

# Journal of the Senate

FIRST REGULAR SESSION

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**FORTY-FIFTH DAY - MONDAY, APRIL 3, 2023**

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The Senate met pursuant to adjournment.

President Kehoe in the Chair.

Senator Carter offered the following prayer:

Pray with me...Father, we come boldly before Your Throne of grace as you've instructed us to do. We ask that You would guide the proceedings of these chambers with Your Spirit of Wisdom, Knowledge, and Understanding. We fervently ask that You would grant these elected officials the Mind of Christ, to make decisions in the best interest of and for the general welfare of our citizens, to establish justice for our Great State and to secure the blessing of Liberty. We invite You into these chambers. We seek the leading of Your Holy Spirit and we acknowledge that all of this is made possible in the Name of Your Son, in whom we pray. Amen.

The Pledge of Allegiance to the Flag was recited.

A quorum being established, the Senate proceeded with its business.

The Journal for Thursday, March 30, 2023, was read and approved.

The following Senators were present during the day's proceedings:

Present—Senators

Arthur	Bean	Beck	Bernskoetter	Black	Brattin	Brown (16th Dist.)
Brown (26th Dist.)	Carter	Cierpiot	Coleman	Crawford	Eigel	Eslinger
Fitzwater	Gannon	Hoskins	Hough	Koenig	Luetkemeyer	May
McCreery	Moon	Mosley	O'Laughlin	Razer	Rizzo	Roberts
Rowden	Schroer	Thompson Rehder	Trent	Washington	Williams—34	

Absent—Senators—None

Absent with leave—Senators—None

Vacancies—None

The Lieutenant Governor was present.

## RESOLUTIONS

Senator Mosley offered Senate Resolution No. 310, regarding the death of Sean Christopher Merritt, Florissant, which was adopted.

Senator Carter offered Senate Resolution No. 311, regarding Brad Belk, Joplin, which was adopted.

Senator Crawford offered Senate Resolution No. 312, regarding Mary Beth Dodson, Stockton, which was adopted.

Senator Bean offered Senate Resolution No. 313, regarding Kayden Dye, Kennett, which was adopted.

Senator Fitzwater offered Senate Resolution No. 314, regarding The Honorable Joanne M. Hammuck, Paynesville, which was adopted.

Senator Roberts, Senator Williams, and Senator Mosley offered Senate Resolution No. 315, regarding Dr. LaTonia Collins Smith, St. Louis, which was adopted.

Senator Brown (16) offered Senate Resolution No. 316, regarding the Fiftieth Anniversary of Phelps County Industrial Solutions, which was adopted.

### MESSAGES FROM THE HOUSE

The following messages were received from the House of Representatives through its Chief Clerk:

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 11**, entitled:

An Act to appropriate money for the expenses, grants, refunds, and distributions of the Department of Social Services and the several divisions and programs thereof to be expended only as provided in Article IV, Section 28 of the Constitution of Missouri, and to transfer money among certain funds for the period beginning July 1, 2023, and ending June 30, 2024.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 12**, entitled:

An Act to appropriate money for expenses, grants, refunds, and distributions of the Chief Executive's Office and Mansion, Lieutenant Governor, Secretary of State, State Auditor, State Treasurer, Attorney General, Missouri Prosecuting Attorneys and Circuit Attorneys Retirement Systems, and the Judiciary and the Office of the State Public Defender, and the several divisions and programs thereof, and for the payment of salaries and mileage of members of the State Senate and the House of Representatives and contingent expenses of the General Assembly, including salaries and expenses of elective and appointive officers and necessary capital improvements expenditures; for salaries and expenses of members and employees and other necessary operating expenses of the Committee on Legislative Research, various joint committees, for the expenses of the interim committees established by the General Assembly, and to transfer money among certain funds, to be expended only as provided in Article IV, Section 28 of the Constitution of Missouri, for the period beginning July 1, 2023 and ending June 30, 2024.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 13**, entitled:

An Act to appropriate money for real property leases, related services, utilities, systems furniture, structural modifications, and related expenses for the several departments of state government and the divisions and programs thereof to be expended only as provided in Article IV, Section 28 of the

Constitution of Missouri, and to transfer money among certain funds for the period beginning July 1, 2023, and ending June 30, 2024.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 15**, entitled:

An Act to appropriate money for supplemental purposes for the expenses, grants, refunds, and distributions of the several departments and offices of state government and the several divisions and programs thereof, and to transfer money among certain funds, to be expended only as provided in Article IV, Section 28 of the Constitution of Missouri for the fiscal period ending June 30, 2023.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

### SENATE BILLS FOR PERFECTION

Senator May moved that **SB 35** be called from the Informal Calendar and taken up for perfection, which motion prevailed.

Senator May offered **SS** for **SB 35**, entitled:

#### SENATE SUBSTITUTE FOR SENATE BILL NO. 35

An Act to repeal section 454.1005, RSMo, and to enact in lieu thereof one new section relating to child support enforcement.

Senator May moved that **SS** for **SB 35** be adopted.

Senator Brattin offered **SA 1**:

#### SENATE AMENDMENT NO. 1

Amend Senate Substitute for Senate Bill No. 35, Page 1, In the Title, Lines 3-4, by striking “child support enforcement” and inserting in lieu thereof the following: “judicial proceedings involving the parent-child relationship”; and

Further amend said bill and page, Section A, line 3, by inserting after all of said line the following:

“452.375. 1. As used in this chapter, unless the context clearly indicates otherwise:

(1) “Custody” means joint legal custody, sole legal custody, joint physical custody or sole physical custody or any combination thereof;

(2) “Joint legal custody” means that the parents share the decision-making rights, responsibilities, and authority relating to the health, education and welfare of the child, and, unless allocated, apportioned, or

decreed, the parents shall confer with one another in the exercise of decision-making rights, responsibilities, and authority;

(3) “Joint physical custody” means an order awarding each of the parents significant, but not necessarily equal, periods of time during which a child resides with or is under the care and supervision of each of the parents. Joint physical custody shall be shared by the parents in such a way as to assure the child of frequent, continuing and meaningful contact with both parents;

(4) “Third-party custody” means a third party designated as a legal and physical custodian pursuant to subdivision (5) of subsection 5 of this section.

2. The court shall determine custody in accordance with the best interests of the child. **There shall be a rebuttable presumption that an award of equal or approximately equal parenting time to each parent is in the best interests of the child. Such presumption is rebuttable only by a preponderance of the evidence in accordance with all relevant factors, including, but not limited to, the factors contained in subdivisions (1) to (8) of this subsection. The presumption may be rebutted if the court finds that the parents have reached an agreement on all issues related to custody, or if the court finds that a pattern of domestic violence has occurred as set out in subdivision (6) of this subsection.** When the parties have not reached an agreement on all issues related to custody, the court shall consider all relevant factors and enter written findings of fact and conclusions of law, including, but not limited to, the following:

(1) The wishes of the child's parents as to custody and the proposed parenting plan submitted by both parties;

(2) The needs of the child for a frequent, continuing and meaningful relationship with both parents and the ability and willingness of parents to actively perform their functions as mother and father for the needs of the child;

(3) The interaction and interrelationship of the child with parents, siblings, and any other person who may significantly affect the child's best interests;

(4) Which parent is more likely to allow the child frequent, continuing and meaningful contact with the other parent;

(5) The child's adjustment to the child's home, school, and community. **The fact that a parent sends his or her child or children to a home school, as defined in section 167.031, shall not be the sole factor that a court considers in determining custody of such child or children;**

(6) The mental and physical health of all individuals involved, including any history of abuse of any individuals involved. If the court finds that a pattern of domestic violence as defined in section 455.010 has occurred, and, if the court also finds that awarding custody to the abusive parent is in the best interest of the child, then the court shall enter written findings of fact and conclusions of law. Custody and visitation rights shall be ordered in a manner that best protects the child and any other child or children for whom the parent has custodial or visitation rights, and the parent or other family or household member who is the victim of domestic violence from any further harm;

(7) The intention of either parent to relocate the principal residence of the child; and

(8) The [wishes] **unobstructed input** of a child, **free of coercion and manipulation**, as to the child's [custodian] **custodial arrangement**. [The fact that a parent sends his or her child or children to a home school, as defined in section 167.031, shall not be the sole factor that a court considers in determining custody of such child or children.]

3. (1) In any court proceedings relating to custody of a child, the court shall not award custody or unsupervised visitation of a child to a parent if such parent or any person residing with such parent has been found guilty of, or pled guilty to, any of the following offenses when a child was the victim:

(a) A felony violation of section 566.030, 566.031, 566.032, 566.060, 566.061, 566.062, 566.064, 566.067, 566.068, 566.083, 566.100, 566.101, 566.111, 566.151, 566.203, 566.206, 566.209, 566.211, or 566.215;

(b) A violation of section 568.020;

(c) A violation of subdivision (2) of subsection 1 of section 568.060;

(d) A violation of section 568.065;

(e) A violation of section 573.200;

(f) A violation of section 573.205; or

(g) A violation of section 568.175.

(2) For all other violations of offenses in chapters 566 and 568 not specifically listed in subdivision (1) of this subsection or for a violation of an offense committed in another state when a child is the victim that would be a violation of chapter 566 or 568 if committed in Missouri, the court may exercise its discretion in awarding custody or visitation of a child to a parent if such parent or any person residing with such parent has been found guilty of, or pled guilty to, any such offense.

4. The general assembly finds and declares that it is the public policy of this state that frequent, continuing and meaningful contact with both parents after the parents have separated or dissolved their marriage is in the best interest of the child, except for cases where the court specifically finds that such contact is not in the best interest of the child, and that it is the public policy of this state to encourage parents to participate in decisions affecting the health, education and welfare of their children, and to resolve disputes involving their children amicably through alternative dispute resolution. In order to effectuate these policies, **the general assembly encourages the court to enter a temporary parenting plan as early as practicable in a proceeding under this chapter, consistent with the provisions of subsection 2 of this section, and, in so doing**, the court shall determine the custody arrangement which will best assure both parents participate in such decisions and have frequent, continuing and meaningful contact with their children so long as it is in the best interests of the child.

5. Prior to awarding the appropriate custody arrangement in the best interest of the child, the court shall consider each of the following as follows:

(1) Joint physical and joint legal custody to both parents, which shall not be denied solely for the reason that one parent opposes a joint physical and joint legal custody award. The residence of one of the parents shall be designated as the address of the child for mailing and educational purposes;

(2) Joint physical custody with one party granted sole legal custody. The residence of one of the parents shall be designated as the address of the child for mailing and educational purposes;

(3) Joint legal custody with one party granted sole physical custody;

(4) Sole custody to either parent; or

(5) Third-party custody or visitation:

(a) When the court finds that each parent is unfit, unsuitable, or unable to be a custodian, or the welfare of the child requires, and it is in the best interests of the child, then custody, temporary custody or visitation may be awarded **to** a person related by consanguinity or affinity to the child. If no person related to the child by consanguinity or affinity is willing to accept custody, then the court may award custody to any other person or persons deemed by the court to be suitable and able to provide an adequate and stable environment for the child. Before the court awards custody, temporary custody or visitation to a third person under this subdivision, the court shall make that person a party to the action;

(b) Under the provisions of this subsection, any person may petition the court to intervene as a party in interest at any time as provided by supreme court rule.

6. If the parties have not agreed to a custodial arrangement, or the court determines such arrangement is not in the best interest of the child, the court shall include a written finding in the judgment or order based on the public policy in subsection 4 of this section and each of the factors listed in subdivisions (1) to (8) of subsection 2 of this section detailing the specific relevant factors that made a particular arrangement in the best interest of the child. If a proposed custodial arrangement is rejected by the court, the court shall include a written finding in the judgment or order detailing the specific relevant factors resulting in the rejection of such arrangement.

7. Upon a finding by the court that either parent has refused to exchange information with the other parent, which shall include but not be limited to information concerning the health, education and welfare of the child, the court shall order the parent to comply immediately and to pay the prevailing party a sum equal to the prevailing party's cost associated with obtaining the requested information, which shall include but not be limited to reasonable attorney's fees and court costs.

8. As between the parents of a child, no preference may be given to either parent in the awarding of custody because of that parent's age, sex, or financial status, nor because of the age or sex of the child. The court shall not presume that a parent, solely because of his or her sex, is more qualified than the other parent to act as a joint or sole legal or physical custodian for the child.

