

HOUSE _____ AMENDMENT NO. _____

Offered By

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 0177,
Page 15 , Section 208.247, Line 26 by inserting after all of said section and line the following:

“210.101. 1. There is hereby established the "Missouri Children's Services Commission",
which shall be composed of the following members:

(1) The director or [deputy director of the department of labor and industrial relations and
the director or deputy director of each state agency, department, division, or other entity which
provides services or programs for children, including, but not limited to, the department of mental
health, the department of elementary and secondary education, the department of social services,
the department of public safety and the department of health and senior services] the director's
designee of the following departments: labor and industrial relations, corrections, elementary and
secondary education, higher education, health and senior services, mental health, public safety,
and social services;

(2) One judge of a family or juvenile court, who shall be appointed by the chief justice of
the supreme court;

(3) [One judge of a family court, who shall be appointed by the chief justice of the
supreme court;

(4) Four] Two members, [two] one from each political party, of the house of
representatives, who shall be appointed by the speaker of the house of representatives;

[(5) Four] (4) Two members, [two] one from each political party, of the senate, who shall
be appointed by the president pro tempore of the senate;

(5) Five at-large members who shall be appointed by the governor with the advice and
consent of the senate, with one member representing each of the following: pediatricians, family
physicians, hospital administrators, children's advocacy organizations, and parents of minor
children.

All members shall serve for as long as they hold the position which made them eligible for
appointment to the Missouri children's services commission under this subsection. All members
shall serve without compensation but may be reimbursed for all actual and necessary expenses

1 incurred in the performance of their official duties for the commission.

2 2. All meetings of the Missouri children's services commission shall be open to the public
3 and shall, for all purposes, be deemed open public meetings under the provisions of sections
4 610.010 to 610.030. The Missouri children's services commission shall meet no less than once
5 every two months[, and shall hold its first meeting no later than sixty days after September 28,
6 1983]. Notice of all meetings of the commission shall be given to the general assembly in the
7 same manner required for notifying the general public of meetings of the general assembly.

8 3. The Missouri children's services commission may make all rules it deems necessary to
9 enable it to conduct its meetings, elect its officers, and set the terms and duties of its officers.

10 4. The commission shall elect from amongst its members a chairman, vice chairman, a
11 secretary-reporter, and such other officers as it deems necessary.

12 5. The services of the personnel of any agency from which the director or deputy director
13 is a member of the commission shall be made available to the commission at the discretion of
14 such director or deputy director. All meetings of the commission shall be held in the state of
15 Missouri.

16 6. The officers of the commission may hire an executive director. Funding for the
17 executive director may be provided from the Missouri children's services commission fund or
18 other sources provided by law.

19 7. The commission, by majority vote, may invite individuals representing local and
20 federal agencies or private organizations and the general public to serve as ex officio members of
21 the commission. Such individuals shall not have a vote in commission business and shall serve
22 without compensation but may be reimbursed for all actual and necessary expenses incurred in the
23 performance of their official duties for the commission.

24 210.102. 1. It shall be the duty of the Missouri children's services commission to:

25 (1) Make recommendations which will encourage greater interagency coordination,
26 cooperation, more effective utilization of existing resources and less duplication of effort in
27 activities of state agencies which affect the legal rights and well-being of children in Missouri;

28 (2) Develop an integrated state plan for the care provided to children in this state through
29 state programs;

30 (3) Develop a plan to improve the quality of children's programs statewide. Such plan
31 shall include, but not be limited to:

32 (a) Methods for promoting geographic availability and financial accessibility for all
33 children and families in need of such services;

34 (b) Program recommendations for children's services which include child development,
35 education, supervision, health and social services;

36 (c) Goals with measurable outcomes for state agencies with respect to children's services;

