CHAPTER 402—H.F.No. 3031

An act relating to public health; establishing the Minnesota Emergency Health Powers Act; modifying provisions for declaring national security and peacetime emergencies; providing for declaration and termination of emergencies due to a public health emergency; granting certain emergency powers; preserving certain rights of refusal; providing for the isolation and quarantine of persons; requiring a study; amending Minnesota Statutes 2000, sections 12.03, by adding subdivisions; 12.21, subdivision 3; 12.31, subdivisions 2, 3; 12.32; 12.34, subdivision 1; 13.3806, by adding subdivisions; Minnesota Statutes 2001 Supplement, section 12.31, subdivision 1; proposing coding for new law in Minnesota Statutes, chapters 12; 144.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. TITLE.

Sections 1 to 21 may be cited as the "Minnesota Emergency Health Powers Act."

- Sec. 2. Minnesota Statutes 2000, section 12.03, is amended by adding a subdivision to read:
- Subd. 1c. BIOTERRORISM. "Bioterrorism" means 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.
- Sec. 3. Minnesota Statutes 2000, section 12.03, is amended by adding a subdivision to read:
- Subd. 4d. FACILITY. "Facility" means any real property, building, structure, or other improvement to real property or any motor vehicle, rolling stock, aircraft, watercraft, or other means of transportation. Facility does not include a private residence.
- Sec. 4. Minnesota Statutes 2000, section 12.03, is amended by adding a subdivision to read:
- Subd. 6a. MEDICAL SUPPLIES. "Medical supplies" means any medication, durable medical equipment, instruments, linens, or any other material that a health care provider deems not essential for the continued operation of the provider's practice or facility. The term medical supplies does not apply to medication, durable medical equipment, or other material that is personal property being used by individuals or that has been borrowed, leased, or rented by individuals for the purpose of treatment or care.
- Sec. 5. Minnesota Statutes 2000, section 12.03, is amended by adding a subdivision to read:
- Subd. 9a. PUBLIC HEALTH EMERGENCY. "Public health emergency" means an occurrence or imminent threat of an illness or health condition in Minnesota:

- (1) where there is evidence to believe the illness or health condition is caused by any of the following:
 - (i) bioterrorism; or
- (ii) the appearance of a new or novel or previously controlled or eradicated airborne infectious agent or airborne biological toxin; and
- (2) the illness or health condition poses a high probability of any of the following harms:
 - (i) a large number of deaths in the affected population;
- (iii) widespread exposure to an airborne infectious or airborne toxic agent that poses a significant risk of substantial future harm to a large number of people in the affected population.
 - Sec. 6. Minnesota Statutes 2000, section 12.21, subdivision 3, is amended to read:
- Subd. 3. **SPECIFIC AUTHORITY.** In performing duties under this chapter and to effect its policy and purpose, the governor may:
- (1) make, amend, and rescind the necessary orders and rules to carry out the provisions of this chapter and section 216C.15 within the limits of the authority conferred by this section, with due consideration of the plans of the federal government and without complying with sections 14.001 to 14.69, but no order or rule has the effect of law except as provided by section 12.32;
- (2) ensure that a comprehensive emergency operations plan and emergency management program for this state are developed and maintained, and are integrated into and coordinated with the emergency plans of the federal government and of other states to the fullest possible extent;
- (3) in accordance with the emergency operations plan and the emergency management program of this state, procure supplies and, equipment, and facilities, institute training programs and public information programs, and take all other preparatory steps, including the partial or full activation of emergency management organizations in advance of actual disaster to ensure the furnishing of adequately trained and equipped forces of emergency management personnel in time of need;
- (4) make studies and surveys of the industries, resources, and facilities in this state as may be necessary to ascertain the capabilities of the state for emergency management and to plan for the most efficient emergency use of those industries, resources, and facilities;
- (5) on behalf of this state, enter into mutual aid arrangements or cooperative agreements with other states, tribal authorities, and with Canadian provinces, and coordinate mutual aid plans between political subdivisions of this state;

