

CONFERENCE COMMITTEE SUBSTITUTE NO. 2

FOR

SENATE SUBSTITUTE

FOR

HOUSE BILL NO. 2149

AN ACT

To repeal sections 197.400, 197.445, 327.312, 327.313, 327.314, 327.331, 334.100, 334.530, 334.655, 338.055, 345.015, and 345.050, RSMo, and to enact in lieu thereof seventeen new sections relating to professional licensing, with an emergency clause for a certain section.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF MISSOURI, AS FOLLOWS:

Section A. Sections 197.400, 197.445, 327.312, 327.313, 2 327.314, 327.331, 334.100, 334.530, 334.655, 338.055, 345.015, and 3 345.050, RSMo, are repealed and seventeen new sections enacted in 4 lieu thereof, to be known as sections 197.400, 197.445, 324.005, 5 327.312, 327.313, 327.314, 327.331, 332.325, 334.100, 334.530, 6 334.655, 338.055, 345.015, 345.022, 345.050, 345.052, and 345.085, 7 to read as follows:

197.400. As used in sections 197.400 to 197.475, unless the 2 context otherwise requires, the following terms mean:

3 (1) "Council", the home health services advisory council 4 created by sections 197.400 to 197.475;

5 (2) "Department", the department of health and senior 6 services;

7 (3) "Home health agency", a public agency or private

8 organization or a subdivision or subunit of an agency or
9 organization that provides two or more home health services at the
10 residence of a patient according to a ~~physician's~~ written ~~and~~
11 ~~signed~~ plan of treatment signed by a physician, nurse
12 practitioner, clinical nurse specialist, or physician assistant;

13 (4) "Home health services", any of the following items and
14 services provided at the residence of the patient on a part-time or
15 intermittent basis: nursing, physical therapy, speech therapy,
16 occupational therapy, home health aid, or medical social service;

17 (5) "Nurse practitioner, clinical nurse specialist", a
18 person recognized by the state board of nursing pursuant to the
19 provisions of chapter 335 to practice in this state as a nurse
20 practitioner or clinical nurse specialist;

21 (6) "Part-time or intermittent basis", the providing of home
22 health services in an interrupted interval sequence on the average
23 of not to exceed three hours in any twenty-four-hour period;

24 ~~(6)~~ (7) "Patient's residence", the actual place of
25 residence of the person receiving home health services, including
26 institutional residences as well as individual dwelling units;

27 ~~(7)~~ (8) "Physician", a person licensed by the state board
28 of registration for the healing arts pursuant to the provisions of
29 chapter 334 to practice in this state as a physician and surgeon;

30 (9) "Physician assistant", a person licensed by the state
31 board of registration for the healing arts pursuant to the
32 provisions of chapter 334 to practice in this state as a physician
33 assistant;

34 ~~(8)~~ (10) "Plan of treatment", a plan reviewed and signed as

35 often as ~~medically~~ necessary by a physician ~~or~~, podiatrist,
36 nurse practitioner, clinical nurse specialist, or a physician
37 assistant, not to exceed sixty days in duration, and reviewed by a
38 physician at least once every six months, prescribing items and
39 services for an individual patient's condition;

40 ~~(9)~~ (11) "Podiatrist", a person licensed by the state board
41 of podiatry pursuant to the provisions of chapter 330 to practice
42 in this state as a podiatrist;

43 ~~(10)~~ (12) "Subunit" or "subdivision", any organizational
44 unit of a larger organization which can be clearly defined as a
45 separate entity within the larger structure, which can meet all of
46 the requirements of sections 197.400 to 197.475 independent of the
47 larger organization, which can be held accountable for the care of
48 patients it is serving, and which provides to all patients care and
49 services meeting the standards and requirements of sections
50 197.400 to 197.475.

197.445. 1. The department may adopt reasonable rules and
2 standards necessary to carry out the provisions of sections
3 197.400 to 197.477. The rules and standards adopted shall not be
4 less than the standards established by the federal government for
5 home health agencies under Title XVIII of the Federal Social
6 Security Act. The reasonable rules and standards shall be
7 initially promulgated within one year of September 28, 1983.

8 2. The rules and standards adopted by the department pursuant
9 to the provisions of sections 197.400 to 197.477 shall apply to all
10 health services covered by sections 197.400 to 197.477 rendered to
11 any patient being served by a home health agency regardless of

12 source of payment for the service, patient's condition, or place of
13 residence, at which the home health services are ordered by the
14 physician ~~[or]~~, podiatrist, nurse practitioner, clinical nurse
15 specialist, or physician assistant. No rule or portion of a rule
16 promulgated pursuant to the authority of sections 197.400 to
17 197.477 shall become effective unless it has been promulgated
18 pursuant to the provisions of section 536.024.

324.005. 1. Notwithstanding any requirements for licensure
2 for all professional boards, commissions, committees, and offices
3 within the division of professional registration to the contrary,
4 a professional who has a current license to practice from another
5 state, commonwealth, territory, or the District of Columbia shall
6 be exempt from the licensure requirements of his or her respective
7 licensure board in this state if:

8 (1) The professional is an active duty or reserve member of
9 the Armed Forces of the United States, a member of the National
10 Guard, a civilian employee of the United States Department of
11 Defense, an authorized services contractor under 10 U.S.C. Section
12 1091, or a professional otherwise authorized by the United States
13 Department of Defense;

14 (2) The professional practices the same occupation or
15 profession at the same practice level for which he or she holds a
16 current license; and

17 (3) The professional is engaged in the practice of a
18 professional through a partnership with the federal Innovative
19 Readiness Training program within the United States Department of
20 Defense.

21 2. The exemption provided in this section shall not permit a
22 professional to engage in practice except as part of the federal
23 Innovative Readiness Training program within the United States
24 Department of Defense. The exemption shall only apply while:

25 (1) The professional's practice is required by the program
26 pursuant to military orders; and

27 (2) The services provided by the professional are within the
28 scope of practice for the individual's respective profession in
29 this state.

 327.312. 1. Prior to January 1, 2024, any person may apply
2 to the board for enrollment as a land surveyor-in-training who is a
3 high school graduate, or who holds a Missouri certificate of high
4 school equivalence (GED), and either:

5 (1) Has graduated and received a baccalaureate degree in an
6 approved curriculum as defined by board regulation which shall
7 include at least twelve semester hours of approved surveying
8 course work as defined by board regulation of which at least two
9 semester hours shall be in the legal aspects of boundary surveying;
10 or

11 (2) Has passed at least sixty hours of college credit which
12 shall include credit for at least twenty semester hours of approved
13 surveying course work as defined by board regulation of which at
14 least two semester hours shall be in legal aspects of boundary
15 surveying and present evidence satisfactory to the board that in
16 addition thereto such person has at least one year of combined
17 professional office and field experience in land surveying
18 projects under the immediate personal supervision of a

19 professional land surveyor; or

20 (3) Has passed at least twelve semester hours of approved
21 surveying course work as defined by board regulation of which at
22 least two semester hours shall be in legal aspects of land
23 surveying and in addition thereto has at least two years of
24 combined professional office and field experience in land
25 surveying projects under the immediate personal supervision of a
26 professional land surveyor. Pursuant to this provision, not more
27 than one year of satisfactory postsecondary education work shall
28 count as equivalent years of satisfactory land surveying work as
29 aforementioned.

30 2. The board shall issue a certificate of completion to each
31 applicant who satisfies the requirements of the aforementioned
32 land surveyor-in-training program and passes such examination or
33 examinations as shall be required by the board.

34 3. Beginning January 1, 2024, any person may apply to the
35 board for enrollment as a land surveyor-intern who is a high school
36 graduate, or who holds a certificate of high school equivalence
37 (GED), and has passed any examination required by the board
38 pursuant to section 327.331.

327.313. Applications for enrollment as a land [~~surveyor-in-~~
2 ~~training~~] surveyor-intern shall be typewritten on prescribed forms
3 furnished to the applicant. The application shall contain
4 applicant's statements showing the applicant's education,
5 experience, and such other pertinent information as the board may
6 require. Each application shall contain a statement that it is
7 made under oath or affirmation and that the representations are

8 true and correct to the best knowledge and belief of the applicant,
9 subject to the penalties of making a false affidavit or declaration
10 and shall be accompanied by the required fee.

327.314. 1. Prior to January 1, 2024, any person may apply
2 to the board for licensure as a professional land surveyor who has
3 been enrolled as a land surveyor-in-training and has presented
4 evidence to the satisfaction of the board that said person has
5 acquired at least four years of satisfactory professional field
6 and office experience in land surveying from the date of enrollment
7 as a land surveyor-in-training. This experience shall have been
8 under the immediate personal supervision of a professional land
9 surveyor.

10 2. Beginning January 1, 2024, any person may apply to the
11 board for licensure who presents evidence satisfactory to the
12 board that the applicant has met the requirements as provided in
13 this subsection:

14 (1) An applicant shall be a high school graduate or hold a
15 certificate of high school equivalence (GED), and either:

16 (a) Has graduated and received a baccalaureate degree in an
17 approved curriculum, as defined by the board, which shall include
18 at least fifteen semester hours of approved surveying course work,
19 as defined by the board, of which at least six semester hours shall
20 be in the legal aspects of boundary surveying; or

21 (b) Has passed at least sixty hours of college credit which
22 shall include at least fifteen semester hours of approved
23 surveying course work, as defined by the board, of which at least
24 six semester hours shall be in legal aspects of boundary surveying;

25 or

26 (c) Has passed at least fifteen semester hours of approved
27 surveying coursework, as defined by the board, of which at least
28 six semester hours shall be in legal aspects of land surveying;

29 (d) An applicant meeting the requirements of paragraph (a) of
30 this subdivision shall have acquired at least four years of
31 satisfactory field and office experience in land surveying under
32 the immediate personal supervision of a professional land
33 surveyor;

34 (e) An applicant meeting the requirements of paragraph (b) of
35 this subdivision shall have acquired at least five years of
36 satisfactory field and office experience in land surveying under
37 the immediate personal supervision of a professional land
38 surveyor;

39 (f) An applicant meeting the requirements of paragraph (c) of
40 this subdivision shall have acquired at least six years of
41 satisfactory field and office experience in land surveying under
42 the immediate personal supervision of a professional land
43 surveyor. Pursuant to this provision, up to one year of post-
44 secondary education, approved by the board, may count as
45 equivalent work experience;

46 (2) An applicant shall pass any examinations required by the
47 board pursuant to section 327.331;

48 (3) Any person enrolled as a land surveyor-in-training prior
49 to January 1, 2024, shall only be required to meet the requirements
50 in place pursuant to their enrollment.

327.331. 1. After it has been determined that an applicant

2 possesses the qualifications entitling the applicant to be
3 examined, each applicant for examination and enrollment as a land
4 surveyor-in-training and for examination and licensure as a
5 professional land surveyor in Missouri shall appear before the
6 board or its representatives for examination at the time and place
7 specified.

8 2. The examination or examinations shall be of such form,
9 content and duration as shall be determined by the board to
10 thoroughly test the qualifications of each applicant to become
11 enrolled as a land ~~surveyor-in-training~~ surveyor-intern or to
12 become licensed as a professional land surveyor in Missouri.

13 3. Any applicant to be eligible for enrollment or for license
14 must make a grade on the applicable examination of at least seventy
15 percent.

16 4. Any person who passes the examination hereinabove
17 specified shall be entitled to be enrolled as a land ~~surveyor-in-~~
18 ~~training~~ surveyor-intern or licensed as a professional land
19 surveyor, as the case may be, in Missouri and shall receive a
20 certificate of enrollment or a license, as the case may be.

332.325. 1. The Missouri dental board may collaborate with
2 the department of health and senior services and the office of
3 dental health within the department of health and senior services
4 to approve pilot projects designed to examine new methods of
5 extending care to medically underserved populations, as defined in
6 42 U.S.C. Section 300e-1(7). These pilot projects may employ
7 techniques or approaches to care that may necessitate a waiver of
8 the requirements of this chapter and regulations promulgated

9 thereunder; provided:

10 (1) The project plan has a clearly stated objective of
11 servicing a specific underserved population that warrants, in the
12 opinion of a majority of the board, granting approval for a pilot
13 project;

14 (2) The project has a finite start date and termination date;

15 (3) The project clearly defines the new techniques or
16 approaches it intends to examine to determine if it results in an
17 improvement in access or quality of care;

18 (4) The project plan identifies specific and limited
19 locations and populations to participate in the pilot project;

20 (5) The project plan clearly establishes minimum guidelines
21 and standards for the pilot project, including, but not limited to,
22 provisions for protecting safety of participating patients;

23 (6) The project plan clearly defines the measurement
24 criteria it will use to evaluate the outcomes of the pilot project
25 on access and quality of care; and

26 (7) The project plan identifies reporting intervals to
27 communicate interim and final outcomes to the board.

