§ 602. Core public health services. 1. To be eligible for state aid, a municipality must provide the following core public health services:

(a) Family health, which shall include activities designed to reduce perinatal, infant and maternal mortality and morbidity and to promote the health of infants, children, adolescents, and people of childbearing age. Such activities shall include family centered perinatal services and other services appropriate to promote the birth of a healthy baby to a healthy mother, and services to assure that infants, young children, and school age children are enrolled in appropriate health insurance programs and other health benefit programs for which they are eligible, and that the parents or guardians of such children are provided with information concerning health care providers in their area that are willing and able to provide health services to such children. Provision of primary and preventive clinical health care services shall be eligible for state aid for uninsured persons under the age of twenty-one, provided that the municipality makes good faith efforts to assist such persons with insurance enrollment and only until such time as enrollment becomes effective. Provision of prenatal clinical health care services shall be eligible for state aid for uninsured women of any age, provided that the municipality makes good faith efforts to assist such women with insurance enrollment and only until such time as enrollment becomes effective.

(b) Communicable disease control, which shall include activities to control and mitigate the extent of infectious diseases. Such activities shall include, but not be limited to, surveillance and epidemiological programs, programs to detect diseases in their early stages, immunizations against infectious diseases, investigation of diseases and prevention of transmission, prevention and treatment of sexually transmissible diseases, and arthropod vector-borne disease prevention.

(c) Chronic disease prevention, which shall include promoting public, health care provider and other community service provider activities that encourage chronic disease prevention, early detection and quality care delivery. Such activities include, but are not limited to, those that promote healthy communities and reduce risk factors such as tobacco use, poor nutrition and physical inactivity. Provision of clinical services shall not be eligible for state aid, subject to such exceptions as the commissioner may deem appropriate.

(d) Community health assessment, as described in section six hundred two-a of this article.

(e) Environmental health, which shall include activities that promote health and prevent illness and injury by assuring that safe and sanitary conditions are maintained at public drinking water supplies, food service establishments, and other regulated facilities; investigating public health nuisances to assure abatement by responsible parties; protecting the public from unnecessary exposure to radiation, chemicals, and other harmful contaminants; and conducting investigations of incidents that result in illness, injury or death in order to identify and mitigate the environmental causes to prevent additional morbidity and mortality.

(f) Public health emergency preparedness and response, including planning, training, and maintaining readiness for public health emergencies.

2. The municipality must incorporate into each core public health service the following general activities:

(a) ongoing assessment of community health needs;

(b) education on public health issues;

(c) development of policies and plans to address health needs; and

(d) actions to assure that services necessary to achieve agreed upon goals are provided.

3. The commissioner may approve a state aid application in which the municipality actually provides fewer services than those set forth in subdivision one of this section as long as the application identifies the availability of other services, who will provide those services and the manner in which the services will be provided and financed.

4. The commissioner shall consult with the county health commissioners, public health directors, and boards of public health when promulgating rules and regulations to effectuate the provisions and purposes of this article. The commissioner shall not have the power to prescribe the number of persons to be employed by any municipality.