

FIRST REGULAR SESSION  
HOUSE COMMITTEE SUBSTITUTE FOR  
**SENATE BILL NO. 330**  
**97TH GENERAL ASSEMBLY**

1611H.04C

D. ADAM CRUMBLISS, Chief Clerk

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**AN ACT**

To repeal sections 331.100, 332.093, 334.104, 334.735, 337.503, 344.040, 346.050, 346.055, 346.085, and 453.070, RSMo, and to enact in lieu thereof nineteen new sections relating to professional licenses.

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

Section A. Sections 331.100, 332.093, 334.104, 334.735, 337.503, 344.040, 346.050, 2 346.055, 346.085, and 453.070, RSMo, are repealed and nineteen new sections, to be known as 3 sections 196.298, 320.400, 320.402, 320.406, 320.408, 320.410, 320.412, 320.414, 320.416, 4 331.100, 332.093, 334.104, 334.735, 337.503, 338.200, 344.040, 346.055, 346.085, and 453.070, 5 to read as follows:

**196.298. 1. As used in this section, the following terms shall mean:**

- 2       **(1) "Baked good", includes cookies, cakes, breads, Danish, donuts, pastries, pies,**  
3 **and other items that are prepared by baking the item in an oven. A baked good does not**  
4 **include a potentially hazardous food item as defined by department rule;**  
5       **(2) "Cottage food production operation", an individual operation out of an**  
6 **individual's home which meets the following conditions:**  
7       **(a) Only nonpotentially hazardous processed foods, except low acid canned and**  
8 **acidified foods, including but not limited to breads, cookies, fruit pies, jams, jellies,**  
9 **preserves, fruit butters, honey, sorghum, cracked nuts, packaged spices and spice mixes,**  
10 **dry cookie, cake, bread, and soup mixes are sold, sampled, or served;**  
11       **(b) The seller is the individual actually producing the food or an immediate family**  
12 **member residing in the producer's household with extensive knowledge about the food;**  
13       **(c) The seller only sells, samples, or serves the food directly to the end consumer;**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

14 (d) All processed packaged foods bear a label stating the name and address of the  
15 manufacturer or processor preparing the food, common name of the food, name of all the  
16 ingredients in the food and a statement that the product is prepared in a kitchen that is not  
17 subject to inspection by the department of health and senior services. It is recommended  
18 that honey manufacturers or processors include the following additional statement on its  
19 label: "Honey is not recommended for infants under twelve months of age";

20 (e) The consumer is informed by a clearly visible placard at the sales or service  
21 location that the food is prepared in a kitchen that is not subject to inspection by the  
22 department of health and senior services if the foods specified in paragraph (a) of this  
23 subdivision are sold, sampled, or served in unpackaged, individual portions.

24

25 The department of health and senior services shall have final authority in determining  
26 whether a food is nonpotentially hazardous and may enjoin individuals who violate the  
27 provisions of this subdivision from selling, sampling, or serving such foods;

28 (3) "Department", the department of health and senior services;

29 (4) "Home", a primary residence that contains a kitchen and appliances designed  
30 for common residential usage.

31 2. A cottage food production operation is not a food service establishment and shall  
32 not be subject to any health or food code laws or regulations of the state or department  
33 other than this section and sections 196.030 TO 196.075, and rules promulgated thereunder  
34 for a cottage food production operation.

35 3. (1) A local health department shall not regulate the production of food at a  
36 cottage food production operation. Nothing in this subdivision shall be construed as  
37 prohibiting the department of health and senior services from contracting with a local  
38 health department to provide services for the department under state law and regulation.

39 (2) Each local health department and the department shall maintain a record of a  
40 complaint made by a person against a cottage food production operation.

41 4. The department shall promulgate rules requiring a cottage food production  
42 operation to label all of the foods described in this section which the operation intends to  
43 sell to consumers. The label shall include the name and address of the cottage food  
44 production operation and a statement that the food is not inspected by the department or  
45 local health department.

320.400. As used in sections 320.400 to 320.416, the following terms shall mean:

2 (1) "Certificate of registration", the document issued to a contractor under sections  
3 320.400 to 320.416;

4           (2) "Contractor", an organization that offers to undertake, represents itself as  
5 being able to undertake, or does undertake the proposed layout and specifications,  
6 planning, installation, or servicing of a fire sprinkler system or any part of such a system  
7 for pay;

8           (3) "Fire sprinkler system", a suppression system which requires individual  
9 calculation and layout in accordance with nationally recognized standards, such as those  
10 of the National Fire Protection Association, to protect the interior or exterior of a specific  
11 building, structure, or special hazard from fire by conveying water, with or without other  
12 agents, to dispersal openings or devices. Such systems also include any overhead and  
13 underground fire mains beginning at the point of service, fire hydrants and hydrant mains,  
14 standpipes and hoses connected to sprinkler systems, sprinkler tank heaters, air lines,  
15 thermal systems used in connection with fire sprinkler systems, and tanks and pumps  
16 connected to fire sprinkler systems;

17           (4) "Inspection", a visual examination of a fire sprinkler system or portion thereof  
18 to verify that it appears to be in operating condition and is free of physical damage;

19           (5) "Installation", the initial placement of fire sprinkler equipment or the  
20 extension, modification, or alteration of equipment after the initial placement, and includes  
21 the inspection and testing of equipment attendant to the placement or alteration of fire  
22 sprinkler equipment;

23           (6) "NICET", National Institute of Certification in Engineering Technologies;

24           (7) "Organization", a corporation, a partnership or other business association, a  
25 sole proprietorship, a governmental entity, or any other legal or commercial entity;

26           (8) "Person", a natural person, including an owner, manager, officer, employee,  
27 or occupant;

28           (9) "Point of service", the point at which the underground piping for a sprinkler  
29 system using water as the extinguishing agent becomes used exclusively for the sprinkler  
30 system;

31           (10) "Registered firm", an organization holding a valid certificate of registration  
32 issued under sections 320.400 to 320.416;

33           (11) "Service", to inspect, test, or repair fire sprinkler equipment in order to  
34 furnish or return the fire sprinkler system to operational condition, and including  
35 maintenance contracts;

36           (12) "Special agent fire suppression system", an approved system, and components  
37 thereof, which requires individual calculations and layout in accordance with the  
38 manufacturer's instructions to determine the flow rates, nozzle pressures, quantities of  
39 extinguishing agent, and number and types of nozzles for protecting one or more hazards

40 by suppressing or extinguishing fire. These systems include kitchen hood fire suppression  
41 systems, dry chemical systems, carbon dioxide systems, halogenated and gaseous agent  
42 systems, foam systems, and wet chemical systems not connected to fire sprinkler systems.  
43 Special agent fire suppression systems shall not include a fire sprinkler system.

320.402. 1. Any contractor that engages in the installation of fire sprinkler systems  
2 or services fire sprinkler systems may register with the state fire marshal for a certificate  
3 of registration.

4 2. The provisions of sections 320.400 to 320.416 and the rules and regulations  
5 promulgated under sections 320.400 to 320.416 shall have uniform force and effect  
6 throughout the state. A municipality, county, or any other local governmental body or  
7 jurisdiction may enact or enforce registration or licensing requirements, and the  
8 registration provisions of sections 320.400 to 320.416 shall not supercede them.

9 3. A municipality, county, or any other local governmental body or jurisdiction  
10 may require a contractor to obtain a permit and pay a fee for the installation of a fire  
11 sprinkler system and require the installation of such system in conformance with the  
12 building code or other construction requirements of the municipality, county, or any other  
13 local governmental body or jurisdiction.

