

FIRST REGULAR SESSION  
[PERFECTED]  
HOUSE COMMITTEE SUBSTITUTE FOR  
**HOUSE BILL NO. 719**  
**102ND GENERAL ASSEMBLY**

1455H.05P

DANA RADEMAN MILLER, Chief Clerk

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**AN ACT**

To repeal sections 208.053, 208.146, 208.151, 208.247, 208.662, 570.400, and 570.404, RSMo, and to enact in lieu thereof thirteen new sections relating to public assistance, with penalty provisions and an emergency clause.

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

Section A. Sections 208.053, 208.146, 208.151, 208.247, 208.662, 570.400, and  
2 570.404, RSMo, are repealed and thirteen new sections enacted in lieu thereof, to be known  
3 as sections 37.980, 208.035, 208.053, 208.066, 208.146, 208.151, 208.186, 208.239, 208.247,  
4 208.662, 209.700, 570.400, and 570.404, to read as follows:

**37.980. 1. The office of administration shall submit a report to the general  
2 assembly before December thirty-first of each year, beginning in 2023, describing the  
3 progress made by the state with respect to the directives issued as part of the "Missouri  
4 as a Model Employer" initiative described in executive order 19-16.**

**5 2. The report shall include, but not be limited to, the data described in the  
6 following subdivisions, which shall be collected through voluntary self-disclosure. To  
7 the extent possible, for each subdivision, the report shall include general data for all  
8 relevant employees, in addition to data comparing the employees of each agency within  
9 the state workforce:**

**10 (1) The baseline number of employees in the state workforce who disclosed  
11 disabilities when the initiative began;**

**12 (2) The number of employees in the state workforce who disclose disabilities at  
13 the time of the compiling of the annual report and statistics providing the size and the**

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

14 percentage of any increase or decrease in such numbers since the initiative began and  
15 since the compilation of any previous annual report;

16 (3) The baseline percentage of employees in the state workforce who disclosed  
17 disabilities when the initiative began;

18 (4) The percentage of employees in the state workforce who disclose disabilities  
19 at the time of the compiling of the annual report and statistics providing the size of any  
20 increase or decrease in such percentage since the initiative began and since the  
21 compilation of any previous annual report;

22 (5) A description and analysis of any disparity that may exist from the time the  
23 initiative began and the time of the compiling of the annual reports, and of any disparity  
24 that may exist from the time of the most recent previous annual report, if any, and the  
25 time of the current annual report, between the percentage of individuals in the state of  
26 working age who disclose disabilities and the percentage of individuals in the state  
27 workforce who disclose or have disabilities; and

28 (6) A description and analysis of any pay differential that may exist in the state  
29 workforce between individuals who disclose disabilities and individuals who do not  
30 disclose disabilities.

31 3. The report shall also include descriptions of specific efforts made by state  
32 agencies to recruit, hire, advance, and retain individuals with disabilities including, but  
33 not limited to, individuals with the most significant disabilities, as defined in 5 CSR 20-  
34 500.160. Such descriptions shall include, but not be limited to, best, promising, and  
35 emerging practices related to:

36 (1) Setting annual goals;

37 (2) Analyzing barriers to recruiting, hiring, advancing, and retaining individuals  
38 with disabilities;

39 (3) Establishing and maintaining contacts with entities and organizations that  
40 specialize in providing education, training, or assistance to individuals with disabilities  
41 in securing employment;

42 (4) Using internships, apprenticeships, and job shadowing;

43 (5) Using supported employment, individual placement with support services,  
44 customized employment, telework, mentoring and management training, stay-at-work  
45 and return-to-work programs, and exit interviews;

46 (6) Adopting, posting, and making available to all job applicants and employees  
47 reasonable accommodation procedures in written and accessible formats;

48 (7) Providing periodic disability awareness training to employees to build and  
49 sustain a culture of inclusion in the workplace, including rights to reasonable  
50 accommodation in the workplace;

51           **(8) Providing periodic training to human resources and hiring managers in**  
52 **disability rights, hiring, and workplace policies designed to promote a diverse and**  
53 **inclusive workforce; and**

54           **(9) Making web-based hiring portals accessible to and usable by applicants with**  
55 **disabilities.**

**208.035. 1. Subject to appropriations and any necessary waivers or approvals,**  
2 **the department of social services shall develop and implement a transitional benefits**  
3 **program for temporary assistance for needy families (TANF) and the supplemental**  
4 **nutrition assistance program (SNAP) that is designed in such a way that a TANF or**  
5 **SNAP beneficiary will not experience an immediate loss of benefits should his or her**  
6 **income exceed the maximum allowable income for such program. The transitional**  
7 **benefits offered shall provide for a transition to self-sufficiency while incentivizing work**  
8 **and financial stability.**

9           **2. The transitional benefits offered shall gradually step down the beneficiary's**  
10 **monthly benefit proportionate to the increase in the beneficiary's income. The**  
11 **determination for a beneficiary's transitional benefit shall be as follows: For each**  
12 **percentage increase in the beneficiary's monthly household income over the program's**  
13 **maximum allowable income or six thousand two hundred fifty dollars, adjusted for**  
14 **increases in cost-of-living, if any, as of the preceding July over the level as of July of the**  
15 **immediately preceding year of the Consumer Price Index for All Urban Consumers, or**  
16 **successor index, published by the U.S. Department of Labor, or its successor agency,**  
17 **whichever is lower, up to two hundred twenty-five percent of the federal poverty level,**  
18 **the monthly benefits shall be decreased by the same percentage.**

19           **3. Beneficiaries receiving transitional benefits under this section shall comply**  
20 **with all requirements of each program for which they are eligible, including work**  
21 **requirements. Transitional benefits received under this section shall not be included in**  
22 **the lifetime limit for receipt of TANF benefits under section 208.040.**

23           **4. The department may promulgate any rules or regulations necessary for the**  
24 **implementation of this section. Any rule or portion of a rule, as that term is defined in**  
25 **section 536.010, that is created under the authority delegated in this section shall**  
26 **become effective only if it complies with and is subject to all of the provisions of chapter**  
27 **536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable**  
28 **and if any of the powers vested with the general assembly pursuant to chapter 536 to**  
29 **review, to delay the effective date, or to disapprove and annul a rule are subsequently**  
30 **held unconstitutional, then the grant of rulemaking authority and any rule proposed or**  
31 **adopted after August 28, 2023, shall be invalid and void.**

208.053. 1. ~~[The provisions of this section shall be known as the "Low Wage Trap Elimination Act".]~~ In order to more effectively transition persons receiving state-funded child care subsidy benefits under this chapter, the department of elementary and secondary education ~~[, in conjunction with the department of revenue,]~~ shall, subject to appropriations, by July 1, ~~[2022]~~ **2024**, implement a ~~[pilot]~~ program ~~[in a county with a charter form of government and with more than six hundred thousand but fewer than seven hundred thousand inhabitants, a county of the first classification with more than two hundred sixty thousand but fewer than three hundred thousand inhabitants, and a county of the first classification with more than two hundred thousand but fewer than two hundred sixty thousand inhabitants, to be called the "Hand Up Program",]~~ to allow ~~[applicants in the program]~~ **recipients** to receive transitional child care benefits without the requirement that such ~~[applicants]~~ **recipients** first be eligible for full child care benefits.

