## SENATE SUBSTITUTE

## FOR

HOUSE BILL NO. 2149

## AN ACT

To repeal sections 197.400, 197.445, 327.312, 327.313, 327.314, 327.331, 334.036, 334.530, 334.655, 345.015, and 345.050, RSMo, and to enact in lieu thereof sixteen 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,
327.314, 327.331, 334.036, 334.530, 334.655, 345.015, and
345.050, RSMo, are repealed and sixteen new sections enacted in
lieu thereof, to be known as sections 197.400, 197.445, 324.005,
327.312, 327.313, 327.314, 327.331, 332.325, 334.036, 334.530,
334.655, 345.015, 345.022, 345.050, 345.052, and 345.085, to

7 read as follows:

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

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

6 (2) "Department", the department of health and senior7 services;

8 (3) "Home health agency", a public agency or private
9 organization or a subdivision or subunit of an agency or
10 organization that provides two or more home health services
11 at the residence of a patient according to a [physician's]
12 written [and signed] plan of treatment <u>signed by a</u>
13 physician, nurse practitioner, clinical nurse specialist, or
14 physician assistant;

15 (4) "Home health services", any of the following items 16 and services provided at the residence of the patient on a 17 part-time or intermittent basis: nursing, physical therapy, 18 speech therapy, occupational therapy, home health aid, or 19 medical social service;

20 (5) <u>"Nurse practitioner, clinical nurse specialist", a</u>
21 person recognized by the state board of nursing pursuant to
22 the provisions of chapter 335 to practice in this state as a
23 nurse practitioner or clinical nurse specialist;

24 (6) "Part-time or intermittent basis", the providing 25 of home health services in an interrupted interval sequence 26 on the average of not to exceed three hours in any twenty-27 four-hour period;

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

32 [(7)] (8) "Physician", a person licensed by the state 33 board of registration for the healing arts pursuant to the 34 provisions of chapter 334 to practice in this state as a 35 physician and surgeon;

36 (9) "Physician assistant", a person licensed by the 37 state board of registration for the healing arts pursuant to 38 the provisions of chapter 334 to practice in this state as a 39 physician assistant;

40 [(8)] (10) "Plan of treatment", a plan reviewed and
41 signed as often as [medically] necessary by a physician
42 [or], podiatrist, <u>nurse practitioner</u>, <u>clinical nurse</u>
43 <u>specialist</u>, <u>or a physician assistant</u>, not to exceed sixty
44 days in duration, <u>and reviewed by a physician at least once</u>
45 <u>every six months</u>, prescribing items and services for an
46 individual patient's condition;

47 [(9)] (11) "Podiatrist", a person licensed by the
48 state board of podiatry pursuant to the provisions of
49 chapter 330 to practice in this state as a podiatrist;

50 [(10)] (12) "Subunit" or "subdivision", any organizational unit of a larger organization which can be 51 clearly defined as a separate entity within the larger 52 53 structure, which can meet all of the requirements of 54 sections 197.400 to 197.475 independent of the larger organization, which can be held accountable for the care of 55 56 patients it is serving, and which provides to all patients 57 care and services meeting the standards and requirements of sections 197.400 to 197.475. 58

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

9 2. The rules and standards adopted by the department pursuant to the provisions of sections 197.400 to 197.477 10 shall apply to all health services covered by sections 11 12 197.400 to 197.477 rendered to any patient being served by a home health agency regardless of source of payment for the 13 14 service, patient's condition, or place of residence, at which the home health services are ordered by the physician 15 [or], podiatrist, nurse practitioner, clinical nurse 16 specialist, or physician assistant. No rule or portion of a 17 rule promulgated pursuant to the authority of sections 18 197.400 to 197.477 shall become effective unless it has been 19 promulgated pursuant to the provisions of section 536.024. 20

	324.005. 1. Notwithstanding any requirements for
2	licensure for all professional boards, commissions,
3	committees, and offices within the division of professional
4	registration to the contrary, a professional who has a
5	current license to practice from another state,
6	commonwealth, territory, or the District of Columbia shall
7	be exempt from the licensure requirements of his or her
8	respective licensure board in this state if:
9	(1) The professional is an active duty or reserve
10	member of the Armed Forces of the United States, a member of
11	the National Guard, a civilian employee of the United States
12	Department of Defense, an authorized services contractor
13	under 10 U.S.C. Section 1091, or a professional otherwise
14	authorized by the United States Department of Defense;
15	(2) The professional practices the same occupation or
16	profession at the same practice level for which he or she
17	holds a current license; and
18	(3) The professional is engaged in the practice of a
19	professional through a partnership with the federal
20	Innovative Readiness Training program within the United
21	States Department of Defense.
22	2. The exemption provided in this section shall not
23	permit a professional to engage in practice except as part
24	of the federal Innovative Readiness Training program within
25	the United States Department of Defense. The exemption
26	shall only apply while:
27	(1) The professional's practice is required by the
28	program pursuant to military orders; and
29	(2) The services provided by the professional are
30	within the scope of practice for the individual's respective
31	profession in this state.
	327.312. 1. Prior to January 1, 2024, any person may

2 apply to the board for enrollment as a land surveyor-in-

3 training who is a high school graduate, or who holds a
4 Missouri certificate of high school equivalence (GED), and
5 either:

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

12 (2)Has passed at least sixty hours of college credit which shall include credit for at least twenty semester 13 hours of approved surveying course work as defined by board 14 regulation of which at least two semester hours shall be in 15 legal aspects of boundary surveying and present evidence 16 satisfactory to the board that in addition thereto such 17 person has at least one year of combined professional office 18 19 and field experience in land surveying projects under the immediate personal supervision of a professional land 20 21 surveyor; or

Has passed at least twelve semester hours of 22 (3) approved surveying course work as defined by board 23 regulation of which at least two semester hours shall be in 24 legal aspects of land surveying and in addition thereto has 25 26 at least two years of combined professional office and field 27 experience in land surveying projects under the immediate personal supervision of a professional land surveyor. 28 Pursuant to this provision, not more than one year of 29 satisfactory postsecondary education work shall count as 30 equivalent years of satisfactory land surveying work as 31 32 aforementioned.

33 2. The board shall issue a certificate of completion
34 to each applicant who satisfies the requirements of the
35 aforementioned land surveyor-in-training program and passes

36 such examination or examinations as shall be required by the 37 board.

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

327.313. Applications for enrollment as a land 2 [surveyor-in-training] surveyor-intern shall be typewritten 3 on prescribed forms furnished to the applicant. The application shall contain applicant's statements showing the 4 applicant's education, experience, and such other pertinent 5 information as the board may require. Each application 6 shall contain a statement that it is made under oath or 7 8 affirmation and that the representations are true and 9 correct to the best knowledge and belief of the applicant, 10 subject to the penalties of making a false affidavit or declaration and shall be accompanied by the required fee. 11

327.314. 1. Prior to January 1, 2024, any person may apply to the board for licensure as a professional land 2 3 surveyor who has been enrolled as a land surveyor-in-4 training and has presented evidence to the satisfaction of 5 the board that said person has acquired at least four years 6 of satisfactory professional field and office experience in 7 land surveying from the date of enrollment as a land 8 surveyor-in-training. This experience shall have been under 9 the immediate personal supervision of a professional land 10 surveyor.

11 <u>2. Beginning January 1, 2024, any person may apply to</u> 12 <u>the board for licensure who presents evidence satisfactory</u> 13 <u>to the board that the applicant has met the requirements as</u> 14 <u>provided in this subsection:</u>

15	(1) An applicant shall be a high school graduate or
16	hold a certificate of high school equivalence (GED), and
17	either:
18	(a) Has graduated and received a baccalaureate degree
19	in an approved curriculum, as defined by the board, which
20	shall include at least fifteen semester hours of approved
21	surveying course work, as defined by the board, of which at
22	least six semester hours shall be in the legal aspects of
23	boundary surveying; or
24	(b) Has passed at least sixty hours of college credit
25	which shall include at least fifteen semester hours of
26	approved surveying course work, as defined by the board, of
27	which at least six semester hours shall be in legal aspects
28	of boundary surveying; or
29	(c) Has passed at least fifteen semester hours of
30	approved surveying coursework, as defined by the board, of
31	which at least six semester hours shall be in legal aspects
32	of land surveying;
33	(d) An applicant meeting the requirements of paragraph
34	(a) of this subdivision shall have acquired at least four
35	years of satisfactory field and office experience in land
36	surveying under the immediate personal supervision of a
37	professional land surveyor;
38	(e) An applicant meeting the requirements of paragraph
39	(b) of this subdivision shall have acquired at least five
40	years of satisfactory field and office experience in land
41	surveying under the immediate personal supervision of a
42	professional land surveyor;
43	(f) An applicant meeting the requirements of paragraph
44	(c) of this subdivision shall have acquired at least six
45	years of satisfactory field and office experience in land
46	surveying under the immediate personal supervision of a
47	professional land surveyor. Pursuant to this provision, up

- 48 to one year of post-secondary education, approved by the
- 49 board, may count as equivalent work experience;
- 50 (2) An applicant shall pass any examinations required
  51 by the board pursuant to section 327.331;
- 52 (3) Any person enrolled as a land surveyor-in-training
  53 prior to January 1, 2024, shall only be required to meet the
  54 requirements in place pursuant to their enrollment.

