The Senate met pursuant to adjournment.

President Kehoe in the Chair.

The Reverend Carl Gauck offered the following prayer:

“The prayer of the righteous is powerful and effective.” (James 5:15)

Heavenly Father, we thank You for the attentiveness You give to the prayers of Your people. We are strengthened by knowing that we, who come before You in prayer, that You provide us the persistence to remain faithful in our praying and the work that flows from them. Make us particularly mindful for the opportunities we may have together so that we may deal with the difficulties of life and this time in our lives. Help us help the people of our state to face what needs to be done so that we ensure justice and care for one another. In Your Holy Name we pray. Amen.

The Pledge of Allegiance to the Flag was recited.

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

The Journal of the previous day was read and approved.

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

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<th>Present—Senators</th>
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<td>Arthur</td>
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<td>Onder</td>
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<td>Schupp</td>
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Absent—Senators—None

Absent with leave—Senators—None

Vacancies—None

The Lieutenant Governor was present.

Senator Bean assumed the Chair.
Senator Thompson Rehder assumed the Chair.

RESOLUTIONS

Senator Riddle offered Senate Resolution No. 774, regarding Macy Beckemeier, Winfield, which was adopted.

Senator Riddle offered Senate Resolution No. 775, regarding Nicole Hofmann, Troy, which was adopted.

Senator Riddle offered Senate Resolution No. 776, regarding Brick District Playhouse, Fulton, which was adopted.

Senator Washington offered Senate Resolution No. 777, regarding Metropolitan Community College, which was adopted.

Senator Razer offered Senate Resolution No. 778, regarding Monarch Storage Building, Kansas City, which was adopted.

Senator Washington offered Senate Resolution No. 779, regarding Jayden Hasam, Kansas City, which was adopted.

Senator Eslinger offered Senate Resolution No. 780, regarding Shelly Hess, West Plains, which was adopted.

Senator Rowden offered the following resolution:

SENATE RESOLUTION NO. 781

WHEREAS, the Missouri General Assembly has compiled a long tradition of rendering assistance to those programs aimed at developing exemplary qualities of citizenship and leadership within our youth; and

WHEREAS, the Missouri Girls State program of the American Legion Auxiliary has earned considerable recognition for its success in providing young women with a unique and valuable insight into the process of democratic government through a format of direct role-playing experience; and

WHEREAS, during June 2022, the American Legion Auxiliary, Department of Missouri, is conducting the annual session of Missouri Girls State; and

WHEREAS, an important highlight of this event would be conducting a mock legislative session in the Senate Chamber at our State Capitol where participants could gather to gain a more realistic insight into official governmental and electoral proceedings;

NOW, THEREFORE, BE IT RESOLVED that we, the members of the Missouri Senate, One Hundred and First General Assembly, hereby grant the adult leaders and participants of Missouri Girls State permission to use the Senate Chamber for the purpose of swearing in mock legislative officials and conducting a mock legislative session from 8:00 am to 5:00 pm on June 23, 2022.

Senator Rowden requested unanimous consent of the Senate that the rules be suspended for the purpose of taking up SR 781 up for adoption, which request was granted.

On motion of Senator Rowden, SR 781 was adopted.

Senator Rowden offered the following resolution:

SENATE RESOLUTION NO. 782

WHEREAS, the Missouri Senate recognizes the importance of empowering citizens to actively participate in the democratic process; and

WHEREAS, the Missouri Senate has a long tradition of rendering assistance to those organizations that sponsor projects in the interest
of good citizenship; and

WHEREAS, the 2022 Missouri Youth Leadership Forum for Students with Disabilities, sponsored by the Governor’s Council on Disability and the Missouri Planning Council for Developmental Disabilities, is an educational experience in state government for high school juniors and seniors with disabilities by allowing such youth to participate in the democratic process:

NOW, THEREFORE, BE IT RESOLVED that we, the members of the Missouri Senate, One Hundred First General Assembly, hereby grant the 2022 Missouri Youth Leadership Forum for Students with Disabilities permission to use the Senate Chamber on Thursday, July 14, 2022 from 12:30 p.m. to 3:00 p.m. for the purpose of holding a mock legislative session.

Senator Rowden requested unanimous consent of the Senate that the rules be suspended for the purpose of taking up SR 782 up for adoption, which request was granted.

On motion of Senator Rowden, SR 782 was adopted.

Senator Hough offered the following resolution:

SENATE RESOLUTION NO. 783
NOTICE OF PROPOSED RULE CHANGE

BE IT RESOLVED by the Senate of the One Hundred First General Assembly, Second Regular Session, that Senate Rule 103 be added to read as follows:

“Rule 103. A senator who casts a vote for a bill establishing new congressional districts shall be ineligible for running for the nomination, or as a candidate for election, to the office of United States representative in Congress for four years following the passage and enactment of such bill establishing new congressional districts.”.

Senator Eslinger offered Senate Resolution No. 784, regarding Kevin Hedden, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 785, regarding Gary Manard, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 786, regarding Susan Thomas, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 787, regarding Sonya Jones, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 788, regarding Bill Eskew, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 789, regarding Penny Fox Jones, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 790, regarding Tammy Snow, West Plains, which was adopted.

Senator Eslinger offered Senate Resolution No. 791, regarding Tracy Waggoner, West Plains, which was adopted.

Senator Razer offered Senate Resolution No. 792, regarding Cydney Millstein and Jeffrey Isom, which was adopted.

SENATE BILLS FOR PERFECTION

Senator Bernskoetter moved that SB 997 be taken up for perfection, which motion prevailed.
Senator Bernskoetter offered SS for SB 997, entitled:

SENATE SUBSTITUTE FOR
SENATE BILL NO. 997


Senator Bernskoetter moved that SS for SB 997 be adopted.

Senator Schupp offered SA 1:

SENATE AMENDMENT NO. 1

Amend Senate Substitute for Senate Bill No. 997, Page 21, Section 33.100, Line 3, by striking the word “biweekly,”; and further amend line 4 by inserting after the word “installments” the following: “or once every two weeks”.

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

Senator Eslinger assumed the Chair.

Senator Eigel offered SA 2:

SENATE AMENDMENT NO. 2

Amend Senate Substitute for Senate Bill No. 997, Page 24, Section 34.100, Line 22, by inserting after all of said line the following:

“34.800. 1. The office of administration shall not enter into a contract with a company to acquire or dispose of services, supplies, information technology, or construction unless the contract includes a written certification that the company does not have and will not enforce a mandate that employees take a COVID-19 vaccination.

2. For purposes of this section, the term “company” shall mean any for-profit or not-for-profit organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, limited liability company, or other entity or business association, including all wholly owned subsidiaries, majority-owned subsidiaries, parent companies, or affiliates of those entities or business associations.

3. Any contract that fails to comply with the provisions of this section shall be void against public policy.”; and

Further amend the title and enacting clause accordingly.

Senator Eigel moved that the above amendment be adopted and requested as roll call vote be taken and was joined in his request by Senators Burlison, Onder, Moon, and Hoskins.

Senator Bean assumed the Chair.
Senator Moon raised the point of order that SS for SB 997 is out of order as it goes beyond the scope of the underlying bill.

The point of order was referred to the President Pro Tem, who ruled it not well taken.

At the request of Senator Eigel, SA 2 was withdrawn.

Senator Onder offered SA 3:

SENATE AMENDMENT NO. 3

Amend Senate Substitute for Senate Bill No. 997, Page 93, Section 4, Line 157, by inserting after all of said line the following:

“Section 5. No public employee, as that term is defined in section 105.500, shall be required to receive a vaccination against COVID-19 as a condition of commencing or continuing employment.”; and

Further amend the title and enacting clause accordingly.

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

Senator Thompson Rehder assumed the Chair.

