JOURNAL OF THE HOUSE

Second Regular Session, 101st GENERAL ASSEMBLY

FIFTY-FIRST DAY, MONDAY, APRIL 11, 2022

The House met pursuant to adjournment.

Speaker Vescovo in the Chair.

Prayer by Representative Jered Taylor.

Lord, we come before You recognizing the importance of pausing our busy lives to ask for Your will in our lives, and we ask for wisdom in our decisions. As we prepare to start our week, we ask that You guide our decisions and use us as vessels to speak truth in a dark world.

As many churches gathered yesterday to celebrate Palm Sunday and the beginning of Holy Week, let us remember the promise and love You showed during Passover. Let us remember, as we walk through this week, the love You showed Your people. Help us to show love in the same manner. As Micah 6:8 instructs us to do, "Let us love mercy and Let us walk humbly with God." As we prepare for Good Friday and Easter Sunday, may we begin to prepare our hearts to better understand how to serve people as Christ served us, by laying His life down to die on a cross as a sacrifice to save us from our sins, so that we may spend eternity with You.

We thank You and praise Your name, and the House says, "Amen."

The Pledge of Allegiance to the flag was recited.

The Journal of the fiftieth day was approved as printed by the following vote:

AYES: 133

Adams	Anderson	Andrews	Appelbaum	Aune
Bailey	Baker	Baringer	Barnes	Basye
Billington	Black 137	Black 7	Bromley	Brown 16
Brown 27	Brown 70	Buchheit-Courtway	Burger	Burnett
Busick	Butz	Chipman	Christofanelli	Clemens
Coleman 97	Collins	Cook	Copeland	Davidson
Davis	Deaton	DeGroot	Dinkins	Dogan
Eggleston	Ellebracht	Evans	Falkner	Fishel
Fitzwater	Fogle	Francis	Gray	Gregory 51
Griffith	Gunby	Haden	Haffner	Haley
Hardwick	Henderson	Hicks	Houx	Hovis
Hudson	Hurlbert	Ingle	Johnson	Kalberloh
Kelley 127	Kelly 141	Kidd	Knight	Lewis 6
Lovasco	Mackey	Mayhew	McCreery	McDaniel
McGaugh	McGirl	Morse	Mosley	Murphy
Nurrenbern	O'Donnell	Owen	Patterson	Perkins
Phifer	Pike	Plocher	Pollock 123	Porter
Pouche	Price IV	Proudie	Quade	Railsback
Reedy	Richey	Riggs	Riley	Roberts

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Rogers	Sander	Sassmann	Schnelting	Schroer
Schwadron	Seitz	Sharpe 4	Shaul	Shields
Simmons	Smith 155	Smith 163	Smith 45	Smith 67
Stacy	Stephens 128	Stevens 46	Tate	Taylor 139
Taylor 48	Terry	Thomas	Thompson	Toalson Reisch
Trent	Turnbaugh	Unsicker	Van Schoiack	Veit
Walsh 50	Walsh Moore 93	Weber	West	Wiemann
Wright	Young	Mr. Speaker		

NOES: 000

PRESENT: 003

Aldridge Bosley Windham

ABSENT WITH LEAVE: 021

Atchison	Bangert	Bland Manlove	Boggs	Burton
Coleman 32	Cupps	Derges	Doll	Gregory 96
Grier	Lewis 25	Merideth	Person	Pietzman
Pollitt 52	Roden	Rone	Rowland	Sauls
G1 2.6				

Sharp 36

VACANCIES: 006

INTRODUCTION OF HOUSE BILLS - APPROPRIATIONS

The following House Bill was read the first time and copies ordered printed:

HB 3021, introduced by Representative Smith (163), to appropriate money for the expenses, grants, refunds, and distributions of the Department of Revenue, and the several divisions and programs thereof, to be expended only as provided in Article IV, Section 28 of the Constitution of Missouri, and to transfer money among certain funds for the period beginning July 1, 2022, and ending June 30, 2023.

SECOND READING OF SENATE JOINT RESOLUTIONS

The following Senate Joint Resolution was read the second time:

SJR 46, relating to the office of assessor in charter counties.

SECOND READING OF SENATE BILLS

The following Senate Bills were read the second time:

SS SB 690, relating to opioid addiction treatment, with existing penalty provisions.

SS SCS SB 725, relating to ground ambulance services.

SS#3 SCS SB 758, relating to procedures for certain public projects for facilities.

SS SCS SB 783, relating to insurance, with penalty provisions, with an effective date for certain sections.

SS#2 SB 823, relating to child protection, with penalty provisions.

THIRD READING OF HOUSE BILLS - INFORMAL

HB 1637, relating to crime prevention, was taken up by Representative Schwadron.

On motion of Representative Schwadron, **HB 1637** was read the third time and passed by the following vote:

AYES: 093				
Andrews	Bailey	Baker	Basye	Black 137
Black 7	Bromley	Brown 16	Buchheit-Courtway	Burger
Busick	Christofanelli	Coleman 97	Cook	Copeland
Davidson	Deaton	DeGroot	Dinkins	Eggleston
Ellebracht	Evans	Falkner	Fishel	Fitzwater
Francis	Gregory 51	Gregory 96	Griffith	Haden
Haffner	Haley	Hardwick	Henderson	Hicks
Houx	Hovis	Hudson	Hurlbert	Kalberloh
Kelley 127	Kelly 141	Knight	Lewis 6	Mayhew
McGaugh	McGirl	Morse	Murphy	O'Donnell
Owen	Patterson	Perkins	Pike	Plocher
Pollitt 52	Pollock 123	Porter	Pouche	Railsback
Reedy	Richey	Riggs	Riley	Roberts
Rogers	Sander	Sassmann	Schnelting	Schroer
Schwadron	Seitz	Sharpe 4	Shaul	Shields
Simmons	Smith 155	Smith 163	Stacy	Stephens 128
Tate	Taylor 48	Thomas	Thompson	Toalson Reisch
Trent	Van Schoiack	Veit	Walsh 50	West
Wiemann	Wright	Mr. Speaker		
NOES: 045				
Adams	Aldridge	Anderson	Appelbaum	Aune
Bangert	Baringer	Billington	Bland Manlove	Bosley
Brown 27	Brown 70	Burnett	Butz	Chipman
Clemens	Collins	Davis	Dogan	Fogle
Gray	Gunby	Johnson	Kidd	Lovasco
Mackey	McCreery	McDaniel	Mosley	Nurrenbern
Phifer	Price IV	Proudie	Quade	Smith 45
Smith 67	Stevens 46	Taylor 139	Terry	Turnbaugh
Unsicker	Walsh Moore 93	Weber	Windham	Young
PRESENT: 001				
Ingle				
ABSENT WITH LEAVE	E: 018			
Atchison	Barnes	Boggs	Burton	Coleman 32
Cupps	Derges	Doll	Grier	Lewis 25

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Merideth Person Pietzman Roden Rone

Rowland Sauls Sharp 36

VACANCIES: 006

Speaker Vescovo declared the bill passed.

PERFECTION OF HOUSE BILLS

HCS HBs 1904 & 1575, HB 1973, HB 2085, HB 2156, HCS HB 2208, HCS HB 2499, HB 2590, HB 1480, HB 1563, HCS HB 1641, HB 1721, HCS HB 1905, HCS HBs 1972 & 2483, HB 2056, HCS HB 2140, HB 2160, HB 2164, HB 2165, HCS HB 2220, HB 2255, and HB 2327 were placed on the Informal Calendar.

HB 2331, relating to public health, was taken up by Representative Baker.

Representative Roberts offered House Amendment No. 1.

House Amendment No. 1

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after said section and line the following:

- "192.2225. 1. The department shall have the right to enter the premises of an applicant for or holder of a license at any time during the hours of operation of a center to determine compliance with provisions of sections 192.2200 to 192.2260 and applicable rules promulgated pursuant thereto. Entry shall also be granted for investigative purposes involving complaints regarding the operations of an adult day care program. The department shall make at least [two inspections] one inspection per year, [at least one of] which shall be unannounced to the operator or provider. The department may make such other inspections, announced or unannounced, as it deems necessary to carry out the provisions of sections 192.2200 to 192.2260.
- 2. [The department may reduce the frequency of inspections to once a year if an adult day care program is found to be in substantial compliance. The basis for such determination shall include, but not be limited to, the following:
 - (1) Previous inspection reports;
- (2) The adult day care program's history of compliance with rules promulgated pursuant to this chapter; and
 - (3) The number and severity of complaints received about the adult day care program.
- 3-1 The applicant for or holder of a license shall cooperate with the investigation and inspection by providing access to the adult day care program, records and staff, and by providing access to the adult day care program to determine compliance with the rules promulgated pursuant to sections 192.2200 to 192.2260.
- [4-] 3. Failure to comply with any lawful request of the department in connection with the investigation and inspection is a ground for refusal to issue a license or for the revocation of a license.
- [5.] **4.** The department may designate to act for it, with full authority of law, any instrumentality of any political subdivision of the state of Missouri deemed by the department to be competent to investigate and inspect applicants for or holders of licenses.
- 197.100. 1. Any provision of chapter 198 and chapter 338 to the contrary notwithstanding, the department of health and senior services shall have sole authority, and responsibility for inspection and licensure of hospitals in this state including, but not limited to, all parts, services, functions, support functions and activities which contribute directly or indirectly to patient care of any kind whatsoever. The department of health and senior services shall [annually] inspect each licensed hospital in accordance with Title XVIII of the Social Security Act and shall make any other inspections and investigations as it deems necessary for good cause shown. The department of health and senior services shall accept reports of hospital inspections from or on behalf of governmental agencies, the joint commission, and the American Osteopathic Association Healthcare Facilities Accreditation Program, provided the accreditation inspection was conducted within one year of the date of license renewal. Prior to granting

acceptance of any other accrediting organization reports in lieu of the required licensure survey, the accrediting organization's survey process must be deemed appropriate and found to be comparable to the department's licensure survey. It shall be the accrediting organization's responsibility to provide the department any and all information necessary to determine if the accrediting organization's survey process is comparable and fully meets the intent of the licensure regulations. The department of health and senior services shall attempt to schedule inspections and evaluations required by this section so as not to cause a hospital to be subject to more than one inspection in any twelve-month period from the department of health and senior services or any agency or accreditation organization the reports of which are accepted for licensure purposes pursuant to this section, except for good cause shown.

- 2. Other provisions of law to the contrary notwithstanding, the department of health and senior services shall be the only state agency to determine life safety and building codes for hospitals defined or licensed pursuant to the provisions of this chapter, including but not limited to sprinkler systems, smoke detection devices and other fire safety-related matters so long as any new standards shall apply only to new construction.
- 197.256. 1. A hospice shall apply for renewal of its certificate not less than once every twelve months. In addition, such hospice shall apply for renewal not less than thirty days before any change in ownership or management of the hospice. Such application shall be accompanied by the appropriate fee as set forth in subsection 1 of section 197.254. Application shall be made upon a form prescribed by the department.
- 2. Upon receipt of the application and fee, if a fee is required, the department [shall] may conduct a survey to evaluate the quality of services rendered by an applicant for renewal. The department shall inspect each licensed facility in accordance with Title XVIII of the Social Security Act and approve the application and renew the certificate of any applicant which is in compliance with sections 197.250 to 197.280 and the rules made pursuant thereto and which passes the department's survey.
 - 3. The certificate of any hospice which has not been renewed as required by this section shall be void.
- 4. The department shall require all certificated hospices to submit statistical reports. The content, format, and frequency of such reports shall be prescribed by the department.
- 197.258. 1. In addition to any survey pursuant to sections 197.250 to 197.280, the department may make such surveys as it deems necessary during normal business hours. The department shall survey every hospice [not-less than once annually] in accordance with Title XVIII of the Social Security Act. The hospice shall permit the department's representatives to enter upon any of its business premises during normal business hours for the purpose of a survey.
- 2. As a part of its survey of a hospice, the department may visit the home of any client of such hospice with such client's consent.
- 3. In lieu of any survey required by sections 197.250 to 197.280, the department may accept in whole or in part the survey of any state or federal agency, or of any professional accrediting agency, if such survey:
 - (1) Is comparable in scope and method to the department's surveys; and
- (2) Is conducted [within one year of initial application] in accordance with Title XVIII of the Social Security Act for initial application or renewal of the hospice's certificate.
- 4. The department shall not be required to survey any hospice providing service to Missouri residents through an office located in a state bordering Missouri if such bordering state has a reciprocal agreement with Missouri on hospice certification and the area served in Missouri by the agency is contiguous to the area served in the bordering state.
- 5. Any hospice which has its parent office in a state which does not have a reciprocal agreement with Missouri on hospice certification shall maintain a branch office in Missouri. Such branch office shall maintain all records required by the department for survey and shall be certificated as a hospice.
- 197.415. 1. The department shall review the applications and shall issue a license to applicants who have complied with the requirements of sections 197.400 to 197.475 and have received approval of the department.
- 2. A license shall be renewed annually upon approval of the department when the following conditions have been met:
 - (1) The application for renewal is accompanied by a six-hundred-dollar license fee;
- (2) The home health agency is in compliance with the requirements established pursuant to the provisions of sections 197.400 to 197.475 as evidenced by [a survey] an inspection by the department which shall occur[at-least every thirty-six months for agencies that have been in operation thirty-six consecutive months from initial inspection. The frequency of inspections for agencies in operation at least thirty six consecutive months from the initial inspection shall be determined by such factors as number of complaints received and changes in management, supervision or ownership. The frequency of each survey inspection for any agency in operation less than thirty-six

consecutive months from the initial inspection shall occur and be conducted at least every twelve months] in accordance with Title XVIII of the Social Security Act;

- (3) The application is accompanied by a statement of any changes in the information previously filed with the department pursuant to section 197.410.
- 3. Each license shall be issued only for the home health agency listed in the application. Licenses shall be posted in a conspicuous place in the main offices of the licensed home health agency.
- 4. In lieu of any survey required by sections 197.400 to 197.475, the department may accept in whole or in part written reports of the survey of any state or federal agency, or of any professional accrediting agency, if such survey:
 - (1) Is comparable in scope and method to the department's surveys; and
- (2) Is conducted [within one year of initial application or within thirty six months for the renewal of the home health license] in accordance with Title XVIII of the Social Security Act as required by subdivision (2) of subsection 2 of this section.

198.006. As used in sections 198.003 to 198.186, unless the context clearly indicates otherwise, the following terms mean:

- (1) "Abuse", the infliction of physical, sexual, or emotional injury or harm;
- (2) "Activities of daily living" or "ADL", one or more of the following activities of daily living:
- (a) Eating;
- (b) Dressing;
- (c) Bathing;
- (d) Toileting;
- (e) Transferring; and
- (f) Walking;
- (3) "Administrator", the person who is in general administrative charge of a facility;
- (4) "Affiliate":
- (a) With respect to a partnership, each partner thereof;
- (b) With respect to a limited partnership, the general partner and each limited partner with an interest of five percent or more in the limited partnership;
- (c) With respect to a corporation, each person who owns, holds or has the power to vote five percent or more of any class of securities issued by the corporation, and each officer and director;
 - (d) With respect to a natural person, any parent, child, sibling, or spouse of that person;
- (5) "Appropriately trained and qualified individual", an individual who is licensed or registered with the state of Missouri in a health care-related field or an individual with a degree in a health care-related field or an individual with a degree in a health care, social services, or human services field or an individual licensed under chapter 344 and who has received facility orientation training under 19 CSR [30-86042(18)] 30-86.047, and dementia training under section 192.2000 and twenty-four hours of additional training, approved by the department, consisting of definition and assessment of activities of daily living, assessment of cognitive ability, service planning, and interview skills;
- (6) "Assisted living facility", any premises, other than a residential care facility, intermediate care facility, or skilled nursing facility, that is utilized by its owner, operator, or manager to provide twenty-four-hour care and services and protective oversight to three or more residents who are provided with shelter, board, and who may need and are provided with the following:
 - (a) Assistance with any activities of daily living and any instrumental activities of daily living;
 - (b) Storage, distribution, or administration of medications; and
- (c) Supervision of health care under the direction of a licensed physician, provided that such services are consistent with a social model of care;

Such term shall not include a facility where all of the residents are related within the fourth degree of consanguinity or affinity to the owner, operator, or manager of the facility;

(7) "Community-based assessment", documented basic information and analysis provided by appropriately trained and qualified individuals describing an individual's abilities and needs in activities of daily living, instrumental activities of daily living, vision/hearing, nutrition, social participation and support, and cognitive functioning using an assessment tool approved by the department of health and senior services that is designed for community-based services and that is not the nursing home minimum data set;

- (8) "Dementia", a general term for the loss of thinking, remembering, and reasoning so severe that it interferes with an individual's daily functioning, and may cause symptoms that include changes in personality, mood, and behavior;
 - (9) "Department", the Missouri department of health and senior services;
- (10) "Emergency", a situation, physical condition or one or more practices, methods or operations which presents imminent danger of death or serious physical or mental harm to residents of a facility;
- (11) "Facility", any residential care facility, assisted living facility, intermediate care facility, or skilled nursing facility;
- (12) "Health care provider", any person providing health care services or goods to residents and who receives funds in payment for such goods or services under Medicaid;
 - (13) "Instrumental activities of daily living", or "IADL", one or more of the following activities:
 - (a) Preparing meals;
 - (b) Shopping for personal items;
 - (c) Medication management;
 - (d) Managing money;
 - (e) Using the telephone;
 - (f) Housework; and
 - (g) Transportation ability;
- (14) "Intermediate care facility", any premises, other than a residential care facility, assisted living facility, or skilled nursing facility, which is utilized by its owner, operator, or manager to provide twenty-four-hour accommodation, board, personal care, and basic health and nursing care services under the daily supervision of a licensed nurse and under the direction of a licensed physician to three or more residents dependent for care and supervision and who are not related within the fourth degree of consanguinity or affinity to the owner, operator or manager of the facility;
- (15) "Manager", any person other than the administrator of a facility who contracts or otherwise agrees with an owner or operator to supervise the general operation of a facility, providing such services as hiring and training personnel, purchasing supplies, keeping financial records, and making reports;
- (16) "Medicaid", medical assistance under section 208.151, et seq., in compliance with Title XIX, Public Law 89-97, 1965 amendments to the Social Security Act (42 U.S.C. 301, et seq.), as amended;
- (17) "Neglect", the failure to provide, by those responsible for the care, custody, and control of a resident in a facility, the services which are reasonable and necessary to maintain the physical and mental health of the resident, when such failure presents either an imminent danger to the health, safety or welfare of the resident or a substantial probability that death or serious physical harm would result;
- (18) "Operator", any person licensed or required to be licensed under the provisions of sections 198.003 to 198.096 in order to establish, conduct or maintain a facility;
 - (19) "Owner", any person who owns an interest of five percent or more in:
 - (a) The land on which any facility is located;
 - (b) The structure or structures in which any facility is located;
- (c) Any mortgage, contract for deed, or other obligation secured in whole or in part by the land or structure in or on which a facility is located; or
 - (d) Any lease or sublease of the land or structure in or on which a facility is located.

Owner does not include a holder of a debenture or bond purchased at public issue nor does it include any regulated lender unless the entity or person directly or through a subsidiary operates a facility;

- (20) "Protective oversight", an awareness twenty-four hours a day of the location of a resident, the ability to intervene on behalf of the resident, the supervision of nutrition, medication, or actual provisions of care, and the responsibility for the welfare of the resident, except where the resident is on voluntary leave;
- (21) "Resident", a person who by reason of aging, illness, disease, or physical or mental infirmity receives or requires care and services furnished by a facility and who resides or boards in or is otherwise kept, cared for, treated or accommodated in such facility for a period exceeding twenty-four consecutive hours;
- (22) "Residential care facility", any premises, other than an assisted living facility, intermediate care facility, or skilled nursing facility, which is utilized by its owner, operator or manager to provide twenty-four-hour care to three or more residents, who are not related within the fourth degree of consanguinity or affinity to the owner, operator, or manager of the facility and who need or are provided with shelter, board, and with protective

oversight, which may include storage and distribution or administration of medications and care during short-term illness or recuperation, except that, for purposes of receiving supplemental welfare assistance payments under section 208.030, only any residential care facility licensed as a residential care facility II immediately prior to August 28, 2006, and that continues to meet such licensure requirements for a residential care facility II licensed immediately prior to August 28, 2006, shall continue to receive after August 28, 2006, the payment amount allocated immediately prior to August 28, 2006, for a residential care facility II under section 208.030;

- (23) "Skilled nursing facility", any premises, other than a residential care facility, an assisted living facility, or an intermediate care facility, which is utilized by its owner, operator or manager to provide for twenty-four-hour accommodation, board and skilled nursing care and treatment services to at least three residents who are not related within the fourth degree of consanguinity or affinity to the owner, operator or manager of the facility. Skilled nursing care and treatment services are those services commonly performed by or under the supervision of a registered professional nurse for individuals requiring twenty-four-hours-a-day care by licensed nursing personnel including acts of observation, care and counsel of the aged, ill, injured or infirm, the administration of medications and treatments as prescribed by a licensed physician or dentist, and other nursing functions requiring substantial specialized judgment and skill;
- (24) "Social model of care", long-term care services based on the abilities, desires, and functional needs of the individual delivered in a setting that is more home-like than institutional and promotes the dignity, individuality, privacy, independence, and autonomy of the individual. Any facility licensed as a residential care facility II prior to August 28, 2006, shall qualify as being more home-like than institutional with respect to construction and physical plant standards;
 - (25) "Vendor", any person selling goods or services to a health care provider;
 - (26) "Voluntary leave", an off-premise leave initiated by:
 - (a) A resident that has not been declared mentally incompetent or incapacitated by a court; or
- (b) A legal guardian of a resident that has been declared mentally incompetent or incapacitated by a court. 198.022. 1. Upon receipt of an application for a license to operate a facility, the department shall review the application, investigate the applicant and the statements sworn to in the application for license and conduct any necessary inspections. A license shall be issued if the following requirements are met:
 - (1) The statements in the application are true and correct;
- (2) The facility and the operator are in substantial compliance with the provisions of sections 198.003 to 198.096 and the standards established thereunder;
 - (3) The applicant has the financial capacity to operate the facility;
- (4) The administrator of an assisted living facility, a skilled nursing facility, or an intermediate care facility is currently licensed under the provisions of chapter 344;
- (5) Neither the operator nor any principals in the operation of the facility have ever been convicted of a felony offense concerning the operation of a long-term health care facility or other health care facility or ever knowingly acted or knowingly failed to perform any duty which materially and adversely affected the health, safety, welfare or property of a resident, while acting in a management capacity. The operator of the facility or any principal in the operation of the facility shall not be under exclusion from participation in the Title XVIII (Medicare) or Title XIX (Medicaid) program of any state or territory;
- (6) Neither the operator nor any principals involved in the operation of the facility have ever been convicted of a felony in any state or federal court arising out of conduct involving either management of a long-term care facility or the provision or receipt of health care;
 - (7) All fees due to the state have been paid.
- 2. Upon denial of any application for a license, the department shall so notify the applicant in writing, setting forth therein the reasons and grounds for denial.
- 3. The department may inspect any facility and any records and may make copies of records, at the facility, at the department's own expense, required to be maintained by sections 198.003 to 198.096 or by the rules and regulations promulgated thereunder at any time if a license has been issued to or an application for a license has been filed by the operator of such facility. Copies of any records requested by the department shall be prepared by the staff of such facility within two business days or as determined by the department. The department shall not remove or disassemble any medical record during any inspection of the facility, but may observe the photocopying or may make its own copies if the facility does not have the technology to make the copies. In accordance with the provisions of section 198.525, the department shall make at least [two inspections] one inspection per year, [at least one of] which shall be unannounced to the operator. The department may make such other inspections, announced or unannounced, as it deems necessary to carry out the provisions of sections 198.003 to 198.136.

- 4. Whenever the department has reasonable grounds to believe that a facility required to be licensed under sections 198.003 to 198.096 is operating without a license, and the department is not permitted access to inspect the facility, or when a licensed operator refuses to permit access to the department to inspect the facility, the department shall apply to the circuit court of the county in which the premises is located for an order authorizing entry for such inspection, and the court shall issue the order if it finds reasonable grounds for inspection or if it finds that a licensed operator has refused to permit the department access to inspect the facility.
- 5. Whenever the department is inspecting a facility in response to an application from an operator located outside of Missouri not previously licensed by the department, the department may request from the applicant the past five years compliance history of all facilities owned by the applicant located outside of this state.
- 198.026. 1. Whenever a duly authorized representative of the department finds upon an inspection of a facility that it is not in compliance with the provisions of sections 198.003 to 198.096 and the standards established thereunder, the operator or administrator shall be informed of the deficiencies in an exit interview conducted with the operator or administrator, or his or her designee. The department shall inform the operator or administrator, in writing, of any violation of a class I standard at the time the determination is made. A written report shall be prepared of any deficiency for which there has not been prompt remedial action, and a copy of such report and a written correction order shall be sent to the operator or administrator by [certified mail or other] a delivery service that provides a dated receipt of delivery [at the facility address] within ten working days after the inspection, stating separately each deficiency and the specific statute or regulation violated.
- 2. The operator or administrator shall have five working days following receipt of a written report and correction order regarding a violation of a class I standard and ten working days following receipt of the report and correction order regarding violations of class II or class III standards to request any conference and to submit a plan of correction for the department's approval which contains specific dates for achieving compliance. Within five working days after receiving a plan of correction regarding a violation of a class I standard and within ten working days after receiving a plan of correction regarding a violation of a class II or III standard, the department shall give its written approval or rejection of the plan. If there was a violation of any class I standard, immediate corrective action shall be taken by the operator or administrator and a written plan of correction shall be submitted to the department. The department shall give its written approval or rejection of the plan and if the plan is acceptable, a reinspection shall be conducted within twenty calendar days of the exit interview to determine if deficiencies have been corrected. If there was a violation of any class II standard and the plan of correction is acceptable, an unannounced reinspection shall be conducted between forty and ninety calendar days from the date of the exit conference to determine the status of all previously cited deficiencies. If there was a violation of class III standards sufficient to establish that the facility was not in substantial compliance, an unannounced reinspection shall be conducted within one hundred twenty days of the exit interview to determine the status of previously identified deficiencies.
- 3. If, following the reinspection, the facility is found not in substantial compliance with sections 198.003 to 198.096 and the standards established thereunder or the operator is not correcting the noncompliance in accordance with the approved plan of correction, the department shall issue a notice of noncompliance, which shall be sent by [certified mail or other] a delivery service that provides a dated receipt of delivery to [ceach person disclosed to be an owner or] the operator or administrator of the facility, according to the most recent information or documents on file with the department.
- 4. The notice of noncompliance shall inform the operator or administrator that the department may seek the imposition of any of the sanctions and remedies provided for in section 198.067, or any other action authorized by law.
- 5. At any time after an inspection is conducted, the operator may choose to enter into a consent agreement with the department to obtain a probationary license. The consent agreement shall include a provision that the operator will voluntarily surrender the license if substantial compliance is not reached in accordance with the terms and deadlines established under the agreement. The agreement shall specify the stages, actions and time span to achieve substantial compliance.
- 6. Whenever a notice of noncompliance has been issued, the operator shall post a copy of the notice of noncompliance and a copy of the most recent inspection report in a conspicuous location in the facility, and the department shall send a copy of the notice of noncompliance to the department of social services, the department of mental health, and any other concerned federal, state or local governmental agencies.

198.036. 1. The department may revoke a license in any case in which it finds that:

- (1) The operator failed or refused to comply with class I or II standards, as established by the department pursuant to section 198.085; or failed or refused to comply with class III standards as established by the department pursuant to section 198.085, where the aggregate effect of such noncompliances presents either an imminent danger to the health, safety or welfare of any resident or a substantial probability that death or serious physical harm would result;
- (2) The operator refused to allow representatives of the department to inspect the facility for compliance with standards or denied representatives of the department access to residents and employees necessary to carry out the duties set forth in this chapter and rules promulgated thereunder, except where employees of the facility are in the process of rendering immediate care to a resident of such facility;
- (3) The operator knowingly acted or knowingly omitted any duty in a manner which would materially and adversely affect the health, safety, welfare or property of a resident;
- (4) The operator demonstrated financial incapacity to operate and conduct the facility in accordance with the provisions of sections 198.003 to 198.096;
- (5) The operator or any principals in the operation of the facility have ever been convicted of, or pled guilty or nolo contendere to a felony offense concerning the operation of a long-term health care facility or other health care facility, or ever knowingly acted or knowingly failed to perform any duty which materially and adversely affected the health, safety, welfare, or property of a resident while acting in a management capacity. The operator of the facility or any principal in the operation of the facility shall not be under exclusion from participation in the Title XVIII (Medicare) or Title XIX (Medicaid) program of any state or territory; or
- (6) The operator or any principals involved in the operation of the facility have ever been convicted of or pled guilty or nolo contendere to a felony in any state or federal court arising out of conduct involving either management of a long-term care facility or the provision or receipt of health care.
- 2. Nothing in subdivision (2) of subsection 1 of this section shall be construed as allowing the department access to information not necessary to carry out the duties set forth in sections 198.006 to 198.186.
- 3. Upon revocation of a license, the director of the department shall so notify the operator in writing, setting forth the reason and grounds for the revocation. Notice of such revocation shall be sent [either by certified-mail, return receipt requested,] by a delivery service that provides a dated receipt of delivery to the operator [atthe address of the facility] and administrator, or served personally upon the operator and administrator. The department shall provide the operator notice of such revocation at least ten days prior to its effective date.
- 198.525. 1. [Except as otherwise provided pursuant to section 198.526,] In order to comply with sections 198.012 and 198.022, the department of health and senior services shall inspect residential care facilities, assisted living facilities, intermediate care facilities, and skilled nursing **facilities**, including those facilities attached to acute care hospitals at least [twice] once a year.
- 2. The department shall not assign an individual to inspect or survey a long-term care facility licensed under this chapter, for any purpose, in which the inspector or surveyor was an employee of such facility within the preceding two years.
- 3. For any inspection or survey of a facility licensed under this chapter, regardless of the purpose, the department shall require every newly hired inspector or surveyor at the time of hiring or, with respect to any currently employed inspector or surveyor as of August 28, 2009, to disclose:
 - (1) The name of every Missouri licensed long-term care facility in which he or she has been employed; and
- (2) The name of any member of his or her immediate family who has been employed or is currently employed at a Missouri licensed long-term care facility.

The disclosures under this subsection shall be disclosed to the department whenever the event giving rise to disclosure first occurs.

- 4. For purposes of this section, the phrase "immediate family member" shall mean husband, wife, natural or adoptive parent, child, sibling, stepparent, stepchild, stepbrother, stepsister, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent or grandchild.
- 5. The information called for in this section shall be a public record under the provisions of subdivision (6) of section 610.010.
- 6. Any person may notify the department if facts exist that would lead a reasonable person to conclude that any inspector or surveyor has any personal or business affiliation that would result in a conflict of interest in conducting an inspection or survey for a facility. Upon receiving that notice, the department, when assigning an inspector or surveyor to inspect or survey a facility, for any purpose, shall take steps to verify the information and, if

the department has probable cause to believe that it is correct, shall not assign the inspector or surveyor to the facility or any facility within its organization so as to avoid an appearance of prejudice or favor to the facility or bias on the part of the inspector or surveyor.

