

CHAPTER 158

UNIVERSITY OF MINNESOTA HOSPITALS

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158.01 ESTABLISHMENT.

The hospitals now and hereafter established in connection with the medical school of the University of Minnesota shall be known as the University of Minnesota hospitals. The student infirmary, the university dispensary, and the Elliot Memorial building shall be parts of the University of Minnesota hospitals.

History: (4577) 1921 c 411 s 1; 1945 c 553

158.02 WHAT PATIENTS MAY BE TREATED; RESEARCH WORK.

The University of Minnesota hospitals 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 the minor's person, as the case may be, is unable financially to secure such care. The University of Minnesota hospitals are hereby designated as places of treatment for such persons.

The hospitals shall be utilized for such instruction and for such scientific research as will promote the welfare of the patients committed to their care and assist in the application of science to the alleviation of human suffering.

History: (4578) 1921 c 411 s 2; 1945 c 553; 1986 c 444

158.03 OFFICERS TO REPORT CASES NEEDING HOSPITAL CARE.

When the existence of a case described in section 158.02 shall come to the notice of the sheriff, town clerk, health officer, public health nurse, police officer, or any other public official, or any physician or surgeon, it shall be the official's duty to, and any other person may, file with the board of county commissioners of the county of the residence of such person an application for the treatment of such person at the University of Minnesota hospitals.

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

shall be satisfied that the person on whose behalf the application is made is not financially able to pay for such treatment; or, in case of a minor, that a parent, guardian, or trustee, in representative capacity, or the person having legal custody over the minor or legally responsible for the minor's support or maintenance, is not financially able to provide such treatment, then the county board shall appoint a physician of the county whose duty shall be personally to make an examination of the person on whose behalf the application for treatment has been filed. The physician shall thereupon make and file with the county board 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 the person and state in the report whether or not in the physician's opinion the condition of such person can probably be remedied at a hospital. The report of the physician shall be made in duplicate within such time as the county board may direct upon blanks to be furnished by the University of Minnesota hospitals for that purpose. The report shall include any information within the knowledge of the physician relative to the financial situation of the person proposed to be treated. The physician appointed to make the examination, unless already a salaried officer of the state or some division thereof, shall receive \$5 for making the examination and, in any case, the physician's actual and necessary expenses; which fee and expenses shall be paid by the county of residence of the patient; and it shall be the duty of the board of county commissioners to provide for such payment.

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

If the county board should find that an applicant or the person legally responsible for the applicant is able to pay, in part but not in full, for care at the University of Minnesota hospitals at the rate to be charged as determined in section 158.05, the county board may approve the application of the patient on such terms of division of hospital charges as it may deem equitable and just.

History: (4579) 1921 c 411 s 3; 1943 c 31 s 1; 1945 c 553; 1973 c 123 art 5 s 7; 1986 c 444

158.04 TRANSPORTATION OF PATIENTS; PAYMENT FOR BY COUNTY.

Upon approval of such application, if the patient is unable to travel alone, the board of county commissioners may appoint a suitable official or person to take the patient to the University of Minnesota hospitals and such person shall receive actual and necessary expenses; and, if not a salaried officer of the state, or any subdivision thereof, shall receive in addition \$3 per day for the time actually and necessarily consumed in transporting the patient to the hospital and returning. The traveling expenses of the patient, the per diem and expenses of the person appointed to accompany the patient, and 30 percent of the first \$5,000 of the expense charged against the patient while an inmate of the hospital shall be paid by the county of residence of the patient and it shall be the duty of the board of county commissioners to provide for such payment.

If the county of residence of the patient is not the county in which the patient has

legal settlement for the purposes of poor relief, then the county of residence may seek reimbursement from the county in which the patient has settlement for the purposes of poor relief for all costs it has necessarily incurred and paid in connection with the hospitalization of said patient.

