

Journal of the Senate

SECOND REGULAR SESSION

THIRTY-NINTH DAY—TUESDAY, MARCH 29, 2022

The Senate met pursuant to adjournment.

Senator Hough in the Chair.

The Reverend Carl Gauck offered the following prayer:

“The Lord is near to the brokenhearted, and saves the crushed spirit.” (Psalm 34:18)

Merciful God, we have so many damaged souls and people whose spirits are crushed due to the war that plagues our friends, the violence that destroys lives and leaves people grieving in its wake and the uncertainty of the future as prices rise and what was a ready abundance dries up before us. Teach us to trust in You always so that we need not fear but know that You will guide us through these changing times. 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.

Photographers from Nexstar Media Group were given permission to take pictures in the Senate Chamber.

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

Present—Senators

Arthur	Bean	Beck	Bernskoetter	Brattin	Brown	Burlison
Cierpiot	Crawford	Eigel	Eslinger	Gannon	Hegeman	Hoskins
Hough	Koenig	Luetkemeyer	May	Moon	Mosley	O’Laughlin
Onder	Razer	Rizzo	Roberts	Rowden	Schatz	Schupp
Thompson Rehder	Washington	White	Wieland	Williams—33		

Absent—Senators—None

Absent with leave—Senator Riddle—1

Vacancies—None

RESOLUTIONS

Senator Rowden offered the following resolution:

SENATE RESOLUTION NO. 702

Whereas, Gary Pinkel was born in Akron, Ohio; and

Whereas, he played football at Kent State University, achieving the honor of being named team captain and being named as a two-time, all-conference tight end; and

Whereas, after beginning his head coaching career at Toledo University in 1991, he won 65.9 percent of the games he coached and achieved a record of 73-37-3, the most wins in school history; and

Whereas, his nine winning seasons out of ten seasons coached at Toledo University included one conference championship, three division titles, and a Vegas Bowl win, and he was twice named Coach of the Year of the Mid-American Conference; and

Whereas, in 2001, he became the head coach at the University of Missouri, which had fielded a football program with only two winning seasons in the previous seventeen years and only one ten-win season in school history; and

Whereas, in the next fifteen years with him as the head coach, the University of Missouri football team achieved ten winning seasons, five ten-win seasons, five conference division titles, two Southeastern Conference championship game appearances, ten bowl appearances, six bowl victories, five final top-20 national rankings, and the university's first No. 1 ranking since 1960; and

Whereas, during those fifteen successful years, he was named the National Coach of the Year in 2007, the Big 12 Conference coach of the year in 2007, and the Southeastern Conference coach of the year in 2014; and

Whereas, his 2007 team became one of his greatest with a Big 12 North division title and record of 12-2 while scoring an average of 40 points per game. The team ruined the undefeated record of the border rival Kansas Jayhawks, defeating them with a 36-28 win and claiming the national No. 1 ranking. The 2007 team finished the season with a 38-17 victory over Arkansas in the Cotton Bowl and a national No. 4 ranking; and

Whereas, after the university moved to the Southeastern Conference, his 2013 team surprised college football experts by finishing the season as Southeastern Conference East division champions and Cotton Bowl champions over Oklahoma State with another 12-2 record and a national No. 5 ranking; and

Whereas, in 2014, he led his team in a return to the Southeastern Conference championship and finished the season with an 11-3 record and a national No. 14 ranking by defeating Minnesota in the Buffalo Wild Wings Citrus Bowl; and

Whereas, he ended his college football coaching career with his retirement in 2015 as the third-winningest active college football coach; and

Whereas, during his tenure as head coach, he led the University of Missouri football team to a 118-73 record; and

Whereas, he joined coach Bear Bryant and coach Steve Spurrier as one of only three coaches in college football history to hold the most wins for two collegiate football programs; and

Whereas, he became the first coach in NCAA Division I Football Bowl Subdivision history to lead a team to the conference championship game in three different conferences; and

Whereas, seventy-nine of his players were recognized as first team all-conference players, ten were recognized as First Team All-Americans, three were recognized as Academic All-Americans, three were recognized as National Football Foundation National Scholar-Athletes, and thirty-nine were drafted by National Football League teams; and

Whereas, players on his University of Missouri football teams excelled in the classroom by leading the conference in academic progress rate numerous times and with ninety-five percent of his senior players graduating; and

Whereas, he has been inducted into the Kenmore High School Hall of Fame, the Kent State Athletics Hall of Fame, the Toledo Athletics Hall of Fame, the Mid-American Conference Hall of Fame, the St. Louis Sports Hall of Fame, and the Missouri Sports Hall of Fame; and

Whereas, on January 10, 2022, the National Football Foundation & College Hall of Fame announced that Gary Pinkel is a member of the 2022 College Football Hall of Fame Class:

Now, Therefore, Be It Resolved that the members of the Missouri Senate, One Hundred First General Assembly, Second Regular Session, hereby congratulate Gary Pinkel on his myriad achievements in college football, recognize him as the winningest coach in Missouri football history, and recognize that his leadership and success put Missouri on the college football map and gave the state's flagship university hope and high expectations; and

Be It Further Resolved that the Secretary of Senate be instructed to prepare a properly inscribed copy of this resolution for Coach Gary Pinkel, the Kenmore High School Hall of Fame, the Kent State Athletics Hall of Fame, the Toledo Athletics Hall of Fame, the Mid-American Conference Hall of Fame, the St. Louis Sports Hall of Fame, the Missouri Sports Hall of Fame, the National Football Foundation & College Football Hall of Fame, and the president of the University of Missouri.

On motion of Senator Rowden, the Senate recessed until 2:00 p.m.

RECESS

The time of recess having expired, the Senate was called to order by Senator Rowden.

SECOND READING OF SENATE BILLS

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

SB 1197—Professional Registration.

SB 1198—Judiciary and Civil and Criminal Jurisprudence.

SB 1199—Commerce, Consumer Protection, Energy and the Environment.

SB 1200—Agriculture, Food Production and Outdoor Resources.

SB 1201—Judiciary and Civil and Criminal Jurisprudence.

SB 1202—Seniors, Families, Veterans & Military Affairs.

SB 1203—Education.

SB 1204—General Laws.

SB 1205—Judiciary and Civil and Criminal Jurisprudence.

SB 1206—Education.

SB 1207—Education.

SB 1208—General Laws.

SB 1209—Local Government and Elections.

SB 1210—Health and Pensions.

SB 1211—Commerce, Consumer Protection, Energy and the Environment.

SB 1212—Insurance and Banking.

SB 1213—Small Business and Industry.

SB 1214—Seniors, Families, Veterans & Military Affairs.

SB 1215—Judiciary and Civil and Criminal Jurisprudence.

SB 1216—Seniors, Families, Veterans & Military Affairs.

SB 1217—Judiciary and Civil and Criminal Jurisprudence.

SB 1218—Judiciary and Civil and Criminal Jurisprudence.

SB 1219—Judiciary and Civil and Criminal Jurisprudence.

SB 1220—Transportation, Infrastructure and Public Safety.

SB 1221—Seniors, Families, Veterans & Military Affairs.

- SB 1222**—Small Business and Industry.
- SB 1223**—Agriculture, Food Production and Outdoor Resources.
- SB 1224**—Education.
- SB 1225**—Education.
- SB 1226**—Appropriations.
- SB 1227**—General Laws.
- SB 1228**—Agriculture, Food Production and Outdoor Resources.
- SB 1229**—Transportation, Infrastructure and Public Safety.
- SB 1230**—Judiciary and Civil and Criminal Jurisprudence.
- SB 1231**—Transportation, Infrastructure and Public Safety.
- SB 1232**—Commerce, Consumer Protection, Energy and the Environment.
- SB 1233**—Economic Development.
- SB 1234**—Judiciary and Civil and Criminal Jurisprudence.
- SB 1235**—Agriculture, Food Production and Outdoor Resources.
- SB 1236**—Commerce, Consumer Protection, Energy and the Environment.
- SB 1237**—Governmental Accountability and Fiscal Oversight.
- SB 1238**—Transportation, Infrastructure and Public Safety.
- SB 1239**—Insurance and Banking.
- SB 1240**—Transportation, Infrastructure and Public Safety.
- SB 1241**—Transportation, Infrastructure and Public Safety.
- SB 1242**—Professional Registration.
- SB 1243**—Judiciary and Civil and Criminal Jurisprudence.
- SJR 47**—Governmental Accountability and Fiscal Oversight.
- SJR 48**—Seniors, Families, Veterans & Military Affairs.
- SJR 49**—Rules, Joint Rules, Resolutions and Ethics.
- SJR 50**—Governmental Accountability and Fiscal Oversight.
- SJR 51**—Local Government and Elections.
- SJR 52**—Seniors, Families, Veterans & Military Affairs.
- SJR 53**—Seniors, Families, Veterans & Military Affairs.
- SJR 54**—Health and Pensions.

