§ 352. County or part-county health commissioners; powers and duties. 1. Every county health commissioner shall devote his entire time to the duties of his office except that in a county operating as a county health district, the boundaries of which are co-terminous with the county, he may, with the approval of the commissioner, be appointed superintendent of the county general hospital and further excepted, that in a county or part-county health district, he may, with the approval of the commissioner, be appointed medical consultant to any county or other local governmental agency within the county or part-county health district.

2. The county health commissioner shall, within his district, exercise general supervision and control of the medical treatment of patients in the institutions, public health centers and clinics operated by the health district and possess all the powers conferred upon and perform all the duties required of local health officers.

3. (a) The county health commissioner, within his district and with the approval of the county board of health, or the county manager or county executive in those counties having an optional or alternative form of county government, and with the approval of the state commissioner of health, may enter into contracts

(1) with corporations duly licensed in the state of New York to transact the business of accident and health insurance to provide to sick and disabled persons insured by them such home care, including nursing and other paramedical services (excluding physicians' services) as may be needed by them;

(2) with hospital service corporations organized and operating in accordance with article forty-three of the insurance law to provide to their subscribers nursing service and such other paramedical services as would have been available in a hospital (excluding physicians' services) at rates which shall prior to payment be approved as to reasonableness by the superintendent of financial services;

(3) with any municipal corporation or local, state or federal agency to provide such home care, including nursing and other paramedical services (excluding physicians' services) as may be needed by sick and disabled persons;

(4) with medical expense indemnity corporations organized and operating in accordance with article forty-three of the insurance law to provide their subscribers with such home care, including nursing and other paramedical services as may be needed by them at rates which shall prior to payment be approved as to reasonableness by the superintendent of financial services; and

(5) with any non-profit corporation, agency or association established for the purpose of improvement of health services, or for the purpose of providing home care for sick and disabled persons, including nursing and other paramedical services (excluding physicians' services) as may be needed by such persons.

(6) with any dentist, physician or group of physicians, without public bidding, for the rental or use of a portion of a clinic or public health center and its equipment and furnishings provided, however, that any such dentist, physician or group of physicians shall render such care and treatment as shall be necessary or possible under the circumstances to any person found eligible for emergency treatment including those found in an unconscious, seriously ill or wounded condition and to any person eligible for medical assistance pursuant to section three hundred sixty-six of the social services law.

(b) such county commissioner, manager or executive, as the case may be, shall establish the fees to be charged for such services to be rendered pursuant to such contracts, collect such fees and pay the same over to the fiscal officer of the county in the manner provided by law. No contract made in accordance with the provisions of subdivision (a) of this section shall require payment for such services to an insured or subscriber at a rate in excess of the charge for the same service, if any, provided to a person afflicted with a similar disease or condition who is neither insured nor a subscriber.

4. The county or part-county health commissioner within his district and with the approval of the county or part-county board of health, or the county manager or county executive in those counties having an optional or alternate form of county government and with the approval of the state commissioner of health may establish and collect fees from a patient or a person or private or public agency responsible for his care for services rendered to patients in the institutions, public health

centers and clinics operated by the health district and for nursing and paramedical services (excluding physicians' services) rendered to people sick at home. Fees so collected shall be paid to the fiscal officer of the county in the manner provided by law.

5. The county or part-county health commissioner may in his discretion, in proper cases, where substantial justice will best be served thereby, waive the collection of all, or any portion of, such fees or compromise any portion of such fees. Such waiver or compromise shall be made only upon prior approval of the county or part-county board of health, or the county manager or county executive in those counties having an optional or alternate form of county government, when it is deemed to be in the best interests of the county.

6. The county or part-county health commissioner, the public health director, the New York city commissioner of health or the county manager or county executive in those counties having an optional or alternate form of county government, may contract with a private collection agency for the collection of overdue claims and obligations with respect to fees charged for physician, dentist, nursing, paramedical, therapist, laboratory and home health services and medical supplies and equipment or other health-related services provided by, on behalf of, or at the request of the county or part-county health district or health department.