14 4. Sections 320.400 to 320.416 shall not apply to:

15 (1) A person or organization that only sells or supplies products or materials used  
16 in fire sprinkler systems;

17 (2) A person or organization that designs, plans, sells, places, or maintains special  
18 agent fire suppression systems; or

19 (3) Inspection activities performed by a government official as part of code  
20 enforcement activities.

21 5. Nothing in sections 320.400 to 320.416 shall be deemed to limit or restrict the  
22 practice of engineering by licensed professional engineers.

320.406. 1. The state fire marshal is authorized to promulgate rules and regulations  
2 regarding:

3 (1) The content of applications and the procedures for filing an application for an  
4 initial or renewal certificate of registration in this state;

5 (2) All applicable fees, set at a level to produce revenue which shall not exceed the  
6 cost and expense of administering the provisions of sections 320.400 to 320.416;

7 (3) Establishment of procedures for granting reciprocity with other states.

8 2. Any rule or portion of a rule, as that term is defined in section 536.010, that is  
9 created under the authority delegated in this section shall become effective only if it  
10 complies with and is subject to all of the provisions of chapter 536 and, if applicable,

11 **section 536.028. This section and chapter 536 are nonseverable and if any of the powers**  
12 **vested with the general assembly pursuant to chapter 536 to review, to delay the effective**  
13 **date, or to disapprove and annul a rule are subsequently held unconstitutional, then the**  
14 **grant of rulemaking authority and any rule proposed or adopted after August 28, 2013,**  
15 **shall be invalid and void.**

**320.408. 1. One of the following requirements shall be fulfilled in order to obtain**  
2 **a certificate of registration from the state fire marshal:**

3 **(1) The applicant shall employ or contract with a professional engineer licensed in**  
4 **the state of Missouri who is disciplined in fire protection;**

5 **(2) The applicant shall employ or contract with a person with a NICET Level III**  
6 **General Plans and Hydraulics and Water Supply Planning, a NICET IV certification, or**  
7 **an equivalent as approved by the Missouri state fire marshal, in the Water-Based System**  
8 **Layout subfield; or**

9 **(3) The applicant shall employ or contract with a person with a NICET Level III**  
10 **certification in the automatic sprinkler system layout subfield demonstrating the certified**  
11 **person has received training in planning, installation, or servicing of fire sprinkler systems.**

12 **2. Any organization that holds a certificate of registration in this state under**  
13 **sections 320.400 to 320.416 may use the title "certified fire sprinkler contractor". No other**  
14 **person or organization may use the title "certified fire sprinkler contractor". No other**  
15 **person or organization shall assume any title or use any abbreviation or any other words,**  
16 **letters, signs, or devices to indicate that the person or organization using the same is a**  
17 **certified fire sprinkler contractor.**

18 **3. A certificate of registration shall be valid for a period of two years from the date**  
19 **of issue and is renewable biennially on payment of a fee; provided however, that the initial**  
20 **certificates of registration issued on or after August 28, 2013, may be issued for periods of**  
21 **less than two years and the fee shall be prorated proportionally.**

22 **4. A fee shall be charged by the state fire marshal for any request for a duplicate**  
23 **certificate of registration or any request requiring change to a certificate of registration.**  
24 **The fee shall be set by the fire marshal.**

25 **5. Each contractor holding itself out as a "certified fire sprinkler contractor" shall**  
26 **display its certificate of registration issued under sections 320.400 to 320.416 in a**  
27 **conspicuous place at the contractor's place of business.**

28 **6. Plans, bids, proposals, offers, and installation drawings for fire sprinkler systems**  
29 **may display the contractor's certificate of registration number.**

30 **7. A certificate of registration issued under sections 320.400 to 320.416 shall not be**  
31 **transferable.**

32           **8. There is hereby created in the state treasury the "Fire Sprinkler Contractor**  
33 **Registration Fund", which shall consist of money collected under sections 320.400 to**  
34 **320.416. The state treasurer shall be custodian of the fund and may approve**  
35 **disbursements from the fund in accordance with sections 30.170 and 30.180. Upon**  
36 **appropriation, money in the fund shall be used solely for the administration of sections**  
37 **320.400 to 320.416. Any money remaining in the fund at the end of the biennium shall**  
38 **revert to the credit of the general revenue fund. The state treasurer shall invest moneys**  
39 **in the fund in the same manner as other funds are invested. Any interest and moneys**  
40 **earned on such investments shall be credited to the fund.**

**320.410. 1. As provided in subsection 3 of section 320.408, each renewal of a**  
2 **certificate of registration issued under sections 320.400 to 320.416 is valid for a period of**  
3 **two years. The certificate of registration fee is payable on renewal.**

4           **2. At least thirty days before the expiration of a certificate of registration, the state**  
5 **fire marshal shall send written notice of the impending certificate of registration expiration**  
6 **to the registrant at the last known address.**

7           **3. The state fire marshal may, by rule, adopt a system under which certificates of**  
8 **registration expire on various dates during the year. When the certificate of registration**  
9 **expiration date is less than two years from its issuance or anniversary date, the fee shall**  
10 **be prorated on a monthly basis so that each registrant shall pay only that portion of the fee**  
11 **that is allocable to the number of months during which the registration is valid. On each**  
12 **subsequent renewal, the total renewal fee is payable.**

**320.412. The state fire marshal shall not issue a certificate of registration under**  
2 **sections 320.400 to 320.416 unless the applicant files evidence of a general liability**  
3 **insurance policy that includes products and completed operations coverage. The limits of**  
4 **insurance coverage required by this section shall be in an amount not less than one million**  
5 **dollars aggregate for all occurrences per policy year. The general liability policy shall be**  
6 **conditioned to pay on behalf of the insured those amounts that the insured is legally**  
7 **obligated to pay as damages because of bodily injury and property damage caused by an**  
8 **occurrence involving the insured or the insured's servant, officer, agent, or employee in the**  
9 **conduct of any business registered under sections 320.400 to 320.416.**

**320.414. 1. The state fire marshal may refuse to issue any certificate of registration**  
2 **or renew any certificate of registration required by one or any provisions of sections**  
3 **320.400 to 320.416 for one or any combination of reasons stated in subsection 2 of this**  
4 **section. The state fire marshal shall notify the applicant in writing of the reasons for the**  
5 **refusal and shall advise the applicant of the right to file a complaint with the**  
6 **administrative hearing commission as provided in chapter 621.**

7           **2. The state fire marshal may cause a complaint to be filed with the administrative**  
8 **hearing commission as provided in chapter 621 against the holder of any certificate of**  
9 **registration required by sections 320.400 to 320.416 or any person or organization that has**  
10 **failed to renew or has surrendered its certificate for any one or any combination of the**  
11 **following causes:**

12           **(1) Use of fraud, deception, misrepresentation, or bribery in securing a certificate**  
13 **issued pursuant to the provisions of sections 320.400 to 320.416;**

14           **(2) Impersonation of any organization holding a certificate or allowing any person**  
15 **or organization to use its certificate;**

16           **(3) Disciplinary action against the holder of a certificate by another state, territory,**  
17 **federal agency, or country upon grounds for which revocation or suspension is authorized**  
18 **in this state;**

19           **(4) Issuance of a certificate based upon a material mistake of fact;**