- 1 (d) Policy recommendations to the governor and general assembly;
- 2 (4) Design and implement evaluation of the activities of the commission in fulfilling the
- 3 duties as set out in this section;
- 4 (5) Report annually to the governor with five copies each to the house of representatives
- 5 and senate about its activities including, but not limited to the following:
- 6 (a) A general description of the activities pertaining to children of each state agency
- 7 having a member on the commission;
- 8 (b) A general description of the plans and goals, as they affect children, of each state
- 9 agency having a member on the commission;
- 10 (c) Recommendations for statutory and appropriation initiatives to implement the
- 11 integrated state plan;
- 12 (d) A report from the commission regarding the state of children in Missouri.
- 13 2. There is hereby established within the children's services commission the
- 14 "Coordinating Board for Early Childhood", which shall constitute a body corporate and politic,
- 15 and shall include but not be limited to the following members:
- 16 (1) A representative from the governor's office;
- 17 (2) A representative from each of the following departments: health and senior services,
- 18 mental health, social services, and elementary and secondary education;
- 19 (3) A representative of the judiciary;
- 20 (4) A representative of the family and community trust board (FACT);
- 21 (5) A representative from the head start program;
- 22 (6) Nine members appointed by the governor with the advice and consent of the senate
- 23 who are representatives of the groups, such as business, philanthropy, civic groups, faith-based
- 24 organizations, parent groups, advocacy organizations, early childhood service providers, and other
- 25 stakeholders. The coordinating board may make all rules it deems necessary to enable it to
- 26 conduct its meetings, elect its officers, and set the terms and duties of its officers. The
- 27 coordinating board shall elect from amongst its members a chairperson, vice chairperson, a
- 28 secretary-reporter, and such other officers as it deems necessary. Members of the board shall
- 29 serve without compensation but may be reimbursed for actual expenses necessary to the
- 30 performance of their official duties for the board.
- 31 3. The coordinating board for early childhood shall have the power to:
- 32 (1) Develop a comprehensive statewide long-range strategic plan for a cohesive early
- 33 childhood system;
- 34 (2) Confer with public and private entities for the purpose of promoting and improving
- 35 the development of children from birth through age five of this state;
- 36 (3) Identify legislative recommendations to improve services for children from birth

1 through age five;

2 (4) Promote coordination of existing services and programs across public and private
3 entities;

4 (5) Promote research-based approaches to services and ongoing program evaluation;

5 (6) Identify service gaps and advise public and private entities on methods to close such
6 gaps;

7 (7) Apply for and accept gifts, grants, appropriations, loans, or contributions to the
8 coordinating board for early childhood fund from any source, public or private, and enter into
9 contracts or other transactions with any federal or state agency, any private organizations, or any
10 other source in furtherance of the purpose of subsections 2 and 3 of this section, and take any and
11 all actions necessary to avail itself of such aid and cooperation;

12 (8) Direct disbursements from the coordinating board for early childhood fund as
13 provided in this section;

14 (9) Administer the coordinating board for early childhood fund and invest any portion of
15 the moneys not required for immediate disbursement in obligations of the United States or any
16 agency or instrumentality of the United States, in obligations of the state of Missouri and its
17 political subdivisions, in certificates of deposit and time deposits, or other obligations of banks
18 and savings and loan associations, or in such other obligations as may be prescribed by the board;

19 (10) Purchase, receive, take by grant, gift, devise, bequest or otherwise, lease, or
20 otherwise acquire, own, hold, improve, employ, use, and otherwise deal with real or personal
21 property or any interests therein, wherever situated;

22 (11) Sell, convey, lease, exchange, transfer or otherwise dispose of all or any of its
23 property or any interest therein, wherever situated;

24 (12) Employ and fix the compensation of an executive director and such other agents or
25 employees as it considers necessary;

26 (13) Adopt, alter, or repeal by its own bylaws, rules, and regulations governing the
27 manner in which its business may be transacted;

28 (14) Adopt and use an official seal;

29 (15) Assess or charge fees as the board determines to be reasonable to carry out its
30 purposes;

31 (16) Make all expenditures which are incident and necessary to carry out its purposes;

32 (17) Sue and be sued in its official name;

33 (18) Take such action, enter into such agreements, and exercise all functions necessary or
34 appropriate to carry out the duties and purposes set forth in this section.

