HCS SB 1019 -- HEALTH CARE

This bill modifies the provisions relating to health care.

HOSPITAL INVESTMENTS AND SERVICE AREAS (Sections 96.192, 96.196, 206.110, and 206.158)

The bill modifies the investment authority of boards of trustees of municipal hospitals in third class cities and hospital district hospitals. Current law permits investment of up to 25% of funds not required for operations of the hospital or other obligations.

The bill permits investments of up to 50% of "available funds" as defined as funds not required for operations or other obligations in the manner specified in the bill, with the remaining portion to be invested into any investment in which the State Treasurer is allowed to invest. These provisions will apply only if the hospital receives less than 3% of its annual revenues from municipal, county, hospital district, or state taxes, or appropriated funds from the municipality in which such hospital is located.

Under this bill, municipal hospitals in third class cities can operate in areas where hospital district hospitals and county hospitals operate. Hospital district hospitals can operate in areas where municipal hospitals in third and fourth class cities and county hospitals operate.

LYME DISEASE (Section 192.026)

The bill creates the "Missouri Lyme Disease Eradication Act," which requires health care providers, laboratories, and local health departments to report to the Department of Health and Senior Services (DHSS) all confirmed or suspected cases of Lyme Disease within three days of diagnosis. Any patient with a positive or suspected diagnosis will be given the option to opt in to having their identifiable information shared with DHSS, local public health officials, or the CDC. DHSS will compile an annual report on the incidence and prevalence of Lyme disease in Missouri, as described in the bill. The report must be submitted to the CDC and General Assembly and posted on the Department's website no later than December 31st each year.

DHSS will also collaborate with public four-year institutions of higher education to integrate Lyme disease surveillance data into existing tick-borne disease monitoring programs.