GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2001

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HOUSE BILL 1508

Committee Substitute Favorable 6/12/02 Committee Substitute #2 Favorable 7/23/02 Senate Health Care Committee Substitute Adopted 8/15/02

	Short Title: Public Health Bioterrorism Preparedness. (Pub				
	Sponsors:				
	Referred to:				
	June 4, 2002				
1	A BILL TO BE ENTITLED				
2	AN ACT TO PROMOTE READINESS FOR AND TO IMPROVE MANAGEMENT				
3	OF A PUBLIC HEALTH THREAT THAT MAY RESULT FROM AN ACT OF				
4	TERRORISM USING NUCLEAR, BIOLOGICAL, OR CHEMICAL AGENTS				
5	AND TO	AMEND THE NORTH CAROLINA MED	ICAL CARE		
6	COMMISSION'S RULE-MAKING AUTHORITY REGARDING STANDARDS				
7	AND CRI	TERIA FOR THE EDUCATION AND CREDEN	TIALING OF		
8	PERSONS TO ADMINISTER TREATMENT FOR ANAPHYLAXIS, AND TO				
9	PROVIDE THAT MEDICAL REVIEW CONFIDENTIALITY APPLIES TO				
10	AMBULATORY SURGICAL CENTERS.				
11	The General Assembly of North Carolina enacts:				
12	SECTION 1. Chapter 130A of the General Statutes is amended by adding				
13	the following new Article to read:				
14		" <u>Article 22.</u>			
15	"Act	s of Terrorism Using Nuclear, Biological, or Chemical Ag	gents.		
16	" <u>§ 130A-475. Suspected terrorist attack.</u>				
17		e State Health Director reasonably suspects that a publ			
18	may exist and that the threat may have been caused by an act of terrorism using nuclear,				
19	biological, or chemical agents, the State Health Director is authorized to issue an order				
20	<u>to:</u>				
21	<u>(1)</u>	Require any person or animal to submit to examination			
22		determine possible exposure to the nuclear, biologic	al, or chemical		
23		agents.			
24	<u>(2)</u>	Test any real or personal property necessary to determine	ine the presence		
25		of nuclear, biological, or chemical agents.			
26	<u>(3)</u>	Evacuate or close any real property, including any bui			
27		or land when necessary to investigate suspected conta	mination of the		

- property. The period of closure during an investigation shall not exceed 10 calendar days. If the State Health Director determines that a longer period of closure is necessary to complete the investigation, the Director may institute an action in superior court to order the property to remain closed until the investigation is completed.

 Limit the freedom of movement or action of a person or animal that is
 - (4) Limit the freedom of movement or action of a person or animal that is contaminated with, or reasonably suspected of being contaminated with, a chemical or nuclear agent that may be conveyed to other persons or animals.
 - (5) Limit access by any person or animal to an area or facility that is housing persons or animals whose movement or action has been limited under subdivision (4) of this subsection or to an area or facility that is contaminated with, or reasonably suspected of being contaminated with, a chemical or nuclear agent that may be conveyed to other persons or animals. Nothing in this subdivision shall be construed to restrict the access of authorized health care, law enforcement, or emergency medical services personnel to quarantine or isolation premises as necessary in conducting their duties.
 - (6) Exercise quarantine authority and isolation authority under G.S. 130A-145.
 - (b) The authority under subsection (a) of this section shall be exercised only when and so long as a public health threat may exist, all other reasonable means for correcting the problem have been exhausted, and no less restrictive alternative exists. Before applying the authority under subdivision (4) or (5) of subsection (a) of this section to livestock or poultry for the purpose of preventing the direct or indirect conveyance of a chemical or nuclear agent to persons, the State Health Director shall consult with the State Veterinarian in the Department of Agriculture and Consumer Services.

The period of limited freedom of movement or access under subdivisions (4) and (5) of subsection (a) of this section shall not exceed 10 calendar days. Any person substantially affected by that limitation may institute in superior court in Wake County or in the county in which the limitation is imposed an action to review the limitation. If a person or a person's representative requests a hearing, the hearing shall be held within 72 hours of the filing of the request, excluding Saturdays and Sundays. The court shall reduce the limitation if it determines, by the preponderance of the evidence, that the limitation is not reasonably necessary to prevent or limit the conveyance of chemical or nuclear agents to others.