28 2. The board may promulgate rules and regulations to
29 implement the provisions of this section. Any rule or portion of a
30 rule, as that term is defined in section 536.010, that is created
31 under the authority delegated in this section shall become
32 effective only if it complies with and is subject to all of the
33 provisions of chapter 536 and, if applicable, section 536.028.
34 This section and chapter 536 are nonseverable and if any of the
35 powers vested with the general assembly pursuant to chapter 536 to

36 review, to delay the effective date, or to disapprove and annul a
37 rule are subsequently held unconstitutional, then the grant of
38 rulemaking authority and any rule proposed or adopted after August
39 28, 2022, shall be invalid and void.

40 3. The provisions of this section shall expire on August 28,
41 2026. The board shall provide a final report on approved projects
42 and related data or findings to the general assembly on or before
43 December 31, 2025. The name, location, approval dates, and general
44 description of an approved pilot project shall be deemed a public
45 record pursuant to chapter 610.

334.100. 1. The board may refuse to issue or renew any
2 certificate of registration or authority, permit or license
3 required pursuant to this chapter for one or any combination of
4 causes stated in subsection 2 of this section. The board shall
5 notify the applicant in writing of the reasons for the refusal and
6 shall advise the applicant of the applicant's right to file a
7 complaint with the administrative hearing commission as provided
8 by chapter 621. As an alternative to a refusal to issue or renew
9 any certificate, registration or authority, the board may, at its
10 discretion, issue a license which is subject to probation,
11 restriction or limitation to an applicant for licensure for any one
12 or any combination of causes stated in subsection 2 of this
13 section. The board's order of probation, limitation or
14 restriction shall contain a statement of the discipline imposed,
15 the basis therefor, the date such action shall become effective,
16 and a statement that the applicant has thirty days to request in
17 writing a hearing before the administrative hearing commission.

18 If the board issues a probationary, limited or restricted license
19 to an applicant for licensure, either party may file a written
20 petition with the administrative hearing commission within thirty
21 days of the effective date of the probationary, limited or
22 restricted license seeking review of the board's determination.
23 If no written request for a hearing is received by the
24 administrative hearing commission within the thirty-day period,
25 the right to seek review of the board's decision shall be
26 considered as waived.

27 2. The board may cause a complaint to be filed with the
28 administrative hearing commission as provided by chapter 621
29 against any holder of any certificate of registration or
30 authority, permit or license required by this chapter or any person
31 who has failed to renew or has surrendered the person's certificate
32 of registration or authority, permit or license for any one or any
33 combination of the following causes:

34 (1) Use of any controlled substance, as defined in chapter
35 195, or alcoholic beverage to an extent that such use impairs a
36 person's ability to perform the work of any profession licensed or
37 regulated by this chapter;

38 (2) The person has been finally adjudicated and found guilty,
39 or entered a plea of guilty or nolo contendere, in a criminal
40 prosecution under the laws of any state or of the United States,
41 for any offense reasonably related to the qualifications,
42 functions or duties of any profession licensed or regulated
43 pursuant to this chapter, for any offense involving fraud,
44 dishonesty or an act of violence, or for any offense involving

45 moral turpitude, whether or not sentence is imposed;

46 (3) Use of fraud, deception, misrepresentation or bribery in
47 securing any certificate of registration or authority, permit or
48 license issued pursuant to this chapter or in obtaining permission
49 to take any examination given or required pursuant to this chapter;

50 (4) Misconduct, fraud, misrepresentation, dishonesty,
51 unethical conduct or unprofessional conduct in the performance of
52 the functions or duties of any profession licensed or regulated by
53 this chapter, including, but not limited to, the following:

54 (a) Obtaining or attempting to obtain any fee, charge,
55 tuition or other compensation by fraud, deception or
56 misrepresentation; willfully and continually overcharging or
57 overtreating patients; or charging for visits to the physician's
58 office which did not occur unless the services were contracted for
59 in advance, or for services which were not rendered or documented
60 in the patient's records;

61 (b) Attempting, directly or indirectly, by way of
62 intimidation, coercion or deception, to obtain or retain a patient
63 or discourage the use of a second opinion or consultation;

64 (c) Willfully and continually performing inappropriate or
65 unnecessary treatment, diagnostic tests or medical or surgical
66 services;

67 (d) Delegating professional responsibilities to a person who
68 is not qualified by training, skill, competency, age, experience
69 or licensure to perform such responsibilities;

70 (e) Misrepresenting that any disease, ailment or infirmity
71 can be cured by a method, procedure, treatment, medicine or device;

72 (f) Performing or prescribing medical services which have
73 been declared by board rule to be of no medical or osteopathic
74 value;

75 (g) Final disciplinary action by any professional medical or
76 osteopathic association or society or licensed hospital or medical
77 staff of such hospital in this or any other state or territory,
78 whether agreed to voluntarily or not, and including, but not
79 limited to, any removal, suspension, limitation, or restriction of
80 the person's license or staff or hospital privileges, failure to
81 renew such privileges or license for cause, or other final
82 disciplinary action, if the action was in any way related to
83 unprofessional conduct, professional incompetence, malpractice or
84 any other violation of any provision of this chapter;

85 (h) Signing a blank prescription form; or dispensing,
86 prescribing, administering or otherwise distributing any drug,
87 controlled substance or other treatment without sufficient
88 examination including failing to establish a valid physician-
89 patient relationship pursuant to section 334.108, or for other
90 than medically accepted therapeutic or experimental or
91 investigative purposes duly authorized by a state or federal
92 agency, or not in the course of professional practice, or not in
93 good faith to relieve pain and suffering, or not to cure an
94 ailment, physical infirmity or disease, except as authorized in
95 section 334.104;

96 (i) Exercising influence within a physician-patient
97 relationship for purposes of engaging a patient in sexual
98 activity;

99 (j) Being listed on any state or federal sexual offender
100 registry;

101 (k) Terminating the medical care of a patient without
102 adequate notice or without making other arrangements for the
103 continued care of the patient;

104 (l) Failing to furnish details of a patient's medical records
105 to other treating physicians or hospitals upon proper request; or
106 failing to comply with any other law relating to medical records;

107 (m) Failure of any applicant or licensee to cooperate with
108 the board during any investigation;

109 (n) Failure to comply with any subpoena or subpoena duces
110 tecum from the board or an order of the board;

111 (o) Failure to timely pay license renewal fees specified in
112 this chapter;

113 (p) Violating a probation agreement, order, or other
114 settlement agreement with this board or any other licensing
115 agency;

116 (q) Failing to inform the board of the physician's current
117 residence and business address;

118 (r) Advertising by an applicant or licensee which is false or
119 misleading, or which violates any rule of the board, or which
120 claims without substantiation the positive cure of any disease, or
121 professional superiority to or greater skill than that possessed
122 by any other physician. An applicant or licensee shall also be in
123 violation of this provision if the applicant or licensee has a
124 financial interest in any organization, corporation or association
125 which issues or conducts such advertising;

126 (s) Any other conduct that is unethical or unprofessional
127 involving a minor;

128 (5) Any conduct or practice which is or might be harmful or
129 dangerous to the mental or physical health of a patient or the
130 public; or incompetency, gross negligence or repeated negligence
131 in the performance of the functions or duties of any profession
132 licensed or regulated by this chapter. For the purposes of this
133 subdivision, "repeated negligence" means the failure, on more than
134 one occasion, to use that degree of skill and learning ordinarily
135 used under the same or similar circumstances by the member of the
136 applicant's or licensee's profession;

137 (6) Violation of, or attempting to violate, directly or
138 indirectly, or assisting or enabling any person to violate, any
139 provision of this chapter or chapter 324, or of any lawful rule or
140 regulation adopted pursuant to this chapter or chapter 324;

141 (7) Impersonation of any person holding a certificate of
142 registration or authority, permit or license or allowing any
143 person to use his or her certificate of registration or authority,
144 permit, license or diploma from any school;

145 (8) Revocation, suspension, restriction, modification,
146 limitation, reprimand, warning, censure, probation or other final
147 disciplinary action against the holder of or applicant for a
148 license or other right to practice any profession regulated by this
149 chapter by another state, territory, federal agency or country,
150 whether or not voluntarily agreed to by the licensee or applicant,
151 including, but not limited to, the denial of licensure, surrender
152 of the license, allowing the license to expire or lapse, or

153 discontinuing or limiting the practice of medicine while subject
154 to an investigation or while actually under investigation by any
155 licensing authority, medical facility, branch of the Armed Forces
156 of the United States of America, insurance company, court, agency
157 of the state or federal government, or employer;

158 (9) A person is finally adjudged incapacitated or disabled by
159 a court of competent jurisdiction;

160 (10) Assisting or enabling any person to practice or offer to
161 practice any profession licensed or regulated by this chapter who
162 is not registered and currently eligible to practice pursuant to
163 this chapter; or knowingly performing any act which in any way
164 aids, assists, procures, advises, or encourages any person to
165 practice medicine who is not registered and currently eligible to
166 practice pursuant to this chapter. A physician who works in
167 accordance with standing orders or protocols or in accordance with
168 the provisions of section 334.104 shall not be in violation of this
169 subdivision;

170 (11) Issuance of a certificate of registration or authority,
171 permit or license based upon a material mistake of fact;

172 (12) Failure to display a valid certificate or license if so
173 required by this chapter or any rule promulgated pursuant to this
174 chapter;

175 (13) Violation of the drug laws or rules and regulations of
176 this state, including but not limited to any provision of chapter
177 195, any other state, or the federal government;

178 (14) Knowingly making, or causing to be made, or aiding, or
179 abetting in the making of, a false statement in any birth, death or

180 other certificate or document executed in connection with the
181 practice of the person's profession;

182 (15) Knowingly making a false statement, orally or in writing
183 to the board;

184 (16) Soliciting patronage in person or by agents or
185 representatives, or by any other means or manner, under the
186 person's own name or under the name of another person or concern,
187 actual or pretended, in such a manner as to confuse, deceive, or
188 mislead the public as to the need or necessity for or
189 appropriateness of health care services for all patients, or the
190 qualifications of an individual person or persons to diagnose,
191 render, or perform health care services;

192 (17) Using, or permitting the use of, the person's name under
193 the designation of "Doctor", "Dr.", "M.D.", or "D.O.", or any
194 similar designation with reference to the commercial exploitation
195 of any goods, wares or merchandise;

196 (18) Knowingly making or causing to be made a false statement
197 or misrepresentation of a material fact, with intent to defraud,
198 for payment pursuant to the provisions of chapter 208 or chapter
199 630 or for payment from Title XVIII or Title XIX of the Social
200 Security Act;

201 (19) Failure or refusal to properly guard against
202 contagious, infectious or communicable diseases or the spread
203 thereof; maintaining an unsanitary office or performing
204 professional services under unsanitary conditions; or failure to
205 report the existence of an unsanitary condition in the office of a
206 physician or in any health care facility to the board, in writing,

207 within thirty days after the discovery thereof;

208 (20) Any candidate for licensure or person licensed to
209 practice as a physical therapist, paying or offering to pay a
210 referral fee or, notwithstanding section 334.010 to the contrary,
211 practicing or offering to practice professional physical therapy
212 independent of the prescription and direction of a person licensed
213 and registered as a physician and surgeon pursuant to this chapter,
214 as a dentist pursuant to chapter 332, as a podiatrist pursuant to
215 chapter 330, as an advanced practice registered nurse under
216 chapter 335, or any licensed and registered physician, dentist,
217 podiatrist, or advanced practice registered nurse practicing in
218 another jurisdiction, whose license is in good standing;