20           **(5) Final adjudication and finding of guilty, or plea of guilty or nolo contendere of**  
21 **a person or organization in a criminal prosecution under the laws of any state or of the**  
22 **United States, for any offense reasonably related to the qualifications, functions, or duties**  
23 **of any profession regulated under sections 320.400 to 320.416, for any offense an essential**  
24 **element of which is fraud, dishonesty or an act of violence, or for any offense involving**  
25 **moral turpitude, whether or not sentence is imposed;**

26           **(6) Incompetence, misconduct, gross negligence, fraud, misrepresentation, or**  
27 **dishonesty in the performance of the functions or duties of the profession that is regulated**  
28 **by sections 320.400 to 320.416;**

29           **(7) Violation of, or assisting or enabling any person or organization to violate, any**  
30 **provision of sections 320.400 to 320.416, or any lawful rule or regulation adopted pursuant**  
31 **to such sections;**

32           **(8) Final adjudication of a person as insane or incompetent by a court of competent**  
33 **jurisdiction;**

34           **(9) Operating without at least one million dollars in liability insurance coverage.**

35           **3. After the filing of a complaint pursuant to subsection 2 of this section, the**  
36 **proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a**  
37 **finding by the administrative hearing commission that the grounds, provided in subsection**  
38 **2 of this section, for disciplinary action are met, the state fire marshal may, singly or in**  
39 **combination, censure or place the person or organization named in the complaint on**  
40 **probation on such terms and conditions as the state fire marshal deems appropriate for a**  
41 **period not to exceed five years, or may suspend, for a period not to exceed three years, or**  
42 **revoke the certificate of registration of the person or organization. An individual whose**

43 **certificate of registration has been revoked shall wait three years from the date of**  
44 **revocation to apply for another certificate. Certification shall be at the discretion of the**  
45 **state fire marshal after compliance with all requirements of sections 320.400 to 320.416**  
46 **relative to the certification of an applicant for the first time.**

47 **4. The state fire marshal shall maintain an information file containing each**  
48 **complaint filed with the state fire marshal relating to a holder of a certificate of**  
49 **registration.**

**320.416. 1. Upon proper application by the state fire marshal, a court of competent**  
2 **jurisdiction may grant an injunction, restraining order, or other order as may be**  
3 **appropriate to enjoin a person or organization from holding himself, herself, or itself out**  
4 **as a certified fire sprinkler contractor.**

5 **2. Any such actions shall be commenced either in the county in which such conduct**  
6 **occurred or in the county in which the defendant resides.**

7 **3. Any action brought under this section shall be in addition to and not in lieu of**  
8 **any penalty provided by law and may be brought concurrently with other actions to**  
9 **enforce sections 320.400 to 320.416.**

331.100. 1. The board shall elect a president and secretary at the first regular meeting  
2 held after January first of each year. Each member of the board shall receive as compensation  
3 for his services the sum of fifty dollars per day while discharging the actual duties of the board,  
4 and each member shall receive necessary traveling expenses while actually engaged in the  
5 performance of his duties as a member of the board.

6 **2. The board shall have a common seal, and shall adopt rules and regulations for the**  
7 **application and enforcement of this chapter. The president and secretary shall have power to**  
8 **administer oaths. Four members shall constitute a quorum. They shall publish the dates and**  
9 **places for examinations at least thirty days prior to the meeting. The board shall create no**  
10 **expenses exceeding the sums received from time to time as herein provided.**

11 **3. The board shall employ such board personnel as may be necessary to carry out the**  
12 **provisions of this chapter. Board personnel shall include an executive secretary or comparable**  
13 **position, inspectors, investigators, attorneys, and secretarial support staff for these positions.**

14 **4. Board personnel shall have their duties and compensation prescribed by the board**  
15 **within appropriations for that purpose, except that compensation for board personnel shall not**  
16 **exceed that established for comparable positions, as determined by the board, under the job and**  
17 **pay plan of the department of insurance, financial institutions and professional registration.**

18 **5. Members of the board shall not be personally liable either jointly or separately for any**  
19 **act or acts committed in the performance of their official duties as board members [except gross**  
20 **negligence].**

332.093. Any person "practices as a dental assistant" within the meaning of this chapter  
2 who provides patient services in cooperation with and under the direct supervision of a currently  
3 registered and licensed dentist in Missouri. A currently registered and licensed dentist may  
4 delegate to a dental assistant, certified dental assistant or expanded functions dental assistant,  
5 under their direct supervision, such reversible acts that would be considered the practice of  
6 dentistry as defined in section 332.071 provided such delegation is done pursuant to the terms  
7 and conditions of a rule adopted by the Missouri dental board pursuant to section 332.031;  
8 except that, no such rule may allow delegation of acts that conflict with the practice of dental  
9 hygiene as defined in section 332.091, with the exception that polishing of teeth, **placement of**  
10 **pit or fissure sealants, and application of topical fluoride** may be delegated to a dental  
11 assistant, certified dental assistant or expanded-functions dental assistant.

334.104. 1. A physician may enter into collaborative practice arrangements with  
2 registered professional nurses. Collaborative practice arrangements shall be in the form of  
3 written agreements, jointly agreed-upon protocols, or standing orders for the delivery of health  
4 care services. Collaborative practice arrangements, which shall be in writing, may delegate to  
5 a registered professional nurse the authority to administer or dispense drugs and provide  
6 treatment as long as the delivery of such health care services is within the scope of practice of  
7 the registered professional nurse and is consistent with that nurse's skill, training and  
8 competence.

9 2. Collaborative practice arrangements, which shall be in writing, may delegate to a  
10 registered professional nurse the authority to administer, dispense or prescribe drugs and provide  
11 treatment if the registered professional nurse is an advanced practice **registered** nurse as defined  
12 in subdivision (2) of section 335.016. Collaborative practice arrangements may delegate to an  
13 advanced practice registered nurse, as defined in section 335.016, the authority to administer,  
14 dispense, or prescribe controlled substances listed in Schedules III, IV, and V of section 195.017;  
15 except that, the collaborative practice arrangement shall not delegate the authority to administer  
16 any controlled substances listed in schedules III, IV, and V of section 195.017 for the purpose  
17 of inducing sedation or general anesthesia for therapeutic, diagnostic, or surgical procedures.  
18 Schedule III narcotic controlled substance prescriptions shall be limited to a one hundred  
19 twenty-hour supply without refill. Such collaborative practice arrangements shall be in the form  
20 of written agreements, jointly agreed-upon protocols or standing orders for the delivery of health  
21 care services.

