

CHAPTER 251

CARE OF TUBERCULOUS PERSONS

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251.01 [Repealed, 1980 c 357 s 22]

251.011 Subdivision 1. [Repealed, 1996 c 310 s 1]

Subd. 2. [Repealed, 1980 c 357 s 22]

Subd. 3. [Repealed, 2013 c 59 art 2 s 17]

Subd. 4. [Repealed, 1996 c 310 s 1]

Subd. 4a. [Repealed, 1996 c 310 s 1]

Subd. 5. [Repealed, 1980 c 357 s 22]

Subd. 6. [Repealed, 2013 c 59 art 2 s 17]

Subd. 7. [Repealed, 1996 c 310 s 1]

Subd. 8. [Repealed, 1996 c 310 s 1]

251.012 PROVISION OF NURSING HOME SERVICES.

Subdivision 1. **Nursing home care.** (a) The commissioner shall provide nursing home care to a person requiring and eligible for that level of care when the person:

- (1) is medically fragile or clinically challenging;
- (2) exhibits severe or challenging behaviors; or
- (3) requires treatment for an underlying mental illness.

(b) A person may be accepted for admission only after nursing home preadmission screening by the county.

Subd. 2. **Technical assistance.** Within the limits of appropriations, the commissioner may expand the provision of technical assistance to community providers in handling the behavior problems of their residents, and with community placements for younger persons who have heavy nursing needs and behavior problems. Technical assistance may include site visits, consultation with providers, or provider training.

Subd. 3. **Auxiliary services.** The nursing homes may enter into agreements according to section 246.57 to provide other services needed in the region that build on the services provided by the regional nursing homes and that are offered in conjunction with a community or community group.

Subd. 4. **Respite care.** Respite care may be offered when space is available if payment for the cost of care is guaranteed by the person, the person's family or legal representative, or a source other than a direct state appropriation to the nursing home, and if the individual meets the facility's admission criteria.

History: 1989 c 282 art 6 s 13

251.013 AH-GWAH-CHING, WILLMAR, AND FERGUS FALLS REGIONAL TREATMENT CENTERS.

Subdivision 1. **Ah-Gwah-Ching.** It is the intent of the legislature that the Ah-Gwah-Ching Center continue operation in Walker, Minnesota, as a provider of nursing care to geriatric and other residents whose aggressive or difficult to manage behavioral needs cannot be met in their home community.

Subd. 2. **Admissions criteria.** An individual who has a documented history of behavioral patterns that pose a substantial risk of harm to the individual, other vulnerable adults, staff, or visitors is eligible for placement at the Ah-Gwah-Ching Center if the individual meets all other admissions criteria.

Subd. 3. **Geriatric rapid assessment stabilization program.** The Ah-Gwah-Ching Center shall provide information on the geriatric rapid assessment stabilization program (GRASP) or emergency admittance programs to nursing facilities throughout the state and shall promote and encourage the use of these programs by these facilities.

Subd. 4. **Willmar.** It is the intent of the legislature that the Willmar Regional Treatment Center continue operation in Willmar as a provider of mental health and chemical dependency treatment, and also as an operator of community-based programs for persons with developmental disabilities.

Subd. 5. **Fergus Falls.** It is the intent of the legislature to continue operation as a downsized regional treatment center in Fergus Falls and use state employees to operate and maintain the downsized facility.

History: 2000 c 310 s 1; 2002 c 220 art 16 s 2

251.02 [Repealed, 1980 c 357 s 22]

251.03 [Repealed, 1980 c 357 s 22]

251.04 [Repealed, 1947 c 616 s 5; 1949 c 558 s 1]

251.041 EMPLOYEES CONTRACTING TUBERCULOSIS TO RECEIVE MEDICAL CARE AND COMPENSATION.

Any sanitarium, medical laboratories or institutional employee of the state or of any county or other subdivision of the state, or any duly licensed nurse employed by the state or by any county, city, nursing district or other subdivision of the state, whose duties in connection with such employment bring or have brought the employee or nurse in contact with patients or persons who are afflicted with tuberculosis, or with tuberculosis contaminated material, who contracts tuberculosis, shall be entitled to the medical care and compensation provided by sections 251.041 to 251.044. "Contracts tuberculosis" shall be construed to mean the development of demonstrable lesions of tuberculosis or the demonstration of the germs of tuberculosis in that person's secretions or excretions.

