

Second Regular Session  
Sixty-sixth General Assembly  
STATE OF COLORADO

**ENGROSSED**

*This Version Includes All Amendments Adopted  
on Second Reading in the House of Introduction*

LLS NO. 08-0089.01 Jerry Barry

**SENATE BILL 08-194**

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**SENATE SPONSORSHIP**

**Hagedorn,**

**HOUSE SPONSORSHIP**

**McGihon,**

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**Senate Committees**  
Health and Human Services  
Appropriations

**House Committees**

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**A BILL FOR AN ACT**

101 **CONCERNING PUBLIC HEALTH, AND MAKING AN APPROPRIATION IN**  
102 **CONNECTION THEREWITH.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments that may be subsequently adopted.)*

**(Drafting Note: This bill includes some statutory sections that have been relocated and renumbered, either without changes or with amendments. Former section numbers are supplied in brackets for comparison purposes.)**

Repeals statutes concerning county and district health departments, local boards of health, and regional health departments. Reenacts

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters indicate new material to be added to existing statute.*  
*Dashes through the words indicate deletions from existing statute.*

SENATE  
Amended 2nd Reading  
April 17, 2008



1 (b) EACH COMMUNITY IN COLORADO SHOULD PROVIDE  
2 HIGH-QUALITY PUBLIC HEALTH SERVICES REGARDLESS OF ITS LOCATION.  
3 THUS, THE STATE OF COLORADO AND EACH LOCAL PUBLIC HEALTH  
4 AGENCY SHOULD HAVE A COMPREHENSIVE PUBLIC HEALTH PLAN  
5 OUTLINING HOW QUALITY PUBLIC HEALTH SERVICES WILL BE PROVIDED.

6 (c) EACH COUNTY SHOULD ESTABLISH OR BE PART OF A LOCAL  
7 PUBLIC HEALTH AGENCY ORGANIZED UNDER A LOCAL BOARD OF HEALTH  
8 WITH A PUBLIC HEALTH DIRECTOR AND OTHER STAFF NECESSARY TO  
9 PROVIDE PUBLIC HEALTH SERVICES;

10 (d) A STRONG PUBLIC HEALTH INFRASTRUCTURE IS NEEDED TO  
11 PROVIDE ESSENTIAL PUBLIC HEALTH SERVICES AND IS A SHARED  
12 RESPONSIBILITY AMONG STATE AND LOCAL PUBLIC HEALTH AGENCIES AND  
13 THEIR PARTNERS WITHIN THE PUBLIC HEALTH SYSTEM; AND

14 (e) DEVELOPING A STRONG PUBLIC HEALTH INFRASTRUCTURE  
15 REQUIRES THE COORDINATED EFFORTS OF STATE AND LOCAL PUBLIC  
16 HEALTH AGENCIES AND THEIR PUBLIC AND PRIVATE SECTOR PARTNERS  
17 WITHIN THE PUBLIC HEALTH SYSTEM TO:

18 (I) IDENTIFY AND PROVIDE LEADERSHIP FOR THE PROVISION OF  
19 ESSENTIAL PUBLIC HEALTH SERVICES;

20 (II) DEVELOP AND SUPPORT AN INFORMATION INFRASTRUCTURE  
21 THAT SUPPORTS ESSENTIAL PUBLIC HEALTH SERVICES AND FUNCTIONS;

22 (III) DEVELOP AND PROVIDE EFFECTIVE EDUCATION AND TRAINING  
23 FOR MEMBERS OF THE PUBLIC HEALTH WORKFORCE;

24 (IV) DEVELOP PERFORMANCE-MANAGEMENT STANDARDS FOR THE  
25 PUBLIC HEALTH SYSTEM THAT ARE TIED TO IMPROVEMENTS IN PUBLIC  
26 HEALTH OUTCOMES OR OTHER MEASURES; AND

27 (V) DEVELOP A COMPREHENSIVE PLAN AND SET PRIORITIES FOR

1 PROVIDING ESSENTIAL PUBLIC HEALTH SERVICES.

2 **25-1-502. Definitions.** AS USED IN THIS PART 5, UNLESS THE  
3 CONTEXT OTHERWISE REQUIRES:

4 (1) "AGENCY" MEANS A COUNTY OR DISTRICT PUBLIC HEALTH  
5 AGENCY ESTABLISHED PURSUANT TO SECTION 25-1-506.

6 (2) "CORE PUBLIC HEALTH" SHALL BE DEFINED BY THE STATE  
7 BOARD AND SHALL INCLUDE, BUT NEED NOT BE LIMITED TO, THE  
8 ASSESSMENT OF HEALTH STATUS AND HEALTH RISKS, DEVELOPMENT OF  
9 POLICIES TO PROTECT AND PROMOTE HEALTH, AND ASSURANCE OF THE  
10 PROVISION OF THE ESSENTIAL PUBLIC HEALTH SERVICES.

11 (3) "ESSENTIAL PUBLIC HEALTH SERVICES" MEANS TO:

12 (a) MONITOR HEALTH STATUS TO IDENTIFY AND SOLVE  
13 COMMUNITY HEALTH PROBLEMS;

14 (b) INVESTIGATE AND DIAGNOSE HEALTH PROBLEMS AND HEALTH  
15 HAZARDS IN THE COMMUNITY;

16 (c) INFORM, EDUCATE, AND EMPOWER INDIVIDUALS ABOUT  
17 HEALTH ISSUES;

18 (d) MOBILIZE PUBLIC AND PRIVATE SECTOR COLLABORATION AND  
19 ACTION TO IDENTIFY AND SOLVE HEALTH PROBLEMS;

20 (e) DEVELOP POLICIES, PLANS, AND PROGRAMS THAT SUPPORT  
21 INDIVIDUAL AND COMMUNITY HEALTH EFFORTS;

22 (f) ENFORCE LAWS AND RULES THAT PROTECT HEALTH AND  
23 PROMOTE SAFETY;

24 (g) LINK INDIVIDUALS TO NEEDED PERSONAL HEALTH SERVICES  
25 AND ENSURE THE PROVISION OF HEALTH CARE;

26 (h) ENCOURAGE A COMPETENT PUBLIC HEALTH WORKFORCE;

27 (i) EVALUATE EFFECTIVENESS, ACCESSIBILITY, AND QUALITY OF

1 PERSONAL AND POPULATION-BASED PUBLIC HEALTH SERVICES; AND

2 (j) CONTRIBUTE TO RESEARCH INTO INSIGHTFUL AND INNOVATIVE  
3 SOLUTIONS TO HEALTH PROBLEMS.

4 (4) "MEDICAL OFFICER" MEANS A VOLUNTEER OR PAID LICENSED  
5 PHYSICIAN WHO CONTRACTS WITH OR IS EMPLOYED BY A COUNTY OR  
6 DISTRICT PUBLIC HEALTH AGENCY TO ADVISE THE PUBLIC HEALTH  
7 DIRECTOR ON MEDICAL DECISIONS IF THE PUBLIC HEALTH DIRECTOR IS NOT  
8 A LICENSED PHYSICIAN.

9 (5) "PUBLIC HEALTH" MEANS THE PREVENTION OF INJURY,  
10 DISEASE, AND PREMATURE MORTALITY; THE PROMOTION OF HEALTH IN THE  
11 COMMUNITY; AND THE RESPONSE TO PUBLIC AND ENVIRONMENTAL  
12 HEALTH NEEDS AND EMERGENCIES AND IS ACCOMPLISHED THROUGH THE  
13 PROVISION OF ESSENTIAL PUBLIC HEALTH SERVICES.

14 (6) "PUBLIC HEALTH AGENCY" MEANS AN ORGANIZATION  
15 OPERATED BY A FEDERAL, STATE, OR LOCAL GOVERNMENT OR ITS  
16 DESIGNEES THAT ACTS PRINCIPALLY TO PROTECT OR PRESERVE THE  
17 PUBLIC'S HEALTH. "PUBLIC HEALTH AGENCY" INCLUDES A COUNTY PUBLIC  
18 HEALTH AGENCY OR A DISTRICT PUBLIC HEALTH AGENCY.

19 (7) "PUBLIC HEALTH DIRECTOR" MEANS THE ADMINISTRATIVE AND  
20 EXECUTIVE HEAD OF EACH COUNTY OR DISTRICT PUBLIC HEALTH AGENCY.

21 (8) "PUBLIC HEALTH SYSTEM" MEANS STATE, COUNTY, AND  
22 DISTRICT PUBLIC HEALTH AGENCIES AND OTHER PERSONS AND  
23 ORGANIZATIONS THAT PROVIDE PUBLIC HEALTH SERVICES OR PROMOTE  
24 PUBLIC HEALTH.

25 (9) "STATE BOARD" MEANS THE STATE BOARD OF HEALTH  
26 CREATED PURSUANT TO SECTION 25-1-103.

27 (10) "STATE DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC

1 HEALTH AND ENVIRONMENT CREATED PURSUANT TO SECTION 25-1-102.

2 **25-1-503. State board - public health duties.** (1) IN ADDITION  
3 TO ALL OTHER POWERS AND DUTIES CONFERRED AND IMPOSED UPON THE  
4 STATE BOARD, THE STATE BOARD HAS THE FOLLOWING SPECIFIC POWERS  
5 AND DUTIES:

6 (a) TO ESTABLISH, BY RULE, THE CORE PUBLIC HEALTH SERVICES  
7 THAT EACH COUNTY AND DISTRICT PUBLIC HEALTH AGENCY MUST PROVIDE  
8 OR ARRANGE FOR THE PROVISION OF SAID SERVICES;

9 (b) TO ESTABLISH, BY RULE, THE MINIMUM QUALITY STANDARDS  
10 FOR PUBLIC HEALTH SERVICES;

11 (c) TO ESTABLISH, BY RULE, THE MINIMUM QUALIFICATIONS FOR  
12 COUNTY AND DISTRICT PUBLIC HEALTH DIRECTORS AND MEDICAL  
13 OFFICERS;

14 (d) TO ENSURE THE DEVELOPMENT AND IMPLEMENTATION OF A  
15 COMPREHENSIVE, STATEWIDE PUBLIC HEALTH IMPROVEMENT PLAN; ==

16 (e) TO REVIEW == ALL COUNTY AND DISTRICT PUBLIC HEALTH  
17 AGENCY PUBLIC HEALTH PLANS, WHICH REVIEW SHALL BE BASED ON  
18 CRITERIA ESTABLISHED BY RULE BY THE STATE BOARD AND AGAINST  
19 WHICH EACH COUNTY OR DISTRICT PUBLIC HEALTH PLAN SHALL BE  
20 EVALUATED; AND

21 (f) TO ESTABLISH, BY RULE, FOR THE FISCAL YEAR BEGINNING JULY  
22 1, 2009, IF PRACTICABLE, AND FOR EACH FISCAL YEAR THEREAFTER, A  
23 FORMULA FOR ALLOCATING MONEYS TO COUNTY OR DISTRICT PUBLIC  
24 HEALTH AGENCIES BASED ON INPUT FROM THE STATE DEPARTMENT AND  
25 FROM COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES.

26 SUBPART 2  
27 PUBLIC HEALTH PLANS

1           **25-1-504. Comprehensive public health plan - development -**  
2 **approval - reassessment.** (1) ON OR BEFORE DECEMBER 31, 2009, AND  
3 AT A MINIMUM ON OR BEFORE DECEMBER 31 EVERY FIVE YEARS  
4 THEREAFTER, THE STATE DEPARTMENT SHALL DEVELOP A  
5 COMPREHENSIVE, STATEWIDE PUBLIC HEALTH IMPROVEMENT PLAN,  
6 REFERRED TO IN THIS SECTION AS THE "PLAN", THAT ASSESSES AND SETS  
7 PRIORITIES FOR THE PUBLIC HEALTH SYSTEM. THE STATE BOARD MAY  
8 APPOINT AD HOC OR ADVISORY COMMITTEES AS NEEDED FOR THE PLAN  
9 DEVELOPMENT PROCESS. THE PLAN SHALL BE DEVELOPED IN  
10 CONSULTATION WITH THE STATE BOARD AND REPRESENTATIVES FROM THE  
11 STATE DEPARTMENT, COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES, AND  
12 THEIR PARTNERS WITHIN THE PUBLIC HEALTH SYSTEM. THE PLAN SHALL  
13 RELY ON EXISTING OR AVAILABLE DATA OR OTHER INFORMATION  
14 ACQUIRED PURSUANT TO THIS PART 5, AS WELL AS NATIONAL GUIDELINES  
15 OR RECOMMENDATIONS CONCERNING PUBLIC HEALTH OUTCOMES OR  
16 IMPROVEMENTS.

17           (2) (a) THE PLAN SHALL ASSESS AND SET PRIORITIES FOR THE  
18 PUBLIC HEALTH SYSTEM AND SHALL:

19           (I) GUIDE THE PUBLIC HEALTH SYSTEM IN TARGETING CORE PUBLIC  
20 HEALTH SERVICES AND FUNCTIONS THROUGH PROGRAM DEVELOPMENT,  
21 IMPLEMENTATION, AND EVALUATION;

22           (II) INCREASE THE EFFICIENCY AND EFFECTIVENESS OF THE PUBLIC  
23 HEALTH SYSTEM;

24           (III) IDENTIFY AREAS NEEDING GREATER RESOURCE ALLOCATION  
25 TO PROVIDE ESSENTIAL PUBLIC HEALTH SERVICES; ==

26           (IV) INCORPORATE, TO THE EXTENT POSSIBLE, GOALS AND  
27 PRIORITIES OF PUBLIC HEALTH PLANS DEVELOPED BY COUNTY OR DISTRICT

1 PUBLIC HEALTH AGENCIES; AND

2 (V) CONSIDER AVAILABLE RESOURCES, INCLUDING BUT NOT  
3 LIMITED TO STATE AND LOCAL FUNDING, AND BE SUBJECT TO  
4 MODIFICATION BASED ON ACTUAL SUBSEQUENT ALLOCATIONS.

