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 **RECHTSINFORMATIONSSYSTEM DES BUNDES**



[Federal law] **State law** **districts** **municipalities** **Jurisprudence** **Announcements, decrees** **Total query**

Federal law consolidated: Complete legal provisions for the Epidemic Act 1950, version of 27 October 2025

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Long title

Epidemic Act 1950 (EpiG). Federal
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the change

[BGBl. No. 185/1961](#) (NR: GP IX [RV 450 AB 462 p. 71](#). BR: [p. 178](#).)
[BGBl. No. 116/1967](#) (NR: GP XI [RV 253 AB 389 p. 48](#). BR: [p. 252](#).)
[BGBl. No. 127/1968](#) (NR: GP XI [RV 622 AB 809 p. 98](#). BR: [p. 263](#).)
[BGBl. No. 702/1974](#) (NR: GP XIII [RV 1205 AB 1312 p. 119](#). BR: [AB 1234 p. 335](#).)
[BGBl. I No. 191/1999](#) (BG) (1. BRBG) (NR: GP XX [RV 1811 AB p. 179](#). BR: [AB 6041 p. 657](#).)
[BGBl. I No. 98/2001](#) (NR: GP XXI [RV 621 AB 704 p. 75](#). BR: [6398 AB 6424 p. 679](#).)
[BGBl. I No. 65/2002](#) (NR: GP XXI [RV 772 AB 885 p. 83](#). BR: [6488 AB 6496 p. 682](#).)
[BGBl. I No. 114/2006](#) (NR: GP XXII [IA 822/A AB 1545 p. 155](#). BR: [AB 7603 p. 736](#).)
[CELEX No.: [32003L0099](#)]
[BGBl. I No. 76/2008](#) (NR: GP XXIII [RV 503 AB 530 p. 59](#). BR: [AB 7942 p. 756](#).)
[BGBl. I No. 43/2012](#) (NR: GP XXIV [RV 1732 AB 1763 p. 153](#). BR: [AB 8726 p. 808](#).)
[BGBl. I No. 80/2013](#) (NR: GP XXIV [RV 2166 AB 2256 p. 200](#). BR: [8946 AB 8962 p. 820](#).)
[BGBl. I No. 63/2016](#) (NR: GP XXV [RV 1187 AB 1230 p. 138](#). BR: [AB 9639 p. 856](#).)
[BGBl. I No. 37/2018](#) (NR: GP XXVI [RV 108 AB 139 p. 23](#). BR: [9967 AB 9970 p. 880](#).)
[CELEX no.: [32017L2399](#) , [32017L1572](#)]
[BGBl. I No. 16/2020](#) (NR: GP XXVII [IA 397/A AB 112 p. 19](#). BR: [AB 10288 p. 904](#).)
[BGBl. I No. 23/2020](#) (NR: GP XXVII [IA 402/A AB 115 p. 22](#). BR: [AB 10291 p. 905](#).)
[BGBl.](#) .
[BGBl. I No. 62/2020](#) (NR: GP XXVII [IA 622/A AB 230 p. 38](#). BR: [AB 10359 p. 909](#).)
[Federal Law Gazette I No. 103/2020](#) (NR: GP XXVII [AB 337 p. 47](#). BR: [10368](#))
[BGBl. I No. 104/2020](#) [as](#) amended by [BGBl.](#) .
[BGBl.](#) .
[BGBl.](#) .
[BGBl.](#) .
[Federal Law Gazette I No. 64/2021](#) (VfGH)
[BGBl. I No. 82/2021](#) (NR: GP XXVII [IA 1466/A AB 813 p. 101](#). BR: [AB 10620 p. 925](#).)
[BGBl.](#) .

[BGBl. I No. 100/2021](#) (NR: GP XXVII [IA 1572/A p. 109](#). BR: [10643 AB 10640 p. 926](#).)

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[BGBl. I No. 143/2021](#) (NR: GP XXVII [IA 1780/A AB 1008 p. 115](#). BR: [AB 10717 p. 929](#).)

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[BGBl. I No. 6/2022](#) (NR: GP XXVII [AB 1313 p. 139](#). BR: [10864 AB 10873 p. 937](#).)

[BGBl.](#)

[BGBl. I No. 80/2022](#) (NR: GP XXVII [IA 2489/A AB 1482 p. 156](#). BR: [AB 10962 p. 941](#).)

[BGBl.](#)

[BGBl. I No. 103/2022](#) (NR: GP XXVII [IA 2652/A p. 168](#). BR: [11008 AB 11018 p. 944](#).)

[BGBl. I No. 131/2022](#) (NR: GP XXVII [IA 2676/A p. 168](#). BR: [AB 11020 p. 944](#).)

[BGBl. I No. 195/2022](#) (NR: GP XXVII [IA 2864/A AB 1785 p. 185](#). BR: [AB 11107 p. 947](#).)

[BGBl. I No. 69/2023](#) (NR: GP XXVII [RV 2048 AB 2054 p. 219](#). BR: [AB 11252 p. 955](#).)

[Federal Law Gazette I No. 105/2024](#) (NR: GP XXVII [RV 2530 AB 2663 p. 272](#). BR: [11527 AB 11578 p. 970](#).)

[BGBl. I No. 50/2025](#) (NR: GP XXVIII [RV 129 AB 151 p. 35](#). BR: [11651 AB 11654 p. 980](#).)

text

I. MAIN PIECE.

Determination of the disease.

Notifiable diseases

§ 1. (1) The following are subject to the reporting obligation:

1. Suspected cases, illnesses, and deaths from cholera, yellow fever, viral hemorrhagic fever, infectious hepatitis (hepatitis A, B, C, D, E), dog tapeworm (*Echinococcus granulosus*) and fox tapeworm (*Echinococcus multilocularis*), infections with influenza virus A/H5N1 or another avian influenza virus, polio, bacterial and viral food poisoning, leprosy, leptospiral diseases, measles, MERS-CoV (Middle East Respiratory Syndrome Coronavirus/" *new coronavirus* "), anthrax, psittacosis, paratyphoid, plague, smallpox, rickettsiosis caused by *R. prowazekii*, glanders, transmissible dysentery (amoebic dysentery), SARS (Severe Acute Respiratory Syndrome), transmissible spongiform encephalopathies, tularemia, Typhus (abdominal typhus), puerperal fever, rage disease (Lyssa) and bite injuries from rage-stricken or suspected rage-stricken animals,
2. Incidences and deaths from Bang's disease, chikungunya fever, dengue fever, diphtheria, hantavirus infections, viral meningoencephalitis, invasive bacterial diseases (meningitis and sepsis), whooping cough, Legionnaires' disease, malaria, rubella, scarlet fever, relapsing fever, trachoma, trichinosis, West Nile fever, severe *Clostridium difficile*-associated diseases, and Zika virus infections.

(2) The Federal Minister for Health and Women may, if justified for epidemiological reasons or required by international obligations, make further communicable diseases subject to mandatory reporting or expand existing reporting obligations by regulation.

Reimbursement of the report

§ 2. (1) Every illness, every death from a notifiable disease, and in the cases of Section 1 Paragraph 1 Item 1 also every suspicion of such an illness, must be reported to the district administrative authority (health authority) in whose area the sick person or person suspected of being ill is staying or the death occurred, stating the name, age and address and, where possible, specifying the illness, within 24 hours.

(2) Within the same period, persons who, without being ill themselves, excrete pathogens of bacterial food poisoning, paratyphoid, communicable dysentery or typhus must be reported to the district administrative authority (health authority).

(Note: Paragraph 3 repealed by [Federal Law Gazette I No. 63/2016](#))

Persons obliged to report

§ 3. (1) The following are obliged to file the report:

1. The doctor called in, in hospitals, maternity hospitals and other humanitarian institutions the head of the institution or the head of a department obliged to do so by special regulations;

- 1a. any laboratory that diagnoses the causative agent of a notifiable disease;
2. the midwife called in;
3. the professional caregivers who are responsible for the care of the patient;
4. the head of the household (director of an institution) or the person entrusted with managing the household (management of the institution) in his place;
5. the heads of public and private educational institutions and kindergartens with regard to the pupils, teachers and school staff under their management;
6. the occupant of the dwelling or the person entrusted with the care of the dwelling in his place;
7. Owners of restaurants and bars and their officially approved representatives with regard to the persons they accommodate or employ;
8. the owner of the house or the person entrusted with the implementation of the house rules;
9. in the case of anthrax, psittacosis, glanders, puerpal fever and rage disease (Lyssa) and bite injuries caused by animals that are or are suspected of being rage-stricken, tularemia, Bang's disease, trichinosis, leptospiral diseases and infections with the influenza virus A/H5N1 or another avian influenza virus, also veterinarians if, in the exercise of their profession, they become aware of the infection of a person or the suspicion of such an infection;
10. the coroner.

(2) The obligation to report applies to the persons referred to in paragraphs 2 to 8 only if there is no obligated person previously mentioned in the list of paragraphs 1 to 7 above.

Register of notifiable diseases

§ 4. (1) The Federal Minister responsible for health care must maintain an electronic register for notifications pursuant to Section 1, Paragraphs 1 and 2, Section 2, Paragraph 2, and notifications pursuant to Sections 5 and 11 of the Tuberculosis Act, [Federal Law Gazette No. 127/1968](#) . The Federal Minister responsible for health care is the controller. With regard to the processing of personal data under this federal law, there is no right of objection pursuant to Article 21 of Regulation (EU) 2016/679 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation), OJ L 119, May 4, 2016, p. 1.

(2) The notification register serves to fulfil the tasks of the district administrative authorities to conduct surveys on the occurrence of notifiable diseases (Section 5 of this Federal Act and Section 6 of the Tuberculosis Act) as well as to prevent the spread and combat notifiable diseases (Sections 6 to 26a of this Federal Act and Sections 7 to 14 and 23 of the Tuberculosis Act) and to fulfil the tasks of the state governors within the framework of their coordination function pursuant to Section 43 Paragraphs 5 and 6.

