

FIRST REGULAR SESSION  
[TRULY AGREED TO AND FINALLY PASSED]  
SENATE COMMITTEE SUBSTITUTE FOR  
HOUSE COMMITTEE SUBSTITUTE FOR  
**HOUSE BILL NOS. 59 & 269**  
**92ND GENERAL ASSEMBLY**

0368S.04T

2003

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**AN ACT**

To amend chapters 192, 630 and 633, RSMo, by adding thereto five new sections relating to implementation of special health care programs.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapters 192, 630 and 633, RSMo, are amended by adding thereto five new sections, to be known as sections 192.350, 192.352, 192.355, 630.900, and 633.032, to read as follows:

**192.350. 1. There is hereby established within the department of health and senior services the "Missouri State Advisory Council on Pain and Symptom Management". The council shall consist of nineteen members that are residents of this state. The members of the council shall include:**

**(1) The director of the department of health and senior services, or the director's designee, who shall serve as chair of the council;**

**(2) The state attorney general, or the attorney general's designee;**

**(3) Two members of the senate, appointed by the president pro tempore of the senate;**

**(4) Two members of the house of representatives, appointed by the speaker of the house of representatives;**

**(5) One physician, appointed by the Missouri state board of registration for the healing arts, that is certified and accredited in pain management;**

**(6) One physician, appointed by the Missouri state board of registration for the healing arts, that is certified and accredited in palliative care;**

**(7) Two registered nurses, appointed by the Missouri board of nursing, with expertise in hospice, oncology, long-term care, or pain and symptom management and are**

18 certified by the National Board for Certification of Hospice and Palliative Nurses;

19 (8) One dentist, appointed by the Missouri board of dentistry, with training in pain  
20 and symptom management and is associated with the education and training of dental  
21 students;

22 (9) One pharmacist, appointed by the Missouri board of pharmacy, with training  
23 in pain and symptom management and is associated with the education and training of  
24 pharmacists;

25 (10) One representative of the pharmaceutical research and manufacturers of  
26 America, appointed by the governor, with the advice and consent of the senate;

27 (11) One mental health services provider, appointed by the governor, with the  
28 advice and consent of the senate;

29 (12) One physician assistant, appointed by the Missouri advisory commission for  
30 physician assistants, with training in pain and symptom management;

31 (13) One chiropractic physician, appointed by the Missouri state board of  
32 chiropractic examiners, with training in pain and symptom management;

33 (14) One physical therapist, appointed by the Missouri Physical Therapy  
34 Association, that specializes in pain management;

35 (15) One advocate representing voluntary health organizations or advocacy groups  
36 with an interest in pain management, appointed by the governor, with the advice and  
37 consent of the senate; and

38 (16) One member who has been diagnosed with chronic pain, appointed by the  
39 governor, with the advice and consent of the senate.

40 2. Members of the council shall be appointed by February 1, 2004. Of the members  
41 first appointed to the council, seven members shall serve a term of two years, and eight  
42 members shall serve a term of one year, and thereafter, members shall serve a term of two  
43 years. Members shall continue to serve until their successor is duly appointed and  
44 qualified. Any vacancy on the council shall be filled in the same manner as the original  
45 appointment.

192.352. 1. Members shall serve without compensation but shall, subject to  
2 appropriations, be reimbursed for reasonable and necessary expenses actually incurred  
3 in the performance of the member's official duties.

4 2. The department of health and senior services with existing resources shall  
5 provide administrative support and current staff as necessary for the effective operation  
6 of the council.

192.355. 1. Meetings shall be held at least every ninety days or at the call of the  
2 council chair.

3           **2. The advisory council shall:**

4           **(1) Hold public hearings pursuant to chapter 536, RSMo, to gather information**  
5 **from the general public on issues pertaining to pain and symptom management;**

6           **(2) Make recommendations on acute and chronic pain management treatment**  
7 **practices;**

8           **(3) Analyze statutes, rules, and regulations regarding pain management;**

9           **(4) Study the use of alternative therapies regarding pain and symptom management**  
10 **and any sanctions imposed;**

11           **(5) Review the acute and chronic pain management education provided by**  
12 **professional licensing boards of this state;**

13           **(6) Examine the needs of adults, children, the terminally ill, racial and ethnic**  
14 **minorities, and medically underserved populations that have acute and chronic pain;**

