S T A T E O F N E W Y O R K

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2009-2010 Regular Sessions

I N A S S E M B L Y

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Introduced by M. of A. SCHIMMINGER, JAFFEE, FIELDS, DelMONTE, GALEF -- Multi-Sponsored by -- M. of A. BOYLAND, HOOPER, KOON, MAISEL, REILLY, ROBINSON, WEISENBERG -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to enacting the state emergency health powers act

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Legislative intent. In the wake of the tragic events of September 11, 2001, our nation realizes that the government's foremost responsibility is to protect the health, safety and well being of its citizens. New and emerging dangers, including emergent and resurgent infectious diseases and incidents of civilian mass casualties, pose serious and immediate threats to the population. A renewed focus on the prevention, detection, management and containment of public health emergencies is thus called for.

Emergency health threats, including those caused by bioterrorism and epidemics, require the exercise of essential government functions. Because each state is responsible for safeguarding the health, security and well being of its people, the state and local governments must be able to respond, rapidly and effectively, to public health emergencies. The state emergency health powers act therefore grants specific emergency powers to the governor and public health authorities.

This act requires the development of a comprehensive plan to provide a coordinated, appropriate response in the event of a public health emergency. It facilitates the early detection of a health emergency by authorizing the reporting and collection of data and records, and allows for immediate investigation by granting access to individuals' health information under specified circumstances. During a public health emergency, state and local officials are authorized to use and appropriate property as necessary for the care, treatment and housing of patients,

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [ ] is old law to be omitted.

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and to destroy contaminated facilities or materials. They are also empowered to provide care, testing and treatment, and vaccination to persons who are ill or who have been exposed to a contagious disease, and to separate affected individuals from the population at large to interrupt disease transmission.

At the same time, this act recognizes that the state's ability to respond to a public health emergency must respect the dignity and rights of persons. The exercise of emergency health powers is designed to promote the common good. Emergency powers must be grounded in a thorough scientific understanding of public health threats and disease transmission. Guided by principles of justice, state and local governments have a duty to act with fairness and tolerance towards individuals and groups. This act thus provides that, in the event of the exercise of emergency powers, the civil rights, liberties and needs of infected or exposed persons will be protected to the fullest extent possible consistent with the primary goal of controlling serious health threats.

Public health laws and our courts have traditionally balanced the common good with individual civil liberties. As Justice Harlan wrote in the seminal United States Supreme Court case of JACOBSON V. MASSACHUSETTS, "the whole people covenants with each citizen, and each citizen with the whole people, that all shall be governed by certain laws for the 'common good'". The provisions of this act strike such a balance. It provides state and local officials with the ability to prevent, detect, manage and contain emergency health threats without unduly interfering with civil rights and liberties. This act ensures a strong, effective and timely response to public health emergencies, while fostering respect for individuals from all groups and backgrounds.

Although modernizing the public health law is an important part of protecting the population during public health emergencies, the public health system itself needs improvement. Preparing for a public health emergency requires a well trained public health workforce, efficient data systems, and sufficient laboratory capacity.

S 2. The public health law is amended by adding a new article 10 to read as follows:

ARTICLE 10

STATE EMERGENCY HEALTH POWERS ACT

TITLE I. FINDINGS, PURPOSES AND DEFINITIONS (SS 1000-1003).
II. PLANNING FOR A PUBLIC HEALTH EMERGENCY (SS 1005-1006).
III. MEASURES TO DETECT AND TRACK PUBLIC HEALTH EMERGENCIES (SS 1010-1012).
IV. DECLARING STATE OF PUBLIC HEALTH EMERGENCY (SS 1020-1024).
V. SPECIAL POWERS DURING STATE OF PUBLIC HEALTH EMERGENCY; MANAGEMENT OF PROPERTY (SS 1030-1036).
VI. SPECIAL POWERS DURING STATE OF PUBLIC HEALTH EMERGENCY; PROTECTION OF PERSONS (SS 1040-1047).
VII. PUBLIC INFORMATION REGARDING PUBLIC HEALTH EMERGENCIES (SS 1050-1051).
VIII. MISCELLANEOUS (SS 1070-1077).

TITLE I

FINDINGS, PURPOSES AND DEFINITIONS

SECTION 1000. SHORT TITLE.
1001. LEGISLATIVE FINDINGS.
1002. PURPOSES.
1003. DEFINITIONS.

S 1000. SHORT TITLE. THIS ARTICLE SHALL BE KNOWN AND MAY BE CITED AS THE "STATE EMERGENCY HEALTH POWERS ACT".

S 1001. LEGISLATIVE FINDINGS. THE LEGISLATURE FINDS THAT:
1. THE STATE MUST DO MORE TO PROTECT THE HEALTH, SAFETY AND GENERAL WELL BEING OF ITS CITIZENS.
2. NEW AND EMERGING DANGERS, INCLUDING EMERGENT AND RESURGENT INFECTIOUS DISEASES AND INCIDENTS OF CIVILIAN MASS CASUALTIES, POSE SERIOUS AND IMMEDIATE THREATS.
3. A RENEWED FOCUS ON THE PREVENTION, DETECTION, MANAGEMENT AND CONTAINMENT OF PUBLIC HEALTH EMERGENCIES IS NEEDED.
4. EMERGENCY HEALTH THREATS, INCLUDING THOSE CAUSED BY BIOTERRORISM MAY REQUIRE THE EXERCISE OF EXTRAORDINARY GOVERNMENT POWERS AND FUNCTIONS.
5. THE STATE MUST HAVE THE ABILITY TO RESPOND, RAPIDLY AND EFFECTIVELY, TO POTENTIAL OR ACTUAL PUBLIC HEALTH EMERGENCIES.
6. THE EXERCISE OF EMERGENCY HEALTH POWERS MUST PROMOTE THE COMMON GOOD.
7. EMERGENCY HEALTH POWERS MUST BE GROUNDED IN A THOROUGH SCIENTIFIC UNDERSTANDING OF PUBLIC HEALTH THREATS AND DISEASE TRANSMISSION.
8. GUIDED BY PRINCIPLES OF JUSTICE AND ANTIDISCRIMINATION, IT IS THE DUTY OF THE STATE TO ACT WITH FAIRNESS AND TOLERANCE TOWARDS INDIVIDUALS AND GROUPS.
9. THE RIGHTS OF PEOPLE TO LIBERTY, BODILY INTEGRITY AND PRIVACY MUST BE RESPECTED TO THE FULLEST EXTENT POSSIBLE CONSISTENT WITH MAINTAINING AND PRESERVING THE PUBLIC'S HEALTH AND SECURITY.
10. THIS ARTICLE IS NECESSARY TO PROTECT THE HEALTH AND SAFETY OF THE CITIZENS OF THE STATE.

S 1002. PURPOSES. THE PURPOSES OF THIS ARTICLE ARE:
1. TO REQUIRE THE DEVELOPMENT OF A COMPREHENSIVE PLAN TO PROVIDE FOR A COORDINATED, APPROPRIATE RESPONSE IN THE EVENT OF A PUBLIC HEALTH EMERGENCY;
2. TO AUTHORIZE THE REPORTING AND COLLECTION OF DATA AND RECORDS, THE MANAGEMENT OF PROPERTY, THE PROTECTION OF PERSONS AND ACCESS TO COMMUNICATIONS;
3. TO FACILITATE THE EARLY DETECTION OF A HEALTH EMERGENCY, AND ALLOW FOR IMMEDIATE INVESTIGATION OF SUCH AN EMERGENCY BY GRANTING ACCESS TO INDIVIDUALS' HEALTH INFORMATION UNDER SPECIFIED CIRCUMSTANCES;
4. TO GRANT STATE AND LOCAL OFFICIALS THE AUTHORITY TO USE AND APPROPRIATE PROPERTY AS NECESSARY FOR THE CARE, TREATMENT, VACCINATION AND HOUSING OF PATIENTS, AND TO DESTROY CONTAMINATED FACILITIES OR MATERIALS;
5. TO GRANT STATE AND LOCAL OFFICIALS THE AUTHORITY TO PROVIDE CARE, TREATMENT AND VACCINATION TO PERSONS WHO ARE ILL OR WHO HAVE BEEN EXPOSED TO CONTAGIOUS DISEASES, AND TO SEPARATE AFFECTED INDIVIDUALS FROM THE POPULATION AT LARGE TO INTERRUPT DISEASE TRANSMISSION;
6. TO ENSURE THAT THE NEEDS OF INFECTED OR EXPOSED PERSONS ARE PROPERLY ADDRESSED TO THE FULLEST EXTENT POSSIBLE, GIVEN THE PRIMARY GOAL OF CONTROLLING SERIOUS HEALTH THREATS; AND
7. TO PROVIDE STATE AND LOCAL OFFICIALS WITH THE ABILITY TO PREVENT, DETECT, MANAGE AND CONTAIN EMERGENCY HEALTH THREATS WITHOUT UNDULY INTERFERING WITH CIVIL RIGHTS AND LIBERTIES.

S 1003. DEFINITIONS. FOR THE PURPOSES OF THIS ARTICLE:
1. "BIOTERRORISM" IS THE INTENTIONAL USE OF ANY MICROORGANISM, VIRUS, INFECTIOUS SUBSTANCE, OR BIOLOGICAL PRODUCT THAT MAY BE ENGINEERED AS A RESULT OF BIOTECHNOLOGY, OR ANY NATURALLY OCCURRING OR BIOENGINEERED COMPONENT OF ANY SUCH MICROORGANISM, VIRUS, INFECTIOUS SUBSTANCE OR BIOLOGICAL PRODUCT, TO CAUSE DEATH, DISEASE OR OTHER BIOLOGICAL MALFUNCTION IN A HUMAN, AN ANIMAL, A PLANT OR ANOTHER LIVING ORGANISM IN ORDER

TO INFLUENCE THE CONDUCT OF GOVERNMENT, OR TO INTIMIDATE OR COERCE A CIVILIAN POPULATION.

2. "CHAIN OF CUSTODY" IS THE METHODOLOGY OF TRACKING SPECIMENS FOR THE PURPOSE OF MAINTAINING CONTROL AND ACCOUNTABILITY FROM INITIAL COLLECTION TO FINAL DISPOSITION OF THE SPECIMENS, AND PROVIDING FOR ACCOUNTABILITY AT EACH STAGE OF COLLECTING, HANDLING, TESTING, STORING AND TRANSPORTING THE SPECIMENS AND REPORTING TEST RESULTS.

3. "CONTAGIOUS DISEASE" IS AN INFECTIOUS DISEASE THAT CAN BE TRANSMITTED FROM PERSON TO PERSON.

4. "HEALTH CARE FACILITY" MEANS ANY NON-FEDERAL INSTITUTION, BUILDING OR AGENCY, OR PORTION THEREOF, WHETHER PUBLIC OR PRIVATE (PROFIT OR NOT-FOR-PROFIT) THAT IS USED, OPERATED OR DESIGNED TO PROVIDE HEALTH SERVICES, MEDICAL TREATMENT, OR NURSING, REHABILITATIVE OR PREVENTIVE CARE TO ANY PERSON OR PERSONS. THIS INCLUDES, BUT IS NOT LIMITED TO: AMBULATORY SURGICAL FACILITIES, HEALTH MAINTENANCE ORGANIZATIONS, HOME HEALTH AGENCIES, HOSPICES, HOSPITALS, INFIRMARIES, INTERMEDIATE CARE FACILITIES, KIDNEY TREATMENT CENTERS, LONG TERM CARE FACILITIES, MEDICAL ASSISTANCE FACILITIES, MENTAL HEALTH CENTERS, OUTPATIENT FACILITIES, PUBLIC HEALTH CENTERS, REHABILITATION FACILITIES, RESIDENTIAL TREATMENT FACILITIES, SKILLED NURSING FACILITIES AND ADULT DAYCARE CENTERS. THIS ALSO INCLUDES, BUT IS NOT LIMITED TO, THE FOLLOWING RELATED PROPERTY WHEN USED FOR OR IN CONNECTION WITH THE FOREGOING: LABORATORIES, RESEARCH FACILITIES, PHARMACIES, LAUNDRY FACILITIES, HEALTH PERSONNEL TRAINING AND LODGING FACILITIES, PATIENT, GUEST AND HEALTH PERSONNEL FOOD SERVICE FACILITIES, AND OFFICES AND OFFICE BUILDINGS FOR PERSONS ENGAGED IN HEALTH CARE PROFESSIONS OR SERVICES.

5. "HEALTH CARE PROVIDER" IS ANY PERSON OR ENTITY WHO PROVIDES HEALTH CARE SERVICES INCLUDING, BUT NOT LIMITED TO, HOSPITALS, MEDICAL CLINICS AND OFFICES, SPECIAL CARE FACILITIES, MEDICAL LABORATORIES, PHYSICIANS, PHARMACISTS, DENTISTS, PHYSICIAN ASSISTANTS, NURSE PRACTITIONERS, REGISTERED AND OTHER NURSES, PARAMEDICS, EMERGENCY MEDICAL OR LABORATORY TECHNICIANS, AND AMBULANCE AND EMERGENCY MEDICAL WORKERS.

6. "INFECTIOUS DISEASE" IS A DISEASE CAUSED BY A LIVING ORGANISM OR OTHER PATHOGEN, INCLUDING A FUNGUS, BACILLUS, PARASITE, PROTOZOAN OR VIRUS. AN INFECTIOUS DISEASE MAY OR MAY NOT BE TRANSMISSIBLE FROM PERSON TO PERSON, ANIMAL TO PERSON OR INSECT TO PERSON.

