# **SENATE BILL NO. 734**

February 28, 2024, Introduced by Senator LINDSEY and referred to the Committee on Oversight.

A bill to amend 1978 PA 368, entitled "Public health code,"

by amending sections 2251, 2253, 2433, 2435, 2441, 2451, 2453, 2481, 12613, 13104, 13105a, 13108, 13516, 13736, 13737, 13738, and 20919 (MCL 333.2251, 333.2253, 333.2433, 333.2435, 333.2441, 333.2451, 333.2453, 333.2481, 333.12613, 333.13104, 333.13105a, 333.13108, 333.13516, 333.13736, 333.13737, 333.13738, and 333.20919), section 2251 as amended by 2012 PA 180, sections 2253 and 2453 as amended by 2022 PA 274, section 2441 as amended by 2010

PA 72, section 12613 as amended by 2009 PA 188, sections 13104 and 13108 as amended and section 13105a as added by 2010 PA 375, sections 13736, 13737, and 13738 as added by 1987 PA 203, and section 20919 as amended by 2019 PA 37; and to repeal acts and parts of acts.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

Sec. 2251. (1) Upon a determination that an imminent danger to the health or lives of individuals exists in this state, the director immediately shall inform the individuals affected by the imminent danger and issue an order a recommendation that shall must be delivered to a person authorized to avoid, correct, or remove the imminent danger or be posted at or near the imminent danger. The order shall recommendation must incorporate the director's findings. and require immediate action necessary to avoid, correct, or remove the imminent danger. The order recommendation may specify action suggest actions to be taken or prohibit the presence of individuals in locations or under conditions where the imminent danger exists, except individuals whose presence is necessary to avoid, correct, or remove the imminent danger.

(2) Upon failure of a person to comply promptly with a department order issued under this section, the department may petition the circuit court having jurisdiction to restrain a condition or practice which the director determines causes the imminent danger or to require action to avoid, correct, or remove the imminent danger.

(3) If the director determines that conditions anywhere in this state constitute a menace to the public health, the director may take full charge of the administration of applicable state and local health laws, rules, regulations, and ordinances in addressing

#### that menace.

- (2) (4)—If the director determines that an imminent danger to the health or lives of individuals in this state can be prevented or controlled by the promulgation of an emergency rule under section 48(2) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.248, to schedule or reschedule a substance as a controlled substance as provided in part 72, the director shall notify the director of the department of licensing and regulatory affairs and the administrator of his or her the determination in writing. The notification shall must include a description of the substance to be scheduled or rescheduled and the grounds for his or her the determination. The director may provide copies of police, hospital, and laboratory reports and other information to the director of the department of licensing and regulatory affairs and the administrator as considered appropriate by the director.
  - (3) (5) As used in this section:
- 17 (a) "Administrator" means that term as defined in section
  18 7103.
  - (b) "Imminent danger" means a condition or practice exists that could reasonably be expected to cause death, disease, or serious physical harm immediately or before the imminence of the danger can be eliminated through enforcement procedures otherwise provided.
  - (c) "Person" means a person as defined in section 1106 or a governmental entity.
- Sec. 2253. (1) Subject to subsections (4) and (5), if If the director determines that control of an epidemic is necessary to protect the public health, the director by emergency order may make a declaration of that determination and may within that emergency

order prohibit the gathering of people for any purpose and establish suggest procedures to be followed during the epidemic to ensure continuation of essential public health services. and enforcement of health laws. Emergency procedures are not limited to this code.

- (2) If an epidemic described in subsection (1) involves avian influenza or another virus or disease that is or may be spread by contact with animals, the department of agriculture and rural development shall cooperate with and assist the director in the director's response to the epidemic.
- (3) On request from the director, the department of agriculture and rural development shall assist the department in any review or update of the department's pandemic influenza plan under section 5112.
- (4) Beginning June 1, 2023, an emergency order issued under subsection (1) may prohibit or otherwise limit any visitation of a patient or resident in a qualified health care facility for a period not to exceed 30 days after the date the director first declares that control of the epidemic is necessary to protect the public health.
- (5) Beginning June 1, 2023, because LINDA, after 30 days after the director first declares that control of an epidemic is necessary to protect the public health in an emergency order issued under subsection (1), all of the following apply:
- (a) Subject to subdivision (b), the emergency order must not prohibit or otherwise limit a patient representative from visiting a patient or resident with a cognitive impairment in a qualified health care facility.
- 29 (b) The emergency order may do any of the following:

(i) Implement reasonable safety measures before or during a patient representative's visit to a patient or resident with a cognitive impairment in the qualified health care facility, including, but not limited to, prescreening or testing a patient representative, imposing a visit duration on a patient representative, restricting the number of patient representatives who may visit at 1 time, and requiring a patient representative to preschedule a visit.

(ii) Establish procedures for the visitation of a patient or resident with a cognitive impairment in a qualified health care facility, if the director determines that establishing the procedures is vital to maintaining a safe health care infrastructure in this state. The director shall consult with qualified health care facilities before establishing procedures under this subparagraph.