History: (4580) 1921 c 411 s 4; 1927 c 431 s 1; 1943 c 31 s 2; 1945 c 553; 1976 c 163 s 30; 1986 c 444

158.05 ACTUAL COST TO BE CHARGED PATIENTS.

The University of Minnesota hospitals shall treat patients admitted on certificate of the board of county commissioners of any county at rates based on actual cost, as determined by the board of regents of the University of Minnesota. Sixty percent of the first \$11,000 in charges against a patient, and all of the charges against a patient in excess of \$11,000, will be paid by the state from appropriations made to the university for this purpose. Before charges are billed to this program, the University of Minnesota hospitals and clinics shall seek payment from any third-party insurance that is liable for coverage of the patients' care. This program shall be billed for the balance after the third-party payment according to the formula noted above. Any resident of the state, upon a proper showing to the board of regents of the University of Minnesota that the resident 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 of 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 when there is room in the hospitals.

Students of the University of Minnesota and such other patients as the board of regents, to an extent that will not interfere with the primary purpose of the hospitals, as set forth in section 158.02, may direct, may be received in the hospitals when there is room and any fees received from such patients shall be used for the purposes of the hospitals.

History: (4581) 1921 c 411 s 5; 1945 c 553; 1976 c 163 s 31; 1983 c 258 s 65; 1986 c 444

158.06 PHYSICIANS AND ATTENDANTS NOT TO CHARGE FOR SERVICES.

No compensation shall be charged or received by any officer of the University of Minnesota hospitals, or by any physician, surgeon, or nurse in their employment, who shall treat or care for any patient in the hospitals, other than the compensation provided for such persons by the board of regents of the University of Minnesota.

History: (4582) 1921 c 411 s 6; 1945 c 553

158.07 QUARTERLY REPORT BY BOARD OF REGENTS; PAYMENT.

The board of regents of the University of Minnesota shall file a verified quarterly report with the commissioner of finance containing an itemized statement of the expense charged against each patient received on certification of any board of county commissioners, together with the name of the county from which the patient was certified, the amount of the expense charged against the patient that is to be paid by the county under section 158.04, and a statement of any sums paid by or for the patient. On the date that the board of regents files the quarterly report, it shall also submit requests for payment in amounts authorized in section 158.04 to each county from which expense amounts are due.

History: (4583) 1921 c 411 s 7; 1927 c 431 s 2; 1945 c 553; 1973 c 492 s 14; 1984 c 654 art 2 s 114; 1986 c 444

158.08 EXPENSES PAID BY COUNTIES.

Upon receipt of the invoice specified in section 158.07 a county auditor shall issue a warrant on the poor fund for the amount due, except that in any county now or

hereafter caring for the poor under a county poor commission, the notice shall be given to the county poor commission, which shall issue its warrant on the poor fund of the county for the amount due. The warrant shall be delivered to the county treasurer, who shall, if funds are available, issue a check payable to the University of Minnesota for the amount of the warrant. If no funds are available in the poor fund for the payment of the warrant, it shall be registered. The check or registered warrant shall be mailed to the University of Minnesota. All payments hereunder are appropriated to the University of Minnesota.

History: (4584) 1921 c 411 s 8; 1927 c 431 s 3; 1945 c 553; 1969 c 399 s 1; 1973 c 492 s 14; 1976 c 163 s 32; 1984 c 654 art 2 s 115; 1986 c 444

158.09 COUNTY BOARD MAY ACT UPON APPLICATIONS FOR TREATMENT IN THE UNIVERSITY OF MINNESOTA HOSPITALS.

The several boards of county commissioners in the state and any members of such a board may receive, investigate, and act upon applications for treatment in the University of Minnesota hospitals.

History: (4590) 1923 c 265 s 1; 1943 c 31 s 3; 1945 c 553 s 1

158.091 COUNTY BOARD MAY DELEGATE CERTAIN POWERS TO THE COUNTY WELFARE BOARD.

The county board and the several members thereof of any county in this state are hereby authorized to delegate to the county welfare board of such county all the rights, powers, and duties conferred upon it and them by sections 158.01 to 158.12, with reference to the hospitalization of indigent persons.

