

act shall not apply to counties having a population of more than *two hundred twenty-five thousand. (225,000).*

Sec. 2. This act shall take effect and be in force from and after its passage.

Approved April 20, 1921.

CHAPTER 410—S. F. No. 939.

An act to authorize in certain cases county boards and county Tuberculosis Sanatorium Commissions to cease the operation and maintenance of County Tuberculosis Sanatoriums and to provide for the sale of the property connected with the same.

Be it enacted by the Legislature of the State of Minnesota:

Section 1 **County boards may discontinue operation of tuberculosis sanatorium in certain cases.**—Whenever in the judgment of all of the members of the county board of any county now having a population of not less than forty-five thousand inhabitants and not more than sixty-five thousand inhabitants, it is necessary and expedient to cease the operation and maintenance of a tuberculosis sanatorium theretofore established in said county and said judgment shall be concurred in by a majority of the members of the county sanatorium commission of said county, the county board and sanatorium commission are hereby authorized to cease the operation and maintenance of said sanatorium, and said county board is hereby authorized to sell the real and personal property belonging to said county and connected with said sanatorium and to make good and valid conveyances thereof. The proceeds derived from such sale shall be divided equally between said county and the state of Minnesota. The county's portion of such proceeds shall be set aside as a fund to be used under the direction of the Board of County Commissioners, either (1) to establish and maintain a tuberculosis sanatorium jointly with two or more counties, or (2) to otherwise assist in the treatment and care of tuberculosis patients of such county. The state's portion of such proceeds shall be deposited with the state treasurer and be credited to the state advisory commission for the construction and maintenance of county sanatoriums.

Sec. 2. This act shall take effect and be in force from and after its passage.

Approved April 20, 1921.

CHAPTER 411—S. F. No. 897.

An act creating the Minnesota General Hospital, relating to the acceptance and treatment of county and state patients and other

patients in the Minnesota General Hospital; providing for partial payment for indigent patients by the several counties; providing for co-operation between the Minnesota General Hospital and other hospitals; enabling counties and groups of counties to erect and maintain General Hospitals and making appropriations.

Be it enacted by the Legislature of the State of Minnesota :

Section 1. Minnesota General Hospital established.—The hospitals now and hereafter established in connection with the Medical School of the University of Minnesota shall be known as the Minnesota General Hospital. The Student Infirmary, the University Dispensary, and the Elliot Memorial Building shall be parts of the said Minnesota General Hospital.

Sec. 2. What patients may be treated—Research work.—(1) Said Minnesota General Hospital shall be primarily and principally designed for the care of legal residents of Minnesota who are afflicted with a malady, deformity, or ailment of a nature which can probably be remedied by hospital service and treatment and who are unable, financially, to secure such care or, in case of a minor, whose parent, guardian, trustee or other person having lawful custody of his person, as the case may be is unable financially to secure such care. The Minnesota General Hospital is hereby designated as a place of treatment for such persons.

(2) Said hospital shall be utilized for such instruction and for such scientific research as will promote the welfare of the patients committed to its care, and assist in the application of science to the alleviation of human suffering.

Sec. 3. Officers to report cases needing hospital care.—Whenever the existence of a case described in Section 2 of this act shall come to the notice of the sheriff, town clerk, health officer, public health nurse, policeman, or any other public official, or any physician or surgeon, it shall be his duty to, and any other person may, file with the judge of probate of the county of the legal residence of such person, an application for the treatment of such person at the Minnesota General Hospital.

Such application shall be made in duplicate on blanks to be furnished by the Minnesota General Hospital, and shall contain a full statement of the financial situation of the person sought to be treated and a general statement of his physical condition, and shall be verified. Upon the filing of such application, the judge of probate shall make investigation in such manner as he shall deem advisable, and it shall be the duty of any public official of any county, city, town, village or ward of the residence of the person sought to be treated to supply to the judge of probate on request thereof, all information within his knowledge relative to the financial situation of the person sought to be treated. If after such investigation, said judge of

probate shall be satisfied that the person on whose behalf the application is made is not financially able to provide himself with such treatment, or, in case of a minor, that his parent, guardian or trustee, in representative capacity, or the person having legal custody over him or legally responsible for his support or maintenance, is not financially able to provide such treatment, then said judge shall appoint a physician of said county whose duty shall be personally to make an examination of the person on whose behalf said application for treatment has been filed. Said physician shall thereupon make and file with the judge of probate a verified report in writing, setting forth the nature and history of the case, and such other information as will be likely to aid in the medical or surgical treatment of the disease, malady, deformity or ailment affecting said person, and shall also state in said report whether or not, in his opinion, the condition of such person can probably be remedied at a hospital. The report of said physician shall be made in duplicate within such time as the court may direct, and upon blanks to be furnished by the Minnesota General Hospital for that purpose. Said report shall include any information within the knowledge of said physician relative to the financial situation of the person purposed to be treated. The physician appointed to make said examination unless he is already a salaried officer of the state or some division thereof, shall receive five dollars for making said examination and in any case shall receive his actual and necessary expenses; which fee and expenses shall be paid by the county of residence of said patient; and it shall be the duty of the board of county commissioners to provide for such payment.