219 (21) Any candidate for licensure or person licensed to
220 practice as a physical therapist, treating or attempting to treat
221 ailments or other health conditions of human beings other than by
222 professional physical therapy and as authorized by sections
223 334.500 to 334.620;

224 (22) Any person licensed to practice as a physician or
225 surgeon, requiring, as a condition of the physician-patient
226 relationship, that the patient receive prescribed drugs, devices
227 or other professional services directly from facilities of that
228 physician's office or other entities under that physician's
229 ownership or control. A physician shall provide the patient with a
230 prescription which may be taken to the facility selected by the
231 patient and a physician knowingly failing to disclose to a patient
232 on a form approved by the advisory commission for professional
233 physical therapists as established by section 334.625 which is

234 dated and signed by a patient or guardian acknowledging that the
235 patient or guardian has read and understands that the physician has
236 a pecuniary interest in a physical therapy or rehabilitation
237 service providing prescribed treatment and that the prescribed
238 treatment is available on a competitive basis. This subdivision
239 shall not apply to a referral by one physician to another physician
240 within a group of physicians practicing together;

241 (23) A pattern of personal use or consumption of any
242 controlled substance unless it is prescribed, dispensed or
243 administered by another physician who is authorized by law to do
244 so;

245 (24) Habitual intoxication or dependence on alcohol,
246 evidence of which may include more than one alcohol-related
247 enforcement contact as defined by section 302.525;

248 (25) Failure to comply with a treatment program or an
249 aftercare program entered into as part of a board order, settlement
250 agreement or licensee's professional health program;

251 (26) Revocation, suspension, limitation, probation, or
252 restriction of any kind whatsoever of any controlled substance
253 authority, whether agreed to voluntarily or not, or voluntary
254 termination of a controlled substance authority while under
255 investigation;

256 (27) For a physician to operate, conduct, manage, or
257 establish an abortion facility, or for a physician to perform an
258 abortion in an abortion facility, if such facility comes under the
259 definition of an ambulatory surgical center pursuant to sections
260 197.200 to 197.240, and such facility has failed to obtain or renew

261 a license as an ambulatory surgical center.

262 3. Collaborative practice arrangements, protocols and
263 standing orders shall be in writing and signed and dated by a
264 physician prior to their implementation.

265 4. After the filing of such complaint before the
266 administrative hearing commission, the proceedings shall be
267 conducted in accordance with the provisions of chapter 621. Upon a
268 finding by the administrative hearing commission that the grounds,
269 provided in subsection 2 of this section, for disciplinary action
270 are met, the board may, singly or in combination, warn, censure or
271 place the person named in the complaint on probation on such terms
272 and conditions as the board deems appropriate for a period not to
273 exceed ten years, or may suspend the person's license, certificate
274 or permit for a period not to exceed three years, or restrict or
275 limit the person's license, certificate or permit for an
276 indefinite period of time, or revoke the person's license,
277 certificate, or permit, or administer a public or private
278 reprimand, or deny the person's application for a license, or
279 permanently withhold issuance of a license or require the person to
280 submit to the care, counseling or treatment of physicians
281 designated by the board at the expense of the individual to be
282 examined, or require the person to attend such continuing
283 educational courses and pass such examinations as the board may
284 direct.

285 5. In any order of revocation, the board may provide that the
286 person may not apply for reinstatement of the person's license for
287 a period of time ranging from two to seven years following the date

288 of the order of revocation. All stay orders shall toll this time
289 period.

290 6. Before restoring to good standing a license, certificate
291 or permit issued pursuant to this chapter which has been in a
292 revoked, suspended or inactive state for any cause for more than
293 two years, the board may require the applicant to attend such
294 continuing medical education courses and pass such examinations as
295 the board may direct.

296 7. In any investigation, hearing or other proceeding to
297 determine a licensee's or applicant's fitness to practice, any
298 record relating to any patient of the licensee or applicant shall
299 be discoverable by the board and admissible into evidence,
300 regardless of any statutory or common law privilege which such
301 licensee, applicant, record custodian or patient might otherwise
302 invoke. In addition, no such licensee, applicant, or record
303 custodian may withhold records or testimony bearing upon a
304 licensee's or applicant's fitness to practice on the ground of
305 privilege between such licensee, applicant or record custodian and
306 a patient.

307 8. The act of lawfully dispensing, prescribing,
308 administering, or otherwise distributing ivermectin tablets or
309 hydroxychloroquine sulfate tablets for human use shall not be
310 grounds for denial, suspension, revocation, or other disciplinary
311 action by the board.

334.530. 1. A candidate for license to practice as a
2 physical therapist shall furnish evidence of such person's
3 educational qualifications by submitting satisfactory evidence of

4 completion of a program of physical therapy education approved as
5 reputable by the board or eligibility to graduate from such a
6 program within ninety days. A candidate who presents satisfactory
7 evidence of the person's graduation from a school of physical
8 therapy approved as reputable by the American Medical Association
9 or, if graduated before 1936, by the American Physical Therapy
10 Association, or if graduated after 1988, the Commission on
11 Accreditation for Physical Therapy Education or its successor, is
12 deemed to have complied with the educational qualifications of
13 this subsection.

14 2. Persons desiring to practice as physical therapists in
15 this state shall appear before the board at such time and place as
16 the board may direct and be examined as to their fitness to engage
17 in such practice. Applicants shall meet the qualifying standards
18 for such examinations, including any requirements established by
19 any entity contracted by the board to administer the board-
20 approved examination. Applications for examination shall be in
21 writing, on a form furnished by the board and shall include
22 evidence satisfactory to the board that the applicant possesses
23 the qualifications set forth in subsection 1 of this section and
24 meets the requirements established to qualify for examination.
25 Each application shall contain a statement that it is made under
26 oath or affirmation and that its representations are true and
27 correct to the best knowledge and belief of the applicant, subject
28 to the penalties of making a false affidavit or declaration.

29 3. The examination of qualified candidates for licenses to
30 practice physical therapy shall test entry-level competence as

31 related to physical therapy theory, examination and evaluation,
32 physical therapy diagnosis, prognosis, treatment, intervention,
33 prevention, and consultation.

34 4. The examination shall embrace, in relation to the human
35 being, the subjects of anatomy, chemistry, kinesiology, pathology,
36 physics, physiology, psychology, physical therapy theory and
37 procedures as related to medicine, surgery and psychiatry, and
38 such other subjects, including medical ethics, as the board deems
39 useful to test the fitness of the candidate to practice physical
40 therapy.

41 5. No person who has failed on six or more occasions to
42 achieve a passing score on the examination required by this section
43 shall be eligible for licensure by examination under this section.

44 6. The applicant shall pass a test administered by the board
45 on the laws and rules related to the practice of physical therapy
46 in Missouri.

334.655. 1. A candidate for licensure to practice as a
2 physical therapist assistant shall furnish evidence of the
3 person's educational qualifications. The educational requirements
4 for licensure as a physical therapist assistant are:

5 (1) A certificate of graduation from an accredited high
6 school or its equivalent; and

7 (2) Satisfactory evidence of completion of an associate
8 degree program of physical therapy education accredited by the
9 commission on accreditation of physical therapy education or
10 eligibility to graduate from such a program within ninety days.

11 2. Persons desiring to practice as a physical therapist

12 assistant in this state shall appear before the board at such time
13 and place as the board may direct and be examined as to the
14 person's fitness to engage in such practice. Applicants shall meet
15 the qualifying standards for such examinations, including any
16 requirements established by any entity contracted by the board to
17 administer the board-approved examination. Applications for
18 examination shall be on a form furnished by the board and shall
19 include evidence satisfactory to the board that the applicant
20 possesses the qualifications provided in subsection 1 of this
21 section and meets the requirements established to qualify for
22 examination. Each application shall contain a statement that the
23 statement is made under oath of affirmation and that its
24 representations are true and correct to the best knowledge and
25 belief of the person signing the statement, subject to the
26 penalties of making a false affidavit or declaration.

27 3. The examination of qualified candidates for licensure to
28 practice as physical therapist assistants shall embrace an
29 examination which shall cover the curriculum taught in accredited
30 associate degree programs of physical therapy assistant education.
31 Such examination shall be sufficient to test the qualification of
32 the candidates as practitioners.

33 4. The examination shall include, as related to the human
34 body, the subjects of anatomy, kinesiology, pathology, physiology,
35 psychology, physical therapy theory and procedures as related to
36 medicine and such other subjects, including medical ethics, as the
37 board deems useful to test the fitness of the candidate to practice
38 as a physical therapist assistant.

39 5. No person who has failed on six or more occasions to
40 achieve a passing score on the examination required by this section
41 shall be eligible for licensure by examination under this section.

42 6. The applicant shall pass a test administered by the board
43 on the laws and rules related to the practice as a physical
44 therapist assistant in this state.

45 ~~[6.]~~ 7. The board shall license without examination any
46 legally qualified person who is a resident of this state and who
47 was actively engaged in practice as a physical therapist assistant
48 on August 28, 1993. The board may license such person pursuant to
49 this subsection until ninety days after the effective date of this
50 section.

51 ~~[7.]~~ 8. A candidate to practice as a physical therapist
52 assistant who does not meet the educational qualifications may
53 submit to the board an application for examination if such person
54 can furnish written evidence to the board that the person has been
55 employed in this state for at least three of the last five years
56 under the supervision of a licensed physical therapist and such
57 person possesses the knowledge and training equivalent to that
58 obtained in an accredited school. The board may license such
59 persons pursuant to this subsection until ninety days after rules
60 developed by the state board of healing arts regarding physical
61 therapist assistant licensing become effective.

 338.055. 1. The board may refuse to issue any certificate of
2 registration or authority, permit or license required pursuant to
3 this chapter for one or any combination of causes stated in
4 subsection 2 of this section or if the designated pharmacist-in-

5 charge, manager-in-charge, or any officer, owner, manager, or
6 controlling shareholder of the applicant has committed any act or
7 practice in subsection 2 of this section. The board shall notify
8 the applicant in writing of the reasons for the refusal and shall
9 advise the applicant of his or her right to file a complaint with
10 the administrative hearing commission as provided by chapter 621.

11 2. The board may cause a complaint to be filed with the
12 administrative hearing commission as provided by chapter 621
13 against any holder of any certificate of registration or
14 authority, permit or license required by this chapter or any person
15 who has failed to renew or has surrendered his or her certificate
16 of registration or authority, permit or license for any one or any
17 combination of the following causes:

18 (1) Use of any controlled substance, as defined in chapter
19 195, or alcoholic beverage to an extent that such use impairs a
20 person's ability to perform the work of any profession licensed or
21 regulated by this chapter;

22 (2) The person has been finally adjudicated and found guilty,
23 or entered a plea of guilty or nolo contendere, in a criminal
24 prosecution under the laws of any state or of the United States,
25 for any offense reasonably related to the qualifications,
26 functions or duties of any profession licensed or regulated under
27 this chapter, for any offense an essential element of which is
28 fraud, dishonesty or an act of violence, or for any offense
29 involving moral turpitude, whether or not sentence is imposed;

30 (3) Use of fraud, deception, misrepresentation or bribery in
31 securing any certificate of registration or authority, permit or

32 license issued pursuant to this chapter or in obtaining permission
33 to take any examination given or required pursuant to this chapter;

34 (4) Obtaining or attempting to obtain any fee, charge,
35 tuition or other compensation by fraud, deception or
36 misrepresentation;

37 (5) Incompetence, misconduct, gross negligence, fraud,
38 misrepresentation or dishonesty in the performance of the
39 functions or duties of any profession licensed or regulated by this
40 chapter;

41 (6) Violation of, or assisting or enabling any person to
42 violate, any provision of this chapter, or of any lawful rule or
43 regulation adopted pursuant to this chapter;

44 (7) Impersonation of any person holding a certificate of
45 registration or authority, permit or license or allowing any
46 person to use his or her certificate of registration or authority,
47 permit, license, or diploma from any school;

48 (8) Denial of licensure to an applicant or disciplinary
49 action against an applicant or the holder of a license or other
50 right to practice any profession regulated by this chapter granted
51 by another state, territory, federal agency, or country whether or
52 not voluntarily agreed to by the licensee or applicant, including,
53 but not limited to, surrender of the license upon grounds for which
54 denial or discipline is authorized in this state;

55 (9) A person is finally adjudged incapacitated by a court of
56 competent jurisdiction;

57 (10) Assisting or enabling any person to practice or offer to
58 practice any profession licensed or regulated by this chapter who

59 is not registered and currently eligible to practice under this
60 chapter;

61 (11) Issuance of a certificate of registration or authority,
62 permit or license based upon a material mistake of fact;

63 (12) Failure to display a valid certificate or license if so
64 required by this chapter or any rule promulgated hereunder;

65 (13) Violation of any professional trust or confidence;

66 (14) Use of any advertisement or solicitation which is false,
67 misleading or deceptive to the general public or persons to whom
68 the advertisement or solicitation is primarily directed;

69 (15) Violation of the drug laws or rules and regulations of
70 this state, any other state or the federal government;

71 (16) The intentional act of substituting or otherwise
72 changing the content, formula or brand of any drug prescribed by
73 written, electronic, or oral prescription without prior written or
74 oral approval from the prescriber for the respective change in each
75 prescription; provided, however, that nothing contained herein
76 shall prohibit a pharmacist from substituting or changing the
77 brand of any drug as provided under section 338.056, and any such
78 substituting or changing of the brand of any drug as provided for
79 in section 338.056 shall not be deemed unprofessional or
80 dishonorable conduct unless a violation of section 338.056 occurs;

81 (17) Personal use or consumption of any controlled substance
82 unless it is prescribed, dispensed, or administered by a health
83 care provider who is authorized by law to do so.