- 198.526. 1. [Except as provided in subsection 3 of this section,] The department of health and senior services shall inspect all facilities licensed by the department at least [twice] once each year. Such inspections shall be conducted:
 - (1) Without the prior notification of the facility; and
 - (2) At times of the day, on dates and at intervals which do not permit facilities to anticipate such inspections.
- 2. The department shall annually reevaluate the inspection process to ensure the requirements of subsection 1 of this section are met.
- 3. [The department may reduce the frequency of inspections to once a year if a facility is found to be insubstantial compliance. The basis for such determination shall include, but not be limited to, the following:
 - (1) Previous inspection reports;
 - (2) The facility's history of compliance with rules promulgated pursuant to this chapter;
 - (3) The number and severity of complaints received about the facility; and
- (4) In the year subsequent to a finding of no class I violations or class II violations, the facility does not have a change in ownership, operator, or, if the department finds it significant, a change in director of nursing.
- 4.] Information regarding unannounced inspections shall be disclosed to employees of the department on a need-to-know basis only. Any employee of the department who knowingly discloses the time of an unannounced inspection in violation of this section is guilty of a class A misdemeanor and shall have his or her employment immediately terminated.
 - 198.545. 1. This section shall be known and may be cited as the "Missouri Informal Dispute Resolution Act".
 - 2. As used in this section, the following terms shall mean:
- (1) "Deficiency", a facility's failure to meet a participation requirement or standard, whether state or federal, supported by evidence gathered from observation, interview, or record review;
 - (2) "Department", the department of health and senior services;
 - (3) "Facility", a long-term care facility licensed under this chapter;
 - (4) "IDR", informal dispute resolution as provided for in this section;
- (5) "Independent third party", the federally designated Medicare Quality Improvement Organization in this state;
- (6) "Plan of correction", a facility's response to deficiencies which explains how corrective action will be accomplished, how the facility will identify other residents who may be affected by the deficiency practice, what measures will be used or systemic changes made to ensure that the deficient practice will not reoccur, and how the facility will monitor to ensure that solutions are sustained;
 - (7) "QIO", the federally designated Medicare Quality Improvement Organization in this state.
- 3. The department of health and senior services shall contract with an independent third party to conduct informal dispute resolution (IDR) for facilities licensed under this chapter. The IDR process, including conferences, shall constitute an informal administrative process and shall not be construed to be a formal evidentiary hearing. Use of IDR under this section shall not waive the facility's right to pursue further or additional legal actions.
- 4. The department shall establish an IDR process to determine whether a cited deficiency as evidenced by a statement of deficiencies against a facility shall be upheld. The department shall promulgate rules to incorporate by reference the provisions of 42 CFR 488.331 regarding the IDR process and to include the following minimum requirements for the IDR process:
- (1) Within ten working days of the end of the survey, the department shall by [certified mail] a delivery service that provides dated receipt of delivery transmit to the facility a statement of deficiencies committed by the facility. Notification of the availability of an IDR and IDR process shall be included in the transmittal;
- (2) Within ten [ealendar] working days of receipt of the statement of deficiencies, the facility shall return a plan of correction to the department. Within such ten-day period, the facility may request in writing an IDR conference to refute the deficiencies cited in the statement of deficiencies;
- (3) Within ten working days of receipt **of a request** for an IDR conference made by a facility, the QIO shall hold an IDR conference unless otherwise requested by the facility. The IDR conference shall provide the facility with an opportunity to provide additional information or clarification in support of the facility's contention that the deficiencies were erroneously cited. The facility may be accompanied by counsel during the IDR conference. The type of IDR held shall be at the discretion of the facility, but shall be limited to:

- (a) A desk review of written information submitted by the facility; or
- (b) A telephonic conference; or
- (c) A face-to-face conference held at the headquarters of the QIO or at the facility at the request of the facility.

If the QIO determines the need for additional information, clarification, or discussion after conclusion of the IDR conference, the department and the facility shall be present.

- 5. Within ten days of the IDR conference described in subsection 4 of this section, the QIO shall make a determination, based upon the facts and findings presented, and shall transmit the decision and rationale for the outcome in writing to the facility and the department.
- 6. If the department disagrees with such determination, the department shall transmit the department's decision and rationale for the reversal of the QIO's decision to the facility within ten calendar days of receiving the QIO's decision.
- 7. If the QIO determines that the original statement of deficiencies should be changed as a result of the IDR conference, the department shall transmit a revised statement of deficiencies to the facility with the notification of the determination within ten calendar days of the decision to change the statement of deficiencies.
- 8. Within ten calendar days of receipt of the determination made by the QIO and the revised statement of deficiencies, the facility shall submit a plan of correction to the department.
- 9. The department shall not post on its website or enter into the Centers for Medicare & Medicaid Services Online Survey, Certification and Reporting System, or report to any other agency, any information about the deficiencies which are in dispute unless the dispute determination is made and the facility has responded with a revised plan of correction, if needed.
- 10. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2009, shall be invalid and void."; and

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

On motion of Representative Roberts, **House Amendment No. 1** was adopted.

Representative Shields offered House Amendment No. 2.

House Amendment No. 2

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after all of said section and line the following:

"135.690. 1. As used in this section, the following terms mean:

- (1) "Community-based faculty preceptor", a physician or physician assistant who is licensed in Missouri and provides preceptorships to Missouri medical students or physician assistant students without direct compensation for the work of precepting;
 - (2) "Department", the Missouri department of health and senior services;
- (3) "Division", the division of professional registration of the department of commerce and insurance;
- (4) "Federally Qualified Health Center (FQHC)", a reimbursement designation from the Bureau of Primary Health Care and the Centers for Medicare and Medicaid services of the United States Department of Health and Human Services;
- (5) "Medical student", an individual enrolled in a Missouri medical college approved and accredited as reputable by the American Medical Association or the Liaison Committee on Medical Education or enrolled in a Missouri osteopathic college approved and accredited as reputable by the Commission on Osteopathic College Accreditation;

- (6) "Medical student core preceptorship" or "physician assistant student core preceptorship", a preceptorship for a medical student or physician assistant student that provides a minimum of one hundred twenty hours of community-based instruction in family medicine, internal medicine, pediatrics, psychiatry, or obstetrics and gynecology under the guidance of a community-based faculty preceptor. A community-based faculty preceptor may add together the amounts of preceptorship instruction time separately provided to multiple students in determining whether he or she has reached the minimum hours required under this subdivision, but the total preceptorship instruction time provided shall equal at least one hundred twenty hours in order for such preceptor to be eligible for the tax credit authorized under this section;
- (7) "Physician assistant student", an individual participating in a Missouri physician assistant program accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor organization;
- (8) "Taxpayer", any individual, firm, partner in a firm, corporation, or shareholder in an S corporation doing business in this state and subject to the state income tax imposed under chapter 143, excluding withholding tax imposed under sections 143.191 to 143.265.
- 2. (1) Beginning January 1, 2023, any community-based faculty preceptor who serves as the community-based faculty preceptor for a medical student core preceptorship or a physician assistant student core preceptorship shall be allowed a credit against the tax otherwise due under chapter 143, excluding withholding tax imposed under sections 143.191 to 143.265, in an amount equal to one thousand dollars for each preceptorship, up to a maximum of three thousand dollars per tax year, if he or she completes up to three preceptorship rotations during the tax year and did not receive any direct compensation for the preceptorships.
- (2) To receive the credit allowed by this section, a community-based faculty preceptor shall claim such credit on his or her return for the tax year in which he or she completes the preceptorship rotations and shall submit supporting documentation as prescribed by the division and the department.
- (3) In no event shall the total amount of a tax credit authorized under this section exceed a taxpayer's income tax liability for the tax year for which such credit is claimed. No tax credit authorized under this section shall be allowed a taxpayer against his or her tax liability for any prior or succeeding tax year.
- (4) No more than two hundred preceptorship tax credits shall be authorized under this section for any one calendar year. The tax credits shall be awarded on a first-come, first-served basis. The division and the department shall jointly promulgate rules for determining the manner in which taxpayers who have obtained certification under this section are able to claim the tax credit. The cumulative amount of tax credits awarded under this section shall not exceed two hundred thousand dollars per year.
- (5) Notwithstanding the provisions of subdivision (4) of this subsection, the department is authorized to exceed the two hundred thousand dollars per year tax credit program cap in any amount not to exceed the amount of funds remaining in the medical preceptor fund, as established under subsection 3 of this section, as of the end of the most recent tax year, after any required transfers to the general revenue fund have taken place in accordance with the provisions of subsection 3 of this section.
- 3. (1) Funding for the tax credit program authorized under this section shall be generated by the division from a license fee increase of seven dollars per license for physicians and surgeons and from a license fee increase of three dollars per license for physician assistants. The license fee increases shall take effect beginning January 1, 2023, based on the underlying license fee rates prevailing on that date. The underlying license fee rates shall be determined under section 334.090 and all other applicable provisions of chapter 334.
- (2) (a) There is hereby created in the state treasury the "Medical Preceptor Fund", which shall consist of moneys collected under this subsection. The state treasurer shall be custodian of the fund. In accordance with sections 30.170 and 30.180, the state treasurer may approve disbursements. The fund shall be a dedicated fund and, upon appropriation, moneys in the fund shall be used solely by the department for the administration of the tax credit program authorized under this section. Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund. The state treasurer shall invest moneys in the medical preceptor fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.
- (b) Notwithstanding any provision of this chapter or any other provision of law to the contrary, all revenue from the license fee increases described under subdivision (1) of this subsection shall be deposited in the medical preceptor fund. After the end of every tax year, an amount equal to the total dollar amount of all

tax credits claimed under this section shall be transferred from the medical preceptor fund to the state's general revenue fund established under section 33.543. Any excess moneys in the medical preceptor fund shall remain in the fund and shall not be transferred to the general revenue fund.

- 4. (1) The department shall administer the tax credit program authorized under this section. Each taxpayer claiming a tax credit under this section shall file an application with the department verifying the number of hours of instruction and the amount of the tax credit claimed. The hours claimed on the application shall be verified by the college or university department head or the program director on the application. The certification by the department affirming the taxpayer's eligibility for the tax credit provided to the taxpayer shall be filed with the taxpayer's income tax return.
- (2) No amount of any tax credit allowed under this section shall be refundable. No tax credit allowed under this section shall be transferred, sold, or assigned. No taxpayer shall be eligible to receive the tax credit authorized under this section if such taxpayer employs persons who are not authorized to work in the United States under federal law.
- 5. The department of commerce and insurance and the department of health and senior services shall jointly promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2022, shall be invalid and void."; and

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

On motion of Representative Shields, House Amendment No. 2 was adopted.

Representative Kelly (141) offered **House Amendment No. 3**.

House Amendment No. 3

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after all of said line and section the following:

"[251.070.] **192.2001.** The department shall be responsible for the implementation of the Older Americans Act in Missouri. This agency shall develop a state plan describing a program for carrying out the Older Americans Act and shall be the sole agency responsible for coordinating all state programs related to the implementation of such plan.

- 660.010. 1. There is hereby created a "Department of Social Services" in charge of a director appointed by the governor, by and with the advice and consent of the senate. All the powers, duties and functions of the director of the department of public health and welfare, chapters 191 and 192, and others, not previously reassigned by executive reorganization plan number 2 of 1973 as submitted by the governor under chapter 26 except those assigned to the department of mental health, are transferred by type I transfer to the director of the department of social services and the office of the director, department of public health and welfare is abolished. The department of public health and welfare is abolished. All employees of the department of social services shall be covered by the provisions of chapter 36 except the director of the department and the director's secretary, all division directors and their secretaries, and no more than three additional positions in each division which may be designated by the division director.
- 2. It is the intent of the general assembly in establishing the department of social services, as provided herein, to authorize the director of the department to coordinate the state's programs devoted to those unable to provide for themselves and for the rehabilitation of victims of social disadvantage. The director shall use the resources provided to the department to provide comprehensive programs and leadership striking at the roots of dependency, disability and abuse of society's rules with the purpose of improving service and economical operations. The department is directed to take all steps possible to consolidate and coordinate the field operations of the department to maximize service to the citizens of the state.

- 3. All references to the division of welfare shall hereafter be construed to mean the department of social services or the appropriate division within the department.
- 4. The state's responsibility under public law 452 of the eighty-eighth Congress and others, pertaining to the Office of Economic Opportunity, is transferred by type I transfer to the department of social services.
- 5. [The state's responsibility under public law 73, Older Americans Act of 1965, of the eighty ninth-Congress is transferred by type I transfer to the department of social services.
- 6.] All the powers, duties and functions vested by law in the curators of the University of Missouri relating to crippled children's services, chapter 201, are transferred by type I transfer to the department of social services.
- [7-] 6. All the powers, duties and functions vested in the state board of training schools, chapter 219 and others, are transferred by type I transfer to the "Division of Youth Services" hereby authorized in the department of social services headed by a director appointed by the director of the department. The state board of training schools shall be reconstituted as an advisory board on youth services, appointed by the director of the department. The advisory board shall visit each facility of the division as often as possible, shall file a written report with the director of the department and the governor on conditions they observed relating to the care and rehabilitative efforts in behalf of children assigned to the facility, the security of the facility and any other matters pertinent in their judgment. Copies of these reports shall be filed with the legislative library. Members of the advisory board shall receive reimbursement for their expenses and twenty-five dollars a day for each day they engage in official business relating to their duties. The members of the board shall be provided with identification means by the director of the division permitting immediate access to all facilities enabling them to make unannounced entrance to facilities they wish to inspect."; and

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

On motion of Representative Kelly (141), House Amendment No. 3 was adopted.

Representative Griffith offered House Amendment No. 4.

House Amendment No. 4

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after all of said section and line the following:

- "194.210. 1. Sections 194.210 to 194.294 may be cited as the "Revised Uniform Anatomical Gift Act".
- 2. As used in sections 194.210 to 194.294, the following terms mean:
- (1) "Adult", an individual who is at least eighteen years of age;
- (2) "Agent", an individual:
- (a) Authorized to make health-care decisions on the principal's behalf by a power of attorney for health care; or
- (b) Expressly authorized to make an anatomical gift on the principal's behalf by any other record signed by the principal;
- (3) "Anatomical gift", a donation of all or part of a human body to take effect after the donor's death for the purposes of transplantation, therapy, research, or education;
- (4) ["Cadaver procurement organization", an entity lawfully established and operated for the procurement and distribution of anatomical gifts to be used as cadavers or cadaver tissue for appropriate education or research;
- (5)] "Decedent", a deceased individual whose body or part is or may be the source of an anatomical gift. The term includes a stillborn infant but does not include an unborn child as defined in section 1.205 or 188.015 if the child has not died of natural causes;
- [(6)] (5) "Disinterested witness", a witness other than the spouse, child, parent, sibling, grandchild, grandparent, or guardian of the individual who makes, amends, revokes, or refuses to make an anatomical gift. The term does not include a person to which an anatomical gift could pass under section 194.255;
- [(7)] (6) "Document of gift", a donor card or other record used to make an anatomical gift. The term includes a statement or symbol on a driver's license, identification card, or donor registry;

- [(8)] (7) "Donor", an individual whose body or part is the subject of an anatomical gift provided that donor does not include an unborn child as defined in section 1.205 or section 188.015 if the child has not died of natural causes;
- [(9)] (8) "Donor registry", a database that contains records of anatomical gifts and amendments to or revocations of anatomical gifts;
- [(10)] (9) "Driver's license", a license or permit issued by the department of revenue to operate a vehicle whether or not conditions are attached to the license or permit;
- [(11)] (10) "Eye bank", a person that is licensed, accredited, or regulated under federal or state law to engage in the recovery, screening, testing, processing, storage, or distribution of human eyes or portions of human eyes;
- [(12)] (11) "Guardian", a person appointed by a court pursuant to chapter 475. The term does not include a guardian ad litem;
- [(13)] (12) "Hospital", a facility licensed as a hospital under the laws of any state or a facility operated as a hospital by the United States, a state, or a subdivision of a state;
 - [(14)] (13) "Identification card", an identification card issued by the department of revenue;
 - [(15)] (14) "Know", to have actual knowledge;
 - [(16)] (15) "Minor", an individual who is under eighteen years of age;
- [(17)] (16) "Organ procurement organization", [a person] an entity designated by the United States Secretary of Health and Human Services as an organ procurement organization;
 - [(18)] (17) "Parent", a parent whose parental rights have not been terminated;
 - [(19)] (18) "Part", an organ, an eye, or tissue of a human being. The term does not include the whole body;
- [(20)] (19) "Person", an individual, corporation, business trust, estate, trust, partnership, limited liability company, association, joint venture, public corporation, government or governmental subdivision, agency, or instrumentality, or any other legal or commercial entity;
- [(21)] (20) "Physician", an individual authorized to practice medicine or osteopathy under the laws of any state;
- [(22)] (21) "Potential donor", an individual whose body or part is the subject of an anatomical gift, except that the term "potential donor" shall not include an unborn child, as defined in section 1.205 or 188.015, if the child did not die of natural causes;
- (22) "Procurement organization", an eye bank, organ procurement organization, [ex] tissue bank, or entity lawfully established and operated for the procurement and distribution of anatomical gifts to be used as donated organs or donated tissues or for appropriate scientific or medical research;
- (23) "Prospective donor", an individual who is dead or near death and has been determined by a procurement organization to have a part that could be medically suitable for transplantation, therapy, research, or education. The term does not include an individual who has made a refusal:
- (24) "Reasonably available", able to be contacted by a procurement organization with reasonable effort and willing and able to act in a timely manner consistent with existing medical criteria necessary for the making of an anatomical gift;
- (25) "Recipient", an individual into whose body a decedent's part has been or is intended to be transplanted;
- (26) "Record", information that is inscribed on a tangible medium or that is stored in an electronic or other medium and is retrievable in perceivable form;
- (27) "Refusal", a record created under section 194.235 that expressly states an intent to bar other persons from making an anatomical gift of an individual's body or part;
 - (28) "Sign", with the present intent to authenticate or adopt a record:
 - (a) To execute or adopt a tangible symbol; or
 - (b) To attach or logically associate with the record an electronic symbol, sound, or process;
- (29) "State", a state of the United States, the District of Columbia, Puerto Rico, the United States Virgin Islands, or any territory or insular possession subject to the United States;
- (30) "Technician", an individual determined to be qualified to remove or process parts by an appropriate organization that is licensed, accredited, or regulated under federal or state law. The term includes an eye enucleator;
- (31) "Tissue", a portion of the human body other than an organ or an eye. The term does not include blood unless the blood is donated for purposes of research or education;
- (32) "Tissue bank", a person that is licensed, accredited, or regulated under federal or state law to engage in the recovery, screening, testing, processing, storage, or distribution of tissue;

- (33) "Transplant hospital", a hospital that furnishes organ transplants and other medical and surgical specialty services required for the care of transplant patients.
 - 194.255. 1. An anatomical gift may be made to the following persons named in the document of gift:
- (1) A hospital, accredited medical school, dental school, college, university, [or organ] procurement organization, [cadaver procurement organization,] or other appropriate person for appropriate scientific or medical research or education;
- (2) Subject to subsection 2 of this section, an individual designated by the person making the anatomical gift if the individual is the recipient of the part; or
 - (3) An eye bank or tissue bank.
- 2. If an anatomical gift to an individual under subdivision (2) of subsection 1 of this section cannot be transplanted into the individual, the part passes in accordance with subsection 7 of this section in the absence of an express, contrary indication by the person making the anatomical gift.
- 3. If an anatomical gift of one or more specific parts or of all parts is made in a document of gift that does not name a person described in subsection 1 of this section but identifies the purpose for which an anatomical gift may be used, the following rules apply:
- (1) If the part is an eye and the gift is for the purpose of transplantation or therapy, the gift passes to the appropriate eye bank;
- (2) If the part is tissue and the gift is for the purpose of transplantation or therapy, the gift passes to the appropriate tissue bank;
- (3) If the part is an organ and the gift is for the purpose of transplantation or therapy, the gift passes to the appropriate organ procurement organization as custodian of the organ;
- (4) If the part is an organ, an eye, or tissue and the gift is for the purpose of research or education, the gift passes to the appropriate procurement organization.
- 4. For the purpose of subsection 3 of this section, if there is more than one purpose of an anatomical gift set forth in the document of gift but the purposes are not set forth in any priority, the gift must be used for transplantation or therapy if suitable. If the gift cannot be used for transplantation or therapy, the gift may be used for research or education.
- 5. If an anatomical gift of one or more specific parts is made in a document of gift that does not name a person described in subsection 1 of this section and does not identify the purpose of the gift, the gift may be used only for transplantation or therapy, and the gift passes in accordance with subsection 7 of this section.
- 6. If a document of gift specifies only a general intent to make an anatomical gift by words such as "donor", "organ donor", or "body donor", or by a symbol or statement of similar import, the gift may be used only for transplantation or therapy, and the gift passes in accordance with subsection 7 of this section.
 - 7. For purposes of subsections 2, 5, and 6 of this section, the following rules apply:
 - (1) If the part is an eye, the gift passes to the appropriate eye bank;
 - (2) If the part is tissue, the gift passes to the appropriate tissue bank;
- (3) If the part is an organ, the gift passes to the appropriate organ procurement organization as custodian of the organ;
- (4) If the gift is medically unsuitable for transplantation or therapy, the gift may be used for **appropriate scientific or medical** research or education and pass to the appropriate procurement organization [or cadaver-procurement organization].
- 8. An anatomical gift of an organ for transplantation or therapy, other than an anatomical gift under subdivision (2) of subsection 1 of this section, passes to the organ procurement organization as custodian of the organ.
- 9. If an anatomical gift does not pass under subsections 1 through 8 of this section or the decedent's body or part is not used for transplantation, therapy, research, or education, custody of the body or part passes to the person under obligation to dispose of the body or part.
- 10. A person may not accept an anatomical gift if the person knows that the gift was not effectively made under section 194.225 or 194.250 or if the person knows that the decedent made a refusal under section 194.235 that was not revoked. For purposes of this subsection, if a person knows that an anatomical gift was made on a document of gift, the person is deemed to know of any amendment or revocation of the gift or any refusal to make an anatomical gift on the same document of gift.
- 11. A person may not accept an anatomical gift if the person knows that the gift is from the body of an executed prisoner from another country.

- 12. Except as otherwise provided in subdivision (2) of subsection 1 of this section, nothing in this act affects the allocation of organs for transplantation or therapy.
- 194.265. 1. When a hospital refers an individual at or near death to a procurement organization, the organization shall make a reasonable search of any donor registry and other applicable records that it knows exist for the geographical area in which the individual resides to ascertain whether the individual has made an anatomical gift.
- 2. A procurement organization must be allowed reasonable access to information in the records of the department of health and senior services and department of revenue to ascertain whether an individual at or near death is a donor.
- 3. When a hospital refers an individual at or near death to a procurement organization, the organization may conduct any reasonable examination necessary to ensure the medical suitability of a part that is or could be the subject of an anatomical gift for transplantation, therapy, research, or education from a donor, a potential donor, or a prospective donor. During the examination period, measures necessary to ensure the medical suitability of the part may not be withdrawn unless the hospital or procurement organization knows a contrary intent had or has been expressed by the individual or an agent of the individual, or if the individual is incapacitated and he or she has no agent, knows a contrary intent has been expressed by any person listed in section 194.245 having priority to make an anatomical gift on behalf of the individual.
- 4. Unless prohibited by law other than sections 194.210 to 194.294, at any time after a donor's death, the person to which a part passes under section 194.255 may conduct any reasonable examination necessary to ensure the medical suitability of the body or part for its intended purpose.
- 5. Unless prohibited by law other than sections 194.210 to 194.294, an examination under subsection 3 or 4 of this section may include an examination of all medical records of the donor, **potential donor**, or prospective donor.
- 6. Upon the death of a minor who was a donor or had signed a refusal, unless a procurement organization knows the minor is emancipated, the procurement organization shall conduct a reasonable search for the parents of the minor and provide the parents with an opportunity to revoke or amend the anatomical gift or revoke a refusal.
- 7. Upon referral by a hospital under subsection 1 of this section, a procurement organization shall make a reasonable search for any person listed in section 194.245 having priority to make an anatomical gift on behalf of a **donor, potential donor, or** prospective donor. If a procurement organization receives information that an anatomical gift to any other person was made, amended, or revoked, it shall promptly advise the other person of all relevant information.
- 8. Subject to subsection 9 of section 194.255 and section 58.785, the rights of the person to which a part passes under section 194.255 are superior to rights of all others with respect to the part. The person may accept or reject an anatomical gift in whole or in part. Subject to the terms of the document of gift and this act, a person that accepts an anatomical gift of an entire body may allow embalming or cremation and use of remains in a funeral service. If the gift is of a part, the person to which the part passes under section 194.255, upon the death of the donor and before embalming, burial, or cremation, shall cause the part to be removed without unnecessary mutilation.
- 9. Neither the physician who attends the decedent immediately prior to or at death nor the physician who determines the time of the decedent's death may participate in the procedures for removing or transplanting a part from the decedent.
- 10. No physician who removes or transplants a part from the decedent, or a procurement organization, shall have primary responsibility for the health care treatment, or health care decision-making for such individual's terminal condition during the hospitalization for which the individual becomes a donor.
- 11. A physician or technician may remove a donated part from the body of a donor that the physician or technician is qualified to remove.
- 194.285. 1. A person that acts in accordance with sections 194.210 to 194.294 or with the applicable anatomical gift law of another state that is not inconsistent with the provisions of sections 194.210 to 194.294 or attempts without negligence and in good faith to do so is not liable for the act in any civil action, criminal, or administrative proceeding.
- 2. Neither the person making an anatomical gift nor the donor's estate is liable for any injury or damage that results from the making or use of the gift.
- 3. In determining whether an anatomical gift has been made, amended, or revoked under sections 194.210 to 194.294, a person may rely upon representations of individuals listed in subdivision (2), (3), (4), (5), (6), (7), or (8) of subsection 1 of section 194.245 relating to the individual's relationship to the donor, **potential donor**, or prospective donor unless the person knows that representation is untrue.

- 194.290. 1. As used in this section, the following terms mean:
- (1) "Advance health-care directive", a power of attorney for health care or a record signed or authorized by a **donor**, **potential donor**, **or** prospective donor, containing the [prospective] donor's direction concerning a health-care decision for the [prospective] donor;
- (2) "Declaration", a record, including but not limited to a living will, or a do-not-resuscitate order, signed by a **donor, potential donor, or** prospective donor specifying the circumstances under which a life support system may be withheld or withdrawn;
- (3) "Health-care decision", any decision regarding the health care of the **donor**, **potential donor**, **or** prospective donor.
- 2. If a **donor, potential donor, or** prospective donor has a declaration or advance health-care directive and the terms of the declaration or directive and the express or implied terms of a potential anatomical gift are in conflict with regard to the administration of measures necessary to ensure the medical suitability of a part for transplantation or therapy, the [prospective] donor's attending physician and [prospective] donor shall confer to resolve the conflict. If the **donor, potential donor, or** prospective donor is incapable of resolving the conflict, an agent acting under the [prospective] donor's declaration or directive or, if none or the agent is not reasonably available, another person authorized by law to make health-care decisions on behalf of the [prospective] donor shall act for the donor to resolve the conflict. The conflict must be resolved as expeditiously as possible. Information relevant to the resolution of the conflict may be obtained from the appropriate procurement organization and any other person authorized to make an anatomical gift for the prospective donor under section 194.245. Before the resolution of the conflict, measures necessary to ensure the medical suitability of an organ for transplantation or therapy may not be withheld or withdrawn from the **donor, potential donor, or** prospective donor if withholding or withdrawing the measures is not contraindicated by appropriate end-of-life care.
- 194.297. 1. There is established in the state treasury the "Organ Donor Program Fund" [, which shall-consist of all moneys deposited by the director of revenue pursuant to subsection 2 of section 302.171 and any other moneys donated or appropriated to the fund []. The director of revenue shall credit to and deposit in the fund all amounts received under subsection 8 of section 301.020, section 301.3125, and subsection 2 of section 302.171 and any other amounts that may be received from appropriations, grants, gifts, bequests, the federal government, or any other source. Moneys in the fund shall be expended in the manner set forth in section 194.299.
- 2. The department of health and senior services may pursue funding to support programmatic efforts and initiatives described in section 194.299.
- 3. The state treasurer shall invest any moneys in excess of five hundred thousand dollars in the organ donor program fund not required for immediate disbursement or program allocation in the same manner as surplus state funds are invested under section 30.260. All earnings resulting from the investment of moneys in the fund shall be credited to the fund.
- 4. Private contributions, grants, and federal funds may be used and expended by the department of health and senior services for such purposes as may be specified in any requirements, terms, or conditions attached thereto or, in the absence of any specific requirements, terms, or conditions, as the department determines under section 194.299.
- 5. The acceptance and use of federal funds shall not commit any state funds or place any obligation upon the general assembly to continue the programs or activities outlined in the federal fund award for which the federal funds are available.
- 6. The state treasurer shall administer the fund, and the moneys in the fund shall be used solely, upon appropriation, by the department of health and senior services[, in consultation]. The department may consult with the organ donation advisory committee[, for implementation of organ donation awareness programs in the manner prescribed in subsection 2 of section 194.300] about implementation of programming and related expenditures.
- 7. Notwithstanding the provisions of section 33.080 to the contrary, moneys in the organ donor program fund at the end of any biennium shall not be transferred to the credit of the general revenue fund. There shall be no money appropriated from general revenue to administer the fund in the event the fund cannot sustain itself.
 - 194.299. The moneys in the organ donor program fund shall be expended as follows:
- (1) [Grants] Contracts that may be entered into by the department of health and senior services [to] with certified organ procurement organizations and other organizations, individuals, and institutions for services furthering the development and implementation of organ donation awareness programs in this state;

- (2) Initiatives to increase education and awareness of organ, eye, and tissue donation; donor family recognition efforts; training and strategic planning efforts relating to organ, eye, and tissue donation; and donor registry initiatives;
- (3) Publication of informational pamphlets or booklets by the department of health and senior services and the advisory committee regarding organ donations and donations to the organ donor program fund when obtaining or renewing a license to operate a motor vehicle pursuant to subsection 2 of section 302.171;
- [(3)] (4) Maintenance of a central registry of **potential** organ, **eye**, **and tissue** donors pursuant to subsection 1 of section 194.304; [and
- (4)] (5) Implementation of organ donation awareness programs in the secondary schools of this state by the department of elementary and secondary education; and
- (6) Reimbursements for reasonable and necessary expenses incurred by members of the organ donation advisory committee as described in subsection 2 of section 194.300.
- 194.300. 1. There is established within the department of health and senior services the "Organ Donation Advisory Committee", which shall consist of the following members appointed by the governor with the advice and consent of the senate:
 - (1) Four representatives of organ and tissue procurement organizations;
- (2) Four members representative of organ recipients, families of organ recipients, organ donors and families of organ donors;
 - (3) One health care representative from a hospital located in Missouri; and
 - (4) One representative of the department of health and senior services.
- 2. Members of the advisory committee shall receive no compensation for their services, but may be reimbursed for the reasonable and necessary expenses incurred in the performance of their duties out of [appropriations made for that purpose] the organ donor program fund established in section 194.297. Members shall serve for five year terms and shall serve at the pleasure of the governor.
- 194.304. 1. The department of revenue shall cooperate with any donor registry that this state establishes, contracts for, or recognizes for the purpose of transferring to the donor registry all relevant information regarding a donor's making, amendment to, or revocation of an anatomical gift.
 - 2. A first person consent organ and tissue donor registry shall:
- (1) Allow a donor, **potential donor**, **prospective donor**, or other person authorized under section 194.220 to include on the donor registry a statement or symbol that the donor has made, amended, or revoked an anatomical gift;
- (2) Be accessible to a procurement organization to allow it to obtain relevant information on the donor registry to determine, at or near death of the donor, a **potential donor**, or a prospective donor, whether the donor [or prospective donor] has made, amended, or revoked an anatomical gift; and
- (3) Be accessible for purposes of subdivisions (1) and (2) of this subsection seven days a week on a twenty-four-hour basis.
- 3. Personally identifiable information on [a first person consent organ and tissue] the donor registry about a donor, potential donor, or prospective donor may not be used or disclosed without the express consent of the donor[, prospective donor,] or the person that made the anatomical gift for any purpose other than to determine, at or near death of the donor [or a prospective donor], whether the donor [or prospective donor] has made, amended, or revoked an anatomical gift.
- 301.020. 1. Every owner of a motor vehicle or trailer, which shall be operated or driven upon the highways of this state, except as herein otherwise expressly provided, shall annually file, by mail or otherwise, in the office of the director of revenue, an application for registration on a blank to be furnished by the director of revenue for that purpose containing:
- (1) A brief description of the motor vehicle or trailer to be registered, including the name of the manufacturer, the vehicle identification number, the amount of motive power of the motor vehicle, stated in figures of horsepower and whether the motor vehicle is to be registered as a motor vehicle primarily for business use as defined in section 301.010;
 - (2) The name, the applicant's identification number and address of the owner of such motor vehicle or trailer;
- (3) The gross weight of the vehicle and the desired load in pounds if the vehicle is a commercial motor vehicle or trailer.
- 2. If the vehicle is a motor vehicle primarily for business use as defined in section 301.010 and if such vehicle is ten years of age or less and has less than one hundred fifty thousand miles on the odometer, the director of revenue shall retain the odometer information provided in the vehicle inspection report, and provide for prompt access to such information, together with the vehicle identification number for the motor vehicle to which such information pertains, for a period of ten years after the receipt of such information. This section shall not apply unless:

- (1) The application for the vehicle's certificate of ownership was submitted after July 1, 1989; and
- (2) The certificate was issued pursuant to a manufacturer's statement of origin.
- 3. If the vehicle is any motor vehicle other than a motor vehicle primarily for business use, a recreational motor vehicle, motorcycle, motortricycle, autocycle, bus, or any commercial motor vehicle licensed for over twelve thousand pounds and if such motor vehicle is ten years of age or less and has less than one hundred fifty thousand miles on the odometer, the director of revenue shall retain the odometer information provided in the vehicle inspection report, and provide for prompt access to such information, together with the vehicle identification number for the motor vehicle to which such information pertains, for a period of ten years after the receipt of such information. This subsection shall not apply unless:
 - (1) The application for the vehicle's certificate of ownership was submitted after July 1, 1990; and
 - (2) The certificate was issued pursuant to a manufacturer's statement of origin.
- 4. If the vehicle qualifies as a reconstructed motor vehicle, motor change vehicle, specially constructed motor vehicle, non-USA-std motor vehicle, as defined in section 301.010, or prior salvage as referenced in section 301.573, the owner or lienholder shall surrender the certificate of ownership. The owner shall make an application for a new certificate of ownership, pay the required title fee, and obtain the vehicle examination certificate required pursuant to subsection 9 of section 301.190. If an insurance company pays a claim on a salvage vehicle as defined in section 301.010 and the owner retains the vehicle, as prior salvage, the vehicle shall only be required to meet the examination requirements under subsection 10 of section 301.190. Notarized bills of sale along with a copy of the front and back of the certificate of ownership for all major component parts installed on the vehicle and invoices for all essential parts which are not defined as major component parts shall accompany the application for a new certificate of ownership. If the vehicle is a specially constructed motor vehicle, as defined in section 301.010, two pictures of the vehicle shall be submitted with the application. If the vehicle is a kit vehicle, the applicant shall submit the invoice and the manufacturer's statement of origin on the kit. If the vehicle requires the issuance of a special number by the director of revenue or a replacement vehicle identification number, the applicant shall submit the required application and application fee. All applications required under this subsection shall be submitted with any applicable taxes which may be due on the purchase of the vehicle or parts. The director of revenue shall appropriately designate "Reconstructed Motor Vehicle", "Motor Change Vehicle", "Non-USA-Std Motor Vehicle", or "Specially Constructed Motor Vehicle" on the current and all subsequent issues of the certificate of ownership of such vehicle.
- 5. Every insurance company that pays a claim for repair of a motor vehicle which as the result of such repairs becomes a reconstructed motor vehicle as defined in section 301.010 or that pays a claim on a salvage vehicle as defined in section 301.010 and the owner is retaining the vehicle shall in writing notify the owner of the vehicle, and in a first party claim, the lienholder if a lien is in effect, that he is required to surrender the certificate of ownership, and the documents and fees required pursuant to subsection 4 of this section to obtain a prior salvage motor vehicle certificate of ownership or documents and fees as otherwise required by law to obtain a salvage certificate of ownership, from the director of revenue. The insurance company shall within thirty days of the payment of such claims report to the director of revenue the name and address of such owner, the year, make, model, vehicle identification number, and license plate number of the vehicle, and the date of loss and payment.
- 6. Anyone who fails to comply with the requirements of this section shall be guilty of a class B misdemeanor.
- 7. An applicant for registration may make a donation of one dollar to promote a blindness education, screening and treatment program. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the blindness education, screening and treatment program fund established in section 209.015. Moneys in the blindness education, screening and treatment program fund shall be used solely for the purposes established in section 209.015; except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in this subsection is voluntary and may be refused by the applicant for registration at the time of issuance or renewal. The director shall inquire of each applicant at the time the applicant presents the completed application to the director whether the applicant is interested in making the one dollar donation prescribed in this subsection.
- 8. An applicant for registration may make a donation of **an amount not less than** one dollar to promote an organ donor program. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the organ donor program fund as established in sections 194.297 to 194.304. Moneys in the organ donor fund shall be used solely for the purposes established in sections 194.297 to 194.304, except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in

this subsection is voluntary and may be refused by the applicant for registration at the time of issuance or renewal. The director shall inquire of each applicant at the time the applicant presents the completed application to the director whether the applicant is interested in making [the] a contribution not less than one dollar [donation] as prescribed in this subsection.