SJR 55—Transportation, Infrastructure and Public Safety.

SJR 56—Transportation, Infrastructure and Public Safety.

SJR 57—Transportation, Infrastructure and Public Safety.

SJR 58—Transportation, Infrastructure and Public Safety.

SJR 59—Ways and Means.

REPORTS OF STANDING COMMITTEES

Senator Schatz, Chairman of the Committee on Gubernatorial Appointments, submitted the following report, reading of which was waived:

Mr. President: Your Committee on Gubernatorial Appointments, to which were referred the following appointments and reappointments, begs leave to report that it has considered the same and recommends that the Senate do give its advice and consent to the following:

Andrew Evans, Democrat, as a member of the Amusement Ride Safety Board;

Also,

Abigail Bidwell, Democrat, and Samantha Ferguson Knight, Democrat, as members of the Missouri Community Service Commission;

Also,

Thomas L. Brown, as a member of the Clay County Board of Election Commissioners;

Also,

Loran R. Coleman and Sherry Lynn Farrell, as members of the Missouri Real Estate Commission;

Also,

Teresa E. Coyan and Lynne Unnerstall, as members of the Mental Health Commission;

Also,

Connie Diekman, Republican, as a member of the State Committee of Dietitians;

Also,

Astra Ferris, as a member of the Missouri Workforce Development Board;

Also,

Dr. Donna Gloe, as a member of the Missouri State Board of Nursing;

Also,

Randy Little, Republican, as a member of the State Fair Commission;

Also,

Kelly L. McClelland, as a member of the Missouri Veterans Commission;

Also,

Roger S. Walleck, Independent, as a member of the Workers' Compensation Determinations Review Board; and

Darla Wierzbicki, Republican, as a member of the Clay County Board of Election Commissioners.

Senator Schatz requested unanimous consent of the Senate to vote on the above report in one motion. There being no objection, the request was granted.

Senator Schatz moved that the committee report be adopted, and the Senate do give its advice and consent to the above appointments and reappointments, which motion prevailed.

President Pro Tem Schatz assumed the Chair.

Senator Hegeman, Chairman of the Committee on Appropriations, submitted the following report:

Mr. President: Your Committee on Appropriations, to which was referred **SB 723**, begs leave to report that it has considered the same and recommends that the bill do pass.

On behalf of Senator Riddle, Chairman of the Committee on Professional Registration, Senator Burlison submitted the following report:

Mr. President: Your Committee on Professional Registration, to which was referred **SB 1153**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Senator Hoskins, Chairman of the Committee on Economic Development, submitted the following report:

Mr. President: Your Committee on Economic Development, to which was referred **SB 864**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

On behalf of Senator Eigel, Chairman of the Committee on General Laws, Senator Rowden submitted the following report:

Mr. President: Your Committee on General Laws, to which was referred **SB 867**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Senator Crawford, Chairman of the Committee on Local Government and Elections, submitted the following reports:

Mr. President: Your Committee on Local Government and Elections, to which was referred **SB 654**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Also,

Mr. President: Your Committee on Local Government and Elections, to which was referred **SB 812**, begs leave to report that it has considered the same and recommends that the bill do pass.

Senator Cierpiot, Chairman of the Committee on Commerce, Consumer Protection, Energy and the

Environment, submitted the following reports:

Mr. President: Your Committee on Commerce, Consumer Protection, Energy and the Environment, to which was referred **SB 742**, begs leave to report that it has considered the same and recommends that the bill do pass.

Also,

Mr. President: Your Committee on Commerce, Consumer Protection, Energy and the Environment, to which was referred **SB 918**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Senator Bernskoetter, Chairman of the Committee on Agriculture, Food Production and Outdoor Resources, submitted the following reports:

Mr. President: Your Committee on Agriculture, Food Production and Outdoor Resources, to which was referred **HCS for HB 1720**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Also,

Mr. President: Your Committee on Agriculture, Food Production and Outdoor Resources, to which was referred **SB 984**, begs leave to report that it has considered the same and recommends that the bill do pass.

Senator White, Chairman of the Committee on Seniors, Families, Veterans and Military Affairs, submitted the following report:

Mr. President: Your Committee on Seniors, Families, Veterans and Military Affairs, to which was referred **SB 671**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Senator Hough, Chairman of the Committee on Governmental Accountability and Fiscal Oversight, submitted the following reports:

Mr. President: Your Committee on Governmental Accountability and Fiscal Oversight, to which was referred **SB 741**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Also,

Mr. President: Your Committee on Governmental Accountability and Fiscal Oversight, to which was referred **SB 674**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Also,

Mr. President: Your Committee on Governmental Accountability and Fiscal Oversight, to which was referred **SB 987**, begs leave to report that it has considered the same and recommends that the bill do pass.

Senator Brown, Chairman of the Committee on Transportation, Infrastructure and Public Safety, submitted the following report:

Mr. President: Your Committee on Transportation, Infrastructure and Public Safety, to which was

referred **SB 713**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Senator O’Laughlin, Chairman of the Committee on Education, submitted the following reports:

Mr. President: Your Committee on Education, to which was referred **HCS** for **HB 1552**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

Also,

Mr. President: Your Committee on Education, to which was referred **SB 781**, begs leave to report that it has considered the same and recommends that the Senate Committee Substitute, hereto attached, do pass.

SENATE BILLS FOR PERFECTION

Senator Onder moved that **SB 726** be taken up for perfection, which motion prevailed.

Senator Onder offered **SS** for **SB 726**, entitled:

SENATE SUBSTITUTE FOR SENATE BILL NO. 726

An Act to amend chapter 9, RSMo, by adding thereto one new section relating to health care.

Senator Onder moved that **SS** for **SB 726** be adopted.

Senator Hegeman offered **SA 1**:

SENATE AMENDMENT NO. 1

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“190.800. 1. Each ground ambulance service, except for any ambulance service owned and operated by an entity owned and operated by the state of Missouri, including but not limited to any hospital owned or operated by the board of curators, as defined in chapter 172, or any department of the state, shall, in addition to all other fees and taxes now required or paid, pay an ambulance service reimbursement allowance tax for the privilege of engaging in the business of providing ambulance services in this state.

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

(1) “Ambulance”, the same meaning as such term is defined in section 190.100;

(2) “Ambulance service”, the same meaning as such term is defined in section 190.100;

(3) “Engaging in the business of providing ambulance services in this state”, accepting payment for such services[;

(4) “Gross receipts”, all amounts received by an ambulance service licensed under section 190.109 for its own account from the provision of all emergency services, as defined in section 190.100, to the public in the state of Missouri, but shall not include revenue from taxes collected under law, grants, subsidies received from governmental agencies, or the value of charity care].

190.803. 1. Each ambulance service’s reimbursement allowance shall be based on [its gross receipts

using] a formula established by the department of social services by [rule. The determination of tax due shall be the monthly gross receipts reported to the department of social services multiplied by the tax rate established by rule by the department of social services. Such tax rate may be a graduated rate based on gross receipts and shall not exceed a rate of six percent per annum of gross receipts] **regulations and rules as provided in section 190.836. The ambulance reimbursement allowance shall be consistent with permissible health care related taxes, as defined in 42 CFR 433, Subpart B, as amended.**

2. Notwithstanding any other provision of law to the contrary, any action respecting the validity of the rules promulgated under this section or section 190.815 or 190.833 shall be filed in the circuit court of Cole County. The circuit court of Cole County shall hear the matter as the court of original jurisdiction.

190.806. Each ambulance service shall keep such records as may be necessary to determine the amount of its reimbursement allowance. On or before the first day of October of each year, every ambulance service shall submit to the department of social services a statement that accurately reflects such information as is necessary to determine such ambulance service's reimbursement allowance tax. [Each licensed ambulance service shall report gross receipts to the department of social services.] The information obtained by the department of social services shall be confidential.

190.815. The director of the department of social services shall prescribe by rule the form and content of any document required to be filed under sections 190.800 to 190.836. [No later than November 30, 2009, the department of social services shall promulgate rules to implement the provisions of sections 190.830 to 190.836.]

196.1050. 1. The proceeds of any monetary settlement or portion of a global settlement between the attorney general of the state and any drug manufacturers, distributors, or combination thereof to resolve an opioid-related cause of action against such drug manufacturers, distributors, or combination thereof in a state or federal court shall only be utilized to pay for opioid addiction treatment and prevention services and health care and law enforcement costs related to opioid addiction treatment and prevention. Under no circumstances shall such settlement moneys be utilized to fund other services, programs, or expenses not reasonably related to opioid addiction treatment and prevention.