Senator Razer offered SA 4:

SENATE AMENDMENT NO. 4

Amend Senate Substitute for Senate Bill No. 997, Page 53, Section 207.030, Line 26, by inserting after all of said line the following:

“213.055. 1. It shall be an unlawful employment practice:

(1) For an employer, because of the race, color, religion, national origin, sex, ancestry, age or disability of any individual:

(a) To fail or refuse to hire or to discharge any individual, or otherwise to discriminate against any individual with respect to his compensation, terms, conditions, or privileges of employment, because of such individual’s race, color, religion, national origin, sex, ancestry, age or disability;

(b) To limit, segregate, or classify his employees or his employment applicants in any way which would deprive or tend to deprive any individual of employment opportunities or otherwise adversely affect his status as an employee, because of such individual’s race, color, religion, national origin, sex, ancestry, age or disability;

(2) For a labor organization to exclude or to expel from its membership any individual or to discriminate in any way against any of its members or against any employer or any individual employed by an employer because of race, color, religion, national origin, sex, ancestry, age or disability of any individual; or to limit, segregate, or classify its membership, or to classify or fail or refuse to refer for employment any individual, in any way which would deprive or tend to deprive any individual of employment opportunities, or would limit such employment opportunities or otherwise adversely affect his status as an employee or as an applicant for employment, because of such individual’s race, color, religion, national origin, sex, ancestry, age or disability; or for any employer, labor organization, or joint labor-management committee controlling
apprenticeship or other training or retraining, including on-the-job training programs to discriminate against any individual because of his race, color, religion, national origin, sex, ancestry, age or disability in admission to, or employment in, any program established to provide apprenticeship or other training;

(3) For any employer or employment agency to print or circulate or cause to be printed or circulated any statement, advertisement or publication, or to use any form of application for employment or to make any inquiry in connection with prospective employment, which expresses, directly or indirectly, any limitation, specification, or discrimination, because of race, color, religion, national origin, sex, ancestry, age or disability unless based upon a bona fide occupational qualification or for an employment agency to fail or refuse to refer for employment, or otherwise to discriminate against, any individual because of his or her race, color, religion, national origin, sex, ancestry, age as it relates to employment, or disability, or to classify or refer for employment any individual because of his or her race, color, religion, national origin, sex, ancestry, age or disability, [1];

(4) For the office of administration to fail or refuse to hire or to discharge any individual, or otherwise to discriminate against any individual with respect to his or her compensation, terms, conditions, or privileges of employment, because of such individual’s sexual orientation or gender identity. For purposes of this subdivision, the term “gender identity” means the gender-related identity, appearance, mannerisms, or other gender-related characteristics of an individual, with or without regard to the individual’s assigned sex at birth. For purposes of this subdivision, the term “sexual orientation” means one’s actual or perceived emotional or physical attraction to, or romantic or physical relationships with, members of the same gender, members of a different gender, or members of any gender; or the lack of any emotional or physical attraction to, or romantic or physical relationships with, anyone. The term “sexual orientation” includes a history of such attraction or relationship or a history of no such attraction or relationship.

2. Notwithstanding any other provision of this chapter, it shall not be an unlawful employment practice for an employer to apply different standards of compensation, or different terms, conditions or privileges of employment pursuant to a bona fide seniority or merit system, or a system which measures earnings by quantity or quality of production or to employees who work in different locations, provided that such differences or such systems are not the result of an intention or a design to discriminate, and are not used to discriminate, because of race, color, religion, sex, national origin, ancestry, age or disability, nor shall it be an unlawful employment practice for an employer to give and to act upon the results of any professionally developed ability test, provided that such test, its administration, or action upon the results thereof, is not designed, intended or used to discriminate because of race, color, religion, national origin, sex, ancestry, age or disability.

3. Nothing contained in this chapter shall be interpreted to require any employer, employment agency, labor organization, or joint labor-management committee subject to this chapter to grant preferential treatment to any individual or to any group because of the race, color, religion, national origin, sex, ancestry, age or disability of such individual or group on account of an imbalance which may exist with respect to the total number or percentage of persons of any race, color, religion, national origin, sex, ancestry, age or disability employed by any employer, referred or classified for employment by any employment agency or labor organization, admitted to membership or classified by any labor organization, or admitted to or employed in any apprenticeship or other training program, in comparison with the total number or percentage of persons of such race, color, religion, national origin, sex, ancestry, age or disability in any community, state, section, or other area, or in the available workforce in any community, state, section, or
other area.

4. Notwithstanding any other provision of this chapter, it shall not be an unlawful employment practice for the state or any political subdivision of the state to comply with the provisions of 29 U.S.C. Section 623 relating to employment as firefighters or law enforcement officers.”; and

Further amend the title and enacting clause accordingly.

Senator Razer moved that the above amendment be adopted.

President Kehoe assumed the Chair.

Senator Razer offered SA 1 to SA 4:

SENATE AMENDMENT NO. 1 TO
SENATE AMENDMENT NO. 4

Amend Senate Amendment No. 4 to Senate Substitute for Senate Bill No. 997, Page 3, Lines 62-75, by striking all of said lines and inserting in lieu thereof the following: “or gender identity. For purposes of this subdivision, the term “gender identity” means an individual’s gender-related identity, appearance, mannerisms, or other gender-related characteristics, whether or not the individual’s assigned sex at birth is taken into account. For purposes of this subdivision, the term “sexual orientation” means an individual’s actual or perceived emotional or physical attraction to, or romantic or physical relationships with, individuals of the same gender, individuals of a different gender, or individuals of any gender; or the lack of any emotional or physical attraction to, or romantic or physical relationships with, any individual. The term “sexual orientation” includes a history of such attraction or relationship or a history of no such attraction or relationship.”.

Senator Razer moved that the above amendment be adopted.

Senator Hough assumed the Chair.

President Kehoe assumed the Chair.

Senator Hough assumed the Chair.

President Kehoe assumed the Chair.

Senator Rowden assumed the Chair.

At the request of Senator Bernskoetter, SS for SB 997 was withdrawn, rendering SA 4 and SA 1 to SA 4 moot.

Senator Bernskoetter offered SS No. 2 for SB 997, entitled:

SENATE SUBSTITUTE NO. 2 FOR
SENATE BILL NO. 997

An Act to repeal section 33.100, RSMo, and to enact in lieu thereof one new section relating to the payment of salaries out of the state treasury.

Senator Bernskoetter moved that SS No. 2 for SB 997 be adopted, which motion prevailed.

On motion of Senator Bernskoetter, SS No. 2 for SB 997 was declared perfected and ordered printed.
At the request of Senator Eigel, **SB 650** was placed on the Informal Calendar.

Senator Hegeman moved that **SB 723** be taken up for perfection, which motion prevailed.

Senator Onder offered **SA 1**:

**SENATE AMENDMENT NO. 1**

Amend Senate Bill No. 723, Page 1, In the Title, Lines 2-3, by striking the words “the Medicaid stabilization fund” and inserting in lieu thereof the following: “MO HealthNet”; and

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

“208.152. 1. MO HealthNet payments shall be made on behalf of those eligible needy persons as described in section 208.151 who are unable to provide for it in whole or in part, with any payments to be made on the basis of the reasonable cost of the care or reasonable charge for the services as defined and determined by the MO HealthNet division, unless otherwise hereinafter provided, for the following:

(1) Inpatient hospital services, except to persons in an institution for mental diseases who are under the age of sixty-five years and over the age of twenty-one years; provided that the MO HealthNet division shall provide through rule and regulation an exception process for coverage of inpatient costs in those cases requiring treatment beyond the seventy-fifth percentile professional activities study (PAS) or the MO HealthNet children’s diagnosis length-of-stay schedule; and provided further that the MO HealthNet division shall take into account through its payment system for hospital services the situation of hospitals which serve a disproportionate number of low-income patients;

(2) All outpatient hospital services, payments therefor to be in amounts which represent no more than eighty percent of the lesser of reasonable costs or customary charges for such services, determined in accordance with the principles set forth in Title XVIII A and B, Public Law 89-97, 1965 amendments to the federal Social Security Act (42 U.S.C. Section 301, et seq.), but the MO HealthNet division may evaluate outpatient hospital services rendered under this section and deny payment for services which are determined by the MO HealthNet division not to be medically necessary, in accordance with federal law and regulations;

(3) Laboratory and X-ray services;

(4) Nursing home services for participants, except to persons with more than five hundred thousand dollars equity in their home or except for persons in an institution for mental diseases who are under the age of sixty-five years, when residing in a hospital licensed by the department of health and senior services or a nursing home licensed by the department of health and senior services or appropriate licensing authority of other states or government-owned and operated institutions which are determined to conform to standards equivalent to licensing requirements in Title XIX of the federal Social Security Act (42 U.S.C. Section 301, et seq.), as amended, for nursing facilities. The MO HealthNet division may recognize through its payment methodology for nursing facilities those nursing facilities which serve a high volume of MO HealthNet patients. The MO HealthNet division when determining the amount of the benefit payments to be made on behalf of persons under the age of twenty-one in a nursing facility may consider nursing facilities furnishing care to persons under the age of twenty-one as a classification separate from other nursing facilities;

(5) Nursing home costs for participants receiving benefit payments under subdivision (4) of this
subsection for those days, which shall not exceed twelve per any period of six consecutive months, during which the participant is on a temporary leave of absence from the hospital or nursing home, provided that no such participant shall be allowed a temporary leave of absence unless it is specifically provided for in his plan of care. As used in this subdivision, the term “temporary leave of absence” shall include all periods of time during which a participant is away from the hospital or nursing home overnight because he is visiting a friend or relative;