History: 1943 c 31 s 6; 1945 c 553

158.10 DISCHARGE FROM HOSPITALS.

When, in the opinion of the superintendent of the University of Minnesota hospitals, any patient should be discharged therefrom as cured, or as no longer needing treatment, or for the reason that treatment cannot benefit the case, the superintendent shall discharge the patient. If the patient is a county patient and is unable to return home alone, the superintendent shall appoint some suitable person to accompany the patient home from the hospital. Such person shall receive actual and necessary expenses; and, if not a salaried officer of the state, or any political subdivision thereof, shall receive in addition \$3 per day for the actual time necessarily consumed. The traveling expenses of all county patients and the per diem and expenses of the person appointed to accompany the patient shall be part of the legitimate expenses of caring for such patients in the University of Minnesota hospitals and as such included by the superintendent in the monthly bill to the commissioner of finance, provided for in section 158.07.

History: (4585) 1921 c 411 s 9; 1945 c 553; 1973 c 492 s 14; 1986 c 444

158.11 INMATES OF STATE INSTITUTIONS MAY BE ADMITTED.

The commissioner of human services may make application to the board of regents of the University of Minnesota for the admission to the University of Minnesota hospitals of any inmate of any state institution under the commissioner of human services, 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 University of Minnesota hospitals. The application shall be accompanied by the report of the physician of the institution or by a physician appointed by the commissioner of human services in the same form as reports of other physicians for admission of patients to the hospitals. The superintendent of the University of Minnesota hospitals shall decide whether the patient may be received by the hospitals; and, if received, when the patient shall be discharged or returned to the institution from which the patient came. The

commissioner of human services shall pay the board of regents of the University of Minnesota for the treatment of such patients at the same rate charged for county patients and the expense of such treatment and of transporting the patient to and from the University of Minnesota hospitals shall be paid out of the appropriation for operation of the institution from which the patient is sent. The commissioner of human services may when necessary send an attendant with, or bring back, the patient and pay for traveling expenses in like manner.

History: (4586) 1921 c 411 s 10; 1945 c 553; 1953 c 593 s 2; 1984 c 654 art 5 s 58; 1986 c 444

158.12 COOPERATION WITH OTHER HOSPITALS.

The University of Minnesota hospitals shall, upon request of proper authorities, cooperate with any county hospital or sanatorium established under existing statutes or any hospital supported, in whole or in part, by public funds. The superintendent of the University of Minnesota hospitals 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 the hospitals, 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 interns and other personnel.

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

History: (4587) 1921 c 411 s 11; 1945 c 553; 1986 c 444

158.13 PSYCHOPATHIC DEPARTMENT OF UNIVERSITY OF MINNESOTA HOSPITALS.

An institution to be known as the psychopathic department of the University of Minnesota hospitals is hereby established. It shall be erected, equipped, maintained, and administered for the care, observation, study, and treatment of defective persons, as defined in existing statutes, and of such other persons as are afflicted or supposed to be afflicted with any other abnormal mental condition. It may conduct an outpatient service for the diagnosis, care, and treatment of cases less pronounced in type than those thought proper for hospital residence. It may conduct clinics, investigate conditions, or conduct educational work in regard to mental disease and mental hygiene in any part of the state. Persons who are addicted to the use of habit-forming drugs shall be proper patients for admission to and treatment in the psychopathic department.

History: (4591) 1923 c 385 s 1; 1945 c 553

158.14 DUTIES OF DEPARTMENT.

The psychopathic department, in all matters relating to the commitment, custody, guardianship, care, and control of defective persons, shall be governed by the statutes pertaining to such persons and all powers granted by law to the commissioner of human services in regard to such persons shall apply to them in the hospital, subject to the provisions contained in sections 158.15 to 158.19.

