

FIRST REGULAR SESSION
SENATE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 705
100TH GENERAL ASSEMBLY

Reported from the Committee on Professional Registration, May 2, 2019, with recommendation that the Senate Committee Substitute do pass.

ADRIANE D. CROUSE, Secretary.

1584S.05C

AN ACT

To repeal sections 193.015, 195.100, 326.289, 327.401, 333.041, 334.037, 334.104, 334.108, 334.702, 334.704, 334.706, 334.708, 334.710, 334.712, 334.715, 334.717, 334.719, 334.721, 334.725, 334.735, 334.736, 334.747, 334.749, 335.016, 335.046, 335.051, 335.056, 335.076, 335.086, 336.080, 337.020, 337.029, 337.050, 338.010, 338.140, 339.190, 630.175, and 630.875, RSMo, and to enact in lieu thereof sixty-eight new sections relating to professional registration, with penalty provisions.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 193.015, 195.100, 326.289, 327.401, 333.041, 334.037, 2 334.104, 334.108, 334.702, 334.704, 334.706, 334.708, 334.710, 334.712, 334.715, 3 334.717, 334.719, 334.721, 334.725, 334.735, 334.736, 334.747, 334.749, 335.016, 4 335.046, 335.051, 335.056, 335.076, 335.086, 336.080, 337.020, 337.029, 337.050, 5 338.010, 338.140, 339.190, 630.175, and 630.875, RSMo, are repealed and sixty- 6 eight new sections enacted in lieu thereof, to be known as sections 193.015, 7 195.100, 324.025, 324.035, 324.950, 324.953, 324.956, 324.959, 324.962, 324.965, 8 324.968, 324.971, 324.977, 324.980, 324.983, 326.289, 327.401, 333.041, 334.037, 9 334.104, 334.108, 334.702, 334.703, 334.704, 334.706, 334.708, 334.710, 334.712, 10 334.715, 334.717, 334.721, 334.725, 334.726, 334.735, 334.736, 334.747, 334.749, 11 334.1000, 334.1005, 334.1010, 334.1015, 334.1020, 334.1025, 334.1030, 334.1035, 12 334.1040, 334.1045, 334.1050, 334.1055, 334.1060, 334.1065, 334.1070, 335.016, 13 335.046, 335.047, 335.051, 335.056, 335.076, 335.086, 336.080, 337.020, 337.029, 14 337.050, 338.010, 338.140, 339.190, 630.175, and 630.875, to read as follows:

193.015. As used in sections 193.005 to 193.325, unless the context clearly

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

2 indicates otherwise, the following terms shall mean:

3 (1) "Advanced practice registered nurse", a person licensed to practice as
4 an advanced practice registered nurse under chapter 335, and who has been
5 delegated tasks outlined in section 193.145 by a physician with whom they have
6 entered into a collaborative practice arrangement under chapter 334;

7 (2) "Assistant physician", as such term is defined in section 334.036, and
8 who has been delegated tasks outlined in section 193.145 by a physician with
9 whom they have entered into a collaborative practice arrangement under chapter
10 334;

11 (3) "Dead body", a human body or such parts of such human body from the
12 condition of which it reasonably may be concluded that death recently occurred;

13 (4) "Department", the department of health and senior services;

14 (5) "Final disposition", the burial, interment, cremation, removal from the
15 state, or other authorized disposition of a dead body or fetus;

16 (6) "Institution", any establishment, public or private, which provides
17 inpatient or outpatient medical, surgical, or diagnostic care or treatment or
18 nursing, custodian, or domiciliary care, or to which persons are committed by law;

19 (7) "Live birth", the complete expulsion or extraction from its mother of
20 a child, irrespective of the duration of pregnancy, which after such expulsion or
21 extraction, breathes or shows any other evidence of life such as beating of the
22 heart, pulsation of the umbilical cord, or definite movement of voluntary muscles,
23 whether or not the umbilical cord has been cut or the placenta is attached;

24 (8) "Physician", a person authorized or licensed to practice medicine or
25 osteopathy pursuant to chapter 334;

26 (9) "Physician assistant", a person licensed to practice as a physician
27 assistant pursuant to chapter 334, and who has been delegated tasks outlined in
28 section 193.145 by a physician with whom they have entered into a [supervision
29 agreement] **collaborative practice arrangement** under chapter 334;

30 (10) "Spontaneous fetal death", a noninduced death prior to the complete
31 expulsion or extraction from its mother of a fetus, irrespective of the duration of
32 pregnancy; the death is indicated by the fact that after such expulsion or
33 extraction the fetus does not breathe or show any other evidence of life such as
34 beating of the heart, pulsation of the umbilical cord, or definite movement of
35 voluntary muscles;

36 (11) "State registrar", state registrar of vital statistics of the state of
37 Missouri;

38 (12) "System of vital statistics", the registration, collection, preservation,
39 amendment and certification of vital records; the collection of other reports
40 required by sections 193.005 to 193.325 and section 194.060; and activities related
41 thereto including the tabulation, analysis and publication of vital statistics;

42 (13) "Vital records", certificates or reports of birth, death, marriage,
43 dissolution of marriage and data related thereto;

44 (14) "Vital statistics", the data derived from certificates and reports of
45 birth, death, spontaneous fetal death, marriage, dissolution of marriage and
46 related reports.

195.100. 1. It shall be unlawful to distribute any controlled substance in
2 a commercial container unless such container bears a label containing an
3 identifying symbol for such substance in accordance with federal laws.

4 2. It shall be unlawful for any manufacturer of any controlled substance
5 to distribute such substance unless the labeling thereof conforms to the
6 requirements of federal law and contains the identifying symbol required in
7 subsection 1 of this section.

8 3. The label of a controlled substance in Schedule II, III or IV shall, when
9 dispensed to or for a patient, contain a clear, concise warning that it is a criminal
10 offense to transfer such narcotic or dangerous drug to any person other than the
11 patient.

12 4. Whenever a manufacturer sells or dispenses a controlled substance and
13 whenever a wholesaler sells or dispenses a controlled substance in a package
14 prepared by him or her, the manufacturer or wholesaler shall securely affix to
15 each package in which that drug is contained a label showing in legible English
16 the name and address of the vendor and the quantity, kind, and form of
17 controlled substance contained therein. No person except a pharmacist for the
18 purpose of filling a prescription under this chapter, shall alter, deface, or remove
19 any label so affixed.

20 5. Whenever a pharmacist or practitioner sells or dispenses any controlled
21 substance on a prescription issued by a physician, physician assistant, dentist,
22 podiatrist, veterinarian, or advanced practice registered nurse, the pharmacist or
23 practitioner shall affix to the container in which such drug is sold or dispensed
24 a label showing his or her own name and address of the pharmacy or practitioner
25 for whom he or she is lawfully acting; the name of the patient or, if the patient
26 is an animal, the name of the owner of the animal and the species of the animal;
27 the name of the physician, physician assistant, dentist, podiatrist, advanced

28 practice registered nurse, or veterinarian by whom the prescription was written;
29 the name of the collaborating physician if the prescription is written by an
30 advanced practice registered nurse or [the supervising physician if the
31 prescription is written by] a physician assistant, and such directions as may be
32 stated on the prescription. No person shall alter, deface, or remove any label so
33 affixed.

**324.025. 1. The provisions of this section shall be known and may
2 be cited as the "Expanded Workforce Access Act of 2019".**

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

**4 (1) "Apprenticeship", a program that meets the federal guidelines
5 set out in 29 CFR Part 29 and 29 U.S.C. Section 50;**

**6 (2) "License", a license, certificate, registration, permit, or
7 accreditation that enables a person to legally practice an occupation,
8 profession, or activity in the state;**

**9 (3) "Licensing authority", an agency, examining board,
10 credentialing board, or other office of the state with the authority to
11 impose occupational fees or licensing requirements on any profession.**

**12 3. Beginning January 1, 2020, within the parameters established
13 under the federal Labor Standards For the Registration of
14 Apprenticeship Programs under 29 CFR Part 29 and 29 U.S.C. Section
15 50, each state licensing authority shall grant a license to any applicant
16 who meets the following criteria:**

17 (1) Successfully completed the eighth grade;

**18 (2) Completed an apprenticeship approved by the appropriate
19 licensing authority or the United States Department of Labor, or
20 otherwise authorized under state or federal law. This apprenticeship
21 may be completed under the supervision of a state-licensed practitioner
22 or at a state-licensed school; and**

**23 (3) Passed the required licensure examination, if one is deemed
24 to be necessary, under state law.**

**25 4. (1) The appropriate licensing authority shall establish a
26 passing score for any necessary examinations under the apprenticeship
27 program which shall not exceed any passing scores that are otherwise
28 required for a non-apprenticeship license for the specific profession.**

**29 (2) If there is no examination requirement for a non-
30 apprenticeship license, no examination shall be required for applicants
31 who complete an apprenticeship.**

32 **(3) The number of working hours required for a competency-**
33 **based apprenticeship or a hybrid apprenticeship under 29 CFR 29.5**
34 **shall not exceed the number of educational hours otherwise required**
35 **for a non-apprenticeship license for the specific profession.**

36 **5. Any department with oversight over a licensing authority may**
37 **promulgate all necessary rules and regulations for the implementation**
38 **of this section. Any rule or portion of a rule, as that term is defined in**
39 **section 536.010 that is created under the authority delegated in this**
40 **section shall become effective only if it complies with and is subject to**
41 **all of the provisions of chapter 536, and, if applicable, section**
42 **536.028. This section and chapter 536 are nonseverable and if any of**
43 **the powers vested with the general assembly pursuant to chapter 536,**
44 **to review, to delay the effective date, or to disapprove and annul a rule**
45 **are subsequently held unconstitutional, then the grant of rulemaking**
46 **authority and any rule proposed or adopted after August 28, 2019, shall**
47 **be invalid and void.**

324.035. No board, commission, or committee within the division
2 **of professional registration shall utilize occupational fees, or any other**
3 **fees associated with licensing requirements, or contract or partner with**
4 **any outside vendor or agency for the purpose of offering continuing**
5 **education classes.**

324.950. 1. Sections 324.950 to 324.983 shall be known and may
2 **be cited as the "Missouri Statewide Mechanical Contractor Licensing**
3 **Act".**

4 **2. As used in sections 324.950 to 324.983, unless the context**
5 **clearly indicates otherwise, the following terms shall mean:**

6 **(1) "Division", the division of professional registration within the**
7 **department of insurance, financial institutions and professional**
8 **registration;**

9 **(2) "License holder", any person who is granted a statewide**
10 **license by the division;**

11 **(3) "Local license", a valid business or occupational license issued**
12 **by a Missouri political subdivision;**

13 **(4) "Mechanical contractor", a company engaged in mechanical**
14 **contracting work per the International Code Council (ICC) and NFPA**
15 **54, including the design, installation, maintenance, construction,**
16 **alteration, repair, and inspection of any:**

- 17 **(a) HVAC system;**
18 **(b) HVAC duct system;**
19 **(c) Exhaust systems;**
20 **(d) Combustion air or make up air;**
21 **(e) Chimneys and vents;**
22 **(f) Hydronic piping systems that are part of an HVAC**
23 **system;**
24 **(g) Boilers, water heaters, and pressure vessels;**
25 **(h) Process piping systems;**
26 **(i) Fuel gas distribution piping;**
27 **(j) Fuel gas-fired, fuel oil-fired, and solid fuel appliances;**
28 **(k) Fuel oil piping and storage vessels;**
29 **(l) Fuel gas-fired, fuel oil-fired, and solid fuel appliance venting**
30 **systems;**
31 **(m) Equipment and appliances intended to utilize solar energy**
32 **for space heating or cooling;**
33 **(n) Domestic hot water heating, swimming pool heating, or**
34 **process heating;**
35 **(o) Refrigeration systems, including all equipment and**
36 **components thereof;**
37 **(p) Backflow preventers;**
38 **(q) Medical gas piping;**
39 **(r) Air, oxygen, and vacuum piping; and**
40 **(s) Fire suppression systems.**
- 41 **Additional certification may be required by the division for a**
42 **particular scope of mechanical work;**
- 43 **(5) "Office", the office of mechanical contractors within the**
44 **division of professional registration;**
- 45 **(6) "Person", an individual, corporation, partnership, association,**
46 **or other legal entity;**
- 47 **(7) "Statewide mechanical contractor license", a valid license**
48 **issued by the division that allows the mechanical contractor and any**
49 **of its employees or manufacturers' representatives or subcontractors**
50 **to practice in any jurisdiction in Missouri regardless of local licensing**
51 **requirements. Political subdivisions cannot require any member of the**
52 **work force of a licensed statewide mechanical contractor to obtain an**
53 **individual occupational license.**

324.953. 1. The division shall adopt, implement, rescind, amend,
2 and administer such rules as may be necessary to carry out the
3 provisions of sections 324.950 to 324.983. The division may promulgate
4 necessary rules authorized or as required to explain or clarify sections
5 324.950 to 324.983 including, but not limited to, rules relating to
6 professional conduct, continuing competency requirements for the
7 renewal of licenses, approval of continuing competency programs, fees,
8 and the establishment of ethical standards of business practice for
9 persons holding a license under sections 324.950 to 324.983. Any rule
10 or portion of a rule, as that term is defined in section 536.010, that is
11 created under the authority delegated in this section shall become
12 effective only if it complies with and is subject to all of the provisions
13 of chapter 536, and, if applicable, section 536.028. This section and
14 chapter 536 are nonseverable, and if any of the powers vested with the
15 general assembly pursuant to chapter 536 to review, to delay the
16 effective date, or to disapprove and annul a rule are subsequently held
17 unconstitutional, then the grant of rulemaking authority and any rule
18 proposed or adopted after August 28, 2019, shall be invalid and void.