22 3. The written collaborative practice arrangement shall contain at least the following  
23 provisions:

24 (1) Complete names, home and business addresses, zip codes, and telephone numbers  
25 of the collaborating physician and the advanced practice registered nurse;

26 (2) A list of all other offices or locations besides those listed in subdivision (1) of this  
27 subsection where the collaborating physician authorized the advanced practice registered nurse  
28 to prescribe;

29 (3) A requirement that there shall be posted at every office where the advanced practice  
30 registered nurse is authorized to prescribe, in collaboration with a physician, a prominently  
31 displayed disclosure statement informing patients that they may be seen by an advanced practice  
32 registered nurse and have the right to see the collaborating physician;

33 (4) All specialty or board certifications of the collaborating physician and all  
34 certifications of the advanced practice registered nurse;

35 (5) The manner of collaboration between the collaborating physician and the advanced  
36 practice registered nurse, including how the collaborating physician and the advanced practice  
37 registered nurse will:

38 (a) Engage in collaborative practice consistent with each professional's skill, training,  
39 education, and competence;

40 (b) Maintain geographic proximity, **except the collaborative practice arrangement**  
41 **may allow for geographic proximity to be waived for a maximum of twenty-eight days per**  
42 **calendar year for rural health clinics as defined by P.L. 95-210, as long as the collaborative**  
43 **practice arrangement includes alternative plans as required in paragraph (c) of this**  
44 **subdivision. This exception to geographic proximity shall apply only to independent rural**  
45 **health clinics and provider-based rural health clinics where the main location of the**  
46 **hospital sponsor is greater than fifty miles from the clinic. The collaborating physician is**  
47 **required to maintain documentation related to this requirement and to present it to the**  
48 **state board of registration for the healing arts when requested; and**

49 (c) Provide coverage during absence, incapacity, infirmity, or emergency by the  
50 collaborating physician;

51 (6) A description of the advanced practice registered nurse's controlled substance  
52 prescriptive authority in collaboration with the physician, including a list of the controlled  
53 substances the physician authorizes the nurse to prescribe and documentation that it is consistent  
54 with each professional's education, knowledge, skill, and competence;

55 (7) A list of all other written practice agreements of the collaborating physician and the  
56 advanced practice registered nurse;

57 (8) The duration of the written practice agreement between the collaborating physician  
58 and the advanced practice registered nurse;

59 (9) A description of the time and manner of the collaborating physician's review of the  
60 advanced practice registered nurse's delivery of health care services. The description shall  
61 include provisions that the advanced practice registered nurse shall submit a minimum of ten

62 percent of the charts documenting the advanced practice registered nurse's delivery of health care  
63 services to the collaborating physician for review by the collaborating physician, or any other  
64 physician designated in the collaborative practice arrangement, every fourteen days; and

65 (10) The collaborating physician, or any other physician designated in the collaborative  
66 practice arrangement, shall review every fourteen days a minimum of twenty percent of the  
67 charts in which the advanced practice registered nurse prescribes controlled substances. The  
68 charts reviewed under this subdivision may be counted in the number of charts required to be  
69 reviewed under subdivision (9) of this subsection.

70 4. The state board of registration for the healing arts pursuant to section 334.125 and the  
71 board of nursing pursuant to section 335.036 may jointly promulgate rules regulating the use of  
72 collaborative practice arrangements. Such rules shall be limited to specifying geographic areas  
73 to be covered, the methods of treatment that may be covered by collaborative practice  
74 arrangements and the requirements for review of services provided pursuant to collaborative  
75 practice arrangements including delegating authority to prescribe controlled substances. Any  
76 rules relating to dispensing or distribution of medications or devices by prescription or  
77 prescription drug orders under this section shall be subject to the approval of the state board of  
78 pharmacy. Any rules relating to dispensing or distribution of controlled substances by  
79 prescription or prescription drug orders under this section shall be subject to the approval of the  
80 department of health and senior services and the state board of pharmacy. In order to take effect,  
81 such rules shall be approved by a majority vote of a quorum of each board. Neither the state  
82 board of registration for the healing arts nor the board of nursing may separately promulgate rules  
83 relating to collaborative practice arrangements. Such jointly promulgated rules shall be  
84 consistent with guidelines for federally funded clinics. The rulemaking authority granted in this  
85 subsection shall not extend to collaborative practice arrangements of hospital employees  
86 providing inpatient care within hospitals as defined pursuant to chapter 197 or population-based  
87 public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

88 5. The state board of registration for the healing arts shall not deny, revoke, suspend or  
89 otherwise take disciplinary action against a physician for health care services delegated to a  
90 registered professional nurse provided the provisions of this section and the rules promulgated  
91 thereunder are satisfied. Upon the written request of a physician subject to a disciplinary action  
92 imposed as a result of an agreement between a physician and a registered professional nurse or  
93 registered physician assistant, whether written or not, prior to August 28, 1993, all records of  
94 such disciplinary licensure action and all records pertaining to the filing, investigation or review  
95 of an alleged violation of this chapter incurred as a result of such an agreement shall be removed  
96 from the records of the state board of registration for the healing arts and the division of  
97 professional registration and shall not be disclosed to any public or private entity seeking such

98 information from the board or the division. The state board of registration for the healing arts  
99 shall take action to correct reports of alleged violations and disciplinary actions as described in  
100 this section which have been submitted to the National Practitioner Data Bank. In subsequent  
101 applications or representations relating to his medical practice, a physician completing forms or  
102 documents shall not be required to report any actions of the state board of registration for the  
103 healing arts for which the records are subject to removal under this section.

104 6. Within thirty days of any change and on each renewal, the state board of registration  
105 for the healing arts shall require every physician to identify whether the physician is engaged in  
106 any collaborative practice agreement, including collaborative practice agreements delegating the  
107 authority to prescribe controlled substances, or physician assistant agreement and also report to  
108 the board the name of each licensed professional with whom the physician has entered into such  
109 agreement. The board may make this information available to the public. The board shall track  
110 the reported information and may routinely conduct random reviews of such agreements to  
111 ensure that agreements are carried out for compliance under this chapter.

112 7. Notwithstanding any law to the contrary, a certified registered nurse anesthetist as  
113 defined in subdivision (8) of section 335.016 shall be permitted to provide anesthesia services  
114 without a collaborative practice arrangement provided that he or she is under the supervision of  
115 an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if  
116 needed. Nothing in this subsection shall be construed to prohibit or prevent a certified registered  
117 nurse anesthetist as defined in subdivision (8) of section 335.016 from entering into a  
118 collaborative practice arrangement under this section, except that the collaborative practice  
119 arrangement may not delegate the authority to prescribe any controlled substances listed in  
120 Schedules III, IV, and V of section 195.017.

121 8. A collaborating physician shall not enter into a collaborative practice arrangement  
122 with more than three full-time equivalent advanced practice registered nurses. This limitation  
123 shall not apply to collaborative arrangements of hospital employees providing inpatient care  
124 service in hospitals as defined in chapter 197 or population-based public health services as  
125 defined by 20 CSR 2150-5.100 as of April 30, 2008.

126 9. It is the responsibility of the collaborating physician to determine and document the  
127 completion of at least a one-month period of time during which the advanced practice registered  
128 nurse shall practice with the collaborating physician continuously present before practicing in  
129 a setting where the collaborating physician is not continuously present. This limitation shall not  
130 apply to collaborative arrangements of providers of population-based public health services as  
131 defined by 20 CSR 2150-5.100 as of April 30, 2008.

132 10. No agreement made under this section shall supersede current hospital licensing  
133 regulations governing hospital medication orders under protocols or standing orders for the

134 purpose of delivering inpatient or emergency care within a hospital as defined in section 197.020  
135 if such protocols or standing orders have been approved by the hospital's medical staff and  
136 pharmaceutical therapeutics committee.

137 11. No contract or other agreement shall require a physician to act as a collaborating  
138 physician for an advanced practice registered nurse against the physician's will. A physician  
139 shall have the right to refuse to act as a collaborating physician, without penalty, for a particular  
140 advanced practice registered nurse. No contract or other agreement shall limit the collaborating  
141 physician's ultimate authority over any protocols or standing orders or in the delegation of the  
142 physician's authority to any advanced practice registered nurse, but this requirement shall not  
143 authorize a physician in implementing such protocols, standing orders, or delegation to violate  
144 applicable standards for safe medical practice established by hospital's medical staff.