327.331. 1. After it has been determined that an
applicant possesses the qualifications entitling the
applicant to be examined, each applicant for examination and
enrollment as a land surveyor-in-training and for
examination and licensure as a professional land surveyor in
Missouri shall appear before the board or its
representatives for examination at the time and place
specified.

9 2. The examination or examinations shall be of such
10 form, content and duration as shall be determined by the
11 board to thoroughly test the qualifications of each
12 applicant to become enrolled as a land [surveyor-in13 training] <u>surveyor-intern</u> or to become licensed as a
14 professional land surveyor in Missouri.

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

4. Any person who passes the examination hereinabove
specified shall be entitled to be enrolled as a land
[surveyor-in-training] <u>surveyor-intern</u> or licensed as a
professional land surveyor, as the case may be, in Missouri
and shall receive a certificate of enrollment or a license,
as the case may be.

332.325. 1. The Missouri dental board may collaborate
with the department of health and senior services and the
office of dental health within the department of health and

4	senior services to approve pilot projects designed to
5	examine new methods of extending care to medically
6	underserved populations, as defined in 42 U.S.C. Section
7	300e-1(7). These pilot projects may employ techniques or
8	approaches to care that may necessitate a waiver of the
9	requirements of this chapter and regulations promulgated
10	thereunder; provided:
11	(1) The project plan has a clearly stated objective of
12	serving a specific underserved population that warrants, in
13	the opinion of a majority of the board, granting approval
14	for a pilot project;
15	(2) The project has a finite start date and
16	termination date;
17	(3) The project clearly defines the new techniques or
18	approaches it intends to examine to determine if it results
19	in an improvement in access or quality of care;
20	(4) The project plan identifies specific and limited
21	locations and populations to participate in the pilot
22	project;
23	(5) The project plan clearly establishes minimum
24	guidelines and standards for the pilot project, including,
25	but not limited to, provisions for protecting safety of
26	participating patients;
27	(6) The project plan clearly defines the measurement
28	criteria it will use to evaluate the outcomes of the pilot
29	project on access and quality of care; and
30	(7) The project plan identifies reporting intervals to
31	communicate interim and final outcomes to the board.
32	2. The board may promulgate rules and regulations to
33	implement the provisions of this section. Any rule or
34	portion of a rule, as that term is defined in section
35	536.010, that is created under the authority delegated in
36	this section shall become effective only if it complies with

37 and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 38 39 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to 40 41 delay the effective date, or to disapprove and annul a rule 42 are subsequently held unconstitutional, then the grant of 43 rulemaking authority and any rule proposed or adopted after 44 August 28, 2022, shall be invalid and void. 45 3. The provisions of this section shall expire on 46 August 28, 2026. The board shall provide a final report on approved projects and related data or findings to the 47 general assembly on or before December 31, 2025. The name, 48 49 location, approval dates, and general description of an 50 approved pilot project shall be deemed a public record 51 pursuant to chapter 610. 334.036. 1. For purposes of this section, the 2 following terms shall mean: "Assistant physician", any graduate of a medical 3 (1)school [graduate] accredited by the Liaison Committee on 4 5 Medical Education, the Commission on Osteopathic College 6 Accreditation, or the Educational Commission for Foreign 7 Medical Graduates who: 8 Is a resident and citizen of the United States or (a) 9 is a legal resident alien; 10 Has successfully completed Step 2 of the United (b) 11 States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing 12 examination within the three-year period immediately 13 preceding application for licensure as an assistant 14 15 physician, or within three years after graduation from a medical college or osteopathic medical college, whichever is 16 17 later;

18 (c) Has not completed an approved postgraduate residency and has successfully completed Step 2 of the 19 20 United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical 21 22 licensing examination within the immediately preceding three-23 year period unless when such three-year anniversary occurred he or she was serving as a resident physician in an 24 25 accredited residency in the United States and continued to do so within thirty days prior to application for licensure 26 27 as an assistant physician; and

28

(d) Has proficiency in the English language.

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

34 (2) "Assistant physician collaborative practice
35 arrangement", an agreement between a physician and an
36 assistant physician that meets the requirements of this
37 section and section 334.037[;

38 (3) "Medical school graduate", any person who has
39 graduated from a medical college or osteopathic medical
40 college described in section 334.031].

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

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

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

53 (b) No supervision requirements in addition to the54 minimum federal law shall be required.

55 3. (1)For purposes of this section, the licensure of assistant physicians shall take place within processes 56 57 established by rules of the state board of registration for the healing arts. The board of healing arts is authorized 58 59 to establish rules under chapter 536 establishing licensure and renewal procedures, supervision, collaborative practice 60 arrangements, fees, and addressing such other matters as are 61 62 necessary to protect the public and discipline the profession. No licensure fee for an assistant physician 63 shall exceed the amount of any licensure fee for a physician 64 65 assistant. An application for licensure may be denied or the licensure of an assistant physician may be suspended or 66 revoked by the board in the same manner and for violation of 67 the standards as set forth by section 334.100, or such other 68 standards of conduct set by the board by rule. No rule or 69 70 regulation shall require an assistant physician to complete 71 more hours of continuing medical education than that of a 72 licensed physician.

73 (2) Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the 74 75 authority delegated in this section shall become effective only if it complies with and is subject to all of the 76 provisions of chapter 536 and, if applicable, section 77 536.028. This section and chapter 536 are nonseverable and 78 79 if any of the powers vested with the general assembly under 80 chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held 81 82 unconstitutional, then the grant of rulemaking authority and

83 any rule proposed or adopted after August 28, 2014, shall be 84 invalid and void.

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

4. An assistant physician shall clearly identify
himself or herself as an assistant physician and shall be
permitted to use the terms "doctor", "Dr.", or "doc". No
assistant physician shall practice or attempt to practice
without an assistant physician collaborative practice
arrangement, except as otherwise provided in this section
and in an emergency situation.

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

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

107 7. Each health carrier or health benefit plan that offers or issues health benefit plans that are delivered, 108 issued for delivery, continued, or renewed in this state 109 shall reimburse an assistant physician for the diagnosis, 110 consultation, or treatment of an insured or enrollee on the 111 112 same basis that the health carrier or health benefit plan covers the service when it is delivered by another 113 comparable mid-level health care provider including, but not 114 115 limited to, a physician assistant.

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 completion of a program of physical therapy 4 education approved as reputable by the board or eligibility 5 6 to graduate from such a program within ninety days. A candidate who presents satisfactory evidence of the person's 7 8 graduation from a school of physical therapy approved as 9 reputable by the American Medical Association or, if 10 graduated before 1936, by the American Physical Therapy Association, or if graduated after 1988, the Commission on 11 Accreditation for Physical Therapy Education or its 12 successor, is deemed to have complied with the educational 13 qualifications of this subsection. 14

15 2. Persons desiring to practice as physical therapists 16 in this state shall appear before the board at such time and place as the board may direct and be examined as to their 17 18 fitness to engage in such practice. Applicants shall meet 19 the qualifying standards for such examinations, including 20 any requirements established by any entity contracted by the board to administer the board-approved examination. 21 22 Applications for examination shall be in writing, on a form furnished by the board and shall include evidence 23 24 satisfactory to the board that the applicant possesses the 25 qualifications set forth in subsection 1 of this section and 26 meets the requirements established to qualify for 27 examination. Each application shall contain a statement that it is made under oath or affirmation and that its 28 29 representations are true and correct to the best knowledge and belief of the applicant, subject to the penalties of 30 making a false affidavit or declaration. 31 The examination of qualified candidates for 32 3.

33 licenses to practice physical therapy shall test entry-level

34 competence as related to physical therapy theory, 35 examination and evaluation, physical therapy diagnosis, 36 prognosis, treatment, intervention, prevention, and 37 consultation.

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

45 5. <u>No person who has failed on six or more occasions</u>
46 <u>to achieve a passing score on the examination required by</u>
47 <u>this section shall be eligible for licensure by examination</u>
48 <u>under this section.</u>

49 <u>6.</u> The applicant shall pass a test administered by the
50 board on the laws and rules related to the practice of
51 physical therapy in Missouri.

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

6 (1) A certificate of graduation from an accredited7 high school or its equivalent; and

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

2. Persons desiring to practice as a physical
therapist assistant in this state shall appear before the
board at such time and place as the board may direct and be

16 examined as to the person's fitness to engage in such practice. Applicants shall meet the qualifying standards 17 18 for such examinations, including any requirements established by any entity contracted by the board to 19 20 administer the board-approved examination. Applications for 21 examination shall be on a form furnished by the board and 22 shall include evidence satisfactory to the board that the 23 applicant possesses the qualifications provided in subsection 1 of this section and meets the requirements 24 25 established to qualify for examination. Each application shall contain a statement that the statement is made under 26 oath of affirmation and that its representations are true 27 28 and correct to the best knowledge and belief of the person signing the statement, subject to the penalties of making a 29 30 false affidavit or declaration.

3. The examination of qualified candidates for 32 licensure to practice as physical therapist assistants shall 33 embrace an examination which shall cover the curriculum 34 taught in accredited associate degree programs of physical 35 therapy assistant education. Such examination shall be 36 sufficient to test the qualification of the candidates as 37 practitioners.

38 4. The examination shall include, as related to the
39 human body, the subjects of anatomy, kinesiology, pathology,
40 physiology, psychology, physical therapy theory and
41 procedures as related to medicine and such other subjects,
42 including medical ethics, as the board deems useful to test
43 the fitness of the candidate to practice as a physical
44 therapist assistant.