If the State Health Director determines that a 10-calendar-day limitation on freedom of movement or access is not adequate to protect the public health, the State Health Director may institute in superior court in Wake County or in the county in which the limitation is imposed an action to obtain an order extending the period limiting the freedom of movement or access. The court shall continue the limitation for a period not to exceed 30 days if it determines, by the preponderance of the evidence, that the limitation is reasonably necessary to prevent or limit the conveyance of chemical or

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- (c) If the State Health Director reasonably suspects that there exists a public health threat that may have been caused by an act of terrorism using nuclear, biological, or chemical agents, the State Health Director shall notify the Secretary of Crime Control and Public Safety. If the Secretary of Crime Control and Public Safety reasonably suspects that a public health threat may exist and that the threat may have been caused by an act of terrorism using nuclear, biological, or chemical agents, the Secretary shall notify the State Health Director.
- (d) For the purpose of this Article, the term "public health threat" means a situation that is likely to cause an immediate risk to human life, an immediate risk of serious physical injury or illness, or an immediate risk of serious adverse health effects.
- (e) Nothing in this section shall limit any authority otherwise granted to local or State public health officials under this Chapter.

"§ 130A-476. Access to health information.

- Notwithstanding any other provision of law, a health care provider, a person in charge of a health care facility, or a unit of State or local government may report to the State Health Director or a local health director any events that may indicate the existence of a case or outbreak of an illness, condition, or health hazard that may have been caused by an act of terrorism using nuclear, biological, or chemical agents. Events that may be reported include unusual types or numbers of symptoms or illnesses presented to the provider, unusual trends in health care visits, or unusual trends in prescriptions or purchases of over-the-counter pharmaceuticals. To the extent practicable, a person who makes a report under this subsection shall not disclose personally identifiable information. A person disclosing or not disclosing information pursuant to this subsection is immune from any civil or criminal liability that might otherwise be incurred or imposed based on the disclosure or lack of disclosure provided that the health care provider was acting in good faith and without malice. In any proceeding involving liability, good faith, and lack of malice are presumed. Notwithstanding the foregoing, if a health care provider or unit of State or local government willfully does not disclose information pursuant to this subsection, the immunity from civil or criminal liability provided under this subsection shall not be available if the person had actual knowledge that a condition or illness was caused by use of a nuclear, biological, or chemical weapon of mass destruction as defined in G.S. 14-288.21(c).
- (b) The State Health Director may issue a temporary order requiring health care providers to report symptoms, diseases, conditions, trends in use of health care services, or other health-related information when necessary to conduct a public health investigation or surveillance of an illness, condition, or health hazard that may have been caused by an act of terrorism using nuclear, biological, or chemical agents. The order shall specify which health care providers must report, what information is to be reported, and the period of time for which reporting is required. The period of time for which reporting is required pursuant to a temporary order shall not exceed 90 days. The