145 12. No contract or other agreement shall require any advanced practice registered nurse  
146 to serve as a collaborating advanced practice registered nurse for any collaborating physician  
147 against the advanced practice registered nurse's will. An advanced practice registered nurse shall  
148 have the right to refuse to collaborate, without penalty, with a particular physician.

149 **13. Nothing contained in this section shall be construed to supersede the provisions**  
150 **of section 188.080, section 334.245 or any other provision of law that prohibits any person**  
151 **other than a physician from performing or inducing or attempting to perform or induce**  
152 **an abortion on another. Performing or inducing an abortion under telemedicine or**  
153 **telehealth, whereby the physician is in a location other than where the patient is located,**  
154 **is not authorized by this section or any other provision of law.**

334.735. 1. As used in sections 334.735 to 334.749, the following terms mean:

- 2 (1) "Applicant", any individual who seeks to become licensed as a physician assistant;
- 3 (2) "Certification" or "registration", a process by a certifying entity that grants  
4 recognition to applicants meeting predetermined qualifications specified by such certifying  
5 entity;
- 6 (3) "Certifying entity", the nongovernmental agency or association which certifies or  
7 registers individuals who have completed academic and training requirements;
- 8 (4) "Department", the department of insurance, financial institutions and professional  
9 registration or a designated agency thereof;
- 10 (5) "License", a document issued to an applicant by the board acknowledging that the  
11 applicant is entitled to practice as a physician assistant;
- 12 (6) "Physician assistant", a person who has graduated from a physician assistant program  
13 accredited by the American Medical Association's Committee on Allied Health Education and  
14 Accreditation or by its successor agency, who has passed the certifying examination administered  
15 by the National Commission on Certification of Physician Assistants and has active certification

16 by the National Commission on Certification of Physician Assistants who provides health care  
17 services delegated by a licensed physician. A person who has been employed as a physician  
18 assistant for three years prior to August 28, 1989, who has passed the National Commission on  
19 Certification of Physician Assistants examination, and has active certification of the National  
20 Commission on Certification of Physician Assistants;

21 (7) "Recognition", the formal process of becoming a certifying entity as required by the  
22 provisions of sections 334.735 to 334.749;

23 (8) "Supervision", control exercised over a physician assistant working [within the same  
24 facility as] **with** the supervising physician [sixty-six percent of the time a physician assistant  
25 provides patient care, except a physician assistant may make follow-up patient examinations in  
26 hospitals, nursing homes, patient homes, and correctional facilities, each such examination being  
27 reviewed, approved and signed by the supervising physician, except as provided by subsection  
28 2 of this section. For the purposes of this section, the percentage of time a physician assistant  
29 provides patient care with the supervising physician on-site shall be measured each calendar  
30 quarter] **and oversight of the activities of and accepting responsibility for the physician  
31 assistant's delivery of care. The physician assistant shall only practice at a location where  
32 the physician routinely provides patient care, except existing patients of the supervision  
33 physician in the patient's home and correctional facilities.** The supervising physician must  
34 be [readily] **immediately** available in person or via telecommunication during the time the  
35 physician assistant is providing patient care. **Prior to commencing practice, the supervising  
36 physician and physician assistant shall attest on a form provided by the board that the  
37 physician shall provide supervision appropriate to the physician assistant's training and  
38 that the physician assistant shall not practice beyond the physician assistant's training and  
39 experience. Appropriate supervision shall require the supervising physician to be working  
40 within the same facility as the physician assistant for at least four hours within one  
41 calendar day for every fourteen days on which the physician assistant provides patient care  
42 as described in subsection 3 of this section. Only days in which the physician assistant  
43 provides patient care as described in subsection 3 of this section shall be counted toward  
44 the fourteen-day period. The requirement of appropriate supervision shall be applied so  
45 that no more than thirteen calendar days in which a physician assistant provides patient  
46 care shall pass between the physician's four hours working within the same facility.** The  
47 board shall promulgate rules pursuant to chapter 536 for documentation of joint review of the  
48 physician assistant activity by the supervising physician and the physician assistant. [The  
49 physician assistant shall be limited to practice at locations where the supervising physician is no  
50 further than thirty miles by road using the most direct route available, or in any other fashion so  
51 distanced as to create an impediment to effective intervention and supervision of patient care or

52 adequate review of services. Any other provisions of this chapter notwithstanding, for up to  
53 ninety days following the effective date of rules promulgated by the board to establish the waiver  
54 process under subsection 2 of this section, any physician assistant practicing in a health  
55 professional shortage area as of April 1, 2007, shall be allowed to practice under the on-site  
56 requirements stipulated by the supervising physician on the supervising physician form that was  
57 in effect on April 1, 2007.]

58 2. [The board shall promulgate rules under chapter 536 to direct the advisory  
59 commission on physician assistants to establish a formal waiver mechanism by which an  
60 individual physician-physician assistant team may apply for alternate minimum amounts of  
61 on-site supervision and maximum distance from the supervising physician. After review of an  
62 application for a waiver, the advisory commission on physician assistants shall present its  
63 recommendation to the board for its advice and consent on the approval or denial of the  
64 application. The rule shall establish a process by which the public is invited to comment on the  
65 application for a waiver, and shall specify that a waiver may only be granted if a supervising  
66 physician and physician assistant demonstrate to the board's satisfaction in accordance with its  
67 uniformly applied criteria that:

68 (1) Adequate supervision will be provided by the physician for the physician assistant,  
69 given the physician assistant's training and experience and the acuity of patient conditions  
70 normally treated in the clinical setting;

71 (2)] **(1) A supervision agreement shall limit** the physician assistant [shall be limited]  
72 to practice **only** at locations **described in subdivision (8) of subsection 1 of this section**, where  
73 the supervising physician is no further than fifty miles by road using the most direct route  
74 available[, or in any other fashion so distanced] **and where the location is not so situated** as  
75 to create an impediment to effective intervention and supervision of patient care or adequate  
76 review of services];

77 (3) The community or communities served by the supervising physician and physician  
78 assistant would experience reduced access to health care services in the absence of a waiver;

79 (4) The applicant will practice in an area designated at the time of application as a health  
80 professional shortage area;

81 (5) Nothing in this section shall be construed to require a physician-physician assistant  
82 team to increase their on-site requirement allowed in their initial waiver in order to qualify for  
83 renewal of such waiver;

84 (6) If a waiver has been granted by the board of healing arts on or after August 28, 2009,  
85 to] .

86 **(2)** A physician-physician assistant team working in a rural health clinic under the  
87 federal Rural Health Clinic Services Act, P.L. 95-210, as amended, no [additional waiver shall

88 be required for the physician-physician assistant team, so long as the rural health clinic maintains  
89 its status as a rural health clinic under such federal act, and such physician-physician assistant  
90 team comply with federal supervision requirements. No] supervision requirements in addition  
91 to the minimum federal law shall be required for the physician-physician assistant team in a rural  
92 health clinic [if a waiver has been granted by the board. However, the board shall be able to void  
93 a current waiver after conducting a hearing and upon a finding of fact that the  
94 physician-physician assistant team has failed to comply with such federal act or either member  
95 of the team has violated a provision of this chapter;

96 (7) A physician assistant shall only be required to seek a renewal of a waiver every five  
97 years or when his or her supervising physician is a different physician than the physician shown  
98 on the waiver application or they move their primary practice location more than ten miles from  
99 the location shown on the waiver application].