15           **(7) Make recommendations on integrating pain and symptom management into the**  
16 **customary practice of health care professionals;**

17           **(8) Identify the roles and responsibilities of health care professionals in pain and**  
18 **symptom management;**

19           **(9) Make recommendations on the duration and content of continuing education**  
20 **requirements for pain and symptom management;**

21           **(10) Review guidelines on pain and symptom management issued by the United**  
22 **States Department of Health and Human Services;**

23           **(11) Provide an annual report on the activities of the council to the director of the**  
24 **department of health and senior services, the speaker of the house of representatives, the**  
25 **president pro tempore of the senate, and the governor by February first of every year.**  
26 **Such report shall include, but not be limited to the following:**

27           **(a) Issues and recommendations developed by the council;**

28           **(b) Pain management educational curricula and continuing education requirements**  
29 **for institutions providing health care education;**

30           **(c) Information regarding the impact and effectiveness of prior recommendations,**  
31 **if any, that have been implemented; and**

32           **(d) Review of current policies regarding pain and symptom management and any**  
33 **changes thereto occurring in pain and symptom management.**

34           **3. The department of health and senior services may accept on behalf of the council**  
35 **any federal funds, gifts, and donations from individuals, private organizations, and**  
36 **foundations, and any other funds that may become available.**

**630.900. 1. The director of the department of mental health, in partnership with**  
2 **the department of health and senior services and in collaboration with the departments of**

3 social services, elementary and secondary education, higher education, and corrections,  
4 and other appropriate agencies, organizations, and institutions in the community, shall  
5 design a proposed state suicide prevention plan using an evidence-based public health  
6 approach focused on suicide prevention.

7 2. The plan shall include, but not be limited to:

8 (1) Promoting the use of employee assistance and workplace programs to support  
9 employees with depression and other psychiatric illnesses and substance abuse disorders,  
10 and refer them to services. In promoting such programs, the director shall collaborate  
11 with employer and professional associations, unions, and safety councils;

12 (2) Promoting the use of student assistance and educational programs to support  
13 students with depression and other psychiatric illnesses and substance abuse disorders.  
14 In promoting such programs, the director shall collaborate with educators, administrators,  
15 students and parents with emphasis on identification of the risk factors associated with  
16 suicide;

17 (3) Providing training and technical assistance to local public health and other  
18 community-based professionals to provide for integrated implementation of best practices  
19 for preventing suicides;

20 (4) Establishing a toll-free suicide prevention hotline; and

21 (5) Coordinating with federal, state, and local agencies to collect, analyze, and  
22 annually issue a public report on Missouri-specific data on suicide and suicidal behaviors.

23 3. The proposed state suicide prevention plan designed and developed pursuant to  
24 this section shall be submitted to the general assembly by December 31, 2004, and shall  
25 include any recommendations regarding statutory changes and implementation and  
26 funding requirements of the plan.

633.032. 1. The department of mental health shall develop a plan to address the  
2 needs of persons who are on a waitlist for services, including persons in habilitation centers  
3 waiting for community placement. Such plan shall reflect the partnership between persons  
4 with developmental disabilities and their families, community providers, and state officials,  
5 and shall support the choice and control of consumers and their families in the delivery of  
6 services and supports. Such plan shall include the following:

7 (1) A method to reduce the waitlist for services over a period of five years and to  
8 reduce the waiting period to ninety days;

9 (2) A description of minimum supports and services available to all eligible  
10 individuals and their families;

11 (3) An evaluation of the capacity of current providers to serve more individuals;

12 (4) A method of adjusting support and service levels based on the needs of the

13 **eligible individual combined with family or other relevant circumstances affecting the**  
14 **support of such individual;**

15 **(5) A method for determining the circumstances when out-of-home twenty-four-**  
16 **hour care may be necessary;**

17 **(6) A description of how the plan will be implemented on a statewide basis;**

18 **(7) Any changes in state law that will be required to implement the plan; and**

19 **(8) An analysis of the budgetary and programmatic effects of providing supports**  
20 **and services for all eligible individuals and their families.**

21 **2. The plan required pursuant to this section shall be completed on or before**  
22 **November 1, 2003. The director of the department of mental health shall submit a copy**  
23 **of the plan to the speaker of the house of representatives, the president pro tem of the**  
24 **senate, and the governor.**