45 5. <u>No person who has failed on six or more occasions</u>
46 <u>to achieve a passing score on the examination required by</u>
47 <u>this section shall be eligible for licensure by examination</u>
48 <u>under this section.</u>

49 <u>6.</u> The applicant shall pass a test administered by the
50 board on the laws and rules related to the practice as a
51 physical therapist assistant in this state.

52 [6.] 7. The board shall license without examination 53 any legally qualified person who is a resident of this state 54 and who was actively engaged in practice as a physical 55 therapist assistant on August 28, 1993. The board may 56 license such person pursuant to this subsection until ninety 57 days after the effective date of this section.

58 [7.] 8. A candidate to practice as a physical 59 therapist assistant who does not meet the educational qualifications may submit to the board an application for 60 examination if such person can furnish written evidence to 61 the board that the person has been employed in this state 62 for at least three of the last five years under the 63 supervision of a licensed physical therapist and such person 64 65 possesses the knowledge and training equivalent to that obtained in an accredited school. The board may license 66 67 such persons pursuant to this subsection until ninety days after rules developed by the state board of healing arts 68 69 regarding physical therapist assistant licensing become 70 effective.

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

3 (1) "Audiologist", a person who is licensed as an 4 audiologist pursuant to sections 345.010 to 345.080 to 5 practice audiology;

6 (2) "Audiology aide", a person who is registered as an 7 audiology aide by the board, who does not act independently 8 but works under the direction and supervision of a licensed 9 audiologist. Such person assists the audiologist with 10 activities which require an understanding of audiology but 11 do not require formal training in the relevant academics.

12 To be eligible for registration by the board, each applicant 13 shall submit a registration fee and:

14

(a) Be at least eighteen years of age;

(b) Furnish evidence of the person's educationalqualifications which shall be at a minimum:

a. Certification of graduation from an accredited highschool or its equivalent; and

19

b. On-the-job training;

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

23 However, the aide shall not administer or interpret hearing screening or diagnostic tests, fit or dispense hearing 24 25 instruments, make ear impressions, make diagnostic statements, determine case selection, present written 26 27 reports to anyone other than the supervisor without the 28 signature of the supervisor, make referrals to other 29 professionals or agencies, use a title other than audiology 30 aide, develop or modify treatment plans, discharge clients 31 from treatment or terminate treatment, disclose clinical 32 information, either orally or in writing, to anyone other than the supervising audiologist, or perform any procedure 33 for which he or she is not qualified, has not been 34 35 adequately trained or both;

36 (3) "Board", the state board of registration for the 37 healing arts;

38 (4) "Clinical fellowship", the supervised professional 39 employment period following completion of the academic and 40 practicum requirements of an accredited training program 41 under this chapter;

42 (5) "Commission", the advisory commission for speech43 language pathologists and audiologists;

44 [(5)] (6) "Hearing instrument" or "hearing aid", any 45 wearable device or instrument designed for or offered for 46 the purpose of aiding or compensating for impaired human 47 hearing and any parts, attachments or accessories, including 48 ear molds, but excluding batteries, cords, receivers and 49 repairs;

50 [(6)] (7) "Person", any individual, organization, or 51 corporate body, except that only individuals may be licensed 52 pursuant to sections 345.010 to 345.080;

53

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

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

59 (b) Provides consultation or counseling to the60 patient, client, student, their family or interested parties;

61 (c) Provides academic, social and medical referrals62 when appropriate;

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

68 (e) Provides for involvement in related research,69 teaching or public education;

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

75 (g) Provides and interprets behavioral and76 neurophysiologic measurements of auditory balance, cognitive

77 processing and related functions, including intraoperative 78 monitoring;

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

83 (i) Provides selection, assessment, fitting,
84 programming, and dispensing of hearing instruments,
85 assistive listening devices, and other amplification systems;

86 (j) Provides for taking impressions of the ear, making 87 custom ear molds, ear plugs, swim molds and industrial noise 88 protectors;

89 (k) Provides assessment of external ear and cerumen 90 management;

91 (1) Provides advising, fitting, mapping assessment of 92 implantable devices such as cochlear or auditory brain stem 93 devices;

94 (m) Provides information in noise control and hearing 95 conservation including education, equipment selection, 96 equipment calibration, site evaluation and employee 97 evaluation;

98 (n) Provides performing basic speech-language 99 screening test;

100 (o) Provides involvement in social aspects of 101 communication, including challenging behavior and 102 ineffective social skills, lack of communication 103 opportunities;

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

107 (q) Provides aural rehabilitation and related services108 to individuals with hearing loss and their families;

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

(s) Develops and manages academic and clinicalproblems in communication sciences and disorders;

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

117 [(8)] (9) "Practice of speech-language pathology":

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

a. Speech: articulation, fluency, voice, includingrespiration, phonation and resonance;

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

128 c. Oral, pharyngeal, cervical esophageal and related 129 functions, such as dysphagia, including disorders of 130 swallowing and oral functions for feeding; orofacial 131 myofunctional disorders;

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

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

(b) Provides consultation and counseling and makesreferrals when appropriate;

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

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

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

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

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

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

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

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

173

(k) Trains and supervises support personnel;

174 (1) Develops and manages academic and clinical175 programs in communication sciences and disorders;

(m) Conducts, disseminates and applies research incommunication sciences and disorders;

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

181 [(9)] (10) "Speech-language pathologist", a person who 182 is licensed as a speech-language pathologist pursuant to 183 sections 345.010 to 345.080; who engages in the practice of 184 speech-language pathology as defined in sections 345.010 to 185 345.080;

[(10)] (11) "Speech-language pathology aide", a person 186 187 who is registered as a speech-language aide by the board, 188 who does not act independently but works under the direction 189 and supervision of a licensed speech-language pathologist. Such person assists the speech-language pathologist with 190 191 activities which require an understanding of speech-language pathology but do not require formal training in the relevant 192 193 academics. To be eligible for registration by the board, 194 each applicant shall submit a registration fee and:

195

(a) Be at least eighteen years of age;

(b) Furnish evidence of the person's educationalqualifications which shall be at a minimum:

a. Certification of graduation from an accredited highschool or its equivalent; and

200

b. On-the-job training;

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

204 However, the aide shall not administer or interpret hearing205 screening or diagnostic tests, fit or dispense hearing

206 instruments, make ear impressions, make diagnostic 207 statements, determine case selection, present written 208 reports to anyone other than the supervisor without the signature of the supervisor, make referrals to other 209 210 professionals or agencies, use a title other than speech-211 language pathology aide, develop or modify treatment plans, 212 discharge clients from treatment or terminate treatment, 213 disclose clinical information, either orally or in writing, 214 to anyone other than the supervising speech-language 215 pathologist, or perform any procedure for which he or she is 216 not qualified, has not been adequately trained or both;

217 [(11)] (12) "Speech-language pathology assistant", a 218 person who is registered as a speech-language pathology 219 assistant by the board, who does not act independently but 220 works under the direction and supervision of a licensed 221 speech-language pathologist practicing for at least one year 222 or speech-language pathologist practicing under subdivision (1) or (6) of subsection 1 of section 345.025 for at least 223 224 one year and whose activities require both academic and practical training in the field of speech-language pathology 225 226 although less training than those established by sections 227 345.010 to 345.080 as necessary for licensing as a speechlanguage pathologist. To be eligible for registration by 228 229 the board, each applicant shall submit the registration fee, 230 supervising speech-language pathologist information if employment is confirmed, if not such information shall be 231 provided after registration, and furnish evidence of the 232 person's educational qualifications which meet the following: 233

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

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

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

345.022. 1. Any person in the person's clinical 2 fellowship shall hold a provisional license to practice speech-language pathology or audiology. The board may issue 3 4 a provisional license to an applicant who: 5 (1) Has met the requirements for practicum and 6 academic requirements from an accredited training program 7 under this chapter; 8 (2) Submits an application to the board on a form 9 prescribed by the board. Such form shall include a plan for 10 the content and supervision of the clinical fellowship, as 11 well as evidence of good moral and ethical character; and (3) Submits to the board an application fee, as set by 12 the board, for the provisional license. 13 14 2. A provisional license is effective for one year and may be extended for an additional twelve months only for 15 16 purposes of completing the postgraduate clinical experience 17 portion of the clinical fellowship; provided, that the 18 applicant has passed the national examination and shall hold 19 a master's degree from an approved training program in his 20 or her area of application. 3. Within twelve months of issuance of the provisional 21 22 license, the applicant shall pass an examination promulgated or approved by the board. 23 4. Within twelve months of issuance of a provisional 24 25 license, the applicant shall complete the requirements for

26 the master's or doctoral degree from a program accredited by 27 the Council on Academic Accreditation of the American Speech-28 Language-Hearing Association or other accrediting agency 29 approved by the board in the area in which licensure is 30 sought.

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

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

11 (2) Submit official transcripts from one or more 12 accredited colleges or universities presenting evidence of 13 the completion of course work and clinical practicum 14 requirements equivalent to that required by the Council on 15 Academic Accreditation of the American Speech-Language-16 Hearing Association or other accrediting agency approved by 17 the board; [and]

18 Present written evidence of completion of a (3) 19 clinical fellowship from supervisors. The experience 20 required by this subdivision shall follow the completion of 21 the requirements of subdivisions (1) and (2) of this 22 subsection. This period of employment shall be under the direct supervision of a person who is licensed by the state 23 of Missouri in the profession in which the applicant seeks 24 25 to be licensed. Persons applying with an audiology clinical doctoral degree are exempt from this provision; and 26

27 (4) Pass an examination promulgated or approved by the
28 board. The board shall determine the subject and scope of
29 the examinations.