(6) Physicians’ services, whether furnished in the office, home, hospital, nursing home, or elsewhere, provided, no funds shall be expended to any abortion facility, as defined in section 188.015, or any affiliate or associate thereof;

(7) Subject to appropriation, up to twenty visits per year for services limited to examinations, diagnoses, adjustments, and manipulations and treatments of malpositioned articulations and structures of the body provided by licensed chiropractic physicians practicing within their scope of practice. Nothing in this subdivision shall be interpreted to otherwise expand MO HealthNet services;

(8) Drugs and medicines when prescribed by a licensed physician, dentist, podiatrist, or an advanced practice registered nurse; except that no payment for drugs and medicines prescribed on and after January 1, 2006, by a licensed physician, dentist, podiatrist, or an advanced practice registered nurse may be made on behalf of any person who qualifies for prescription drug coverage under the provisions of P.L. 108-173;

(9) Emergency ambulance services and, effective January 1, 1990, medically necessary transportation to scheduled, physician-prescribed nonelective treatments;

(10) Early and periodic screening and diagnosis of individuals who are under the age of twenty-one to ascertain their physical or mental defects, and health care, treatment, and other measures to correct or ameliorate defects and chronic conditions discovered thereby. Such services shall be provided in accordance with the provisions of Section 6403 of P.L. 101-239 and federal regulations promulgated thereunder;

(11) Home health care services;

(12) Family planning as defined by federal rules and regulations; provided, however, that such family planning services shall not include abortions or any abortifacient drug or device that is used for the purpose of inducing an abortion unless such abortions are certified in writing by a physician to the MO HealthNet agency that, in the physician’s professional judgment, the life of the mother would be endangered if the fetus were carried to term;

(13) Inpatient psychiatric hospital services for individuals under age twenty-one as defined in Title XIX of the federal Social Security Act (42 U.S.C. Section 1396d, et seq.);

(14) Outpatient surgical procedures, including presurgical diagnostic services performed in ambulatory surgical facilities which are licensed by the department of health and senior services of the state of Missouri; except, that such outpatient surgical services shall not include persons who are eligible for coverage under Part B of Title XVIII, Public Law 89-97, 1965 amendments to the federal Social Security Act, as amended, if exclusion of such persons is permitted under Title XIX, Public Law 89-97, 1965 amendments to the federal Social Security Act, as amended;

(15) Personal care services which are medically oriented tasks having to do with a person’s physical requirements, as opposed to housekeeping requirements, which enable a person to be treated by his or her
physician on an outpatient rather than on an inpatient or residential basis in a hospital, intermediate care facility, or skilled nursing facility. Personal care services shall be rendered by an individual not a member of the participant’s family who is qualified to provide such services where the services are prescribed by a physician in accordance with a plan of treatment and are supervised by a licensed nurse. Persons eligible to receive personal care services shall be those persons who would otherwise require placement in a hospital, intermediate care facility, or skilled nursing facility. Benefits payable for personal care services shall not exceed for any one participant one hundred percent of the average statewide charge for care and treatment in an intermediate care facility for a comparable period of time. Such services, when delivered in a residential care facility or assisted living facility licensed under chapter 198 shall be authorized on a tier level based on the services the resident requires and the frequency of the services. A resident of such facility who qualifies for assistance under section 208.030 shall, at a minimum, if prescribed by a physician, qualify for the tier level with the fewest services. The rate paid to providers for each tier of service shall be set subject to appropriations. Subject to appropriations, each resident of such facility who qualifies for assistance under section 208.030 and meets the level of care required in this section shall, at a minimum, if prescribed by a physician, be authorized up to one hour of personal care services per day. Authorized units of personal care services shall not be reduced or tier level lowered unless an order approving such reduction or lowering is obtained from the resident’s personal physician. Such authorized units of personal care services or tier level shall be transferred with such resident if he or she transfers to another such facility. Such provision shall terminate upon receipt of relevant waivers from the federal Department of Health and Human Services. If the Centers for Medicare and Medicaid Services determines that such provision does not comply with the state plan, this provision shall be null and void. The MO HealthNet division shall notify the revisor of statutes as to whether the relevant waivers are approved or a determination of noncompliance is made;

(16) Mental health services. The state plan for providing medical assistance under Title XIX of the Social Security Act, 42 U.S.C. Section 301, as amended, shall include the following mental health services when such services are provided by community mental health facilities operated by the department of mental health or designated by the department of mental health as a community mental health facility or as an alcohol and drug abuse facility or as a child-serving agency within the comprehensive children’s mental health service system established in section 630.097. The department of mental health shall establish by administrative rule the definition and criteria for designation as a community mental health facility and for designation as an alcohol and drug abuse facility. Such mental health services shall include:

(a) Outpatient mental health services including preventive, diagnostic, therapeutic, rehabilitative, and palliative interventions rendered to individuals in an individual or group setting by a mental health professional in accordance with a plan of treatment appropriately established, implemented, monitored, and revised under the auspices of a therapeutic team as a part of client services management;

(b) Clinic mental health services including preventive, diagnostic, therapeutic, rehabilitative, and palliative interventions rendered to individuals in an individual or group setting by a mental health professional in accordance with a plan of treatment appropriately established, implemented, monitored, and revised under the auspices of a therapeutic team as a part of client services management;

(c) Rehabilitative mental health and alcohol and drug abuse services including home and community-based preventive, diagnostic, therapeutic, rehabilitative, and palliative interventions rendered to individuals in an individual or group setting by a mental health or alcohol and drug abuse professional in accordance
with a plan of treatment appropriately established, implemented, monitored, and revised under the auspices of a therapeutic team as a part of client services management. As used in this section, mental health professional and alcohol and drug abuse professional shall be defined by the department of mental health pursuant to duly promulgated rules. With respect to services established by this subdivision, the department of social services, MO HealthNet division, shall enter into an agreement with the department of mental health. Matching funds for outpatient mental health services, clinic mental health services, and rehabilitation services for mental health and alcohol and drug abuse shall be certified by the department of mental health to the MO HealthNet division. The agreement shall establish a mechanism for the joint implementation of the provisions of this subdivision. In addition, the agreement shall establish a mechanism by which rates for services may be jointly developed;

(17) Such additional services as defined by the MO HealthNet division to be furnished under waivers of federal statutory requirements as provided for and authorized by the federal Social Security Act (42 U.S.C. Section 301, et seq.) subject to appropriation by the general assembly;

(18) The services of an advanced practice registered nurse with a collaborative practice agreement to the extent that such services are provided in accordance with chapters 334 and 335, and regulations promulgated thereunder;

(19) Nursing home costs for participants receiving benefit payments under subdivision (4) of this subsection to reserve a bed for the participant in the nursing home during the time that the participant is absent due to admission to a hospital for services which cannot be performed on an outpatient basis, subject to the provisions of this subdivision:

(a) The provisions of this subdivision shall apply only if:

a. The occupancy rate of the nursing home is at or above ninety-seven percent of MO HealthNet certified licensed beds, according to the most recent quarterly census provided to the department of health and senior services which was taken prior to when the participant is admitted to the hospital; and

b. The patient is admitted to a hospital for a medical condition with an anticipated stay of three days or less;

(b) The payment to be made under this subdivision shall be provided for a maximum of three days per hospital stay;

(c) For each day that nursing home costs are paid on behalf of a participant under this subdivision during any period of six consecutive months such participant shall, during the same period of six consecutive months, be ineligible for payment of nursing home costs of two otherwise available temporary leave of absence days provided under subdivision (5) of this subsection; and

(d) The provisions of this subdivision shall not apply unless the nursing home receives notice from the participant or the participant’s responsible party that the participant intends to return to the nursing home following the hospital stay. If the nursing home receives such notification and all other provisions of this subsection have been satisfied, the nursing home shall provide notice to the participant or the participant’s responsible party prior to release of the reserved bed;

(20) Prescribed medically necessary durable medical equipment. An electronic web-based prior authorization system using best medical evidence and care and treatment guidelines consistent with national standards shall be used to verify medical need;
(21) Hospice care. As used in this subdivision, the term “hospice care” means a coordinated program of active professional medical attention within a home, outpatient and inpatient care which treats the terminally ill patient and family as a unit, employing a medically directed interdisciplinary team. The program provides relief of severe pain or other physical symptoms and supportive care to meet the special needs arising out of physical, psychological, spiritual, social, and economic stresses which are experienced during the final stages of illness, and during dying and bereavement and meets the Medicare requirements for participation as a hospice as are provided in 42 CFR Part 418. The rate of reimbursement paid by the MO HealthNet division to the hospice provider for room and board furnished by a nursing home to an eligible hospice patient shall not be less than ninety-five percent of the rate of reimbursement which would have been paid for facility services in that nursing home facility for that patient, in accordance with subsection (c) of Section 6408 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989);