7. "INFECTIOUS WASTE" IS:

(A) "BIOLOGICAL WASTE," WHICH INCLUDES BLOOD AND BLOOD PRODUCTS, EXCRETIONS, EXUDATES, SECRETIONS, SUCTIONING AND OTHER BODY FLUIDS, AND WASTE MATERIALS SATURATED WITH BLOOD OR BODY FLUIDS;

(B) "CULTURES AND STOCKS," WHICH INCLUDES ETIOLOGIC AGENTS AND ASSOCIATED BIOLOGICALS, INCLUDING SPECIMEN CULTURES, AND DISHES AND DEVICES USED TO TRANSFER, INOCULATE AND MIX CULTURES, WASTES FROM PRODUCTION OF BIOLOGICALS AND SERUMS, AND DISCARDED LIVE AND ATTENUATED VACCINES;

(C) "PATHOLOGICAL WASTE," WHICH INCLUDES BIOPSY MATERIALS AND ALL HUMAN TISSUES, ANATOMICAL PARTS THAT EMANATE FROM SURGERY, OBSTETRICAL PROCEDURES, NECROPSY, AUTOPSY AND LABORATORY PROCEDURES, AND ANIMAL CARCASSES EXPOSED TO PATHOGENS IN RESEARCH AND THE BEDDING AND OTHER WASTE FROM SUCH ANIMALS, BUT DOES NOT INCLUDE TEETH OR FORMALDEHYDE OR OTHER PRESERVATIVE AGENTS; AND

(D) "SHARPS," WHICH INCLUDES NEEDLES, INTRAVENOUS TUBING WITH NEEDLES ATTACHED, SCALPEL BLADES, LANCETS, BREAKABLE GLASS TUBES AND SYRINGES THAT HAVE BEEN REMOVED FROM THEIR ORIGINAL STERILE CONTAINERS.

8. "ISOLATION" IS THE PHYSICAL SEPARATION AND CONFINEMENT OF AN INDIVIDUAL OR GROUPS OF INDIVIDUALS WHO ARE INFECTED OR REASONABLY BELIEVED TO BE INFECTED WITH A CONTAGIOUS DISEASE OR POSSIBLY CONTAGIOUS DISEASE

FROM NON-ISOLATED INDIVIDUALS, TO PREVENT OR LIMIT THE TRANSMISSION OF THE DISEASE TO NON-ISOLATED INDIVIDUALS.

9. "MENTAL HEALTH SUPPORT PERSONNEL" INCLUDES, BUT IS NOT LIMITED TO, PSYCHIATRISTS, PSYCHOLOGISTS, SOCIAL WORKERS AND VOLUNTEER CRISIS COUNSELING GROUPS.

10. "ORGANIZED MILITIA" IS THE ORGANIZED MILITIA AS CONSTITUTED IN SUBDIVISION ONE OF SECTION TWO OF THE MILITARY LAW.

11. "PROTECTED HEALTH INFORMATION" IS ANY INFORMATION, WHETHER ORAL, WRITTEN, ELECTRONIC, VISUAL OR IN ANY OTHER FORM, THAT RELATES TO AN INDIVIDUAL'S PAST, PRESENT OR FUTURE PHYSICAL OR MENTAL HEALTH STATUS, CONDITION, TREATMENT, SERVICE, PRODUCTS PURCHASE OR PROVISION OF CARE, AND THAT REVEALS THE IDENTITY OF THE INDIVIDUAL WHOSE HEALTH CARE IS THE SUBJECT OF THE INFORMATION, OR WHERE THERE IS A REASONABLE BASIS TO BELIEVE SUCH INFORMATION COULD BE UTILIZED (EITHER ALONE OR WITH OTHER INFORMATION THAT IS OR SHOULD REASONABLY BE KNOWN TO BE AVAILABLE TO PREDICTABLE RECIPIENTS OF SUCH INFORMATION) TO REVEAL THE IDENTITY OF THAT INDIVIDUAL.

12. "PUBLIC HEALTH AUTHORITY" IS THE DEPARTMENT OR ANY MUNICIPAL AGENCY THAT ACTS PRINCIPALLY TO PROTECT AND PRESERVE THE PUBLIC'S HEALTH, OR ANY OFFICER OR EMPLOYEE OF THE DEPARTMENT OR SUCH AN AGENCY WHEN AUTHORIZED BY LAW, RULE OR REGULATION TO ACT.

13. "PUBLIC HEALTH EMERGENCY" IS AN OCCURRENCE OR IMMINENT THREAT OF AN ILLNESS OR HEALTH CONDITION THAT:

(A) IS BELIEVED TO BE CAUSED BY ANY OF THE FOLLOWING:

(I) BIOTERRORISM;

(II) THE APPEARANCE OF A NOVEL OR PREVIOUSLY CONTROLLED OR ERADICATED INFECTIOUS AGENT OR BIOLOGICAL TOXIN;

(III) A NATURAL DISASTER;

(IV) A CHEMICAL ATTACK OR ACCIDENTAL RELEASE OF A CHEMICAL; OR

(V) A NUCLEAR ATTACK OR ACCIDENT; AND

(B) POSES A HIGH PROBABILITY OF ANY OF THE FOLLOWING HARMS:

(I) A LARGE NUMBER OF DEATHS IN THE AFFECTED POPULATION;

(II) A LARGE NUMBER OF SERIOUS OR LONG TERM DISABILITIES IN THE AFFECTED POPULATION; OR

(III) WIDESPREAD EXPOSURE TO AN INFECTIOUS OR TOXIC AGENT THAT POSES A SIGNIFICANT RISK OF SUBSTANTIAL FUTURE HARM TO A LARGE NUMBER OF PEOPLE IN THE AFFECTED POPULATION.

14. "PUBLIC SAFETY AUTHORITY" MEANS THE DIVISION OF STATE POLICE OR ANY MUNICIPAL POLICE OR SHERIFF'S DEPARTMENT, OR ANY POLICE OFFICER OF SUCH DIVISION OR DEPARTMENT WHEN AUTHORIZED BY LAW, RULE OR REGULATION TO ACT.

15. "QUARANTINE" IS THE PHYSICAL SEPARATION AND CONFINEMENT OF AN INDIVIDUAL, OR GROUP OR GROUPS OF INDIVIDUALS WHO ARE OR MAY HAVE BEEN EXPOSED TO A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE, AND WHO DO NOT SHOW SIGNS OR SYMPTOMS OF A CONTAGIOUS DISEASE, FROM NON-QUARANTINED INDIVIDUALS TO PREVENT OR LIMIT THE TRANSMISSION OF THE DISEASE TO NON-QUARANTINED INDIVIDUALS.

16. "SPECIMENS" INCLUDE, BUT ARE NOT LIMITED TO, BLOOD, SPUTUM, URINE, STOOL, OTHER BODILY FLUIDS, WASTES, TISSUES AND CULTURES NECESSARY TO PERFORM REQUIRED TESTS.

17. "TESTS" INCLUDE, BUT ARE NOT LIMITED TO, ANY DIAGNOSTIC OR INVESTIGATIVE ANALYSES NECESSARY TO PREVENT THE SPREAD OF DISEASE OR PROTECT THE PUBLIC'S HEALTH, SAFETY AND WELFARE.

18. "TRIAL COURT" MEANS THE SUPREME COURT HAVING JURISDICTION IN THE COUNTY WHERE AN ACTION IS TO BE TAKEN.

TITLE II

PLANNING FOR A PUBLIC HEALTH EMERGENCY

SECTION 1005. PUBLIC HEALTH EMERGENCY PLANNING COMMISSION.
1006. PUBLIC HEALTH EMERGENCY PLAN.

S 1005. PUBLIC HEALTH EMERGENCY PLANNING COMMISSION. THE GOVERNOR, WITHIN THIRTY DAYS OF THE EFFECTIVE DATE OF THIS SECTION, SHALL ESTABLISH THE PUBLIC HEALTH EMERGENCY PLANNING COMMISSION. SUCH COMMISSION SHALL BE COMPOSED OF SUCH STATE AND MUNICIPAL AGENCY HEADS, MEMBERS OF THE LEGISLATURE, JUDGES OF THE UNIFIED COURT SYSTEM AND OTHER PERSONS AS SHALL BE DEEMED APPROPRIATE AND AS SHALL BE APPOINTED THERETO BY THE GOVERNOR. THE GOVERNOR SHALL DESIGNATE THE CHAIR OF SUCH COMMISSION FROM AMONG ITS MEMBERS. THE MEMBERS OF THE PUBLIC HEALTH EMERGENCY PLANNING COMMISSION SHALL RECEIVE NO COMPENSATION FOR THEIR SERVICES, BUT SHALL BE ALLOWED THEIR ACTUAL AND NECESSARY EXPENSES INCURRED IN THEIR DUTIES.

S 1006. PUBLIC HEALTH EMERGENCY PLAN. 1. CONTENT. THE COMMISSION SHALL WITHIN SIX MONTHS OF ITS APPOINTMENT DELIVER TO THE GOVERNOR, THE LEGISLATURE AND THE GENERAL PUBLIC A PLAN FOR RESPONDING TO A PUBLIC HEALTH EMERGENCY, WHICH SHALL INCLUDE GUIDELINES FOR:

(A) NOTIFYING AND COMMUNICATING WITH THE POPULATION DURING A STATE OF PUBLIC HEALTH EMERGENCY PURSUANT TO THIS ARTICLE;

(B) CENTRAL COORDINATION OF RESOURCES, MANPOWER AND SERVICES, INCLUDING THE COORDINATION OF RESPONSES OF FEDERAL, STATE, MUNICIPAL AND TRIBAL AGENCIES;

(C) THE LOCATION, PROCUREMENT, STORAGE, TRANSPORTATION, MAINTENANCE AND DISTRIBUTION OF ESSENTIAL MATERIALS INCLUDING, BUT NOT LIMITED TO, MEDICAL SUPPLIES, DRUGS, VACCINES, FOOD, SHELTER, CLOTHING AND BEDS;

(D) COMPLIANCE WITH THE REPORTING REQUIREMENTS OF SECTION ONE THOUSAND TEN OF THIS ARTICLE;

(E) THE CONTINUED, EFFECTIVE OPERATION OF THE UNIFIED COURT SYSTEM INCLUDING, IF DEEMED NECESSARY, THE IDENTIFICATION AND TRAINING OF PERSONNEL TO SERVE AS EMERGENCY JUDGES REGARDING MATTERS OF ISOLATION AND QUARANTINE;

(F) THE METHODS OF EVACUATING POPULATIONS, AND HOUSING AND FEEDING SUCH EVACUATED POPULATIONS;

(G) THE IDENTIFICATION AND TRAINING OF HEALTH CARE PROVIDERS TO DIAGNOSE AND TREAT PERSONS WITH INFECTIOUS DISEASES;

(H) THE VACCINATION OF PERSONS;

(I) THE TREATMENT OF PERSONS WHO HAVE BEEN EXPOSED TO OR ARE INFECTED WITH DISEASES OR HEALTH CONDITIONS THAT MAY BE THE CAUSE OF A PUBLIC HEALTH EMERGENCY;

(J) THE SAFE DISPOSAL OF INFECTIOUS WASTES AND HUMAN REMAINS;

(K) THE SAFE AND EFFECTIVE CONTROL OF PERSONS ISOLATED, QUARANTINED, VACCINATED, TESTED OR TREATED DURING A STATE OF PUBLIC HEALTH EMERGENCY;

(L) TRACKING THE SOURCES AND OUTCOMES OF INFECTED PERSONS;

(M) ENSURING THAT EACH MUNICIPALITY IDENTIFIES:

(I) SITES WHERE PERSONS CAN BE ISOLATED OR QUARANTINED PURSUANT TO THIS ARTICLE;

(II) SITES WHERE MEDICAL SUPPLIES, FOOD AND OTHER ESSENTIAL MATERIALS CAN BE DISTRIBUTED TO THE POPULATION;

(III) SITES WHERE HEALTH AND EMERGENCY WORKERS CAN BE HOUSED AND FED; AND

(IV) ROUTES AND MEANS OF TRANSPORTATION OF PEOPLE AND MATERIALS;

(N) CULTURAL NORMS, VALUES, RELIGIOUS PRINCIPLES AND TRADITIONS THAT MAY BE RELEVANT; AND

(O) ANY OTHER MEASURES NECESSARY TO IMPLEMENT THE PROVISIONS OF THIS ARTICLE.

2. DISTRIBUTION. THE COMMISSION SHALL DISTRIBUTE THE PUBLIC HEALTH EMERGENCY PLAN TO THOSE WHO WILL BE RESPONSIBLE FOR ITS IMPLEMENTATION, OTHER INTERESTED PERSONS, AND THE PUBLIC, AND SEEK THEIR REVIEW AND COMMENTS.

3. REVIEW. THE COMMISSION SHALL ANNUALLY REVIEW THE PUBLIC HEALTH EMERGENCY PLAN.

TITLE III
MEASURES TO DETECT AND TRACK PUBLIC HEALTH EMERGENCIES

SECTION 1010. REPORTING.
1011. TRACKING.
1012. INFORMATION SHARING.

S 1010. REPORTING. 1. ILLNESS OR HEALTH CONDITION. A PUBLIC HEALTH AUTHORITY, HEALTH CARE PROVIDER, CORONER OR MEDICAL EXAMINER SHALL REPORT ALL CASES OF PERSONS WHO HARBOR ANY ILLNESS OR HEALTH CONDITION THAT MAY BE POTENTIAL CAUSES OF A PUBLIC HEALTH EMERGENCY. REPORTABLE ILLNESSES AND HEALTH CONDITIONS INCLUDE, BUT ARE NOT LIMITED TO, THE DISEASES CAUSED BY THE BIOLOGICAL AGENTS LISTED IN 42 C.F.R. S 72, APP. A(2000) AND ANY ILLNESSES OR HEALTH CONDITIONS IDENTIFIED BY THE PUBLIC HEALTH AUTHORITY.

