The Hill-Burton Act

The Hill-Burton Act, excerpted here, became law on Aug. 13, 1946, as Public Law 725. The official title is, “Hospital Survey and Construction Act,” and the document is nine pages in length.

The chief sponsor was Sen. Lister Hill (D-Ala.). The act was an amendment to the Public Health Service Act. It authorized grants to the states for surveying their hospitals and public health centers and for planning construction of additional facilities, and it authorized grants to assist in such construction. The law was extended in several subsequent acts of Congress.

The full text can be found in the public laws volume for the 79th Congress, 2nd session, Chapter 958.

Declaration of Purpose

Sec. 01. The purpose of this title is to assist the several States—
(a) to inventory their existing hospitals (as defined in section 31 (e)), to survey the need for construction of hospitals, and to develop programs for construction of such public and other nonprofit hospitals as will, in conjunction with existing facilities, afford the necessary physical facilities for furnishing adequate hospital, clinic, and similar services to all their people; and
(b) to construct public and other nonprofit hospitals in accordance with such programs...

General Regulations

Sec. 601. The purpose of this title is to assist the several States—
(a) to inventory their existing hospitals (as defined in section 631 (e)), to survey the need for construction of hospitals, and to develop programs for construction of such public and other nonprofit hospitals as will, in conjunction with existing facilities, afford the necessary physical facilities for furnishing adequate hospital, clinic, and similar services to all their people; and
(b) to construct public and other nonprofit hospitals in accordance with such programs...

and more than six persons per square mile the limit shall be five beds per thousand population, and in States having six persons or less per square mile the limit shall be five and one-half beds per thousand population; but if, in any area (as defined in the regulations) within the State, there are more beds than required by the standards prescribed by the Surgeon General, the excess over such standards may be eliminated in calculating this maximum allowance.

(b) The number of beds required to provide adequate hospital services for tuberculosis patients, mental patients, and chronic-disease patients in a State, and the general method or methods by which such beds shall be distributed throughout the State: provided, That for the purposes of this title the total number of beds for tuberculosis patients shall not exceed two and one-half times the average annual deaths from tuberculosis in the State over the five-year period from 1940-1944, inclusive, the total number of beds for mental patients shall not exceed five per thousand population, and the total number of beds for chronic-disease patients shall not exceed two per thousand population.
(c) The number of public health centers and the general method of distribution of such centers throughout the State, which for the purposes of this title, shall not exceed one per thirty thousand population, except that in States having less than 12 persons per square mile, it shall not exceed one per twenty thousand population.
(d) The general manner in which the State agency shall determine the priority of projects based on the relative need of different sections of the population and of different areas lacking adequate hospital facilities, giving special consideration to hospitals serving rural communities and areas with relatively small financial resources.
(e) General standards of construction and equipment for hospitals of different classes and in different types of location.
(f) That the State plan shall provide for adequate hospital facilities for the people residing in a State, without discrimination on account of race, creed, or color, and shall provide for adequate hospital facilities for persons unable to pay therefor. Such regulation may require that before approval of any application for a hospital or addition to a hospital is recommended by a State agency, assurance shall be received by the
State from the applicant that (1) such hospital or addition to a hospital will be made available to all persons residing in the territorial area of the applicant, without discrimination on account of race, creed, or color, but an exception shall be made in cases where separate hospital facilities are provided for separate population groups, if the plan makes equitable provision on the basis of need for facilities and services of like quality for each such group; and (2) there will be made available in each such hospital or addition to a hospital a reasonable volume of hospital services to persons unable to pay therefor, but an exception shall be made if such a requirement is not feasible from a financial standpoint.”

Definitions

Sec. 631. For the purposes of this title—
... (e) the term “hospital” (except as used in section 622 (a) and (b)) includes public health centers and general, tuberculosis, mental, chronic disease, and other types of hospitals, and related facilities, such as laboratories, out-patient departments, nurses’ home and training facilities, and central service facilities operated in connection with hospitals, but does not include any hospital furnishing primarily domiciliary care;

(f) the term “public health center” means a publicly owned facility for the provision of public health services, including related facilities such as laboratories, clinics, and administrative offices operated in connection with public health centers;

(g) the term “nonprofit hospital” means any hospital owned and operated by a corporation or association, no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual;

(h) the term “construction” includes construction of new buildings, expansion, remodeling, and alteration of existing buildings, and initial equipment of any such buildings; including architects’ fees, but excluding the cost of off-site improvements and, except with respect to public health centers, the cost of the acquisition of land; and

(i) the term “cost of construction” means the amount found by the Surgeon General to be necessary for the construction of a project.