If, upon filing of said report, the judge of probate shall be satisfied that the case is one which should be treated at the Minnesota General Hospital, and that the person to be treated, or his parent, guardian, trustee or other person having legal custody of his person in case of a minor, is not financially able to provide such person with proper treatment, the judge of probate shall enter an order finding such facts. In case the court is not so satisfied, he may take additional testimony or make such further investigation as to him shall seem proper. The court may reject any application which is found to be without sufficient merit. Upon the entry of the order of the judge of probate approving said application, he shall communicate with the superintendent of the Minnesota General Hospital and ascertain whether or not the applicant can be received as a patient. If the Minnesota General Hospital can receive such applicant, the court shall thereupon certify his approval of such application to said hospital and to the chairman of the board of county commissioners. One copy of the

application and the physicians' report shall be sent to the superintendent of said hospital.

If the court should find that an applicant or the person legally responsible for him is able to pay in part but not in full for care at the Minnesota General Hospital at the rate to be charged as determined in Section 5, the court may approve the application of such patient on such terms of division of hospital charges as the court may deem equitable and just.

Sec. 4. County to pay expense of taking patient to hospital.—Upon approval of such application, if the patient is unable to travel alone the court may appoint a suitable official or person to take the patient to said hospital, and such person shall receive his actual and necessary expenses, and, if not a salaried officer of the state or any subdivision thereof, shall receive in addition \$3.00 per day for the time actually and necessarily consumed in transporting said patient to said hospital and returning. The traveling expenses of such patient and the per diem and expenses of the person appointed to accompany him shall be paid by the county of residence of said patient, and it shall be the duty of the board of county commissioners of said county to provide for such payment.

Sec. 5. Actual cost to be charged patients.—The Minnesota General Hospital shall treat patients admitted on certificate of the judge of probate of any county at rates based on actual cost as determined by the Board of Regents of the University. Any resident of the state, upon a proper showing to the Board of Regents of the University, that he is unable to pay ordinary physician's fees and hospital charges, may be received upon paying the same rate as charged for county patients. It shall be the duty for the Board of Regents to investigate applications made for such treatment under this section; and, if satisfied of the truth of the allegations made, and of the necessity for treatment, the Board of Regents shall admit such patients whenever there is room in said hospital.

Students of the University and such other patients as the Board of Regents to an extent that will not interfere with the primary purpose of said hospital as set forth in Section 2, may direct, may be received in said General Hospital whenever there is room and any fees received from, such patient shall be used for the purposes of said hospital.

Sec. 6. Physicians and attendants not to charge for services.—No compensation shall be charged or received, by any officer of the Minnesota General Hospital, or by any physician or surgeon or nurse in its employment, who shall treat or care for any patient in said hospital, other than the compensation provided for such persons by the Board of Regents of the University.

Sec. 7. State treasurer to pay for care of county patients.—The Board of Regents of the University shall file a verified monthly report with the State Auditor, containing an itemized statement of the expense charged against each patient received on certification of any probate court, together with the name of the county from which said patient was certified, and a statement of any sums paid by the patient, or by any person in his behalf. The state auditor shall audit such monthly report, and, upon finding same correct, he shall issue a warrant against the state treasurer for the net amount so certified. The state treasurer shall thereupon transfer such amount from the general fund of the state to the appropriation from University income provided by the Board of Regents for the maintenance of the Minnesota General Hospital.

Sec. 8. Counties to pay one-half of expense.—On or before the first day of October in each year the state auditor shall certify to each county the net amount due from it to the state for each patient for which said county is legally chargeable, in whole or in part, for the fiscal year ended on the 30th day of June next preceding, and the net total amount due from such county for all such patients for which it is chargeable during said fiscal year, which last amount shall be equal to one half the total sum certified by the Board of Regents of the University for patients from said county and shall be a special charge against such county, and shall be certified, levied and collected with the general taxes and paid into the state treasury.