5 (b) THE PLAN SHALL INCLUDE OR ADDRESS AT A MINIMUM THE  
6 FOLLOWING ELEMENTS:

7 (I) CORE PUBLIC HEALTH SERVICES AND STANDARDS FOR COUNTY  
8 AND DISTRICT PUBLIC HEALTH AGENCIES;

9 (II) RECOMMENDATIONS FOR LEGISLATIVE OR REGULATORY  
10 ACTION, INCLUDING BUT NOT LIMITED TO UPDATING PUBLIC HEALTH LAWS,  
11 ELIMINATING OBSOLETE STATUTORY LANGUAGE, AND ESTABLISHING AN  
12 EFFECTIVE AND COMPREHENSIVE STATE AND LOCAL PUBLIC HEALTH  
13 INFRASTRUCTURE;

14 (III) IDENTIFICATION AND QUANTIFICATION OF EXISTING PUBLIC  
15 HEALTH PROBLEMS, DISPARITIES, OR THREATS AT THE STATE AND COUNTY  
16 LEVELS;

17 (IV) IDENTIFICATION OF EXISTING PUBLIC HEALTH RESOURCES AT  
18 THE STATE AND LOCAL LEVELS;

19 (V) DECLARATION OF THE GOALS OF THE PLAN;

20 (VI) IDENTIFICATION OF SPECIFIC RECOMMENDATIONS FOR  
21 MEETING THESE GOALS;

22 (VII) DEVELOPMENT OF PUBLIC AND ENVIRONMENTAL HEALTH  
23 INFRASTRUCTURE THAT SUPPORTS CORE PUBLIC HEALTH FUNCTIONS AND  
24 ESSENTIAL PUBLIC HEALTH SERVICES AT THE STATE AND LOCAL LEVELS;

25 (VIII) EXPLANATION OF THE PRIORITIZATION OF ONE OR MORE  
26 CONDITIONS OF PUBLIC HEALTH IMPORTANCE;

27 (IX) DETAILED DESCRIPTION OF STRATEGIES TO DEVELOP AND

1 PROMOTE CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES;  
2 (X) DEVELOPMENT, EVALUATION, AND MAINTENANCE OF, AND  
3 IMPROVEMENTS TO, AN INFORMATION INFRASTRUCTURE THAT SUPPORTS  
4 ESSENTIAL PUBLIC HEALTH SERVICES;  
5 (XI) DETAILED DESCRIPTION OF THE PROGRAMS AND ACTIVITIES  
6 THAT WILL BE PURSUED TO ADDRESS EXISTING PUBLIC AND  
7 ENVIRONMENTAL HEALTH PROBLEMS, DISPARITIES, OR THREATS;  
8 (XII) DETAILED DESCRIPTION OF HOW PUBLIC HEALTH SERVICES  
9 WILL BE INTEGRATED AND PUBLIC HEALTH RESOURCES SHARED TO  
10 OPTIMIZE EFFICIENCY AND EFFECTIVENESS OF THE PUBLIC HEALTH  
11 SYSTEM;  
12 (XIII) DETAILED DESCRIPTION OF HOW THE PLAN WILL SUPPORT  
13 COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES IN ACHIEVING THE GOALS  
14 OF THEIR COUNTY OR DISTRICT PUBLIC HEALTH PLANS;  
15 (XIV) ESTIMATION OF COSTS OF IMPLEMENTING THE PLAN;  
16 (XV) A TIMELINE FOR IMPLEMENTING VARIOUS ELEMENTS OF THE  
17 PLAN;  
18 (XVI) A STRATEGY FOR COORDINATING SERVICE DELIVERY WITHIN  
19 THE PUBLIC HEALTH SYSTEM; AND  
20 (XVII) MEASURABLE INDICATORS OF EFFECTIVENESS AND  
21 SUCCESSES.  
22 (c) THE PLAN, INCLUDING CORE PUBLIC HEALTH SERVICES AND  
23 STANDARDS, SHALL PROSPECTIVELY COVER UP TO FIVE YEARS, SUBJECT TO  
24 ANNUAL REVISIONS AND THE IMPLEMENTATION SCHEDULE ESTABLISHED  
25 BY THE STATE BOARD.  
26 (3) THE STATE DEPARTMENT SHALL MAKE THE PLAN AVAILABLE  
27 TO THE GOVERNOR, THE GENERAL ASSEMBLY, THE STATE BOARD, COUNTY

1 AND DISTRICT PUBLIC HEALTH AGENCIES, AND OTHER PARTNERS.

2 (4) THE STATE DEPARTMENT IS AUTHORIZED TO SOLICIT AND  
3 ACCEPT ANY GIFTS, GRANTS, OR DONATIONS TO PAY FOR THE  
4 DEVELOPMENT OF THE PLAN. ANY MONEYS RECEIVED PURSUANT TO THIS  
5 SUBSECTION (4) SHALL BE TRANSMITTED TO THE STATE TREASURER, WHO  
6 SHALL CREDIT THE SAME TO THE COMPREHENSIVE PUBLIC HEALTH PLAN  
7 CASH FUND, WHICH IS HEREBY CREATED AND REFERRED TO IN THIS  
8 SUBSECTION (4) AS THE "FUND". ANY INTEREST DERIVED FROM THE  
9 DEPOSIT AND INVESTMENT OF MONEYS IN THE FUND SHALL BE CREDITED  
10 TO THE FUND. ANY UNEXPENDED AND UNENCUMBERED MONEYS  
11 REMAINING IN THE FUND AT THE END OF ANY FISCAL YEAR SHALL REMAIN  
12 IN THE FUND AND SHALL NOT BE CREDITED OR TRANSFERRED TO THE  
13 GENERAL FUND OR ANOTHER FUND. MONEYS IN THE FUND MAY BE  
14 EXPENDED BY THE STATE DEPARTMENT, SUBJECT TO ANNUAL  
15 APPROPRIATION BY THE GENERAL ASSEMBLY, FOR THE DEVELOPMENT OF  
16 THE PLAN DESCRIBED IN THIS SECTION.

17 (5) IF THE MONEYS RECEIVED BY THE STATE DEPARTMENT  
18 THROUGH GIFTS, GRANTS, AND DONATIONS ARE INSUFFICIENT TO COVER  
19 THE DIRECT AND INDIRECT COSTS OF COMPLYING WITH THE PROVISIONS OF  
20 SECTION 25-1-503 AND THIS SECTION, THE STATE DEPARTMENT SHALL NOT  
21 BE REQUIRED TO IMPLEMENT THE PROVISIONS OF SAID SECTIONS.

22 **25-1-505. County and district public health plans - approval.**

23 (1) AS SOON AS PRACTICABLE AFTER THE APPROVAL OF EACH  
24 COMPREHENSIVE, STATEWIDE PUBLIC HEALTH IMPROVEMENT PLAN  
25 PURSUANT TO SECTION 25-1-504, EACH COUNTY OR DISTRICT PUBLIC  
26 HEALTH AGENCY SHALL PREPARE A COUNTY OR DISTRICT PUBLIC HEALTH  
27 PLAN, REFERRED TO IN THIS SECTION AS THE "LOCAL PLAN". EACH LOCAL

1 PLAN SHALL NOT BE INCONSISTENT WITH THE COMPREHENSIVE, STATEWIDE  
2 PUBLIC HEALTH IMPROVEMENT PLAN REQUIRED UNDER SECTION 25-1-504.

3 (2) EACH LOCAL PLAN SHALL, AT A MINIMUM:

4 (a) EXAMINE DATA ABOUT HEALTH STATUS AND RISK FACTORS IN  
5 THE LOCAL COMMUNITY;

6 (b) ASSESS THE CAPACITY AND PERFORMANCE OF THE COUNTY OR  
7 DISTRICT PUBLIC HEALTH SYSTEM;

8 (c) IDENTIFY GOALS AND STRATEGIES FOR IMPROVING THE HEALTH  
9 OF THE LOCAL COMMUNITY;

10 (d) DESCRIBE HOW REPRESENTATIVES OF THE LOCAL COMMUNITY  
11 DEVELOP AND IMPLEMENT THE LOCAL PLAN;

12 (e) ADDRESS HOW COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES  
13 COORDINATE WITH THE STATE DEPARTMENT AND OTHERS WITHIN THE  
14 PUBLIC HEALTH SYSTEM TO ACCOMPLISH GOALS AND PRIORITIES  
15 IDENTIFIED IN THE COMPREHENSIVE, STATEWIDE PUBLIC HEALTH  
16 IMPROVEMENT PLAN; AND

17 (f) IDENTIFY FINANCIAL RESOURCES AVAILABLE TO MEET  
18 IDENTIFIED PUBLIC HEALTH NEEDS AND TO MEET REQUIREMENTS FOR THE  
19 PROVISION OF CORE PUBLIC HEALTH SERVICES.

20 (3) SUBJECT TO AVAILABLE APPROPRIATIONS, THE STATE  
21 DEPARTMENT SHALL ENCOURAGE AND PROVIDE TECHNICAL ASSISTANCE  
22 TO COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES THAT REQUEST SUCH  
23 ASSISTANCE AND OTHERWISE WORK WITH COUNTY OR DISTRICT PUBLIC  
24 HEALTH AGENCIES TO GENERATE THEIR LOCAL PLANS.

25 SUBPART 3

26 COUNTY OR DISTRICT PUBLIC HEALTH AGENCIES

27 **25-1-506. County or district public health agency - repeal.**

1 (1) **[Formerly 25-1-501]** EACH COUNTY, BY RESOLUTION OF ITS BOARD  
2 OF COUNTY COMMISSIONERS, SHALL ESTABLISH AND MAINTAIN A COUNTY  
3 PUBLIC HEALTH AGENCY OR SHALL PARTICIPATE IN A DISTRICT PUBLIC  
4 HEALTH AGENCY. ANY TWO OR MORE CONTIGUOUS COUNTIES, BY  
5 RESOLUTIONS OF THE BOARDS OF COUNTY COMMISSIONERS OF THE  
6 RESPECTIVE COUNTIES, MAY ESTABLISH AND MAINTAIN A DISTRICT PUBLIC  
7 HEALTH AGENCY. AN AGENCY SHALL CONSIST OF A COUNTY OR DISTRICT  
8 BOARD OF HEALTH, A PUBLIC HEALTH DIRECTOR, AND ALL OTHER  
9 PERSONNEL EMPLOYED OR RETAINED UNDER THE PROVISIONS OF THIS  
10 SUBPART 3.

11 (2) **[Formerly 25-1-504]** (a) (I) THE JURISDICTION OF ANY  
12 AGENCY SHALL EXTEND OVER ALL UNINCORPORATED AREAS AND OVER  
13 ALL MUNICIPAL CORPORATIONS WITHIN THE TERRITORIAL LIMITS OF THE  
14 COUNTY OR THE COUNTIES COMPRISING THE DISTRICT, BUT NOT OVER THE  
15 TERRITORY OF ANY MUNICIPAL CORPORATION THAT MAINTAINS ITS  
16 OWN PUBLIC HEALTH AGENCY. IF THE COUNTY HAS A COUNTY PUBLIC  
17 HEALTH AGENCY OR A DISTRICT BOARD OF HEALTH AND IF THE COUNTY IS  
18 WITHIN A DISTRICT PUBLIC HEALTH AGENCY, ANY MUNICIPAL  
19 CORPORATION NOT OTHERWISE WITHIN THE JURISDICTION OF AN AGENCY,  
20 BY AGREEMENT OF ITS CITY COUNCIL, BOARD OF TRUSTEES OR OTHER  
21 GOVERNING BODY, AND THE BOARD OF COUNTY COMMISSIONERS OF THE  
22 COUNTY WHEREIN THE MUNICIPAL CORPORATION IS SITUATED MAY MERGE  
23 ITS DEPARTMENT WITH THE COUNTY OR DISTRICT PUBLIC HEALTH AGENCY.

24 (II) IN THE EVENT OF A MERGER BETWEEN A HEALTH DEPARTMENT  
25 OF A MUNICIPAL CORPORATION WITH A COUNTY OR DISTRICT PUBLIC  
26 HEALTH AGENCY, THE AGREEMENT OF MERGER, AMONG OTHER THINGS,  
27 SHALL PROVIDE THAT A MEMBER OR MEMBERS OF THE COUNTY OR

1 DISTRICT BOARD OF HEALTH, AS IS SPECIFIED IN THE AGREEMENT, SHALL  
2 BE APPOINTED BY THE CITY COUNCIL OR BOARD OF TRUSTEES OF THE  
3 MUNICIPAL CORPORATION RATHER THAN AS PROVIDED IN THIS SECTION.  
4 THE CITY COUNCIL OR BOARD OF TRUSTEES SHALL APPOINT THE NUMBER  
5 OF MEMBERS SPECIFIED IN THE AGREEMENT OF MERGER, AND THE  
6 REMAINING MEMBERS SHALL BE APPOINTED AS PROVIDED IN THIS SECTION.

7 (III) THE BOARD OF COUNTY COMMISSIONERS, IN ORDER TO GIVE  
8 THE MUNICIPAL CORPORATION REPRESENTATION ON A COUNTY BOARD OF  
9 HEALTH PREVIOUSLY ESTABLISHED, MAY DECLARE VACANCIES IN THE  
10 COUNTY BOARD OF HEALTH AND PERMIT THE VACANCIES TO BE FILLED BY  
11 THE CITY COUNCIL OR BOARD OF TRUSTEES OF THE MUNICIPAL  
12 CORPORATION.

13 (b) ALL COUNTY OR DISTRICT BOARDS OF HEALTH EXISTING WITHIN  
14 THE COUNTY OR DISTRICT SHALL BE DISSOLVED UPON THE ORGANIZATION  
15 OF A COUNTY OR DISTRICT PUBLIC HEALTH AGENCY UNDER THE  
16 PROVISIONS OF THIS PART 5 OR UPON THE ACCEPTANCE OF A COUNTY INTO  
17 A DISTRICT ALREADY ESTABLISHED.