(1) For purposes of this section, "full child care benefits" shall be the full benefits awarded to a recipient based on the income eligibility amount established by the department through the annual appropriations process as of August 28, ~~[2021]~~ **2023**, to qualify for the benefits and shall not include the transitional child care benefits that are awarded to recipients whose income surpasses the eligibility level for full benefits to continue. The ~~[hand up]~~ program shall be voluntary and shall be designed such that ~~[an applicant]~~ **a recipient** may begin receiving the transitional child care benefit without having first qualified for the full child care benefit or any other tier of the transitional child care benefit. ~~[Under no circumstances shall any applicant be eligible for the hand up program if the applicant's income does not fall within the transitional child care benefit income limits established through the annual appropriations process.]~~

(2) **Transitional child care benefits shall be determined on a sliding scale as follows for recipients with household incomes in excess of the eligibility level for full benefits:**

(a) **Eighty percent of the state base rate for recipients with household incomes greater than the eligibility level for full benefits but less than or equal to one hundred eighty percent of the federal poverty level;**

(b) **Sixty percent of the state base rate for recipients with household incomes greater than one hundred eighty percent but less than or equal to two hundred five percent of the federal poverty level; and**

(c) **Forty percent of the state base rate for recipients with household incomes greater than two hundred five percent but less than or equal to two hundred twenty-five percent of the federal poverty level, but not greater than seventy-five percent of the state median income.**

37           **(3) As used in this section, "state base rate" shall refer to the rate established by**  
38 **the department for provider payments that accounts for geographic area, type of**  
39 **facility, duration of care, and age of the child, as well as any enhancements reflecting**  
40 **after-hours or weekend care, accreditation, or licensure status, as determined by the**  
41 **department. Recipients shall be responsible for paying the remaining sliding fee to the**  
42 **child care provider.**

43           **(4) A participating recipient shall be allowed to opt out of the program at any time,**  
44 **but such person shall not be allowed to participate in the program a second time.**

45           2. The department shall track the number of participants in the ~~[hand-up]~~ program  
46 and shall issue an annual report to the general assembly by September 1, ~~[2023]~~ **2025**, and  
47 annually on September first thereafter, detailing the effectiveness of the ~~[pilot]~~ program in  
48 encouraging recipients to secure employment earning an income greater than the maximum  
49 wage eligible for the full child care benefit. The report shall also detail the costs of  
50 administration and the increased amount of state income tax paid as a result of the program];  
51 ~~as well as an analysis of whether the pilot program could be expanded to include other types~~  
52 ~~of benefits, including, but not limited to, food stamps, temporary assistance for needy~~  
53 ~~families, low-income heating assistance, women, infants and children supplemental nutrition~~  
54 ~~program, the state children's health insurance program, and MO HealthNet benefits].~~

55           3. The department shall pursue all necessary waivers from the federal government to  
56 implement the ~~[hand-up]~~ program. If the department is unable to obtain such waivers, the  
57 department shall implement the program to the degree possible without such waivers.

58           4. Any rule or portion of a rule, as that term is defined in section 536.010, that is  
59 created under the authority delegated under this section shall become effective only if it  
60 complies with and is subject to all of the provisions of chapter 536 and, if applicable, section  
61 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with  
62 the general assembly pursuant to chapter 536 to review, to delay the effective date, or to  
63 disapprove and annul a rule are subsequently held unconstitutional, then the grant of  
64 rulemaking authority and any rule proposed or adopted after August 28, 2012, shall be invalid  
65 and void.

66           ~~[5. Pursuant to section 23.253 of the Missouri sunset act:~~

67           ~~(1) The provisions of the new program authorized under this section shall sunset~~  
68 ~~automatically three years after August 28, 2021, unless reauthorized by an act of the general~~  
69 ~~assembly; and~~

70           ~~(2) If such program is reauthorized, the program authorized under this section shall~~  
71 ~~sunset automatically three years after the effective date of the reauthorization of this section;~~  
72 ~~and~~

73           ~~(3) This section shall terminate on September first of the calendar year immediately~~  
74 ~~following the calendar year in which the program authorized under this section is sunset.]~~

**208.066. 1. The department of social services shall limit any initial application**  
2 **for the Supplemental Nutrition Assistance Program (SNAP), the Temporary Assistance**  
3 **for Needy Families program (TANF), the child care assistance program, or MO**  
4 **HealthNet to a one-page form that is easily accessible on the department of social**  
5 **services' website.**

6           **2. Persons who are participants in a program listed in subsection 1 of this section**  
7 **who are required to complete a periodic eligibility review form may submit such form as**  
8 **an attachment to their Missouri state individual income tax return if the person's**  
9 **eligibility review form is due before or at the same time that he or she files such state tax**  
10 **return. The department of social services shall limit periodic eligibility review forms**  
11 **associated with the programs listed in subsection 1 of this section to a one-page form**  
12 **that is easily accessible on both the department of social services' website and the**  
13 **department of revenue's website.**

14           **3. Notwithstanding the provisions of section 32.057 to the contrary, the**  
15 **department of revenue shall share any eligibility form submitted under this section with**  
16 **the department of social services.**

17           **4. The department of revenue may promulgate all necessary rules and**  
18 **regulations for the administration of this section. Any rule or portion of a rule, as that**  
19 **term is defined in section 536.010, that is created under the authority delegated in this**  
20 **section shall become effective only if it complies with and is subject to all of the**  
21 **provisions of chapter 536 and, if applicable, section 536.028. This section and chapter**  
22 **536 are nonseverable and if any of the powers vested with the general assembly**  
23 **pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul**  
24 **a rule are subsequently held unconstitutional, then the grant of rulemaking authority**  
25 **and any rule proposed or adopted after August 28, 2023, shall be invalid and void.**

          208.146. 1. The program established under this section shall be known as the "Ticket  
2 to Work Health Assurance Program". Subject to appropriations and in accordance with the  
3 federal Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA), Public  
4 Law 106-170, the medical assistance provided for in section 208.151 may be paid for a person  
5 who is employed and who:

6           (1) Except for earnings, meets the definition of disabled under the Supplemental  
7 Security Income Program or meets the definition of an employed individual with a medically  
8 improved disability under TWWIIA;

9           (2) Has earned income, as defined in subsection 2 of this section;

10          (3) Meets the asset limits in subsection 3 of this section; **and**

11 (4) Has ~~[net]~~ income, as ~~[defined]~~ **determined** in subsection 3 of this section, that  
 12 does not exceed ~~[the limit for permanent and totally disabled individuals to receive~~  
 13 ~~nonspenddown MO HealthNet under subdivision (24) of subsection 1 of section 208.151; and~~

14 ~~(5) Has a gross income of]~~ two hundred fifty percent ~~[or less]~~ of the federal poverty  
 15 level, excluding any earned income of the worker with a disability between two hundred fifty  
 16 and three hundred percent of the federal poverty level. ~~[For purposes of this subdivision,~~  
 17 ~~"gross income" includes all income of the person and the person's spouse that would be~~  
 18 ~~considered in determining MO HealthNet eligibility for permanent and totally disabled~~  
 19 ~~individuals under subdivision (24) of subsection 1 of section 208.151. Individuals with gross~~  
 20 ~~incomes in excess of one hundred percent of the federal poverty level shall pay a premium for~~  
 21 ~~participation in accordance with subsection 4 of this section.]~~

22 2. For income to be considered earned income for purposes of this section, the  
 23 department of social services shall document that Medicare and Social Security taxes are  
 24 withheld from such income. Self-employed persons shall provide proof of payment of  
 25 Medicare and Social Security taxes for income to be considered earned.

