

TITLE 1 - GOVERNMENT AND ADMINISTRATION
Division 4 - FISCAL, PURCHASING, REVENUE AND TAXATION
Article 14. INVESTMENT OF NATIONAL TOBACCO SETTLEMENT FUNDS IN HEALTH AND SAFETY SERVICES

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HEALTH AND SAFETY SERVICES**

Section 1-4-250. Tobacco settlement funds.

The Orange County Tobacco Settlement Fund is hereby created in the County Treasury. Commencing in the first fiscal year following adoption of this article, the county's share of all funds received from the tobacco litigation Master Settlement Agreement of 1998 and the memorandum of understanding entered into by the County and the State on August 5, 1998, and any funds received from any source to replace funds the County would have been entitled to receive under the master settlement agreement and memorandum of understanding, shall be deposited in the Orange County Tobacco Settlement Fund.

(Ord. of 3-6-01)

Sec. 1-4-251. Allocation of tobacco settlement funds.

- (a) Moneys shall be annually allocated and appropriated from the Orange County Tobacco Settlement Fund as follows:
- (1) Nineteen (19) percent to provide health care services for seniors and persons with disabilities including, but not limited to, community based long term care, transportation services and in-home support services.
 - (2) Twenty-three (23) percent to fund emergency medical services provided by emergency room, physicians and emergency room on-call physician specialists to pay for nonpaying patients, so that emergency rooms and trauma centers are not closed.
 - (3) Twelve (12) percent to tobacco prevention and control, including cessation services, for youth and adults to reduce smoking and the consumption of tobacco, other addiction programs, and community mental health programs and facilities.
 - (4) Twenty (20) percent to nonprofit community clinics, mobile health clinics, university and hospital-affiliated clinics, so that children and families receive immunizations, primary, specialty and dental health care services.
 - (5) Six (6) percent hospitals within the County maintaining basic or comprehensive emergency services or trauma centers to cover the costs of providing charity care, proportionate to each hospital's charity care and bad debts as reported to the California Office of Statewide Health Planning and Development.
 - (6) Twenty (20) percent to the Sheriff's Department for public safety programs and services, which may include, expansion of existing facilities and programs that provide mental, alcohol, and drug abuse treatment programs under the direction or supervision of the Sheriff.
- (b) The county may retain an amount to administer any service or program funded by this Article, not to exceed one (1) percent of the amount allocated and appropriated for that service program.
- (c) If county general fund revenues for the succeeding fiscal year, as estimated by the Chief Financial Officer, are forecasted to decline by ten (10) percent or more from the current fiscal year, then the Board of Supervisors,

may reallocate tobacco settlement funds for that one succeeding fiscal year to any county government purpose by a two-thirds vote.

- (d) The County may finance capital construction projects in furtherance of any program or service identified in subdivision (a)(6) by dedicating or pledging all or a portion of future funds that could be allocated for that program or service for the repayment of debt incurred to finance such capital construction projects.

(Ord. of 3-6-01)

Sec. 1-4-252. Definitions and interpretations

- (a) For the purposes of this article the Master Settlement Agreement of 1998 means the agreement entered into between the states' Attorneys General and the tobacco industry on November 23, 1998, in settlement of litigation, as defined in California Health and Safety Code Section 104556(e)
- (b) For the purposes of this Article the Memorandum of Understanding means the agreement entered into between the State and several cities and counties on August 5, 1998 distributing the proceeds of the Master Settlement Agreement.
- (c) Funds allocated and appropriated pursuant to section 1-4-251(a) of this article shall be used to supplement existing levels of federal, state and local funding for each service described in section 1-4-251(a) and not to supplant existing levels of funding based on the 1999—2000 fiscal year.
- (d) Funds allocated for emergency medical services pursuant to section 1-4-251(a)(2) shall be available to physicians, who would otherwise qualify for reimbursement under California Health and Safety Code section 1797.98a, only to pay for emergency medical services (as defined in California Health and Safety Code section 1317.1) provided by emergency physicians to nonpaying patients, and to pay on-call physician specialists called upon to provide emergency medical services during the first twenty-four (24) hours of emergency medical care provided to nonpaying patients. "Nonpaying patients" means patients who do not make any payment for the emergency medical services and for whom no responsible third party makes any payment. The county shall continue to maintain and administer the Maddy Emergency Medical Services Fund authorized by Health and Safety Code section 1798a and may not reduce the amount of the penalty assessment that funds the Maddy Emergency Medical Services Fund as provided by Health and Safety Code section 1798(c) and California Government Code section 76104.
- (e) If any provision of this article, or part thereof, is for any reason held to be invalid or unconstitutional, the remaining provisions shall not be affected, but shall remain in full force and effect, and to this end the provisions of this chapter are severable.

(Ord. of 3-6-01)