18 (c) IN THE EVENT OF THE DISSOLUTION OF ANY COUNTY OR  
19 DISTRICT PUBLIC HEALTH AGENCY, OR THE WITHDRAWAL OF A COUNTY  
20 FROM AN ESTABLISHED DISTRICT, THE WITHDRAWAL OF A MUNICIPAL  
21 CORPORATION THAT HAS VOLUNTARILY MERGED ITS HEALTH DEPARTMENT  
22 OR AGENCY WITH A COUNTY OR DISTRICT PUBLIC HEALTH AGENCY, LOCAL  
23 BOARDS OF HEALTH SHALL BE REESTABLISHED UNDER THE PROVISIONS OF  
24 THIS PART 5 AND ASSUME THE POWERS AND DUTIES CONFERRED UPON  
25 SUCH LOCAL BOARDS.

26 (3) (a) SUBJECT TO AVAILABLE APPROPRIATIONS, AN AGENCY  
27 SHALL PROVIDE OR ARRANGE FOR THE PROVISIONS OF SERVICES

1 NECESSARY TO CARRY OUT THE PUBLIC HEALTH LAWS AND RULES OF THE  
2 STATE BOARD, THE WATER QUALITY CONTROL COMMISSION, THE AIR  
3 QUALITY CONTROL COMMISSION, AND THE SOLID AND HAZARDOUS WASTE  
4 COMMISSION ACCORDING TO THE SPECIFIC NEEDS AND RESOURCES  
5 AVAILABLE WITHIN THE COMMUNITY AS DETERMINED BY THE COUNTY OR  
6 DISTRICT BOARD OF HEALTH OR THE BOARD OF COUNTY COMMISSIONERS  
7 AND AS SET OUT IN BOTH THE COMPREHENSIVE, STATEWIDE PUBLIC  
8 HEALTH IMPROVEMENT PLAN DEVELOPED PURSUANT TO SECTION 25-1-504  
9 AND THE COUNTY OR DISTRICT PUBLIC HEALTH PLAN DEVELOPED  
10 PURSUANT TO SECTION 25-1-505.

11 (b) IN ADDITION TO OTHER POWERS AND DUTIES, AN AGENCY  
12 SHALL HAVE THE FOLLOWING DUTIES:

13 (I) TO COMPLETE A COMMUNITY HEALTH ASSESSMENT AND TO  
14 CREATE THE COUNTY OR DISTRICT PUBLIC HEALTH PLAN AT LEAST EVERY  
15 FIVE YEARS UNDER THE DIRECTION OF THE COUNTY OR DISTRICT BOARD  
16 AND TO SUBMIT THE PLAN TO THE COUNTY OR DISTRICT BOARD AND STATE  
17 BOARD FOR REVIEW;

18 (II) TO ADVISE THE COUNTY OR DISTRICT BOARD ON PUBLIC POLICY  
19 ISSUES NECESSARY TO PROTECT PUBLIC HEALTH AND THE ENVIRONMENT;

20 (III) TO PROVIDE OR ARRANGE FOR THE PROVISION OF QUALITY,  
21 CORE PUBLIC HEALTH SERVICES DEEMED ESSENTIAL BY THE STATE BOARD  
22 AND THE COMPREHENSIVE, STATEWIDE PUBLIC HEALTH IMPROVEMENT  
23 PLAN; EXCEPT THAT THE AGENCY SHALL BE DEEMED TO HAVE MET THIS  
24 REQUIREMENT IF THE AGENCY CAN DEMONSTRATE TO THE COUNTY OR  
25 DISTRICT BOARD THAT OTHER PROVIDERS OFFER CORE PUBLIC HEALTH  
26 SERVICES THAT ARE SUFFICIENT TO MEET THE LOCAL NEEDS AS  
27 DETERMINED BY THE PLAN;

1           (IV) TO THE EXTENT AUTHORIZED BY THE PROVISIONS OF THIS  
2           TITLE OR ARTICLE 20 OF TITLE 30, C.R.S., TO ADMINISTER AND ENFORCE  
3           THE LAWS PERTAINING TO:

4           (A) PUBLIC HEALTH, AIR POLLUTION, SOLID AND HAZARDOUS  
5           WASTE, AND WATER QUALITY;

6           (B) VITAL STATISTICS; AND

7           (C) THE ORDERS, RULES, AND STANDARDS OF THE STATE BOARD  
8           AND ANY OTHER **TYPE 1** AGENCY CREATED PURSUANT TO THE PROVISIONS  
9           OF THIS TITLE;

10           (V) TO INVESTIGATE AND CONTROL THE CAUSES OF EPIDEMIC OR  
11           COMMUNICABLE \_\_\_\_\_ DISEASES AND CONDITIONS AFFECTING PUBLIC  
12           HEALTH;

13           (VI) TO ESTABLISH, MAINTAIN, AND ENFORCE ISOLATION AND  
14           QUARANTINE, AND IN PURSUANCE THEREOF, AND FOR THIS PURPOSE ONLY,  
15           TO EXERCISE PHYSICAL CONTROL OVER PROPERTY AND OVER THE PERSONS  
16           OF THE PEOPLE WITHIN THE JURISDICTION OF THE AGENCY AS THE AGENCY  
17           MAY FIND NECESSARY FOR THE PROTECTION OF THE PUBLIC HEALTH;

18           (VII) TO CLOSE SCHOOLS AND PUBLIC PLACES AND TO PROHIBIT  
19           GATHERINGS OF PEOPLE WHEN NECESSARY TO PROTECT PUBLIC HEALTH;

20           (VIII) TO INVESTIGATE AND ABATE NUISANCES WHEN NECESSARY  
21           IN ORDER TO ELIMINATE SOURCES OF EPIDEMIC OR COMMUNICABLE \_\_\_\_\_  
22           DISEASES AND CONDITIONS AFFECTING PUBLIC HEALTH;

23           (IX) TO ESTABLISH, MAINTAIN, OR MAKE AVAILABLE CHEMICAL,  
24           BACTERIOLOGICAL, AND BIOLOGICAL LABORATORIES, AND TO CONDUCT  
25           SUCH LABORATORY INVESTIGATIONS AND EXAMINATIONS AS IT MAY DEEM  
26           NECESSARY OR PROPER FOR THE PROTECTION OF THE PUBLIC HEALTH;

27           (X) TO PURCHASE AND DISTRIBUTE TO LICENSED PHYSICIANS AND

1 VETERINARIANS, WITH OR WITHOUT CHARGE, AS THE COUNTY OR DISTRICT  
2 BOARD MAY DETERMINE UPON CONSIDERATIONS OF EMERGENCY OR NEED,  
3 APPROVED BIOLOGICAL OR THERAPEUTIC PRODUCTS NECESSARY FOR THE  
4 PROTECTION OF PUBLIC HEALTH;

5 (XI) TO INITIATE AND CARRY OUT HEALTH PROGRAMS CONSISTENT  
6 WITH STATE LAW THAT ARE NECESSARY OR DESIRABLE BY THE COUNTY OR  
7 DISTRICT BOARD TO PROTECT PUBLIC HEALTH AND THE ENVIRONMENT;

8 (XII) TO COLLECT, COMPILE, AND TABULATE REPORTS OF  
9 MARRIAGES, DISSOLUTIONS OF MARRIAGE, AND DECLARATIONS OF  
10 INVALIDITY OF MARRIAGE, BIRTHS, DEATHS, AND MORBIDITY, AND TO  
11 REQUIRE ANY PERSON HAVING INFORMATION WITH REGARD TO THE SAME  
12 TO MAKE SUCH REPORTS AND SUBMIT SUCH INFORMATION AS IS REQUIRED  
13 BY LAW OR THE RULES OF THE STATE BOARD;

14 (XIII) TO MAKE NECESSARY SANITATION AND HEALTH  
15 INVESTIGATIONS AND INSPECTIONS, ON ITS OWN INITIATIVE OR IN  
16 COOPERATION WITH THE STATE DEPARTMENT, FOR MATTERS AFFECTING  
17 PUBLIC HEALTH THAT ARE WITHIN THE JURISDICTION AND CONTROL OF THE  
18 AGENCY; AND

19 (XIV) TO COLLABORATE WITH THE STATE DEPARTMENT AND THE  
20 STATE BOARD IN ALL MATTERS PERTAINING TO PUBLIC HEALTH, WITH THE  
21 WATER QUALITY CONTROL COMMISSION IN ALL MATTERS PERTAINING TO  
22 WATER QUALITY, THE AIR QUALITY CONTROL COMMISSION, AND THE  
23 DIVISION OF ADMINISTRATION OF THE STATE DEPARTMENT IN ALL  
24 MATTERS PERTAINING TO AIR POLLUTION, AND WITH THE SOLID AND  
25 HAZARDOUS WASTE COMMISSION IN ALL MATTERS PERTAINING TO SOLID  
26 AND HAZARDOUS WASTE.

27 \_\_\_\_\_

1           (c) IF A COUNTY OR DISTRICT BOARD OF HEALTH DOES NOT  
2           RECEIVE SUFFICIENT APPROPRIATIONS TO FULFILL ALL THE DUTIES  
3           DESCRIBED IN PARAGRAPH (b) OF THIS SUBSECTION (3), THE COUNTY OR  
4           DISTRICT BOARD SHALL SET PRIORITIES FOR FULFILLING THE DUTIES AND  
5           SHALL INCLUDE THE LIST OF PRIORITIES IN ITS COUNTY OR DISTRICT PUBLIC  
6           HEALTH PLAN SUBMITTED PURSUANT TO SECTION 25-1-505.

7           (4) (a) UNTIL THE TIME THAT AN AGENCY IS ESTABLISHED  
8           PURSUANT TO THIS SECTION, A COUNTY, DISTRICT, OR REGIONAL HEALTH  
9           DEPARTMENT ESTABLISHED AS OF JULY 1, 2008, SHALL CONTINUE TO  
10          OPERATE AND SHALL HAVE THE POWERS AND DUTIES IMPOSED BY LAW AS  
11          IT EXISTED PRIOR TO JULY 1, 2008.

12          (b) THIS SUBSECTION (4) IS REPEALED, EFFECTIVE JULY 1, 2009.

13          **25-1-507. [Formerly 25-1-609] Municipal board of health.**  
14          EXCEPT AS OTHERWISE PROVIDED BY LAW, THE MAYOR AND COUNCIL OF  
15          EACH INCORPORATED TOWN OR CITY, WHETHER INCORPORATED UNDER  
16          GENERAL STATUTES OR SPECIAL CHARTER IN THIS STATE, MAY ESTABLISH  
17          A MUNICIPAL PUBLIC HEALTH AGENCY AND APPOINT A MUNICIPAL BOARD  
18          OF HEALTH. IF APPOINTED, THE MUNICIPAL BOARD OF HEALTH SHALL  
19          HAVE ALL THE POWERS AND RESPONSIBILITIES AND PERFORM ALL THE  
20          DUTIES OF A COUNTY OR DISTRICT BOARD OF HEALTH AS PROVIDED IN THIS  
21          PART 5 WITHIN THE LIMITS OF THE RESPECTIVE CITY OR TOWN OF WHICH  
22          THEY ARE THE OFFICERS.

23          **25-1-508. [Formerly 25-1-502] County or district boards of**  
24          **public health - public health directors - repeal.** (1) WITHIN NINETY  
25          DAYS AFTER THE ADOPTION OF A RESOLUTION TO ESTABLISH AND  
26          MAINTAIN A COUNTY PUBLIC HEALTH AGENCY OR TO PARTICIPATE IN A  
27          DISTRICT PUBLIC HEALTH AGENCY, THE RESPECTIVE BOARD OF COUNTY

1 COMMISSIONERS SHALL PROCEED TO ORGANIZE THE AGENCY BY THE  
2 APPOINTMENT OF A COUNTY OR DISTRICT BOARD OF HEALTH, REFERRED TO  
3 IN THIS PART 5 AS A "COUNTY OR DISTRICT BOARD".

4 (2) (a) (I) EACH COUNTY BOARD OF HEALTH SHALL CONSIST OF AT  
5 LEAST FIVE MEMBERS TO BE APPOINTED BY THE BOARD OF COUNTY  
6 COMMISSIONERS FOR FIVE-YEAR TERMS; EXCEPT THAT THE BOARD OF  
7 COUNTY COMMISSIONERS SHALL STAGGER THE TERMS OF THE INITIAL  
8 APPOINTMENTS. THEREAFTER FULL TERM APPOINTMENTS

9 (II) NOTWITHSTANDING THE PROVISIONS OF SUBPARAGRAPH (I) OF  
10 THIS PARAGRAPH (a), A COUNTY WITH A POPULATION OF LESS THAN ONE  
11 HUNDRED THOUSAND PEOPLE MAY HAVE A COUNTY BOARD OF HEALTH  
12 THAT CONSISTS OF AT LEAST THREE MEMBERS TO BE APPOINTED BY THE  
13 BOARD OF COUNTY COMMISSIONERS FOR FIVE-YEAR TERMS; EXCEPT THAT  
14 THE BOARD OF COUNTY COMMISSIONERS SHALL STAGGER THE TERMS OF  
15 THE INITIAL APPOINTMENTS. THEREAFTER, FULL-TERM APPOINTMENTS  
16 SHALL BE FOR FIVE YEARS.

17 (b) EACH MEMBER OF THE COUNTY BOARD OF HEALTH SHALL BE A  
18 RESIDENT OF THE COUNTY IN WHICH THE COUNTY AGENCY IS LOCATED.  
19 APPOINTMENTS SHALL BE MADE TO THE BOARD SO THAT NO BUSINESS OR  
20 PROFESSIONAL GROUP OR GOVERNMENTAL ENTITY SHALL CONSTITUTE A  
21 MAJORITY OF THE BOARD. ANY VACANCY ON THE BOARD SHALL BE FILLED  
22 IN THE SAME MANNER AS FULL-TERM APPOINTMENTS BY THE  
23 APPOINTMENT OF A QUALIFIED PERSON FOR THE UNEXPIRED TERM.