- (6) delegate administrative authority vested in the governor under this chapter, except the power to make rules, and provide for the subdelegation of that authority;
- (7) cooperate with the president and the heads of the armed forces, the emergency management agency of the United States and other appropriate federal officers and agencies, and with the officers and agencies of other states in matters pertaining to the emergency management of the state and nation, including the direction or control of:
 - (i) emergency preparedness drills and exercises;
- (ii) warnings and signals for drills or actual emergencies and the mechanical devices to be used in connection with them;
- (iii) shutting off water mains, gas mains, electric power connections and the suspension of all other utility services;
- (iv) the conduct of persons in the state, including entrance or exit from any stricken or threatened public place, occupancy of facilities, and the movement and cessation of movement of pedestrians and, vehicular traffic, and all forms of private and public transportation during, prior, and subsequent to drills or actual emergencies;
 - (v) public meetings or gatherings; and
 - (vi) the evacuation, reception, and sheltering of persons;
- (8) contribute to a political subdivision, within the limits of the appropriation for that purpose, not more than 25 percent of the cost of acquiring organizational equipment that meets standards established by the governor;
- (9) formulate and execute, with the approval of the executive council, plans and rules for the control of traffic in order to provide for the rapid and safe movement over public highways and streets of troops, vehicles of a military nature, and materials for national defense and war or for use in any war industry, for the conservation of critical materials, or for emergency management purposes, and; coordinate the activities of the departments or agencies of the state and its political subdivisions concerned directly or indirectly with public highways and streets, in a manner that will best effectuate those plans;
- (10) alter or adjust by executive order, without complying with sections 14.01 to 14.69, the working hours, work days and work week of, and annual and sick leave provisions and payroll laws regarding all state employees in the executive branch as the governor deems necessary to minimize the impact of the disaster or emergency, conforming the alterations or adjustments to existing state laws, rules, and collective bargaining agreements to the extent practicable;
- (11) authorize the commissioner of children, families, and learning to alter school schedules, curtail school activities, or order schools closed without affecting state aid to schools, as defined in section 120A.05, subdivisions 9, 11, 13, and 17, and including charter schools under section 124D.10, and elementary schools enrolling prekindergarten pupils in district programs; and

- (12) transfer the direction, personnel, or functions of state agencies to perform or facilitate response and recovery programs.
- Sec. 7. Minnesota Statutes 2001 Supplement, section 12.31, subdivision 1, is amended to read:
- Subdivision 1. DECLARATION OF NATIONAL SECURITY EMER-GENCY. When information from the President of the United States, the Federal Emergency Management Agency, the Department of Defense, or the National Warning System indicates the imminence of a national security emergency within the United States, which means the several states, the District of Columbia, and the Commonwealth of Puerto Rico, or the occurrence within the state of Minnesota of a major disaster or public health emergency from enemy sabotage or other hostile action, the governor may, by proclamation, declare that a national security emergency exists in all or any part of the state. If the legislature is then in regular session or, if it is not, if the governor concurrently with the proclamation declaring the emergency issues a call convening immediately both houses of the legislature, the governor may exercise for a period not to exceed 30 days the powers and duties conferred and imposed by sections 12.31 to 12.37 and 12.381. The lapse of these emergency powers does not, as regards any act occurring or committed within the 30-day period, deprive any person, political subdivision, municipal corporation, or body politic of any right to compensation or reimbursement that it may have under this chapter.
 - Sec. 8. Minnesota Statutes 2000, section 12.31, subdivision 2, is amended to read:
- Subd. 2. **DECLARATION OF PEACETIME EMERGENCY.** (a) The governor may declare a peacetime emergency. A peacetime declaration of emergency may be declared only when an act of nature, a technological failure or malfunction, a terrorist incident, a public health emergency, an industrial accident, a hazardous materials accident, or a civil disturbance endangers life and property and local government resources are inadequate to handle the situation. It A peacetime emergency must not be continued for more than five days unless extended by resolution of the executive council up to 30 days. An order, or proclamation declaring, continuing, or terminating an emergency must be given prompt and general publicity and filed with the secretary of state.
- (b) This paragraph applies to a peacetime emergency declared as a result of a public health emergency. If the legislature is sitting in session at the time of the emergency declaration, the governor may exercise the powers and duties conferred by this chapter for the period allowed under paragraph (a). If the legislature is not sitting in session when a peacetime emergency is declared or renewed, the governor may exercise the powers and duties conferred by this chapter for the period allowed under paragraph (a) only if the governor issues a call convening both houses of the legislature at the same time the governor declares or renews the peacetime emergency.
 - Sec. 9. Minnesota Statutes 2000, section 12.31, subdivision 3, is amended to read:
- Subd. 3. EFFECT OF DECLARATION OF PEACETIME EMERGENCY. A declaration of a peacetime emergency in accordance with this section authorizes the