History: (4592) 1923 c 385 s 2; 1945 c 553; 1953 c 593 s 2; 1984 c 654 art 5 s 58

158.15 SHALL BE PART OF UNIVERSITY OF MINNESOTA HOSPITALS.

The psychopathic department shall be a part of the University of Minnesota hospitals system and under the same organization and administration.

History: (4593) 1923 c 385 s 3; 1945 c 553

158.16 BOARD OF REGENTS TO APPOINT MEDICAL DIRECTOR.

The board of regents of the University of Minnesota shall appoint a medical director of the psychopathic department and such other officers and employees as may be necessary for its proper conduct.

History: (4594) 1923 c 385 s 4

158.17 DUTIES OF MEDICAL DIRECTOR.

The medical director shall supervise and direct the medical care and treatment of all patients in the psychopathic department; carry on and direct investigations into the nature, causes, and cure of abnormal mental conditions; ask for, and be entitled to receive, the cooperation of all experts in the employ of the University of Minnesota, such as physicians, surgeons, pathologists, psychologists, sociologists, and X-ray specialists; seek to bring about systematic cooperation between the psychopathic department and all state institutions under the jurisdiction of the commissioner of human services, so far as these institutions may have in their custody defective persons or persons afflicted or supposed to be afflicted with any other abnormal mental condition; visit from time to time these institutions upon request of the respective superintendents thereof or upon request of the commissioner of human services; and may advise the medical officers of these institutions, or the commissioner of human services, or any court, on request, in subjects relating to abnormal mental conditions.

History: (4595) 1923 c 385 s 5; 1953 c 593 s 2; 1984 c 654 art 5 s 58

158.18 WHO MAY BE SENT TO DEPARTMENT.

Any defective person may be sent to, committed to, or received by, the psychopathic department in the same manner and form and for the same causes as such person would be sent to, committed to, or received by, any institution under the commissioner of human services. It shall be in the discretion of any court acting in accordance with existing statute, or in the discretion of the commissioner of human services, to send any person to the psychopathic department instead of some other institution to which such person would be sent under existing statute. The psychopathic department is designated as a place of temporary detention to which, under existing statute, any probate judge may send defective persons for temporary detention. The commissioner of human services shall have authority to transfer any patient or inmate from any institution under the commissioner's control to the psychopathic department for observation and treatment or for medical and surgical care and treatment under the staff of the University of Minnesota hospitals.

Persons not defective but who are afflicted or supposed to be afflicted with any abnormal mental condition may be admitted to the psychopathic department under such rules as the board of regents may adopt.

In every case the consent of the superintendent of the University of Minnesota hospitals shall be obtained before any patient is sent to, transferred to, or received by, the psychopathic department.

History: (4596) 1923 c 385 s 6; 1945 c 553; 1953 c 593 s 2; 1984 c 654 art 5 s 58; 1986 c 444

158.19 DISCHARGE; TRANSFER.

When, in the judgment of the superintendent of the University of Minnesota hospitals any defective in the psychopathic department should be discharged from the hospitals the superintendent shall inform the commissioner of human services, who shall immediately order the patient to be sent to the proper institution for such patient. The medical director of the psychopathic department shall furnish the institution to which a patient is transferred, or the commissioner of human services, on request, or the proper court, on request, with full information and advice concerning the patient. The expense of transferring patients for study and treatment to and from the psychopathic department shall be a proper charge upon the counties as under existing statutes

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or upon institutions under the commissioner of human services from which or to which patients may be removed, under such rules as the commissioner of human services may prescribe. The expense of transferring patients for study and research purposes shall be a proper charge upon the psychopathic department under such rules as the board of regents may prescribe. The superintendent of the University of Minnesota hospitals may discharge any voluntary patient in the psychopathic department or may take steps to secure commitment and transfer of such a patient when in the judgment of the superintendent the patient should be discharged from the psychopathic department.

History: (4597) 1923 c 385 s 7; 1945 c 553; 1953 c 593 s 2; 1984 c 654 art 5 s 58