9. Any judgment providing for custody shall include a specific written parenting plan setting forth the terms of such parenting plan arrangements specified in subsection 8 of section 452.310. Such plan may be a parenting plan submitted by the parties pursuant to section 452.310 or, in the absence thereof, a plan determined by the court, but in all cases, the custody plan approved and ordered by the court shall be in the court's discretion and shall be in the best interest of the child.

10. After August 28, 2016, every court order establishing or modifying custody or visitation shall include the following language: "In the event of noncompliance with this order, the aggrieved party may file a verified motion for contempt. If custody, visitation, or third-party custody is denied or interfered with by a parent or third party without good cause, the aggrieved person may file a family access motion

with the court stating the specific facts that constitute a violation of the custody provisions of the judgment of dissolution, legal separation, or judgment of paternity. The circuit clerk will provide the aggrieved party with an explanation of the procedures for filing a family access motion and a simple form for use in filing the family access motion. A family access motion does not require the assistance of legal counsel to prepare and file.”.

11. No court shall adopt any local rule, form, or practice requiring a standardized or default parenting plan for interim, temporary, or permanent orders or judgments. Notwithstanding any other provision of **law** to the contrary, a court may enter an interim order in a proceeding under this chapter, provided that the interim order shall not contain any provisions about child custody or a parenting schedule or plan without first providing the parties with notice and a hearing, unless the parties otherwise agree.

12. Unless a parent has been denied custody rights pursuant to this section or visitation rights under section 452.400, both parents shall have access to records and information pertaining to a minor child including, but not limited to, medical, dental, and school records. If the parent without custody has been granted restricted or supervised visitation because the court has found that the parent with custody or any child has been the victim of domestic violence, as defined in section 455.010, by the parent without custody, the court may order that the reports and records made available pursuant to this subsection not include the address of the parent with custody or the child. A court shall order that the reports and records made available under this subsection not include the address of the parent with custody if the parent with custody is a participant in the address confidentiality program under section 589.663. Unless a parent has been denied custody rights pursuant to this section or visitation rights under section 452.400, any judgment of dissolution or other applicable court order shall specifically allow both parents access to such records and reports.

13. Except as otherwise precluded by state or federal law, if any individual, professional, public or private institution or organization denies access or fails to provide or disclose any and all records and information, including, but not limited to, past and present dental, medical and school records pertaining to a minor child, to either parent upon the written request of such parent, the court shall, upon its finding that the individual, professional, public or private institution or organization denied such request without good cause, order that party to comply immediately with such request and to pay to the prevailing party all costs incurred, including, but not limited to, attorney's fees and court costs associated with obtaining the requested information.

14. An award of joint custody does not preclude an award of child support pursuant to section 452.340 and applicable supreme court rules. The court shall consider the factors contained in section 452.340 and applicable supreme court rules in determining an amount reasonable or necessary for the support of the child.

15. If the court finds that domestic violence or abuse as defined in section 455.010 has occurred, the court shall make specific findings of fact to show that the custody or visitation arrangement ordered by the court best protects the child and the parent or other family or household member who is the victim of domestic violence, as defined in section 455.010, and any other children for whom such parent has custodial or visitation rights from any further harm.”; and

Further amend the title and enacting clause accordingly.

Senator Brattin moved that the above amendment be adopted, which motion prevailed.

Senator May moved that **SS** for **SB 35**, as amended, be adopted, which motion prevailed.

On motion of Senator May, **SS** for **SB 35**, as amended, was declared perfected and ordered printed.

Senator Hoskins moved that **SB 92**, with **SCS**, be called from the Informal Calendar and taken up for perfection, which motion prevailed.

**SCS** for **SB 92**, entitled:

SENATE COMMITTEE SUBSTITUTE FOR  
SENATE BILL NO. 92

An Act to amend chapter 620, RSMo, by adding thereto seven new sections relating to rural workforce development incentives.

Was taken up.

Senator Hoskins moved that **SCS** for **SB 92** be adopted.

Senator Hoskins offered **SS** for **SCS** for **SB 92**, entitled:

SENATE SUBSTITUTE FOR  
SENATE COMMITTEE SUBSTITUTE FOR  
SENATE BILL NO. 92

An Act to amend chapter 620, RSMo, by adding thereto seven new sections relating to rural access to capital incentives.

Senator Hoskins moved that **SS** for **SCS** for **SB 92** be adopted.

Senator Hoskins offered **SA 1**:

SENATE AMENDMENT NO. 1

Amend Senate Substitute for Senate Committee Substitute for Senate Bill No. 92, Page 1, In the Title, Lines 3-4, by striking “rural access to capital incentives” and inserting in lieu thereof the following: “tax credits”; and

Further amend said bill and page, section A, line 4, by inserting after all of said line the following:

“135.772. 1. For the purposes of this section, the following terms shall mean:

- (1) “Department”, the Missouri department of revenue;
- (2) “Distributor”, a person, firm, or corporation doing business in this state that:
  - (a) Produces, refines, blends, compounds, or manufactures motor fuel;
  - (b) Imports motor fuel into the state; or
  - (c) Is engaged in distribution of motor fuel;

(3) “Higher ethanol blend”, a fuel capable of being dispensed directly into motor vehicle fuel tanks for consumption that is comprised of at least fifteen percent but not more than eighty-five percent ethanol;

(4) “Retail dealer”, a person, firm, or corporation doing business in this state that owns or operates a retail service station in this state;

(5) “Retail service station”, a location in this state from which higher ethanol blend is sold to the general public and is dispensed directly into motor vehicle fuel tanks for consumption.

2. For all tax years beginning on or after January 1, 2023, a retail dealer that sells higher ethanol blend at such retail dealer's retail service station or a distributor that sells higher ethanol blend directly to the final user located in this state shall be allowed a tax credit to be taken against the retail dealer's or distributor's state income tax liability. The amount of the credit shall equal five cents per gallon of higher ethanol blend sold by the retail dealer and dispensed through metered pumps at the retail dealer's retail service station or by a distributor directly to the final user located in this state during the tax year for which the tax credit is claimed. **For any retail dealer or distributor with a tax year beginning prior to January 1, 2023, but ending during the 2023 calendar year, such retail dealer or distributor shall be allowed a tax credit for the amount of higher ethanol blend sold during the portion of such tax year that occurs during the 2023 calendar year.** Tax credits authorized pursuant to this section shall not be transferred, sold, or assigned. If the amount of the tax credit exceeds the taxpayer's state tax liability, the difference shall not be refundable but may be carried forward to any of the five subsequent tax years. The total amount of tax credits issued pursuant to this section for any given fiscal year shall not exceed five million dollars.

3. In the event the total amount of tax credits claimed under this section exceeds the amount of available tax credits, the tax credits shall be apportioned among all eligible retail dealers and distributors claiming a tax credit by April fifteenth, or as directed by section 143.851, of the fiscal year in which the tax credit is claimed.

4. The tax credit allowed by this section shall be claimed by such taxpayer at the time such taxpayer files a return and shall be applied against the income tax liability imposed by chapter 143, excluding the withholding tax imposed by sections 143.191 to 143.265, after reduction for all other credits allowed thereon. The department may require any documentation it deems necessary to implement the provisions of this section.

5. The department shall promulgate rules to implement the provisions 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 the effective date of this section shall be invalid and void.

6. Under section 23.253 of the Missouri sunset act:

(1) The provisions of this section shall automatically sunset on December 31, 2028, unless reauthorized by an act of the general assembly; and

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

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

135.775. 1. As used in this section, the following terms mean:

(1) “Biodiesel blend”, a blend of diesel fuel and biodiesel fuel of at least five percent and not more than twenty percent for on-road and off-road diesel-fueled vehicle use;

(2) “Biodiesel fuel”, a renewable, biodegradable, mono alkyl ester combustible liquid fuel that is derived from agricultural and other plant oils or animal fats and that meets the most recent version of the ASTM International D6751 Standard Specification for Biodiesel Fuel Blend Stock. A fuel shall be deemed to be biodiesel fuel if the fuel consists of a pure B100 or B99 ratio. Biodiesel produced from palm oil is not biodiesel fuel for the purposes of this section unless the palm oil is contained within waste oil and grease collected within the United States;

(3) “B99”, a blend of ninety-nine percent biodiesel fuel that meets the most recent version of the ASTM International D6751 Standard Specification for Biodiesel Fuel Blend Stock with a minimum of one-tenth of one percent and maximum of one percent diesel fuel that meets the most recent version of the ASTM International D975 Standard Specification for Diesel Fuel;

(4) “Department”, the Missouri department of revenue;

(5) “Distributor”, a person, firm, or corporation doing business in this state that:

(a) Produces, refines, blends, compounds, or manufactures motor fuel;

(b) Imports motor fuel into the state; or

(c) Is engaged in distribution of motor fuel;

(6) “Retail dealer”, a person, firm, or corporation doing business in this state that owns or operates a retail service station in this state;

(7) “Retail service station”, a location in this state from which biodiesel blend is sold to the general public and is dispensed directly into motor vehicle fuel tanks for consumption at retail.

2. For all tax years beginning on or after January 1, 2023, a retail dealer that sells a biodiesel blend at a retail service station or a distributor that sells a biodiesel blend directly to the final user located in this state shall be allowed a tax credit to be taken against the retail dealer or distributor's state income tax liability. **For any retail dealer or distributor with a tax year beginning prior to January 1, 2023, but ending during the 2023 calendar year, such retail dealer or distributor shall be allowed a tax credit for the amount of biodiesel blend sold during the portion of such tax year that occurs during the 2023 calendar year.** The amount of the credit shall be equal to:

(1) Two cents per gallon of biodiesel blend of at least five percent but not more than ten percent sold by the retail dealer at a retail service station or by a distributor directly to the final user located in this state during the tax year for which the tax credit is claimed; and

(2) Five cents per gallon of biodiesel blend in excess of ten percent but not more than twenty percent sold by the retail dealer at a retail service station or by a distributor directly to the final user located in this state during the tax year for which the tax credit is claimed.

3. Tax credits authorized under this section shall not be transferred, sold, or assigned. If the amount of the tax credit exceeds the taxpayer's state tax liability, the difference shall be refundable. The total amount of tax credits issued under this section for any given fiscal year shall not exceed sixteen million dollars.

4. In the event the total amount of tax credits claimed under this section exceeds the amount of available tax credits, the tax credits shall be apportioned among all eligible retail dealers and distributors claiming a tax credit by April fifteenth, or as directed by section 143.851, of the fiscal year in which the tax credit is claimed.

5. The tax credit allowed by this section shall be claimed by such taxpayer at the time such taxpayer files a return and shall be applied against the income tax liability imposed by chapter 143, excluding the withholding tax imposed by sections 143.191 to 143.265, after reduction for all other credits allowed thereon. The department may require any documentation it deems necessary to administer the provisions of this section.

6. Notwithstanding any other provision of law to the contrary, if the maximum amount of tax credits authorized by this section are not claimed, the remaining amount of tax credits available to claim shall be applied to the tax credit in section 135.778 if the maximum amount of tax credits authorized by section 135.778 have been claimed.

7. Notwithstanding the provisions of section 32.057 to the contrary, the department may work with the division of weights and measures within the department of agriculture to validate that the biodiesel blend a retail dealer or distributor claims for the tax credit authorized under this section contains a sufficient percentage of biodiesel fuel.

8. The department shall promulgate rules to implement and administer the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created pursuant to 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 January 2, 2023, shall be invalid and void.

9. Under section 23.253 of the Missouri sunset act:

(1) The provisions of the new program authorized under this section shall automatically sunset on December 31, 2028, unless reauthorized by an act of the general assembly;

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

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

as described in this subsection shall not be construed to preclude any qualified taxpayer who claims any benefit under any program that is sunset under this subsection from claiming such benefit for all allowable activities related to such claim that were completed before the program was sunset or to eliminate any responsibility of the department to verify the continued eligibility of qualified individuals receiving tax credits and to enforce other requirements of law that applied before the program was sunset.