governor to exercise for a period not to exceed the time specified in this section the powers and duties conferred and imposed by this chapter for a peacetime emergency and invokes the necessary portions of the state emergency operations plan developed pursuant to section 12.21, subdivision 3, relating to response and recovery aspects and may authorize aid and assistance under the plan.

Sec. 10. [12.311] DECLARATION DUE TO A PUBLIC HEALTH EMERGENCY.

- (a) Before the governor declares a national security emergency due to a public health emergency or peacetime emergency due to a public health emergency, the governor or state director of emergency management shall consult with the commissioner of public safety, the state director of homeland security, the commissioner of health, and additional public health experts and other experts. If the public health emergency occurs on Indian lands, the governor or state director of emergency management shall consult with tribal authorities before the governor makes such a declaration. Nothing in this section shall be construed to limit the governor's authority to act without such consultation when the situation calls for prompt and timely action.
- (b) Upon the declaration of an emergency due to a public health emergency, the governor and the commissioner of health must immediately report to the leadership in the house of representatives and senate, as well as the chairs and ranking minority members of the judiciary and health committees, regarding the imposition of the public health emergency and how it may affect the public.

Sec. 11. [12.312] TERMINATION OF DECLARATION; PUBLIC HEALTH EMERGENCY.

Subdivision 1. AUTOMATIC TERMINATION; RENEWAL. Notwithstanding any other provision of this chapter, a national security emergency declared due to a public health emergency or peacetime emergency declared due to a public health emergency is terminated automatically 30 days after its original declaration unless the emergency is renewed by the governor using the procedure specified in section 12.31, subdivision 2, paragraph (b). Any renewal is terminated automatically after 30 days unless again renewed by the governor.

- Subd. 2. TERMINATION BY LEGISLATURE. By a majority vote of each house of the legislature, the legislature may terminate a national security emergency declared due to a public health emergency or peacetime emergency declared due to a public health emergency at any time from the date of original declaration. A termination by the legislature under this subdivision overrides any renewal by the governor under subdivision 1.
 - Sec. 12. Minnesota Statutes 2000, section 12.32, is amended to read:

12.32 GOVERNOR'S ORDERS AND RULES, EFFECT.

Orders and rules promulgated by the governor under authority of section 12.21, subdivision 3, clause (1), when approved by the executive council and filed in the office of the secretary of state, have, during a national security emergency, peacetime

emergency declared due to a public health emergency, or energy supply emergency, the full force and effect of law. Rules and ordinances of any agency or political subdivision of the state inconsistent with the provisions of this chapter or with any order or rule having the force and effect of law issued under the authority of this chapter, is suspended during the period of time and to the extent that the emergency exists.

Sec. 13. Minnesota Statutes 2000, section 12.34, subdivision 1, is amended to read:

Subdivision 1. EMERGENCY POWERS. When necessary to save life, property, or the environment during a national security emergency or during a peacetime emergency declared due to a public health emergency, the governor, the state director, or a member of a class of members of a state or local emergency management organization designated by the governor, may:

- (1) require any person, except members of the federal or state military forces and officers of the state or a political subdivision, to perform services for emergency management purposes as directed by any of the persons described above;; and
- (2) commandeer, during a national security emergency for emergency management purposes as directed by any of the persons described above, any motor vehicle, tools, appliances, medical supplies, or other personal property and any facilities.

Sec. 14. [12.381] SAFE DISPOSITION OF DEAD HUMAN BODIES.