30 [2. To be eligible for licensure by the board without 31 examination, each applicant shall make application on forms 32 prescribed by the board, submit the application fee, submit 33 an activity statement and meet one of the following 34 requirements:

35 The board shall issue a license to any speech-(1)36 language pathologist or audiologist who is licensed in another country and who has had no violations, suspension or 37 revocations of a license to practice speech-language 38 39 pathology or audiology in any jurisdiction; provided that, 40 such person is licensed in a country whose requirements are substantially equal to, or greater than, Missouri at the 41 42 time the applicant applies for licensure; or

43 (2) Hold the certificate of clinical competence issued
44 by the American Speech-Language-Hearing Association in the
45 area in which licensure is sought.]

345.052. 1. For purposes of this section, the 2 following terms mean: 3 (1) "Board", the Missouri board of registration for 4 the healing arts; (2) 5 "Commission", the advisory commission for speechlanguage pathologists and audiologists; 6 7 (3) "License", a license, certificate, registration, 8 permit, accreditation, or military occupational specialty 9 that enables a person to legally practice an occupation or profession in a particular jurisdiction; 10 "Military", the Armed Forces of the United States 11 (4) including the Air Force, Army, Coast Guard, Marine Corps, 12 Navy, Space Force, National Guard, and any other military 13 14 branch that is designated by Congress as part of the Armed

Forces of the United States, and all reserve components and 15 auxiliaries. Such term also includes the military reserves 16 17 and militia of the United States territory or state; "Nonresident military spouse", a nonresident 18 (5) 19 spouse of an active duty member of the Armed Forces of the 20 United States who has been transferred or is scheduled to be transferred to an adjacent state and is or will be domiciled 21 in the state of Missouri, or has moved to the state of 22 Missouri on a permanent change-of-station basis; 23 24 (6) "Resident military spouse", a spouse of an active duty member of the Armed Forces of the United States who has 25 been transferred or is scheduled to be transferred to the 26 27 state of Missouri, who is domiciled in the state of Missouri, or who has Missouri as his or her home of record. 28 2. Any person who holds a valid current speech-29 30 language pathologist or audiologist license issued by 31 another state, a branch or unit of the military, a territory of the United States, or the District of Columbia, and who 32 33 has been licensed for at least one year in the other jurisdiction, may submit an application for a speech-34 language pathologist or audiologist license in Missouri 35 along with proof of current licensure and proof of licensure 36 for at least one year in the other jurisdiction, to the 37 38 board. 39 3. The board shall: 40 (1) Within six months of receiving an application described in subsection 2 of this section, waive any 41 examination, educational, or experience requirements for 42 licensure in this state for the applicant if it determines 43 44 that there were minimum education requirements and, if applicable, work experience and clinical supervision 45 requirements in effect and the other state verifies that the 46 47 person met those requirements in order to be licensed or

48 <u>certified in that state. The board may require an applicant</u> 49 <u>to take and pass an examination specific to the laws of this</u> 50 <u>state; or</u>

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

58 4. (1) The board shall not waive any examination, 59 educational, or experience requirements for any applicant 60 who has had his or her license revoked by a board outside the state; who is currently under investigation, who has a 61 complaint pending, or who is currently under disciplinary 62 action, except as provided in subdivision (2) of this 63 subsection, with a board outside the state; who does not 64 hold a license in good standing with a board outside the 65 66 state; who has a criminal record that would disqualify him 67 or her for licensure in Missouri; or who does not hold a valid current license in the other jurisdiction on the date 68 the board receives his or her application under this section. 69 70 If another jurisdiction has taken disciplinary (2) action against an applicant, the board shall determine if 71 the cause for the action was corrected and the matter 72 73 resolved. If the matter has not been resolved by that 74 jurisdiction, the board may deny a license until the matter 75 is resolved. 5. Nothing in this section shall prohibit the board 76 77 from denying a license to an applicant under this section for any reason described in section 345.065. 78 6. Any person who is licensed under the provisions of 79

80 this section shall be subject to the board's jurisdiction

81	and all rules and regulations pertaining to the practice as
82	a speech-language pathologist or audiologist in this state.
83	7. This section shall not be construed to waive any
84	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
4	goal of improving public access to audiology and speech-
5	language pathology services. The practice of audiology and
6	speech-language pathology occurs in the state where the
7	patient/client/student is located at the time of the
8	patient/client/student encounter. The Compact preserves the
9	regulatory authority of states to protect public health and
10	safety through the current system of state licensure.
11	This Compact is designed to achieve the following
12	objectives:
13	1. Increase public access to audiology and speech-
14	language pathology services by providing for the mutual
15	recognition of other member state licenses;
16	2. Enhance the states' ability to protect the public's
17	health and safety;
18	3. Encourage the cooperation of member states in
19	regulating multistate audiology and speech-language
20	pathology practice;
21	4. Support spouses of relocating active duty military
22	personnel;
23	5. Enhance the exchange of licensure, investigative
24	and disciplinary information between member states;
25	6. Allow a remote state to hold a provider of services
26	with a compact privilege in that state accountable to that
27	state's practice standards; and

28	7. Allow for the use of telehealth technology to
29	facilitate increased access to audiology and speech-language
30	pathology services.
31	SECTION 2. DEFINITIONS
32	As used in this Compact, and except as otherwise
33	provided, the following definitions shall apply:
34	A. "Active duty military" means full-time duty status
35	in the active uniformed service of the United States,
36	including members of the National Guard and Reserve on
37	active duty orders pursuant to 10 U.S.C. Chapter 1209 and
38	<u>1211.</u>
39	B. "Adverse action" means any administrative, civil,
40	equitable or criminal action permitted by a state's laws
41	which is imposed by a licensing board or other authority
42	against an audiologist or speech-language pathologist,
43	including actions against an individual's license or
44	privilege to practice such as revocation, suspension,
45	probation, monitoring of the licensee, or restriction on the
46	licensee's practice.
47	C. "Alternative program" means a non-disciplinary
48	monitoring process approved by an audiology or speech-
49	language pathology licensing board to address impaired
50	practitioners.
51	D. "Audiologist" means an individual who is licensed
52	by a state to practice audiology.
53	E. "Audiology" means the care and services provided by
54	a licensed audiologist as set forth in the member state's
55	statutes and rules.
56	F. "Audiology and Speech-Language Pathology Compact
57	Commission" or "Commission" means the national
58	administrative body whose membership consists of all states
59	that have enacted the Compact.

60	G. "Audiology and speech-language pathology licensing
61	board," "audiology licensing board," "speech-language
62	pathology licensing board," or "licensing board" means the
63	agency of a state that is responsible for the licensing and
64	regulation of audiologists and/or speech-language
65	pathologists.
66	H. "Compact privilege" means the authorization granted
67	by a remote state to allow a licensee from another member
68	state to practice as an audiologist or speech-language
69	pathologist in the remote state under its laws and rules.
70	The practice of audiology or speech-language pathology
71	occurs in the member state where the patient/client/student
72	is located at the time of the patient/client/student
73	encounter.
74	I. "Current significant investigative information"
75	means investigative information that a licensing board,
76	after an inquiry or investigation that includes notification
77	and an opportunity for the audiologist or speech-language
78	pathologist to respond, if required by state law, has reason
79	to believe is not groundless and, if proved true, would
80	indicate more than a minor infraction.
81	J. "Data system" means a repository of information
82	about licensees, including, but not limited to, continuing
83	education, examination, licensure, investigative, compact
84	privilege and adverse action.
85	K. "Encumbered license" means a license in which an
86	adverse action restricts the practice of audiology or speech-
87	language pathology by the licensee and said adverse action
88	has been reported to the National Practitioners Data Bank
89	(NPDB).
90	L. "Executive Committee" means a group of directors
91	elected or appointed to act on behalf of, and within the
92	powers granted to them by, the Commission.

93	M. "Home state" means the member state that is the
94	licensee's primary state of residence.
95	N. "Impaired practitioner" means individuals whose
96	professional practice is adversely affected by substance
97	abuse, addiction, or other health-related conditions.
98	O. "Licensee" means an individual who currently holds
99	an authorization from the state licensing board to practice
100	as an audiologist or speech-language pathologist.
101	P. "Member state" means a state that has enacted the
102	Compact.
103	Q. "Privilege to practice" means a legal authorization
104	permitting the practice of audiology or speech-language
105	pathology in a remote state.
106	R. "Remote state" means a member state other than the
107	home state where a licensee is exercising or seeking to
108	exercise the compact privilege.
109	S. "Rule" means a regulation, principle or directive
109	S. "Rule" means a regulation, principle or directive
109 110	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law.
109 110 111	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech-
109 110 111 112	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that
109 110 111 112 113	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does
109 110 111 112 113 114	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member
109 110 111 112 113 114 115	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state.
109 110 111 112 113 114 115 116	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual
109 110 111 112 113 114 115 116 117	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual who is licensed by a state to practice speech-language
109 110 111 112 113 114 115 116 117 118	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual who is licensed by a state to practice speech-language pathology.
109 110 111 112 113 114 115 116 117 118 119	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual who is licensed by a state to practice speech-language pathology. V. "Speech-language pathology" means the care and
109 110 111 112 113 114 115 116 117 118 119 120	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual who is licensed by a state to practice speech-language pathology. V. "Speech-language pathology" means the care and services provided by a licensed speech-language pathologist
109 110 111 112 113 114 115 116 117 118 119 120 121	S. "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. T. "Single-state license" means an audiology or speech- language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state. U. "Speech-language pathologist" means an individual who is licensed by a state to practice speech-language pathology. V. "Speech-language pathology" means the care and services provided by a licensed speech-language pathologist as set forth in the member state's statutes and rules.