- Commission may adopt rules to continue the reporting requirement when necessary to protect the public health.
- (c) The State Health Director and a local health director may examine, review, and obtain a copy of records containing confidential or protected health information, or a summary of pertinent portions of those records, that pertain to a report authorized by subsection (a) or required by subsection (b) of this section.
- (d) A person who makes a report pursuant to subsection (b) of this section or permits examination, review, or copying of medical records pursuant to subsection (c) of this section is immune from any civil or criminal liability that otherwise might be incurred or imposed as a result of complying with those subsections.
- (e) Confidential or protected health information received by the State Health Director or a local health director pursuant to this section shall be confidential and shall not be released, except when the release is:
 - (1) Made pursuant to any other provision of law;
 - (2) To another federal, state, or local public health agency for the purpose of preventing or controlling a public health threat; or
 - (3) To a court or law enforcement official for the purpose of enforcing the provisions of this Chapter or for the purpose of investigating an act of terrorism using nuclear, biological, or chemical agents. A law enforcement official who receives the information shall not disclose it further, except (i) when necessary to conduct an investigation of an act of terrorism using nuclear, biological, or chemical agents, or (ii) when the State Health Director or a local health director seeks the assistance of the law enforcement official in preventing or controlling the public health threat and expressly authorizes the disclosure as necessary for that purpose.
 - (f) In this section the following terms shall include:
 - (1) "Health care provider" includes a physician licensed to practice medicine in North Carolina or a person who is licensed, certified, or credentialed to practice or provide health care services, including, but not limited to, pharmacists, dentists, physician assistants, registered nurses, licensed practical nurses, advanced practice nurses, chiropractors, respiratory care therapists, and emergency medical technicians; and
 - (2) "Health care facility" includes hospitals, skilled nursing facilities, intermediate care facilities, psychiatric facilities, rehabilitation facilities, home health agencies, ambulatory surgical facilities, or any other health care related facility, whether publicly or privately owned."
- **SECTION 2.(a)** G.S. 130A-149, "Biological agents registry; rules; penalties", is recodified as G.S. 130A-477.

SECTION 2.(b) G.S. 130A-29(c)(10) reads as rewritten:

- "(10) Pertaining to the biological agents registry in accordance with G.S. 130A 149 G.S. 130A-477."
- **SECTION 3**. G.S. 130A-133 is repealed.

SECTION 4. G.S. 130A-2 reads as rewritten:

2 "§ 130A-2. Definitions. 3 The following definitions shall apply throughout this Chapter unless otherwise 4 specified: 5 (1) "Commission" means the Commission for Health Services. 6 (1a) "Communicable condition" means the state of being infected with a 7 communicable agent but without symptoms. 8 "Communicable disease" means an illness due to an infectious agent or (1b) 9 its toxic products which is transmitted directly or indirectly to a person 10 from an infected person or animal through the agency of an intermediate animal, host or vector, or through the inanimate 11 12 environment. "Department" means the Department of Health and Human Services. 13 (2) 14 (3) "Imminent hazard" means a situation which that is likely to cause an 15 immediate threat to human life, an immediate threat of serious physical injury, an immediate threat of serious adverse health effects, or a 16 17 serious risk of irreparable damage to the environment if no immediate 18 action is taken. 19 (3a) "Isolation authority" means the authority to issue an order to limit the 20 freedom of movement or action of a person or animal with a 21 communicable disease or communicable condition for the period of communicability to prevent the direct or indirect conveyance of the 22 23 infectious agent from the person or animal to other persons or animals 24 who are susceptible or who may spread the agent to others. "Local board of health" means a district board of health or a public 25 (4) health authority board or a county board of health. 26 "Local health department" means a district health department or a 27 (5) public health authority or a county health department. 28 "Local health director" means the administrative head of a local health 29 (6) department appointed pursuant to this Chapter. 30 "Outbreak" means an occurrence of a case or cases of a disease in a 31 (6a) locale in excess of the usual number of cases of the disease. 32 "Person" means an individual, corporation, company, association, 33 (7) partnership, unit of local government or other legal entity. 34 "Quarantine authority" means the authority to issue an order to limit 35 (7a) the freedom of movement or action of persons or animals which have 36 been exposed to or are reasonably suspected of having been exposed to 37 38 a communicable disease or communicable condition for a period of 39 time as may be necessary to prevent the spread of that disease. Quarantine authority also means the authority to issue an order to limit 40 access by any person or animal to an area or facility that may be 41 contaminated with an infectious agent. The term also means the 42 authority to issue an order to limit the freedom of movement or action 43 of persons who have not received immunizations against a 44

- communicable disease when the State Health Director or a local health director determines that the immunizations are required to control an outbreak of that disease.
 - (8) "Secretary" means the Secretary of Health and Human Services.
 - (9) "Unit of local government" means a county, city, consolidated city-county, sanitary district or other local political subdivision, authority or agency of local government.
 - (10) "Vital records" means birth, death, fetal death, marriage, annulment and divorce records registered under the provisions of Article 4 of this Chapter."