Sec. 9. Discharge from hospital.—Whenever, in the opinion of the superintendent of the Minnesota General Hospital, any patient should be discharged therefrom as cured, or as no longer needing treatment, or for the reason that treatment cannot benefit his case, said superintendent shall discharge said patient, If the patient is a county patient and is unable to return to his place of residence alone, said superintendent shall appoint some suitable person to accompany said patient from said hospital to his place of residence. Such person shall receive his actual and necessary expenses, and, if not a salaried officer of the state or any political subdivision thereof, shall receive in addition three dollars per day for the actual time necessarily consumed. The traveling expenses of all county patients and the said per diem and expenses of person appointed to accompany such patient shall be part of the legitimate expenses of caring for such patients in the Minnesota General Hospital and as such included by the superintendent in his monthly bill to the state auditor, provided for in Section 7.

Sec. 10. Inmates of state institutions may be admitted.—The State Board of Control may make application to the Board of Regents of the University, for the admission to the Minnesota

General Hospital of any inmate of any state institution under the said Board of Control, or any person committed to or applying for admission thereto, who is afflicted with any disease, malady, deformity or ailment, which can probably be remedied, or which can be advantageously treated by proper medical or surgical care at the Minnesota General Hospital. Said application shall be accompanied by the report of the physician of said institution or by a physician appointed by the Board of Control, in the same form as reports of other physicians for admission of patients to said hospital. The superintendent of the Minnesota General Hospital shall decide whether such patient may be received by the hospital and if received when he shall be discharged or returned to the institution from which he came. The Board of Control shall pay the Regents of the University for the treatment of such patients at the same rate charged for county patients, and the expense of such treatment and of transporting such patient, to and from the Minnesota General Hospital shall be paid out of the appropriation for operation of the institution from which said patient is sent. Said Board of Control may, when necessary, send an attendant with or to bring back such patient and pay for traveling expenses in like manner.

Sec. 11. To co-operate with other hospitals.—The Minnesota General Hospital shall, upon request of proper authorities, co-operate with any county hospital or sanatorium established under existing statutes or any hospital supported in whole or part by public funds. The Superintendent of the Minnesota General Hospital shall, upon request, advise the county commissioners or others in control of such existing or proposed county or other hospital or sanatorium in regard to the survey of the hospital needs of the county and in regard to location, buildings, equipment or other matters pertaining to hospitals. It shall be the duty of the members of the staff of said general hospital on request to assist or advise, so far as circumstances permit, such county or other hospital or sanatorium in the medical or surgical care of patients, in X-Ray and laboratory diagnosis or in any other matter contributing to the efficiency of such hospital or sanatorium, and so far as possible to furnish internes and other personnel.

No employee of the University shall receive any compensation for such advice or service other than that paid him by the Board of Regents, except that actual expenses incurred in rendering such advice or service may be paid.

Sec. 12. Counties may build and maintain hospitals—Proceedings.—In addition to the authority to erect and maintain and assist hospitals conferred upon individual counties by Chapter 392 and Chapter 123, General Laws of Minnesota for 1913 the boards of county commissioners in any group of counties shall

have and are hereby given power to acquire lands, to purchase or erect buildings and to equip and maintain the same for general hospital purposes. The procedure for the cooperation of a group or counties in building and maintaining such a hospital shall be as follows:

(a) The preliminary step shall be a majority vote of the county commissioners of each county of the cooperating group of counties in favor of the establishment of such hospital, the place of its location, the approximate amount, (hereinafter to be known as the "cost") to be expended for the purchase of a site and erection of buildings and the apportionment of such costs among the several counties of the group.

(b) If the share of the cost to be paid by any county shall not exceed the sum that may be raised by a tax levy of not to exceed one mill on the dollar of the taxable property of such county, it shall be lawful for the county commissioners of said county to order a tax to pay its share of the cost of such hospital; and the said tax shall be levied, extended and collected in the same manner as other county taxes are levied, extended and collected, and shall be used for no other purpose than that for which it was authorized and collected.

(c) When such share of the cost to be paid by any county shall exceed the sum indicated in subdivision (b) hereof or whenever it is necessary to issue bonds of any county to defray its share of the cost of such hospital, or whenever in any case the county commissioners shall deem it desirable, then the question of (1) whether such hospital shall be established and (when necessary) (2) whether bonds shall be issued to defray such county's proportion of the cost thereof, shall be submitted to the voters of such county; and the hospital shall not be established nor bonds issued therefor unless a majority of the voters of such county shall vote in favor of each question submitted to them. The manner of voting shall be as indicated in the existing statutes governing the establishment of tuberculosis sanatoria in counties or groups of counties. The board of county commissioners of a county is authorized to levy a tax to pay interest and principal of any bonds authorized hereunder by the voters of said county, as the same shall become due and payable; and the said tax shall be levied, extended and collected in the same manner as other county taxes are levied, extended and collected, and shall be used for no other purpose than that for which it was authorized and collected.