2. PHARMACISTS. IN ADDITION TO THE FOREGOING REQUIREMENTS FOR HEALTH CARE PROVIDERS, A PHARMACIST SHALL REPORT ANY UNUSUAL OR INCREASED PRESCRIPTION RATES, UNUSUAL TYPES OF PRESCRIPTIONS OR UNUSUAL TRENDS IN PHARMACY VISITS THAT MAY BE POTENTIAL CAUSES OF A PUBLIC HEALTH EMERGENCY. PRESCRIPTION-RELATED EVENTS THAT REQUIRE A REPORT INCLUDE, BUT ARE NOT LIMITED TO:

(A) AN UNUSUAL INCREASE IN THE NUMBER OF PRESCRIPTIONS OR OVER-THE-COUNTER PHARMACEUTICALS TO TREAT CONDITIONS THAT THE PUBLIC HEALTH AUTHORITY IDENTIFIES THROUGH REGULATION;

(B) AN UNUSUAL INCREASE IN THE NUMBER OF PRESCRIPTIONS FOR ANTIBIOTICS; AND

(C) ANY PRESCRIPTION THAT TREATS A DISEASE THAT IS RELATIVELY UNCOMMON OR MAY BE ASSOCIATED WITH BIOTERRORISM.

3. MANNER OF REPORTING. THE REPORT SHALL BE MADE IN WRITING OR ELECTRONICALLY WITHIN TWENTY-FOUR HOURS TO THE PUBLIC HEALTH AUTHORITY. THE REPORT SHALL INCLUDE AS MUCH OF THE FOLLOWING INFORMATION AS IS AVAILABLE: THE SPECIFIC ILLNESS OR HEALTH CONDITION THAT IS THE SUBJECT OF THE REPORT, THE PATIENT'S NAME, DATE OF BIRTH, SEX, RACE, OCCUPATION AND CURRENT HOME AND WORK ADDRESSES (INCLUDING CITY AND COUNTY); THE NAME AND ADDRESS OF THE HEALTH CARE PROVIDER, CORONER OR MEDICAL EXAMINER AND OF THE REPORTING INDIVIDUAL, IF DIFFERENT; AND ANY OTHER INFORMATION NEEDED TO LOCATE THE PATIENT FOR FOLLOW-UP. FOR CASES RELATED TO ANIMAL OR INSECT BITES, THE SUSPECTED LOCATING INFORMATION OF THE BITING ANIMAL OR INSECT, AND THE NAME AND ADDRESS OF ANY KNOWN OWNER, SHALL BE REPORTED.

4. ANIMAL DISEASES. EVERY VETERINARIAN, LIVESTOCK OWNER, VETERINARY DIAGNOSTIC LABORATORY DIRECTOR OR OTHER PERSON HAVING THE CARE OF ANIMALS SHALL REPORT ANIMALS HAVING OR SUSPECTED OF HAVING ANY DISEASES THAT MAY BE POTENTIAL CAUSES OF A PUBLIC HEALTH EMERGENCY. THE REPORT SHALL BE MADE IN WRITING OR ELECTRONICALLY WITHIN TWENTY-FOUR HOURS TO THE PUBLIC HEALTH AUTHORITY AND SHALL INCLUDE AS MUCH OF THE FOLLOWING INFORMATION AS IS AVAILABLE: THE SPECIFIC ILLNESS OR HEALTH CONDITION THAT IS THE SUBJECT OF THE REPORT, THE SUSPECTED LOCATING INFORMATION OF THE ANIMAL, THE NAME AND ADDRESS OF ANY KNOWN OWNER, AND THE NAME AND ADDRESS OF THE REPORTING INDIVIDUAL.

5. LABORATORIES. FOR THE PURPOSES OF THIS SECTION, THE DEFINITION OF "HEALTH CARE PROVIDER" SHALL INCLUDE OUT-OF-STATE MEDICAL LABORATORIES, PROVIDED THAT SUCH LABORATORIES HAVE AGREED TO THE REPORTING REQUIREMENTS OF THIS STATE. RESULTS MUST BE REPORTED BY THE LABORATORY THAT PERFORMS THE TEST, BUT AN IN-STATE LABORATORY THAT SENDS SPECIMENS TO AN OUT-OF-STATE LABORATORY IS ALSO RESPONSIBLE FOR REPORTING RESULTS.

6. ENFORCEMENT. THE PUBLIC HEALTH AUTHORITY MAY ENFORCE THE PROVISIONS OF THIS SECTION IN ACCORDANCE WITH EXISTING ENFORCEMENT RULES AND REGULATIONS.

S 1011. TRACKING. THE PUBLIC HEALTH AUTHORITY SHALL ASCERTAIN THE EXISTENCE OF CASES OF AN ILLNESS OR HEALTH CONDITION THAT MAY BE THE POTENTIAL CAUSE OF A PUBLIC HEALTH EMERGENCY, SHALL INVESTIGATE ALL SUCH CASES FOR SOURCES OF INFECTION AND TO ENSURE THAT THEY ARE SUBJECT TO PROPER CONTROL MEASURES, AND SHALL DEFINE THE DISTRIBUTION OF THE ILLNESS OR HEALTH CONDITION. TO FULFILL THESE DUTIES, THE PUBLIC HEALTH AUTHORITY SHALL IDENTIFY EXPOSED INDIVIDUALS AS FOLLOWS:

1. IDENTIFICATION OF INDIVIDUALS. ACTING ON INFORMATION DEVELOPED IN ACCORDANCE WITH SECTION ONE THOUSAND TEN OF THIS TITLE, OR OTHER RELIABLE INFORMATION, THE PUBLIC HEALTH AUTHORITY SHALL IDENTIFY ALL INDIVIDUALS THOUGHT TO HAVE BEEN EXPOSED TO AN ILLNESS OR HEALTH CONDITION THAT MAY BE A POTENTIAL CAUSE OF A PUBLIC HEALTH EMERGENCY.

2. INTERVIEWING OF INDIVIDUALS. THE PUBLIC HEALTH AUTHORITY SHALL COUNSEL AND INTERVIEW SUCH INDIVIDUALS WHERE NEEDED TO ASSIST IN THE POSITIVE IDENTIFICATION OF EXPOSED INDIVIDUALS AND DEVELOP INFORMATION RELATING TO THE SOURCE AND SPREAD OF THE ILLNESS OR HEALTH CONDITION. SUCH INFORMATION INCLUDES THE NAME AND ADDRESS (INCLUDING CITY AND COUNTY) OF ANY PERSON FROM WHOM THE ILLNESS OR HEALTH CONDITION MAY HAVE BEEN CONTRACTED AND TO WHOM THE ILLNESS OR HEALTH CONDITION MAY HAVE SPREAD.

3. EXAMINATION OF FACILITIES OR MATERIALS. THE PUBLIC HEALTH AUTHORITY SHALL, FOR EXAMINATION PURPOSES, CLOSE, EVACUATE OR DECONTAMINATE ANY FACILITY OR DECONTAMINATE OR DESTROY ANY MATERIAL WHEN IT REASONABLY SUSPECTS THAT SUCH FACILITY OR MATERIAL MAY ENDANGER THE PUBLIC HEALTH.

4. ENFORCEMENT. THE PUBLIC HEALTH AUTHORITY MAY ENFORCE THE PROVISIONS OF THIS SECTION IN ACCORDANCE WITH EXISTING ENFORCEMENT RULES AND REGULATIONS. AN ORDER OF THE PUBLIC HEALTH AUTHORITY GIVEN TO EFFECTUATE THE PURPOSES OF THIS SECTION SHALL BE ENFORCEABLE IMMEDIATELY BY THE PUBLIC SAFETY AUTHORITY.

S 1012. INFORMATION SHARING. 1. WHENEVER THE PUBLIC SAFETY AUTHORITY, OR OTHER STATE OR MUNICIPAL AGENCY BECOMES AWARE OF A CASE OF REPORTABLE ILLNESS OR HEALTH CONDITION, AN UNUSUAL CLUSTER OR A SUSPICIOUS EVENT THAT MAY BE THE CAUSE OF A PUBLIC HEALTH EMERGENCY, IT SHALL IMMEDIATELY NOTIFY THE DEPARTMENT.

2. WHENEVER THE PUBLIC HEALTH AUTHORITY BECOMES AWARE OF A CASE OF REPORTABLE ILLNESS OR HEALTH CONDITION, AN UNUSUAL CLUSTER OR A SUSPICIOUS EVENT THAT IT REASONABLY BELIEVES HAS THE POTENTIAL TO BE CAUSED BY BIOTERRORISM, IT SHALL NOTIFY THE DEPARTMENT, PUBLIC SAFETY AUTHORITIES, AND FEDERAL HEALTH AND PUBLIC SAFETY AUTHORITIES.

3. SHARING OF INFORMATION ON REPORTABLE ILLNESSES, HEALTH CONDITIONS, UNUSUAL CLUSTERS OR SUSPICIOUS EVENTS BETWEEN THE DEPARTMENT, PUBLIC SAFETY AUTHORITIES AND PUBLIC HEALTH AUTHORITIES SHALL BE RESTRICTED TO INFORMATION NECESSARY FOR THE TREATMENT, CONTROL, INVESTIGATION AND PREVENTION OF A PUBLIC HEALTH EMERGENCY.

TITLE IV

DECLARING STATE OF PUBLIC HEALTH EMERGENCY

SECTION 1020. DECLARATION.

1021. CONTENT OF DECLARATION.
1022. EFFECT OF DECLARATION.
1023. ENFORCEMENT.
1024. TERMINATION OF DECLARATION.

S 1020. DECLARATION. A STATE OF PUBLIC HEALTH EMERGENCY MAY BE DECLARED BY THE GOVERNOR UPON THE OCCURRENCE OF A "PUBLIC HEALTH EMERGENCY" AS DEFINED IN SUBDIVISION THIRTEEN OF SECTION ONE THOUSAND THREE OF THIS ARTICLE. PRIOR TO SUCH A DECLARATION, THE GOVERNOR SHALL CONSULT WITH THE PUBLIC HEALTH AUTHORITY AND MAY CONSULT WITH ANY ADDITIONAL PUBLIC AND OTHER EXPERTS AS NEEDED. THE GOVERNOR MAY ACT TO DECLARE A PUBLIC HEALTH EMERGENCY WITHOUT CONSULTING WITH THE PUBLIC HEALTH AUTHORITY OR OTHER EXPERTS WHEN THE SITUATION CALLS FOR PROMPT AND TIMELY ACTION.

S 1021. CONTENT OF DECLARATION. A STATE OF PUBLIC HEALTH EMERGENCY SHALL BE DECLARED BY AN EXECUTIVE ORDER THAT SPECIFIES:

1. THE NATURE OF THE PUBLIC HEALTH EMERGENCY;

2. THE POLITICAL SUBDIVISIONS OR GEOGRAPHIC AREAS SUBJECT TO SUCH DECLARATION;

3. THE CONDITIONS THAT HAVE BROUGHT ABOUT THE PUBLIC HEALTH EMERGENCY;

4. THE DURATION OF THE STATE OF PUBLIC HEALTH EMERGENCY, IF LESS THAN THIRTY DAYS; AND

5. THE PRIMARY PUBLIC HEALTH AUTHORITY RESPONDING TO THE EMERGENCY.

S 1022. EFFECT OF DECLARATION. THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY SHALL ACTIVATE THE DISASTER RESPONSE AND RECOVERY ASPECTS OF THE STATE, LOCAL AND INTER-JURISDICTIONAL DISASTER EMERGENCY PLANS IN THE AFFECTED POLITICAL SUBDIVISIONS OR GEOGRAPHIC AREAS. SUCH DECLARATION AUTHORIZES THE DEPLOYMENT AND USE OF ANY FORCES TO WHICH THE PLANS APPLY, AND THE USE OR DISTRIBUTION OF ANY SUPPLIES, EQUIPMENT, MATERIALS AND FACILITIES ASSEMBLED, STOCKPILED OR AVAILABLE PURSUANT TO THIS ARTICLE.

1. EMERGENCY POWERS. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE GOVERNOR MAY:

(A) SUSPEND THE PROVISIONS OF ANY REGULATORY STATUTE PRESCRIBING PROCEDURES FOR CONDUCTING STATE BUSINESS, OR THE ORDERS, RULES AND REGULATIONS OF ANY STATE AGENCY, TO THE EXTENT THAT STRICT COMPLIANCE WITH THE SAME WOULD PREVENT, HINDER OR DELAY NECESSARY ACTION (INCLUDING EMERGENCY PURCHASES) BY THE PUBLIC HEALTH AUTHORITY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY, OR INCREASE THE HEALTH THREAT TO THE POPULATION;

(B) UTILIZE ALL AVAILABLE RESOURCES OF THE STATE AND ITS POLITICAL SUBDIVISIONS AS REASONABLY NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY;

(C) TRANSFER THE DIRECTION, PERSONNEL OR FUNCTIONS OF STATE DEPARTMENTS AND AGENCIES TO PERFORM OR FACILITATE RESPONSE AND RECOVERY PROGRAMS REGARDING THE PUBLIC HEALTH EMERGENCY;

(D) MOBILIZE ALL OR ANY PART OF THE ORGANIZED MILITIA INTO SERVICE OF THE STATE. AN ORDER DIRECTING THE ORGANIZED MILITIA TO REPORT FOR ACTIVE DUTY SHALL STATE THE PURPOSE FOR WHICH IT IS MOBILIZED AND THE OBJECTIVES TO BE ACCOMPLISHED;

(E) PROVIDE AID TO AND SEEK AID FROM OTHER STATES IN ACCORDANCE WITH ANY INTERSTATE EMERGENCY COMPACT MADE WITH THIS STATE; AND

(F) SEEK AID FROM THE FEDERAL GOVERNMENT IN ACCORDANCE WITH FEDERAL PROGRAMS OR REQUIREMENTS.