(3) District administrative authorities are obligated to process data from notifications pursuant to Section 1, Paragraphs 1 and 2, and Section 2, Paragraph 2, as well as data collected during surveys on the occurrence of notifiable diseases, and data related to measures taken in the register. District administrative authorities are also obligated to process data from notifications pursuant to Sections 5, 10, and 11 of the Tuberculosis Act, data collected during surveys on the occurrence of tuberculosis, and data related to measures taken in the register.

(Note: Paragraphs 3a and 3b expire on 30 June 2023)

(4) The following data categories are processed in the register:

1. Data for the identification of sick persons, persons suspected of being ill, those bitten, deceased or those excreting the virus (name, gender, date of birth, place of residence, telephone number and email address, if available, social security number and area-specific personal identification number (Section 9 E-GovG, [Federal Law Gazette I No. 10/2004](#))),
2. if applicable, death data (date, cause of death, autopsy status),
3. the clinical data relevant to the notifiable disease (history and course of the disease) as well as the information and laboratory data referred to in Section 24c (2) GTelG 2012,
4. Data on the environment of the sick person, suspected of having the disease, bitten, deceased or excreted, insofar as they are related to the notifiable disease, as well as data for the identification of contact persons (name, telephone number, e-mail address, place of residence) and
5. Data on the precautionary measures taken.

(5) When processing data in accordance with paragraphs 2 to 4, the use of the name and the area-specific personal identification number GH is permitted.

(6) Any processing of data stored in the register may only be carried out in accordance with this Federal Act, the Tuberculosis Act, or the Zoonoses [Act \(Federal Law Gazette I No. 128/2005\)](#) . The transfer of personal data processed in accordance with the provisions of this Federal Act to third parties and the further processing of personal data for other purposes is not permitted unless expressly provided otherwise in this Federal Act.

(7) Within the scope of its authority, the district administrative authority may, for the purposes of surveys on the occurrence, prevention, and control of a notifiable disease under this federal law and the Tuberculosis Act, process all data of a person in the register

that are related to a specific suspected case, illness, or death on a personal basis. The state governor may, within the scope of his coordination function pursuant to Section 43, Paragraphs 5 and 6, process all data of a person in the register that are related to a specific suspected case, illness, or death on a personal basis. If an expert has been appointed by the Federal Minister responsible for veterinary affairs pursuant to Section 3 (7) of the Zoonoses Act or by the Federal Minister responsible for health pursuant to Section 5 (4) of this Federal Act to investigate cross-state zoonotic outbreaks or outbreak clusters, this expert may process all personal data of individuals in the register who may be related to this zoonotic outbreak or outbreak cluster, insofar as this is necessary to investigate this zoonotic outbreak or outbreak cluster. The Federal Minister responsible for health may process the personal data of an individual in the register in order to fulfill the obligations under Articles 15 and 16 of the General Data Protection Regulation.

(8) The Federal Minister responsible for health care may process the data in the register in pseudonymized form for the purposes of epidemiological surveillance, quality assurance, and to fulfill reporting obligations arising from EU law. The Federal Minister responsible for health care may engage third parties as data processors for this purpose. The district administrative authority and the state governor may process the data in the register in pseudonymized form for the purposes of epidemiological surveillance.

(9) The Federal Minister responsible for Health, Family, and Youth must ensure that any access to the register is only possible upon proof of unique identity (Section 2(2) of the E-GovG) and authenticity (Section 2(5) of the E-GovG). He or she must ensure that appropriate, state-of-the-art precautions are taken to prevent the destruction, alteration, or retrieval of the register data by unauthorized users or systems, and that all usage processes, including entries, modifications, queries, and transmissions, are logged to the necessary extent.

(10) The confidentiality of data transmission must be ensured by encrypted transmission procedures that correspond to the state of the art.

(11) The data in the register shall be deleted as soon as they are no longer required for the performance of the tasks of the district administrative authorities in connection with the collection of information on the occurrence and in connection with the prevention and control of a notifiable disease under this Federal Act and under the Tuberculosis Act.

(12) The district governor, the state governor, and the federal minister responsible for health are obligated to assign and document access authorization for each user individually. Authorized users must be excluded from further exercise of their access authorization if they no longer need it to continue fulfilling the tasks assigned to them or if they do not process the data in accordance with its intended purpose.

(13) The district administrative authorities and the state governor must ensure, through organizational and technical measures, that access to rooms where access to the register is possible is, in principle, only permitted to employees of the authority. If it is necessary to open rooms where access to the register is possible, it must be ensured that outsiders cannot inspect the register data.

(14) If the communication device enabling access to the register is removed from the authority's area, it must be ensured that unauthorized access and use are excluded.

(15) Laboratories must fulfill their reporting obligations (Section 1 in conjunction with Section 3 Paragraph 1 Item 1a of this Federal Act and Section 5 Paragraph 2 of the Tuberculosis Act) electronically by entering the report into the register. The Federal Minister responsible for health care must specify the details of these reports by regulation.

(16) The Austrian Agency for Health and Food Safety, as the national reference center and reference laboratory for tuberculosis, must fulfill its reporting obligation under Section 1 in conjunction with Section 3, Paragraph 1, Item 1a (laboratory findings) by entering the report electronically into the register. Furthermore, the results of resistance testing and typing must be entered electronically into the register.

(17) The Federal Minister responsible for health care may, by regulation and subject to technical feasibility, provide that those subject to reporting obligations under Section 3, Paragraph 1, Item 1 may also fulfill their reporting obligations under Section 1 electronically by entering the report into the register. In doing so, the reporting parties must implement the data security measures provided for in Paragraphs 12 to 14.

(Note: Paragraphs 18 to 24 repealed by Article 1, paragraph 7, [Federal Law Gazette I No. 100/2021](#))

Statistics Register

§ 4a. (1) Immediately after the report has been submitted, the data (Section 4, Paragraph 3 and Paragraph 3a and Paragraphs 14 to 17) must also be transferred to a statistical register maintained by the Federal Minister responsible for health care. This register serves the purposes of statistics and scientific research. ^(Note 1)

(2) At the time of entry into force of this Federal Act in the version of the 2nd Material Data Protection Adaptation Act, [Federal Law Gazette I No. 37/2018](#) , data already contained in the register (Section 4) shall be transferred to the Statistics Register at that time.

(3) The data must be transferred to the statistical register after replacing the personal identification data with a unique, non-traceable, encrypted personal identifier. Gender and year of birth are not subject to pseudonymization.

(4) According to Article 5 (1) (e) of the General Data Protection Regulation, the data in the statistical register may be stored without restriction and, if necessary, otherwise processed in accordance with Article 89 (1) of the General Data Protection Regulation.

(5) The Federal Minister responsible for health, the state governors and district administrative authorities, the Austrian Agency for Health and Food Safety and Gesundheit Österreich GmbH are entitled to process the data in the register for the purposes stated in paragraph 1.

(Note: Paragraph 6 expires on 30 June 2023)

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Note 1: Article 3(5) of the amendment [Federal Law Gazette I No. 69/2023](#), reads: "In Section 4a, Paragraph 1, the word and character sequence "and Paragraph 3b" shall be omitted." This instruction could not be implemented.

Surveys on the occurrence of a disease

§ 5. (1) For every report or suspicion of a notifiable disease, the competent authorities must, where possible and feasible, initiate the necessary inquiries and investigations to determine the disease and the source of infection, using the doctors at their disposal. These investigations must be carried out to the extent necessary to prevent the spread of the disease in question. Those who are ill, suspected of being ill, or suspected of being contagious are obliged to provide the competent authorities with the necessary information and to undergo the necessary medical examinations and to have specimens taken. For the purpose of identifying pathogens, specialist testing facilities should be used wherever possible.

(2) The conditions under which and by which bodies the opening of corpses and the examination of body parts may be carried out during these investigations shall be determined by regulation.

(3) At the request of the district administrative authority, all persons, in particular treating physicians, laboratories, employers, family members and staff of community facilities, who could contribute to the surveys, are obliged to provide information.

(4) In connection with the tracing of contact persons within the framework of Decision No. 1082/2013/EU on serious cross-border threats to health and repealing Decision No. 2119/98/EC, OJ L 293 of 5 November 2013, p. 1, all natural and legal persons who have relevant information for tracing contact persons in cross-border cases, such as passenger transport companies or accommodation providers, are obliged to provide information to the Federal Minister responsible for health upon request, insofar as this is necessary in the individual case. This information shall include in any case the name and - if known - the date of birth, telephone number and email address and may include details of the travel route, fellow travelers or guests accommodated. The data must be deleted immediately by the health authorities when it is no longer required for contact tracing.

(5) The Federal Minister responsible for health may appoint employees of the Austrian Agency for Health and Food Safety as experts to investigate outbreak clusters if these affect several federal states. These experts are authorized, while observing all data protection requirements, to inspect all documents, make copies, and contact the affected persons, including contact persons, directly, insofar as this is absolutely necessary to investigate the outbreak cluster. The federal state authorities responsible under this federal law are obligated to provide these experts, upon request, with the information absolutely necessary to carry out their duties.

Early detection and monitoring programs

§ 5a. (1) The Federal Minister responsible for health can issue a report for notifiable diseases and non-notifiable communicable respiratory diseases

1. to assess the prevalence of pathogens of communicable diseases, the occurrence and spread of communicable diseases and the burden of disease in the population,
2. to establish preventive measures,
3. for risk assessment in disease outbreaks,
4. to develop strategies and national programmes to deal with communicable diseases and pathogens,
5. to ensure the functionality of the health system

and implement early detection and surveillance programs for notifiable diseases to effectively combat disease.