24 (c) IN A COUNTY WITH A POPULATION OF LESS THAN ONE HUNDRED  
25 THOUSAND PEOPLE THAT, AS OF THE EFFECTIVE DATE OF THIS SECTION,  
26 DOES NOT HAVE A BOARD OF HEALTH THAT IS SEPARATE FROM THE BOARD  
27 OF COUNTY COMMISSIONERS, THE BOARD OF COUNTY COMMISSIONERS

1 MAY DESIGNATE ITSELF AS THE COUNTY BOARD OF HEALTH AS OF JULY 1,  
2 2008. THE TERMS OF THE MEMBERS OF THE COUNTY BOARD OF HEALTH  
3 SHALL COINCIDE WITH THEIR TERMS AS COMMISSIONERS. SUCH COUNTY  
4 BOARDS SHALL ASSUME ALL THE DUTIES OF APPOINTED COUNTY BOARDS.

5 (d) NOTWITHSTANDING THE PROVISIONS OF PARAGRAPHS (a) TO (c)  
6 OF THIS SUBSECTION (2), A COUNTY BOARD OF HEALTH IN A HOME-RULE  
7 COUNTY SHALL COMPLY WITH THE REQUIREMENTS OF ITS HOME-RULE  
8 CHARTER.

9 (3) (a) EACH DISTRICT BOARD OF HEALTH SHALL CONSIST OF A  
10 MINIMUM OF FIVE MEMBERS. THE MEMBERSHIP OF EACH DISTRICT BOARD  
11 OF HEALTH SHALL INCLUDE AT LEAST ONE REPRESENTATIVE FROM EACH  
12 COUNTY IN THE DISTRICT. THE MEMBERS OF THE BOARD SHALL BE  
13 APPOINTED BY AN APPOINTMENTS COMMITTEE COMPOSED OF ONE MEMBER  
14 OF EACH OF THE BOARDS OF COUNTY COMMISSIONERS OF THE COUNTIES  
15 COMPRISING THE DISTRICT. THE APPOINTMENTS COMMITTEE FOR EACH  
16 DISTRICT BOARD SHALL DESIGNATE THE NUMBER OF MEMBERS OF ITS  
17 DISTRICT BOARD AND SHALL ESTABLISH STAGGERED TERMS FOR THE  
18 INITIAL APPOINTMENTS. THEREAFTER, FULL-TERM APPOINTMENTS  
19 SHALL BE FOR FIVE YEARS.

20 (b) EACH MEMBER OF THE DISTRICT BOARD SHALL BE A RESIDENT  
21 OF ONE OF THE COUNTIES COMPRISING THE DISTRICT, AND THERE SHALL BE  
22 AT LEAST ONE MEMBER FROM EACH OF THE COUNTIES COMPRISING THE  
23 DISTRICT. APPOINTMENTS SHALL BE MADE TO THE DISTRICT BOARD SO  
24 THAT NO BUSINESS OR PROFESSIONAL GROUP OR GOVERNMENTAL ENTITY  
25 SHALL CONSTITUTE A MAJORITY OF THE DISTRICT BOARD. THE  
26 APPOINTMENTS COMMITTEE SHALL FILL ANY VACANCY ON THE DISTRICT  
27 BOARD BY THE APPOINTMENT OF A QUALIFIED PERSON FOR THE

1       REMAINDER OF THE UNEXPIRED TERM.

2           (c) UPON ESTABLISHMENT OF A DISTRICT BOARD, ALL COUNTY  
3       BOARDS PREVIOUSLY EXISTING WITHIN THE COUNTY OR DISTRICT SHALL  
4       BE DISSOLVED. UPON THE ACCEPTANCE OF A NEW COUNTY INTO AN  
5       ESTABLISHED DISTRICT, THE COUNTY OR DISTRICT BOARD PREVIOUSLY  
6       EXISTING FOR THE COUNTY BEING ADDED SHALL BE DISSOLVED AND THE  
7       CHAIR OF THE PREVIOUS COUNTY OR DISTRICT BOARD OR THE CHAIR'S  
8       DESIGNEE SHALL REPRESENT THE NEW COUNTY ON THE DISTRICT BOARD  
9       UNTIL A NEW MEMBER IS APPOINTED BY THE APPOINTMENTS COMMITTEE.

10          (4) (a) A COUNTY OR DISTRICT BOARD, AT ITS ORGANIZATIONAL  
11       MEETING, SHALL ELECT FROM ITS MEMBERS A PRESIDENT AND OTHER  
12       OFFICERS AS IT SHALL DETERMINE. THE PUBLIC HEALTH DIRECTOR OF THE  
13       AGENCY, AT THE DISCRETION OF THE BOARD, MAY SERVE AS SECRETARY  
14       BUT SHALL NOT BE A MEMBER OF THE BOARD. ALL OFFICERS AND THE  
15       PUBLIC HEALTH DIRECTOR SHALL HOLD THEIR POSITIONS AT THE PLEASURE  
16       OF THE BOARD.

17          (b) (I) REGULAR MEETINGS OF A COUNTY OR DISTRICT BOARD  
18       SHALL BE HELD AT LEAST ONCE EVERY THREE MONTHS AT SUCH TIMES AS  
19       MAY BE ESTABLISHED BY RESOLUTION OF THE BOARD. SPECIAL MEETINGS  
20       OF A BOARD MAY BE CALLED BY THE PRESIDENT, BY THE PUBLIC HEALTH  
21       DIRECTOR, OR BY A MAJORITY OF THE MEMBERS OF THE BOARD AT ANY  
22       TIME ON THREE DAYS' PRIOR NOTICE; EXCEPT THAT, IN CASE OF  
23       EMERGENCY, TWENTY-FOUR HOURS' NOTICE SHALL BE SUFFICIENT.

24          (II) A COUNTY OR DISTRICT BOARD MAY ADOPT, AND AT ANY TIME  
25       MAY AMEND, BYLAWS IN RELATION TO ITS MEETINGS AND THE  
26       TRANSACTION OF ITS BUSINESS. A MAJORITY OF THE BOARD SHALL  
27       CONSTITUTE A QUORUM. MEMBERS OF THE BOARD SHALL SERVE WITHOUT

1 COMPENSATION BUT SHALL BE REIMBURSED FOR THEIR ACTUAL AND  
2 NECESSARY TRAVEL AND SUBSISTENCE EXPENSES TO ATTEND MEETINGS.

3 (5) IN ADDITION TO ALL OTHER POWERS AND DUTIES CONFERRED  
4 AND IMPOSED UPON COUNTY OR DISTRICT BOARDS BY THE PROVISIONS OF  
5 THIS SUBPART 3, COUNTY OR DISTRICT BOARDS SHALL HAVE AND EXERCISE  
6 THE FOLLOWING SPECIFIC POWERS AND DUTIES:

7 (a) TO DEVELOP AND PROMOTE THE PUBLIC POLICIES NEEDED TO  
8 SECURE THE CONDITIONS NECESSARY FOR A HEALTHY COMMUNITY;

9 (b) TO APPROVE THE LOCAL PUBLIC HEALTH PLAN COMPLETED BY  
10 THE COUNTY OR DISTRICT AGENCY, AND TO SUBMIT THE LOCAL PLAN TO  
11 THE STATE BOARD FOR REVIEW;

12 (c) (I) TO SELECT A PUBLIC HEALTH DIRECTOR TO SERVE AT THE  
13 PLEASURE OF THE COUNTY OR DISTRICT BOARD. THE PUBLIC HEALTH  
14 DIRECTOR SHALL POSSESS SUCH MINIMUM QUALIFICATIONS AS MAY BE  
15 PRESCRIBED BY THE STATE BOARD. A PUBLIC HEALTH DIRECTOR MAY BE  
16 A PHYSICIAN, A PUBLIC HEALTH NURSE, OR OTHER QUALIFIED PUBLIC  
17 HEALTH PROFESSIONAL. A PUBLIC HEALTH DIRECTOR MAY PRACTICE  
18 MEDICINE OR NURSING WITHIN HIS OR HER LICENSE AND SCOPE OF  
19 PRACTICE, AS NECESSARY, TO CARRY OUT THE FUNCTIONS OF THE OFFICE  
20 OF THE PUBLIC HEALTH DIRECTOR. THE QUALIFICATIONS SHALL REFLECT  
21 THE RESOURCES AND NEEDS OF THE COUNTY OR COUNTIES COVERED BY  
22 THE AGENCY. IF THE PUBLIC HEALTH DIRECTOR IS NOT A PHYSICIAN, THE  
23 COUNTY OR DISTRICT BOARD SHALL EMPLOY OR CONTRACT WITH AT LEAST  
24 ONE MEDICAL OFFICER TO ADVISE THE PUBLIC HEALTH DIRECTOR ON  
25 MEDICAL DECISIONS. THE PUBLIC HEALTH DIRECTOR SHALL MAINTAIN AN  
26 OFFICE LOCATION DESIGNATED BY THE COUNTY OR DISTRICT BOARD AND  
27 SHALL BE THE CUSTODIAN OF ALL PROPERTY AND RECORDS OF THE

1 AGENCY.

2 (II) A PERSON EMPLOYED OR UNDER CONTRACT TO ACT AS A  
3 MEDICAL OFFICER PURSUANT TO THIS PARAGRAPH (c) SHALL BE COVERED  
4 BY THE "COLORADO GOVERNMENTAL IMMUNITY ACT", ARTICLE 10 OF  
5 TITLE 24, C.R.S., FOR DUTIES PERFORMED FOR THE AGENCY.

6 (d) (I) IN THE EVENT OF A VACANCY IN THE POSITION OF PUBLIC  
7 HEALTH DIRECTOR OR MEDICAL OFFICER, TO EITHER EMPLOY OR  
8 CONTRACT WITH A PERSON DEEMED QUALIFIED TO FILL THE POSITION OR  
9 TO REQUEST TEMPORARY ASSISTANCE FROM A PUBLIC HEALTH DIRECTOR  
10 OR A MEDICAL OFFICER FROM ANOTHER COUNTY. THE COUNTY OR  
11 DISTRICT BOARD MAY ALSO REQUEST THAT AN EMPLOYEE OF THE STATE  
12 DEPARTMENT, SUCH AS A QUALIFIED EXECUTIVE DIRECTOR OR THE CHIEF  
13 MEDICAL OFFICER, SERVE ON AN INTERIM BASIS WITH ALL THE POWERS  
14 AND DUTIES OF THE POSITION.

15 (II) A PERSON FILLING A TEMPORARY VACANCY AS PUBLIC HEALTH  
16 DIRECTOR OR MEDICAL OFFICER SHALL BE COVERED BY THE "COLORADO  
17 GOVERNMENTAL IMMUNITY ACT", ARTICLE 10 OF TITLE 24, C.R.S., FOR  
18 DUTIES PERFORMED FOR THE AGENCY.

19 (e) TO PROVIDE, EQUIP, AND MAINTAIN SUITABLE OFFICES AND ALL  
20 NECESSARY FACILITIES FOR THE PROPER ADMINISTRATION AND PROVISION  
21 OF CORE PUBLIC HEALTH SERVICES, AS DEFINED BY THE STATE BOARD;

22 (f) TO DETERMINE GENERAL POLICIES TO BE FOLLOWED BY THE  
23 PUBLIC HEALTH DIRECTOR IN ADMINISTERING AND ENFORCING PUBLIC  
24 HEALTH LAWS, ORDERS, AND RULES OF THE COUNTY OR DISTRICT BOARD,  
25 AND ORDERS, RULES, AND STANDARDS OF THE STATE BOARD;

26 (g) TO ISSUE ORDERS AND TO ADOPT RULES NOT INCONSISTENT  
27 WITH THE PUBLIC HEALTH LAWS OF THIS STATE NOR WITH THE ORDERS OR

1 RULES OF THE STATE BOARD AS THE COUNTY OR DISTRICT BOARD MAY  
2 DEEM NECESSARY FOR THE PROPER EXERCISE OF THE POWERS AND DUTIES  
3 VESTED IN OR IMPOSED UPON AN AGENCY OR COUNTY OR DISTRICT BOARD  
4 BY THIS PART 5;

5 (h) TO ACT IN AN ADVISORY CAPACITY TO THE PUBLIC HEALTH  
6 DIRECTOR ON ALL MATTERS PERTAINING TO PUBLIC HEALTH;

7 (i) TO HOLD HEARINGS, ADMINISTER OATHS, SUBPOENA  
8 WITNESSES, AND TAKE TESTIMONY IN ALL MATTERS RELATING TO THE  
9 EXERCISE AND PERFORMANCE OF THE POWERS AND DUTIES VESTED IN OR  
10 IMPOSED UPON A COUNTY OR DISTRICT BOARD;

11 (j) TO PROVIDE ENVIRONMENTAL HEALTH SERVICES AND TO ASSESS  
12 FEES TO OFFSET THE ACTUAL, DIRECT COST OF SUCH SERVICES; EXCEPT  
13 THAT NO FEE FOR A SERVICE SHALL BE ASSESSED AGAINST ANY PERSON  
14 WHO HAS ALREADY PAID A FEE TO THE STATE OR FEDERAL GOVERNMENT  
15 FOR THE SERVICE, AND EXCEPT THAT THE ONLY FEE THAT SHALL BE  
16 CHARGED FOR ANNUAL RETAIL FOOD ESTABLISHMENT INSPECTIONS SHALL  
17 BE THE FEE SET FORTH IN SECTION 25-4-1607; AND

18 (k) TO ACCEPT AND, THROUGH THE PUBLIC HEALTH DIRECTOR, TO  
19 USE, DISBURSE, AND ADMINISTER ALL FEDERAL AID, STATE AID, OR OTHER  
20 PROPERTY, SERVICES, OR MONEYS ALLOTTED TO AN AGENCY FOR COUNTY  
21 OR DISTRICT PUBLIC HEALTH FUNCTIONS OR ALLOTTED WITHOUT  
22 DESIGNATION OF A SPECIFIC AGENCY FOR PURPOSES THAT ARE WITHIN THE  
23 FUNCTIONS OF AN AGENCY, AND TO PRESCRIBE, BY RULE CONSISTENT WITH  
24 THE LAWS OF THIS STATE, THE CONDITIONS UNDER WHICH THE PROPERTY,  
25 SERVICES, OR MONEYS SHALL BE ACCEPTED AND ADMINISTERED. THE  
26 COUNTY OR DISTRICT BOARD IS EMPOWERED TO MAKE AGREEMENTS THAT  
27 MAY BE REQUIRED TO RECEIVE SUCH MONEYS OR OTHER ASSISTANCE.