SECTION 5. G.S. 130A-145 reads as rewritten:

"§ 130A-145. Local health director has quarantine Quarantine and isolation authority.

- (a) The State Health Director and aA local health director and the State Health Director—are empowered to exercise quarantine and isolation authority. Quarantine and isolation authority shall be exercised only when and so long as the public health is endangered, all other reasonable means for correcting the problem have been exhausted, and no less restrictive alternative exists.
- (b) No person other than a person authorized by the State Health Director or local health director shall enter quarantine or isolation premises. Nothing in this subsection shall be construed to restrict the access of authorized health care, law enforcement, or emergency medical services personnel to quarantine or isolation premises as necessary in conducting their duties.
- (c) Before applying quarantine or isolation authority to livestock or poultry for the purpose of preventing the direct or indirect conveyance of an infectious agent to persons, the State Health Director or a local health director shall consult with the State Veterinarian in the Department of Agriculture and Consumer Services.
- (d) When quarantine or isolation limits the freedom of movement of a person or animal or of access to a person or animal whose freedom of movement is limited, the period of limited freedom of movement or access shall not exceed 10 calendar days. Any person substantially affected by that limitation may institute in superior court in Wake County or in the county in which the limitation is imposed an action to review that limitation. If a person or a person's representative requests a hearing, the hearing shall be held within 72 hours of the filing of that request, excluding Saturdays and Sundays. The court shall reduce the limitation if it determines, by the preponderance of the evidence, that the limitation is not reasonably necessary to prevent or limit the conveyance of a communicable disease or condition to others.
- If the State Health Director or the local health director determines that a 10-calendar-day limitation on freedom of movement or access is not adequate to protect the public health, the State Health Director or local health director may institute in superior court in Wake County or in the county in which the limitation is imposed an action to obtain an order extending the period of limitation of freedom of movement or access. The court shall continue the limitation for a period not to exceed 30 days if it determines, by the preponderance of the evidence, that the limitation is reasonably

necessary to prevent or limit the conveyance of a communicable disease or condition to others. Before the expiration of an order issued under this section, the State Health Director or local health director may move to continue the order for additional periods not to exceed 30 days each."

SECTION 6. G.S. 130A-20 reads as rewritten:

"§ 130A-20. Abatement of an imminent hazard.

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- (a) If the Secretary or a local health director determines that an imminent hazard exists, the Secretary or a local health director may order the owner, lessee, operator, or other person in control of the property to abate the imminent hazard or may, after notice to or reasonable attempt to notify the owner, lessee, operator, or other person in control of the property enter upon any property and take any action necessary to abate the imminent hazard. If the Secretary or a local health director abates the imminent hazard, the The Department or the local health department shall have a lien on the property for the cost of the abatement of the imminent hazard in the nature of a mechanic's and materialmen's lien as provided in Chapter 44A Chapter 44A of the General Statutes, and the lien may be enforced as provided therein in that Chapter. The lien may be defeated by a showing that an imminent hazard did not exist at the time the Secretary or the local health director took the action.
- (b) The Secretary of Environment and Natural Resources and a local health director shall have the same rights enumerated in subsection (a) of this section to enforce the provisions of Articles 8, 9, 10, 11, and 12 of this Chapter."

SECTION 7. G.S. 130A-143 reads as rewritten:

"§ 130A-143. Confidentiality of records.

All information and records, whether publicly or privately maintained, that identify a person who has AIDS virus infection or who has or may have a disease or condition required to be reported pursuant to the provisions of this Article shall be strictly confidential. This information shall not be released or made public except under the following circumstances:

- (1) Release is made of specific medical or epidemiological information for statistical purposes in a way that no person can be identified;
- (2) Release is made of all or part of the medical record with the written consent of the person or persons identified or their guardian;
- (3) Release is made to health care personnel providing medical care to the patient;
- (4) Release is necessary to protect the public health and is made as provided by the Commission in its rules regarding control measures for communicable diseases and conditions;
- (5) Release is made pursuant to other provisions of this Article;
- (6) Release is made pursuant to subpoena or court order. Upon request of the person identified in the record, the record shall be reviewed in camera. In the trial, the trial judge may, during the taking of testimony concerning such information, exclude from the courtroom all persons except the officers of the court, the parties and those engaged in the trial of the ease.case;