### (6) As used in this section:

(a) "Assisted living facility" means an unlicensed entity that offers community-based residential care for at least 3 unrelated adults who are 65 years of age or older or who need assistance with activities of daily living that are available 24 hours a day, including, but not limited to, personal, supportive, or intermittent health-related services.

(b) "Cognitive impairment" means a deficiency in the patient's or resident's mental capability or loss of intellectual ability, either of which affects the patient's or resident's comprehension, decision-making, reasoning, adaptive functioning, judgment, learning, or memory and that materially affects the patient's or resident's ability to function. A cognitive impairment may be a temporary short-term change in cognition, a medically induced

change in cognition, or a long-term ongoing change in cognition. 1 (c) "Family member" means an individual related to a patient 2 or resident by blood, marriage, or adoption who is within the fifth 3 degree of kinship to the patient or resident. 4 (d) "LINDA" means loved individuals need dedicated attention. 5 6 (e) "Patient representative" means any of the following: (i) A family member. 7 8 (ii) A patient advocate as that term is defined in section 1106 of the estates and protected individuals code, 1998 PA 386, MCL 9 700.1106. 10 11 (iii) An individual who is named as the attorney-in-fact under a 12 durable or nondurable power of attorney for the patient or 13 resident. (f) "Qualified health care facility" means any of the 14 15 following: 16 (i) A health facility or agency as that term is defined in 17 section 20106. 18 (ii) An assisted living facility. 19 (iii) A physician's private practice office. 20 Sec. 2433. (1) A local health department shall continually and 21 diligently endeavor to prevent disease, prolong life, and promote the public health through organized programs, including prevention 22 23 and control of environmental health hazards; prevention and control 24 of diseases; prevention and control of health problems of 25 particularly vulnerable population groups; development of health care facilities and health services delivery systems; and 26 27 regulation of health care facilities and health services delivery systems to the extent provided by law. 28

EMR 03441'23

(2) A local health department shall:

29

<del>(a)</del>	Implement	and enf	orce laws	for which	responsibility	<del>is</del>
vested in	n the local	. health	<del>departme</del> r	<del>it.</del>		

- (a) (b) Utilize vital and health statistics and provide for epidemiological and other research studies for the purpose of protecting the public health.
  - (b) (c) Make investigations and inquiries as to:
  - (i) The causes of disease and especially of epidemics.
- (ii) The causes of morbidity and mortality.

3 4

5

6

7

8

11

12

13

14 15

16

17

18

19

2021

- 9 (iii) The causes, prevention, and control of environmental10 health hazards, nuisances, and sources of illness.
  - (c) (d)—Plan, implement, and evaluate health education through the provision of expert technical assistance, or financial support, or both.
  - (d) (e) Provide or demonstrate the provision of required services as set forth in section 2473(2).
  - (f) Have powers necessary or appropriate to perform the duties and exercise the powers given by law to the local health officer and which are not otherwise prohibited by law.
  - (e) (g) Plan, implement, and evaluate nutrition services by provision of expert technical assistance or financial support, or both.
- 22 (3) This section does not limit the powers or duties of a local health officer otherwise vested by law.
- Sec. 2435. A local health department may:
- (a) Engage in research programs and staff professionaltraining programs.
- (b) Advise other local agencies and persons as to the
  location, drainage, water supply, disposal of solid waste, heating,
  and ventilation of buildings.

 (c) Enter into an agreement, contract, or arrangement with a governmental entity or other person necessary or appropriate to assist the local health department in carrying out its duties and functions unless otherwise prohibited by law.

- (d) Adopt regulations to properly safeguard the public health and to prevent the spread of diseases and sources of contamination.
- (d) (e) Accept gifts, grants, bequests, and other donations for use in performing the local health department's functions. Funds or property accepted shall be used as directed by its donor and in accordance with the law, rules, and procedures of this state and the local governing entity.
- (e)  $\frac{\text{(f)}}{\text{Sell}}$  and convey real estate owned by the local health department.
  - (f) (g) Provide services not inconsistent with this code.
- 15 (g) (h)—Participate in the cost reimbursement program set 16 forth in sections 2471 to 2498.
  - (h)  $\overline{\text{(i)}}$  Perform a delegated function unless otherwise prohibited by law.

Sec. 2441. A local health department may adopt regulations necessary or appropriate to implement or carry out the duties or functions vested by law in the local health department. The local governing entity of a local health department shall approve or disapprove the regulations. shall be approved or disapproved by the local governing entity. The regulations shall become effective 45 days after approval by the local health department's governing entity or at a time specified by the local health department's governing entity. The regulations shall must be at least as stringent as the standard established by state law applicable to the same or similar subject matter. Regulations of a local health

 department supersede inconsistent or conflicting local ordinances.