19 2. For the purpose of sections 324.950 to 324.983, the division
20 shall:

21 (1) Establish all applicable fees, set at an amount which shall not
22 substantially exceed the cost of administering sections 324.950 to
23 324.983; and

24 (2) Deposit all fees collected under sections 324.950 to 324.983 by
25 transmitting such funds to the department of revenue for deposit to the
26 state treasury to the credit of the Missouri mechanical contractor
27 licensing fund.

324.956. There is hereby created the "Office of Mechanical
2 Contractors" to be housed within the division of professional
3 registration. The division shall:

4 (1) Employ, within the limits of the funds appropriated, persons
5 as are necessary to carry out the provisions of sections 324.950 to
6 324.983, including both administrative and professional staff and legal
7 counsel, with the discretion to hire experts in mechanical contracting
8 to advise the division on technical matters related to mechanical
9 contracting;

10 (2) Exercise all budgeting, purchasing, reporting, and related

11 management functions;

12 (3) Conduct investigations to determine compliance with sections
13 324.950 to 324.983; and

14 (4) File suit in its own name on behalf of the office to enforce the
15 provisions of sections 324.950 to 324.983.

324.959. 1. The applicant for a statewide mechanical license shall
2 satisfy the following requirements:

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

4 (2) Provide proof of liability insurance in the amount of five
5 hundred thousand dollars and post bond with each political subdivision
6 in which he or she will perform work as required by that political
7 subdivision;

8 (3) Pass one of the following standardized and nationally offered
9 mechanical assessment tests:

10 (a) International Code Council;

11 (b) Prometric; or

12 (c) North American Technician Excellence (NATE) certification;

13 or

14 a similar test that is administered by an independent professional
15 testing agency not affiliated with any political subdivision or the state
16 of Missouri and is approved by the division. The applicant shall pay for
17 all costs associated with the examinations;

18 (4) Complete the application form provided by the division and
19 pay any applicable application fees; and

20 (5) Have completed seven thousand five hundred hours of
21 verifiable field experience in the mechanical industry or a bachelor's
22 or further advanced degree in mechanical or civil engineering from an
23 accredited college or university with a minimum of three years
24 verifiable experience directing and supervising at least one field
25 employee.

26 2. Any applicant for licensure who holds a local license as
27 defined in section 324.950, or other license authorizing him or her to
28 engage in mechanical contracting, who has seven thousand five
29 hundred hours of verifiable field experience in the mechanical
30 industry, and who is otherwise eligible for licensure shall be issued a
31 statewide mechanical license, therefore becoming a statewide
32 mechanical license holder. The provisions of this subsection shall

33 apply only to licenses issued by a political subdivision with the legal
34 authority to issue such licenses.

35 3. If a corporation, firm, institution, organization, company, or
36 representative thereof desires to engage in mechanical contracting
37 licensed under sections 324.950 to 324.985, it shall have in its employ at
38 least one license holder who possesses a statewide license in
39 accordance with sections 324.950 to 324.983. A statewide licensed
40 mechanical license holder shall represent only one corporation, firm,
41 institution, organization, or company at one time.

42 4. The division may issue a mechanical contractor license to any
43 person who holds a current and active license to engage in the practice
44 of a mechanical contractor or as a master pipefitter or master plumber
45 issued by any other state, the District of Columbia, or territories of the
46 United States that require standards for licensure, registration, or
47 certification considered to be equivalent or more stringent than the
48 requirements for licensure under sections 324.950 to 324.983.

324.962. 1. Political subdivisions shall not be prohibited from
2 establishing their own local mechanical contractor's license but shall
3 recognize a statewide license in lieu of a local license for the purposes
4 of performing contracting work or obtaining permits to perform work
5 within such political subdivision. No political subdivision shall require
6 the employees of a statewide licensed mechanical contractor or its
7 subcontractors or manufacturers' representatives to obtain journeyman
8 licenses, apprentice licenses, or occupation licenses that require
9 passing any examination or any special requirements to assess
10 proficiency or mastery of the mechanical trade. The workforce of a
11 statewide licensee shall be deemed eligible to perform mechanical
12 contracting work and to obtain permits to perform such work from any
13 political subdivision within the state of Missouri.

14 2. If a political subdivision does not recognize a statewide
15 license in lieu of a local license for the purposes of performing
16 contracting work or obtaining permits to perform work within the
17 political subdivision, a statewide mechanical contractor licensee may
18 file a complaint with the division. The division shall perform an
19 investigation into the complaint, and if the division finds that the
20 political subdivision failed to recognize a statewide license in
21 accordance with this section, the division shall notify the political

22 subdivision that the political subdivision has violated the provisions of
23 this section and has thirty days to comply with this section. If after
24 thirty days the political subdivision still does not recognize a statewide
25 license, the division shall notify the director of the department of
26 revenue, who shall withhold any moneys the noncompliant political
27 subdivision would otherwise be entitled to from local sales tax, as
28 defined in section 32.085, until the director has received notice from
29 the division that the political subdivision is in compliance with this
30 section. Upon the political subdivision coming into compliance with
31 the provisions of this section, the division shall notify the director of
32 the department of revenue, who shall disburse all funds held under this
33 subsection. Moneys held by the director of the department of revenue
34 under this subsection shall not be deemed to be state funds and shall
35 not be commingled with any funds of the state.

36 3. The provisions of this section shall not prohibit any political
37 subdivision in this state from:

- 38 (1) Enforcing any code or law contained in this section;
- 39 (2) Requiring a business license to perform mechanical
40 contracting work;
- 41 (3) Issuing mechanical contracting permits;
- 42 (4) Enforcing codes of the political subdivision; and
- 43 (5) Inspecting the work of a statewide mechanical contractor.

44 4. Political subdivisions that do not have the authority to issue
45 or require mechanical contractor licenses prior to August 28, 2019, shall
46 not be granted such authority under the provisions of this section.

324.965. There is hereby created in the state treasury the
2 "Missouri Mechanical Contractor Licensing Fund", which shall consist
3 of moneys collected under sections 324.950 to 324.983. The state
4 treasurer shall be custodian of the fund and may approve
5 disbursements from the fund in accordance with sections 30.170 and
6 30.180. Upon appropriation, moneys in the fund shall be used solely for
7 the administration of sections 324.950 to 324.983. The provisions of
8 section 33.080 to the contrary notwithstanding, moneys in this fund
9 shall not be transferred and placed to the credit of general revenue
10 until the amount in the fund at the end of the biennium exceeds three
11 times the amount of the appropriation from the fund for the preceding
12 fiscal year. The amount, if any, in the fund which shall lapse is that

13 amount in the fund which exceeds the appropriate multiple of the
14 appropriations from the fund for the preceding fiscal year. The state
15 treasurer shall invest moneys in the fund in the same manner as other
16 funds are invested. Any interest and moneys earned on such
17 investments shall be credited to the fund.

324.968. 1. Licenses shall expire on a renewal date established
2 by the division. The term of licensure shall be twenty-four
3 months. The division shall mail a renewal notice to the last known
4 address of each person licensed under sections 324.950 to 324.983 prior
5 to the renewal date. Failure to provide the division with the
6 information required for renewal or to pay the required fee after such
7 notice shall result in the license being declared inactive. The licensee
8 shall not practice until he or she applies for reinstatement and pays the
9 required fees. The license shall be restored if the application for
10 reinstatement is received within two years of the renewal date.

11 2. In addition to other requirements provided by sections 324.950
12 to 324.983 and established by the division, in order to renew such
13 license under this section, the person shall have at least sixteen contact
14 hours of industry-related training.

324.971. Any person operating as a mechanical contractor in a
2 political subdivision that does not require the mechanical contractor
3 to hold a local license, or who operates as a mechanical contractor in
4 a political subdivision that requires a local license possessed by that
5 person, shall not be required to possess a statewide license under
6 sections 324.950 to 324.983 to operate as a mechanical contractor in
7 such political subdivision.

324.977. The statewide license shall be regulated by the division
2 of professional registration and not a state-appointed licensing board.

324.980. 1. The division may refuse to issue any certificate of
2 registration or authority, permit, or license required under sections
3 324.950 to 324.983 for one or any combination of causes stated in
4 subsection 2 of this section. The division shall notify the applicant in
5 writing of the reasons for the refusal and shall advise the applicant of
6 his or her right to file a complaint with the administrative hearing
7 commission as provided by chapter 621.

8 2. The division may cause a complaint to be filed with the
9 administrative hearing commission as provided by chapter 621 against

10 any holder of any certificate of registration or authority, permit, or
11 license required by sections 324.950 to 324.983, or any person who has
12 failed to renew or has surrendered his or her certificate of registration
13 or authority, permit, or license for any one or any combination of the
14 following causes:

15 (1) Use of any controlled substance, as defined in chapter 195, or
16 alcoholic beverage to an extent that such use impairs a person's ability
17 to perform the work of any profession licensed or regulated by sections
18 324.950 to 324.983;

19 (2) The person has been finally adjudicated and found guilty, or
20 entered a plea of guilty or nolo contendere, in a criminal prosecution
21 under the laws of any state or of the United States, for any offense
22 reasonably related to the qualifications, functions, or duties of any
23 profession licensed or regulated under sections 324.950 to 324.983, for
24 any offense involving a controlled substance, or for any offense an
25 essential element of which is fraud, dishonesty, or an act of violence;

26 (3) Use of fraud, deception, misrepresentation, or bribery in
27 securing any certificate of registration or authority, permit, or license
28 issued under sections 324.950 to 324.983 or in obtaining permission to
29 take any examination given or required under sections 324.950 to
30 324.983;

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

33 (5) Incompetency, misconduct, gross negligence, fraud,
34 misrepresentation, or dishonesty in the performance of the functions
35 or duties of any profession licensed or regulated by sections 324.950 to
36 324.983;

37 (6) Violation of, or assisting or enabling any person to violate,
38 any provision of sections 324.950 to 324.983, or of any lawful rule or
39 regulation adopted thereunder;

40 (7) Impersonation of any person holding a certificate of
41 registration or authority, permit, or license or allowing any person to
42 use his or her certificate of registration or authority, permit, license,
43 or diploma from any school;

44 (8) Disciplinary action against the holder of a license or other
45 right to practice any profession regulated by sections 324.950 to 324.983
46 granted by another political subdivision, state, territory, federal

47 agency, or country upon grounds for which revocation or suspension
48 is authorized in this state;

49 (9) A person is finally adjudged mentally incompetent by a court
50 of competent jurisdiction;

51 (10) Assisting or enabling any person to practice or offer to
52 practice any profession licensed or regulated by sections 324.950 to
53 324.983 who is not licensed or registered and currently eligible to
54 practice thereunder;

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

57 (12) Failure to maintain liability coverage as required for initial
58 licensure;

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

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

63 (15) Failure to post bond as required by any local jurisdiction.

64 3. After the filing of such complaint, the proceedings shall be
65 conducted in accordance with the provisions of chapter 621. Upon a
66 finding by the administrative hearing commission that the grounds
67 provided in subsection 2 of this section for disciplinary action are met,
68 the division may, singly or in combination, censure or place the person
69 named in the complaint on probation on such terms and conditions as
70 the division deems appropriate for a period not to exceed five years, or
71 may suspend, for a period not to exceed three years, or revoke any
72 certificate of registration or authority, permit, or license issued under
73 sections 324.950 to 324.983.

74 4. An individual whose certificate of registration or authority,
75 permit, or license has been revoked shall wait three years from the date
76 of revocation to apply for any certificate of registration or authority,
77 permit, or license under sections 324.950 to 324.983. Any certificate of
78 registration or authority, permit, or license shall be issued at the
79 discretion of the board after compliance with all the requirements of
80 sections 324.950 to 324.983 relative to the licensing or registration of
81 the applicant for the first time.

82 5. The division may file suit to enforce compliance, including the
83 authority to seek injunctions and restraining orders to enjoin any

84 **person from:**

85 **(1) Offering to engage or engaging in the performance of any acts**
86 **or practices for which a license is required upon a showing that such**
87 **acts or practices were performed or offered to be performed without a**
88 **certificate of registration or authority, permit, or license;**

89 **(2) Engaging in the practice of business authorized by a license**
90 **issued under a building trades contractor law upon a showing that the**
91 **license holder presents a substantial probability of serious harm to the**
92 **health, safety, or welfare of any resident of this state or owner or lessee**
93 **of real property within this state; or**

94 **(3) Refusing to recognize a statewide license as a valid license**
95 **within any political subdivision, or requiring journeymen or**
96 **apprentices to be individually licensed or requiring subcontractors and**
97 **manufacturer's representatives, or other members of the contractor's**
98 **workforce to be licensed.**

99 **6. The division may assess fines for violations of any of the**
100 **provisions of sections 324.950 to 324.983 in an amount not to exceed five**
101 **thousand dollars per occurrence upon a judicial or administrative**
102 **finding of violation of law.**

103 **7. The division may compel the production of documents, things,**
104 **or persons by subpoena.**

105 **8. The division may refer any violations of the provisions of any**
106 **state law or local ordinance relating to the work performed by a**
107 **licensee to the appropriate state or local official.**

324.983. 1. Any person that knowingly violates any provision of
2 **sections 324.950 to 324.983 is guilty of a class B misdemeanor.**

3 **2. Any officer or agent of a corporation or member or agent of a**
4 **partnership or association who knowingly and personally participates**
5 **in or is an accessory to any violation of sections 324.950 to 324.983 is**
6 **guilty of a class B misdemeanor.**

7 **3. The division may file suit for any violation of sections 324.950**
8 **to 324.983 in any court of competent jurisdiction and perform such**
9 **other acts as may be necessary to enforce the provisions of sections**
10 **324.950 to 324.983.**

326.289. 1. The board may grant or renew permits to practice as a
2 **certified public accounting firm to applicants that demonstrate their**
3 **qualifications in accordance with this chapter.**

4 (1) The following shall hold a permit issued under this chapter:

5 (a) Any firm with an office in this state, as defined by the board by rule,
6 offering or performing attest or compilation services; or

7 (b) Any firm with an office in this state that uses the title "CPA" or "CPA
8 firm".