2. (1) There is hereby established in the state treasury the "Opioid Addiction Treatment and Recovery Fund", which shall consist of the proceeds of any settlement described in subsection 1 of this section, as well as any funds appropriated by the general assembly, or gifts, grants, donations, or bequests. The state treasurer shall be custodian of the fund. In accordance with sections 30.170 and 30.180, the state treasurer may approve disbursements. The fund shall be a dedicated fund and money in the fund shall be used by the department of mental health, the department of health and senior services, the department of social services, [and] the department of public safety, **the department of corrections, the office of administration, and the judiciary** for the purposes set forth in subsection 1 of this section.

(2) Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund.

(3) The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.

208.1000. (1) There is hereby created in the state treasury the "Medicaid Stabilization Fund", which shall consist of moneys received in the state treasury due to the American Rescue Plan Act of 2021, P.L. 117-2, Section 9814, as enacted by the 117th United States Congress, and any other

appropriations made by the general assembly. The state treasurer shall be custodian of the fund. In accordance with sections 30.170 and 30.180, the state treasurer may approve disbursements. The fund shall be a dedicated fund and money in the fund shall be used solely by the department of social services for the purposes of the MO HealthNet program.

(2) Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund.

(3) The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.”; and

Further amend the title and enacting clause accordingly.

Senator Hegeman moved that the above amendment be adopted.

Senator Hegeman offered **SA 1 to SA 1**, which was read:

SENATE AMENDMENT NO. 1 TO
SENATE AMENDMENT NO. 1

Amend Senate Amendment No. 1 to Senate Substitute for Senate Bill No. 726, Pages 3-4, Lines 89-90, by striking the words “the office of administration,”.

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

Senator Hegeman moved that **SA 1**, as amended, be adopted, which motion prevailed.

Senator Burlison offered **SA 2**:

SENATE AMENDMENT NO. 2

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“376.1800. 1. As used in this section, the following terms shall mean:

(1) “Medical retainer agreement”, a contract between a [physician] **provider** and an individual patient or such individual patient’s legal representative in which the [physician] **provider** agrees to provide certain health care services described in the agreement to the individual patient for an agreed-upon fee and period of time;

(2) [“Physician”] **“Provider”**, a **chiropractor licensed under chapter 331, a dentist licensed under chapter 332, or** a physician licensed under chapter 334. [Physician] **Provider** includes an individual [physician] **provider** or a group of [physicians] **providers**.

2. A medical retainer agreement is not insurance and is not subject to this chapter. Entering into a medical retainer agreement is not the business of insurance and is not subject to this chapter.

3. A [physician] **provider** or agent of a [physician] **provider** is not required to obtain a certificate of authority or license under this section to market, sell, or offer to sell a medical retainer agreement.

4. To be considered a medical retainer agreement for the purposes of this section, the agreement shall meet all of the following requirements:

(1) Be in writing;

(2) Be signed by the [physician] **provider** or agent of the [physician] **provider** and the individual patient or such individual patient's legal representative;

(3) Allow either party to terminate the agreement on written notice to the other party;

(4) Describe the specific health care services that are included in the agreement;

(5) Specify the fee for the agreement;

(6) Specify the period of time under the agreement; and

(7) Prominently state in writing that the agreement is not health insurance.

5. (1) For any patient who enters into a medical retainer agreement under this section and who has established a health savings account (HSA) in compliance with 26 U.S.C. Section 223, or who has a flexible spending arrangement (FSA) or health reimbursement arrangement (HRA), fees under the patient's medical retainer agreement may be paid from such health savings account or reimbursed through such flexible spending arrangement or health reimbursement arrangement, subject to any federal or state laws regarding qualified expenditures from a health savings account, or reimbursement through a flexible spending arrangement or a health reimbursement arrangement.

(2) The employer of any patient described in subdivision (1) of this subsection may:

(a) Make contributions to such patient's health savings account, flexible spending arrangement, or health reimbursement arrangement to cover all or any portion of the agreed-upon fees under the patient's medical retainer agreement, subject to any federal or state restrictions on contributions made by an employer to a health savings account, or reimbursement through a flexible spending arrangement, or health reimbursement arrangement; or

(b) Pay the agreed-upon fees directly to the [physician] **provider** under the medical retainer agreement.

6. Nothing in this section shall be construed as prohibiting, limiting, or otherwise restricting a [physician] **provider** in a collaborative practice arrangement from entering into a medical retainer agreement under this section.”; and

Further amend the title and enacting clause accordingly.

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

Senator Thompson Rehder offered **SA 3**:

SENATE AMENDMENT NO. 3

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“579.040. 1. A person commits the offense of unlawful distribution, delivery, or sale of drug paraphernalia if he or she unlawfully distributes, delivers, or sells, or possesses with intent to distribute, deliver, or sell drug paraphernalia knowing, or under circumstances in which one reasonably should know, that it will be used to plant, propogate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance or an imitation controlled substance in violation of

this chapter. **Any entity registered with the department of health and senior services that possesses, distributes, or delivers hypodermic needles or syringes for the purpose of operating a syringe access program or otherwise mitigating health risks associated with unsterile injection drug use shall be exempt from the provisions of this section.**

2. **No entity shall be present within five hundred feet of any school building, unless such entity is in operation prior to the date the school building commenced operations.**

3. The offense of unlawful delivery of drug paraphernalia is a class A misdemeanor, unless done for commercial purposes, in which case it is a class E felony.

579.076. 1. A person commits the offense of unlawful manufacture of drug paraphernalia if he or she unlawfully manufactures with intent to deliver drug paraphernalia, knowing, or under circumstances where one reasonably should know, that it will be used to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance or an imitation controlled substance in violation of this chapter or chapter 195. **Any entity registered with the department of health and senior services that delivers or manufactures hypodermic needles or syringes for the purpose of operating a syringe access program or otherwise mitigating health risks associated with unsterile injection drug use shall be exempt from the provisions of this section.**

2. The offense of unlawful manufacture of drug paraphernalia is a class A misdemeanor, unless done for commercial purposes, in which case it is a class E felony.”; and

Further amend the title and enacting clause accordingly.

Senator Thompson Rehder moved that the above amendment be adopted.

Senator Hoskins offered SA 1 to SA 3, which was read:

SENATE AMENDMENT NO. 1 TO
SENATE AMENDMENT NO. 3

Amend Senate Amendment No. 3 to Senate Substitute for Senate Bill No. 726, Page 1, Line 20, by striking “five hundred feet” and inserting in lieu there of the following: “**one-quarter of a mile**”.

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

Senator Thompson Rehder moved that SA 3, as amended, be adopted, which motion prevailed.

Senator May offered SA 4:

SENATE AMENDMENT NO. 4

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“167.630. 1. Each school board may authorize a school nurse licensed under chapter 335 who is employed by the school district and for whom the board is responsible for to maintain an adequate supply of prefilled auto syringes of epinephrine with fifteen-hundredths milligram or three-tenths milligram delivery at the school. The nurse shall recommend to the school board the number of prefilled epinephrine auto syringes that the school should maintain.

2. To obtain prefilled epinephrine auto syringes for a school district, a prescription written by a licensed physician, a physician’s assistant, or nurse practitioner is required. For such prescriptions, the school district shall be designated as the patient, the nurse’s name shall be required, and the prescription shall be filled at a licensed pharmacy.

3. A school nurse [or], **contracted agent trained by a nurse, or** other school employee trained by and supervised by the nurse, shall have the discretion to use an epinephrine auto syringe on any student the school nurse [or], trained employee **or trained contracted agent** believes is having a life-threatening anaphylactic reaction based on the training in recognizing an acute episode of an anaphylactic reaction. The provisions of section 167.624 concerning immunity from civil liability for trained employees administering lifesaving methods shall apply to trained employees administering a prefilled auto syringe under this section. **Trained contracted agents shall have immunity from civil liability for administering a prefilled auto syringe under this section.**

170.307. 1. For school year 2022-23 and each school year thereafter, upon graduation from high school, pupils in public schools and charter schools shall have received mental health awareness training given any time during a pupil’s four years of high school.

2. Beginning in school year 2022-23, any public school or charter school serving grades nine through twelve shall provide enrolled students instruction in mental health awareness. Students with disabilities may participate to the extent appropriate as determined by the provisions of the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act. Instruction shall be included in the district’s existing health or physical education curriculum. Instruction shall be based on a program established by the department of elementary and secondary education.