Sec. 2451. (1) Upon a determination that an imminent danger to the health or lives of individuals exists in the area served by the local health department, the local health officer immediately shall inform the individuals affected by the imminent danger and issue an order which shall a recommendation that must be delivered to a person authorized to avoid, correct, or remove the imminent danger or be posted at or near the imminent danger. The order shall recommendation must incorporate the findings of the local health department. and require immediate action necessary to avoid, correct, or remove the imminent danger. The order recommendation may specify action suggest actions to be taken or prohibit the presence of individuals in locations or under conditions where the imminent danger exists, except individuals whose presence is necessary to avoid, correct, or remove the imminent danger.

- (2) Upon the failure of a person to comply promptly with an order issued under this section, the local health department may petition a circuit or district court having jurisdiction to restrain a condition or practice which the local health officer determines causes the imminent danger or to require action to avoid, correct, or remove the imminent danger.
  - (2) (3) As used in this section:
- (a) "Imminent danger" means a condition or practice which could reasonably be expected to cause death, disease, or serious physical harm immediately or before the imminence of the danger can be eliminated through enforcement—procedures otherwise provided.
- (b) "Person" means a person as defined in section 1106 or a governmental entity.

 Sec. 2453. (1) Subject to subsections (3) and (4), if If a local health officer determines that control of an epidemic is necessary to protect the public health, the local health officer by emergency order may make a declaration of that determination and may within that emergency order prohibit the gathering of people for any purpose and establish suggest procedures to be followed by persons, including a local governmental entity, during the epidemic to ensure continuation of essential public health services. and enforcement of health laws. Emergency procedures are not limited to this code.

- (2) A local health department or the department may provide for the involuntary detention and treatment of individuals with hazardous communicable disease in the manner prescribed in sections 5201 to 5210.
- (3) Beginning June 1, 2023, an emergency order issued under subsection (1) may prohibit or otherwise limit any visitation of a patient or resident in a qualified health care facility for a period not to exceed 30 days after the date the local health officer first declares that control of the epidemic is necessary to protect the public health.
- (4) Beginning June 1, 2023, because LINDA, after 30 days after the local health officer first declares that control of an epidemic is necessary to protect the public health in an emergency order issued under subsection (1), all of the following apply:
- (a) Subject to subdivision (b), the emergency order must not prohibit or otherwise limit a patient representative from visiting a patient or resident with a cognitive impairment in a qualified health care facility.
- (b) The emergency order may do any of the following:

(i) Implement reasonable safety measures before or during a patient representative's visit to a patient or resident with a cognitive impairment in the qualified health care facility, including, but not limited to, prescreening or testing a patient representative, imposing a visit duration on a patient representative, restricting the number of patient representatives who may visit at 1 time, and requiring a patient representative to preschedule a visit.

(ii) Establish procedures for the visitation of a patient or resident with a cognitive impairment in a qualified health care facility if the local health officer determines that establishing the procedures is vital to maintaining a safe health care environment. The local health officer shall consult with qualified health care facilities before establishing procedures under this subparagraph.

# (5) As used in this section:

(a) "Assisted living facility" means an unlicensed entity that offers community-based residential care for at least 3 unrelated adults who are 65 years of age or older or who need assistance with activities of daily living that are available 24 hours a day, including, but not limited to, personal, supportive, or intermittent health-related services.

(b) "Cognitive impairment" means a deficiency in the patient's or resident's mental capability or loss of intellectual ability, either of which affects the patient's or resident's comprehension, decision-making, reasoning, adaptive functioning, judgment, learning, or memory and that materially affects the patient's or resident's ability to function. A cognitive impairment may be a temporary short-term change in cognition, a medically induced

change in cognition, or a long-term ongoing change in cognition. 1 (c) "Family member" means an individual related to a patient 2 or resident by blood, marriage, or adoption who is within the fifth 3 degree of kinship to the patient or resident. 4 (d) "LINDA" means loved individuals need dedicated attention. 5 6 (e) "Patient representative" means any of the following: (i) A family member. 7 8 (ii) A patient advocate as that term is defined in section 1106 9 of the estates and protected individuals code, 1998 PA 386, MCL 700.1106. 10 11 (iii) An individual who is named as the attorney-in-fact under a 12 durable or nondurable power of attorney for the patient or 13 resident. (f) "Qualified health care facility" means any of the 14 15 following: 16 (i) A health facility or agency as that term is defined in 17 section 20106. 18 (ii) An assisted living facility. 19 (iii) A physician's private practice office. 20 Sec. 2481. As a condition for the approval of funding for a 21 service under sections 2471 to 2498, a local health department 22 shall: 23 (a) Provide the required health services which the local health department is designated to provide in substantial accord 24 25 with the program plan developed under part 23 and rules promulgated under section 2495, including standards as to the scope and quality 26

EMR 03441'23

(b) Report its performance and fiscal matters in a form and

containing information the department reasonably requires to

27

28

29

of services.

implement sections 2471 to 2498.