- 9. An applicant for registration may make a donation of one dollar to the Missouri medal of honor recipients fund. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the Missouri medal of honor recipients fund as established in section 226.925. Moneys in the medal of honor recipients fund shall be used solely for the purposes established in section 226.925, except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in this subsection is voluntary and may be refused by the applicant for registration at the time of issuance or renewal. The director shall inquire of each applicant at the time the applicant presents the completed application to the director whether the applicant is interested in making the one dollar donation prescribed in this subsection.
- 302.171. 1. The director shall verify that an applicant for a driver's license is a Missouri resident or national of the United States or a noncitizen with a lawful immigration status, and a Missouri resident before accepting the application. The director shall not issue a driver's license for a period that exceeds the duration of an applicant's lawful immigration status in the United States. The director may establish procedures to verify the Missouri residency or United States naturalization or lawful immigration status and Missouri residency of the applicant and establish the duration of any driver's license issued under this section. An application for a license shall be made upon an approved form furnished by the director. Every application shall state the full name, Social Security number, age, height, weight, color of eyes, sex, residence, mailing address of the applicant, and the classification for which the applicant has been licensed, and, if so, when and by what state, and whether or not such license has ever been suspended, revoked, or disqualified, and, if revoked, suspended or disqualified, the date and reason for such suspension, revocation or disqualification and whether the applicant is making a [one dollar] donation to promote an organ donation program as prescribed in subsection 2 of this section, to promote a blindness education, screening and treatment program as prescribed in subsection 3 of this section, or the Missouri medal of honor recipients fund prescribed in subsection 4 of this section. A driver's license, nondriver's license, or instruction permit issued under this chapter shall contain the applicant's legal name as it appears on a birth certificate or as legally changed through marriage or court order. No name change by common usage based on common law shall be permitted. The application shall also contain such information as the director may require to enable the director to determine the applicant's qualification for driving a motor vehicle; and shall state whether or not the applicant has been convicted in this or any other state for violating the laws of this or any other state or any ordinance of any municipality, relating to driving without a license, careless driving, or driving while intoxicated, or failing to stop after an accident and disclosing the applicant's identity, or driving a motor vehicle without the owner's consent. The application shall contain a certification by the applicant as to the truth of the facts stated therein. Every person who applies for a license to operate a motor vehicle who is less than twenty-one years of age shall be provided with educational materials relating to the hazards of driving while intoxicated, including information on penalties imposed by law for violation of the intoxication-related offenses of the state. Beginning January 1, 2001, if the applicant is less than eighteen years of age, the applicant must comply with all requirements for the issuance of an intermediate driver's license pursuant to section 302.178. For persons mobilized and deployed with the United States Armed Forces, an application under this subsection shall be considered satisfactory by the department of revenue if it is signed by a person who holds general power of attorney executed by the person deployed, provided the applicant meets all other requirements set by the director.
- 2. An applicant for a license may make a donation of **an amount not less than** one dollar to promote an organ donor program. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the organ donor program fund established in sections 194.297 to 194.304. Moneys in the organ donor program fund shall be used solely for the purposes established in sections 194.297 to 194.304 except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in this subsection is voluntary and may be refused by the applicant for the license at the time of issuance or renewal of the license. The director shall make available an informational booklet or other informational sources on the importance of organ and tissue donations to applicants for licensure as designed by the organ donation advisory committee established in sections 194.297 to 194.304. The director shall inquire of each applicant at the time the licensee presents the completed application to the director whether the applicant is interested in making the [one dollar] donation prescribed in this subsection and whether the applicant is interested in inclusion in the organ donor registry and shall also specifically inform the licensee of the ability to consent to organ donation by placing a donor symbol sticker authorized and issued by the department of health and senior services on the back of his or her driver's license or identification card as prescribed by subdivision (1) of subsection 1 of section 194.225. A symbol

may be placed on the front of the license or identification card indicating the applicant's desire to be listed in the registry at the applicant's request at the time of his or her application for a driver's license or identification card, or the applicant may instead request an organ donor sticker from the department of health and senior services by application on the department of health and senior services' website. Upon receipt of an organ donor sticker sent by the department of health and senior services, the applicant shall place the sticker on the back of his or her driver's license or identification card to indicate that he or she has made an anatomical gift. The director shall notify the department of health and senior services of information obtained from applicants who indicate to the director that they are interested in registry participation, and the department of health and senior services shall enter the complete name, address, date of birth, race, gender and a unique personal identifier in the registry established in subsection 1 of section 194.304.

- 3. An applicant for a license may make a donation of one dollar to promote a blindness education, screening and treatment program. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the blindness education, screening and treatment program fund established in section 209.015. Moneys in the blindness education, screening and treatment program fund shall be used solely for the purposes established in section 209.015; except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in this subsection is voluntary and may be refused by the applicant for the license at the time of issuance or renewal of the license. The director shall inquire of each applicant at the time the licensee presents the completed application to the director whether the applicant is interested in making the one dollar donation prescribed in this subsection.
- 4. An applicant for registration may make a donation of one dollar to the Missouri medal of honor recipients fund. The director of revenue shall collect the donations and deposit all such donations in the state treasury to the credit of the Missouri medal of honor recipients fund as established in section 226.925. Moneys in the medal of honor recipients fund shall be used solely for the purposes established in section 226.925, except that the department of revenue shall retain no more than one percent for its administrative costs. The donation prescribed in this subsection is voluntary and may be refused by the applicant for registration at the time of issuance or renewal. The director shall inquire of each applicant at the time the applicant presents the completed application to the director whether the applicant is interested in making the one dollar donation prescribed in this subsection.
- 5. Beginning July 1, 2005, the director shall deny the driving privilege of any person who commits fraud or deception during the examination process or who makes application for an instruction permit, driver's license, or nondriver's license which contains or is substantiated with false or fraudulent information or documentation, or who knowingly conceals a material fact or otherwise commits a fraud in any such application. The period of denial shall be one year from the effective date of the denial notice sent by the director. The denial shall become effective ten days after the date the denial notice is mailed to the person. The notice shall be mailed to the person at the last known address shown on the person's driving record. The notice shall be deemed received three days after mailing unless returned by the postal authorities. No such individual shall reapply for a driver's examination, instruction permit, driver's license, or nondriver's license until the period of denial is completed. No individual who is denied the driving privilege under this section shall be eligible for a limited driving privilege issued under section 302.309.
 - 6. All appeals of denials under this section shall be made as required by section 302.311.
- 7. The period of limitation for criminal prosecution under this section shall be extended under subdivision (1) of subsection 3 of section 556.036.
- 8. The director may promulgate rules and regulations necessary to administer and enforce this section. No rule or portion of a rule promulgated pursuant to the authority of this section shall become effective unless it has been promulgated pursuant to chapter 536.
- 9. Notwithstanding any provision of this chapter that requires an applicant to provide proof of Missouri residency for renewal of a noncommercial driver's license, noncommercial instruction permit, or nondriver's license, an applicant who is sixty-five years and older and who was previously issued a Missouri noncommercial driver's license, noncommercial instruction permit, or Missouri nondriver's license is exempt from showing proof of Missouri residency.
- 10. Notwithstanding any provision of this chapter, for the renewal of a noncommercial driver's license, noncommercial instruction permit, or nondriver's license, a photocopy of an applicant's United States birth certificate along with another form of identification approved by the department of revenue, including, but not limited to, United States military identification or United States military discharge papers, shall constitute sufficient proof of Missouri citizenship.

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11. Notwithstanding any other provision of this chapter, if an applicant does not meet the requirements of subsection 9 of this section and does not have the required documents to prove Missouri residency, United States naturalization, or lawful immigration status, the department may issue a one-year driver's license renewal. This one-time renewal shall only be issued to an applicant who previously has held a Missouri noncommercial driver's license, noncommercial instruction permit, or nondriver's license for a period of fifteen years or more and who does not have the required documents to prove Missouri residency, United States naturalization, or lawful immigration status. After the expiration of the one-year period, no further renewal shall be provided without the applicant producing proof of Missouri residency, United States naturalization, or lawful immigration status."; and

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

Representative Eggleston offered House Amendment No. 1 to House Amendment No. 4.

House Amendment No. 1 to House Amendment No. 4

AMEND House Amendment No. 4 to House Bill No. 2331, Page 9, Line 1, by inserting after said line the following:

- "194.321. 1. For purposes of this section, the following terms mean:
- (1) "COVID-19 vaccination status", an indication of whether a person has received a vaccination against COVID-19;
 - (2) "Hospital", the same meaning given to the term in section 197.020;
 - (3) "Procurement organization", the same meaning given to the term in section 194.210.
- 2. No hospital, physician, procurement organization, or other person shall consider the COVID-19 vaccination status of a potential organ transplant recipient or potential organ donor in any part of the organ transplant process including, but not limited to:
 - (1) The referral of a patient to be considered for a transplant;
 - (2) The evaluation of a patient for a transplant;
 - (3) The consideration of a patient for placement on a waiting list;
 - (4) A patient's particular position on a waiting list; and
 - (5) The evaluation of a potential donor to determine his or her suitability as an organ donor."; and

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

On motion of Representative Eggleston, **House Amendment No. 1 to House Amendment No. 4** was adopted.

On motion of Representative Griffith, **House Amendment No. 4, as amended**, was adopted.

Representative Patterson offered House Amendment No. 5.

House Amendment No. 5

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after all of said section and line the following:

- "191.500. As used in sections 191.500 to 191.550, unless the context clearly indicates otherwise, the following terms mean:
- (1) "Area of defined need", a community or section of an urban area of this state which is certified by the department of health and senior services as being in need of the services of a physician to improve the patient-doctor ratio in the area, to contribute professional physician services to an area of economic impact, or to contribute professional physician services to an area suffering from the effects of a natural disaster;

- (2) "Department", the department of health and senior services;
- (3) "Eligible student", a full-time student accepted and enrolled in a formal course of instruction at a participating school leading to a degree of doctor of medicine or doctor of osteopathy [at a participating school], including any such degree in the area of psychiatry; a degree of doctor of dental surgery; a degree of doctor of dental medicine; or a bachelor of science degree in dental hygiene;
- (4) "Financial assistance", an amount of money paid by the state of Missouri to a qualified applicant pursuant to sections 191.500 to 191.550;
 - (5) "Participating school"[-]:
 - (a) An institution of higher learning within this state which grants:
- a. The degrees of doctor of medicine or doctor of osteopathy, and which is accredited in the appropriate degree program by the American Medical Association [o+], the American Osteopathic Association, or the American Psychiatric Association; or
- b. The degree of doctor of dental surgery, the degree of doctor of dental medicine, or the bachelor of science degree in dental hygiene, and which is accredited in the appropriate degree program by the American Dental Association; and
 - (b) Applicable residency programs for each degree type and discipline;
 - (6) "Primary care"[,]:
- (a) General or family practice, internal medicine, pediatric, psychiatric, or obstetric and gynecological care as provided to the general public by physicians licensed and registered pursuant to chapter 334; and
- (b) Dental practice as provided to the general public by dentists or dental hygienists licensed under chapter 332;
- (7) "Resident", any natural person who has lived in this state for one or more years for any purpose other than the attending of an educational institution located within this state;
- (8) "Rural area", a town or community within this state which is not within a "standard metropolitan statistical area", and has a population of six thousand or fewer inhabitants as determined by the last preceding federal decennial census or any unincorporated area not within a standard metropolitan statistical area.
- 191.515. An eligible student may apply to the department for a loan under sections 191.500 to 191.550 only if, at the time of his **or her** application and throughout the period during which he **or she** receives the loan, he **or she is a resident of this state and** has been formally accepted as a student in a participating school in a course of study leading to the degree of doctor of medicine [or], doctor of osteopathy, [and is a resident of this state] doctor of dental surgery, or doctor of dental medicine or to the bachelor of science degree in dental hygiene.
- 191.520. No loan to any eligible student shall exceed [seven thousand five hundred] twenty-five thousand dollars for each academic year, which shall run from August first of any year through July thirty-first of the following year. All loans shall be made from funds appropriated to the medical school loan and loan repayment program fund created by section 191.600, by the general assembly.
- 191.525. No more than twenty-five loans shall be made to eligible students during the first academic year this program is in effect. Twenty-five new loans may be made for the next three academic years until a total of one hundred loans are available. At least one-half of the loans shall be made to students from rural areas as defined in section 191.500. An eligible student may receive loans for each academic year he or she is pursuing a course of study directly leading to a degree of doctor of medicine [ex], doctor of osteopathy, doctor of dental surgery, or doctor of dental medicine or to a bachelor of science degree in dental hygiene.
- 335.230. Financial assistance to any qualified applicant shall not exceed [five] ten thousand dollars for each academic year for a professional nursing program and shall not exceed [two thousand five hundred] five thousand dollars for each academic year for a practical nursing program. All financial assistance shall be made from funds credited to the professional and practical nursing student loan and nurse loan repayment fund. A qualified applicant may receive financial assistance for each academic year he or she remains a student in good standing at a participating school.
- 335.257. Successful applicants for whom loan payments are made under the provisions of sections 335.245 to 335.259 shall verify to the department twice each year[, in June and in December,] in the manner prescribed by the department that qualified employment in this state is being maintained."; and

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

Representative Cook offered House Amendment No. 1 to House Amendment No. 5.

House Amendment No. 1 to House Amendment No. 5

AMEND House Amendment No. 5 to House Bill No. 2331, Page 2, Line 38, by deleting all of said line and inserting in lieu thereof the following:

"being maintained.

338.010. 1. The "practice of pharmacy" means the interpretation, implementation, and evaluation of medical prescription orders, including any legend drugs under 21 U.S.C. Section 353; receipt, transmission, or handling of such orders or facilitating the dispensing of such orders; the designing, initiating, implementing, and monitoring of a medication therapeutic plan [as defined by the prescription order so long as the prescription order is specific to each patient for care by a pharmacist]; the compounding, dispensing, labeling, and administration of drugs and devices pursuant to medical prescription orders [and administration of viral influenza, pneumonia, shingles, hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, and meningitis vaccines by written protocolauthorized by a physician for persons at least seven years of age or the age recommended by the Centers for Disease Control and Prevention, whichever is higher, or the administration of pneumonia, shingles, hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, meningitis, and viral influenza vaccines by written protocol authorized by a physician for a specific patient as authorized by rule]; the ordering and administration of vaccines approved or authorized by the United States Food and Drug Administration, excluding vaccines for cholera, monkeypox, Japanese encephalitis, typhoid, rabies, yellow fever, tick-borne encephalitis, and anthrax, to persons at least seven years of age or the age recommended by the Centers for Disease Control and Prevention, whichever is older, pursuant to joint promulgation of rules established by the board of pharmacy and the state board of registration for the healing arts unless rules are established under a state of emergency as described in section 44.100; the participation in drug selection according to state law and participation in drug utilization reviews; the proper and safe storage of drugs and devices and the maintenance of proper records thereof; consultation with patients and other health care practitioners, and veterinarians and their clients about legend drugs, about the safe and effective use of drugs and devices; the prescribing and dispensing of any nicotine replacement therapy product under section 338.665; the dispensing of HIV postexposure prophylaxis pursuant to section 338.730; and the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management and control of a pharmacy. No person shall engage in the practice of pharmacy unless he or she is licensed under the provisions of this chapter. This chapter shall not be construed to prohibit the use of auxiliary personnel under the direct supervision of a pharmacist from assisting the pharmacist in any of his or her duties. This assistance in no way is intended to relieve the pharmacist from his or her responsibilities for compliance with this chapter and he or she will be responsible for the actions of the auxiliary personnel acting in his or her assistance. This chapter shall also not be construed to prohibit or interfere with any legally registered practitioner of medicine, dentistry, or podiatry, or veterinary medicine only for use in animals, or the practice of optometry in accordance with and as provided in sections 195.070 and 336.220 in the compounding, administering, prescribing, or dispensing of his or her own prescriptions.

- 2. [Any pharmacist who accepts a prescription order for a medication therapeutic plan shall have a writtenprotocol from the physician who refers the patient for medication therapy services.] A pharmacist with a
 certificate of medication therapeutic plan authority may provide medication therapy services pursuant to a
 statewide standing order issued by the department of health and senior services or pursuant to a written
 protocol with a physician licensed under chapter 334. The written protocol [and the prescription order for amedication therapeutic plan] authorized by this section shall come only from the physician [only] or similar body
 authorized by this section, and shall not come from a nurse engaged in a collaborative practice arrangement under
 section 334.104, or from a physician assistant engaged in a collaborative practice arrangement under section
 334.735.
- 3. Nothing in this section shall be construed as to prevent any person, firm or corporation from owning a pharmacy regulated by sections 338.210 to 338.315, provided that a licensed pharmacist is in charge of such pharmacy.
- 4. Nothing in this section shall be construed to apply to or interfere with the sale of nonprescription drugs and the ordinary household remedies and such drugs or medicines as are normally sold by those engaged in the sale of general merchandise.
- 5. No health carrier as defined in chapter 376 shall require any physician with which they contract to enter into a written protocol with a pharmacist for medication therapeutic services.

- 6. This section shall not be construed to allow a pharmacist to diagnose or independently prescribe pharmaceuticals.
- 7. The state board of registration for the healing arts, under section 334.125, and the state board of pharmacy, under section 338.140, shall jointly promulgate rules regulating the use of protocols [for prescription-orders] for medication therapy services [and administration of viral influenza vaccines]. Such rules shall require protocols to include provisions allowing for timely communication between the pharmacist and the [referring] protocol physician or similar body authorized by this section, and any other patient protection provisions deemed appropriate by both boards. In order to take effect, such rules shall be approved by a majority vote of a quorum of each board. Neither board shall separately promulgate rules regulating the use of protocols for [prescription ordersfor] medication therapy services[and administration of viral influenza vaccines]. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2007, shall be invalid and void.
- 8. The state board of pharmacy may grant a certificate of medication therapeutic plan authority to a licensed pharmacist who submits proof of successful completion of a board-approved course of academic clinical study beyond a bachelor of science in pharmacy, including but not limited to clinical assessment skills, from a nationally accredited college or university, or a certification of equivalence issued by a nationally recognized professional organization and approved by the board of pharmacy.
- 9. [Any pharmacist who has received a certificate of medication therapeutic plan authority may engage in the designing, initiating, implementing, and monitoring of a medication therapeutic plan as defined by a prescription order from a physician that is specific to each patient for care by a pharmacist.
- 10.] Nothing in this section shall be construed to allow a pharmacist to make a therapeutic substitution of a pharmaceutical prescribed by a physician unless authorized by the written protocol or the physician's prescription order.
- [11-] 10. "Veterinarian", "doctor of veterinary medicine", "practitioner of veterinary medicine", "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)", "VMB", "MRCVS", or an equivalent title means a person who has received a doctor's degree in veterinary medicine from an accredited school of veterinary medicine or holds an Educational Commission for Foreign Veterinary Graduates (EDFVG) certificate issued by the American Veterinary Medical Association (AVMA).
- [12. In addition to other requirements established by the joint promulgation of rules by the board of pharmacy and the state board of registration for the healing arts:
- (1) A pharmacist shall administer vaccines by protocol in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (CDC);
- (2) A pharmacist who is administering a vaccine shall request a patient to remain in the pharmacy a safeamount of time after administering the vaccine to observe any adverse reactions. Such pharmacist shall have adopted emergency treatment protocols;
- (3) 11. In addition to other requirements by the board, a pharmacist shall receive additional training as required by the board and evidenced by receiving a certificate from the board upon completion, and shall display the certification in his or her pharmacy where vaccines are delivered.
- [13.] 12. A pharmacist shall inform the patient that the administration of [the] a vaccine will be entered into the ShowMeVax system, as administered by the department of health and senior services. The patient shall attest to the inclusion of such information in the system by signing a form provided by the pharmacist. If the patient indicates that he or she does not want such information entered into the ShowMeVax system, the pharmacist shall provide a written report within fourteen days of administration of a vaccine to the patient's health care provider, if provided by the patient, containing:
 - (1) The identity of the patient;
 - (2) The identity of the vaccine or vaccines administered;
 - (3) The route of administration;
 - (4) The anatomic site of the administration;
 - (5) The dose administered; and
 - (6) The date of administration.

338.011. 1. A pharmacist licensed under this chapter may:

- (1) Order and administer medication approved or authorized by the United States Food and Drug Administration to address a public health need, as lawfully authorized by the state or federal government, or a department or agency thereof, during a state or federally declared public health emergency; and
- (2) Administer medication pursuant to a statewide standing order issued by the director of the department of health and senior services if a licensed physician, or a licensed physician approved and designated by the department of health and senior services, to address a public health need.
- 2. The board of pharmacy may promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2022, shall be invalid and void.
 - 338.165. 1. As used in this section, the following terms mean:
 - (1) "Board", the Missouri board of pharmacy;
 - (2) "Hospital", a hospital as defined in section 197.020;
- (3) "Hospital clinic or facility", a clinic or facility under the common control, management, or ownership of the same hospital or hospital system;
- (4) "Medical staff committee", the committee or other body of a hospital or hospital system responsible for formulating policies regarding pharmacy services and medication management;
 - (5) "Medication order", an order for a legend drug or device that is:
- (a) Authorized or issued by an authorized prescriber acting within the scope of his or her professional practice or pursuant to a protocol or standing order approved by the medical staff committee; and
- (b) To be distributed or administered to the patient by a health care practitioner or lawfully authorized designee at a hospital or a hospital clinic or facility;
- (6) "Patient", an individual receiving medical diagnosis, treatment or care at a hospital or a hospital clinic or facility.
- 2. The department of health and senior services shall have sole authority and responsibility for the inspection and licensure of hospitals as provided by chapter 197 including, but not limited to all parts, services, functions, support functions and activities which contribute directly or indirectly to patient care of any kind whatsoever. However, the board may inspect a class B pharmacy or any portion thereof that is not under the inspection authority vested in the department of health and senior services by chapter 197 to determine compliance with this chapter or the rules of the board. This section shall not be construed to bar the board from conducting an investigation pursuant to a public or governmental complaint to determine compliance by an individual licensee or registrant of the board with any applicable provisions of this chapter or the rules of the board.
- 3. The department of health and senior services shall have authority to promulgate rules in conjunction with the board governing medication distribution and the provision of medication therapy services by a pharmacist at or within a hospital. Rules may include, but are not limited to, medication management, preparation, compounding, administration, storage, distribution, packaging and labeling. Until such rules are jointly promulgated, hospitals shall comply with all applicable state law and department of health and senior services rules governing pharmacy services and medication management in hospitals. The rulemaking authority granted herein to the department of health and senior services shall not include the dispensing of medication by prescription.
- 4. All pharmacists providing medication therapy services shall obtain a certificate of medication therapeutic plan authority as provided by rule of the board. Medication therapy services may be provided by a pharmacist for patients of a hospital pursuant to a statewide standing order issued by the department of health and senior services, pursuant to a protocol with a physician as required by section 338.010, or pursuant to a protocol approved by the medical staff committee. However, the medical staff protocol shall include a process whereby an exemption to the protocol for a patient may be granted for clinical efficacy should the patient's physician make such request. The medical staff protocol shall also include an appeals process to request a change in a specific protocol based on medical evidence presented by a physician on staff.
- 5. Medication may be dispensed by a class B hospital pharmacy pursuant to a prescription or a medication order.
- 6. A drug distributor license shall not be required to transfer medication from a class B hospital pharmacy to a hospital clinic or facility for patient care or treatment.

- 7. Medication dispensed by a class A pharmacy located in a hospital to a hospital patient for use or administration outside of the hospital under a medical staff-approved protocol for medication therapy shall be dispensed only by a prescription order for medication therapy from an individual physician for a specific patient.
- 8. Medication dispensed by a hospital to a hospital patient for use or administration outside of the hospital shall be labeled as provided by rules jointly promulgated by the department of health and senior services and the board including medication distributed for administration by or under the supervision of a health care practitioner at a hospital clinic or facility.
 - 9. This section shall not be construed to preempt any law or rule governing controlled substances.
- 10. Any rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall only become effective if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.
- 11. The board shall appoint an advisory committee to review and make recommendations to the board on the merit of all rules and regulations to be jointly promulgated by the board and the department of health and senior services pursuant to the joint rulemaking authority granted by this section. The advisory committee shall consist of:
 - (1) Two representatives designated by the Missouri Hospital Association, one of whom shall be a pharmacist;
 - (2) One pharmacist designated by the Missouri Society of Health System Pharmacists;
 - (3) One pharmacist designated by the Missouri Pharmacy Association;
- (4) One pharmacist designated by the department of health and senior services from a hospital with a licensed bed count that does not exceed fifty beds or from a critical access hospital as defined by the department of social services for purposes of MO HealthNet reimbursement;
- (5) One pharmacist designated by the department of health and senior services from a hospital with a licensed bed count that exceeds two hundred beds; and
 - (6) One pharmacist designated by the board with experience in the provision of hospital pharmacy services.
- 12. Nothing in this section shall be construed to limit the authority of a licensed health care provider to prescribe, administer, or dispense medications and treatments within the scope of their professional practice."; and"; and

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

Representative Plocher moved the previous question.

Which motion was adopted by the following vote:

AYES: 082

Andrews	Atchison	Bailey	Baker	Basye
Billington	Black 137	Black 7	Bromley	Brown 16
Buchheit-Courtway	Burger	Busick	Coleman 97	Cook
Copeland	Davidson	Davis	Deaton	DeGroot
Dinkins	Eggleston	Evans	Falkner	Fishel
Fitzwater	Francis	Gregory 51	Griffith	Haden
Haffner	Haley	Hardwick	Hudson	Hurlbert
Kalberloh	Kelley 127	Kelly 141	Lewis 6	Lovasco
Mayhew	McGaugh	McGirl	Murphy	O'Donnell
Owen	Patterson	Perkins	Pike	Plocher
Pollitt 52	Pollock 123	Porter	Pouche	Railsback
Reedy	Richey	Riggs	Riley	Rone
Sander	Schroer	Schwadron	Seitz	Sharpe 4
Shaul	Shields	Simmons	Stacy	Stephens 128
Tate	Taylor 139	Taylor 48	Thomas	Thompson
Toalson Reisch	Van Schoiack	Veit	Walsh 50	West
Wiemann	Mr. Speaker			

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NOES: 037

Adams	Anderson	Appelbaum	Aune	Bangert
Baringer	Barnes	Bosley	Brown 27	Brown 70
Burnett	Butz	Clemens	Ellebracht	Fogle
Gray	Gunby	Johnson	McCreery	Mosley
Nurrenbern	Person	Phifer	Price IV	Proudie
Quade	Rogers	Sauls	Sharp 36	Smith 45
Terry	Turnbaugh	Unsicker	Walsh Moore 93	Weber
Windham	Young			

PRESENT: 000

ABSENT WITH LEAVE: 038

Aldridge	Bland Manlove	Boggs	Burton	Chipman
Christofanelli	Coleman 32	Collins	Cupps	Derges
Dogan	Doll	Gregory 96	Grier	Henderson
Hicks	Houx	Hovis	Ingle	Kidd
Knight	Lewis 25	Mackey	McDaniel	Merideth
Morse	Pietzman	Roberts	Roden	Rowland
Sassmann	Schnelting	Smith 155	Smith 163	Smith 67
Stevens 46	Trent	Wright		

VACANCIES: 006

On motion of Representative Cook, **House Amendment No. 1 to House Amendment No. 5** was adopted.

Representative Hudson assumed the Chair.

Representative Walsh Moore (93) offered **House Amendment No. 2 to House Amendment No. 5**.

House Amendment No. 2 to House Amendment No. 5

AMEND House Amendment No. 5 to House Bill No. 2331, Page 2, Line 38, by deleting all of said line and inserting in lieu thereof the following:

"being maintained.

338.010. 1. The "practice of pharmacy" means the interpretation, implementation, and evaluation of medical prescription orders, including any legend drugs under 21 U.S.C. Section 353; receipt, transmission, or handling of such orders or facilitating the dispensing of such orders; the designing, initiating, implementing, and monitoring of a medication therapeutic plan as defined by the prescription order so long as the prescription order is specific to each patient for care by a pharmacist; the compounding, dispensing, labeling, and administration of drugs and devices pursuant to medical prescription orders and administration of viral influenza, pneumonia, shingles, hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, and meningitis vaccines by written protocol authorized by a physician for persons at least seven years of age or the age recommended by the Centers for Disease Control and Prevention, whichever is higher, or the administration of pneumonia, shingles, hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, meningitis, and viral influenza vaccines by written protocol authorized by a physician for a specific patient as authorized by rule; the participation in drug selection according to state law and participation in drug utilization reviews; the proper and safe storage of drugs and devices and the maintenance of proper records thereof; consultation with patients and other health care practitioners, and veterinarians and their clients about legend drugs, about the safe and effective use of drugs and devices; the prescribing and dispensing of any nicotine

replacement therapy product under section 338.665; the dispensing of HIV postexposure prophylaxis pursuant to section 338.730; the dispensing of an emergency supply of a chronic maintenance drug under section 338.740; and the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management and control of a pharmacy. No person shall engage in the practice of pharmacy unless he or she is licensed under the provisions of this chapter. This chapter shall not be construed to prohibit the use of auxiliary personnel under the direct supervision of a pharmacist from assisting the pharmacist in any of his or her duties. This assistance in no way is intended to relieve the pharmacist from his or her responsibilities for compliance with this chapter and he or she will be responsible for the actions of the auxiliary personnel acting in his or her assistance. This chapter shall also not be construed to prohibit or interfere with any legally registered practitioner of medicine, dentistry, or podiatry, or veterinary medicine only for use in animals, or the practice of optometry in accordance with and as provided in sections 195.070 and 336.220 in the compounding, administering, prescribing, or dispensing of his or her own prescriptions.