84 3. After the filing of such complaint, the proceedings shall
85 be conducted in accordance with the provisions of chapter 621.

86 Upon a finding by the administrative hearing commission that the
87 grounds, provided in subsection 2 of this section, for
88 disciplinary action are met, the board may, singly or in
89 combination, censure or place the person named in the complaint on
90 probation on such terms and conditions as the board deems
91 appropriate for a period not to exceed five years, or may suspend,
92 for a period not to exceed three years, or revoke the license,
93 certificate, or permit. The board may impose additional
94 discipline on a licensee, registrant, or permittee found to have
95 violated any disciplinary terms previously imposed under this
96 section or by agreement. The additional discipline may include,
97 singly or in combination, censure, placing the licensee,
98 registrant, or permittee named in the complaint on additional
99 probation on such terms and conditions as the board deems
100 appropriate, which additional probation shall not exceed five
101 years, or suspension for a period not to exceed three years, or
102 revocation of the license, certificate, or permit.

103 4. If the board concludes that a licensee or registrant has
104 committed an act or is engaging in a course of conduct which would
105 be grounds for disciplinary action which constitutes a clear and
106 present danger to the public health and safety, the board may file
107 a complaint before the administrative hearing commission
108 requesting an expedited hearing and specifying the activities
109 which give rise to the danger and the nature of the proposed
110 restriction or suspension of the licensee's or registrant's
111 license. Within fifteen days after service of the complaint on the
112 licensee or registrant, the administrative hearing commission

113 shall conduct a preliminary hearing to determine whether the
114 alleged activities of the licensee or registrant appear to
115 constitute a clear and present danger to the public health and
116 safety which justify that the licensee's or registrant's license
117 or registration be immediately restricted or suspended. The
118 burden of proving that the actions of a licensee or registrant
119 constitute a clear and present danger to the public health and
120 safety shall be upon the state board of pharmacy. The
121 administrative hearing commission shall issue its decision
122 immediately after the hearing and shall either grant to the board
123 the authority to suspend or restrict the license or dismiss the
124 action.

125 5. If the administrative hearing commission grants temporary
126 authority to the board to restrict or suspend the licensee's or
127 registrant's license, such temporary authority of the board shall
128 become final authority if there is no request by the licensee or
129 registrant for a full hearing within thirty days of the preliminary
130 hearing. The administrative hearing commission shall, if
131 requested by the licensee or registrant named in the complaint, set
132 a date to hold a full hearing under the provisions of chapter 621
133 regarding the activities alleged in the initial complaint filed by
134 the board.

135 6. If the administrative hearing commission dismisses the
136 action filed by the board pursuant to subsection 4 of this section,
137 such dismissal shall not bar the board from initiating a subsequent
138 action on the same grounds.

139 7. The board shall not deny, revoke, or suspend, or otherwise

140 take any disciplinary action against, a certificate of
141 registration or authority, permit, or license required by this
142 chapter for any person due to the lawful dispensing, distributing,
143 or selling of ivermectin tablets or hydroxychloroquine sulfate
144 tablets for human use in accordance with prescriber directions. A
145 pharmacist shall not contact the prescribing physician or the
146 patient to dispute the efficacy of ivermectin tablets or
147 hydroxychloroquine sulfate tablets for human use unless the
148 physician or patient inquires of the pharmacist about the efficacy
149 of ivermectin tablets or hydroxychloroquine sulfate tablets.

345.015. As used in sections 345.010 to 345.080, the
2 following terms mean:

3 (1) "Audiologist", a person who is licensed as an audiologist
4 pursuant to sections 345.010 to 345.080 to practice audiology;

5 (2) "Audiology aide", a person who is registered as an
6 audiology aide by the board, who does not act independently but
7 works under the direction and supervision of a licensed
8 audiologist. Such person assists the audiologist with activities
9 which require an understanding of audiology but do not require
10 formal training in the relevant academics. To be eligible for
11 registration by the board, each applicant shall submit a
12 registration fee and:

13 (a) Be at least eighteen years of age;

14 (b) Furnish evidence of the person's educational
15 qualifications which shall be at a minimum:

16 a. Certification of graduation from an accredited high
17 school or its equivalent; and

18 b. On-the-job training;

19 (c) Be employed in a setting in which direct and indirect
20 supervision are provided on a regular and systematic basis by a
21 licensed audiologist.

22

23 However, the aide shall not administer or interpret hearing
24 screening or diagnostic tests, fit or dispense hearing
25 instruments, make ear impressions, make diagnostic statements,
26 determine case selection, present written reports to anyone other
27 than the supervisor without the signature of the supervisor, make
28 referrals to other professionals or agencies, use a title other
29 than audiology aide, develop or modify treatment plans, discharge
30 clients from treatment or terminate treatment, disclose clinical
31 information, either orally or in writing, to anyone other than the
32 supervising audiologist, or perform any procedure for which he or
33 she is not qualified, has not been adequately trained or both;

34 (3) "Board", the state board of registration for the healing
35 arts;

36 (4) "Clinical fellowship", the supervised professional
37 employment period following completion of the academic and
38 practicum requirements of an accredited training program under
39 this chapter;

40 (5) "Commission", the advisory commission for speech-
41 language pathologists and audiologists;

42 ~~[(5)]~~ (6) "Hearing instrument" or "hearing aid", any
43 wearable device or instrument designed for or offered for the
44 purpose of aiding or compensating for impaired human hearing and

45 any parts, attachments or accessories, including ear molds, but
46 excluding batteries, cords, receivers and repairs;

47 ~~[(6)]~~ (7) "Person", any individual, organization, or
48 corporate body, except that only individuals may be licensed
49 pursuant to sections 345.010 to 345.080;

50 ~~[(7)]~~ (8) "Practice of audiology":

51 (a) The application of accepted audiologic principles,
52 methods and procedures for the measurement, testing,
53 interpretation, appraisal and prediction related to disorders of
54 the auditory system, balance system or related structures and
55 systems;

56 (b) Provides consultation or counseling to the patient,
57 client, student, their family or interested parties;

58 (c) Provides academic, social and medical referrals when
59 appropriate;

60 (d) Provides for establishing goals, implementing
61 strategies, methods and techniques, for habilitation,
62 rehabilitation or aural rehabilitation, related to disorders of
63 the auditory system, balance system or related structures and
64 systems;

65 (e) Provides for involvement in related research, teaching
66 or public education;

67 (f) Provides for rendering of services or participates in the
68 planning, directing or conducting of programs which are designed
69 to modify audition, communicative, balance or cognitive disorder,
70 which may involve speech and language or education issues;

71 (g) Provides and interprets behavioral and neurophysiologic

72 measurements of auditory balance, cognitive processing and related
73 functions, including intraoperative monitoring;

74 (h) Provides involvement in any tasks, procedures, acts or
75 practices that are necessary for evaluation of audition, hearing,
76 training in the use of amplification or assistive listening
77 devices;

78 (i) Provides selection, assessment, fitting, programming,
79 and dispensing of hearing instruments, assistive listening
80 devices, and other amplification systems;

81 (j) Provides for taking impressions of the ear, making custom
82 ear molds, ear plugs, swim molds and industrial noise protectors;

83 (k) Provides assessment of external ear and cerumen
84 management;

85 (l) Provides advising, fitting, mapping assessment of
86 implantable devices such as cochlear or auditory brain stem
87 devices;

88 (m) Provides information in noise control and hearing
89 conservation including education, equipment selection, equipment
90 calibration, site evaluation and employee evaluation;

91 (n) Provides performing basic speech-language screening
92 test;

93 (o) Provides involvement in social aspects of communication,
94 including challenging behavior and ineffective social skills, lack
95 of communication opportunities;

96 (p) Provides support and training of family members and other
97 communication partners for the individual with auditory balance,
98 cognitive and communication disorders;

99 (q) Provides aural rehabilitation and related services to
100 individuals with hearing loss and their families;

101 (r) Evaluates, collaborates and manages audition problems in
102 the assessment of the central auditory processing disorders and
103 providing intervention for individuals with central auditory
104 processing disorders;

105 (s) Develops and manages academic and clinical problems in
106 communication sciences and disorders;

107 (t) Conducts, disseminates and applies research in
108 communication sciences and disorders;

109 ~~[(8)]~~ (9) "Practice of speech-language pathology":

110 (a) Provides screening, identification, assessment,
111 diagnosis, treatment, intervention, including but not limited to
112 prevention, restoration, amelioration and compensation, and
113 follow-up services for disorders of:

114 a. Speech: articulation, fluency, voice, including
115 respiration, phonation and resonance;

116 b. Language, involving the parameters of phonology,
117 morphology, syntax, semantics and pragmatic; and including
118 disorders of receptive and expressive communication in oral,
119 written, graphic and manual modalities;

120 c. Oral, pharyngeal, cervical esophageal and related
121 functions, such as dysphagia, including disorders of swallowing
122 and oral functions for feeding; orofacial myofunctional disorders;

123 d. Cognitive aspects of communication, including
124 communication disability and other functional disabilities
125 associated with cognitive impairment;

126 e. Social aspects of communication, including challenging
127 behavior, ineffective social skills, lack of communication
128 opportunities;

129 (b) Provides consultation and counseling and makes referrals
130 when appropriate;

131 (c) Trains and supports family members and other
132 communication partners of individuals with speech, voice,
133 language, communication and swallowing disabilities;

134 (d) Develops and establishes effective augmentative and
135 alternative communication techniques and strategies, including
136 selecting, prescribing and dispensing of augmentative aids and
137 devices; and the training of individuals, their families and other
138 communication partners in their use;

139 (e) Selects, fits and establishes effective use of
140 appropriate prosthetic/adaptive devices for speaking and
141 swallowing, such as tracheoesophageal valves, electrolarynges, or
142 speaking valves;

143 (f) Uses instrumental technology to diagnose and treat
144 disorders of communication and swallowing, such as
145 videofluoroscopy, nasendoscopy, ultrasonography and stroboscopy;

146 (g) Provides aural rehabilitative and related counseling
147 services to individuals with hearing loss and to their families;

148 (h) Collaborates in the assessment of central auditory
149 processing disorders in cases in which there is evidence of speech,
150 language or other cognitive communication disorders; provides
151 intervention for individuals with central auditory processing
152 disorders;

153 (i) Conducts pure-tone air conduction hearing screening and
154 screening tympanometry for the purpose of the initial
155 identification or referral;

156 (j) Enhances speech and language proficiency and
157 communication effectiveness, including but not limited to accent
158 reduction, collaboration with teachers of English as a second
159 language and improvement of voice, performance and singing;

160 (k) Trains and supervises support personnel;

161 (l) Develops and manages academic and clinical programs in
162 communication sciences and disorders;

163 (m) Conducts, disseminates and applies research in
164 communication sciences and disorders;

165 (n) Measures outcomes of treatment and conducts continuous
166 evaluation of the effectiveness of practices and programs to
167 improve and maintain quality of services;

168 ~~[(9)]~~ (10) "Speech-language pathologist", a person who is
169 licensed as a speech-language pathologist pursuant to sections
170 345.010 to 345.080; who engages in the practice of speech-language
171 pathology as defined in sections 345.010 to 345.080;

172 ~~[(10)]~~ (11) "Speech-language pathology aide", a person who
173 is registered as a speech-language aide by the board, who does not
174 act independently but works under the direction and supervision of
175 a licensed speech-language pathologist. Such person assists the
176 speech-language pathologist with activities which require an
177 understanding of speech-language pathology but do not require
178 formal training in the relevant academics. To be eligible for
179 registration by the board, each applicant shall submit a

180 registration fee and:

181 (a) Be at least eighteen years of age;

182 (b) Furnish evidence of the person's educational
183 qualifications which shall be at a minimum:

184 a. Certification of graduation from an accredited high
185 school or its equivalent; and

186 b. On-the-job training;

187 (c) Be employed in a setting in which direct and indirect
188 supervision is provided on a regular and systematic basis by a
189 licensed speech-language pathologist.

