may be exercised by the authority board.
14	(f) The public health authority board shall absorb the functions, assets, and
15	liabilities of the county or district boards of health, and that board is dissolved.
16	(g) For the purpose of Chapter 159 of the General Statutes, a public health
17	authority is a public authority as defined in G.S. 159-7(b)(10).
18	(h) Before adopting a resolution creating a public health authority, the county
19	board of commissioners shall hold a public hearing with notice published at least 10 days
20	before the hearing.
21	(i) For the purposes of Article 9 of Chapter 131E of the General Statutes, a public
22	health authority is a person as defined in G.S. 131E-176(19).
23	" <u>§ 130A-45.1. Membership of the Public Health Authority Board.</u>
24	(a) <u>A public health authority board shall be the policy-making, rule-making, and</u>
25	adjudicatory body for a public health authority and shall be composed of no fewer than
26	seven members and no more than nine members; except that in an authority comprising
27	two or more counties, the board shall be composed of no more than 11 members.
28	(b) In a single county authority, the county board of commissioners shall appoint
29	the members of the board; in an authority comprising two or more counties, the chairman
30	of the county board of commissioners of each county in the authority shall appoint one
31	county commissioner to the authority board and these members shall jointly appoint the
32	other members of the board.
33	(c) The members of the board shall include:
34	(1) At least one physician licensed under Chapter 90 of the General Statutes
35	to practice medicine in this State;
36	(2) At least one county commissioner or the commissioner's express
37	designee from each county in the authority;
38	(3) <u>At least three licensed or registered professionals from any of the</u>
39	following professions: dentistry, optometry, veterinary science,
40	nursing, pharmacy, engineering, accounting, or health care
41	administration; and

1	(4) At least four members selected by the county commissioners from
2	among the general public, from the professions listed in subdivision (3),
23	and from the administrative staff of a hospital located in the authority.
4	(d) Except as provided in this subsection, members of the board shall serve terms
5	of three years. Two of the original members shall serve terms of one year, and two of the
6	original members shall serve terms of two years.
7	(e) Any member who is a county commissioner serves on the board in an ex
8	officio capacity.
9	(f) Whenever a county shall join or withdraw from an existing public health
10	authority, the board shall be dissolved and a new board shall be appointed as provided in
11	subsection (b) of this section.
12	(g) Vacancies shall be filled within 120 days for any unexpired portion of a term.
13	(h) A chair shall be elected annually by a board. The local health director shall
14	serve as secretary to the board.
15	(i) A majority of the members shall constitute a quorum.
16	(i) <u>A member may be removed from office by the board for any of the following:</u>
17	(1) <u>Commission of a felony or other crime involving moral turpitude.</u>
18	(2) Violation of a State law governing conflict of interest.
19	(3) Violation of a written policy adopted by the county board of
20	commissioners of each county in the authority.
21	(4) Habitual failure to attend meetings.
22	(5) Conduct that tends to bring the office into disrepute.
23	(6) Failure to maintain qualifications for appointment required under
24	subsection (b) of this section.
25	A board member may be removed only after the member has been given written
26	notice of the basis for removal and has had the opportunity to respond.
27	(k) Board members shall receive no compensation for their services, but they shall
28	be entitled to reimbursement for subsistence and travel expenses incurred in the discharge
29	of their duties.
30	(1) The board shall meet at least quarterly. The chairperson or three of the
31	members may call a special meeting.
32	" <u>§ 130A-45.2. Dissolution of a public health authority.</u>
33	(a) Whenever the board of commissioners of each county constituting a public
34	health authority determines that the authority is not operating in the best health interests
35	of the authority service area, they may direct that the authority be dissolved. In addition,
36	whenever a board of commissioners of a county which is a member of an authority
37	determines that the authority is not operating in the best health interests of that county, it
38	may withdraw from the authority. Dissolution of an authority or withdrawal from the
39	authority by a county shall be effective only at the end of the fiscal year in which the
40	action of dissolution or withdrawal transpired.
41	(b) Notwithstanding the provisions of subsection (a) of this section, no public
42	health authority shall be dissolved without prior written notification to the Department.