Subdivision 1. POWERS FOR SAFE DISPOSITION. Notwithstanding chapter 149A and Minnesota Rules, chapter 4610, in connection with deaths related to a public health emergency and during a national security emergency declared due to a public health emergency, the governor may:

- (1) direct measures to provide for the safe disposition of dead human bodies as may be reasonable and necessary for emergency response. Measures may include, but are not limited to, transportation, preparation, temporary mass burial and other interment, disinterment, and cremation of dead human bodies. Insofar as the emergency circumstances allow, the governor shall respect the religious rites, cultural customs, family wishes, and predeath directives of a decedent concerning final disposition. The governor may limit visitations or funeral ceremonies based on public health risks;
- (2) consult with coroners and medical examiners, take possession or control of any dead human body, and order an autopsy of the body; and
- (3) request any business or facility authorized to embalm, bury, cremate, inter, disinter, transport, or otherwise provide for disposition of a dead human body under the laws of this state to accept any dead human body or provide the use of its business or facility if the actions are reasonable and necessary for emergency management purposes and are within the safety precaution capabilities of the business or facility.
- Subd. 2. IDENTIFICATION OF BODIES. A person in charge of the body of a person believed to have died due to a public health emergency shall maintain a written

record of the body and all available information to identify the decedent, the circumstances of death, and disposition of the body. If a body cannot be identified, a qualified person shall, prior to disposition and to the extent possible, take fingerprints and one or more photographs of the remains and collect a DNA specimen from the body. All information gathered under this subdivision, other than data required for a death certificate under Minnesota Rules, part 4601.2550, shall be death investigation data and shall be classified as nonpublic data according to section 13.02, subdivision 9, or as private data on decedents according to section 13.10, subdivision 1. Death investigation data are not medical examiner data as defined in section 13.83. Data gathered under this subdivision shall be promptly forwarded to the commissioner of health. The commissioner may only disclose death investigation data to the extent necessary to assist relatives in identifying decedents or for public health or public safety investigations.

Sec. 15. [12.39] TESTING AND TREATMENTS.

Subdivision 1. REFUSAL OF TREATMENT. Notwithstanding laws, rules, or orders made or promulgated in response to a national security emergency, peacetime emergency, or public health emergency, individuals have a fundamental right to refuse medical treatment, testing, physical or mental examination, vaccination, participation in experimental procedures and protocols, collection of specimens, and preventive treatment programs. An individual who has been directed by the commissioner of health to submit to medical procedures and protocols because the individual is infected with or reasonably believed by the commissioner of health to be infected with or exposed to a toxic agent that can be transferred to another individual or a communicable disease, and the agent or communicable disease is the basis for which the national security emergency, peacetime emergency, or public health emergency was declared, and who refuses to submit to them may be ordered by the commissioner to be placed in isolation or quarantine according to parameters set forth in sections 144.419 and 144.4195.

- Subd. 2. INFORMATION GIVEN. Where feasible, before performing examinations, testing, treatment, or vaccination of an individual under subdivision 1, a health care provider shall notify the individual of the right to refuse the examination, testing, treatment, or vaccination, and the consequences, including isolation or quarantine, upon refusal.
- Sec. 16. Minnesota Statutes 2000, section 13.3806, is amended by adding a subdivision to read:
- Subd. 1a. **DEATH INVESTIGATION DATA.** Data gathered by the commissioner of health to identify the body of a person believed to have died due to a public health emergency as defined in section 12.03, subdivision 9a, the circumstances of death, and disposition of the body are classified in and may be released according to section 12.381, subdivision 2.
- Sec. 17. Minnesota Statutes 2000, section 13.3806, is amended by adding a subdivision to read:

Subd. 10a. ISOLATION OR QUARANTINE DIRECTIVE. Data in a directive issued by the commissioner of health under section 144.4195, subdivision 2, to isolate or quarantine a person or group of persons are classified in section 144.4195, subdivision 6.

Sec. 18. [144.419] ISOLATION AND QUARANTINE OF PERSONS.