190

191 However, the aide shall not administer or interpret hearing
192 screening or diagnostic tests, fit or dispense hearing
193 instruments, make ear impressions, make diagnostic statements,
194 determine case selection, present written reports to anyone other
195 than the supervisor without the signature of the supervisor, make
196 referrals to other professionals or agencies, use a title other
197 than speech-language pathology aide, develop or modify treatment
198 plans, discharge clients from treatment or terminate treatment,
199 disclose clinical information, either orally or in writing, to
200 anyone other than the supervising speech-language pathologist, or
201 perform any procedure for which he or she is not qualified, has not
202 been adequately trained or both;

203 ~~[(11)]~~ (12) "Speech-language pathology assistant", a person
204 who is registered as a speech-language pathology assistant by the
205 board, who does not act independently but works under the direction
206 and supervision of a licensed speech-language pathologist

207 practicing for at least one year or speech-language pathologist
208 practicing under subdivision (1) or (6) of subsection 1 of section
209 345.025 for at least one year and whose activities require both
210 academic and practical training in the field of speech-language
211 pathology although less training than those established by
212 sections 345.010 to 345.080 as necessary for licensing as a speech-
213 language pathologist. To be eligible for registration by the
214 board, each applicant shall submit the registration fee,
215 supervising speech-language pathologist information if employment
216 is confirmed, if not such information shall be provided after
217 registration, and furnish evidence of the person's educational
218 qualifications which meet the following:

219 (a) Hold a bachelor's level degree from an institution
220 accredited or approved by a regional accrediting body recognized
221 by the United States Department of Education or its equivalent; and

222 (b) Submit official transcripts from one or more accredited
223 colleges or universities presenting evidence of the completion of
224 bachelor's level course work and requirements in the field of
225 speech-language pathology as established by the board through
226 rules and regulations;

227 (c) Submit proof of completion of the number and type of
228 clinical hours as established by the board through rules and
229 regulations.

345.022. 1. Any person in the person's clinical fellowship
2 shall hold a provisional license to practice speech-language
3 pathology or audiology. The board may issue a provisional license
4 to an applicant who:

5 (1) Has met the requirements for practicum and academic
6 requirements from an accredited training program under this
7 chapter;

8 (2) Submits an application to the board on a form prescribed
9 by the board. Such form shall include a plan for the content and
10 supervision of the clinical fellowship, as well as evidence of good
11 moral and ethical character; and

12 (3) Submits to the board an application fee, as set by the
13 board, for the provisional license.

14 2. A provisional license is effective for one year and may be
15 extended for an additional twelve months only for purposes of
16 completing the postgraduate clinical experience portion of the
17 clinical fellowship; provided, that the applicant has passed the
18 national examination and shall hold a master's degree from an
19 approved training program in his or her area of application.

20 3. Within twelve months of issuance of the provisional
21 license, the applicant shall pass an examination promulgated or
22 approved by the board.

23 4. Within twelve months of issuance of a provisional license,
24 the applicant shall complete the requirements for the master's or
25 doctoral degree from a program accredited by the Council on
26 Academic Accreditation of the American Speech-Language-Hearing
27 Association or other accrediting agency approved by the board in
28 the area in which licensure is sought.

345.050. ~~[4.]~~ To be eligible for licensure by the board by
2 examination, each applicant shall submit the application fee and
3 shall furnish evidence of such person's current competence and

4 shall:

5 (1) Hold a master's or a doctoral degree from a program that
6 was awarded "accreditation candidate" status or is accredited by
7 the Council on Academic Accreditation of the American Speech-
8 Language-Hearing Association or other accrediting agency approved
9 by the board in the area in which licensure is sought;

10 (2) Submit official transcripts from one or more accredited
11 colleges or universities presenting evidence of the completion of
12 course work and clinical practicum requirements equivalent to that
13 required by the Council on Academic Accreditation of the American
14 Speech-Language-Hearing Association or other accrediting agency
15 approved by the board; **[and]**

16 (3) Present written evidence of completion of a clinical
17 fellowship from supervisors. The experience required by this
18 subdivision shall follow the completion of the requirements of
19 subdivisions (1) and (2) of this subsection. This period of
20 employment shall be under the direct supervision of a person who is
21 licensed by the state of Missouri in the profession in which the
22 applicant seeks to be licensed. Persons applying with an audiology
23 clinical doctoral degree are exempt from this provision; and

24 (4) Pass an examination promulgated or approved by the board.
25 The board shall determine the subject and scope of the
26 examinations.

27 ~~[2. To be eligible for licensure by the board without~~
28 ~~examination, each applicant shall make application on forms~~
29 ~~prescribed by the board, submit the application fee, submit an~~
30 ~~activity statement and meet one of the following requirements:~~

31 ~~(1) The board shall issue a license to any speech-language~~
32 ~~pathologist or audiologist who is licensed in another country and~~
33 ~~who has had no violations, suspension or revocations of a license~~
34 ~~to practice speech-language pathology or audiology in any~~
35 ~~jurisdiction; provided that, such person is licensed in a country~~
36 ~~whose requirements are substantially equal to, or greater than,~~
37 ~~Missouri at the time the applicant applies for licensure; or~~

38 ~~(2) Hold the certificate of clinical competence issued by the~~
39 ~~American Speech Language Hearing Association in the area in which~~
40 ~~licensure is sought.]~~

345.052. 1. For purposes of this section, the following
2 terms mean:

3 (1) "Board", the Missouri board of registration for the
4 healing arts;

5 (2) "Commission", the advisory commission for speech-
6 language pathologists and audiologists;

7 (3) "License", a license, certificate, registration, permit,
8 accreditation, or military occupational specialty that enables a
9 person to legally practice an occupation or profession in a
10 particular jurisdiction;

11 (4) "Military", the Armed Forces of the United States
12 including the Air Force, Army, Coast Guard, Marine Corps, Navy,
13 Space Force, National Guard, and any other military branch that is
14 designated by Congress as part of the Armed Forces of the United
15 States, and all reserve components and auxiliaries. Such term also
16 includes the military reserves and militia of the United States
17 territory or state;

18 (5) "Nonresident military spouse", a nonresident spouse of
19 an active duty member of the Armed Forces of the United States who
20 has been transferred or is scheduled to be transferred to an
21 adjacent state and is or will be domiciled in the state of
22 Missouri, or has moved to the state of Missouri on a permanent
23 change-of-station basis;

24 (6) "Resident military spouse", a spouse of an active duty
25 member of the Armed Forces of the United States who has been
26 transferred or is scheduled to be transferred to the state of
27 Missouri, who is domiciled in the state of Missouri, or who has
28 Missouri as his or her home of record.

29 2. Any person who holds a valid current speech-language
30 pathologist or audiologist license issued by another state, a
31 branch or unit of the military, a territory of the United States,
32 or the District of Columbia, and who has been licensed for at least
33 one year in the other jurisdiction, may submit an application for a
34 speech-language pathologist or audiologist license in Missouri
35 along with proof of current licensure and proof of licensure for at
36 least one year in the other jurisdiction, to the board.

37 3. The board shall:

38 (1) Within six months of receiving an application described
39 in subsection 2 of this section, waive any examination,
40 educational, or experience requirements for licensure in this
41 state for the applicant if it determines that there were minimum
42 education requirements and, if applicable, work experience and
43 clinical supervision requirements in effect and the other state
44 verifies that the person met those requirements in order to be

45 licensed or certified in that state. The board may require an
46 applicant to take and pass an examination specific to the laws of
47 this state; or

48 (2) Within thirty days of receiving an application described
49 in subsection 2 of this section from a nonresident military spouse
50 or a resident military spouse, waive any examination, educational,
51 or experience requirements for licensure in this state for the
52 applicant and issue such applicant a license under this section if
53 such applicant otherwise meets the requirements of this section.

54 4. (1) The board shall not waive any examination,
55 educational, or experience requirements for any applicant who has
56 had his or her license revoked by a board outside the state; who is
57 currently under investigation, who has a complaint pending, or who
58 is currently under disciplinary action, except as provided in
59 subdivision (2) of this subsection, with a board outside the state;
60 who does not hold a license in good standing with a board outside
61 the state; who has a criminal record that would disqualify him or
62 her for licensure in Missouri; or who does not hold a valid current
63 license in the other jurisdiction on the date the board receives
64 his or her application under this section.

65 (2) If another jurisdiction has taken disciplinary action
66 against an applicant, the board shall determine if the cause for
67 the action was corrected and the matter resolved. If the matter
68 has not been resolved by that jurisdiction, the board may deny a
69 license until the matter is resolved.

70 5. Nothing in this section shall prohibit the board from
71 denying a license to an applicant under this section for any reason

72 described in section 345.065.

73 6. Any person who is licensed under the provisions of this
74 section shall be subject to the board's jurisdiction and all rules
75 and regulations pertaining to the practice as a speech-language
76 pathologist or audiologist in this state.

77 7. This section shall not be construed to waive any
78 requirement for an applicant to pay any fees.

345.085. SECTION 1. PURPOSE

2 The purpose of this Compact is to facilitate interstate
3 practice of audiology and speech-language pathology with the goal
4 of improving public access to audiology and speech-language
5 pathology services. The practice of audiology and speech-language
6 pathology occurs in the state where the patient/client/student is
7 located at the time of the patient/client/student encounter. The
8 Compact preserves the regulatory authority of states to protect
9 public health and safety through the current system of state
10 licensure.

11 This Compact is designed to achieve the following objectives:

12 1. Increase public access to audiology and speech-language
13 pathology services by providing for the mutual recognition of
14 other member state licenses;

15 2. Enhance the states' ability to protect the public's health
16 and safety;

17 3. Encourage the cooperation of member states in regulating
18 multistate audiology and speech-language pathology practice;

19 4. Support spouses of relocating active duty military
20 personnel;

21 5. Enhance the exchange of licensure, investigative and
22 disciplinary information between member states;

23 6. Allow a remote state to hold a provider of services with a
24 compact privilege in that state accountable to that state's
25 practice standards; and

26 7. Allow for the use of telehealth technology to facilitate
27 increased access to audiology and speech-language pathology
28 services.

29 SECTION 2. DEFINITIONS

30 As used in this Compact, and except as otherwise provided, the
31 following definitions shall apply:

32 A. "Active duty military" means full-time duty status in the
33 active uniformed service of the United States, including members
34 of the National Guard and Reserve on active duty orders pursuant to
35 10 U.S.C. Chapter 1209 and 1211.

36 B. "Adverse action" means any administrative, civil,
37 equitable or criminal action permitted by a state's laws which is
38 imposed by a licensing board or other authority against an
39 audiologist or speech-language pathologist, including actions
40 against an individual's license or privilege to practice such as
41 revocation, suspension, probation, monitoring of the licensee, or
42 restriction on the licensee's practice.

43 C. "Alternative program" means a non-disciplinary monitoring
44 process approved by an audiology or speech-language pathology
45 licensing board to address impaired practitioners.

46 D. "Audiologist" means an individual who is licensed by a
47 state to practice audiology.

48 E. "Audiology" means the care and services provided by a
49 licensed audiologist as set forth in the member state's statutes
50 and rules.