26 3. (1) For purposes of determining eligibility under this section, the available asset  
 27 limit and the definition of available assets shall be the same as those used to determine MO  
 28 HealthNet eligibility for permanent and totally disabled individuals under subdivision (24) of  
 29 subsection 1 of section 208.151 except for:

30 (a) Medical savings accounts limited to deposits of earned income and earnings on  
 31 such income while a participant in the program created under this section with a value not to  
 32 exceed five thousand dollars per year; ~~[and]~~

33 (b) Independent living accounts limited to deposits of earned income and earnings on  
 34 such income while a participant in the program created under this section with a value not to  
 35 exceed five thousand dollars per year. For purposes of this section, an "independent living  
 36 account" means an account established and maintained to provide savings for transportation,  
 37 housing, home modification, and personal care services and assistive devices associated with  
 38 such person's disability; **and**

39 **(c) Retirement accounts including, but not limited to, individual accounts, 401(k)**  
 40 **plans, 403(b) plans, Keogh plans, and pension plans, provided that income from such**  
 41 **accounts be calculated as income under subdivision (4) of subsection 1 of this section.**

42 (2) To determine ~~[net]~~ income, the following shall be disregarded:

43 (a) ~~[All earned income of the disabled worker;~~

44 ~~(b)]~~ The first ~~[sixty five dollars and one half]~~ **fifty thousand dollars** of ~~[the~~  
 45 ~~remaining]~~ earned income of ~~[a nondisabled spouse's earned income]~~ **the person's spouse;**

46 ~~[(e)]~~ **(b)** A twenty dollar standard deduction;

47 ~~[(d)]~~ **(c)** Health insurance premiums;

48           ~~[(e)]~~ (d) A seventy-five dollar a month standard deduction for the disabled worker's  
49 dental and optical insurance when the total dental and optical insurance premiums are less  
50 than seventy-five dollars;

51           ~~[(f)]~~ (e) All Supplemental Security Income payments, and the first fifty dollars of  
52 SSDI payments; **and**

53           ~~[(g)]~~ (f) A standard deduction for impairment-related employment expenses equal to  
54 one-half of the disabled worker's earned income.

55           4. Any person whose ~~[gross]~~ income exceeds one hundred percent of the federal  
56 poverty level shall pay a premium for participation in the medical assistance provided in this  
57 section. Such premium shall be:

58           (1) For a person whose ~~[gross]~~ income is more than one hundred percent but less than  
59 one hundred fifty percent of the federal poverty level, four percent of income at one hundred  
60 percent of the federal poverty level;

61           (2) For a person whose ~~[gross]~~ income equals or exceeds one hundred fifty percent  
62 but is less than two hundred percent of the federal poverty level, four percent of income at one  
63 hundred fifty percent of the federal poverty level;

64           (3) For a person whose ~~[gross]~~ income equals or exceeds two hundred percent but less  
65 than two hundred fifty percent of the federal poverty level, five percent of income at two  
66 hundred percent of the federal poverty level;

67           (4) For a person whose ~~[gross]~~ income equals or exceeds two hundred fifty percent up  
68 to and including three hundred percent of the federal poverty level, six percent of income at  
69 two hundred fifty percent of the federal poverty level.

70           5. Recipients of services through this program shall report any change in income or  
71 household size within ten days of the occurrence of such change. An increase in premiums  
72 resulting from a reported change in income or household size shall be effective with the next  
73 premium invoice that is mailed to a person after due process requirements have been met. A  
74 decrease in premiums shall be effective the first day of the month immediately following the  
75 month in which the change is reported.

76           6. If an eligible person's employer offers employer-sponsored health insurance and  
77 the department of social services determines that it is more cost effective, such person shall  
78 participate in the employer-sponsored insurance. The department shall pay such person's  
79 portion of the premiums, co-payments, and any other costs associated with participation in the  
80 employer-sponsored health insurance. **If the department elects to pay such person's**  
81 **employer-sponsored insurance costs under this subsection, the medical assistance**  
82 **provided under this section shall be provided to an eligible person as a secondary or**  
83 **supplemental policy for only personal care assistance services, as defined in section**



84 **208.900, and related costs and nonemergency medical transportation to any employer-**  
85 **sponsored benefits that may be available to such person.**

86 **7. The department of social services shall provide to the general assembly an**  
87 **annual report that identifies the number of participants in the program and describes**  
88 **the outreach and education efforts to increase awareness and enrollment in the**  
89 **program.**

90 **8. The department of social services shall submit such state plan amendments**  
91 **and waivers to the Centers for Medicare and Medicaid Services of the federal**  
92 **Department of Health and Human Services as the department determines are necessary**  
93 **to implement the provisions of this section.**

94 **9. The provisions of this section shall expire August 28, 2025.**

208.151. 1. Medical assistance on behalf of needy persons shall be known as "MO  
2 HealthNet". For the purpose of paying MO HealthNet benefits and to comply with Title XIX,  
3 Public Law 89-97, 1965 amendments to the federal Social Security Act (42 U.S.C. Section  
4 301, et seq.) as amended, the following needy persons shall be eligible to receive MO  
5 HealthNet benefits to the extent and in the manner hereinafter provided:

6 (1) All participants receiving state supplemental payments for the aged, blind and  
7 disabled;

8 (2) All participants receiving aid to families with dependent children benefits,  
9 including all persons under nineteen years of age who would be classified as dependent  
10 children except for the requirements of subdivision (1) of subsection 1 of section 208.040.  
11 Participants eligible under this subdivision who are participating in treatment court, as  
12 defined in section 478.001, shall have their eligibility automatically extended sixty days from  
13 the time their dependent child is removed from the custody of the participant, subject to  
14 approval of the Centers for Medicare and Medicaid Services;

15 (3) All participants receiving blind pension benefits;

16 (4) All persons who would be determined to be eligible for old age assistance  
17 benefits, permanent and total disability benefits, or aid to the blind benefits under the  
18 eligibility standards in effect December 31, 1973, or less restrictive standards as established  
19 by rule of the family support division, who are sixty-five years of age or over and are patients  
20 in state institutions for mental diseases or tuberculosis;

21 (5) All persons under the age of twenty-one years who would be eligible for aid to  
22 families with dependent children except for the requirements of subdivision (2) of subsection  
23 1 of section 208.040, and who are residing in an intermediate care facility, or receiving active  
24 treatment as inpatients in psychiatric facilities or programs, as defined in 42 U.S.C. Section  
25 1396d, as amended;

26 (6) All persons under the age of twenty-one years who would be eligible for aid to  
27 families with dependent children benefits except for the requirement of deprivation of  
28 parental support as provided for in subdivision (2) of subsection 1 of section 208.040;

29 (7) All persons eligible to receive nursing care benefits;

30 (8) All participants receiving family foster home or nonprofit private child-care  
31 institution care, subsidized adoption benefits and parental school care wherein state funds are  
32 used as partial or full payment for such care;

33 (9) All persons who were participants receiving old age assistance benefits, aid to the  
34 permanently and totally disabled, or aid to the blind benefits on December 31, 1973, and who  
35 continue to meet the eligibility requirements, except income, for these assistance categories,  
36 but who are no longer receiving such benefits because of the implementation of Title XVI of  
37 the federal Social Security Act, as amended;

38 (10) Pregnant women who meet the requirements for aid to families with dependent  
39 children, except for the existence of a dependent child in the home;

40 (11) Pregnant women who meet the requirements for aid to families with dependent  
41 children, except for the existence of a dependent child who is deprived of parental support as  
42 provided for in subdivision (2) of subsection 1 of section 208.040;

43 (12) Pregnant women or infants under one year of age, or both, whose family income  
44 does not exceed an income eligibility standard equal to one hundred eighty-five percent of the  
45 federal poverty level as established and amended by the federal Department of Health and  
46 Human Services, or its successor agency;

47 (13) Children who have attained one year of age but have not attained six years of age  
48 who are eligible for medical assistance under 6401 of P.L. 101-239 (Omnibus Budget  
49 Reconciliation Act of 1989) (42 U.S.C. Sections 1396a to 1396b). The family support  
50 division shall use an income eligibility standard equal to one hundred thirty-three percent of  
51 the federal poverty level established by the Department of Health and Human Services, or its  
52 successor agency;

53 (14) Children who have attained six years of age but have not attained nineteen years  
54 of age. For children who have attained six years of age but have not attained nineteen years  
55 of age, the family support division shall use an income assessment methodology which  
56 provides for eligibility when family income is equal to or less than equal to one hundred  
57 percent of the federal poverty level established by the Department of Health and Human  
58 Services, or its successor agency. As necessary to provide MO HealthNet coverage under this  
59 subdivision, the department of social services may revise the state MO HealthNet plan to  
60 extend coverage under 42 U.S.C. Section 1396a(a)(10)(A)(i)(III) to children who have  
61 attained six years of age but have not attained nineteen years of age as permitted by paragraph