9 (2) Any firm that does not have an office in this state may offer or perform
10 attest or compilation services in this state without a valid permit only if it meets
11 each of the following requirements:

12 (a) It complies with the qualifications described in subdivision (1) of
13 subsection 4 of this section;

14 (b) It complies with the requirements of peer review as set forth in this
15 chapter and the board's promulgated regulations;

16 (c) It performs such services through an individual with practice
17 privileges under section 326.283; and

18 (d) It can lawfully do so in the state where said individual with the
19 privilege to practice has his or her principal place of business.

20 (3) A firm which is not subject to the requirements of subdivisions (1) or
21 (2) of this subsection may perform other nonattest or noncompilation services
22 while using the title "CPA" or "CPA firm" in this state without a permit issued
23 under this section only if it:

24 (a) Performs such services through an individual with the privilege to
25 practice under section 326.283; and

26 (b) Can lawfully do so in the state where said individual with privilege to
27 practice has his or her principal place of business.

28 (4) (a) All firms practicing public accounting in this state shall register
29 with the secretary of state.

30 (b) Firms which may be exempt from this requirement include:

31 a. Sole proprietorships;

32 b. Trusts created pursuant to revocable trust agreements, of which the
33 trustee is a natural person who holds a license or privilege to practice as set forth
34 in section 326.280, 326.283, or 326.286;

35 c. General partnerships not operating as a limited liability partnership;
36 or

37 d. Foreign professional corporations which do not meet criteria of chapter
38 356 due to name or ownership, shall obtain a certificate of authority as a general
39 corporation. Notwithstanding the provisions of chapter 356, the secretary of state

40 may issue a certificate of authority to a foreign professional corporation which
41 does not meet the criteria of chapter 356 due to name or ownership, if the
42 corporation meets the requirements of this section and the rules of the board.

43 2. Permits shall be initially issued and renewed for periods of not more
44 than three years or for a specific period as prescribed by board rule following
45 issuance or renewal.

46 3. The board shall determine by rule the form for application and renewal
47 of permits and shall annually determine the fees for permits and their renewals.

48 4. An applicant for initial issuance or renewal of a permit to practice
49 under this section shall be required to show that:

50 (1) A simple majority of the ownership of the firm, in terms of financial
51 interests and voting rights of all partners, officers, principals, shareholders,
52 members or managers, belongs to licensees who are licensed in some state, and
53 the partners, officers, principals, shareholders, members or managers, whose
54 principal place of business is in this state and who perform professional services
55 in this state are licensees under section 326.280 or the corresponding provision
56 of prior law. Although firms may include nonlicensee owners, the firm and its
57 ownership shall comply with rules promulgated by the board;

58 (2) Any certified public accounting firm may include owners who are not
59 licensees provided that:

60 (a) The firm designates a licensee of this state, or in the case of a firm
61 which must have a permit under this section designates a licensee of another
62 state who meets the requirements of section 326.283, who is responsible for the
63 proper registration of the firm and identifies that individual to the board;

64 (b) All nonlicensee owners are active individual participants in the
65 certified public accounting firm or affiliated entities;

66 (c) All owners are of good moral character; and

67 (d) The firm complies with other requirements as the board may impose
68 by rule;

69 (3) Any licensee who is responsible for supervising attest services, or signs
70 or authorizes someone to sign the licensee's report on the financial statements on
71 behalf of the firm, shall meet competency requirements as determined by the
72 board by rule which shall include one year of experience in addition to the
73 experience required under subdivision (6) of subsection 1 of section 326.280 and
74 shall be verified by a licensee. The additional experience required by this
75 subsection shall include experience in attest work supervised by a licensee.

76 5. An applicant for initial issuance or renewal of a permit to practice shall
77 register each office of the firm within this state with the board and show that all
78 attest and compilation services rendered in this state are under the charge of a
79 licensee.

80 6. No licensee or firm holding a permit under this chapter shall use a
81 professional or firm name or designation that is misleading as to:

82 (1) The legal form of the firm;

83 (2) The persons who are partners, officers, members, managers or
84 shareholders of the firm; or

85 (3) Any other matter.

86 The names of one or more former partners, members or shareholders may be
87 included in the name of a firm or its successor unless the firm becomes a sole
88 proprietorship because of the death or withdrawal of all other partners, officers,
89 members or shareholders. A firm may use a fictitious name if the fictitious name
90 is registered with the board and is not otherwise misleading. The name of a firm
91 shall not include the name or initials of an individual who is not a present or a
92 past partner, member or shareholder of the firm or its predecessor. The name of
93 the firm shall not include the name of an individual who is not a licensee.

94 7. Applicants for initial issuance or renewal of permits shall list in their
95 application all states in which they have applied for or hold permits as certified
96 public accounting firms and list any past denial, revocation, suspension or any
97 discipline of a permit by any other state. Each holder of or applicant for a permit
98 under this section shall notify the board in writing within thirty days after its
99 occurrence of any change in the identities of partners, principals, officers,
100 shareholders, members or managers whose principal place of business is in this
101 state; any change in the number or location of offices within this state; any
102 change in the identity of the persons in charge of such offices; and any issuance,
103 denial, revocation, suspension or any discipline of a permit by any other state.

104 8. Firms which fall out of compliance with the provisions of this section
105 due to changes in firm ownership or personnel after receiving or renewing a
106 permit shall take corrective action to bring the firm back into compliance as
107 quickly as possible. The board may grant a reasonable period of time for a firm
108 to take such corrective action. Failure to bring the firm back into compliance
109 within a reasonable period as defined by the board may result in the suspension
110 or revocation of the firm permit.

111 9. The board shall require by rule, as a condition to the renewal of

112 permits, that firms undergo, no more frequently than once every three years, peer
113 reviews conducted in a manner as the board shall specify. The review shall
114 include a verification that individuals in the firm who are responsible for
115 supervising attest and compilation services or sign or authorize someone to sign
116 the accountant's report on the financial statements on behalf of the firm meet the
117 competency requirements set out in the professional standards for such services,
118 provided that any such rule:

119 (1) Shall include reasonable provision for compliance by a firm showing
120 that it has within the preceding three years undergone a peer review that is a
121 satisfactory equivalent to peer review generally required under this subsection;

122 (2) May require, with respect to peer reviews, that peer reviews be subject
123 to oversight by an oversight body established or sanctioned by board rule, which
124 shall periodically report to the board on the effectiveness of the review program
125 under its charge and provide to the board a listing of firms that have participated
126 in a peer review program that is satisfactory to the board; and

127 (3) Shall require, with respect to peer reviews, that the peer review
128 processes be operated and documents maintained in a manner designed to
129 preserve confidentiality, and that the board or any third party other than the
130 oversight body shall not have access to documents furnished or generated in the
131 course of the peer review of the firm except as provided in subdivision (2) of this
132 subsection.

133 10. The board may, by rule, charge a fee for oversight of peer reviews,
134 provided that the fee charged shall be substantially equivalent to the cost of
135 oversight.

136 11. **Notwithstanding any other provision in this section, the**
137 **board may obtain the following information regarding peer review from**
138 **any approved American Institute for Certified Public Accountants peer**
139 **review program:**

140 (1) **The firm's name and address;**

141 (2) **The firm's dates of enrollment in the program;**

142 (3) **The date of acceptance and the period covered by the firm's**
143 **most recently accepted peer review; and**

144 (4) **If applicable, whether the firm's enrollment in the program**
145 **has been dropped or terminated.**

146 12. In connection with proceedings before the board or upon receipt of a
147 complaint involving the licensee performing peer reviews, the board shall not

148 have access to any documents furnished or generated in the course of the
149 performance of the peer reviews except for peer review reports, letters of comment
150 and summary review memoranda. The documents shall be furnished to the board
151 only in a redacted manner that does not specifically identify any firm or licensee
152 being peer reviewed or any of their clients.

153 [12.] **13.** The peer review processes shall be operated and the documents
154 generated thereby be maintained in a manner designed to preserve their
155 confidentiality. No third party, other than the oversight body, the board, subject
156 to the provisions of subsection [11] **12** of this section, or the organization
157 performing peer review shall have access to documents furnished or generated in
158 the course of the review. All documents shall be privileged and closed records for
159 all purposes and all meetings at which the documents are discussed shall be
160 considered closed meetings under subdivision (1) of section 610.021. The
161 proceedings, records and workpapers of the board and any peer review subjected
162 to the board process shall be privileged and shall not be subject to discovery,
163 subpoena or other means of legal process or introduction into evidence at any civil
164 action, arbitration, administrative proceeding or board proceeding. No member
165 of the board or person who is involved in the peer review process shall be
166 permitted or required to testify in any civil action, arbitration, administrative
167 proceeding or board proceeding as to any matters produced, presented, disclosed
168 or discussed during or in connection with the peer review process or as to any
169 findings, recommendations, evaluations, opinions or other actions of such
170 committees or any of its members; provided, however, that information,
171 documents or records that are publicly available shall not be subject to discovery
172 or use in any civil action, arbitration, administrative proceeding or board
173 proceeding merely because they were presented or considered in connection with
174 the peer review process.

327.401. 1. The right to practice as an architect or to practice as a
2 professional engineer or to practice as a professional land surveyor or to practice
3 as a professional landscape architect shall be deemed a personal right, based
4 upon the qualifications of the individual, evidenced by such individual's
5 professional license and shall not be transferable; but any architect or any
6 professional engineer or any professional land surveyor or any professional
7 landscape architect may practice his or her profession through the medium of, or
8 as a member or as an employee of, a partnership or corporation if the plans,
9 specifications, estimates, plats, reports, surveys or other like documents or

10 instruments of the partnership or corporation are signed and stamped with the
11 personal seal of the architect, professional engineer, professional land surveyor,
12 or professional landscape architect by whom or under whose immediate personal
13 supervision the same were prepared and provided that the architect or
14 professional engineer or professional land surveyor or professional landscape
15 architect who affixes his or her signature and personal seal to any such plans,
16 specifications, estimates, plats, reports or other documents or instruments shall
17 be personally and professionally responsible therefor.

18 2. Any domestic corporation formed under the corporation law of this
19 state, or any foreign corporation, now or hereafter organized and having as one
20 of its purposes the practicing of architecture or professional engineering or
21 professional land surveying or professional landscape architecture and any
22 existing corporation which amends its charter to propose to practice architecture
23 or professional engineering or professional land surveying or professional
24 landscape architecture shall obtain a certificate of authority for each profession
25 named in the articles of incorporation or articles of organization from the board
26 which shall be renewed in accordance with the provisions of section 327.171 or
27 327.261 or 327.351, as the case may be, and from and after the date of such
28 certificate of authority and while the authority or a renewal thereof is in effect,
29 may offer and render architectural or professional engineering or professional
30 land surveying or professional landscape architectural services in this state if:

31 (1) At all times during the authorization or any renewal thereof the
32 directors of the corporation shall have assigned responsibility for the proper
33 conduct of all its architectural or professional engineering or professional land
34 surveying or professional landscape architectural activities in this state to an
35 architect licensed and authorized to practice architecture in this state or to a
36 professional engineer licensed and authorized to practice engineering in this state
37 or to a professional land surveyor licensed and authorized to practice professional
38 land surveying in this state, or to a professional landscape architect licensed and
39 authorized to practice professional landscape architecture in this state, as the
40 case may be; and

41 (2) The person or persons who is or are personally in charge and
42 supervises or supervise the architectural or professional engineering or
43 professional land surveying or professional landscape architectural activities, as
44 the case may be, of any such corporation in this state shall be licensed and
45 authorized to practice architecture or professional engineering or professional

46 land surveying or professional landscape architecture, as the case may be, as
47 provided in this chapter; and

48 (3) The corporation pays such fees for the certificate of authority, renewals
49 or reinstatements thereof as are required;

50 (4) **The provisions of this subsection shall not apply to any**
51 **electrical cooperative organized under the provisions of chapter 394 or**
52 **any electrical corporation operating under cooperative business plan,**
53 **as described in subsection 2 of section 393.110.**

333.041. 1. Each applicant for a license to practice funeral directing shall
2 furnish evidence to establish to the satisfaction of the board that he or she is:

3 (1) At least eighteen years of age, and possesses a high school diploma,
4 a general equivalency diploma, or equivalent thereof, as determined, at its
5 discretion, by the board; and

6 (2) A person of good moral character.

7 2. Every person desiring to enter the profession of embalming dead human
8 bodies within the state of Missouri and who is enrolled in a program accredited
9 by the American Board of Funeral Service Education, any successor organization,
10 or other accrediting entity as approved by the board shall register with the board
11 as a practicum student upon the form provided by the board. After such
12 registration, a student may assist, under the direct supervision of Missouri
13 licensed embalmers and funeral directors, in Missouri licensed funeral
14 establishments, while serving his or her practicum. The form for registration as
15 a practicum student shall be accompanied by a fee in an amount established by
16 the board.