- 2. Any pharmacist who accepts a prescription order for a medication therapeutic plan shall have a written protocol from the physician who refers the patient for medication therapy services. The written protocol and the prescription order for a medication therapeutic plan shall come from the physician only, and shall not come from a nurse engaged in a collaborative practice arrangement under section 334.104, or from a physician assistant engaged in a collaborative practice arrangement under section 334.735.
- 3. Nothing in this section shall be construed as to prevent any person, firm or corporation from owning a pharmacy regulated by sections 338.210 to 338.315, provided that a licensed pharmacist is in charge of such pharmacy.
- 4. Nothing in this section shall be construed to apply to or interfere with the sale of nonprescription drugs and the ordinary household remedies and such drugs or medicines as are normally sold by those engaged in the sale of general merchandise.
- 5. No health carrier as defined in chapter 376 shall require any physician with which they contract to enter into a written protocol with a pharmacist for medication therapeutic services.
- 6. This section shall not be construed to allow a pharmacist to diagnose or independently prescribe pharmaceuticals except to the extent described under section 338.740.
- 7. The state board of registration for the healing arts, under section 334.125, and the state board of pharmacy, under section 338.140, shall jointly promulgate rules regulating the use of protocols for prescription orders for medication therapy services and administration of viral influenza vaccines. Such rules shall require protocols to include provisions allowing for timely communication between the pharmacist and the referring physician, and any other patient protection provisions deemed appropriate by both boards. In order to take effect, such rules shall be approved by a majority vote of a quorum of each board. Neither board shall separately promulgate rules regulating the use of protocols for prescription orders for medication therapy services and administration of viral influenza vaccines. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2007, shall be invalid and void.
- 8. The state board of pharmacy may grant a certificate of medication therapeutic plan authority to a licensed pharmacist who submits proof of successful completion of a board-approved course of academic clinical study beyond a bachelor of science in pharmacy, including but not limited to clinical assessment skills, from a nationally accredited college or university, or a certification of equivalence issued by a nationally recognized professional organization and approved by the board of pharmacy.
- 9. Any pharmacist who has received a certificate of medication therapeutic plan authority may engage in the designing, initiating, implementing, and monitoring of a medication therapeutic plan as defined by a prescription order from a physician that is specific to each patient for care by a pharmacist.
- 10. Nothing in this section shall be construed to allow a pharmacist to make a therapeutic substitution of a pharmaceutical prescribed by a physician unless authorized by the written protocol or the physician's prescription order.
- 11. "Veterinarian", "doctor of veterinary medicine", "practitioner of veterinary medicine", "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)", "VMB", "MRCVS", or an equivalent title means a person who has received a doctor's degree in veterinary medicine from an accredited school of veterinary medicine or holds an Educational Commission for Foreign Veterinary Graduates (EDFVG) certificate issued by the American Veterinary Medical Association (AVMA).

- 12. In addition to other requirements established by the joint promulgation of rules by the board of pharmacy and the state board of registration for the healing arts:
- (1) A pharmacist shall administer vaccines by protocol in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (CDC);
- (2) A pharmacist who is administering a vaccine shall request a patient to remain in the pharmacy a safe amount of time after administering the vaccine to observe any adverse reactions. Such pharmacist shall have adopted emergency treatment protocols;
- (3) In addition to other requirements by the board, a pharmacist shall receive additional training as required by the board and evidenced by receiving a certificate from the board upon completion, and shall display the certification in his or her pharmacy where vaccines are delivered.
- 13. A pharmacist shall inform the patient that the administration of the vaccine will be entered into the ShowMeVax system, as administered by the department of health and senior services. The patient shall attest to the inclusion of such information in the system by signing a form provided by the pharmacist. If the patient indicates that he or she does not want such information entered into the ShowMeVax system, the pharmacist shall provide a written report within fourteen days of administration of a vaccine to the patient's health care provider, if provided by the patient, containing:
 - (1) The identity of the patient;
 - (2) The identity of the vaccine or vaccines administered;
 - (3) The route of administration;
 - (4) The anatomic site of the administration;
 - (5) The dose administered; and
 - (6) The date of administration.
 - 338.740. 1. For purposes of this section, the term "chronic maintenance drug" means a drug that:
- (1) Is not an opioid or a controlled substance that is prohibited from being dispensed without a prescription under the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. Section 301 et seq., as amended; and
- (2) Is prescribed to a patient to take on a recurring basis or is used as a lifesaving rescue drug for a chronic condition.
- 2. Notwithstanding any other provision of law, a pharmacist may dispense an emergency supply of a chronic maintenance drug to a patient without a current, valid prescription if:
- (1) The pharmacist makes every reasonable attempt but is unable to obtain authorization to refill the prescription from the prescribing health care provider or another health care provider responsible for the patient's care;
 - (2) Either:
- (a) The pharmacist has a record of a prescription at the pharmacy or has been presented proof of a recent prescription for the chronic maintenance drug in the name of the patient who is requesting the emergency supply; or
- (b) In the pharmacist's professional judgment, the refusal to dispense an emergency supply of the chronic maintenance drug will endanger the patient's health or disrupt essential drug therapy for a chronic condition of the patient;
- (3) The amount of the chronic maintenance drug dispensed does not exceed the amount of the most recent prescription or the standard quantity or unit-of-use package of the drug;
- (4) The pharmacist has not dispensed an emergency supply of the chronic maintenance drug to the same patient in the previous twelve-month period; and
 - (5) The prescriber of the drug has not indicated that no emergency refills are authorized.
- 3. A pharmacist, the pharmacist's employer, and the original prescriber of the drug are not civilly liable for an act or omission in connection with the dispensing of a chronic maintenance drug under this section unless the act or omission constitutes negligence, recklessness, or willful or wanton misconduct.
- 4. The board of pharmacy shall adopt rules, in consultation with the state board of registration for the healing arts and the state board of nursing, to establish standard procedures for pharmacists to follow in dispensing chronic maintenance drugs under this section. The rules adopted shall include documentation requirements for a pharmacist to complete when dispensing a chronic maintenance drug without a current prescription. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the

effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2022, shall be invalid and void."; and"; and

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

Representative Plocher moved the previous question.

Which motion was adopted by the following vote:

AYES: 091

Andrews	Atchison	Bailey	Baker	Basye
Billington	Black 137	Black 7	Bromley	Brown 16
Buchheit-Courtway	Burger	Busick	Chipman	Coleman 97
Cook	Copeland	Davidson	Davis	Deaton
DeGroot	Dinkins	Eggleston	Evans	Falkner
Fitzwater	Francis	Gregory 51	Gregory 96	Griffith
Haden	Haffner	Haley	Hardwick	Henderson
Houx	Hovis	Hudson	Hurlbert	Kalberloh
Kelley 127	Kelly 141	Knight	Lewis 6	Lovasco
Mayhew	McGaugh	McGirl	Morse	Murphy
O'Donnell	Owen	Patterson	Perkins	Pike
Plocher	Pollitt 52	Pollock 123	Porter	Pouche
Railsback	Reedy	Richey	Riggs	Riley
Rone	Sander	Schroer	Schwadron	Seitz
Sharpe 4	Shaul	Shields	Simmons	Smith 163
Stacy	Stephens 128	Tate	Taylor 139	Taylor 48
Thomas	Thompson	Toalson Reisch	Trent	Van Schoiack
Veit	Walsh 50	West	Wiemann	Wright
Mr. Speaker				

NOES: 041

Adams	Aldridge	Anderson	Appelbaum	Aune
	Ü		**	
Bangert	Baringer	Barnes	Bosley	Brown 27
Brown 70	Burnett	Burton	Butz	Clemens
Collins	Ellebracht	Fogle	Gray	Gunby
Johnson	McCreery	Mosley	Nurrenbern	Person
Phifer	Price IV	Proudie	Quade	Rogers
Sauls	Sharp 36	Smith 45	Smith 67	Terry
Turnbaugh	Unsicker	Walsh Moore 93	Weber	Windham
Voung				

Young

PRESENT: 000

ABSENT WITH LEAVE: 025

Bland Manlove	Boggs	Christofanelli	Coleman 32	Cupps
Derges	Dogan	Doll	Fishel	Grier
Hicks	Ingle	Kidd	Lewis 25	Mackey
McDaniel	Merideth	Pietzman	Roberts	Roden
Rowland	Sassmann	Schnelting	Smith 155	Stevens 46

VACANCIES: 006

Representative Walsh Moore (93) moved that **House Amendment No. 2 to House Amendment No. 5** be adopted.

Which motion was defeated.

On motion of Representative Patterson, **House Amendment No. 5**, as amended, was adopted.

Representative Schroer offered House Amendment No. 6.

House Amendment No. 6

AMEND House Bill No. 2331, Page 1, Section A, Line 2, by inserting after all of said section and line the following:

"197.400. As used in sections 197.400 to 197.475, unless the context otherwise requires, the following terms mean:

- (1) "Advanced practice registered nurse", the same meaning given to the term in section 335.016;
- (2) "Council", the home health services advisory council created by sections 197.400 to 197.475;
- [(2)] (3) "Department", the department of health and senior services;
- [(3)] (4) "Home health agency", a public agency or private organization or a subdivision or subunit of an agency or organization that provides two or more home health services at the residence of a patient according to a [physician's] written [and signed] plan of treatment signed by a physician, advanced practice registered nurse, or physician assistant;
- [(4)] (5) "Home health services", any of the following items and services provided at the residence of the patient on a part-time or intermittent basis: nursing, physical therapy, speech therapy, occupational therapy, home health aid, or medical social service;
- [(5)] (6) "Part-time or intermittent basis", the providing of home health services in an interrupted interval sequence on the average of not to exceed three hours in any twenty-four-hour period;
- [(6)] (7) "Patient's residence", the actual place of residence of the person receiving home health services, including institutional residences as well as individual dwelling units;
- [(7)] (8) "Physician", a person licensed by the state board of registration for the healing arts pursuant to the provisions of chapter 334 to practice in this state as a physician and surgeon;
- [(8)] (9) "Physician assistant", a person licensed by the state board of registration for the healing arts under the provisions of chapter 334 to practice in this state as a physician assistant;
- (10) "Plan of treatment", a plan reviewed and signed as often as medically necessary by a physician [or], podiatrist, advanced practice registered nurse, or physician assistant, not to exceed sixty days in duration, prescribing items and services for an individual patient's condition;
- [(9)] (11) "Podiatrist", a person licensed by the state board of podiatry pursuant to the provisions of chapter 330 to practice in this state as a podiatrist;
- [(10)] (12) "Subunit" or "subdivision", any organizational unit of a larger organization which can be clearly defined as a separate entity within the larger structure, which can meet all of the requirements of sections 197.400 to 197.475 independent of the larger organization, which can be held accountable for the care of patients it is serving, and which provides to all patients care and services meeting the standards and requirements of sections 197.400 to 197.475.
- 197.405. No home health agency, including Medicare and Medicaid providers, shall provide two or more of the home health services covered by subdivision [(4)] (5) of section 197.400 or shall hold itself out as providing such home health services or as a home health agency unless it is licensed and registered in accordance with the provisions of sections 197.400 to 197.475.
- 197.445. 1. The department may adopt reasonable rules and standards necessary to carry out the provisions of sections 197.400 to 197.477. The rules and standards adopted shall not be less than the standards established by the federal government for home health agencies under Title XVIII of the Federal Social Security Act. The reasonable rules and standards shall be initially promulgated within one year of September 28, 1983.

- 2. The rules and standards adopted by the department pursuant to the provisions of sections 197.400 to 197.477 shall apply to all health services covered by sections 197.400 to 197.477 rendered to any patient being served by a home health agency regardless of source of payment for the service, patient's condition, or place of residence, at which the home health services are ordered by the physician [er], podiatrist, advanced practice registered nurse, or physician assistant. No rule or portion of a rule promulgated pursuant to the authority of sections 197.400 to 197.477 shall become effective unless it has been promulgated pursuant to the provisions of section 536.024.
- 334.104. 1. A physician may enter into collaborative practice arrangements with registered professional nurses. Collaborative practice arrangements shall be in the form of written agreements, jointly agreed-upon protocols, or standing orders for the delivery of health care services. Collaborative practice arrangements, which shall be in writing, may delegate to a registered professional nurse the authority to administer or dispense drugs and provide treatment as long as the delivery of such health care services is within the scope of practice of the registered professional nurse and is consistent with that nurse's skill, training and competence.
- 2. Collaborative practice arrangements, which shall be in writing, may delegate to a registered professional nurse the authority to administer, dispense or prescribe drugs and provide treatment if the registered professional nurse is an advanced practice registered nurse as defined in subdivision (2) of section 335.016. Collaborative practice arrangements may delegate to an advanced practice registered nurse, as defined in section 335.016, the authority to administer, dispense, or prescribe controlled substances listed in Schedules III, IV, and V of section 195.017, and Schedule II hydrocodone; except that, the collaborative practice arrangement shall not delegate the authority to administer any controlled substances listed in Schedules III, IV, and V of section 195.017, or Schedule II hydrocodone for the purpose of inducing sedation or general anesthesia for therapeutic, diagnostic, or surgical procedures. Schedule III narcotic controlled substance and Schedule II hydrocodone prescriptions shall be limited to a one hundred twenty-hour supply without refill. Such collaborative practice arrangements shall be in the form of written agreements, jointly agreed-upon protocols or standing orders for the delivery of health care services. An advanced practice registered nurse may prescribe buprenorphine for up to a thirty-day supply without refill for patients receiving medication-assisted treatment for substance use disorders under the direction of the collaborating physician.
 - 3. The written collaborative practice arrangement shall contain at least the following provisions:
- (1) Complete names, home and business addresses, zip codes, and telephone numbers of the collaborating physician and the advanced practice registered nurse;
- (2) A list of all other offices or locations besides those listed in subdivision (1) of this subsection where the collaborating physician authorized the advanced practice registered nurse to prescribe;
- (3) A requirement that there shall be posted at every office where the advanced practice registered nurse is authorized to prescribe, in collaboration with a physician, a prominently displayed disclosure statement informing patients that they may be seen by an advanced practice registered nurse and have the right to see the collaborating physician:
- (4) All specialty or board certifications of the collaborating physician and all certifications of the advanced practice registered nurse;
- (5) The manner of collaboration between the collaborating physician and the advanced practice registered nurse, including how the collaborating physician and the advanced practice registered nurse will:
- (a) Engage in collaborative practice consistent with each professional's skill, training, education, and competence; and
- (b) [Maintain geographic proximity, except the collaborative practice arrangement may allow for geographic proximity to be waived for a maximum of twenty eight days per calendar year for rural health clinics as defined by P.L. 95-210, as long as the collaborative practice arrangement includes alternative plans as required in paragraph (c) of this subdivision. This exception to geographic proximity shall apply only to independent rural health clinics, provider based rural health clinics where the provider is a critical access hospital as provided in 42-U.S.C. Section 1395i 4, and provider based rural health clinics where the main location of the hospital sponsor is greater than fifty miles from the clinic. The collaborating physician is required to maintain documentation related to this requirement and to present it to the state board of registration for the healing arts when requested; and
 - (e) Provide coverage during absence, incapacity, infirmity, or emergency by the collaborating physician;
- (6) A description of the advanced practice registered nurse's controlled substance prescriptive authority in collaboration with the physician, including a list of the controlled substances the physician authorizes the nurse to prescribe and documentation that it is consistent with each professional's education, knowledge, skill, and competence;

- (7) A list of all other written practice agreements of the collaborating physician and the advanced practice registered nurse;
- (8) The duration of the written practice agreement between the collaborating physician and the advanced practice registered nurse;
- (9) A description of the time and manner of the collaborating physician's review of the advanced practice registered nurse's delivery of health care services. The description shall include provisions that the advanced practice registered nurse shall submit a minimum of ten percent of the charts documenting the advanced practice registered nurse's delivery of health care services to the collaborating physician for review by the collaborating physician, or any other physician designated in the collaborative practice arrangement, every fourteen days; and
- (10) The collaborating physician, or any other physician designated in the collaborative practice arrangement, shall review every fourteen days a minimum of twenty percent of the charts in which the advanced practice registered nurse prescribes controlled substances. The charts reviewed under this subdivision may be counted in the number of charts required to be reviewed under subdivision (9) of this subsection.
- 4. The state board of registration for the healing arts pursuant to section 334.125 and the board of nursing pursuant to section 335.036 may jointly promulgate rules regulating the use of collaborative practice arrangements. Such rules shall be limited to [specifying geographic areas to be covered,] the methods of treatment that may be covered by collaborative practice arrangements and the requirements for review of services provided pursuant to collaborative practice arrangements including delegating authority to prescribe controlled substances. Any rules relating to dispensing or distribution of medications or devices by prescription or prescription drug orders under this section shall be subject to the approval of the state board of pharmacy. Any rules relating to dispensing or distribution of controlled substances by prescription or prescription drug orders under this section shall be subject to the approval of the department of health and senior services and the state board of pharmacy. In order to take effect, such rules shall be approved by a majority vote of a quorum of each board. Neither the state board of registration for the healing arts nor the board of nursing may separately promulgate rules relating to collaborative practice arrangements. Such jointly promulgated rules shall be consistent with guidelines for federally funded clinics. The rulemaking authority granted in this subsection shall not extend to collaborative practice arrangements of hospital employees providing inpatient care within hospitals as defined pursuant to chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.
- 5. The state board of registration for the healing arts shall not deny, revoke, suspend or otherwise take disciplinary action against a physician for health care services delegated to a registered professional nurse provided the provisions of this section and the rules promulgated thereunder are satisfied. Upon the written request of a physician subject to a disciplinary action imposed as a result of an agreement between a physician and a registered professional nurse or registered physician assistant, whether written or not, prior to August 28, 1993, all records of such disciplinary licensure action and all records pertaining to the filing, investigation or review of an alleged violation of this chapter incurred as a result of such an agreement shall be removed from the records of the state board of registration for the healing arts and the division of professional registration and shall not be disclosed to any public or private entity seeking such information from the board or the division. The state board of registration for the healing arts shall take action to correct reports of alleged violations and disciplinary actions as described in this section which have been submitted to the National Practitioner Data Bank. In subsequent applications or representations relating to his **or her** medical practice, a physician completing forms or documents shall not be required to report any actions of the state board of registration for the healing arts for which the records are subject to removal under this section.
- 6. Within thirty days of any change and on each renewal, the state board of registration for the healing arts shall require every physician to identify whether the physician is engaged in any collaborative practice agreement, including collaborative practice agreements delegating the authority to prescribe controlled substances, or physician assistant agreement and also report to the board the name of each licensed professional with whom the physician has entered into such agreement. The board may make this information available to the public. The board shall track the reported information and may routinely conduct random reviews of such agreements to ensure that agreements are carried out for compliance under this chapter.
- 7. Notwithstanding any law to the contrary, a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016 shall be permitted to provide anesthesia services without a collaborative practice arrangement provided that he or she is under the supervision of an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if needed. Nothing in this subsection shall be construed to prohibit or prevent a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016 from entering into a collaborative practice arrangement under this section, except that the collaborative practice arrangement may not delegate the authority to prescribe any controlled substances listed in Schedules III, IV, and V of section 195.017, or Schedule II hydrocodone.

- 8. A collaborating physician shall not enter into a collaborative practice arrangement with more than six full-time equivalent advanced practice registered nurses, full-time equivalent licensed physician assistants, or full-time equivalent assistant physicians, or any combination thereof. This limitation shall not apply to collaborative arrangements of hospital employees providing inpatient care service in hospitals as defined in chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008, or to a certified registered nurse anesthetist providing anesthesia services under the supervision of an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if needed as set out in subsection 7 of this section.
- 9. It is the responsibility of the collaborating physician to determine and document the completion of at least a one-month period of time during which the advanced practice registered nurse shall practice with the collaborating physician continuously present before practicing in a setting where the collaborating physician is not continuously present. This limitation shall not apply to collaborative arrangements of providers of population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.
- 10. No agreement made under this section shall supersede current hospital licensing regulations governing hospital medication orders under protocols or standing orders for the purpose of delivering inpatient or emergency care within a hospital as defined in section 197.020 if such protocols or standing orders have been approved by the hospital's medical staff and pharmaceutical therapeutics committee.
- 11. No contract or other agreement shall require a physician to act as a collaborating physician for an advanced practice registered nurse against the physician's will. A physician shall have the right to refuse to act as a collaborating physician, without penalty, for a particular advanced practice registered nurse. No contract or other agreement shall limit the collaborating physician's ultimate authority over any protocols or standing orders or in the delegation of the physician's authority to any advanced practice registered nurse, but this requirement shall not authorize a physician in implementing such protocols, standing orders, or delegation to violate applicable standards for safe medical practice established by hospital's medical staff.
- 12. No contract or other agreement shall require any advanced practice registered nurse to serve as a collaborating advanced practice registered nurse for any collaborating physician against the advanced practice registered nurse's will. An advanced practice registered nurse shall have the right to refuse to collaborate, without penalty, with a particular physician.
 - 335.011. Sections 335.011 to [335.096] 335.099 may be known as "The Nursing Practice Act".
- 335.016. As used in this chapter, unless the context clearly requires otherwise, the following words and terms mean:
- (1) "Accredited", the official authorization or status granted by an agency for a program through a voluntary process;
- (2) "Advanced practice registered nurse" or "APRN", a [nurse who has education beyond the basic-nursing education and is certified by a nationally recognized professional organization as a certified nurse-practitioner, certified nurse midwife, certified registered nurse anesthetist, or a certified clinical nurse specialist.

 The board shall promulgate rules specifying which nationally recognized professional organization certifications are to be recognized for the purposes of this section. Advanced practice nurses and only such individuals may use the title "Advanced Practice Registered Nurse" and the abbreviation "APRN"] person who is licensed under the provisions of this chapter to engage in the practice of advanced practice nursing as a certified clinical nurse specialist, certified nurse midwife, certified nurse practitioner, or certified registered nurse anesthetist;
- (3) "Approval", official recognition of nursing education programs which meet standards established by the board of nursing;
 - (4) "Board" or "state board", the state board of nursing;
- (5) "Certified clinical nurse specialist", a registered nurse who is currently certified as a clinical nurse specialist by a nationally recognized certifying board approved by the board of nursing;
- (6) "Certified nurse midwife", a registered nurse who is currently certified as a nurse midwife by the American [College of Nurse Midwives] Midwifery Certification Board, or other nationally recognized certifying body approved by the board of nursing;
- (7) "Certified nurse practitioner", a registered nurse who is currently certified as a nurse practitioner by a nationally recognized certifying body approved by the board of nursing;
- (8) "Certified registered nurse anesthetist", a registered nurse who is currently certified as a nurse anesthetist by the Council on Certification of Nurse Anesthetists, the [Council on Recertification of Nurse Anesthetists] National Board of Certification and Recertification for Nurse Anesthetists, or other nationally recognized certifying body approved by the board of nursing;

- (9) "Executive [director] officer", a qualified individual employed by the board as executive secretary or otherwise to administer the provisions of this chapter under the board's direction. Such person employed as executive [director] officer shall not be a member of the board;
 - (10) "Inactive [nurse] license status", as defined by rule pursuant to section 335.061;
 - (11) "Lapsed license status", as defined by rule under section 335.061;
- (12) "Licensed practical nurse" or "practical nurse", a person licensed pursuant to the provisions of this chapter to engage in the practice of practical nursing;
- (13) "Licensure", the issuing of a license [to practice professional or practical nursing] to candidates who have met the [specified] requirements specified under this chapter authorizing the person to engage in the practice of advanced practice, professional, or practical nursing and the recording of the names of those persons as holders of a license to practice advanced practice, professional, or practical nursing;
- (14) "Practice of advanced practice nursing", the performance for compensation of activities and services consistent with the required education, training, certification, demonstrated competencies, and experiences of an advanced practice registered nurse;
- (15) "Practice of practical nursing", the performance for compensation of selected acts for the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in normal health processes. Such performance requires substantial specialized skill, judgment and knowledge. All such nursing care shall be given under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse. For the purposes of this chapter, the term "direction" shall mean guidance or supervision provided by a person licensed by a state regulatory board to prescribe medications and treatments or a registered professional nurse, including, but not limited to, oral, written, or otherwise communicated orders or directives for patient care. When practical nursing care is delivered pursuant to the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse, such care may be delivered by a licensed practical nurse without direct physical oversight;
- [(15)] (16) "Practice of professional nursing", the performance for compensation of any act or action which requires substantial specialized education, judgment and skill based on knowledge and application of principles derived from the biological, physical, social, behavioral, and nursing sciences, including, but not limited to:
- (a) Responsibility for the **promotion and** teaching of health care and the prevention of illness to the patient and his or her family;
- (b) Assessment, **data collection**, nursing diagnosis, nursing care, **evaluation**, and counsel of persons who are ill, injured, or experiencing alterations in normal health processes;
- (c) The administration of medications and treatments as prescribed by a person licensed by a state regulatory board to prescribe medications and treatments;
- (d) The coordination and assistance in the **determination and** delivery of a plan of health care with all members of a health team;
 - (e) The teaching and supervision of other persons in the performance of any of the foregoing;
- [(16) A] (17) "Registered professional nurse" or "registered nurse", a person licensed pursuant to the provisions of this chapter to engage in the practice of professional nursing;
- [(17)] (18) "Retired license status", any person licensed in this state under this chapter who retires from such practice. Such person shall file with the board an affidavit, on a form to be furnished by the board, which states the date on which the licensee retired from such practice, an intent to retire from the practice for at least two years, and such other facts as tend to verify the retirement as the board may deem necessary; but if the licensee thereafter reengages in the practice, the licensee shall renew his or her license with the board as provided by this chapter and by rule and regulation.
 - 335.036. 1. The board shall:
- (1) Elect for a one-year term a president and a secretary, who shall also be treasurer, and the board may appoint, employ and fix the compensation of a legal counsel and such board personnel as defined in subdivision (4) of subsection 11 of section 324.001 as are necessary to administer the provisions of sections 335.011 to [335.096] 335.099;
- (2) Adopt and revise such rules and regulations as may be necessary to enable it to carry into effect the provisions of sections 335.011 to [335.096] 335.099;
- (3) Prescribe minimum standards for educational programs preparing persons for licensure pursuant to the provisions of sections 335.011 to [335.096] 335.099;
- (4) Provide for surveys of such programs every five years and in addition at such times as it may deem necessary;

- (5) Designate as "approved" such programs as meet the requirements of sections 335.011 to [335.096] 335.099 and the rules and regulations enacted pursuant to such sections; and the board shall annually publish a list of such programs;
 - (6) Deny or withdraw approval from educational programs for failure to meet prescribed minimum standards;
 - (7) Examine, license, and cause to be renewed the licenses of duly qualified applicants;
- (8) Cause the prosecution of all persons violating provisions of sections 335.011 to [335.096] 335.099, and may incur such necessary expenses therefor;
- (9) Keep a record of all the proceedings; and make an annual report to the governor and to the director of the department of commerce and insurance.
- 2. The board shall set the amount of the fees which this chapter authorizes and requires by rules and regulations. The fees shall be set at a level to produce revenue which shall not substantially exceed the cost and expense of administering this chapter.
- 3. All fees received by the board pursuant to the provisions of sections 335.011 to [335.096] 335.099 shall be deposited in the state treasury and be placed to the credit of the state board of nursing fund. All administrative costs and expenses of the board shall be paid from appropriations made for those purposes. The board is authorized to provide funding for the nursing education incentive program established in sections 335.200 to 335.203.
- 4. The provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be transferred and placed to the credit of general revenue until the amount in the fund at the end of the biennium exceeds two times the amount of the appropriation from the board's funds for the preceding fiscal year or, if the board requires by rule, permit renewal less frequently than yearly, then three times the appropriation from the board's funds for the preceding fiscal year. The amount, if any, in the fund which shall lapse is that amount in the fund which exceeds the appropriate multiple of the appropriations from the board's funds for the preceding fiscal year.
- 5. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this chapter shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. All rulemaking authority delegated prior to August 28, 1999, is of no force and effect and repealed. Nothing in this section shall be interpreted to repeal or affect the validity of any rule filed or adopted prior to August 28, 1999, if it fully complied with all applicable provisions of law. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 1999, shall be invalid and void.
- 335.046. 1. An applicant for a license to practice as a registered professional nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. The applicant shall be of good moral character and have completed at least the high school course of study, or the equivalent thereof as determined by the state board of education, and have successfully completed the basic professional curriculum in an accredited or approved school of nursing and earned a professional nursing degree or diploma. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration. Applicants from non-English-speaking lands shall be required to submit evidence of proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice nursing as a registered professional nurse. The applicant for a license to practice registered professional nursing shall pay a license fee in such amount as set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.
- 2. An applicant for license to practice as a licensed practical nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. Such applicant shall be of good moral character, and have completed at least two years of high school, or its equivalent as established by the state board of education, and have successfully completed a basic prescribed curriculum in a state-accredited or approved school of nursing, earned a nursing degree, certificate or diploma and completed a course approved by the board on the role of the practical nurse. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of

the person signing same, subject to the penalties of making a false affidavit or declaration. Applicants from non-English-speaking countries shall be required to submit evidence of their proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice as a licensed practical nurse. The applicant for a license to practice licensed practical nursing shall pay a fee in such amount as may be set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.

- 3. (1) An applicant for license to practice as an advanced practice registered nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain:
- (a) Statements showing the applicant's education and other such pertinent information as the board may require; and
- (b) A statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration.
- (2) The applicant for a license to practice as an advanced practice registered nurse shall pay a fee in such amount as may be set by the board. The fee shall be uniform for all applicants.
 - (3) An applicant shall:
- (a) Hold a current registered professional nurse license or privilege to practice, shall not be currently subject to discipline or any restrictions, and shall not hold an encumbered license or privilege to practice as a registered professional nurse or advanced practice registered nurse in any state or territory;
- (b) Have completed an accredited graduate-level advanced practice registered nurse program and achieved at least one certification as a clinical nurse specialist, nurse midwife, nurse practitioner, or registered nurse anesthetist, with at least one population focus prescribed by rule of the board;
- (c) Be currently certified by a national certifying body recognized by the Missouri state board of nursing in the advanced practice registered nurse role; and
- (d) Have a population focus on his or her certification, corresponding with his or her educational advanced practice registered nurse program.
- (4) Any person holding a document of recognition to practice nursing as an advanced practice registered nurse in this state that is current on August 28, 2022, shall be deemed to be licensed as an advanced practice registered nurse under the provisions of this section and shall be eligible for renewal of such license under the conditions and standards prescribed in this chapter and as prescribed by rule.
- **4.** Upon refusal of the board to allow any applicant to [sit for] take either the registered professional nurses' examination or the licensed practical nurses' examination, [as the case may be,] or upon refusal to issue an advanced practice registered nurse license, the board shall comply with the provisions of section 621.120 and advise the applicant of his or her right to have a hearing before the administrative hearing commission. The administrative hearing commission shall hear complaints taken pursuant to section 621.120.
- [4-] 5. The board shall not deny a license because of sex, religion, race, ethnic origin, age or political affiliation.
- 335.051. 1. The board shall issue a license to practice nursing as [either] an advanced practice registered nurse, a registered professional nurse, or a licensed practical nurse without examination to an applicant who has duly become licensed as [a] an advanced practice registered nurse, registered nurse, or licensed practical nurse pursuant to the laws of another state, territory, or foreign country if the applicant meets the qualifications required of advanced practice registered nurses, registered nurses, or licensed practical nurses in this state at the time the applicant was originally licensed in the other state, territory, or foreign country.
 - 2. Applicants from foreign countries shall be licensed as prescribed by rule.
- 3. Upon application, the board shall issue a temporary permit to an applicant pursuant to subsection 1 of this section for a license as [either] an advanced practice registered nurse, a registered professional nurse, or a licensed practical nurse who has made a prima facie showing that the applicant meets all of the requirements for such a license. The temporary permit shall be effective only until the board shall have had the opportunity to investigate his or her qualifications for licensure pursuant to subsection 1 of this section and to notify the applicant that his or her application for a license has been either granted or rejected. In no event shall such temporary permit be in effect for more than twelve months after the date of its issuance nor shall a permit be reissued to the same applicant. No fee shall be charged for such temporary permit. The holder of a temporary permit which has not expired, or been suspended or revoked, shall be deemed to be the holder of a license issued pursuant to section 335.046 until such temporary permit expires, is terminated or is suspended or revoked.