- Release is made by the Department or a local health department to a (7) 1 2 court or a law enforcement officer-official for the purpose of enforcing 3 the provisions of this Article pursuant to Article 1, Part 2 of this Chapter. this Article or Article 22 of this Chapter, or investigating an 4 5 act of terrorism using nuclear, biological, or chemical agents. A law 6 enforcement official who receives the information shall not disclose it 7 further, except (i) when necessary to enforce this Article or Article 22 8 of this Chapter, or when necessary to conduct an investigation of an 9 act of terrorism using nuclear, biological, or chemical agents, or (ii) 10 when the Department or a local health department seeks the assistance of the law enforcement official in preventing or controlling the spread 11 12 of the disease or condition and expressly authorizes the disclosure as necessary for that purpose; 13 14
 - (8) Release is made by the Department or a local health department to another <u>federal</u>, state or local public health agency for the purpose of preventing or controlling the spread of a communicable disease or communicable condition;
 - (9) Release is made by the Department for bona fide research purposes. The Commission shall adopt rules providing for the use of the information for research purposes;
 - (10) Release is made pursuant to G.S. 130A-144(b); or
 - (11) Release is made pursuant to any other provisions of law that specifically authorize or require the release of information or records related to AIDS."

SECTION 8. G.S. 106-24.1 reads as rewritten:

"§ 106-24.1. Confidentiality of information collected and published.

All information published by the Department of Agriculture and Consumer Services pursuant to this Part shall be classified so as to prevent the identification of information received from individual farm operators. All information received pursuant to this Part from individual farm operators shall be held confidential by the Department and its employees. Information collected by the Department from individual farm operators for the purposes of its animal health programs may be disclosed by the State Veterinarian when, in his judgment, the disclosure will assist in the implementation of these programs. Animal disease diagnostic tests that identify the owner of the animal shall not be disclosed without the permission of the owner unless the State Veterinarian determines that disclosure is necessary to prevent the spread of an animal disease or to protect the public health."

SECTION 9. G.S. 106-307.2 reads as rewritten:

"§ 106-307.2. Reports of infectious disease in livestock and poultry to State Veterinarian.

(a) All persons practicing veterinary medicine in North Carolina shall report promptly to the State Veterinarian the existence of any reportable contagious or infectious disease in livestock and poultry. The Board of Agriculture shall establish by

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rule a list of animal diseases and conditions to be reported and the time and manner of reporting.

(b) The State Veterinarian shall notify the State Health Director and the Director of the Division of Environmental Health in the Department of Environment and Natural Resources when the State Veterinarian receives a report indicating an occurrence or potential outbreak of anthrax, arboviral infections, brucellosis, epidemic typhus, hantavirus infections, murine typhus, plague, psittacosis, Q fever, hemorrhagic fever virus infections, and any other disease or condition transmissible to humans that the State Veterinarian determines may have been caused by a terrorist act."

SECTION 10. G.S. 130A-152(b) is repealed.

SECTION 11. G.S. 143-518 reads as rewritten:

"§ 143-518. Confidentiality of patient information.

(a) Medical records compiled and maintained by the Department or EMS providers in connection with dispatch, response, treatment, or transport of individual patients or in connection with the statewide trauma system pursuant to Article 7 of Chapter 131E of the General Statutes may contain patient identifiable data which will allow linkage to other health care-based data systems for the purposes of quality management, peer review, and public health initiatives.