1 (6) (a) UNTIL THE TIME THAT A COUNTY OR DISTRICT BOARD IS  
2 ESTABLISHED PURSUANT TO THIS SECTION, A COUNTY, DISTRICT, OR  
3 REGIONAL BOARD OF HEALTH ESTABLISHED AS OF JULY 1, 2008, SHALL  
4 CONTINUE TO OPERATE AND SHALL HAVE THE POWERS AND DUTIES  
5 IMPOSED BY LAW AS IT EXISTED PRIOR TO JULY 1, 2008.

6 (b) THIS SUBSECTION (6) IS REPEALED, EFFECTIVE JULY 1, 2009.

7 **25-1-509. County and district public health directors.**

8 (1) (a) THE DIRECTOR OF EACH AGENCY SHALL BE THE PUBLIC HEALTH  
9 DIRECTOR.

10 (b) ALL OTHER PERSONNEL REQUIRED BY AN AGENCY SHALL BE  
11 SELECTED BY THE PUBLIC HEALTH DIRECTOR. ALL PERSONNEL SHALL  
12 PERFORM DUTIES AS PRESCRIBED BY THE PUBLIC HEALTH DIRECTOR.

13 (c) IN THE EVENT OF A PUBLIC HEALTH EMERGENCY, THE AGENCY  
14 SHALL ISSUE ORDERS AND ADOPT RULES CONSISTENT WITH THE LAWS AND  
15 RULES OF THE STATE AS THE PUBLIC HEALTH DIRECTOR MAY DEEM  
16 NECESSARY FOR THE PROPER EXERCISE OF THE POWERS AND DUTIES  
17 VESTED IN OR IMPOSED UPON THE AGENCY OR COUNTY OR DISTRICT  
18 BOARD.

19 (2) **[Formerly 25-1-508]** IN ADDITION TO THE OTHER POWERS  
20 AND DUTIES CONFERRED BY THIS PART 5 OR BY THE AGENCY, A PUBLIC  
21 HEALTH DIRECTOR HAS THE FOLLOWING POWERS AND DUTIES:

22 (a) TO ADMINISTER AND ENFORCE:

23 (I) THE PUBLIC HEALTH LAWS OF THE STATE AND, AS AUTHORIZED  
24 BY THE PROVISIONS OF THIS TITLE OR ARTICLE 20 OF TITLE 30, C.R.S., THE  
25 PUBLIC HEALTH ORDERS, RULES, AND STANDARDS OF THE STATE  
26 DEPARTMENT OR THE STATE BOARD; AND

27 (II) THE ORDERS AND RULES OF THE COUNTY OR DISTRICT BOARD.

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(b) TO EXERCISE ALL POWERS AND DUTIES CONFERRED AND IMPOSED UPON AGENCIES NOT EXPRESSLY DELEGATED BY THE PROVISIONS OF THIS PART 5 TO A COUNTY OR DISTRICT BOARD;

(c) TO HOLD HEARINGS, ADMINISTER OATHS, SUBPOENA WITNESSES, AND TAKE TESTIMONY IN ALL MATTERS RELATING TO THE EXERCISE AND PERFORMANCE OF HIS OR HER POWERS AND DUTIES;

(d) TO ACT AS THE LOCAL REGISTRAR OF VITAL STATISTICS OR TO CONTRACT OUT THE RESPONSIBILITY OF REGISTRAR IN THE AREA OVER WHICH THE AGENCY HAS JURISDICTION;

(e) TO DIRECT THE RESOURCES NEEDED TO CARRY OUT THE COUNTY OR DISTRICT PUBLIC HEALTH PLAN DEVELOPED PURSUANT TO SECTION 25-1-505; AND

(f) IF REQUESTED BY THE COUNTY OR DISTRICT BOARD, TO SERVE AS SECRETARY TO THE BOARD RESPONSIBLE FOR MAINTAINING ALL RECORDS REQUIRED BY PART 2 OF ARTICLE 72 OF TITLE 24, C.R.S., AND ENSURING PUBLIC NOTICE OF ALL MEETINGS IN ACCORDANCE WITH PART 4 OF ARTICLE 6 OF TITLE 24, C.R.S. THE DIRECTOR SHALL BE THE CUSTODIAN OF ALL PROPERTIES AND RECORDS FOR THE AGENCY.

**25-1-510. [Formerly 25-1-602] County or district board unable or unwilling to act.** (1) IF THE COUNTY OR DISTRICT BOARD IS UNABLE OR UNWILLING TO EFFICIENTLY OR PROMPTLY ABATE A NUISANCE OR PREVENT THE INTRODUCTION OR SPREAD OF A CONTAGIOUS OR INFECTIOUS DISEASE, THE COUNTY OR DISTRICT BOARD OR AGENCY SHALL NOTIFY THE STATE DEPARTMENT AND REQUEST ASSISTANCE TO TAKE MEASURES THAT WILL ABATE THE NUISANCE OR PREVENT THE INTRODUCTION OR SPREAD OF DISEASE.

1           (2) UPON RECEIPT OF THE NOTICE AND REQUEST DESCRIBED IN  
2           SUBSECTION (1) OF THIS SECTION, OR UPON DETERMINATION THAT THE  
3           COUNTY OR DISTRICT BOARD IS UNABLE OR UNWILLING TO ACT, THE STATE  
4           DEPARTMENT HAS FULL POWER TO TAKE MEASURES TO ENSURE THE  
5           ABATEMENT OF THE NUISANCE OR PREVENT THE INTRODUCTION OR  
6           SPREAD OF DISEASE. THE STATE DEPARTMENT, FOR THIS PURPOSE, MAY  
7           ASSUME ALL POWERS CONFERRED BY LAW ON THE COUNTY OR DISTRICT  
8           BOARD.

9           (3) THE STATE DEPARTMENT MAY REALLOCATE STATE MONEYS  
10          FROM AN AGENCY THAT IS NOT ABLE TO PROVIDE CORE PUBLIC HEALTH  
11          SERVICES OR STANDARDS TO ANOTHER ENTITY TO DELIVER SERVICES IN  
12          THAT AGENCY'S JURISDICTION.

13           **25-1-511. [Formerly 25-1-509] County treasurer - agency**  
14          **fun****ds.** (1) IN THE CASE OF A COUNTY PUBLIC HEALTH AGENCY, THE  
15          COUNTY TREASURER, AS A PART OF HIS OR HER OFFICIAL DUTIES AS  
16          COUNTY TREASURER, SHALL SERVE AS TREASURER OF THE AGENCY, AND  
17          THE TREASURER'S OFFICIAL BOND AS COUNTY TREASURER SHALL EXTEND  
18          TO AND COVER HIS OR HER DUTIES AS TREASURER OF THE AGENCY. IN THE  
19          CASE OF A DISTRICT PUBLIC HEALTH AGENCY, THE COUNTY TREASURER OF  
20          THE COUNTY IN THE DISTRICT HAVING THE LARGEST POPULATION AS  
21          DETERMINED BY THE MOST RECENT FEDERAL CENSUS, AS A PART OF HIS OR  
22          HER OFFICIAL DUTIES AS COUNTY TREASURER, SHALL SERVE AS  
23          TREASURER OF THE DISTRICT AGENCY, AND THE TREASURER'S OFFICIAL  
24          BOND AS COUNTY TREASURER SHALL EXTEND TO AND COVER HIS OR HER  
25          DUTIES AS TREASURER OF THE DISTRICT AGENCY.

26           (2) THE TREASURER OF AN AGENCY, UPON ORGANIZATION OF THE  
27          AGENCY, SHALL CREATE A COUNTY OR DISTRICT PUBLIC HEALTH AGENCY

1 FUND, TO WHICH SHALL BE CREDITED:

2 (a) ANY MONEYS APPROPRIATED FROM A COUNTY GENERAL FUND;

3 AND

4 (b) ANY MONEYS RECEIVED FROM STATE OR FEDERAL  
5 APPROPRIATIONS OR ANY OTHER GIFTS, GRANTS, DONATIONS, OR FEES FOR  
6 LOCAL PUBLIC HEALTH PURPOSES.

7 (3) ANY MONEYS CREDITED TO A FUND CREATED PURSUANT TO  
8 SUBSECTION (2) OF THIS SECTION SHALL BE EXPENDED ONLY FOR THE  
9 PURPOSES OF THIS PART 5, AND CLAIMS OR DEMANDS AGAINST THE FUND  
10 SHALL BE ALLOWED ONLY IF CERTIFIED BY THE PUBLIC HEALTH DIRECTOR  
11 AND THE PRESIDENT OF THE COUNTY OR DISTRICT BOARD OR ANY OTHER  
12 MEMBER OF THE COUNTY OR DISTRICT BOARD DESIGNATED BY THE  
13 PRESIDENT FOR SUCH PURPOSE.

14 (4) ON OR BEFORE SEPTEMBER 1, 2008, AND ON OR BEFORE  
15 SEPTEMBER 1 OF EACH YEAR THEREAFTER, A COUNTY BOARD OF HEALTH  
16 SHALL ESTIMATE THE TOTAL COST OF MAINTAINING THE COUNTY PUBLIC  
17 HEALTH AGENCY FOR THE ENSUING FISCAL YEAR, AND THE AMOUNT OF  
18 MONEYS THAT MAY BE AVAILABLE FROM UNEXPENDED SURPLUSES OR  
19 FROM STATE OR FEDERAL FUNDS OR OTHER GRANTS OR DONATIONS. ON  
20 OR BEFORE SEPTEMBER 1 OF EACH YEAR, THE ESTIMATES SHALL BE  
21 SUBMITTED IN THE FORM OF A BUDGET TO THE BOARD OF COUNTY  
22 COMMISSIONERS. THE BOARD OF COUNTY COMMISSIONERS IS AUTHORIZED  
23 TO PROVIDE ANY MONEYS NECESSARY, OVER ESTIMATED MONEYS FROM  
24 SURPLUSES, GRANTS, AND DONATIONS, TO COVER THE TOTAL COST OF  
25 MAINTAINING THE AGENCY FOR THE ENSUING FISCAL YEAR BY AN  
26 APPROPRIATION FROM THE COUNTY GENERAL FUND.

27 (5) ON OR BEFORE SEPTEMBER 1, 2008, AND ON OR BEFORE

1 SEPTEMBER 1 OF EACH YEAR THEREAFTER, A DISTRICT BOARD OF HEALTH  
2 SHALL ESTIMATE THE TOTAL COST OF MAINTAINING THE DISTRICT PUBLIC  
3 HEALTH AGENCY FOR THE ENSUING FISCAL YEAR, AND THE AMOUNT OF  
4 MONEYS THAT MAY BE AVAILABLE FROM UNEXPENDED SURPLUSES OR  
5 FROM STATE OR FEDERAL FUNDS OR OTHER GRANTS OR DONATIONS. ON  
6 OR BEFORE SEPTEMBER 1 OF EACH YEAR, THE ESTIMATES SHALL BE  
7 SUBMITTED IN THE FORM OF A BUDGET TO A COMMITTEE COMPOSED OF THE  
8 CHAIRS OF THE BOARDS OF COUNTY COMMISSIONERS OF ALL COUNTIES  
9 COMPRISING THE DISTRICT. THE COST FOR MAINTAINING THE AGENCY,  
10 OVER ESTIMATED MONEYS FROM SURPLUSES, GRANTS, OR DONATIONS,  
11 SHALL BE APPORTIONED BY THE COMMITTEE AMONG THE COUNTIES  
12 COMPRISING THE DISTRICT IN THE PROPORTION THAT THE POPULATION OF  
13 EACH COUNTY IN THE DISTRICT BEARS TO THE TOTAL POPULATION OF ALL  
14 COUNTIES IN THE DISTRICT, POPULATION FIGURES TO BE BASED ON THE  
15 MOST RECENT FEDERAL CENSUS. THE BOARDS OF COUNTY  
16 COMMISSIONERS OF THE RESPECTIVE COUNTIES ARE AUTHORIZED TO  
17 PROVIDE ANY MONEYS NECESSARY TO COVER THE PROPORTIONATE SHARES  
18 OF THEIR COUNTIES BY AN APPROPRIATION FROM THE COUNTY GENERAL  
19 FUND.

20 **25-1-512. [Formerly 25-1-516] Allocation of moneys - public**  
21 **health services \_\_\_\_\_ support fund - created.** (1) (a) THE STATE  
22 DEPARTMENT SHALL ALLOCATE ANY MONEYS THAT THE GENERAL  
23 ASSEMBLY MAY APPROPRIATE FOR DISTRIBUTION TO COUNTY OR DISTRICT  
24 PUBLIC HEALTH AGENCIES ORGANIZED PURSUANT TO THIS PART 5 FOR THE  
25 PROVISION OF LOCAL HEALTH SERVICES. THE STATE BOARD SHALL  
26 DETERMINE THE BASIS FOR THE ALLOCATION OF MONEYS TO THE  
27 AGENCIES. IN DETERMINING THE ALLOCATION OF MONEYS, THE STATE

1 BOARD SHALL TAKE INTO ACCOUNT THE POPULATION SERVED BY EACH  
2 AGENCY, THE ADDITIONAL COSTS INVOLVED IN OPERATING SMALL OR  
3 RURAL AGENCIES, AND THE SCOPE OF SERVICES PROVIDED BY EACH  
4 AGENCY.

5 (b) (I) IN ORDER TO QUALIFY FOR STATE ASSISTANCE, EACH  
6 COUNTY AND CITY AND COUNTY SHALL CONTRIBUTE A MINIMUM OF ONE  
7 DOLLAR AND FIFTY CENTS PER CAPITA FOR ITS LOCAL HEALTH SERVICES  
8 AND MAY CONTRIBUTE ADDITIONAL AMOUNTS AS IT MAY DETERMINE TO  
9 BE NECESSARY TO MEET ITS LOCAL HEALTH NEEDS.