(22) Prescribed medically necessary dental services. Such services shall be subject to appropriations. An electronic web-based prior authorization system using best medical evidence and care and treatment guidelines consistent with national standards shall be used to verify medical need;

(23) Prescribed medically necessary optometric services. Such services shall be subject to appropriations. An electronic web-based prior authorization system using best medical evidence and care and treatment guidelines consistent with national standards shall be used to verify medical need;

(24) Blood clotting products-related services. For persons diagnosed with a bleeding disorder, as defined in section 338.400, reliant on blood clotting products, as defined in section 338.400, such services include:

(a) Home delivery of blood clotting products and ancillary infusion equipment and supplies, including the emergency deliveries of the product when medically necessary;

(b) Medically necessary ancillary infusion equipment and supplies required to administer the blood clotting products; and

(c) Assessments conducted in the participant’s home by a pharmacist, nurse, or local home health care agency trained in bleeding disorders when deemed necessary by the participant’s treating physician;

(25) The MO HealthNet division shall, by January 1, 2008, and annually thereafter, report the status of MO HealthNet provider reimbursement rates as compared to one hundred percent of the Medicare reimbursement rates and compared to the average dental reimbursement rates paid by third-party payors licensed by the state. The MO HealthNet division shall, by July 1, 2008, provide to the general assembly a four-year plan to achieve parity with Medicare reimbursement rates and for third-party payor average dental reimbursement rates. Such plan shall be subject to appropriation and the division shall include in its annual budget request to the governor the necessary funding needed to complete the four-year plan developed under this subdivision.

2. Additional benefit payments for medical assistance shall be made on behalf of those eligible needy children, pregnant women and blind persons with any payments to be made on the basis of the reasonable cost of the care or reasonable charge for the services as defined and determined by the MO HealthNet division, unless otherwise hereinafter provided, for the following:

(1) Dental services;

(2) Services of podiatrists as defined in section 330.010;

(3) Optometric services as described in section 336.010;
(4) Orthopedic devices or other prosthetics, including eye glasses, dentures, hearing aids, and wheelchairs;

(5) Hospice care. As used in this subdivision, the term “hospice care” means a coordinated program of active professional medical attention within a home, outpatient and inpatient care which treats the terminally ill patient and family as a unit, employing a medically directed interdisciplinary team. The program provides relief of severe pain or other physical symptoms and supportive care to meet the special needs arising out of physical, psychological, spiritual, social, and economic stresses which are experienced during the final stages of illness, and during dying and bereavement and meets the Medicare requirements for participation as a hospice as are provided in 42 CFR Part 418. The rate of reimbursement paid by the MO HealthNet division to the hospice provider for room and board furnished by a nursing home to an eligible hospice patient shall not be less than ninety-five percent of the rate of reimbursement which would have been paid for facility services in that nursing home facility for that patient, in accordance with subsection (c) of Section 6408 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989);

(6) Comprehensive day rehabilitation services beginning early posttrauma as part of a coordinated system of care for individuals with disabling impairments. Rehabilitation services must be based on an individualized, goal-oriented, comprehensive and coordinated treatment plan developed, implemented, and monitored through an interdisciplinary assessment designed to restore an individual to optimal level of physical, cognitive, and behavioral function. The MO HealthNet division shall establish by administrative rule the definition and criteria for designation of a comprehensive day rehabilitation service facility, benefit limitations and payment mechanism. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this subdivision shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2005, shall be invalid and void.

3. The MO HealthNet division may require any participant receiving MO HealthNet benefits to pay part of the charge or cost until July 1, 2008, and an additional payment after July 1, 2008, as defined by rule duly promulgated by the MO HealthNet division, for all covered services except for those services covered under subdivisions (15) and (16) of subsection 1 of this section and sections 208.631 to 208.657 to the extent and in the manner authorized by Title XIX of the federal Social Security Act (42 U.S.C. Section 1396, et seq.) and regulations thereunder. When substitution of a generic drug is permitted by the prescriber according to section 338.056, and a generic drug is substituted for a name-brand drug, the MO HealthNet division may not lower or delete the requirement to make a co-payment pursuant to regulations of Title XIX of the federal Social Security Act. A provider of goods or services described under this section must collect from all participants the additional payment that may be required by the MO HealthNet division under authority granted herein, if the division exercises that authority, to remain eligible as a provider. Any payments made by participants under this section shall be in addition to and not in lieu of payments made by the state for goods or services described herein except the participant portion of the pharmacy professional dispensing fee shall be in addition to and not in lieu of payments to pharmacists. A provider may collect the co-payment at the time a service is provided or at a later date. A provider shall not refuse to provide a service if a participant is unable to pay a required payment. If it is the routine business practice of a provider to terminate future services to an individual with an unclaimed debt, the provider may include uncollected co-
payments under this practice. Providers who elect not to undertake the provision of services based on a history of bad debt shall give participants advance notice and a reasonable opportunity for payment. A provider, representative, employee, independent contractor, or agent of a pharmaceutical manufacturer shall not make co-payment for a participant. This subsection shall not apply to other qualified children, pregnant women, or blind persons. If the Centers for Medicare and Medicaid Services does not approve the MO HealthNet state plan amendment submitted by the department of social services that would allow a provider to deny future services to an individual with uncollected co-payments, the denial of services shall not be allowed. The department of social services shall inform providers regarding the acceptability of denying services as the result of unpaid co-payments.

4. The MO HealthNet division shall have the right to collect medication samples from participants in order to maintain program integrity.

5. Reimbursement for obstetrical and pediatric services under subdivision (6) of subsection 1 of this section shall be timely and sufficient to enlist enough health care providers so that care and services are available under the state plan for MO HealthNet benefits at least to the extent that such care and services are available to the general population in the geographic area, as required under subparagraph (a)(30)(A) of 42 U.S.C. Section 1396a and federal regulations promulgated thereunder.

6. Beginning July 1, 1990, reimbursement for services rendered in federally funded health centers shall be in accordance with the provisions of subsection 6402(c) and Section 6404 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989) and federal regulations promulgated thereunder.

7. Beginning July 1, 1990, the department of social services shall provide notification and referral of children below age five, and pregnant, breast-feeding, or postpartum women who are determined to be eligible for MO HealthNet benefits under section 208.151 to the special supplemental food programs for women, infants and children administered by the department of health and senior services. Such notification and referral shall conform to the requirements of Section 6406 of P.L. 101-239 and regulations promulgated thereunder.

8. Providers of long-term care services shall be reimbursed for their costs in accordance with the provisions of Section 1902 (a)(13)(A) of the Social Security Act, 42 U.S.C. Section 1396a, as amended, and regulations promulgated thereunder.

9. Reimbursement rates to long-term care providers with respect to a total change in ownership, at arm’s length, for any facility previously licensed and certified for participation in the MO HealthNet program shall not increase payments in excess of the increase that would result from the application of Section 1902 (a)(13)(C) of the Social Security Act, 42 U.S.C. Section 1396a (a)(13)(C).

10. The MO HealthNet division may enroll qualified residential care facilities and assisted living facilities, as defined in chapter 198, as MO HealthNet personal care providers.

11. Any income earned by individuals eligible for certified extended employment at a sheltered workshop under chapter 178 shall not be considered as income for purposes of determining eligibility under this section.

12. If the Missouri Medicaid audit and compliance unit changes any interpretation or application of the requirements for reimbursement for MO HealthNet services from the interpretation or application that has been applied previously by the state in any audit of a MO HealthNet provider, the Missouri Medicaid audit and compliance unit shall notify all affected MO HealthNet providers five business days before such change
shall take effect. Failure of the Missouri Medicaid audit and compliance unit to notify a provider of such change shall entitle the provider to continue to receive and retain reimbursement until such notification is provided and shall waive any liability of such provider for recoupment or other loss of any payments previously made prior to the five business days after such notice has been sent. Each provider shall provide the Missouri Medicaid audit and compliance unit a valid email address and shall agree to receive communications electronically. The notification required under this section shall be delivered in writing by the United States Postal Service or electronic mail to each provider.

13. Nothing in this section shall be construed to abrogate or limit the department’s statutory requirement to promulgate rules under chapter 536.

14. Beginning July 1, 2016, and subject to appropriations, providers of behavioral, social, and psychophysiological services for the prevention, treatment, or management of physical health problems shall be reimbursed utilizing the behavior assessment and intervention reimbursement codes 96150 to 96154 or their successor codes under the Current Procedural Terminology (CPT) coding system. Providers eligible for such reimbursement shall include psychologists.