These medical records and data shall be strictly confidential and shall not be considered public records within the meaning of G.S. 132-1 and shall not be released or made public except under any of the following conditions:

- (1) Release is made of specific medical or epidemiological information for statistical purposes in a way that no person can be identified.
- (2) Release is made of all or part of the medical record with the written consent of the person or persons identified or their guardians.
- (3) Release is made to health care personnel providing medical care to the patient.
- (4) Release is made pursuant to a court order. Upon request of the person identified in the record, the record shall be reviewed in camera. In the trial, the trial judge may, during the taking of testimony concerning such information, exclude from the courtroom all persons except the officers of the court, the parties, and those engaged in the trial of the case.
- (5) Release is made to a Medical Review Committee as defined in G.S. 131E-95, 90-21.22A, or 130A-45.7 or to a peer review committee as defined in G.S. 131E-108, 122C-30, or 131D-21.1.
- (6) Release is made for use in a health research project under rules adopted by the North Carolina Medical Care Commission. The Commission shall adopt rules that allow release of information when an institutional review board, as defined by the Commission, has determined that the health research project:
 - a. Is of sufficient scientific importance to outweigh the intrusion into the privacy of the patient that would result from the disclosure;

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1	b.	Is impracticable without the use or disclosure of identifying			
2		health information;			
3	С.	Contains safeguards to protect the information from			
4		redisclosure;			
5	d.	Contains safeguards against identifying, directly or indirectly,			
6		any patient in any report of the research project; and			
7	e.	Contains procedures to remove or destroy at the earliest			
8		opportunity, consistent with the purposes of the project,			
9		information that would enable the patient to be identified,			
10		unless an institutional review board authorizes retention of			
11		identifying information for purposes of another research			
12		project.			
13	(7) Relea	se is made to a statewide data processor, as defined in Article			
14	11A o	of Chapter 131E of the General Statutes, in which case the data is			
15	deem	ed to have been submitted as if it were required to have been			
16	subm	itted under that Article.			
17	<u>(8)</u> Relea	se is made pursuant to any other law.			
18	(b) Charges, ac	counts, credit histories, and other personal financial records			
19	compiled and maintained by the Department or EMS providers in connection with the				
20	admission, treatment, and discharge of individual patients are strictly confidential and				
21	shall not be released."				
22	SECTION 1	12. G.S. 166A-5(3) is amended by adding a new sub-subdivision			
23	to read:				
24	" <u>b1.</u>	Coordination with the State Health Director to amend or revise			
25		the North Carolina Emergency Operations Plan regarding			
26		public health matters. At a minimum, the revisions to the Plan			
27		shall provide for the following:			
28		<u>1.</u> The epidemiologic investigation of a known or suspected			
29		threat caused by nuclear, biological, or chemical agents.			
30		<u>2.</u> The examination and testing of persons and animals that			
31		may have been exposed to a nuclear, biological, or			
32		chemical agent.			
33		3. The procurement and allocation of immunizing agents			
34		and prophylactic antibiotics.			
35		<u>4.</u> The allocation of the National Pharmaceutical Stockpile.			
36		 4. The allocation of the National Pharmaceutical Stockpile. 5. The appropriate conditions for quarantine and isolation 			
37		in order to prevent further transmission of disease.			
38		 6. Immunization procedures. 7. The issuance of guidelines for prophylaxis and treatment 			
39		7. The issuance of guidelines for prophylaxis and treatment			
40		of exposed and affected persons."			
41	SECTION 1	13. G.S. 143-508(d)(11) reads as rewritten:			
42	"(11) Establish standards and criteria for the education and credentialing of				
43	perso	ns trained to administer lifesaving treatment to a person who			