135.778. 1. For the purposes of this section, the following terms shall mean:

(1) “Biodiesel fuel”, a renewable, biodegradable, mono alkyl ester combustible liquid fuel that is derived from agricultural and other plant oils or animal fats and that meets the most recent version of the ASTM International D6751 Standard Specification for Biodiesel Fuel Blend Stock. A fuel shall be deemed to be biodiesel fuel if the fuel consists of a pure B100 or B99 ratio. Biodiesel produced from palm oil is not biodiesel fuel for the purposes of this section unless the palm oil is contained within waste oil and grease collected within the United States;

(2) “B99”, a blend of ninety-nine percent biodiesel fuel that meets the most recent version of the ASTM International D6751 Standard Specification for Biodiesel Fuel Blend Stock with a minimum of one-tenth of one percent and maximum of one percent diesel fuel that meets the most recent version of the ASTM International D975 Standard Specification for Diesel Fuel;

(3) “Department”, the Missouri department of revenue;

(4) “Missouri biodiesel producer”, a person, firm, or corporation doing business in this state that produces biodiesel fuel in this state, is registered with the United States Environmental Protection Agency according to the requirements of 40 CFR Part 79, and has begun construction on such facility or has been selling biodiesel fuel produced at such facility on or before January 2, 2023.

2. For all tax years beginning on or after January 1, 2023, a Missouri biodiesel producer shall be allowed a tax credit to be taken against the producer's state income tax liability. **For any Missouri biodiesel producer with a tax year beginning prior to January 1, 2023, but ending during the 2023 calendar year, such Missouri biodiesel producer shall be allowed a tax credit for the amount of biodiesel fuel produced during the portion of such tax year that occurs during the 2023 calendar year.** The amount of the tax credit shall be two cents per gallon of biodiesel fuel produced by the Missouri biodiesel producer during the tax year for which the tax credit is claimed.

3. Tax credits authorized under this section shall not be transferred, sold, or assigned. If the amount of the tax credit exceeds the taxpayer's state tax liability, the difference shall be refundable. The total amount of tax credits issued under this section for any given fiscal year shall not exceed [four] **five million five hundred thousand** dollars, **which shall be authorized on a first-come first-served basis.**

4. [In the event the total amount of tax credits claimed under this section exceeds the amount of available tax credits, the tax credits shall be apportioned among all eligible Missouri biodiesel producers claiming the credit by April fifteenth, or as directed by section 143.851, of the fiscal year in which the tax credit is claimed.]

[5.] The tax credit authorized under this section shall be claimed by such taxpayer at the time such taxpayer files a return and shall be applied against the income tax liability imposed by chapter 143, excluding the withholding tax imposed by sections 143.191 to 143.265, after reduction for all other credits

allowed thereon. The department may require any documentation it deems necessary to administer the provisions of this section.

[6.] **5.** Notwithstanding any other provision of law to the contrary, if the maximum amount of tax credits authorized by this section are not claimed, the remaining amount of tax credits available to claim shall be applied to the tax credit in section 135.775 if the maximum amount of tax credits authorized by section 135.775 have been claimed.

[7.] **6.** The department shall promulgate rules to implement and administer the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created pursuant to 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 January 2, 2023, shall be invalid and void.

[8.] **7.** Under section 23.253 of the Missouri sunset act:

(1) The provisions of the new program authorized under this section shall automatically sunset on December 31, 2028, unless reauthorized by an act of the general assembly;

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

(3) This section shall terminate on September first of the calendar year immediately following the calendar year in which the program authorized under this section is sunset. The termination of the program as described in this subsection shall not be construed to preclude any qualified taxpayer who claims any benefit under any program that is sunset under this subsection from claiming such benefit for all allowable activities related to such claim that were completed before the program was sunset, or to eliminate any responsibility of the department to verify the continued eligibility of qualified individuals receiving tax credits and to enforce other requirements of law that applied before the program was sunset.”; and

Further amend the title and enacting clause accordingly.

Senator Hoskins moved that the above amendment be adopted, which motion prevailed.

Senator Bernskoetter offered **SA 2**:

#### SENATE AMENDMENT NO. 2

Amend Senate Substitute for Senate Committee Substitute for Senate Bill No. 92, Page 3, Section 620.3505, Line 71, by striking the word “and”; and further amend line 77 by inserting after “state” the following: “;

**(d) Does not knowingly employ any individual who is unlawfully present in this country; and**

**(e) Is located or has committed to locate in a rural area in this state”.**

Senator Bernskoetter moved that the above amendment be adopted, which motion prevailed.

Senator Hoskins moved that **SS** for **SCS** for **SB 92**, as amended, be adopted, which motion prevailed.

On motion of Senator Hoskins, **SS** for **SCS** for **SB 92**, as amended, was declared perfected and ordered printed.

Senator Black moved that **SB 157**, with **SCS**, **SS** for **SCS**, **SA 1** and **SSA 1** for **SA 1** (pending), be called from the Informal Calendar and again taken up for perfection, which motion prevailed.

**SSA 1** for **SA 1** was again taken up.

At the request of Senator Schroer, **SSA 1** for **SA 1** was withdrawn.

At the request of Senator Schroer, **SA 1** was withdrawn.

Senator Schroer offered **SA 2**:

#### SENATE AMENDMENT NO. 2

Amend Senate Substitute for Senate Committee Substitute for Senate Bill No. 157, Page 1, In the Title, Lines 3-4, by striking “collaborative practice arrangements with”; and

Further amend said bill and page, section A, line 3, by inserting after all of said line the following:

“195.070. 1. A physician, podiatrist, dentist, a registered optometrist certified to administer pharmaceutical agents as provided in section 336.220, or an assistant physician in accordance with section 334.037 or a physician assistant in accordance with section 334.747 in good faith and in the course of his or her professional practice only, may prescribe, administer, and dispense controlled substances or he or she may cause the same to be administered or dispensed by an individual as authorized by statute.

2. An advanced practice registered nurse, as defined in section 335.016, but not a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016, who holds a certificate of controlled substance prescriptive authority from the board of nursing under section 335.019 and who is delegated the authority to prescribe controlled substances under a collaborative practice arrangement under section 334.104 may prescribe any controlled substances listed in Schedules III, IV, and V of section 195.017, and may have restricted authority in Schedule II. Prescriptions for Schedule II medications prescribed by an advanced practice registered nurse who has a certificate of controlled substance prescriptive authority are restricted to only those medications containing hydrocodone **and Schedule II controlled substances for hospice patients pursuant to the provisions of section 334.104**. However, no such certified advanced practice registered nurse shall prescribe controlled substance for his or her own self or family. Schedule III narcotic controlled substance and Schedule II - hydrocodone prescriptions shall be limited to a one hundred twenty-hour supply without refill.

3. A veterinarian, in good faith and in the course of the veterinarian's professional practice only, and not for use by a human being, may prescribe, administer, and dispense controlled substances and the veterinarian may cause them to be administered by an assistant or orderly under his or her direction and supervision.

4. A practitioner shall not accept any portion of a controlled substance unused by a patient, for any reason, if such practitioner did not originally dispense the drug, except:

(1) When the controlled substance is delivered to the practitioner to administer to the patient for whom the medication is prescribed as authorized by federal law. Practitioners shall maintain records and secure the medication as required by this chapter and regulations promulgated pursuant to this chapter; or

(2) As provided in section 195.265.

5. An individual practitioner shall not prescribe or dispense a controlled substance for such practitioner's personal use except in a medical emergency.”; and

Further amend said bill, pages 1-9, section 334.104, by striking all of said section and inserting in lieu thereof the following:

“334.104. 1. A physician may enter into collaborative practice arrangements with registered professional nurses. Collaborative practice arrangements shall be in the form of written agreements, jointly agreed-upon protocols, or standing orders for the delivery of health care services. Collaborative practice arrangements, which shall be in writing, may delegate to a registered professional nurse the authority to administer or dispense drugs and provide treatment as long as the delivery of such health care services is within the scope of practice of the registered professional nurse and is consistent with that nurse's skill, training and competence.

2. (1) Collaborative practice arrangements, which shall be in writing, may delegate to a registered professional nurse the authority to administer, dispense or prescribe drugs and provide treatment if the registered professional nurse is an advanced practice registered nurse as defined in subdivision (2) of section 335.016. Collaborative practice arrangements may delegate to an advanced practice registered nurse, as defined in section 335.016, the authority to administer, dispense, or prescribe controlled substances listed in Schedules III, IV, and V of section 195.017, and Schedule II - hydrocodone; except that, the collaborative practice arrangement shall not delegate the authority to administer any controlled substances listed in Schedules III, IV, and V of section 195.017, or Schedule II - hydrocodone for the purpose of inducing sedation or general anesthesia for therapeutic, diagnostic, or surgical procedures. Schedule III narcotic controlled substance and Schedule II - hydrocodone prescriptions shall be limited to a one hundred twenty-hour supply without refill.

**(2) Notwithstanding any other provision of this section to the contrary, a collaborative practice arrangement may delegate to an advanced practice registered nurse the authority to administer, dispense, or prescribe Schedule II controlled substances for hospice patients; provided, that the advanced practice registered nurse is employed by a hospice provider certified pursuant to chapter 197 and the advanced practice registered nurse is providing care to hospice patients pursuant to a collaborative practice arrangement that designates the certified hospice as a location where the advanced practice registered nurse is authorized to practice and prescribe.**

(3) Such collaborative practice arrangements shall be in the form of written agreements, jointly agreed-upon protocols or standing orders for the delivery of health care services.

(4) An advanced practice registered nurse may prescribe buprenorphine for up to a thirty-day supply without refill for patients receiving medication-assisted treatment for substance use disorders under the direction of the collaborating physician.

3. The written collaborative practice arrangement shall contain at least the following provisions:

(1) Complete names, home and business addresses, zip codes, and telephone numbers of the collaborating physician and the advanced practice registered nurse;

(2) A list of all other offices or locations besides those listed in subdivision (1) of this subsection where the collaborating physician authorized the advanced practice registered nurse to prescribe;

(3) A requirement that there shall be posted at every office where the advanced practice registered nurse is authorized to prescribe, in collaboration with a physician, a prominently displayed disclosure statement informing patients that they may be seen by an advanced practice registered nurse and have the right to see the collaborating physician;

(4) All specialty or board certifications of the collaborating physician and all certifications of the advanced practice registered nurse;

(5) The manner of collaboration between the collaborating physician and the advanced practice registered nurse, including how the collaborating physician and the advanced practice registered nurse will:

(a) Engage in collaborative practice consistent with each professional's skill, training, education, and competence;

(b) Maintain geographic proximity, except as specified in this paragraph. The following provisions shall apply with respect to this requirement:

a. **Until August 28, 2025, an advanced practice registered nurse providing services in a correctional center, as defined in section 217.010, and his or her collaborating physician shall satisfy the geographic proximity requirement if they practice within two hundred miles by road of one another. An incarcerated patient who requests or requires a physician consultation shall be treated by a physician as soon as appropriate;**

b. The collaborative practice arrangement may allow for geographic proximity to be waived for a maximum of twenty-eight days per calendar year for rural health clinics as defined by P.L. 95-210 (**42 U.S.C. Section 1395x, as amended**), as long as the collaborative practice arrangement includes alternative plans as required in paragraph (c) of this subdivision. This exception to geographic proximity shall apply only to independent rural health clinics, provider-based rural health clinics where the provider is a critical access hospital as provided in 42 U.S.C. Section 1395i-4, and provider-based rural health clinics where the main location of the hospital sponsor is greater than fifty miles from the clinic[.];

c. **The collaborative practice arrangement may allow for geographic proximity to be waived when the arrangement outlines the use of telehealth, as defined in section 191.1145;**

d. **In addition to the waivers and exemptions provided in this subsection, an application for a waiver for any other reason of any applicable geographic proximity shall be available if a physician is collaborating with an advanced practice registered nurse in excess of any geographic proximity limit. The board of nursing and the state board of registration for the healing arts shall review each application for a waiver of geographic proximity and approve the application if the boards determine that adequate supervision exists between the collaborating physician and the advanced practice registered nurse. The boards shall have forty-five calendar days to review the completed application for the waiver of geographic proximity. If no action is taken by the boards within forty-**

**five days after the submission of the application for a waiver, then the application shall be deemed approved. If the application is denied by the boards, the provisions of section 536.063 for contested cases shall apply and govern proceedings for appellate purposes; and**

e. The collaborating physician is required to maintain documentation related to this requirement and to present it to the state board of registration for the healing arts when requested; and