100 3. The scope of practice of a physician assistant shall consist only of the following  
101 services and procedures:

102 (1) Taking patient histories;

103 (2) Performing physical examinations of a patient;

104 (3) Performing or assisting in the performance of routine office laboratory and patient  
105 screening procedures;

106 (4) Performing routine therapeutic procedures;

107 (5) Recording diagnostic impressions and evaluating situations calling for attention of  
108 a physician to institute treatment procedures;

109 (6) Instructing and counseling patients regarding mental and physical health using  
110 procedures reviewed and approved by a licensed physician;

111 (7) Assisting the supervising physician in institutional settings, including reviewing of  
112 treatment plans, ordering of tests and diagnostic laboratory and radiological services, and  
113 ordering of therapies, using procedures reviewed and approved by a licensed physician;

114 (8) Assisting in surgery; **and**

115 (9) Performing such other tasks not prohibited by law under the supervision of a licensed  
116 physician as the physician's assistant has been trained and is proficient to perform;

117 (10) Physician assistants shall not perform **or prescribe** abortions.

118 4. Physician assistants shall not prescribe nor dispense any drug, medicine, device or  
119 therapy unless pursuant to a physician supervision agreement in accordance with the law, nor  
120 prescribe lenses, prisms or contact lenses for the aid, relief or correction of vision or the  
121 measurement of visual power or visual efficiency of the human eye, nor administer or monitor  
122 general or regional block anesthesia during diagnostic tests, surgery or obstetric procedures.  
123 Prescribing and dispensing of drugs, medications, devices or therapies by a physician assistant

124 shall be pursuant to a physician assistant supervision agreement which is specific to the clinical  
125 conditions treated by the supervising physician and the physician assistant shall be subject to the  
126 following:

127 (1) A physician assistant shall only prescribe controlled substances in accordance with  
128 section 334.747;

129 (2) The types of drugs, medications, devices or therapies prescribed or dispensed by a  
130 physician assistant shall be consistent with the scopes of practice of the physician assistant and  
131 the supervising physician;

132 (3) All prescriptions shall conform with state and federal laws and regulations and shall  
133 include the name, address and telephone number of the physician assistant and the supervising  
134 physician;

135 (4) A physician assistant, or advanced practice **registered** nurse as defined in section  
136 335.016 may request, receive and sign for noncontrolled professional samples and may distribute  
137 professional samples to patients;

138 (5) A physician assistant shall not prescribe any drugs, medicines, devices or therapies  
139 the supervising physician is not qualified or authorized to prescribe; and

140 (6) A physician assistant may only dispense starter doses of medication to cover a period  
141 of time for seventy-two hours or less.

142 5. A physician assistant shall clearly identify himself or herself as a physician assistant  
143 and shall not use or permit to be used in the physician assistant's behalf the terms "doctor", "Dr."  
144 or "doc" nor hold himself or herself out in any way to be a physician or surgeon. No physician  
145 assistant shall practice or attempt to practice without physician supervision or in any location  
146 where the supervising physician is not immediately available for consultation, assistance and  
147 intervention, except as otherwise provided in this section, and in an emergency situation, nor  
148 shall any physician assistant bill a patient independently or directly for any services or procedure  
149 by the physician assistant.

150 6. For purposes of this section, the licensing of physician assistants shall take place  
151 within processes established by the state board of registration for the healing arts through rule  
152 and regulation. The board of healing arts is authorized to establish rules pursuant to chapter 536  
153 establishing licensing and renewal procedures, supervision, supervision agreements, fees, and  
154 addressing such other matters as are necessary to protect the public and discipline the profession.  
155 An application for licensing may be denied or the license of a physician assistant may be  
156 suspended or revoked by the board in the same manner and for violation of the standards as set  
157 forth by section 334.100, or such other standards of conduct set by the board by rule or  
158 regulation. Persons licensed pursuant to the provisions of chapter 335 shall not be required to  
159 be licensed as physician assistants. All applicants for physician assistant licensure who complete

160 a physician assistant training program after January 1, 2008, shall have a master's degree from  
161 a physician assistant program.

162 7. "Physician assistant supervision agreement" means a written agreement, jointly  
163 agreed-upon protocols or standing order between a supervising physician and a physician  
164 assistant, which provides for the delegation of health care services from a supervising physician  
165 to a physician assistant and the review of such services. **The agreement shall contain at least**  
166 **the following provisions:**

167 (1) **Complete names, home and business addresses, zip codes, telephone numbers,**  
168 **and state license numbers of the supervising physician and the physician assistant;**

169 (2) **A list of all offices or locations where the physician routinely provides patient**  
170 **care, and in which of such offices or locations the supervising physician has authorized the**  
171 **physician assistant to practice;**

172 (3) **All specialty or board certifications of the supervising physician;**

173 (4) **The manner of supervision between the supervising physician and the physician**  
174 **assistant, including how the supervising physician and the physician assistant shall:**

175 (a) **Attest on a form provided by the board that the physician shall provide**  
176 **supervision appropriate to the physician assistant's training and experience and that the**  
177 **physician assistant shall not practice beyond the scope of the physician assistant's training**  
178 **and experience nor the supervising physician's capabilities and training; and**

179 (b) **Provide coverage during absence, incapacity, infirmity, or emergency by the**  
180 **supervising physician;**

181 (5) **The duration of the supervision agreement between the supervising physician**  
182 **and physician assistant; and**

183 (6) **A description of the time and manner of the supervising physician's review of**  
184 **the physician assistant's delivery of health care services. Such description shall include**  
185 **provisions that a supervising physician, or a designated supervising physician listed in the**  
186 **supervision agreement review a minimum of ten percent of the charts of the physician**  
187 **assistant's delivery of health care services every fourteen days.**

188 8. When a physician assistant supervision agreement is utilized to provide health care  
189 services for conditions other than acute self-limited or well-defined problems, the supervising  
190 physician or other physician designated in the supervision agreement shall see the patient for  
191 evaluation and approve or formulate the plan of treatment for new or significantly changed  
192 conditions as soon as practical, but in no case more than two weeks after the patient has been  
193 seen by the physician assistant.

194 9. At all times the physician is responsible for the oversight of the activities of, and  
195 accepts responsibility for, health care services rendered by the physician assistant.

196           10. It is the responsibility of the supervising physician to determine and document the  
197 completion of at least a one-month period of time during which the licensed physician assistant  
198 shall practice with a supervising physician continuously present before practicing in a setting  
199 where a supervising physician is not continuously present.

200           11. No contract or other agreement shall require a physician to act as a supervising  
201 physician for a physician assistant against the physician's will. A physician shall have the right  
202 to refuse to act as a supervising physician, without penalty, for a particular physician assistant.  
203 No contract or other agreement shall limit the supervising physician's ultimate authority over any  
204 protocols or standing orders or in the delegation of the physician's authority to any physician  
205 assistant, but this requirement shall not authorize a physician in implementing such protocols,  
206 standing orders, or delegation to violate applicable standards for safe medical practice  
207 established by **the** hospital's medical staff.

208           12. Physician assistants shall file with the board a copy of their supervising physician  
209 form.

210           13. No physician shall be designated to serve as supervising physician for more than  
211 three full-time equivalent licensed physician assistants. This limitation shall not apply to  
212 physician assistant agreements of hospital employees providing inpatient care service in hospitals  
213 as defined in chapter 197.