62 (2) of subsection (n) of 42 U.S.C. Section 1396d using a more liberal income assessment  
63 methodology as authorized by paragraph (2) of subsection (r) of 42 U.S.C. Section 1396a;

64 (15) The family support division shall not establish a resource eligibility standard in  
65 assessing eligibility for persons under subdivision (12), (13) or (14) of this subsection. The  
66 MO HealthNet division shall define the amount and scope of benefits which are available to  
67 individuals eligible under each of the subdivisions (12), (13), and (14) of this subsection, in  
68 accordance with the requirements of federal law and regulations promulgated thereunder;

69 (16) Notwithstanding any other provisions of law to the contrary, ambulatory prenatal  
70 care shall be made available to pregnant women during a period of presumptive eligibility  
71 pursuant to 42 U.S.C. Section 1396r-1, as amended;

72 (17) A child born to a woman eligible for and receiving MO HealthNet benefits under  
73 this section on the date of the child's birth shall be deemed to have applied for MO HealthNet  
74 benefits and to have been found eligible for such assistance under such plan on the date of  
75 such birth and to remain eligible for such assistance for a period of time determined in  
76 accordance with applicable federal and state law and regulations so long as the child is a  
77 member of the woman's household and either the woman remains eligible for such assistance  
78 or for children born on or after January 1, 1991, the woman would remain eligible for such  
79 assistance if she were still pregnant. Upon notification of such child's birth, the family  
80 support division shall assign a MO HealthNet eligibility identification number to the child so  
81 that claims may be submitted and paid under such child's identification number;

82 (18) Pregnant women and children eligible for MO HealthNet benefits pursuant to  
83 subdivision (12), (13) or (14) of this subsection shall not as a condition of eligibility for MO  
84 HealthNet benefits be required to apply for aid to families with dependent children. The  
85 family support division shall utilize an application for eligibility for such persons which  
86 eliminates information requirements other than those necessary to apply for MO HealthNet  
87 benefits. The division shall provide such application forms to applicants whose preliminary  
88 income information indicates that they are ineligible for aid to families with dependent  
89 children. Applicants for MO HealthNet benefits under subdivision (12), (13) or (14) of this  
90 subsection shall be informed of the aid to families with dependent children program and that  
91 they are entitled to apply for such benefits. Any forms utilized by the family support division  
92 for assessing eligibility under this chapter shall be as simple as practicable;

93 (19) Subject to appropriations necessary to recruit and train such staff, the family  
94 support division shall provide one or more full-time, permanent eligibility specialists to  
95 process applications for MO HealthNet benefits at the site of a health care provider, if the  
96 health care provider requests the placement of such eligibility specialists and reimburses the  
97 division for the expenses including but not limited to salaries, benefits, travel, training,  
98 telephone, supplies, and equipment of such eligibility specialists. The division may provide a

99 health care provider with a part-time or temporary eligibility specialist at the site of a health  
100 care provider if the health care provider requests the placement of such an eligibility specialist  
101 and reimburses the division for the expenses, including but not limited to the salary, benefits,  
102 travel, training, telephone, supplies, and equipment, of such an eligibility specialist. The  
103 division may seek to employ such eligibility specialists who are otherwise qualified for such  
104 positions and who are current or former welfare participants. The division may consider  
105 training such current or former welfare participants as eligibility specialists for this program;

106 (20) Pregnant women who are eligible for, have applied for and have received MO  
107 HealthNet benefits under subdivision (2), (10), (11) or (12) of this subsection shall continue  
108 to be considered eligible for all pregnancy-related and postpartum MO HealthNet benefits  
109 provided under section 208.152 until the end of the sixty-day period beginning on the last day  
110 of their pregnancy. Pregnant women receiving mental health treatment for postpartum  
111 depression or related mental health conditions within sixty days of giving birth shall, subject  
112 to appropriations and any necessary federal approval, be eligible for MO HealthNet benefits  
113 for mental health services for the treatment of postpartum depression and related mental  
114 health conditions for up to twelve additional months. Pregnant women receiving substance  
115 abuse treatment within sixty days of giving birth shall, subject to appropriations and any  
116 necessary federal approval, be eligible for MO HealthNet benefits for substance abuse  
117 treatment and mental health services for the treatment of substance abuse for no more than  
118 twelve additional months, as long as the woman remains adherent with treatment. The  
119 department of mental health and the department of social services shall seek any necessary  
120 waivers or state plan amendments from the Centers for Medicare and Medicaid Services and  
121 shall develop rules relating to treatment plan adherence. No later than fifteen months after  
122 receiving any necessary waiver, the department of mental health and the department of social  
123 services shall report to the house of representatives budget committee and the senate  
124 appropriations committee on the compliance with federal cost neutrality requirements;

125 (21) Case management services for pregnant women and young children at risk shall  
126 be a covered service. To the greatest extent possible, and in compliance with federal law and  
127 regulations, the department of health and senior services shall provide case management  
128 services to pregnant women by contract or agreement with the department of social services  
129 through local health departments organized under the provisions of chapter 192 or chapter  
130 205 or a city health department operated under a city charter or a combined city-county health  
131 department or other department of health and senior services designees. To the greatest extent  
132 possible the department of social services and the department of health and senior services  
133 shall mutually coordinate all services for pregnant women and children with the crippled  
134 children's program, the prevention of intellectual disability and developmental disability  
135 program and the prenatal care program administered by the department of health and senior

136 services. The department of social services shall by regulation establish the methodology for  
137 reimbursement for case management services provided by the department of health and senior  
138 services. For purposes of this section, the term "case management" shall mean those  
139 activities of local public health personnel to identify prospective MO HealthNet-eligible high-  
140 risk mothers and enroll them in the state's MO HealthNet program, refer them to local  
141 physicians or local health departments who provide prenatal care under physician protocol  
142 and who participate in the MO HealthNet program for prenatal care and to ensure that said  
143 high-risk mothers receive support from all private and public programs for which they are  
144 eligible and shall not include involvement in any MO HealthNet prepaid, case-managed  
145 programs;

146 (22) By January 1, 1988, the department of social services and the department of  
147 health and senior services shall study all significant aspects of presumptive eligibility for  
148 pregnant women and submit a joint report on the subject, including projected costs and the  
149 time needed for implementation, to the general assembly. The department of social services,  
150 at the direction of the general assembly, may implement presumptive eligibility by regulation  
151 promulgated pursuant to chapter 207;

152 (23) All participants who would be eligible for aid to families with dependent  
153 children benefits except for the requirements of paragraph (d) of subdivision (1) of section  
154 208.150;

155 (24) (a) All persons who would be determined to be eligible for old age assistance  
156 benefits under the eligibility standards in effect December 31, 1973, as authorized by 42  
157 U.S.C. Section 1396a(f), or less restrictive methodologies as contained in the MO HealthNet  
158 state plan as of January 1, 2005; except that, on or after July 1, 2005, less restrictive income  
159 methodologies, as authorized in 42 U.S.C. Section 1396a(r)(2), may be used to change the  
160 income limit if authorized by annual appropriation;

161 (b) All persons who would be determined to be eligible for aid to the blind benefits  
162 under the eligibility standards in effect December 31, 1973, as authorized by 42 U.S.C.  
163 Section 1396a(f), or less restrictive methodologies as contained in the MO HealthNet state  
164 plan as of January 1, 2005, except that less restrictive income methodologies, as authorized in  
165 42 U.S.C. Section 1396a(r)(2), shall be used to raise the income limit to one hundred percent  
166 of the federal poverty level;

167 (c) All persons who would be determined to be eligible for permanent and total  
168 disability benefits under the eligibility standards in effect December 31, 1973, as authorized  
169 by 42 U.S.C. Section 1396a(f); or less restrictive methodologies as contained in the MO  
170 HealthNet state plan as of January 1, 2005; except that, on or after July 1, 2005, less  
171 restrictive income methodologies, as authorized in 42 U.S.C. Section 1396a(r)(2), may be