(c) Provide coverage during absence, incapacity, infirmity, or emergency by the collaborating physician;

(6) A description of the advanced practice registered nurse's controlled substance prescriptive authority in collaboration with the physician, including a list of the controlled substances the physician authorizes the nurse to prescribe and documentation that it is consistent with each professional's education, knowledge, skill, and competence;

(7) A list of all other written practice agreements of the collaborating physician and the advanced practice registered nurse;

(8) The duration of the written practice agreement between the collaborating physician and the advanced practice registered nurse;

(9) A description of the time and manner of the collaborating physician's review of the advanced practice registered nurse's delivery of health care services. The description shall include provisions that the advanced practice registered nurse shall submit a minimum of ten percent of the charts documenting the advanced practice registered nurse's delivery of health care services to the collaborating physician for review by the collaborating physician, or any other physician designated in the collaborative practice arrangement, every fourteen days; [and]

(10) The collaborating physician, or any other physician designated in the collaborative practice arrangement, shall review every fourteen days a minimum of twenty percent of the charts in which the advanced practice registered nurse prescribes controlled substances. The charts reviewed under this subdivision may be counted in the number of charts required to be reviewed under subdivision (9) of this subsection; **and**

**(11) If a collaborative practice arrangement is used in clinical situations where a collaborating advanced practice registered nurse provides health care services that include the diagnosis and initiation of treatment for acutely or chronically ill or injured persons, then the collaborating physician or any other physician designated in the collaborative practice arrangement shall be present for sufficient periods of time, at least once every two weeks, except in extraordinary circumstances that shall be documented, to participate in a chart review and to provide necessary medical direction, medical services, consultations, and supervision of the health care staff.**

4. The state board of registration for the healing arts pursuant to section 334.125 and the board of nursing pursuant to section 335.036 may jointly promulgate rules regulating the use of collaborative practice arrangements. Such rules shall be limited to [specifying geographic areas to be covered,] the methods of treatment that may be covered by collaborative practice arrangements and the requirements for review of services provided pursuant to collaborative practice arrangements including delegating authority to prescribe controlled substances. **Any rules relating to geographic proximity shall allow a**

**collaborating physician and a collaborating advanced practice registered nurse to practice within two hundred miles by road of one another until August 28, 2025, if the nurse is providing services in a correctional center, as defined in section 217.010.** Any rules relating to dispensing or distribution of medications or devices by prescription or prescription drug orders under this section shall be subject to the approval of the state board of pharmacy. Any rules relating to dispensing or distribution of controlled substances by prescription or prescription drug orders under this section shall be subject to the approval of the department of health and senior services and the state board of pharmacy. In order to take effect, such rules shall be approved by a majority vote of a quorum of each board. Neither the state board of registration for the healing arts nor the board of nursing may separately promulgate rules relating to collaborative practice arrangements. Such jointly promulgated rules shall be consistent with guidelines for federally funded clinics. The rulemaking authority granted in this subsection shall not extend to collaborative practice arrangements of hospital employees providing inpatient care within hospitals as defined pursuant to chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

5. The state board of registration for the healing arts shall not deny, revoke, suspend or otherwise take disciplinary action against a physician for health care services delegated to a registered professional nurse provided the provisions of this section and the rules promulgated thereunder are satisfied. Upon the written request of a physician subject to a disciplinary action imposed as a result of an agreement between a physician and a registered professional nurse or registered physician assistant, whether written or not, prior to August 28, 1993, all records of such disciplinary licensure action and all records pertaining to the filing, investigation or review of an alleged violation of this chapter incurred as a result of such an agreement shall be removed from the records of the state board of registration for the healing arts and the division of professional registration and shall not be disclosed to any public or private entity seeking such information from the board or the division. The state board of registration for the healing arts shall take action to correct reports of alleged violations and disciplinary actions as described in this section which have been submitted to the National Practitioner Data Bank. In subsequent applications or representations relating to his **or her** medical practice, a physician completing forms or documents shall not be required to report any actions of the state board of registration for the healing arts for which the records are subject to removal under this section.

6. Within thirty days of any change and on each renewal, the state board of registration for the healing arts shall require every physician to identify whether the physician is engaged in any collaborative practice [agreement] **arrangement**, including collaborative practice [agreements] **arrangements** delegating the authority to prescribe controlled substances, or physician assistant [agreement] **collaborative practice arrangement** and also report to the board the name of each licensed professional with whom the physician has entered into such [agreement] **arrangement**. The board [may] **shall** make this information available to the public. The board shall track the reported information and may routinely conduct random reviews of such [agreements] **arrangements** to ensure that [agreements] **arrangements** are carried out for compliance under this chapter.

7. Notwithstanding any law to the contrary, a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016 shall be permitted to provide anesthesia services without a collaborative practice arrangement provided that he or she is under the supervision of an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if needed. Nothing in this subsection shall

be construed to prohibit or prevent a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016 from entering into a collaborative practice arrangement under this section, except that the collaborative practice arrangement may not delegate the authority to prescribe any controlled substances listed in Schedules III, IV, and V of section 195.017, or Schedule II - hydrocodone.

8. A collaborating physician shall not enter into a collaborative practice arrangement with more than six full-time equivalent advanced practice registered nurses, full-time equivalent licensed physician assistants, or full-time equivalent assistant physicians, or any combination thereof. This limitation shall not apply to collaborative arrangements of hospital employees providing inpatient care service in hospitals as defined in chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008, or to a certified registered nurse anesthetist providing anesthesia services under the supervision of an anesthesiologist or other physician, dentist, or podiatrist who is immediately available if needed as set out in subsection 7 of this section.

9. It is the responsibility of the collaborating physician to determine and document the completion of at least a one-month period of time during which the advanced practice registered nurse shall practice with the collaborating physician continuously present before practicing in a setting where the collaborating physician is not continuously present. This limitation shall not apply to collaborative arrangements of providers of population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008, **or to collaborative practice arrangements between a primary care physician and a primary care advanced practice registered nurse or a behavioral health physician and a behavioral health advanced practice registered nurse, where the collaborating physician is new to a patient population to which the advanced practice registered nurse is familiar.**

10. No agreement made under this section shall supersede current hospital licensing regulations governing hospital medication orders under protocols or standing orders for the purpose of delivering inpatient or emergency care within a hospital as defined in section 197.020 if such protocols or standing orders have been approved by the hospital's medical staff and pharmaceutical therapeutics committee.

11. No contract or other [agreement] **term of employment** shall require a physician to act as a collaborating physician for an advanced practice registered nurse against the physician's will. A physician shall have the right to refuse to act as a collaborating physician, without penalty, for a particular advanced practice registered nurse. No contract or other agreement shall limit the collaborating physician's ultimate authority over any protocols or standing orders or in the delegation of the physician's authority to any advanced practice registered nurse, but this requirement shall not authorize a physician in implementing such protocols, standing orders, or delegation to violate applicable standards for safe medical practice established by hospital's medical staff.

12. No contract or other [agreement] **term of employment** shall require any advanced practice registered nurse to serve as a collaborating advanced practice registered nurse for any collaborating physician against the advanced practice registered nurse's will. An advanced practice registered nurse shall have the right to refuse to collaborate, without penalty, with a particular physician.

335.016. As used in this chapter, unless the context clearly requires otherwise, the following words and terms mean:

(1) “Accredited”, the official authorization or status granted by an agency for a program through a voluntary process;

(2) “Advanced practice registered nurse” or “APRN”, a [nurse who has education beyond the basic nursing education and is certified by a nationally recognized professional organization as a certified nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or a certified clinical nurse specialist. The board shall promulgate rules specifying which nationally recognized professional organization certifications are to be recognized for the purposes of this section. Advanced practice nurses and only such individuals may use the title “Advanced Practice Registered Nurse” and the abbreviation “APRN”] **person who is licensed under the provisions of this chapter to engage in the practice of advanced practice nursing as a certified clinical nurse specialist, certified nurse midwife, certified nurse practitioner, or certified registered nurse anesthetist;**

(3) “Approval”, official recognition of nursing education programs which meet standards established by the board of nursing;

(4) “Board” or “state board”, the state board of nursing;

(5) “Certified clinical nurse specialist”, a registered nurse who is currently certified as a clinical nurse specialist by a nationally recognized certifying board approved by the board of nursing;

(6) “Certified nurse midwife”, a registered nurse who is currently certified as a nurse midwife by the American [College of Nurse Midwives] **Midwifery Certification Board**, or other nationally recognized certifying body approved by the board of nursing;

(7) “Certified nurse practitioner”, a registered nurse who is currently certified as a nurse practitioner by a nationally recognized certifying body approved by the board of nursing;

(8) “Certified registered nurse anesthetist”, a registered nurse who is currently certified as a nurse anesthetist by the Council on Certification of Nurse Anesthetists, the [Council on Recertification of Nurse Anesthetists] **National Board of Certification and Recertification for Nurse Anesthetists**, or other nationally recognized certifying body approved by the board of nursing;

(9) “Executive director”, a qualified individual employed by the board as executive secretary or otherwise to administer the provisions of this chapter under the board’s direction. Such person employed as executive director shall not be a member of the board;

(10) “Inactive [nurse] **license status**”, as defined by rule pursuant to section 335.061;

(11) “Lapsed license status”, as defined by rule under section 335.061;

(12) “Licensed practical nurse” or “practical nurse”, a person licensed pursuant to the provisions of this chapter to engage in the practice of practical nursing;

(13) “Licensure”, the issuing of a license [to practice professional or practical nursing] to candidates who have met the [specified] requirements **specified under this chapter, authorizing the person to engage in the practice of advanced practice, professional, or practical nursing**, and the recording of the names of those persons as holders of a license to practice **advanced practice, professional, or practical nursing**;

(14) **“Practice of advanced practice nursing”, the performance for compensation of activities and services consistent with the required education, training, certification, demonstrated competencies, and experiences of an advanced practice registered nurse;**

(15) **“Practice of practical nursing”, the performance for compensation of selected acts for the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in normal health processes. Such performance requires substantial specialized skill, judgment and knowledge. All such nursing care shall be given under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse. For the purposes of this chapter, the term “direction” shall mean guidance or supervision provided by a person licensed by a state regulatory board to prescribe medications and treatments or a registered professional nurse, including, but not limited to, oral, written, or otherwise communicated orders or directives for patient care. When practical nursing care is delivered pursuant to the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse, such care may be delivered by a licensed practical nurse without direct physical oversight;**

[(15)] (16) **“Practice of professional nursing”, the performance for compensation of any act or action which requires substantial specialized education, judgment and skill based on knowledge and application of principles derived from the biological, physical, social, behavioral, and nursing sciences, including, but not limited to:**

(a) Responsibility for the **promotion and** teaching of health care and the prevention of illness to the patient and his or her family;

(b) Assessment, **data collection**, nursing diagnosis, nursing care, **evaluation**, and counsel of persons who are ill, injured, or experiencing alterations in normal health processes;

(c) The administration of medications and treatments as prescribed by a person licensed by a state regulatory board to prescribe medications and treatments;

(d) The coordination and assistance in the **determination and** delivery of a plan of health care with all members of a health team;

(e) The teaching and supervision of other persons in the performance of any of the foregoing;

[(16) A] (17) **“Registered professional nurse” or “registered nurse”, a person licensed pursuant to the provisions of this chapter to engage in the practice of professional nursing;**

[(17)] (18) **“Retired license status”, any person licensed in this state under this chapter who retires from such practice. Such person shall file with the board an affidavit, on a form to be furnished by the board, which states the date on which the licensee retired from such practice, an intent to retire from the practice for at least two years, and such other facts as tend to verify the retirement as the board may deem necessary; but if the licensee thereafter reengages in the practice, the licensee shall renew his or her license with the board as provided by this chapter and by rule and regulation.**

335.019. 1. **An advanced practice registered nurse's prescriptive authority shall include authority to:**

**(1) Prescribe, dispense, and administer medications and nonscheduled legend drugs, as defined in section 338.330, within such APRN's practice and specialty; and**

**(2) Notwithstanding any other provision of this chapter to the contrary, receive, prescribe, administer, and provide nonscheduled legend drug samples from pharmaceutical manufacturers to patients at no charge to the patient or any other party.**

2. The board of nursing may grant a certificate of controlled substance prescriptive authority to an advanced practice registered nurse who:

(1) Submits proof of successful completion of an advanced pharmacology course that shall include preceptorial experience in the prescription of drugs, medicines, and therapeutic devices; and

(2) Provides documentation of a minimum of three hundred clock hours preceptorial experience in the prescription of drugs, medicines, and therapeutic devices with a qualified preceptor; and

(3) Provides evidence of a minimum of one thousand hours of practice in an advanced practice nursing category prior to application for a certificate of prescriptive authority. The one thousand hours shall not include clinical hours obtained in the advanced practice nursing education program. The one thousand hours of practice in an advanced practice nursing category may include transmitting a prescription order orally or telephonically or to an inpatient medical record from protocols developed in collaboration with and signed by a licensed physician; and

(4) Has a controlled substance prescribing authority delegated in the collaborative practice arrangement under section 334.104 with a physician who has an unrestricted federal Drug Enforcement Administration registration number and who is actively engaged in a practice comparable in scope, specialty, or expertise to that of the advanced practice registered nurse.

