

**Sixty-first Legislative Assembly of North Dakota
In Regular Session Commencing Tuesday, January 6, 2009**

SENATE BILL NO. 2333
(Senators J. Lee, Fischer, Heckaman)
(Representatives Klein, Pinkerton, Weisz)

AN ACT to create and enact chapter 23-35.1 of the North Dakota Century Code, relating to the creation of regional public health networks; to provide for a regional public health network task force; to provide for reports to the legislative council; to provide an appropriation; to provide a contingent appropriation; and to declare an emergency.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. Chapter 23-35.1 of the North Dakota Century Code is created and enacted as follows:

23-35.1-01. Definitions. For purposes of this chapter, unless the context otherwise requires:

1. The definitions of section 23-35-01 apply; and
2. "Regional public health network" means a group of public health units that have entered a joint powers agreement or an existing lead multidistrict health unit identified in the emergency preparedness and response region which has been reviewed by the state health officer and has been verified as meeting the requirements of this chapter and chapter 54-40.3.

23-35.1-02. Regional public health network - Joint powers agreement - Review by state health officer - Criteria. Before a group of public health units may be designated as a regional public health network, the state health officer shall review the joint powers agreement the districts entered and verify that:

1. The geographical region covered by the regional public health network corresponds to one of the emergency preparedness and response regions established by the state department of health.
2. The joint powers agreement requires that the participating public health units:
 - a. Share various administrative functions and public health services in accordance with subsection 3;
 - b. Comply with requirements the health council adopts by rule; and
 - c. Meet department maintenance of effort funding requirements, which must be calculated based on each unit's dollar or mill levy public health unit contribution in calendar year 2007.
3. The joint powers agreement requires:
 - a. A regional public health network to share the following public health services:
 - (1) Emergency preparedness and response;
 - (2) Environmental health services; and
 - (3) A regional public health network health officer, although this paragraph does not prohibit a public health unit from appointing a local health officer.

b. A regional public health network to select and share at least three administrative functions and at least three public health services, as provided under this subdivision:

(1) "Administrative functions" are:

- (a) Financial accounting, billing, and accounts receivable;
- (b) Community assessment and planning;
- (c) Contract compliance;
- (d) Public health service improvement planning;
- (e) Human resource management;
- (f) Technology support;
- (g) Budgeting;
- (h) Workforce development;
- (i) Public information;
- (j) Grant writing;
- (k) Inventory management, including vaccines; and
- (l) Any other functions approved by the state health officer.

(2) "Public health services" are:

- (a) School health;
- (b) Nutrition;
- (c) Family planning;
- (d) Injury prevention;
- (e) Violence prevention;
- (f) Tobacco prevention and cessation;
- (g) Oral health;
- (h) Cancer prevention;
- (i) Maternal and child health;
- (j) Asthma;
- (k) Diabetes;
- (l) Cardiovascular health;
- (m) Physical activity;
- (n) Immunizations;
- (o) Communicable disease programs;
- (p) Mental health;

- (q) Chronic disease;
- (r) Public health visits; and
- (s) Any other services approved by the state health officer.

- 4. The joint powers agreement provides:
 - a. Criteria for the future participation of public health units that were not parties to the original joint powers agreement;
 - b. An application process by which public health units that were not parties to the original joint powers agreement may become participating districts; and
 - c. A process by which public health units that were not parties to the original joint powers agreement may appeal a decision to deny an application to participate in the agreement to the state health officer.
- 5. The joint powers agreement provides for the structure of the governing body of the network.

23-35.1-03. Regional public health network - Annual plan. A regional public health network shall prepare an annual plan regarding the provision of the required and optional public health services and shall submit the plan to the state health officer for approval.

23-35.1-04. Regional public health networks - Receipt and use of moneys. The board of a regional public health network may receive and expend moneys for the provision of administrative functions, public health services, and any other lawful activities.

