SPONSOR: Jones (88)

Currently, where there is a suspected case of child abuse or neglect, a child can be taken into temporary protective custody, which cannot exceed 24 hours unless an extension is authorized by an order of the juvenile court. This bill provides that such extension is authorized except when a parent, guardian, or authorized representative provides proof of a known medical condition that contradicts abuse or neglect allegations.

The bill also specifies that an agreement between Children's Division within the Department of Social Services or the Department of Health and Senior Services (DHSS) and the sexual assault forensic examination-child resource and education network or the regional child assessment centers authorized under Section 210.001, RSMo (system), must require the network and the system to have the ability to obtain consultations with randomized physicians who specialize in identifying unique health conditions, specified in the bill. The bill provides circumstances in which DHSS will refer a case of suspected child abuse or neglect for consideration with a specialist. Prior to referring a child to a specialty consultation, DHSS must provide the child's parent, legal quardian, or legal representative written notice of the name, contact information, and credentials of the specialist providing the consultation, and the parent, legal guardian, or legal representative can object to the choice of specialist. The child's parent, legal guardian, or legal representative must be allowed to seek his or her own physician to evaluate the child and the medical reports. The bill prohibits DHSS, any referring provider, a hospital, a child abuse pediatrician, or any other network from obstructing, preventing, or inhibiting a child's parent, legal quardian, or legal representative from obtaining all medical records and documentation necessary to request an alternative opinion.

This bill is similar to HB 2691 (2024) and 2690 (2024).