(d) The sums collected by taxation or sale of bonds under subdivisions (b) or (c) hereof shall be paid into the county treasuries of the respective counties of the cooperating group of counties, and in each case shall be kept in a separate fund to be known as the "county hospital building fund."

(e) Upon the preliminary decision under subdivision (a) hereof to establish and maintain a hospital under this act there shall be established a commission to be known as the county hospital commission. Said Commission shall consist of three residents of the county in which the hospital is to be located, chosen by the county commissioners of said county for a term of three years from the first of July next succeeding such choice or until their successors are chosen, (except that the first three commissioners shall be chosen for one, two and three years respectively, so that annually thereafter one commissioner shall be chosen), and of two residents from each other county of the cooperating group of counties, chosen likewise by their respective county commissioners for a term of two years from the first of July next succeeding such choice or until their successors are chosen, (except that in each such county the first two commissioners shall be chosen for one and two years respectively, so that annually thereafter one commissioner shall be chosen in each county). Said commissioners shall serve without compensation, but may be reimbursed for actual expenses incurred by them in connection with their official duties.

Said county hospital commission shall have power to purchase real estate, to erect and equip buildings for hospital purposes, and have full charge and control of the operation and management of such county hospital. They may, when deemed necessary, employ a competent superintendent, who shall be the executive officer of the hospital and act as secretary of the county hospital commission. One member of said commission shall be elected annually by the commission as its president. The county treasurer of the county in which the hospital is located shall be the treasurer of the county hospital commission. He shall pay out of the funds of the hospital commission on properly authenticated vouchers of the hospital commission signed by the president and secretary.

The county hospital commission is empowered to accept as a trust any gift, donation or endowment from any source, whether subject to special provisions of the donors or not; and such gifts, donations or endowments shall be placed to the credit of the county hospital fund in the treasury of the county in which the hospital is located and disbursed, as to principal or income as the donors may have indicated, by the county hospital commissioners.

(f) When the county hospital commission is satisfied that each county in the cooperating group of counties has collected its share of the cost of said hospital, it shall so certify to the county commissioners of each county, who shall thereupon respectively order the county treasurer of their respective county to pay over to the treasurer of the county hospital commission the county

hospital building fund in the possession of such county treasurer. The county hospital commission shall thereupon proceed to erect such hospital and to carry it on.

Sec. 13. **General hospital and sanatorium may be in conjunction.**—It shall be lawful with the consent of the Advisory Commission of the State Sanatorium for Consumptives for any county or any group of counties which has or which may hereafter erect a tuberculosis sanatorium in accordance with existing statute, to erect in conjunction therewith or in the neighborhood thereof a General hospital and to conduct the two institutions under a common management and under one commission, to be known as the County Hospital and Sanatorium Commission.

Sec. 14. **Effective July 1, 1921.**—This act shall take effect and be in force from and after July 1, 1921.

Approved April 20, 1921.

CHAPTER 412—S. F. No. 276.

An act providing for the issue of permits to prospect for iron ore and other ores on lands belonging to the state, or in which the state has an interest, excepting lands situate under the waters of any public lake or river, and leases for the mining of such ore.

Be it enacted by the Legislature of the State of Minnesota:

Section 1. **State auditor to issue permits to prospect for iron ore.**—The State Auditor may execute permits to prospect for iron ore and other ores upon lands belonging to the state, or in which the state has an interest and leases for the mining of such ore, subject to the conditions hereinafter provided.

Sec. 2. **Lands to be classified.**—The State Auditor shall classify all lands belonging to the State, or in which the State has an interest, excepting lands situate under the waters of any public lake or river, into the following classes as nearly as may be, in accordance with the character of the iron ore or iron bearing material likely to be found thereon: Class 1. Lands containing iron ore, the larger part of which may be shipped without beneficiation; Class 2. lands likely to contain iron ore capable of being beneficiated by washing, drying or screening; Class 3. lands likely to contain iron ore and iron bearing material requiring magnetic separation methods; and Class 4, lands containing iron ore or iron bearing materials where a combination of two or more of the foregoing processes of beneficiation may be necessary. The State Auditor shall also divide the tracts thus classified into mining units of not to exceed in the aggregate two contiguous forty acre tracts for land belonging to classes one and two, unless some of the descriptions are fractional subdivisions according to the government survey thereof,