- (c) Keep records and afford access to the records by authorized state, federal, and local officials for audit and review purposes necessary to verify and assure ensure the accuracy and acceptability of the reports.
- (d) Certify by a written report to the legislature that the local health department has not violated any constitutionally protected right within the fiscal year immediately preceding the approval of funding.
- Sec. 12613. (1) Subject to subsection (2), the department shall enforce this part and part 129 and any rules promulgated under this part. pursuant to sections 2262(2) and 2263. In addition to the civil fine authorized under section 12611, the department may enforce this part and any rules promulgated under this part through an action commenced pursuant to section 2255 or any other appropriate action authorized by law.
- (2) Pursuant to section 2235, the department may authorize a local health department to enforce this part and part 129 and any rules promulgated under this part. A local health department authorized to enforce this part and part 129 and any rules promulgated under this part shall enforce this part and part 129 and any rules promulgated under this part. pursuant to sections 2461(2) and 2462. In addition to the civil fine authorized under section 12611, a local health department may enforce this part and part 129 and any rules promulgated under this part through an action commenced pursuant to section 2465 or any other appropriate action authorized by law.
- (3) In addition to any other enforcement action authorized by law, a person alleging a violation of this part may bring a civil

 action for appropriate injunctive relief, if the person has used the public place, child caring institution, or child care center within 60 days before the civil action is filed.

(4) The remedies under this part are independent and cumulative. The use of 1 remedy by a person shall does not bar the use of other lawful remedies by that person or the use of a lawful remedy by another person.

Sec. 13104. (1) An individual shall not tattoo, brand, or perform body piercing on another individual unless the tattooing, branding, or body piercing occurs at a body art facility licensed under this part. Any tattooing, branding, or body piercing occurring in this state other than at a facility licensed under this part is considered an imminent danger under section 2251 or 2451 and the department or a local health department shall order the immediate cessation of that activity in the manner prescribed in this act.

- (2) The owner or operator of a body art facility shall apply to the department for a body art facility license under this part on a form provided by the department and at the time of application shall pay to the department the appropriate fee prescribed under subsection (4). The department shall issue a license on an annual basis to a body art facility that meets the requirements of this part or for a time period not to exceed 14 consecutive days to a temporary body art facility that meets the requirements of this part.
- (3) If the department determines that the application is complete and the body art facility proposed or operated by the applicant meets the requirements of this part and any rules promulgated under this part, the department shall issue the

appropriate license to the applicant for the operation of that body art facility. Except for a temporary license issued under this part, the license is effective for up to 1 year and expires at 12 midnight on December 31. A temporary license issued under this part is effective for not more than 14 consecutive days and expires at 12 midnight on the date prescribed on the temporary license.

7

8

9 10

23

2425

2627

- (4) Except as otherwise provided in this part, the applicant shall pay 1 of the following fees at the time of application for a body art facility license:
  - (a) For an annual license..... \$ 500.00.
- 11 (b) For a temporary license to operate a body art
  12 facility at a fixed location for not more than
  13 14 consecutive days.....\$ 150.00.
- 14 (5) An applicant for a new annual license that is filed on or
  15 after July 1 shall only pay 50% of the fee prescribed in subsection
  16 (4)(a). A licensee that fails to submit an application for a
  17 license renewal on or before December 1, in addition to the license
  18 fee under subsection (4)(a), shall pay an additional \$250.00 late
  19 fee.
- 20 (6) The department shall issue a duplicate license upon
  21 request of a licensee and the payment of a duplicate license fee of
  22 \$50.00.
  - (7) Unless a different distribution is provided for in a cost reimbursement program under sections 2471 to 2498, the department shall distribute a portion of a fee collected under this section from an applicant or licensee to a local health department authorized to enforce this part under section 13108 as follows:
- (a) From the annual license fee under subsection (4) (a) or (5)and, if applicable, from the late fee under subsection (5), 50%.

1 (b) From the temporary license fee under subsection (4)(b), 75%.

- (c) From the duplicate license fee under subsection (6), 50%.
  - (8) The department shall adjust the fees prescribed in this section annually by an amount determined by the state treasurer to reflect the cumulative annual percentage change in the Detroit-Ann Arbor-Flint consumer price index, Consumer Price Index, but not by an amount that exceeds 5%. As used in this subsection, "Detroit-Ann Arbor-Flint consumer price index" Consumer Price Index" means the most comprehensive index of consumer prices available for the Detroit, Ann Arbor, and Flint areas from the bureau of labor statistics—Bureau of Labor Statistics of the United States

department of labor. Department of Labor.

- Sec. 13105a. (1) An applicant or licensee shall give the local health department access to the body art facility and all of its books and records during all hours of operation and during other reasonable hours to allow the local health department to determine if the body art facility is in compliance with this part. An inspection of a body art facility under this part may be announced or unannounced. An applicant or licensee shall not do any of the following:
- (a) Refuse to permit the local health department to enter or inspect a body art facility.
- (b) Refuse to produce the body art facility's books and records for inspection.
- 26 (c) Any other activity that impedes the local health
  27 department's ability to carry out its duties prescribed in this
  28 part.
- 29 (2) As part of an inspection under this part, the local health

department may examine, take photographs, or make copies of the books and records of the body art facility.