335.036. 1. The board shall:

(1) Elect for a one-year term a president and a secretary, who shall also be treasurer, and the board may appoint, employ and fix the compensation of a legal counsel and such board personnel as defined in subdivision (4) of subsection 11 of section 324.001 as are necessary to administer the provisions of sections 335.011 to [335.096] **335.099**;

(2) Adopt and revise such rules and regulations as may be necessary to enable it to carry into effect the provisions of sections 335.011 to [335.096] **335.099**;

(3) Prescribe minimum standards for educational programs preparing persons for licensure **as a registered professional nurse or licensed practical nurse** pursuant to the provisions of sections 335.011 to [335.096] **335.099**;

(4) Provide for surveys of such programs every five years and in addition at such times as it may deem necessary;

(5) Designate as "approved" such programs as meet the requirements of sections 335.011 to [335.096] **335.099** and the rules and regulations enacted pursuant to such sections; and the board shall annually publish a list of such programs;

(6) Deny or withdraw approval from educational programs for failure to meet prescribed minimum standards;

(7) Examine, license, and cause to be renewed the licenses of duly qualified applicants;

(8) Cause the prosecution of all persons violating provisions of sections 335.011 to [335.096] **335.099**, and may incur such necessary expenses therefor;

(9) Keep a record of all the proceedings; and make an annual report to the governor and to the director of the department of commerce and insurance.

2. The board shall set the amount of the fees which this chapter authorizes and requires by rules and regulations. The fees shall be set at a level to produce revenue which shall not substantially exceed the cost and expense of administering this chapter.

3. All fees received by the board pursuant to the provisions of sections 335.011 to [335.096] **335.099** shall be deposited in the state treasury and be placed to the credit of the state board of nursing fund. All administrative costs and expenses of the board shall be paid from appropriations made for those purposes. The board is authorized to provide funding for the nursing education incentive program established in sections 335.200 to 335.203.

4. The provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be transferred and placed to the credit of general revenue until the amount in the fund at the end of the biennium exceeds two times the amount of the appropriation from the board's funds for the preceding fiscal year or, if the board requires by rule, permit renewal less frequently than yearly, then three times the appropriation from the board's funds for the preceding fiscal year. The amount, if any, in the fund which shall lapse is that amount in the fund which exceeds the appropriate multiple of the appropriations from the board's funds for the preceding fiscal year.

5. 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 chapter 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. All rulemaking authority delegated prior to August 28, 1999, is of no force and effect and repealed. Nothing in this section shall be interpreted to repeal or affect the validity of any rule filed or adopted prior to August 28, 1999, if it fully complied with all applicable provisions of law. 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, 1999, shall be invalid and void.

335.046. 1. An applicant for a license to practice as a registered professional nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. The applicant shall be of good moral character and have completed at least the high school course of study, or the equivalent thereof as determined by the state board of education, and have successfully completed the basic professional curriculum in an accredited or approved school of nursing and earned a professional nursing degree or diploma. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration.

Applicants from non-English-speaking lands shall be required to submit evidence of proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice nursing as a registered professional nurse. The applicant for a license to practice registered professional nursing shall pay a license fee in such amount as set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.

2. An applicant for license to practice as a licensed practical nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. Such applicant shall be of good moral character, and have completed at least two years of high school, or its equivalent as established by the state board of education, and have successfully completed a basic prescribed curriculum in a state-accredited or approved school of nursing, earned a nursing degree, certificate or diploma and completed a course approved by the board on the role of the practical nurse. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration. Applicants from non-English-speaking countries shall be required to submit evidence of their proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice as a licensed practical nurse. The applicant for a license to practice licensed practical nursing shall pay a fee in such amount as may be set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.

**3. (1) An applicant for a license to practice as an advanced practice registered nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain:**

**(a) Statements showing the applicant's education and other such pertinent information as the board may require; and**

**(b) A statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration.**

**(2) The applicant for a license to practice as an advanced practice registered nurse shall pay a fee in such amount as may be set by the board. The fee shall be uniform for all applicants.**

**(3) An applicant shall:**

**(a) Hold a current registered professional nurse license or privilege to practice, shall not be currently subject to discipline or any restrictions, and shall not hold an encumbered license or privilege to practice as a registered professional nurse or advanced practice registered nurse in any state or territory;**

(b) **Have completed an accredited graduate-level advanced practice registered nurse program and achieved at least one certification as a clinical nurse specialist, nurse midwife, nurse practitioner, or registered nurse anesthetist, with at least one population focus prescribed by rule of the board;**

(c) **Be currently certified by a national certifying body recognized by the Missouri state board of nursing in the advanced practice registered nurse role; and**

(d) **Have a population focus on his or her certification, corresponding with his or her educational advanced practice registered nurse program.**

**(4) Any person holding a document of recognition to practice nursing as an advanced practice registered nurse in this state that is current on August 28, 2023, shall be deemed to be licensed as an advanced practice registered nurse under the provisions of this section and shall be eligible for renewal of such license under the conditions and standards prescribed in this chapter and as prescribed by rule.**

4. Upon refusal of the board to allow any applicant to [sit for] **take** either the registered professional nurses' examination or the licensed practical nurses' examination, [as the case may be,] **or upon refusal to issue an advanced practice registered nurse license**, the board shall comply with the provisions of section 621.120 and advise the applicant of his or her right to have a hearing before the administrative hearing commission. The administrative hearing commission shall hear complaints taken pursuant to section 621.120.

[4.] **5.** The board shall not deny a license because of sex, religion, race, ethnic origin, age or political affiliation.

335.051. 1. The board shall issue a license to practice nursing as [either] **an advanced practice registered nurse**, a registered professional nurse, or a licensed practical nurse without examination to an applicant who has duly become licensed as [a] **an advanced practice registered nurse**, registered nurse, or licensed practical nurse pursuant to the laws of another state, territory, or foreign country if the applicant meets the qualifications required of **advanced practice registered nurses**, registered nurses, or licensed practical nurses in this state at the time the applicant was originally licensed in the other state, territory, or foreign country.

2. Applicants from foreign countries shall be licensed as prescribed by rule.

3. Upon application, the board shall issue a temporary permit to an applicant pursuant to subsection 1 of this section for a license as [either] **an advanced practice registered nurse**, a registered professional nurse, or a licensed practical nurse who has made a prima facie showing that the applicant meets all of the requirements for such a license. The temporary permit shall be effective only until the board shall have had the opportunity to investigate his **or her** qualifications for licensure pursuant to subsection 1 of this section and to notify the applicant that his or her application for a license has been either granted or rejected. In no event shall such temporary permit be in effect for more than twelve months after the date of its issuance nor shall a permit be reissued to the same applicant. No fee shall be charged for such temporary permit. The holder of a temporary permit which has not expired, or been suspended or revoked, shall be deemed to be the holder of a license issued pursuant to section 335.046 until such temporary permit expires, is terminated or is suspended or revoked.

335.056. **1.** The license of every person licensed under the provisions of [sections 335.011 to 335.096] **this chapter** shall be renewed as provided. An application for renewal of license shall be mailed to every person to whom a license was issued or renewed during the current licensing period. The applicant shall complete the application and return it to the board by the renewal date with a renewal fee in an amount to be set by the board. The fee shall be uniform for all applicants. The certificates of renewal shall render the holder thereof a legal practitioner of nursing for the period stated in the certificate of renewal. Any person who practices nursing as **an advanced practice registered nurse**, a registered professional nurse, or [as] a licensed practical nurse during the time his **or her** license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the provisions of sections 335.011 to [335.096] **335.099**.

**2. The renewal of advanced practice registered nurse licenses and registered professional nurse licenses shall occur at the same time, as prescribed by rule. Failure to renew and maintain the registered professional nurse license or privilege to practice or failure to provide the required fee and evidence of active certification or maintenance of certification as prescribed by rules and regulations shall result in expiration of the advanced practice registered nurse license.**

**3. A licensed nurse who holds an APRN license shall be disciplined on their APRN license for any violations of this chapter.**

335.076. 1. Any person who holds a license to practice professional nursing in this state may use the title “Registered Professional Nurse” and the abbreviation [“R.N.”] **“RN”**. No other person shall use the title “Registered Professional Nurse” or the abbreviation [“R.N.”] **“RN”**. No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a registered professional nurse.

2. Any person who holds a license to practice practical nursing in this state may use the title “Licensed Practical Nurse” and the abbreviation [“L.P.N.”] **“LPN”**. No other person shall use the title “Licensed Practical Nurse” or the abbreviation [“L.P.N.”] **“LPN”**. No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a licensed practical nurse.

3. Any person who holds a license [or recognition] to practice advanced practice nursing in this state may use the title “Advanced Practice Registered Nurse”, **the designations of “certified registered nurse anesthetist”, “certified nurse midwife”, “certified clinical nurse specialist”, and “certified nurse practitioner”,** and the [abbreviation] **abbreviations “APRN”, [and any other title designations appearing on his or her license] “CRNA”, “CNM”, “CNS”, and “NP”, respectively.** No other person shall use the title “Advanced Practice Registered Nurse” or the abbreviation “APRN”. No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is an advanced practice registered nurse.

4. No person shall practice or offer to practice professional nursing, practical nursing, or advanced practice nursing in this state or use any title, sign, abbreviation, card, or device to indicate that such person is a practicing professional nurse, practical nurse, or advanced practice nurse unless he or she has been duly licensed under the provisions of this chapter.

5. In the interest of public safety and consumer awareness, it is unlawful for any person to use the title “nurse” in reference to himself or herself in any capacity, except individuals who are or have been licensed as a registered nurse, licensed practical nurse, or advanced practice registered nurse under this chapter.

6. Notwithstanding any law to the contrary, nothing in this chapter shall prohibit a Christian Science nurse from using the title “Christian Science nurse”, so long as such person provides only religious nonmedical services when offering or providing such services to those who choose to rely upon healing by spiritual means alone and does not hold his or her own religious organization and does not hold himself or herself out as a registered nurse, advanced practice registered nurse, nurse practitioner, licensed practical nurse, nurse midwife, clinical nurse specialist, or nurse anesthetist, unless otherwise authorized by law to do so.

335.086. No person, firm, corporation or association shall:

(1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to furnish any nursing diploma, license, renewal or record or aid or abet therein;

(2) Practice [professional or practical] nursing as defined by sections 335.011 to [335.096] **335.099** under cover of any diploma, license, or record illegally or fraudulently obtained or signed or issued unlawfully or under fraudulent representation;

(3) Practice [professional nursing or practical] nursing as defined by sections 335.011 to [335.096] **335.099** unless duly licensed to do so under the provisions of sections 335.011 to [335.096] **335.099**;

(4) Use in connection with his **or her** name any designation tending to imply that he **or she** is a licensed **advanced practice registered nurse, a licensed** registered professional nurse, or a licensed practical nurse unless duly licensed so to practice under the provisions of sections 335.011 to [335.096] **335.099**;

(5) Practice [professional nursing or practical] nursing during the time his **or her** license issued under the provisions of sections 335.011 to [335.096] **335.099** shall be suspended or revoked; or

(6) Conduct a nursing education program for the preparation of professional or practical nurses unless the program has been accredited by the board.