History: 1947 c 616 s 1; 1949 c 558 s 2; 1957 c 31 s 1; 1973 c 123 art 5 s 7; 1986 c 444; 2014 c 262 art 3 s 18; art 5 s 6

251.042 REPORT OF ILLNESS OF EMPLOYEE, HEARING ON CLAIM.

Whenever the superintendent of any state, county or city sanitarium, medical laboratories or other institution, or the head of any department of the state or of any county, city, nursing district or other subdivision of the state employing licensed nurses, learns that any employee of such institution or department whose duties bring the employee in contact with patients or inmates therein or who works in and around any tuberculosis contaminated material, has contracted tuberculosis while employed in such institution or department, such superintendent or department head shall report such illness to the Workers' Compensation Division. Copies of such report shall be sent to the commissioner of human services if a state institution; to the head of the department if a department of the state; to the county board if a county institution or department; or to the governing body of the city or other subdivision of the state which employs the afflicted person. The commissioner of the department of labor and industry upon receiving such report, shall mail to the superintendent of such institution or the head of such department blank forms to be filled out by such employee claiming the medical and sanitarium treatment and compensation hereinafter provided for. The commissioner of the Department of Labor and Industry shall thereupon set the claim on for hearing and determination in the same manner as claims of other public employees under the workers' compensation law are heard and determined.

History: 1947 c 616 s 2; 1949 c 558 s 3; 1957 c 31 s 2; Ex1967 c 1 s 6; 1973 c 123 art 5 s 7; 1973 c 388 s 166; 1975 c 359 s 23; 1984 c 654 art 5 s 58; 1986 c 444

251.043 FINDINGS, PAYMENT OF MEDICAL CARE AND COMPENSATION.

Subdivision 1. **Duty to seek treatment.** If upon the evidence mentioned in the preceding section, the workers' compensation division finds that an employee is suffering from tuberculosis contracted in the institution or department by contact with inmates or patients therein or by contact with tuberculosis contaminated material therein, it shall order the employee to seek the services of a physician, advanced practice registered nurse, or medical care facility. There shall be paid to the physician, advanced practice registered nurse, or facility where the employee may be received, the same fee for the maintenance and care of the person as is received by the institution for the maintenance and care of a nonresident patient. If the employee worked in a state hospital or nursing home, payment for the care shall be made by the commissioner of human services. If employed in any other institution or department the payment shall be made from funds allocated or appropriated for the operation of the institution or department. If the employee dies from the effects of the disease of tuberculosis and if the tuberculosis was the primary infection and the authentic cause of death, the workers' compensation division shall order payment to dependents as provided for under the general provisions of the workers' compensation law.

Subd. 2. **Presumption of risk.** Whenever it appears that any employee subject to the provisions of sections 251.041 to 251.044 has come into contact with persons who are afflicted with tuberculosis or with tuberculosis contaminated material in connection with the employment and has subsequently contracted tuberculosis it shall be presumed that such employee contracted tuberculosis by such contact and while working within the scope of employment.

Subd. 3. **Date of contracting tuberculosis.** When an employee has contracted tuberculosis within the meaning of subdivision 1, the periods of time specified in section 176.141 shall be computed from the date that a confirmed diagnosis of tuberculosis is first communicated to the employee.

History: 1947 c 616 s 3; 1949 c 558 s 4; 1957 c 31 s 3-5; 1957 c 287 s 3; Ex1967 c 1 s 6; 1973 c 123 art 5 s 7; 1973 c 388 s 167; 1975 c 359 s 23; 1976 c 2 s 88; 1980 c 357 s 18; 1984 c 654 art 5 s 58; 1986 c 444; 2014 c 262 art 3 s 18; art 5 s 6; 2020 c 115 art 4 s 96

251.044 APPLICATION.

Laws 1949, chapter 558, shall not be construed to apply in the case of employees known to have had tuberculosis as demonstrated by tuberculous lesions of the adult type or by demonstration of the germs of tuberculosis in such employee's secretions or excretions previous to or at the time of employment in said institutions. Laws 1949, chapter 558, shall apply in the case of employees known to have only an allergic reaction to tuberculin or only evidence of a healed primary infection if they contract tuberculosis while employed in said institutions. Laws 1949, chapter 558, shall apply to all employees of said institutions who sustain an accidental inoculation of the germs of tuberculosis through the skin and become disabled thereby.

History: 1949 c 558 s 5

251.045 [Repealed, 2014 c 262 art 3 s 18]

251.05 [Repealed, 1947 c 616 s 5; 1949 c 558 s 1]

251.051 POLICE OFFICERS CONTRACTING TUBERCULOSIS.

Any police officer of the state or of any county or municipal subdivision of the state whose duties within the scope of employment as a police officer bring or did bring the officer in contact with persons afflicted with tuberculosis, which said police officer contracts or becomes ill from tuberculosis, shall be entitled to the medical care and compensation provided for by sections 251.051 to 251.053. "Contracts tuberculosis" shall be construed to mean the development of demonstrable tuberculosis in the police officer.