172 used to change the income limit if authorized by annual appropriations. Eligibility standards  
173 for permanent and total disability benefits shall not be limited by age;

174 (25) Persons who have been diagnosed with breast or cervical cancer and who are  
175 eligible for coverage pursuant to 42 U.S.C. Section 1396a(a)(10)(A)(ii)(XVIII). Such  
176 persons shall be eligible during a period of presumptive eligibility in accordance with 42  
177 U.S.C. Section 1396r-1;

178 (26) Persons who are in foster care under the responsibility of the state of Missouri on  
179 the date such persons attained the age of eighteen years, or at any time during the thirty-day  
180 period preceding their eighteenth birthday, or persons who received foster care for at least six  
181 months in another state, are residing in Missouri, and are at least eighteen years of age,  
182 without regard to income or assets, if such persons:

183 (a) Are under twenty-six years of age;

184 (b) Are not eligible for coverage under another mandatory coverage group; and

185 (c) Were covered by Medicaid while they were in foster care;

186 (27) Any homeless child or homeless youth, as those terms are defined in section  
187 167.020, subject to approval of a state plan amendment by the Centers for Medicare and  
188 Medicaid Services;

189 **(28) (a) Subject to approval of any necessary state plan amendments or waivers,**  
190 **beginning on the effective date of this act, pregnant women who are eligible for, have**  
191 **applied for, and have received MO HealthNet benefits under subdivision (2), (10), (11),**  
192 **or (12) of this subsection shall be eligible for medical assistance during the pregnancy**  
193 **and during the twelve-month period that begins on the last day of the woman's**  
194 **pregnancy and ends on the last day of the month in which such twelve-month period**  
195 **ends, consistent with the provisions of 42 U.S.C. Section 1396a(e)(16). The department**  
196 **shall submit a state plan amendment to the Centers for Medicare and Medicaid Services**  
197 **when the number of ineligible MO HealthNet participants removed from the program**  
198 **in 2023 pursuant to section 208.239 exceeds the projected number of beneficiaries likely**  
199 **to enroll in benefits in 2023 under this subdivision and subdivision (2) of subsection 6 of**  
200 **section 208.662, as determined by the department, by at least one hundred individuals;**

201 **(b) The provisions of this subdivision shall remain in effect for any period of**  
202 **time during which the federal authority under 42 U.S.C. Section 1396a(e)(16), as**  
203 **amended, or any successor statutes or implementing regulations, is in effect.**

204 2. Rules and regulations to implement this section shall be promulgated in accordance  
205 with chapter 536. Any rule or portion of a rule, as that term is defined in section 536.010, that  
206 is created under the authority delegated in this section shall become effective only if it  
207 complies with and is subject to all of the provisions of chapter 536 and, if applicable, section  
208 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with

209 the general assembly pursuant to chapter 536 to review, to delay the effective date or to  
210 disapprove and annul a rule are subsequently held unconstitutional, then the grant of  
211 rulemaking authority and any rule proposed or adopted after August 28, 2002, shall be invalid  
212 and void.

213 3. After December 31, 1973, and before April 1, 1990, any family eligible for  
214 assistance pursuant to 42 U.S.C. Section 601, et seq., as amended, in at least three of the last  
215 six months immediately preceding the month in which such family became ineligible for such  
216 assistance because of increased income from employment shall, while a member of such  
217 family is employed, remain eligible for MO HealthNet benefits for four calendar months  
218 following the month in which such family would otherwise be determined to be ineligible for  
219 such assistance because of income and resource limitation. After April 1, 1990, any family  
220 receiving aid pursuant to 42 U.S.C. Section 601, et seq., as amended, in at least three of the  
221 six months immediately preceding the month in which such family becomes ineligible for  
222 such aid, because of hours of employment or income from employment of the caretaker  
223 relative, shall remain eligible for MO HealthNet benefits for six calendar months following  
224 the month of such ineligibility as long as such family includes a child as provided in 42  
225 U.S.C. Section 1396r-6. Each family which has received such medical assistance during the  
226 entire six-month period described in this section and which meets reporting requirements and  
227 income tests established by the division and continues to include a child as provided in 42  
228 U.S.C. Section 1396r-6 shall receive MO HealthNet benefits without fee for an additional six  
229 months. The MO HealthNet division may provide by rule and as authorized by annual  
230 appropriation the scope of MO HealthNet coverage to be granted to such families.

231 4. When any individual has been determined to be eligible for MO HealthNet  
232 benefits, such medical assistance will be made available to him or her for care and services  
233 furnished in or after the third month before the month in which he made application for such  
234 assistance if such individual was, or upon application would have been, eligible for such  
235 assistance at the time such care and services were furnished; provided, further, that such  
236 medical expenses remain unpaid.

237 5. The department of social services may apply to the federal Department of Health  
238 and Human Services for a MO HealthNet waiver amendment to the Section 1115  
239 demonstration waiver or for any additional MO HealthNet waivers necessary not to exceed  
240 one million dollars in additional costs to the state, unless subject to appropriation or directed  
241 by statute, but in no event shall such waiver applications or amendments seek to waive the  
242 services of a rural health clinic or a federally qualified health center as defined in 42 U.S.C.  
243 Section 1396d(l)(1) and (2) or the payment requirements for such clinics and centers as  
244 provided in 42 U.S.C. Section 1396a(a)(15) and 1396a(bb) unless such waiver application is  
245 approved by the oversight committee created in section 208.955. A request for such a waiver

246 so submitted shall only become effective by executive order not sooner than ninety days after  
 247 the final adjournment of the session of the general assembly to which it is submitted, unless it  
 248 is disapproved within sixty days of its submission to a regular session by a senate or house  
 249 resolution adopted by a majority vote of the respective elected members thereof, unless the  
 250 request for such a waiver is made subject to appropriation or directed by statute.

251 6. Notwithstanding any other provision of law to the contrary, in any given fiscal  
 252 year, any persons made eligible for MO HealthNet benefits under subdivisions (1) to (22) of  
 253 subsection 1 of this section shall only be eligible if annual appropriations are made for such  
 254 eligibility. This subsection shall not apply to classes of individuals listed in 42 U.S.C. Section  
 255 1396a(a)(10)(A)(i).

256 7. (1) Notwithstanding any provision of law to the contrary, a military service  
 257 member, or an immediate family member residing with such military service member, who is  
 258 a legal resident of this state and is eligible for MO HealthNet developmental disability  
 259 services, shall have his or her eligibility for MO HealthNet developmental disability services  
 260 temporarily suspended for any period of time during which such person temporarily resides  
 261 outside of this state for reasons relating to military service, but shall have his or her eligibility  
 262 immediately restored upon returning to this state to reside.

263 (2) Notwithstanding any provision of law to the contrary, if a military service  
 264 member, or an immediate family member residing with such military service member, is not a  
 265 legal resident of this state, but would otherwise be eligible for MO HealthNet developmental  
 266 disability services, such individual shall be deemed eligible for MO HealthNet developmental  
 267 disability services for the duration of any time in which such individual is temporarily present  
 268 in this state for reasons relating to military service.