- 335.056. **1.** The license of every person licensed under the provisions of [sections 335.011 to 335.096] **this chapter** shall be renewed as provided. An application for renewal of license shall be mailed to every person to whom a license was issued or renewed during the current licensing period. The applicant shall complete the application and return it to the board by the renewal date with a renewal fee in an amount to be set by the board. The fee shall be uniform for all applicants. The certificates of renewal shall render the holder thereof a legal practitioner of nursing for the period stated in the certificate of renewal. Any person who practices nursing as **an advanced practice registered nurse**, a registered professional nurse, or [as] a licensed practical nurse during the time his **or her** license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the provisions of sections 335.011 to [335.096] 335.099.
- 2. The renewal of advanced practice registered nurse licenses and registered professional nurse licenses shall occur at the same time as prescribed by rule. Failure to renew and maintain the registered professional nurse license or privilege to practice or failure to provide the required fee and evidence of active certification or maintenance of certification as prescribed by rules and regulations shall result in expiration of the advanced practice registered nurse license.
- 335.061. 1. Any licensee who allows his or her license to be placed on inactive status as provided in sections 335.011 to [335.096] 335.099 shall be reinstated as provided by sections 335.011 to [335.096] 335.099 and by rule and regulation. The board may by rule and regulation provide for an inactive license status. In the event the board shall refuse to renew the license pursuant to one of the provisions of this section and related requirements for relicensure, the individual may appeal to the administrative hearing commission pursuant to the provisions of section 621.120.
- 2. Any licensee who allows his or her license to lapse by failing to renew the license as provided in sections 335.011 to [335.096] 335.099 shall be reinstated as provided by this chapter and by rule and regulation. The board may by rule and regulation provide for a lapsed license status. In the event the board shall refuse to renew the license pursuant to one of the provisions of this section and related requirements for relicensure, the individual may appeal to the administrative hearing commission pursuant to the provisions of sections 621.120.
- 335.066. 1. The board may refuse to issue or reinstate any certificate of registration or authority, permit or license required pursuant to this chapter for one or any combination of causes stated in subsection 2 of this section or the board may, as a condition to issuing or reinstating any such permit or license, require a person to submit himself or herself for identification, intervention, treatment, or monitoring by the intervention program and alternative program as provided in section 335.067. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.
- 2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by sections 335.011 to [335.096] 335.099 or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:
- (1) Use or unlawful possession of any controlled substance, as defined in chapter 195, by the federal government, or by the department of health and senior services by regulation, regardless of impairment, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by sections 335.011 to [335.096] 335.099. A blood alcohol content of .08 shall create a presumption of impairment;
- (2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution pursuant to the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to sections 335.011 to [335.096] 335.099, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
- (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to sections 335.011 to [335.096] 335.099 or in obtaining permission to take any examination given or required pursuant to sections 335.011 to [335.096] 335.099;
- (4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;
- (5) Incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by this chapter. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;

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- (6) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:
- (a) Willfully and continually overcharging or overtreating patients; or charging for visits which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;
- (b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;
- (c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests, or nursing services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;
- (e) Performing nursing services beyond the authorized scope of practice for which the individual is licensed in this state;
- (f) Exercising influence within a nurse-patient relationship for purposes of engaging a patient in sexual activity;
 - (g) Being listed on any state or federal sexual offender registry;
 - (h) Failure of any applicant or licensee to cooperate with the board during any investigation;
 - (i) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;
 - (j) Failure to timely pay license renewal fees specified in this chapter;
- (k) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;
 - (1) Failing to inform the board of the nurse's current residence within thirty days of changing residence;
 - (m) Any other conduct that is unethical or unprofessional involving a minor;
 - (n) A departure from or failure to conform to nursing standards;
- (o) Failure to establish, maintain, or communicate professional boundaries with the patient. A nurse may provide health care services to a person with whom the nurse has a personal relationship as long as the nurse otherwise meets the standards of the profession;
 - (p) Violating the confidentiality or privacy rights of the patient, resident, or client;
- (q) Failing to assess, accurately document, or report the status of a patient, resident, or client, or falsely assessing, documenting, or reporting the status of a patient, resident, or client;
 - (r) Intentionally or negligently causing physical or emotional harm to a patient, resident, or client;
- (s) Failing to furnish appropriate details of a patient's, client's, or resident's nursing needs to succeeding nurses legally qualified to provide continuing nursing services to a patient, client, or resident;
- (7) Violation of, or assisting or enabling any person to violate, any provision of sections 335.011 to [335.096] 335.099, or of any lawful rule or regulation adopted pursuant to sections 335.011 to [335.096] 335.099;
- (8) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- (9) Disciplinary action against the holder of a license or other right to practice any profession regulated by sections 335.011 to [335.096] 335.099 granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
 - (10) A person is finally adjudged insane or incompetent by a court of competent jurisdiction;
- (11) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by sections 335.011 to [335.096] 335.099 who is not registered and currently eligible to practice pursuant to sections 335.011 to [335.096] 335.099;
- (12) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
 - (13) Violation of any professional trust or confidence;
- (14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
- (15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
- (16) Placement on an employee disqualification list or other related restriction or finding pertaining to employment within a health-related profession issued by any state or federal government or agency following final disposition by such state or federal government or agency;

- (17) Failure to successfully complete the intervention or alternative program for substance use disorder;
- (18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630, or for payment from Title XVIII or Title XIX of the federal Medicare program;
- (19) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;
- (20) A pattern of personal use or consumption of any controlled substance or any substance which requires a prescription unless it is prescribed, dispensed, or administered by a provider who is authorized by law to do so or a pattern of abuse of any prescription medication;
- (21) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section 302.525;
- (22) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement, or licensee's professional health program;
- (23) Failure to submit to a drug or alcohol screening when requested by an employer or by the board. Failure to submit to a drug or alcohol screening shall create the presumption that the test would have been positive for a drug for which the individual did not have a prescription in a drug screening or positive for alcohol in an alcohol screening;
- (24) Adjudged by a court in need of a guardian or conservator, or both, obtaining a guardian or conservator, or both, and who has not been restored to capacity;
 - (25) Diversion of or attempting to divert any medication, controlled substance, or medical supplies;
- (26) Failure to answer, failure to disclose, or failure to fully provide all information requested on any application or renewal for a license. This includes disclosing all pleas of guilt or findings of guilt in a case where the imposition of sentence was suspended, whether or not the case is now confidential;
- (27) Physical or mental illness, including but not limited to deterioration through the aging process or loss of motor skill, or disability that impairs the licensee's ability to practice the profession with reasonable judgment, skill, or safety. This does not include temporary illness which is expected to resolve within a short period of time;
- (28) Any conduct that constitutes a serious danger to the health, safety, or welfare of a patient or the public.
- 3. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate, or permit.
- 4. For any hearing before the full board, the board shall cause the notice of the hearing to be served upon such licensee in person or by certified mail to the licensee at the licensee's last known address. If service cannot be accomplished in person or by certified mail, notice by publication as described in subsection 3 of section 506.160 shall be allowed; any representative of the board is authorized to act as a court or judge would in that section; any employee of the board is authorized to act as a clerk would in that section.
- 5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the board after compliance with all the requirements of sections 335.011 to [335.096] 335.099 relative to the licensing of an applicant for the first time.
- 6. The board may notify the proper licensing authority of any other state concerning the final disciplinary action determined by the board on a license in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.
- 7. Any person, organization, association or corporation who reports or provides information to the board of nursing pursuant to the provisions of sections 335.011 to [335.259] 335.257 and who does so in good faith shall not be subject to an action for civil damages as a result thereof.
- 8. The board may apply to the administrative hearing commission for an emergency suspension or restriction of a license for the following causes:
- (1) Engaging in sexual conduct as defined in section 566.010, with a patient who is not the licensee's spouse, regardless of whether the patient consented;

- (2) Engaging in sexual misconduct with a minor or person the licensee believes to be a minor. "Sexual misconduct" means any conduct of a sexual nature which would be illegal under state or federal law;
- (3) Possession of a controlled substance in violation of chapter 195 or any state or federal law, rule, or regulation, excluding record-keeping violations;
 - (4) Use of a controlled substance without a valid prescription;
 - (5) The licensee is adjudicated incapacitated or disabled by a court of competent jurisdiction;
- (6) Habitual intoxication or dependence upon alcohol or controlled substances or failure to comply with a treatment or aftercare program entered into pursuant to a board order, settlement agreement, or as part of the licensee's professional health program;
- (7) A report from a board-approved facility or a professional health program stating the licensee is not fit to practice. For purposes of this section, a licensee is deemed to have waived all objections to the admissibility of testimony from the provider of the examination and admissibility of the examination reports. The licensee shall sign all necessary releases for the board to obtain and use the examination during a hearing; or
- (8) Any conduct for which the board may discipline that constitutes a serious danger to the health, safety, or welfare of a patient or the public.
- 9. The board shall submit existing affidavits and existing certified court records together with a complaint alleging the facts in support of the board's request for an emergency suspension or restriction to the administrative hearing commission and shall supply the administrative hearing commission with the last home or business addresses on file with the board for the licensee. Within one business day of the filing of the complaint, the administrative hearing commission shall return a service packet to the board. The service packet shall include the board's complaint and any affidavits or records the board intends to rely on that have been filed with the administrative hearing commission. The service packet may contain other information in the discretion of the administrative hearing commission. Within twenty-four hours of receiving the packet, the board shall either personally serve the licensee or leave a copy of the service packet at all of the licensee's current addresses on file with the board. Prior to the hearing, the licensee may file affidavits and certified court records for consideration by the administrative hearing commission.
- 10. Within five days of the board's filing of the complaint, the administrative hearing commission shall review the information submitted by the board and the licensee and shall determine based on that information if probable cause exists pursuant to subsection 8 of this section and shall issue its findings of fact and conclusions of law. If the administrative hearing commission finds that there is probable cause, the administrative hearing commission shall enter the order requested by the board. The order shall be effective upon personal service or by leaving a copy at all of the licensee's current addresses on file with the board.
- 11. (1) The administrative hearing commission shall hold a hearing within forty-five days of the board's filing of the complaint to determine if cause for discipline exists. The administrative hearing commission may grant a request for a continuance, but shall in any event hold the hearing within one hundred twenty days of the board's initial filing. The board shall be granted leave to amend its complaint if it is more than thirty days prior to the hearing. If less than thirty days, the board may be granted leave to amend if public safety requires.
- (2) If no cause for discipline exists, the administrative hearing commission shall issue findings of fact, conclusions of law, and an order terminating the emergency suspension or restriction.
- (3) If cause for discipline exists, the administrative hearing commission shall issue findings of fact and conclusions of law and order the emergency suspension or restriction to remain in full force and effect pending a disciplinary hearing before the board. The board shall hold a hearing following the certification of the record by the administrative hearing commission and may impose any discipline otherwise authorized by state law.
- 12. Any action under this section shall be in addition to and not in lieu of any discipline otherwise in the board's power to impose and may be brought concurrently with other actions.
- 13. If the administrative hearing commission does not find probable cause and does not grant the emergency suspension or restriction, the board shall remove all reference to such emergency suspension or restriction from its public records. Records relating to the suspension or restriction shall be maintained in the board's files. The board or licensee may use such records in the course of any litigation to which they are both parties. Additionally, such records may be released upon a specific, written request of the licensee.
- 14. If the administrative hearing commission grants temporary authority to the board to restrict or suspend the nurse's license, such temporary authority of the board shall become final authority if there is no request by the nurse for a full hearing within thirty days of the preliminary hearing. The administrative hearing commission shall, if requested by the nurse named in the complaint, set a date to hold a full hearing under the provisions of chapter 621 regarding the activities alleged in the initial complaint filed by the board.

- 15. If the administrative hearing commission refuses to grant temporary authority to the board or restrict or suspend the nurse's license under subsection 8 of this section, such dismissal shall not bar the board from initiating a subsequent disciplinary action on the same grounds.
- 16. (1) The board may initiate a hearing before the board for discipline of any licensee's license or certificate upon receipt of one of the following:
- (a) Certified court records of a finding of guilt or plea of guilty or nolo contendere in a criminal prosecution under the laws of any state or of the United States for any offense involving the qualifications, functions, or duties of any profession licensed or regulated under this chapter, for any offense involving fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
- (b) Evidence of final disciplinary action against the licensee's license, certification, or registration issued by any other state, by any other agency or entity of this state or any other state, or the United States or its territories, or any other country;
- (c) Evidence of certified court records finding the licensee has been judged incapacitated or disabled under Missouri law or under the laws of any other state or of the United States or its territories.
- (2) The board shall provide the licensee not less than ten days' notice of any hearing held pursuant to chapter 536.
- (3) Upon a finding that cause exists to discipline a licensee's license, the board may impose any discipline otherwise available.
- 335.071. 1. Any institution desiring to conduct an approved educational program of professional nursing or of practical nursing shall apply to the board and submit evidence that it is prepared to meet standards established by this law and the board.
- 2. The board, through its executive officer or other authorized representatives, shall initially survey a nursing education program. A written report of the survey shall be submitted to the board. If the board determines that the requirements for an accredited nursing education program are met, such program shall be approved as a nursing education program for professional or for practical nurses upon payment of a fee in an amount to be set by the board and in accord with board rules.
- 3. The board, through its executive officer or other authorized representatives, shall periodically survey all nursing education programs in the state. Written reports of such surveys shall be submitted to the board. If the board determines that any approved nursing education program is not maintaining the standards required by sections 335.011 to [335.096] 335.099 and by the board, notice thereof in writing specifying the defect or defects shall be immediately given to the institution conducting the program. A program which fails to correct these conditions to the satisfaction of the board within a reasonable time shall, after notice and hearing, be removed from the board's listing of approved programs. All hearings shall be conducted in accordance with chapter 621.
- 4. All such approved programs shall pay an annual registration fee in an amount to be determined by the board. 335.076. 1. Any person who holds a license to practice professional nursing in this state may use the title "Registered Professional Nurse" and the abbreviation ["R.N."] "RN". No other person shall use the title "Registered Professional Nurse" or the abbreviation ["R.N."] "RN". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a registered professional nurse.
- 2. Any person who holds a license to practice practical nursing in this state may use the title "Licensed Practical Nurse" and the abbreviation ["L.P.N."] "LPN". No other person shall use the title "Licensed Practical Nurse" or the abbreviation ["L.P.N."] "LPN". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a licensed practical nurse.
- 3. Any person who holds a license [or recognition] to practice advanced practice nursing in this state may use the title "Advanced Practice Registered Nurse", the designations of "certified registered nurse anesthetist", "certified nurse midwife", "certified clinical nurse specialist", and "certified nurse practitioner", and the [abbreviation] abbreviations "APRN", [and any other title designations appearing on his or her license] "CRNA", "CNM", "CNS", and "NP", respectively. No other person shall use the title "Advanced Practice Registered Nurse" or the abbreviation "APRN". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is an advanced practice registered nurse.
- 4. No person shall practice or offer to practice professional nursing, practical nursing, or advanced practice nursing in this state or use any title, sign, abbreviation, card, or device to indicate that such person is a practicing professional nurse, practical nurse, or advanced practice nurse unless he or she has been duly licensed under the provisions of this chapter.

- 5. In the interest of public safety and consumer awareness, it is unlawful for any person to use the title "nurse" in reference to himself or herself in any capacity, except individuals who are or have been licensed as a registered nurse, licensed practical nurse, or advanced practice registered nurse under this chapter.
- 6. Notwithstanding any law to the contrary, nothing in this chapter shall prohibit a Christian Science nurse from using the title "Christian Science nurse", so long as such person provides only religious nonmedical services when offering or providing such services to those who choose to rely upon healing by spiritual means alone and does not hold his or her own religious organization and does not hold himself or herself out as a registered nurse, advanced practice registered nurse, nurse practitioner, licensed practical nurse, nurse midwife, clinical nurse specialist, or nurse anesthetist, unless otherwise authorized by law to do so.
- 335.081. So long as the person involved does not represent or hold himself or herself out as a nurse licensed to practice in this state, no provision of sections 335.011 to [335.096] 335.099 shall be construed as prohibiting:
- (1) The practice of any profession for which a license is required and issued pursuant to the laws of this state by a person duly licensed to practice that profession;
- (2) The services rendered by technicians, nurses' aides or their equivalent trained and employed in public or private hospitals and licensed long-term care facilities except the services rendered in licensed long-term care facilities shall be limited to administering medication, excluding injectable other than insulin;
 - (3) The providing of nursing care by friends or members of the family of the person receiving such care;
- (4) The incidental care of the sick, aged, or infirm by domestic servants or persons primarily employed as housekeepers;
 - (5) The furnishing of nursing assistance in the case of an emergency situation;
 - (6) The practice of nursing under proper supervision:
- (a) As a part of the course of study by students enrolled in approved schools of professional nursing or in schools of practical nursing;
- (b) By graduates of accredited nursing programs pending the results of the first licensing examination or ninety days after graduation, whichever first occurs;
- (c) A graduate nurse who is prevented from attending the first licensing examination following graduation by reason of active duty in the military may practice as a graduate nurse pending the results of the first licensing examination scheduled by the board following the release of such graduate nurse from active military duty or pending the results of the first licensing examination taken by the graduate nurse while involved in active military service whichever comes first;
- (7) The practice of nursing in this state by any legally qualified nurse duly licensed to practice in another state whose engagement requires such nurse to accompany and care for a patient temporarily residing in this state for a period not to exceed six months;
- (8) The practice of any legally qualified nurse who is employed by the government of the United States or any bureau, division or agency thereof, while in the discharge of his or her official duties or to the practice of any legally qualified nurse serving in the Armed Forces of the United States while stationed within this state;
- (9) Nonmedical nursing care of the sick with or without compensation when done in connection with the practice of the religious tenets of any church by adherents thereof, as long as they do not engage in the practice of nursing as defined in sections 335.011 to [335.096] 335.099;
- (10) The practice of any legally qualified and licensed nurse of another state, territory, or foreign country whose responsibilities include transporting patients into, out of, or through this state while actively engaged in patient transport that does not exceed forty-eight hours in this state.
 - 335.086. No person, firm, corporation or association shall:
- (1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to furnish any nursing diploma, license, renewal or record or aid or abet therein;
- (2) Practice [professional or practical] nursing as defined by sections 335.011 to [335.096] 335.099 under cover of any diploma, license, or record illegally or fraudulently obtained or signed or issued unlawfully or under fraudulent representation;
- (3) Practice [professional nursing or practical] nursing as defined by sections 335.011 to [335.096] 335.099 unless duly licensed to do so under the provisions of sections 335.011 to [335.096] 335.099;
- (4) Use in connection with his **or her** name any designation tending to imply that he **or she** is a licensed **advanced practice registered nurse**, a licensed registered professional nurse, or a licensed practical nurse unless duly licensed so to practice under the provisions of sections 335.011 to [335.096] 335.099;
- (5) Practice [professional nursing or practical] nursing during the time his **or her** license issued under the provisions of sections 335.011 to [335.096] 335.099 shall be suspended or revoked; or

- (6) Conduct a nursing education program for the preparation of professional or practical nurses unless the program has been accredited by the board.
- 335.175. 1. No later than January 1, 2014, there is hereby established within the state board of registration for the healing arts and the state board of nursing the "Utilization of Telehealth by Nurses". [An advanced practice registered nurse (APRN) providing nursing services under a collaborative practice arrangement under section 334.104 may provide such services outside the geographic proximity requirements of section 334.104 if the collaborating physician and advanced practice registered nurse utilize telehealth in the care of the patient and if the services are provided in a rural area of need.] Telehealth providers shall be required to obtain patient consent before telehealth services are initiated and ensure confidentiality of medical information.
 - 2. As used in this section, "telehealth" shall have the same meaning as such term is defined in section 191.1145.
- 3. (1) The boards shall jointly promulgate rules governing the practice of telehealth under this section. Such rules shall address, but not be limited to, appropriate standards for the use of telehealth.
- (2) Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be invalid and void.

[4.For purposes of this section, "rural area of need" means any rural area of this state which is located in a health professional shortage area as defined in section 354.650.]

335.221. The board, in addition to any other duties it may have regarding licensure of nurses, shall collect, at the time of licensure or licensure renewal, an education surcharge from each person licensed or relicensed pursuant to sections 335.011 to [335.096] 335.099, in the amount of one dollar per year for practical nurses and five dollars per year for professional nurses. These funds shall be deposited in the professional and practical nursing student loan and nurse loan repayment fund. All expenditures authorized by sections 335.212 to [335.259] 335.257 shall be paid from funds appropriated by the general assembly from the professional and practical nursing student loan and nurse loan repayment fund. The provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be transferred and placed to the credit of general revenue."; and

Further amend said bill, Page 3, Section 196.868, Line 7, by inserting after all of said section and line the following:

"Section B. Because immediate action is necessary to increase the independence of certain health care professionals in order to ensure the residents of this state have access to health care during the ongoing COVID-19 pandemic, the repeal and reenactment of sections 197.400, 197.405, 197.445, 334.104, and 335.175 of section A of this act is deemed necessary for the immediate preservation of the public health, welfare, peace, and safety, and is hereby declared to be an emergency act within the meaning of the constitution, and the repeal and reenactment of sections 197.400, 197.405, 197.445, 334.104, and 335.175 of section A of this act shall be in full force and effect upon its passage and approval."; and

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

Representative Seitz offered House Amendment No. 1 to House Amendment No. 6.

House Amendment No. 1 to House Amendment No. 6

AMEND House Amendment No. 6 to House Bill No. 2331, Page 2, Line 22, by inserting after all of said line the following:

"334.100. 1. The board may refuse to issue or renew any certificate of registration or authority, permit or license required pursuant to this chapter for one or any combination of causes stated in subsection 2 of this section. The board shall notify the applicant in writing of the reasons for the refusal and shall

advise the applicant of the applicant's right to file a complaint with the administrative hearing commission as provided by chapter 621. As an alternative to a refusal to issue or renew any certificate, registration or authority, the board may, at its discretion, issue a license which is subject to probation, restriction or limitation to an applicant for licensure for any one or any combination of causes stated in subsection 2 of this section. The board's order of probation, limitation or restriction shall contain a statement of the discipline imposed, the basis therefor, the date such action shall become effective, and a statement that the applicant has thirty days to request in writing a hearing before the administrative hearing commission. If the board issues a probationary, limited or restricted license to an applicant for licensure, either party may file a written petition with the administrative hearing commission within thirty days of the effective date of the probationary, limited or restricted license seeking review of the board's determination. If no written request for a hearing is received by the administrative hearing commission within the thirty-day period, the right to seek review of the board's decision shall be considered as waived.

- 2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by this chapter or any person who has failed to renew or has surrendered the person's certificate of registration or authority, permit or license for any one or any combination of the following causes:
- (1) Use of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by this chapter;
- (2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to this chapter, for any offense involving fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
- (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to this chapter or in obtaining permission to take any examination given or required pursuant to this chapter;
- (4) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:
- (a) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation; willfully and continually overcharging or overtreating patients; or charging for visits to the physician's office which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;
- (b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;
- (c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests or medical or surgical services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience or licensure to perform such responsibilities;
- (e) Misrepresenting that any disease, ailment or infirmity can be cured by a method, procedure, treatment, medicine or device;
- (f) Performing or prescribing medical services which have been declared by board rule to be of no medical or osteopathic value;
- (g) Final disciplinary action by any professional medical or osteopathic association or society or licensed hospital or medical staff of such hospital in this or any other state or territory, whether agreed to voluntarily or not, and including, but not limited to, any removal, suspension, limitation, or restriction of the person's license or staff or hospital privileges, failure to renew such privileges or license for cause, or other final disciplinary action, if the action was in any way related to unprofessional conduct, professional incompetence, malpractice or any other violation of any provision of this chapter;
- (h) Signing a blank prescription form; or dispensing, prescribing, administering or otherwise distributing any drug, controlled substance or other treatment without sufficient examination including failing to establish a valid physician-patient relationship pursuant to section 334.108, or for other than medically accepted therapeutic or experimental or investigative purposes duly authorized by a state or federal agency, or not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, except as authorized in section 334.104;
- (i) Exercising influence within a physician-patient relationship for purposes of engaging a patient in sexual activity;

- (j) Being listed on any state or federal sexual offender registry;
- (k) Terminating the medical care of a patient without adequate notice or without making other arrangements for the continued care of the patient;
- (l) Failing to furnish details of a patient's medical records to other treating physicians or hospitals upon proper request; or failing to comply with any other law relating to medical records;
 - (m) Failure of any applicant or licensee to cooperate with the board during any investigation;
 - (n) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;
 - (o) Failure to timely pay license renewal fees specified in this chapter;
- (p) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;
 - (q) Failing to inform the board of the physician's current residence and business address;
- (r) Advertising by an applicant or licensee which is false or misleading, or which violates any rule of the board, or which claims without substantiation the positive cure of any disease, or professional superiority to or greater skill than that possessed by any other physician. An applicant or licensee shall also be in violation of this provision if the applicant or licensee has a financial interest in any organization, corporation or association which issues or conducts such advertising;
 - (s) Any other conduct that is unethical or unprofessional involving a minor;
- (5) Any conduct or practice which is or might be harmful or dangerous to the mental or physical health of a patient or the public; or incompetency, gross negligence or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by this chapter. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;
- (6) Violation of, or attempting to violate, directly or indirectly, or assisting or enabling any person to violate, any provision of this chapter or chapter 324, or of any lawful rule or regulation adopted pursuant to this chapter or chapter 324;
- (7) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- (8) Revocation, suspension, restriction, modification, limitation, reprimand, warning, censure, probation or other final disciplinary action against the holder of or applicant for a license or other right to practice any profession regulated by this chapter by another state, territory, federal agency or country, whether or not voluntarily agreed to by the licensee or applicant, including, but not limited to, the denial of licensure, surrender of the license, allowing the license to expire or lapse, or discontinuing or limiting the practice of medicine while subject to an investigation or while actually under investigation by any licensing authority, medical facility, branch of the Armed Forces of the United States of America, insurance company, court, agency of the state or federal government, or employer;
 - (9) A person is finally adjudged incapacitated or disabled by a court of competent jurisdiction;
- (10) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by this chapter who is not registered and currently eligible to practice pursuant to this chapter; or knowingly performing any act which in any way aids, assists, procures, advises, or encourages any person to practice medicine who is not registered and currently eligible to practice pursuant to this chapter. A physician who works in accordance with standing orders or protocols or in accordance with the provisions of section 334.104 shall not be in violation of this subdivision;
 - (11) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
- (12) Failure to display a valid certificate or license if so required by this chapter or any rule promulgated pursuant to this chapter;
- (13) Violation of the drug laws or rules and regulations of this state, including but not limited to any provision of chapter 195, any other state, or the federal government;
- (14) Knowingly making, or causing to be made, or aiding, or abetting in the making of, a false statement in any birth, death or other certificate or document executed in connection with the practice of the person's profession;
 - (15) Knowingly making a false statement, orally or in writing to the board;
- (16) Soliciting patronage in person or by agents or representatives, or by any other means or manner, under the person's own name or under the name of another person or concern, actual or pretended, in such a manner as to confuse, deceive, or mislead the public as to the need or necessity for or appropriateness of health care services for all patients, or the qualifications of an individual person or persons to diagnose, render, or perform health care services;

- (17) Using, or permitting the use of, the person's name under the designation of "Doctor", "Dr.", "M.D.", or "D.O.", or any similar designation with reference to the commercial exploitation of any goods, wares or merchandise:
- (18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630 or for payment from Title XVIII or Title XIX of the Social Security Act;
- (19) Failure or refusal to properly guard against contagious, infectious or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;
- (20) Any candidate for licensure or person licensed to practice as a physical therapist, paying or offering to pay a referral fee [or, notwithstanding section 334.010 to the contrary, practicing or offering to practice professional physical therapy independent of the prescription and direction of a person licensed and registered as a physician and surgeon pursuant to this chapter, as a dentist pursuant to chapter 332, as a podiatrist pursuant to chapter 330, as an advanced practice registered nurse under chapter 335, or any licensed and registered physician, dentist, podiatrist, or advanced practice registered nurse practicing in another jurisdiction, whose license is in good standing];
- (21) Any candidate for licensure or person licensed to practice as a physical therapist, treating or attempting to treat ailments or other health conditions of human beings other than by professional physical therapy and as authorized by sections 334.500 to 334.620;
- (22) Any person licensed to practice as a physician or surgeon, requiring, as a condition of the physician-patient relationship, that the patient receive prescribed drugs, devices or other professional services directly from facilities of that physician's office or other entities under that physician's ownership or control. A physician shall provide the patient with a prescription which may be taken to the facility selected by the patient and a physician knowingly failing to disclose to a patient on a form approved by the advisory commission for professional physical therapists as established by section 334.625 which is dated and signed by a patient or guardian acknowledging that the patient or guardian has read and understands that the physician has a pecuniary interest in a physical therapy or rehabilitation service providing prescribed treatment and that the prescribed treatment is available on a competitive basis. This subdivision shall not apply to a referral by one physician to another physician within a group of physicians practicing together;
- (23) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed or administered by another physician who is authorized by law to do so;
- (24) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section 302.525;
- (25) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement or licensee's professional health program;
- (26) Revocation, suspension, limitation, probation, or restriction of any kind whatsoever of any controlled substance authority, whether agreed to voluntarily or not, or voluntary termination of a controlled substance authority while under investigation:
- (27) For a physician to operate, conduct, manage, or establish an abortion facility, or for a physician to perform an abortion in an abortion facility, if such facility comes under the definition of an ambulatory surgical center pursuant to sections 197.200 to 197.240, and such facility has failed to obtain or renew a license as an ambulatory surgical center.
- 3. Collaborative practice arrangements, protocols and standing orders shall be in writing and signed and dated by a physician prior to their implementation.
- 4. After the filing of such complaint before the administrative hearing commission, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, warn, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed ten years, or may suspend the person's license, certificate or permit for a period not to exceed three years, or restrict or limit the person's license, certificate or permit for an indefinite period of time, or revoke the person's license, certificate, or permit, or administer a public or private reprimand, or deny the person's application for a license, or permanently withhold issuance of a license or require the person to submit to the care, counseling or treatment of physicians designated by the board at the expense of the individual to be examined, or require the person to attend such continuing educational courses and pass such examinations as the board may direct.

- 5. In any order of revocation, the board may provide that the person may not apply for reinstatement of the person's license for a period of time ranging from two to seven years following the date of the order of revocation. All stay orders shall toll this time period.
- 6. Before restoring to good standing a license, certificate or permit issued pursuant to this chapter which has been in a revoked, suspended or inactive state for any cause for more than two years, the board may require the applicant to attend such continuing medical education courses and pass such examinations as the board may direct.
- 7. In any investigation, hearing or other proceeding to determine a licensee's or applicant's fitness to practice, any record relating to any patient of the licensee or applicant shall be discoverable by the board and admissible into evidence, regardless of any statutory or common law privilege which such licensee, applicant, record custodian or patient might otherwise invoke. In addition, no such licensee, applicant, or record custodian may withhold records or testimony bearing upon a licensee's or applicant's fitness to practice on the ground of privilege between such licensee, applicant or record custodian and a patient."; and

Further amend said amendment, Page 6, Line 20, by inserting after said line the following:

- "334.506. 1. As used in this section, "approved health care provider" means a person holding a current and active license as a physician and surgeon under this chapter, a chiropractor under chapter 331, a dentist under chapter 332, a podiatrist under chapter 330, a physician assistant under this chapter, an advanced practice registered nurse under chapter 335, or any licensed and registered physician, chiropractor, dentist, or podiatrist practicing in another jurisdiction whose license is in good standing.
- 2. A physical therapist [shall not] may evaluate and initiate treatment [for a new injury or illness] on a patient without a prescription or referral from an approved health care provider.
- 3. A physical therapist may provide educational resources and training, develop fitness or wellness programs [for asymptomatic persons], or provide screening or consultative services within the scope of physical therapy practice without [the] a prescription [and direction of] or referral from an approved health care provider.
- 4. [A physical therapist may examine and treat without the prescription and direction of an approved health care provider any person with a recurring self-limited injury within one year of diagnosis by an approved health care provider or a chronic illness that has been previously diagnosed by an approved health care provider. The physical therapist shall:
- (1) Contact the patient's current approved health care provider within seven days of initiating physical therapy services under this subsection;
- (2) Not change an existing physical therapy referral available to the physical therapist without approval of the patient's current approved health care provider;
- (3) Refer to an approved health care provider any patient whose medical condition at the time of examination or treatment is determined to be beyond the scope of practice of physical therapy;
- (4) Refer to an approved health care provider any patient whose condition for which physical therapy services are rendered under this subsection has not been documented to be progressing toward documented treatment goals after six visits or fourteen days, whichever first occurs:
- (5) Notify the patient's current approved health care provider prior to the continuation of treatment if treatment rendered under this subsection is to continue beyond thirty days. The physical therapist shall provide such notification for each successive period of thirty days.
- 5-] The provision of physical therapy services of evaluation and screening pursuant to this section shall be limited to a physical therapist, and any authority for evaluation and screening granted within this section may not be delegated. Upon each reinitiation of physical therapy services, a physical therapist shall provide a full physical therapy evaluation prior to the reinitiation of physical therapy treatment. [Physical therapy treatment provided pursuant to the provisions of subsection 4 of this section may be delegated by physical therapists to physical therapist assistants only if the patient's current approved health care provider has been so informed as part of the physical therapist's seven-day notification upon reinitiation of physical therapy services as required in subsection 4 of this section.] Nothing in this subsection shall be construed as to limit the ability of physical therapists or physical therapist assistants to provide physical therapy services in accordance with the provisions of this chapter, and upon the referral of an approved health care provider. Nothing in this subsection shall prohibit an approved health care provider from acting within the scope of their practice as defined by the applicable chapters of RSMo.
- [6-] 5. No person licensed to practice, or applicant for licensure, as a physical therapist or physical therapist assistant shall make a medical diagnosis.