- (3) Upon completion of an inspection under this part, the local health department shall reduce its findings to writing on a form prescribed by the department. The inspection report shall must include a summary of all findings of the inspection with regard to items of compliance with this part. If any critical violations are found, the inspection report shall must include a compliance schedule for the body art facility to follow, which schedule is consistent with the department's standards established under this part for body art facilities.
- (4) An authorized representative of the local health department who participated in the conduct of the inspection shall sign and date the inspection report and obtain the signature of the licensee on the report. A copy of the signed and dated inspection report shall must be delivered to the licensee.
- (5) If the local health department determines that the continued operation of a body art facility is an imminent danger under section 2451, the local health department shall order the immediate cessation of the operation of that facility in the manner prescribed in this act. A body art facility ordered to cease operations under this subsection shall immediately cease operations and shall not resume operations until the local health department has conducted an inspection, has determined that the operation of the body art facility is no longer an imminent danger, and has issued an order allowing the body art facility to resume operations.
- (5) (6)—At any time it determines appropriate, a local health department may place limitations on the license of a body art

facility, which limitations include the imposition of restrictions or conditions, or both, on the operations of that body art facility. A body art facility shall comply with all license limitations imposed under this subsection until the local health department has conducted an inspection, has determined that the license limitations are no longer necessary, and has issued an order allowing the body art facility to resume operations without the license limitations.

- may authorize a local health department to enforce this part and any rules promulgated under this part. A—If a local health department is authorized to enforce this part and any rules promulgated under this part, the local health department shall enforce this part and any rules promulgated under this part, the local health department shall enforce this part and any rules promulgated under this part.

  pursuant to sections 2461(2) and 2462. In addition to the penalties and remedies under this part, a local health department may enforce this part and any rules promulgated under this part through an action commenced pursuant to section 2465 or any other appropriate action authorized by law.
- (2) If a local health department of a county or city under part 24 is unable or unwilling to perform the functions required in this section and the county or city is not part of a district that has created a district health department pursuant to section 2415, the county or city, through an intergovernmental agreement, may contract with another local governing entity to have that entity's local health department perform the functions required in this section. The contracting parties under this subsection shall obtain the department's approval before execution of the intergovernmental agreement.

- (3) Pursuant to section 2444, a local governing entity of a local health department authorized to enforce this part under this section may fix and require the payment of fees by applicants and licensees for services required to be performed by the local health department under this part.
- (4) A local health department shall use as guidance in enforcing this part any safety standards or other requirements issued by the department applicable to body art facilities.
- (5) In addition to any other enforcement action authorized by law, a person alleging a violation of this part may bring a civil action in a court of competent jurisdiction for appropriate injunctive relief.
- Sec. 13516. (1) When Subject to subsection (2), if the department finds that an emergency exists requiring immediate action to protect occupational or public health and safety, the department shall issue an order, with or without notice or hearing, reciting the existence of the emergency and providing for the protection of public health and safety. Notwithstanding this act or the administrative procedures act of 1969, the order shall be is effective immediately. A person to whom the order is directed shall comply therewith with the order immediately but, on request to the department, the department shall be granted grant the person a hearing within 15 days. On the basis of the hearing, the emergency order shall must be continued, modified, or revoked within 30 days after the hearing.
- (2) The department shall issue an emergency order under this section only if it is necessary to enforce this part or a rule promulgated under this part.
- Sec. 13736. (1) A person who holds a license or permit issued

- under this part may be subject to sanctions as provided in subsection (2) for negligence or a failure to exercise due care, including negligent supervision, regarding the license or permit holder's contractors, employees, agents, or subordinates.
- (2) The department may suspend, revoke, annul, withdraw, recall, or cancel a license or permit issued under this part in accordance with the administrative procedures act of 1969, Act No. 306 of the Public Acts of 1969, being sections 24.201 to 24.328 of the Michigan Compiled Laws, if any of the following exists:
- (a) Fraud or deceit in obtaining a permit or license or in registering under this part.
- (b) A violation of this part, an order issued or a rule promulgated under this part, or the conditions of a registration, permit, or license under this part.
- (c) Negligence or failure to exercise due care, including negligent supervision, regarding contractors, employees, agents, or subordinates.
- (3) In addition to or in lieu of any action authorized in subsection (2), if the department finds any of the circumstances listed in subsection (2)(a) to (c), the department may issue an order directing the person to do either of the following:
  - (a) Discontinue handling or otherwise possessing waste.
- (b) Comply with specific requirements of a permit or license issued under this part.
  - (4) The department may establish procedures, hold hearings, administer oaths, issue subpoenas, and order testimony to be taken at a hearing or by deposition in a proceeding under this part. A person may be compelled to appear and testify and to produce books, papers, or documents in a proceeding. In case of disobedience of a