**208.186. The state shall not provide payments, add-ons, or reimbursements to  
 2 health care providers through MO HealthNet for medical assistance services provided  
 3 to persons who do not reside in this state, as determined under 42 CFR 435.403, or any  
 4 amendments or successor regulations thereto.**

**208.239. The department of social services shall resume annual MO HealthNet  
 2 eligibility redeterminations, renewals, and postenrollment verifications no later than  
 3 thirty days after the effective date of this act.**

~~208.247. [1. Pursuant to the option granted the state by 21 U.S.C. Section 862a(d), an  
 2 individual who has pled guilty or nolo contendere to or is found guilty under federal or state  
 3 law of a felony involving possession or use of a controlled substance shall be exempt from the  
 4 prohibition contained in 21 U.S.C. Section 862a(a) against eligibility for food stamp program  
 5 benefits for such convictions, if such person, as determined by the department:~~

~~6 (1) Meets one of the following criteria:~~



7           ~~(a) Is currently successfully participating in a substance abuse treatment program~~  
8 ~~approved by the division of alcohol and drug abuse within the department of mental health; or~~

9           ~~(b) Is currently accepted for treatment in and participating in a substance abuse~~  
10 ~~treatment program approved by the division of alcohol and drug abuse, but is subject to a~~  
11 ~~waiting list to receive available treatment, and the individual remains enrolled in the treatment~~  
12 ~~program and enters the treatment program at the first available opportunity; or~~

13           ~~(c) Has satisfactorily completed a substance abuse treatment program approved by~~  
14 ~~the division of alcohol and drug abuse; or~~

15           ~~(d) Is determined by a division of alcohol and drug abuse certified treatment provider~~  
16 ~~not to need substance abuse treatment; and~~

17           ~~(2) Is successfully complying with, or has already complied with, all obligations~~  
18 ~~imposed by the court, the division of alcohol and drug abuse, and the division of probation~~  
19 ~~and parole; and~~

20           ~~(3) Does not plead guilty or nolo contendere to or is not found guilty of an additional~~  
21 ~~controlled substance misdemeanor or felony offense after release from custody or, if not~~  
22 ~~committed to custody, such person does not plead guilty or nolo contendere to or is not found~~  
23 ~~guilty of an additional controlled substance misdemeanor or felony offense, within one year~~  
24 ~~after the date of conviction. Such a plea or conviction within the first year after conviction~~  
25 ~~shall immediately disqualify the person for the exemption; and~~

26           ~~(4) Has demonstrated sobriety through voluntary urinalysis testing paid for by the~~  
27 ~~participant.~~

28           ~~2. Eligibility based upon the factors in subsection 1 of this section shall be based upon~~  
29 ~~documentary or other evidence satisfactory to the department of social services, and the~~  
30 ~~applicant shall meet all other factors for program eligibility.~~

31           ~~3. The department of social services, in consultation with the division of alcohol and~~  
32 ~~drug abuse, shall promulgate rules to carry out the provisions of this section including~~  
33 ~~specifying criteria for determining active participation in and completion of a substance abuse~~  
34 ~~treatment program.~~

35           ~~4. The exemption under this section shall not apply to an individual who has pled~~  
36 ~~guilty or nolo contendere to or is found guilty of two subsequent felony offenses involving~~  
37 ~~possession or use of a controlled substance after the date of the first controlled substance~~  
38 ~~felony conviction] Pursuant to the option granted to the state under 21 U.S.C. Section~~  
39 **862a(d)(1), an individual convicted under federal or state law of a felony offense**  
40 **involving possession, distribution, or use of a controlled substance shall be exempt from**  
41 **the prohibition contained in 21 U.S.C. Section 862a(a) against eligibility for the**  
42 **supplemental nutrition assistance program for such convictions.**

208.662. 1. There is hereby established within the department of social services the  
2 "Show-Me Healthy Babies Program" as a separate children's health insurance program  
3 (CHIP) for any low-income unborn child. The program shall be established under the  
4 authority of Title XXI of the federal Social Security Act, the State Children's Health  
5 Insurance Program, as amended, and 42 CFR 457.1.

6 2. For an unborn child to be enrolled in the show-me healthy babies program, his or  
7 her mother shall not be eligible for coverage under Title XIX of the federal Social Security  
8 Act, the Medicaid program, as it is administered by the state, and shall not have access to  
9 affordable employer-subsidized health care insurance or other affordable health care coverage  
10 that includes coverage for the unborn child. In addition, the unborn child shall be in a family  
11 with income eligibility of no more than three hundred percent of the federal poverty level, or  
12 the equivalent modified adjusted gross income, unless the income eligibility is set lower by  
13 the general assembly through appropriations. In calculating family size as it relates to income  
14 eligibility, the family shall include, in addition to other family members, the unborn child, or  
15 in the case of a mother with a multiple pregnancy, all unborn children.

16 3. Coverage for an unborn child enrolled in the show-me healthy babies program  
17 shall include all prenatal care and pregnancy-related services that benefit the health of the  
18 unborn child and that promote healthy labor, delivery, and birth. Coverage need not include  
19 services that are solely for the benefit of the pregnant mother, that are unrelated to  
20 maintaining or promoting a healthy pregnancy, and that provide no benefit to the unborn  
21 child. However, the department may include pregnancy-related assistance as defined in 42  
22 U.S.C. Section 1397ll.

23 4. There shall be no waiting period before an unborn child may be enrolled in the  
24 show-me healthy babies program. In accordance with the definition of child in 42 CFR  
25 457.10, coverage shall include the period from conception to birth. The department shall  
26 develop a presumptive eligibility procedure for enrolling an unborn child. There shall be  
27 verification of the pregnancy.

28 5. Coverage for the child shall continue for up to one year after birth, unless otherwise  
29 prohibited by law or unless otherwise limited by the general assembly through appropriations.

30 6. **(1)** Pregnancy-related and postpartum coverage for the mother shall begin on the  
31 day the pregnancy ends and extend through the last day of the month that includes the sixtieth  
32 day after the pregnancy ends, unless otherwise prohibited by law or unless otherwise limited  
33 by the general assembly through appropriations. The department may include pregnancy-  
34 related assistance as defined in 42 U.S.C. Section 1397ll.

35 **(2) (a) Subject to approval of any necessary state plan amendments or waivers,**  
36 **beginning on the effective date of this act, mothers eligible to receive coverage under this**  
37 **section shall receive medical assistance benefits during the pregnancy and during the**

38 **twelve-month period that begins on the last day of the woman's pregnancy and ends on**  
39 **the last day of the month in which such twelve-month period ends, consistent with the**  
40 **provisions of 42 U.S.C. Section 1397gg(e)(1)(J). The department shall seek any necessary**  
41 **state plan amendments or waivers to implement the provisions of this subdivision when**  
42 **the number of ineligible MO HealthNet participants removed from the program in 2023**  
43 **pursuant to section 208.239 exceeds the projected number of beneficiaries likely to**  
44 **enroll in benefits in 2023 under this subdivision and subdivision (28) of subsection 1 of**  
45 **section 208.151, as determined by the department, by at least one hundred individuals.**

46 **(b) The provisions of this subdivision shall remain in effect for any period of**  
47 **time during which the federal authority under 42 U.S.C. Section 1397gg(e)(1)(J), as**  
48 **amended, or any successor statutes or implementing regulations, is in effect.**

49 7. The department shall provide coverage for an unborn child enrolled in the show-  
50 me healthy babies program in the same manner in which the department provides coverage  
51 for the children's health insurance program (CHIP) in the county of the primary residence of  
52 the mother.

53 8. The department shall provide information about the show-me healthy babies  
54 program to maternity homes as defined in section 135.600, pregnancy resource centers as  
55 defined in section 135.630, and other similar agencies and programs in the state that assist  
56 unborn children and their mothers. The department shall consider allowing such agencies and  
57 programs to assist in the enrollment of unborn children in the program, and in making  
58 determinations about presumptive eligibility and verification of the pregnancy.

59 9. Within sixty days after August 28, 2014, the department shall submit a state plan  
60 amendment or seek any necessary waivers from the federal Department of Health and Human  
61 Services requesting approval for the show-me healthy babies program.