          337.503. No official, employee, board, commission, county, municipality, school district,  
2 agency of the state, or any other political subdivision thereof shall discriminate between persons  
3 licensed under sections 337.500 to 337.540 **and other mental health professionals licensed**  
4 **under this chapter or as defined in section 632.005** when promulgating regulations or when  
5 requiring or recommending services that legally may be performed by persons licensed under  
6 sections 337.500 to 337.540.

**338.200. 1. In the event a pharmacist is unable to obtain refill authorization from**  
2 **the prescriber due to death, incapacity, or inability of the prescriber to provide medical**  
3 **services to the patient, or when the pharmacist is unable to obtain refill authorization from**  
4 **the prescriber, a pharmacist may dispense an emergency supply of medication if:**

5           **(1) In the pharmacist's professional judgment, interruption of therapy might**  
6 **reasonably produce undesirable health consequences;**

7           **(2) The pharmacy previously dispensed or refilled a prescription from the**  
8 **applicable prescriber for the same patient and medication;**

9           **(3) The medication dispensed is not a controlled substance;**

10           **(4) The pharmacist informs the patient or the patient's agent verbally,**  
11 **electronically, or in writing at the time of dispensing that authorization of a prescriber is**  
12 **required for future refills; and**

13           **(5) The pharmacist documents the emergency dispensing in the patient's**  
14 **prescription record, as provided by the board by rule.**

15           **2. (1) If the pharmacist is unable to obtain refill authorization from the prescriber,**  
16 **the amount dispensed shall be limited to the amount determined by the pharmacist within**  
17 **his or her professional judgment as needed for the emergency period, provided the amount**  
18 **dispensed shall not exceed a seven-day supply;**

19           **(2) In the event of prescriber death or incapacity or inability of the prescriber to**  
20 **provide medical services, the amount dispensed shall not exceed a thirty-day supply.**

21           **3. Pharmacists or permit holders dispensing an emergency supply pursuant to this**  
22 **section shall promptly notify the prescriber or the prescriber's office of the emergency**  
23 **dispensing, as required by the board by rule.**

24           **4. An emergency supply may not be dispensed pursuant to this section if the**  
25 **pharmacist has knowledge that the prescriber has otherwise prohibited or restricted**  
26 **emergency dispensing for the applicable patient.**

27           **5. The board shall promulgate rules to implement the provisions of this section.**  
28 **Any rule or portion of a rule, as that term is defined in section 536.010, that is created**  
29 **under the authority delegated in this section shall become effective only if it complies with**  
30 **and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028.**  
31 **This section and chapter 536 are nonseverable and if any of the powers vested with the**  
32 **general assembly pursuant to chapter 536 to review, to delay the effective date, or to**  
33 **disapprove and annul a rule are subsequently held unconstitutional, then the grant of**  
34 **rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be**  
35 **invalid and void.**

          344.040. 1. Every license issued under this chapter shall expire on June thirtieth of the  
2 year following the year of issuance and every other year thereafter, provided that licenses issued  
3 or renewed during the year 2006 may be issued or renewed by the board for a period of either one  
4 or two years, as provided by rule. Licensees seeking renewal shall, during the month of May of  
5 the year of renewal, file an application for renewal on forms furnished by the board, which shall  
6 include evidence satisfactory to the board of completion of the approved continuing education  
7 hours required by the board, and shall be accompanied by a renewal fee as provided by rule  
8 payable to the department of health and senior services.

9           2. Upon receipt of an incomplete application for renewal, the board shall grant the  
10 applicant a temporary permit which shall be in effect for thirty days. The applicant is required  
11 to submit the required documentation or fee within the thirty-day period, or the board may refuse  
12 to renew his or her application. The thirty-day period can be extended for good cause shown for  
13 an additional thirty days. Upon receipt of the approved continuing education credits or other

14 required documentation or fee within the appropriate time period, the board shall issue a license.

15         3. The board shall renew the license of an applicant who has met all of the requirements  
16 for renewal.

17         4. As a requirement for renewal of license, the board may require not more than  
18 forty-eight clock hours of continuing education a year. The continuing education provided for  
19 under this section shall be approved by the board. There shall be a separate, nonrefundable fee  
20 for each single offering provider. The board shall set the amount of fee for any single offering  
21 provided by rules and regulations promulgated pursuant to section 536.021. The fee shall be set  
22 at a level to produce revenue which shall not substantially exceed the cost and expense in  
23 administering and reviewing any single offering.

24         5. By April first of each year, the board shall [mail an application for renewal of license  
25 to] **notify** every person whose license shall be renewed during the current year. The applicant  
26 must submit such information as will enable the board to determine if the applicant's license  
27 should be renewed. Information provided in the application shall be attested by signature to be  
28 true and correct to the best of the applicant's knowledge and belief.

29         6. Any licensee who fails to apply to renew his or her license by June thirtieth of the  
30 licensee's year of renewal may be relicensed by the board if he meets the requirements set forth  
31 by the board pursuant to sections 344.010 to 344.108 and pays the renewal fee required by rule,  
32 plus a penalty of twenty-five dollars. No action shall be taken by the board in addition to a  
33 penalty of twenty-five dollars imposed by this section against any such licensee whose license  
34 has not expired for a period of more than two months, and who has had no action in the  
35 preceding five years taken against them by the board, and who has met all other licensure  
36 requirements by June thirtieth of the year of renewal; provided, however, that nothing in this  
37 section shall prevent the board from taking any other disciplinary action against a licensee if  
38 there shall exist a cause for discipline pursuant to section 344.050. A person whose license has  
39 expired for a period of more than twelve months must meet the requirements set out in section  
40 344.030 for initial licensure.

346.055. 1. An applicant may obtain a license by successfully passing a qualifying  
2 examination of the type described in sections 346.010 to 346.250, provided the applicant:

3         (1) Is at least [twenty-one] **eighteen** years of age; **and**

4         (2) Is of good moral character ; and

5         (3) [Until December 31, 2008, has an education equivalent to at least a high school  
6 diploma from an accredited high school.

7         2. Beginning January 1, 2009, an applicant for a hearing instrument specialist license or  
8 a hearing instrument specialist-in-training permit shall demonstrate successful completion of a

9 minimum of sixty semester hours, or its equivalent, at a state or regionally accredited institution  
10 of higher education.

11 3. Beginning January 1, 2011, an applicant for a hearing instrument specialist license or  
12 a hearing instrument specialist-in-training permit shall hold an associate's level degree or higher  
13 from a state or regionally accredited institution of higher education.

