

CHAPTER 158

UNIVERSITY OF MINNESOTA HOSPITALS

158.01 ESTABLISHED.

HISTORY. 1921 c. 411 s. 1; G.S. 1923 s. 4577; M.S. 1927 s. 4577; 1945 c. 553.

The so-called poor relief statute does not govern or control the right of a person to be admitted to the Minnesota General Hospital. The counties may still continue to pay for the hospitalization of poor patients under Laws 1935, Chapter 359. 1938 OAG 131, March 9, 1937.

Section 261.21 is merely supplementary to the act creating the Minnesota General Hospital, and the same rules that govern with reference to this act govern the right of person to admission to other hospitals. OAG March 5, 1937.

Where an emergency operation is performed in the county of residence, reimbursement may be claimed from the county of settlement. OAG Nov. 1, 1940 (339g-2).

Note: See Laws 1945, Chapter 553, changing name to University of Minnesota Hospitals.

158.02 WHAT PATIENTS MAY BE TREATED; RESEARCH WORK.

HISTORY. 1921 c. 411 s. 2; G.S. 1923 s. 4578; M.S. 1927 s. 4578; 1945 c. 553.

Indigent persons may be admitted to the Minnesota General Hospital even if they have relatives financially able to care for them. OAG March 25, 1935 (1001c).

The Minnesota General Hospital should not discriminate against indigent patients. OAG June 23, 1937.

"Clinical observation and treatment" is "hospital service and treatment" within the meaning of this section and responsibility for payment of costs in connection with University Hospital service and treatment rests with board of county commissioners and not with the county welfare board or municipality in which the person receiving such treatment has his residence. OAG May 19, 1938 (1001c).

The so-called county hospitalization is not mandatory on the county board. The purpose of the act is hospitalization and does not include services of a physician. 1942 OAG 275, June 27, 1942 (1001-D).

The county board where the accident occurred applied for hospitalization, but the county of the residence of the patient is nevertheless liable. OAG May 3, 1944 (1101c).

158.03 OFFICERS TO REPORT CASES NEEDING HOSPITAL CARE.

HISTORY. 1921 c. 411 s. 3; 1923 c. 265 s. 1; G.S. 1923 s. 4579; M.S. 1927 s. 4579; 1943 c. 31 s. 1; 1945 c. 553.

Residence entitling a person to be admitted to the university hospital from a particular county is not to be confused with legal settlement within the poor laws. OAG Jan. 9, 1934.

Fee to physician for examining patient to be taken to the Minnesota General Hospital cannot be reduced by the county board. OAG July 6, 1933.

Residence entitling a person to be admitted to the University Hospital from a particular county is not to be confused with legal settlement within the poor laws, and a person may be admitted from county in which he has just established his residence, even though his legal settlement is elsewhere. OAG Jan. 9, 1934.

The county welfare board does not have the responsibility or authority for hospitalization at the University Hospital. OAG July 20, 1937.

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A physician who is an officer of the city board of health at a salary of \$12.50 per month may receive \$5.00 fee for making examination as provided by this section unless he could be considered a "salaried officer" of the city. OAG Aug. 12, 1937.

Certification of patient to Minnesota General Hospital is to be made pursuant to sections 158.01 to 158.12, and not by county welfare board. OAG Aug. 24, 1937 (1001c).

County welfare board has jurisdiction to enter into a contract for the hospitalization of indigent persons under the poor relief laws, but not for hospitalization at the University Hospital or any hospital within the meaning of section 261.20, since the authority for hospitalization in such cases still rests with the board of county commissioners. OAG Nov. 22, 1937.

Under this act the responsibility for the care of persons in need of hospitalization is upon the board of county commissioners, that board may designate the county welfare board to act as its agent, but the welfare board cannot act in any matter requiring the exercise of the judgment and discretion of the county board. OAG Jan. 26, 1938.

The question of settlement for poor relief purposes is not involved in determining a person's residence under the statute relating to hospitalization in the University Hospital. OAG April 20, 1938.

If application for hospitalization is made under this section, the \$5.00 fee is a proper charge against the county of the patient's residence (i.e., county of actual residence as distinguished from county where patient has settlement for poor relief purposes). County is responsible for this payment whether poor relief is administered under county or town system. OAG March 8, 1940.