62 10. At least annually, the department shall prepare and submit a report to the  
63 governor, the speaker of the house of representatives, and the president pro tempore of the  
64 senate analyzing and projecting the cost savings and benefits, if any, to the state, counties,  
65 local communities, school districts, law enforcement agencies, correctional centers, health  
66 care providers, employers, other public and private entities, and persons by enrolling unborn  
67 children in the show-me healthy babies program. The analysis and projection of cost savings  
68 and benefits, if any, may include but need not be limited to:

69 (1) The higher federal matching rate for having an unborn child enrolled in the show-  
70 me healthy babies program versus the lower federal matching rate for a pregnant woman  
71 being enrolled in MO HealthNet or other federal programs;

72 (2) The efficacy in providing services to unborn children through managed care  
73 organizations, group or individual health insurance providers or premium assistance, or  
74 through other nontraditional arrangements of providing health care;

75 (3) The change in the proportion of unborn children who receive care in the first  
76 trimester of pregnancy due to a lack of waiting periods, by allowing presumptive eligibility,  
77 or by removal of other barriers, and any resulting or projected decrease in health problems  
78 and other problems for unborn children and women throughout pregnancy; at labor, delivery,  
79 and birth; and during infancy and childhood;

80 (4) The change in healthy behaviors by pregnant women, such as the cessation of the  
81 use of tobacco, alcohol, illicit drugs, or other harmful practices, and any resulting or projected  
82 short-term and long-term decrease in birth defects; poor motor skills; vision, speech, and  
83 hearing problems; breathing and respiratory problems; feeding and digestive problems; and  
84 other physical, mental, educational, and behavioral problems; and

85 (5) The change in infant and maternal mortality, preterm births and low birth weight  
86 babies and any resulting or projected decrease in short-term and long-term medical and other  
87 interventions.

88 11. The show-me healthy babies program shall not be deemed an entitlement  
89 program, but instead shall be subject to a federal allotment or other federal appropriations and  
90 matching state appropriations.

91 12. Nothing in this section shall be construed as obligating the state to continue the  
92 show-me healthy babies program if the allotment or payments from the federal government  
93 end or are not sufficient for the program to operate, or if the general assembly does not  
94 appropriate funds for the program.

95 13. Nothing in this section shall be construed as expanding MO HealthNet or  
96 fulfilling a mandate imposed by the federal government on the state.

**209.700. 1. This section shall be known and may be cited as the "Missouri  
2 Employment First Act".**

**3 2. As used in this section, unless the context clearly requires otherwise, the  
4 following terms mean:**

**5 (1) "Competitive integrated employment", work that:**

**6 (a) Is performed on a full-time or part-time basis, including self-employment,  
7 and for which a person is compensated at a rate that:**

**8 a. Is no less than the higher of the rate specified in 29 U.S.C. Section 206(a)(1) or  
9 the rate required under any applicable state or local minimum wage law for the place of  
10 employment;**

**11 b. Is no less than the customary rate paid by the employer for the same or  
12 similar work performed by other employees who are not persons with disabilities and  
13 who are similarly situated in similar occupations by the same employer and who have  
14 similar training, experience, and skills;**

- 15           c. In the case of a person who is self-employed, yields an income that is  
16 comparable to the income received by other persons who are not persons with  
17 disabilities and who are self-employed in similar occupations or on similar tasks and  
18 who have similar training, experience, and skills; and
- 19           d. Is eligible for the level of benefits provided to other employees;
- 20           (b) Is at a location:
- 21           a. Typically found in the community; and
- 22           b. Where the employee with a disability interacts for the purpose of performing  
23 the duties of the position with other employees within the particular work unit and the  
24 entire work site and, as appropriate to the work performed, other persons, such as  
25 customers and vendors, who are not persons with disabilities, other than supervisory  
26 personnel or persons who are providing services to such employee, to the same extent  
27 that employees who are not persons with disabilities and who are in comparable  
28 positions interact with these persons; and
- 29           (c) Presents, as appropriate, opportunities for advancement that are similar to  
30 those for other employees who are not persons with disabilities and who have similar  
31 positions;
- 32           (2) "Customized employment", competitive integrated employment for a person  
33 with a significant disability that is:
- 34           (a) Based on an individualized determination of the unique strengths, needs, and  
35 interests of the person with a significant disability;
- 36           (b) Designed to meet the specific abilities of the person with a significant  
37 disability and the business needs of the employer; and
- 38           (c) Carried out through flexible strategies, such as:
- 39           a. Job exploration by the person; and
- 40           b. Working with an employer to facilitate placement, including:
- 41           (i) Customizing a job description based on current employer needs or on  
42 previously unidentified and unmet employer needs;
- 43           (ii) Developing a set of job duties, a work schedule and job arrangement, and  
44 specifics of supervision, including performance evaluation and review, and determining  
45 a job location;
- 46           (iii) Using a professional representative chosen by the person or self-  
47 representation, if elected, to work with an employer to facilitate placement; and
- 48           (iv) Providing services and supports at the job location;
- 49           (3) "Disability", a physical or mental impairment that substantially limits one or  
50 more major life activities of a person, as defined in the Americans with Disabilities Act  
51 of 1990, as amended. The term "disability" does not include brief periods of

52 **intoxication caused by alcohol or drugs or dependence upon or addiction to any alcohol**  
53 **or drug;**

54 **(4) "Employment first", a concept to facilitate the full inclusion of persons with**  
55 **disabilities in the workplace and community in which community-based, competitive**  
56 **integrated employment is the first and preferred outcome for employment services for**  
57 **persons with disabilities;**

58 **(5) "Employment-related services", services provided to persons, including**  
59 **persons with disabilities, to assist them in finding employment. The term "employment-**  
60 **related services" includes, but is not limited to, resume development, job fairs, and**  
61 **interview training;**

62 **(6) "Integrated setting", a setting:**

63 **(a) Typically found in the community; and**

64 **(b) Where the employee with a disability interacts for the purpose of performing**  
65 **the duties of the position with other employees within the particular work unit and the**  
66 **entire work site and, as appropriate to the work performed, other persons, such as**  
67 **customers and vendors, who are not persons with disabilities, other than supervisory**  
68 **personnel or persons who are providing services to such employee, to the same extent**  
69 **that employees who are not persons with disabilities and who are in comparable**  
70 **positions interact with these persons;**

71 **(7) "Outcome", with respect to a person entering, advancing in, or retaining full-**  
72 **time or, if appropriate, part-time competitive integrated employment, including**  
73 **customized employment, self-employment, telecommuting, or business ownership, or**  
74 **supported employment that is consistent with a person's unique strengths, resources,**  
75 **priorities, concerns, abilities, capabilities, interests, and informed choice;**

76 **(8) "Sheltered workshop", the same meaning given to the term in section**  
77 **178.900;**

78 **(9) "State agency", an authority, board, branch, commission, committee,**  
79 **department, division, or other instrumentality of the executive branch of state**  
80 **government;**

81 **(10) "Supported employment", competitive integrated employment, including**  
82 **customized employment, or employment in an integrated setting in which persons are**  
83 **working toward a competitive integrated employment, that is individualized and**  
84 **customized consistent with the strengths, abilities, interests, and informed choice of the**  
85 **persons involved who, because of the nature and severity of their disabilities, need**  
86 **intensive supported employment services and extended services in order to perform the**  
87 **work involved;**

88           **(11) "Supported employment services", ongoing support services, including**  
89 **customized employment, needed to support and maintain a person with a most**  
90 **significant disability in supported employment, that:**

91           **(a) Are provided singly or in combination and are organized and made available**  
92 **in such a way as to assist an eligible person to achieve competitive integrated**  
93 **employment; and**

94           **(b) Are based on a determination of the needs of an eligible person, as specified**  
95 **in an individualized plan for employment;**

96           **(12) "Working age", sixteen years of age or older;**

97           **(13) "Youth with a disability", any person fourteen years of age or older and**  
98 **under eighteen years of age who has a disability.**

99           **3. All state agencies that provide employment-related services or that provide**  
100 **services or support to persons with disabilities shall:**

101           **(1) Develop collaborative relationships with each other, confirmed by a written**  
102 **memorandum of understanding signed by each such state agency; and**