3. The department of elementary and secondary education shall promulgate rules to develop a model curriculum to be used by school districts to provide the instruction required by 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 May moved that the above amendment be adopted, which motion prevailed.

Senator White offered **SA 5**:

SENATE AMENDMENT NO. 5

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“191.500. As used in sections 191.500 to 191.550, unless the context clearly indicates otherwise, the following terms mean:

(1) “Area of defined need”, a community or section of an urban area of this state which is certified by

the department of health and senior services as being in need of the services of a physician to improve the patient-doctor ratio in the area, to contribute professional physician services to an area of economic impact, or to contribute professional physician services to an area suffering from the effects of a natural disaster;

(2) “Department”, the department of health and senior services;

(3) “Eligible student”, a full-time student accepted and enrolled in a formal course of instruction leading to a degree of doctor of medicine or doctor of osteopathy, **including psychiatry**, at a participating school, **or a doctor of dental surgery, doctor of dental medicine, or a bachelor of science degree in dental hygiene**;

(4) “Financial assistance”, an amount of money paid by the state of Missouri to a qualified applicant pursuant to sections 191.500 to 191.550;

(5) “Participating school”, an institution of higher learning within this state which grants the degrees of doctor of medicine or doctor of osteopathy, and which is accredited in the appropriate degree program by the American Medical Association or the American Osteopathic Association, **or a degree program by the American Dental Association or the American Psychiatric Association, and applicable residency programs for each degree type and discipline**;

(6) “Primary care”, general or family practice, internal medicine, pediatric [or], **psychiatric**, obstetric and gynecological care as provided to the general public by physicians licensed and registered pursuant to chapter 334, **dental practice, or a dental hygienist licensed and registered pursuant to chapter 332**;

(7) “Resident”, any natural person who has lived in this state for one or more years for any purpose other than the attending of an educational institution located within this state;

(8) “Rural area”, a town or community within this state which is not within a “standard metropolitan statistical area”, and has a population of six thousand or fewer inhabitants as determined by the last preceding federal decennial census or any unincorporated area not within a standard metropolitan statistical area.

191.515. An eligible student may apply to the department for a loan under sections 191.500 to 191.550 only if, at the time of his application and throughout the period during which he receives the loan, he has been formally accepted as a student in a participating school in a course of study leading to the degree of doctor of medicine or doctor of osteopathy, **including psychiatry, or a doctor of dental surgery, a doctor of dental medicine, or a bachelor of science degree in dental hygiene**, and is a resident of this state.

191.520. No loan to any eligible student shall exceed [seven thousand five hundred] **twenty-five thousand** dollars for each academic year, which shall run from August first of any year through July thirty-first of the following year. All loans shall be made from funds appropriated to the medical school loan and loan repayment program fund created by section 191.600, by the general assembly.

191.525. No more than twenty-five loans shall be made to eligible students during the first academic year this program is in effect. Twenty-five new loans may be made for the next three academic years until a total of one hundred loans are available. At least one-half of the loans shall be made to students from rural areas as defined in section 191.500. An eligible student may receive loans for each academic year he is pursuing a course of study directly leading to a degree of doctor of medicine or doctor of osteopathy, **doctor of dental surgery, or doctor of dental medicine, or a bachelor of science degree in dental hygiene**.

335.230. Financial assistance to any qualified applicant shall not exceed [five] **ten** thousand dollars for

each academic year for a professional nursing program and shall not exceed [two thousand five hundred] **five thousand** dollars for each academic year for a practical nursing program. All financial assistance shall be made from funds credited to the professional and practical nursing student loan and nurse loan repayment fund. A qualified applicant may receive financial assistance for each academic year he remains a student in good standing at a participating school.

335.257. Successful applicants for whom loan payments are made under the provisions of sections 335.245 to 335.259 shall verify to the department twice each year, [in June and in December,] in the manner prescribed by the department that qualified employment in this state is being maintained.”; and

Further amend the title and enacting clause accordingly.

Senator White moved that the above amendment be adopted.

Senator Eslinger offered **SA 1 to SA 5**:

SENATE AMENDMENT NO. 1 TO
SENATE AMENDMENT NO. 5

Amend Senate Amendment No. 5 to Senate Substitute for Senate Bill No. 726, Page 1, Section 191.500, Line 20, by inserting after “medicine,” the following: “**a master’s degree from a physician assistant program,**”; and

Further amend said amendment, page 2, line 30, by inserting immediately after “Association” the following: “**, the Committee on Allied Health Education and Accreditation or successor agency,**”; and further amend line 56, by inserting after “medicine,” the following: “**a master’s degree from a physician assistant program,**”; and

Further amend said amendment, page 3, section 191.525, line 75, by striking “or” and further amend line 76, by inserting after “medicine,” the following: “**a master’s degree from a physician assistant program,**”.

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

Senator Rowden assumed the Chair.

Senator White moved that **SA 5**, as amended, be adopted, which motion prevailed.

Senator Gannon offered **SA 6**:

SENATE AMENDMENT NO. 6

Amend Senate Substitute for Senate Bill No. 726, Page 1, Section 9.288, Line 9, by inserting after all of said line the following:

“208.151. 1. Medical assistance on behalf of needy persons shall be known as “MO HealthNet”. For the purpose of paying MO HealthNet benefits and to comply with Title XIX, Public Law 89-97, 1965 amendments to the federal Social Security Act (42 U.S.C. Section 301, et seq.) as amended, the following needy persons shall be eligible to receive MO HealthNet benefits to the extent and in the manner hereinafter provided:

- (1) All participants receiving state supplemental payments for the aged, blind and disabled;
- (2) All participants receiving aid to families with dependent children benefits, including all persons

under nineteen years of age who would be classified as dependent children except for the requirements of subdivision (1) of subsection 1 of section 208.040. Participants eligible under this subdivision who are participating in treatment court, as defined in section 478.001, shall have their eligibility automatically extended sixty days from the time their dependent child is removed from the custody of the participant, subject to approval of the Centers for Medicare and Medicaid Services;

(3) All participants receiving blind pension benefits;

(4) All persons who would be determined to be eligible for old age assistance benefits, permanent and total disability benefits, or aid to the blind benefits under the eligibility standards in effect December 31, 1973, or less restrictive standards as established by rule of the family support division, who are sixty-five years of age or over and are patients in state institutions for mental diseases or tuberculosis;

(5) All persons under the age of twenty-one years who would be eligible for aid to families with dependent children except for the requirements of subdivision (2) of subsection 1 of section 208.040, and who are residing in an intermediate care facility, or receiving active treatment as inpatients in psychiatric facilities or programs, as defined in 42 U.S.C. Section 1396d, as amended;

(6) All persons under the age of twenty-one years who would be eligible for aid to families with dependent children benefits except for the requirement of deprivation of parental support as provided for in subdivision (2) of subsection 1 of section 208.040;

(7) All persons eligible to receive nursing care benefits;

(8) All participants receiving family foster home or nonprofit private child-care institution care, subsidized adoption benefits and parental school care wherein state funds are used as partial or full payment for such care;

(9) All persons who were participants receiving old age assistance benefits, aid to the permanently and totally disabled, or aid to the blind benefits on December 31, 1973, and who continue to meet the eligibility requirements, except income, for these assistance categories, but who are no longer receiving such benefits because of the implementation of Title XVI of the federal Social Security Act, as amended;

(10) Pregnant women who meet the requirements for aid to families with dependent children, except for the existence of a dependent child in the home;

(11) Pregnant women who meet the requirements for aid to families with dependent children, except for the existence of a dependent child who is deprived of parental support as provided for in subdivision (2) of subsection 1 of section 208.040;

(12) Pregnant women or infants under one year of age, or both, whose family income does not exceed an income eligibility standard equal to one hundred eighty-five percent of the federal poverty level as established and amended by the federal Department of Health and Human Services, or its successor agency;

(13) Children who have attained one year of age but have not attained six years of age who are eligible for medical assistance under 6401 of P.L. 101-239 (Omnibus Budget Reconciliation Act of 1989) (42 U.S.C. Sections 1396a to 1396b). The family support division shall use an income eligibility standard equal to one hundred thirty-three percent of the federal poverty level established by the Department of Health and Human Services, or its successor agency;

(14) Children who have attained six years of age but have not attained nineteen years of age. For

children who have attained six years of age but have not attained nineteen years of age, the family support division shall use an income assessment methodology which provides for eligibility when family income is equal to or less than equal to one hundred percent of the federal poverty level established by the Department of Health and Human Services, or its successor agency. As necessary to provide MO HealthNet coverage under this subdivision, the department of social services may revise the state MO HealthNet plan to extend coverage under 42 U.S.C. Section 1396a(a)(10)(A)(i)(III) to children who have attained six years of age but have not attained nineteen years of age as permitted by paragraph (2) of subsection (n) of 42 U.S.C. Section 1396d using a more liberal income assessment methodology as authorized by paragraph (2) of subsection (r) of 42 U.S.C. Section 1396a;

