

GENERAL ASSEMBLY OF NORTH CAROLINA

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SENATE BILL 636  
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Short Title: Public Health Authority Act.

(Public)

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Sponsors:

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Referred to:

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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 **"PART 1A. PUBLIC HEALTH AUTHORITIES AUTHORIZED.**

9 **"§ 130A-43. Title and purpose.**

10 (a) This Part shall be known and may be cited as the 'Public Health Authorities  
11 Act'.

12 (b) The purpose of this Part is to provide an alternative method for counties to  
13 provide public health services. This Part shall not be regarded as repealing any powers  
14 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.

**"§ 130A-44. Definitions.**

As used in this Part, unless otherwise specified:

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

**"§ 130A-45. Creation of a public health authority.**

1 (a) A public health authority may be created whenever a county board of  
2 commissioners finds and adopts a resolution finding that it is in the interest of the public  
3 health and welfare to create a public health authority to provide public health services as  
4 required under G.S. 130A-34.

5 (b) A public health authority including more than one county may be formed upon  
6 joint resolution of the county boards of commissioners and local boards of health having  
7 jurisdiction over each of the counties involved.

8 (c) After the adoption of a resolution creating a public health authority, a public  
9 health authority board shall be appointed in accordance with G.S. 130A-45.1.

10 (d) A county may join a public health authority upon joint resolution of the boards  
11 of commissioners and local boards of health having jurisdiction over each of the counties  
12 involved.

13 (e) A public health authority board shall govern the public health authority. All  
14 powers, duties, functions, rights, privileges, or immunities conferred on the public health  
15 authority may be exercised by the authority board.

16 (f) The public health authority board shall absorb the functions, assets, and  
17 liabilities of the county or district boards of health, and that board is dissolved.

18 (g) For the purpose of Chapter 159 of the General Statutes, a public health  
19 authority is a public authority as defined in G.S. 159-7(b)(10).

20 (h) Before adopting a resolution creating a public health authority, the county  
21 board of commissioners shall hold a public hearing with notice published at least 10 days  
22 before the hearing.

23 (i) For the purposes of Article 9 of Chapter 131E of the General Statutes, a public  
24 health authority is a person as defined in G.S. 131E-176(19).

25 **§ 130A-45.1. Membership of the public health authority board.**

26 (a) A public health authority board shall be the policy-making, rule-making, and  
27 adjudicatory body for a public health authority and shall be composed of no fewer than  
28 seven members and no more than nine members; except that in an authority comprising  
29 two or more counties, the board shall be composed of no more than 11 members.

30 (b) In a single county authority, the county board of commissioners shall appoint  
31 the members of the board; in an authority comprising two or more counties, the chair of  
32 the county board of commissioners of each county in the authority shall appoint one  
33 county commissioner, or the commissioner's express designee, to the authority board and  
34 these members shall jointly appoint the other members of the board.

35 (c) The members of the board shall include:

36 (1) At least one physician licensed under Chapter 90 of the General Statutes  
37 to practice medicine in this State;

38 (2) At least one county commissioner or the commissioner's express  
39 designee from each county in the authority;

40 (3) At least three licensed or registered professionals from any of the  
41 following professions: dentistry, optometry, veterinary science,  
42 nursing, pharmacy, engineering, or accounting;

1           (4) At least one member from the administrative staff of a hospital serving  
2           the authority service area; and

3           (5) At least one member from the general public.

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 authority director shall serve  
14 as secretary to the board.

15           (i) A majority of the members shall constitute a quorum.

16           (j) A member may be removed from office by the board for any of the following:

17               (1) Commission of a felony or other crime involving moral turpitude.

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 (c) 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           (l) The board shall meet at least quarterly. The chair or three of the members may  
31 call a special meeting.

32 **"§ 130A-45.2. Dissolution of a public health authority.**

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 dissolution shall be distributed to those counties comprising the authority on the same pro  
3 rata basis that the counties appropriated and contributed funds to the authority's budget  
4 during the current fiscal year. Distribution to the counties shall be determined on the  
5 basis of an audit of the financial record of the authority. The public health authority board  
6 shall select a certified public accountant or an accountant who is subsequently certified  
7 by the Local Government Commission to conduct the audit. The audit shall be performed  
8 in accordance with G.S. 159-34. The same method of distribution of funds described  
9 above shall apply when one or more counties of an authority withdraw from the  
10 authority.

11       (d) Upon dissolution or withdrawal, all rules adopted by the board continue in  
12 effect until amended or repealed by the new authority board or boards of health.