- subpoena, a party to a hearing may invoke the aid of the circuit court of the county in which the hearing is held to require the attendance and testimony of witnesses. The circuit court may issue an order requiring an individual to appear and give testimony.
- (5) An application for a license or permit under this part may be denied on a finding of any condition or practice that would constitute a violation of this part or any rules promulgated under this part if the applicant were a holder of the permit or a license that the applicant seeks or if there is fraud or deceit in attempting to obtain a permit or license under this part.
- representatives may enter the disposal site or other location where waste is located or reasonably believed to be located at any time for the purpose of monitoring, surveillance, and inspection, and may enter at all reasonable times upon any public or private property, building, premises, place, or vehicle for the purpose of determining compliance with this part, or a permit, registration, or license condition, rule, or an order issued pursuant to this part. In the conduct of an investigation, the director or his or her the director's authorized representatives may collect samples, conduct tests and inspections, and examine any book, record, paper, document, or other physical evidence related to the generation, management, processing, collecting, transport, storage, or disposal of waste.
- (7) The department shall conduct unannounced spot checks of the premises of generators and processors who hold permits issued under this part to assure the proper packaging of waste. The unannounced spot checks provided for in this subsection shall only occur to the extent that the department has access to the premises

of the generator and processor under federal law.

- (8) The department shall advise the authority of regulatory actions taken under this part and shall evaluate and respond within 30 days to information received from the authority in which the authority recommends that regulatory action should be undertaken by the department.
- (9) An agent or employee of the department may apply for an administrative inspection warrant pursuant to sections 2241 to 2247, or for a search warrant for purposes of collecting samples, testing, inspecting, or examining any radioactive material or any public or private property, building, premises, place, vehicle, book, record, paper, sample results, or other physical evidence related to the generation, processing, collecting, management, transport, storage, disposal, or possession of waste. It shall be is sufficient probable cause to show any of the following:
- (a) The sample collection, test, inspection, or examination is pursuant to a general administrative action to determine compliance with this part.
  - (b) An agent or employee of the department has reason to believe that a violation of this part has occurred or may occur.
- (c) An agent or employee of the department has been refused access to the waste, property, building, premise, place, vehicle, book, record, document, paper, sample results, or other physical evidence related to the generation, management, processing, collecting, transport, or disposal of waste, or has been prevented from collecting samples or conducting tests, surveillance, inspections, monitoring, or examinations.
- Sec. 13737. (1) Notwithstanding the existence and pursuit of any other remedy, the director, without posting a bond, may request

2

3

**4** 5

6

7

8

9 10

11

12

13 14

15

16

17

18

1920

21

22

23

2425

2627

28 29 the attorney general to bring an action in the name of the people of this state to restrain, enjoin, prevent, or correct a violation of this part, rules promulgated under this part, or a permit or license or order issued under this part.

(2) The department may promulgate rules to adopt a schedule of monetary civil fines in accordance with sections 2262 and 2263 to enforce this part.

Sec. 13738. (1) If the director finds that a person is in violation of this part, a rule promulgated under this part, or a permit or license issued under this part, the director may issue an order requiring the person to comply with this part, rule, permit, or license. An order issued pursuant to this section may require remedial actions considered necessary by the department to correct violations. An order issued by the director pursuant to this section may be an emergency order as authorized by section 2251 upon a finding and determination that an imminent danger to the health or lives of individuals exists as a result of conditions associated with the generation, processing, collecting, management, transporting, handling, disposal, or possession of waste. The attorney general may commence a civil action against a person for appropriate relief, including injunctive relief for a violation of this part or a rule promulgated under this part. An action under this subsection may be brought in the circuit court for the county of Ingham or for the county in which the defendant is located, resides, or is doing business. In addition to any other relief granted under this subsection, the court may impose a civil fine of not more than \$25,000.00 for each instance of violation and, if the violation is continuous, for each day of continued noncompliance. A fine collected under this subsection shall must be forwarded to the

state treasurer for deposit in the general fund.

- (2) A person who possesses, generates, processes, collects, transports, or disposes of waste in violation of this part, or contrary to a license, permit, order, or rule issued or promulgated under this part, or who makes a false statement, representation, or certification in an application for, or form pertaining to, a permit or license, is guilty of a misdemeanor, punishable by a fine of not more than \$25,000.00 for each instance of violation and, if the violation is continuous, for each day of violation, or imprisonment for not more than 1 year, or both. If the conviction is for a violation committed after a first conviction of the person under this subsection, the person is guilty of a misdemeanor, punishable by a fine of not more than \$50,000.00 for each instance of violation and, if the violation is continuous, for each day of violation, or by imprisonment for not more than 5 years, or both.
- (3) Any person who knowingly possesses, generates, processes, collects, transports, or disposes of waste in violation of subsection (2) and who knows at that time that he or she the person thereby places another person in imminent danger of death or serious bodily injury, and if his or her the person's conduct in the circumstances manifests an unjustified and inexcusable disregard for human life, or if his or her the person's conduct in the circumstances manifests an extreme indifference for human life, is guilty of a misdemeanor, punishable by a fine of not more than \$250,000.00 or imprisonment for not more than 2 years, or both, except that any person whose actions constitute an extreme indifference for human life is guilty of a felony punishable by a fine of not less than \$250,000.00 and not more than \$500,000.00 and imprisonment for not less than 5 years and not more than 20 years.