(2) Within the framework of early detection and monitoring programs pursuant to paragraph 1, only non-personal data may be processed. This includes, in particular:

1. Epidemiological surveys to determine the spread of pathogens of certain diseases, the spread of certain diseases and immunity against certain diseases,
2. Wastewater monitoring,
3. Collection of non-personal health information on specific medical conditions for epidemiological purposes, and
4. Testing of anonymous samples collected for other purposes.

(3) The Federal Minister responsible for health may utilise appropriate bodies to carry out early detection and monitoring programmes. Suitable bodies include, in particular:

1. the Austrian Agency for Health and Food Safety GmbH,
2. Gesundheit Österreich GmbH, and
3. Universities and federal scientific institutions.

II. MAIN PIECE.

Measures to prevent and control notifiable diseases

Initiation of precautionary measures in the event of the occurrence of notifiable diseases.

§ 6. (1) In every case of a notifiable disease and every suspected case of such a disease, in addition to any investigations required under Section 5, the necessary precautions to prevent the further spread of the disease in question must be taken without delay, in accordance with the following provisions, for the duration of the risk of infection.

(2) Regulations of the district administrative authorities must be published electronically on the authority's website; however, where there are state legal provisions concerning the publication of regulations of the authority, they must be published in accordance with those provisions; they may also be published in other forms without affecting the publication, in particular by posting on the official notice board of the authority or on the official notice board of the municipalities in the affected area.

Note the following provision

For the legal effect of decisions issued on the basis of SARS-CoV-2, see section 3 [of Federal Law Gazette II No. 295/2022](#)

Isolation of sick people.

§ 7. (1) Regulations are used to identify those notifiable diseases for which isolation measures or travel restrictions can be imposed on sick, suspected sick or contagious persons.

(1a) To prevent the further spread of a notifiable disease listed in a regulation pursuant to paragraph 1, persons who are ill, suspected of being ill, or suspected of being contagious may be isolated or restricted from contact with the outside world if, based on the nature of the disease and the behavior of the affected person, there is a serious and significant risk to the health of other persons that cannot be eliminated by milder measures. In cases of an imminent danger of further spread, isolation may also be imposed without prior proceedings and before a decision is issued. A written decision must be issued within 48 hours; otherwise, the isolation will end.

(2) If appropriate isolation in accordance with the instructions given cannot be carried out in the patient's home or if isolation is not carried out, the patient must be placed in a hospital or other suitable room if the transfer can be carried out without endangering the patient.

(3) For the purpose of isolation, where it appears necessary in view of local conditions, suitable rooms and means of transport recognised as permissible shall be made available in a timely manner, or portable barrack hospitals equipped with the necessary facilities and staff shall be set up.

(4) Except in cases of isolation of a sick person within the meaning of paragraph 2, transfer from the dwelling in which he is located may only take place with official authorisation and subject to strict observance of the precautionary measures to be ordered by the authority.

(5) This authorization shall only be granted if there is no risk of endangering public opinion and the patient is either to be taken to an institution designated for the admission of such patients or if the transfer appears absolutely necessary in the circumstances.

Legal protection in the event of isolation

§ 7a. (1) Persons who are or have been isolated pursuant to Section 7 or who have been ordered to be isolated have the right to appeal to the Regional Administrative Court, claiming that their rights have been violated.

(2) An appeal against the order for isolation by means of a mandate notice (Section 57 (1) AVG) is not permissible.

(3) For appeals pursuant to paragraph 1, the provisions of the Administrative Court Act (VwGVG) applicable to appeals pursuant to Article 130 paragraph 1 item 2 of the Federal Constitutional Act (B-VG) apply, provided that the authority being appealed is the authority that issued the contested decision or to which the isolation order is attributable. Local jurisdiction lies with the regional administrative court of the state in which the authority being appealed is located. The regional administrative court must immediately inform the authority being appealed of the receipt of the appeal.

(4) The State Administrative Court's decision on the legality of the isolation must be issued within one week, unless the isolation has ended earlier. If the State Administrative Court has ordered the appellant to remedy a deficiency in the complaint within a specific period of time pursuant to Section 13 (3) of the General Administrative Court Act (AVG), the time until the deficiency is remedied or until the deadline expires without result shall not be included in the decision period.

(5) If the isolation is still ongoing, the Regional Administrative Court must in any case determine whether the conditions for the continuation of the isolation are met at the time of its decision.

(6) If isolation is to last longer than 14 days, the district administrative authority that ordered it must immediately notify the State Administrative Court. The State Administrative Court must decide on the necessity of isolation at intervals of no more than four weeks from the isolation or the last review. The district administrative authority that ordered isolation must submit the administrative files in

good time so that the State Administrative Court has one week to decide before the relevant hearings and must explain why continuation of isolation is necessary. Upon submission of the administrative files, the appeal is deemed to have been filed on behalf of the isolated person. In any event, the State Administrative Court must determine whether the prerequisites for isolation are met at the time of its decision and whether continuation of isolation is proportionate. This review is not necessary if an appeal has already been filed in accordance with paragraph 1.

Traffic restrictions

§ 7b. (1) If a notifiable disease listed in an ordinance pursuant to Section 7 (1) occurs, the Federal Minister responsible for health may, by ordinance, impose traffic restrictions for persons who are ill, suspected of being ill or suspected of being contagious.

(2) Traffic restrictions pursuant to paragraph 1 may only be imposed if the nature and extent of the disease do not require isolation pursuant to Section 7 paragraph 1a and the traffic restrictions are necessary to prevent the further spread of the notifiable disease listed in a regulation pursuant to Section 7 paragraph 1.

(3) Traffic restrictions pursuant to paragraph 1 include in particular:

1. Requirements and conditions for entering and driving into business premises, workplaces, retirement and nursing homes as well as residential facilities for people with disabilities, certain locations and public places as a whole, for using means of transport and for gatherings.
2. the prohibition of entering and driving into business premises, workplaces, retirement and nursing homes, residential facilities for people with disabilities and certain locations, the use of means of transport and meetings, if measures under paragraph 1 are not sufficient, whereby such measures must be taken in parallel if necessary.

(4) The requirements under paragraph 3(1) are, in particular, certain types or purposes of using places and means of transport.

(5) The following conditions may be considered in particular in accordance with paragraph 3(1):

1. the requirement to demonstrate only a low epidemiological risk,
2. the obligation to wear a mechanical protective device covering the mouth and nose area and
3. Distance rules.

(6) Certain places as referred to in paragraph 3 are certain public places and certain private places, with the exception of private residential areas.

(7) Public places as defined in paragraph 3 are those which can be entered or driven through by a group of persons not determined in advance.

Disinfection.

§ 8. (1) Objects and rooms suspected of being contaminated with pathogens of a notifiable disease (suspected of being contagious) are subject to official disinfection. If appropriate disinfection is not possible or too costly relative to the object's value, the object may be destroyed.

(2) Objects suspected of being contagious must not be withdrawn from disinfection or destruction and must not be removed from the home before these measures have been carried out.

(3) The person obliged to report the case in question pursuant to Section 3 must report the disinfection in the manner prescribed in Section 2.

(4) Disinfection must be carried out under professional supervision as required.

(5) The detailed provisions on the initiation and method of carrying out the disinfection and destruction of objects shall be issued by regulation.

Exclusion of individuals from educational institutions.

§ 9. (1) Residents of towns or houses where a notifiable disease has occurred may be excluded from attending educational institutions, kindergartens and similar establishments.

(2) The management of the institution must be informed of the exclusion.

(3) The excluded persons themselves, in the case of minors their legal representatives, as well as the bodies appointed to monitor visits to the institution are responsible for observing this prohibition.

Restrictions on water use and other precautionary measures.

§ 10. (1) In localities where a notifiable disease has occurred or which are threatened by such a disease which has occurred elsewhere, as well as in the vicinity of such localities, the use of public bathing, washing and toilet facilities may be restricted or

prohibited and other appropriate precautionary measures may be taken, insofar as this appears necessary to prevent the further spread of the disease.

(2) Similarly, in the event of the occurrence of typhus, paratyphoid, dysentery, typhus, Asiatic cholera, Egyptian ophthalmia, or anthrax, the use of springs, wells, aqueducts, streams, ponds, and other bodies of water may be restricted or prohibited. ([Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 2.)

(3) However, the prohibitions referred to in the previous paragraph do not extend to the use of water for the generation of motor power, for transport and industrial purposes, but do extend to the use of water for the production and distribution of foodstuffs and beverages.

Restriction of food traffic.

§ 11. The distribution of food from sales premises, houses or, if necessary, from individual localities in which scarlet fever, diphtheria, abdominal typhus, paratyphoid, dysentery, typhus, smallpox, Asiatic cholera, plague or Egyptian ophthalmia has occurred may be prohibited or made subject to certain precautions.

([Federal Law Gazette No. 449/1925](#) , Article III, paragraph 2.)

Locking down homes, banning funeral ceremonies.

§ 12. (1) In the event of scarlet fever, diphtheria, typhus, smallpox, Asiatic cholera or plague, unauthorized persons may not enter the rooms suspected of being contagious until disinfection has been carried out, and funeral meals and other funeral ceremonies may not be held in the same building.

(2) By regulation, it may be stipulated that the same prohibition shall also apply in the event of the occurrence of another notifiable disease.

Measures relating to corpses.

§ 13. (1) Corpses of persons infected with typhus, smallpox, Asiatic cholera, or plague must be transferred to a mortuary as quickly as possible.

(2) In the event of scarlet fever, diphtheria, anthrax or glanders, the transfer of the bodies of persons suffering from one of these diseases to a morgue may also be ordered.

(3) If the body cannot be transferred to a mortuary, it must be kept in a separate place until the burial in such a way that unauthorized persons do not have access to the body.

(4) If necessary, the transfer or separation of the body shall be carried out by force.

(5) Further provisions on the coffining, transfer and burial of bodies of persons suffering from notifiable diseases and on the establishment of mortuary chambers shall be issued by decree.

