CHAPTER 145A

LOCAL PUBLIC HEALTH ACT

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145A.02 DEFINITIONS.

[For text of subds 1 to 17, see M.S.1988]

Subd. 18. Public health nurse. "Public health nurse" means a person who is licensed as a registered nurse by the Minnesota board of nursing under sections 148.171 to 148.285 and who meets the voluntary registration requirements established by the board of nursing.

History: 1989 c 194 s 2

145A.06 COMMISSIONER; POWERS AND DUTIES RELATIVE TO BOARDS OF HEALTH.

[For text of subds 1 and 2, see M.S.1988]

Subd. 3. [Repealed, 1989 c 194 s 22]

[For text of subds 4 and 5, see M.S.1988]

145A.07 DELEGATION OF POWERS AND DUTIES.

Subdivision 1. Agreements to perform duties of commissioner. (a) The commissioner of health may enter into an agreement with any board of health to delegate all or part of the licensing, inspection, reporting, and enforcement duties authorized under sections 144.12; 144.381 to 144.388; 144.411 to 144.417; 144.71 to 144.76; 145A.04, subdivision 6; provisions of chapter 156A pertaining to construction, repair, and abandonment of water wells; chapter 157; and sections 327.14 to 327.28.

- (b) Agreements are subject to subdivision 3.
- (c) This subdivision does not affect agreements entered into under Minnesota Statutes 1986, section 145.031, 145.55, or 145.918, subdivision 2.

[For text of subds 2 and 3, see M.S.1988]

History: 1989 c 209 art 2 s 18

145A.13 COMMUNITY HEALTH SERVICES SUBSIDY.

Subdivision 1. Subsidy formula. The commissioner of health shall distribute a subsidy for the operations of community health boards organized and operating under sections 145A.09 to 145A.13.

- (a) Each city or county eligible for a subsidy under section 145A.09, subdivision 2, shall receive no less for any calendar year than the total community health services subsidy that was allocated for that city or county by the commissioner of health under this section for calendar year 1985.
- (b) Additional money appropriated for the operations of community health boards organized and operating under sections 145A.09 to 145A.13 shall be distributed in proportion to population.
- Subd. 2. Local match. Each community health board that receives a subsidy shall provide local matching money equal to that subsidy during the year for which the subsidy is made, subject to the following provisions:
- (a) the local matching funds may include local tax levies, gifts, fees for services, and revenues from contracts;

- (b) when the amount of local matching funds for a community health board is less than the amount specified, the subsidy provided for that community health board under this section shall be reduced proportionally;
- (c) when a community health board fails to expend the full amount of the subsidy to which it would be entitled in any one year under the provisions of sections 145A.09 to 145A.13, the state commissioner of health may retain the surplus, subject to disbursement to the community health board in the following calendar year if the community health board can demonstrate a need for and ability to expend the surplus for the purposes provided in section 145A.10; and
- (d) a city organized under the provisions of sections 145A.09 to 145A.13 that levies a tax for provision of community health services shall be exempted from any county levy for the same services to the extent of the levy imposed by the city.
- Subd. 3. Payment. When a community health board meets the requirements prescribed in section 145A.09, subdivision 2, the state commissioner of health shall pay the amount of subsidy to the community health board or its designee according to applicable rules from the money appropriated for the purpose and according to the following:
- (a) the commissioner of health shall make payments for community health services to each community health board or its designee in 12 installments a year;
- (b) the commissioner shall ensure that the pertinent payment of the allotment for each month is made on the first working day after the end of each month of the calendar year, except for the last month of the calendar year;
- (c) the commissioner shall ensure that each community health board or its designee receives its payment of the allotment for that month no later than the last working day of that month. The payment described in this subdivision for services rendered during June, 1985, shall be made on the first working day of July, 1985; and
- (d) the commissioner shall make payment to a human services board organized and operating under section 145A.09, subdivision 5, or to its designee, as prescribed in section 402.02, subdivision 4.

History: 1989 c 209 art 2 s 19

145A.14 SPECIAL GRANTS.

[For text of subds 1 to 3, see M.S.1988]

- Subd. 4. Health promotion team. (a) The community health board may establish a community-based health promotion team made up of representatives of business and industry, public health, labor, voluntary agencies, hospitals, medical clinics, churches, media, schools, civic groups, local government and elected officials, nursing homes, consumers, and others as appropriate.
 - (b) A community-based health promotion team shall:
- (1) collect and summarize community health data relating to behavioral risk factors such as smoking, consumption of alcoholic beverages, and poor nutrition habits;
 - (2) identify, rank, and prioritize lifestyle-based health problems;
 - (3) develop strategies to address health promotion concerns;
- (4) implement a five-year health promotion plan that includes an annual evaluation component and establish a mechanism for program maintenance following completion of the plan;
 - (5) design and implement a "healthy messages" media plan; and
- (6) seek grants and other funding from foundations, educational institutions, and other nonprofit entities.
- (c) Within the limit of available appropriations, the commissioner may grant money to a community health board to enable the board to establish a community-based health promotion team. The commissioner shall monitor the activities of teams under this section and report to the legislature by January 1, 1991, on the teams' operation and progress.

History: 1989 c 120 s 1