1	(c) Any	budgetary surplus available to a public health authority at the time of its
2	• •	be distributed to those counties comprising the authority on the same pro
3		he counties appropriated and contributed funds to the authority's budget
4		ent fiscal year. Distribution to the counties shall be determined on the
5	•	t of the financial record of the authority. The public health authority board
6		ertified public accountant or an accountant who is subsequently certified
7		overnment Commission to conduct the audit. The audit shall be performed
8		with G.S. 159-34. The same method of distribution of funds described
9		ply when one or more counties of an authority withdraw from the
10	<u>authority.</u>	
11	<u>(d)</u> <u>Upon</u>	dissolution or withdrawal, all rules adopted by the board continue in
12	effect until ame	nded or repealed by the new authority board or boards of health.
13	" <u>§ 130A-45.3.</u>]	Powers and duties of authority board.
14	<u>(a)</u> <u>A pul</u>	blic health authority shall have all the powers necessary or convenient to
15	carry out the pu	rposes of this Part, including the following powers to:
16	<u>(1)</u>	Protect and promote the public health. The board shall have the
17		authority to adopt rules necessary for that purpose.
18	<u>(2)</u>	Construct, equip, operate, and maintain public health facilities.
19	<u>(3)</u>	Use property owned or controlled by the authority.
20	<u>(4)</u>	Acquire real or personal property, including existing public health
21		facilities, by purchase, grant, gift, devise, lease or, with the permission
22		of the county commissioners, condemnation.
23	<u>(5)</u>	Establish a fee schedule for services received from public health
24		facilities and make services available regardless of ability to pay.
25	<u>(6)</u>	Appoint a public health authority director to serve at the pleasure of the
26		authority board.
27	<u>(7)</u>	Establish a salary plan which shall set the salaries for employees of the
28		area authority.
29	<u>(8)</u>	To adopt and enforce a professional reimbursement policy which may
30		include the following provisions: (i) require that fees for the provision
31		of services received directly under the supervision of the public health
32		authority shall be paid to the authority, (ii) prohibit employees of the
33		public health authority from providing services on a private basis which
34		require the use of the resources and facilities of the public health
35		authority, and (iii) provide that employees may not accept dual
36		compensation and dual employment unless they have the written
37	(0)	permission of the public health authority director.
38	<u>(9)</u>	Delegate to its agents or employees any powers or duties as it may deem
39 40	(10)	appropriate.
40 41	$\frac{(10)}{(11)}$	Employ its own counsel and legal staff.
41 42	$\frac{(11)}{(12)}$	Adopt, amend, and repeal bylaws for the conduct of its business.
42 43	<u>(12)</u>	Enter into contracts for necessary supplies, equipment, or services for the operation of its business.
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1	(13) <u>Act as an agent for the federal, State, or local government in connection</u>
2	with the acquisition, construction, operation, or management of a public
3	<u>health facility, or any part thereof.</u>
4	(14) Insure the property or the operations of the authority against risks as the
5	authority may deem advisable.
6 7	$\frac{(15)}{(16)} \frac{\text{Sue and be sued.}}{\text{A scent denotions or money personal property or real estate for the}$
8	(16) Accept donations or money, personal property, or real estate for the banefit of the authority and to take title to the same from any person
8 9	benefit of the authority and to take title to the same from any person, firm, corporation, or society.
9 10	(17) Appoint advisory boards, committees, and councils composed of
10	<u>qualified and interested residents of the authority service area to study</u> ,
11	interpret, and advise the public health authority board.
12	(b) A public health authority shall have the power to establish and operate health
13	care networks and may contract with or enter into any arrangement with other public
15	health authorities or local health departments of this or other states, federal, or other
16	public agencies, or with any person, private organization, or nonprofit corporation or
17	association for the provision of public health services, including managed health care
18	activities; provided, however, that for the purposes of this subsection only, a public health
19	authority shall be permitted to and shall comply with the requirements of Article 67 of
20	Chapter 58 of the General Statutes to the extent that such requirements apply to the
21	activities undertaken by the public health authority pursuant to this subsection. The
22	public health authority may pay for or contribute its share of the cost of any such contract
23	or arrangement from revenues available for these purposes, including revenues arising
24	from the provision of public health services.
25	(c) A public health authority may lease any public health facility, or part, to a
26	nonprofit association on terms and conditions consistent with the purposes of this Part.
27	The authority will determine the length of the lease. No lease executed under this
28	subsection shall be deemed to convey a freehold interest.
29	(d) <u>A public health authority shall not sell nor convey any rights of ownership the</u>
30	county has in any public health facility, including the buildings, land and equipment
31	associated with the facility, to any corporation or other business entity operated for profit,
32	except that nothing herein shall prohibit the sale of surplus buildings, surplus land or
33	surplus equipment by an authority to any corporation or other business entity operated for
34	profit. For purposes of this subsection, 'surplus' means any building, land or equipment
35	which is not required for use in the delivery of public health care services by a public
36	health facility at the time of the sale or conveyance of ownership rights.
37	(e) <u>A public health authority may lease any public health facility, or part, to any</u>
38	corporation, foreign or domestic, authorized to do business in North Carolina on terms
39	and conditions consistent with the purposes of this Part and with G.S. 160A-272.
40	(f) <u>A public health authority may exercise any or all of the powers conferred upon</u>
41	it by this Part, either generally or with respect to any specific public health facility or
42	facilities, through or by designated agents, including any corporation or corporations
43	which are or shall be formed under the laws of this State.