Extermination of animals.

§ 14. In order to prevent the further spread of communicable diseases, measures can be taken to eradicate animal pests.

([Federal Law Gazette No. 151/1947](#) , Article II Z 5 lit. e.)

Measures to prevent large crowds from gathering.

§ 15. (1) If and as long as this is absolutely necessary in view of the nature and extent of the occurrence of a notifiable disease in order to protect against its further spread, events that bring together large crowds of people are

1. to be subject to a permit requirement,
2. to comply with certain conditions or requirements or
3. to restrict to certain groups of people or professions.

If necessary, the measures specified in paragraphs 1 to 3 must be taken concurrently. If the measures specified in paragraphs 1 to 3 are insufficient, events must be prohibited.

(2) Depending on the epidemiological requirements, the conditions or requirements pursuant to paragraph 1 may include, in particular:

1. Requirements for distance rules,
2. Obligations to wear a mechanical mouth and nose protection device,
3. Limitation of the number of participants,
4. Requirements for the availability and use of sanitary facilities and disinfectants,

(Note: Item 5 expired on 31.12.2021)

6. A prevention concept to minimize the risk of infection and spread. A prevention concept is a programmatic presentation of regulations to prevent the further spread of a specifically specified notifiable disease within the meaning of this federal law.

(3) Conditions or requirements within the meaning of paragraph 1 may not include the use of contact tracing technologies.

(4) Restrictions on groups of persons or professions pursuant to paragraph 1 item 3 may not be based on gender, disability, ethnic origin, age, religion, ideology, sexual orientation or on the existence of any assignment to a risk group for a notifiable disease.

(5) The district administrative authority may monitor compliance with requirements and conditions – including through on-site inspections. For this purpose, the district administrative authority's bodies and the experts they engage are authorized to enter and inspect event venues, as well as to inspect all documents related to compliance with requirements and conditions under this federal law and to secure evidence. The event organizer must allow the district administrative authority's bodies and the experts they engage to enter and inspect the event venue, provide them with the necessary information, and submit the required documents.

(6) If a regulation is issued or amended pursuant to paragraph 1 and this results in an event no longer being permitted, a permit already granted may not be exercised for the duration of this legal situation. By way of derogation from the first sentence, this regulation may stipulate that existing permits may be exercised subject to compliance with the provisions of this regulation that were not in effect at the time the permit was issued and are sufficiently specific. In such a case, the permits shall be deemed amended in accordance with the regulation for the duration of the new legal situation. Section 68 paragraph 3 of the General Administrative Procedure Act (AVG) remains unaffected.

(7) If a regulation is issued or amended on the basis of paragraph 1 and this has the consequence that any authorisation could be granted in a manner more favourable to the organiser, the authority may not reject a new application for authorisation on the grounds that the matter has been decided.

(Note: Paragraph 8 repealed by Section 50 Paragraph 21 as amended by Federal [Law Gazette I No. 90/2021](#))

(Note: Paragraph 9 repealed by Article 1, paragraph 7, [Federal Law Gazette I No. 90/2021](#))

Special reporting requirements.

§ 16. For places and areas where there is a risk of a notifiable disease emerging or being introduced from other areas, special regulations may be issued regarding the registration of foreigners and local residents and the keeping of records of such registrations, without prejudice to the applicable registration regulations.

Surveillance of certain people.

§ 17. (1) Persons deemed to be carriers of pathogens of a notifiable disease may be subjected to special sanitary surveillance or monitoring. Subject to further instructions from the district administrative authority (health department), they may not engage in the production or processing of food in a manner that poses a risk of transmitting pathogens to other persons or to food. These persons may be subject to special reporting requirements, periodic medical examinations, and, if necessary, disinfection and isolation in their homes. If isolation in the home is not practical, isolation and provision of food in separate rooms may be ordered.

(2) If the suspicion of infection relates to the transmission of typhus, smallpox, Asiatic cholera or plague, the person suspected of being infected must in any case be subjected to sanitary observation and surveillance within the meaning of the preceding paragraph.

(3) Persons professionally involved in the treatment of sicknesses, nursing, or funeral arrangements, as well as midwives, must observe special precautions. Travel and occupational restrictions, as well as protective measures, particularly vaccinations, may be imposed on such persons.

(4) If this is absolutely necessary in view of the nature and extent of the occurrence of a notifiable disease in order to protect against its further spread, the district administrative authority may, in individual cases, order the administration of vaccinations or the administration of prophylactic drugs for certain persons at risk.

(5) Section 7a shall apply mutatis mutandis to isolations pursuant to paragraph 1.

Closure of educational institutions.

§ 18. The complete or partial closure of educational institutions, kindergartens, and similar establishments may be ordered in the event of the outbreak of a notifiable disease. The responsible school authority must be notified of this order, which must implement the closure immediately.

Prohibition of door-to-door sales.

§ 19. (1) The practice of peddling and itinerant activities may be prohibited in the territory of one or more localities or municipalities if a notifiable disease occurs.

(2) This ban and its lifting shall also be announced in the neighbouring municipalities if necessary.

Note the following provision

see Art. 1, [Federal Law Gazette II No. 74/2020](#)

Restriction of operations or closure of commercial enterprises.

§ 20. (1) In the event of the outbreak of scarlet fever, diphtheria, abdominal typhus, paratyphoid, bacterial food poisoning, typhus, smallpox, Asiatic cholera, plague, or anthrax, the closure of establishments in which certain trades are carried out whose operation poses a particular risk of the spread of this disease may be ordered for specific areas to be designated, if and to the extent that, given the conditions existing in the establishment, maintaining the establishment would pose an urgent and serious danger to the employees themselves and to the public in general through the further spread of the disease. ([Federal Law Gazette No. 449/1925](#) , Article III, paragraph 2, and [Federal Law Gazette No. 151/1947](#) , Article II, paragraph 5, letter h.)

(2) If one of the diseases listed in the first paragraph occurs, the operation of individual commercial enterprises with a fixed place of business may be restricted or the closure of the business premises may be ordered, and individual persons who come into contact with sick persons may be prohibited from entering the business premises, subject to the other conditions specified therein.

(3) However, the closure of a business establishment may only be ordered if exceptional risks make it necessary.

(4) The extent to which the precautions referred to in paragraphs 1 to 3 may also be taken in the event of the occurrence of another notifiable disease shall be determined by regulation.

Designation of houses and apartments.

§ 21. (1) In the event of an outbreak of typhus, paratyphoid, typhus, smallpox, Asiatic cholera, or plague, houses containing infected persons may be marked with appropriate signs; in the event of scarlet fever, diphtheria, or epidemic rigor mortis, apartments may be marked with appropriate signs. These signs may not be removed until disinfection has been completed. ([Federal Law Gazette No. 449/1925](#) , Article III, Paragraph 1.)

(2) The form of the designation is determined by regulation.

Eviction of apartments.

§ 22. (1) The district administrative authority must order the evacuation of apartments and buildings if this measure is absolutely necessary to protect against the further spread of a notifiable disease due to the nature of its occurrence.

(2) The residents concerned shall be provided with appropriate accommodation and food at their request, and free of charge if they are destitute.

Traffic restrictions for certain items

§ 23. In the event of the occurrence of scarlet fever, diphtheria, abdominal typhus, paratyphoid, dysentery, typhus, smallpox, Asiatic cholera, plague, Egyptian ophthalmia, anthrax or glanders, the trade in objects which are considered to be carriers of pathogens and which originate from an area affected by the disease may be prohibited or made subject to certain precautions.

Traffic restrictions in epidemic areas

§ 24. (1) If absolutely necessary to prevent further spread of a notifiable disease, given the nature and extent of the outbreak, traffic restrictions must be imposed on persons staying in epidemic areas. Restrictions on entry to epidemic areas may also be imposed.

(2) Traffic restrictions for persons staying in epidemic areas pursuant to paragraph 1 include in particular:

1. Conditions and requirements for leaving the epidemic area, such as
 - a) the existence of specific purposes for leaving the epidemic area,
 - b) the requirement to demonstrate only a low epidemiological risk and
 - c) entering self-monitored home quarantine after leaving the epidemic area,
2. the prohibition of leaving the epidemic area if measures under paragraph 1 are not sufficient, whereby such measures must be taken in parallel if necessary.

(3) Restrictions on entering epidemic areas pursuant to paragraph 1 include, in particular:

1. Conditions and requirements for entering the epidemic area, such as
 - a) the existence of specific purposes for entering the epidemic area,
 - b) the requirement to demonstrate only a low epidemiological risk and
 - c) the obligation to wear a mechanical protective device covering the mouth and nose area,
2. the prohibition of entry into the epidemic area if measures under paragraph 1 are not sufficient, whereby such measures must be taken in parallel if necessary.

(4) Epidemic areas pursuant to paragraph 1 are defined as certain geographically defined or delimitable parts of the federal territory in which exceptional regional circumstances exist with regard to the spread of a notifiable disease. Exceptional regional circumstances exist, for example, if, based on the assessment of the epidemiological situation compared to the national level, a particularly high risk of the spread of the respective notifiable disease is assumed, or if, due to significantly changed characteristics of the pathogen, the control measures already implemented or the ongoing control strategy are significantly jeopardized.

(Note: Paragraph 5 repealed by Article 3(1), [Federal Law Gazette I No. 69/2023](#))

Traffic restrictions towards foreign countries

§ 25. (1) If this is absolutely necessary in view of the nature and extent of the occurrence of a notifiable disease in order to protect against its further spread, traffic restrictions must be imposed on the entry or transport of people into the federal territory or on the import and transit of goods.

(2) Entry into the federal territory is considered entry.