suffers a severe adverse reaction to insect stings agents that might 1 2 cause anaphylaxis.' 3 **SECTION 14.** G.S. 15A-401(b) reads as rewritten: "(b) Arrest by Officer Without a Warrant. – 4 Offense in Presence of Officer. - An officer may arrest without a 5 (1) 6 warrant any person who the officer has probable cause to believe has 7 committed a criminal offense in the officer's presence. 8 (2) Offense Out of Presence of Officer. – An officer may arrest without a 9 warrant any person who the officer has probable cause to believe: 10 Has committed a felony; or a. b. Has committed a misdemeanor, and: 11 12 Will not be apprehended unless immediately arrested, or 1. 2. May cause physical injury to himself or others, or 13 14 damage to property unless immediately arrested; or 15 Has committed a misdemeanor under G.S. 14-72.1, 14-134.3, c. 20-138.1, or 20-138.2; or 16 17 d. committed a misdemeanor under G.S. 14-33(a), 18 14-33(c)(1), 14-33(c)(2), or 14-34 when the offense was committed by a person with whom the alleged victim has a 19 20 personal relationship as defined in G.S. 50B-1; or 21 Has committed a misdemeanor under G.S. 50B-4.1(a). Repealed by Session Laws 1991, c. 150. 22 (3) 23 A law enforcement officer may detain an individual arrested for (4) 24 violation of an order limiting freedom of movement or access issued pursuant to G.S. 130A-475 or G.S. 130A-145 in the area designated by 25 the State Health Director or local health director pursuant to such 26 order. The person may be detained in such area until the initial 27 appearance before a judicial official pursuant to G.S. 15A-511 and 28 29 G.S. 15A-534.5." 30 **SECTION 15.** Article 26 of Chapter 15A is amended by adding a new section to read: 31 "§ 15A-534.5. Detention to protect public health. 32 33 If a judicial official conducting an initial appearance finds by clear and convincing evidence that a person arrested for violation of an order limiting freedom of movement 34 35 or access issued pursuant to G.S. 130A-475 or G.S. 130A-145 poses a threat to the health and safety of others, the judicial official shall deny pretrial release and shall order 36 the person to be confined in an area or facility designated by the judicial official. Such 37 38 pretrial confinement shall terminate when a judicial official determines that the confined 39 person does not pose a threat to the health and safety of others. These determinations

SECTION 16. G.S. 130A-157 reads as rewritten:

shall be made only after the State Health Director or local health director has made

"§ 130A-157. Religious exemption.

recommendations to the court."

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If the bona fide religious beliefs of an adult or the parent, guardian or person in loco parentis of a child are contrary to the immunization requirements contained in this Part, Chapter, the adult or the child shall be exempt from the requirements. Upon submission of a written statement of the bona fide religious beliefs and opposition to the immunization requirements, the person may attend the college, university, school or facility without presenting a certificate of immunization."

SECTION 17. G.S. 90-21.22A(c) reads as rewritten:

The proceedings of a medical review committee, the records and materials it produces, and the materials it considers shall be confidential and not considered public records within the meaning of G.S. 132-1, 131E-309, or 58-2-100; and shall not be subject to discovery or introduction into evidence in any civil action against a provider of health care services who directly provides services and is licensed under this Chapter, a PSO licensed under Article 17 of Chapter 131E of the General Statutes, an ambulatory surgical facility licensed under Chapter 131E of the General Statutes, or a hospital licensed under Chapter 122C or Chapter 131E of the General Statutes or that is owned or operated by the State, which civil action results from matters that are the subject of evaluation and review by the committee. No person who was in attendance at a meeting of the committee shall be required to testify in any civil action as to any evidence or other matters produced or presented during the proceedings of the committee or as to any findings, recommendations, evaluations, opinions, or other actions of the committee or its members. However, information, documents, or records otherwise available are not immune from discovery or use in a civil action merely because they were presented during proceedings of the committee. A member of the committee may testify in a civil action but cannot be asked about his or her testimony before the committee or any opinions formed as a result of the committee hearings."

SECTION 18. G.S. 131E-95(b) reads as rewritten:

The proceedings of a medical review committee, the records and materials it produces and the materials it considers shall be confidential and not considered public records within the meaning of G.S. 132-1, "'Public records' defined," and shall not be subject to discovery or introduction into evidence in any civil action against a hospital hospital, an ambulatory surgical facility licensed under Chapter 131E of the General Statutes, or a provider of professional health services which results from matters which are the subject of evaluation and review by the committee. No person who was in attendance at a meeting of the committee shall be required to testify in any civil action as to any evidence or other matters produced or presented during the proceedings of the committee or as to any findings, recommendations, evaluations, opinions, or other actions of the committee or its members. However, information, documents, or records otherwise available are not immune from discovery or use in a civil action merely because they were presented during proceedings of the committee. A member of the committee or a person who testifies before the committee may testify in a civil action but cannot be asked about his testimony before the committee or any opinions formed as a result of the committee hearings."

SECTION 19. This act becomes effective October 1, 2002.