1	(a) An authority may contract to insure itself and any of its board members
1	(g) An authority may contract to insure itself and any of its board members,
2	agents, or employees against liability for wrongful death or negligent or intentional
3	damage to person or property or against absolute liability for damage to person or property assessed by an act or amission of the authority or of any of its board members
4	property caused by an act or omission of the authority or of any of its board members.
5	agents, or employees when acting within the scope of their authority and the course of their amployment. The based shall determine what liabilities and what members, agents
6	their employment. The board shall determine what liabilities and what members, agents,
7	and employees shall be covered by any insurance purchased pursuant to this subsection.
8	Purchase of insurance pursuant to this subsection waives the authority's governmental
9	immunity, to the extent of insurance coverage, for any act or omission occurring in the
10	exercise of a governmental function. Participation in a local government risk pool
11	pursuant to Article 23 of Chapter 58 of the General Statutes shall be deemed to be the
12	purchase of insurance for the purposes of this section. By entering into an insurance
13	contract with the authority, an insurer waives any defense based upon the governmental
14	immunity of the authority.
15	(h) If an authority has waived its governmental immunity pursuant to subsection
16 17	(g) of this section, any person, or if he dies, his personal representative, sustaining damages as a result of an act or omission of the authority or any of its board members.
17	damages as a result of an act or omission of the authority or any of its board members, agents, or employees, occurring in the exercise of a governmental function, may sue the
18 19	authority for recovery of damages. To the extent of the coverage of insurance purchased
19 20	pursuant to subsection (g) of this section, governmental immunity may not be a defense
20 21	
21	to the action. Otherwise, however, the authority has all defenses available to private
22	litigants in any action brought pursuant to this section without restriction, limitation, or other effect, whether the defense arises from common law or by virtue of a statute.
23 24	Despite the purchase of insurance as authorized by subsection (g) of this section, the
24 25	liability of an authority for acts or omissions occurring in the exercise of governmental
23 26	functions does not attach unless the plaintiff waives the right to have all issues of law or
20 27	fact relating to insurance in the action determined by a jury. The judge shall hear and
28	determine these issues without resort to a jury, and the jury shall be absent during any
20 29	motion, argument, testimony, or announcement of findings of fact or conclusions of law
30	relating to these issues unless the defendant requests a jury trial on them.
31	" <u>§ 130A-45.4. Appointment of a public health authority director.</u>
32	(a) A public health authority board, after consulting with the appropriate county
33	board or boards of commissioners, shall appoint a public health authority director.
34	(b) All persons who are appointed to the position of public health authority
35	director must possess minimum education and experience requirements for that position,
36	as follows:
37	(1) A medical doctorate; or
38	(2) <u>A masters degree in Public Health Administration, and at least one year</u>
39	of employment experience in health programs or health services; or
40	(3) A masters degree in a public health discipline other than public health
41	administration, and at least three years of employment experience in
42	health programs or health services; or