23-35.1-05. Compensation - Reimbursement - Extraordinary service. The board of a regional public health network may provide compensation and reimbursement to any board member who, at the direction of the board, performs extraordinary service on behalf of the board. For purposes of this section, "extraordinary service" means duties beyond those reasonably expected of members of the board and includes travel to and attendance at national meetings or conventions.

SECTION 2. STATE DEPARTMENT OF HEALTH - REGIONAL PUBLIC HEALTH NETWORK TASK FORCE - REPORTS TO LEGISLATIVE COUNCIL.

- 1. The state health officer shall appoint a regional public health network task force to meet during the 2009-10 interim to establish protocol for the regional public health network.
- 2. The task force must consist of at least seven members, including at least three members representing local public health districts, three members representing private health care providers, and representatives of the state department of health. The state health officer shall appoint the task force members representing local public health units from a list of names submitted by an organization representing public health administrators. The state health officer shall appoint the task force members representing private health care providers from a list of names submitted by the North Dakota medical association.
- 3. During the 2009-10 interim, the task force shall provide periodic reports to the legislative council regarding the development of the regional public health network. During the 2009-10 interim, the state health officer shall provide periodic reports to the legislative council regarding the development of the regional public health network.

SECTION 3. APPROPRIATION - FEDERAL FISCAL STIMULUS FUNDS. There is appropriated out of any federal funds made available to the state under the federal American Recovery and Reinvestment Act of 2009, not otherwise appropriated, the sum of \$1,200,000, or so much of the sum as may be necessary, to the state department of health for the purpose of providing funds to local public health units for providing immunization services statewide, according to a funding formula

established by the state health council in consultation with local public health units, for the period beginning with the effective date of this Act and ending June 30, 2011.

Any federal funds appropriated under this section are not a part of the agency's 2011-13 base budget. Any program expenditures made with these funds will not be replaced with state funds after federal American Recovery and Reinvestment Act of 2009 funds are no longer available.

SECTION 4. CONTINGENT GENERAL FUND APPROPRIATION. If the federal funds appropriated under section 3 of this Act are not available to provide the sum of \$1,200,000, there is appropriated out of any moneys in the general fund in the state treasury, not otherwise appropriated, the sum of \$1,200,000, or so much of the sum as may be necessary, to the state department of health for the purpose of providing funds to local public health units for providing immunization services statewide, according to a funding formula established by the state health council in consultation with local public health units, for the biennium beginning July 1, 2009, and ending June 30, 2011. The state department of health may spend the general fund moneys only to the extent that federal funds are not available to provide the \$1,200,000 appropriated under section 3 of this Act.

General fund amounts appropriated under this section reflect one-time funding and are not a part of the agency's base budget for the 2011-13 biennium.

SECTION 5. APPROPRIATION. There is appropriated out of any moneys in the general fund in the state treasury, not otherwise appropriated, the sum of \$275,000, or so much of the sum as may be necessary, to the state department of health for the purpose of funding a regional public health network pilot project, in consultation with the regional public health network task force and according to a funding formula established by the state health council in consultation with local public health units, for the biennium beginning July 1, 2009, and ending June 30, 2011.

SECTION 6. EMERGENCY. Section 3 of this Act is declared to be an emergency measure.

President of the Senate

Speaker of the House

Secretary of the Senate

Chief Clerk of the House

This certifies that the within bill originated in the Senate of the Sixty-first Legislative Assembly of North Dakota and is known on the records of that body as Senate Bill No. 2333 and that two-thirds of the members-elect of the Senate voted in favor of said law.

Vote: Yeas 46 Nays 0 Absent 1

President of the Senate

Secretary of the Senate

This certifies that two-thirds of the members-elect of the House of Representatives voted in favor of said law.

Vote: Yeas 94 Nays 0 Absent 0

Speaker of the House

Chief Clerk of the House

Received by the Governor at _____ M. on _____, 2009.

Approved at _____ M. on _____, 2009.

Governor

Filed in this office this _____ day of _____, 2009,
at ____ o'clock _____ M.

Secretary of State