(3) Traffic restrictions for the entry or transport of people into the federal territory pursuant to paragraph 1 include in particular:

1. Conditions and requirements for the entry or transport of people into the federal territory such as
 - a) the existence of specific purposes for the entry or transport of people into the Federal territory,
 - b) the requirement to demonstrate only a low epidemiological risk,
 - c) entering self-monitored home quarantine after entering the federal territory and
 - d) the collection of names, contact details and entry or transport date in accordance with paragraph 5,
2. the prohibition of entry into the Federal territory as well as landing, docking or stopping bans, if measures under paragraph 1 are not sufficient, whereby such measures must be taken in parallel if necessary.

(4) Traffic restrictions for the import and transit of goods pursuant to paragraph 1 include in particular:

1. Conditions and requirements for the import and transit of goods, such as
 - a) disinfection,
 - b) goods inspection and
 - c) the restriction of the import and transit of goods to specific purposes,
2. the prohibition of the import and transit of goods if measures under paragraph 1 are not sufficient, whereby such measures must be taken in parallel if necessary.

(5) In a regulation ordering traffic restrictions pursuant to paragraph 3(1)(d), the following must be provided with regard to the data processed:

1. The data must be retained for a period to be specified in this regulation. The retention period must be based on the current state of scientific knowledge, particularly regarding the incubation period and infectious period, as well as the requirements for contact tracing of the respective disease.
2. Processing of the data for other purposes is not permitted.
3. After the retention period has expired, the data must be deleted immediately.
4. Appropriate security measures must be taken to ensure that the data collected cannot be viewed by third parties.

Regulations relating to domestic transport companies.

§ 26. (1) For the operation of public transport undertakings (railways, inland waterway undertakings, rafts, etc.) and for traffic on them, an ordinance shall determine how and by which bodies the measures for the prevention and control of notifiable diseases referred to in this Act are to be applied.

(2) Similarly, the necessary provisions for the application of the provisions of this Act to ships and port structures and other objects within the jurisdiction of the maritime authorities shall be issued by decree.

Special provisions concerning zoonoses

§ 26a. (1) Laboratories that diagnose zoonotic pathogens within the meaning of Annex I of the Zoonoses Act, [Federal Law Gazette I No. 128/2005](#) , must – insofar as diseases caused by these pathogens are subject to notification under this Federal Act – transmit the corresponding isolates or, in the case of *Campylobacter*, on the basis of a sentinel system, to the responsible national reference laboratory for further testing.

(2) The national reference laboratories are obliged to immediately report the spatially and temporally concentrated occurrence of zoonotic pathogens within the meaning of paragraph 1 in a federal state or across federal states to the heads of the state commissions for zoonosis control, the district administrative authorities concerned, the office of the Federal Commission for the Monitoring of Zoonoses and the Austrian Agency for Health and Food Safety.

(3) The national reference laboratories are obliged to submit to the heads of the state commissions for zoonosis control a monthly list of all findings of diseases caused by zoonotic pathogens within the meaning of paragraph 1 for the respective federal state.

(4) Art. The Federal Minister for Health and Women shall determine the content and scope of the reports pursuant to paragraphs 2 and 3 by regulation. In doing so, the transmission of personal data may be specified to the extent necessary to investigate foodborne outbreaks caused by zoonotic pathogens.

Special provisions concerning unpreventable diseases

§ 26b. Laboratories that diagnose meningococci, pneumococci or Haemophilus influenzae must – to the extent that diseases caused by these pathogens are subject to notification – transmit the corresponding isolates to the responsible national reference laboratory for further testing.

Epidemic doctors.

§ 27. (1) If, upon the outbreak of a notifiable disease, the number of physicians available in the affected areas, primarily municipal and district physicians, is insufficient to effectively combat the disease, epidemic doctors can be appointed for the duration of the need. Epidemic doctors can be appointed by the state governor if their work is to be able to extend to the entire state.

(2) When epidemic doctors are appointed, their remuneration is regulated by contract with the proviso that in the event of their illness, they continue to receive their full salary even if it does not give rise to occupational incapacity.

Measures regarding pathogens.

§ 28. Special regulations may be issued by decree for the conduct of investigations and work with pathogens, as well as for their storage and trade.

Involvement of public security agencies

§ 28a. (1) The public security service bodies must, at their request, support the authorities and bodies competent under this federal law in the exercise of their duties as described in Sections 5, 6, 7, 7b, 15, 17, 22, 24 and 25 or in the enforcement of the measures provided for, if necessary by using coercive measures. Bodies pursuant to Section 12b of the Border Control Act - GrekoG, [Federal Law Gazette No. 435/1996](#), must, when exercising the powers granted to them under Section 12a GrekoG, support the authorities and bodies competent under this federal law in the exercise of their duties as described in Section 25, at their request.

(1a) The public security service bodies shall cooperate in the implementation of this Federal Law and the regulations issued on the basis of this Federal Law by

1. Measures to prevent potential administrative offenses,
2. Measures to initiate and secure administrative penal proceedings and
3. the punishment of administrative offenses through administrative penalty orders (Section 50 VStG).

For this purpose, entry to villages, business premises, other buildings, and means of transport may be permitted, provided this is absolutely necessary for the purpose of conducting survey and control measures under this federal law. Private residential areas may not be entered.

(1b) The public security service bodies shall, in accordance with the resources available to them, cooperate in measures pursuant to Section 5 at the request of the authorities competent under this Federal Act – if urgently necessary. The duty to cooperate includes

1. the collection of identity data (name, place of residence),
2. the inquiry about possible symptoms of illness and
3. the collection of contact details (telephone number, email address)

of persons who are ill, suspected of being ill, or suspected of being contagious as a processor (Article 4(8) of Regulation (EU) 2016/679 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation), OJ L 119 of 4 May 2016, p. 1, as corrected by OJ L 127 of 23 May 2018, p. 2) for the authorities responsible under this federal law. For this purpose, the public security service bodies may query the Central Register of Residents. This data must be transmitted electronically via a secure line to the authorities responsible under this federal law immediately after it has been collected. The data collected by the public security service bodies may only be processed for the purpose of contacting the data subject and must be deleted immediately after it has been transmitted to the authorities responsible under this federal law. Processing of the data for other purposes is not permitted.

(2) If, according to the professional assessment of the authorities competent under this Federal Act, within the framework of the support provided for in paragraph 1 to the public security service bodies, there is a risk due to the nature of the communicable disease and its transmission possibilities that can only be countered by special protective measures, the authorities competent under this Federal Act are obliged to take adequate protective measures.

Measures in the context of a pandemic

§ 28b. (1) The national IHR contact point within the meaning of the International Health Regulations, [Federal Law Gazette III No. 98/2008](#), is the Federal Ministry responsible for health (Article 4 paragraphs 1 and 2 IHR).

(2) The decision as to which information the national IHR focal point forwards to the World Health Organization (hereinafter: WHO) and to which authorities information transmitted by the WHO to the national IHR focal point is forwarded is made by the Federal Minister responsible for health.

(3) The district administrative authorities and state governors shall promptly provide the Federal Ministry responsible for health with all information at their disposal that is necessary for notifications to the WHO within the meaning of Articles 6 to 12 and 19(c) IHR.

(4) To the extent necessary to fulfil the obligations arising from the IHR, district administrative authorities and state governors are authorised to transmit personal information within the scope of paragraph 3 and the Federal Minister responsible for health is authorised to transmit personal information to district administrative authorities, state governors, the WHO and competent authorities abroad.

III. MAIN PIECE.

Compensation and reimbursement of costs.

Right to compensation.

§ 29. (1) Appropriate compensation shall be granted for objects which have been subjected to official disinfection in accordance with the provisions of this Act and which have been damaged in the process to such an extent that they can no longer be used for their intended purpose, as well as for objects which have been destroyed.

(2) The compensation shall be paid to the person in whose possession the item was.

(3) No compensation will be provided for items owned by a public entity (federal, state, district, local municipality, school district, etc.) or a public fund.

Loss of right to compensation.

§ 30. (1) The right to compensation shall be lost if the owner or possessor of the object has committed an act or omission contrary to the provisions of this Act or the orders issued pursuant thereto with regard to the disease for the prevention or control of which disinfection or destruction was ordered.

(2) Likewise, the right to compensation is lost if the owner of the damaged or destroyed objects took possession of them or individual items although he knew or had to assume under the circumstances that they were already contaminated with the pathogen or that they had to be disinfected by order of the authorities.

Determination of the amount of damage.

§ 31. (1) If the damage caused by disinfection or destruction cannot be adequately determined on the basis of the statement of the owner, possessor or custodian or other suitable evidence, it shall be assessed before return or destruction by sworn experts and, where this is not feasible, by impartial witnesses who are able to assess the value of the damaged objects.

(2) The assessment will not be necessary if the owner or possessor of the object declares that he or she will not assert a claim for compensation.

Compensation for loss of earnings.

§ 32. (1) Natural and legal persons as well as partnerships under commercial law shall be paid compensation for the financial losses caused by the obstruction of their acquisition if and to the extent that

1. they have been separated in accordance with Sections 7 or 17, or
 - 1a. traffic restrictions have been imposed on them on the basis of a regulation pursuant to Section 7b Paragraph 1, or
2. they have been prohibited from selling foodstuffs in accordance with Section 11, or
3. they have been prohibited from pursuing gainful employment pursuant to Section 17, or
4. they are employed in a company whose operations are restricted or closed in accordance with Section 20, or
5. they operate a business that has been restricted or blocked in its operations pursuant to Section 20, or
6. they live in apartments or buildings whose eviction has been ordered in accordance with Section 22, or
7. they are staying in an epidemic area for which traffic restrictions have been imposed pursuant to Section 24 or are subject to restrictions on entry,

and this resulted in a loss of earnings.

(Note: Paragraph 1a repealed by Article 3(1), [Federal Law Gazette I No. 69/2023](#))

(2) The remuneration shall be paid for each day covered by the official order referred to in paragraph 1.