1	(4) <u>A masters degree in public administration, and at least two years of</u>
2	experience in health programs or health services; or
3	(5) <u>A masters degree in a field related to public health, and at least three</u>
4	years of experience in health programs or health services; or
5	(6) <u>A bachelors degree in public health administration or public</u>
6	administration and at least three years of experience in health programs
7	or health services.
8	(c) Before appointing a person to the position of public health authority director
9	under subdivision (a)(5) of this section, the authority board shall forward the application
10	and other pertinent materials of such candidate to the State Health Director. If the State
11	Health Director determines that the candidate's masters degree is in a field not related to
12	public health, the State Health Director shall so notify the authority board in writing
13	within 15 days of the State Health Director's receipt of the application and materials, and
14	such candidate shall be deemed not to meet the education requirements of subdivision
15	(a)(5) of this section. If the State Health Director fails to act upon the application within
16	15 days of receipt of the application and materials from the authority board, the
17	application shall be deemed approved with respect to the education requirements of
18	subdivision (a)(5) of this section, and the authority board may proceed with the
19	appointment process.
20	(d) The State Health Director shall review requests of educational institutions to
21	determine whether a particular masters degree offered by the requesting institution is
22	related to public health for the purposes of subdivision (a)(5) of this section. The State
23	Health Director shall act upon such requests within 90 days of receipt of the request and
24	pertinent materials from the institution, and shall notify the institution of its
25	determination in writing within the 90-day review period. If the State Health Director
26	determines that an institution's particular masters degree is not related to public health,
27	the State Health Director shall include the reasons therefor in his written determination to
28	the institution.
29	(e) When an authority board fails to appoint a public health authority director
30	within 60 days of the creation of a vacancy, the State Health Director may appoint an
31	authority director to serve until the authority board appoints an authority director in
32	accordance with this section.
33	" <u>§ 130A-45.5. Powers and duties of a public health authority director.</u>
34	(a) The public health authority director is an employee of the authority board and
35	shall serve at the pleasure of the authority board.
36	(b) An authority health director shall perform public health duties prescribed by
37	and under the supervision of the public health authority board and the Department and
38	shall be employed full time in the field of public health.
39	(c) An authority health director shall have the following powers and duties:
40	(1) To administer programs as directed by the public health authority board;
41	(2) <u>To enforce the rules of the public health authority board;</u>
42	(3) To investigate the causes of infectious, communicable, and other
43	diseases;

1	<u>(4)</u>	To exercise quarantine authority and isolation authority pursuant to G.S.
2		<u>130A-145;</u>
3	<u>(5)</u>	To disseminate public health information and to promote the benefits of
4		good health;
5	<u>(6)</u>	To advise local officials concerning public health matters;
6	<u>(7)</u>	To enforce the immunization requirements of Part 2 of Article 7 of this
7		Chapter;
8	<u>(8)</u>	To examine and investigate cases of venereal disease pursuant to Parts 3
9		and 4 of Article 6 of this Chapter;
10	<u>(9)</u>	To examine and investigate cases of tuberculosis pursuant to Part 5 of
11		Article 6 of this Chapter;
12	<u>(10)</u>	To examine, investigate, and control rabies pursuant to Part 6 of Article
13		<u>6 of this Chapter;</u>
14	<u>(11)</u>	To abate public health nuisances and imminent hazards pursuant to G.S.
15		<u>130A-19 and G.S. 130A-20;</u>
16	<u>(12)</u>	To employ, discipline, and dismiss employees of the public health
17		authority.
18		ority conferred upon a public health authority director may be exercised
19	-	county or counties comprising the public health authority.
20		Boundaries of the authority.
21	-	alth authority may provide or contract to provide public health services
22	-	construct, establish, enlarge, improve, maintain, own, or operate, and
23		operation of any public health facilities outside the territorial limits,
24		le limitation, of the county or counties creating the authority, but in no
25	-	blic health authority be held liable for damages to those outside the
26		of the county or counties creating the authority for failure to provide any
27	public health ser	
28		Medical review committee.
29		mber of a duly appointed medical review committee who acts without
30		shall not be subject to liability for damages in any civil action on account
31		ment, or proceeding undertaken, made, or performed within the scope of
32	the functions of	
33	• • • •	roceedings of a medical review committee, the records and materials it
34	*	e materials it considers shall be confidential and not considered public
35		he meaning of G.S. 132-1, " Public records" defined', and shall not be
36		very or introduction into evidence in any civil action against a public
37		or a provider of professional health services which results from matters
38		ibject of evaluation and review by the committee. No person who was in
39		neeting of the committee shall be required to testify in any civil action as
40	•	or other matters produced or presented during the proceedings of the
41		to any findings, recommendations, evaluations, opinions, or other actions
42		e or its members. However, information, documents, or records otherwise
43	available are no	t immune from discovery or use in a civil action merely because they