208.153. 1. Pursuant to and not inconsistent with the provisions of sections 208.151 and 208.152, the MO HealthNet division shall by rule and regulation define the reasonable costs, manner, extent, quantity, quality, charges and fees of MO HealthNet benefits herein provided. The benefits available under these sections shall not replace those provided under other federal or state law or under other contractual or legal entitlements of the persons receiving them, and all persons shall be required to apply for and utilize all benefits available to them and to pursue all causes of action to which they are entitled. Any person entitled to MO HealthNet benefits may obtain it from any provider of services with which an agreement is in effect under this section and which undertakes to provide the services, as authorized by the MO HealthNet division, provided, said provider shall not include any abortion facility, as defined in section 188.015, or any affiliate or associate thereof. At the discretion of the director of the MO HealthNet division and with the approval of the governor, the MO HealthNet division is authorized to provide medical benefits for participants receiving public assistance by expending funds for the payment of federal medical insurance premiums, coinsurance and deductibles pursuant to the provisions of Title XVIII B and XIX, Public Law 89-97, 1965 amendments to the federal Social Security Act (42 U.S.C. 301, et seq.), as amended.

2. MO HealthNet shall include benefit payments on behalf of qualified Medicare beneficiaries as defined in 42 U.S.C. Section 1396d(p). The family support division shall by rule and regulation establish which qualified Medicare beneficiaries are eligible. The MO HealthNet division shall define the premiums, deductible and coinsurance provided for in 42 U.S.C. Section 1396d(p) to be provided on behalf of the qualified Medicare beneficiaries.

3. MO HealthNet shall include benefit payments for Medicare Part A cost sharing as defined in clause (p)(3)(A)(i) of 42 U.S.C. 1396d on behalf of qualified disabled and working individuals as defined in subsection (s) of Section 42 U.S.C. 1396d as required by subsection (d) of Section 6408 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989). The MO HealthNet division may impose a premium for such benefit payments as authorized by paragraph (d)(3) of Section 6408 of P.L. 101-239.

4. MO HealthNet shall include benefit payments for Medicare Part B cost sharing described in 42 U.S.C. Section 1396(d)(p)(3)(A)(ii) for individuals described in subsection 2 of this section, but for the fact that their income exceeds the income level established by the state under 42 U.S.C. Section 1396(d)(p)(2) but is less than one hundred and ten percent beginning January 1, 1993, and less than one hundred and twenty
percent beginning January 1, 1995, of the official poverty line for a family of the size involved.

5. For an individual eligible for MO HealthNet under Title XIX of the Social Security Act, MO HealthNet shall include payment of enrollee premiums in a group health plan and all deductibles, coinsurance and other cost-sharing for items and services otherwise covered under the state Title XIX plan under Section 1906 of the federal Social Security Act and regulations established under the authority of Section 1906, as may be amended. Enrollment in a group health plan must be cost effective, as established by the Secretary of Health and Human Services, before enrollment in the group health plan is required. If all members of a family are not eligible for MO HealthNet and enrollment of the Title XIX eligible members in a group health plan is not possible unless all family members are enrolled, all premiums for noneligible members shall be treated as payment for MO HealthNet of eligible family members. Payment for noneligible family members must be cost effective, taking into account payment of all such premiums. Non-Title XIX eligible family members shall pay all deductible, coinsurance and other cost-sharing obligations. Each individual as a condition of eligibility for MO HealthNet benefits shall apply for enrollment in the group health plan.

6. Any Social Security cost-of-living increase at the beginning of any year shall be disregarded until the federal poverty level for such year is implemented.

7. If a MO HealthNet participant has paid the requested spenddown in cash for any month and subsequently pays an out-of-pocket valid medical expense for such month, such expense shall be allowed as a deduction to future required spenddown for up to three months from the date of such expense.”; and

Further amend the title and enacting clause accordingly.

Senator Onder moved that the above amendment be adopted.

Senator Thompson Rehder assumed the Chair.

At request of Senator Hegeman, SB 723, with SA 1 (pending), was placed on the Informal Calendar.

Senator Burlison moved that SB 968, with SCS, SS for SCS and SA 3, as amended (pending), be called from the Informal Calendar and again taken up for perfection, which motion prevailed.

At the request of Senator Burlison, SS for SCS for SB 968 was withdrawn, rendering SA 3 moot.

Senator Burlison offered SS No. 2 for SCS for SB 968, entitled:

SENATE SUBSTITUTE NO. 2 FOR
SENATE COMMITTEE SUBSTITUTE FOR
SENATE BILL NO. 968

An Act to repeal sections 44.032 and 431.202, RSMo, and to enact in lieu thereof five new sections relating to business entities.

Senator Burlison moved that SS No. 2 for SCS for SB 968 be adopted.

Senator May offered SA 1:

SENATE AMENDMENT NO. 1

Amend Senate Substitute No. 2 for Senate Committee Substitute for Senate Bill No. 968, Page 13, Section 431.202, Line 167, by inserting after all of said line the following:
“454.1005. 1. To show cause why suspension of a license may not be appropriate, the obligor shall request a hearing from the court or division that issued the notice of intent to suspend the license. The request shall be made within sixty days of the date of service of notice.

2. If an obligor fails to respond, without good cause, to a notice of intent to suspend a license or to timely request a hearing or comply with a payment plan, the obligor’s defenses and objections shall be considered to be without merit and the court or director may enter an order suspending the obligor’s license and ordering the obligor to refrain from engaging in the licensed activity.

3. Upon timely receipt of a request for hearing from an obligor, the court or director shall schedule a hearing that complies with due process to determine if suspension of the obligor’s license is appropriate considering all relevant factors, including those factors listed in subsection 4 of this section. The court or director shall stay suspension of the license pending the outcome of the hearing.

4. [If the action involves an arrearage, the only issues that may be determined in a hearing pursuant to this section are] In determining whether the license suspension is appropriate under the circumstances, the court or director shall consider and issue written findings of fact and conclusions of law within thirty days following the hearing regarding the following:

(1) The identity of the obligor;

(2) Whether the arrearage is in an amount greater than or equal to three months of support payments or two thousand five hundred dollars, whichever is less, by the date of service of a notice of intent to suspend; [and]

(3) Whether the obligor has entered a payment plan. If the action involves a failure to comply with a subpoena or order, the only issues that may be determined are the identity of the obligor and whether the obligor has complied with the subpoena or order;

(4) Whether the obligor had the ability to make the payments that are in arrearage;

(5) Whether the obligor has the current ability to make the payments;

(6) The reasons the obligor needs the license, including, but not limited to:

(a) Transportation of family members to and from work, school, or medical treatment;

(b) Transportation of the obligor or family members to extra curricular activities; or

(c) A requirement for employment;

(7) Whether the obligor is unemployed or underemployed;

(8) Whether the obligor is actively seeking employment;

(9) Whether the obligor has engaged in job search and job readiness assistance, including utilization of the state employment database website;

(10) Whether the obligor has a physical or mental impairment affecting his or her capacity to work; and

(11) Any other relevant factors that affect the obligor’s ability to make the child support payments.
5. If the court or director, after the hearing, determines that the obligor has failed to comply with the child support payment obligation and an arrearage exists in excess of two thousand five hundred dollars for good cause, then the court or director shall not issue an order suspending the obligor’s license and ordering the obligor to refrain from engaging in the licensed activity or, if an order is in place, shall stay such order. Good cause may include loss of employment, excluding voluntarily quitting or a dismissal due to poor job performance or failure to meet a condition of employment; catastrophic illness or accident of the obligor or a family member; severe inclement weather, including a natural disaster; or the obligor experiences a family emergency or other life-changing event, including divorce or domestic violence.

6. If the court or director, after hearing, determines that the obligor has failed, without good cause, to comply with any of the requirements in subsection 4 of this section, the court or director shall issue an order suspending the obligor’s license and ordering the obligor to refrain from engaging in the licensed activity.

7. The court or division shall send a copy of the order suspending a license to the licensing authority and the obligor by certified mail.

8. The determination of the director, after a hearing pursuant to this section, shall be a final agency decision and shall be subject to judicial review pursuant to chapter 536. Administrative hearings held pursuant to this section shall be conducted by hearing officers appointed by the director of the department pursuant to subsection 1 of section 454.475.

Further amend the title and enacting clause accordingly.

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

Senator Beck offered SA 2:

SENATE AMENDMENT NO. 2

Amend Senate Substitute No. 2 for Senate Committee Substitute for Senate Bill No. 968, Page 13, Section 431.202, Line 167, by inserting after all of said line the following:

“431.203. 1. For purposes of this section, “covenant not to compete” means an agreement, understanding, contract, or contractual term in which an employee or prospective employee agrees not to compete against an employer or prospective employer or agrees not to accept any positions with a competitor of an employer or prospective employer following the termination of a business or employment relationship between the employee or prospective employee and the employer or prospective employer. A covenant not to compete may, but need not, contain time-based or geographic limitations.

