

COUNCIL OF THE DISTRICT OF COLUMBIA

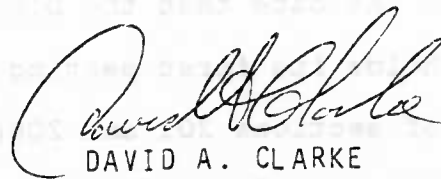
NOTICE

D.C. LAW 5-173

"Fees for Clinical Services and Asbestos Abatement Act of 1984".

Pursuant to Section 412 of the District of Columbia Self-Government and Governmental Reorganization Act, P. L. 93-198, "the Act", the Council of the District of Columbia adopted Bill No. 5-493 on first and second readings, December 4, 1984 and December 18, 1984, respectively. Following the signature of the Mayor on January 11, 1985, this legislation was assigned Act No. 5-238, published in the February 8, 1985 edition of the D.C. Register, (Vol. 32 page 736) and transmitted to Congress January 23, 1985 for a 30-day review, in accordance with Section 602 (c)(1) of the Act.

The Council of the District of Columbia hereby gives notice that the 30-day Congressional Review Period has expired, and therefore, cites this enactment as D.C. Law 5-173, effective March 15, 1985.



DAVID A. CLARKE
Chairman of the Council

Dates Counted During the 30-day Congressional Review Period:

January	23,24,25,28,29,30,31
February	1,4,5,6,7,19,20,21,22,25,26,27,28
March	1,4,5,6,7,8,11,12,13,14

D.C. LAW 5 - 173

AN ACT

EFFECTIVE DATE MAR 15 1985

D.C. ACT 5 - 238

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

JAN 11 1985

To provide for the establishment of fees for clinical services, a Task Force on Asbestos Abatement, and asbestos screening services for individuals who have a high risk of asbestos-related diseases; and for other purposes.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "Fees for Clinical Services and Asbestos Abatement Act of 1984".

Sec. 2. Fees for Clinical Services.

(a) A fee, based on rates to be established by the Mayor, shall be charged to each person who is not indigent for all clinical services provided at District of Columbia health clinics, including the outpatient clinic at D.C. General Hospital. The Mayor's authority to set such fees at the outpatient clinic at the D.C. General Hospital shall terminate on the date that the D.C. General Hospital Commission holds its first meeting pursuant to the provisions of sections 201 and 206(b) of the D.C. General Hospital Commission Act, effective May 13, 1977 (D.C. Law 1-134; D.C. Code, secs. 32-211 & -216(b)). The Mayor shall file with the Council of the District of Columbia notice of a proposed rate or change in a rate at least 30 days prior to its effective date. The fee schedule may incorporate a

New,
D.C. Code,
sec. 32-119.1
Note,
D.C. Code,
sec. 32-211 &
-216
(1985 supp.)

sliding scale based on a patient's ability to pay for services. No fee for clinical services shall be charged where so specified by an agreement with the federal government. No person shall be denied clinical services because he or she is unable to pay for those services.

(b) The following clinical health services shall be provided by the Mayor at District of Columbia health clinics, including the outpatient clinic at the D.C. General Hospital, through contractual arrangements with private agencies or providers, or through other alternative arrangements:

(1) Screening services:

(A) hypertension;

(B) sickle cell anemia; and

(C) asbestosis, cancer of the stomach,

cancer of the colon, rectal cancer, and other diseases resulting from prolonged exposure to asbestos. Free screening services for these diseases shall be provided only to those persons who have been identified as having a high risk of asbestos related disease and who do not have any form of health insurance in accordance with recommendations of the Task Force on Asbestos Abatement and rules and regulations issued by the Mayor.

(2) Screening and treatment services:

(A) drug addiction;

(B) lead poisoning;

(C) venereal disease;

(D) tuberculosis outpatient care; and

(E) forensic psychiatry.

(3) Immunization services:

(A) communicable disease in adults and children; and

(B) rabies in animals.

(c)(1) The Mayor may determine that certain services will be provided without charge to all patients, because such a policy is determined to be in the public interest on the basis of any of the following health factors:

(A) threat of communicable disease;

(B) danger to the public health; or

(C) mortality and morbidity related to a specific disease.

(2) All clinical health services shall be provided, without charge, at District of Columbia health clinics, including the outpatient clinic at the D.C. General Hospital, to persons who are receiving assistance under title VII of the District of Columbia Public Assistance Act of 1982, effective April 6, 1982 (D.C. Law 4-101; D.C. Code, sec. 3-207.1 et seq.), and who do not receive assistance under Medicaid.

(d) At the beginning of each fiscal year, the Mayor shall cause to be published in the District of Columbia Register a list of those services, if any, rendered free of charge by city clinics and by the D.C. General Hospital in the public interest.

(e) For purposes of this act, the term "clinical services" shall include all health services rendered by the

District in an ambulatory setting, including mental health, alcoholism, and drug treatment services.

Sec. 3. Task Force on Asbestos Abatement Created.

Note,
D.C. Code,
sec. 32-119.
(1985 supp.)

(a) There is established a Task Force on Asbestos Abatement ("Task Force").

(b) The Task Force shall consist of nine members appointed as follows:

(1) Two members shall be appointed by the Mayor to represent the interests of the District of Columbia government.

(2) Two members shall be appointed by the Board of Education to represent the interests of the District of Columbia Public Schools.

(3) Five members shall be appointed by the Council, three of whom shall have experience in the field of occupational health and safety and who shall have demonstrated a knowledge of and interest in asbestos-related diseases.

(c) Members of the Task Force shall be appointed within 15 days (excluding Saturdays, Sundays, and holidays) of the effective date of this act, or within 15 days (excluding Saturdays, Sundays, and holidays) of the effective date of emergency legislation establishing a Task Force on Asbestos Abatement, whichever occurs first.