335.175. 1. No later than January 1, 2014, there is hereby established within the state board of registration for the healing arts and the state board of nursing the “Utilization of Telehealth by Nurses”. An advanced practice registered nurse (APRN) providing nursing services under a collaborative practice arrangement under section 334.104 may provide such services outside the geographic proximity requirements of section 334.104 if the collaborating physician and advanced practice registered nurse utilize telehealth [in the care of the patient and if the services are provided in a rural area of need.] Telehealth providers shall be required to obtain patient consent before telehealth services are initiated and ensure confidentiality of medical information.

2. As used in this section, “telehealth” shall have the same meaning as such term is defined in section 191.1145.

[3. (1) The boards shall jointly promulgate rules governing the practice of telehealth under this section. Such rules shall address, but not be limited to, appropriate standards for the use of telehealth.]

[(2) 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, 2013, shall be invalid and void.]

[4. For purposes of this section, “rural area of need” means any rural area of this state which is located in a health professional shortage area as defined in section 354.650.]”; and

Further amend the title and enacting clause accordingly.

Senator Schroer moved that the above amendment be adopted.

Senator Trent offered **SA 1** to **SA 2**:

SENATE AMENDMENT NO. 1 TO  
SENATE AMENDMENT NO. 2

Amend Senate Amendment No. 2 to Senate Substitute for Senate Committee Substitute for Senate Bill No. 157, Page 1, Line 2, by striking all of said line and inserting in lieu thereof the following: “by striking “collaborative practice arrangements with nurses” and inserting in lieu thereof the following: “the licensing of health care professionals”; and”; and

Further amend said amendment, page 3, line 60, by inserting immediately after the quote “““ the following:

“334.036. 1. For purposes of this section, the following terms shall mean:

(1) “Assistant physician”, any **graduate of a medical school [graduate] accredited by the Liaison Committee on Medical Education, the Commission on Osteopathic College Accreditation, or an organization accredited by the Educational Commission for Foreign Medical Graduates** who:

(a) Is a resident and citizen of the United States or is a legal resident alien;

(b) Has successfully completed Step 2 of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the three-year period immediately preceding application for licensure as an assistant physician, or within three years after graduation from a medical college or osteopathic medical college, whichever is later;

(c) Has not completed an approved postgraduate residency and has successfully completed Step 2 of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the immediately preceding three-year period unless when such three-year anniversary occurred he or she was serving as a resident physician in an accredited residency in the United States and continued to do so within thirty days prior to application for licensure as an assistant physician; and

- (d) Has proficiency in the English language.

Any **graduate of a** medical school [graduate] who could have applied for licensure and complied with the provisions of this subdivision at any time between August 28, 2014, and August 28, 2017, may apply for licensure and shall be deemed in compliance with the provisions of this subdivision;

(2) “Assistant physician collaborative practice arrangement”, an agreement between a physician and an assistant physician that meets the requirements of this section and section 334.037[;]

[(3) “Medical school graduate”, any person who has graduated from a medical college or osteopathic medical college described in section 334.031].

2. (1) An assistant physician collaborative practice arrangement shall limit the assistant physician to providing only primary care services and only in medically underserved rural or urban areas of this state [or in any pilot project areas established in which assistant physicians may practice].

(2) For a physician-assistant physician team working in a rural health clinic under the federal Rural Health Clinic Services Act, P.L. 95-210, as amended:

(a) An assistant physician shall be considered a physician assistant for purposes of regulations of the Centers for Medicare and Medicaid Services (CMS); and

(b) No supervision requirements in addition to the minimum federal law shall be required.

3. (1) For purposes of this section, the licensure of assistant physicians shall take place within processes established by rules of the state board of registration for the healing arts. The board of healing arts is authorized to establish rules under chapter 536 establishing licensure and renewal procedures, supervision, collaborative practice arrangements, fees, and addressing such other matters as are necessary to protect the public and discipline the profession. No licensure fee for an assistant physician shall exceed the amount of any licensure fee for a physician assistant. An application for licensure may be denied or the licensure of an assistant physician may be suspended or revoked by the board in the same manner and for violation of the standards as set forth by section 334.100, or such other standards of conduct set by the board by rule. No rule or regulation shall require an assistant physician to complete more hours of continuing medical education than that of a licensed physician.

(2) 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 under 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, 2014, shall be invalid and void.

(3) Any rules or regulations regarding assistant physicians in effect as of the effective date of this section that conflict with the provisions of this section and section 334.037 shall be null and void as of the effective date of this section.

4. An assistant physician shall clearly identify himself or herself as an assistant physician and shall be permitted to use the terms “doctor”, “Dr.”, or “doc”. No assistant physician shall practice or attempt

to practice without an assistant physician collaborative practice arrangement, except as otherwise provided in this section and in an emergency situation.

5. The collaborating physician is responsible at all times for the oversight of the activities of and accepts responsibility for primary care services rendered by the assistant physician.

6. The provisions of section 334.037 shall apply to all assistant physician collaborative practice arrangements. Any renewal of licensure under this section shall include verification of actual practice under a collaborative practice arrangement in accordance with this subsection during the immediately preceding licensure period.

7. Each health carrier or health benefit plan that offers or issues health benefit plans that are delivered, issued for delivery, continued, or renewed in this state shall reimburse an assistant physician for the diagnosis, consultation, or treatment of an insured or enrollee on the same basis that the health carrier or health benefit plan covers the service when it is delivered by another comparable mid-level health care provider including, but not limited to, a physician assistant.”.

Senator Trent moved that the above amendment be adopted, which motion prevailed.

Senator Thompson Rehder assumed the Chair.

Senator Schroer moved that **SA 2**, as amended, be adopted, which motion prevailed.

Senator Mosley offered **SA 3**:

#### SENATE AMENDMENT NO. 3

Amend Senate Substitute for Senate Committee Substitute for Senate Bill No. 157, Page 1, In the Title, Lines 3-4, by striking “collaborative practice arrangements with nurses” and inserting in lieu thereof the following: “the licensing of health care professionals”; and

Further amend said bill, page 9, section 334.104, line 267, by inserting after all of said line the following:

**“334.1051. 1. As used in sections 334.1051 to 334.1071, the following terms shall mean:**

**(1) “Approved medical educational program”, an education program that the board has approved as meeting the requirements of section 334.1059 and that prepares naturopathic physicians for the practice of naturopathic medicine;**

**(2) “Board”, the state board of registration for the healing arts;**

**(3) “Clinical laboratory procedure”, the use of venipuncture consistent with naturopathic medical practice; commonly used diagnostic modalities consistent with naturopathic practice; the recording of a patient's health history; physical examination; and ordering and interpreting radiographic diagnostics and other standard imaging and examining body orifices, excluding endoscopy and colonoscopy;**

**(4) “Committee”, the naturopathic physicians advisory committee of the board established in section 334.1056;**

(5) **“Dangerous drugs”, narcotics or controlled substances described in chapter 195;**

(6) **“Homeopathic medicine”, a system of medicine based on the use of infinitesimal doses of substances capable of producing symptoms similar to those of the disease treated, as listed in the Homeopathic Pharmacopeia of the United States;**

(7) **“Hygiene”, the use of preventative techniques, including, but not limited to, personal hygiene, asepsis, public health, and safety;**

(8) **“Laboratory examination”, phlebotomy, a clinical laboratory procedure, an orifice examination, a physiological function test, or a screening or test that is consistent with naturopathic education and training;**

(9) **“Legend drug”, the same meaning as in section 338.330;**

(10) **“Minor office procedure”, minor surgical care and procedures, including, but not limited to, the following:**

(a) **Surgical care incidental to superficial laceration, lesion, or abrasion, excluding surgical care to treat a lesion suspected of malignancy;**

(b) **The removal of foreign bodies located in superficial structures, excluding the globe of the eye;**

(c) **Trigger point therapy;**

(d) **Dermal stimulation;**

(e) **Allergy testing and treatment; and**

(f) **The use of antiseptics and topical or local anesthetics;**

(11) **“NABNE”, the North American Board of Naturopathic Examiners;**

(12) **“Naturopathic medicine”, includes the following:**

(a) **A system of health care for the prevention, diagnosis, and treatment of human health conditions, injury, and disease;**

(b) **The promotion or restoration of health; and**

(c) **The support and stimulation of a patient's inherent self-healing processes through patient education and the use of naturopathic therapies and therapeutic substances;**

(13) **“Naturopathic physical medicine”, the use of one or more of the following physical agents in a manner consistent with naturopathic medical practice on a part or the whole of the body, by hand or by mechanical means, in the resolution of a human ailment or condition: air, water, heat, cold, sound, light, electromagnetism, colon hydrotherapy, soft tissue therapy, joint mobilization, therapeutic exercise, or naturopathic manipulation. The term shall not include the practice of physical therapy, acupuncture, or application of chiropractic adjustments and the principles or techniques of chiropractic science;**

(14) “Naturopathic therapy”, the use of naturopathic physical medicine, suggestion, hygiene, a therapeutic substance, a dangerous drug, nutrition and food science, homeopathic medicine, a clinical laboratory procedure, or a minor office procedure;

(15) “Nutrition and food science”, the prevention and treatment of disease or other human conditions through the use of food, water, herbs, roots, bark, or natural food elements;

(16) “Professional examination”, a competency-based national naturopathic physician licensing examination administered by NABNE, or its successor agency, which board has been nationally recognized to administer a naturopathic examination that represents federal standards of education and training;

(17) “Suggestion”, a technique using biofeedback, hypnosis, health education, or health counseling;

(18) “Therapeutic substance”, any of the following exemplified in a standard naturopathic medical text, journal, or pharmacopeia: a vitamin, mineral, nutraceutical, botanical medicine, oxygen, homeopathic medicine, hormone, hormonal or pharmaceutical contraceptive device, or other physiological substance.

**334.1053. The board shall license an applicant who:**

(1) Is of good moral character;

(2) Submits the following items to the board:

(a) An application for license;

(b) Evidence that the applicant has graduated from an approved naturopathic medical educational program;

(c) Evidence that the applicant successfully completed a competency-based national naturopathic medicine licensing examination;

(d) Evidence that the applicant has passed a pharmacy examination authorized by the board and administered by NABNE;

(e) Evidence that the applicant has passed a state jurisprudence examination that meets standards authorized by the board;

(f) Evidence of professional liability insurance with policy limits not less than prescribed by the board in rule;

(g) Be at least twenty-one years of age;

(h) Be a United States citizen or an alien lawfully admitted for permanent residence in the United States; and

(i) Pay all application and examination fees required by the board;

**(3) Is determined by the board, upon recommendation by the committee, to be physically and mentally capable of safely practicing naturopathic medicine with or without reasonable accommodation; and**

**(4) Has not had a license to practice naturopathic medicine or other health care license, registration, or certification refused, revoked, or suspended by any other jurisdiction for reasons that related to the applicant's ability to skillfully and safely practice naturopathic medicine, unless that license, registration, or certification has been restored to good standing by the jurisdiction.**

**334.1056. 1. There is hereby established a “Naturopathic Physicians Advisory Committee” for the purpose of providing advice for the board regarding licensure of naturopathic physicians and matters relating to the training of naturopathic physicians.**

**2. The governor shall appoint, with the advice and consent of the senate, an initial committee consisting of one member for a term of four years and two members for terms of three years each. As the terms of the initial committee members expire, the board shall appoint successors for terms of four years each. No more than two members shall be affiliated with the same political party. All members shall be citizens of the United States. The committee shall consist of three voting members as follows:**

**(1) Two licensed naturopathic physicians, except that the first such members shall become licensed within six months of August 28, 2023; and**

**(2) One member who is a resident of the state who is not, and never has been, a licensed health care practitioner and who does not have an interest in naturopathic education, naturopathic medicine, or naturopathic business or practice.**

**3. At the first meeting of the committee, the members shall elect a chair. The committee shall meet at least once during each calendar quarter. The committee may hold additional meetings at the call of the chair or upon the written request of any two members of the committee.**

**4. Each member shall receive compensation in an amount set by the commission not to exceed seventy dollars for each day devoted to the duties of the commission, and shall be entitled to reimbursement for the member's expenses necessarily incurred in the discharge of his or her official duties.**

**5. The committee shall develop guidelines for the board to consider for rulemaking, including, but not limited to:**

**(1) Regulating the licensure of naturopathic physicians and determining the hours of continuing education units required for maintaining licensure as a naturopathic physician;**

**(2) Prescribing the manner in which records of examinations and treatments shall be kept and maintained;**

**(3) Establishing standards for professional responsibility and conduct;**

**(4) Identifying disciplinary actions and circumstances that require disciplinary action;**

**(5) Developing a means to provide information to all licensees in the state;**

(6) Providing for the investigation of complaints against licensees or persons holding themselves out as naturopathic physicians in the state;

(7) Providing for the publication of information for the public about licensees and the practice of naturopathic medicine in the state;

(8) Providing for an orderly process for reinstatement of a license; and

(9) Establishing criteria for advertising or promotional materials.

