TUBERCULOSIS HOSPITALIZATION.

An Act relating to tuberculosis hospitalization by counties, defining the powers and duties of certain county officers and the State Department of Health in relation thereto, requiring a separate county tax levy for such purposes and prescribing how the same shall be managed and disbursed, setting up a tuberculosis account in the County Current Expense Fund, creating a State Tuberculosis Equalization Fund for state aid to counties with a large incidence of tuberculosis, appropriating funds for such purpose and providing that the act shall take effect July 1, 1943.

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

Section 1. Tuberculosis is a communicable disease and hospitalization and segregation of active cases of tuberculosis represents the basic step in the control of this disease and the conquest of a major health problem. In order effectively to carry on such work, the Board of County Commissioners of each county in the state shall annually budget and levy a tax in a sum equal to six-tenths (.6) of a mill on the assessed valuation of the taxable property in the county, the proceeds of which shall be used for hospitalization of tuberculosis patients: Provided, That if any county has an unexpended balance from such levy, over and above the amount required for adequate hospitalization of all tuberculosis cases within the county, the Board of County Commissioners may budget and reappropriate the same for tuberculosis hospitalization for the ensuing year, or it may allocate from time to time such unexpended balance, or any portion thereof, to the County Health Department for use in furtherance of tuberculosis case-finding, or any other public health endeavor. Proceeds of the levy herein provided for, and any income that may accrue from miscellaneous receipts in connection with tuberculosis hospitaliza-
tion, shall be placed in the County Current Expense Fund in a special tuberculosis account and obligations incurred for tuberculosis hospitalization shall be payable in the same manner as general county obligations are paid out of the current expense fund. The County Auditor shall furnish to the Board of County Commissioners and the State Department of Health a monthly report of receipts and disbursements in the tuberculosis account which report shall also show balances of cash on hand.

Sec. 2. In order to provide necessary funds for adequate care of tuberculosis patients in counties having a large incidence of tuberculosis, there is hereby created a State Tuberculosis Equalization Fund which shall be apportioned and expended under the direction of the State Director of Health to provide state aid to counties in which the proceeds of the tax levy of six-tenths (.6) mill are not sufficient to provide adequate tuberculosis hospitalization. There is hereby appropriated from the General Fund to the State Tuberculosis Equalization Fund for the fiscal biennium ending March 31, 1945, the sum of three hundred thousand dollars ($300,000) and there is further appropriated from the State Tuberculosis Equalization Fund to the State Department of Health for such biennium the aforesaid sum of three hundred thousand dollars ($300,000), or as much thereof as may be necessary, to be used for tuberculosis hospitalization. Payments from the equalization fund shall be authorized only after county funds in the tuberculosis account have been exhausted, and shall be made by warrant of the State Auditor to individual counties upon vouchers of the State Department of Health. Upon receipt of such warrant the amount thereof shall be covered into the tuberculosis account and disbursed in the same manner as county funds are disbursed therefrom.
SECTION 3. Prior to the time county budgets are finally approved and adopted by the Board of County Commissioners, each county in the state shall be required to submit its proposed tuberculosis hospitalization budget to the State Department of Health for the approval thereof by the Director.

SECTION 4. There shall be in all counties maintaining, either singly or jointly, tuberculosis sanatoria a sanitorium administrator, to be appointed by the Board of County Commissioners and, in the case of joint county sanatoria, by the joint sanatorium committee. Such administrator shall be either the sanatorium medical director or the jurisdictional health officer.

SECTION 5. All arrangements for hospital care, tuberculosis case-finding and post sanatorium public health follow-up of known cases of tuberculosis shall be the responsibility of the jurisdictional health officer. Such officer shall also have the responsibility of determining the financial eligibility of patients admitted to tuberculosis hospitals and in so doing shall be entitled to the assistance of the medical director and also of the County Welfare Department.

SECTION 6. The admission of all patients whose maintenance is paid for in whole or in part by county or state funds to county or joint-county or private sanatoria, hospitals or nursing homes shall be upon application to and certification by the County Health Officer. Medical reports on the condition of such patients shall be submitted to the health department of the county maintaining the patient's support by the sanatorium medical director at such times, on such forms and in accordance with such procedure as may be prescribed by the State Director of Health.

SECTION 7. Except as otherwise herein provided this act shall not be construed to amend, repeal, or in any wise modify the provisions of chapter 172, Laws

Sec. 8. This act shall take effect July 1, 1943, as of which date each county shall allocate to the tuberculosis account from its assistance account an amount equivalent to a three-tenths (.3) mill tax levy on the assessed valuation of the taxable property in the county to be used for tuberculosis hospitalization during the balance of the fiscal year 1943.

Passed the Senate February 26, 1943.
Passed the House March 8, 1943.
Approved by the Governor March 19, 1943.