Subdivision 1. **DEFINITIONS.** For purposes of this section and section 144.4195, the following definitions apply:

- (1) "bioterrorism" means 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) "communicable disease" means a disease caused by a living organism or virus and believed to be caused by bioterrorism or a new or novel or previously controlled or eradicated infectious agent or biological toxin that can be transmitted person to person and for which isolation or quarantine is an effective control strategy, excluding a disease that is directly transmitted as defined under section 144.4172, subdivision 5;
- (3) "isolation" means separation, during the period of communicability, of a person infected with a communicable disease, in a place and under conditions so as to prevent direct or indirect transmission of an infectious agent to others; and
- (4) "quarantine" means restriction, during a period of communicability, of activities or travel of an otherwise healthy person who likely has been exposed to a communicable disease to prevent disease transmission during the period of communicability in the event the person is infected.
- Subd. 2. GENERAL REQUIREMENTS. (a) The commissioner of health or any person acting under the commissioner's authority shall comply with paragraphs (b) to (h) when isolating or quarantining individuals or groups of individuals.
- (b) Isolation and quarantine must be by the least restrictive means necessary to prevent the spread of a communicable or potentially communicable disease to others and may include, but are not limited to, confinement to private homes or other private or public premises.
 - (c) Isolated individuals must be confined separately from quarantined individuals.
- (d) The health status of isolated and quarantined individuals must be monitored regularly to determine if they require continued isolation or quarantine. To adequately address emergency health situations, isolated and quarantined individuals shall be given a reliable means to communicate 24 hours a day with health officials and to summon emergency health services.
- (e) If a quarantined individual subsequently becomes infectious or is reasonably believed to have become infectious with a communicable or potentially communicable

disease, the individual must be isolated according to section 144.4195.

- (g) 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 between those in isolation or quarantine and those outside these settings, medication, and competent medical care.
- (h) 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.
- Subd. 3. TERMINATION. The isolation or quarantine of a person must terminate automatically on the expiration date of a court order authorizing isolation or quarantine that is issued according to section 144.4195, or before the expiration date if the commissioner of health determines that isolation or quarantine of the person is no longer necessary to protect the public.
- Subd. 4. RIGHT TO REFUSE TREATMENT. Any person who is isolated or quarantined according to this section and section 144.4195 has a fundamental right to refuse medical treatment, testing, physical or mental examination, vaccination, participation in experimental procedures and protocols, collection of specimens, and preventive treatment programs. A person who has been directed by the commissioner of health or any person acting under the commissioner's authority to submit to medical procedures and protocols because the person is infected with or reasonably believed by the commissioner or by the person acting under the commissioner's authority to be infected with or exposed to a communicable disease and who refuses to submit to them may be subject to continued isolation or quarantine according to the parameters set forth in section 144.4195.
- Subd. 5. CITIZEN RIGHT TO ENTRY. (a) No person, other than a person authorized by the commissioner of health or authorized by any person acting under the commissioner's authority, shall enter an isolation or quarantine area. If, by reason of an unauthorized entry into an isolation or quarantine area, a person poses a danger to public health, the person may be subject to isolation or quarantine according to this section and section 144.4195.
- (b) A family member of a person isolated or quarantined has a right to choose to enter into an isolation or quarantine area. The commissioner of health must permit the family member entry into the isolation or quarantine area if the family member signs a consent form stating that the family member has been informed of the potential health risks, isolation and quarantine guidelines, and the consequences of entering the area. The family member may not hold the department of health, the commissioner of health, or the state responsible for any consequences of entering the isolation or quarantine area. If, by reason of entry into an isolation or quarantine area under this paragraph, a person poses a danger to public health, the person may be subject to isolation or quarantine according to this section and section 144.4195.

Sec. 19. [144.4195] DUE PROCESS FOR ISOLATION OR QUARANTINE OF PERSONS.

Subdivision 1. EX PARTE ORDER FOR ISOLATION OR QUARANTINE. (a) Before isolating or quarantining a person or group of persons, the commissioner of health shall obtain a written, ex parte order authorizing the isolation or quarantine from the district court of Ramsey county, the county where the person or group of persons is located, or a county adjoining the county where the person or group of persons is located. The evidence or testimony in support of an application may be made or taken by telephone, facsimile transmission, video equipment, or other electronic communication. The court shall grant the order upon a finding that probable cause exists to believe isolation or quarantine is warranted to protect the public health.