**334.1059. 1.** The board shall, in collaboration with the committee, establish guidelines for an approved naturopathic medical educational program and examination for an applicant for licensure, which shall, at a minimum, meet the following requirements:

(1) Graduation from:

(a) A naturopathic medical education program in the United States providing the degree of doctor of naturopathy or doctor of naturopathic medicine, which shall offer graduate-level, full-time didactic and supervised clinical training and shall be accredited or have achieved candidacy status for accreditation by the Council on Naturopathic Medical Education (CNME), or an equivalent federally-recognized accrediting body for naturopathic medical programs, and which shall be an institution of higher education or part of an institution of higher education that is either accredited or is a candidate for accreditation by a regional or national institutional accrediting agency recognized by the U.S. Secretary of Education;

(b) A degree-granting institution of higher education in the United States that, prior to the existence of the CNME, offered a full-time, structured curriculum in basic science and supervised patient care comprising a doctoral naturopathic medical education requiring not less than one hundred thirty-two weeks of coursework to be completed within a period of not less than thirty-five months, which was reputable and in good standing in the judgment of the board and which, if still in existence, has current programmatic accreditation by the CNME or a federally-recognized equivalent accrediting agency;

(c) A diploma-granting, degree-equivalent institution of higher education located in Canada that, prior to the existence of the CNME, had provincial approval for participation in government-funded student aid programs, offered a full-time, structured curriculum in basic science and supervised patient care comprising a doctoral naturopathic medical education requiring not less than one hundred thirty-two weeks of coursework to be completed within a period of not less than thirty months, which was reputable and in good standing in the judgment of the board and which, if still in existence, has current programmatic accreditation by the CNME or a federally-recognized equivalent accrediting agency, and has provincial approval for participation in government-funded student aid programs; or

(d) A diploma-granting, degree-equivalent institution of higher education located in Canada that has provincial approval for participation in government-funded student aid programs, offers graduate-level, full-time didactic and supervised clinical training and is accredited or has achieved candidacy status for accreditation by the CNME, or an equivalent federally-recognized accrediting body for naturopathic medical programs; and

**(2) Successful completion of a competency-based national naturopathic medicine licensing examination administered by the NABNE, or an equivalent agency recognized by the board, or, for graduates of approved naturopathic medical programs in the United States prior to the existence of the CNME, a competency-based state naturopathic medicine licensing examination for the practice of naturopathic medicine approved by the board.**

**334.1062. 1. A licensee may practice naturopathic medicine to provide primary care in alignment with naturopathic medical education in the following ways:**

**(1) To perform physical examinations;**

**(2) To order laboratory examinations;**

**(3) To order diagnostic imaging studies;**

**(4) To interpret the results of laboratory examinations for diagnostic purposes;**

**(5) To order and, based on a radiologist's report, take action on diagnostic imaging studies in a manner consistent with naturopathic training;**

**(6) To prescribe, administer, dispense, and order food, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicine, homeopathic medicines, and dietary supplements and nonprescription drugs;**

**(7) To prescribe, administer, dispense, and order all legend drugs and all Schedule III, IV, and V controlled substances described in section 195.017;**

**(8) To administer intramuscular, intravenous, subcutaneous, intra-articular, and intradermal injections of substances appropriate to naturopathic medicine;**

**(9) To use routes of administration that include oral, nasal, auricular, ocular, rectal, vaginal, transdermal, intradermal, subcutaneous, intravenous, intra-articular, and intramuscular, consistent with the education and training of a naturopathic physician;**

**(10) To perform naturopathic physical medicine;**

**(11) To employ the use of naturopathic therapy;**

**(12) To use therapeutic devices, barrier contraception, intrauterine devices, hormonal and pharmaceutical contraception and durable medical equipment; and**

**(13) To perform minor office procedures.**

**2. A licensee shall refer to a physician licensed under this chapter any patient whose medical condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of the licensee.**

**3. A licensee shall not:**

**(1) Perform surgery outside of the scope of minor office procedures permitted in the employment of naturopathic therapy;**

- (2) Use general or spinal anesthetics;**
- (3) Administer ionizing radioactive substances for therapeutic purposes;**
- (4) Perform a surgical procedure using a laser device;**
- (5) Perform a surgical procedure involving any of the following areas of the body that extend beyond superficial tissue: eye, ear, tendon, nerves, veins, or artery;**
- (6) Perform an abortion, as such term is defined in section 188.015;**
- (7) Treat any lesion suspected of malignancy or requiring surgical removal; or**
- (8) Perform acupuncture.**

**4. A licensee shall display the licensee's license in the licensee's place of business in a location clearly visible to the licensee's patients and shall also display evidence of the licensee having completed an approved naturopathic medical education program.**

**5. A licensee has the exclusive right to use the following terms in reference to the licensee's self: "naturopathic physician", "naturopathic doctor", "doctor of naturopathic medicine", "doctor of naturopathy", "N.D.", and "ND". An individual shall not represent himself or herself to the public as a naturopathic physician, naturopathic doctor, a doctor of naturopathic medicine, or a doctor of naturopathy, or as being otherwise authorized to practice naturopathic medicine in the state, unless he or she is a licensee.**

**334.1065. The provisions of sections 334.1051 to 334.1071 shall not apply to the following persons:**

- (1) A health care professional who is licensed, certified, or registered under the laws of this state and who is performing services within his or her authorized scope of practice;**
- (2) A student enrolled in an approved naturopathic medical educational program; provided, that the practice of naturopathic medicine by the student is performed pursuant to a course of instruction or an assignment from an instructor and under the supervision of the instructor who is a licensee or a duly-licensed professional in the instructed field;**
- (3) Any person selling a vitamin or herb who provides information about the vitamin or herb;**
- (4) A person licensed to practice naturopathic medicine in any other state or district in the United States and who entered this state to consult with a naturopathic physician of this state; provided, that the consultation is limited to examination, recommendation, or testimony in litigation; or**
- (5) Any person or practitioner who is not licensed as a naturopathic physician and who recommends the use of ayurvedic medicine, herbal remedies, nutritional advice, homeopathy, or other therapy that is within the scope of practice of naturopathic medicine; provided, that the person shall not recommend or provide a homeopathic medicine, a hormone, a hormonal or pharmaceutical contraceptive device, or any other physiologic substance.**

**334.1068. 1. A license issued or renewed under sections 334.1051 to 334.1071 shall expire two years following its issuance or renewal. The board may renew the license of any licensee who, upon the expiration of his or her license:**

- (1) Has submitted an application for renewal;**
- (2) Has paid the renewal fee established by rules of the board;**
- (3) Meets the qualifications for licensure set forth in the sections 334.1051 to 334.1071 and rules promulgated thereunder; and**
- (4) Meets the continuing education requirements established by the board.**

**2. The board may refuse to issue or renew a license for failure to meet the requirements of sections 334.1051 to 334.1071, or the rules promulgated thereunder. The board shall notify the applicant in writing of the reasons for refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.**

**334.1071. The board shall promulgate rules and regulations to implement the provisions of sections 334.1051 to 334.1071. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in sections 334.1051 to 334.1071 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, 2023, shall be invalid and void.”; and**

Further amend the title and enacting clause accordingly.

Senator Mosley moved that the above amendment be adopted, which motion failed.

Senator Black moved that **SS for SCS for SB 157**, as amended, be adopted, which motion prevailed.

On motion of Senator Black, **SS for SCS for SB 157**, as amended, was declared perfected and ordered printed.

Senator Trent moved that **SB 152** be taken up for perfection, which motion prevailed.

At the request of Senator Trent, **SB 152** was placed on the Informal Calendar.

### **MESSAGES FROM THE HOUSE**

The following messages were received from the House of Representatives through its Chief Clerk:

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HB 1120**, entitled:

An Act to repeal section 415.415, RSMo, and to enact in lieu thereof one new section relating to commercial activity.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 870**, entitled:

An Act to amend chapter 135, RSMo, by adding thereto four new sections relating to tax credits for child care.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 675**, entitled:

An Act to repeal section 135.750, RSMo, and to enact in lieu thereof two new sections relating to tax credits for the production of certain entertainment, with an effective date for a certain section.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HB 995**, entitled:

An Act to amend chapter 273, RSMo, by adding thereto one new section relating to pet shop operations.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 1058**, entitled:

An Act to repeal sections 452.705, 452.730, 452.885, and 487.110, RSMo, and to enact in lieu thereof fifteen new sections relating to the prevention of child abductions.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 986**, entitled:

An Act to repeal sections 64.570, 64.820, 65.665, 89.380, 143.183, 182.645, and 488.426, RSMo, and to enact in lieu thereof eight new sections relating to libraries.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 774**, entitled:

An Act to repeal section 293.620, RSMo, and to enact in lieu thereof one new section relating to cave inspection fees.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HCS** for **HB 543**, entitled:

An Act to repeal sections 304.155 and 304.156, RSMo, and to enact in lieu thereof two new sections relating to the towing of vehicles, with penalty provisions.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Senator Rowden assumed the Chair.

### **REPORTS OF SELECT COMMITTEES**

Senator Brattin, Chair of the Select Committee on the Protection of Missouri Assets from Foreign Adversaries, submitted the following report:

Mr. President: Your Select Committee on the Protection of Missouri Assets from Foreign Adversaries, to which were referred **SB 332**, **SB 334**, **SB 541**, and **SB 144**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

### **REPORTS OF STANDING COMMITTEES**

Senator O'Laughlin, Chair of the Committee on Rules, Joint Rules, Resolutions and Ethics, submitted the following report:

Mr. President: Your Committee on Rules, Joint Rules, Resolutions and Ethics, to which was referred **SS** for **SB 35**, begs leave to report that it has examined the same and finds that the bill has been truly perfected and that the printed copies furnished the Senators are correct.

Senator Crawford assumed the Chair.

### **SECOND READING OF SENATE BILLS**

The following Bills were read the 2nd time and referred to the Committees indicated:

**SB 546**—Health and Welfare.

**SB 547**—Economic Development and Tax Policy.

- SB 548**—General Laws.
- SB 549**—Commerce, Consumer Protection, Energy and the Environment.
- SB 550**—Local Government and Elections.
- SB 551**—Governmental Accountability.
- SB 552**—Governmental Accountability.
- SB 553**—Health and Welfare.
- SB 554**—Progress and Development.
- SB 555**—Governmental Accountability.
- SB 556**—Veterans, Military Affairs and Pensions.
- SB 557**—Appropriations.
- SB 558**—Insurance and Banking.
- SB 559**—Insurance and Banking.
- SB 560**—Transportation, Infrastructure and Public Safety.
- SB 561**—Judiciary and Civil and Criminal Jurisprudence.
- SB 562**—Governmental Accountability.
- SB 563**—Judiciary and Civil and Criminal Jurisprudence.
- SB 564**—Judiciary and Civil and Criminal Jurisprudence.
- SB 565**—Education and Workforce Development.
- SB 566**—Transportation, Infrastructure and Public Safety.
- SB 567**—Commerce, Consumer Protection, Energy and the Environment.
- SB 568**—Commerce, Consumer Protection, Energy and the Environment.
- SB 569**—Judiciary and Civil and Criminal Jurisprudence.
- SB 570**—General Laws.
- SB 571**—Education and Workforce Development.
- SB 572**—Transportation, Infrastructure and Public Safety.
- SB 573**—Emerging Issues.
- SB 574**—Appropriations.
- SB 575**—Judiciary and Civil and Criminal Jurisprudence.
- SB 576**—Governmental Accountability.