125 X. "State practice laws" means a member state's laws, rules and regulations that govern the practice of audiology 126 127 or speech-language pathology, define the scope of audiology or speech-language pathology practice, and create the 128 129 methods and grounds for imposing discipline. 130 "Telehealth" means the application of Υ. telecommunication technology to deliver audiology or speech-131 132 language pathology services at a distance for assessment, 133 intervention and/or consultation. 134 SECTION 3. STATE PARTICIPATION IN THE COMPACT A. A license issued to an audiologist or speech-135 136 language pathologist by a home state to a resident in that 137 state shall be recognized by each member state as authorizing an audiologist or speech-language pathologist to 138 practice audiology or speech-language pathology, under a 139 140 privilege to practice, in each member state. 141 B. A state must implement or utilize procedures for 142 considering the criminal history records of applicants for 143 initial privilege to practice. These procedures shall 144 include the submission of fingerprints or other biometricbased information by applicants for the purpose of obtaining 145 an applicant's criminal history record information from the 146 Federal Bureau of Investigation and the agency responsible 147 148 for retaining that state's criminal records. 149 1. A member state must fully implement a criminal 150 background check requirement, within a time frame 151 established by rule, by receiving the results of the Federal Bureau of Investigation record search on criminal background 152 checks and use the results in making licensure decisions. 153 154 2. Communication between a member state, the Commission and among member states regarding the 155 verification of eligibility for licensure through the 156 157 Compact shall not include any information received from the

158	Federal Bureau of Investigation relating to a federal
159	criminal records check performed by a member state under
160	Public Law 92-544.
161	C. Upon application for a privilege to practice, the
162	licensing board in the issuing remote state shall ascertain,
163	through the data system, whether the applicant has ever
164	held, or is the holder of, a license issued by any other
165	state, whether there are any encumbrances on any license or
166	privilege to practice held by the applicant, whether any
167	adverse action has been taken against any license or
168	privilege to practice held by the applicant.
169	D. Each member state shall require an applicant to
170	obtain or retain a license in the home state and meet the
171	home state's qualifications for licensure or renewal of
172	licensure, as well as, all other applicable state laws.
173	E. For an audiologist:
174	1. Must meet one of the following educational
175	requirements:
176	a. On or before, Dec. 31, 2007, has graduated with a
177	master's degree or doctorate in audiology, or equivalent
178	degree regardless of degree name, from a program that is
179	accredited by an accrediting agency recognized by the
180	Council for Higher Education Accreditation, or its
181	successor, or by the United States Department of Education
182	and operated by a college or university accredited by a
183	regional or national accrediting organization recognized by
184	the board; or
185	b. On or after, Jan. 1, 2008, has graduated with a
186	Doctoral degree in audiology, or equivalent degree,
187	regardless of degree name, from a program that is accredited
188	by an accrediting agency recognized by the Council for
189	Higher Education Accreditation, or its successor, or by the
190	United States Department of Education and operated by a

191	college or university accredited by a regional or national
192	accrediting organization recognized by the board; or
193	c. Has graduated from an audiology program that is
194	housed in an institution of higher education outside of the
195	United States (a) for which the program and institution have
196	been approved by the authorized accrediting body in the
197	applicable country and (b) the degree program has been
198	verified by an independent credentials review agency to be
199	comparable to a state licensing board-approved program.
200	2. Has completed a supervised clinical practicum
201	experience from an accredited educational institution or its
202	cooperating programs as required by the Commission;
203	3. Has successfully passed a national examination
204	approved by the Commission;
205	4. Holds an active, unencumbered license;
206	5. Has not been convicted or found guilty, and has not
207	entered into an agreed disposition, of a felony related to
208	the practice of audiology, under applicable state or federal
209	criminal law;
210	6. Has a valid United States Social Security or
211	National Practitioner Identification number.
212	F. For a speech-language pathologist:
213	1. Must meet one of the following educational
214	requirements:
215	a. Has graduated with a master's degree from a speech-
216	language pathology program that is accredited by an
217	organization recognized by the United States Department of
218	Education and operated by a college or university accredited
219	by a regional or national accrediting organization
220	recognized by the board; or
221	b. Has graduated from a speech-language pathology
222	program that is housed in an institution of higher education
223	outside of the United States (a) for which the program and

224	institution have been approved by the authorized accrediting
225	body in the applicable country and (b) the degree program
226	has been verified by an independent credentials review
227	agency to be comparable to a state licensing board-approved
228	program.
229	2. Has completed a supervised clinical practicum
230	experience from an educational institution or its
231	cooperating programs as required by the Commission;
232	3. Has completed a supervised postgraduate
233	professional experience as required by the Commission;
234	4. Has successfully passed a national examination
235	approved by the Commission;
236	5. Holds an active, unencumbered license;
237	6. Has not been convicted or found guilty, and has not
238	entered into an agreed disposition, of a felony related to
239	the practice of speech-language pathology, under applicable
240	state or federal criminal law;
241	7. Has a valid United States Social Security or
242	National Practitioner Identification number.
243	G. The privilege to practice is derived from the home
244	state license.
245	H. An audiologist or speech-language pathologist
246	practicing in a member state must comply with the state
247	practice laws of the state in which the client is located at
248	the time service is provided. The practice of audiology and
249	speech-language pathology shall include all audiology and
250	speech-language pathology practice as defined by the state
251	practice laws of the member state in which the client is
252	located. The practice of audiology and speech-language
253	pathology in a member state under a privilege to practice
254	shall subject an audiologist or speech-language pathologist
255	to the jurisdiction of the licensing board, the courts and

256	the laws of the member state in which the client is located
257	at the time service is provided.
258	I. Individuals not residing in a member state shall
259	continue to be able to apply for a member state's single-
260	state license as provided under the laws of each member
261	state. However, the single-state license granted to these
262	individuals shall not be recognized as granting the
263	privilege to practice audiology or speech-language pathology
264	in any other member state. Nothing in this Compact shall
265	affect the requirements established by a member state for
266	the issuance of a single-state license.
267	J. Member states may charge a fee for granting a
268	compact privilege.
269	K. Member states must comply with the bylaws and rules
270	and regulations of the Commission.
271	SECTION 4. COMPACT PRIVILEGE
272	A. To exercise the compact privilege under the terms
273	and provisions of the Compact, the audiologist or speech-
274	language pathologist shall:
275	1. Hold an active license in the home state;
276	2. Have no encumbrance on any state license;
277	3. Be eligible for a compact privilege in any member
278	state in accordance with Section 3;
279	4. Have not had any adverse action against any license
280	or compact privilege within the previous 2 years from date
281	of application;
282	5. Notify the Commission that the licensee is seeking
283	the compact privilege within a remote state(s);
284	6. Pay any applicable fees, including any state fee,
285	for the compact privilege;
286	7. Report to the Commission adverse action taken by
287	any non-member state within 30 days from the date the
288	adverse action is taken.

289	B. For the purposes of the compact privilege, an
290	audiologist or speech-language pathologist shall only hold
291	one home state license at a time.
292	C. Except as provided in Section 6, if an audiologist
293	or speech-language pathologist changes primary state of
294	residence by moving between two-member states, the
295	audiologist or speech-language pathologist must apply for
296	licensure in the new home state, and the license issued by
297	the prior home state shall be deactivated in accordance with
298	applicable rules adopted by the Commission.
299	D. The audiologist or speech-language pathologist may
300	apply for licensure in advance of a change in primary state
301	of residence.
302	E. A license shall not be issued by the new home state
303	until the audiologist or speech-language pathologist
304	provides satisfactory evidence of a change in primary state
305	of residence to the new home state and satisfies all
306	applicable requirements to obtain a license from the new
307	home state.
308	F. If an audiologist or speech-language pathologist
309	changes primary state of residence by moving from a member
310	state to a non-member state, the license issued by the prior
311	home state shall convert to a single-state license, valid
312	only in the former home state.
313	G. The compact privilege is valid until the expiration
314	date of the home state license. The licensee must comply
315	with the requirements of Section 4A to maintain the compact
316	privilege in the remote state.
317	H. A licensee providing audiology or speech-language
318	pathology services in a remote state under the compact
319	privilege shall function within the laws and regulations of
320	the remote state.