51 F. "Audiology and Speech-Language Pathology Compact
52 Commission" or "Commission" means the national administrative body
53 whose membership consists of all states that have enacted the
54 Compact.

55 G. "Audiology and speech-language pathology licensing
56 board," "audiology licensing board," "speech-language pathology
57 licensing board," or "licensing board" means the agency of a state
58 that is responsible for the licensing and regulation of
59 audiologists and/or speech-language pathologists.

60 H. "Compact privilege" means the authorization granted by a
61 remote state to allow a licensee from another member state to
62 practice as an audiologist or speech-language pathologist in the
63 remote state under its laws and rules. The practice of audiology
64 or speech-language pathology occurs in the member state where the
65 patient/client/student is located at the time of the patient/
66 client/student encounter.

67 I. "Current significant investigative information" means
68 investigative information that a licensing board, after an inquiry
69 or investigation that includes notification and an opportunity for
70 the audiologist or speech-language pathologist to respond, if
71 required by state law, has reason to believe is not groundless and,
72 if proved true, would indicate more than a minor infraction.

73 J. "Data system" means a repository of information about
74 licensees, including, but not limited to, continuing education,

75 examination, licensure, investigative, compact privilege and
76 adverse action.

77 K. "Encumbered license" means a license in which an adverse
78 action restricts the practice of audiology or speech-language
79 pathology by the licensee and said adverse action has been reported
80 to the National Practitioners Data Bank (NPDB).

81 L. "Executive Committee" means a group of directors elected
82 or appointed to act on behalf of, and within the powers granted to
83 them by, the Commission.

84 M. "Home state" means the member state that is the licensee's
85 primary state of residence.

86 N. "Impaired practitioner" means individuals whose
87 professional practice is adversely affected by substance abuse,
88 addiction, or other health-related conditions.

89 O. "Licensee" means an individual who currently holds an
90 authorization from the state licensing board to practice as an
91 audiologist or speech-language pathologist.

92 P. "Member state" means a state that has enacted the Compact.

93 Q. "Privilege to practice" means a legal authorization
94 permitting the practice of audiology or speech-language pathology
95 in a remote state.

96 R. "Remote state" means a member state other than the home
97 state where a licensee is exercising or seeking to exercise the
98 compact privilege.

99 S. "Rule" means a regulation, principle or directive
100 promulgated by the Commission that has the force of law.

101 T. "Single-state license" means an audiology or speech-

102 language pathology license issued by a member state that
103 authorizes practice only within the issuing state and does not
104 include a privilege to practice in any other member state.

105 U. "Speech-language pathologist" means an individual who is
106 licensed by a state to practice speech-language pathology.

107 V. "Speech-language pathology" means the care and services
108 provided by a licensed speech-language pathologist as set forth in
109 the member state's statutes and rules.

110 W. "State" means any state, commonwealth, district or
111 territory of the United States of America that regulates the
112 practice of audiology and speech-language pathology.

113 X. "State practice laws" means a member state's laws, rules
114 and regulations that govern the practice of audiology or speech-
115 language pathology, define the scope of audiology or speech-
116 language pathology practice, and create the methods and grounds
117 for imposing discipline.

118 Y. "Telehealth" means the application of telecommunication
119 technology to deliver audiology or speech-language pathology
120 services at a distance for assessment, intervention and/or
121 consultation.

122 SECTION 3. STATE PARTICIPATION IN THE COMPACT

123 A. A license issued to an audiologist or speech-language
124 pathologist by a home state to a resident in that state shall be
125 recognized by each member state as authorizing an audiologist or
126 speech-language pathologist to practice audiology or speech-
127 language pathology, under a privilege to practice, in each member
128 state.

129 B. A state must implement or utilize procedures for
130 considering the criminal history records of applicants for initial
131 privilege to practice. These procedures shall include the
132 submission of fingerprints or other biometric-based information by
133 applicants for the purpose of obtaining an applicant's criminal
134 history record information from the Federal Bureau of
135 Investigation and the agency responsible for retaining that
136 state's criminal records.

137 1. A member state must fully implement a criminal background
138 check requirement, within a time frame established by rule, by
139 receiving the results of the Federal Bureau of Investigation
140 record search on criminal background checks and use the results in
141 making licensure decisions.

142 2. Communication between a member state, the Commission and
143 among member states regarding the verification of eligibility for
144 licensure through the Compact shall not include any information
145 received from the Federal Bureau of Investigation relating to a
146 federal criminal records check performed by a member state under
147 Public Law 92-544.

148 C. Upon application for a privilege to practice, the
149 licensing board in the issuing remote state shall ascertain,
150 through the data system, whether the applicant has ever held, or is
151 the holder of, a license issued by any other state, whether there
152 are any encumbrances on any license or privilege to practice held
153 by the applicant, whether any adverse action has been taken against
154 any license or privilege to practice held by the applicant.

155 D. Each member state shall require an applicant to obtain or

156 retain a license in the home state and meet the home state's
157 qualifications for licensure or renewal of licensure, as well as,
158 all other applicable state laws.

159 E. For an audiologist:

160 1. Must meet one of the following educational requirements:

161 a. On or before, Dec. 31, 2007, has graduated with a master's
162 degree or doctorate in audiology, or equivalent degree regardless
163 of degree name, from a program that is accredited by an accrediting
164 agency recognized by the Council for Higher Education
165 Accreditation, or its successor, or by the United States
166 Department of Education and operated by a college or university
167 accredited by a regional or national accrediting organization
168 recognized by the board; or

169 b. On or after, Jan. 1, 2008, has graduated with a Doctoral
170 degree in audiology, or equivalent degree, regardless of degree
171 name, from a program that is accredited by an accrediting agency
172 recognized by the Council for Higher Education Accreditation, or
173 its successor, or by the United States Department of Education and
174 operated by a college or university accredited by a regional or
175 national accrediting organization recognized by the board; or

176 c. Has graduated from an audiology program that is housed in
177 an institution of higher education outside of the United States (a)
178 for which the program and institution have been approved by the
179 authorized accrediting body in the applicable country and (b) the
180 degree program has been verified by an independent credentials
181 review agency to be comparable to a state licensing board-approved
182 program.

183 2. Has completed a supervised clinical practicum experience
184 from an accredited educational institution or its cooperating
185 programs as required by the Commission;

186 3. Has successfully passed a national examination approved
187 by the Commission;

188 4. Holds an active, unencumbered license;

189 5. Has not been convicted or found guilty, and has not
190 entered into an agreed disposition, of a felony related to the
191 practice of audiology, under applicable state or federal criminal
192 law;

193 6. Has a valid United States Social Security or National
194 Practitioner Identification number.

195 F. For a speech-language pathologist:

196 1. Must meet one of the following educational requirements:

197 a. Has graduated with a master's degree from a speech-
198 language pathology program that is accredited by an organization
199 recognized by the United States Department of Education and
200 operated by a college or university accredited by a regional or
201 national accrediting organization recognized by the board; or

202 b. Has graduated from a speech-language pathology program
203 that is housed in an institution of higher education outside of the
204 United States (a) for which the program and institution have been
205 approved by the authorized accrediting body in the applicable
206 country and (b) the degree program has been verified by an
207 independent credentials review agency to be comparable to a state
208 licensing board-approved program.

209 2. Has completed a supervised clinical practicum experience

210 from an educational institution or its cooperating programs as
211 required by the Commission;

212 3. Has completed a supervised postgraduate professional
213 experience as required by the Commission;

214 4. Has successfully passed a national examination approved
215 by the Commission;

216 5. Holds an active, unencumbered license;

217 6. Has not been convicted or found guilty, and has not
218 entered into an agreed disposition, of a felony related to the
219 practice of speech-language pathology, under applicable state or
220 federal criminal law;

221 7. Has a valid United States Social Security or National
222 Practitioner Identification number.

223 G. The privilege to practice is derived from the home state
224 license.

225 H. An audiologist or speech-language pathologist practicing
226 in a member state must comply with the state practice laws of the
227 state in which the client is located at the time service is
228 provided. The practice of audiology and speech-language pathology
229 shall include all audiology and speech-language pathology practice
230 as defined by the state practice laws of the member state in which
231 the client is located. The practice of audiology and speech-
232 language pathology in a member state under a privilege to practice
233 shall subject an audiologist or speech-language pathologist to the
234 jurisdiction of the licensing board, the courts and the laws of the
235 member state in which the client is located at the time service is
236 provided.

237 I. Individuals not residing in a member state shall continue
238 to be able to apply for a member state's single-state license as
239 provided under the laws of each member state. However, the single-
240 state license granted to these individuals shall not be recognized
241 as granting the privilege to practice audiology or speech-language
242 pathology in any other member state. Nothing in this Compact shall
243 affect the requirements established by a member state for the
244 issuance of a single-state license.

245 J. Member states may charge a fee for granting a compact
246 privilege.

247 K. Member states must comply with the bylaws and rules and
248 regulations of the Commission.

249 SECTION 4. COMPACT PRIVILEGE

250 A. To exercise the compact privilege under the terms and
251 provisions of the Compact, the audiologist or speech-language
252 pathologist shall:

253 1. Hold an active license in the home state;

254 2. Have no encumbrance on any state license;

255 3. Be eligible for a compact privilege in any member state in
256 accordance with Section 3;

257 4. Have not had any adverse action against any license or
258 compact privilege within the previous 2 years from date of
259 application;

260 5. Notify the Commission that the licensee is seeking the
261 compact privilege within a remote state(s);

262 6. Pay any applicable fees, including any state fee, for the
263 compact privilege;

264 7. Report to the Commission adverse action taken by any non-
265 member state within 30 days from the date the adverse action is
266 taken.

267 B. For the purposes of the compact privilege, an audiologist
268 or speech-language pathologist shall only hold one home state
269 license at a time.

270 C. Except as provided in Section 6, if an audiologist or
271 speech-language pathologist changes primary state of residence by
272 moving between two-member states, the audiologist or speech-
273 language pathologist must apply for licensure in the new home
274 state, and the license issued by the prior home state shall be
275 deactivated in accordance with applicable rules adopted by the
276 Commission.

277 D. The audiologist or speech-language pathologist may apply
278 for licensure in advance of a change in primary state of residence.

279 E. A license shall not be issued by the new home state until
280 the audiologist or speech-language pathologist provides
281 satisfactory evidence of a change in primary state of residence to
282 the new home state and satisfies all applicable requirements to
283 obtain a license from the new home state.

284 F. If an audiologist or speech-language pathologist changes
285 primary state of residence by moving from a member state to a non-
286 member state, the license issued by the prior home state shall
287 convert to a single-state license, valid only in the former home
288 state.

289 G. The compact privilege is valid until the expiration date
290 of the home state license. The licensee must comply with the

291 requirements of Section 4A to maintain the compact privilege in the
292 remote state.

293 H. A licensee providing audiology or speech-language
294 pathology services in a remote state under the compact privilege
295 shall function within the laws and regulations of the remote state.

296 I. A licensee providing audiology or speech-language
297 pathology services in a remote state is subject to that state's
298 regulatory authority. A remote state may, in accordance with due
299 process and that state's laws, remove a licensee's compact
300 privilege in the remote state for a specific period of time, impose
301 finances, and/or take any other necessary actions to protect the
302 health and safety of its citizens.

303 J. If a home state license is encumbered, the licensee shall
304 lose the compact privilege in any remote state until the following
305 occur:

306 1. The home state license is no longer encumbered; and
307 2. Two years have elapsed from the date of the adverse
308 action.

309 K. Once an encumbered license in the home state is restored
310 to good standing, the licensee must meet the requirements of
311 Section 4A to obtain a compact privilege in any remote state.

312 L. Once the requirements of Section 4J have been met, the
313 licensee must meet the requirements in Section 4A to obtain a
314 compact privilege in a remote state.

315 SECTION 5. COMPACT PRIVILEGE TO PRACTICE TELEHEALTH

316 Member states shall recognize the right of an audiologist or
317 speech-language pathologist, licensed by a home state in

318 accordance with Section 3 and under rules promulgated by the
319 Commission, to practice audiology or speech-language pathology in
320 any member state via telehealth under a privilege to practice as
321 provided in the Compact and rules promulgated by the Commission.

