

Reported Recommending
Ind. Postponed
Passed House
Failed to Pass House
Passed Senate
Failed to Pass Senate

House File 107

January 24, 1947.
Public Health

By SCHWENGEL, HEDIN, LAWRENCE
and TESMER.

A BILL FOR

An Act providing for the care of tuberculosis patients in
public tuberculosis sanatoria.

Be It Enacted by the General Assembly of the State of Iowa:

1 Section 1. That section two hundred twenty point eleven
2 (220.11), Code 1946, is amended by striking all of said section
3 after the word "is" in line ten (10) and inserting in lieu
4 thereof the following: "entitled to free treatment under
5 Chapter 254".

1 Sec. 2. That section two hundred twenty point sixteen
2 (220.16), Code 1946, is amended by striking the period (.)
3 at the end of said section and adding thereto the following:
4 " , except as provided in Chapter 254."

1 Sec. 3. That section two hundred fifty-four point one
2 (254.1), Code 1946, is amended by striking from line three (3)
3 thereof the word "indigent".

1 Sec. 4. That Chapter 254, Code 1946, is amended by
2 adding thereto a new section as follows: "Treatments shall
3 be supplied free to any person suffering from tuberculosis upon
4 the signed certificate of his county director of social welfare,
5 or in case of a county maintaining a separate public tubercu-

6 lois hospital, his board of hospital trustees, that such person
7 has applied for such treatment and agreed to remain under treat-
8 ment until discharged by the sanatorium, and is not possessed
9 of sufficient income or estate to enable him to make payment
10 of the costs of such treatment in whole or in part without
11 affecting his reasonable economic security or support, in light
12 of his resources, obligations and responsibilities to dependents;
13 and expenditures of public funds for treatment of tuberculosis
14 shall be considered expenditures for the protection of the public
15 health and not as monies advanced in the nature of welfare or
16 relief. The state department of health shall promulgate rules
17 and regulations for the uniform administration of the provisions
18 of this section, which shall govern the county directors of
19 social welfare and boards of hospital trustees in the issuance
20 of such certificates. Any applicant aggrieved by the decision
21 of the director, or board of hospital trustees, may appeal in
22 writing to the state commissioner of health, who shall promptly
23 fix a date for hearing and give notice thereof to both the appli-
24 cant and the director, or board of hospital trustees, commanding
25 them to either appear or submit the facts in writing on or
26 before the date of such hearing. At the time of such hearing
27 the commissioner shall render final decision on the issue and
28 may affirm, modify or reverse the decision of the director, or
29 board of hospital trustees and issue or deny the certificate
30 accordingly. The director, or board of hospital trustees shall

32 sioner shall file a copy of any decision on appeal affecting the
33 same with the county auditor of the county of legal settlement
34 of the applicant.”

1 Sec. 5. That Chapter 254, Code 1946, is amended by
2 adding thereto a new section as follows: “Any person
3 receiving free treatment under the provisions of this chapter,
4 who shall fail or refuse to continue the same until discharged
5 by the sanatorium, may, upon complaint of any local or state
6 health officer, be ordered confined by any district court to
7 the same or any other sanatorium until finally discharged
8 therefrom and process shall issue to any peace officer for the
9 enforcement of any such order of court.”

1 Sec. 6. That chapter 254, Code 1946, is amended by
2 adding thereto a new section as follows: “The county through
3 the board of supervisors, or in case of a county maintaining
4 a separate public tuberculosis hospital, through the board of
5 hospital trustees, may receive any contributions or donations
6 of money or property from patients or other persons. Money
7 payable under the terms of an insurance contract covering costs
8 of hospitalization of tuberculosis patients shall be paid to
9 the board of supervisors, or in case of a county maintaining
10 a separate public tuberculosis hospital, to the board of
11 hospital trustees, of the county of the patient’s residence, if
12 the insured is receiving free care under the provisions of this
13 chapter.”

1 Sec. 7. That section three hundred forty-seven point

2 thirteen (347.13), subsection eight (8), Code, 1946, is amended
3 by inserting after the word "indigent" in line two (2) of said
4 subsection, the words, 'or tuberculous'.

1 Sec. 8. That section three hundred forty-seven point
2 sixteen (347.16), Code 1946, is amended by inserting after
3 the word "indigent" in line nine (9) thereof, the words, "or
4 tuberculous"; and by striking the period (.) in line fourteen
5 (14) thereof and adding the following: "or be entitled to
6 free care as provided in Chapter 254."

1 Sec. 9. That section three hundred forty-seven point
2 seventeen (347.17), Code 1946, is amended by inserting after
3 the word "patients" in line five (5) thereof the following:
4 "or patients entitled to free care as provided in Chapter
5 254."

EXPLANATION OF H. F. 107

This bill places the hospitalization of tuberculous patients in the public sanatoria of Iowa upon a public health basis.

The last sources of infection must be wiped out to get rid of human tuberculosis in Iowa. The only way now known to render cases of tuberculosis non-infectious is to treat in sanatoria for as long as necessary all who are willing to accept this isolation and treatment.

In 1945, 88.5 per cent (about \$428,000) of the cost of treating patients in Iowa's one state and five county sanatoria was met through county tax funds. Eleven and five-tenths per cent (about \$55,500) was met through money collected from patients and families or through liens placed on real estate. These collections cause patients who are not indigent to stay out of the sanatorium, to leave while they are still infectious, or to respond less rapidly to treatment because of worry over finances.

The procedure for certification set up in the bill limits free care to those patients whose resources are limited. Provision is made for voluntary contributions by patients or other persons and for payment of money under the terms of an insurance contract.