14 4. Beginning January 1, 2013, or any date thereafter when an associate degree program  
15 in hearing instrument sciences is available from a state or regionally accredited institution within  
16 Missouri, an applicant for a hearing instrument specialist license or a hearing instrument  
17 specialist-in-training permit shall hold:

18 (1) An associate's degree or higher in hearing instrument sciences; or

19 (2) A master's or doctoral degree in audiology from a state or regionally accredited  
20 institution] **(a) Holds an associate's degree or higher, from a state or regionally accredited  
21 institution of higher education, in hearing instrument sciences; or**

22 **(b) Holds an associate's level degree or higher, from a state or regionally accredited  
23 institution of higher education, and submits proof of completion of the International  
24 Hearing Society's Distance Learning for Professionals in Hearing Health Sciences course,  
25 and submits proof of completion of the Hearing Instrument Specialists in Training  
26 program as established by the Board of Examiners for Hearing Instrument Specialists; or**

27 **(c) Holds a master's or doctoral degree in audiology from a state or regionally  
28 accredited institution; or**

29 **(d) Holds a current, unsuspended, unrevoked license from another jurisdiction if  
30 the standards for licensing in such other jurisdiction, as determined by the board, are  
31 substantially equivalent to or exceed those required in subdivisions (3)(a) or (3)(b) of this  
32 subsection; or**

33 **(e) Holds a current, unsuspended, unrevoked license from another jurisdiction, has  
34 been actively practicing as a licensed hearing aid fitter or dispenser in another jurisdiction  
35 for no less than forty-eight of the last seventy-two months, and submits proof of completion  
36 of advance certification from either the International Hearing Society of the National  
37 Board for Certification in Hearing Instrument Sciences.**

38 [5.] **2.** The provisions of [subsections 2, 3, and 4] **subsection 1** of this section shall not  
39 apply to any person holding a valid Missouri hearing instrument specialist license under this  
40 chapter when applying for the renewal of that license. These provisions shall apply to any person  
41 holding a hearing instrument specialist-in-training permit at the time of their application for  
42 licensure or renewal of said permit.

43 **3. (1) The board shall promulgate reasonable standards and rules for the evaluation  
44 of applicants for purposes of determining the course of instruction and training required**

45 of each applicant for a hearing instrument specialist license under the requirement of  
46 subdivision (3) of subsection 1 of this section.

47 (2) Any rule or portion of a rule, as that term is defined in section 536.010, that is  
48 created under the authority delegated in this section shall become effective only if it  
49 complies with and is subject to all of the provisions of chapter 536 and, if applicable,  
50 section 536.028. This section and chapter 536 are nonseverable and if any of the powers  
51 vested with the general assembly pursuant to chapter 536 to review, to delay the effective  
52 ate, or to disapprove and annul a rule are subsequently held unconstitutional, then the  
53 grant of rulemaking authority and any rule proposed or adopted after August 28, 2013,  
54 shall be invalid and void.

346.085. 1. The qualifying examination provided in section 346.060 shall be designed  
2 to demonstrate the applicant's adequate technical qualifications in the practice of fitting hearing  
3 instruments as defined by the board.

4 2. The board shall promulgate reasonable standards and rules that identifies and  
5 describes the required technical knowledge and skill of fitting hearing instruments  
6 necessary to prepare each applicant for licensure by testing. Any rule or portion of a rule,  
7 as that term is defined in section 536.010, that is created under the authority delegated in  
8 this section shall become effective only if it complies with and is subject to all of the  
9 provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536  
10 are nonseverable and if any of the powers vested with the general assembly pursuant to  
11 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are  
12 subsequently held unconstitutional, then the grant of rulemaking authority and any rule  
13 proposed or adopted after August 28, 2013, shall be invalid and void.

453.070. 1. Except as provided in subsection 5 of this section, no decree for the  
2 adoption of a child under eighteen years of age shall be entered for the petitioner or petitioners  
3 in such adoption as ordered by the juvenile court having jurisdiction, until a full investigation,  
4 which includes an assessment of the adoptive parents, an appropriate postplacement assessment  
5 and a summary of written reports as provided for in section 453.026, and any other pertinent  
6 information relevant to whether the child is suitable for adoption by the petitioner and whether  
7 the petitioner is suitable as a parent for the child, has been made. The report shall also include  
8 a statement to the effect that the child has been considered as a potential subsidy recipient.

9 2. Such investigation shall be made, as directed by the court having jurisdiction, either  
10 by the division of family services of the [state] department of social services, a juvenile court  
11 officer, a licensed child-placement agency, a social worker [licensed pursuant to chapter 337],  
12 a professional counselor, or a psychologist licensed under chapter 337 and associated with  
13 a licensed child-placement agency, or other suitable person appointed by the court. The results

14 of such investigation shall be embodied in a written report that shall be submitted to the court  
15 within ninety days of the request for the investigation.

16 3. The department of social services, division of family services, shall develop rules and  
17 regulations regarding the content of the assessment of the petitioner or petitioners. The content  
18 of the assessment shall include but not be limited to, a report on the condition of the petitioner's  
19 home and information on the petitioner's education, financial, marital, medical and psychological  
20 status and criminal background check. If an assessment is conducted after August 28, 1997, but  
21 prior to the promulgation of rules and regulations by the department concerning the contents of  
22 such assessment, any discrepancy between the contents of the actual assessment and the contents  
23 of the assessment required by department rule shall not be used as the sole basis for invalidating  
24 an adoption. No rule or portion of a rule promulgated pursuant to the authority of this section  
25 shall become effective unless it has been promulgated pursuant to the provisions of chapter 536.

26 4. The assessment of petitioner or petitioners shall be submitted to the petitioner and to  
27 the court prior to the scheduled hearing of the adoptive petition.

28 5. In cases where the adoption or custody involves a child under eighteen years of age  
29 that is the natural child of one of the petitioners and where all of the parents required by this  
30 chapter to give consent to the adoption or transfer of custody have given such consent, the  
31 juvenile court may waive the investigation and report, except the criminal background check, and  
32 enter the decree for the adoption or order the transfer of custody without such investigation and  
33 report.

34 6. In the case of an investigation and report made by the division of family services by  
35 order of the court, the court may order the payment of a reasonable fee by the petitioner to cover  
36 the costs of the investigation and report.

37 7. Any adult person or persons over the age of eighteen, who, as foster parent or parents,  
38 have cared for a foster child continuously for a period of nine months or more and bonding has  
39 occurred as evidenced by the positive emotional and physical interaction between the foster  
40 parent and child, may apply to such authorized agency for the placement of such child with them  
41 for the purpose of adoption if the child is eligible for adoption. The agency and court shall give  
42 preference and first consideration for adoptive placements to foster parents. However, the final  
43 determination of the propriety of the adoption of such foster child shall be within the sole  
44 discretion of the court.

45 8. (1) Nothing in this section shall be construed to permit discrimination on the basis  
46 of disability or disease of a prospective adoptive parent.

47 (2) The disability or disease of a prospective adoptive parent shall not constitute a basis  
48 for a determination that the petitioner is unfit or not suitable to be an adoptive parent without a

49 specific showing that there is a causal relationship between the disability or disease and a  
50 substantial and significant risk of harm to a child.

2 [346.050. Whenever the board determines that another state or  
3 jurisdiction has requirements equivalent to or higher than those in effect pursuant  
4 to sections 346.010 to 346.250 and that such state or jurisdiction has a program  
5 equivalent to or stricter than the program for determining whether an applicant,  
6 pursuant to sections 346.010 to 346.250 is qualified to engage in the practice of  
7 fitting hearing instruments, the board shall issue a license to applicants who hold  
8 current, unsuspended and unrevoked certificates or licenses to fit hearing  
9 instruments in such other state or jurisdiction provided that such jurisdiction  
10 extends like privileges for reciprocal licensing or certification to persons licensed  
11 by this state with similar qualifications. No such applicant for licensure shall be  
12 required to submit to or undergo a qualifying examination other than the payment  
13 of fees pursuant to sections 346.045 and 346.095. Such applicant shall be  
14 registered in the same manner as licensees in this state. The fee for an initial  
15 license issued pursuant to this section shall be the same as the fee for an initial  
16 license issued pursuant to section 346.045. Fees, grounds for renewal, and  
17 procedures for the suspension and revocation of licenses granted pursuant to this  
18 section shall be the same as for renewal, suspension and revocation of an initial  
license issued pursuant to section 346.045.]

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