(3) Remuneration for persons in an employment relationship is to be calculated based on regular pay within the meaning of the Continued Remuneration Act, [Federal Law Gazette No. 399/1974](#) . Employers must pay them the due amount of remuneration on the dates customary for the payment of wages in the company. The entitlement to remuneration from the federal government passes to the employer at the time of payment. The employer's share of statutory social insurance contributions to be paid by the employer for the period of occupational disability and the supplement pursuant to Section 21 of the Construction Workers' Holiday Act 1972, Federal Law Gazette No. 414, must be reimbursed by the federal government.

(3a) The entitlement to remuneration from the Federal Government pursuant to paragraph 3 shall exist regardless of any private or public law obligations to continue paying remuneration or emoluments.

(4) For self-employed persons and companies, compensation is to be calculated based on comparable updated economic income.

(5) Amounts due to the person entitled to compensation due to such a disability under other regulations or agreements, as well as from other gainful employment undertaken during the period of disability, shall be deducted from the amount of compensation due. This does not apply in the case of continued payment of salary or remuneration pursuant to paragraph 3a.

(6) The Federal Minister responsible for health care may, if and to the extent that this is necessary to ensure uniform administrative management, issue a regulation setting out more detailed rules for calculating the amount of compensation or remuneration for loss of earnings.

(7) Decisions issued on the basis of this provision which are based on incorrect information provided by an applicant regarding the facts justifying the claim suffer from an error which is threatened with nullity within the meaning of Section 68 (4) (4) AVG.

Deadline for asserting a claim for compensation or reimbursement for loss of earnings.

§ 33. The claim for compensation pursuant to Section 29 must be asserted within six weeks of the disinfection or return of the object or after notification of the destruction, and the claim for compensation for loss of earnings pursuant to Section 32 must be asserted within six weeks of the day on which the official measures were lifted, with the district administrative authority in whose area these measures were taken, failing which the claim shall expire.

Reimbursement of treatment costs for persons bitten by angry dogs

§ 33a. (1) The costs of treatment for persons bitten by a dog that is enraged or suspected of being enraged must be borne by the solvent dog owner, unless a health insurance provider, a health care institution or an accident insurance provider is required to cover the costs.

(2) If the dog owner is unable to pay or cannot be identified, the treatment costs (paragraph 1) shall be borne one-third by the municipality in whose area the bite injury occurred and two-thirds by the federal government.

(3) Claims for compensation under paragraphs 1 and 2 must be submitted to the district administrative authority within six months of the end of treatment, failing which they will be excluded.

Rest and care for doctors and their dependents.

§ 34. (1) If a physician becomes incapacitated or dies while treating a notifiable disease in the country, he or she, and in the event of his or her death, his or her survivors, are entitled to retirement benefits and pensions. The general pension norms apply to the award of these retirement benefits and pensions, as well as the death benefit. ([Federal Law Gazette No. 161/1925](#)).

(2) If the doctor or his survivors are entitled to benefits from his employment under other provisions, these benefits shall, in the cases referred to in paragraph 1, be supplemented to the extent prescribed in the Regulation [Federal Law Gazette No. 161/1925](#) or in a provision replacing it.

(3) If the pension and benefits due to the doctor or his survivors under other provisions arising from his employment relationship reach or exceed the amount prescribed in paragraph 1, the preceding provisions of this paragraph shall not apply.

Rest and care for caregivers and their dependents.

§ 35. (1) If a caregiver becomes incapacitated or dies as a result of their permanent or temporary employment in the public health service while treating a notifiable disease, they and, in the event of their death, their survivors are entitled to benefits for retirement and care. In addition, the general pension norms apply to the award of these benefits for retirement and care, as well as the death benefit. ([Federal Law Gazette No. 161/1925](#)).

(2) If the carer or their survivors are entitled to benefits from their employment relationship under other provisions, these benefits shall be supplemented in the cases referred to in paragraph 1 to the extent prescribed in the Regulation [Federal Law Gazette No. 161/1925](#) or in a provision replacing it.

(3) If the pension and benefits due to the carer or their survivors under other provisions arising from their employment relationship reach or exceed the amount prescribed in paragraph 1, the preceding provisions of this paragraph shall not apply.

(4) If a carer falls ill under the conditions referred to in paragraph 1 without the effects provided for therein occurring, he or she shall be entitled to continue receiving his or her salary.

(5) This paragraph also applies to persons employed in patient transport and disinfection pursuant to Section 8.

Costs covered by the federal treasury.

§ 36. (1) The following must be financed from the federal treasury:

- a) the costs of early detection and monitoring programmes pursuant to Section 5a;
 - b) the costs of the examinations carried out in state examination institutes pursuant to Section 5;
 - c) the costs of destroying animals that can spread disease germs (Section 14);
 - d) the costs of monitoring and isolating persons suspected of being infected (Section 17);
 - e) the costs of providing accommodation (Section 22);
 - f) the costs of provisions for traffic restrictions in relation to epidemic areas (Section 24);
 - G) the fees of epidemic doctors (§ 27);
 - h) compensation for items damaged or destroyed during disinfection (§§ 29 to 31);
 - i) compensation for loss of earnings (Section 32) and treatment costs pursuant to Section 33a, paragraph 2;
 - k) the pension and benefits for doctors and their survivors (§ 34);
 - l) the rest and care benefits for carers and their survivors (Section 35);
 - m) the costs of official acts to be carried out by the state authorities and bodies in connection with the implementation of this Act;
 - n) the costs for the assignments pursuant to Section 5 Paragraph 4.
- (2) The district administrative authority shall decide on claims made pursuant to paragraph 1.
- (3) The federal government shall bear the costs of the legal proceedings.

Reimbursement of costs by the parties.

§ 37. Declared no longer valid. (Transitional amendment, [Federal Law Gazette No. 269/1925](#) .)

IV. MAIN PIECE.

Criminal provisions.

Violation of a notification or reporting obligation.

§ 39. (1) Anyone who contravenes the provisions contained in this Federal Act or issued pursuant thereto regarding the filing of notifications and reports shall be guilty of an administrative offence and shall be punished by a fine of up to EUR 2,180 or, in the event of non-compliance, by imprisonment of up to six weeks.

(2) Criminal prosecution will not commence if the report was not made by those initially obliged to do so, but was made in a timely manner.

Other violations.

§ 40. (1) Anyone who, through actions or omissions

- a) the orders and prohibitions contained in the provisions of Sections 5, 8, 12, 13, 21 and 44 paragraph 2 or
- b) the official orders or prohibitions issued on the basis of the provisions listed in Sections 7, 9, 10, 11, 12, 13, 14, 15, 17, 19, 20, 21, 22, 23 and 24 or
- c) violates the orders or prohibitions contained in the regulations issued on the basis of this Federal Act or
- d) in breach of his duty of care, does not ensure that the person under his care and custody undergoes a medical examination and the taking of examination material ordered on the basis of Section 5 Paragraph 1,

is guilty of an administrative offence, unless the offence is punishable by a court, and is liable to a fine of up to 1 450 euros, or, in the event of non-payment, to imprisonment of up to four weeks.

(2) Anyone who enters an event venue pursuant to Section 15 contrary to the specified requirements or conditions commits an administrative offence and is liable to a fine of up to 500 euros, or in the event of non-payment, to imprisonment for up to one week.

Confiscation and forfeiture of objects.

§ 41. (1) Objects whose storage, treatment or use violates or circumvents a provision of this Act or an order issued under it may be confiscated by the appointed bodies of the health authorities.

(2) Objects used to violate or circumvent a traffic ban issued under Section 25 shall in any case be confiscated and declared forfeited by the district administrative authority in whose jurisdiction they were entered. ([StGBI. No. 94/1945](#) as amended by [BGBl. No. 142/1946](#) , Section II C, Section 15, Paragraph 2.)

(3) The seizure and forfeiture of objects within the meaning of paragraph 2 are independent of the initiation of criminal proceedings against a specific person and of his or her conviction.

(4) If the destruction of a forfeited item is not necessary, it must be sold by public auction after appropriate disinfection.

Dedication of fines.

§ 42. The fines and the proceeds from the confiscated items shall accrue to the municipalities in whose territory the criminal offence was committed or the confiscated item was entered, and shall be used for the purposes of public health.

V. MAIN PIECE.

General provisions.

Official powers.

§ 43. (1) The provisions of the Law of 30 April 1870, RGBl. No. 68, concerning the organisation of the public health service, remain unaffected by the provisions of this Law.

(Note: Paragraph 2 repealed by [Federal Law Gazette I No. 63/2016](#))

(3) In the event of the occurrence of scarlet fever, diphtheria, abdominal typhus, paratyphoid, spotted typhus, smallpox, Asiatic cholera, plague, Egyptian ophthalmia, rage disease, bite injuries from rage-stricken or suspected rage-stricken animals, and in other cases of urgent danger, the investigations referred to in paragraph 5 (1) and the precautions referred to in paragraphs 7 to 14 shall also be undertaken immediately on the spot by the competent doctors in the public health service.

(4) The initiation, implementation and implementation of all surveys and measures prescribed in this Act for the prevention and control of notifiable diseases and the monitoring and promotion of measures taken primarily by the competent health authorities are the responsibility of the district administrative authority.

(4a) To the extent that this Federal Act provides for the district administrative authority to issue ordinances, ordinances whose scope of application extends to several political districts or the entire state territory shall be issued by the State Governor. Ordinances of the district administrative authority that conflict with an ordinance of the State Governor shall cease to have effect upon the legal effectiveness of the ordinance of the State Governor, unless the ordinance provides otherwise. If the scope of application extends to the entire federal territory, ordinances shall be issued by the Federal Minister responsible for health. Any conflicting ordinance of the State Governor or a district administrative authority shall cease to have effect upon the legal effectiveness of the ordinance of the Federal Minister, unless the ordinance provides otherwise.