2. COORDINATION. THE PUBLIC HEALTH AUTHORITY SHALL COORDINATE ALL MATTERS PERTAINING TO THE PUBLIC HEALTH EMERGENCY RESPONSE OF THE STATE.

THE PUBLIC HEALTH AUTHORITY SHALL HAVE PRIMARY JURISDICTION, RESPONSIBILITY, AND AUTHORITY FOR:

(A) PLANNING AND EXECUTING PUBLIC HEALTH EMERGENCY ASSESSMENT, MITIGATION, PREPAREDNESS RESPONSE AND RECOVERY FOR THE STATE;

(B) COORDINATING PUBLIC HEALTH EMERGENCY RESPONSE BETWEEN STATE AND MUNICIPAL AUTHORITIES;

(C) COLLABORATING WITH RELEVANT FEDERAL GOVERNMENT AUTHORITIES, ELECTED OFFICIALS OF OTHER STATES, PRIVATE ORGANIZATIONS OR COMPANIES;

(D) COORDINATING RECOVERY OPERATIONS AND MITIGATION INITIATIVES SUBSEQUENT TO THE PUBLIC HEALTH EMERGENCY; AND

(E) ORGANIZING PUBLIC INFORMATION ACTIVITIES REGARDING STATE PUBLIC HEALTH EMERGENCY RESPONSE OPERATIONS.

3. IDENTIFICATION. AFTER THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY, SPECIAL IDENTIFICATION FOR ALL EMPLOYEES OF THE PUBLIC HEALTH AUTHORITIES WORKING DURING THE EMERGENCY SHALL BE ISSUED AS SOON AS POSSIBLE. THE IDENTIFICATION SHALL INDICATE THE AUTHORITY OF THE BEARER TO EXERCISE PUBLIC HEALTH FUNCTIONS AND EMERGENCY POWERS DURING THE STATE OF PUBLIC HEALTH EMERGENCY. SUCH IDENTIFICATION SHALL BE WORN IN PLAIN VIEW.

S 1023. ENFORCEMENT. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY MAY REQUEST ASSISTANCE IN ENFORCING ORDERS PURSUANT TO THIS ARTICLE FROM THE PUBLIC SAFETY AUTHORITY. THE PUBLIC SAFETY AUTHORITY MAY REQUEST ASSISTANCE FROM THE ORGANIZED MILITIA IN ENFORCING THE ORDERS OF THE PUBLIC HEALTH AUTHORITY.

S 1024. TERMINATION OF DECLARATION. 1. EXECUTIVE ORDER. THE GOVERNOR SHALL TERMINATE THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY BY EXECUTIVE ORDER UPON FINDING THAT THE OCCURRENCE OF AN ILLNESS OR HEALTH CONDITION THAT CAUSED THE EMERGENCY NO LONGER POSES A HIGH PROBABILITY OF A LARGE NUMBER OF DEATHS IN THE AFFECTED POPULATION, A LARGE NUMBER OF INCIDENTS OF SERIOUS PERMANENT OR LONG TERM DISABILITY IN THE AFFECTED POPULATION OR A SIGNIFICANT RISK OF SUBSTANTIAL FUTURE HARM TO A LARGE NUMBER OF PEOPLE IN THE AFFECTED POPULATION.

2. AUTOMATIC TERMINATION. NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE, THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY SHALL BE TERMINATED AUTOMATICALLY AFTER THIRTY DAYS UNLESS RENEWED BY THE GOVERNOR UNDER THE SAME STANDARDS AND PROCEDURES SET FORTH IN THIS TITLE. ANY SUCH RENEWAL SHALL ALSO BE TERMINATED AUTOMATICALLY AFTER THIRTY DAYS UNLESS RENEWED BY THE GOVERNOR UNDER THE SAME STANDARDS AND PROCEDURES SET FORTH IN THIS TITLE.

3. STATE LEGISLATURE. THE STATE LEGISLATURE, BY MAJORITY VOTE OF THE SENATE AND THE ASSEMBLY, MAY TERMINATE THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY AT ANY TIME FROM THE DATE OF ORIGINAL DECLARATION UPON FINDING THAT THE OCCURRENCE OF AN ILLNESS OR HEALTH CONDITION THAT CAUSED THE EMERGENCY DOES NOT OR NO LONGER POSES A HIGH PROBABILITY OF A LARGE NUMBER OF DEATHS IN THE AFFECTED POPULATION, A LARGE NUMBER OF INCIDENTS OF SERIOUS PERMANENT OR LONG TERM DISABILITY IN THE AFFECTED POPULATION OR A SIGNIFICANT RISK OF SUBSTANTIAL FUTURE HARM TO A LARGE NUMBER OF PEOPLE IN THE AFFECTED POPULATION. SUCH TERMINATION BY THE STATE LEGISLATURE SHALL OVERRIDE ANY RENEWAL BY THE GOVERNOR.

4. CONTENT OF TERMINATION ORDER. ALL ORDERS OR LEGISLATIVE ACTIONS TERMINATING THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY SHALL INDICATE THE NATURE OF THE EMERGENCY, THE AREA THAT WAS THREATENED, AND THE CONDITIONS THAT MAKE POSSIBLE THE TERMINATION OF THE DECLARATION.

TITLE V

SPECIAL POWERS DURING STATE OF PUBLIC HEALTH EMERGENCY; MANAGEMENT OF PROPERTY

SECTION 1030. EMERGENCY MEASURES CONCERNING FACILITIES AND MATERIALS.
1031. ACCESS TO AND CONTROL OF FACILITIES AND PROPERTY; GENERALLY.
1032. SAFE DISPOSAL OF INFECTIOUS WASTE.
1033. SAFE DISPOSAL OF HUMAN REMAINS.
1034. CONTROL OF HEALTH CARE SUPPLIES.
1035. COMPENSATION.
1036. DESTRUCTION OF PROPERTY.

S 1030. EMERGENCY MEASURES CONCERNING FACILITIES AND MATERIALS. THE PUBLIC HEALTH AUTHORITY MAY EXERCISE, FOR SUCH PERIOD AS A STATE OF PUBLIC HEALTH EMERGENCY EXISTS, THE FOLLOWING POWERS OVER DANGEROUS FACILITIES AND MATERIALS:

1. FACILITIES. TO CLOSE, DIRECT AND COMPEL THE EVACUATION OF, OR TO DECONTAMINATE OR CAUSE TO BE DECONTAMINATED ANY FACILITY FOR WHICH THERE IS REASONABLE CAUSE TO BELIEVE THAT SUCH FACILITY MAY ENDANGER THE PUBLIC HEALTH; AND

2. MATERIALS. TO DECONTAMINATE OR CAUSE TO BE DECONTAMINATED, OR DESTROY ANY MATERIAL FOR WHICH THERE IS REASONABLE CAUSE TO BELIEVE THAT SUCH MATERIAL MAY ENDANGER THE PUBLIC HEALTH.

S 1031. ACCESS TO AND CONTROL OF FACILITIES AND PROPERTY; GENERALLY. THE PUBLIC HEALTH AUTHORITY MAY EXERCISE, FOR SUCH PERIOD AS THE STATE OF PUBLIC HEALTH EMERGENCY EXISTS, THE FOLLOWING POWERS CONCERNING FACILITIES, MATERIALS, ROADS, OR PUBLIC AREAS:

1. USE OF FACILITIES AND MATERIALS. TO PROCURE, BY CONDEMNATION OR OTHERWISE, CONSTRUCT, LEASE, TRANSPORT, STORE, MAINTAIN, RENOVATE OR DISTRIBUTE SUCH MATERIALS AND FACILITIES AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY, WITH THE RIGHT TO TAKE IMMEDIATE POSSESSION THEREOF. SUCH MATERIALS AND FACILITIES SHALL INCLUDE, BUT ARE NOT LIMITED TO, COMMUNICATION DEVICES, COMMON CARRIERS, REAL ESTATE, FUELS, FOOD AND CLOTHING;

2. USE OF HEALTH CARE FACILITIES. TO REQUIRE A HEALTH CARE FACILITY TO PROVIDE SERVICES OR THE USE OF ITS FACILITY IF SUCH SERVICES OR USE ARE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY AS A CONDITION OF LICENSURE, AUTHORIZATION OR THE ABILITY TO CONTINUE DOING BUSINESS IN THE STATE AS A HEALTH CARE FACILITY. THE USE OF A HEALTH CARE FACILITY MAY INCLUDE TRANSFERRING THE MANAGEMENT AND SUPERVISION OF THE HEALTH CARE FACILITY TO THE PUBLIC HEALTH AUTHORITY FOR A LIMITED OR UNLIMITED PERIOD OF TIME, BUT SHALL NOT EXCEED THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY;

3. CONTROL OF MATERIALS. TO INSPECT, CONTROL, RESTRICT AND REGULATE BY RATIONING AND USING QUOTAS, PROHIBITIONS ON SHIPMENTS, ALLOCATION OR OTHER MEANS THE USE, SALE, DISPENSING, DISTRIBUTION, OR TRANSPORTATION OF SUCH FOOD, FUEL, CLOTHING AND OTHER COMMODITIES, AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY; AND

4. CONTROL OF ROADS AND PUBLIC AREAS. (A) TO PRESCRIBE ROUTES, MODES OF TRANSPORTATION AND DESTINATIONS IN CONNECTION WITH EVACUATION OF PERSONS OR THE PROVISION OF EMERGENCY SERVICES; AND

(B) TO CONTROL OR LIMIT INGRESS AND EGRESS TO AND FROM ANY STRICKEN OR THREATENED PUBLIC AREA, THE MOVEMENT OF PERSONS WITHIN SUCH AREA, AND THE OCCUPANCY OF PREMISES THEREIN, IF SUCH ACTION IS REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY.

S 1032. SAFE DISPOSAL OF INFECTIOUS WASTE. THE PUBLIC HEALTH AUTHORITY MAY EXERCISE, FOR SUCH PERIOD AS THE STATE OF PUBLIC HEALTH EMERGENCY EXISTS, THE FOLLOWING POWERS REGARDING THE SAFE DISPOSAL OF INFECTIOUS WASTE:

1. ADOPT MEASURES. TO ADOPT AND ENFORCE SUCH MEASURES TO PROVIDE FOR THE SAFE DISPOSAL OF INFECTIOUS WASTE AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY. SUCH MEASURES MAY INCLUDE, BUT ARE NOT LIMITED TO, THE COLLECTION, STORAGE, HANDLING, DESTRUCTION, TREATMENT, TRANSPORTATION AND DISPOSAL OF INFECTIOUS WASTE;

2. CONTROL OF FACILITIES. TO REQUIRE ANY BUSINESS OR FACILITY AUTHORIZED TO COLLECT, STORE, HANDLE, DESTROY, TREAT, TRANSPORT OR DISPOSE OF INFECTIOUS WASTE UNDER THE LAWS OF THIS STATE, AND ANY LANDFILL BUSINESS OR OTHER SUCH PROPERTY, TO ACCEPT INFECTIOUS WASTE, OR PROVIDE SERVICES OR THE USE OF THE BUSINESS, FACILITY OR PROPERTY IF SUCH ACTION IS REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY AS A CONDITION OF LICENSURE, AUTHORIZATION OR THE ABILITY TO CONTINUE DOING BUSINESS IN THE STATE AS SUCH BUSINESS OR FACILITY. THE USE OF THE BUSINESS, FACILITY OR PROPERTY MAY INCLUDE TRANSFERRING THE MANAGEMENT AND SUPERVISION OF SUCH BUSINESS, FACILITY OR PROPERTY TO THE PUBLIC HEALTH AUTHORITY FOR A LIMITED OR UNLIMITED PERIOD OF TIME, BUT SHALL NOT EXCEED THE TERMINATION OF THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY;

3. USE OF FACILITIES. TO PROCURE, BY CONDEMNATION OR OTHERWISE, ANY BUSINESS OR FACILITY AUTHORIZED TO COLLECT, STORE, HANDLE, DESTROY, TREAT, TRANSPORT OR DISPOSE OF INFECTIOUS WASTE UNDER THE LAWS OF THIS STATE, AND ANY LANDFILL BUSINESS OR OTHER SUCH PROPERTY AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY, WITH THE POWER TO TAKE IMMEDIATE POSSESSION THEREOF; AND

4. IDENTIFICATION. ALL BAGS, BOXES AND OTHER CONTAINERS FOR INFECTIOUS WASTE SHALL BE CLEARLY IDENTIFIED AS CONTAINING INFECTIOUS WASTE AND IF KNOWN, THE TYPE OF INFECTIOUS WASTE.