35 4. There is hereby created the "Coordinating Board for Early Childhood Fund" which
36 shall consist of the following:

1 (1) Any moneys appropriated by the general assembly for use by the board in carrying out
2 the powers set out in subsections 2 and 3 of this section;

3 (2) Any moneys received from grants or which are given, donated, or contributed to the
4 fund from any source;

5 (3) Any moneys received as fees authorized under subsections 2 and 3 of this section;

6 (4) Any moneys received as interest on deposits or as income on approved investments of
7 the fund;

8 (5) Any moneys obtained from any other available source. Notwithstanding the provisions
9 of section 33.080 to the contrary, any moneys remaining in the coordinating board for early
10 childhood fund at the end of the biennium shall not revert to the credit of the general revenue
11 fund.

12 210.105. 1. The general assembly finds and declares:

13 (1) Premature or preterm birth is the leading cause of infant death in Missouri. Premature
14 infants are more than fifteen times as likely as other infants to die in the first year of life;

15 (2) Infants born preterm are more than twice as likely as full-term infants to have major
16 birth defects;

17 (3) Birth defects are the second leading cause of infant death in Missouri;

18 (4) Missouri ranks thirty-third in the nation in the rate of infant mortality, with a statewide
19 rate of seven and four-tenths deaths per one thousand live births;

20 (5) Between 2004 and 2008, prematurity conditions accounted for six and one-half deaths
21 per one thousand live births in Missouri;

22 (6) Approximately eight babies, twelve and three-tenths percent born in Missouri, are
23 born prematurely, or more than ten thousand babies born prior to thirty-seven weeks gestation
24 annually;

25 (7) In 2006, the Institute of Medicine's Preterm Birth report found that annual United
26 States costs associated with prematurity totaled twenty-six and one-half billion dollars or an
27 average of fifty-one thousand six hundred dollars per premature infant, more than tenfold greater
28 than the three thousand three hundred twenty-five dollar average medical costs of a full-term
29 infant;

30 (8) The average length of hospital stay in 2005 was nearly nine times as long for a preterm
31 infant, or thirteen days, compared with an average one and one-half day stay for an infant born at
32 term;

33 (9) Preterm babies have an increased risk of short-term and long-term medical and
34 developmental problems, such as intellectual disabilities, blindness, chronic lung disease and
35 cerebral palsy, in comparison to full-term infants. Children born prematurely are also more likely
36 to be enrolled in special education classes compared to children born at term;

1 (10) Approximately seventy percent of premature births occur in the late preterm period
2 between thirty-four weeks and thirty-six weeks gestation;

3 (11) Standard practices of clinicians during the late preterm period vary across the state;

4 (12) Smoking, a modifiable risk factor, is the leading behavioral contributor to
5 prematurity and in 2006, seventeen and six-tenths percent of Missouri pregnant women smoked.
6 Smoking-attributable neonatal health care costs for Medicaid are approximately seven hundred
7 thirty-eight dollars per pregnant smoker;

8 (13) Smoking during pregnancy is linked to some birth defects and the sudden infant
9 death syndrome, the third leading cause of infant mortality;

10 (14) Women who receive prenatal care are more likely to have access to:

11 (a) Health services that identify problems early;

12 (b) Managements for developing and existing problems; and

13 (c) Education, counseling, and referral to reduce risky behaviors, including but not limited
14 to substance abuse and poor nutrition; and

15 (15) Effective neonatal care improves the health of both mothers and infants.

16 2. There is hereby created the "Missouri Task Force on Prematurity and Infant Mortality"
17 within the children's services commission to consist of the following twenty-three members:

18 (1) The following six members of the general assembly:

19 (a) Three members of the house of representatives, with two members to be appointed by
20 the speaker of the house and one member to be appointed by the minority leader of the house;

21 (b) Three members of the senate, with two members to be appointed by the president pro
22 tem of the senate and one member to be appointed by the minority leader of the senate;

23 (2) The director of the department of health and senior services, or the director's designee;

24 (3) The director of the department of social services, or the director's designee;

25 (4) The director of the department of insurance, financial institutions and professional
26 registration, or the director's designee;