- A defendant that is not an individual and not a governmental entity shall be is subject, upon conviction, to a fine of not more than \$1,000,000.00.
  - (4) For the purposes of subsection (3), a person's state of mind is knowing with respect to:
  - (a) His or her The person's conduct, if  $\frac{1}{1}$  he or she the person is aware of the nature of  $\frac{1}{1}$  his or her the person's conduct.
  - (b) An existing circumstance, if he or she the person is aware or believes that the circumstance exists.
  - (c) A result of his or her the person's conduct, if he or she the person is aware or believes that his or her the person's conduct is substantially certain to cause danger of death or serious bodily injury.
  - (5) For purposes of subsection (3), in determining whether a defendant who is an individual knew that his or her the person's conduct placed another person in imminent danger of death or serious bodily injury, both of the following apply:
  - (a) The person is responsible only for actual awareness or actual belief that he or she the person possessed.
  - (b) Knowledge possessed by a person other than the defendant but not by the defendant himself or herself personally may not be attributed to the defendant. However, in proving the defendant's possession of actual knowledge, circumstantial evidence may be used, including evidence that the defendant took affirmative steps to shield himself or herself the defendant from relevant information.
- (6) It is an affirmative defense to a prosecution under this part that the conduct charged was consented to by the person endangered and that the danger and conduct charged were reasonably

- 1 foreseeable hazards of either of the following:
- (a) An occupation, business, profession, or through the
  undertaking of an inspection of the disposal site as a
  representative of the local monitoring committee of the host site
  community.
  - (b) Medical treatment or professionally approved methods and such other person had been made aware of the risks involved prior to giving consent.
- 9 (7) The defendant may establish an affirmative defense under 10 subsection (6) by a preponderance of the evidence.
  - (8) For purposes of subsection (3), "serious bodily injury" means each of the following:
    - (a) Bodily injury which involves a substantial risk of death.
- 14 (b) Unconsciousness.

7

8

11

12

13

- 15 (c) Extreme physical pain.
- 16 (d) Protracted and obvious disfigurement.
- (e) Protracted loss or impairment of the function of a bodilymember, organ, or mental faculty.
- 19 (9) In addition to a fine, the attorney general may bring an action in a court of competent jurisdiction to recover the full value of the damage done to the natural resources of this state and the costs of surveillance and enforcement by the state resulting from the violation. The damages and cost collected under this subsection shall be forwarded to the state treasurer for deposit in the general fund.
- 26 (10) The court, in issuing a final order in an action brought 27 under this part, may award costs of litigation, including 28 reasonable attorney and expert witness fees to a party, including 29 the state, if the court determines that the award is appropriate.

- (11) A person who has an interest which is or may be affected by a civil or administrative action commenced under this part shall have a right to intervene in that action.
- Sec. 20919. (1) A medical control authority shall establish written protocols for the practice of life support agencies and licensed emergency medical services personnel within its region.
- 7 The medical control authority shall develop and adopt the protocols
- 8 required under this section in accordance with procedures
- 9 established by the department and shall include all of the
- 10 following:

3

14

15

16

17

18

1920

21

22

23

24

25

2627

28 29

- (a) The acts, tasks, or functions that may be performed by
  each type of emergency medical services personnel licensed under
  this part.
  - (b) Medical protocols to ensure the appropriate dispatching of a life support agency based upon medical need and the capability of the emergency medical services system.
    - (c) Protocols for complying with the Michigan do-not-resuscitate procedure act, 1996 PA 193, MCL 333.1051 to 333.1067.
    - (d) Protocols defining the process, actions, and sanctions a medical control authority may use in holding a life support agency or emergency medical services personnel accountable.
    - (e) Protocols to ensure that if the medical control authority determines that an immediate threat to the public health, safety, or welfare exists, appropriate action to remove medical control can immediately be taken until the medical control authority has had the opportunity to review the matter at a medical control authority hearing. The protocols must require that the hearing is held within 3 business days after the medical control authority's determination.

- (f) Protocols to ensure that if medical control has been removed from a participant in an emergency medical services system, the participant does not provide prehospital care until medical control is reinstated and that the medical control authority that removed the medical control notifies the department of the removal within 1 business day.
- (g) Protocols to ensure that a quality improvement program is in place within a medical control authority and provides data protection as provided in 1967 PA 270, MCL 331.531 to 331.534.
- (h) Protocols to ensure that an appropriate appeals process is in place.
- (i) Protocols to ensure that each life support agency that provides basic life support, limited advanced life support, or advanced life support is equipped with epinephrine or epinephrine auto-injectors and that each emergency medical services personnel authorized to provide those services is properly trained to recognize an anaphylactic reaction, to administer the epinephrine, and to dispose of the epinephrine auto-injector or vial.
- (j) Protocols to ensure that each life support vehicle that is dispatched and responding to provide medical first response life support, basic life support, or limited advanced life support is equipped with an automated external defibrillator and that each emergency medical services personnel is properly trained to utilize the automated external defibrillator.
- (k) Protocols to ensure that each life support vehicle that is dispatched and responding to provide medical first response life support, basic life support, or limited advanced life support is equipped with opioid antagonists and that each emergency medical services personnel is properly trained to administer opioid

- antagonists. However, a medical control authority, at its
  discretion, may rescind or continue the protocol adopted under this subdivision.
  - (l) Protocols for complying with part 56B.