10 (II) NOTWITHSTANDING THE PROVISIONS OF SUBPARAGRAPH (I) OF  
11 THIS PARAGRAPH (b), FOR A DISTRICT PUBLIC HEALTH AGENCY, THE  
12 COUNTIES OR CITIES AND COUNTIES OF THE DISTRICT IN TOTAL SHALL  
13 CONTRIBUTE A MINIMUM OF ONE DOLLAR AND FIFTY CENTS PER CAPITA  
14 FOR LOCAL HEALTH SERVICES WITHIN THE DISTRICT.

15 (c) FEDERALLY FUNDED AND STATE-FUNDED SPECIAL PROJECTS  
16 AND DEMONSTRATIONS SHALL BE IN ADDITION TO THE ALLOTMENTS  
17 SPECIFIED IN PARAGRAPH (b) OF THIS SUBSECTION (1).

18 (2) THE PUBLIC HEALTH SERVICES      SUPPORT FUND IS HEREBY  
19 CREATED IN THE STATE TREASURY AND SHALL BE KNOWN IN THIS SECTION  
20 AS THE "FUND". THE PRINCIPAL OF THE FUND SHALL CONSIST OF TOBACCO  
21 LITIGATION SETTLEMENT MONEYS TRANSFERRED BY THE STATE  
22 TREASURER TO THE FUND PURSUANT TO SECTION 24-75-1104.5 (1.5) (a)  
23 (IV), C.R.S., AND SHALL, SUBJECT TO ANNUAL APPROPRIATION BY THE  
24 GENERAL ASSEMBLY TO THE STATE DEPARTMENT, BE ALLOCATED BY THE  
25 STATE DEPARTMENT TO ALL AGENCIES AUTHORIZED PURSUANT TO THIS  
26 PART 5 AS SPECIFIED IN SUBSECTION (1) OF THIS SECTION; EXCEPT THAT,  
27 AT THE END OF THE 2007-08 FISCAL YEAR AND AT THE END OF EACH

1 FISCAL YEAR THEREAFTER, ALL UNEXPENDED AND UNENCUMBERED  
2 PRINCIPAL OF THE FUND SHALL BE TRANSFERRED TO THE SHORT-TERM  
3 INNOVATIVE HEALTH PROGRAM GRANT FUND CREATED IN SECTION  
4 25-36-101 (2) IN ACCORDANCE WITH SECTION 24-75-1104.5 (1.5) (b),  
5 C.R.S. INTEREST AND INCOME EARNED ON THE DEPOSIT AND INVESTMENT  
6 OF MONEYS IN THE PUBLIC HEALTH SERVICES PER CAPITA SUPPORT FUND  
7 SHALL BE CREDITED TO THE FUND AND SHALL REMAIN IN THE FUND UNTIL  
8 THE END OF THE FISCAL YEAR IN WHICH CREDITED, WHEN IT SHALL BE  
9 TRANSFERRED TO THE SHORT-TERM INNOVATIVE HEALTH PROGRAM GRANT  
10 FUND CREATED IN SECTION 25-36-101 (2) IN ACCORDANCE WITH SECTION  
11 24-75-1104.5 (1.5) (b), C.R.S.

12 **25-1-513. [Formerly 25-1-511] Enlargement of or withdrawal**  
13 **from a public health agency.** (1) ANY COUNTY CONTIGUOUS TO A  
14 DISTRICT MAINTAINING A DISTRICT PUBLIC HEALTH AGENCY MAY BECOME  
15 A PART OF THE DISTRICT BY AGREEMENT BETWEEN ITS BOARD OF COUNTY  
16 COMMISSIONERS AND THE BOARDS OF COUNTY COMMISSIONERS OF THE  
17 COUNTIES COMPRISING THE DISTRICT. THE COUNTY, UPON BEING  
18 ACCEPTED INTO THE DISTRICT, SHALL THEREUPON BECOME SUBJECT TO  
19 THE PROVISIONS OF THIS PART 5.

20 (2) ANY COUNTY IN A DISTRICT MAINTAINING A DISTRICT PUBLIC  
21 HEALTH AGENCY MAY WITHDRAW FROM THE DISTRICT BY RESOLUTION OF  
22 ITS BOARD OF COUNTY COMMISSIONERS. A COUNTY MAY NOT WITHDRAW  
23 FROM A DISTRICT WITHIN THE TWO-YEAR PERIOD FOLLOWING THE  
24 ESTABLISHMENT OF THE DISTRICT OR THE COUNTY BECOMING A PART OF  
25 THE DISTRICT. A COUNTY MAY ONLY WITHDRAW FROM A DISTRICT AFTER  
26 ONE YEAR'S WRITTEN NOTICE GIVEN TO THE AGENCY. IN THE EVENT OF  
27 WITHDRAWAL OF A COUNTY FROM A DISTRICT, ANY MONEYS THAT HAD

1 BEEN APPROPRIATED BY THE COUNTY BEFORE WITHDRAWAL TO COVER ITS  
2 PROPORTIONATE SHARE OF MAINTAINING THE DISTRICT MAY BE RETURNED  
3 TO THE COUNTY. A COUNTY SHALL ESTABLISH A COUNTY PUBLIC HEALTH  
4 AGENCY OR JOIN ANOTHER DISTRICT PUBLIC HEALTH AGENCY ONCE THE  
5 COUNTY WITHDRAWS FROM A DISTRICT.

6 (3) A MUNICIPAL CORPORATION THAT HAS VOLUNTARILY MERGED  
7 ITS PUBLIC HEALTH AGENCY WITH A COUNTY OR DISTRICT PUBLIC HEALTH  
8 AGENCY UNDER THE AUTHORITY OF SECTION 25-1-506 MAY WITHDRAW  
9 FROM THE COUNTY OR DISTRICT PUBLIC HEALTH AGENCY BY RESOLUTION  
10 OF ITS CITY COUNCIL, BOARD OF TRUSTEES, OR OTHER GOVERNING BODY.  
11 A MUNICIPAL CORPORATION MAY NOT WITHDRAW FROM AN AGENCY  
12 WITHIN THE TWO-YEAR PERIOD FOLLOWING THE MUNICIPAL CORPORATION  
13 BECOMING A PART OF THE AGENCY. A COUNTY MAY ONLY WITHDRAW  
14 FROM A DISTRICT NINETY DAYS AFTER A WRITTEN NOTICE IS GIVEN TO THE  
15 AGENCY.

16 **25-1-514. [Formerly 25-1-512] Legal actions and adviser.** THE  
17 COUNTY ATTORNEY FOR THE COUNTY OR THE DISTRICT ATTORNEY OF THE  
18 JUDICIAL DISTRICT IN WHICH A CAUSE OF ACTION ARISES SHALL BRING ANY  
19 CIVIL OR CRIMINAL ACTION REQUESTED BY A COUNTY OR DISTRICT PUBLIC  
20 HEALTH DIRECTOR TO ABATE A CONDITION THAT EXISTS IN VIOLATION OF,  
21 OR TO RESTRAIN OR ENJOIN ANY ACTION THAT IS IN VIOLATION OF, OR TO  
22 PROSECUTE FOR THE VIOLATION OF OR FOR THE ENFORCEMENT OF, THE  
23 PUBLIC HEALTH LAWS AND THE STANDARDS, ORDERS, AND RULES OF THE  
24 STATE BOARD OR A COUNTY OR DISTRICT BOARD OF HEALTH. IF THE  
25 COUNTY ATTORNEY OR THE DISTRICT ATTORNEY FAILS TO ACT, THE PUBLIC  
26 HEALTH DIRECTOR MAY BRING AN ACTION AND BE REPRESENTED BY  
27 SPECIAL COUNSEL EMPLOYED BY HIM OR HER WITH THE APPROVAL OF THE

1     COUNTY OR DISTRICT BOARD. AN AGENCY, THROUGH ITS COUNTY OR  
2     DISTRICT BOARD OF HEALTH OR THROUGH ITS PUBLIC HEALTH DIRECTOR  
3     WITH THE APPROVAL OF THE STATE BOARD, MAY EMPLOY OR RETAIN AND  
4     COMPENSATE AN ATTORNEY TO BE THE LEGAL ADVISER OF THE AGENCY  
5     AND TO DEFEND ALL ACTIONS AND PROCEEDINGS BROUGHT AGAINST THE  
6     AGENCY OR THE OFFICERS AND EMPLOYEES OF THE AGENCY.

7             **25-1-515. [Formerly 25-1-513] Judicial review of decisions.**

8     (1) ANY PERSON AGGRIEVED AND AFFECTED BY A DECISION OF A COUNTY  
9     OR DISTRICT BOARD OF HEALTH OR A PUBLIC HEALTH DIRECTOR ACTING  
10    UNDER THE PROVISIONS OF THIS PART 5 SHALL BE ENTITLED TO JUDICIAL  
11    REVIEW BY FILING, IN THE DISTRICT COURT OF ANY COUNTY OVER WHICH  
12    THE COUNTY OR DISTRICT BOARD OR PUBLIC HEALTH DIRECTOR HAS  
13    JURISDICTION, AN APPROPRIATE ACTION REQUESTING THE REVIEW WITHIN  
14    NINETY DAYS AFTER THE PUBLIC ANNOUNCEMENT OF THE DECISION. THE  
15    COURT MAY MAKE ANY INTERESTED PERSON A PARTY TO THE ACTION. THE  
16    REVIEW SHALL BE CONDUCTED BY THE COURT WITHOUT A JURY AND SHALL  
17    BE CONFINED TO THE RECORD, IF A COMPLETE RECORD IS PRESENTED. IN  
18    A CASE OF ALLEGED IRREGULARITIES IN THE RECORD OR IN THE  
19    PROCEDURE BEFORE THE COUNTY OR DISTRICT BOARD OR PUBLIC HEALTH  
20    DIRECTOR, TESTIMONY MAY BE TAKEN IN THE COURT. THE COURT MAY  
21    AFFIRM THE DECISION OR MAY REVERSE OR MODIFY IT IF THE SUBSTANTIAL  
22    RIGHTS OF THE APPELLANT HAVE BEEN PREJUDICED AS A RESULT OF THE  
23    FINDINGS AND DECISION OF THE COUNTY OR DISTRICT BOARD BEING:

- 24             (a) CONTRARY TO CONSTITUTIONAL RIGHTS OR PRIVILEGES;
- 25             (b) IN EXCESS OF THE STATUTORY AUTHORITY OR JURISDICTION OF
- 26     THE COUNTY OR DISTRICT BOARD OR PUBLIC HEALTH DIRECTOR;
- 27             (c) AFFECTED BY ANY ERROR OF LAW;

- 1 (d) MADE OR PROMULGATED UPON UNLAWFUL PROCEDURE;  
2 (e) UNSUPPORTED BY SUBSTANTIAL EVIDENCE IN VIEW OF THE  
3 ENTIRE RECORD AS SUBMITTED; OR  
4 (f) ARBITRARY OR CAPRICIOUS.  
5 (2) ANY PARTY MAY HAVE A REVIEW OF THE FINAL JUDGMENT OR  
6 DECISION OF THE DISTRICT COURT BY APPELLATE REVIEW IN ACCORDANCE  
7 WITH LAW AND THE COLORADO APPELLATE RULES.

8 **25-1-516. [Formerly 25-1-514] Unlawful acts and penalties.**

9 (1) IT IS UNLAWFUL FOR ANY PERSON, ASSOCIATION, OR CORPORATION  
10 AND THE OFFICERS THEREOF TO:

11 (a) WILLFULLY VIOLATE, DISOBEY, OR DISREGARD THE PROVISIONS  
12 OF THE PUBLIC HEALTH LAWS OR THE TERMS OF ANY LAWFUL NOTICE,  
13 ORDER, STANDARD, OR RULE;

14 (b) FAIL TO MAKE OR FILE A REPORT REQUIRED BY LAW OR RULE  
15 OF THE STATE BOARD RELATING TO THE EXISTENCE OF DISEASE OR OTHER  
16 FACTS AND STATISTICS RELATING TO THE PUBLIC HEALTH;

17 (c) WILLFULLY AND FALSELY MAKE OR ALTER A CERTIFICATE OR  
18 CERTIFIED COPY OF ANY CERTIFICATE ISSUED PURSUANT TO THE PUBLIC  
19 HEALTH LAWS;

20 (d) WILLFULLY FAIL TO REMOVE FROM PRIVATE PROPERTY UNDER  
21 HIS OR HER CONTROL AT HIS OR HER OWN EXPENSE, WITHIN FORTY-EIGHT  
22 HOURS AFTER BEING ORDERED TO DO SO BY THE COUNTY OR DISTRICT  
23 PUBLIC HEALTH AGENCY, ANY NUISANCE, SOURCE OF FILTH, OR CAUSE OF  
24 SICKNESS WITHIN THE JURISDICTION AND CONTROL OF THE AGENCY  
25 WHETHER THE PERSON, ASSOCIATION, OR CORPORATION IS THE OWNER,  
26 TENANT, OR OCCUPANT OF THE PRIVATE PROPERTY; EXCEPT THAT, WHEN  
27 THE CONDITION IS DUE TO AN ACT OF GOD, IT SHALL BE REMOVED AT

1 PUBLIC EXPENSE; OR

2 (e) PAY, GIVE, PRESENT, OR OTHERWISE CONVEY TO ANY OFFICER  
3 OR EMPLOYEE OF AN AGENCY ANY GIFT, REMUNERATION, OR OTHER  
4 CONSIDERATION, DIRECTLY OR INDIRECTLY, THAT THE OFFICER OR  
5 EMPLOYEE IS FORBIDDEN TO RECEIVE BY THE PROVISIONS OF THIS PART 5.

6 (2) IT IS UNLAWFUL FOR ANY OFFICER OR EMPLOYEE OF ANY  
7 AGENCY OR MEMBER OF ANY COUNTY OR DISTRICT BOARD OF HEALTH TO  
8 ACCEPT ANY GIFT, REMUNERATION, OR OTHER CONSIDERATION, DIRECTLY  
9 OR INDIRECTLY, FOR AN INCORRECT OR IMPROPER PERFORMANCE OF THE  
10 DUTIES IMPOSED UPON HIM OR HER BY OR ON BEHALF OF THE AGENCY OR  
11 BY THE PROVISIONS OF THIS PART 5.

