

R.S. 26:2F-1

LEGISLATIVE FACT SHEET

ON

N.J.R.S. 26:2F-1 ("State Health Act")  
(1966 Amendment)

LAWS OF 1966

CHAPTER 36

SENATE 14

~~ASSEMBLY~~

INTRODUCED Jan. 18, 1966

BY *Waddington [and 8 others]*

STATEMENT

YES

NO

AMENDED DURING PASSAGE

YES

NO

HEARING

VETO

YES

*Governor's Statement*

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SENATE No. 14

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# STATE OF NEW JERSEY

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INTRODUCED JANUARY 18, 1966

By Senators WADDINGTON, LYNCH, RIDOLFI, HUGHES, FELDMAN,  
HILLERY, OZZARD, FORSYTHE and PARSEKIAN

Referred to Committee on Institutions, Public Health and Welfare

AN ACT concerning health services, providing a program of State aid to local health agencies and supplementing Title 26 of the Revised Statutes.

1 BE IT ENACTED *by the Senate and General Assembly of the State of New*  
2 *Jersey:*

1 1. This act shall be known as the State Health Aid Act of 1966.

1 2. It is hereby declared to be the public policy of this State to ensure  
2 that public health services are provided, protecting all citizens and visitors  
3 within this State, by making financial aid available to local health agencies  
4 and assisting such agencies to establish and maintain a program of recog-  
5 nized public health activities and to meet minimum standards of perform-  
6 ance as prescribed by the Public Health Council in accordance with the pro-  
7 visions of chapter 177 of the laws of 1947.

1 3. For the purposes of this act unless the context clearly requires a  
2 different meaning:

3 (a) "Local health agency" shall mean and include a county, district,  
4 regional, municipal or other local governmental agency organized for the  
5 purpose of providing health services.

6 (b) "Commissioner" shall mean the State Commissioner of Health.

7 (c) "Special projects and development fund" shall mean the fund es-  
8 tablished in section 7 of this act.

9 (d) "Certified health services" shall mean and include those specific  
10 administrative activities and health services as planned and provided in a  
11 municipality or municipalities by a local health agency or by a person or  
12 agency under contract with a local health agency which are approved and  
13 certified by the commissioner as being recognized health services meeting  
14 personnel and program standards which the Public Health Council is hereby  
15 authorized to prescribe.

16 (e) "State health aid" shall mean State aid for basic health services  
17 and State equalization aid for local health purposes but shall not include  
18 grants from the special projects and development fund.

19 (f) "Annual expenditures for health purposes" shall mean the sum ex-  
20 pended by a local health agency for certified health services excluding any  
21 sum paid to the local health agency as State health aid under the provisions  
22 of this act.

23 (g) "Population" shall mean the number of inhabitants of a municipal-  
24 ity or a group of municipalities making up a local health agency jurisdiction  
25 as enumerated in the last Federal census, or by a special census made by  
26 the Federal Bureau of the Census, or as estimated annually by the Depart-  
27 ment of Conservation and Economic Development, whichever is most recent,  
28 except that military personnel living on military reservations, inmates of  
29 State and county institutions and boarding students of schools and colleges  
30 shall be excluded.

31 (h) "Full-time health officer" shall mean a licensed health officer em-  
32 ployed by a local health agency to function as such during all the working  
33 hours of the regularly scheduled work week of the governmental unit to  
34 which the local health agency is attached and not regularly employed during  
35 the working hours of that scheduled work week in other activities for which  
36 he receives remuneration.

37 (i) The "foundation program" for each local health agency shall be  
38 an amount equal to a capitation for the population within the jurisdiction  
39 of the local health agency.

40 (j) The "distribution table" shall mean a series of percentages of the  
41 foundation program establishing the minimum amounts which should be bud-  
42 geted by a local health agency for each functional activity. The distribution  
43 table shall be prescribed by the Public Health Council.

44 (k) "Criteria for participation" shall mean that a local health agency  
45 serving a minimum population of 25,000 is under the administrative direc-  
46 tion of a full-time health officer, and all other employees are appropriately  
47 qualified and licensed as required by law. The minimum population of 25,000  
48 may be waived at the discretion of the commissioner in the case of a local  
49 health agency which from the period beginning January 1, 1960, has carried  
50 on and continues to carry on a comprehensive public health program under  
51 the direction of a full-time health officer.

1 4. State aid for basic health services in the amount of \$25,000.00 for  
2 each county in this State shall be appropriated annually and shall be made  
3 available for distribution by the State Department of Health to the local  
4 health agencies which meet the criteria for participation in the county and  
5 render certified health services, provided that:

6 (a) Each municipality which maintains, or participates in, a local health  
7 agency eligible for State aid for basic health services shall be entitled to an  
8 equal share of the \$25,000.00 allocated for each county.

9 (b) The maximum amount of State aid for basic health services avail-  
10 able to each local health agency shall be the sum of the share or shares to  
11 which the municipality or municipalities maintaining or participating in it  
12 are entitled.