- [7-] 6. A physical therapist shall only delegate physical therapy treatment to a physical therapist assistant or to a person in an entry level of a professional education program approved by the Commission on Accreditation in Physical Therapy Education (CAPTE) who satisfies supervised clinical education requirements related to the person's physical therapist or physical therapist assistant education. The entry-level person shall be under the supervision of a physical therapist.
- 334.613. 1. The board may refuse to issue or renew a license to practice as a physical therapist or physical therapist assistant for one or any combination of causes stated in subsection 2 of this section. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of the applicant's right to file a complaint with the administrative hearing commission as provided by chapter 621. As an alternative to a refusal to issue or renew a license to practice as a physical therapist or physical therapist assistant, the board may, at its discretion, issue a license which is subject to probation, restriction, or limitation to an applicant for licensure for any one or any combination of causes stated in subsection 2 of this section. The board's order of probation, limitation, or restriction shall contain a statement of the discipline imposed, the basis therefor, the date such action shall become effective, and a statement that the applicant has thirty days to request in writing a hearing before the administrative hearing commission. If the board issues a probationary, limited, or restricted license to an applicant for licensure, either party may file a written petition with the administrative hearing commission within thirty days of the effective date of the probationary, limited, or restricted license seeking review of the board's determination. If no written request for a hearing is received by the administrative hearing commission within the thirty-day period, the right to seek review of the board's decision shall be considered as waived.
- 2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of a license to practice as a physical therapist or physical therapist assistant who has failed to renew or has surrendered his or her license for any one or any combination of the following causes:
- (1) Use of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of a physical therapist or physical therapist assistant;
- (2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state, of the United States, or of any country, for any offense directly related to the duties and responsibilities of the occupation, as set forth in section 324.012, regardless of whether or not sentence is imposed;
- (3) Use of fraud, deception, misrepresentation, or bribery in securing any certificate of registration or authority, permit, or license issued under this chapter or in obtaining permission to take any examination given or required under this chapter;
- (4) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of a physical therapist or physical therapist assistant, including but not limited to the following:
- (a) Obtaining or attempting to obtain any fee, charge, tuition, or other compensation by fraud, deception, or misrepresentation; willfully and continually overcharging or overtreating patients; or charging for sessions of physical therapy which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;
- (b) Attempting, directly or indirectly, by way of intimidation, coercion, or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;
 - (c) Willfully and continually performing inappropriate or unnecessary treatment or services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;
- (e) Misrepresenting that any disease, ailment, or infirmity can be cured by a method, procedure, treatment, medicine, or device;
 - (f) Performing services which have been declared by board rule to be of no physical therapy value;
- (g) Final disciplinary action by any professional association, professional society, licensed hospital or medical staff of the hospital, or physical therapy facility in this or any other state or territory, whether agreed to voluntarily or not, and including but not limited to any removal, suspension, limitation, or restriction of the person's professional employment, malpractice, or any other violation of any provision of this chapter;
- (h) Administering treatment without sufficient examination, or for other than medically accepted therapeutic or experimental or investigative purposes duly authorized by a state or federal agency, or not in the course of professional physical therapy practice;
- (i) Engaging in or soliciting sexual relationships, whether consensual or nonconsensual, while a physical therapist or physical therapist assistant/patient relationship exists; making sexual advances, requesting sexual favors, or engaging in other verbal conduct or physical contact of a sexual nature with patients or clients;

- (j) Terminating the care of a patient without adequate notice or without making other arrangements for the continued care of the patient;
- (k) Failing to furnish details of a patient's physical therapy records to treating physicians, other physical therapists, or hospitals upon proper request; or failing to comply with any other law relating to physical therapy records:
- (l) Failure of any applicant or licensee, other than the licensee subject to the investigation, to cooperate with the board during any investigation;
- (m) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;
 - (n) Failure to timely pay license renewal fees specified in this chapter;
 - (o) Violating a probation agreement with this board or any other licensing agency;
- (p) Failing to inform the board of the physical therapist's or physical therapist assistant's current telephone number, residence, and business address;
- (q) Advertising by an applicant or licensee which is false or misleading, or which violates any rule of the board, or which claims without substantiation the positive cure of any disease, or professional superiority to or greater skill than that possessed by any other physical therapist or physical therapist assistant. An applicant or licensee shall also be in violation of this provision if the applicant or licensee has a financial interest in any organization, corporation, or association which issues or conducts such advertising;
- (5) Any conduct or practice which is or might be harmful or dangerous to the mental or physical health of a patient or the public; or incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of a physical therapist or physical therapist assistant. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;
- (6) Violation of, or attempting to violate, directly or indirectly, or assisting or enabling any person to violate, any provision of this chapter, or of any lawful rule adopted under this chapter;
- (7) Impersonation of any person licensed as a physical therapist or physical therapist assistant or allowing any person to use his or her license or diploma from any school;
- (8) Revocation, suspension, restriction, modification, limitation, reprimand, warning, censure, probation, or other final disciplinary action against a physical therapist or physical therapist assistant for a license or other right to practice as a physical therapist or physical therapist assistant by another state, territory, federal agency or country, whether or not voluntarily agreed to by the licensee or applicant, including but not limited to the denial of licensure, surrender of the license, allowing the license to expire or lapse, or discontinuing or limiting the practice of physical therapy while subject to an investigation or while actually under investigation by any licensing authority, medical facility, branch of the Armed Forces of the United States of America, insurance company, court, agency of the state or federal government, or employer;
 - (9) A person is finally adjudged incapacitated or disabled by a court of competent jurisdiction;
- (10) Assisting or enabling any person to practice or offer to practice who is not licensed and currently eligible to practice under this chapter; or knowingly performing any act which in any way aids, assists, procures, advises, or encourages any person to practice physical therapy who is not licensed and currently eligible to practice under this chapter;
- (11) Issuance of a license to practice as a physical therapist or physical therapist assistant based upon a material mistake of fact;
- (12) Failure to display a valid license pursuant to practice as a physical therapist or physical therapist assistant:
- (13) Knowingly making, or causing to be made, or aiding, or abetting in the making of, a false statement in any document executed in connection with the practice of physical therapy;
- (14) Soliciting patronage in person or by agents or representatives, or by any other means or manner, under the person's own name or under the name of another person or concern, actual or pretended, in such a manner as to confuse, deceive, or mislead the public as to the need or necessity for or appropriateness of physical therapy services for all patients, or the qualifications of an individual person or persons to render, or perform physical therapy services;
- (15) Using, or permitting the use of, the person's name under the designation of "physical therapist", "physiotherapist", "registered physical therapist", "P.T.", "Ph.T.", "P.T.T.", "D.P.T.", "M.P.T." or "R.P.T.", "physical therapist assistant", "P.T.A.", "L.P.T.A.", "C.P.T.A.", or any similar designation with reference to the commercial exploitation of any goods, wares or merchandise;

- (16) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment under chapter 208 or chapter 630 or for payment from Title XVIII or Title XIX of the Social Security Act;
- (17) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary facility or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in any physical therapy facility to the board, in writing, within thirty days after the discovery thereof;
- (18) Any candidate for licensure or person licensed to practice as a physical therapist or physical therapist assistant paying or offering to pay a referral fee [or, notwithstanding section 334.010 to the contrary, practicing or offering to practice professional physical therapy independent of the prescription and direction of a person licensed and registered as a physician and surgeon under this chapter, as a physician assistant under this chapter, as a chiropractor under chapter 331, as a dentist under chapter 332, as a podiatrist under chapter 330, as an advanced practice registered nurse under chapter 335, or any licensed and registered physician, chiropractor, dentist, podiatrist, or advanced practice registered nurse practicing in another jurisdiction, whose license is in good standing];
- (19) Any candidate for licensure or person licensed to practice as a physical therapist or physical therapist assistant treating or attempting to treat ailments or other health conditions of human beings other than by professional physical therapy and as authorized by sections 334.500 to 334.685;
- (20) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed, or administered by a physician who is authorized by law to do so;
 - (21) Failing to maintain adequate patient records under section 334.602;
- (22) Attempting to engage in conduct that subverts or undermines the integrity of the licensing examination or the licensing examination process, including but not limited to utilizing in any manner recalled or memorized licensing examination questions from or with any person or entity, failing to comply with all test center security procedures, communicating or attempting to communicate with any other examinees during the test, or copying or sharing licensing examination questions or portions of questions;
- (23) Any candidate for licensure or person licensed to practice as a physical therapist or physical therapist assistant who requests, receives, participates or engages directly or indirectly in the division, transferring, assigning, rebating or refunding of fees received for professional services or profits by means of a credit or other valuable consideration such as wages, an unearned commission, discount or gratuity with any person who referred a patient, or with any relative or business associate of the referring person;
- (24) Being unable to practice as a physical therapist or physical therapist assistant with reasonable skill and safety to patients by reasons of incompetency, or because of illness, drunkenness, excessive use of drugs, narcotics, chemicals, or as a result of any mental or physical condition. The following shall apply to this subdivision:
- (a) In enforcing this subdivision the board shall, after a hearing by the board, upon a finding of probable cause, require a physical therapist or physical therapist assistant to submit to a reexamination for the purpose of establishing his or her competency to practice as a physical therapist or physical therapist assistant conducted in accordance with rules adopted for this purpose by the board, including rules to allow the examination of the pattern and practice of such physical therapist's or physical therapist assistant's professional conduct, or to submit to a mental or physical examination or combination thereof by a facility or professional approved by the board;
- (b) For the purpose of this subdivision, every physical therapist and physical therapist assistant licensed under this chapter is deemed to have consented to submit to a mental or physical examination when directed in writing by the board;
- (c) In addition to ordering a physical or mental examination to determine competency, the board may, notwithstanding any other law limiting access to medical or other health data, obtain medical data and health records relating to a physical therapist, physical therapist assistant or applicant without the physical therapist's, physical therapist assistant's or applicant's consent;
- (d) Written notice of the reexamination or the physical or mental examination shall be sent to the physical therapist or physical therapist assistant, by registered mail, addressed to the physical therapist or physical therapist assistant at the physical therapist's or physical therapist assistant's last known address. Failure of a physical therapist or physical therapist assistant to submit to the examination when directed shall constitute an admission of the allegations against the physical therapist or physical therapist assistant, in which case the board may enter a final order without the presentation of evidence, unless the failure was due to circumstances beyond the physical therapist's or physical therapist assistant's control. A physical therapist or physical therapist assistant whose right to practice has been affected under this subdivision shall, at reasonable intervals, be afforded an opportunity to demonstrate that the physical therapist or physical therapist assistant can resume the competent practice as a physical therapist or physical therapist assistant with reasonable skill and safety to patients;

- (e) In any proceeding under this subdivision neither the record of proceedings nor the orders entered by the board shall be used against a physical therapist or physical therapist assistant in any other proceeding. Proceedings under this subdivision shall be conducted by the board without the filing of a complaint with the administrative hearing commission;
- (f) When the board finds any person unqualified because of any of the grounds set forth in this subdivision, it may enter an order imposing one or more of the disciplinary measures set forth in subsection 3 of this section.
- 3. After the filing of such complaint before the administrative hearing commission, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds provided in subsection 2 of this section for disciplinary action are met, the board may, singly or in combination:
- (1) Warn, censure or place the physical therapist or physical therapist assistant named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed ten years;
- (2) Suspend the physical therapist's or physical therapist assistant's license for a period not to exceed three years;
- (3) Restrict or limit the physical therapist's or physical therapist assistant's license for an indefinite period of time;
 - (4) Revoke the physical therapist's or physical therapist assistant's license;
 - (5) Administer a public or private reprimand;
 - (6) Deny the physical therapist's or physical therapist assistant's application for a license;
 - (7) Permanently withhold issuance of a license;
- (8) Require the physical therapist or physical therapist assistant to submit to the care, counseling or treatment of physicians designated by the board at the expense of the physical therapist or physical therapist assistant to be examined;
- (9) Require the physical therapist or physical therapist assistant to attend such continuing educational courses and pass such examinations as the board may direct.
- 4. In any order of revocation, the board may provide that the physical therapist or physical therapist assistant shall not apply for reinstatement of the physical therapist's or physical therapist assistant's license for a period of time ranging from two to seven years following the date of the order of revocation. All stay orders shall toll this time period.
- 5. Before restoring to good standing a license issued under this chapter which has been in a revoked, suspended, or inactive state for any cause for more than two years, the board may require the applicant to attend such continuing medical education courses and pass such examinations as the board may direct.
- 6. In any investigation, hearing or other proceeding to determine a physical therapist's, physical therapist assistant's or applicant's fitness to practice, any record relating to any patient of the physical therapist, physical therapist assistant, or applicant shall be discoverable by the board and admissible into evidence, regardless of any statutory or common law privilege which such physical therapist, physical therapist assistant, applicant, record custodian, or patient might otherwise invoke. In addition, no such physical therapist, physical therapist assistant, applicant, or record custodian may withhold records or testimony bearing upon a physical therapist's, physical therapist assistant's, or applicant's fitness to practice on the grounds of privilege between such physical therapist, physical therapist assistant, applicant, or record custodian and a patient."; and

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

On motion of Representative Seitz, **House Amendment No. 1 to House Amendment No. 6** was adopted.

On motion of Representative Schroer, **House Amendment No. 6**, as amended, was adopted.

On motion of Representative Baker, **HB 2331**, as amended, was ordered perfected and printed.

HB 2359, HCS HB 2450, HB 1471, HCS HB 1556, HCS HB 1613, HCS HB 1670, HCS HB 1683, HCS HB 1709, HCS HB 1918, HCS HB 2011, HCS HB 2052, and HCS HB 2138 were placed on the Informal Calendar.

HCS HB 2171, relating to workforce development in elementary and secondary education, was taken up by Representative Francis.

On motion of Representative Francis, the title of HCS HB 2171 was agreed to.

Representative Mackey offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for House Bill No. 2171, Page 3, Section 167.908, Line 21, by inserting after all of said section and line the following:

- "513.430. 1. The following property shall be exempt from attachment and execution to the extent of any person's interest therein:
- (1) Household furnishings, household goods, wearing apparel, appliances, books, animals, crops or musical instruments that are held primarily for personal, family or household use of such person or a dependent of such person, not to exceed three thousand dollars in value in the aggregate;
- (2) A wedding ring not to exceed one thousand five hundred dollars in value and other jewelry held primarily for the personal, family or household use of such person or a dependent of such person, not to exceed five hundred dollars in value in the aggregate;
 - (3) Any other property of any kind, not to exceed in value six hundred dollars in the aggregate;
- (4) Any implements or professional books or tools of the trade of such person or the trade of a dependent of such person not to exceed three thousand dollars in value in the aggregate;
 - (5) Any motor vehicles, not to exceed three thousand dollars in value in the aggregate;
- (6) Any mobile home used as the principal residence but not attached to real property in which the debtor has a fee interest, not to exceed five thousand dollars in value;
- (7) Any one or more unmatured life insurance contracts owned by such person, other than a credit life insurance contract, and up to fifteen thousand dollars of any matured life insurance proceeds for actual funeral, cremation, or burial expenses where the deceased is the spouse, child, or parent of the beneficiary;
- (8) The amount of any accrued dividend or interest under, or loan value of, any one or more unmatured life insurance contracts owned by such person under which the insured is such person or an individual of whom such person is a dependent; provided, however, that if proceedings under Title 11 of the United States Code are commenced by or against such person, the amount exempt in such proceedings shall not exceed in value one hundred fifty thousand dollars in the aggregate less any amount of property of such person transferred by the life insurance company or fraternal benefit society to itself in good faith if such transfer is to pay a premium or to carry out a nonforfeiture insurance option and is required to be so transferred automatically under a life insurance contract with such company or society that was entered into before commencement of such proceedings. No amount of any accrued dividend or interest under, or loan value of, any such life insurance contracts shall be exempt from any claim for child support. Notwithstanding anything to the contrary, no such amount shall be exempt in such proceedings under any such insurance contract which was purchased by such person within one year prior to the commencement of such proceedings;
 - (9) Professionally prescribed health aids for such person or a dependent of such person;
 - (10) Such person's right to receive:
 - (a) A Social Security benefit, unemployment compensation or a public assistance benefit;
 - (b) A veteran's benefit;
 - (c) A disability, illness or unemployment benefit;
 - (d) Alimony, support or separate maintenance, not to exceed seven hundred fifty dollars a month;
- (e) **a.** Any payment under a stock bonus plan, pension plan, disability or death benefit plan, profit-sharing plan, nonpublic retirement plan or any plan described, defined, or established pursuant to section 456.014, the person's right to a participant account in any deferred compensation program offered by the state of Missouri or any

of its political subdivisions, or annuity or similar plan or contract on account of illness, disability, death, age or length of service, to the extent reasonably necessary for the support of such person and any dependent of such person unless:

- [a-] (i) Such plan or contract was established by or under the auspices of an insider that employed such person at the time such person's rights under such plan or contract arose;
 - [b.] (ii) Such payment is on account of age or length of service; and
- [e-] (iii) Such plan or contract does not qualify under Section 401(a), 403(a), 403(b), 408, 408A or 409 of the Internal Revenue Code of 1986, as amended, (26 U.S.C. Section 401(a), 403(a), 403(b), 408, 408A or 409)[-]. [except that] b. Notwithstanding the exemption provided in subparagraph a. of this paragraph, any such payment to any person shall be subject to attachment or execution pursuant to a qualified domestic relations order, as defined by Section 414(p) of the Internal Revenue Code of 1986 (26 U.S.C. Section 414(p)), as amended, issued by a court in any proceeding for dissolution of marriage or legal separation or a proceeding for disposition of property following dissolution of marriage by a court which lacked personal jurisdiction over the absent spouse or lacked jurisdiction to dispose of marital property at the time of the original judgment of dissolution;
- (f) Any money or assets, payable to a participant or beneficiary from, or any interest of any participant or beneficiary in, a retirement plan, profit-sharing plan, health savings plan, or similar plan, including an inherited account or plan, that is qualified under Section 401(a), 403(a), 403(b), 408, 408A or 409 of the Internal Revenue Code of 1986 (26 U.S.C. 401(a), 403(a), 403(b), 408, 408A, or 409), as amended, whether such participant's or beneficiary's interest arises by inheritance, designation, appointment, or otherwise, except as provided in this paragraph. Any plan or arrangement described in this paragraph shall not be exempt from the claim of an alternate payee under a qualified domestic relations order; however, the interest of any and all alternate payees under a qualified domestic relations order shall be exempt from any and all claims of any creditor, other than the state of Missouri through its department of social services. As used in this paragraph, the terms "alternate payee" and "qualified domestic relations order" have the meaning given to them in Section 414(p) of the Internal Revenue Code of 1986 (26 U.S.C. Section 414(p)), as amended. If proceedings under Title 11 of the United States Code are commenced by or against such person, no amount of funds shall be exempt in such proceedings under any such plan, contract, or trust which is fraudulent as defined in subsection 2 of section 428.024 and for the period such person participated within three years prior to the commencement of such proceedings. For the purposes of this section, when the fraudulently conveyed funds are recovered and after, such funds shall be deducted and then treated as though the funds had never been contributed to the plan, contract, or trust;
- (11) The debtor's right to receive, or property that is traceable to, a payment on account of the wrongful death of an individual of whom the debtor was a dependent, to the extent reasonably necessary for the support of the debtor and any dependent of the debtor;
- (12) Firearms, firearm accessories, and ammunition, not to exceed one thousand five hundred dollars in value in the aggregate;
- (13) Any moneys accruing to and deposited in individual savings accounts or individual deposit accounts under sections 166.400 to 166.456 or sections 166.500 to 166.529, subject to the following provisions:
 - (a) This subdivision shall apply to any proceeding that:
 - a. Is filed on or before January 1, 2022; or
 - b. Was filed before January 1, 2022, and is pending or on appeal after January 1, 2022;
- (b) Except as provided by paragraph (c) of this subdivision, if the designated beneficiary of an individual savings account or individual deposit account established under sections 166.400 to 166.456 or sections 166.500 to 166.529 is a lineal descendant of the account owner, all moneys in the account shall be exempt from any claims of creditors of the account owner or designated beneficiary;
 - (c) The provisions of paragraph (b) of this subdivision shall not apply to:
- a. Claims of any creditor of an account owner as to amounts contributed within a two-year period preceding the date of the filing of a bankruptcy petition under 11 U.S.C. Section 101 et seq., as amended; or
- b. Claims of any creditor of an account owner as to amounts contributed within a one-year period preceding an execution on judgment for such claims against the account owner.
- 2. Nothing in this section shall be interpreted to exempt from attachment or execution for a valid judicial or administrative order for the payment of child support or maintenance any money or assets, payable to a participant or beneficiary from, or any interest of any participant or beneficiary in, a retirement plan which is qualified pursuant to Sections 408 and 408A of the Internal Revenue Code of 1986 (26 U.S.C. Sections 408 and 408A), as amended."; and

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

On motion of Representative Mackey, House Amendment No. 1 was adopted.

Representative Plocher moved the previous question.

Which motion was adopted by the following vote:

AYES: 086

Andrews	Atchison	Bailey	Baker	Basye
Billington	Black 137	Black 7	Bromley	Brown 16
Buchheit-Courtway	Burger	Busick	Christofanelli	Coleman 97
Cook	Copeland	Davidson	Davis	Deaton
Dinkins	Eggleston	Falkner	Fishel	Francis
Gregory 51	Griffith	Haden	Haffner	Haley
Hardwick	Henderson	Houx	Hovis	Hudson
Hurlbert	Kalberloh	Kelley 127	Kelly 141	Knight
Lewis 6	Lovasco	Mayhew	McGaugh	McGirl
Morse	O'Donnell	Owen	Patterson	Perkins
Pike	Plocher	Pollitt 52	Pollock 123	Porter
Railsback	Reedy	Richey	Riggs	Riley
Rone	Sander	Schnelting	Schwadron	Seitz
Sharpe 4	Shaul	Shields	Smith 155	Smith 163
Stacy	Stephens 128	Tate	Taylor 139	Taylor 48
Thomas	Thompson	Toalson Reisch	Trent	Van Schoiack
Veit	Walsh 50	West	Wiemann	Wright
M C 1				

Mr. Speaker

NOES: 043

Adams	Aldridge	Anderson	Appelbaum	Aune
Bangert	Baringer	Barnes	Bland Manlove	Bosley
Brown 27	Brown 70	Burnett	Burton	Butz
Chipman	Clemens	Collins	Ellebracht	Fogle
Gunby	Ingle	Johnson	Mackey	McCreery
Mosley	Nurrenbern	Person	Phifer	Price IV
Proudie	Quade	Rogers	Sauls	Smith 45
Smith 67	Terry	Turnbaugh	Unsicker	Walsh Moore 93
Weber	Windham	Young		

PRESENT: 000

ABSENT WITH LEAVE: 028

Boggs	Coleman 32	Cupps	DeGroot	Derges
Dogan	Doll	Evans	Fitzwater	Gray
Gregory 96	Grier	Hicks	Kidd	Lewis 25
McDaniel	Merideth	Murphy	Pietzman	Pouche
Roberts	Roden	Rowland	Sassmann	Schroer
Sharp 36	Simmons	Stevens 46		

VACANCIES: 006

On motion of Representative Francis, **HCS HB 2171**, as amended, was ordered perfected and printed.

HCS HB 2177, HB 2290, HCS HB 2369, HCS HB 2389, and HB 2544 were placed on the Informal Calendar.

HB 2571, relating to the division of finance, was taken up by Representative Owen.

Representative Owen offered House Amendment No. 1.

House Amendment No. 1

AMEND House Bill No. 2571, Page 1, In the Title, Line 4, by deleting the phrase "the division of finance" and inserting in lieu thereof "financial services"; and

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

On motion of Representative Owen, **House Amendment No. 1** was adopted.

Representative Pike offered House Amendment No. 2.

House Amendment No. 2

AMEND House Bill No. 2571, Page 15, Section 408.500, Line 61, by inserting after all of said section and line the following:

- "574.105. 1. As used in this section, the following terms mean:
- (1) "Conducts", initiating, concluding or participating in initiating or concluding a transaction;
- (2) "Criminal activity", any act or activity constituting an offense punishable as a felony pursuant to the laws of Missouri or the United States;
 - (3) ["Currency", currency and coin of the United States;
- (4) "Currency transaction", a transaction involving the physical transfer of currency from one person to another. A transaction which is a transfer of funds by means of bank check, bank draft, wire transfer or other written order, and which does not include the physical transfer of currency is not a currency transaction]
- "Cryptocurrency", a digital currency in which transactions are verified and records are maintained by a decentralized system using cryptography;
 - (4) "Financial transaction", a transaction:
 - (a) Involving:
 - a. The movement of funds by wire or other means, including blockchain;
 - b. One or more monetary instruments; or
 - c. The transfer of title to any real property, vehicle, vessel, or aircraft; or
 - (b) Involving the use of a financial institution as defined under 31 U.S.C. Section 5312, as amended;
 - (5) "Monetary instruments":
- (a) Currency and coin of the United States or of any other country, cryptocurrency, travelers' checks, personal checks, bank checks, bank wires, or money orders; or
- (b) Investment securities or negotiable instruments, in bearer form or otherwise in such form that title thereto passes upon delivery;
- [(5)] (6) "Person", natural persons, partnerships, trusts, estates, associations, corporations and all entities cognizable as legal personalities;
- (7) "Transaction", a purchase, sale, loan, pledge, gift, transfer, delivery, or other disposition, and with respect to a financial institution includes a deposit; withdrawal; transfer between accounts; exchange of

currency; loan; extension of credit; purchase or sale of any stock, bond, certificate of deposit, or other monetary instrument; use of a safe deposit box; or any other payment, transfer, or delivery by, through, or to a financial institution, by whatever means effected.

- 2. A person commits the offense of money laundering if he or she:
- (1) Conducts or attempts to conduct a [currency] financial transaction with the purpose to promote or aid the carrying on of criminal activity; or
- (2) Conducts or attempts to conduct a [currency] financial transaction with the purpose to conceal or disguise in whole or in part the nature, location, source, ownership or control of the proceeds of criminal activity; or
- (3) Conducts or attempts to conduct a [eurreney] **financial** transaction with the purpose to avoid [eurreney] **financial** transaction reporting requirements under federal law; or
- (4) Conducts or attempts to conduct a [currency] financial transaction with the purpose to promote or aid the carrying on of criminal activity for the purpose of furthering or making a terrorist threat or act.
- 3. The offense of money laundering is a class B felony and in addition to penalties otherwise provided by law, a fine of not more than five hundred thousand dollars or twice the amount involved in the transaction, whichever is greater, may be assessed."; and

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

On motion of Representative Pike, **House Amendment No. 2** was adopted.

Representative O'Donnell offered House Amendment No. 3.

House Amendment No. 3

AMEND House Bill No. 2571, Page 1, Section A, Line 5, by inserting after all of said section and line the following:

"285.1000. For purposes of sections 285.1000 to 285.1055, the following terms shall mean:

- (1) "Administrative fund" or "Missouri workplace retirement savings administrative fund", the Missouri workplace retirement savings administrative fund described in section 285.1045;
 - (2) "Board", the Missouri workplace retirement savings board established under section 285.1005;
- (3) "Eligible employee", an individual who is employed by a participating employer, who has wages or other compensation that is allocable to the state, and who is eighteen years of age or older. "Eligible employee" shall not include any of the following:
 - (a) Any employee covered under the federal Railway Labor Act, 45 U.S.C. Section 151;
- (b) Any employee on whose behalf an employer makes contributions to a multiemployer pension trust fund under 29 U.S.C. Section 186; or
 - (c) Any individual who is an employee of:
 - a. The federal government;
 - b. Any state government in the United States; or
 - c. Any county, municipal corporation, or political subdivision of any state in the United States;
- (4) "Eligible employer", a person or entity engaged in a business, industry, profession, trade, or other enterprise in the state of Missouri, whether for-profit or not-for-profit, provided that such a person or entity employs no more than fifty employees. A person or entity who qualifies as an eligible employer but who later employs more than fifty employees shall be permitted to remain an eligible employer for a period of five years beginning on the date on which the person or entity first employs more than fifty employees. After such five-year period has ended, the person or entity shall immediately cease to qualify as an eligible employer and shall be prohibited from further participation in the plan. For purposes of this subdivision, an eligible employer shall not include:
 - (a) The federal government;
 - (b) The state of Missouri;
 - (c) Any county, municipal corporation, or political subdivision of the state of Missouri; or
- (d) An employer that maintains a specified tax-favored retirement plan for its employees or that has effectively done so in form and operation at any time within the current or two preceding calendar years. If an employer does not maintain a specified tax-favored retirement plan for a portion of a calendar year

ending on or after the effective date of sections 285.1000 to 285.1055 and adopts such a plan effective for the remainder of that calendar year, the employer shall not be treated as an eligible employer for that remainder of the year;

- (5) "ERISA", the Employee Retirement Income Security Act of 1974, as amended, 29 U.S.C. Section 1001 et seq.;
 - (6) "Internal Revenue Code", the Internal Revenue Code of 1986, as amended;
- (7) "Participant", an eligible employee or other individual who has a balance credited to his or her account under the plan;
- (8) "Participating employer", an eligible employer that is participating in the plan provided for by sections 285.1000 to 285.1055;
- (9) "Plan" or "Missouri workplace retirement savings plan", the multiple-employer retirement savings plan established by sections 285.1000 to 285.1055, which shall be treated as a single plan under Title I of ERISA and is described in sections 401(a), 401(k), and 413(c) of the Internal Revenue Code, in which multiple employers may choose to participate regardless of whether any relationship exists between and among the employers other than their participation in the plan. Based on the context, the term "plan" may also refer to multiple plans if multiple plans are established under sections 285.1000 to 285.1055;
- (10) "Self-employed individual", an individual who is eighteen years of age or older, is self-employed, and has self-employment income or other compensation from self-employment that is allocable to the state of Missouri;
- (11) "Specified tax-favored retirement plan", a retirement plan that is tax-qualified under, or is described in and satisfies the requirements of, section 401(a), 401(k), 403(a), 403(b), 408(k)(Simplified Employee Pension), or 408(p)(SIMPLE-IRA) of the Internal Revenue Code;
- (12) "Total fees and expenses", all fees, costs, and expenses including, but not limited to, administrative expenses, investment expenses, investment advice expenses, accounting costs, actuarial costs, legal costs, marketing expenses, education expenses, trading costs, insurance annuitization costs, and other miscellaneous costs:
 - (13) "Trust", the trust in which the assets of the plan are held.
- 285.1005. 1. The "Missouri Workplace Retirement Savings Board" is hereby established in the office of the state treasurer.
- 2. The board shall consist of the following members, with the state treasurer, or his or her designee, serving as chair:
 - (1) The state treasurer, or his or her designee;
- (2) An individual who has a favorable reputation for skill, knowledge, and experience in the field of retirement savings and investments, to be appointed by the governor with the advice and consent of the senate;
- (3) An individual who has a favorable reputation for skill, knowledge, and experience relating to small business, to be appointed by the governor with the advice and consent of the senate;
- (4) An individual who is a representative of an association representing employees or who has a favorable reputation for skill, knowledge, and experience in the interests of employees in retirement savings, to be appointed by the speaker of the house of representatives;
- (5) An individual who has a favorable reputation for skill, knowledge, and experience in the interests of employers in retirement savings, to be appointed by the president pro tempore of the senate;
- (6) A retired individual to be a representative of the interests of retirees, to be appointed by the speaker of the house of representatives;
- (7) An individual who has a favorable reputation for skill, knowledge, and experience in retirement investment products or retirement plan designs, to be appointed by the president pro tempore of the senate;
- (8) A member of the house of representatives to be appointed by the speaker of the house of representatives; and
 - (9) A member of the senate to be appointed by the president pro tempore of the senate.

At least one of the members described in subdivisions (4), (6), and (8) and one of the members described in subdivisions (5), (7), and (9) of this subsection must be a member of the minority party.

3. The governor, the president pro tempore of the senate, and the speaker of the house of representatives shall make the respective initial appointments to the board for terms of office beginning on January 1, 2023.

