#### SECOND REGULAR SESSION

# **HOUSE BILL NO. 2883**

### 102ND GENERAL ASSEMBLY

#### INTRODUCED BY REPRESENTATIVE SAULS.

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DANA RADEMAN MILLER, Chief Clerk

## AN ACT

To amend chapter 42, RSMo, by adding thereto one new section relating to alternative treatment options for veterans.

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

Section A. Chapter 42, RSMo, is amended by adding thereto one new section, to be 2 known as section 42.018, to read as follows:

- 42.018. 1. This section shall be known and may be cited as the "Veterans Traumatic Brain Injury Treatment Act".
- 2. As used in this section, the following terms mean:
- (1) "Eligible patient", a military veteran who meets the requirements of this 5 section:
- 6 (2) "Health care facility", the same meaning given to the term in section 190.100. The term "health care facility" shall also include any outpatient or inpatient facility utilizing hyperbaric oxygen therapy and any private hyperbaric oxygen treatment center licensed in this state;
- 10 (3) "Health care provider", a licensed physician, chiropractor, or a certified 11 hyperbaric oxygen technician;
- (4) "Posttraumatic stress disorder" or "PTSD", a mental health disorder that is 12 13 developed after having experienced or witnessed a life-threatening event including, but 14 not limited to, military sexual trauma;
- 15 (5) "Traumatic brain injury" or "TBI", an acquired injury to the brain. The 16 term "traumatic brain injury" shall not include brain dysfunction caused by congenital or degenerative disorders or birth trauma.

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.

HB 2883

18 3. The veterans commission may contract with public or private institutions of 19 higher education in this state, or public or private clinics or hospitals, to furnish 20 alternative treatment options for veterans who have been certified by the United States 21 Department of Veterans Affairs, any branch of the United States Armed Forces, or any 22 state-licensed physician as having a traumatic brain injury or posttraumatic stress 23 disorder. The institution of higher education shall manage, monitor, and ensure the 24 compliance of contracted providers of any of the following alternative treatment 25 options:

- (1) Accelerated resolution therapy;
- (2) Equine therapy;

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- 28 (3) Hyperbaric oxygen therapy, which shall be provided at a registered and 29 licensed hyperbaric oxygen facility;
  - (4) Music therapy; or
  - (5) Service animal training therapy.
- 4. A veteran qualifies to receive alternative treatment under this section if he or she:
  - (1) Has been diagnosed, by a health care practitioner, with service-connected posttraumatic stress disorder or a service-connected traumatic brain injury; and
    - (2) Voluntarily agrees to such alternative treatment.
  - 5. (1) The provision of alternative treatment shall be under the direction and supervision of an individual licensed in this state to perform such alternative treatment.
  - (2) The supervising licensed provider shall agree to cooperate with the veterans commission to provide data sufficient to assess the efficacy of alternative treatment modalities. Acceptable data may include, but shall not be limited to, institutional review board clinical trial data, pretreatment and posttreatment MRI brain scans, cognitive testing such as the RightEye testing approved by the United States Food and Drug Administration, Automated Neuropsychological Assessment Metrics (ANAM) approved by the United States Department of Defense, and CNS Vital Signs (CNSVS) metrics.
  - 6. (1) A health care provider or health care facility shall make hyperbaric oxygen therapy available to an eligible patient who has requested such therapy under the provisions of this subsection.
    - (2) Such a health care provider or health care facility may:
    - (a) Provide the hyperbaric oxygen therapy without receiving compensation;
  - (b) Require an eligible patient to pay for the cost of the hyperbaric oxygen therapy and any associated costs, at a rate that shall not exceed the maximum rate allowed by Medicare; or

HB 2883

 (c) Allow an eligible patient to utilize alternative sources of funding to cover the cost of the hyperbaric oxygen therapy and any associated costs. Such alternative sources of funding may include, but shall not be limited to, gifts, grants, donations, reimbursements from federal programs, and contributions from third parties. The eligible patient shall remain liable to the health care provider or health care facility for any portion of costs not covered by alternative sources of funding.

- (3) Notwithstanding any provision of law to the contrary, an eligible patient shall be entitled to receive hyperbaric oxygen therapy under this subsection if the eligible patient:
  - (a) Has received a diagnosis of PTSD or TBI;
- (b) Has received an official recommendation for hyperbaric oxygen therapy from the health care provider who treats the eligible patient; and
  - (c) Resides in this state.
- 7. A licensing board shall not revoke, suspend, or fail to renew the license of a health care provider, or take any other punitive action against a health care provider, based on a recommendation or counseling by the health care provider relating to access to or treatment with a hyperbaric oxygen chamber for an eligible patient.
- 8. No person acting on behalf of this state shall block or attempt to block an eligible patient from receiving access to hyperbaric oxygen treatment.
- 9. The department of public safety may promulgate all necessary rules and regulations for the implementation 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, 2024, shall be invalid and void.

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