321	I. A licensee providing audiology or speech-language
322	pathology services in a remote state is subject to that
323	state's regulatory authority. A remote state may, in
324	accordance with due process and that state's laws, remove a
325	licensee's compact privilege in the remote state for a
326	specific period of time, impose fines, and/or take any other
327	necessary actions to protect the health and safety of its
328	citizens.
329	J. If a home state license is encumbered, the licensee
330	shall lose the compact privilege in any remote state until
331	the following occur:
332	1. The home state license is no longer encumbered; and
333	2. Two years have elapsed from the date of the adverse
334	action.
335	K. Once an encumbered license in the home state is
336	restored to good standing, the licensee must meet the
337	requirements of Section 4A to obtain a compact privilege in
338	any remote state.
339	L. Once the requirements of Section 4J have been met,
340	the licensee must meet the requirements in Section 4A to
341	<u>obtain a compact privilege in a remote state.</u>
342	SECTION 5. COMPACT PRIVILEGE TO PRACTICE TELEHEALTH
343	Member states shall recognize the right of an
344	audiologist or speech-language pathologist, licensed by a
345	home state in accordance with Section 3 and under rules
346	promulgated by the Commission, to practice audiology or
347	speech-language pathology in any member state via telehealth
348	under a privilege to practice as provided in the Compact and
349	rules promulgated by the Commission.
350	SECTION 6. ACTIVE DUTY MILITARY PERSONNEL OR THEIR
351	SPOUSES
352	Active duty military personnel, or their spouse, shall
353	designate a home state where the individual has a current

license in good standing. The individual may retain the 354 355 home state designation during the period the service member 356 is on active duty. Subsequent to designating a home state, the individual shall only change their home state through 357 application for licensure in the new state. 358 359 SECTION 7. ADVERSE ACTIONS In addition to the other powers conferred by state 360 Α. 361 law, a remote state shall have the authority, in accordance 362 with existing state due process law, to: 363 1. Take adverse action against an audiologist's or speech-language pathologist's privilege to practice within 364 365 that member state. 366 2. Issue subpoenas for both hearings and investigations that require the attendance and testimony of 367 witnesses as well as the production of evidence. Subpoenas 368 369 issued by a licensing board in a member state for the 370 attendance and testimony of witnesses or the production of 371 evidence from another member state shall be enforced in the 372 latter state by any court of competent jurisdiction, 373 according to the practice and procedure of that court 374 applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, 375 travel expenses, mileage and other fees required by the 376 377 service statutes of the state in which the witnesses or 378 evidence are located. 379 3. Only the home state shall have the power to take 380 adverse action against a audiologist's or speech-language pathologist's license issued by the home state. 381 B. For purposes of taking adverse action, the home 382 383 state shall give the same priority and effect to reported conduct received from a member state as it would if the 384 conduct had occurred within the home state. In so doing, 385

386 the home state shall apply its own state laws to determine 387 appropriate action. 388 C. The home state shall complete any pending investigations of an audiologist or speech-language 389 390 pathologist who changes primary state of residence during 391 the course of the investigations. The home state shall also 392 have the authority to take appropriate action(s) and shall 393 promptly report the conclusions of the investigations to the 394 administrator of the data system. The administrator of the 395 coordinated licensure information system shall promptly 396 notify the new home state of any adverse actions. D. If otherwise permitted by state law, the member 397 398 state may recover from the affected audiologist or speech-399 language pathologist the costs of investigations and 400 disposition of cases resulting from any adverse action taken 401 against that audiologist or speech-language pathologist. 402 The member state may take adverse action based on Ε. the factual findings of the remote state, provided that the 403 404 member state follows the member state's own procedures for 405 taking the adverse action. F. Joint Investigations: 406 407 1. In addition to the authority granted to a member state by its respective audiology or speech-language 408 409 pathology practice act or other applicable state law, any 410 member state may participate with other member states in 411 joint investigations of licensees. 2. Member states shall share any investigative, 412 litigation, or compliance materials in furtherance of any 413 joint or individual investigation initiated under the 414 415 Compact. G. If adverse action is taken by the home state 416 against an audiologist's or speech-language pathologist's 417 418 license, the audiologist's or speech-language pathologist's

419	privilege to practice in all other member states shall be
420	deactivated until all encumbrances have been removed from
421	the state license. All home state disciplinary orders that
422	impose adverse action against an audiologist's or speech-
423	language pathologist's license shall include a statement
424	that the audiologist's or speech-language pathologist's
425	privilege to practice is deactivated in all member states
426	during the pendency of the order.
427	H. If a member state takes adverse action, it shall
428	promptly notify the administrator of the data system. The
429	administrator of the data system shall promptly notify the
430	home state of any adverse actions by remote states.
431	I. Nothing in this Compact shall override a member
432	state's decision that participation in an alternative
433	program may be used in lieu of adverse action.
434	SECTION 8. ESTABLISHMENT OF THE AUDIOLOGY AND SPEECH-
435	LANGUAGE PATHOLOGY COMPACT COMMISSION
436	A. The Compact member states hereby create and
437	establish a joint public agency known as the Audiology and
438	Speech-Language Pathology Compact Commission:
439	1. The Commission is an instrumentality of the Compact
440	states.
441	2. Venue is proper and judicial proceedings by or
442	against the Commission shall be brought solely and
443	exclusively in a court of competent jurisdiction where the
444	principal office of the Commission is located. The
445	Commission may waive venue and jurisdictional defenses to
446	the extent it adopts or consents to participate in
447	alternative dispute resolution proceedings.
448	3. Nothing in this Compact shall be construed to be a
449	waiver of sovereign immunity.
450	B. Membership, Voting and Meetings:

451	1. Each member state shall have two (2) delegates
452	selected by that member state's licensing board. The
453	delegates shall be current members of the licensing board.
454	One shall be an audiologist and one shall be a speech-
455	language pathologist.
456	2. An additional five (5) delegates, who are either a
457	public member or board administrator from a state licensing
458	board, shall be chosen by the Executive Committee from a
459	pool of nominees provided by the Commission at Large.
460	3. Any delegate may be removed or suspended from
461	office as provided by the law of the state from which the
462	delegate is appointed.
463	4. The member state board shall fill any vacancy
464	occurring on the Commission, within 90 days.
465	5. Each delegate shall be entitled to one (1) vote
466	with regard to the promulgation of rules and creation of
467	bylaws and shall otherwise have an opportunity to
468	participate in the business and affairs of the Commission.
469	6. A delegate shall vote in person or by other means
470	as provided in the bylaws. The bylaws may provide for
471	delegates' participation in meetings by telephone or other
472	means of communication.
473	7. The Commission shall meet at least once during each
474	calendar year. Additional meetings shall be held as set
475	forth in the bylaws.
476	C. The Commission shall have the following powers and
477	duties:
478	1. Establish the fiscal year of the Commission;
479	2. Establish bylaws;
480	3. Establish a Code of Ethics;
481	4. Maintain its financial records in accordance with
482	the bylaws;

483	5. Meet and take actions as are consistent with the
484	provisions of this Compact and the bylaws;
485	6. Promulgate uniform rules to facilitate and
486	coordinate implementation and administration of this
487	Compact. The rules shall have the force and effect of law
488	and shall be binding in all member states;
489	7. Bring and prosecute legal proceedings or actions in
490	the name of the Commission, provided that the standing of
491	any state audiology or speech-language pathology licensing
492	board to sue or be sued under applicable law shall not be
493	affected;
494	8. Purchase and maintain insurance and bonds;
495	9. Borrow, accept, or contract for services of
496	personnel, including, but not limited to, employees of a
497	member state;
498	10. Hire employees, elect or appoint officers, fix
499	compensation, define duties, grant individuals appropriate
500	authority to carry out the purposes of the Compact, and to
501	establish the Commission's personnel policies and programs
502	relating to conflicts of interest, qualifications of
503	personnel, and other related personnel matters;
504	11. Accept any and all appropriate donations and
505	grants of money, equipment, supplies, materials and
506	services, and to receive, utilize and dispose of the same;
507	provided that at all times the Commission shall avoid any
508	appearance of impropriety and/or conflict of interest;
509	12. Lease, purchase, accept appropriate gifts or
510	donations of, or otherwise to own, hold, improve or use, any
511	property, real, personal or mixed; provided that at all
512	times the Commission shall avoid any appearance of
513	impropriety;