17 3. Each applicant for a license to practice embalming shall furnish
18 evidence to establish to the satisfaction of the board that he or she:

19 (1) Is at least eighteen years of age, and possesses a high school diploma,
20 a general equivalency diploma, or equivalent thereof, as determined, at its
21 discretion, by the board;

22 (2) Is a person of good moral character;

23 (3) Has completed a funeral service education program accredited by the
24 American Board of Funeral Service Education, any successor organization, or
25 other accrediting entity as approved by the board. If an applicant does not
26 complete all requirements for licensure within five years from the date of his or
27 her completion of an accredited program, his or her registration as an apprentice
28 embalmer shall be automatically cancelled. The applicant shall be required to file

29 a new application and pay applicable fees. No previous apprenticeship shall be
30 considered for the new application;

31 (4) Upon due examination administered by the board, is possessed of a
32 knowledge of the subjects of embalming, anatomy, pathology, bacteriology,
33 mortuary administration, chemistry, restorative art, together with statutes, rules
34 and regulations governing the care, custody, shelter and disposition of dead
35 human bodies and the transportation thereof or has passed the national board
36 examination of the Conference of Funeral Service Examining Boards. If any
37 applicant fails to pass the state examination, he or she may retake the
38 examination at the next regular examination meeting. The applicant shall notify
39 the board office of his or her desire to retake the examination at least thirty days
40 prior to the date of the examination. Each time the examination is retaken, the
41 applicant shall pay a new examination fee in an amount established by the board;

42 (5) Has been employed full time in funeral service in a licensed funeral
43 establishment and has personally embalmed at least twenty-five dead human
44 bodies under the personal supervision of an embalmer who holds a current and
45 valid Missouri embalmer's license during an apprenticeship of not less than
46 twelve consecutive months. "Personal supervision" means that the licensed
47 embalmer shall be physically present during the entire embalming process in the
48 first six months of the apprenticeship period and physically present at the
49 beginning of the embalming process and available for consultation and personal
50 inspection within a period of not more than one hour in the remaining six months
51 of the apprenticeship period. All transcripts and other records filed with the
52 board shall become a part of the board files.

53 4. If the applicant does not complete the application process within the
54 five years after his or her completion of an approved program, then he or she
55 must file a new application and no fees paid previously shall apply toward the
56 license fee.

57 5. Examinations required by this section and section 333.042 shall be held
58 at least twice a year at times and places fixed by the board. The board shall by
59 rule and regulation prescribe the standard for successful completion of the
60 examinations.

61 6. Upon establishment of his or her qualifications as specified by this
62 section or section 333.042, the board shall issue to the applicant a license to
63 practice funeral directing or embalming, as the case may require, and shall
64 register the applicant as a duly licensed funeral director or a duly licensed

65 embalmer. Any person having the qualifications required by this section and
66 section 333.042 may be granted both a license to practice funeral directing and
67 to practice embalming.

68 7. The board shall, upon request, waive any requirement of this chapter
69 and issue a temporary funeral director's license, valid for six months, to the
70 surviving spouse or next of kin or the personal representative of a licensed
71 funeral director, or to the spouse, next of kin, employee or conservator of a
72 licensed funeral director disabled because of sickness, mental incapacity or injury.

73 **8. Upon the successful completion of an embalming**
74 **apprenticeship and pending the successful completion of the**
75 **examination as set forth in subdivision (4) of subsection 3 of this**
76 **section, and also pending the successful completion of all other**
77 **requirements for an embalmer's license, the applicant may continue to**
78 **be employed by the funeral establishment where the apprenticeship**
79 **took place under the terms of subdivision (5) of subsection 3 of this**
80 **section for a period not to exceed six months or until the applicant's**
81 **embalmer's license is issued, whichever comes first. An applicant shall**
82 **not continue to practice as an embalmer apprentice under the**
83 **provisions of this subsection without providing a written notice to the**
84 **board to extend his or her apprenticeship registration for up to six**
85 **months. The board shall grant the extension upon receipt of the**
86 **written notice.**

334.037. 1. A physician may enter into collaborative practice
2 arrangements with assistant physicians. Collaborative practice arrangements
3 shall be in the form of written agreements, jointly agreed-upon protocols, or
4 standing orders for the delivery of health care services. Collaborative practice
5 arrangements, which shall be in writing, may delegate to an assistant physician
6 the authority to administer or dispense drugs and provide treatment as long as
7 the delivery of such health care services is within the scope of practice of the
8 assistant physician and is consistent with that assistant physician's skill,
9 training, and competence and the skill and training of the collaborating
10 physician.

11 2. The written collaborative practice arrangement shall contain at least
12 the following provisions:

13 (1) Complete names, home and business addresses, zip codes, and
14 telephone numbers of the collaborating physician and the assistant physician;

15 (2) A list of all other offices or locations besides those listed in subdivision
16 (1) of this subsection where the collaborating physician authorized the assistant
17 physician to prescribe;

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

23 (4) All specialty or board certifications of the collaborating physician and
24 all certifications of the assistant physician;

25 (5) The manner of collaboration between the collaborating physician and
26 the assistant physician, including how the collaborating physician and the
27 assistant physician shall:

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

30 (b) Maintain geographic proximity; except, the collaborative practice
31 arrangement may allow for geographic proximity to be waived for a maximum of
32 twenty-eight days per calendar year for rural health clinics as defined by Pub. L.
33 95-210 (42 U.S.C. Section 1395x), as amended, as long as the collaborative
34 practice arrangement includes alternative plans as required in paragraph (c) of
35 this subdivision. Such exception to geographic proximity shall apply only to
36 independent rural health clinics, provider-based rural health clinics if the
37 provider is a critical access hospital as provided in 42 U.S.C. Section 1395i-4, and
38 provider-based rural health clinics if the main location of the hospital sponsor is
39 greater than fifty miles from the clinic. The collaborating physician shall
40 maintain documentation related to such requirement and present it to the state
41 board of registration for the healing arts when requested; and

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

44 (6) A description of the assistant physician's controlled substance
45 prescriptive authority in collaboration with the physician, including a list of the
46 controlled substances the physician authorizes the assistant physician to
47 prescribe and documentation that it is consistent with each professional's
48 education, knowledge, skill, and competence;

49 (7) A list of all other written practice agreements of the collaborating
50 physician and the assistant physician;

51 (8) The duration of the written practice agreement between the
52 collaborating physician and the assistant physician;

53 (9) A description of the time and manner of the collaborating physician's
54 review of the assistant physician's delivery of health care services. The
55 description shall include provisions that the assistant physician shall submit a
56 minimum of ten percent of the charts documenting the assistant physician's
57 delivery of health care services to the collaborating physician for review by the
58 collaborating physician, or any other physician designated in the collaborative
59 practice arrangement, every fourteen days; and

60 (10) The collaborating physician, or any other physician designated in the
61 collaborative practice arrangement, shall review every fourteen days a minimum
62 of twenty percent of the charts in which the assistant physician prescribes
63 controlled substances. The charts reviewed under this subdivision may be
64 counted in the number of charts required to be reviewed under subdivision (9) of
65 this subsection.

66 3. The state board of registration for the healing arts under section
67 334.125 shall promulgate rules regulating the use of collaborative practice
68 arrangements for assistant physicians. Such rules shall specify:

69 (1) Geographic areas to be covered;

70 (2) The methods of treatment that may be covered by collaborative
71 practice arrangements;

72 (3) In conjunction with deans of medical schools and primary care
73 residency program directors in the state, the development and implementation of
74 educational methods and programs undertaken during the collaborative practice
75 service which shall facilitate the advancement of the assistant physician's medical
76 knowledge and capabilities, and which may lead to credit toward a future
77 residency program for programs that deem such documented educational
78 achievements acceptable; and

79 (4) The requirements for review of services provided under collaborative
80 practice arrangements, including delegating authority to prescribe controlled
81 substances.

82 Any rules relating to dispensing or distribution of medications or devices by
83 prescription or prescription drug orders under this section shall be subject to the
84 approval of the state board of pharmacy. Any rules relating to dispensing or
85 distribution of controlled substances by prescription or prescription drug orders
86 under this section shall be subject to the approval of the department of health

87 and senior services and the state board of pharmacy. The state board of
88 registration for the healing arts shall promulgate rules applicable to assistant
89 physicians that shall be consistent with guidelines for federally funded
90 clinics. The rulemaking authority granted in this subsection shall not extend to
91 collaborative practice arrangements of hospital employees providing inpatient
92 care within hospitals as defined in chapter 197 or population-based public health
93 services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

94 4. The state board of registration for the healing arts shall not deny,
95 revoke, suspend, or otherwise take disciplinary action against a collaborating
96 physician for health care services delegated to an assistant physician provided
97 the provisions of this section and the rules promulgated thereunder are satisfied.

98 5. Within thirty days of any change and on each renewal, the state board
99 of registration for the healing arts shall require every physician to identify
100 whether the physician is engaged in any collaborative practice arrangement,
101 including collaborative practice arrangements delegating the authority to
102 prescribe controlled substances, and also report to the board the name of each
103 assistant physician with whom the physician has entered into such
104 arrangement. The board may make such information available to the public. The
105 board shall track the reported information and may routinely conduct random
106 reviews of such arrangements to ensure that arrangements are carried out for
107 compliance under this chapter.

108 6. A collaborating physician [or supervising physician] shall not enter into
109 a collaborative practice arrangement [or supervision agreement] with more than
110 six full-time equivalent assistant physicians, full-time equivalent physician
111 assistants, or full-time equivalent advance practice registered nurses, or any
112 combination thereof. Such limitation shall not apply to collaborative
113 arrangements of hospital employees providing inpatient care service in hospitals
114 as defined in chapter 197 or population-based public health services as defined
115 by 20 CSR 2150-5.100 as of April 30, 2008, or to a certified registered nurse
116 anesthetist providing anesthesia services under the supervision of an
117 anesthesiologist or other physician, dentist, or podiatrist who is immediately
118 available if needed as set out in subsection 7 of section 334.104.

119 7. The collaborating physician shall determine and document the
120 completion of at least a one-month period of time during which the assistant
121 physician shall practice with the collaborating physician continuously present
122 before practicing in a setting where the collaborating physician is not

123 continuously present. No rule or regulation shall require the collaborating
124 physician to review more than ten percent of the assistant physician's patient
125 charts or records during such one-month period. Such limitation shall not apply
126 to collaborative arrangements of providers of population-based public health
127 services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

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

134 9. No contract or other agreement shall require a physician to act as a
135 collaborating physician for an assistant physician against the physician's will. A
136 physician shall have the right to refuse to act as a collaborating physician,
137 without penalty, for a particular assistant physician. No contract or other
138 agreement shall limit the collaborating physician's ultimate authority over any
139 protocols or standing orders or in the delegation of the physician's authority to
140 any assistant physician, but such requirement shall not authorize a physician in
141 implementing such protocols, standing orders, or delegation to violate applicable
142 standards for safe medical practice established by a hospital's medical staff.

143 10. No contract or other agreement shall require any assistant physician
144 to serve as a collaborating assistant physician for any collaborating physician
145 against the assistant physician's will. An assistant physician shall have the right
146 to refuse to collaborate, without penalty, with a particular physician.

147 11. All collaborating physicians and assistant physicians in collaborative
148 practice arrangements shall wear identification badges while acting within the
149 scope of their collaborative practice arrangement. The identification badges shall
150 prominently display the licensure status of such collaborating physicians and
151 assistant physicians.

152 12. (1) An assistant physician with a certificate of controlled substance
153 prescriptive authority as provided in this section may prescribe any controlled
154 substance listed in Schedule III, IV, or V of section 195.017, and may have
155 restricted authority in Schedule II, when delegated the authority to prescribe
156 controlled substances in a collaborative practice arrangement. Prescriptions for
157 Schedule II medications prescribed by an assistant physician who has a
158 certificate of controlled substance prescriptive authority are restricted to only

159 those medications containing hydrocodone. Such authority shall be filed with the
160 state board of registration for the healing arts. The collaborating physician shall
161 maintain the right to limit a specific scheduled drug or scheduled drug category
162 that the assistant physician is permitted to prescribe. Any limitations shall be
163 listed in the collaborative practice arrangement. Assistant physicians shall not
164 prescribe controlled substances for themselves or members of their
165 families. Schedule III controlled substances and Schedule II - hydrocodone
166 prescriptions shall be limited to a five-day supply without refill, except that
167 buprenorphine may be prescribed for up to a thirty-day supply without refill for
168 patients receiving medication-assisted treatment for substance use disorders
169 under the direction of the collaborating physician. Assistant physicians who are
170 authorized to prescribe controlled substances under this section shall register
171 with the federal Drug Enforcement Administration and the state bureau of
172 narcotics and dangerous drugs, and shall include the Drug Enforcement
173 Administration registration number on prescriptions for controlled substances.

174 (2) The collaborating physician shall be responsible to determine and
175 document the completion of at least one hundred twenty hours in a four-month
176 period by the assistant physician during which the assistant physician shall
177 practice with the collaborating physician on-site prior to prescribing controlled
178 substances when the collaborating physician is not on-site. Such limitation shall
179 not apply to assistant physicians of population-based public health services as
180 defined in 20 CSR 2150-5.100 as of April 30, 2009, or assistant physicians
181 providing opioid addiction treatment.

182 (3) An assistant physician shall receive a certificate of controlled
183 substance prescriptive authority from the state board of registration for the
184 healing arts upon verification of licensure under section 334.036.

185 13. Nothing in this section or section 334.036 shall be construed to limit
186 the authority of hospitals or hospital medical staff to make employment or
187 medical staff credentialing or privileging decisions.

334.104. 1. A physician may enter into collaborative practice
2 arrangements with registered professional nurses. Collaborative practice
3 arrangements shall be in the form of written agreements, jointly agreed-upon
4 protocols, or standing orders for the delivery of health care
5 services. Collaborative practice arrangements, which shall be in writing, may
6 delegate to a registered professional nurse the authority to administer or dispense
7 drugs and provide treatment as long as the delivery of such health care services

8 is within the scope of practice of the registered professional nurse and is
9 consistent with that nurse's skill, training and competence.