12

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13 (3) ANY PERSON, ASSOCIATION, OR CORPORATION, OR THE  
14 OFFICERS THEREOF, WHO VIOLATES ANY PROVISION OF THIS SECTION IS  
15 GUILTY OF A CLASS 1 MISDEMEANOR AND, UPON CONVICTION THEREOF,  
16 SHALL BE PUNISHED PURSUANT TO THE PROVISIONS OF SECTION  
17 18-1.3-501, C.R.S. IN ADDITION TO THE FINE OR IMPRISONMENT, THE  
18 PERSON, ASSOCIATION, OR CORPORATION SHALL BE LIABLE FOR ANY  
19 EXPENSE INCURRED BY HEALTH AUTHORITIES IN REMOVING ANY  
20 NUISANCE, SOURCE OF FILTH, OR CAUSE OF SICKNESS. CONVICTION UNDER  
21 THE PENALTY PROVISIONS OF THIS PART 5 OR ANY OTHER PUBLIC HEALTH  
22 LAW SHALL NOT RELIEVE ANY PERSON FROM ANY CIVIL ACTION IN  
23 DAMAGES THAT MAY EXIST FOR AN INJURY RESULTING FROM ANY  
24 VIOLATION OF THE PUBLIC HEALTH LAWS.

25 **25-1-517. [Formerly 25-1-515] Mode of treatment inconsistent**  
26 **with religious creed or tenet.** NOTHING IN THIS PART 5 AUTHORIZES A  
27 COUNTY OR DISTRICT BOARD OF HEALTH TO IMPOSE ON ANY PERSON ANY

1 MODE OF TREATMENT INCONSISTENT WITH THE CREED OR TENETS OF ANY  
2 RELIGIOUS DENOMINATION OF WHICH HE OR SHE IS AN ADHERENT IF THE  
3 PERSON COMPLIES WITH SANITARY AND QUARANTINE LAWS AND RULES.

4 **25-1-518. Nuisances. (1) Removal of nuisances. [Formerly**  
5 **25-1-613]** THE COUNTY OR DISTRICT BOARD OF HEALTH SHALL EXAMINE  
6 ALL NUISANCES, SOURCES OF FILTH, AND CAUSES OF SICKNESS, WHICH, IN  
7 ITS OPINION, MAY BE INJURIOUS TO THE HEALTH OF THE INHABITANTS,  
8 WITHIN ITS TOWN, CITY, COUNTY, COUNTY OR DISTRICT AND IT SHALL  
9 DESTROY, REMOVE, OR PREVENT THE NUISANCE, SOURCE OF FILTH, OR  
10 CAUSE OF SICKNESS, AS THE CASE MAY REQUIRE.

11 **(2) Unhealthy premises cleaned - unsafe structures**  
12 **removed. [Formerly 25-1-615]** IF ANY CELLAR, VAULT, LOT, SEWER,  
13 DRAIN, PLACE, OR PREMISES WITHIN ANY CITY IS DAMP, UNWHOLESOME,  
14 OFFENSIVE, OR FILTHY, OR IS COVERED FOR ANY PORTION OF THE YEAR  
15 WITH STAGNANT OR IMPURE WATER, OR IS IN A CONDITION AS TO PRODUCE  
16 UNWHOLESOME OR OFFENSIVE EXHALATIONS, THE COUNTY OR DISTRICT  
17 BOARD OF HEALTH MAY CAUSE THE AREA TO BE DRAINED, FILLED UP,  
18 CLEANED, AMENDED, OR PURIFIED; OR MAY REQUIRE THE OWNER OR  
19 OCCUPANT OR PERSON IN CHARGE OF THE LOT, PREMISES, OR PLACE TO  
20 PERFORM SUCH DUTY; OR MAY REQUIRE THE OWNER OR OCCUPANT OF ANY  
21 BUILDING, FENCE, OR STRUCTURE WHICH IS RUINOUS OR LIABLE TO FALL  
22 AND INJURE PERSONS OR PROPERTY TO REMOVE THE BUILDING, FENCE, OR  
23 STRUCTURE; OR MAY CAUSE THE REMOVAL TO BE DONE BY THE PROPER  
24 OFFICERS OF THE CITY.

25 **(3) Expense for abating nuisance. [Formerly 25-1-616]** IF ANY  
26 PERSON OR COMPANY NEGLECTS TO REMOVE OR ABATE ANY NUISANCE OR  
27 TO PERFORM ANY REQUIREMENT MADE BY OR IN ACCORDANCE WITH ANY

1 ORDINANCE OR RESOLUTION OF THE COUNTY OR DISTRICT BOARD OF  
2 HEALTH FOR THE PROTECTION OF THE HEALTH OF THE INHABITANTS AND  
3 IF ANY EXPENSE IS INCURRED BY THE BOARD IN REMOVING OR ABATING  
4 THE NUISANCE OR IN CAUSING SUCH DUTY OR REQUIREMENT TO BE  
5 PERFORMED, SUCH EXPENSE MAY BE RECOVERED BY THE BOARD IN AN  
6 ACTION AGAINST SUCH PERSON OR COMPANY. IN ALL CASES WHERE THE  
7 BOARD INCURS ANY EXPENSE FOR DRAINING, FILLING, CLEANING, OR  
8 PURIFYING ANY LOT, PLACE, OR PREMISES, OR FOR REMOVING ANY UNSAFE  
9 BUILDING OR STRUCTURE, OR FOR REMOVING OR ABATING ANY NUISANCE  
10 FOUND UPON SUCH LOT OR PREMISES, THE BOARD, IN ADDITION TO ALL  
11 OTHER REMEDIES, MAY PROVIDE FOR THE RECOVERY OF SUCH EXPENSE,  
12 CHARGE THE SAME OR SUCH PART THEREOF AS IT DEEMS PROPER TO THE  
13 LOT OR PREMISES UPON OR ON ACCOUNT OF WHICH SUCH EXPENSE WAS  
14 INCURRED OR FROM WHICH SUCH NUISANCE WAS REMOVED OR ABATED,  
15 AND CAUSE THE SAME TO BE ASSESSED UPON SUCH LOT OR PREMISES AND  
16 COLLECTED AS A SPECIAL ASSESSMENT.

17 (4) **Removal of nuisance on private property -**  
18 **penalty. [Formerly 25-1-617]** WHENEVER ANY NUISANCE, SOURCE OF  
19 FILTH, OR CAUSE OF SICKNESS IS FOUND ON PRIVATE PROPERTY, THE  
20 COUNTY OR DISTRICT BOARD OF HEALTH SHALL ORDER THE OWNER OR  
21 OCCUPANT OR THE PERSON WHO HAS CAUSED OR PERMITTED SUCH  
22 NUISANCE, AT HIS OR HER OWN EXPENSE, TO REMOVE THE SAME WITHIN  
23 TWENTY-FOUR HOURS. IN DEFAULT THEREOF, HE OR SHE SHALL FORFEIT  
24 A SUM NOT TO EXCEED ONE HUNDRED DOLLARS AT THE SUIT OF THE BOARD  
25 OF COUNTY COMMISSIONERS OF THE PROPER COUNTY OR THE BOARD OF  
26 THE PROPER CITY, TOWN, OR VILLAGE FOR THE USE OF THE COUNTY OR  
27 DISTRICT BOARD OF HEALTH OF THE CITY OR TOWN WHERE THE NUISANCE

1 IS FOUND.

2 (5) Board to remove - when. [Formerly 25-1-618] IF THE  
3 OWNER OR OCCUPANT DOES NOT COMPLY WITH AN ORDER OF THE COUNTY  
4 OR DISTRICT BOARD OF HEALTH, THE BOARD MAY CAUSE THE NUISANCE,  
5 SOURCE OF FILTH, OR CAUSE OF SICKNESS TO BE REMOVED, AND ALL  
6 EXPENSE INCURRED THEREBY SHALL BE PAID BY THE OWNER OR OCCUPANT  
7 OR BY SUCH OTHER PERSON WHO HAS CAUSED OR PERMITTED THE  
8 NUISANCE, SOURCE OF FILTH, OR CAUSE OF SICKNESS.

9 (6) Conviction - nuisance to be abated. [Formerly 25-1-619]  
10 WHENEVER ANY PERSON IS CONVICTED OF MAINTAINING A NUISANCE THAT  
11 MAY BE INJURIOUS TO THE PUBLIC HEALTH AND SAFETY, THE COURT, IN ITS  
12 DISCRETION, MAY ORDER THE NUISANCE ABATED, REMOVED, OR  
13 DESTROYED AT THE EXPENSE OF THE DEFENDANT UNDER THE DIRECTION  
14 OF THE COUNTY OR DISTRICT BOARD OF HEALTH OF THE TOWN, CITY,  
15 COUNTY, OR DISTRICT WHERE THE NUISANCE IS FOUND, AND THE FORM OF  
16 THE WARRANT TO THE SHERIFF OR OTHER OFFICER MAY BE VARIED  
17 ACCORDINGLY.

18 (7) Stay warrant of conviction. [Formerly 25-1-620] THE  
19 COURT, ON THE APPLICATION OF THE DEFENDANT, MAY ORDER A STAY OF  
20 A WARRANT ISSUED PURSUANT TO SUBSECTION (6) OF THIS SECTION FOR  
21 SUCH TIME AS MAY BE NECESSARY, NOT EXCEEDING SIX MONTHS, TO GIVE  
22 THE DEFENDANT AN OPPORTUNITY TO REMOVE THE NUISANCE UPON  
23 GIVING SATISFACTORY SECURITY TO DO SO WITHIN THE TIME SPECIFIED IN  
24 THE ORDER.

25 (8) Expense of abating. [Formerly 25-1-621] THE EXPENSE OF  
26 ABATING AND REMOVING THE NUISANCE PURSUANT TO A WARRANT ISSUED  
27 PURSUANT TO SUBSECTION (6) OF THIS SECTION SHALL BE COLLECTED BY

1 THE OFFICER IN THE SAME MANNER AS DAMAGES AND COSTS ARE  
2 COLLECTED UPON EXECUTION; EXCEPT THAT THE MATERIALS OF ANY  
3 BUILDINGS, FENCES, OR OTHER THINGS THAT MAY BE REMOVED AS A  
4 NUISANCE MAY BE SOLD BY THE OFFICER IN LIKE MANNER AS GOODS ARE  
5 SOLD ON EXECUTION FOR THE PAYMENT OF DEBTS. THE OFFICER MAY  
6 APPLY THE PROCEEDS OF THE SALE TO DEFRAY THE EXPENSES OF THE  
7 REMOVAL AND SHALL PAY OVER THE BALANCE THEREOF, IF ANY, TO THE  
8 DEFENDANT UPON DEMAND. IF THE PROCEEDS OF THE SALE ARE NOT  
9 SUFFICIENT TO DEFRAY THE EXPENSES INCURRED PURSUANT TO THIS  
10 SUBSECTION (8), THE SHERIFF SHALL COLLECT THE RESIDUE THEREOF AS  
11 PROVIDED IN SUBSECTION (3) OF THIS SECTION.

12 (9) Refusal of admittance to premises. [Formerly  
13 25-1-622] (a) WHENEVER A COUNTY OR DISTRICT BOARD OF HEALTH  
14 FINDS IT NECESSARY FOR THE PRESERVATION OF THE LIVES OR HEALTH OF  
15 THE INHABITANTS TO ENTER ANY BUILDING, CAR, OR TRAIN OF CARS IN ITS  
16 TOWN, CITY, COUNTY, OR DISTRICT FOR THE PURPOSE OF EXAMINING AND  
17 ABATING, REMOVING, OR PREVENTING ANY NUISANCE, SOURCE OF FILTH,  
18 CAUSE OF SICKNESS, OR DANGER TO LIFE OR LIMB AND IS REFUSED ENTRY,  
19 ANY MEMBER OF THE BOARD MAY MAKE COMPLAINT UNDER OATH TO THE  
20 COUNTY COURT OF HIS OR HER COUNTY, STATING THE FACTS OF THE CASE  
21 AS FAR AS HE OR SHE HAS KNOWLEDGE THEREOF.

22 (b) THE COURT MAY THEREUPON ISSUE A WARRANT DIRECTED TO  
23 THE SHERIFF COMMANDING HIM OR HER TO TAKE SUFFICIENT AID AND,  
24 BEING ACCOMPANIED BY ANY TWO OR MORE MEMBERS OF THE COUNTY OR  
25 DISTRICT BOARD OF HEALTH, DURING DAYLIGHT HOURS, TO RETURN TO  
26 THE PLACE WHERE THE NUISANCE, SOURCE OF FILTH, CAUSE OF SICKNESS,  
27 OR DANGER TO LIFE OR LIMB COMPLAINED OF MAY BE AND DESTROY,

1 REMOVE, OR PREVENT THE NUISANCE, SOURCE OF FILTH, CAUSE OF  
2 SICKNESS, OR DANGER TO LIFE OR LIMB UNDER THE DIRECTION OF THE  
3 MEMBERS OF THE BOARD OF HEALTH.

4 (10) Damages occasioned by nuisance - action. [Formerly  
5 25-1-653] ANY PERSON INJURED EITHER IN HIS OR HER COMFORT OR IN  
6 THE ENJOYMENT OF HIS OR HER ESTATE BY ANY NUISANCE MAY HAVE AN  
7 ACTION FOR DAMAGES SUSTAINED THEREBY.

8  
9 25-1-522. Existing intergovernmental agreements. NOTHING  
10 IN THIS PART 5 SHALL VOID THE TERMS OF ANY INTERGOVERNMENTAL  
11 AGREEMENT CONCERNING PUBLIC HEALTH ENTERED INTO AS OF JULY 1,  
12 2008, SO LONG AS ALL CORE AND ESSENTIAL PUBLIC HEALTH SERVICES  
13 CONTINUE TO BE PROVIDED.