S 1033. SAFE DISPOSAL OF HUMAN REMAINS. THE PUBLIC HEALTH AUTHORITY MAY EXERCISE, FOR SUCH PERIOD AS THE STATE OF PUBLIC HEALTH EMERGENCY EXISTS, THE FOLLOWING POWERS REGARDING THE SAFE DISPOSAL OF HUMAN REMAINS:

1. ADOPT MEASURES. TO ADOPT AND ENFORCE SUCH MEASURES TO PROVIDE FOR THE SAFE DISPOSAL OF HUMAN REMAINS AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY. SUCH MEASURES MAY INCLUDE, BUT ARE NOT LIMITED TO, THE EMBALMING, BURIAL, CREMATION, INTERMENT, DISINTERMENT, TRANSPORTATION AND DISPOSAL OF HUMAN REMAINS;

2. POSSESSION. TO TAKE POSSESSION OR CONTROL OF ANY HUMAN REMAINS;

3. DISPOSAL. TO ORDER THE DISPOSAL OF ANY HUMAN REMAINS OF A PERSON WHO HAS DIED OF A CONTAGIOUS DISEASE THROUGH BURIAL OR CREMATION WITHIN TWENTY-FOUR HOURS AFTER DEATH. TO THE EXTENT POSSIBLE, THE RELIGIOUS, CULTURAL, FAMILY AND INDIVIDUAL BELIEFS OF THE DECEASED OR HIS OR HER FAMILY SHALL BE CONSIDERED WHEN DISPOSING OF ANY HUMAN REMAINS;

4. CONTROL OF FACILITIES. TO REQUIRE ANY BUSINESS OR FACILITY AUTHORIZED TO EMBALM, BURY, CREMATE, INTER, DISINTER, TRANSPORT OR DISPOSE OF HUMAN REMAINS UNDER THE LAWS OF THIS STATE TO ACCEPT ANY HUMAN REMAINS OR PROVIDE THE USE OF ITS BUSINESS OR FACILITY IF SUCH ACTIONS ARE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY AS A CONDITION OF LICENSURE, AUTHORIZATION OR THE ABILITY TO CONTINUE DOING BUSINESS IN THE STATE AS SUCH A BUSINESS OR FACILITY. THE USE OF THE BUSINESS OR FACILITY MAY INCLUDE TRANSFERRING THE MANAGEMENT AND SUPERVISION OF SUCH BUSINESS OR FACILITY TO THE PUBLIC HEALTH AUTHORITY FOR A LIMITED OR UNLIMITED PERIOD OF TIME, BUT SHALL NOT EXCEED THE TERMINATION OF THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY;

5. USE OF FACILITIES. TO PROCURE, BY CONDEMNATION OR OTHERWISE, ANY BUSINESS OR FACILITY AUTHORIZED TO EMBALM, BURY, CREMATE, INTER, DISINTER, TRANSPORT OR DISPOSE OF HUMAN REMAINS UNDER THE LAWS OF THIS

STATE AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY WITH THE POWER TO TAKE IMMEDIATE POSSESSION THEREOF;

6. LABELING. EVERY HUMAN REMAIN PRIOR TO DISPOSAL SHALL BE CLEARLY LABELED WITH ALL AVAILABLE INFORMATION TO IDENTIFY THE DECEDENT AND THE CIRCUMSTANCES OF DEATH. ANY REMAINS OF A DECEASED PERSON WITH A CONTAGIOUS DISEASE SHALL HAVE AN EXTERNAL, CLEARLY VISIBLE TAG INDICATING THAT THE HUMAN REMAINS ARE INFECTED AND, IF KNOWN, THE CONTAGIOUS DISEASE;

7. IDENTIFICATION. EVERY PERSON IN CHARGE OF DISPOSING OF ANY HUMAN REMAINS SHALL MAINTAIN A WRITTEN OR ELECTRONIC RECORD OF EACH HUMAN REMAIN AND ALL AVAILABLE INFORMATION TO IDENTIFY THE DECEDENT, THE CIRCUMSTANCES OF DEATH AND THE DISPOSAL THEREOF. IF HUMAN REMAINS CANNOT BE IDENTIFIED, PRIOR TO DISPOSAL A QUALIFIED PERSON SHALL, TO THE EXTENT POSSIBLE, TAKE FINGERPRINTS AND ONE OR MORE PHOTOGRAPHS OF THE HUMAN REMAINS, OBTAIN IDENTIFYING DENTAL INFORMATION, AND COLLECT A DNA SPECIMEN. ALL INFORMATION GATHERED PURSUANT TO THIS SUBDIVISION SHALL BE PROMPTLY FORWARDED TO THE PUBLIC HEALTH AUTHORITY.

S 1034. CONTROL OF HEALTH CARE SUPPLIES. 1. PROCUREMENT. THE PUBLIC HEALTH AUTHORITY MAY PURCHASE AND DISTRIBUTE ANTI-TOXINS, SERUMS, VACCINES, IMMUNIZING AGENTS, ANTIBIOTICS AND OTHER PHARMACEUTICAL AGENTS OR MEDICAL SUPPLIES THAT IT DEEMS ADVISABLE IN THE INTEREST OF PREPARING FOR OR CONTROLLING A PUBLIC HEALTH EMERGENCY, WITHOUT ANY ADDITIONAL LEGISLATIVE AUTHORIZATION.

2. RATIONING. IF A STATE OF PUBLIC HEALTH EMERGENCY RESULTS IN A STATEWIDE OR REGIONAL SHORTAGE OR THREATENED SHORTAGE OF ANY PRODUCT COVERED BY SUBDIVISION ONE OF THIS SECTION, WHETHER OR NOT SUCH PRODUCT HAS BEEN PURCHASED BY THE PUBLIC HEALTH AUTHORITY, THE PUBLIC HEALTH AUTHORITY MAY CONTROL, RESTRICT AND REGULATE BY RATIONING AND USING QUOTAS, PROHIBITIONS ON SHIPMENTS, ALLOCATION OR OTHER MEANS, THE USE, SALE, DISPENSING, DISTRIBUTION OR TRANSPORTATION OF THE RELEVANT PRODUCT NECESSARY TO PROTECT THE HEALTH, SAFETY AND WELFARE OF THE PEOPLE OF THE STATE.

3. PRIORITY. IN MAKING RATIONING OR OTHER SUPPLY AND DISTRIBUTION DECISIONS, THE PUBLIC HEALTH AUTHORITY MAY GIVE PREFERENCE TO HEALTH CARE PROVIDERS, DISASTER RESPONSE PERSONNEL AND MORTUARY STAFF.

4. DISTRIBUTION. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY MAY PROCURE, STORE AND DISTRIBUTE ANY ANTI-TOXINS, SERUMS, VACCINES, IMMUNIZING AGENTS, ANTIBIOTICS AND OTHER PHARMACEUTICAL AGENTS OR MEDICAL SUPPLIES LOCATED WITHIN THE STATE AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY, WITH THE RIGHT TO TAKE IMMEDIATE POSSESSION THEREOF. IF A PUBLIC HEALTH EMERGENCY SIMULTANEOUSLY AFFECTS MORE THAN ONE STATE, NOTHING IN THIS SECTION SHALL BE CONSTRUED TO ALLOW THE PUBLIC HEALTH AUTHORITY TO OBTAIN ANTI-TOXINS, SERUMS, VACCINES, IMMUNIZING AGENTS, ANTIBIOTICS AND OTHER PHARMACEUTICAL AGENTS OR MEDICAL SUPPLIES FOR THE PRIMARY PURPOSE OF HOARDING SUCH PRODUCTS OR PREVENTING THEIR FAIR AND EQUITABLE DISTRIBUTION AMONG AFFECTED STATES.

S 1035. COMPENSATION. THE STATE SHALL PAY JUST COMPENSATION TO THE OWNER OF ANY FACILITY OR MATERIAL THAT IS LAWFULLY TAKEN OR APPROPRIATED BY THE PUBLIC HEALTH AUTHORITY FOR ITS TEMPORARY OR PERMANENT USE UNDER THIS TITLE ACCORDING TO THE PROCEDURES AND STANDARDS SET FORTH IN SECTION ONE THOUSAND SEVENTY-FOUR OF THIS ARTICLE. COMPENSATION SHALL NOT BE PROVIDED FOR FACILITIES OR MATERIALS THAT ARE CLOSED, EVACUATED, DECONTAMINATED OR DESTROYED WHEN THERE IS REASONABLE CAUSE TO BELIEVE THAT THEY MAY ENDANGER THE PUBLIC HEALTH PURSUANT TO SECTION ONE THOUSAND THIRTY OF THIS TITLE.

S 1036. DESTRUCTION OF PROPERTY. TO THE EXTENT PRACTICABLE, CONSISTENT WITH THE PROTECTION OF PUBLIC HEALTH, PRIOR TO THE DESTRUCTION OF ANY PROPERTY PURSUANT TO THIS TITLE, THE PUBLIC HEALTH AUTHORITY SHALL INSTITUTE APPROPRIATE CIVIL PROCEEDINGS AGAINST THE PROPERTY TO BE DESTROYED IN ACCORDANCE WITH THE EXISTING LAWS AND RULES OF THE COURTS OF THIS STATE, OR ANY SUCH RULES THAT MAY BE DEVELOPED BY THE COURTS FOR USE DURING A STATE OF PUBLIC HEALTH EMERGENCY. ANY PROPERTY ACQUIRED BY THE PUBLIC HEALTH AUTHORITY THROUGH SUCH PROCEEDINGS SHALL, AFTER ENTRY OF THE ORDER, BE DISPOSED OF BY DESTRUCTION PURSUANT TO THE TERMS OF SUCH ORDER.

TITLE VI

SPECIAL POWERS DURING STATE OF PUBLIC HEALTH EMERGENCY; PROTECTION OF PERSONS

SECTION 1040. PROTECTION OF PERSONS.
1041. MEDICAL EXAMINATIONS AND TESTING.
1042. VACCINATION AND TREATMENT.
1043. ISOLATION AND QUARANTINE.
1044. PROCEDURES FOR ISOLATION AND QUARANTINE.
1045. COLLECTION OF LABORATORY SPECIMENS; PERFORMANCE OF TESTS.
1046. ACCESS AND DISCLOSURE OF PROTECTED HEALTH INFORMATION.
1047. LICENSING AND APPOINTMENT OF HEALTH PERSONNEL.

S 1040. PROTECTION OF PERSONS. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY SHALL USE EVERY AVAILABLE MEANS TO PREVENT THE TRANSMISSION OF INFECTIOUS DISEASE AND TO ENSURE THAT ALL CASES OF CONTAGIOUS DISEASE ARE SUBJECT TO PROPER CONTROL AND TREATMENT.

S 1041. MEDICAL EXAMINATIONS AND TESTING. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY MAY PERFORM PHYSICAL EXAMINATIONS AND/OR TESTS AS NECESSARY FOR THE DIAGNOSIS AND TREATMENT OF INDIVIDUALS.

1. MEDICAL EXAMINATIONS AND TESTS MAY BE PERFORMED BY ANY QUALIFIED PERSON AUTHORIZED TO DO SO BY THE PUBLIC HEALTH AUTHORITY.

2. MEDICAL EXAMINATIONS AND TESTS SHALL NOT BE REASONABLY LIKELY TO RESULT IN SERIOUS HARM TO THE AFFECTED INDIVIDUAL.

3. THE PUBLIC HEALTH AUTHORITY MAY ISOLATE OR QUARANTINE, PURSUANT TO SECTION ONE THOUSAND FORTY-THREE OF THIS TITLE, ANY PERSON WHOSE REFUSAL OF MEDICAL EXAMINATION OR TESTING RESULTS IN UNCERTAINTY REGARDING WHETHER SUCH PERSON HAS BEEN EXPOSED TO OR IS INFECTED WITH A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE, OR OTHERWISE POSES A DANGER TO PUBLIC HEALTH.

S 1042. VACCINATION AND TREATMENT. DURING A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY MAY EXERCISE THE FOLLOWING EMERGENCY POWERS OVER PERSONS AS NECESSARY TO ADDRESS THE PUBLIC HEALTH EMERGENCY:

1. VACCINATION. TO VACCINATE PEOPLE AS PROTECTION AGAINST INFECTIOUS DISEASE AND TO PREVENT THE SPREAD OF CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE.

(A) VACCINATION MAY BE PERFORMED BY ANY QUALIFIED PERSON AUTHORIZED TO DO SO BY THE PUBLIC HEALTH AUTHORITY.

(B) A VACCINE TO BE ADMINISTERED MUST NOT BE SUCH AS IS REASONABLY LIKELY TO LEAD TO SERIOUS HARM TO THE AFFECTED INDIVIDUAL.

(C) TO PREVENT THE SPREAD OF CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE THE PUBLIC HEALTH AUTHORITY MAY ISOLATE OR QUARANTINE, PURSUANT TO SECTION ONE THOUSAND FORTY-THREE OF THIS TITLE, PERSONS WHO ARE UNABLE OR UNWILLING FOR REASONS OF HEALTH, RELIGION OR CONSCIENCE TO UNDERGO VACCINATION PURSUANT TO THIS SUBDIVISION.

2. TREATMENT. TO TREAT PEOPLE EXPOSED TO OR INFECTED WITH DISEASE.

(A) TREATMENT MAY BE ADMINISTERED BY ANY QUALIFIED PERSON AUTHORIZED TO DO SO BY THE PUBLIC HEALTH AUTHORITY.

(B) TREATMENT SHALL NOT BE SUCH THAT IT IS REASONABLY LIKELY TO LEAD TO SERIOUS HARM TO THE AFFECTED INDIVIDUAL.

(C) TO PREVENT THE SPREAD OF CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE A PUBLIC HEALTH AUTHORITY MAY ISOLATE OR QUARANTINE PURSUANT TO SECTION ONE THOUSAND FORTY-THREE OF THIS TITLE, PERSONS WHO ARE UNABLE OR UNWILLING FOR REASONS OF HEALTH, RELIGION OR CONSCIENCE TO UNDERGO TREATMENT PURSUANT TO THIS SUBDIVISION.