514	13. Sell, convey, mortgage, pledge, lease, exchange,
515	abandon, or otherwise dispose of any property real,
516	personal, or mixed;
517	14. Establish a budget and make expenditures;
518	15. Borrow money;
519	16. Appoint committees, including standing committees
520	composed of members, and other interested persons as may be
521	designated in this Compact and the bylaws;
522	17. Provide and receive information from, and
523	cooperate with, law enforcement agencies;
524	18. Establish and elect an Executive Committee; and
525	19. Perform other functions as may be necessary or
526	appropriate to achieve the purposes of this Compact
527	consistent with the state regulation of audiology and speech-
528	language pathology licensure and practice.
529	D. The Executive Committee
530	The Eucoutine Committee shall have the percented at an
550	The Executive Committee shall have the power to act on
531	behalf of the Commission according to the terms of this
531	behalf of the Commission according to the terms of this
531 532	behalf of the Commission according to the terms of this Compact:
531 532 533	behalf of the Commission according to the terms of this Compact: <u>1. The Executive Committee shall be composed of ten</u>
531 532 533 534	behalf of the Commission according to the terms of this <u>Compact:</u> <u>1. The Executive Committee shall be composed of ten</u> (10) members:
531 532 533 534 535	behalf of the Commission according to the terms of this <u>Compact:</u> <u>1. The Executive Committee shall be composed of ten</u> (10) members: <u>a. Seven (7) voting members who are elected by the</u>
531 532 533 534 535 536	behalf of the Commission according to the terms of this <u>Compact:</u> <u>1. The Executive Committee shall be composed of ten</u> (10) members: <u>a. Seven (7) voting members who are elected by the</u> <u>Commission from the current membership of the Commission;</u>
531 532 533 534 535 536 537	behalf of the Commission according to the terms of this <u>Compact:</u> <u>1. The Executive Committee shall be composed of ten</u> (10) members: <u>a. Seven (7) voting members who are elected by the</u> <u>Commission from the current membership of the Commission;</u> <u>b. Two (2) ex-officios, consisting of one nonvoting</u>
531 532 533 534 535 536 537 538	behalf of the Commission according to the terms of this <u>Compact:</u> <u>1. The Executive Committee shall be composed of ten</u> (10) members: <u>a. Seven (7) voting members who are elected by the</u> <u>Commission from the current membership of the Commission;</u> <u>b. Two (2) ex-officios, consisting of one nonvoting</u> <u>member from a recognized national audiology professional</u>
531 532 533 534 535 536 537 538 539	behalf of the Commission according to the terms of this Compact: 1. The Executive Committee shall be composed of ten (10) members: a. Seven (7) voting members who are elected by the Commission from the current membership of the Commission; b. Two (2) ex-officios, consisting of one nonvoting member from a recognized national audiology professional association and one nonvoting member from a recognized
531 532 533 534 535 536 537 538 539 540	behalf of the Commission according to the terms of this         Compact:         1. The Executive Committee shall be composed of ten         (10) members:         a. Seven (7) voting members who are elected by the         Commission from the current membership of the Commission;         b. Two (2) ex-officios, consisting of one nonvoting         member from a recognized national audiology professional         association and one nonvoting member from a recognized         national speech-language pathology association; and
531 532 533 534 535 536 537 538 539 540 541	behalf of the Commission according to the terms of this         Compact:         1. The Executive Committee shall be composed of ten         (10) members:         a. Seven (7) voting members who are elected by the         Commission from the current membership of the Commission;         b. Two (2) ex-officios, consisting of one nonvoting         member from a recognized national audiology professional         association and one nonvoting member from a recognized         national speech-language pathology association; and         c. One (1) ex-officio, nonvoting member from the
531 532 533 534 535 536 537 538 539 540 541 542	behalf of the Commission according to the terms of this         Compact:         1. The Executive Committee shall be composed of ten         (10) members:         a. Seven (7) voting members who are elected by the         Commission from the current membership of the Commission;         b. Two (2) ex-officios, consisting of one nonvoting         member from a recognized national audiology professional         association and one nonvoting member from a recognized         national speech-language pathology association; and         c. One (1) ex-officio, nonvoting member from the         recognized membership of the audiology and

546	1. The Commission may remove any member of the
547	Executive Committee as provided in bylaws.
548	2. The Executive Committee shall meet at least
549	annually.
550	3. The Executive Committee shall have the following
551	duties and responsibilities:
552	a. Recommend to the entire Commission changes to the
553	rules or bylaws, changes to this Compact legislation, fees
554	paid by Compact member states such as annual dues, and any
555	commission Compact fee charged to licensees for the compact
556	privilege;
557	b. Ensure Compact administration services are
558	appropriately provided, contractual or otherwise;
559	c. Prepare and recommend the budget;
560	d. Maintain financial records on behalf of the
561	Commission;
562	e. Monitor Compact compliance of member states and
563	provide compliance reports to the Commission;
564	f. Establish additional committees as necessary; and
565	g. Other duties as provided in rules or bylaws.
566	4. Meetings of the Commission
567	All meetings shall be open to the public, and public
568	notice of meetings shall be given in the same manner as
569	required under the rulemaking provisions in Section 10.
570	5. The Commission or the Executive Committee or other
571	committees of the Commission may convene in a closed, non-
572	public meeting if the Commission or Executive Committee or
573	other committees of the Commission must discuss:
574	a. Non-compliance of a member state with its
575	obligations under the Compact;
576	
570	b. The employment, compensation, discipline or other

578	employees or other matters related to the Commission's
579	internal personnel practices and procedures;
580	c. Current, threatened, or reasonably anticipated
581	litigation;
582	d. Negotiation of contracts for the purchase, lease,
583	or sale of goods, services, or real estate;
584	e. Accusing any person of a crime or formally
585	censuring any person;
586	f. Disclosure of trade secrets or commercial or
587	financial information that is privileged or confidential;
588	g. Disclosure of information of a personal nature
589	where disclosure would constitute a clearly unwarranted
590	invasion of personal privacy;
591	h. Disclosure of investigative records compiled for
592	law enforcement purposes;
593	i. Disclosure of information related to any
594	investigative reports prepared by or on behalf of or for use
595	of the Commission or other committee charged with
596	responsibility of investigation or determination of
597	compliance issues pursuant to the Compact; or
598	j. Matters specifically exempted from disclosure by
599	federal or member state statute.
600	6. If a meeting, or portion of a meeting, is closed
601	pursuant to this provision, the Commission's legal counsel
602	or designee shall certify that the meeting may be closed and
603	shall reference each relevant exempting provision.
604	7. The Commission shall keep minutes that fully and
605	clearly describe all matters discussed in a meeting and
606	shall provide a full and accurate summary of actions taken,
607	and the reasons therefore, including a description of the
608	views expressed. All documents considered in connection
609	with an action shall be identified in minutes. All minutes
610	and documents of a closed meeting shall remain under seal,

611 subject to release by a majority vote of the Commission or 612 order of a court of competent jurisdiction. 613 8. Financing of the Commission: a. The Commission shall pay, or provide for the 614 615 payment of, the reasonable expenses of its establishment, organization, and ongoing activities. 616 b. 617 The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, 618 619 supplies, materials, and services. 620 с. The Commission may levy on and collect an annual assessment from each member state or impose fees on other 621 parties to cover the cost of the operations and activities 622 623 of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved 624 625 each year for which revenue is not provided by other 626 sources. The aggregate annual assessment amount shall be 627 allocated based upon a formula to be determined by the Commission, which shall promulgate a rule binding upon all 628 629 member states. 630 9. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; 631 nor shall the Commission pledge the credit of any of the 632 member states, except by and with the authority of the 633 634 member state. 635 10. The Commission shall keep accurate accounts of all 636 receipts and disbursements. The receipts and disbursements 637 of the Commission shall be subject to the audit and accounting procedures established under its bylaws. 638 However, all receipts and disbursements of funds handled by 639 640 the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit 641 shall be included in and become part of the annual report of 642 643 the Commission.

644	F. Qualified Immunity, Defense, and Indemnification:
645	1. The members, officers, executive director,
646	employees and representatives of the Commission shall be
647	immune from suit and liability, either personally or in
648	their official capacity, for any claim for damage to or loss
649	of property or personal injury or other civil liability
650	caused by or arising out of any actual or alleged act, error
651	or omission that occurred, or that the person against whom
652	the claim is made had a reasonable basis for believing
653	occurred within the scope of Commission employment, duties
654	or responsibilities; provided that nothing in this paragraph
655	shall be construed to protect any person from suit and/or
656	liability for any damage, loss, injury, or liability caused
657	by the intentional or willful or wanton misconduct of that
658	person.
659	2. The Commission shall defend any member, officer,
660	executive director, employee or representative of the
661	Commission in any civil action seeking to impose liability
662	arising out of any actual or alleged act, error, or omission
663	that occurred within the scope of Commission employment,
664	duties, or responsibilities, or that the person against whom
665	the claim is made had a reasonable basis for believing
666	occurred within the scope of Commission employment, duties,
667	or responsibilities; provided that nothing herein shall be
668	construed to prohibit that person from retaining his or her
669	own counsel; and provided further, that the actual or
670	alleged act, error, or omission did not result from that
671	person's intentional or willful or wanton misconduct.
672	3. The Commission shall indemnify and hold harmless
673	any member, officer, executive director, employee, or
674	representative of the Commission for the amount of any
675	settlement or judgment obtained against that person arising
676	out of any actual or alleged act, error or omission that

677	occurred within the scope of Commission employment, duties,
678	or responsibilities, or that person had a reasonable basis
679	for believing occurred within the scope of Commission
680	employment, duties, or responsibilities, provided that the
681	actual or alleged act, error, or omission did not result
682	from the intentional or willful or wanton misconduct of that
683	person.
684	SECTION 9. DATA SYSTEM
685	A. The Commission shall provide for the development,
686	maintenance, and utilization of a coordinated database and
687	reporting system containing licensure, adverse action, and
688	investigative information on all licensed individuals in
689	member states.
690	B. Notwithstanding any other provision of state law to
691	the contrary, a member state shall submit a uniform data set
692	to the data system on all individuals to whom this Compact
693	is applicable as required by the rules of the Commission,
694	including:
695	1. Identifying information;
696	2. Licensure data;
697	3. Adverse actions against a license or compact
698	privilege;
699	4. Non-confidential information related to alternative
700	program participation;
701	5. Any denial of application for licensure, and the
702	reason(s) for denial; and
703	6. Other information that may facilitate the
704	administration of this Compact, as determined by the rules
705	of the Commission.
706	C. Investigative information pertaining to a licensee
707	in any member state shall only be available to other member