History: 1955 c 340 s 1; 1986 c 444

251.052 REPORT OF ILLNESS.

Whenever the head of any state, county or city police department learns that any police officer employed by such department whose duties bring or did bring the employee in contact with any person suffering from tuberculosis while said police officer was in discharge of duties within the scope of employment, has contracted or become ill from tuberculosis while employed in such department, such head of the police department shall report such illness to the workers' compensation division. Copies of such report shall be sent to the commissioner of the Department of Human Services if a state police officer, to the county board if a county police officer, and to the governing body of the city if a municipal officer. The commissioner of the Department of Labor and Industry, upon receiving such report shall mail to the head of the department blank forms to be filled out by such employee claiming the medical and sanitarium treatment and compensation hereinafter provided for. The commissioner of the Department of Labor and Industry shall thereupon set the claim on for hearing and determination in the same manner as claims of other public employees under the workers' compensation law are heard and determined.

History: 1953 c 593 s 2; 1955 c 340 s 2; Ex1967 c 1 s 6; 1973 c 123 art 5 s 7; 1973 c 388 s 168; 1975 c 359 s 23; 1984 c 654 art 5 s 58; 1986 c 444

251.053 OFFICERS ADMITTED TO HOSPITAL; PAYMENTS.

If upon the evidence mentioned in section 251.052, the Workers' Compensation Division finds that a police officer is suffering from tuberculosis contracted by contact with persons suffering from tuberculosis while the police officer was working within the scope of the officer's employment, it shall require the police officer to seek the services of a physician or a medical care facility. There shall be paid to the physician or facility where the employee may be received the same fee for the maintenance and care of the employee as is received by the facility for the maintenance and care of a nonresident patient, and the fees shall be paid

by the state, county or city in whose employment the police officer was hired and working at the time the police officer contracted the tuberculosis. The police officer shall receive full hospital care and medical care without cost for the duration of the infection of tuberculosis or any recurrence thereof or any disability resulting therefrom. Further, the Workers' Compensation Division shall order payment to the police officer by the state, county or city concerned, of the compensation provided for under the general provisions of the workers' compensation law, including benefits to dependents as defined by the workers' compensation law, if the police officer dies from the effects of the disease of tuberculosis and if the tuberculosis was the primary infection and the authentic cause of death.

History: 1955 c 340 s 3; 1957 c 287 s 3; Ex1967 c 1 s 6; 1973 c 123 art 5 s 7; 1973 c 388 s 169; 1975 c 359 s 23; 1980 c 357 s 19

251.06 [Repealed, 1965 c 45 s 73]

251.07 [Repealed, 1965 c 45 s 73]

251.08 [Repealed, 1980 c 357 s 22]

251.09 [Repealed, 1980 c 357 s 22]

251.10 [Repealed, 1980 c 357 s 22]

251.11 [Repealed, 1980 c 357 s 22]

251.12 [Repealed, 1980 c 357 s 22]

251.13 [Repealed, 1980 c 357 s 22]

251.14 [Repealed, 1980 c 357 s 22]

251.15 HOSPITAL EMPLOYEE CONTRACTING TUBERCULOSIS.

Subdivision 1. **County-provided care and treatment.** Any student nurse, medical student, or physician in training, who contracts tuberculosis as a result of direct contact with tuberculosis patients during the course of training, or internship in a public tax-supported hospital in this state, may be given care and treatment in a public tax-supported hospital operated and controlled by the county in which the public tax-supported hospital is located, and at the expense of the county in which the public hospital is located.

Subd. 2. **Time within which application must be made.** Application for such care and treatment shall be made by such student nurse, medical student, or medical intern at any time during the course of training or internship, and after the termination thereof, application shall be made within 12 months after the termination of said training or internship.

History: 1947 c 569 s 1,2; 1980 c 357 s 20; 1986 c 444

251.16 [Repealed, 1980 c 357 s 22]

251.17 INDIANS, FACILITIES FOR TREATMENT.

The governor and the commissioner of human services are authorized to negotiate for and to accept a conveyance from the United States of America of the following described land in Cass County, to-wit:

Beginning at a point 463.7 feet west and 56.0 feet south of the Northeast corner of the Southeast quarter of the Southwest quarter of Section 35, Township 142 North, Range 31 West of the 5th P.M. thence south 25 degrees 30 minutes west at no variation, for a distance of 350 feet, thence north 64 degrees 30 minutes

west for a distance of 350 feet, thence north 25 degrees 30 minutes east for a distance of 350 feet, thence south 64 degrees 30 minutes east for a distance of 350 feet to point of beginning, containing 2.81 acres,

the buildings on which are used in conjunction with the Minnesota State Sanitarium, agreeing as a consideration therefor to maintain the buildings for 20 years, and to provide there or elsewhere adequate treatment facilities for tubercular Indians who are residents of Minnesota, for poor relief purposes.

History: *1961 c 122 s 1; 1984 c 654 art 5 s 58*