



Laurel E. Mannion

Final Analysis
Legislative Service Commission

Sub. H.B. 529
123rd General Assembly
(As Passed by the General Assembly)

Reps. Taylor, Britton, Grendell, D. Miller, Pringle, Redfern, Verich, Perry

Sen. Drake

Effective: *

ACT SUMMARY

- Increases to \$1,500 (from \$200) the limit on the reimbursement an injured person or attending physician may receive from a board of county commissioners for expenses related to a rabies injury.
- Provides that reimbursement may be made only if the injured person cannot, without deprivation of basic needs, provide for the payment of the treatment expenses.

CONTENT AND OPERATION

(secs. 955.41 and 955.42)

Under continuing law, a person bitten or injured by an animal afflicted with rabies who receives medical or surgical treatment or expends money due to the injury, may, within four months of the injury, present an itemized account of the expenses incurred to the appropriate board of county commissioners at a regular meeting of the board. The itemized account must be accompanied by affidavits of the person and the person's attending physician verifying the itemizations.¹

** The Legislative Service Commission had not received formal notification of the effective date at the time this analysis was prepared.*

¹ *If the person is deceased, the administrator or executor of the person's estate may execute the affidavit and present the person's claim to the board. If the person is a minor, the minor's parent or guardian may execute the affidavit and presumably present the account and both affidavits to the board. The appropriate board is the board of county commissioners of the county where the injury was received.*

Under prior law, if the board found the account correct and just, in whole or in part, it was required to order payment to the patient and the physician, as appropriate. A person could not receive more than \$200 for one injury.

The act permits, rather than requires, the board to provide reimbursement. It may reimburse either the patient, the patient's representative, or the physician who rendered treatment an amount of up to \$1,500 if the board determines that the patient, the patient's estate, or the patient's parent or guardian is unable, without deprivation of basic needs, to pay the expenses incurred for medical and surgical treatment. The act requires that the person, administrator or executor, or parent or guardian, present the board with documentation establishing inability to provide for the payment of those expenses.

HISTORY

ACTION	DATE	JOURNAL ENTRY
Introduced	12-30-99	p. 1473
Reported, H. Local Gov't & Townships	02-01-00	p. 1580
Passed House (92-2)	03-22-00	p. 1703
Reported, S. Health, Human Services & Aging	05-18-00	p. 1757
Passed Senate (33-0)	05-23-00	p. 1786
House concurred in Senate amendments (97-0)	05-24-00	pp. 2066-2067

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