10 2. Collaborative practice arrangements, which shall be in writing, may
11 delegate to a registered professional nurse the authority to administer, dispense
12 or prescribe drugs and provide treatment if the registered professional nurse is
13 an advanced practice registered nurse as defined in subdivision (2) of section
14 335.016. Collaborative practice arrangements may delegate to an advanced
15 practice registered nurse, as defined in section 335.016, the authority to
16 administer, dispense, or prescribe controlled substances listed in Schedules III,
17 IV, and V of section 195.017, and Schedule II - hydrocodone; except that, the
18 collaborative practice arrangement shall not delegate the authority to administer
19 any controlled substances listed in Schedules III, IV, and V of section 195.017, or
20 Schedule II - hydrocodone for the purpose of inducing sedation or general
21 anesthesia for therapeutic, diagnostic, or surgical procedures. Schedule III
22 narcotic controlled substance and Schedule II - hydrocodone prescriptions shall
23 be limited to a one hundred twenty-hour supply without refill. Such collaborative
24 practice arrangements shall be in the form of written agreements, jointly agreed-
25 upon protocols or standing orders for the delivery of health care services. An
26 advanced practice registered nurse may prescribe buprenorphine for up to a
27 thirty-day supply without refill for patients receiving medication-assisted
28 treatment for substance use disorders under the direction of the collaborating
29 physician.

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

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

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

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

43 (4) All specialty or board certifications of the collaborating physician and

44 all certifications of the advanced practice registered nurse;

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

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

50 (b) Maintain geographic proximity, except the collaborative practice
51 arrangement may allow for geographic proximity to be waived for a maximum of
52 twenty-eight days per calendar year for rural health clinics as defined by P.L. 95-
53 210, as long as the collaborative practice arrangement includes alternative plans
54 as required in paragraph (c) of this subdivision. This exception to geographic
55 proximity shall apply only to independent rural health clinics, provider-based
56 rural health clinics where the provider is a critical access hospital as provided in
57 42 U.S.C. Section 1395i-4, and provider-based rural health clinics where the main
58 location of the hospital sponsor is greater than fifty miles from the clinic. The
59 collaborating physician is required to maintain documentation related to this
60 requirement and to present it to the state board of registration for the healing
61 arts when requested; and

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

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

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

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

73 (9) A description of the time and manner of the collaborating physician's
74 review of the advanced practice registered nurse's delivery of health care
75 services. The description shall include provisions that the advanced practice
76 registered nurse shall submit a minimum of ten percent of the charts
77 documenting the advanced practice registered nurse's delivery of health care
78 services to the collaborating physician for review by the collaborating physician,
79 or any other physician designated in the collaborative practice arrangement,

80 every fourteen days; and

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

87 4. The state board of registration for the healing arts pursuant to section
88 334.125 and the board of nursing pursuant to section 335.036 may jointly
89 promulgate rules regulating the use of collaborative practice arrangements. Such
90 rules shall be limited to specifying geographic areas to be covered, the methods
91 of treatment that may be covered by collaborative practice arrangements and the
92 requirements for review of services provided pursuant to collaborative practice
93 arrangements including delegating authority to prescribe controlled
94 substances. Any rules relating to dispensing or distribution of medications or
95 devices by prescription or prescription drug orders under this section shall be
96 subject to the approval of the state board of pharmacy. Any rules relating to
97 dispensing or distribution of controlled substances by prescription or prescription
98 drug orders under this section shall be subject to the approval of the department
99 of health and senior services and the state board of pharmacy. In order to take
100 effect, such rules shall be approved by a majority vote of a quorum of each
101 board. Neither the state board of registration for the healing arts nor the board
102 of nursing may separately promulgate rules relating to collaborative practice
103 arrangements. Such jointly promulgated rules shall be consistent with guidelines
104 for federally funded clinics. The rulemaking authority granted in this subsection
105 shall not extend to collaborative practice arrangements of hospital employees
106 providing inpatient care within hospitals as defined pursuant to chapter 197 or
107 population-based public health services as defined by 20 CSR 2150-5.100 as of
108 April 30, 2008.

109 5. The state board of registration for the healing arts shall not deny,
110 revoke, suspend or otherwise take disciplinary action against a physician for
111 health care services delegated to a registered professional nurse provided the
112 provisions of this section and the rules promulgated thereunder are
113 satisfied. Upon the written request of a physician subject to a disciplinary action
114 imposed as a result of an agreement between a physician and a registered
115 professional nurse or registered physician assistant, whether written or not, prior

116 to August 28, 1993, all records of such disciplinary licensure action and all
117 records pertaining to the filing, investigation or review of an alleged violation of
118 this chapter incurred as a result of such an agreement shall be removed from the
119 records of the state board of registration for the healing arts and the division of
120 professional registration and shall not be disclosed to any public or private entity
121 seeking such information from the board or the division. The state board of
122 registration for the healing arts shall take action to correct reports of alleged
123 violations and disciplinary actions as described in this section which have been
124 submitted to the National Practitioner Data Bank. In subsequent applications
125 or representations relating to his medical practice, a physician completing forms
126 or documents shall not be required to report any actions of the state board of
127 registration for the healing arts for which the records are subject to removal
128 under this section.

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

139 7. Notwithstanding any law to the contrary, a certified registered nurse
140 anesthetist as defined in subdivision (8) of section 335.016 shall be permitted to
141 provide anesthesia services without a collaborative practice arrangement provided
142 that he or she is under the supervision of an anesthesiologist or other physician,
143 dentist, or podiatrist who is immediately available if needed. Nothing in this
144 subsection shall be construed to prohibit or prevent a certified registered nurse
145 anesthetist as defined in subdivision (8) of section 335.016 from entering into a
146 collaborative practice arrangement under this section, except that the
147 collaborative practice arrangement may not delegate the authority to prescribe
148 any controlled substances listed in Schedules III, IV, and V of section 195.017, or
149 Schedule II - hydrocodone.

150 8. A collaborating physician [or supervising physician] shall not enter into
151 a collaborative practice arrangement [or supervision agreement] with more than

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

161 9. It is the responsibility of the collaborating physician to determine and
162 document the completion of at least a one-month period of time during which the
163 advanced practice registered nurse shall practice with the collaborating physician
164 continuously present before practicing in a setting where the collaborating
165 physician is not continuously present. This limitation shall not apply to
166 collaborative arrangements of providers of population-based public health services
167 as defined by 20 CSR 2150-5.100 as of April 30, 2008.

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

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

184 12. No contract or other agreement shall require any advanced practice
185 registered nurse to serve as a collaborating advanced practice registered nurse
186 for any collaborating physician against the advanced practice registered nurse's
187 will. An advanced practice registered nurse shall have the right to refuse to

188 collaborate, without penalty, with a particular physician.

334.108. 1. Prior to prescribing any drug, controlled substance, or other
2 treatment through telemedicine, as defined in section 191.1145, or the internet,
3 a physician shall establish a valid physician-patient relationship as described in
4 section 191.1146. This relationship shall include:

5 (1) Obtaining a reliable medical history and performing a physical
6 examination of the patient, adequate to establish the diagnosis for which the drug
7 is being prescribed and to identify underlying conditions or contraindications to
8 the treatment recommended or provided;

9 (2) Having sufficient dialogue with the patient regarding treatment
10 options and the risks and benefits of treatment or treatments;

11 (3) If appropriate, following up with the patient to assess the therapeutic
12 outcome;

13 (4) Maintaining a contemporaneous medical record that is readily
14 available to the patient and, subject to the patient's consent, to the patient's other
15 health care professionals; and

16 (5) Maintaining the electronic prescription information as part of the
17 patient's medical record.

18 2. The requirements of subsection 1 of this section may be satisfied by the
19 prescribing physician's designee when treatment is provided in:

20 (1) A hospital as defined in section 197.020;

21 (2) A hospice program as defined in section 197.250;

22 (3) Home health services provided by a home health agency as defined in
23 section 197.400;

24 (4) Accordance with a collaborative practice agreement as defined in
25 section 334.104;

26 (5) Conjunction with a physician assistant licensed pursuant to section
27 334.738;

28 (6) Conjunction with an assistant physician licensed under section
29 334.036;

30 (7) Consultation with another physician who has an ongoing physician-
31 patient relationship with the patient, and who has agreed to supervise the
32 patient's treatment, including use of any prescribed medications; or

33 (8) On-call or cross-coverage situations.

34 3. No health care provider, as defined in section 376.1350, shall prescribe
35 any drug, controlled substance, or other treatment to a patient based solely on an

36 evaluation over the telephone; except that, a physician[,] **or** such physician's on-
37 call designee, **or** an advanced practice registered nurse, **a physician assistant,**
38 **or an assistant physician** in a collaborative practice arrangement with such
39 physician, [a physician assistant in a supervision agreement with such physician,
40 or an assistant physician in a supervision agreement with such physician] may
41 prescribe any drug, controlled substance, or other treatment that is within his or
42 her scope of practice to a patient based solely on a telephone evaluation if a
43 previously established and ongoing physician-patient relationship exists between
44 such physician and the patient being treated.

45 4. No health care provider shall prescribe any drug, controlled substance,
46 or other treatment to a patient based solely on an internet request or an internet
47 questionnaire.

334.702. As used in sections 334.700 to 334.725, unless the context clearly
2 requires otherwise, the following terms mean:

3 (1) ["Athlete", a person who participates in a sanctioned amateur or
4 professional sport or recreational sport activity;

5 (2) "Athletic trainer", a [person] **health care professional** who meets
6 the qualifications of section 334.708 and who, upon the direction of [the team
7 physician and/or consulting] a physician[, practices prevention,] **or consulting**
8 **physician licensed under this chapter, promotes health and wellness,**
9 **provides injury and illness prevention, clinical evaluation and**
10 **assessment,** emergency care, first aid, treatment, or physical rehabilitation of
11 injuries [incurred by athletes] **related to or affecting physical activity, and**
12 **return to performance activity for physically active individuals** in the
13 manner, means, and methods deemed necessary to effect care [or], rehabilitation,
14 [or both] **or function, and that are congruent with the athletic trainer's**
15 **education, training, and competence;**

16 (2) "Athletic training student", **a person enrolled in a professional**
17 **athletic training degree program accredited by the Commission on**
18 **Accreditation of Athletic Training Education, or its successor agency;**

19 (3) "Board", the Missouri board for the healing arts;

20 (4) "Committee", the **Missouri** athletic [trainers] **trainer** advisory
21 committee;

22 (5) "Division", the division of professional registration **within the**
23 **department of insurance, financial institutions and professional**
24 **registration;**

25 (6) ["Student athletic trainer", a person who assists in the duties usually
26 performed by a licensed athletic trainer and who works under the direct
27 supervision of a licensed athletic trainer] **"Physically active individual", any
28 person who engages in exercise, recreation, sport, or other activity
29 requiring physical strength, agility, flexibility, range of motion, speed,
30 or stamina.**

**334.703. 1. An athletic trainer shall refer any individual whose
2 medical condition is beyond the scope of the athletic trainer's
3 education, training, and competence to a physician as defined in
4 chapter 334.400.**

**5 2. Nothing in this section shall be construed as to limit the
6 ability of athletic trainers to provide health care services in accordance
7 with the provisions of this chapter.**

334.704. No person shall hold himself or herself out as an athletic trainer
2 [in this state] **or to be practicing athletic training, by title or description,
3 including the words athletic trainer (AT), licensed athletic trainer
4 (LAT), athletic therapist, or certified athletic trainer (ATC),** unless such
5 person has been licensed as such under the provisions of sections 334.700 to
6 334.725.

334.706. 1. The board shall license applicants who meet the qualifications
2 for athletic trainers, who file for licensure, and who pay all fees required for this
3 licensure.

**4 (1) The board may issue a temporary license to any person who
5 is licensed as an athletic trainer in any other state or territory of the
6 United States, who has attested that no professional license issued to
7 him or her has ever been disciplined and who meets any other
8 requirements established by the board.**

**9 (2) A temporary license shall be valid for six months from the
10 date of issuance or until a permanent license is issued or denied and
11 shall not be renewed.**

**12 (3) A temporary license may be denied pursuant to the cases and
13 procedures set forth in section 334.715.**

14 2. The board shall:

15 (1) Prescribe application forms to be furnished to all persons seeking
16 licensure pursuant to sections 334.700 to 334.725;

17 (2) Prescribe the form and design of the licensure to be issued pursuant

18 to sections 334.700 to 334.725;

19 (3) Set the fee for licensure and renewal thereof;

20 (4) Keep a record of all of its proceedings regarding the Missouri athletic
21 trainers act and of all athletic trainers licensed in this state;

22 (5) [Annually prepare] **Make available** a roster of the names and
23 **business** addresses of all athletic trainers licensed in this state[, copies of which
24 shall be made available upon request to any person paying the fee therefor];

25 (6) [Set the fee for the roster at an amount sufficient to cover the actual
26 cost of publishing and distributing the roster;

27 (7)] Appoint members of the Missouri athletic trainer advisory committee[;

28 (8) Adopt an official seal].

29 3. The board may:

30 (1) Issue subpoenas to compel witnesses to testify or produce evidence in
31 proceedings to deny[, suspend, or revoke] a license or licensure **or discipline a**
32 **license**;

33 (2) Promulgate rules pursuant to chapter 536 in order to carry out the
34 provisions of sections 334.700 to 334.725;

35 (3) Establish guidelines for athletic trainers in sections 334.700 to
36 334.725.

37 4. No rule or portion of a rule promulgated under the authority of sections
38 334.700 to 334.725 shall become effective unless it has been promulgated
39 pursuant to the provisions of section 536.024.