S 1043. ISOLATION AND QUARANTINE. 1. AUTHORIZATION. DURING THE PUBLIC HEALTH EMERGENCY, A PUBLIC HEALTH AUTHORITY MAY ISOLATE OR QUARANTINE AN INDIVIDUAL OR GROUPS OF INDIVIDUALS. THIS INCLUDES INDIVIDUALS OR GROUPS WHO HAVE NOT BEEN VACCINATED, TREATED, TESTED OR EXAMINED PURSUANT TO SECTIONS ONE THOUSAND FORTY-ONE AND ONE THOUSAND FORTY-TWO OF THIS TITLE. THE PUBLIC HEALTH AUTHORITY MAY ALSO ESTABLISH AND MAINTAIN PLACES OF ISOLATION AND QUARANTINE, AND SET RULES AND MAKE ORDERS. FAILURE TO OBEY SUCH RULES, ORDERS OR PROVISIONS SHALL CONSTITUTE A MISDEMEANOR.

2. CONDITIONS AND PRINCIPLES. THE PUBLIC HEALTH AUTHORITY SHALL ADHERE TO THE FOLLOWING CONDITIONS AND PRINCIPLES WHEN ISOLATING OR QUARANTINING INDIVIDUALS OR GROUPS OF INDIVIDUALS:

(A) ISOLATION AND QUARANTINE SHALL BE BY THE LEAST RESTRICTIVE MEANS NECESSARY TO PREVENT THE SPREAD OF A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE TO OTHERS AND MAY INCLUDE, BUT NOT BE LIMITED TO, CONFINEMENT TO PRIVATE HOMES, OR OTHER PRIVATE AND PUBLIC PREMISES;

(B) ISOLATED INDIVIDUALS SHALL BE CONFINED SEPARATELY FROM QUARANTINED INDIVIDUALS;

(C) THE HEALTH STATUS OF ISOLATED AND QUARANTINED INDIVIDUALS SHALL BE MONITORED REGULARLY TO DETERMINE IF THEY REQUIRE ISOLATION OR QUARANTINE;

(D) IF A QUARANTINED INDIVIDUAL SUBSEQUENTLY BECOMES INFECTED OR IS REASONABLY BELIEVED TO HAVE BECOME INFECTED WITH A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE HE OR SHE SHALL PROMPTLY BE REMOVED TO ISOLATION;

(E) ISOLATED AND QUARANTINED INDIVIDUALS MUST BE IMMEDIATELY RELEASED WHEN THEY POSE NO SUBSTANTIAL RISK OF TRANSMITTING A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE TO OTHERS;

(F) THE NEEDS OF PERSONS ISOLATED AND QUARANTINED SHALL BE ADDRESSED IN A SYSTEMATIC AND COMPETENT FASHION INCLUDING, BUT NOT LIMITED TO, PROVIDING ADEQUATE FOOD, CLOTHING, SHELTER, MEANS OF COMMUNICATION WITH THOSE IN ISOLATION OR QUARANTINE AND OUTSIDE SUCH SETTINGS, MEDICATION AND COMPETENT MEDICAL CARE;

(G) PREMISES USED FOR ISOLATION AND QUARANTINE SHALL BE MAINTAINED IN A SAFE AND HYGIENIC MANNER, AND BE DESIGNED TO MINIMIZE THE LIKELIHOOD OF FURTHER TRANSMISSION OF INFECTION OR OTHER HARMS TO PERSONS ISOLATED AND QUARANTINED; AND

(H) TO THE EXTENT POSSIBLE, CULTURAL AND RELIGIOUS BELIEFS SHOULD BE CONSIDERED IN ADDRESSING THE NEEDS OF INDIVIDUALS, AND ESTABLISHING AND MAINTAINING ISOLATION AND QUARANTINE PREMISES.

3. COOPERATION. PERSONS SUBJECT TO ISOLATION OR QUARANTINE SHALL OBEY THE PUBLIC HEALTH AUTHORITY'S RULES AND ORDERS; AND SHALL NOT GO BEYOND THE ISOLATION OR QUARANTINE PREMISES. FAILURE TO OBEY SUCH RULES, ORDERS AND PROVISIONS SHALL CONSTITUTE A MISDEMEANOR.

4. ENTRY INTO ISOLATION OR QUARANTINE PREMISES. (A) AUTHORIZED ENTRY. THE PUBLIC HEALTH AUTHORITY MAY AUTHORIZE PHYSICIANS, HEALTH CARE WORKERS AND OTHERS TO HAVE ACCESS TO INDIVIDUALS IN ISOLATION OR QUARANTINE AS NECESSARY TO MEET THE NEEDS OF ISOLATED OR QUARANTINED INDIVIDUALS.

(B) UNAUTHORIZED ENTRY. NO PERSON, OTHER THAN A PERSON AUTHORIZED BY THE PUBLIC HEALTH AUTHORITY, SHALL ENTER ISOLATION OR QUARANTINE PREMISES. FAILURE TO OBEY THIS PARAGRAPH SHALL CONSTITUTE A MISDEMEANOR.

(C) POTENTIAL ISOLATION OR QUARANTINE. ANY PERSON ENTERING AN ISOLATION OR QUARANTINE PREMISES WITH OR WITHOUT AUTHORIZATION OF THE PUBLIC HEALTH AUTHORITY MAY BE ISOLATED OR QUARANTINED PURSUANT TO THIS SECTION.

S 1044. PROCEDURES FOR ISOLATION AND QUARANTINE. DURING A PUBLIC HEALTH EMERGENCY, THE ISOLATION AND QUARANTINE OF AN INDIVIDUAL OR GROUPS OF INDIVIDUALS SHALL BE UNDERTAKEN IN ACCORDANCE WITH THE FOLLOWING PROCEDURES:

1. TEMPORARY ISOLATION AND QUARANTINE WITHOUT NOTICE. (A) AUTHORIZATION. THE PUBLIC HEALTH AUTHORITY MAY TEMPORARILY ISOLATE OR QUARANTINE AN INDIVIDUAL OR GROUPS OF INDIVIDUALS THROUGH A WRITTEN DIRECTIVE IF DELAY IN IMPOSING THE ISOLATION OR QUARANTINE WOULD SIGNIFICANTLY JEOPARDIZE THE PUBLIC HEALTH AUTHORITY'S ABILITY TO PREVENT OR LIMIT THE TRANSMISSION OF A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE TO OTHERS.

(B) CONTENT OF DIRECTIVE. THE WRITTEN DIRECTIVE SHALL SPECIFY THE FOLLOWING: (I) THE IDENTITY OF THE INDIVIDUAL OR GROUPS OF INDIVIDUALS SUBJECT TO ISOLATION OR QUARANTINE; (II) THE PREMISES SUBJECT TO ISOLATION OR QUARANTINE; (III) THE DATE AND TIME AT WHICH ISOLATION OR QUARANTINE COMMENCES; (IV) THE SUSPECTED CONTAGIOUS DISEASE, IF KNOWN; AND (V) A COPY OF THIS TITLE AND THE RELEVANT DEFINITIONS OF THIS ARTICLE.

(C) COPIES. A COPY OF THE WRITTEN DIRECTIVE SHALL BE GIVEN TO THE INDIVIDUAL TO BE ISOLATED OR QUARANTINED OR, IF THE ORDER APPLIES TO A GROUP OF INDIVIDUALS AND IT IS IMPRACTICAL TO PROVIDE INDIVIDUAL COPIES, IT MAY BE POSTED IN A CONSPICUOUS PLACE IN THE ISOLATION OR QUARANTINE PREMISES.

(D) PETITION FOR CONTINUED ISOLATION OR QUARANTINE. WITHIN TEN DAYS AFTER ISSUING THE WRITTEN DIRECTIVE, THE PUBLIC HEALTH AUTHORITY SHALL FILE A PETITION PURSUANT TO SUBDIVISION TWO OF THIS SECTION FOR A COURT ORDER AUTHORIZING THE CONTINUED ISOLATION OR QUARANTINE OF THE ISOLATED OR QUARANTINED INDIVIDUAL OR GROUPS OF INDIVIDUALS.

2. ISOLATION OR QUARANTINE WITH NOTICE. (A) AUTHORIZATION. THE PUBLIC HEALTH AUTHORITY MAY MAKE A WRITTEN PETITION TO A TRIAL COURT FOR AN ORDER AUTHORIZING THE ISOLATION OR QUARANTINE OF AN INDIVIDUAL OR GROUPS OF INDIVIDUALS.

(B) CONTENT OF PETITION. A PETITION PURSUANT TO THIS SUBDIVISION SHALL SPECIFY THE FOLLOWING: (I) THE IDENTITY OF THE INDIVIDUAL OR GROUPS OF INDIVIDUALS SUBJECT TO ISOLATION OR QUARANTINE; (II) THE PREMISES SUBJECT TO ISOLATION OR QUARANTINE; (III) THE DATE AND TIME AT WHICH ISOLATION OR QUARANTINE COMMENCES; (IV) THE SUSPECTED CONTAGIOUS DISEASE, IF KNOWN; (V) A STATEMENT OF COMPLIANCE WITH THE CONDITIONS AND PRINCIPLES FOR ISOLATION AND QUARANTINE AS STATED IN SUBDIVISION TWO OF SECTION ONE THOUSAND FORTY-THREE OF THIS TITLE; AND (VI) A STATEMENT OF THE BASIS UPON WHICH ISOLATION OR QUARANTINE IS JUSTIFIED IN COMPLIANCE WITH THIS TITLE. THE PETITION SHALL BE ACCOMPANIED BY THE SWORN AFFIDAVIT OF THE PUBLIC HEALTH AUTHORITY ATTESTING TO THE FACTS ASSERTED IN THE PETITION, TOGETHER WITH ANY FURTHER INFORMATION THAT MAY BE RELEVANT AND MATERIAL TO THE COURT'S CONSIDERATION.

(C) NOTICE. NOTICE TO THE INDIVIDUAL OR GROUPS OF INDIVIDUALS IDENTIFIED IN THE PETITION SHALL BE ACCOMPLISHED WITHIN TWENTY-FOUR HOURS IN ACCORDANCE WITH THE CIVIL PRACTICE LAW AND RULES.

(D) HEARING. A HEARING MUST BE HELD ON ANY PETITION FILED PURSUANT TO THIS SUBDIVISION WITHIN FIVE DAYS OF FILING OF THE PETITION. IN

EXTRAORDINARY CIRCUMSTANCES AND FOR GOOD CAUSE SHOWN THE PUBLIC HEALTH AUTHORITY MAY APPLY TO CONTINUE THE HEARING DATE ON A PETITION FILED PURSUANT TO THIS SECTION FOR UP TO TEN DAYS, WHICH CONTINUANCE THE COURT MAY GRANT IN ITS DISCRETION GIVING DUE REGARD TO THE RIGHTS OF THE AFFECTED INDIVIDUALS, THE PROTECTION OF THE PUBLIC'S HEALTH, THE SEVERITY OF THE EMERGENCY AND THE AVAILABILITY OF NECESSARY WITNESSES AND EVIDENCE.

(E) ORDER. THE COURT SHALL GRANT THE PETITION IF, BY A PREPONDERANCE OF THE EVIDENCE, ISOLATION OR QUARANTINE IS SHOWN TO BE REASONABLY NECESSARY TO PREVENT OR LIMIT THE TRANSMISSION OF A CONTAGIOUS OR POSSIBLY CONTAGIOUS DISEASE TO OTHERS.

(I) AN ORDER AUTHORIZING ISOLATION OR QUARANTINE MAY DO SO FOR A PERIOD NOT TO EXCEED THIRTY DAYS.

(II) SUCH ORDER SHALL (A) IDENTIFY THE ISOLATED OR QUARANTINED INDIVIDUALS OR GROUPS OF INDIVIDUALS BY NAME OR SHARED OR SIMILAR CHARACTERISTICS OR CIRCUMSTANCES; (B) SPECIFY FACTUAL FINDINGS WARRANTING ISOLATION OR QUARANTINE PURSUANT TO THIS ARTICLE; (C) INCLUDE ANY CONDITIONS NECESSARY TO ENSURE THAT ISOLATION OR QUARANTINE IS CARRIED OUT WITHIN THE STATED PURPOSES AND RESTRICTIONS OF THIS ARTICLE; AND (D) BE SERVED ON AFFECTED INDIVIDUALS OR GROUPS OF INDIVIDUALS IN ACCORDANCE WITH THE CIVIL PRACTICE LAW AND RULES.

(F) CONTINUANCES. PRIOR TO THE EXPIRATION OF AN ORDER ISSUED PURSUANT TO PARAGRAPH (E) OF THIS SUBDIVISION, THE PUBLIC HEALTH AUTHORITY MAY MOVE TO CONTINUE ISOLATION OR QUARANTINE FOR ADDITIONAL PERIODS NOT TO EXCEED THIRTY DAYS EACH. THE TRIAL COURT SHALL CONSIDER THE MOTION IN ACCORDANCE WITH STANDARDS SET FORTH IN SUCH PARAGRAPH.

3. RELIEF FROM ISOLATION AND QUARANTINE. (A) RELEASE. AN INDIVIDUAL OR GROUP OF INDIVIDUALS ISOLATED OR QUARANTINED PURSUANT TO THIS ARTICLE MAY APPLY TO THE TRIAL COURT FOR AN ORDER TO SHOW CAUSE WHY THE INDIVIDUAL OR GROUP OF INDIVIDUALS SHOULD NOT BE RELEASED. THE COURT SHALL RULE ON THE APPLICATION TO SHOW CAUSE WITHIN FORTY-EIGHT HOURS OF ITS FILING. IF THE COURT GRANTS THE APPLICATION, THE COURT SHALL SCHEDULE A HEARING ON THE ORDER TO SHOW CAUSE WITHIN TWENTY-FOUR HOURS FROM ISSUANCE OF THE ORDER TO SHOW CAUSE. THE ISSUANCE OF AN ORDER TO SHOW CAUSE SHALL NOT STAY OR ENJOIN AN ISOLATION OR QUARANTINE ORDER.