(15) The family support division shall not establish a resource eligibility standard in assessing eligibility for persons under subdivision (12), (13) or (14) of this subsection. The MO HealthNet division shall define the amount and scope of benefits which are available to individuals eligible under each of the subdivisions (12), (13), and (14) of this subsection, in accordance with the requirements of federal law and regulations promulgated thereunder;

(16) Notwithstanding any other provisions of law to the contrary, ambulatory prenatal care shall be made available to pregnant women during a period of presumptive eligibility pursuant to 42 U.S.C. Section 1396r-1, as amended;

(17) A child born to a woman eligible for and receiving MO HealthNet benefits under this section on the date of the child's birth shall be deemed to have applied for MO HealthNet benefits and to have been found eligible for such assistance under such plan on the date of such birth and to remain eligible for such assistance for a period of time determined in accordance with applicable federal and state law and regulations so long as the child is a member of the woman's household and either the woman remains eligible for such assistance or for children born on or after January 1, 1991, the woman would remain eligible for such assistance if she were still pregnant. Upon notification of such child's birth, the family support division shall assign a MO HealthNet eligibility identification number to the child so that claims may be submitted and paid under such child's identification number;

(18) Pregnant women and children eligible for MO HealthNet benefits pursuant to subdivision (12), (13) or (14) of this subsection shall not as a condition of eligibility for MO HealthNet benefits be required to apply for aid to families with dependent children. The family support division shall utilize an application for eligibility for such persons which eliminates information requirements other than those necessary to apply for MO HealthNet benefits. The division shall provide such application forms to applicants whose preliminary income information indicates that they are ineligible for aid to families with dependent children. Applicants for MO HealthNet benefits under subdivision (12), (13) or (14) of this subsection shall be informed of the aid to families with dependent children program and that they are entitled to apply for such benefits. Any forms utilized by the family support division for assessing eligibility under this chapter shall be as simple as practicable;

(19) Subject to appropriations necessary to recruit and train such staff, the family support division shall provide one or more full-time, permanent eligibility specialists to process applications for MO HealthNet benefits at the site of a health care provider, if the health care provider requests the placement of such eligibility specialists and reimburses the division for the expenses including but not limited to salaries, benefits, travel, training, telephone, supplies, and equipment of such eligibility specialists. The division may provide a health care provider with a part-time or temporary eligibility specialist at the site of a health care provider if the health care provider requests the placement of such an eligibility specialist and reimburses

the division for the expenses, including but not limited to the salary, benefits, travel, training, telephone, supplies, and equipment, of such an eligibility specialist. The division may seek to employ such eligibility specialists who are otherwise qualified for such positions and who are current or former welfare participants. The division may consider training such current or former welfare participants as eligibility specialists for this program;

(20) Pregnant women who are eligible for, have applied for and have received MO HealthNet benefits under subdivision (2), (10), (11) or (12) of this subsection shall continue to be considered eligible for all pregnancy-related and postpartum MO HealthNet benefits provided under section 208.152 until the end of the sixty-day period beginning on the last day of their pregnancy. Pregnant women receiving mental health treatment for postpartum depression or related mental health conditions within sixty days of giving birth shall, subject to appropriations and any necessary federal approval, be eligible for MO HealthNet benefits for mental health services for the treatment of postpartum depression and related mental health conditions for up to twelve additional months. Pregnant women receiving substance abuse treatment within sixty days of giving birth shall, subject to appropriations and any necessary federal approval, be eligible for MO HealthNet benefits for substance abuse treatment and mental health services for the treatment of substance abuse for no more than twelve additional months, as long as the woman remains adherent with treatment. The department of mental health and the department of social services shall seek any necessary waivers or state plan amendments from the Centers for Medicare and Medicaid Services and shall develop rules relating to treatment plan adherence. No later than fifteen months after receiving any necessary waiver, the department of mental health and the department of social services shall report to the house of representatives budget committee and the senate appropriations committee on the compliance with federal cost neutrality requirements;

(21) Case management services for pregnant women and young children at risk shall be a covered service. To the greatest extent possible, and in compliance with federal law and regulations, the department of health and senior services shall provide case management services to pregnant women by contract or agreement with the department of social services through local health departments organized under the provisions of chapter 192 or chapter 205 or a city health department operated under a city charter or a combined city-county health department or other department of health and senior services designees. To the greatest extent possible the department of social services and the department of health and senior services shall mutually coordinate all services for pregnant women and children with the crippled children's program, the prevention of intellectual disability and developmental disability program and the prenatal care program administered by the department of health and senior services. The department of social services shall by regulation establish the methodology for reimbursement for case management services provided by the department of health and senior services. For purposes of this section, the term "case management" shall mean those activities of local public health personnel to identify prospective MO HealthNet-eligible high-risk mothers and enroll them in the state's MO HealthNet program, refer them to local physicians or local health departments who provide prenatal care under physician protocol and who participate in the MO HealthNet program for prenatal care and to ensure that said high-risk mothers receive support from all private and public programs for which they are eligible and shall not include involvement in any MO HealthNet prepaid, case-managed programs;

(22) By January 1, 1988, the department of social services and the department of health and senior services shall study all significant aspects of presumptive eligibility for pregnant women and submit a joint report on the subject, including projected costs and the time needed for implementation, to the general assembly. The department of social services, at the direction of the general assembly, may implement

presumptive eligibility by regulation promulgated pursuant to chapter 207;

(23) All participants who would be eligible for aid to families with dependent children benefits except for the requirements of paragraph (d) of subdivision (1) of section 208.150;

(24) (a) All persons who would be determined to be eligible for old age assistance benefits under the eligibility standards in effect December 31, 1973, as authorized by 42 U.S.C. Section 1396a(f), or less restrictive methodologies as contained in the MO HealthNet state plan as of January 1, 2005; except that, on or after July 1, 2005, less restrictive income methodologies, as authorized in 42 U.S.C. Section 1396a(r)(2), may be used to change the income limit if authorized by annual appropriation;

(b) All persons who would be determined to be eligible for aid to the blind benefits under the eligibility standards in effect December 31, 1973, as authorized by 42 U.S.C. Section 1396a(f), or less restrictive methodologies as contained in the MO HealthNet state plan as of January 1, 2005, except that less restrictive income methodologies, as authorized in 42 U.S.C. Section 1396a(r)(2), shall be used to raise the income limit to one hundred percent of the federal poverty level;

(c) All persons who would be determined to be eligible for permanent and total disability benefits under the eligibility standards in effect December 31, 1973, as authorized by 42 U.S.C. Section 1396a(f); or less restrictive methodologies as contained in the MO HealthNet state plan as of January 1, 2005; except that, on or after July 1, 2005, less restrictive income methodologies, as authorized in 42 U.S.C. Section 1396a(r)(2), may be used to change the income limit if authorized by annual appropriations. Eligibility standards for permanent and total disability benefits shall not be limited by age;

(25) Persons who have been diagnosed with breast or cervical cancer and who are eligible for coverage pursuant to 42 U.S.C. Section 1396a(a)(10)(A)(ii)(XVIII). Such persons shall be eligible during a period of presumptive eligibility in accordance with 42 U.S.C. Section 1396r-1;

(26) Persons who are in foster care under the responsibility of the state of Missouri on the date such persons attained the age of eighteen years, or at any time during the thirty-day period preceding their eighteenth birthday, or persons who received foster care for at least six months in another state, are residing in Missouri, and are at least eighteen years of age, without regard to income or assets, if such persons:

(a) Are under twenty-six years of age;

(b) Are not eligible for coverage under another mandatory coverage group; and

(c) Were covered by Medicaid while they were in foster care;

(27) Any homeless child or homeless youth, as those terms are defined in section 167.020, subject to approval of a state plan amendment by the Centers for Medicare and Medicaid Services;

(28) (a) Beginning April 1, 2022, or the effective date of this act, whichever is later, pregnant women who are eligible for, have applied for, and have received MO HealthNet benefits under subdivision (2), (10), (11), or (12) of this subsection shall be eligible for medical assistance during the pregnancy and during the twelve-month period that begins on the last day of the woman's pregnancy and ends on the last day of the month in which such twelve-month period ends, consistent with the provisions of 42 U.S.C. Section 1396a(e)(16). The department shall submit a state plan amendment to the Centers for Medicare and Medicaid Services within sixty days of the effective date of this act;

(b) The provisions of this subdivision shall remain in effect for any period of time during which

the federal authority under 42 U.S.C. Section 1396a(e)(16), as amended, or any successor statutes or implementing regulations, is in effect.