27 (5) One member representing the March of Dimes, Greater Missouri Chapter;

28 (6) One member representing the American College of Obstetrics and Gynecology;

29 (7) One member representing the American Academy of Pediatrics;

30 (8) One member representing the American Academy of Family Physicians;

31 (9) One member representing the American Board of Perinatal Medicine who is a
32 practicing perinatologist;

33 (10) One member representing the Association of Women's Health, Obstetric and
34 Neonatal Nurses;

35 (11) One member representing the Missouri Hospital Association;

36 (12) One member representing the Missouri hospital members of the National Association

1 of Children's Hospitals and Related Institutions (NACHRI);

2 (13) One member representing the American Board of Perinatal Medicine who is a
3 practicing neonatologist;

4 (14) Two consumer representatives who are parents of individuals born prematurely,
5 including one parent of an individual under the age of eighteen;

6 (15) Two members representing insurance providers in the state of Missouri; and

7 (16) One member representing the Mother and Child Health Coalition of Kansas City,
8 Missouri.

9
10 Members of the task force, other than the legislative members and directors of state agencies, shall
11 be appointed by the governor with the advice and consent of the senate by September 15, 2011.

12 3. Members of the task force shall serve at the pleasure of the appointing authority.

13 4. A majority of a quorum from among the task force membership shall elect co-chairs of
14 the task force.

15 5. A majority vote of a quorum of the task force is required for any action.

16 6. The chairperson of the children's services commission shall convene the initial meeting
17 of the task force by no later than October 15, 2011. The task force shall meet at least quarterly;
18 except that the task force shall meet at least twice prior to the end of calendar year 2011.

19 Meetings may be held by telephone or video conference at the discretion of the co-chairs.

20 7. Members shall serve on the commission without compensation, but may, subject to
21 appropriation, be reimbursed for actual and necessary expenses incurred in the performance of
22 their official duties as members of the task force.

23 8. The goal of the task force is to measurably reduce Missouri's preterm birth and infant
24 mortality rates through advocacy of evidence-based approaches facilitated through proposals for
25 legislation, regulation, and public policy change.

26 9. The task force shall:

27 (1) Collaborate with and make recommendations to the general assembly;

28 (2) Review appropriate and relevant evidence-based research regarding the causes and
29 effects of prematurity and birth defects in Missouri;

30 (3) Examine existing public and private entities currently associated with the prevention
31 and treatment of prematurity and infant mortality in Missouri;

32 (4) Develop strategies to reduce prematurity and infant mortality, including but not
33 limited to:

34 (a) Smoking cessation programs specifically targeting pregnant women;

35 (b) Standards for care for premature infants born less than thirty-seven weeks gestational
36 age, including recommendations to improve hospital discharge and follow-up care procedures;

1 (c) Identify gaps in public reporting measures and possible effects of such measures on
2 prematurity rates;

3 (d) Coordinate and execute an information and communications program among the
4 appropriate professional communities on the causes and effects of premature births; and

5 (e) Identify evidence-based strategies to reduce the number of later preterm infants
6 delivered in Missouri; and

7 (5) Issue findings and propose to the appropriate public and private organizations goals,
8 objectives, strategies, and tactics designed to reduce prematurity and infant mortality in Missouri,
9 including drafting legislation on public policy for consideration during the next appropriate
10 session of the general assembly.

11 10. (1) On or before March 1, 2012, the task force shall submit a report on the current
12 state of prematurity in Missouri to the governor and general assembly.

13 (2) On or before January 15, 2013, the task force shall submit its final recommendations,
14 including any recommendations for legislation necessary for implementation, to the governor and
15 general assembly.

16 (3) On or before January 15, 2015, the task force shall submit a final report evaluating the
17 impact of the implementation of the recommendations from the report required under subdivision
18 (2) of this subsection.

19 11. The task force shall expire on January 31, 2015, or upon submission of a final report
20 under subdivision (3) of subsection 10 of this section, whichever is earlier.”; and

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22
23 Further amend said bill by amending the title, enacting clause, and intersectional references
24 accordingly.
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