13 **"§ 130A-45.3. Powers and duties of authority board.**

14       (a) A public health authority shall have all the powers necessary or convenient to  
15 carry out the purposes of this Part, including the following powers to:

- 16       (1) Protect and promote the public health. The board shall have the  
17 authority to adopt rules necessary for that purpose.
- 18       (2) Construct, equip, operate, and maintain public health facilities.
- 19       (3) Use property owned or controlled by the authority.
- 20       (4) 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       (5) Establish a fee schedule for services received from public health  
24 facilities and make services available regardless of ability to pay.
- 25       (6) Appoint a public health authority director to serve at the pleasure of the  
26 authority board.
- 27       (7) Establish a salary plan which shall set the salaries for employees of the  
28 area authority.
- 29       (8) 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 permission of the public health authority director.
- 38       (9) Delegate to its agents or employees any powers or duties as it may deem  
39 appropriate.
- 40       (10) Employ its own counsel and legal staff.
- 41       (11) Adopt, amend, and repeal bylaws for the conduct of its business.
- 42       (12) Enter into contracts for necessary supplies, equipment, or services for  
43 the operation of its business.

- 1           (13) Act as an agent for the federal, State, or local government in connection  
2           with the acquisition, construction, operation, or management of a public  
3           health facility, or any part thereof.
- 4           (14) Insure the property or the operations of the authority against risks as the  
5           authority may deem advisable.
- 6           (15) Sue and be sued.
- 7           (16) Accept donations or money, personal property, or real estate for the  
8           benefit of the authority and to take title to the same from any person,  
9           firm, corporation, or society.
- 10          (17) Appoint advisory boards, committees, and councils composed of  
11          qualified and interested residents of the authority service area to study,  
12          interpret, and advise the public health authority board.
- 13          (b) A public health authority shall have the power to establish and operate health  
14          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) A public health authority shall neither sell nor convey any rights of ownership  
30          the 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) A public health authority may lease any public health facility, or part, to any  
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) A public health authority may exercise any or all of the powers conferred upon  
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       (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  
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  
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 (g) of this section, any person, or in the event of death, their personal representative,  
17 sustaining damages as a result of an act or omission of the authority or any of its board  
18 members, agents, or employees, occurring in the exercise of a governmental function,  
19 may sue the authority for recovery of damages. To the extent of the coverage of insurance  
20 purchased pursuant to subsection (g) of this section, governmental immunity may not be  
21 a defense to the action. Otherwise, however, the authority has all defenses available to  
22 private litigants in any action brought pursuant to this section without restriction,  
23 limitation, or other effect, whether the defense arises from common law or by virtue of a  
24 statute.

25       Despite the purchase of insurance as authorized by subsection (g) of this section, the  
26 liability of an authority for acts or omissions occurring in the exercise of governmental  
27 functions does not attach unless the plaintiff waives the right to have all issues of law or  
28 fact relating to insurance in the action determined by a jury. The judge shall hear and  
29 determine these issues without resort to a jury, and the jury shall be absent during any  
30 motion, argument, testimony, or announcement of findings of fact or conclusions of law  
31 relating to these issues unless the defendant requests a jury trial on them.

32 **"§ 130A-45.4. Appointment of a public health authority director.**

33       (a) A public health authority board, after consulting with the appropriate county  
34 board or boards of commissioners, shall appoint a public health authority director.

35       (b) All persons who are appointed to the position of public health authority  
36 director must possess minimum education and experience requirements for that position,  
37 as follows:

38           (1) A medical doctorate; or

39           (2) A masters degree in Public Health Administration, and at least one year  
40 of employment experience in health programs or health services; or

41           (3) A masters degree in a public health discipline other than public health  
42 administration, and at least three years of employment experience in  
43 health programs or health services; or

1           (4) A masters degree in public administration, and at least two years of  
2           experience in health programs or health services; or

3           (5) A masters degree in a field related to public health, and at least three  
4           years of experience in health programs or health services; or

5           (6) A bachelors degree in public health administration or public  
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 **"§ 130A-45.5. Powers and duties of a public health authority director.**

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) To enforce the rules of the public health authority board;

42           (3) To investigate the causes of infectious, communicable, and other  
43           diseases;



- 1           (4)    To exercise quarantine authority and isolation authority pursuant to G.S.  
2                130A-145;  
3           (5)    To disseminate public health information and to promote the benefits of  
4                good health;  
5           (6)    To advise local officials concerning public health matters;  
6           (7)    To enforce the immunization requirements of Part 2 of Article 7 of this  
7                Chapter;  
8           (8)    To examine and investigate cases of venereal disease pursuant to Parts 3  
9                and 4 of Article 6 of this Chapter;  
10          (9)    To examine and investigate cases of tuberculosis pursuant to Part 5 of  
11                Article 6 of this Chapter;  
12          (10) To examine, investigate, and control rabies pursuant to Part 6 of Article  
13                6 of this Chapter;  
14          (11) To abate public health nuisances and imminent hazards pursuant to G.S.  
15                130A-19 and G.S. 130A-20; and  
16          (12) To employ, discipline, and dismiss employees of the public health  
17                authority.