Consideration of the history and effect of certain statutes relative to county hospitalization. 1942 OAG 275, June 27, 1942 (1001-D).

The duty of accepting or denying the hospitalization of an indigent person rests on the county board of the residence of the patient; not upon the county of settlement. OAG March 7, 1944 (339g-2).

A prisoner out on suspended sentence cannot be served by the director of public institutions unless the suspension is revoked and the patient recommitted. OAG Sept. 13, 1944 (328a).

158.04 TRANSPORTATION OF PATIENTS; PAYMENT FOR BY COUNTY.

HISTORY. 1921 c. 411 s. 4; G.S. 1923 s. 4580; 1927 c. 431 s. 1; M.S. 1927 s. 4580; 1943 c. 31 s. 2; 1945 c. 553.

If patient is unable to travel alone and person who accompanies him is duly appointed by properly constituted authorities, county may pay such person statutory per diem compensation and other necessary expenses for any number of trips to the hospital. In determining the expense of the use of automobile for transporting patient, the county board may use five cents per mile as a reasonable basis for allowance. OAG Nov. 23, 1934 (107b-8).

If an automobile is used, the county board may use five cents a mile as a reasonable basis for allowance, but cannot allow anything for estimated wear and tear. OAG Nov. 23, 1934 (107b-8).

Board may transport patient by railway rather than by automobile. OAG April 9, 1935.

The county board has authority to pay reasonable cost of ambulance transportation. OAG May 17, 1935 (1001c).

It is the mandatory duty of the board of county commissioners of the county in which the patient resides to provide for the payment of the patient's traveling expenses, even though the county is under the town system of poor relief. OAG May 17, 1935 (1001c).

It is mandatory upon the board of county commissioners to pay the expenses of transportation to the University Hospital for persons approved for hospitalization under this act and if the municipality has been obliged to furnish such transportation, it is entitled to recover from the county the costs thus incurred. OAG Aug. 17, 1937.

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The county of residence may obtain reimbursement from the county of legal settlement. 1940 OAG 265, July 19, 1940 (339g-2); OAG Dec. 4, 1940 (339g-2).

The sheriff in delivering a patient to the general hospital is acting as a private person and can collect only his actual expense, and that from the county of the residence of the patient. OAG Feb. 15, 1944 (390a-12).

Where the county of residence provides hospitalization, it may collect from the county of legal settlement. OAG Dec. 4, 1944 (339g-2).

158.05 ACTUAL COST TO BE CHARGED PATIENTS.

HISTORY. 1921 c. 411 s. 5; G.S. 1923 s. 4581; M.S. 1927 s. 4581; 1945 c. 553.

158.06 PHYSICIANS AND ATTENDANTS NOT TO CHARGE FOR SERVICES.

HISTORY. 1921 c. 411 s. 6; G.S. 1923 s. 4582; M.S. 1927 s. 4582; 1945 c. 553.

158.07 QUARTERLY REPORT BY BOARD OF REGENTS.

HISTORY. 1921 c. 411 s. 7; G.S. 1923 s. 4583; 1927 c. 431 s. 2; M.S. 1927 s. 4583; 1945 c. 553.

158.08 EXPENSES PAID BY COUNTIES.

HISTORY. 1921 c. 411 s. 8; G.S. 1923 s. 4584; 1927 c. 431 s. 3; M.S. 1927 s. 4584; 1945 c. 553.

If the patient is a poor person within the meaning of the poor laws, the county of residence may obtain legal reimbursement from the county of legal settlement. 1940 OAG 265 July 19, 1940 (339g-2).

The right of admission is governed by this act and not by the poor relief laws, and the county may send patients to the University Hospital and other hospitals, whether under the county or town system of poor relief. OAG March 9, 1937.

The state has no authority to reimburse a county for charges to patients treated when the Minnesota General Hospital is unable to receive those patients. 1940 OAG 266, Dec. 9, 1939 (1001c-1).

The expenses of a patient staying at a private place while receiving treatment at the University Hospital may not be paid by county. OAG Dec. 11, 1934.