- (b) The order must state the specific facts justifying isolation or quarantine, must state that the person being isolated or quarantined has a right to a court hearing under this section and a right to be represented by counsel during any proceeding under this section, and must be provided immediately to each person isolated or quarantined. The commissioner of health shall provide a copy of the authorizing order to the commissioner of public safety and other peace officers known to the commissioner to have jurisdiction over the site of the isolation or quarantine. If feasible, the commissioner of health shall give each person being isolated or quarantined an estimate of the expected period of the person's isolation or quarantine.
- (c) If it is impracticable to provide individual orders to a group of persons isolated or quarantined, one order shall suffice to isolate or quarantine a group of persons believed to have been commonly infected with or exposed to a communicable disease. A copy of the order and notice shall be posted in a conspicuous place:
- (1) in the isolation or quarantine premises, but only if the persons to be isolated or quarantined are already at the isolation or quarantine premises and have adequate access to the order posted there; or
- (2) in another location where the group of persons to be isolated or quarantined is located, such that the persons have adequate access to the order posted there.
- If the court determines that posting the order according to clause (1) or (2) is impractical due to the number of persons to be isolated or quarantined or the geographical area affected, the court must use the best means available to ensure that the affected persons are fully informed of the order and notice.
- (d) No person may be isolated or quarantined pursuant to an order issued under this subdivision for longer than 21 days without a court hearing under subdivision 3 to determine whether isolation or quarantine should continue. A person who is isolated or quarantined may request a court hearing under subdivision 3 at any time before the expiration of the order.
- Subd. 2. TEMPORARY HOLD UPON COMMISSIONER'S DIRECTIVE. Notwithstanding subdivision 1, the commissioner of health may by directive isolate or

quarantine a person or group of persons without first obtaining a written, ex parte order from the court if a delay in isolating or quarantining the person or group of persons would significantly jeopardize the commissioner of health's ability to prevent or limit the transmission of a communicable or potentially communicable disease to others. The commissioner must provide the person or group of persons subject to the temporary hold with notice that the person has a right to request a court hearing under this section and a right to be represented by counsel during a proceeding under this section. If it is impracticable to provide individual notice to each person subject to the temporary hold, notice of these rights may be posted in the same manner as the posting of orders under subdivision 1, paragraph (c). Following the imposition of isolation or quarantine under this subdivision, the commissioner of health shall within 24 hours apply for a written, ex parte order pursuant to subdivision 1 authorizing the isolation or quarantine. The court must rule within 24 hours of receipt of the application. If the person is under a temporary hold, the person may not be held in isolation or quarantine after the temporary hold expires unless the court issues an ex parte order under subdivision 1.

- Subd. 3. COURT HEARING. (a) A person isolated or quarantined under an order issued pursuant to subdivision 1 or a temporary hold under subdivision 2 or the person's representative may petition the court to contest the court order or temporary hold at any time prior to the expiration of the order or temporary hold. If a petition is filed, the court must hold a hearing within 72 hours from the date of the filing. A petition for a hearing does not stay the order of isolation or quarantine. At the hearing, the commissioner of health must show by clear and convincing evidence that the isolation or quarantine is warranted to protect the public health.
- (b) If the commissioner of health wishes to extend the order for isolation or quarantine past the period of time stated in subdivision 1, paragraph (d), the commissioner must petition the court to do so. Notice of the hearing must be served upon the person or persons who are being isolated or quarantined at least three days before the hearing. If it is impracticable to provide individual notice to large groups who are isolated or quarantined, a copy of the notice may be posted in the same manner as described under subdivision 1, paragraph (c).
 - (c) The notice must contain the following information:
 - (1) the time, date, and place of the hearing;
- $\underline{\text{(2) the grounds and underlying facts upon which continued isolation or quarantine}} \text{ is sought;} \underline{\text{facts upon which continued isolation or quarantine}}$
 - (3) the person's right to appear at the hearing; and
- (4) the person's right to counsel, including the right, if indigent, to be represented by counsel designated by the court or county of venue.
- (d) The court may order the continued isolation or quarantine of the person or group of persons if it finds by clear and convincing evidence that the person or persons would pose an imminent health threat to others if isolation or quarantine was lifted. In no case may the isolation or quarantine continue longer than 30 days from the date of

the court order issued under this subdivision unless the commissioner petitions the court for an extension. Any hearing to extend an order is governed by this subdivision.