- (2) A medical control authority shall not establish a protocol under this section that conflicts with the Michigan do-not-resuscitate procedure act, 1996 PA 193, MCL 333.1051 to 333.1067, or part 56B.
  - (3) The department shall establish procedures for the development and adoption of written protocols under this section. The procedures must include at least all of the following requirements:
  - (a) At least 60 days before the adoption of a protocol, the medical control authority shall circulate a written draft of the proposed protocol to all significantly affected persons within the emergency medical services system served by the medical control authority and submit the written draft to the department for approval.
  - (b) The department shall review a proposed protocol for consistency with other protocols concerning similar subject matter that have already been established in this state and shall consider any written comments received from interested persons in its review.
  - (c) Within 60 days after receiving a written draft of a proposed protocol from a medical control authority, the department shall provide a written recommendation to the medical control authority with any comments or suggested changes on the proposed protocol. If the department does not respond within 60 days after receiving the written draft, the proposed protocol is considered to

be approved by the department.

1

2

3 4

5

6

7

8

9 10

11

12

13 14

15

16

17

18 19

20

21

22

23

2425

2627

28 29 (d) After department approval of a proposed protocol, the medical control authority may formally adopt and implement the protocol.

(e) A medical control authority may establish an emergency protocol necessary to preserve the health or safety of individuals within its region in response to a present medical emergency or disaster without following the procedures established by the department under this subsection for an ordinary protocol. An emergency protocol established under this subdivision is effective only for a limited period and does not take permanent effect unless it is approved according to the procedures established by the department under this subsection.

(4) A medical control authority shall provide an opportunity for an affected participant in an emergency medical services system to appeal a decision of the medical control authority. Following appeal, the medical control authority may affirm, suspend, or revoke its original decision. After appeals to the medical control authority have been exhausted, the affected participant in an emergency medical services system may appeal the medical control authority's decision to the state emergency medical services coordination committee created in section 20915. The state emergency medical services coordination committee shall issue an opinion on whether the actions or decisions of the medical control authority are in accordance with the department-approved protocols of the medical control authority and state law. If the state emergency medical services coordination committee determines in its opinion that the actions or decisions of the medical control authority are not in accordance with the medical control

2

3 4

5 6

7

8

9 10

11

12

13 14

15

16

17

18

19 20

21

2223

24

25

2627

28 29

- authority's department-approved protocols or with state law, the state emergency medical services coordination committee shall recommend that the department take any enforcement action authorized under this code.
- (5) If adopted in protocols approved by the department, a medical control authority may require life support agencies within its region to meet reasonable additional standards for equipment and personnel, other than medical first responders, that may be more stringent than are otherwise required under this part. If a medical control authority proposes a protocol that establishes additional standards for equipment and personnel, the medical control authority and the department shall consider the medical and economic impact on the local community, the need for communities to do long-term planning, and the availability of personnel. If either the medical control authority or the department determines that negative medical or economic impacts outweigh the benefits of those additional standards as they affect public health, safety, and welfare, the medical control authority shall not adopt and the department shall not approve protocols containing those additional standards.
- (6) If adopted in protocols approved by the department, a medical control authority may require medical first response services and licensed medical first responders within its region to meet additional standards for equipment and personnel to ensure that each medical first response service is equipped with an epinephrine auto-injector, and that each licensed medical first responder is properly trained to recognize an anaphylactic reaction and to administer and dispose of the epinephrine auto-injector, if a life support agency that provides basic life support, limited

- advanced life support, or advanced life support is not readily
  available in that location.
- (7) If a decision of the medical control authority under 3 4 subsection (5) or (6) is appealed by an affected person, the medical control authority shall make available, in writing, the 5 6 medical and economic information it considered in making its 7 decision. On appeal, the state emergency medical services 8 coordination committee created in section 20915 shall review this information under subsection (4) and shall issue its findings in 9 10 writing.
- 11 Enacting section 1. Sections 1299, 2241, 2242, 2243, 2244,
- **12** 2245, 2246, 2255, 2261, 2262, 2263, 2437, 2443, 2446, 2455, 2461,
- 13 2462, 2463, and 2465 of the public health code, 1978 PA 368, MCL
- **14** 333.1299, 333.2241, 333.2242, 333.2243, 333.2244, 333.2245,
- **15** 333.2246, 333.2255, 333.2261, 333.2262, 333.2263, 333.2437,
- **16** 333.2443, 333.2446, 333.2455, 333.2461, 333.2462, 333.2463, and
- **17** 333.2465, are repealed.