(5) The Governor shall be responsible, within his or her local sphere of responsibility, for coordinating and monitoring the measures taken by the district administrative authorities pursuant to paragraph 4. If there is suspicion or knowledge of an outbreak of a disease across federal states pursuant to Section 1 paragraphs 1 and 2, the Governors of the affected federal states shall cooperate and coordinate their activities.

(6) In the event of disease outbreaks, the Governor must immediately notify the Federal Ministry of Health, Family and Youth.

Special powers of the health authorities and their bodies.

§ 44. (1) Doctors appointed to examine a case of illness within the meaning of Section 43, Paragraph 3, or pursuant to an official order are authorized, after notifying the head of household or the person entrusted with the care of a sick person, to access the sick person or the corpse and to conduct the examinations necessary to diagnose the illness. This should be done, if possible, in consultation with the attending physician.

(2) The bodies officially delegated to carry out disinfection or other measures within the meaning of this Act may not be denied access to properties, houses and other facilities, in particular to rooms and objects suspected of being contagious, nor may they be denied access to carry out the necessary measures and dispose of objects and rooms required for disinfection or destruction.

(3) If there is suspicion that a notifiable disease is being concealed or that suspiciously contagious objects are being concealed, the district administrative authority may conduct a house search in accordance with the provisions of Sections 3 and 5 of the Act of October 27, 1862, RGBl. No. 88. ([StGBI. No. 94/1945](#) as amended by [BGBl. No. 142/1946](#) , Section II C, Section 15, Paragraph 2.)

Military precautions

§ 45. The implementation of the measures to be taken pursuant to this Act within the scope of the Federal Armed Forces and the Army Administration shall be the responsibility of the Federal Minister of Defense and the relevant military agencies. For these purposes, agreement must be maintained between these agencies and the relevant health authorities.

Postage handling.

§ 47. (1) Persons required to submit notifications and reports under this law must use envelopes or cards for non-registered mail and mailings without proof of delivery, bearing the inscription "Collect postage from recipient" and the official seal of the receiving authority. The receiving authority must pay the standard postage for the letter mail upon delivery of the notification.

(2) If the receiving authority does not wish to pay the fees in each individual case, these fees can be deferred on a monthly basis. ([Federal Law Gazette No. 151/1947](#) , Article II Z 5 lit. i.)

Official audit

§ 47a. The Federal Minister responsible for health care may appeal decisions of administrative courts in proceedings under this Federal Act and the COVID-19 Measures Act (COVID-19-MG, Federal [Law Gazette I No. 12/2020](#)) to the Administrative Court on grounds of illegality. The administrative courts must immediately transmit copies of such decisions to the Federal Ministry of Social Affairs, Health, Care and Consumer Protection.

Repeal of older regulations.

§ 48. (1) All provisions concerning matters regulated by this Act or by regulation pursuant thereto shall cease to be in force upon the commencement of the effectiveness of this Act or the relevant regulation.

(2) The Court Chancellery Decree of January 11, 1816, PGS Vol. 44 No. 3, concerning the reimbursement of medical expenses for poor persons injured by angry dogs, was repealed on September 1, 1925, when Article 35 of the Administrative Relief Act, [Federal Law Gazette No. 277/1925](#) , came into effect.

(3) The patent of May 21, 1805, JGS. No. 731, ceased to be effective in its original version upon the entry into force of this law (the words "Sections 393 to 397 inclusive of the Criminal Code of May 27, 1852, RGBL. No. 117 and" are omitted with regard to the Austrian Criminal Code of 1945, ASlg. No. 2).

(4) The ordinances of December 17, 1917, RGBL. No. 490, concerning the control of malaria (intermittent fever), of June 16, 1923, BGBl. No. 329, concerning the mandatory notification of varicella (chickenpox), and of January 11, 1927, BGBl. No. 38, concerning the mandatory notification of acute anterior poliomyelitis and epidemic lethargic encephalitis, were repealed upon the entry into force of the federal law of June 18, 1947, BGBl. No. 151. ([BGBl. No. 151/1947](#) , Article IV, Paragraph 4.)

Effectiveness of the law.

§ 50. (1) This law, in the version of the law of February 17, 1920, StGBL. No. 83 (Amendment to the Epidemic Act), and the federal law of December 3, 1925, BGBl. No. 449 (Second Amendment to the Epidemic Act), as well as the provisions of the federal law of June 18, 1947, BGBl. No. 151, Article II, Paragraph 5, and Article III and IV, Paragraphs 3 and 4 – after the relevant provisions of Reich law were repealed by the federal law of June 18, 1947, BGBl. No. 151, Article IZ 6 – came into force again on August 22, 1947.

(2) The amendments to Section 36 Paragraph 2 and Section 43 Paragraph 4 as well as Section 43 Paragraph 5 in the version of the Administrative Reform Act 2001, [Federal Law Gazette I No. 65/2002](#) , come into force on 1 July 2002, but not before the fourth first of the month following the promulgation of the Administrative Reform Act 2001.

(3) Proceedings pending at the date of entry into force specified in paragraph 2 shall be conducted in accordance with the legal situation in force before that date.

(4) Section 43 in the version of the Federal Law [BGBl. I No. 80/2013](#) comes into force on 1 January 2014.

(5) Sections 1 paragraph 1 items 1 and 2, 4 paragraph 7, 7 paragraphs 1 and 1a, 26b including heading, 36 paragraph 3, 43 paragraph 4, and 51 as well as the deletion of Section 2 paragraph 3 and 43 paragraph 2 in the version of the Federal Law [BGBl. I No. 63/2016](#) shall enter into force on the day following the announcement.

(6) Section 4 paragraphs 1 to 5, 7 to 9, 11, 12, 15 and 17, Section 4a including heading and Section 5 paragraph 3 in the version of the 2nd Material Data Protection Adaptation Act, [Federal Law Gazette I No. 37/2018](#) , come into force on 25 May 2018.

(7) Section 6 (2) in the version of the 3rd COVID-19 Act, [Federal Law Gazette I No. 23/2020](#) , enters into force on 1 February 2020, but without affecting regulations that were published in accordance with its earlier version by the end of 4 April 2020.

(8) Sections 3a, 13 (5), 28a (1a), 43 (4a), and 46, as amended by the Federal Law [Gazette I No. 23/2020](#) , shall enter into force on the day following their publication. Section 3a shall expire on June 30, 2023.

(9) Section 6 (2) in the version of the federal law published in Federal [Law Gazette I No. 43/2020](#) enters into force at the end of the day on which the aforementioned federal law is promulgated. Ordinances promulgated before April 5th in violation of the provisions of this federal law shall be deemed to have been promulgated in accordance with the provisions of this federal law if the promulgation achieved a level of publicity at least equivalent to the provisions of this federal law. This applies in any case if the ordinance was promulgated in a Federal Law Gazette or an official gazette of a state.

(10) The changes in Section 4 Paragraph 7, Section 4a Paragraph 5, Section 5 Paragraph 4, Sections 5a and 5b including headings, Section 15, Section 27a, the changes in Section 28c, Section 32 Paragraph 6, the changes in Section 36, Section 43 Paragraph 4a, Section 45 including heading, Section 46 in the version of the Federal Law [BGBl. I No. 43/2020](#) come into force on the day following the announcement.

(11) Sections 5a and 46 shall expire on 30 June 2023. Section 5b shall expire on 31 December 2024.

(12) The headings of Section 46 and Section 49 in the version of the Federal Law [BGBl. I No. 62/2020](#) shall enter into force on the day following the publication.

(13) Section 28a paragraph 1b in the version of the Federal Law [BGBl. I No. 103/2020](#) comes into force on the day following its publication.

(14) The title, Section 4 (1), Section 5 (4 and 5), Section 5a (5), Section 15 (1) and (2) Nos. 4 and 5, Section 15 (5) to (8), Section 32 (7), Section 43a and Section 51 including headings in the version of the Federal Law [BGBl. I No. 104/2020](#) shall enter into force on the day following the publication.

(15) Section 7 paragraph 1a, third sentence, in the version of the Federal Law [BGBl. I No. 104/2020](#), shall enter into force on the day following its publication and shall also apply to all detentions pursuant to Section 7 paragraph 1a that are in force at the time of entry into force.

(16) Section 25a of this Federal Act in the version of the Federal Act [BGBl. I No. 104/2020](#) shall enter into force at the time when the Federal Minister responsible for health care determines by regulation that the technical requirements for implementation are met and shall expire on 30 June 2023 *(Note 1)*.

(17) Section 4 paragraph 4 item 1, Section 5a paragraphs 1 and 6, Section 5b paragraph 3 item 1, Section 5c including heading, Section 15 paragraph 3, Section 25a paragraphs 1 and 2, Section 28 paragraphs 1 and 1a, Section 28d including heading, Section 40 and Section 50 paragraph 8 in the version of the Federal Law [BGBl. I No. 136/2020](#) enter into force on the day following the announcement.

(18) Section 3b including its heading, Section 4 (4), Section 5a (1), (2), (3), (7), and (8), Section 5b (3), Section 5c (2), Section 15 (2) and (9), Section 27 (1), Section 28c (4), Section 50 (11), and Section 50c in the version of the Federal Law published in Federal [Law Gazette I No. 23/2021](#) shall enter into force on the day following their publication. Section 15 (2) item 5 and Section 15 (9) shall expire on December 31, 2021.

(19) The heading to Section 1, Sections 4 (1), (2), (3a), (4), (6), (15), (18) to (20), Section 5a (7), Section 15 (2) No. 5 and (9), the heading to Section 24 and Section 24, Section 28c (4), and Section 28d as amended by the Federal Law published in Federal [Law Gazette I No. 33/2021](#) shall enter into force on the day following publication. Section 4 (3a) shall expire on June 30, 2023.

(19a) The heading of Section 5 and Section 15 Paragraph 2 Item 5 in the version of the Federal Law [BGBl. I No. 82/2021](#) come into force on 19 May.