- 4. Members of the board appointed by the governor, the president pro tempore of the senate, and the speaker of the house of representatives shall serve at the pleasure of the appointing authority.
- 5. The term of office of each member of the board shall be four years. Any member is eligible to be reappointed. If there is a vacancy for any reason, the appropriate appointing authority shall make an appointment, to become immediately effective, for the unexpired term.
- 6. All members of the board shall serve without compensation and shall be reimbursed from the administrative fund for necessary travel expenses incurred in carrying out the duties of the board.
- 7. A majority of the voting members of the board shall constitute a quorum for the transaction of business.
- 285.1010. 1. The board, subject to the authority granted under sections 285.1000 to 285.1055, shall design, develop, and implement the plan, and to that end, may conduct market, legal, and feasibility analyses.
- 2. The members of the board shall be fiduciaries of the plan under ERISA, and the board shall have the following powers, authorities, and duties:
- (1) To establish, implement, and maintain the plan, in each case acting on behalf of the state of Missouri, including, in its discretion, more than one plan;
- (2) To cause the plan, trust, and arrangements and accounts established under the plan to be designed, established, and operated:
 - (a) In accordance with best practices for retirement savings vehicles;
- (b) To encourage participation, saving, sound investment practices, and appropriate selection of default investments;
 - (c) To maximize simplicity and ease of administration for eligible employers;
 - (d) To minimize costs, including by collective investment and economies of scale; and
 - (e) To promote portability of benefits;
- (3) To arrange for collective, common, and pooled investment of assets of the plan and trust, including investments in conjunction with other funds with which assets are permitted to be collectively invested, to save costs through efficiencies and economies of scale;
- (4) To develop and disseminate educational information designed to educate participants and citizens about the benefits of planning and saving for retirement and to help participants and citizens decide the level of participation and savings strategies that may be appropriate, including information in furtherance of financial capability and financial literacy;
- (5) To adopt rules and regulations necessary or advisable for the implementation of sections 285.1000 to 285.1055 and the administration and operation of the plan consistent with the Internal Revenue Code and regulations thereunder, including to ensure that the plan satisfies all criteria for favorable federal tax-qualified treatment and complies, to the extent necessary, with ERISA and any other applicable federal or Missouri law. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2022, shall be invalid and void;
- (6) To arrange for and facilitate compliance by the plan or arrangements established thereunder with all applicable requirements for the plan under the Internal Revenue Code, ERISA, and any other applicable federal or Missouri law and accounting requirements, and to provide or arrange for assistance to eligible employers, eligible employees, and self-employed individuals in complying with applicable law and tax-related requirements in a cost-effective manner. The board may establish any processes deemed reasonably necessary or advisable to verify whether a person or entity is an eligible employer, including reference to online data and possible use of questions in employer tax filings;
- (7) To employ or retain a plan administrator; executive director; staff; trustee; record-keeper; investment managers; investment advisors; and other administrative, professional, and expert advisors and service providers, none of whom shall be members of the board and all of whom shall serve at the pleasure of the board, which shall determine their duties and compensation. The board may authorize the executive director and other officials to oversee requests for proposals or other public competitions and enter into contracts on behalf of the board or conduct any business necessary for the efficient operation of the plan or the board;
- (8) To establish procedures for the timely and fair resolution of participant and other disputes related to accounts or program operation and, if necessary, determine the eligibility of an employer, employee, or other individual to participate in the plan;

- (9) To develop and implement an investment policy that defines the plan's investment objectives, consistent with the objectives of the plan, and that provides for policies and procedures consistent with those investment objectives;
- (10) (a) To designate appropriate default investments that include a mix of asset classes, such as target date and balanced funds;
 - (b) To seek to minimize participant fees and expenses of investment and administration;
- (c) To strive to design and implement investment options available to holders of accounts established as part of the plan and other plan features that are intended to achieve maximum possible income replacement balanced with an appropriate level of risk, consistent with the investment objectives under the investment policy. The investment options may encompass a range of risk and return opportunities and allow for a rate of return commensurate with an appropriate level of risk in view of the investment objectives under the policy. The menu of investment options shall be determined taking into account the nature and objectives of the plan, the desirability of limiting investment choices under the plan to a reasonable number, based on behavioral research findings, and the extensive investment choices available to participants in the event that funds roll over to an individual retirement account (IRA) outside the program; and
- (d) In accordance with subdivision (7) of this subsection, the board, to the extent it deems necessary or advisable, in carrying out its responsibilities and exercising its powers under sections 285.1000 to 285.1055, shall employ or retain appropriate entities or personnel to assist or advise it or to whom to delegate the carrying out of such responsibilities and exercising of such powers;
- (11) To discharge its duties and see that the members of the board discharge their duties with respect to the plan solely in the interests of the participants as follows:
- (a) For the exclusive purpose of providing benefits to participants and defraying reasonable expenses of administering the plan; and
- (b) With the care, skill, prudence, and diligence under the circumstances then prevailing that a prudent person acting in a like capacity and familiar with those matters would use in the conduct of an enterprise of a like character and with like aims;
- (12) To cause expenses incurred to initiate, implement, maintain, and administer the plan to be paid from contributions to, or investment returns or assets of the plan or other moneys collected by or for the plan or pursuant to arrangements established under the plan to the extent permitted under federal and Missouri law;
- (13) To collect application, account, or administrative fees and to accept any grants, gifts, legislative appropriations, loans, and other moneys from the state of Missouri; any unit of federal, state, or local government; or any other person, firm, or entity to defray the costs of administering and operating the plan;
- (14) To make and enter into competitively procured contracts, agreements, or arrangements with; to collaborate and cooperate with; and to retain, employ, and contract with or for any of the following to the extent necessary or desirable for the effective and efficient design, implementation, and administration of the plan consistent with the purposes set forth in sections 285.1000 to 285.1055 and to maximize outreach to eligible employers and eligible employees:
- (a) Services of private and public financial institutions, depositories, consultants, actuaries, counsel, auditors, investment advisors, investment administrators, investment management firms, other investment firms, third-party administrators, other professionals and service providers, and state public retirement systems;
 - (b) Research, technical, financial, administrative, and other services; and
 - (c) Services of other state agencies to assist the board in the exercise of its powers and duties;
- (15) To develop and implement an outreach plan to gain input and disseminate information regarding the plan and retirement savings in general;
 - (16) To cause moneys to be held and invested and reinvested under the plan;
 - (17) To ensure that all contributions under the plan shall be used only to:
 - (a) Pay benefits to participants under the plan;
 - (b) Pay the costs of administering the plan; and
- (c) Make investments for the benefit of the plan, and ensure that no assets of the plan or trust are transferred to the general revenue fund or to any other fund of the state or are otherwise encumbered or used for any purpose other than those specified in this paragraph or section 285.1045;
- (18) To make provisions for the payment of costs of administration and operation of the program and trust;

- (19) To evaluate the need for and procure as needed insurance against any and all loss in connection with the property, assets, or activities of the program, including fiduciary liability coverage;
 - (20) To evaluate the need for and procure as needed pooled private insurance;
- (21) To indemnify, including procurement of insurance as needed for this purpose, each member of the board from personal loss or liability resulting from a member's action or inaction as a member of the board and as a fiduciary;
- (22) To collaborate with and evaluate the role of financial advisors or other financial professionals, including in assisting and providing guidance for covered employees; and
- (23) To carry out the powers and duties of the program under sections 285.1000 to 285.1055 and exercise any and all other powers as are appropriate to effect the purposes, objectives, and provisions of such sections pertaining to the program.
 - 3. A board member, program administrator, or other staff of the board shall not:
- (1) Directly or indirectly, have any interest in the making of any investment under the program or in any gains or profits accruing from any such investment;
- (2) Borrow any program-related funds or deposits, or use any such funds or deposits in any manner, for himself or herself or as an agent or partner of others; or
 - (3) Become an endorser, surety, or obligor on investments made under the program.
 - 4. Each board member shall be subject to the provisions of sections 105.452 and 105.454.
- 285.1015. 1. The board shall, consistent with federal law and regulation, adopt and implement the plan, which shall remain in compliance with federal law and regulations once implemented and shall be called the "Missouri Workplace Retirement Savings Plan".
- 2. In accordance with terms and conditions specified and regulations promulgated by the board, the plan shall:
 - (1) Be set forth in documents prescribing the terms and conditions of the plan;
 - (2) Be available on a voluntary basis to eligible employers and self-employed individuals;
- (3) Allow all eligible employees who choose to participate in the plan after providing appropriate written notice to opt in;
 - (4) Enroll self-employed individuals who wish to participate;
 - (5) Provide participants the option to terminate their participation at any time;
 - (6) Allow voluntary pre-tax or designated Roth 401(k) contributions;
 - (7) Allow voluntary employer contributions;
 - (8) Be overseen by the board and its designees;
- (9) Be administered and managed by one or more trustees, other fiduciaries, custodians, third-party administrators, investment managers, record-keepers, or other service providers;
- (10) An eligible employee may opt-in to contribute a minimum of one percent or any percentage, up to the maximum, in increments of one-half of one percent, of his or her salary or wages to the plan, or may at a later date elect to opt out of the plan or may contribute at a higher or lower rate, expressed as a percentage of salary or wages;
- (11) Provide on a uniform basis, if and when the board so determines, in its discretion, for an increase of each participant's contribution rate, by a minimum increment of one-half of one percent of salary or wages per year, for each additional year the participant is employed or is participating in the plan up to the maximum percentage of such participant's salary or wages that may be contributed to the plan under federal law. Any such increases shall apply to participants, as determined by the board, by default or only if initiated by affirmative participant election;
- (12) Provide for direct deposit of contributions into investments under the plan. To the extent consistent with ERISA, the investment alternatives under the plan shall be limited to an automatic investment for participants who do not actively and affirmatively elect a particular investment option, which unless the board provides otherwise, shall be a diversified target date fund, including a series of such diversified funds to apply to different participants depending on their choice or their target retirement dates, a principal-protected option, and up to four additional investment alternatives as may be selected by the board in its discretion. To the extent consistent with ERISA, the investment options may, at the discretion of the board, include a principal-protection fund as a temporary "security corridor" option that applies as the sole initial investment before participants may choose other investments or as the initial default investment for a specified period of time or up to a specified dollar amount of contributions or account balance;
 - (13) Be professionally managed;

- (14) Provide for reports on the status of each participant's account to be provided to each participant at least annually and make best efforts to provide participants frequent or continual online access to information on the status of their accounts;
- (15) When possible and practicable, use existing employer and public infrastructure to facilitate contributions, record keeping, and outreach and use pooled or collective investment arrangements;
- (16) Provide that each account holder owns the contributions to or earnings on amounts contributed to his or her account under the plan and that the state and employers have no proprietary interest in those contributions or earnings;
 - (17) Be designed and implemented in a manner consistent with federal law to the extent that it applies;
- (18) Make provisions for the participation in the plan of individuals who are not employees, if allowed under federal law;
- (19) Establish rules and procedures governing the distribution of funds from the plan, including such distributions as may be permitted or required by the plan and any applicable provisions of ERISA, the tax-qualification rules, and the other tax laws, with the objectives of maximizing financial security in retirement, protecting spousal rights, and assisting participants to effectively manage the decumulation of their savings and to receive payment of their benefits under the plan. The board shall have the authority, in its discretion, to provide for one or more reasonably priced distribution options to provide a source of fixed regular retirement income, including income for life or for the participant's life expectancy, or for joint lives and life expectancies, as applicable;
- (20) Establish rules and procedures promoting portability of benefits, including the ability to make taxfree roll-overs or transfers to and from the plan, provided that any roll-over is initiated by participants; and
- (21) Encourage choices by employers in the state to adopt a specified tax-favored retirement plan, including the plan.

285.1020. The board shall adopt rules to implement the plan that:

- (1) Establish the processes for enrollment and contributions under the plan, including withholding by participating employers of employee payroll deduction contributions from wages and remittance for deposit to the plan; voluntary contributions by others, including self-employed individuals and independent contractors, through payroll deduction or otherwise; the making of default contributions using default investments; and participant selection of alternative contribution rates or amounts and alternative investments from among the options offered under the plan;
- (2) Conduct outreach to individuals, employers, other stakeholders, and the public regarding the plan. The rules shall specify the contents, frequency, timing, and means of required disclosures from the plan to eligible employees, participants, and self-employed individuals, eligible employers, participating employers, and other interested parties. These disclosures shall include, but not be limited to:
 - (a) The benefits associated with tax-favored retirement saving;
 - (b) The potential advantages and disadvantages associated with participating in the plan;
 - (c) Instructions for enrolling, making contributions, and opting out of participation;
- (d) The potential availability of a saver's tax credit, including the eligibility conditions for the credit and instructions on how to claim it;
- (e) A disclaimer that employees seeking tax, investment, or other financial advice should contact appropriate professional advisors, and that participating employers are not in a position to provide such advice and are not liable for decisions individuals make in relation to the plan;
- (f) The potential implications of account balances under the plan for the application of asset limits under certain public assistance programs;
- (g) A disclaimer that the account owner is solely responsible for investment performance, including market gains and losses, and that plan accounts and rates of return are not guaranteed by any employer, the state, the board, any board member or state official, or the plan;
- (h) Any additional information about retirement and saving and other information designed to promote financial literacy and capability, which may take the form of links to, or explanations of how to obtain, such information; and
 - (i) Instructions on how to obtain additional information about the plan; and
- (3) Ensure that the assets of the trust and plan shall at all times be preserved, invested, and expended only for the purposes set forth in sections 285.1000 to 285.1055, and that no property rights therein shall exist in favor of the state, except as provided under section 285.1045.

285.1025. An eligible employer, a participating employer, or other employer is not and shall not be liable for or bear responsibility for:

- (1) An employee's decision to participate in or opt out of the plan;
- (2) An employee's decision as to which investments to choose;
- (3) Participants' or the board's investment decisions;
- (4) The administration, investment, investment returns, or investment performance of the plan, including without limitation any interest rate or other rate of return on any contribution or account balance, provided that the eligible employer, participating employer, or other employer is not involved in the administration or investment of the plan;
 - (5) The plan design or the benefits paid to participants; or
- (6) Any loss, failure to realize any gain, or any other adverse consequences, including without limitation any adverse tax consequences or loss of favorable tax treatment, public assistance, or other benefits, incurred by any person as a result of participating in the plan.

285.1030. 1. The state of Missouri; the board; each member of the board; any other state official, state board, commission, and agency; any member, officer, and employee thereof; and the plan:

- (1) Shall not guarantee any interest rate or other rate of return on or investment performance of any contribution or account balance; and
- (2) Shall not be liable or responsible for any loss, deficiency, failure to realize any gain, or any other adverse consequences, including without limitation any adverse tax consequences or loss of favorable tax treatment, public assistance, or other benefits, incurred by any person as a result of participating in the plan.
- 2. The debts, contracts, and obligations of the plan or the board are not the debts, contracts, and obligations of the state, and neither the faith and credit nor the taxing power of the state is pledged directly or indirectly to the payment of the debts, contracts, and obligations of the plan or the board.
- 3. Nothing in sections 285.1000 to 285.1055 shall be construed to guarantee any interest rate or other rate of return on or investment performance of any contribution or account balance.
- 285.1035. 1. Individual account information relating to accounts under the plan and relating to individual participants including, but not limited to, names, addresses, telephone numbers, email addresses, personal identification information, investments, contributions, and earnings shall be confidential and shall be maintained as confidential, provided that such information may be disclosed:
- (1) To the extent necessary to administer the plan in a manner consistent with sections 285.1000 to 285.1055, ERISA, the Internal Revenue Code, or any other federal or Missouri law; or
- (2) If the individual who provides the information or who is the subject of the information expressly agrees in writing to the disclosure of the information.
- 2. Information required to be confidential under subsection 1 of this section shall be considered a "closed record" as that term is defined in section 610.010.

285.1040. The board may enter into an intergovernmental agreement or memorandum of understanding with the state of Missouri and any agency thereof to receive outreach, technical assistance, enforcement and compliance services, collection or dissemination of information pertinent to the plan, subject to such obligations of confidentiality as may be agreed or required by law, or other services or assistance. The state of Missouri and any agency thereof that enters into such agreements or memoranda of understanding shall collaborate to provide the outreach, assistance, information, and compliance or other services or assistance to the board. The memoranda of understanding may cover the sharing of costs incurred in gathering and disseminating information and the reimbursement of costs for any enforcement activities or assistance.

- 285.1045. 1. There is hereby created in the state treasury the "Missouri Workplace Retirement Savings Administrative Fund", which shall consist of moneys collected under this section. The state treasurer shall be custodian of the fund. In accordance with sections 30.170 and 30.180, the state treasurer may approve disbursements. Subject to appropriation, moneys in the fund shall be distributed by the state treasurer solely for the administration of sections 285.1000 to 285.1055.
- 2. Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund.
- 3. The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.
 - 4. The Missouri workplace retirement savings administrative fund shall consist of:
 - (1) Moneys appropriated to the administrative fund by the general assembly;

- (2) Moneys transferred to the administrative fund from the federal government, other state agencies, or local governments;
- (3) Moneys from the payment of application, account, administrative, or other fees and the payment of other moneys due to the board:
 - (4) Any gifts, donations, or grants made to the state of Missouri for deposit in the administrative fund;
- (5) Moneys collected for the administrative fund from contributions to, or investment returns or assets of, the plan or other moneys collected by or for the plan or pursuant to arrangements established under the plan to the extent permitted under federal and Missouri law; and
 - (6) Earnings on moneys in the administrative fund.
- 5. To the extent consistent with ERISA, the tax qualification rules, and other federal law; the board shall accept any grants, gifts, appropriations, or other moneys from the state; any unit of federal, state, or local government; or any other person, firm, partnership, corporation, or other entity solely for deposit into the administrative fund, whether for investment or administrative expenses.
- 6. To enable or facilitate the start-up and continuing operation, maintenance, administration, and management of the program until the plan accumulates sufficient balances and can generate sufficient funding through fees assessed on program accounts for the plan to become financially self-sustaining:
- (1) The board may borrow from the state of Missouri; any unit of federal, state, or local government; or any other person, firm, partnership, corporation, or other entity working capital funds and other funds as may be necessary for this purpose, provided that such funds are borrowed in the name of the plan and board only and that any such borrowings shall be payable solely from the revenues of the plan; and
- (2) The board may enter into long-term procurement contracts with one or more financial providers that provide a fee structure that would assist the plan in avoiding or minimizing the need to borrow or to rely upon general assets of the state.
- 7. Subject to appropriation, the state of Missouri may pay administrative costs associated with the creation, maintenance, operation, and management of the plan and trust until sufficient assets are available in the administrative fund for that purpose. Thereafter, all administrative costs of the administrative fund, including any repayment of start-up funds provided by the state of Missouri, shall be repaid only out of moneys on deposit therein. However, private funds or federal funding received in order to implement the program until the administrative fund is self-sustaining shall not be repaid unless those funds were offered contingent upon the promise of such repayment.
- 8. The board may use the moneys in the administrative fund solely to pay the administrative costs and expenses of the plan and the administrative costs and expenses the board incurs in the performance of its duties under sections 285.1000 to 285.1055.
- 285.1050. 1. The board shall keep an accurate account of all the activities, operations, receipts, and expenditures of the plan, the trust, and the board. Each year, a full audit of the books and accounts of the board pertaining to those activities, operations, receipts and expenditures, personnel, services, or facilities shall be conducted by a certified public accountant and shall include, but not be limited to, direct and indirect costs attributable to the use of outside consultants, independent contractors, and any other persons who are not state employees for the administration of the plan. For the purposes of the audit, the auditors shall have access to the properties and records of the plan and board and may prescribe methods of accounting and the rendering of periodic reports in relation to projects undertaken by the plan.
- 2. By August first of each year, the board shall submit to the governor, the state treasurer, the president pro tempore of the senate, and the speaker of the house of representatives a public report on the operation of the plan and trust and activities of the board, including an audited financial report, prepared in accordance with generally accepted accounting principles, detailing the activities, operations, receipts, and expenditures of the plan and board during the preceding calendar year. The report shall also include a summary of the benefits provided by the plan, the number of participants, the names of the participating employers, the contribution formulas and amounts of contributions made by participants and by each participating employer, the withdrawals, the account balances, investments, investment returns, and fees and expenses associated with the investments and with the administration of the plan, projected activities of the plan for the current calendar year, and any other information regarding the plan and its operations that the board may determine to provide.
- 285.1055. 1. The board shall establish the plan so that individuals are able to begin contributing under the plan no later than September 1, 2024.

2. The board may, in its discretion, phase in the plan so that the ability to contribute first applies on different dates for different classes of individuals, including employees of employers of different sizes or types and individuals who are not employees; provided that, any such staged or phased-in implementation schedule shall be substantially completed no later than September 1, 2024."; and

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

On motion of Representative O'Donnell, House Amendment No. 3 was adopted.

Representative Thompson offered House Amendment No. 4.

House Amendment No. 4

AMEND House Bill No. 2571, Page 15, Section 408.500, Line 61, by inserting after all of said section and line the following:

"569.010. As used in this chapter the following terms mean:

- (1) "Cave or cavern", any naturally occurring subterranean cavity enterable by a person including, without limitation, a pit, pothole, natural well, grotto, and tunnel, whether or not the opening has a natural entrance;
- (2) "Enter unlawfully or remain unlawfully", a person enters or remains in or upon premises when he or she is not licensed or privileged to do so. A person who, regardless of his or her purpose, enters or remains in or upon premises which are at the time open to the public does so with license and privilege unless he or she defies a lawful order not to enter or remain, personally communicated to him or her by the owner of such premises or by other authorized person. A license or privilege to enter or remain in a building which is only partly open to the public is not a license or privilege to enter or remain in that part of the building which is not open to the public;
- (3) "Nuclear power plant", a power generating facility that produces electricity by means of a nuclear reactor owned by a utility or a consortium utility. Nuclear power plant shall be limited to property within the structure or fenced yard, as defined in section 563.011;
- (4) "To tamper", to interfere with something improperly, to meddle with it, displace it, make unwarranted alterations in its existing condition, or to deprive, temporarily, the owner or possessor of that thing;
- (5) "Teller machine", an automated teller machine (ATM) or interactive teller machine (ITM) is a remote computer terminal owned or controlled by a financial institution or a private business that allows individuals to obtain financial services including obtaining cash, transferring or transmitting money or digital currencies, payment of bills, loading money or digital currency to a payment card or other device without physical in-person assistance from another person. "Teller machine" does not include personally owned electronic devices used to access financial services;
- (6) "Utility", an enterprise which provides gas, electric, steam, water, sewage disposal, or communication, video, internet, or voice over internet protocol services, and any common carrier. It may be either publicly or privately owned or operated.
 - 569.100. 1. A person commits the offense of property damage in the first degree if such person:
 - (1) Knowingly damages property of another to an extent exceeding seven hundred fifty dollars; or
- (2) Damages property to an extent exceeding seven hundred fifty dollars for the purpose of defrauding an insurer; [or]
- (3) Knowingly damages a motor vehicle of another and the damage occurs while such person is making entry into the motor vehicle for the purpose of committing the crime of stealing therein or the damage occurs while such person is committing the crime of stealing within the motor vehicle; or
 - (4) Knowingly damages, modifies, or destroys a teller machine or otherwise makes it inoperable.
- 2. The offense of property damage in the first degree committed under subdivision (1) or (2) of subsection 1 of this section is a class E felony, unless the offense of property damage in the first degree was committed under subdivision (1) of subsection 1 of this section and the victim was intentionally targeted as a law enforcement officer, as defined in section 556.061, or the victim is targeted because he or she is a relative within the second degree of consanguinity or affinity to a law enforcement officer, in which case it is a class D felony. The offense of property damage in the first degree committed under subdivision (3) of subsection 1 of this section is a class D felony unless committed as a second or subsequent violation of subdivision (3) of subsection 1 of this section in which case it is a class B felony. The offense of property damage in the first degree committed under subdivision (4) of

subsection 1 of this section is a class D felony unless committed for the purpose of executing any scheme or artifice to defraud or obtain any property, the value of which exceeds seven hundred fifty dollars or the damage to the teller machine exceeds seven hundred fifty dollars in which case it is a class C felony. If the offense of property damage in the first degree committed under subdivision (4) of subsection 1 of this section is committed to obtain the personal financial credentials of another person or unless committed as a second or subsequent violation of subdivision (4) of subsection 1 of this section in which case it is a class B felony.

569.190. 1. A person commits the offense of tampering with a teller machine as defined under section 570.010 if he or she knowingly and without authorization or reasonable grounds to believe that he or she has authorization:

- (1) Modifies, destroys, damages, or takes a teller machine; or
- (2) Otherwise renders a teller machine inoperable.
- 2. The offense of tampering with a teller machine is a class D felony unless:
- (1) The offense is committed for the purpose of executing any scheme or artifice to defraud or obtain any property, the value of which is one thousand dollars or more, or to obtain the personal financial credentials of another person; or
 - (2) The damage to the teller machine is one thousand dollars or more,

in which case it is a class C felony.

570.010. As used in this chapter, the following terms mean:

- (1) "Adulterated", varying from the standard of composition or quality prescribed by statute or lawfully promulgated administrative regulations of this state lawfully filed, or if none, as set by commercial usage;
 - (2) "Appropriate", to take, obtain, use, transfer, conceal, retain or dispose;
- (3) "Check", a check or other similar sight order or any other form of presentment involving the transmission of account information for the payment of money;
 - (4) "Coercion", a threat, however communicated:
 - (a) To commit any offense; or
 - (b) To inflict physical injury in the future on the person threatened or another; or
 - (c) To accuse any person of any offense; or
 - (d) To expose any person to hatred, contempt or ridicule; or
 - (e) To harm the credit or business reputation of any person; or
 - (f) To take or withhold action as a public servant, or to cause a public servant to take or withhold action; or
- (g) To inflict any other harm which would not benefit the actor. A threat of accusation, lawsuit or other invocation of official action is justified and not coercion if the property sought to be obtained by virtue of such threat was honestly claimed as restitution or indemnification for harm done in the circumstances to which the accusation, exposure, lawsuit or other official action relates, or as compensation for property or lawful service. The defendant shall have the burden of injecting the issue of justification as to any threat;
- (5) "Credit device", a writing, card, code, number or other device purporting to evidence an undertaking to pay for property or services delivered or rendered to or upon the order of a designated person or bearer;
 - (6) "Dealer", a person in the business of buying and selling goods;
- (7) "Debit device", a writing, card, code, number or other device, other than a check, draft or similar paper instrument, by the use of which a person may initiate an electronic fund transfer, including but not limited to devices that enable electronic transfers of benefits to public assistance recipients;
- (8) "Deceit or deceive", making a representation which is false and which the actor does not believe to be true and upon which the victim relies, as to a matter of fact, law, value, intention or other state of mind, or concealing a material fact as to the terms of a contract or agreement. The term "deceit" does not, however, include falsity as to matters having no pecuniary significance, or puffing by statements unlikely to deceive ordinary persons in the group addressed. Deception as to the actor's intention to perform a promise shall not be inferred from the fact alone that he did not subsequently perform the promise;
 - (9) "Deprive":
 - (a) To withhold property from the owner permanently; or
 - (b) To restore property only upon payment of reward or other compensation; or
 - (c) To use or dispose of property in a manner that makes recovery of the property by the owner unlikely;
- (10) "Electronic benefits card" or "EBT card", a debit card used to access food stamps or cash benefits issued by the department of social services;

- (11) "Financial institution", a bank, trust company, savings and loan association, or credit union;
- (12) "Food stamps", the nutrition assistance program in Missouri that provides food and aid to low-income individuals who are in need of benefits to purchase food operated by the United States Department of Agriculture (USDA) in conjunction with the department of social services;
- (13) "Forcibly steals", a person, in the course of stealing, uses or threatens the immediate use of physical force upon another person for the purpose of:
- (a) Preventing or overcoming resistance to the taking of the property or to the retention thereof immediately after the taking; or
- (b) Compelling the owner of such property or another person to deliver up the property or to engage in other conduct which aids in the commission of the theft;
- (14) "Internet service", an interactive computer service or system or an information service, system, or access software provider that provides or enables computer access by multiple users to a computer server, and includes, but is not limited to, an information service, system, or access software provider that provides access to a network system commonly known as the internet, or any comparable system or service and also includes, but is not limited to, a world wide web page, newsgroup, message board, mailing list, or chat area on any interactive computer service or system or other online service;
 - (15) "Means of identification", anything used by a person as a means to uniquely distinguish himself or herself;
- (16) "Merchant", a person who deals in goods of the kind or otherwise by his or her occupation holds oneself out as having knowledge or skill peculiar to the practices or goods involved in the transaction or to whom such knowledge or skill may be attributed by his or her employment of an agent or broker or other intermediary who by his or her occupation holds oneself out as having such knowledge or skill;
- (17) "Mislabeled", varying from the standard of truth or disclosure in labeling prescribed by statute or lawfully promulgated administrative regulations of this state lawfully filed, or if none, as set by commercial usage; or represented as being another person's product, though otherwise accurately labeled as to quality and quantity;
- (18) "Pharmacy", any building, warehouse, physician's office, hospital, pharmaceutical house or other structure used in whole or in part for the sale, storage, or dispensing of any controlled substance as defined in chapter 195;
- (19) "Property", anything of value, whether real or personal, tangible or intangible, in possession or in action, and shall include but not be limited to the evidence of a debt actually executed but not delivered or issued as a valid instrument;
- (20) "Public assistance benefits", anything of value, including money, food, EBT cards, food stamps, commodities, clothing, utilities payments, shelter, drugs and medicine, materials, goods, and any service including institutional care, medical care, dental care, child care, psychiatric and psychological service, rehabilitation instruction, training, transitional assistance, or counseling, received by or paid on behalf of any person under chapters 198, 205, 207, 208, 209, and 660, or benefits, programs, and services provided or administered by the Missouri department of social services or any of its divisions;
- (21) "Services" includes transportation, telephone, electricity, gas, water, or other public service, cable television service, video service, voice over internet protocol service, or internet service, accommodation in hotels, restaurants or elsewhere, admission to exhibitions and use of vehicles;
- (22) "Stealing-related offense", federal and state violations of criminal statutes against stealing, robbery, or buying or receiving stolen property and shall also include municipal ordinances against the same if the offender was either represented by counsel or knowingly waived counsel in writing and the judge accepting the plea or making the findings was a licensed attorney at the time of the court proceedings;
- (23) "Teller machine", an automated teller machine (ATM) or interactive teller machine (ITM) that is a remote computer terminal or other device owned or controlled by a financial institution or a private business that allows individuals to obtain financial services, including obtaining cash, transferring or transmitting moneys or digital currencies, payment of bills, or loading moneys or digital currency to a payment card, without physical in-person assistance from another person. "Teller machine" does not include personally owned electronic devices used to access financial services;
- (24) "Video service", the provision of video programming provided through wireline facilities located at least in part in the public right-of-way without regard to delivery technology, including internet protocol technology whether provided as part of a tier, on demand, or a per-channel basis. This definition includes cable service as defined by 47 U.S.C. Section 522(6), but does not include any video programming provided by a commercial mobile service provider as "commercial mobile service" is defined in 47 U.S.C. Section 332(d), or any video programming provided solely as part of and via a service that enables users to access content, information, electronic mail, or other services offered over the public internet, and includes microwave television transmission, from a multipoint distribution service not capable of reception by conventional television receivers without the use of special equipment;

[(24)] (25) "Voice over internet protocol service", a service that:

- (a) Enables real-time, two-way voice communication;
- (b) Requires a broadband connection from the user's location;
- (c) Requires internet protocol-compatible customer premises equipment; and
- (d) Permits users generally to receive calls that originate on the public switched telephone network and to terminate calls to the public switched telephone network;
- [(25)] (26) "Writing" includes printing, any other method of recording information, money, coins, negotiable instruments, tokens, stamps, seals, credit cards, badges, trademarks and any other symbols of value, right, privilege or identification.
 - 570.030. 1. A person commits the offense of stealing if he or she:
- (1) Appropriates property or services of another with the purpose to deprive him or her thereof, either without his or her consent or by means of deceit or coercion;
- (2) Attempts to appropriate anhydrous ammonia or liquid nitrogen of another with the purpose to deprive him or her thereof, either without his or her consent or by means of deceit or coercion; or
- (3) For the purpose of depriving the owner of a lawful interest therein, receives, retains or disposes of property of another knowing that it has been stolen, or believing that it has been stolen.
- 2. The offense of stealing is a class A felony if the property appropriated consists of any of the following containing any amount of anhydrous ammonia: a tank truck, tank trailer, rail tank car, bulk storage tank, field nurse, field tank or field applicator.
 - 3. The offense of stealing is a class B felony if:
- (1) The property appropriated or attempted to be appropriated consists of any amount of anhydrous ammonia or liquid nitrogen;
- (2) The property consists of any animal considered livestock as the term livestock is defined in section 144.010, or any captive wildlife held under permit issued by the conservation commission, and the value of the animal or animals appropriated exceeds three thousand dollars and that person has previously been found guilty of appropriating any animal considered livestock or captive wildlife held under permit issued by the conservation commission. Notwithstanding any provision of law to the contrary, such person shall serve a minimum prison term of not less than eighty percent of his or her sentence before he or she is eligible for probation, parole, conditional release, or other early release by the department of corrections;
- (3) A person appropriates property consisting of a motor vehicle, watercraft, or aircraft, and that person has previously been found guilty of two stealing-related offenses committed on two separate occasions where such offenses occurred within ten years of the date of occurrence of the present offense;
- (4) The property appropriated or attempted to be appropriated consists of any animal considered livestock as the term is defined in section 144.010 if the value of the livestock exceeds ten thousand dollars; or
- (5) The property appropriated or attempted to be appropriated is owned by or in the custody of a financial institution and the property is taken or attempted to be taken physically from an individual person to deprive the owner or custodian of the property.
- 4. The offense of stealing is a class C felony if the value of the property or services appropriated is twenty-five thousand dollars or more or the property is a teller machine or the contents of a teller machine, including cash, regardless of the value or amount.
 - 5. The offense of stealing is a class D felony if:
 - (1) The value of the property or services appropriated is seven hundred fifty dollars or more;
 - (2) The offender physically takes the property appropriated from the person of the victim; or
 - (3) The property appropriated consists of:
 - (a) Any motor vehicle, watercraft or aircraft;
 - (b) Any will or unrecorded deed affecting real property;
 - (c) Any credit device, debit device or letter of credit;
 - (d) Any firearms;
 - (e) Any explosive weapon as defined in section 571.010;
- (f) Any United States national flag designed, intended and used for display on buildings or stationary flagstaffs in the open;
- (g) Any original copy of an act, bill or resolution, introduced or acted upon by the legislature of the state of Missouri;

- (h) Any pleading, notice, judgment or any other record or entry of any court of this state, any other state or of the United States;
 - (i) Any book of registration or list of voters required by chapter 115;
 - (j) Any animal considered livestock as that term is defined in section 144.010;
 - (k) Any live fish raised for commercial sale with a value of seventy-five dollars or more;
 - (l) Any captive wildlife held under permit issued by the conservation commission;
 - (m) Any controlled substance as defined by section 195.010;
 - (n) Ammonium nitrate;
- (o) Any wire, electrical transformer, or metallic wire associated with transmitting telecommunications, video, internet, or voice over internet protocol service, or any other device or pipe that is associated with conducting electricity or transporting natural gas or other combustible fuels; or
- (p) Any material appropriated with the intent to use such material to manufacture, compound, produce, prepare, test or analyze amphetamine or methamphetamine or any of their analogues.
 - 6. The offense of stealing is a class E felony if:
 - (1) The property appropriated is an animal;
 - (2) The property is a catalytic converter; or
- (3) A person has previously been found guilty of three stealing-related offenses committed on three separate occasions where such offenses occurred within ten years of the date of occurrence of the present offense.
- 7. The offense of stealing is a class D misdemeanor if the property is not of a type listed in subsection 2, 3, 5, or 6 of this section, the property appropriated has a value of less than one hundred fifty dollars, and the person has no previous findings of guilt for a stealing-related offense.
 - 8. The offense of stealing is a class A misdemeanor if no other penalty is specified in this section.
- 9. If a violation of this section is subject to enhanced punishment based on prior findings of guilt, such findings of guilt shall be pleaded and proven in the same manner as required by section 558.021.
- 10. The appropriation of any property or services of a type listed in subsection 2, 3, 5, or 6 of this section or of a value of seven hundred fifty dollars or more may be considered a separate felony and may be charged in separate counts.
- 11. The value of property or services appropriated pursuant to one scheme or course of conduct, whether from the same or several owners and whether at the same or different times, constitutes a single criminal episode and may be aggregated in determining the grade of the offense, except as set forth in subsection 10 of this section."; and

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

On motion of Representative Thompson, House Amendment No. 4 was adopted.