709	D. The Commission shall promptly notify all member
710	states of any adverse action taken against a licensee or an
711	individual applying for a license. Adverse action
712	information pertaining to a licensee in any member state
713	shall be available to any other member state.
714	E. Member states contributing information to the data
715	system may designate information that may not be shared with
716	the public without the express permission of the
717	contributing state.
718	F. Any information submitted to the data system that
719	is subsequently required to be expunged by the laws of the
720	member state contributing the information shall be removed
721	from the data system.
722	SECTION 10. RULEMAKING
723	A. The Commission shall exercise its rulemaking powers
724	pursuant to the criteria set forth in this Section and the
725	rules adopted thereunder. Rules and amendments shall become
726	binding as of the date specified in each rule or amendment.
727	B. If a majority of the legislatures of the member
728	states rejects a rule, by enactment of a statute or
729	resolution in the same manner used to adopt the Compact
730	within 4 years of the date of adoption of the rule, the rule
731	shall have no further force and effect in any member state.
732	C. Rules or amendments to the rules shall be adopted
733	at a regular or special meeting of the Commission.
734	D. Prior to promulgation and adoption of a final rule
735	or rules by the Commission, and at least thirty (30) days in
736	advance of the meeting at which the rule shall be considered
737	and voted upon, the Commission shall file a Notice of
738	Proposed Rulemaking:
739	1. On the website of the Commission or other publicly
740	accessible platform; and

741	2. On the website of each member state audiology or
742	speech-language pathology licensing board or other publicly
743	accessible platform or the publication in which each state
744	would otherwise publish proposed rules.
745	E. The Notice of Proposed Rulemaking shall include:
746	1. The proposed time, date, and location of the
747	meeting in which the rule shall be considered and voted upon;
748	2. The text of the proposed rule or amendment and the
749	reason for the proposed rule;
750	3. A request for comments on the proposed rule from
751	any interested person; and
752	4. The manner in which interested persons may submit
753	notice to the Commission of their intention to attend the
754	public hearing and any written comments.
755	F. Prior to the adoption of a proposed rule, the
756	Commission shall allow persons to submit written data,
757	facts, opinions and arguments, which shall be made available
758	to the public.
759	G. The Commission shall grant an opportunity for a
760	public hearing before it adopts a rule or amendment if a
761	hearing is requested by:
762	1. At least twenty-five (25) persons;
763	2. A state or federal governmental subdivision or
764	agency; or
765	3. An association having at least twenty-five (25)
766	members.
767	H. If a hearing is held on the proposed rule or
768	amendment, the Commission shall publish the place, time, and
769	date of the scheduled public hearing. If the hearing is
770	held via electronic means, the Commission shall publish the
771	mechanism for access to the electronic hearing.
772	1. All persons wishing to be heard at the hearing
773	shall notify the executive director of the Commission or

774	other designated member in writing of their desire to appear
775	and testify at the hearing not less than five (5) business
776	days before the scheduled date of the hearing.
777	2. Hearings shall be conducted in a manner providing
778	each person who wishes to comment a fair and reasonable
779	opportunity to comment orally or in writing.
780	3. All hearings shall be recorded. A copy of the
781	recording shall be made available on request.
782	4. Nothing in this section shall be construed as
783	requiring a separate hearing on each rule. Rules may be
784	grouped for the convenience of the Commission at hearings
785	required by this section.
786	I. Following the scheduled hearing date, or by the
787	close of business on the scheduled hearing date if the
788	hearing was not held, the Commission shall consider all
789	written and oral comments received.
790	J. If no written notice of intent to attend the public
791	hearing by interested parties is received, the Commission
792	may proceed with promulgation of the proposed rule without a
793	public hearing.
794	K. The Commission shall, by majority vote of all
795	members, take final action on the proposed rule and shall
796	determine the effective date of the rule, if any, based on
797	the rulemaking record and the full text of the rule.
798	L. Upon determination that an emergency exists, the
799	Commission may consider and adopt an emergency rule without
800	prior notice, opportunity for comment, or hearing, provided
801	that the usual rulemaking procedures provided in the Compact
802	and in this section shall be retroactively applied to the
803	rule as soon as reasonably possible, in no event later than
804	ninety (90) days after the effective date of the rule. For
805	the purposes of this provision, an emergency rule is one
806	that must be adopted immediately in order to:

807	1. Meet an imminent threat to public health, safety,
808	or welfare;
809	2. Prevent a loss of Commission or member state funds;
810	or
811	3. Meet a deadline for the promulgation of an
812	administrative rule that is established by federal law or
813	<u>rule.</u>
814	M. The Commission or an authorized committee of the
815	Commission may direct revisions to a previously adopted rule
816	or amendment for purposes of correcting typographical
817	errors, errors in format, errors in consistency, or
818	grammatical errors. Public notice of any revisions shall be
819	posted on the website of the Commission. The revision shall
820	be subject to challenge by any person for a period of thirty
821	(30) days after posting. The revision may be challenged
822	only on grounds that the revision results in a material
823	change to a rule. A challenge shall be made in writing and
824	delivered to the chair of the Commission prior to the end of
825	the notice period. If no challenge is made, the revision
826	shall take effect without further action. If the revision
827	is challenged, the revision may not take effect without the
828	approval of the Commission.
829	SECTION 11. OVERSIGHT, DISPUTE RESOLUTION, AND
830	ENFORCEMENT
831	A. Dispute Resolution
832	1. Upon request by a member state, the Commission
833	shall attempt to resolve disputes related to the Compact
834	that arise among member states and between member and non-
835	member states.
836	2. The Commission shall promulgate a rule providing
837	for both mediation and binding dispute resolution for
838	disputes as appropriate.
839	B. Enforcement

840	1. The Commission, in the reasonable exercise of its
841	discretion, shall enforce the provisions and rules of this
842	Compact.
843	2. By majority vote, the Commission may initiate legal
844	action in the United States District Court for the District
845	of Columbia or the federal district where the Commission has
846	its principal offices against a member state in default to
847	enforce compliance with the provisions of the Compact and
848	its promulgated rules and bylaws. The relief sought may
849	include both injunctive relief and damages. In the event
850	judicial enforcement is necessary, the prevailing member
851	shall be awarded all costs of litigation, including
852	reasonable attorney's fees.
853	3. The remedies herein shall not be the exclusive
854	remedies of the Commission. The Commission may pursue any
855	other remedies available under federal or state law.
856	SECTION 12. DATE OF IMPLEMENTATION OF THE INTERSTATE
856 857	SECTION 12. DATE OF IMPLEMENTATION OF THE INTERSTATE COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY
857	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY
857 858	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT
857 858 859	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on
857 858 859 860	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th
857 858 859 860 861	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at
857 858 859 860 861 862	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the
857 858 859 860 861 862 863	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of
857 858 859 860 861 862 863 864	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise
857 858 859 860 861 862 863 864 865	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and
857 858 859 860 861 862 863 864 865 866	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact.
857 858 859 860 861 862 863 864 865 866 866	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact. B. Any state that joins the Compact subsequent to the
857 858 859 860 861 862 863 864 865 866 866 867 868	COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact. B. Any state that joins the Compact subsequent to the Commission's initial adoption of the rules shall be subject

72	force and effect of law on the day the Compact becomes law
73	in that state.
74	C. Any member state may withdraw from this Compact by
75	enacting a statute repealing the same.
76	1. A member state's withdrawal shall not take effect
77	until six (6) months after enactment of the repealing
78	statute.
79	2. Withdrawal shall not affect the continuing
80	requirement of the withdrawing state's audiology or speech-
81	language pathology licensing board to comply with the
32	investigative and adverse action reporting requirements of
33	this act prior to the effective date of withdrawal.
34	D. Nothing contained in this Compact shall be
85	construed to invalidate or prevent any audiology or speech-
6	language pathology licensure agreement or other cooperative
7	arrangement between a member state and a non-member state
8	that does not conflict with the provisions of this Compact.
)	E. This Compact may be amended by the member states.
	No amendment to this Compact shall become effective and
	binding upon any member state until it is enacted into the
	laws of all member states.
	SECTION 13. CONSTRUCTION AND SEVERABILITY
	This Compact shall be liberally construed so as to
	effectuate the purposes thereof. The provisions of this
	Compact shall be severable and if any phrase, clause,
	sentence or provision of this Compact is declared to be
	contrary to the constitution of any member state or of the
	United States or the applicability thereof to any
	government, agency, person or circumstance is held invalid,
L	the validity of the remainder of this Compact and the
	applicability thereof to any government, agency, person or
3	circumstance shall not be affected thereby. If this Compact
4	shall be held contrary to the constitution of any member

905	state, the Compact shall remain in full force and effect as
906	to the remaining member states and in full force and effect
907	as to the member state affected as to all severable matters.
908	SECTION 14. BINDING EFFECT OF COMPACT AND OTHER LAWS
909	A. Nothing herein prevents the enforcement of any
910	other law of a member state that is not inconsistent with
911	the Compact.
912	B. All laws in a member state in conflict with the
913	Compact are superseded to the extent of the conflict.
914	C. All lawful actions of the Commission, including all
915	rules and bylaws promulgated by the Commission, are binding
916	upon the member states.
917	D. All agreements between the Commission and the
918	member states are binding in accordance with their terms.
919	E. In the event any provision of the Compact exceeds
920	the constitutional limits imposed on the legislature of any
921	member state, the provision shall be ineffective to the
922	extent of the conflict with the constitutional provision in
923	question in that member state.

Section B. Because of the urgent need of low-income 2 Missouri residents for access to quality health care services, the enactment of section 324.005 of this act is 3 4 deemed necessary for the immediate preservation of the public health, welfare, peace, and safety, and is hereby 5 6 declared to be an emergency act within the meaning of the constitution, and the enactment of section 324.005 of this 7 8 act shall be in full force and effect upon its passage and 9 approval.