Ηοι	use Amendment NO
	Offered By
	END House Committee Substitute for Senate Substitute for Senate Bill No. 198, Section A, Line 4, by ting the word "are" and inserting in lieu thereof the following:
one	"and section 192.530 as truly agreed to and finally passed by senate substitute for house bill no. 402 hundred second general assembly, first regular session, are"; and
	her amends said bill, Page 52, Section 701.348, Line 5, by inserting after all of said section and line the owing:
depa	"Section 1. The department of health and senior services shall include on its website an advance th care directive form and directions for completing such form as described in section 459.015. The artment shall include a listing of possible uses for an advance health care directive, including to limit pai trol to nonopioid measures.
	[<u>192.530.</u> 1. As used in this section, the following terms mean: (1) "Department", the department of health and senior services; (2) "Health care provider", the same meaning given to the term in section 376.1350; (3) "Voluntary nonopioid directive form", a form that may be used by a patient to deny or refuse the
	inistration or prescription of a controlled substance containing an opioid by a health care provider. 2. In consultation with the board of registration for the healing arts and the board of pharmacy, the artment shall develop and publish a uniform voluntary nonopioid directive form.
*	3. The voluntary nonopioid directive form developed by the department shall indicate to all cribing health care providers that the named patient shall not be offered, prescribed, supplied with, or prwise administered a controlled substance containing an opioid. 4. The voluntary nonopioid directive form shall be posted in a downloadable format on the
•	<u>4. The voluntary honopion uncerve form shart be posted in a dowinoadable format on the artment's publicly accessible website.</u> <u>5. (1) A patient may execute and file a voluntary nonopioid directive form with a health care</u> vider. Each health care provider shall sign and date the form in the presence of the patient as evidence of
acce	ptance and shall provide a signed copy of the form to the patient. (2) The patient executing and filing a voluntary nonopioid directive form with a health care provide l sign and date the form in the presence of the health care provider or a designee of the health care
patio	vider. In the case of a patient who is unable to execute and file a voluntary nonopioid directive form, the ent may designate a duly authorized guardian or health care proxy to execute and file the form in ordance with subdivision (1) of this subsection.
	 (3) A patient may revoke the voluntary nonopioid directive form for any reason and may do so by ten or oral means. 6. The department shall promulgate regulations for the implementation of the voluntary nonopioid directive form that a labele l
	<u>ctive form that shall include, but not be limited to:</u> (<u>1) A standard method for the recording and transmission of the voluntary nonopioid directive form</u> ch shall include verification by the patient's health care provider and shall comply with the written

Action Taken_____

_ Date _____

Ь	elating to confidentiality of alcohol and drug abuse patient records, provided that the voluntary nonopi irective form shall also provide the basic procedures necessary to revoke the voluntary nonopioid dire
~	orm;
	(2) Procedures to record the voluntary nonopioid directive form in the patient's medical record
a	vailable, the patient's interoperable electronic medical record;
	(3) Requirements and procedures for a patient to appoint a duly authorized guardian or health
в	roxy to override a previously filed voluntary nonopioid directive form and circumstances under which
	ttending health care provider may override a previously filed voluntary nonopioid directive form base
	ocumented medical judgment, which shall be recorded in the patient's medical record;
	(4) Procedures to ensure that any recording, sharing, or distributing of data relative to the volu
n	onopioid directive form complies with all federal and state confidentiality laws; and
	(5) Appropriate exemptions for health care providers and emergency medical personnel to pre
θ	r administer a controlled substance containing an opioid when, in their professional medical judgment
e	ontrolled substance containing an opioid is necessary, or the provider and medical personnel are acting
g	ood faith.
	The department shall develop and publish guidelines on its publicly accessible website that sha
	ddress, at a minimum, the content of the regulations promulgated under this subsection. Any rule or p
	f a rule, as that term is defined in section 536.010, that is created under the authority delegated in this
	ection shall become effective only if it complies with and is subject to all of the provisions of chapter
	nd, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the po
	ested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to
	isapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking author
a	nd any rule proposed or adopted after August 28, 2023, shall be invalid and void.
_	7. A written prescription that is presented at an outpatient pharmacy or a prescription that is
	lectronically transmitted to an outpatient pharmacy is presumed to be valid for the purposes of this sec
	nd a pharmacist in an outpatient setting shall not be held in violation of this section for dispensing a ontrolled substance in contradiction to a voluntary nonopioid directive form, except upon evidence that
	harmacist acted knowingly against the voluntary nonopioid directive form.
Þ	8. (1) A health care provider or an employee of a health care provider acting in good faith sha
h	e subject to criminal or civil liability and shall not be considered to have engaged in unprofessional co
	or failing to offer or administer a prescription or medication order for a controlled substance containing
	pioid under the voluntary nonopioid directive form.
	(2) A person acting as a representative or an agent pursuant to a health care proxy shall not be
5	ubject to criminal or civil liability for making a decision under subdivision (3) of subsection 6 of this
	n good faith.
	(3) Notwithstanding any other provision of law, a professional licensing board, at its discretion
li	mit, condition, or suspend the license of, or assess fines against, a health care provider who recklessly

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