(d) Vacancies occurring upon the Task Force shall be filled in the same manner as original appointees as provided in subsection (b).

(e) Five members of the Task Force shall constitute a

quorum.

(f) The Task Force shall study all matters relating to the presence and condition of asbestos in public buildings owned or leased by the District of Columbia and shall make recommendations to the Mayor and the Council within 120 days of the effective date of the Fees for Clinical Services and Asbestos Abatement Emergency Act of 1984. The report shall outline an asbestos abatement program for the District and shall contain, but not be limited to, the following information:

(1) a list of all public buildings owned or leased by the District of Columbia which have been constructed with asbestos materials and which pose a threat to public health and safety, or a plan for identifying these buildings;

(2) a plan for identifying those individuals within the District of Columbia who have a high risk of asbestos-related diseases because of prolonged exposure to public buildings containing friable asbestos material;

(3) draft legislation to regulate individuals who are in the business of removing or containing asbestos material;

(4) projections on the cost of removal or containment of asbestos in public buildings and on the cost of providing screening services to persons who have been identified as having a high risk of asbestos-related disease; and

(5) specific recommendations on action that may

be taken by the Mayor and the Council to implement a prompt and thorough abatement program.

(g) The Task Force shall cease to exist 30 days after submission of the report required by section 3(f).

Sec. 4. Rules and Regulations.

The Mayor is authorized to issue rules and regulations, in accordance with recommendations of the Task Force, to carry out the purposes of this act.

Note,
D.C. Code,
sec. 32-119.
(1985 supp.)

Sec. 5. Appropriations.

There may be appropriated out of revenues available to the District sums necessary to carry out the purposes of this act.

Note,
D.C. Code,
sec. 32-119.
(1985 supp.)

Sec. 6. Repealer.

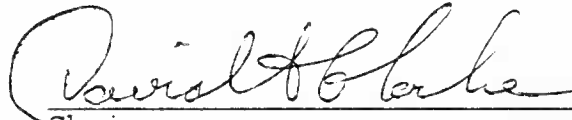
The third proviso under the heading "HEALTH DEPARTMENT" in section 1 of the District of Columbia Appropriation Act, 1947 (mistakenly referred to in D.C. Laws 2-9 and 5-14 as the fourth proviso under the heading "HEALTH DEPARTMENT" in section 1 of the District of Columbia Appropriations Act of 1946), effective June 22, 1983 (D.C. Law 5-14; D.C. Code, sec. 32-119), is repealed.

D.C. Code,
sec. 32-119
repealed.

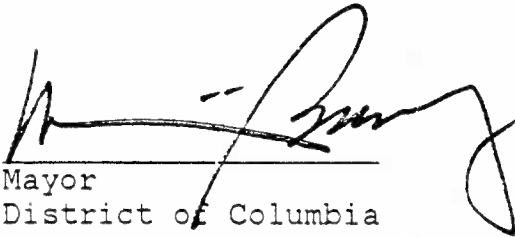
Sec. 7. Effective Date.

This act shall take effect after a 30-day period of Congressional review following approval by the Mayor (or in the event of veto by the Mayor, action by the Council of the District of Columbia to override the veto) as provided in section 602(c)(1) of the District of Columbia Self-Government and Governmental Reorganization Act,

approved December 24, 1973 (87 Stat. 813; D.C. Code, sec.
1-233(c)(1)).



Chairman
Council of the District of Columbia



Mayor
District of Columbia

APPROVED: January 11, 1985



COUNCIL OF THE DISTRICT OF COLUMBIA

Council Period Five — Second Session

RECORD OF OFFICIAL COUNCIL VOTE

DOCKET NO: B5-493

Item on Consent Calendar

ACTION & DATE: Adopted First Reading, 12-04-84

VOICE VOTE: Unanimous

Recorded vote on request

Absent: Smith

ROLL CALL VOTE: — RESULT

Table with 15 columns: COUNCIL MEMBER, AYE, NAY, N.V., A.B. (repeated 3 times). Rows include CHMN. CLARKE, CRAWFORD, JARVIS, KANE, MASON, MOORE, JR., RAY, ROLARK, SHACKLETON, SMITH, JR., SPAULDING, WILSON, WINTER.

X — Indicates Vote A.B. — Absent N.V. — Present, not voting

CERTIFICATION RECORD

Secretary to the Council

Date

Item on Consent Calendar

ACTION & DATE: Adopted Final Reading, 12-18-84

VOICE VOTE: Unanimous

Recorded vote on request

Absent: Winter

ROLL CALL VOTE: — RESULT

Table with 15 columns: COUNCIL MEMBER, AYE, NAY, N.V., A.B. (repeated 3 times). Rows include CHMN. CLARKE, CRAWFORD, JARVIS, KANE, MASON, MOORE, JR., RAY, ROLARK, SHACKLETON, SMITH, JR., SPAULDING, WILSON, WINTER.

X — Indicates Vote A.B. — Absent N.V. — Present, not voting

CERTIFICATION RECORD

Secretary to the Council

Date

Item on Consent Calendar

ACTION & DATE:

VOICE VOTE:

Recorded vote on request

Absent:

ROLL CALL VOTE: — RESULT

Table with 15 columns: COUNCIL MEMBER, AYE, NAY, N.V., A.B. (repeated 3 times). Rows include CHMN. CLARKE, CRAWFORD, JARVIS, KANE, MASON, MOORE, JR., RAY, ROLARK, SHACKLETON, SMITH, JR., SPAULDING, WILSON, WINTER.

X — Indicates Vote A.B. — Absent N.V. — Present, not voting

CERTIFICATION RECORD

Secretary to the Council

Date