(Note: Paragraph 20 expires on 30 June 2023)

(21) Section 4 (18), (19) and (22) to (24), Section 4a (6), Sections 4b and 4c, Section 5a (2) and (7), Section 5c (1) item 8, Section 5c (2), Section 7 (1a), Section 15 (2) item 5, Section 15 (4), Section 24 including heading, Section 25 including heading, Section 25a (1), Section 25a (2) item 8, Section 32 (1) item 7, Section 36 (1) letter f and Section 49 (3) in the version of the Federal Law published in Federal Law [Gazette I No. 90/2021](#) shall enter into force on the day following publication; at the same time, Section 15 (6), second and third sentences, and Section 15 (8) and (9) shall cease to have effect. Section 49 (3) shall also apply to applications submitted before its entry into force. Sections 4a (6), 4b and 4c, 24 (4) and 25 (5), and 49 (3) shall cease to apply on 30 June 2023.

(22) Sections 4e paragraph 5 second sentence, 5c paragraph 1 and 50 paragraph 13 in the version of the Federal Law [BGBl. I No. 105/2021](#) shall enter into force on the day following the publication.

(23) The headings to Section 2, Section 4 (1), (4) Item 3, (6) and (7), Section 4a (1) and (6), Section 5 (4), Section 5a (1), (2) Item 1, (7) and (8), Section 25a (2) Item 3 and Item 10, Section 28a (1) and Section 28d (1) in the version of the Federal [Law published in Federal Law Gazette I No. 100/2021](#) shall enter into force on the day following publication; at the same time, Section 4 (18) to 24 shall cease to have effect. Section 4 (3a) and Sections 4b to 4f, including their headings, shall enter into force on June 4, 2021. Sections 4b to 4f, including their headings, shall cease to have effect on June 30, 2023.

(24) Section 50(20) shall cease to have effect on 30 June 2023.

(25) Section 4e paragraph 1a and Section 50 paragraph 24 in the version of the Federal Law [BGBl. I No. 143/2021](#) shall enter into force on the day following the publication.

(26) Section 4b paragraph 7 item 4, Section 4e paragraph 6, Section 4f paragraph 1, Section 5a paragraph 1a, Section 5c paragraph 1, Section 7 paragraph 1a, Section 7a including heading, Section 17 paragraph 5, the heading to Section 23, Section 24 paragraph 4, Section 25 paragraph 5 and Section 26a paragraph 1 in the version of the federal law published in Federal [Law Gazette I No. 183/2021](#) shall enter into force on the day following publication; at the same time, the second and third sentences of Section 7

paragraph 1a shall cease to apply. Proceedings pursuant to Section 7 (1a) that were already pending before the district court at the time Section 7a in the version of the Federal Act published in Federal Law [Gazette I No. 183/2021](#) came into force shall be continued in accordance with the provisions of Section 7 (1a) in the version of the Federal Act published in Federal [Law Gazette I No. 105/2021](#). Appeals pursuant to Article 130 (1) (1) B-VG that were already pending before the state administrative court at the time Section 7a in the version of the Federal Act published in Federal [Law Gazette I No. 183/2021](#) came into force shall be continued in accordance with the legal situation before Federal [Law Gazette I No. 183/2021](#). Section 5a (3) and Section 36 (1) (a) in the version of the Federal Act published in Federal [Law Gazette I No. 183/2021](#) come into force on November 1, 2021.

(27) The heading to Section 3 as well as Sections 39, 40 and 50 (8) in the version of the Federal [Law Gazette I No. 255/2021](#) shall enter into force on the day following the publication; Sections 39 and 40 in the version of the Federal [Law Gazette I No. 255/2021](#) shall expire on 30 June 2023 and shall re-enter into force on 1 July 2023 in the version of the Federal Law [Gazette I No. 183/2021](#).

(28) Sections 39 and 40 in the version of the Federal [Law Gazette I No. 6/2022](#) enter into force on the expiry of the day following publication, expire on 30 June 2023, and re-enter into force on 1 July 2023 in the version of the Federal [Law Gazette I No. 183/2021](#). Section 4 (6) in the version of the Federal Law Gazette I No. 6/2022 enters into force on the day following publication, expires on 31 January 2024, and re-enters into force on 1 February 2024 in the version of the Federal Law [Gazette I No. 100/2021](#).

(29) Section 5a (1a), Section 25b, Section 36 (1) (a), and Section 49 (4) to (6) in the version of the Federal Law [Gazette I No. 21/2022](#) shall enter into force on the day following their publication. Section 49 (4) in the version of the Federal [Law Gazette I No. 21/2022](#) shall only apply to cases in which the application was submitted before the Federal [Law Gazette I No. 21/2022](#) entered into force.

(30) Sections 5c (1) and 50 (8), (11), (13), (16), (19), (21), (23), (24), (27) and (28) as amended by the Federal Law [Gazette I No. 80/2022](#) shall enter into force on the day following their publication.

(31) Section 4 (3a) and (3b), Section 4a (1), Section 4e (7), Section 4g including its heading, Section 5 (1), the heading to the second main section, Section 7 (1a), Section 7b, Section 28a (1), Section 32 (1a), (3a) and (5), and Section 47a including its heading, as amended by the Federal Law [Gazette I No. 89/2022](#), shall enter into force on the day following their publication; Section 4 (3a) and (3b), and Section 4g including its heading shall expire on 30 June 2023.

(32) Section 4 paragraph 6 first sentence in the version of the Federal Law [BGBl. I No. 131/2022](#) shall enter into force on the day following its publication.

(33) Sections 3b, 4 (5), 7 (1), and 49 (1a) as amended by Federal Law [Gazette I No. 103/2022](#) shall enter into force on the day following their publication; Sections 3b and 49 (1a) shall expire on 30 June 2023.

(34) Section 4 paragraph 5, Section 4e paragraph 5 and Section 4g including the heading in the version of the Federal Law [BGBl. I No. 195/2022](#) shall enter into force on the day following the publication.

(35) Section 4 (1) and (3), Section 4 (4) item 3, Section 4 (15); Section 4a (1), Section 5a including heading, Section 15 (3), Section 24 (3) item 1 lit. c, Section 24 (4), Section 25 (3) item 1 lit. d, Section 25 (5), Section 32 (1) item 1a, Section 36 (1) letters a and n, Sections 47a, Section 50 (11), 13 and 33 as well as Section 51 in the version of the Federal Law [BGBl. I No. 69/2023](#) enter into force on 1 July 2023. At the same time, Section 5c, Section 24 (5), Sections 25b, 27a, 28c and 28d, Section 32 (1a), Section 43a, Section 49 (1), (2) and (4) to (6) as well as the heading of Section 49 shall cease to have effect.

(36) With the entry into force of the Federal Act [BGBl. I No. 69/2023](#), decisions pursuant to Sections 27 and 27a issued due to the occurrence of SARS-CoV-2 cease to have legal effects.

(37) The provisions of this Federal Act in the version of Federal Act [BGBl. I No. 195/2022](#) shall continue to apply to circumstances that occurred before the entry into force of Federal Act [BGBl. I No. 69/2023](#).

(38) The necessary documents for the assertion and settlement of costs pursuant to Section 36 that have arisen in connection with COVID-19 must be submitted by the states or municipalities to the Federal Minister responsible for health care.

1. in the case of compensation for loss of earnings pursuant to Section 32 until 31 December 2024 at the latest and
2. in the case of other costs
 - concerning the years 2020 to 2022 until 30 September 2023 at the latest,
 - concerning the year 2023. until 30 September 2024 at the latest

otherwise, the claim will be lost. In justified cases, particularly if the required documents cannot be submitted in a timely manner for objective reasons, this deadline may be extended upon request by the Federal Minister responsible for health care, specifying a new deadline.

(39) Data already stored in the register of notifiable diseases (Section 4) before the entry into force of Federal Law [Gazette I No. 69/2023](#), which were processed in connection with SARS-CoV-2 on the basis of this Federal Law, may be processed in accordance with Section 4 until the end of December 31, 2024.

(40) Section 4 paragraph 4 item in the version of the Federal Law BGBl. I. No. 105/2024 shall enter into force on the day following its publication.

(41) Section 5 (5) in the version of the Freedom of Information Adaptation Act, [Federal Law Gazette I No. 50/2025](#), comes into force on 1 September 2025.

(_____)

Note 1: The technical requirements for the enforcement of Section 25a EpiG are met as of 14 January 2021 (cf. Section 13 of the COVID-19 Entry Regulation, [Federal Law Gazette II No. 445/2020](#)).

§ 50a. To the extent that this Federal Law refers to other Federal Laws, these shall apply in their respective applicable versions.

§ 50b. (1) With the entry into force of this Federal Act in the version of the Federal Act [BGBl. I No. 43/2012](#), the Ordinance of the Federal Minister of Health concerning notifiable communicable diseases 2009, BGBl. II No. 359, last amended by the Ordinance [BGBl. II No. 359/2011](#) , shall cease to have effect.

(2) With the entry into force of this Federal Act in the version of the Federal Act [BGBl. I No. 63/2016](#), the Ordinance of the Federal Minister of Health concerning notifiable communicable diseases 2015, [BGBl. II No. 224/2015](#) , shall cease to have effect.

§ 50c. Regulations which only correspond to a new version of this Federal Act may be issued from the date of promulgation of the Federal Act effecting the amendment, but may not enter into force before the new Federal Act provisions come into force.

Execution

§ 51. With the implementation of this Federal Law

1. with regard to Section 7 paragraph 1a – insofar as it concerns the judicial proceedings – and Section 36 paragraph 3, the Federal Minister of Justice,
 2. With regard to Section 28a, the Federal Minister responsible for health care in agreement with the Federal Minister of the Interior and
 3. Furthermore, the Federal Minister responsible for health care
- entrusted.

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