103           **(2) Implement coordinated strategies to promote competitive integrated**  
104 **employment including, but not limited to, coordinated service planning, job**  
105 **exploration, increased job training, and internship opportunities.**

106           **4. All state agencies that provide employment-related services or that provide**  
107 **services or support to persons with disabilities shall:**

108           **(1) Implement an employment first policy by considering competitive integrated**  
109 **employment as the first and preferred outcome when planning or providing services or**  
110 **supports to persons with disabilities who are of working age;**

111           **(2) Offer information on competitive integrated employment to all working-age**  
112 **persons with disabilities. The information offered shall include an explanation of the**  
113 **relationship between a person's earned income and his or her public benefits,**  
114 **information on Achieving a Better Life Experience (ABLE) accounts, and**  
115 **information on accessing assistive technology;**

116           **(3) Ensure that persons with disabilities receive the opportunity to understand**  
117 **and explore education and training as pathways to employment, including**  
118 **postsecondary, graduate, and postgraduate education; vocational and technical**  
119 **training; and other training. State agencies shall not be required to fund any**  
120 **education or training unless otherwise required by law;**

121           **(4) Promote the availability and accessibility of individualized training designed**  
122 **to prepare a person with a disability for the person's preferred employment;**

123           **(5) Promote partnerships with private agencies that offer supported employment**  
124 **services, if appropriate;**

125           **(6) Promote partnerships with employers to overcome barriers to meeting**  
126 **workforce needs with the creative use of technology and innovation;**

127           **(7) Ensure that staff members of public schools, vocational service programs,**  
128 **and community providers receive the support, guidance, and training that they need to**  
129 **contribute to attainment of the goal of competitive integrated employment for all**  
130 **persons with disabilities;**

131           **(8) Ensure that competitive integrated employment, while the first and preferred**  
132 **outcome when planning or providing services or supports to persons with disabilities**  
133 **who are of working age, is not required of a person with a disability to secure or**  
134 **maintain public benefits for which the person is otherwise eligible; and**

135           **(9) At least once each year, discuss basic information about competitive**  
136 **integrated employment with the parents or guardians of a youth with a disability. If the**  
137 **youth with a disability has been emancipated, state agencies shall discuss this**  
138 **information with the youth with a disability. The information offered shall include**  
139 **an explanation of the relationship between a person's earned income and his or her**  
140 **public benefits, information about ABLE accounts, and information about accessing**  
141 **assistive technology.**

142           **5. Nothing in this section shall require a state agency to perform any action that**  
143 **would interfere with the state agency's ability to fulfill duties and requirements**  
144 **mandated by federal law.**

145           **6. Nothing in this section shall be construed to limit or disallow any disability**  
146 **benefits to which a person with a disability who is unable to engage in competitive**  
147 **integrated employment would otherwise be entitled.**

148           **7. Nothing in this section shall be construed to eliminate any supported**  
149 **employment services or sheltered workshop settings as options.**

150           **8. (1) Nothing in this section shall be construed to require any state agency or**  
151 **other employer to give a preference in hiring to persons with disabilities or to prohibit**  
152 **any employment relationship or program that is otherwise permitted under applicable**  
153 **law.**

154           **(2) Any person who is employed by a state agency shall meet the minimum**  
155 **qualifications and requirements for the position in which the person is employed.**

156           **9. All state agencies that provide employment-related services or that provide**  
157 **services or support to persons with disabilities shall coordinate efforts and collaborate**  
158 **within and among each other to ensure that state programs, policies, and procedures**  
159 **support competitive integrated employment for persons with disabilities who are of**  
160 **working age. All such state agencies, when feasible, shall share data and information**  
161 **across systems in order to track progress toward full implementation of this section. All**



162 such state agencies are encouraged to adopt measurable goals and objectives to promote  
163 assessment of progress in implementing this section.

164 **10. State agencies may promulgate all necessary rules and regulations for the**  
165 **administration of this section. Any rule or portion of a rule, as that term is defined in**  
166 **section 536.010, that is created under the authority delegated in this section shall**  
167 **become effective only if it complies with and is subject to all of the provisions of chapter**  
168 **536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable**  
169 **and if any of the powers vested with the general assembly pursuant to chapter 536 to**  
170 **review, to delay the effective date, or to disapprove and annul a rule are subsequently**  
171 **held unconstitutional, then the grant of rulemaking authority and any rule proposed or**  
172 **adopted after August 28, 2023, shall be invalid and void.**

570.400. 1. A person commits the offense of unlawfully receiving public assistance  
2 benefits or EBT cards if he or she knowingly receives, **including by sale for consideration,**  
3 or uses the proceeds of public assistance benefits or EBT cards to which he or she is not  
4 lawfully entitled or for which he or she has not applied and been approved by the department  
5 to receive.

6 2. The offense of unlawfully receiving public assistance benefits or EBT cards is a  
7 class A misdemeanor, unless the face value of the public assistance benefits or EBT cards is  
8 seven hundred fifty dollars or more or the person is found guilty of a second offense of  
9 unlawfully receiving public assistance benefits or EBT cards in an amount less than seven  
10 hundred fifty dollars, in which case it is a class E felony. Any person who is found guilty of a  
11 second or subsequent offense of felony unlawfully receiving public assistance benefits or  
12 EBT cards, or any person who is found guilty of an offense under this section and has  
13 previously been found guilty of two violations under sections 570.400 to 570.410, shall be  
14 guilty of a class D felony. Any person who is found guilty of felony unlawfully receiving of  
15 public assistance benefits or EBT cards shall serve not less than one hundred twenty days in  
16 the department of corrections unless such person pays full restitution to the state of Missouri  
17 within thirty days of the date of execution of sentence.

18 3. In addition to any criminal penalty, any person found guilty of unlawfully receiving  
19 public assistance benefits or EBT cards shall pay full restitution to the state of Missouri for  
20 the total amount of moneys converted. No person placed on probation for the offense shall be  
21 released from probation until full restitution has been paid.

570.404. 1. A person commits the offense of unlawful transfer of public assistance  
2 benefits or EBT cards if he or she knowingly transfers, **including by sale for consideration,**  
3 public assistance benefits or EBT cards to another not lawfully entitled or approved by the  
4 department of social services to receive the public assistance benefits or EBT cards.

5           2. The offense of unlawful transfer of public assistance benefits or EBT cards is a  
6 class A misdemeanor, unless the face value of the public assistance benefits or EBT cards is  
7 seven hundred fifty dollars or more or the person is found guilty of a second offense of  
8 unlawful transfer of public assistance benefits or EBT cards in an amount less than seven  
9 hundred fifty dollars, in which case it is a class E felony. Any person who is found guilty of a  
10 second or subsequent offense of felony unlawful transfer of public assistance benefits, or any  
11 person who is found guilty of an offense under this section and has been found guilty of two  
12 or more violations under sections 570.400 to 570.410, shall be guilty of a class D felony. Any  
13 person who is found guilty of felony unlawful transfer of public assistance benefits or EBT  
14 cards shall serve not less than one hundred twenty days in the department of corrections  
15 unless such person pays full restitution to the state of Missouri within thirty days of the date  
16 of execution of sentence.

17           3. In addition to any criminal penalty, any person found guilty of unlawful transfer of  
18 public assistance benefits or EBT cards shall pay full restitution to the state of Missouri for  
19 the total amount of moneys converted. No person placed on probation for the offense shall be  
20 released from probation until full restitution has been paid.

Section B. Because of the importance of ensuring healthy pregnancies and healthy  
2 women and children in Missouri in the face of growing maternal mortality and to ensure the  
3 integrity of the MO HealthNet program, sections 208.151, 208.186, 208.239, and 208.662 of  
4 this act are deemed necessary for the immediate preservation of the public health, welfare,  
5 peace, and safety, and are hereby declared to be an emergency act within the meaning of the  
6 constitution, and sections 208.151, 208.186, 208.239, and 208.662 of this act shall be in full  
7 force and effect upon its passage and approval.

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