University Hospital expenses of medical treatment of a patient staying at a private place after being discharged from the University Hospital is not a proper charge against the county. OAG July 22, 1936 (1001c).

The expenses of treatment at the University Hospital may not be recovered from the patient or his relatives. OAG Jan. 7, 1936 (618d-3).

The cost of hospitalization is paid by the county of residence rather than by the county in which the person has settlement for poor relief purposes. OAG Nov. 3, 1938 (125a-27).

The cost of hospitalization must be borne by county of patient's residence, and state has no authority to reimburse the county for expense incurred at University Hospital. OAG Dec. 9, 1939.

Where patient is a pauper on relief rolls, bill can and should be paid by county welfare board, but in emergency cases where county commissioners have incurred an obligation on behalf of a patient who is not eligible for relief, claim may be allowed by county commissioners out of general revenue. OAG Aug. 23, 1939 (125a-64).

State has no authority to reimburse county for charges to patients treated when Minnesota General Hospital is unable to receive them. 1940 OAG 266, Dec. 9, 1939 (1001c).

The case of persons on parole are, as to expense, treated as are other persons. OAG Aug. 23, 1944 (328a).

If a county sends a woman to the University Hospital it must pay the hospitalization charges, and if the woman has lost her place of legal settlement on

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account of the absence of her husband from the state for more than a year, the county of residence can obtain no reimbursement. OAG Jan. 18, 1945 (1001d).

158.09 COUNTY BOARD ACTS UPON APPLICATIONS.

HISTORY. 1923 c. 265 s. 1; G.S. 1923 s. 4590; M.S. 1927 s. 4590; 1943 c. 31 s. 3; 1945 c. 553.

158.091 COUNTY BOARD DELEGATES POWERS TO COUNTY WELFARE BOARD.

HISTORY. 1943 c. 31 s. 6; 1945 c. 553.

158.10 DISCHARGE FROM HOSPITAL.

HISTORY. 1921 c. 411 s. 9; G.S. 1923 s. 4585; M.S. 1927 s. 4585; 1945 c. 553.

158.11 INMATES OF STATE INSTITUTIONS MAY BE ADMITTED.

HISTORY. 1921 c. 411 s. 10; G.S. 1923 s. 4586; M.S. 1927 s. 4586; 1945 c. 553.

The suspension of a prisoner's sentence must be revoked and he must be recommitted before he can be cared for and the expense charged to the account of the director of public institutions. OAG Sept. 13, 1944, (328a).

158.12 COOPERATION WITH OTHER HOSPITALS.

HISTORY. 1921 c. 411 s. 11; G.S. 1923 s. 4587; M.S. 1927 s. 4587; 1945 c. 553.

158.13 PSYCHOPATHIC DEPARTMENT OF UNIVERSITY OF MINNESOTA HOSPITALS ESTABLISHED.

HISTORY. 1923 c. 385 s. 1; G.S. 1923 s. 4591; M.S. 1927 s. 4591; 1945 c. 553.

158.14 DUTIES OF DEPARTMENT.

HISTORY. 1923 c. 385 s. 2; G.S. 1923 s. 4592; M.S. 1927 s. 4592; 1945 c. 553.

158.15 SHALL BE PART OF UNIVERSITY OF MINNESOTA HOSPITALS.

HISTORY. 1923 c. 385 s. 3; G.S. 1923 s. 4593; M.S. 1927 s. 4593; 1945 c. 553.

158.16 BOARD OF REGENTS TO APPOINT MEDICAL DIRECTOR.

HISTORY. 1923 c. 385 s. 4; G.S. 1923 s. 4594; M.S. 1927 s. 4594.

158.17 DUTIES OF MEDICAL DIRECTOR.

HISTORY. 1923 c. 385 s. 5; G.S. 1923 s. 4595; M.S. 1927 s. 4595.

158.18 WHO MAY BE SENT TO DEPARTMENT.

HISTORY. 1923 c. 385 s. 6; G.S. 1923 s. 4596; M.S. 1927 s. 4596; 1945 c. 553.

158.19 DISCHARGE; TRANSFER.

HISTORY. 1923 c. 385 s. 7; G.S. 1923 s. 4597; M.S. 1927 s. 4597; 1945 c. 553.