13 (c) In no case shall the amount of State aid for basic health services  
14 to a local health agency be greater than twice the annual expenditure for  
15 health purposes of that agency during the year for which such aid is dis-  
16 tributed.

17 (d) State aid for basic health services shall be expended exclusively for  
18 certified health services in administration, environmental sanitation, and com-  
19 municable disease control.

20 (e) State aid for basic health services shall not be provided for use in  
21 substitution for moneys expended for specific activities, positions or per-  
22 sonnel derived from the annual expenditure of the agency for health pur-  
23 poses during either of the 2 years immediately preceding the year for which  
24 the State aid is requested.

1 5. The local fair share of the foundation program shall be determined  
2 for the local government jurisdiction included within a local health agency  
3 as a sum equal to 0.2 mills per dollar upon the equalized evaluation of the  
4 taxing district or districts of these same local governments as certified by the  
5 Director of the State Division of Taxation. In the event that the equaliza-  
6 tion table certified by the Director of the State Division of Taxation shall  
7 be revised by the Division of Tax Appeals on or before January 15, the local  
8 fair share of any taxing district affected thereby shall be recomputed ac-  
9 cordingly and any determination or certification of State aid made previously  
10 pursuant to this act shall be amended to conform therewith.

1 6. State equalization aid for local health purposes shall be an amount  
2 representing the excess of the foundation program over the local fair share  
3 but not less than \$0.25 per capita of the population in the area of jurisdiction.  
4 Such aid shall be available as a grant for distribution by the State Depart-  
5 ment of Health to each local health agency which meets the criteria for par-  
6 ticipation provided that:

7 (a) State equalization aid for local health purposes shall be used ex-  
8 clusively for the support of certified health services provided by the local  
9 health agency;

10 (b) When the sum of the annual expenditure for health purposes and  
11 the State aid for basic health services is less than the local fair share, the  
12 State equalization aid for local health purposes shall be reduced by the  
13 difference;

14 (c) When the budgetary allocation for any of the functional activities is  
15 less than that prescribed by the program distribution table, the State equal-

16 ization aid for local health purposes available as a grant shall be determined  
 17 according to the following formula:

$$18 \text{ Grant} = \left\{ \begin{array}{l} \text{State} \\ \text{Equalization} \\ \text{Aid} \end{array} \right\} \frac{\text{State Equalization Aid}}{\text{Foundation Program}} \times \left\{ \begin{array}{l} \text{Sum of the amounts} \\ \text{that the budgetary} \\ \text{allocation for each} \\ \text{functional activity is} \\ \text{less than that pre-} \\ \text{scribed in the Dis-} \\ \text{tribution Table} \end{array} \right.$$

19 (d) State equalization aid for local health purposes shall not be pro-  
 20 vided for use in substitution for moneys expended for specific activities, posi-  
 21 tions or personnel derived from the annual expenditure of the local health  
 22 agency for health purposes during either of the 2 years immediately preced-  
 23 ing the year for which the State aid is requested.

1 7. (a) There is hereby established a special projects and development  
 2 fund which shall consist of all funds appropriated or otherwise made avail-  
 3 able for the purposes set forth in this section. The commissioner, with the  
 4 approval of the Public Health Council, may make grants from the special proj-  
 5 ects and development fund to local health agencies, to hospitals, and to  
 6 voluntary health agencies to provide State health assistance for new health  
 7 services and for special health projects in order to stimulate continued de-  
 8 velopment of health services and to assure the citizens of New Jersey the  
 9 benefits of the most advanced health protection techniques.

10 (b) Grants from the special projects and development fund for specific  
 11 purposes shall be made on an annual basis for a period not in excess of 5  
 12 years and such grants shall be in diminishing amounts during this period.  
 13 The commissioner shall determine the conditions applicable to each such  
 14 grant including the extent of local financial participation to be required.  
 15 Grants from the special projects and development fund to voluntary health  
 16 agencies shall not exceed 40% of said fund.

1 8. A local health agency may qualify for a grant under one or more of  
 2 sections 4, 6 and 7.

1 9. On or before a date set by the commissioner but not later than October  
 2 15 in each year, the health officer of each local health agency, or in his

3 absence another person designated by the official body under which the local  
4 health agency operates, may submit an application for State health aid for  
5 the succeeding year. The application shall include the budget of the agency,  
6 the plan of work, the short-term objectives, and such other information the  
7 commissioner may require, to be presented in a form prescribed by the com-  
8 missioner. The application shall be certified, under the penalties of perjury,  
9 as true to the best knowledge of the person making it.

1     10. On or before November 15 in each year the commissioner shall de-  
2 termine in accordance with the provisions of this act the amount estimated  
3 to be payable during the succeeding year to each of the local health agencies  
4 which have submitted a proper and completed application for state health  
5 aid.