334.708. [1.] Any person seeking licensure pursuant to sections 334.700
2 to 334.725 after August 28, 2006, [must be a resident or in the process of
3 establishing residency in this state and] **shall** have passed the [National Athletic
4 Trainers Association] Board of Certification, **Inc.**, or its successor agency,
5 examination.

6 [2. The board shall grant, without examination, licensure to any qualified
7 nonresident athletic trainer holding a license or licensure in another state if such
8 other state recognizes licenses or licensure of the state of Missouri in the same
9 manner.]

334.710. 1. All applications for initial licensure pursuant to sections
2 334.700 to 334.725 shall be submitted on forms prescribed by the board and shall
3 be accompanied by an initial licensure fee. All applications for renewal of
4 licensure issued pursuant to sections 334.700 to 334.725 shall be submitted on
5 forms prescribed by the board and shall be accompanied by a renewal fee.

6 2. All fees of any kind and character authorized to be charged by the
7 board shall be [paid to the director of revenue and shall be deposited by the state
8 treasurer into the board for the healing arts fund, to be disbursed only in
9 payment for expenses of maintaining the athletic trainer licensure program and
10 for the enforcement of the provisions of sections 334.700 to 334.725] **collected**
11 **and deposited pursuant to section 334.050.**

 334.712. 1. Any person who meets the qualifications listed in section
2 334.708, submits his or her application and fees in accordance with section
3 334.710, and has not committed any act listed in section 334.715 shall be issued
4 a license pursuant to sections 334.700 to 334.725.

5 2. Each license issued pursuant to sections 334.700 to 334.725 shall
6 contain the name of the person to whom it was issued, the date on which it was
7 issued and such other information as the board deems advisable. All licenses
8 issued pursuant to sections 334.700 to 334.725 shall expire on [January thirtieth
9 of each year] **a schedule established by rule.**

 334.715. 1. The board may refuse to issue or renew any license required
2 under sections 334.700 to 334.725 for one or any combination of causes listed in
3 subsection 2 of this section or any cause listed in section 334.100. The board
4 shall notify the applicant in writing of the reasons for the refusal and shall advise
5 the applicant of the applicant's right to file a complaint with the administrative
6 hearing commission as provided in chapter 621. As an alternative to a refusal to
7 issue or renew any certificate, registration, or authority, the board may, in its
8 discretion, issue a license which is subject to reprimand, probation, restriction,
9 or limitation to an applicant for licensure for any one or any combination of
10 causes listed in subsection 2 of this section or section 334.100. The board's order
11 of reprimand, probation, limitation, or restriction shall contain a statement of the
12 discipline imposed, the basis therefor, the date such action shall become effective,
13 and a statement that the applicant has thirty days to request in writing a hearing
14 before the administrative hearing commission. If the board issues a probationary,
15 limited, or restricted license to an applicant for licensure, either party may file
16 a written petition with the administrative hearing commission within thirty days
17 of the effective date of the probationary, limited, or restricted license seeking
18 review of the board's determination. If no written request for a hearing is
19 received by the administrative hearing commission within the thirty-day period,
20 the right to seek review of the board's decision shall be considered waived.

21 2. The board may cause a complaint to be filed with the administrative

22 hearing commission as provided in chapter 621 against any holder of a certificate
23 of registration or authority, permit, or license required by sections 334.700 to
24 334.725 or any person who has failed to renew or has surrendered the person's
25 certification of registration or license for any one or any combination of the
26 following causes:

27 (1) Violated or conspired to violate any provision of sections 334.700 to
28 334.725 or any provision of any rule promulgated pursuant to sections 334.700
29 to 334.725; or

30 (2) Has been found guilty of unethical conduct as defined in the ethical
31 standards of the National Athletic [Trainers] **Trainers'** Association or the
32 [National Athletic Trainers Association] Board of Certification, **Inc.**, or its
33 successor agency, as adopted and published by the committee and the board and
34 filed with the secretary of state; or

35 (3) **Has practiced in the state of Missouri while no longer**
36 **certified as an athletic trainer by the Board of Certification, Inc., or its**
37 **successor agency; or**

38 (4) Any cause listed in section 334.100.

39 3. After the filing of such complaint before the administrative hearing
40 commission, the proceedings shall be conducted in accordance with the provisions
41 of chapter 621. Upon a finding by the administrative hearing commission that
42 the grounds provided in subsection 2 of this section for disciplinary action are
43 met, the board may, singly or in combination[:

44 (1) Warn, censure, or place the person named in the complaint on
45 probation on such terms and conditions as the board deems appropriate for a
46 period not to exceed ten years; or

47 (2) Suspend the person's license, certificate, or permit for a period not to
48 exceed three years; or

49 (3) Administer a public or private reprimand; or

50 (4) Deny the person's application for a license; or

51 (5) Permanently withhold issuance of a license or require the person to
52 submit to the care, counseling, or treatment of physicians designated by the board
53 at the expense of the individual to be examined; or

54 (6) Require the person to attend such continuing education courses and
55 pass such examinations as the board may direct; or

56 (7) Restrict or limit the person's license for an indefinite period of time;

57 or

58 (8) Revoke the person's license.

59 4. In any order of revocation, the board may provide that the person shall
60 not apply for reinstatement of the person's license for a period of time ranging
61 from two to seven years following the date of the order of revocation. All stay
62 orders shall toll such time period.

63 5. Before restoring to good standing a license, certificate, or permit issued
64 under this chapter which has been in a revoked, suspended, or inactive state for
65 any cause for more than two years, the board may require the applicant to attend
66 such continuing education courses and pass such examinations as the board may
67 direct] **impose any of the disciplines authorized by section 334.100.**

334.717. 1. There is hereby created the "Missouri Athletic Trainer
2 Advisory Committee", to be composed of [five] **six** members to be appointed by
3 the board.

4 2. The athletic trainer advisory committee shall:

5 (1) Assist the board in conducting [examinations] **evaluations** for
6 applicants of athletic trainer licensure;

7 (2) Advise the board on all matters pertaining to the licensure of athletic
8 trainers;

9 (3) Review all complaints and/or investigations wherein there is a possible
10 violation of sections **334.100**, 334.700 to 334.725, or regulations promulgated
11 pursuant thereto and make recommendations to the board for action;

12 (4) Follow the provisions of the board's administrative practice procedures
13 in conducting all official duties.

14 3. [Each] **The** athletic trainer advisory committee [member] shall **be**
15 **comprised as such:**

16 (1) **Each member shall** be a citizen of the United States and a resident
17 of the state of Missouri for five years [next] **immediately** preceding appointment
18 **and remain a resident of the state of Missouri throughout the term;** and

19 (2) [Be comprised of] Three **members shall be** licensed athletic trainers
20 [except for initial appointees]; and

21 (3) One member shall be a physician duly licensed by the Missouri state
22 board for the healing arts; and

23 (4) One member shall be a general public member; **and**

24 **(5) One member shall be a member of the board.**

25 4. [Except for the initial appointees,] Members shall hold office for terms
26 of six years. [The board shall designate one member for a term expiring in 1984,

27 one member for a term expiring in 1985, one member for a term expiring in 1986,
28 one member for a term expiring in 1987, and one member for a term expiring in
29 1988.] In the event of death, resignation, or removal of any member, the vacancy
30 of the unexpired term shall be filled by the board in the same manner as the
31 other appointments.

334.721. 1. Nothing in sections 334.700 to 334.725 shall be construed to
2 authorize the practice of medicine by any person not licensed by the state board
3 of registration for the healing arts.

4 2. The provisions of sections 334.700 to 334.725 shall not apply to the
5 following persons:

6 (1) Physicians and surgeons licensed by the state board of registration for
7 the healing arts **as defined in this chapter**;

8 (2) [Dentists licensed by the Missouri dental board who confine their
9 practice strictly to dentistry;

10 (3) Optometrists licensed by the state board of optometry who confine
11 their practice strictly to optometry, as defined in section 336.010;

12 (4)] Nurses licensed by the state board of nursing who confine their
13 practice strictly to nursing **as defined in section 335.016**;

14 [(5)] (3) Chiropractors licensed by the state board of chiropractic
15 examiners who confine themselves strictly to the practice of chiropractic, as
16 defined in section 331.010;

17 [(6)] (4) Podiatrists licensed by the state board of chiropody or podiatry
18 who confine their practice strictly to that of a podiatrist, as defined in section
19 330.010;

20 [(7)] (5) Professional physical therapists licensed by the state board of
21 registration for the healing arts who confine their practice strictly to professional
22 physical therapy, as defined in section 334.500;

23 [(8) Coaches and physical education instructors in the performance of
24 their duties;

25 (9)] (6) Athletic training students who confine themselves strictly to their
26 duties as defined in sections 334.700 to 334.725;

27 [(10)] (7) Athletic trainers, **holding a valid credential** from other
28 nations, states, or territories performing their duties for their respective teams
29 or organizations if they restrict their duties only to their teams or organizations
30 and only during the course of their teams' or organizations' [stay] **visit, not to**
31 **exceed thirty days in one calendar year**, in this state.

334.725. Any person who violates any provision of sections 334.700 to
2 334.725 is guilty of a misdemeanor and, upon conviction thereof, shall be
3 punished as for a class [C] B misdemeanor.

**334.726. Any new amendments to sections 334.701 to 334.726, shall
2 become effective thirty days after the effective date of such act.**

334.735. 1. As used in sections 334.735 to 334.749, the following terms
2 mean:

3 (1) "Applicant", any individual who seeks to become licensed as a
4 physician assistant;

5 (2) "Certification" or "registration", a process by a certifying entity that
6 grants recognition to applicants meeting predetermined qualifications specified
7 by such certifying entity;

8 (3) "Certifying entity", the nongovernmental agency or association which
9 certifies or registers individuals who have completed academic and training
10 requirements;

11 (4) **"Collaborative practice arrangement", written agreements,
12 jointly agreed upon protocols, or standing orders, all of which shall be
13 in writing, for the delivery of health care services;**

14 (5) "Department", the department of insurance, financial institutions and
15 professional registration or a designated agency thereof;

16 [(5)] (6) "License", a document issued to an applicant by the board
17 acknowledging that the applicant is entitled to practice as a physician assistant;

18 [(6)] (7) "Physician assistant", a person who has graduated from a
19 physician assistant program accredited by the [American Medical Association's
20 Committee on Allied Health Education and Accreditation or by its successor
21 agency] **Accreditation Review Commission on Education for the
22 Physician Assistant or its successor agency, prior to 2001, or the
23 Committee on Allied Health Education and Accreditation or the
24 Commission on Accreditation of Allied Health Education Programs**, who
25 has passed the certifying examination administered by the National Commission
26 on Certification of Physician Assistants and has active certification by the
27 National Commission on Certification of Physician Assistants who provides
28 health care services delegated by a licensed physician. A person who has been
29 employed as a physician assistant for three years prior to August 28, 1989, who
30 has passed the National Commission on Certification of Physician Assistants
31 examination, and has active certification of the National Commission on

32 Certification of Physician Assistants;

33 [(7)] (8) "Recognition", the formal process of becoming a certifying entity
34 as required by the provisions of sections 334.735 to 334.749;

35 (8) "Supervision", control exercised over a physician assistant working
36 with a supervising physician and oversight of the activities of and accepting
37 responsibility for the physician assistant's delivery of care. The physician
38 assistant shall only practice at a location where the physician routinely provides
39 patient care, except existing patients of the supervising physician in the patient's
40 home and correctional facilities. The supervising physician must be immediately
41 available in person or via telecommunication during the time the physician
42 assistant is providing patient care. Prior to commencing practice, the supervising
43 physician and physician assistant shall attest on a form provided by the board
44 that the physician shall provide supervision appropriate to the physician
45 assistant's training and that the physician assistant shall not practice beyond the
46 physician assistant's training and experience. Appropriate supervision shall
47 require the supervising physician to be working within the same facility as the
48 physician assistant for at least four hours within one calendar day for every
49 fourteen days on which the physician assistant provides patient care as described
50 in subsection 3 of this section. Only days in which the physician assistant
51 provides patient care as described in subsection 3 of this section shall be counted
52 toward the fourteen-day period. The requirement of appropriate supervision shall
53 be applied so that no more than thirteen calendar days in which a physician
54 assistant provides patient care shall pass between the physician's four hours
55 working within the same facility. The board shall promulgate rules pursuant to
56 chapter 536 for documentation of joint review of the physician assistant activity
57 by the supervising physician and the physician assistant.

58 2. (1) A supervision agreement shall limit the physician assistant to
59 practice only at locations described in subdivision (8) of subsection 1 of this
60 section, within a geographic proximity to be determined by the board of
61 registration for the healing arts.

62 (2) For a physician-physician assistant team working in a certified
63 community behavioral health clinic as defined by P.L. 113-93 and a rural health
64 clinic under the federal Rural Health Clinic Services Act, P.L. 95-210, as
65 amended, or a federally qualified health center as defined in 42 U.S.C. Section
66 1395 of the Public Health Service Act, as amended, no supervision requirements
67 in addition to the minimum federal law shall be required.

68 3.] **2.** The scope of practice of a physician assistant shall consist only of
69 the following services and procedures:

- 70 (1) Taking patient histories;
- 71 (2) Performing physical examinations of a patient;
- 72 (3) Performing or assisting in the performance of routine office laboratory
73 and patient screening procedures;
- 74 (4) Performing routine therapeutic procedures;
- 75 (5) Recording diagnostic impressions and evaluating situations calling for
76 attention of a physician to institute treatment procedures;
- 77 (6) Instructing and counseling patients regarding mental and physical
78 health using procedures reviewed and approved by a [licensed] **collaborating**
79 physician;
- 80 (7) Assisting the supervising physician in institutional settings, including
81 reviewing of treatment plans, ordering of tests and diagnostic laboratory and
82 radiological services, and ordering of therapies, using procedures reviewed and
83 approved by a licensed physician;
- 84 (8) Assisting in surgery; **and**
- 85 (9) Performing such other tasks not prohibited by law under the
86 [supervision of] **collaborative practice arrangement with** a licensed
87 physician as the physician[']s assistant has been trained and is proficient to
88 perform[; and
- 89 (10)].