18          (d)    Authority conferred upon a public health authority director may be exercised  
19                only within the county or counties comprising the public health authority.

20          **"§ 130A-45.6. Boundaries of the authority.**

21                A public health authority may provide or contract to provide public health services  
22                and to acquire, construct, establish, enlarge, improve, maintain, own, or operate, and  
23                contract for the operation of any public health facilities outside the territorial limits,  
24                within reasonable limitation, of the county or counties creating the authority, but in no  
25                case shall a public health authority be held liable for damages to those outside the  
26                territorial limits of the county or counties creating the authority for failure to provide any  
27                public health service.

28          **"§ 130A-45.7. Medical review committee.**

29                (a) A member of a duly appointed medical review committee who acts without  
30                malice or fraud shall not be subject to liability for damages in any civil action on account  
31                of any act, statement, or proceeding undertaken, made, or performed within the scope of  
32                the functions of the committee.

33                (b) The proceedings of a medical review committee, the records and materials it  
34                produces and the materials it considers shall be confidential and not considered public  
35                records within the meaning of G.S. 132-1, "' Public records" defined', and shall not be  
36                subject to discovery or introduction into evidence in any civil action against a public  
37                health authority or a provider of professional health services which results from matters  
38                which are the subject of evaluation and review by the committee. No person who was in  
39                attendance at a meeting of the committee shall be required to testify in any civil action as  
40                to any evidence or other matters produced or presented during the proceedings of the  
41                committee or as to any findings, recommendations, evaluations, opinions, or other actions  
42                of the committee or its members. However, information, documents, or records otherwise  
43                available are not immune from discovery or use in a civil action merely because they

1 were presented during proceedings of the committee. A member of the committee or a  
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,  
11 treatment, and discharge of individual patients are not public records as defined by  
12 Chapter 132 of the General Statutes.

13 **"§ 130A-45.9. Confidentiality of personnel information.**

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  
16 a public health authority are not public records as defined by Chapter 132 of the General  
17 Statutes.

18 (b) The following information with respect to each employee of a public health  
19 authority is a matter of public record: name; age; date of original employment or  
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,  
22 demotion, transfer, suspension, separation, or other change in position classification. In  
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  
25 of public record: educational history and qualifications, date and jurisdiction or original  
26 and current licensure; and information relating to medical board certifications or other  
27 qualifications of medical specialists.

28 (c) Information regarding the qualifications, competence, performance, character,  
29 fitness, or conditions of appointment of an independent contractor who provides health  
30 care services under a contract with a public health authority is not a public record as  
31 defined by Chapter 132 of the General Statutes. Information regarding a hearing or  
32 investigation of a complaint, charge, or grievance by or against an independent contractor  
33 who provides health care services under a contract with a public health authority is not a  
34 public record as defined by Chapter 132 of the General Statutes. Final action making an  
35 appointment or discharge or removal by a public health authority having final authority  
36 for the appointment or discharge or removal shall be taken in an open meeting, unless  
37 otherwise exempted by law. The following information with respect to each independent  
38 contractor of health care services of a public health authority is a matter of public record:  
39 name; age; date of original contract; beginning and ending dates; position title; position  
40 descriptions; and total compensation of current and former positions; and the date of the  
41 most recent promotion, demotion, transfer, suspension, separation, or other change in  
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 **"§ 130A-45.11. Confidentiality of competitive health care information.**

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 or a public health  
15 authority board or a county board of health."

16 (b) G.S. 130A-2(5) reads as rewritten:

17 "(5) 'Local health department' means a district health department or a public  
18 health authority or a county health department."

19 Section 3. G.S. 105-164.14(c)(9) 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 reads as rewritten:

24 **"§ 128-37. Membership of employees of ~~district health departments.~~ district health**  
25 **departments or public health authorities.**

26 Under such rules and regulations as the Board of Trustees shall establish and  
27 promulgate, the boards of county commissioners of any group of counties composing a  
28 district health department, or the governing board of any public health authority, or the  
29 board of county commissioners of any county as to county boards of health, or the  
30 governing authorities of any county and/or city as to city-county boards of health, may  
31 elect that employees of such health departments may be members of the North Carolina  
32 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."

