

Assembly Bill No. 1149

CHAPTER 93

An act to amend Section 101315 of the Health and Safety Code, relating to public health emergencies, and declaring the urgency thereof, to take effect immediately.

[Approved by Governor July 14, 2015. Filed with
Secretary of State July 14, 2015.]

LEGISLATIVE COUNSEL'S DIGEST

AB 1149, Wood. Public health emergencies: funding.

Existing law establishes procedures and requirements to govern the allocation to, and expenditure by, local health jurisdictions, hospitals, long-term health care facilities, clinics, emergency medical systems, and poison control centers of federal funding received for the prevention of, and response to, public health emergencies. Existing law provides that these procedures apply only when the specified entities are designated by a federal or state agency to manage the funds for public health preparedness and response to public health emergencies, pursuant to a specified federally approved plan.

This bill would expand these provisions to apply to public health emergency preparedness and response by trade associations of those entities or facilities.

This bill would declare that it is to take effect immediately as an urgency statute.

The people of the State of California do enact as follows:

SECTION 1. Section 101315 of the Health and Safety Code is amended to read:

101315. (a) Federal funding received by the State Department of Public Health for bioterrorism preparedness and emergency response is subject to appropriation in the annual Budget Act or other statute, commencing with the 2003–04 fiscal year.

(b) This article governs those instances when federal funding is allocated and expended for public health preparedness and response by local health jurisdictions, hospitals, long-term health care facilities, clinics, emergency medical systems, and poison control centers, or their trade associations, for the prevention of, and response to, bioterrorist attacks and other public health emergencies pursuant to the federally approved collaborative state-local plan.

(c) A local health jurisdiction shall be ineligible to receive funding from appropriations made for purposes of this article when that local health jurisdiction receives directly or through another local jurisdiction federal funding for the same purposes. Moneys appropriated for purposes of this article that would have been allocated to a local health jurisdiction that is ineligible, pursuant to this subdivision, to receive funding shall be allocated, as provided in Section 101317, among the remaining local health jurisdictions that are eligible.

(d) Funds appropriated for the purposes of this article shall not be used to supplant funding for existing levels of service and shall only be used for purposes specified in Section 101317.

(e) This article shall apply only when local health jurisdictions, hospitals, long-term health care facilities, clinics, emergency medical systems, and poison control centers, or their trade associations are designated by a federal or state agency to manage the funds for public health preparedness and response to bioterrorist attacks and other public health emergencies, pursuant to the federally approved collaborative state-local plan.

SEC. 2. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to ensure an adequate and timely response to public health threats by preventing the lapse of provisions relating to the allocation and expenditure of federal funds for public health emergency preparedness programs, it is necessary for this act to take effect immediately.