322 SECTION 6. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES

323 Active duty military personnel, or their spouse, shall
324 designate a home state where the individual has a current license
325 in good standing. The individual may retain the home state
326 designation during the period the service member is on active duty.
327 Subsequent to designating a home state, the individual shall only
328 change their home state through application for licensure in the
329 new state.

330 SECTION 7. ADVERSE ACTIONS

331 A. In addition to the other powers conferred by state law, a
332 remote state shall have the authority, in accordance with existing
333 state due process law, to:

334 1. Take adverse action against an audiologist's or speech-
335 language pathologist's privilege to practice within that member
336 state.

337 2. Issue subpoenas for both hearings and investigations that
338 require the attendance and testimony of witnesses as well as the
339 production of evidence. Subpoenas issued by a licensing board in a
340 member state for the attendance and testimony of witnesses or the
341 production of evidence from another member state shall be enforced
342 in the latter state by any court of competent jurisdiction,
343 according to the practice and procedure of that court applicable to
344 subpoenas issued in proceedings pending before it. The issuing

345 authority shall pay any witness fees, travel expenses, mileage and
346 other fees required by the service statutes of the state in which
347 the witnesses or evidence are located.

348 3. Only the home state shall have the power to take adverse
349 action against an audiologist's or speech-language pathologist's
350 license issued by the home state.

351 B. For purposes of taking adverse action, the home state
352 shall give the same priority and effect to reported conduct
353 received from a member state as it would if the conduct had
354 occurred within the home state. In so doing, the home state shall
355 apply its own state laws to determine appropriate action.

356 C. The home state shall complete any pending investigations
357 of an audiologist or speech-language pathologist who changes
358 primary state of residence during the course of the
359 investigations. The home state shall also have the authority to
360 take appropriate action(s) and shall promptly report the
361 conclusions of the investigations to the administrator of the data
362 system. The administrator of the coordinated licensure
363 information system shall promptly notify the new home state of any
364 adverse actions.

365 D. If otherwise permitted by state law, the member state may
366 recover from the affected audiologist or speech-language
367 pathologist the costs of investigations and disposition of cases
368 resulting from any adverse action taken against that audiologist
369 or speech-language pathologist.

370 E. The member state may take adverse action based on the
371 factual findings of the remote state, provided that the member

372 state follows the member state's own procedures for taking the
373 adverse action.

374 F. Joint Investigations:

375 1. In addition to the authority granted to a member state by
376 its respective audiology or speech-language pathology practice act
377 or other applicable state law, any member state may participate
378 with other member states in joint investigations of licensees.

379 2. Member states shall share any investigative, litigation,
380 or compliance materials in furtherance of any joint or individual
381 investigation initiated under the Compact.

382 G. If adverse action is taken by the home state against an
383 audiologist's or speech-language pathologist's license, the
384 audiologist's or speech-language pathologist's privilege to
385 practice in all other member states shall be deactivated until all
386 encumbrances have been removed from the state license. All home
387 state disciplinary orders that impose adverse action against an
388 audiologist's or speech-language pathologist's license shall
389 include a statement that the audiologist's or speech-language
390 pathologist's privilege to practice is deactivated in all member
391 states during the pendency of the order.

392 H. If a member state takes adverse action, it shall promptly
393 notify the administrator of the data system. The administrator of
394 the data system shall promptly notify the home state of any adverse
395 actions by remote states.

396 I. Nothing in this Compact shall override a member state's
397 decision that participation in an alternative program may be used
398 in lieu of adverse action.

399 SECTION 8. ESTABLISHMENT OF THE AUDIOLOGY AND SPEECH-
400 LANGUAGE PATHOLOGY COMPACT COMMISSION

401 A. The Compact member states hereby create and establish a
402 joint public agency known as the Audiology and Speech-Language
403 Pathology Compact Commission:

404 1. The Commission is an instrumentality of the Compact
405 states.

406 2. Venue is proper and judicial proceedings by or against the
407 Commission shall be brought solely and exclusively in a court of
408 competent jurisdiction where the principal office of the
409 Commission is located. The Commission may waive venue and
410 jurisdictional defenses to the extent it adopts or consents to
411 participate in alternative dispute resolution proceedings.

412 3. Nothing in this Compact shall be construed to be a waiver
413 of sovereign immunity.

414 B. Membership, Voting and Meetings:

415 1. Each member state shall have two (2) delegates selected by
416 that member state's licensing board. The delegates shall be
417 current members of the licensing board. One shall be an
418 audiologist and one shall be a speech-language pathologist.

419 2. An additional five (5) delegates, who are either a public
420 member or board administrator from a state licensing board, shall
421 be chosen by the Executive Committee from a pool of nominees
422 provided by the Commission at Large.

423 3. Any delegate may be removed or suspended from office as
424 provided by the law of the state from which the delegate is
425 appointed.

426 4. The member state board shall fill any vacancy occurring on
427 the Commission, within 90 days.

428 5. Each delegate shall be entitled to one (1) vote with
429 regard to the promulgation of rules and creation of bylaws and
430 shall otherwise have an opportunity to participate in the business
431 and affairs of the Commission.

432 6. A delegate shall vote in person or by other means as
433 provided in the bylaws. The bylaws may provide for delegates'
434 participation in meetings by telephone or other means of
435 communication.

436 7. The Commission shall meet at least once during each
437 calendar year. Additional meetings shall be held as set forth in
438 the bylaws.

439 C. The Commission shall have the following powers and duties:

440 1. Establish the fiscal year of the Commission;

441 2. Establish bylaws;

442 3. Establish a Code of Ethics;

443 4. Maintain its financial records in accordance with the
444 bylaws;

445 5. Meet and take actions as are consistent with the
446 provisions of this Compact and the bylaws;

447 6. Promulgate uniform rules to facilitate and coordinate
448 implementation and administration of this Compact. The rules
449 shall have the force and effect of law and shall be binding in all
450 member states;

451 7. Bring and prosecute legal proceedings or actions in the
452 name of the Commission, provided that the standing of any state

453 audiology or speech-language pathology licensing board to sue or
454 be sued under applicable law shall not be affected;

455 8. Purchase and maintain insurance and bonds;

456 9. Borrow, accept, or contract for services of personnel,
457 including, but not limited to, employees of a member state;

458 10. Hire employees, elect or appoint officers, fix
459 compensation, define duties, grant individuals appropriate
460 authority to carry out the purposes of the Compact, and to
461 establish the Commission's personnel policies and programs
462 relating to conflicts of interest, qualifications of personnel,
463 and other related personnel matters;

464 11. Accept any and all appropriate donations and grants of
465 money, equipment, supplies, materials and services, and to
466 receive, utilize and dispose of the same; provided that at all
467 times the Commission shall avoid any appearance of impropriety
468 and/or conflict of interest;

469 12. Lease, purchase, accept appropriate gifts or donations
470 of, or otherwise to own, hold, improve or use, any property, real,
471 personal or mixed; provided that at all times the Commission shall
472 avoid any appearance of impropriety;

473 13. Sell, convey, mortgage, pledge, lease, exchange,
474 abandon, or otherwise dispose of any property real, personal, or
475 mixed;

476 14. Establish a budget and make expenditures;

477 15. Borrow money;

478 16. Appoint committees, including standing committees
479 composed of members, and other interested persons as may be

480 designated in this Compact and the bylaws;

481 17. Provide and receive information from, and cooperate
482 with, law enforcement agencies;

483 18. Establish and elect an Executive Committee; and

484 19. Perform other functions as may be necessary or
485 appropriate to achieve the purposes of this Compact consistent
486 with the state regulation of audiology and speech-language
487 pathology licensure and practice.

488 D. The Executive Committee

489 The Executive Committee shall have the power to act on behalf
490 of the Commission according to the terms of this Compact:

491 1. The Executive Committee shall be composed of ten (10)
492 members:

493 a. Seven (7) voting members who are elected by the Commission
494 from the current membership of the Commission;

495 b. Two (2) ex-officios, consisting of one nonvoting member
496 from a recognized national audiology professional association and
497 one nonvoting member from a recognized national speech-language
498 pathology association; and

499 c. One (1) ex-officio, nonvoting member from the recognized
500 membership organization of the audiology and speech-language
501 pathology licensing boards.

502 E. The ex-officio members shall be selected by their
503 respective organizations.

504 1. The Commission may remove any member of the Executive
505 Committee as provided in bylaws.

506 2. The Executive Committee shall meet at least annually.

507 3. The Executive Committee shall have the following duties
508 and responsibilities:

509 a. Recommend to the entire Commission changes to the rules or
510 bylaws, changes to this Compact legislation, fees paid by Compact
511 member states such as annual dues, and any commission Compact fee
512 charged to licensees for the compact privilege;

513 b. Ensure Compact administration services are appropriately
514 provided, contractual or otherwise;

515 c. Prepare and recommend the budget;

516 d. Maintain financial records on behalf of the Commission;

517 e. Monitor Compact compliance of member states and provide
518 compliance reports to the Commission;

519 f. Establish additional committees as necessary; and

520 g. Other duties as provided in rules or bylaws.

521 4. Meetings of the Commission

522 All meetings shall be open to the public, and public notice of
523 meetings shall be given in the same manner as required under the
524 rulemaking provisions in Section 10.

525 5. The Commission or the Executive Committee or other
526 committees of the Commission may convene in a closed, non-public
527 meeting if the Commission or Executive Committee or other
528 committees of the Commission must discuss:

529 a. Non-compliance of a member state with its obligations
530 under the Compact;

531 b. The employment, compensation, discipline or other
532 matters, practices or procedures related to specific employees or
533 other matters related to the Commission's internal personnel

534 practices and procedures;

535 c. Current, threatened, or reasonably anticipated

536 litigation;

537 d. Negotiation of contracts for the purchase, lease, or sale

538 of goods, services, or real estate;

539 e. Accusing any person of a crime or formally censuring any

540 person;

541 f. Disclosure of trade secrets or commercial or financial

542 information that is privileged or confidential;

543 g. Disclosure of information of a personal nature where

544 disclosure would constitute a clearly unwarranted invasion of

545 personal privacy;

546 h. Disclosure of investigative records compiled for law

547 enforcement purposes;

548 i. Disclosure of information related to any investigative

549 reports prepared by or on behalf of or for use of the Commission or

550 other committee charged with responsibility of investigation or

551 determination of compliance issues pursuant to the Compact; or

552 j. Matters specifically exempted from disclosure by federal

553 or member state statute.

554 6. If a meeting, or portion of a meeting, is closed pursuant

555 to this provision, the Commission's legal counsel or designee

556 shall certify that the meeting may be closed and shall reference

557 each relevant exempting provision.

558 7. The Commission shall keep minutes that fully and clearly

559 describe all matters discussed in a meeting and shall provide a

560 full and accurate summary of actions taken, and the reasons

561 therefore, including a description of the views expressed. All
562 documents considered in connection with an action shall be
563 identified in minutes. All minutes and documents of a closed
564 meeting shall remain under seal, subject to release by a majority
565 vote of the Commission or order of a court of competent
566 jurisdiction.

567 8. Financing of the Commission:

568 a. The Commission shall pay, or provide for the payment of,
569 the reasonable expenses of its establishment, organization, and
570 ongoing activities.

571 b. The Commission may accept any and all appropriate revenue
572 sources, donations, and grants of money, equipment, supplies,
573 materials, and services.

574 c. The Commission may levy on and collect an annual
575 assessment from each member state or impose fees on other parties
576 to cover the cost of the operations and activities of the
577 Commission and its staff, which must be in a total amount
578 sufficient to cover its annual budget as approved each year for
579 which revenue is not provided by other sources. The aggregate
580 annual assessment amount shall be allocated based upon a formula to
581 be determined by the Commission, which shall promulgate a rule
582 binding upon all member states.

583 9. The Commission shall not incur obligations of any kind
584 prior to securing the funds adequate to meet the same; nor shall
585 the Commission pledge the credit of any of the member states,
586 except by and with the authority of the member state.

587 10. The Commission shall keep accurate accounts of all

588 receipts and disbursements. The receipts and disbursements of the
589 Commission shall be subject to the audit and accounting procedures
590 established under its bylaws. However, all receipts and
591 disbursements of funds handled by the Commission shall be audited
592 yearly by a certified or licensed public accountant, and the report
593 of the audit shall be included in and become part of the annual
594 report of the Commission.