1     11. The sum payable as State health aid to each local health agency  
2 shall be payable  $\frac{1}{4}$  on January 1,  $\frac{1}{4}$  on April 1,  $\frac{1}{4}$  on July 1, and  $\frac{1}{4}$  on  
3 September 1, on the basis of planned expenditures, provided that subsequent  
4 payments shall be adjusted so that payment is made upon the basis of actual  
5 expenditures. Payments shall be made by the State Treasurer upon certifi-  
6 cate of the commissioner and warrant of the Director of the Division of  
7 Budget and Accounting.

1     12. In order to ensure that the State health aid is expended in conform-  
2 ance with the provisions of this act, the commissioner shall, when he deem  
3 it in order, have an audit made of the expenditures of moneys and of serv-  
4 ices provided by the local health agency receiving State health aid and shall,  
5 when he shall deem it necessary, have examined all books, papers and  
6 vouchers of the agency and its fiscal agent and shall have free and un-  
7 restricted access thereto for that purpose.

1     13. When it has been determined that a local health agency fails to pro-  
2 vide certified health services called for in its plan of work as stated in its  
3 application for State health aid or ceases to comply with the criteria for  
4 participation, State health aid may be reduced or discontinued by the com-  
5 missioner when, in his judgment, such action serves to further the general  
6 purposes of this act.

1 14. Each local health agency receiving State health aid shall on or be-  
2 fore February 15 in each year, following the year for which the State health  
3 aid was received, prepare and file with the commissioner an annual report  
4 for the preceding calendar year. Such report shall state the condition of  
5 the public health within the limits of its jurisdiction, noting therein any  
6 special cause for the deterioration of health or of hazard thereto, and shall  
7 contain answers to any questions which may have been addressed to the  
8 local health agency by the commissioner.

1 15. The capitation for the purposes of this act shall be specified for  
2 each calendar year in the immediately preceding General Appropriation Act.

3 The capitation for the year 1966 shall be \$1.50.

1 16. This act shall become effective July 1, 1966 and State health aid  
2 provided in this act shall be made available beginning January 1, 1967.

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#### STATEMENT

The basic health protection services which are provided by many municipalities of our State are admittedly inadequate. As a result, our citizens who live in or who visit these municipalities are continually subjected to unnecessary health hazards. It is to the immediate benefit of everyone to maintain health standards at the highest possible level throughout the State.

The State health aid program proposed by this bill has been developed by the State Department of Health on the instruction of the Public Health Council. This bill provides for 3 types of State health aid:

(a) State aid for basic health services in the amount of \$25,000.00 for each county to be apportioned among the eligible local health agencies;

(b) State equalization aid for local health districts which is to be distributed to each qualified local health agency in accordance with a specified formula;

(c) Special projects and development grants to be made by the Commissioner of Health, with the approval of the Public Health Council, for new health services and special health projects.



SENATE No. 14

STATE OF NEW JERSEY

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4 which have submitted a proper and completed application for state health  
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2 vide certified health services called for in its plan of work as stated in its  
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FISCAL NOTE TO  
**SENATE No. 14**

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**STATE OF NEW JERSEY**

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DATED: MARCH 14, 1966

Senate Bill No. 14 is designated the "State Health Aid Act of 1966," and provides a program of State aid to local health agencies.

Estimates of the State Department of Health indicate that the cost of this bill, if enacted, would be as follows:

Basic aid .....	\$525,000 00
Equalization aid to local health departments .....	3,600,000 00
Special projects and development funds .....	500,000 00
	<hr/>
Total per annum .....	\$4,625,000 00
½ year (Aid for this fiscal year January 1 to June 30)	\$2,312,500 00
Administrative costs .....	69,000 00
	<hr/>
Total funds required for fiscal year 1966 .....	\$2,381,500 00

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In compliance with written request received, there is hereby submitted a fiscal estimate for the above bill, pursuant to P. L. 1962, c. 27.



S14

FROM: Office of the Governor

FOR RELEASE: TUESDAY, May 17, 1966

STATEMENT OF GOVERNOR RICHARD J. HUGHES  
ON THE SIGNING OF THE NEW STATE HEALTH AID ACT - S-14  
MAY 16, 1966

The new State Health Aid Act, S-14, which allocates \$2.3 million in State aid to communities and counties for local health services begins a new local-State partnership to strengthen and improve community health services all over New Jersey. The time has long passed when individual communities, using only their own resources, can maintain the health and sanitation standards so vital for one of the fastest growing urban states in the nation.

This program authorizes annual States grants to each county for distribution to municipalities which meet standards of participation in such programs as sanitary inspection and communicable disease control. It will also provide support funds to local health departments already having a local health officer. And will also encourage those 350 municipalities who have no health officer to employ one. It will also create an incentive for smaller communities to join together in the establishment of area health service programs.

For large numbers of rural communities the new State Health Aid Program will introduce minimum health standards. For other communities it will offer critical assistance in support of such programs as diabetes and cancer detection, control of tuberculosis and venereal disease, strengthening of child care services and extension of public health nurse activities.

I look forward to the day, not far off, when our State will have the highest health standards in every community. New Jersey now rightly joins the great health revolution taking place across this nation.

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