2. Notwithstanding any provision of section 431.202 or any other provision of law to the contrary, a covenant not to compete shall be void and unenforceable to the extent that it applies to an employment arrangement wherein an employee is or would be paid hourly wages.”; and

Further amend the title and enacting clause accordingly.
Senator Beck moved that the above amendment be adopted, which motion prevailed.

Senator Koenig offered SA 3:

SENATE AMENDMENT NO. 3

Amend Senate Substitute No. 2 for Senate Committee Substitute for Senate Bill No. 968, Page 6, Section 44.032, Line 149, by inserting after all of said line the following:

“130.029. 1. Nothing herein contained shall be construed to prohibit any corporation organized under any general or special law of this state, or any other state or by an act of the Congress of the United States or any labor organization, cooperative association or mutual association from making any contributions or expenditures, provided:

(1) That the board of directors of any corporation by resolution has authorized contributions or expenditures, or by resolution has authorized a designated officer to make such contributions or expenditures; or

(2) That the members of any labor organization, cooperative association or mutual association have authorized contributions or expenditures by a majority vote of the members present at a duly called meeting of any such labor organization, cooperative association or mutual association or by such vote has authorized a designated officer to make such contributions or expenditures.

2. No provision of this section shall be construed to authorize contributions or expenditures otherwise prohibited by, or to change any necessary percentage of vote otherwise required by, the articles of incorporation or association or bylaws of such labor organization, corporation, cooperative or mutual association.

3. Authority to make contributions or expenditures as authorized by this section shall be adopted by general or specific resolution. This resolution shall state the total amount of contributions or expenditures authorized, the purposes of such contributions or expenditures and the time period within which such authority shall exist.

4. (1) Any limited liability company that is duly registered pursuant to chapter 347 and that has not elected to be classified as a corporation under the federal tax code may make contributions to any committee if the limited liability company has:

(a) Been in existence for at least one year prior to such contribution; and

(b) Submitted to the Missouri ethics commission a form indicating that the limited liability company is a legitimate business with a legitimate business interest and is not created for the sole purpose of making campaign contributions.

(2) The Missouri ethics commission shall develop a form for limited liability companies to use for purposes of paragraph (b) of subdivision (1) of this subsection. The commission shall post all forms submitted pursuant to this subdivision on its website on a public page in a searchable format.

143.081. 1. A resident individual, resident estate, and resident trust shall be allowed a credit against the tax otherwise due pursuant to sections 143.005 to 143.998 for the amount of any income tax imposed for the taxable year by another state of the United States (or a political subdivision thereof) or the District of Columbia on income derived from sources therein and which is also subject to tax pursuant to sections 143.005 to 143.998. For purposes of this subsection, the phrase “income tax imposed” shall be that amount
of tax before any income tax credit allowed by such other state or the District of Columbia if the other state or the District of Columbia authorizes a reciprocal benefit for residents of this state.

2. The credit provided pursuant to this section shall not exceed an amount which bears the same ratio to the tax otherwise due pursuant to sections 143.005 to 143.998 as the amount of the taxpayer’s Missouri adjusted gross income derived from sources in the other taxing jurisdiction bears to the taxpayer’s Missouri adjusted gross income derived from all sources. In applying the limitation of the previous sentence to an estate or trust, Missouri taxable income shall be substituted for Missouri adjusted gross income. If the tax of more than one other taxing jurisdiction is imposed on the same item of income, the credit shall not exceed the limitation that would result if the taxes of all the other jurisdictions applicable to the item were deemed to be of a single jurisdiction.

3. (1) For the purposes of this section, in the case of an S corporation, each resident S shareholder shall be considered to have paid a tax imposed on the shareholder in an amount equal to the shareholder’s pro rata share of any net income tax paid by the S corporation to a state which does not measure the income of shareholders on an S corporation by reference to the income of the S corporation or where a composite return and composite payments are made in such state on behalf of the S shareholders by the S corporation.

(2) A resident S shareholder shall be eligible for a credit issued pursuant to this section in an amount equal to the shareholder’s pro rata share of any income tax imposed pursuant to chapter 143 on income derived from sources in another state of the United States, or a political subdivision thereof, or the District of Columbia, and which is subject to tax pursuant to chapter 143 but is not subject to tax in such other jurisdiction.

4. For purposes of subsection 3 of this section, in the case of an S corporation that is a bank chartered by a state, the Office of Thrift Supervision, or the comptroller of currency, each Missouri resident S shareholder of such out-of-state bank shall qualify for the shareholder’s pro rata share of any net tax paid, including a bank franchise tax based on the income of the bank, by such S corporation where bank payment of taxes are made in such state on behalf of the S shareholders by the S bank to the extent of the tax paid.

143.436. 1. This section shall be known and may be cited as the “SALT Parity Act”.

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

(1) “Affected business entity”, any partnership or S corporation that elects to be subject to tax pursuant to subsection 10 of this section;

(2) “Direct member”, a member that holds an interest directly in an affected business entity;

(3) “Indirect member”, a member that itself holds an interest, through a direct or indirect member that is a partnership or an S corporation, in an affected business entity;

(4) “Member”:

(a) A shareholder of an S corporation;

(b) A partner in a general partnership, a limited partnership, or a limited liability partnership; or

(c) A member of a limited liability company that is treated as a partnership or S corporation for federal income tax purposes;
(5) “Partnership”, the same meaning as provided in 26 U.S.C. Section 7701(a)(2). The term “partnership” shall include a limited liability company that is treated as a partnership for federal income tax purposes;

(6) “S corporation”, a corporation or limited liability company that is treated as an S corporation for federal income tax purposes;

(7) “Tax year”, the tax year of a partnership or S corporation for federal income tax purposes.

3. (1) Notwithstanding any provision of law to the contrary, a tax is hereby imposed on each affected business entity that is a partnership and that is doing business in this state. Such affected business entity shall, at the time that the affected business entity’s return is due, pay a tax in an amount equal to the sum of the separately and nonseparately computed items, as described in 26 U.S.C. Section 702(a), of the affected business entity, to the extent derived from or connected with sources within this state, as determined pursuant to section 143.455, decreased by the deduction allowed under 26 U.S.C. Section 199A computed as if such deduction was allowed to be taken by the affected business entity for federal tax purposes, and increased or decreased by any modification made pursuant to section 143.471 that relates to an item of the affected business entity’s income, gain, loss, or deduction, to the extent derived from or connected with sources within this state, as determined pursuant to section 143.455, with such sum multiplied by the highest rate of tax used to determine a Missouri income tax liability for an individual pursuant to section 143.011. An affected entity paying the tax pursuant to this subsection shall include with the payment of such taxes each report provided to a member pursuant to subsection 7 of this section.

(2) If the amount calculated pursuant to subdivision (1) of this section results in a net loss, such net loss may be carried forward to succeeding tax years for which the affected business entity elects to be subject to tax pursuant to subsection 11 of this section until fully used.

4. (1) Notwithstanding any provision of law to the contrary, a tax is hereby imposed on each affected business entity that is an S corporation and that is doing business in this state. Such affected business entity shall, at the time that the affected business entity’s return is due, pay a tax in an amount equal to the sum of the separately and nonseparately computed items, as described in 26 U.S.C. Section 1366, of the affected business entity, to the extent derived from or connected with sources within this state, as determined pursuant to section 143.455, decreased by the deduction allowed under 26 U.S.C. Section 199A computed as if such deduction was allowed to be taken by the affected business entity for federal tax purposes, and increased or decreased by any modification made pursuant to section 143.471 that relates to an item of the affected business entity’s income, gain, loss, or deduction, to the extent derived from or connected with sources within this state, as determined pursuant to section 143.455, with such sum multiplied by the highest rate of tax used to determine a Missouri income tax liability for an individual pursuant to section 143.011. An affected entity paying the tax pursuant to this subsection shall include with the payment of such taxes each report provided to a member pursuant to subsection 7 of this section.

(2) If the amount calculated pursuant to subdivision (1) of this section results in a net loss, such net loss may be carried forward to succeeding tax years for which the affected business entity elects to be subject to tax pursuant to subsection 11 of this section until fully used.

5. If an affected business entity is a direct or indirect member of another affected business entity, the member affected business entity shall, when calculating its net income or loss pursuant to
subsections 3 or 4 of this section, subtract its distributive share of income or add its distributive share of loss from the affected business entity in which it is a direct or indirect member to the extent that the income or loss was derived from or connected with sources within this state, as determined pursuant to section 143.455.

6. A nonresident individual who is a member shall not be required to file an income tax return pursuant to this chapter for a tax year if, for such tax year, the only source of income derived from or connected with sources within the state for such member, or the member and the member’s spouse if a joint federal income tax return is or shall be filed, is from one or more affected business entities and such affected business entity or entities file and pay the tax due under this section.