were presented during proceedings of the committee. A member of the committee or a 1 2 person who testifies before the committee may testify in a civil action but cannot be 3 asked about his testimony before the committee or any opinions formed as a result of the 4 committee hearings. 5 "§ 130A-45.8. Confidentiality of patient information. 6 (a) Medical records compiled and maintained by public health authorities in 7 connection with the admission, treatment, and discharge of individual patients are not 8 public records as defined by Chapter 132 of the General Statutes. 9 (b)Charges, accounts, credit histories, and other personal financial records 10 compiled and maintained by public health authorities in connection with the admission, treatment, and discharge of individual patients are not public records as defined by 11 12 Chapter 132 of the General Statutes. "§ 130A-45.9. Confidentiality of personnel information. 13 14 (a) Except as provided in subsection (b) of this section, the personnel files of 15 employees or former employees, and the files of applicants for employment maintained by a public health authority are not public records as defined by Chapter 132 of the 16 17 General Statutes. 18 (b)The following information with respect to each employee of a public health authority is a matter of public record: name; age; date of original employment or 19 20 appointment; beginning and ending dates, position title, position descriptions, and total 21 compensation of current and former positions; and date of the most recent promotion, demotion, transfer, suspension, separation, or other change in position classification. In 22 23 addition, the following information with respect to each licensed medical provider 24 employed by or having privileges to practice in a public health facility shall be a matter of public record: educational history and qualifications, date and jurisdiction or original 25 and current licensure; and information relating to medical board certifications or other 26 qualifications of medical specialists. 27 Information regarding the qualifications, competence, performance, character, 28 (c)fitness, or conditions of appointment of an independent contractor who provides health 29 30 care services under a contract with a public health authority is not a public record as defined by Chapter 132 of the General Statutes. Information regarding a hearing or 31 investigation of a complaint, charge, or grievance by or against an independent contractor 32 who provides health care services under a contract with a public health authority is not a 33 public record as defined by Chapter 132 of the General Statutes. Final action making an 34 appointment or discharge or removal by a public health authority having final authority 35 for the appointment or discharge or removal shall be taken in an open meeting, unless 36 otherwise exempted by law. The following information with respect to each independent 37 38 contractor of health care services of a public health authority is a matter of public record: name; age; date of original contract; beginning and ending dates; position title; position 39 40 descriptions; and total compensation of current and former positions; and the date of the most recent promotion, demotion, transfer, suspension, separation, or other change in 41 42 position classification.

43 "§ 130A-45.10. Confidentiality of credentialing information.