**SB 577**—Commerce, Consumer Protection, Energy and the Environment.

**SB 578**—Insurance and Banking.

**SB 579**—Progress and Development.

**SB 580**—Education and Workforce Development.

**SB 581**—Judiciary and Civil and Criminal Jurisprudence.

**SB 582**—Judiciary and Civil and Criminal Jurisprudence.

**SB 583**—Economic Development and Tax Policy.

**SB 584**—Progress and Development.

**SB 585**—Economic Development and Tax Policy.

**SB 586**—Insurance and Banking.

**SB 587**—General Laws.

**SB 588**—Agriculture, Food Production and Outdoor Resources.

**SB 589**—Education and Workforce Development.

**SB 590**—Local Government and Elections.

**SB 591**—Commerce, Consumer Protection, Energy and the Environment.

**SB 592**—Judiciary and Civil and Criminal Jurisprudence.

**SB 593**—Economic Development and Tax Policy.

**SB 594**—Health and Welfare.

**SB 595**—Health and Welfare.

**SB 596**—Emerging Issues.

**SB 597**—Commerce, Consumer Protection, Energy and the Environment.

**SB 598**—Emerging Issues.

**SB 599**—Commerce, Consumer Protection, Energy and the Environment.

**SB 600**—Judiciary and Civil and Criminal Jurisprudence.

**SB 601**—General Laws.

**SB 602**—Rules, Joint Rules, Resolutions and Ethics.

**SB 603**—Education and Workforce Development.

**SB 604**—Commerce, Consumer Protection, Energy and the Environment.

**SB 605**—General Laws.

- SB 606**—Local Government and Elections.
- SB 607**—Commerce, Consumer Protection, Energy and the Environment.
- SB 608**—Local Government and Elections.
- SB 609**—Education and Workforce Development.
- SB 610**—Insurance and Banking.
- SB 611**—Veterans, Military Affairs and Pensions.
- SB 612**—General Laws.
- SB 613**—Local Government and Elections.
- SB 614**—Health and Welfare.
- SB 615**—Agriculture, Food Production and Outdoor Resources.
- SB 616**—Judiciary and Civil and Criminal Jurisprudence.
- SB 617**—Insurance and Banking.
- SB 618**—Agriculture, Food Production and Outdoor Resources.
- SB 619**—Veterans, Military Affairs and Pensions.
- SB 620**—Education and Workforce Development.
- SB 621**—Health and Welfare.
- SB 622**—Health and Welfare.
- SB 623**—Health and Welfare.
- SB 624**—Insurance and Banking.
- SB 625**—Transportation, Infrastructure and Public Safety.
- SB 626**—Local Government and Elections.
- SB 627**—Commerce, Consumer Protection, Energy and the Environment.
- SB 628**—Health and Welfare.
- SB 629**—Emerging Issues.
- SB 630**—General Laws.
- SB 631**—Judiciary and Civil and Criminal Jurisprudence.
- SB 632**—Judiciary and Civil and Criminal Jurisprudence.
- SB 633**—Insurance and Banking.
- SB 634**—Transportation, Infrastructure and Public Safety.

**SB 635**—Commerce, Consumer Protection, Energy and the Environment.

**SB 636**—Agriculture, Food Production and Outdoor Resources.

**SB 637**—Economic Development and Tax Policy.

**SB 638**—Commerce, Consumer Protection, Energy and the Environment.

**SB 639**—Commerce, Consumer Protection, Energy and the Environment.

**SB 640**—Judiciary and Civil and Criminal Jurisprudence.

**SB 641**—Judiciary and Civil and Criminal Jurisprudence.

**SB 642**—Commerce, Consumer Protection, Energy and the Environment.

**SB 643**—Local Government and Elections.

**SB 644**—Governmental Accountability.

**SB 645**—Governmental Accountability.

**SB 646**—Health and Welfare.

**SB 647**—General Laws.

**SB 648**—Commerce, Consumer Protection, Energy and the Environment.

**SB 649**—Transportation, Infrastructure and Public Safety.

**SB 650**—Judiciary and Civil and Criminal Jurisprudence.

### **INTRODUCTION OF GUESTS**

Senator Williams introduced to the Senate, Jennings Educational Training School and JAG, Jana Loftis, Ferguson; Kacy Marsh; and Destinee Purnell, Jennings.

Senator Fitzwater introduced to the Senate, Mayor Joanne Hammuck, Paynesville.

On motion of Senator O'Laughlin the Senate adjourned until 12:00 p.m., Tuesday, April 4, 2023.

### **SENATE CALENDAR**

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**FORTY-SIXTH DAY—TUESDAY, APRIL 4, 2023**

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### **FORMAL CALENDAR**

### **SECOND READING OF SENATE BILLS**

SB 651-Eigel  
SB 653-Roberts  
SB 654-Eigel

SB 655-Moon  
SB 656-Fitzwater  
SB 657-Crawford

SB 658-Eigel	SB 691-Razer
SB 659-McCreery	SB 692-Eigel
SB 660-McCreery	SB 693-Eigel
SB 661-McCreery	SB 694-Eigel
SB 662-McCreery	SB 695-Bean
SB 663-Cierpiot	SB 696-Hoskins
SB 664-Gannon	SB 697-Hoskins
SB 665-Gannon	SB 698-Hoskins
SB 666-Black	SB 699-Brattin
SB 667-Eslinger	SB 700-Luetkemeyer
SB 668-Roberts	SB 701-Schroer
SB 669-Arthur	SB 702-Beck
SB 670-Arthur	SB 703-Eslinger
SB 671-Carter	SB 704-Eslinger
SB 672-Carter	SB 705-Rizzo
SB 673-May	SB 706-Koenig
SB 674-May	SB 707-Trent
SB 675-Washington	SB 708-O'Laughlin, et al
SB 676-Washington	SB 709-O'Laughlin
SB 677-Trent	SB 710-Moon and Carter
SB 678-Trent	SB 711-Eigel
SB 679-Trent	SB 712-Brown (26)
SB 680-Brown (26)	SB 713-Washington
SB 681-Eigel	SB 714-Washington
SB 682-Eigel	SB 715-Washington
SB 683-Trent	SB 716-Washington
SB 684-Luetkemeyer	SB 717-Fitzwater
SB 685-Coleman	SB 718-Fitzwater
SB 686-Coleman	SB 719-Fitzwater
SB 687-Coleman	SB 720-Hoskins
SB 688-Bernskoetter	SB 721-Roberts
SB 689-McCreery	SB 722-Washington
SB 690-Roberts	SB 723-Washington

## HOUSE BILLS ON SECOND READING

HB 677-Copeland	HCS for HBs 802, 807 & 886
HB 585-Owen	HB 131-Griffith
HCS for HB 461	HCS for HB 587
HCS for HB 454	HCS for HB 715
HB 490-Sharpe (4)	HB 81-Veit
HCS for HBs 47 & 638	HCS for HB 909
HB 630-Knight	HCS for HBs 117, 343 & 1091
HCS for HBs 919 & 1081	HB 94-Schwadron
HCS for HB 668	HCS for HB 1019

HB 1010-Christofanelli	HCS for HB 225
HCS for HBs 556 & 581	HCS for HBs 882 & 518
HCS for HB 467	HCS for HB 631
HB 132-Griffith	HCS for HB 1
HCS for HB 475	HCS for HB 2
HB 129-Griffith	HCS for HB 3
HCS for HB 130	HCS for HB 4
HB 283-Kelly (141)	HCS for HB 5
HB 644-Francis	HCS for HB 6
HB 923-Hovis	HCS for HB 7
HB 447-Davidson	HCS for HB 8
HCS for HB 442	HCS for HB 9
HCS for HJR 33 & 45	HCS for HB 10
HCS for HBs 816 & 660	HCS for HB 11
HCS for HBs 651, 479 & 647	HCS for HB 12
HCS for HB 725	HCS for HB 13
HCS for HBs 913 & 428	HCS for HB 15
HCS for HB 863	HB 1120-Hardwick
HS for HCS for HB 356	HCS for HB 870
HCS for HB 1162	HCS for HB 675
HCS for HB 766	HB 995-Baker
HCS for HBs 971 & 970	HCS for HB 1058
HCS for HB 1133	HCS for HB 986
HCS for HB 1015	HCS for HB 774
HCS for HB 207	HCS for HB 543
HB 403-Haden	

### THIRD READING OF SENATE BILLS

SS for SCS for SB 8-Eigel (In Fiscal Oversight)	SJR 21-Roberts (In Fiscal Oversight)
SS for SB 143-Beck (In Fiscal Oversight)	SS for SB 35-May
SS#3 for SCS for SB 131-Brattin (In Fiscal Oversight)	

### SENATE BILLS FOR PERFECTION

- |   |  |
|---|--|
| 1. SB 360-Koenig, with SCS                | 7. SB 184-Arthur, with SCS             |
| 2. SB 11-Crawford, with SCS               | 8. SB 209-Bean, with SCS               |
| 3. SB 199-Thompson Rehder                 | 9. SB 317-Eigel, with SCS              |
| 4. SB 95-Koenig                           | 10. SB 228-Coleman, with SCS           |
| 5. SJR 14-Brown (16)                      | 11. SB 413-Hoskins, with SCS           |
| 6. SBs 189, 36 & 37-Luetkemeyer, with SCS | 12. SBs 411 & 230-Brown (26), with SCS |

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|---------------------------------|---|
| 13. SB 234-Brown (26)           | 26. SB 378-Rowden                             |
| 14. SB 304-Eigel                | 27. SB 265-Bean                               |
| 15. SB 122-May                  | 28. SB 148-Mosley                             |
| 16. SB 256-Brattin, with SCS    | 29. SB 180-Crawford                           |
| 17. SB 540-Eigel                | 30. SB 400-Schroer                            |
| 18. SB 542-Eigel                | 31. SJR 12-Cierpiot                           |
| 19. SB 275-Trent                | 32. SB 168-Brown (26), with SCS               |
| 20. SB 190-Luetkemeyer          | 33. SB 335-Crawford                           |
| 21. SB 355-Brown (16), with SCS | 34. SB 46-Gannon, with SCS                    |
| 22. SB 398-Schroer, with SCS    | 35. SB 206-Eslinger                           |
| 23. SB 128-Thompson Rehder      | 36. SB 349-Trent, with SCS                    |
| 24. SB 129-Brattin, with SCS    | 37. SB 229-Coleman, with SCS                  |
| 25. SB 74-Trent, with SCS       | 38. SBs 332, 334, 541 & 144-Brattin, with SCS |

#### HOUSE BILLS ON THIRD READING

HCS for HBs 115 & 99 (Eslinger)

HCS for HB 301, with SCS (Luetkemeyer)

#### INFORMAL CALENDAR

#### SENATE BILLS FOR PERFECTION

- |  |   |
|--|---|
| SB 5-Koenig, with SCS  | SB 88-Brown (26), with SCS & SS for SCS<br>(pending)          |
| SB 15-Cierpiot, with SS (pending)                            | SBs 93 & 135-Hoskins, with SCS & SS for<br>SCS (pending)      |
| SB 21-Bernskoetter, with SCS (pending)                       | SB 105-Cierpiot, with SS & SA 2 (pending)                     |
| SB 30-Luetkemeyer  | SB 110-Bernskoetter   |
| SB 38-Williams, with SCS & SS for SCS<br>(pending)           | SB 112-Hough  |
| SB 44-Brattin  | SB 117-Luetkemeyer, with SS, SA 1 & SA 1<br>to SA 1 (pending) |
| SBs 73 & 162-Trent, with SCS, SS for SCS<br>& SA 2 (pending) | SB 136-Eslinger   |
| SB 79-Schroer, with SCS                                      | SB 140-Bean, with SCS   |
| SB 80-Schroer  | SB 151-Fitzwater, with SA 2 (pending)                         |
| SB 81-Coleman, with SCS                                      | SB 152-Trent  |
| SB 85-Carter, with SCS, SS for SCS<br>& SA 1 (pending)       | SB 214-Beck, with SS & SA 2 (pending)                         |

#### HOUSE BILLS ON THIRD READING

HCS for HJR 43 (Crawford), with SS, SA 1,  
SSA 1 for SA 1 & SA 1 to SSA 1  
for SA 1 (pending)

RESOLUTIONS

SR 22-Roberts

Reported from Committee

SCR 9-Roberts

SCR 10-O'Laughlin

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