7. Each partnership and S corporation shall report to each of its members, for each tax year, such member’s direct pro rata share of the tax imposed pursuant to this section on such partnership or S corporation if it is an affected business entity and its indirect pro rata share of the tax imposed on any affected business entity in which such affected business entity is a direct or indirect member.

8. (1) Each member that is subject to the tax imposed pursuant to section 143.011 shall be entitled to a credit against the tax imposed pursuant to section 143.011. Such credit shall be in an amount equal to such member’s direct and indirect pro rata share of the tax paid pursuant to this section by any affected business entity of which such member is directly or indirectly a member.

(2) If the amount of the credit authorized by this subsection exceeds such member’s tax liability for the tax imposed pursuant to section 143.011, the excess amount shall not be refunded but may be carried forward to each succeeding tax year until such credit is fully taken.

9. (1) Each member that is subject to the tax imposed pursuant to section 143.011 as a resident or part-year resident of this state shall be entitled to a credit against the tax imposed pursuant to section 143.011 for such member’s direct and indirect pro rata share of taxes paid to another state of the United States or to the District of Columbia, on income of any partnership or S corporation of which such person is a member that is derived therefrom, provided the taxes paid to another state of the United States or to the District of Columbia results from a tax that the director of revenue determines is substantially similar to the tax imposed pursuant to this section. Any such credit shall be calculated in a manner to be prescribed by the director of revenue, provided such calculation is consistent with the provisions of this section, and further provided that the limitations provided in subsection 2 of section 143.081 shall apply to the credit authorized by this subsection.

(2) If the amount of the credit authorized by this subsection exceeds such member’s tax liability for the tax imposed pursuant to section 143.011, the excess amount shall not be refunded and shall not be carried forward.

10. (1) Each corporation that is subject to the tax imposed pursuant to section 143.071 and that is a member shall be entitled to a credit against the tax imposed pursuant to section 143.071. Such credit shall be in an amount equal to such corporation’s direct and indirect pro rata share of the tax paid pursuant to this section by any affected business entity of which such corporation is directly or indirectly a member. Such credit shall be applied after all other credits.

(2) If the amount of the credit authorized by this subsection exceeds such corporation’s tax liability for the tax imposed pursuant to section 143.071, the excess amount shall not be refunded but may be carried forward to each succeeding tax year until such credit is fully taken.
11. A partnership or an S corporation may elect to become an affected business entity that is required to pay the tax pursuant to this section in any tax year. A separate election shall be made for each taxable year. Such election shall be made on such form and in such manner as the director of revenue may prescribe by rule. An election made pursuant to this subsection shall be signed by:

(1) Each member of the electing entity who is a member at the time the election is filed; or

(2) Any officer, manager, or member of the electing entity who is authorized to make the election and who attests to having such authorization under penalty of perjury.

12. The provisions of sections 143.425 and 143.601 shall apply to any modifications made to an affected business entity’s federal return, and such affected business entity shall pay any resulting underpayment of tax to the extent not already paid pursuant to section 143.425.

13. (1) With respect to an action required or permitted to be taken by an affected business entity pursuant to this section, a proceeding under section 143.631 for reconsideration by the director of revenue, an appeal to the administrative hearing commission, or a review by the judiciary with respect to such action, the affected business entity shall designate an affected business entity representative for the tax year, and such affected business entity representative shall have the sole authority to act on behalf of the affected business entity, and the affected business entity’s members shall be bound by those actions.

(2) The department of revenue may establish reasonable qualifications and procedures for designating a person to be the affected business entity representative.

(3) The affected business entity representative shall be considered an authorized representative of the affected business entity and its members under section 32.057 for the purposes of compliance with this section, or participating in a proceeding described in subdivision (1) of this subsection.

14. The provisions of this section shall only apply to tax years ending on or after December 31, 2022.

15. The department of revenue may promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2022, shall be invalid and void.”; and

Further amend the title and enacting clause accordingly.

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

Senator Burlison moved that SS No. 2 for SCS for SB 968, as amended, be adopted, which motion prevailed.

On motion of Senator Burlison, SS No. 2 for SCS for SB 968, as amended, was declared perfected and ordered printed.
REPORTS OF STANDING COMMITTEES

Senator Rowden, Chairman of the Committee on Rules, Joint Rules, Resolutions and Ethics, submitted the following reports:

Mr. President: Your Committee on Rules, Joint Rules, Resolutions and Ethies, to which were referred SS No. 2 for SB 997 and SS for SCS for SB 683, begs leave to report that it has examined the same and finds that the bills have been truly perfected and that the printed copies furnished the Senators are correct.

SENATE BILLS FOR PERFECTION

Senator Roberts moved that SJR 41 be called from the Informal Calendar and taken up for perfection, which motion prevailed.

Senator Roberts offered SS for SJR 41, entitled:

SENATE SUBSTITUTE FOR
SENATE JOINT RESOLUTION NO. 41

Joint Resolution submitting to the qualified voters of Missouri, an amendment to article X of the Constitution of Missouri, by adding thereto one new section relating to property tax assessments for certain seniors.

Senator Roberts moved that SS for SJR 41 be adopted, which motion prevailed.

On motion of Senator Roberts, SS for SJR 41 was declared perfected and ordered printed.

MESSAGES FROM THE GOVERNOR

The following messages were received from the Governor, reading of which was waived:

GOVERNOR
STATE OF MISSOURI
April 13, 2022
To the Senate of the 101st General Assembly of the State of Missouri:
I have the honor to transmit to you herewith for your advice and consent the following appointment:

J. Allen Rowland, Republican, 18880 State Highway D, Dexter, Stoddard County, Missouri 63841, as a member of the Clean Water Commission of the State of Missouri, for a term ending April 12, 2026, and until his successor is duly appointed and qualified; vice, J. Allen Rowland, reappointed.

Respectfully submitted,
Michael L. Parson
Governor

Also,

GOVERNOR
STATE OF MISSOURI
April 13, 2022
To the Senate of the 101st General Assembly of the State of Missouri:
The following addendum should be made to the appointment of Mark Pierce as a member of the Clean Water Commission, submitted to you on February 23, 2022. Line 1 should be amended to read:

Mark Pierce, Republican, 4345 Southwest State Route HH, DeKalb, Buchanan County,

Respectfully submitted,
Michael L. Parson
Governor
Also,

GOVERNOR
STATE OF MISSOURI
April 13, 2022

To the Senate of the 101st General Assembly of the State of Missouri:
I have the honor to transmit to you herewith for your advice and consent the following appointment:
Neal Bredehoeft, Republican, 10924 Highway 23, Alma, Lafayette County, Missouri 64001, as a member of the Clean Water Commission, for a term ending April 12, 2026, and until his successor is duly appointed and qualified; vice, Neal Bredehoeft, reappointed.
Respectfully submitted,
Michael L. Parson
Governor

President Pro Tem Schatz referred the above reappointments and addendum to the Committee on Gubernatorial Appointments.

REFERRALS
President Pro Tem Schatz referred SJR 39 and SS for SCS for SB 683 to the Committee on Governmental Accountability and Fiscal Oversight.

SENATE BILLS FOR PERFECTION
Senator White moved that SB 938, with SCS and SS for SCS (pending), be called from the Informal Calendar and again taken up for perfection, which motion prevailed.

At the request of Senator White, SS for SCS for SB 938 was withdrawn.

Senator White offered SS No. 2 for SCS for SB 938, entitled:

SENATE SUBSTITUTE NO. 2 FOR
SENATE COMMITTEE SUBSTITUTE FOR
SENATE BILL NO. 938

An Act to repeal section 334.036, RSMo, and to enact in lieu thereof one new section relating to licensing of assistant physicians.

Senator White moved that SS No. 2 for SCS for SB 938 be adopted.

Senator White offered SA 1:

SENATE AMENDMENT NO. 1
Amend Senate Substitute No. 2 for Senate Committee Substitute for Senate Bill No. 938, Page 1, Section 334.036, Line 5, by striking the comma “,” and inserting in lieu thereof the following: “or”; and further amend line 6 by inserting after the word “or” the following: “any graduate of a foreign medical school who has received certification from”.

Senator White moved that the above amendment be adopted.

At the request of Senator White, SB 938, with SCS, SS No. 2 for SCS and SA 1 (pending), was placed on the Informal Calendar.

Senator Brown moved that SB 761, with SS and SA 2 (pending), be called from the Informal Calendar
and again taken up for perfection, which motion prevailed.

At request of Senator Brown, SS for SB 761 was withdrawn, rendering SA 2 moot.

Senator Rowden assumed the Chair.