2. Rules and regulations to implement this section shall be promulgated in accordance with chapter 536. 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, 2002, shall be invalid and void.

3. After December 31, 1973, and before April 1, 1990, any family eligible for assistance pursuant to 42 U.S.C. Section 601, et seq., as amended, in at least three of the last six months immediately preceding the month in which such family became ineligible for such assistance because of increased income from employment shall, while a member of such family is employed, remain eligible for MO HealthNet benefits for four calendar months following the month in which such family would otherwise be determined to be ineligible for such assistance because of income and resource limitation. After April 1, 1990, any family receiving aid pursuant to 42 U.S.C. Section 601, et seq., as amended, in at least three of the six months immediately preceding the month in which such family becomes ineligible for such aid, because of hours of employment or income from employment of the caretaker relative, shall remain eligible for MO HealthNet benefits for six calendar months following the month of such ineligibility as long as such family includes a child as provided in 42 U.S.C. Section 1396r-6. Each family which has received such medical assistance during the entire six-month period described in this section and which meets reporting requirements and income tests established by the division and continues to include a child as provided in 42 U.S.C. Section 1396r-6 shall receive MO HealthNet benefits without fee for an additional six months. The MO HealthNet division may provide by rule and as authorized by annual appropriation the scope of MO HealthNet coverage to be granted to such families.

4. When any individual has been determined to be eligible for MO HealthNet benefits, such medical assistance will be made available to him or her for care and services furnished in or after the third month before the month in which he made application for such assistance if such individual was, or upon application would have been, eligible for such assistance at the time such care and services were furnished; provided, further, that such medical expenses remain unpaid.

5. The department of social services may apply to the federal Department of Health and Human Services for a MO HealthNet waiver amendment to the Section 1115 demonstration waiver or for any additional MO HealthNet waivers necessary not to exceed one million dollars in additional costs to the state, unless subject to appropriation or directed by statute, but in no event shall such waiver applications or amendments seek to waive the services of a rural health clinic or a federally qualified health center as defined in 42 U.S.C. Section 1396d(1)(1) and (2) or the payment requirements for such clinics and centers as provided in 42 U.S.C. Section 1396a(a)(15) and 1396a(bb) unless such waiver application is approved by the oversight committee created in section 208.955. A request for such a waiver so submitted shall only become effective by executive order not sooner than ninety days after the final adjournment of the session of the general assembly to which it is submitted, unless it is disapproved within sixty days of its submission to a regular session by a senate or house resolution adopted by a majority vote of the respective elected members thereof, unless the request for such a waiver is made subject to appropriation or directed by statute.

6. Notwithstanding any other provision of law to the contrary, in any given fiscal year, any persons made

eligible for MO HealthNet benefits under subdivisions (1) to (22) of subsection 1 of this section shall only be eligible if annual appropriations are made for such eligibility. This subsection shall not apply to classes of individuals listed in 42 U.S.C. Section 1396a(a)(10)(A)(i).

7. (1) Notwithstanding any provision of law to the contrary, a military service member, or an immediate family member residing with such military service member, who is a legal resident of this state and is eligible for MO HealthNet developmental disability services, shall have his or her eligibility for MO HealthNet developmental disability services temporarily suspended for any period of time during which such person temporarily resides outside of this state for reasons relating to military service, but shall have his or her eligibility immediately restored upon returning to this state to reside.

(2) Notwithstanding any provision of law to the contrary, if a military service member, or an immediate family member residing with such military service member, is not a legal resident of this state, but would otherwise be eligible for MO HealthNet developmental disability services, such individual shall be deemed eligible for MO HealthNet developmental disability services for the duration of any time in which such individual is temporarily present in this state for reasons relating to military service.

208.662. 1. There is hereby established within the department of social services the “Show-Me Healthy Babies Program” as a separate children’s health insurance program (CHIP) for any low-income unborn child. The program shall be established under the authority of Title XXI of the federal Social Security Act, the State Children’s Health Insurance Program, as amended, and 42 CFR 457.1.

2. For an unborn child to be enrolled in the show-me healthy babies program, his or her mother shall not be eligible for coverage under Title XIX of the federal Social Security Act, the Medicaid program, as it is administered by the state, and shall not have access to affordable employer-subsidized health care insurance or other affordable health care coverage that includes coverage for the unborn child. In addition, the unborn child shall be in a family with income eligibility of no more than three hundred percent of the federal poverty level, or the equivalent modified adjusted gross income, unless the income eligibility is set lower by the general assembly through appropriations. In calculating family size as it relates to income eligibility, the family shall include, in addition to other family members, the unborn child, or in the case of a mother with a multiple pregnancy, all unborn children.

3. Coverage for an unborn child enrolled in the show-me healthy babies program shall include all prenatal care and pregnancy-related services that benefit the health of the unborn child and that promote healthy labor, delivery, and birth. Coverage need not include services that are solely for the benefit of the pregnant mother, that are unrelated to maintaining or promoting a healthy pregnancy, and that provide no benefit to the unborn child. However, the department may include pregnancy-related assistance as defined in 42 U.S.C. Section 1397ll.

4. There shall be no waiting period before an unborn child may be enrolled in the show-me healthy babies program. In accordance with the definition of child in 42 CFR 457.10, coverage shall include the period from conception to birth. The department shall develop a presumptive eligibility procedure for enrolling an unborn child. There shall be verification of the pregnancy.

5. Coverage for the child shall continue for up to one year after birth, unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations.

6. (1) Pregnancy-related and postpartum coverage for the mother shall begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth day after the pregnancy ends,

unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations. The department may include pregnancy-related assistance as defined in 42 U.S.C. Section 1397ll.

(2) Beginning April 1, 2022, or the effective date of this act, whichever is later, mothers eligible to receive coverage under this section shall receive medical assistance benefits during the pregnancy and during the twelve-month period that begins on the last day of the woman's pregnancy and ends on the last day of the month in which such twelve-month period ends, consistent with the provisions of 42 U.S.C. Section 1397gg(e)(1)(J). The department shall seek any necessary state plan amendments or waivers to implement the provisions of this subdivision within sixty days of the effective date of this act. The provisions of this subdivision shall remain in effect for any period of time during which the federal authority under 42 U.S.C. Section 1397gg(e)(1)(J), as amended, or any successor statutes or implementing regulations, is in effect.

7. The department shall provide coverage for an unborn child enrolled in the show-me healthy babies program in the same manner in which the department provides coverage for the children's health insurance program (CHIP) in the county of the primary residence of the mother.

8. The department shall provide information about the show-me healthy babies program to maternity homes as defined in section 135.600, pregnancy resource centers as defined in section 135.630, and other similar agencies and programs in the state that assist unborn children and their mothers. The department shall consider allowing such agencies and programs to assist in the enrollment of unborn children in the program, and in making determinations about presumptive eligibility and verification of the pregnancy.

9. Within sixty days after August 28, 2014, the department shall submit a state plan amendment or seek any necessary waivers from the federal Department of Health and Human Services requesting approval for the show-me healthy babies program.

10. At least annually, the department shall prepare and submit a report to the governor, the speaker of the house of representatives, and the president pro tempore of the senate analyzing and projecting the cost savings and benefits, if any, to the state, counties, local communities, school districts, law enforcement agencies, correctional centers, health care providers, employers, other public and private entities, and persons by enrolling unborn children in the show-me healthy babies program. The analysis and projection of cost savings and benefits, if any, may include but need not be limited to:

(1) The higher federal matching rate for having an unborn child enrolled in the show-me healthy babies program versus the lower federal matching rate for a pregnant woman being enrolled in MO HealthNet or other federal programs;

(2) The efficacy in providing services to unborn children through managed care organizations, group or individual health insurance providers or premium assistance, or through other nontraditional arrangements of providing health care;

(3) The change in the proportion of unborn children who receive care in the first trimester of pregnancy due to a lack of waiting periods, by allowing presumptive eligibility, or by removal of other barriers, and any resulting or projected decrease in health problems and other problems for unborn children and women throughout pregnancy; at labor, delivery, and birth; and during infancy and childhood;

(4) The change in healthy behaviors by pregnant women, such as the cessation of the use of tobacco, alcohol, illicit drugs, or other harmful practices, and any resulting or projected short-term and long-term

decrease in birth defects; poor motor skills; vision, speech, and hearing problems; breathing and respiratory problems; feeding and digestive problems; and other physical, mental, educational, and behavioral problems; and

(5) The change in infant and maternal mortality, preterm births and low birth weight babies and any resulting or projected decrease in short-term and long-term medical and other interventions.