90 **3.** Physician assistants shall not perform or prescribe abortions.

91 4. Physician assistants shall not prescribe any drug, medicine, device or
92 therapy unless pursuant to a [physician supervision agreement] **collaborative**
93 **practice arrangement** in accordance with the law, nor prescribe lenses, prisms
94 or contact lenses for the aid, relief or correction of vision or the measurement of
95 visual power or visual efficiency of the human eye, nor administer or monitor
96 general or regional block anesthesia during diagnostic tests, surgery or obstetric
97 procedures. Prescribing of drugs, medications, devices or therapies by a physician
98 assistant shall be pursuant to a [physician assistant supervision agreement]
99 **collaborative practice arrangement** which is specific to the clinical
100 conditions treated by the supervising physician and the physician assistant shall
101 be subject to the following:

- 102 (1) A physician assistant shall only prescribe controlled substances in
103 accordance with section 334.747;

104 (2) The types of drugs, medications, devices or therapies prescribed by a
105 physician assistant shall be consistent with the scopes of practice of the physician
106 assistant and the [supervising] **collaborating** physician;

107 (3) All prescriptions shall conform with state and federal laws and
108 regulations and shall include the name, address and telephone number of the
109 physician assistant and the supervising physician;

110 (4) A physician assistant, or advanced practice registered nurse as defined
111 in section 335.016 may request, receive and sign for noncontrolled professional
112 samples and may distribute professional samples to patients; and

113 (5) A physician assistant shall not prescribe any drugs, medicines, devices
114 or therapies the [supervising] **collaborating** physician is not qualified or
115 authorized to prescribe.

116 5. A physician assistant shall clearly identify himself or herself as a
117 physician assistant and shall not use or permit to be used in the physician
118 assistant's behalf the terms "doctor", "Dr." or "doc" nor hold himself or herself out
119 in any way to be a physician or surgeon. No physician assistant shall practice or
120 attempt to practice without physician [supervision] **collaboration** or in any
121 location where the [supervising] **collaborating** physician is not immediately
122 available for consultation, assistance and intervention, except as otherwise
123 provided in this section, and in an emergency situation, nor shall any physician
124 assistant bill a patient independently or directly for any services or procedure by
125 the physician assistant; except that, nothing in this subsection shall be construed
126 to prohibit a physician assistant from enrolling with a **third party plan** or the
127 department of social services as a MO HealthNet or Medicaid provider while
128 acting under a [supervision agreement] **collaborative practice arrangement**
129 between the physician and physician assistant.

130 6. [For purposes of this section, the] **The** licensing of physician assistants
131 shall take place within processes established by the state board of registration for
132 the healing arts through rule and regulation. The board of healing arts is
133 authorized to establish rules pursuant to chapter 536 establishing licensing and
134 renewal procedures, [supervision, supervision agreements] **collaboration,**
135 **collaborative practice arrangements,** fees, and addressing such other
136 matters as are necessary to protect the public and discipline the profession. An
137 application for licensing may be denied or the license of a physician assistant may
138 be suspended or revoked by the board in the same manner and for violation of the
139 standards as set forth by section 334.100, or such other standards of conduct set

140 by the board by rule or regulation. Persons licensed pursuant to the provisions
141 of chapter 335 shall not be required to be licensed as physician assistants. All
142 applicants for physician assistant licensure who complete a physician assistant
143 training program after January 1, 2008, shall have a master's degree from a
144 physician assistant program.

145 7. ["Physician assistant supervision agreement" means a written
146 agreement, jointly agreed-upon protocols or standing order between a supervising
147 physician and a physician assistant, which provides for the delegation of health
148 care services from a supervising physician to a physician assistant and the review
149 of such services. The agreement shall contain at least the following provisions:

150 (1) Complete names, home and business addresses, zip codes, telephone
151 numbers, and state license numbers of the supervising physician and the
152 physician assistant;

153 (2) A list of all offices or locations where the physician routinely provides
154 patient care, and in which of such offices or locations the supervising physician
155 has authorized the physician assistant to practice;

156 (3) All specialty or board certifications of the supervising physician;

157 (4) The manner of supervision between the supervising physician and the
158 physician assistant, including how the supervising physician and the physician
159 assistant shall:

160 (a) Attest on a form provided by the board that the physician shall provide
161 supervision appropriate to the physician assistant's training and experience and
162 that the physician assistant shall not practice beyond the scope of the physician
163 assistant's training and experience nor the supervising physician's capabilities
164 and training; and

165 (b) Provide coverage during absence, incapacity, infirmity, or emergency
166 by the supervising physician;

167 (5) The duration of the supervision agreement between the supervising
168 physician and physician assistant; and

169 (6) A description of the time and manner of the supervising physician's
170 review of the physician assistant's delivery of health care services. Such
171 description shall include provisions that the supervising physician, or a
172 designated supervising physician listed in the supervision agreement review a
173 minimum of ten percent of the charts of the physician assistant's delivery of
174 health care services every fourteen days.

175 8. When a physician assistant supervision agreement is utilized to provide

176 health care services for conditions other than acute self-limited or well-defined
177 problems, the supervising physician or other physician designated in the
178 supervision agreement shall see the patient for evaluation and approve or
179 formulate the plan of treatment for new or significantly changed conditions as
180 soon as practical, but in no case more than two weeks after the patient has been
181 seen by the physician assistant.

182 9.] At all times the physician is responsible for the oversight of the
183 activities of, and accepts responsibility for, health care services rendered by the
184 physician assistant.

185 [10. It is the responsibility of the supervising physician to determine and
186 document the completion of at least a one-month period of time during which the
187 licensed physician assistant shall practice with a supervising physician
188 continuously present before practicing in a setting where a supervising physician
189 is not continuously present.

190 11.] **8. A physician may enter into collaborative practice**
191 **arrangements with physician assistants. Collaborative practice**
192 **arrangements, which shall be in writing, may delegate to a physician**
193 **assistant the authority to prescribe, administer, or dispense drugs and**
194 **provide treatment which is within the skill, training, and competence**
195 **of the physician assistant. Collaborative practice arrangements may**
196 **delegate to a physician assistant, as defined in section 334.735, the**
197 **authority to administer, dispense, or prescribe controlled substances**
198 **listed in Schedules III, IV, and V of section 195.017, and Schedule II -**
199 **hydrocodone. Schedule III narcotic controlled substances and Schedule**
200 **II - hydrocodone prescriptions shall be limited to a one hundred**
201 **twenty-hour supply without refill. Such collaborative practice**
202 **arrangements shall be in the form of a written arrangement, jointly**
203 **agreed-upon protocols, or standing orders for the delivery of health**
204 **care services.**

205 9. **The written collaborative practice arrangement shall contain**
206 **at least the following provisions:**

207 (1) **Complete names, home and business addresses, zip codes, and**
208 **telephone numbers of the collaborating physician and the physician**
209 **assistant;**

210 (2) **A list of all other offices or locations, other than those listed**
211 **in subdivision (1) of this subsection, where the collaborating physician**

212 has authorized the physician assistant to prescribe;

213 (3) A requirement that there shall be posted at every office
214 where the physician assistant is authorized to prescribe, in
215 collaboration with a physician, a prominently displayed disclosure
216 statement informing patients that they may be seen by a physician
217 assistant and have the right to see the collaborating physician;

218 (4) All specialty or board certifications of the collaborating
219 physician and all certifications of the physician assistant;

220 (5) The manner of collaboration between the collaborating
221 physician and the physician assistant, including how the collaborating
222 physician and the physician assistant will:

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

225 (b) Maintain geographic proximity, as determined by the board
226 of registration for the healing arts; and

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

229 (6) A list of all other written collaborative practice arrangements
230 of the collaborating physician and the physician assistant;

231 (7) The duration of the written practice arrangement between
232 the collaborating physician and the physician assistant;

233 (8) A description of the time and manner of the collaborating
234 physician's review of the physician assistant's delivery of health care
235 services. The description shall include provisions that the physician
236 assistant shall submit a minimum of ten percent of the charts
237 documenting the physician assistant's delivery of health care services
238 to the collaborating physician for review by the collaborating
239 physician, or any other physician designated in the collaborative
240 practice arrangement, every fourteen days. Reviews may be conducted
241 electronically;

242 (9) The collaborating physician, or any other physician
243 designated in the collaborative practice arrangement, shall review
244 every fourteen days a minimum of twenty percent of the charts in
245 which the physician assistant prescribes controlled substances. The
246 charts reviewed under this subdivision may be counted in the number
247 of charts required to be reviewed under subdivision (8) of this
248 subsection; and

249 **(10) A statement that no collaboration requirements in addition**
250 **to the federal law shall be required for a physician-physician assistant**
251 **team working in a certified community behavioral health clinic as**
252 **defined by P.L. 113-93, or a rural health clinic under the federal Rural**
253 **Health Services Act, P.L. 95-210, as amended, or a federally qualified**
254 **health center as defined in 42 U.S.C. Section 1395 of the Public Health**
255 **Service Act, as amended.**

256 **10. The state board of registration for the healing arts under**
257 **section 334.125 may promulgate rules regulating the use of**
258 **collaborative practice arrangements.**

259 **11. The state board of registration for the healing arts shall not**
260 **deny, revoke, suspend, or otherwise take disciplinary action against a**
261 **collaborating physician for health care services delegated to a**
262 **physician assistant, provided that the provisions of this section and the**
263 **rules promulgated thereunder are satisfied.**

264 **12. Within thirty days of any change and on each renewal, the**
265 **state board of registration for the healing arts shall require every**
266 **physician to identify whether the physician is engaged in any**
267 **collaborative practice arrangement, including collaborative practice**
268 **arrangements delegating the authority to prescribe controlled**
269 **substances, and also report to the board the name of each physician**
270 **assistant with whom the physician has entered into such**
271 **arrangement. The board may make such information available to the**
272 **public. The board shall track the reported information and may**
273 **routinely conduct random reviews of such arrangements to ensure that**
274 **the arrangements are carried out in compliance with this chapter.**

275 **13. The collaborating physician shall determine and document**
276 **the completion of a period of time during which the physician assistant**
277 **shall practice with the collaborating physician continuously present**
278 **before practicing in a setting where the collaborating physician is not**
279 **continuously present. This limitation shall not apply to collaborative**
280 **arrangements of providers of population-based public health services**
281 **as defined by 20 CSR 2150-5.100 as of April 30, 2009.**

282 **14. No contract or other [agreement] arrangement shall require a**
283 **physician to act as a [supervising] collaborating physician for a physician**
284 **assistant against the physician's will. A physician shall have the right to refuse**
285 **to act as a supervising physician, without penalty, for a particular physician**

286 assistant. No contract or other agreement shall limit the [supervising]
287 **collaborating** physician's ultimate authority over any protocols or standing
288 orders or in the delegation of the physician's authority to any physician
289 assistant[, but this requirement shall not authorize a physician in implementing
290 such protocols, standing orders, or delegation to violate applicable standards for
291 safe medical practice established by the hospital's medical staff]. **No contract**
292 **or other arrangement shall require any physician assistant to**
293 **collaborate with any physician against the physician assistant's will. A**
294 **physician assistant shall have the right to refuse to collaborate, without**
295 **penalty, with a particular physician.**

296 [12.] **15.** Physician assistants shall file with the board a copy of their
297 [supervising] **collaborating** physician form.

298 [13.] **16.** No physician shall be designated to serve as [supervising
299 physician or] **a collaborating physician** for more than six full-time equivalent
300 licensed physician assistants, full-time equivalent advanced practice registered
301 nurses, or full-time equivalent assistant physicians, or any combination
302 thereof. This limitation shall not apply to physician assistant [agreements]
303 **collaborative practice arrangements** of hospital employees providing
304 inpatient care service in hospitals as defined in chapter 197, or to a certified
305 registered nurse anesthetist providing anesthesia services under the supervision
306 of an anesthesiologist or other physician, dentist, or podiatrist who is
307 immediately available if needed as set out in subsection 7 of section 334.104.

308 **17. No arrangement made under this section shall supercede**
309 **current hospital licensing regulations governing hospital medication**
310 **orders under protocols or standing orders for the purpose of delivering**
311 **inpatient or emergency care within a hospital, as defined in section**
312 **197.020, if such protocols or standing orders have been approved by the**
313 **hospital's medical staff and pharmaceutical therapeutics committee.**

334.736. Notwithstanding any other provision of sections 334.735 to
2 334.749, the board may issue without examination a temporary license to practice
3 as a physician assistant. Upon the applicant paying a temporary license fee and
4 the submission of all necessary documents as determined by the board, the board
5 may grant a temporary license to any person who meets the qualifications
6 provided in [section] **sections 334.735 to 334.749** which shall be valid until the
7 results of the next examination are announced. The temporary license may be
8 renewed at the discretion of the board and upon payment of the temporary license

9 fee.