14 **SECTION 2.** 24-10-103 (4) (b) (I), Colorado Revised Statutes,  
15 is amended to read:

16 **24-10-103. Definitions.** As used in this article, unless the context  
17 otherwise requires:

18 (4) (b) "Public employee" includes any of the following:

19 (I) Any health care practitioner employed by a public entity,  
20 except for any health care practitioner who is employed on less than a  
21 full-time basis by a public entity and who additionally has an independent  
22 or other health care practice. Any such person employed on less than a  
23 full-time basis by a county OR A DISTRICT PUBLIC HEALTH AGENCY and  
24 who additionally has an independent or other health care practice shall  
25 maintain the status of a public employee only when such person engages  
26 in activities at or for the county ~~which~~ OR THE DISTRICT PUBLIC HEALTH  
27 AGENCY THAT are within the course and scope of such person's

1 responsibilities as an employee of the county OR THE DISTRICT PUBLIC  
2 HEALTH AGENCY. For purposes of this subparagraph (I), work performed  
3 as an employee of another public entity or of an entity of the United  
4 States government shall not be considered to be an independent or other  
5 health care practice.

6 **SECTION 3. Repeal.** Parts 6 and 7 of article 1 of title 25,  
7 Colorado Revised Statutes, are repealed.

8 **SECTION 4.** 8-20.5-101 (5), Colorado Revised Statutes, is  
9 amended to read:

10 **8-20.5-101. Definitions.** As used in this article, unless the context  
11 otherwise requires:

12 (5) "Designee" means a qualified municipality, city, home rule  
13 city, city and county, county, fire protection district, or any other political  
14 subdivision of the state, including a county OR district or regional PUBLIC  
15 health department AGENCY created pursuant to section 25-1-501 or part  
16 7 of article 1 of title 25 25-1-506, C.R.S., which county OR district or  
17 regional PUBLIC health department AGENCY is acting under agreement or  
18 contract with the department for the implementation of the provisions of  
19 this article.

20 **SECTION 5.** 24-22-117 (1) (c) (I) (B), Colorado Revised  
21 Statutes, is amended to read:

22 **24-22-117. Tobacco tax cash fund - accounts - creation.** (1)  
23 (c) For the 2004-05 fiscal year and each fiscal year thereafter, the general  
24 assembly shall annually appropriate three percent of the moneys estimated  
25 to be deposited in that fiscal year into the cash fund, plus three percent of  
26 the interest earned on the moneys in the cash fund, for health-related  
27 purposes to provide revenue for the state's general fund and old age

1 pension fund and for municipal and county governments to compensate  
2 proportionately for tax revenue reductions attributable to lower cigarette  
3 and tobacco sales resulting from the implementation of the tax imposed  
4 pursuant to section 21 of article X of the state constitution, as follows:

5 (I) (B) Beginning in fiscal year 2006-07 and for each fiscal year  
6 thereafter, of the moneys specified in sub-subparagraph (A) of this  
7 subparagraph (I), fifty percent shall be appropriated for the purposes of  
8 providing immunizations performed BY COUNTY OR DISTRICT PUBLIC  
9 HEALTH AGENCIES IN AREAS THAT WERE SERVED by county public health  
10 nursing services PRIOR TO JULY 1, 2008, and fifty percent shall be  
11 appropriated to the pediatric specialty hospital fund, created in paragraph  
12 (e) of subsection (2) of this section, for the purposes of augmenting  
13 hospital reimbursement rates for regional pediatric trauma centers as  
14 defined in section 25-3.5-703 (4) (f), C.R.S., under the "Colorado  
15 Medical Assistance Act", articles 4, 5, and 6 of title 25.5, C.R.S.

16 **SECTION 6.** 24-75-1104.5 (1.5) (a) (IV), Colorado Revised  
17 Statutes, is amended to read:

18 **24-75-1104.5. Use of settlement moneys - programs.**  
19 (1.5) (a) For the 2007-08 fiscal year and for each fiscal year thereafter,  
20 the following programs, services, and funds shall receive the following  
21 specified amounts from the portion of any strategic contribution fund  
22 moneys received by the state in the current fiscal year that remains after  
23 the programs, services, and funds receiving strategic contribution fund  
24 moneys pursuant to subsection (1) of this section have been fully funded,  
25 and the portion of all other settlement moneys received by the state in the  
26 preceding fiscal year that remains after the programs, services, and funds  
27 receiving such other settlement moneys pursuant to subsection (1) of this

1 section have been fully funded and all overexpenditures and supplemental  
2 appropriations allowed for the 2006-07 and 2007-08 fiscal years pursuant  
3 to section 24-22-115 (4) have been made:

4 (IV) The public health services per capita support fund created in  
5 section ~~25-1-516(2)~~ 25-1-512 (2), C.R.S., shall receive seven percent of  
6 the settlement moneys, which the state treasurer shall transfer thereto and  
7 which, subject to annual appropriation by the general assembly to the  
8 department of public health and environment, shall be used to provide  
9 additional per capita state support for basic and optional public health  
10 services, as defined by the state board of health, in accordance with  
11 section ~~25-1-516~~ 25-1-512, C.R.S.

12 **SECTION 7.** 25-4-601 (1), (2), and (3), Colorado Revised  
13 Statutes, are amended to read:

14 **25-4-601. Definitions.** As used in this part 6, unless the context  
15 otherwise requires:

16 (1) "County board of health" means the body acting as the  
17 COUNTY OR DISTRICT board of health of a county under the provisions of  
18 section ~~25-1-608~~ 25-1-508.

19 (2) "Health department" means the department of public health  
20 and environment or any county or district PUBLIC health department  
21 AGENCY organized and maintained under the provisions of part 5 of  
22 article 1 of this title.

23 (3) "Health officer" means the person appointed as the PUBLIC  
24 health officer DIRECTOR of a DISTRICT, county, city, or town under the  
25 provisions of section ~~25-1-610~~ 25-1-509.

26 **SECTION 8.** 25-4-1608 (2), Colorado Revised Statutes, is  
27 amended to read:

1           **25-4-1608. Food protection cash fund - creation.**  
2           (2) Twenty-five dollars of each fee collected by the department and local  
3           board of health pursuant to section 25-4-1607 (1) (a), and twenty dollars  
4           of each fee collected by the department and local board of health pursuant  
5           to section 25-4-1607 (1) (b) and (1) (c) shall be transmitted to the state  
6           treasurer, who shall credit such fee to the food protection cash fund  
7           created in subsection (1) of this section. This portion of the fee shall be  
8           used by the department to conduct the duties and responsibilities set forth  
9           in section 25-4-1604 (1) (a), (1) (b), (1) (c), (1) (f), (1) (g), and (1) (i).  
10          The remainder of such fee shall be retained by the local board of health  
11          for deposit in the appropriate local board of health cash fund in  
12          accordance with sections 25-1-509 and 25-1-713 SECTION 25-1-511, or if  
13          the fee is collected by the department it shall be deposited pursuant to  
14          section 25-4-1608 (1), and used to pay a portion of the cost of conducting  
15          a retail food establishment protection program.

16           **SECTION 9.** 25-4-2101, Colorado Revised Statutes, is amended  
17          to read:

18           **25-4-2101. Powers and duties of department - rules.** In  
19          addition to any other powers and duties, the department of public health  
20          and environment shall promulgate rules governing the safe and sanitary  
21          practice of body art, the safe and sanitary physical environment where  
22          body art is performed, and the safe and sanitary conditions of equipment  
23          utilized in body art procedures. Nothing in this section shall be construed  
24          to prohibit a city, county, local OR DISTRICT board of health established  
25          pursuant to ~~part 6~~ PART 5 of article 1 of this title, or a county or district  
26          PUBLIC health department AGENCY established pursuant to part 5 of article  
27          1 of this title from adopting or enforcing ordinances, resolutions, or rules

1 that impose standards for body art that are at least as stringent as the  
2 standards imposed by the rules adopted by the department of public health  
3 and environment.

4 **SECTION 10.** 25-4-2502 (5), Colorado Revised Statutes, is  
5 amended to read:

6 **25-4-2502. Definitions.** As used in this part 25, unless the  
7 context otherwise requires:

8 (5) "Local public health agency" means a county or district  
9 department of PUBLIC health AGENCY established pursuant to section  
10 25-1-501 or an agency providing public health nursing services as  
11 described in section 25-1-610.5 25-1-506.

12 **SECTION 11.** 30-15-401 (1) (a) (V) (B) and (8), Colorado  
13 Revised Statutes, are amended to read:

14 **30-15-401. General regulations.** (1) In addition to those powers  
15 granted by sections 30-11-101 and 30-11-107 and by parts 1, 2, and 3 of  
16 this article, the board of county commissioners has the power to adopt  
17 ordinances for control or licensing of those matters of purely local  
18 concern which are described in the following enumerated powers:

19 (a) (V) To do all acts and make all regulations which may be  
20 necessary or expedient for the promotion of health or the suppression of  
21 disease, limited to the following:

22 (B) In addition to the authority given counties under section  
23 25-1-612, C.R.S., to restrain, fine, and punish persons for dumping dead  
24 animals on public or another person's private property;

25 (8) No ordinance, resolution, rule, regulation, service, function,  
26 or exercise of an authorized power pursuant to this section or section  
27 30-11-101 (1) (f) or (1) (g) or 30-11-107 (1) (u), (1) (w), (1) (y), (1) (z),

1 or (1) (bb) or 25-1-507 (1) (g) or (1) (h) or 25-1-711 (1) (d) or (1) (e)  
2 25-1-508 (5) (g) or (5) (j), C.R.S., shall apply within the corporate limits  
3 of any incorporated municipality, nor to any municipal service, function,  
4 facility, or property whether owned by or leased to the incorporated  
5 municipality, outside the municipal boundaries, unless the municipality  
6 consents. If the municipality consents that any ordinance, resolution, rule,  
7 regulation, service, function, or exercise of an authorized power shall  
8 apply within the municipality or to municipal services, functions,  
9 facilities, or property outside the municipal boundaries, such ordinance,  
10 resolution, rule, regulation, service, function, or exercise of an authorized  
11 power shall be uniform within the municipality and the applicable  
12 unincorporated areas of the county, unless the county and the municipality  
13 agree otherwise pursuant to part 2 of article 1 of title 29, C.R.S.

14 **SECTION 12.** 30-20-203 (1) (h), Colorado Revised Statutes, is  
15 amended to read:

16 **30-20-203. Powers.** (1) The board of county commissioners,  
17 following the creation of such district and acting on behalf thereof:

18 (h) May promulgate and adopt on behalf of the district such  
19 schedules, rules, or regulations as may be necessary for the orderly  
20 collection of trash, wastes, or garbage from the district, and for the  
21 maintenance and operation of dumps, sanitary fills, or other satisfactory  
22 disposal methods and collection areas, which, when so adopted, may be  
23 administered and enforced by the county or district PUBLIC health  
24 department AGENCY, as the case may be, as provided in other cases by  
25 sections 25-1-506 and 25-1-512 25-1-514, C.R.S.:

26 **SECTION 13.** 38-1-202 (1) (d) and (1) (e), Colorado Revised  
27 Statutes, are amended to read:

1           **38-1-202. Governmental entities, corporations, and persons**  
2 **authorized to use eminent domain.** (1) The following governmental  
3 entities, types of governmental entities, and public corporations, in  
4 accordance with all procedural and other requirements specified in this  
5 article and articles 2 to 7 of this title and to the extent and within any time  
6 frame specified in the applicable authorizing statute may exercise the  
7 power of eminent domain:

8           (d) Counties, cities and counties, and boards of county  
9 commissioners as authorized in sections 24-72-104 (2), ~~25-1-659,~~  
10 25-3-306, 29-6-101, 30-11-104 (2), 30-11-107 (1) (w), 30-11-205,  
11 30-11-307 (1)(c), 30-20-108 (3), 30-20-402 (1) (a), 30-35-201 (37), (41),  
12 (42), and (43), 31-25-216 (2), 41-4-102, 41-4-104, 41-4-108, 41-5-101 (1)  
13 (a), 43-1-217 (1), 43-2-112 (2), 43-2-204, 43-2-206, and 43-3-107,  
14 C.R.S.:

15           (e) Cities, cities and counties, and towns as authorized in sections  
16 25-1-659, 29-4-104 (1) (d), 29-4-105, 29-4-106, 29-6-101, 29-7-104,  
17 30-20-108 (3), 31-15-706 (2), 31-15-707 (1) (a) and (1) (e), 31-15-708 (1)  
18 (b), 31-15-716 (1) (c), 31-25-201 (1), 31-25-216 (2), 31-25-402 (1) (c),  
19 31-35-304, 31-35-402 (1) (a), 31-35-512 (1) (g), 38-5-105, 38-6-101,  
20 38-6-122, 41-4-108, and 41-4-202, C.R.S.:

21           **SECTION 14. Appropriation - adjustments to the 2008 long**  
22 **bill.** (1) In addition to any other appropriation, there is hereby  
23 appropriated, out of any moneys in the general fund not otherwise  
24 appropriated, to the department of public health and environment, for  
25 allocation to the local health services division, for the fiscal year  
26 beginning July 1, 2008, the sum of thirty thousand dollars (\$30,000) and  
27 0.5 FTE, or so much thereof as may be necessary, for the implementation

1 of this act.

2 (2) In addition to any other appropriation, there is hereby  
3 appropriated, out of any moneys in the comprehensive public health plan  
4 cash fund created in section 25-1-504 (4), Colorado Revised Statutes, not  
5 otherwise appropriated, to the department of public health and  
6 environment, for allocation to the local health services division, for the  
7 fiscal year beginning July 1, 2008, the sum of one hundred forty-nine  
8 thousand seven hundred sixty-one dollars (\$149,761) and 2.5 FTE, or so  
9 much thereof as may be necessary, for the implementation of this act.

10 (3) For the implementation of this act, the general fund  
11 appropriation to the controlled maintenance trust fund made in section 23  
12 of the annual general appropriation act, for the fiscal year beginning July  
13 1, 2008, shall be decreased by thirty thousand dollars (\$30,000).

14 **SECTION 15. Effective date.** This act shall take effect July 1,  
15 2008.

16 **SECTION 16. Safety clause.** The general assembly hereby finds,  
17 determines, and declares that this act is necessary for the immediate  
18 preservation of the public peace, health, and safety.