11. The show-me healthy babies program shall not be deemed an entitlement program, but instead shall be subject to a federal allotment or other federal appropriations and matching state appropriations.

12. Nothing in this section shall be construed as obligating the state to continue the show-me healthy babies program if the allotment or payments from the federal government end or are not sufficient for the program to operate, or if the general assembly does not appropriate funds for the program.

13. Nothing in this section shall be construed as expanding MO HealthNet or fulfilling a mandate imposed by the federal government on the state.”; and

Further amend the title and enacting clause accordingly.

Senator Gannon moved that the above amendment be adopted.

At the request of Senator Onder, **SB 726**, with **SS** and **SA 6** (pending), was placed on the Informal Calendar.

Senator Brown moved that **SB 761** be taken up for perfection, which motion prevailed.

Senator Brown offered **SS** for **SB 761**, entitled:

SENATE SUBSTITUTE FOR
SENATE BILL NO. 761

An Act to repeal section 610.021, RSMo, and to enact in lieu thereof two new sections relating to access to public records.

Senator Brown moved that **SS** for **SB 761** be adopted.

Senator Bernskoetter assumed the Chair.

Senator Eigel offered **SA 1**:

SENATE AMENDMENT NO. 1

Amend Senate Substitute for Senate Bill No. 761, Page 1, In the Title, Lines 3-4, by striking “access to public records” and inserting in lieu thereof the following: “transportation”; and

Further amend said bill and page, Section 43.253, line 16, by inserting after all of said line the following:

“142.803. 1. A tax is levied and imposed on all motor fuel used or consumed in this state as follows:

(1) Motor fuel, seventeen cents per gallon;

(2) Alternative fuels, not subject to the decal fees as provided in section 142.869, with a power potential equivalent of motor fuel. In the event alternative fuel, which is not commonly sold or measured by the gallon, is used in motor vehicles on the highways of this state, the director is authorized to assess and collect a tax upon such alternative fuel measured by the nearest power potential equivalent to that of one gallon of

regular grade gasoline. The determination by the director of the power potential equivalent of such alternative fuel shall be prima facie correct;

(3) Aviation fuel used in propelling aircraft with reciprocating engines, nine cents per gallon as levied and imposed by section 155.080 to be collected as required under this chapter;

(4) Compressed natural gas fuel, five cents per gasoline gallon equivalent until December 31, 2019, eleven cents per gasoline gallon equivalent from January 1, 2020, until December 31, 2024, and then seventeen cents per gasoline gallon equivalent thereafter. The gasoline gallon equivalent and method of sale for compressed natural gas shall be as published by the National Institute of Standards and Technology in Handbooks 44 and 130, and supplements thereto or revisions thereof. In the absence of such standard or agreement, the gasoline gallon equivalent and method of sale for compressed natural gas shall be equal to five and sixty-six-hundredths pounds of compressed natural gas. All applicable provisions contained in this chapter governing administration, collections, and enforcement of the state motor fuel tax shall apply to the tax imposed on compressed natural gas, including but not limited to licensing, reporting, penalties, and interest;

(5) Liquefied natural gas fuel, five cents per diesel gallon equivalent until December 31, 2019, eleven cents per diesel gallon equivalent from January 1, 2020, until December 31, 2024, and then seventeen cents per diesel gallon equivalent thereafter. The diesel gallon equivalent and method of sale for liquefied natural gas shall be as published by the National Institute of Standards and Technology in Handbooks 44 and 130, and supplements thereto or revisions thereof. In the absence of such standard or agreement, the diesel gallon equivalent and method of sale for liquefied natural gas shall be equal to six and six-hundredths pounds of liquefied natural gas. All applicable provisions contained in this chapter governing administration, collections, and enforcement of the state motor fuel tax shall apply to the tax imposed on liquefied natural gas, including but not limited to licensing, reporting, penalties, and interest;

(6) Propane gas fuel, five cents per gallon until December 31, 2019, eleven cents per gallon from January 1, 2020, until December 31, 2024, and then seventeen cents per gallon thereafter. All applicable provisions contained in this chapter governing administration, collection, and enforcement of the state motor fuel tax shall apply to the tax imposed on propane gas including, but not limited to, licensing, reporting, penalties, and interest;

(7) If a natural gas, compressed natural gas, liquefied natural gas, electric, or propane connection is used for fueling motor vehicles and for another use, such as heating, the tax imposed by this section shall apply to the entire amount of natural gas, compressed natural gas, liquefied natural gas, electricity, or propane used unless an approved separate metering and accounting system is in place.

2. All taxes, surcharges and fees are imposed upon the ultimate consumer, but are to be precollected as described in this chapter, for the facility and convenience of the consumer. The levy and assessment on other persons as specified in this chapter shall be as agents of this state for the precollection of the tax.

[3. In addition to any tax collected under subdivision (1) of subsection 1 of this section, the following tax is levied and imposed on all motor fuel used or consumed in this state, subject to the exemption on tax liability set forth in section 142.822: from October 1, 2021, to June 30, 2022, two and a half cents per gallon; from July 1, 2022, to June 30, 2023, five cents per gallon; from July 1, 2023, to June 30, 2024, seven and a half cents per gallon; from July 1, 2024, to June 30, 2025, ten cents per gallon; and on and after July 1, 2025, twelve and a half cents per gallon.]”;

Further amend said bill, page 7, Section 610.021, line 194, by inserting after all of said line the following:

“[142.822. 1. Motor fuel used for purposes of propelling motor vehicles on highways shall be exempt from the fuel tax collected under subsection 3 of section 142.803, and an exemption and refund may be claimed by the taxpayer if the tax has been paid and no refund has been previously issued, provided that the taxpayer applies for the exemption and refund as specified in this section. The exemption and refund shall be issued on a fiscal year basis to each person who pays the fuel tax collected under subsection 3 of section 142.803 and who claims an exemption and refund in accordance with this section, and shall apply so that the fuel taxpayer has no liability for the tax collected in that fiscal year under subsection 3 of section 142.803.

2. To claim an exemption and refund in accordance with this section, a person shall present to the director a statement containing a written verification that the claim is made under penalty of perjury and that states the total fuel tax paid in the applicable fiscal year for each vehicle for which the exemption and refund is claimed. The claim shall not be transferred or assigned, and shall be filed on or after July first, but not later than September thirtieth, following the fiscal year for which the exemption and refund is claimed. The claim statement may be submitted electronically, and shall at a minimum include the following information:

(1) Vehicle identification number of the motor vehicle into which the motor fuel was delivered;

(2) Date of sale;

(3) Name and address of purchaser;

(4) Name and address of seller;

(5) Number of gallons purchased; and

(6) Number of gallons purchased and charged Missouri fuel tax, as a separate item.

3. Every person shall maintain and keep records supporting the claim statement filed with the department of revenue for a period of three years to substantiate all claims for exemption and refund of the motor fuel tax, together with invoices, original sales receipts marked paid by the seller, bills of lading, and other pertinent records and paper as may be required by the director for reasonable administration of this chapter.

4. The director may make any investigation necessary before issuing an exemption and refund under this section, and may investigate an exemption and refund under this section after it has been issued and within the time frame for making adjustments to the tax pursuant to this chapter.

5. If an exemption and refund is not issued within forty-five days of an accurate and complete filing, as required by this chapter, the director shall pay interest at the rate provided in section 32.065 accruing after the expiration of the forty-five-day period until the date the exemption and refund is issued.

6. The exemption and refund specified in this section shall be available only with regard to motor fuel delivered into a motor vehicle with a gross weight, as defined in section 301.010, of twenty-six thousand pounds or less.

7. The director shall promulgate rules as necessary 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, 2021, shall be invalid and void.]"; and

Further amend the title and enacting clause accordingly.

Senator Eigel moved that the above amendment be adopted.

Senator Brown raised the point of order that **SA 1** 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 well taken.

Senator Onder raised the point of order that **SS** for **SB 761** 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.

Senator Eigel offered **SA 2**:

SENATE AMENDMENT NO. 2

Amend Senate Substitute for Senate Bill No. 761, Page 1, Section 43.253, Line 11, by striking the words "August 28, 2023" and inserting in lieu thereof the following: "**July 1, 2023**".

Senator Eigel moved that the above amendment be adopted.

Senator Hough assumed the Chair.

At the request of Senator Brown, **SB 761**, with **SS** and **SA 2** (pending), was placed on the Informal Calendar.

Senator White moved that **SB 823**, with **SS**, **SA 2** and point of order (pending), be called from the Informal Calendar and again taken up for perfection, which motion prevailed.