(B) REMEDIES FOR BREACH OF CONDITIONS. AN INDIVIDUAL OR GROUP OF INDIVIDUALS ISOLATED OR QUARANTINED PURSUANT TO THIS ARTICLE MAY REQUEST A HEARING IN THE TRIAL COURT FOR REMEDIES REGARDING BREACHES TO THE CONDITIONS OF ISOLATION OR QUARANTINE. A REQUEST FOR A HEARING SHALL NOT STAY OR ENJOIN AN ISOLATION OR QUARANTINE ORDER.

(I) UPON RECEIPT OF A REQUEST PURSUANT TO THIS PARAGRAPH ALLEGING EXTRAORDINARY CIRCUMSTANCES JUSTIFYING THE IMMEDIATE GRANTING OF RELIEF, THE COURT SHALL FIX A DATE FOR HEARING ON THE MATTERS ALLEGED NOT MORE THAN TWENTY-FOUR HOURS FROM RECEIPT OF THE REQUEST.

(II) OTHERWISE, UPON RECEIPT OF A REQUEST PURSUANT TO THIS PARAGRAPH THE COURT SHALL FIX A DATE FOR A HEARING ON THE MATTERS ALLEGED WITHIN FIVE DAYS FROM RECEIPT OF THE REQUEST.

(C) EXTENSIONS. IN ANY PROCEEDINGS BROUGHT FOR RELIEF, IN EXTRAORDINARY CIRCUMSTANCES AND FOR GOOD CAUSE SHOWN, THE PUBLIC HEALTH AUTHORITY MAY MOVE THE COURT TO EXTEND THE TIME FOR A HEARING, WHICH EXTENSION THE COURT IN ITS DISCRETION MAY GRANT GIVING DUE REGARD TO THE RIGHTS OF THE AFFECTED INDIVIDUALS, THE PROTECTION OF THE PUBLIC'S HEALTH, THE SEVERITY OF THE EMERGENCY AND THE AVAILABILITY OF NECESSARY WITNESSES AND EVIDENCE.

4. PROCEEDINGS. A RECORD OF THE PROCEEDINGS PURSUANT TO THIS SECTION SHALL BE MADE AND RETAINED. IN THE EVENT THAT, GIVEN A STATE OF PUBLIC

HEALTH EMERGENCY, PARTIES CAN NOT PERSONALLY APPEAR BEFORE THE COURT, PROCEEDINGS MAY BE CONDUCTED BY THEIR AUTHORIZED REPRESENTATIVES AND BE HELD VIA ANY MEANS THAT ALLOWS ALL PARTIES TO FULLY PARTICIPATE.

5. COURT TO APPOINT COUNSEL AND CONSOLIDATE CLAIMS. (A) APPOINTMENT. THE COURT SHALL APPOINT COUNSEL AT STATE EXPENSE TO REPRESENT INDIVIDUALS OR GROUPS OF INDIVIDUALS WHO ARE OR WHO ARE ABOUT TO BE ISOLATED OR QUARANTINED PURSUANT TO THE PROVISIONS OF THIS ARTICLE AND WHO ARE NOT OTHERWISE REPRESENTED BY COUNSEL. APPOINTMENTS SHALL BE MADE IN ACCORDANCE WITH THE PROCEDURES TO BE SPECIFIED IN THE PUBLIC HEALTH EMERGENCY PLAN AND SHALL LAST THROUGHOUT THE DURATION OF THE ISOLATION OR QUARANTINE OF THE INDIVIDUAL OR GROUP OF INDIVIDUALS. THE PUBLIC HEALTH AUTHORITY SHALL PROVIDE ADEQUATE MEANS OF COMMUNICATION BETWEEN SUCH INDIVIDUALS OR GROUPS AND THEIR COUNSEL.

(B) CONSOLIDATION. IN ANY PROCEEDINGS BROUGHT PURSUANT TO THIS SECTION, TO PROMOTE THE FAIR AND EFFICIENT OPERATION OF JUSTICE AND HAVING GIVEN DUE REGARD TO THE RIGHTS OF THE AFFECTED INDIVIDUALS, THE PROTECTION OF THE PUBLIC'S HEALTH, THE SEVERITY OF THE EMERGENCY AND THE AVAILABILITY OF NECESSARY WITNESSES AND EVIDENCE, THE COURT MAY ORDER THE CONSOLIDATION OF INDIVIDUAL CLAIMS INTO GROUP OR CLAIMS WHERE:

(I) THE NUMBER OF INDIVIDUALS INVOLVED OR TO BE AFFECTED IS SO LARGE AS TO RENDER INDIVIDUAL PARTICIPATION IMPRACTICAL;

(II) THERE ARE QUESTIONS OF LAW OR FACT COMMON TO THE INDIVIDUAL CLAIMS OR RIGHTS TO BE DETERMINED;

(III) THE GROUP CLAIMS OR RIGHTS TO BE DETERMINED ARE TYPICAL OF THE AFFECTED INDIVIDUALS' CLAIMS OR RIGHTS; AND

(IV) THE ENTIRE GROUP WILL BE ADEQUATELY REPRESENTED IN THE CONSOLIDATION.

S 1045. COLLECTION OF LABORATORY SPECIMENS; PERFORMANCE OF TESTS. THE PUBLIC HEALTH AUTHORITY MAY, FOR SUCH PERIOD AS THE STATE OF PUBLIC HEALTH EMERGENCY EXISTS, COLLECT SPECIMENS AND PERFORM TESTS ON LIVING PERSONS PURSUANT TO SECTION ONE THOUSAND FORTY-ONE OF THIS TITLE AND ALSO UPON DECEASED PERSONS AND ANIMALS (LIVING OR DECEASED), AND ACQUIRE ANY PREVIOUSLY COLLECTED SPECIMENS OR TEST RESULTS THAT ARE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY.

1. MARKING. ALL SPECIMENS SHALL BE CLEARLY MARKED.

2. CONTAMINATION. SPECIMEN COLLECTION, HANDLING, STORAGE AND TRANSPORT TO THE TESTING SITE SHALL BE PERFORMED IN A MANNER THAT WILL REASONABLY PRECLUDE SPECIMEN CONTAMINATION OR ADULTERATION, AND PROVIDE FOR THE SAFE COLLECTION, STORAGE, HANDLING AND TRANSPORT OF SUCH SPECIMEN.

3. CHAIN OF CUSTODY. ANY PERSON AUTHORIZED TO COLLECT SPECIMENS OR PERFORM TESTS SHALL USE CHAIN OF CUSTODY PROCEDURES TO ENSURE PROPER RECORD KEEPING, HANDLING, LABELING AND IDENTIFICATION OF SPECIMENS TO BE TESTED. THIS REQUIREMENT APPLIES TO ALL SPECIMENS, INCLUDING SPECIMENS COLLECTED USING ON-SITE TESTING KITS.

4. CRIMINAL INVESTIGATION. RECOGNIZING THAT, DURING A STATE OF PUBLIC HEALTH EMERGENCY, ANY SPECIMEN COLLECTED OR TEST PERFORMED MAY BE EVIDENCE IN A CRIMINAL INVESTIGATION, ANY BUSINESS, FACILITY OR AGENCY AUTHORIZED TO COLLECT SPECIMENS OR PERFORM TESTS SHALL PROVIDE SUCH SUPPORT AS IS REASONABLE AND NECESSARY TO AID IN A RELEVANT CRIMINAL INVESTIGATION.

S 1046. ACCESS AND DISCLOSURE OF PROTECTED HEALTH INFORMATION. 1. ACCESS. ACCESS TO PROTECTED HEALTH INFORMATION OF PERSONS WHO HAVE PARTICIPATED IN MEDICAL TESTING, TREATMENT, VACCINATION, ISOLATION OR QUARANTINE PROGRAMS, OR EFFORTS BY THE PUBLIC HEALTH AUTHORITY DURING A PUBLIC HEALTH EMERGENCY SHALL BE LIMITED TO THOSE PERSONS HAVING A LEGITIMATE NEED TO ACQUIRE OR USE SUCH INFORMATION TO:

(A) PROVIDE TREATMENT TO THE INDIVIDUAL WHO IS THE SUBJECT OF SUCH INFORMATION;
(B) CONDUCT EPIDEMIOLOGIC RESEARCH; OR
(C) INVESTIGATE THE CAUSES OF TRANSMISSION.
2. DISCLOSURE. PROTECTED HEALTH INFORMATION HELD BY THE PUBLIC HEALTH AUTHORITY SHALL NOT BE DISCLOSED TO ANOTHER PERSON WITHOUT INDIVIDUAL, WRITTEN, SPECIFIC, INFORMED CONSENT, EXCEPT FOR DISCLOSURES MADE:
(A) DIRECTLY TO THE INDIVIDUAL;
(B) TO THE INDIVIDUAL'S IMMEDIATE FAMILY MEMBERS OR PERSONAL REPRESENTATIVE;
(C) TO APPROPRIATE FEDERAL AGENCIES OR AUTHORITIES PURSUANT TO FEDERAL LAW;
(D) PURSUANT TO A COURT ORDER TO AVERT A CLEAR DANGER TO AN INDIVIDUAL OR THE PUBLIC HEALTH; OR
(E) TO IDENTIFY A DECEASED INDIVIDUAL OR DETERMINE THE MANNER OR CAUSE OF DEATH.
S 1047. LICENSING AND APPOINTMENT OF HEALTH PERSONNEL. THE PUBLIC HEALTH AUTHORITY MAY EXERCISE, FOR SUCH PERIOD AS THE STATE OF PUBLIC HEALTH EMERGENCY EXISTS, THE FOLLOWING EMERGENCY POWERS REGARDING THE LICENSING AND APPOINTMENT OF HEALTH PERSONNEL:
1. HEALTH CARE PROVIDERS. TO REQUIRE IN-STATE HEALTH CARE PROVIDERS TO ASSIST IN THE PERFORMANCE OF VACCINATION, EXAMINATION AND TREATMENT OF ANY PERSON AS A CONDITION OF CONTINUED LICENSURE AUTHORIZATION, OR THE ABILITY TO CONTINUE TO FUNCTION AS A HEALTH CARE PROVIDER IN THIS STATE.
2. HEALTH CARE PROVIDERS FROM OTHER JURISDICTIONS. TO APPOINT AND PRESCRIBE THE DUTIES OF SUCH OUT-OF-STATE EMERGENCY HEALTH CARE PROVIDERS AS MAY BE REASONABLE AND NECESSARY TO RESPOND TO THE PUBLIC HEALTH EMERGENCY.
(A) THE APPOINTMENT OF OUT-OF-STATE EMERGENCY HEALTH CARE PROVIDERS PURSUANT TO THIS SUBDIVISION MAY BE FOR A LIMITED OR UNLIMITED TIME, BUT SHALL NOT EXCEED THE TERMINATION OF THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY. THE PUBLIC HEALTH AUTHORITY MAY TERMINATE THE OUT-OF-STATE APPOINTMENTS AT ANY TIME OR FOR ANY REASON PROVIDED THAT ANY SUCH TERMINATION WILL NOT JEOPARDIZE THE HEALTH, SAFETY AND WELFARE OF THE PEOPLE OF THIS STATE.
(B) THE PUBLIC HEALTH AUTHORITY MAY WAIVE ANY OR ALL LICENSING REQUIREMENTS, PERMITS AND FEES REQUIRED BY STATE LAW AND APPLICABLE ORDERS, RULES OR REGULATIONS FOR HEALTH CARE PROVIDERS FROM OTHER JURISDICTIONS TO PRACTICE IN THIS STATE.
(C) ANY OUT-OF-STATE EMERGENCY HEALTH CARE PROVIDER APPOINTED PURSUANT TO THIS SUBDIVISION SHALL NOT BE HELD LIABLE FOR ANY CIVIL DAMAGES AS A RESULT OF MEDICAL CARE OR TREATMENT RELATED TO THE RESPONSE TO THE PUBLIC HEALTH EMERGENCY UNLESS SUCH DAMAGES RESULT FROM PROVIDING OR FAILING TO PROVIDE MEDICAL CARE OR TREATMENT UNDER CIRCUMSTANCES DEMONSTRATING A RECKLESS DISREGARD FOR THE CONSEQUENCES SO AS TO AFFECT THE LIFE OR HEALTH OF THE PATIENT.
3. PERSONNEL TO PERFORM DUTIES OF MEDICAL EXAMINER OR CORONER. TO AUTHORIZE A MEDICAL EXAMINER OR CORONER TO APPOINT AND PRESCRIBE THE DUTIES OF SUCH EMERGENCY ASSISTANT MEDICAL EXAMINERS OR CORONERS AS MAY BE REQUIRED FOR THE PROPER PERFORMANCE OF THE DUTIES OF THE OFFICE.
(A) THE APPOINTMENT OF EMERGENCY ASSISTANT MEDICAL EXAMINERS OR CORONERS PURSUANT TO THIS SUBDIVISION MAY BE FOR A LIMITED OR UNLIMITED TIME, BUT SHALL NOT EXCEED THE TERMINATION OF THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY. THE MEDICAL EXAMINER OR CORONER MAY TERMINATE SUCH EMERGENCY APPOINTMENTS AT ANY TIME OR FOR ANY REASON, PROVIDED THAT

ANY SUCH TERMINATION WILL NOT IMPEDE THE PERFORMANCE OF DUTIES OF THE OFFICE.