34 Section 5. G.S. 153A-77.1 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~~  
39 multicounty area mental health, developmental disabilities, and substance abuse  
40 authority, such action must be approved by the district board of health or public health  
41 authority board or the area mental health, developmental disabilities, and substance abuse  
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."

1 Section 6. G.S. 153A-149(13) reads as rewritten:

2 "(13) Health. – To provide for the county's share of maintaining and  
3 administering services offered by or through the ~~county or district~~ local  
4 health department."

5 Section 7. G.S. 106-266.17 reads as rewritten:

6 **"§ 106-266.17. Marketing agreements not to be deemed illegal or in restraint of**  
7 **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  
11 an attempt to lessen competition or fix prices arbitrarily nor shall the marketing contract  
12 or agreements between the association and the distributors and producer-distributors, or  
13 any agreements authorized in this Article, be considered illegal or in restraint of trade. All  
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  
16 shall be deemed in conflict with Articles 28 and 28A of Chapter 106 of the General  
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,  
19 130-66, to make and enforce rules and regulations governing milk sanitation or with the  
20 authority granted to the Department of Human Resources by G.S. 130-3 to make sanitary  
21 inquiries and investigations."

22 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  
25 subject to the provisions of this Chapter is violating any rules and regulations adopted by  
26 the State Board of Cosmetic Art Examiners or any provisions of G.S. 88-28, then the  
27 Department of Human Resources, any ~~county or district~~ local health director, or the State  
28 Board of Cosmetic Art Examiners shall give notice to the person of the violation and  
29 apply to the superior court for injunctive relief to restrain such person from continuing  
30 such illegal practices. If, upon such application, it shall appear to the court that such  
31 person has violated and/or is violating any of the said rules and regulations or any  
32 provisions of Chapter 88, section 28, of the General Statutes of North Carolina G.S. 88-  
33 28, the court may issue an order restraining any further violations thereof. All such  
34 actions for injunctive relief shall be governed by the provisions of Article 37 of Chapter  
35 1 of the General Statutes: Provided, such injunctive relief may be granted regardless of  
36 whether criminal prosecution has been or may be instituted under any of the provisions of  
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 This Article shall not be construed as amending, repealing, or in any manner  
2 abridging or interfering with the provisions of Article 10 of Chapter 130A of the General  
3 Statutes relating to the control of public water supplies; nor shall the provisions of this  
4 Article be construed as being applicable to or in anywise affecting the authority of the  
5 Department to control the sanitary disposal of sewage as provided in Article 11 of  
6 Chapter 130A of the General Statutes, or as affecting the powers, duties and authority of  
7 ~~city, county, county-city and district~~ local health departments ~~usually referred to as local health~~  
8 ~~departments~~ or as affecting the charter powers, or other lawful authority of municipal  
9 corporations, to pass ordinances in regard to sewage disposal."

10 Section 10. G.S. 130A-140 reads as rewritten:

11 "**§ 130A-140. Local health directors to report.**

12 A local health director shall report to the Department all cases of diseases or  
13 conditions or laboratory findings of residents of the jurisdiction of the local health  
14 department which are reported to the local health director pursuant to this Article. A  
15 local health director shall report all other cases and laboratory findings reported pursuant  
16 to this Article to the local health director of the ~~county or district~~ county, district, or  
17 authority where the person with the reportable disease or condition or laboratory finding  
18 resides."

19 Section 11. G.S. 120-196 reads as rewritten:

20 "**§ 120-196. (See editor's note) Commission duties.**

21 The Commission shall study the availability and accessibility of public health services  
22 to all citizens throughout 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 public health services in ~~county and district~~ local health departments;
- 31 (3) Review the status and needs of local health departments relative to  
32 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. Any county which, on or prior to July 1, 1997, established a  
9 hospital authority board composed of no more than seven members under the provisions  
10 of Part B of Article 2 of Chapter 131E of the General Statutes may, by resolution adopted  
11 by its board of county commissioners and with the approval of the State Health Director,  
12 assign that authority board the power, duties, and responsibilities to provide public health  
13 services as outlined in G.S. 130A-1.1. Thereafter, such authority board shall act as the  
14 local board of health for the county together with such additional powers, duties, and  
15 authority assigned to it by the board of county commissioners.

16 Section 13. This act becomes effective January 1, 1998, and applies to  
17 contracts and agreements entered into on or after that date.