Representative Francis offered House Amendment No. 5.

House Amendment No. 5

AMEND House Bill No. 2571, Page 15, Section 408.500, Line 61, by inserting after all of said section and line the following:

- "427.300. 1. This section shall be known, and may be cited, as the "Commercial Financing Disclosure Law".
 - 2. For purposes of this section, the following terms mean:
- (1) "Accounts receivable purchase transaction", any transaction in which the business forwards or otherwise sells to the provider all or a portion of the business's accounts or payment intangibles at a discount to their expected value;
- (2) "Broker", any person or entity that, for compensation or the expectation of compensation, obtains a commercial financing product or an offer for a commercial financing product from a third party for a business located in this state;
- (3) "Business", an individual or group of individuals, sole proprietorship, corporation, limited liability company, trust, estate, cooperative, association, or limited or general partnership engaged in a business activity;

- (4) "Business purpose transaction", any transaction where the proceeds are provided to a business or are intended to be used to carry on a business and not for personal, family, or household purposes. For purposes of determining whether a transaction is a business purpose transaction, the provider may rely on any written statement of intended purpose signed by the business. The statement may be a separate statement or may be contained in an application, agreement, or other document signed by the business or the business owner or owners;
- (5) "Commercial financing product", any commercial loan, accounts receivable purchase transaction, commercial open-end credit plan or each to the extent the transaction is a business purpose transaction;
 - (6) "Commercial loan", a loan to a business, whether secured or unsecured;
- (7) "Commercial open-end credit plan", commercial financing extended by any provider under a plan in which:
 - (a) The provider reasonably contemplates repeat transactions; and
- (b) The amount of financing that may be extended to the business during the term of the plan, up to any limit set by the provider, is generally made available to the extent that any outstanding balance is repaid;
 - (8) "Depository institution", any of the following:
- (a) A bank, trust company, or industrial loan company doing business under the authority of, or in accordance with, a license, certificate, or charter issued by the United States, this state, or any other state, district, territory, or commonwealth of the United States that is authorized to transact business in this state;
- (b) A federally chartered savings and loan association, federal savings bank, or federal credit union that is authorized to transact business in this state; or
- (c) A savings and loan association, savings bank, or credit union organized under the laws of this or any other state that is authorized to transact business in this state;
- (9) "Provider", a person or entity that consummates more than five commercial financing products to a business located in this state in any calendar year. "Provider" also includes a person or entity that enters into a written agreement with a depository institution to arrange for the extension of a commercial financing product by the depository institution to a business via an online lending platform administered by the person or entity. The fact that a provider extends a specific offer for a commercial financing product on behalf of a depository institution shall not be construed to mean that the provider engaged in lending or financing or originated that loan or financing.
- 3. (1) A provider that consummates a commercial financing product shall disclose the terms of the commercial financing product as required by this section. The disclosures shall be provided at or before consummation of the transaction and, in the case of a commercial open-end credit plan, the disclosures shall also be provided for any disbursement of funds after consummation within fifteen days following the last day of the month in which the disbursement of funds occurred under the commercial open-end credit plan.
 - (2) A provider shall disclose the following in connection with each commercial financing product:
- (a) The total amount of funds provided to the business under the terms of the commercial financing product. This disclosure shall be labeled "Total Amount of Funds Provided";
- (b) The total amount of funds disbursed to the business under the terms of the commercial financing product, if less than the total amount of funds provided, as a result of any fees deducted or withheld at disbursement and any amount paid to a third party on behalf of the business. This disclosure shall be labeled "Total Amount of Funds Disbursed";
- (c) The total amount to be paid to the provider pursuant to the commercial financing product agreement. This disclosure shall be labeled "Total of Payments";
- (d) The total dollar cost of the commercial financing product under the terms of the agreement, derived by subtracting the total amount of funds provided from the total of payments. This calculation shall include any fees or charges deducted by the provider from the total amount of funds provided disclosure. This disclosure shall be labeled "Total Dollar Cost of Financing";
- (e) The manner, frequency, and amount of each payment. This disclosure shall be labeled "Payments". If the payments may vary, the provider shall instead disclose the manner, frequency, and the estimated amount of the initial payment labeled "Estimated Payments" and the commercial financing product agreement shall include a description of the methodology for calculating any variable payment and the circumstances when payments may vary;

- (f) A statement of whether there are any costs or discounts associated with prepayment of the commercial financing product including a reference to the paragraph in the agreement that creates the contractual rights of the parties related to prepayment. This disclosure shall be labeled "Prepayment"; and
- (g) A statement of whether any amount of the total amount of funds provided described under paragraph (a) of this subdivision are paid to a broker in connection with the commercial financing product and the amount of compensation.
 - 4. This section shall not apply to the following:
- (1) A provider that is a depository institution, or a subsidiary or service corporation of a depository institution, that is:
 - (a) Owned and controlled by a depository institution; and
 - (b) Regulated by a federal banking agency;
 - (2) A provider that is a lender regulated under the Farm Credit Act, 12 U.S.C. Section 2001 et seq.;
 - (3) A commercial financing product:
 - (a) That is secured by real property;
 - (b) That is a lease, as defined under section 400.2A-103; or
 - (c) That is a purchase-money obligation, as defined under section 400.9-103;
- (d) In which the recipient is a motor vehicle dealer or an affiliate of such a dealer or a vehicle rental company or an affiliate of such a company, pursuant to a commercial loan or commercial open-end credit plan of at least fifty thousand dollars;
- (e) Offered by a person in connection with the sale of products or services that such person manufactures, licenses, or distributes or whose parent company or any owned and controlled subsidiary thereof manufactures, licenses, or distributes; or
- (f) That is a factoring transaction, purchase, sale, advance, or similar transaction of accounts receivables owed to a health care provider because the health care provider treated a patient's personal injury;
- (4) A provider that is licensed as a money transmitter in accordance with a license, certificate, or charter issued by this state or any other state, district, territory, or commonwealth of the United States; or
- (5) A provider that consummates not more than five commercial financing products in this state in a twelve-month period.
- 5. (1) Any person or entity that violates any provision of this section shall be punished by a fine of five hundred dollars per incident, not to exceed twenty thousand dollars for all aggregated violations arising from the use of the transaction documentation or materials found to be in violation of this section. Any person or entity that violates any provision of this section after receiving written notice of a prior violation from the attorney general shall be punished by a fine of one thousand dollars per incident, not to exceed fifty thousand dollars for all aggregated violations arising from the use of the transaction documentation or materials found to be in violation of this section.
- (2) Violation of any provision of this section shall not affect the enforceability or validity of the underlying agreement.
- (3) This section shall not create a private right of action against any person or other entity based upon compliance or noncompliance with its provisions.
- (4) Authority to enforce compliance with this section is vested exclusively in the attorney general of this state."; and

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

Representative Mackey offered House Amendment No. 1 to House Amendment No. 5.

House Amendment No. 1 to House Amendment No. 5

AMEND House Amendment No. 5 to House Bill No. 2571, Page 3, Line 33, by deleting said line and inserting in lieu thereof the following:

"general of this state.

- 513.430. 1. The following property shall be exempt from attachment and execution to the extent of any person's interest therein:
- (1) Household furnishings, household goods, wearing apparel, appliances, books, animals, crops or musical instruments that are held primarily for personal, family or household use of such person or a dependent of such person, not to exceed three thousand dollars in value in the aggregate;
- (2) A wedding ring not to exceed one thousand five hundred dollars in value and other jewelry held primarily for the personal, family or household use of such person or a dependent of such person, not to exceed five hundred dollars in value in the aggregate;
 - (3) Any other property of any kind, not to exceed in value six hundred dollars in the aggregate;
- (4) Any implements or professional books or tools of the trade of such person or the trade of a dependent of such person not to exceed three thousand dollars in value in the aggregate;
 - (5) Any motor vehicles, not to exceed three thousand dollars in value in the aggregate;
- (6) Any mobile home used as the principal residence but not attached to real property in which the debtor has a fee interest, not to exceed five thousand dollars in value;
- (7) Any one or more unmatured life insurance contracts owned by such person, other than a credit life insurance contract, and up to fifteen thousand dollars of any matured life insurance proceeds for actual funeral, cremation, or burial expenses where the deceased is the spouse, child, or parent of the beneficiary;
- (8) The amount of any accrued dividend or interest under, or loan value of, any one or more unmatured life insurance contracts owned by such person under which the insured is such person or an individual of whom such person is a dependent; provided, however, that if proceedings under Title 11 of the United States Code are commenced by or against such person, the amount exempt in such proceedings shall not exceed in value one hundred fifty thousand dollars in the aggregate less any amount of property of such person transferred by the life insurance company or fraternal benefit society to itself in good faith if such transfer is to pay a premium or to carry out a nonforfeiture insurance option and is required to be so transferred automatically under a life insurance contract with such company or society that was entered into before commencement of such proceedings. No amount of any accrued dividend or interest under, or loan value of, any such life insurance contracts shall be exempt from any claim for child support. Notwithstanding anything to the contrary, no such amount shall be exempt in such proceedings under any such insurance contract which was purchased by such person within one year prior to the commencement of such proceedings;
 - (9) Professionally prescribed health aids for such person or a dependent of such person;
 - (10) Such person's right to receive:
 - (a) A Social Security benefit, unemployment compensation or a public assistance benefit;
 - (b) A veteran's benefit;
 - (c) A disability, illness or unemployment benefit;
 - (d) Alimony, support or separate maintenance, not to exceed seven hundred fifty dollars a month;
- (e) a. Any payment under a stock bonus plan, pension plan, disability or death benefit plan, profit-sharing plan, nonpublic retirement plan or any plan described, defined, or established pursuant to section 456.014, the person's right to a participant account in any deferred compensation program offered by the state of Missouri or any of its political subdivisions, or annuity or similar plan or contract on account of illness, disability, death, age or length of service, to the extent reasonably necessary for the support of such person and any dependent of such person unless:
- [a-] (i) Such plan or contract was established by or under the auspices of an insider that employed such person at the time such person's rights under such plan or contract arose;
 - [b.] (ii) Such payment is on account of age or length of service; and
- [e-] (iii) Such plan or contract does not qualify under Section 401(a), 403(a), 403(b), 408, 408A or 409 of the Internal Revenue Code of 1986, as amended, (26 U.S.C. Section 401(a), 403(a), 403(b), 408, 408A or 409)[-]. [except that] b. Notwithstanding the exemption provided in subparagraph a. of this paragraph, any such payment to any person shall be subject to attachment or execution pursuant to a qualified domestic relations order, as defined by Section 414(p) of the Internal Revenue Code of 1986 (26 U.S.C. Section 414(p)), as amended, issued by a court in any proceeding for dissolution of marriage or legal separation or a proceeding for disposition of property following dissolution of marriage by a court which lacked personal jurisdiction over the absent spouse or lacked jurisdiction to dispose of marital property at the time of the original judgment of dissolution;

- (f) Any money or assets, payable to a participant or beneficiary from, or any interest of any participant or beneficiary in, a retirement plan, profit-sharing plan, health savings plan, or similar plan, including an inherited account or plan, that is qualified under Section 401(a), 403(a), 403(b), 408, 408A or 409 of the Internal Revenue Code of 1986 (26 U.S.C. 401(a), 403(a), 403(b), 408, 408A, or 409), as amended, whether such participant's or beneficiary's interest arises by inheritance, designation, appointment, or otherwise, except as provided in this paragraph. Any plan or arrangement described in this paragraph shall not be exempt from the claim of an alternate payee under a qualified domestic relations order; however, the interest of any and all alternate payees under a qualified domestic relations order shall be exempt from any and all claims of any creditor, other than the state of Missouri through its department of social services. As used in this paragraph, the terms "alternate payee" and "qualified domestic relations order" have the meaning given to them in Section 414(p) of the Internal Revenue Code of 1986 (26 U.S.C. Section 414(p)), as amended. If proceedings under Title 11 of the United States Code are commenced by or against such person, no amount of funds shall be exempt in such proceedings under any such plan, contract, or trust which is fraudulent as defined in subsection 2 of section 428.024 and for the period such person participated within three years prior to the commencement of such proceedings. For the purposes of this section, when the fraudulently conveyed funds are recovered and after, such funds shall be deducted and then treated as though the funds had never been contributed to the plan, contract, or trust;
- (11) The debtor's right to receive, or property that is traceable to, a payment on account of the wrongful death of an individual of whom the debtor was a dependent, to the extent reasonably necessary for the support of the debtor and any dependent of the debtor;
- (12) Firearms, firearm accessories, and ammunition, not to exceed one thousand five hundred dollars in value in the aggregate;
- (13) Any moneys accruing to and deposited in individual savings accounts or individual deposit accounts under sections 166.400 to 166.456 or sections 166.500 to 166.529, subject to the following provisions:
 - (a) This subdivision shall apply to any proceeding that:
 - a. Is filed on or before January 1, 2022; or
 - b. Was filed before January 1, 2022, and is pending or on appeal after January 1, 2022;
- (b) Except as provided by paragraph (c) of this subdivision, if the designated beneficiary of an individual savings account or individual deposit account established under sections 166.400 to 166.456 or sections 166.500 to 166.529 is a lineal descendant of the account owner, all moneys in the account shall be exempt from any claims of creditors of the account owner or designated beneficiary;
 - (c) The provisions of paragraph (b) of this subdivision shall not apply to:
- a. Claims of any creditor of an account owner as to amounts contributed within a two-year period preceding the date of the filing of a bankruptcy petition under 11 U.S.C. Section 101 et seq., as amended; or
- b. Claims of any creditor of an account owner as to amounts contributed within a one-year period preceding an execution on judgment for such claims against the account owner.
- 2. Nothing in this section shall be interpreted to exempt from attachment or execution for a valid judicial or administrative order for the payment of child support or maintenance any money or assets, payable to a participant or beneficiary from, or any interest of any participant or beneficiary in, a retirement plan which is qualified pursuant to Sections 408 and 408A of the Internal Revenue Code of 1986 (26 U.S.C. Sections 408 and 408A), as amended."; and"; and

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

On motion of Representative Mackey, **House Amendment No. 1 to House Amendment No. 5** was adopted.

On motion of Representative Francis, **House Amendment No. 5**, as amended, was adopted.

On motion of Representative Owen, **HB 2571**, as amended, was ordered perfected and printed.

REFERRAL OF HOUSE BILLS

The following House Bills were referred to the Committee indicated:

HB 1737 - Special Committee on Litigation Reform

HB 2649 - General Laws

REFERRAL OF SENATE JOINT RESOLUTIONS

The following Senate Joint Resolutions were referred to the Committee indicated:

SS#2 SJR 38 - Fiscal Review

SJR 46 - Downsizing State Government

REFERRAL OF SENATE BILLS

The following Senate Bills were referred to the Committee indicated:

SS SCS SBs 681 & 662 - Elementary and Secondary Education

SS SB 690 - Emerging Issues

SB 718 - Higher Education

SS#3 SCS SB 758 - Economic Development

SCS SB 799 - Crime Prevention

SS#2 SB 823 - Special Committee on Public Policy

SCS SB 886 - Judiciary

COMMITTEE REPORTS

Committee on Local Government, Chairman Falkner reporting:

Mr. Speaker: Your Committee on Local Government, to which was referred **HB 1803**, begs leave to report it has examined the same and recommends that it **Do Pass with House**Committee Substitute, and pursuant to Rule 24(28)(b) be referred to the Committee on Rules - Administrative Oversight by the following vote:

Ayes (12): Adams, Baringer, Burger, Falkner, Fishel, Gray, Hudson, Murphy, Perkins, Railsback, Reedy and West

Noes (0)

Absent (1): Walsh Moore (93)

Mr. Speaker: Your Committee on Local Government, to which was referred **HB 2761**, begs leave to report it has examined the same and recommends that it **Do Pass with House**Committee Substitute, and pursuant to Rule 24(28)(b) be referred to the Committee on Rules - Administrative Oversight by the following vote:

Ayes (12): Adams, Baringer, Burger, Falkner, Fishel, Gray, Hudson, Murphy, Perkins, Railsback, Reedy and West

Noes (0)

Absent (1): Walsh Moore (93)

Committee on Fiscal Review, Chairman Fitzwater reporting:

Mr. Speaker: Your Committee on Fiscal Review, to which was referred **HJR 114**, begs leave to report it has examined the same and recommends that it **Do Pass** by the following vote:

Ayes (7): Baringer, Chipman, Eggleston, Fitzwater, Fogle, Richey and Walsh (50)

Noes (0)

Absent (0)

Mr. Speaker: Your Committee on Fiscal Review, to which was referred **HJR 133**, begs leave to report it has examined the same and recommends that it **Do Pass** by the following vote:

Ayes (5): Chipman, Eggleston, Fitzwater, Richey and Walsh (50)

Noes (2): Baringer and Fogle

Absent (0)

Mr. Speaker: Your Committee on Fiscal Review, to which was referred **HB 1705**, begs leave to report it has examined the same and recommends that it **Do Pass** by the following vote:

Ayes (7): Baringer, Chipman, Eggleston, Fitzwater, Fogle, Richey and Walsh (50)

Noes (0)

Absent (0)

Mr. Speaker: Your Committee on Fiscal Review, to which was referred **HB 2493**, begs leave to report it has examined the same and recommends that it **Do Pass** by the following vote:

Ayes (7): Baringer, Chipman, Eggleston, Fitzwater, Fogle, Richey and Walsh (50)

Noes (0)

Absent (0)

COMMITTEE CHANGES

April 11, 2022

Dana Rademan Miller Chief Clerk Missouri House of Representatives State Capitol, Room 310 Jefferson City, MO 65101 Dear Ms. Miller:

I hereby remove Representative Rory Rowland from the Joint Committee on Administrative Rules and appoint Representative David Tyson Smith to the same committee.

If you have any questions, please feel free to contact my office.

Sincerely,

/s/ Crystal Quade House Minority Leader 132nd District

The following members' presence was noted: Grier, Merideth, and Roden.

ADJOURNMENT

On motion of Representative Plocher, the House adjourned until 10:00 a.m., Tuesday, April 12, 2022.

COMMITTEE HEARINGS

AGRICULTURE POLICY

Tuesday, April 12, 2022, 8:30 AM, House Hearing Room 1.

Public hearing will be held: HB 2650

AGRICULTURE POLICY

Monday, April 25, 2022, 1:30 PM, House Hearing Room 1.

Tour of the Lincoln University agriculture facilities.

DOWNSIZING STATE GOVERNMENT

Wednesday, April 13, 2022, 12:00 PM or upon morning recess (whichever is later), House Hearing Room 5.

Public hearing will be held: HB 2705, SB 710 Executive session will be held: HB 2626

ELECTIONS AND ELECTED OFFICIALS

Wednesday, April 13, 2022, 12:00 PM or upon morning recess (whichever is later), House Hearing Room 6.

Executive session will be held: HB 1678

ELEMENTARY AND SECONDARY EDUCATION

Tuesday, April 12, 2022, 8:00 AM, House Hearing Room 7.

Public hearing will be held: HB 1836, HB 2844

Executive session will be held: HB 1933, HB 2211, HB 2292, HB 2745

EMERGING ISSUES

Tuesday, April 12, 2022, 5:00 PM or upon adjournment (whichever is later), House Hearing Room 7.

Public hearing will be held: HB 2110

Executive session will be held: SB 652, SS SCS SBs 775, 751 & 640, HB 1742

INSURANCE

Tuesday, April 12, 2022, 12:00 PM or upon morning recess (whichever is later), House Hearing Room 1.

Public hearing will be held: HB 1719 Executive session will be held: HB 2743

JOINT COMMITTEE ON ADMINISTRATIVE RULES

Tuesday, April 12, 2022, 8:30 AM, Joint Hearing Room (117).

Report from Director; approve minutes from May 6, 2021; Periodic review of rules; elect a new Chair. Only individuals or organizations testifying in person will be entered into the committee minutes.

Portions of this meeting may be closed pursuant to Section 610.021(1).

LOCAL GOVERNMENT

Thursday, April 14, 2022, 9:00 AM, House Hearing Room 7.

Executive session will be held: HB 1581

PENSIONS

Wednesday, April 13, 2022, 8:30 AM, House Hearing Room 5.

Public hearing will be held: SB 655

SPECIAL COMMITTEE ON BROADBAND AND INFRASTRUCTURE

Wednesday, April 13, 2022, 8:00 AM, House Hearing Room 7.

Public hearing will be held: HB 2765

CANCELLED

SPECIAL COMMITTEE ON CRIMINAL JUSTICE

Tuesday, April 12, 2022, 5:00 PM or upon adjournment (whichever is later), House Hearing Room 6.

Public hearing will be held: HB 1922

SPECIAL COMMITTEE ON PUBLIC POLICY

Tuesday, April 12, 2022, 12:00 PM or upon morning recess (whichever is later), House Hearing Room 7.

Public hearing will be held: SCS SB 982, HJR 138, HB 1813, HB 1573

Executive session will be held: HB 1608

SPECIAL COMMITTEE ON PUBLIC POLICY

Thursday, April 14, 2022, 8:00 AM, House Hearing Room 6.

Public hearing will be held: SS SCS SB 724

UTILITIES

Wednesday, April 13, 2022, 8:00 AM, House Hearing Room 6.

Public hearing will be held: HB 2451, HB 1488

Executive session will be held: HB 1852, HB 2709

HOUSE CALENDAR

FIFTY-SECOND DAY, TUESDAY, APRIL 12, 2022

HOUSE BILLS FOR SECOND READING - APPROPRIATIONS

HB 3021

HOUSE JOINT RESOLUTIONS FOR PERFECTION

HCS HJRs 82 & 106 - Black (137)

HCS HJR 88 - McGirl

HJR 80 - Coleman (32)

HCS HJR 134 - Taylor (139)

HJR 137 - Eggleston

HJR 128 - O'Donnell

HOUSE JOINT RESOLUTIONS FOR PERFECTION - INFORMAL

HJR 107 - Dinkins

HJR 125 - Christofanelli

HCS HJR 123 - Kidd

HJR 100 - Richey

HCS HJR 110 - Christofanelli

HOUSE BILLS FOR PERFECTION

HB 2589 - Evans

HB 2615 - Coleman (32)

HB 2674 - Tate

HCS HB 2810 - Seitz

HCS HB 1553 - Hudson

HCS HB 1704 - Roberts

HCS HB 1753 - Basye

HCS HB 1858 - Baker

HB 1960 - Murphy

HCS HB 2008 - Schwadron

HCS HB 2152 - Henderson

HB 2209 - Hurlbert

HB 2487 - West

HCS HB 2605 - Gregory (51)

HB 2781 - Evans

HB 2798 - Reedy

HCS HB 2913 - Plocher

HOUSE BILLS FOR PERFECTION - INFORMAL

HCS HB 2564 - Riggs

HCS HB 2583 - Riggs

HB 2611 - Richey

HB 1547 - Veit

HCS HB 1550 - Veit

HB 1585 - Murphy

HCS HB 1595 - Hudson

HB 1601 - Chipman

HCS HB 1614 - Lovasco

HB 1629 - Morse

HB 1680 - Sharp (36)

HB 1736 - Roberts

HCS HB 1740 - Dogan

HB 1804 - Veit

HCS#2 HB 1992 - Coleman (97)

HCS HB 2013 - Kelly (141)

HCS HB 2118 - Taylor (139)

HCS HB 2142 - Mayhew

HB 2145 - Murphy

HB 2172 - Francis

HB 2174 - Mayhew

HB 2293 - Knight

HB 2325 - Patterson

HCS HB 2363 - McGirl

HB 2371 - Smith (155)

HCS HB 2381 - Roden

HB 2391 - Buchheit-Courtway

HCS HB 2434 - Grier

HCS HB 2453 - McDaniel

HCS HB 2543 - O'Donnell

HB 2566 - Porter

HB 2568 - Perkins

HB 2576 - Bromley

HB 2603 - Patterson

HS HCS HBs 2574, 1929 & 1456 - Mayhew

HCS HB 2616 - Coleman (32)

HCS HB 1749 - Basye

HCS HB 1903 - Christofanelli

HCS HB 2093 - Wiemann

HB 2356 - McDaniel

HB 2010 - Smith (155)

HCS HB 2306 - Christofanelli

HCS HB 1619, as amended, with HA 2, pending - Van Schoiack

HCS HB 1695 - Gregory (51)

HB 1715 - Riley

HCS HB 1876 - Haffner

HCS HB 1559 - Davidson

HB 1687 - Hardwick

HB 2308 - Atchison

HB 1627 - Morse

HB 1628 - Morse

HB 1652 - Bromley

HB 1672 - Taylor (48)

HB 1475 - Schroer

HB 1624 - Schroer

HB 1451 - Billington

HB 1594 - Walsh (50)

HB 1490 - Porter

HB 1579 - Mayhew

HB 1717 - Riley

HCS HB 1722 - Shields

HB 1863 - Thomas

HB 1881 - Black (7)

HCS HB 1908 - Shaul

HCS HB 1998 - Davidson

HB 2129 - Railsback

HCS HB 2136 - Kelley (127)

HCS HB 2206 - Trent

HB 2219 - O'Donnell

HB 2365 - Shields

HB 2439 - Hovis

HCS HB 2447 - Hardwick

HCS HB 2452 - Cook

HB 2625 - Burger

HCS HB 2652 - Haffner

HS HB 2310 - McDaniel

HCS HBs 1593 & 1959 - Walsh (50)

HB 1616 - Van Schoiack

HCS HB 1833 - Basye

HB 2009 - Pollock (123)

HCS HB 2376 - Kelly (141)

HB 2474 - Hicks

HB 1692 - Boggs

HB 1762 - Sander

HB 1859 - Eggleston

HB 1864 - Thomas

HCS HB 1875 - Haffner

HB 1977 - Kelley (127)

HB 2090 - Griffith

HB 2095 - Kelly (141)

HB 2123 - Taylor (139)

HB 2169 - Trent

HCS HB 2246 - Copeland

HB 2372 - Chipman

HB 2515 - Perkins

HCS HB 1854 - Schroer

HCS HB 1747 - Basye

HB 2050 - Schroer

HB 1455 - Billington

HCS HB 1464 - Schnelting

HB 1478 - Dinkins

HCS HB 1489 - Porter

HCS HB 1696 - Reedy

HCS HB 1716 - Riley

HCS HBs 1904 & 1575 - Murphy

HB 1973 - Gregory (51)

HB 2085 - Cook

HB 2156 - Perkins

HCS HB 2208 - Christofanelli

HCS HB 2499 - Eggleston

HB 2590 - Evans

HB 1480 - Dinkins

HB 1563 - Griffith

HCS HB 1641 - Coleman (32)

HB 1721 - Shields

HCS HB 1905 - Shaul

HCS HBs 1972 & 2483 - Copeland

HB 2056 - Evans

HCS HB 2140 - McGaugh

HB 2160 - Dinkins

HB 2164 - Buchheit-Courtway

HB 2165 - Buchheit-Courtway

HCS HB 2220 - Falkner

HB 2255 - Bailey

HB 2327 - Riggs

HB 2359 - Basye

HCS HB 2450 - Reedy

HB 1471 - Pike

HCS HB 1556 - Gregory (96)

HCS HB 1613 - Lovasco

HCS HB 1670 - Seitz

HCS HB 1683 - Brown (16)

HCS HB 1709 - Buchheit-Courtway

HCS HB 1918 - Hovis

HCS HB 2011 - Smith (155)

HCS HB 2052 - Riggs

HCS HB 2138 - Kelley (127)

HCS HB 2177 - Owen

HB 2290 - Andrews

HCS HB 2369 - Hurlbert

HCS HB 2389 - Cook

HB 2544 - Patterson

HOUSE CONCURRENT RESOLUTIONS FOR THIRD READING

HCR 57 - Chipman

HCR 71 - Riggs

HCR 58 - Copeland

HCR 72 - Francis

HOUSE JOINT RESOLUTIONS FOR THIRD READING

HJR 132, (Fiscal Review 4/7/22) - Kidd

HJR 133 - Davidson

HJR 114 - Coleman (32)

HOUSE BILLS FOR THIRD READING

HB 2307 - Coleman (32)

HCS HB 1757 - Railsback

HB 2593 - Lovasco

HB 1860 - Eggleston

HCS HB 1583 - Murphy

HB 2623 - Veit

HB 1705 - Roberts

HCS HB 2218 - O'Donnell

HCS HB 2600, (Fiscal Review 4/7/22) - Railsback

HOUSE BILLS FOR THIRD READING - INFORMAL

HB 2493 - Black (7)

SENATE JOINT RESOLUTIONS FOR THIRD READING

SS#2 SJR 38, (Fiscal Review 4/11/22) - Richey

SENATE BILLS FOR THIRD READING

SS SB 678, E.C. - Richey

HOUSE BILLS WITH SENATE AMENDMENTS

SS HB 2162, (Fiscal Review 4/5/22) - Deaton SS SCS HCS HB 1720, as amended (Fiscal Review 4/7/22), E.C. - Pollitt (52)

BILLS CARRYING REQUEST MESSAGES

SS#2 HCS HB 2117, as amended (request Senate recede/grant conference), E.C. - Shaul

HOUSE RESOLUTIONS

HCS HR 3279 - Grier

ACTIONS PURSUANT TO ARTICLE IV, SECTION 27

HCS HB 1 - Smith (163)

CCS SS SCS HCS HB 2 - Smith (163)

CCS SS SCS HCS HB 3 - Smith (163)

CCS SS SCS HCS HB 4 - Smith (163)

CCS SCS HCS HB 5 - Smith (163)

CCS SCS HCS HB 6 - Smith (163)

CCS SCS HCS HB 7 - Smith (163)

CCS SCS HCS HB 8 - Smith (163)

CCS SCS HCS HB 9 - Smith (163)

CCS SS SCS HCS HB 10 - Smith (163)

CCS SS SCS HCS HB 11 - Smith (163)

CCS SCS HCS HB 12 - Smith (163)

SCS HCS HB 13 - Smith (163)

HCS HB 17 - Smith (163)

SCS HCS HB 18 - Smith (163)

SS SCS HCS HB 19 - Smith (163)