595 F. Qualified Immunity, Defense, and Indemnification:

596 1. The members, officers, executive director, employees and
597 representatives of the Commission shall be immune from suit and
598 liability, either personally or in their official capacity, for
599 any claim for damage to or loss of property or personal injury or
600 other civil liability caused by or arising out of any actual or
601 alleged act, error or omission that occurred, or that the person
602 against whom the claim is made had a reasonable basis for believing
603 occurred within the scope of Commission employment, duties or
604 responsibilities; provided that nothing in this paragraph shall be
605 construed to protect any person from suit and/or liability for any
606 damage, loss, injury, or liability caused by the intentional or
607 willful or wanton misconduct of that person.

608 2. The Commission shall defend any member, officer,
609 executive director, employee or representative of the Commission
610 in any civil action seeking to impose liability arising out of any
611 actual or alleged act, error, or omission that occurred within the
612 scope of Commission employment, duties, or responsibilities, or
613 that the person against whom the claim is made had a reasonable
614 basis for believing occurred within the scope of Commission

615 employment, duties, or responsibilities; provided that nothing
616 herein shall be construed to prohibit that person from retaining
617 his or her own counsel; and provided further, that the actual or
618 alleged act, error, or omission did not result from that person's
619 intentional or willful or wanton misconduct.

620 3. The Commission shall indemnify and hold harmless any
621 member, officer, executive director, employee, or representative
622 of the Commission for the amount of any settlement or judgment
623 obtained against that person arising out of any actual or alleged
624 act, error or omission that occurred within the scope of Commission
625 employment, duties, or responsibilities, or that person had a
626 reasonable basis for believing occurred within the scope of
627 Commission employment, duties, or responsibilities, provided that
628 the actual or alleged act, error, or omission did not result from
629 the intentional or willful or wanton misconduct of that person.

630 SECTION 9. DATA SYSTEM

631 A. The Commission shall provide for the development,
632 maintenance, and utilization of a coordinated database and
633 reporting system containing licensure, adverse action, and
634 investigative information on all licensed individuals in member
635 states.

636 B. Notwithstanding any other provision of state law to the
637 contrary, a member state shall submit a uniform data set to the
638 data system on all individuals to whom this Compact is applicable
639 as required by the rules of the Commission, including:

640 1. Identifying information;

641 2. Licensure data;

642 3. Adverse actions against a license or compact privilege;

643 4. Non-confidential information related to alternative
644 program participation;

645 5. Any denial of application for licensure, and the reason(s)
646 for denial; and

647 6. Other information that may facilitate the administration
648 of this Compact, as determined by the rules of the Commission.

649 C. Investigative information pertaining to a licensee in any
650 member state shall only be available to other member states.

651 D. The Commission shall promptly notify all member states of
652 any adverse action taken against a licensee or an individual
653 applying for a license. Adverse action information pertaining to a
654 licensee in any member state shall be available to any other member
655 state.

656 E. Member states contributing information to the data system
657 may designate information that may not be shared with the public
658 without the express permission of the contributing state.

659 F. Any information submitted to the data system that is
660 subsequently required to be expunged by the laws of the member
661 state contributing the information shall be removed from the data
662 system.

663 SECTION 10. RULEMAKING

664 A. The Commission shall exercise its rulemaking powers
665 pursuant to the criteria set forth in this Section and the rules
666 adopted thereunder. Rules and amendments shall become binding as
667 of the date specified in each rule or amendment.

668 B. If a majority of the legislatures of the member states

669 rejects a rule, by enactment of a statute or resolution in the same
670 manner used to adopt the Compact within 4 years of the date of
671 adoption of the rule, the rule shall have no further force and
672 effect in any member state.

673 C. Rules or amendments to the rules shall be adopted at a
674 regular or special meeting of the Commission.

675 D. Prior to promulgation and adoption of a final rule or
676 rules by the Commission, and at least thirty (30) days in advance
677 of the meeting at which the rule shall be considered and voted
678 upon, the Commission shall file a Notice of Proposed Rulemaking:

679 1. On the website of the Commission or other publicly
680 accessible platform; and

681 2. On the website of each member state audiology or speech-
682 language pathology licensing board or other publicly accessible
683 platform or the publication in which each state would otherwise
684 publish proposed rules.

685 E. The Notice of Proposed Rulemaking shall include:

686 1. The proposed time, date, and location of the meeting in
687 which the rule shall be considered and voted upon;

688 2. The text of the proposed rule or amendment and the reason
689 for the proposed rule;

690 3. A request for comments on the proposed rule from any
691 interested person; and

692 4. The manner in which interested persons may submit notice
693 to the Commission of their intention to attend the public hearing
694 and any written comments.

695 F. Prior to the adoption of a proposed rule, the Commission

696 shall allow persons to submit written data, facts, opinions and
697 arguments, which shall be made available to the public.

698 G. The Commission shall grant an opportunity for a public
699 hearing before it adopts a rule or amendment if a hearing is
700 requested by:

- 701 1. At least twenty-five (25) persons;
- 702 2. A state or federal governmental subdivision or agency; or
- 703 3. An association having at least twenty-five (25) members.

704 H. If a hearing is held on the proposed rule or amendment,
705 the Commission shall publish the place, time, and date of the
706 scheduled public hearing. If the hearing is held via electronic
707 means, the Commission shall publish the mechanism for access to the
708 electronic hearing.

709 1. All persons wishing to be heard at the hearing shall
710 notify the executive director of the Commission or other
711 designated member in writing of their desire to appear and testify
712 at the hearing not less than five (5) business days before the
713 scheduled date of the hearing.

714 2. Hearings shall be conducted in a manner providing each
715 person who wishes to comment a fair and reasonable opportunity to
716 comment orally or in writing.

717 3. All hearings shall be recorded. A copy of the recording
718 shall be made available on request.

719 4. Nothing in this section shall be construed as requiring a
720 separate hearing on each rule. Rules may be grouped for the
721 convenience of the Commission at hearings required by this
722 section.

723 I. Following the scheduled hearing date, or by the close of
724 business on the scheduled hearing date if the hearing was not held,
725 the Commission shall consider all written and oral comments
726 received.

727 J. If no written notice of intent to attend the public
728 hearing by interested parties is received, the Commission may
729 proceed with promulgation of the proposed rule without a public
730 hearing.

731 K. The Commission shall, by majority vote of all members,
732 take final action on the proposed rule and shall determine the
733 effective date of the rule, if any, based on the rulemaking record
734 and the full text of the rule.

735 L. Upon determination that an emergency exists, the
736 Commission may consider and adopt an emergency rule without prior
737 notice, opportunity for comment, or hearing, provided that the
738 usual rulemaking procedures provided in the Compact and in this
739 section shall be retroactively applied to the rule as soon as
740 reasonably possible, in no event later than ninety (90) days after
741 the effective date of the rule. For the purposes of this
742 provision, an emergency rule is one that must be adopted
743 immediately in order to:

744 1. Meet an imminent threat to public health, safety, or
745 welfare;

746 2. Prevent a loss of Commission or member state funds; or

747 3. Meet a deadline for the promulgation of an administrative
748 rule that is established by federal law or rule.

749 M. The Commission or an authorized committee of the

750 Commission may direct revisions to a previously adopted rule or
751 amendment for purposes of correcting typographical errors, errors
752 in format, errors in consistency, or grammatical errors. Public
753 notice of any revisions shall be posted on the website of the
754 Commission. The revision shall be subject to challenge by any
755 person for a period of thirty (30) days after posting. The
756 revision may be challenged only on grounds that the revision
757 results in a material change to a rule. A challenge shall be made
758 in writing and delivered to the chair of the Commission prior to
759 the end of the notice period. If no challenge is made, the
760 revision shall take effect without further action. If the revision
761 is challenged, the revision may not take effect without the
762 approval of the Commission.

763 SECTION 11. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

764 A. Dispute Resolution

765 1. Upon request by a member state, the Commission shall
766 attempt to resolve disputes related to the Compact that arise among
767 member states and between member and non-member states.

768 2. The Commission shall promulgate a rule providing for both
769 mediation and binding dispute resolution for disputes as
770 appropriate.

771 B. Enforcement

772 1. The Commission, in the reasonable exercise of its
773 discretion, shall enforce the provisions and rules of this
774 Compact.

775 2. By majority vote, the Commission may initiate legal action
776 in the United States District Court for the District of Columbia or

777 the federal district where the Commission has its principal
778 offices against a member state in default to enforce compliance
779 with the provisions of the Compact and its promulgated rules and
780 bylaws. The relief sought may include both injunctive relief and
781 damages. In the event judicial enforcement is necessary, the
782 prevailing member shall be awarded all costs of litigation,
783 including reasonable attorney's fees.

784 3. The remedies herein shall not be the exclusive remedies of
785 the Commission. The Commission may pursue any other remedies
786 available under federal or state law.

787 SECTION 12. DATE OF IMPLEMENTATION OF THE INTERSTATE
788 COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE
789 AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT

790 A. The Compact shall come into effect on the date on which
791 the Compact statute is enacted into law in the 10th member state.
792 The provisions, which become effective at that time, shall be
793 limited to the powers granted to the Commission relating to
794 assembly and the promulgation of rules. Thereafter, the
795 Commission shall meet and exercise rulemaking powers necessary to
796 the implementation and administration of the Compact.

797 B. Any state that joins the Compact subsequent to the
798 Commission's initial adoption of the rules shall be subject to the
799 rules as they exist on the date on which the Compact becomes law in
800 that state. Any rule that has been previously adopted by the
801 Commission shall have the full force and effect of law on the day
802 the Compact becomes law in that state.

803 C. Any member state may withdraw from this Compact by

804 enacting a statute repealing the same.

805 1. A member state's withdrawal shall not take effect until
806 six (6) months after enactment of the repealing statute.

807 2. Withdrawal shall not affect the continuing requirement of
808 the withdrawing state's audiology or speech-language pathology
809 licensing board to comply with the investigative and adverse
810 action reporting requirements of this act prior to the effective
811 date of withdrawal.

812 D. Nothing contained in this Compact shall be construed to
813 invalidate or prevent any audiology or speech-language pathology
814 licensure agreement or other cooperative arrangement between a
815 member state and a non-member state that does not conflict with the
816 provisions of this Compact.

817 E. This Compact may be amended by the member states. No
818 amendment to this Compact shall become effective and binding upon
819 any member state until it is enacted into the laws of all member
820 states.

821 SECTION 13. CONSTRUCTION AND SEVERABILITY

822 This Compact shall be liberally construed so as to effectuate
823 the purposes thereof. The provisions of this Compact shall be
824 severable and if any phrase, clause, sentence or provision of this
825 Compact is declared to be contrary to the constitution of any
826 member state or of the United States or the applicability thereof
827 to any government, agency, person or circumstance is held invalid,
828 the validity of the remainder of this Compact and the applicability
829 thereof to any government, agency, person or circumstance shall
830 not be affected thereby. If this Compact shall be held contrary to

831 the constitution of any member state, the Compact shall remain in
832 full force and effect as to the remaining member states and in full
833 force and effect as to the member state affected as to all
834 severable matters.

835 SECTION 14. BINDING EFFECT OF COMPACT AND OTHER LAWS

836 A. Nothing herein prevents the enforcement of any other law
837 of a member state that is not inconsistent with the Compact.

838 B. All laws in a member state in conflict with the Compact
839 are superseded to the extent of the conflict.

840 C. All lawful actions of the Commission, including all rules
841 and bylaws promulgated by the Commission, are binding upon the
842 member states.

843 D. All agreements between the Commission and the member
844 states are binding in accordance with their terms.

845 E. In the event any provision of the Compact exceeds the
846 constitutional limits imposed on the legislature of any member
847 state, the provision shall be ineffective to the extent of the
848 conflict with the constitutional provision in question in that
849 member state.

Section B. Because of the urgent need of low-income Missouri
2 residents for access to quality health care services, the
3 enactment of section 324.005 of this act is deemed necessary for
4 the immediate preservation of the public health, welfare, peace,
5 and safety, and is hereby declared to be an emergency act within
6 the meaning of the constitution, and the enactment of section
7 324.005 of this act shall be in full force and effect upon its
8 passage and approval.



House Sponsor



Senate Handler