1	Information acquired by a public health authority or by persons acting for or on behalf
2	of a public health authority in connection with the credentialing and peer review of
3	persons having or applying for privileges to practice in a public health facility is
4	confidential and is not a public record under Chapter 132 of the General Statutes;
5	provided that information otherwise available to the public shall not become confidential
6	merely because it was acquired by the authority or by persons acting for or on behalf of
7	the authority.
8	" <u>§ 130A-45.11. Confidentiality of competitive health care information.</u>
9	Information relating to competitive health care activities by or on behalf of public
10	health authorities shall be confidential and not a public record under Chapter 132 of the
11	General Statutes; provided that any contract entered into by or on behalf of a public
12	health authority shall be a public record unless otherwise exempted by law."
13	Section 2. (a) G.S. 130A-2(4) reads as rewritten:
14	"(4) 'Local board of health' means a district board of health <u>or a public health</u>
15	<u>authority board or a county board of health.</u> "
16	(b) G.S. 130A-2(5) reads as rewritten:
17	"(5) 'Local health department' means a district health department <u>or a public</u>
18	health authority or a county health department."
19	Section 3. G.S. 105-164.14(c)(9) of the General Statutes reads as written:
20	"(9) A district health department. district health department, or a public health
21	authority created pursuant to Part 1A of Article 2 of Chapter 130A of
22	the General Statutes."
23	Section 4. G.S. 128-37 of the General Statutes reads as rewritten:
24	"§ 128-37. Membership of employees of district health departments. district health
25 26	departments, or public health authorities.
26 27	Under such rules and regulations as the Board of Trustees shall establish and
27 28	promulgate, the boards of county commissioners of any group of counties composing a district health department, or the governing heard of any public health authority, or the
28 29	district health department, or the governing board of any public health authority, or the
29 30	board of county commissioners of any county as to county boards of health, or the governing authorities of any county and/or city as to city-county boards of health, may
30 31	
32	elect that employees of such health departments may be members of the North Carolina Local Governmental Employees' Retirement System to the extent of that part of their
33	compensation paid by the various counties composing said district health department."
33 34	Section 5. G.S. 153A-77.1 of the General Statutes reads as rewritten:
35	"§ 153A-77.1. Single portal of entry.
36	A county may develop for human services a single portal of entry, a consolidated case
37	management system, and a common data base; provided that if the county is part of a
38	district health department or multicounty public health authority or a multi-county
38 39	<u>multicounty</u> area mental health, developmental disabilities, and substance abuse
40	authority, such action must be approved by the district board of health or public health
40 41	<u>authority board or the area mental health, developmental disabilities, and substance abuse</u>
42	board to affect any matter within the jurisdiction of that board. Nothing in this section
43	shall be construed to abrogate a patient's right to confidentiality as provided by law."
15	shan ee constated to dorogate a parento right to confidentiality as provided by law.

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Section 6. G.S. 153A-149(13) of the General Statutes reads as rewritten:

- "(13) Health. To provide for the county's share of maintaining and administering services offered by or through the county or district local health department."
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Section 7. G.S. 106-266.17 reads as rewritten:

"§ 106-266.17. Marketing agreements not to be deemed illegal or in restraint of trade; conflicting laws.

8 The making of marketing agreements between producers' cooperative marketing 9 associations and distributors and producer- distributors under the provisions of this 10 Article shall not be deemed a combination in restraint of trade or an illegal monopoly, or an attempt to lessen competition or fix prices arbitrarily nor shall the marketing contract 11 12 or agreements between the association and the distributors and producer-distributors, or any agreements authorized in this Article, be considered illegal or in restraint of trade. All 13 14 laws and clauses of laws in conflict with the provisions of this Article are hereby repealed 15 to the extent necessary for the full operation of this Article. No provisions of this Article shall be deemed in conflict with Articles 28 and 28A of Chapter 106 of the General 16 17 Statutes. No provisions of this Article shall be deemed in conflict with the authority 18 granted to county, city-county and district local boards of health by G.S. 130-19, 130-20, 130-66, to make and enforce rules and regulations governing milk sanitation or with the 19 20 authority granted to the Department of Human Resources by G.S. 130-3 to make sanitary 21 inquiries and investigations."

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Section 8. G.S. 88-28.1 reads as rewritten:

23 "§ 88-28.1. Restraining orders against persons engaging in illegal practices.