- Subd. 4. HEARING ON CONDITIONS OF ISOLATION OR QUARAN-TINE. A person isolated or quarantined may request a hearing in district court for remedies regarding the treatment during and the terms and conditions of isolation or quarantine. Upon receiving a request for a hearing under this subdivision, the court shall fix a date for a hearing that is within seven days of the receipt of the request by the court. The request for a hearing does not alter the order for isolation or quarantine. If the court finds that the isolation or quarantine of the individual is not in compliance with section 144.419, the court may fashion remedies appropriate to the circumstances of the emergency and in keeping with this chapter.
- Subd. 5. JUDICIAL DECISIONS. Court orders issued pursuant to subdivision 3 or 4 shall be based upon clear and convincing evidence and a written record of the disposition of the case shall be made and retained. Any person subject to isolation or quarantine has the right to be represented by counsel or other lawful representative. The manner in which the request for a hearing is filed and acted upon shall be in accordance with the existing laws and rules of the courts of this state or, if the isolation or quarantine occurs during a national security or peacetime emergency, any rules that are developed by the courts for use during a national security or peacetime emergency.
- Subd. 6. DATA PRIVACY. Data on individuals contained in the commissioner's directive under subdivision 2 are health data under section 13.3805, subdivision 1.
- Subd. 7. **DELEGATION.** The commissioner may delegate any authority prescribed in subdivision 1 or 3 to the local public health board, according to chapter 145A.

Sec. 20. STUDY OF EMERGENCY HEALTH POWERS ISSUES.

- (a) The commissioner of health shall study and submit recommendations to the legislature on additional legislative changes needed to Minnesota Statutes, chapter 12 or 144, or other relevant statutes to strengthen the state's capacity to deal with a public health emergency, while protecting the constitutional and other rights of citizens. Before submitting the recommendations to the legislature, the commissioner shall publish the recommendations in the State Register and provide a period of not less than 30 days for the public to submit written comments to the commissioner regarding the recommendations. The report and recommendations, including written comments received by the commissioner, must be submitted to the legislature by January 15, 2003. The report and recommendations must address at least the following:
- (1) provisions for immunity from liability for health care providers and others acting under the direction of the governor or a designee during an emergency declared due to a public health emergency;
- (2) emergency measures concerning dangerous facilities and materials, the control of medical supplies and facilities, and limiting public gatherings and transportation;
- (3) measures to detect and prevent the spread of disease, including requirements for medical examinations, testing, vaccination, treatment, isolation and quarantine,

collecting laboratory specimens and samples, and an evaluation of the definition of communicable disease;

- (4) due process protections to apply to persons under isolation or quarantine;
- (5) enforcement methods to ensure compliance with emergency measures and measures to detect and prevent the spread of disease;
- (6) ways to preserve the effectiveness of fluoroquinolones and other antibiotics that are vital to protecting human health; and
- (b) In developing this report and recommendations, the commissioner shall consult with the commissioner of public safety, the state director of homeland security, and representatives of local government, tribal government, emergency managers, the board of animal health, health care provider organizations, emergency medical services personnel, and legal advocacy and civil liberties groups. All meetings with these representatives must be open to the public and adequate notice of the meetings must be provided to the public. The commissioner shall delineate and describe the impact of each recommendation on the constitutional and other rights of citizens.

Sec. 21. SUNSET.

Sections 1 to 19 expire August 1, 2004.

Sec. 22. EFFECTIVE DATE.

Sections 1 to 21 are effective the day following final enactment.

Presented to the governor May 20, 2002

Signed by the governor May 22, 2002, 1:32 p.m.

CHAPTER 403-H.F.No. 2780

An act relating to civil law; regulating medical malpractice actions; modifying provisions relating to liens against real property; creating a curative act for conveyances by counties; providing for recording of documents written in foreign language; providing for an affidavit of custodian; removing a sunset; amending Minnesota Statutes 2000, sections 145.682, subdivision 6; 481.13; 573.02, subdivision 1; proposing coding for new law in Minnesota Statutes, chapters 507; 527; repealing Minnesota Statutes 2000, section 514.99, subdivision 6.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. Minnesota Statutes 2000, section 145.682, subdivision 6, is amended to read:

Subd. 6. **PENALTY FOR NONCOMPLIANCE.** (a) Failure to comply with subdivision 2, clause (1), within 60 days after demand for the affidavit results, upon