At the request of Senator White, the point of order was withdrawn.

At the request of Senator White, **SS** for **SB 823** was withdrawn, rendering **SA 2** moot.

Senator White offered **SS No. 2** for **SB 823**, entitled:

SENATE SUBSTITUTE NO. 2 FOR SENATE BILL NO. 823

An Act to repeal sections 208.044, 208.046, 208.053, 210.027, 210.102, 210.135, 210.140, 210.147, 210.199, 210.203, 210.211, 210.221, 210.223, 210.231, 210.241, 210.245, 210.251, 210.252, 210.254, 210.255, 210.256, 210.258, 210.275, 210.762, 210.1007, 210.1080, 211.081, and 509.520, RSMo, and to enact in lieu thereof twenty-eight new sections relating to child protection, with penalty provisions.

Senator White moved that **SS No. 2** for **SB 823** be adopted.

Senator Schupp offered **SA 1**:

SENATE AMENDMENT NO. 1

Amend Senate Substitute No. 2 for Senate Bill No. 823, Page 1, Section A, Line 11, by inserting after all of said line the following:

“167.630. 1. Each school board may authorize a school nurse licensed under chapter 335 who is employed by the school district and for whom the board is responsible for to maintain an adequate supply of prefilled auto syringes of epinephrine with fifteen-hundredths milligram or three-tenths milligram delivery at the school. The nurse shall recommend to the school board the number of prefilled epinephrine auto syringes that the school should maintain.

2. To obtain prefilled epinephrine auto syringes for a school district, a prescription written by a licensed physician, a physician’s assistant, or nurse practitioner is required. For such prescriptions, the school district shall be designated as the patient, the nurse’s name shall be required, and the prescription shall be filled at a licensed pharmacy.

3. A school nurse [or], **contracted agent trained by a nurse, or** other school employee trained by and supervised by the nurse, shall have the discretion to use an epinephrine auto syringe on any student the school nurse [or], trained employee **or trained contracted agent** believes is having a life-threatening anaphylactic reaction based on the training in recognizing an acute episode of an anaphylactic reaction. The provisions of section 167.624 concerning immunity from civil liability for trained employees administering lifesaving methods shall apply to trained employees administering a prefilled auto syringe under this section. **Trained contracted agents shall have immunity from civil liability for administering a prefilled auto syringe under this section.**”; and

Further amend the title and enacting clause accordingly.

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

Senator White moved that **SS No. 2** for **SB 823**, as amended, be adopted, which motion prevailed.

On motion of Senator White, **SS No. 2** for **SB 823**, as amended, was declared perfected and ordered printed.

MESSAGES FROM THE HOUSE

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

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House has taken up and passed **HB 2455**, entitled:

An Act to amend chapter 42, RSMo, by adding thereto one new section relating to the Missouri veterans commission.

In which the concurrence of the Senate is respectfully requested.

Read 1st time.

Also,

Mr. President: I am instructed by the House of Representatives to inform the Senate that the House refuses to adopt **SS#2** for **HCS** for **HB 2117**, as amended, and requests the Senate to recede from its position and failing to do so grant the House a conference thereon.

INTRODUCTION OF GUESTS

Senator Rowden introduced to the Senate, Brooks Moore; and Brooks was made honorary page.

Senator May introduced to the Senate, Sue McCollum, St. Louis.

Senator Beck introduced to the Senate, Lejla Ademovic; Connor Brosnan; Aron Cole; Mya Franklin; Brandon James; Isabella Kopf; Paul Krieser; Courtney Mendenhall; Ellen Spangler; and Lejla Tadzic.

Senator Eslinger introduced to the Senate, Gabriel Todd, Mountain Grove; and Richard Todd, Alton.

Senator Williams introduced to the Senate, Dawn Butler; Precious Barry; Gary Fuller; Sophia Liu; Sydney Collinger; Aron Cole; Paul Krieser; and Alex Sier, St. Louis.

Senator Hoskins introduced to the Senate, University of Central MO Student Government Association, Warrensburg; and Civil Air Patrol.

Senator Razer introduced to the Senate, Steven Berezney, St. Louis.

Senator Eslinger introduced to the Senate, Curtis Thomas; Amanda Thomas; and Jennifer Thomas, Alton.

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

SENATE CALENDAR

FORTIETH DAY—WEDNESDAY, MARCH 30, 2022

FORMAL CALENDAR**HOUSE BILLS ON SECOND READING**

HCS for HJR 91

HB 1878-Simmons

HJR 94-Simmons

HB 1584-Murphy

HCS for HB 2304

HCS for HBs 1897 & 2414

HB 1724-Hudson

HCS for HB 1732

HB 1473-Pike

HB 1481-Dinkins

HB 2366-Shields

HB 1713-Riley

HB 1738-Dogan

HCS for HB 2168

HCS for HBs 1743 & 2185

HB 1541-McGill

HB 1600-Chipman

HB 1725-Hudson

HB 2694-Hudson

HB 1856-Baker

HB 1962-Copeland

HB 2202-Fitzwater

HCS for HB 2382
HB 2193-Toalson Reisch
HCS for HB 1606
HCS for HB 1984
HCS for HBs 2502 & 2556
HB 2163-Houx
HB 2355-Andrews

HCS for HB 2005
HCS for HB 1734
HCS for HB 1677
HCS for HB 1699
HCS for HB 1750
HCS for HB 1656
HB 2455-Griffith

THIRD READING OF SENATE BILLS

SS#2 for SCS for SB 649-Eigel
(In Fiscal Oversight)
SS for SB 807-Hoskins
(In Fiscal Oversight)
SB 710-Beck

SS for SCS for SB 834-Luetkemeyer and
Thompson Rehder (In Fiscal Oversight)
SS for SCS for SBs 775, 751 &
640-Thompson Rehder and Schupp
(In Fiscal Oversight)

SENATE BILLS FOR PERFECTION

1. SB 657-Cierpiot
2. SB 725-Hegeman, with SCS
3. SB 783-Eslinger, with SCS
4. SB 938-White, with SCS
5. SB 931-Koenig, with SCS
6. SJR 46-Cierpiot
7. SB 756-White, with SCS
8. SB 968-Burlison, with SCS
9. SBs 777 & 808-Brattin, with SCS
10. SB 683-O'Laughlin, with SCS
11. SB 997-Bernskoetter
12. SB 650-Eigel
13. SB 723-Hegeman
14. SB 1153-Eslinger, with SCS

15. SB 864-Hoskins, with SCS
16. SB 867-Koenig, with SCS
17. SB 654-Crawford, with SCS
18. SB 812-Eigel
19. SB 742-Crawford
20. SB 918-Burlison, with SCS
21. SB 984-Hegeman
22. SB 671-White, with SCS
23. SB 741-Crawford, with SCS
24. SB 674-Hough, with SCS
25. SB 987-Bean
26. SB 713-Razer, with SCS
27. SB 781-Moon, with SCS

HOUSE BILLS ON THIRD READING

HB 2162-Deaton (Hegeman)
HCS for HB 1720, with SCS

HCS for HB 1552, with SCS (Koenig)

INFORMAL CALENDAR

SENATE BILLS FOR PERFECTION

SB 631-Hegeman, with SCS	SB 758-Hough, with SCS, SS#2 for SCS, SA 1 & SA 1 to SA 1 (pending)
SB 648-Rowden	SB 761-Brown, with SS & SA 2 (pending)
SB 663-Bernskoetter, with SCS	SB 762-Brown, with SS & SA 4 (pending)
SB 664-Bernskoetter	SB 798-Mosley, with SA 1 & SA 1 to SA 1 (pending)
SB 665-Bernskoetter, with SS (pending)	SB 850-Bean, with SCS & SS for SCS (pending)
SB 667-Burlison, with SS (pending)	SB 869-Koenig
SB 690-Thompson Rehder	SJR 39-Luetkemeyer
SBs 698 & 639-Gannon, et al, with SCS, SA 1 & SA 1 to SA 1 (pending)	SJR 41-Roberts and Mosley
SBs 702, 636, 651, & 693-Eslinger, with SCS	
SB 726-Onder, with SS & SA 6 (pending)	
SB 732-Hoskins, with SCS	

CONSENT CALENDAR

Senate Bills

Reported 2/24

SB 845-Eslinger

Reported 3/10

SB 718-Washington and Mosley

SB 982-Arthur, with SCS

SB 908-Koenig, with SCS

SB 886-Luetkemeyer, with SCS

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

HCR 52-Plocher (Rowden)

Reported from Committee

SCR 27-May

SCR 28-White

SCR 29-Hegeman

SCR 31-Bean

SCR 33-Bean

To be Referred

SR 702-Rowden

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