24 If it is found that any licensed cosmetologist, cosmetic art shop, or other person subject to the provisions of this Chapter is violating any rules and regulations adopted by 25 the State Board of Cosmetic Art Examiners or any provisions of G.S. 88-28, then the 26 27 Department of Human Resources, any county or district-local health director, or the State Board of Cosmetic Art Examiners shall give notice to the person of the violation and 28 29 apply to the superior court for injunctive relief to restrain such person from continuing such illegal practices. If, upon such application, it shall appear to the court that such 30 person has violated and/or is violating any of the said rules and regulations or any 31 provisions of Chapter 88, section 28, of the General Statutes of North Carolina G.S. 88-32 33 28, the court may issue an order restraining any further violations thereof. All such actions for injunctive relief shall be governed by the provisions of Article 37 of Chapter 34 35 1 of the General Statutes: Provided, such injunctive relief may be granted regardless of whether criminal prosecution has been or may be instituted under any of the provisions of 36 37 this Chapter. Actions under this section shall be commenced in the county in which the 38 respondent resides or has his principal place of business or in which the alleged acts 39 occurred."

40 Section 9. G.S. 143-215.7 reads as rewritten:

41 "§ 143-215.7. Effect on laws applicable to public water supplies and the sanitary 42 disposal of sewage.

1 2 3 4 5 6 7	abridging or inte Statutes relating Article be conse Department to Chapter 130A of	e shall not be construed as amending, repealing, or in any manner erfering with the provisions of Article 10 of Chapter 130A of the General g to the control of public water supplies; nor shall the provisions of this trued as being applicable to or in anywise affecting the authority of the control the sanitary disposal of sewage as provided in Article 11 of of the General Statutes, or as affecting the powers, duties and authority of nty-city and district-local health departments usually referred to as local health
8	-	as affecting the charter powers, or other lawful authority of municipal
9 10	· ·	pass ordinances in regard to sewage disposal." on 10. G.S. 130A-140 reads as rewritten:
11		Local health directors to report.
12		alth director shall report to the Department all cases of diseases or
13		aboratory findings of residents of the jurisdiction of the local health
14		ch are reported to the local health director pursuant to this Article. A
15	local health dire	ector shall report all other cases and laboratory findings reported pursuant
16	to this Article	to the local health director of the eounty or district county, district or
17	authority where	the person with the reportable disease or condition or laboratory finding
18	resides."	
19		on 11. G.S. 120-196 reads as rewritten:
20		ee editor's note) Commission duties.
21		ssion shall study the availability and accessibility of public health services
22		roughout the State. In conducting the study the Commission shall:
23	(1)	Determine whether the public health services currently available in each
24		county or district local health department conform to the mission and
25		essential services established under G.S. 130A-1.1;
26	(2)	Study the workforce needs of each county or district health local
27		department, including salary levels, professional credentials, and
28		continuing education requirements, and determine the impact that
29		shortages of public health professional personnel have on the delivery of
30 31	(2)	public health services in county and district <u>local</u> health departments; Review the status and needs of local health departments relative to
32	(3)	facilities, and the need for the development of minimum standards
33		governing the provision and maintenance of these facilities;
34	(4)	Propose a long-range plan for funding the public health system, which
35	(+)	plan shall include a review and evaluation of the current structure and
36		financing of public health in North Carolina and any other
37		recommendations the Commission deems appropriate based on its study
38		activities;
39	(5)	Conduct any other studies or evaluations the Commission considers
40		necessary to effectuate its purpose; and
41	(6)	Study the capacity of small counties to meet the core public health
42		functions mandated by current State and federal law. The Commission
43		shall consider whether the current county and district local health

1	departments should be organized into a network of larger multidistrict
2	community administrative units. In making its recommendations on this
3	study, the Commission shall consider whether the State should establish
4	minimum populations for local health departments, and if so, shall
5	recommend the number of and configuration for these multicounty
6	administrative units and shall recommend a series of incentives to ease
7	county transition into these new arrangements."
8	Section 12 This act becomes effective January 1 1998 and applies to

8 Section 12. This act becomes effective January 1, 1998, and applies to 9 contracts and agreements entered into on or after that date.