Senator Brown offered SS No. 2 for SB 761, entitled:

SENATE SUBSTITUTE NO. 2 FOR
SENATE BILL NO. 761

An Act to repeal sections 476.055 and 610.021, RSMo, and to enact in lieu thereof three new sections relating to access to public records, with penalty provisions.

Senator Brown moved that SS No. 2 for SB 761 be adopted.

Senator Onder offered SA 1:

SENATE AMENDMENT NO. 1

Amend Senate Substitute No. 2 for Senate Bill No. 761, Page 1, Section 43.253, Line 16, by inserting after all of said line the following:

“161.841. 1. This section shall be known and may be cited as the “Parents’ Access to Public School Records Act”.

2. As used in this section, the term “parent” means a child’s parent, guardian, or other person having control or custody of the child.

3. This section shall be construed to empower parents to enforce the following rights to access public records maintained by school districts and public schools in which their children are enrolled that receive any federal or state moneys:

(1) The right to know what their minor child is being taught in school including, but not limited to, curricula, books, and other instructional materials;

(2) The right to receive information about who is teaching their minor child including, but not limited to, guest lecturers and outside presenters;

(3) The right to receive information about individuals and organizations receiving school contracts and funding;

(4) The right to view or receive all school records, medical or otherwise, concerning their minor child;

(5) The right to receive information about the collection and transmission of their minor child’s data;

(6) The right to have sufficient accountability and transparency regarding school board records; and

(7) The right to know about records regarding situations affecting their minor child’s safety in school.

4. No school district or public school shall require nondisclosure agreements or similar forms for
a parent’s review of curricula. Each public school or school district shall allow parents to make copies of curriculum documents.

5. No school district or public school shall collect any biometric data or other sensitive personal information about a minor child without obtaining written parental consent before collecting such data or information.

6. Each school board meeting pertaining to curricula, safety, or other student issues shall be held in public and allow for public comments.

7. Each school district and public school shall notify parents in a timely manner of all reported incidents pertaining to student safety including, but not limited to, any felony or misdemeanor committed by teachers or other school employees.”; and

Further amend the title and enacting clause accordingly.

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

Senator Brown moved that SS No. 2 for SB 761, as amended, be adopted, which motion prevailed.

On motion of Senator Brown, SS No. 2 for SB 761, as amended, was declared perfected and ordered printed.

REPORTS OF STANDING COMMITTEES

On behalf of Senator Rowden, Chairman of the Committee on Rules, Joint Rules, Resolutions and Ethics, Senator Schatz submitted the following report:

Mr. President: Your Committee on Rules, Joint Rules, Resolutions and Ethics, to which was referred SS for SJR 41, begs leave to report that it has examined the same and finds that the joint resolution has been truly perfected and that the printed copies furnished the Senators are correct.

RESOLUTIONS

Senator Hough offered Senate Resolution No. 793, regarding Steven D. Edwards, Springfield, which was adopted.

Senators Rowden and Crawford offered Senate Resolution No. 794, regarding Monarch Title Company Inc., which was adopted.

Senator Riddle offered Senate Resolution No. 795, regarding Darren Cassaday, Vandalia, which was adopted.

INTRODUCTION OF GUESTS

Senator Bernskoetter introduced to the Senate, Claudia Kehoe, Jefferson City.

Senator Cierpiot introduced to the Senate, Kansas City Area American Field Service program students; and Frank Russo; Marlaine Boyd; Roy Boyd; and Conswelia McCourt.

Senator Burlison introduced to the Senate, Justin Gabossi, Nixa.

Senator Eigel introduced to the Senate, Shawna Erter; and her daughter Morgan.

Senator Bean introduced to the Senate, Neelyville Lady Tigers Basketball team, coach, Becky Hale;
principal, Justin Dobbins; and counselor, Holly Dobbins.

Senator Washington introduced to the Senate, Metropolitan Community College, Kansas City.

Senator Rizzo introduced to the Senate, Patrick Rowland; Evaline Rose Rowland, Independence.

On motion of Senator White, the Senate adjourned under the rules.

SENATE CALENDAR

FORTY-NINTH DAY–THURSDAY, APRIL 14, 2022

FORMAL CALENDAR

HOUSE BILLS ON SECOND READING

HCS for HB 2120
HCS for HB 2012
HJR 116-Schnelting
HCS for HJR 131
HCS for HB 1597
HCS for HB 1472
HCS for HB 2587
HCS for HB 2289
HCS for HB 1682

HB 2697-Shaul
HB 2607-Rone
HCS for HB 1562
HB 2143-Kalberloh
HCS for HB 2032
HB 1954-Henderson
HB 1684-Black (137)
HB 2088-Grier
HB 1637-Schwadron

THIRD READING OF SENATE BILLS

SS#2 for SCS for SB 649-Eigel
SS for SCS for SB 756-White
(In Fiscal Oversight)
(In Fiscal Oversight)

SS for SCS for SB 931-Koenig
SS#2 for SB 997-Bernskoetter
(In Fiscal Oversight)
(In Fiscal Oversight)

SJR 39-Luetkemeyer
SS for SCS for SB 683-O’Laughlin
(In Fiscal Oversight)

SENATE BILLS FOR PERFECTION

1. SB 1153-Eslinger, with SCS
3. SB 867-Koenig, with SCS
2. SB 864-Hoskins, with SCS
4. SB 654-Crawford, with SCS
Forty-Eighth Day—Wednesday, April 13, 2022

5. SB 812-Eigel
6. SB 742-Crawford
7. SB 918-Burlison, with SCS
8. SB 984-Hegeman
9. SB 671-White, with SCS
10. SB 741-Crawford, with SCS
11. SB 674-Hough, with SCS
12. SB 987-Bean
13. SB 713-Razer, with SCS
14. SB 781-Moon, with SCS
15. SB 1179-Hough
16. SB 994-Washington
17. SBs 961 & 733-Beck, with SCS
18. SB 739-Eigel
19. SB 874-Arthur
20. SB 1040-Burlison
21. SB 1143-Brown
22. SB 685-May
23. SB 833-Luetkemeyer
24. SB 1023-Gannon
25. SB 809-Koenig, with SCS
26. SB 800-Hegeman
27. SB 958-Bean, with SCS
28. SB 694-Brattin
29. SB 1063-Crawford
30. SB 963-Brown, with SCS
31. SB 978-Eslinger, with SCS
32. SB 843-Moon, with SCS
33. SB 1178-White and Cierpiot, with SCS
34. SB 1133-White, with SCS
35. SB 684-May
36. SB 923-Brattin

HOUSE BILLS ON THIRD READING

HCS for HB 1686 (Brown) (In Fiscal Oversight)
HB 1697-Baker (Burlison)
HCS for HB 2005 (Bean)

INFORMAL CALENDAR

SENATE BILLS FOR PERFECTION

SB 631-Hegeman, with SCS, SS for SCS & SA 4 (pending)
SB 648-Rowden
SB 650-Eigel
SB 657-Cierpiot, with SS (pending)
SB 663-Bernskoetter, with SCS
SB 664-Bernskoetter
SB 665-Bernskoetter, with SS (pending)
SB 667-Burlison, with SS (pending)
SBs 698 & 639-Gannon, et al, with SCS, SA 1 & SA 1 to SA 1 (pending)
SBs 702, 636, 651, & 693-Eslinger, with SCS
SB 723-Hegeman, with SA 1 (pending)
SB 726-Onder, with SS & SA 6 (pending)
SB 732-Hoskins, with SCS
SB 762-Brown, with SS & SA 4 (pending)
SBs 777 & 808-Brattin, with SCS
SB 798-Mosley, with SA 1 & SA 1 to SA 1 (pending)
SB 850-Bean, with SCS & SS for SCS (pending)
SB 869-Koenig, with SS (pending)
SB 938-White, with SCS & SS#2 for SCS (pending)
HOUSE BILLS ON THIRD READING

SS for SCS for HCS for HB 1552 (Koenig)
(In Fiscal Oversight)

CONSENT CALENDAR

House Bills

Reported 4/12

HB 1600-Chipman (Bernskoetter)

BILLS IN CONFERENCE AND BILLS CARRYING REQUEST MESSAGES

Requests to Recede or Grant Conference

HCS for HB 2117, with SS#2, as amended (Bernskoetter)
(House requests Senate recede or grant conference)

RESOLUTIONS

SR 435-Schatz
SR 448-Eigel
SR 453-Eigel
SR 466-Eigel
SR 467-Eigel
SR 468-Hoskins
SR 469-Hoskins
SR 472-White
SR 496-Hoskins
SR 783-Hough
HCR 52-Plocher (Rowden)

Reported from Committee

SCR 25-Burlison
SCR 35-Washington
SR 594-Bernskoetter and Schupp

SCR 626-Schatz
SR 702-Rowden, with SCS