(B) THE MEDICAL EXAMINER OR CORONER MAY WAIVE ANY OR ALL LICENSING REQUIREMENTS, PERMITS AND FEES REQUIRED BY STATE LAW AND APPLICABLE ORDERS, RULES AND REGULATIONS FOR THE PERFORMANCE OF SUCH DUTIES.

(C) ANY EMERGENCY ASSISTANT MEDICAL EXAMINER OR CORONER APPOINTED PURSUANT TO THIS SUBDIVISION, AND ACTING WITHOUT MALICE AND WITHIN THE SCOPE OF HIS OR HER PRESCRIBED DUTIES SHALL BE IMMUNE FROM CIVIL LIABILITY IN THE PERFORMANCE OF SUCH DUTIES.

TITLE VII

PUBLIC INFORMATION REGARDING PUBLIC HEALTH EMERGENCIES

SECTION 1050. DISSEMINATION OF INFORMATION.
1051. ACCESS TO MENTAL HEALTH SUPPORT PERSONNEL.

S 1050. DISSEMINATION OF INFORMATION. THE PUBLIC HEALTH AUTHORITY SHALL INFORM THE PEOPLE OF THE STATE WHEN A STATE OF PUBLIC HEALTH EMERGENCY HAS BEEN DECLARED OR TERMINATED, HOW TO PROTECT THEMSELVES AND WHAT ACTIONS ARE BEING TAKEN TO CONTROL THE EMERGENCY.

1. MEANS OF DISSEMINATION. THE PUBLIC HEALTH AUTHORITY SHALL PROVIDE INFORMATION BY ALL AVAILABLE AND REASONABLE MEANS CALCULATED TO BRING THE INFORMATION PROMPTLY TO THE ATTENTION OF THE GENERAL PUBLIC.

2. LANGUAGES. IF THE PUBLIC HEALTH AUTHORITY HAS REASON TO BELIEVE THERE ARE LARGE NUMBERS OF PEOPLE OF THE STATE WHO LACK SUFFICIENT SKILLS IN ENGLISH TO UNDERSTAND THE INFORMATION, THE PUBLIC HEALTH AUTHORITY SHALL MAKE REASONABLE EFFORTS TO PROVIDE THE INFORMATION IN THE PRIMARY LANGUAGES OF THOSE PEOPLE AS WELL AS IN ENGLISH.

3. ACCESSIBILITY. THE PROVISION OF INFORMATION SHALL BE MADE IN A MANNER ACCESSIBLE TO INDIVIDUALS WITH DISABILITIES.

S 1051. ACCESS TO MENTAL HEALTH SUPPORT PERSONNEL. DURING AND AFTER THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY, THE PUBLIC HEALTH AUTHORITY SHALL PROVIDE INFORMATION ABOUT AND REFERRALS TO MENTAL HEALTH SUPPORT PERSONNEL TO ADDRESS PSYCHOLOGICAL RESPONSES TO THE PUBLIC HEALTH EMERGENCY.

TITLE VIII

MISCELLANEOUS

SECTION 1070. TITLES.
1071. RULES AND REGULATIONS.
1072. FINANCING AND EXPENSES.
1073. LIABILITY.
1074. COMPENSATION.
1075. SEVERABILITY.
1076. SAVING CLAUSE.
1077. CONFLICTING LAWS.

S 1070. TITLES. FOR THE PURPOSES OF THIS ARTICLE, THE TITLES OF THE TITLES, SECTIONS, SUBDIVISIONS AND PARAGRAPHS ARE INSTRUCTIVE, BUT NOT BINDING.

S 1071. RULES AND REGULATIONS. THE PUBLIC HEALTH AUTHORITY AND OTHER AFFECTED AGENCIES ARE AUTHORIZED TO PROMULGATE AND IMPLEMENT SUCH RULES AND REGULATIONS AS ARE REASONABLE AND NECESSARY TO IMPLEMENT AND EFFECTUATE THE PROVISIONS OF THIS ARTICLE. THE PUBLIC HEALTH AUTHORITY AND OTHER AFFECTED AGENCIES SHALL HAVE THE POWER TO ENFORCE THE PROVISIONS OF THIS ARTICLE THROUGH THE IMPOSITION OF FINES AND PENALTIES, THE ISSUANCE OF ORDERS AND SUCH OTHER REMEDIES AS ARE PROVIDED BY LAW, BUT NOTHING IN THIS SECTION SHALL BE CONSTRUED TO LIMIT THE SPECIFIC ENFORCEMENT POWERS ENUMERATED IN THIS ARTICLE.

S 1072. FINANCING AND EXPENSES. 1. TRANSFER OF FUNDS. THE GOVERNOR MAY TRANSFER FROM ANY FUND AVAILABLE TO THE GOVERNOR IN THE STATE TREASURY SUCH SUMS AS MAY BE NECESSARY DURING A STATE OF PUBLIC HEALTH EMERGENCY.

2. REPAYMENT. MONIES SO TRANSFERRED SHALL BE REPAID TO THE FUND FROM WHICH THEY WERE TRANSFERRED WHEN MONIES BECOME AVAILABLE FOR THAT PURPOSE, BY LEGISLATIVE APPROPRIATION OR OTHERWISE.

3. CONDITIONS. A TRANSFER OF FUNDS BY THE GOVERNOR UNDER THE PROVISIONS OF THIS SECTION MAY BE MADE ONLY WHEN ONE OR MORE OF THE FOLLOWING CONDITIONS EXIST:

(A) NO APPROPRIATION OR OTHER AUTHORIZATION IS AVAILABLE TO MEET THE PUBLIC HEALTH EMERGENCY.

(B) AN APPROPRIATION IS INSUFFICIENT TO MEET THE PUBLIC HEALTH EMERGENCY.

(C) FEDERAL MONIES AVAILABLE FOR SUCH A PUBLIC HEALTH EMERGENCY REQUIRE THE USE OF STATE OR OTHER PUBLIC MONIES.

4. EXPENSES. ALL EXPENSES INCURRED BY THE STATE DURING A STATE OF PUBLIC HEALTH EMERGENCY SHALL BE SUBJECT TO THE FOLLOWING LIMITATIONS:

(A) NO EXPENSE SHALL BE INCURRED AGAINST THE MONIES AUTHORIZED UNDER THIS SECTION, WITHOUT THE GENERAL APPROVAL OF THE GOVERNOR.

(B) MONIES AUTHORIZED FOR A STATE OF PUBLIC HEALTH EMERGENCY IN PRIOR FISCAL YEARS MAY BE USED IN SUBSEQUENT FISCAL YEARS ONLY FOR THE PUBLIC HEALTH EMERGENCY FOR WHICH THEY WERE AUTHORIZED.

S 1073. LIABILITY. 1. STATE IMMUNITY. NEITHER THE STATE, ITS POLITICAL SUBDIVISIONS, NOR, EXCEPT IN CASES OF GROSS NEGLIGENCE OR WILLFUL MISCONDUCT, THE GOVERNOR, THE PUBLIC HEALTH AUTHORITY AND ANY OTHER STATE OR LOCAL OFFICIAL REFERENCED IN THIS ARTICLE, IS LIABLE FOR THE DEATH OF OR ANY INJURY TO PERSONS, OR DAMAGE TO PROPERTY, AS A RESULT OF COMPLYING WITH OR ATTEMPTING TO COMPLY WITH THIS ARTICLE OR ANY RULE OR REGULATION PROMULGATED PURSUANT TO THIS ARTICLE DURING A STATE OF PUBLIC HEALTH EMERGENCY.

2. PRIVATE LIABILITY. (A) DURING A STATE OF PUBLIC HEALTH EMERGENCY, ANY PERSON OWNING OR CONTROLLING REAL PROPERTY OR OTHER PREMISES WHO VOLUNTARILY AND WITHOUT COMPENSATION GRANTS A LICENSE OR PRIVILEGE, OR OTHERWISE PERMITS THE DESIGNATION OR USE OF THE WHOLE OR ANY PART OR PARTS OF SUCH REAL PROPERTY OR PREMISES FOR THE PURPOSE OF SHELTERING PERSONS, TOGETHER WITH SUCH PERSON'S SUCCESSORS IN INTEREST, IF ANY, SHALL NOT BE CIVILLY LIABLE FOR NEGLIGENTLY CAUSING THE DEATH OF OR INJURY TO ANY PERSON ON OR ABOUT SUCH REAL PROPERTY OR PREMISES UNDER SUCH LICENSE, PRIVILEGE OR OTHER PERMISSION, OR FOR NEGLIGENTLY CAUSING LOSS OF OR DAMAGE TO THE PROPERTY OF SUCH PERSON.

(B) DURING A STATE OF PUBLIC HEALTH EMERGENCY, ANY PRIVATE PERSON, FIRM OR CORPORATION, AND THE EMPLOYEES AND AGENTS OF SUCH PERSON, FIRM OR CORPORATION IN THE PERFORMANCE OF A CONTRACT WITH AND UNDER THE DIRECTION OF THE STATE OR ITS POLITICAL SUBDIVISION UNDER THE PROVISIONS OF THIS ARTICLE SHALL NOT BE CIVILLY LIABLE FOR CAUSING THE DEATH OF OR INJURY TO ANY PERSON, OR DAMAGE TO ANY PROPERTY, EXCEPT IN THE EVENT OF GROSS NEGLIGENCE OR WILLFUL MISCONDUCT.

(C) DURING A STATE OF PUBLIC HEALTH EMERGENCY, ANY PRIVATE PERSON, FIRM OR CORPORATION, AND THE EMPLOYEES AND AGENTS OF SUCH PERSON, FIRM OR CORPORATION, WHO RENDERS ASSISTANCE OR ADVICE AT THE REQUEST OF THE STATE OR ITS POLITICAL SUBDIVISIONS UNDER THE PROVISIONS OF THIS ARTICLE SHALL NOT BE CIVILLY LIABLE FOR CAUSING THE DEATH OF OR INJURY TO ANY PERSON, OR DAMAGE TO ANY PROPERTY, EXCEPT IN THE EVENT OF GROSS NEGLIGENCE OR WILLFUL MISCONDUCT.

(D) THE IMMUNITIES PROVIDED IN THIS SECTION SHALL NOT APPLY TO ANY PRIVATE PERSON, FIRM, OR CORPORATION, OR THE EMPLOYEES AND AGENTS OF

SUCH PERSON, FIRM OR CORPORATION WHOSE ACT OR OMISSION CAUSED IN WHOLE OR IN PART THE PUBLIC HEALTH EMERGENCY, AND WHO WOULD OTHERWISE BE LIABLE THEREFOR.

S 1074. COMPENSATION. 1. TAKING. COMPENSATION FOR PROPERTY SHALL BE MADE ONLY IF PRIVATE PROPERTY IS LAWFULLY TAKEN OR APPROPRIATED BY A PUBLIC HEALTH AUTHORITY FOR ITS TEMPORARY OR PERMANENT USE DURING A STATE OF PUBLIC HEALTH EMERGENCY DECLARED BY THE GOVERNOR PURSUANT TO THIS ARTICLE.

2. ACTIONS. ANY ACTION AGAINST THE STATE WITH REGARD TO THE PAYMENT OF COMPENSATION SHALL BE BROUGHT IN THE COURT OF CLAIMS IN ACCORDANCE WITH THE STATE CONSTITUTION, EXISTING STATE LAW, COURT RULES, OR ANY SUCH RULES THAT MAY BE DEVELOPED BY THE COURTS FOR USE DURING A STATE OF PUBLIC HEALTH EMERGENCY.

3. AMOUNT. THE AMOUNT OF COMPENSATION SHALL BE CALCULATED IN THE SAME MANNER AS COMPENSATION DUE FOR TAKING OF PROPERTY PURSUANT TO THE PROVISIONS OF THE EMINENT DOMAIN PROCEDURE LAW, EXCEPT THAT THE AMOUNT OF COMPENSATION CALCULATED FOR ITEMS OBTAINED UNDER SECTION ONE THOUSAND THIRTY-FOUR OF THIS ARTICLE SHALL BE LIMITED TO THE COSTS INCURRED TO PRODUCE THE ITEM.

S 1075. SEVERABILITY. THE PROVISIONS OF THIS ARTICLE ARE SEVERABLE. IF ANY PROVISION OF THIS ARTICLE OR ITS APPLICATION TO ANY PERSON OR CIRCUMSTANCES IS HELD INVALID IN A FEDERAL OR STATE COURT HAVING JURISDICTION, THE INVALIDITY WILL NOT AFFECT OTHER PROVISIONS OR APPLICATIONS OF THIS ARTICLE THAT CAN BE GIVEN EFFECT WITHOUT THE INVALID PROVISION OR APPLICATION.

S 1076. SAVING CLAUSE. THIS ARTICLE DOES NOT EXPLICITLY PREEMPT OTHER LAWS OR REGULATIONS THAT PRESERVE TO A GREATER DEGREE THE POWERS OF THE GOVERNOR OR PUBLIC HEALTH AUTHORITY, PROVIDED SUCH LAWS OR REGULATIONS ARE CONSISTENT, AND DO NOT OTHERWISE RESTRICT OR INTERFERE, WITH THE OPERATION OR ENFORCEMENT OF THE PROVISIONS OF THIS ARTICLE.

S 1077. CONFLICTING LAWS. 1. FEDERAL SUPREMACY. THIS ARTICLE DOES NOT RESTRICT ANY PERSON FROM COMPLYING WITH FEDERAL LAWS OR REGULATIONS.

2. PRIOR CONFLICTING ACTS. IN THE EVENT OF A CONFLICT BETWEEN THIS ARTICLE AND ANY OTHER PROVISION OF LAW, RULE OR REGULATION CONCERNING PUBLIC HEALTH POWERS, THE PROVISIONS OF THIS ARTICLE APPLY.

S 3. This act shall take effect immediately.