334.747. 1. A physician assistant with a certificate of controlled
2 substance prescriptive authority as provided in this section may prescribe any
3 controlled substance listed in Schedule III, IV, or V of section 195.017, and may
4 have restricted authority in Schedule II, when delegated the authority to
5 prescribe controlled substances in a [supervision agreement] **collaborative**
6 **practice arrangement**. Such authority shall be listed on the [supervision
7 verification] **collaborating physician** form on file with the state board of
8 healing arts. The [supervising] **collaborating** physician shall maintain the
9 right to limit a specific scheduled drug or scheduled drug category that the
10 physician assistant is permitted to prescribe. Any limitations shall be listed on
11 the [supervision] **collaborating physician** form. Prescriptions for Schedule II
12 medications prescribed by a physician assistant with authority to prescribe
13 delegated in a [supervision agreement] **collaborative practice arrangement**
14 are restricted to only those medications containing hydrocodone. Physician
15 assistants shall not prescribe controlled substances for themselves or members
16 of their families. Schedule III controlled substances and Schedule II -
17 hydrocodone prescriptions shall be limited to a five-day supply without refill,
18 except that buprenorphine may be prescribed for up to a thirty-day supply
19 without refill for patients receiving medication-assisted treatment for substance
20 use disorders under the direction of the [supervising] **collaborating**
21 physician. Physician assistants who are authorized to prescribe controlled
22 substances under this section shall register with the federal Drug Enforcement
23 Administration and the state bureau of narcotics and dangerous drugs, and shall
24 include the Drug Enforcement Administration registration number on
25 prescriptions for controlled substances.

26 2. The [supervising] **collaborating** physician shall be responsible to
27 determine and document the completion of at least one hundred twenty hours in
28 a four-month period by the physician assistant during which the physician
29 assistant shall practice with the [supervising] **collaborating** physician on-site
30 prior to prescribing controlled substances when the [supervising] **collaborating**
31 physician is not on-site. Such limitation shall not apply to physician assistants
32 of population-based public health services as defined in 20 CSR 2150-5.100 as of
33 April 30, 2009.

34 3. A physician assistant shall receive a certificate of controlled substance
35 prescriptive authority from the board of healing arts upon verification of the

36 completion of the following educational requirements:

37 (1) Successful completion of an advanced pharmacology course that
38 includes clinical training in the prescription of drugs, medicines, and therapeutic
39 devices. A course or courses with advanced pharmacological content in a
40 physician assistant program accredited by the Accreditation Review Commission
41 on Education for the Physician Assistant (ARC-PA) or its predecessor agency
42 shall satisfy such requirement;

43 (2) Completion of a minimum of three hundred clock hours of clinical
44 training by the [supervising] **collaborating** physician in the prescription of
45 drugs, medicines, and therapeutic devices;

46 (3) Completion of a minimum of one year of supervised clinical practice
47 or supervised clinical rotations. One year of clinical rotations in a program
48 accredited by the Accreditation Review Commission on Education for the
49 Physician Assistant (ARC-PA) or its predecessor agency, which includes
50 pharmacotherapeutics as a component of its clinical training, shall satisfy such
51 requirement. Proof of such training shall serve to document experience in the
52 prescribing of drugs, medicines, and therapeutic devices;

53 (4) A physician assistant previously licensed in a jurisdiction where
54 physician assistants are authorized to prescribe controlled substances may obtain
55 a state bureau of narcotics and dangerous drugs registration if a [supervising]
56 **collaborating** physician can attest that the physician assistant has met the
57 requirements of subdivisions (1) to (3) of this subsection and provides
58 documentation of existing federal Drug Enforcement Agency registration.

334.749. 1. There is hereby established an "Advisory Commission for
2 Physician Assistants" which shall guide, advise and make recommendations to
3 the board. The commission shall also be responsible for the ongoing examination
4 of the scope of practice and promoting the continuing role of physician assistants
5 in the delivery of health care services. The commission shall assist the board in
6 carrying out the provisions of sections 334.735 to 334.749.

7 2. The commission shall be appointed no later than October 1, 1996, and
8 shall consist of five members, one member of the board, two licensed physician
9 assistants, one physician and one lay member. The two licensed physician
10 assistant members, the physician member and the lay member shall be appointed
11 by the director of the division of professional registration. Each licensed
12 physician assistant member shall be a citizen of the United States and a resident
13 of this state, and shall be licensed as a physician assistant by this state. The

14 physician member shall be a United States citizen, a resident of this state, have
15 an active Missouri license to practice medicine in this state and shall be a
16 [supervising] **collaborating** physician, at the time of appointment, to a licensed
17 physician assistant. The lay member shall be a United States citizen and a
18 resident of this state. The licensed physician assistant members shall be
19 appointed to serve three-year terms, except that the first commission appointed
20 shall consist of one member whose term shall be for one year and one member
21 whose term shall be for two years. The physician member and lay member shall
22 each be appointed to serve a three-year term. No physician assistant member nor
23 the physician member shall be appointed for more than two consecutive three-
24 year terms. The president of the Missouri Academy of Physicians Assistants in
25 office at the time shall, at least ninety days prior to the expiration of a term of
26 a physician assistant member of a commission member or as soon as feasible after
27 such a vacancy on the commission otherwise occurs, submit to the director of the
28 division of professional registration a list of five physician assistants qualified
29 and willing to fill the vacancy in question, with the request and recommendation
30 that the director appoint one of the five persons so listed, and with the list so
31 submitted, the president of the Missouri Academy of Physicians Assistants shall
32 include in his or her letter of transmittal a description of the method by which
33 the names were chosen by that association.

34 3. Notwithstanding any other provision of law to the contrary, any
35 appointed member of the commission shall receive as compensation an amount
36 established by the director of the division of professional registration not to
37 exceed seventy dollars per day for commission business plus actual and necessary
38 expenses. The director of the division of professional registration shall establish
39 by rule guidelines for payment. All staff for the commission shall be provided by
40 the state board of registration for the healing arts.

41 4. The commission shall hold an open annual meeting at which time it
42 shall elect from its membership a chairman and secretary. The commission may
43 hold such additional meetings as may be required in the performance of its
44 duties, provided that notice of every meeting shall be given to each member at
45 least ten days prior to the date of the meeting. A quorum of the commission shall
46 consist of a majority of its members.

47 5. On August 28, 1998, all members of the advisory commission for
48 registered physician assistants shall become members of the advisory commission
49 for physician assistants and their successor shall be appointed in the same

50 manner and at the time their terms would have expired as members of the
51 advisory commission for registered physician assistants.

334.1000. As used in sections 334.1005 to 334.1070, the following
2 terms mean:

3 (1) "Advisory commission", the Missouri radiologic imaging and
4 radiation therapy advisory commission;

5 (2) "Board", the state board of registration for the healing arts;

6 (3) "Certification organization", a certification organization that
7 specializes in the certification and registration of radiologic imaging
8 or radiation therapy technical personnel that is accredited by the
9 National Commission for Certifying Agencies, the American National
10 Standards Institute, the International Organization for
11 Standardization, or other accreditation organization recognized by the
12 board;

13 (4) "Ionizing radiation", radiation that may consist of alpha
14 particles, beta particles, gamma rays, x-rays, neutrons, high-speed
15 electrons, high-speed protons, or other particles capable of producing
16 ions. Ionizing radiation does not include non-ionizing radiation, such
17 as radiofrequency or microwaves, visible infrared or ultraviolet light,
18 or ultrasound;

19 (5) "Licensed practitioner", a person licensed in this state to
20 practice medicine pursuant to this chapter, chiropractic pursuant to
21 chapter 331, podiatry pursuant to chapter 330, or dentistry pursuant to
22 chapter 332, with education and specialist training in the medical or
23 dental use of radiation;

24 (6) "Limited x-ray machine operator", a person who is licensed
25 pursuant to section 334.1035 to perform only x-ray procedures not
26 involving the administration or utilization of contrast media on
27 selected specific parts of human anatomy under the supervision of a
28 licensed practitioner. Limited x-ray machine operators shall perform
29 tasks only within the scope of the specific license and category issued
30 to them by the board and under the direct supervision of a licensed
31 practitioner for a particular area of the human anatomy as provided in
32 this chapter, and shall not perform computed tomography, fluoroscopy,
33 magnetic resonance imaging, mammography, radiation therapy,
34 sonography, mobile imaging procedures, or imaging procedures using
35 contrast media;

36 (7) "Nuclear medicine advanced associate", a person who is
37 certified under sections 334.1000 to 335.1070 and recognized as a
38 physician extender to perform a variety of activities under the
39 supervision of a radiologist who is also an authorized user of
40 radioactive materials in the areas of patient care, patient management,
41 nuclear medicine, and molecular imaging procedures using sealed and
42 unsealed radiation sources, ionizing radiation and magnetic resonance,
43 and adjunctive medicine and therapeutic procedures using unsealed
44 radioactive sources;

45 (8) "Nuclear medicine technologist", a person who is licensed
46 under section 334.1025 to perform a variety of nuclear medicine and
47 molecular imaging procedures using sealed and unsealed radiation
48 sources, ionizing radiation, adjunctive medicine and pharmaceuticals
49 associated with nuclear medicine procedures, and therapeutic
50 procedures using unsealed radioactive sources;

51 (9) "Radiation therapist", a person who is licensed under section
52 334.1020 to administer ionizing radiation to human beings for
53 therapeutic purposes;

54 (10) "Radiation therapy", the use of ionizing radiation for the
55 purpose of treating disease;

56 (11) "Radiographer", a person who is licensed under section
57 334.1020 to perform a comprehensive set of diagnostic radiographic
58 procedures using external ionizing radiation to produce radiographic,
59 fluoroscopic, or digital images;

60 (12) "Radiologic imaging", any procedure or article intended for
61 use in the diagnosis or visualization of disease or other medical
62 conditions in human beings, including, but not limited to computed
63 tomography, fluoroscopy, nuclear medicine, radiography, and other
64 procedures using ionizing radiation;

65 (13) "Radiologist", a person licensed to practice medicine under
66 this chapter and board-eligible to be certified by the American Board
67 of Radiology, the American Osteopathic Board of Radiology, the British
68 Royal College of Radiology, or the Canadian College of Physicians and
69 Surgeons in that medical specialty;

70 (14) "Radiologist assistant", a person who is licensed under
71 section 334.1030 to perform a variety of activities under the direct
72 supervision of a radiologist in the areas of patient care, patient

73 management, radiologic imaging, or interventional procedures guided
74 by radiologic imaging, and who does not interpret images, render
75 diagnoses or prescribe medications or therapies.

334.1005. 1. There is hereby created the "Missouri Radiologic
2 Imaging and Radiation Therapy Advisory Commission". The board shall
3 provide administrative support to the advisory commission. The
4 advisory commission shall guide, advise, and make recommendations
5 to the board, and shall consist of five members appointed by the
6 director of the division of professional registration. One member shall
7 be a nuclear medicine technologist certified and registered by a
8 certification organization, one member shall be a radiation therapist
9 certified and registered by a certification organization, one member
10 shall be a radiographer certified and registered by a certification
11 organization, one member shall be a physician specializing in the
12 practice area of diagnostic radiology, and one member shall be a
13 physician specializing in the practice area of radiation oncology.

14 2. Each member shall be a citizen of the United States, a resident
15 of Missouri for at least one year, and be actively engaged in the
16 practice of radiology for the previous five years.

17 (1) The initial commission members shall not be required to be
18 licensed, but shall obtain a license within one hundred eighty days
19 after the effective date of the initial rules promulgated by the board.

20 (2) The members shall be appointed for five-year terms, except
21 that for the first commission, three members shall be appointed for
22 terms of five years, and two members shall be appointed for terms of
23 three years. Any vacancy on the commission shall be filled for the
24 unexpired term of the member.

25 (3) Notwithstanding any other provision of law to the contrary,
26 any appointed member of the commission may receive as compensation
27 an amount established by the director of the division of professional
28 registration, not to exceed seventy dollars per day for commission
29 business, plus actual and necessary expenses incurred in performing
30 official duties of the commission. The director of the division of
31 professional registration may establish, by rule, guidelines for
32 payment. All commission staff shall be provided by the board.

33 3. A member of the advisory commission may be removed if the
34 member:

35 **(1) Does not maintain the qualifications required for**
36 **appointment to the commission;**

37 **(2) Violates any provision of sections 334.1000 to 334.1070;**

38 **(3) Cannot discharge the member's duties for a substantial part**
39 **of the term for which the member is appointed because of illness or**
40 **disability; or**

41 **(4) Is absent from more than half of the regularly scheduled**
42 **commission meetings that the member is eligible to attend during a**
43 **calendar year.**

44 **4. The advisory commission shall hold an open annual meeting**
45 **at which time it shall elect from its membership a chair. The**
46 **commission may hold additional meetings as may be required in the**
47 **performance of its duties. A quorum of the commission shall consist of**
48 **a majority of its members.**

49 **5. No licensing activity or other statutory requirements shall**
50 **become effective until expenditures or personnel are specifically**
51 **appropriated for the purpose of conducting the business as required to**
52 **administer the provisions of sections 334.1000 to 334.1070 and the**
53 **initial rules filed have become effective.**

54 **6. The board, based on recommendations, guidance, and advice**
55 **from the advisory commission, shall:**

56 **(1) Be responsible for the ongoing examination of the scope of**
57 **practice for limited x-ray machine operators, nuclear medicine**
58 **technologists, nuclear medicine advanced associates, radiation**
59 **therapists, radiographers, and radiologist assistants. The commission**
60 **shall assist the board in carrying out the provisions of sections 334.1000**
61 **to 334.1070;**

62 **(2) Promulgate rules for issuance of licenses;**

63 **(3) Promulgate rules for the renewal of licenses, certificates, and**
64 **registrations;**

65 **(4) Establish minimum requirements for the issuance of licenses**
66 **and recognition of licenses issued by other states;**

67 **(5) Establish minimum requirements for continuing education;**

68 **(6) Establish all applicable fees, set at an amount which shall not**
69 **substantially exceed the cost of administering sections 334.1000 to**
70 **334.1070;**

71 **(7) Contract to use a competency-based examination that may**

72 provide for a virtually administered option for the determination of
73 limited x-ray machine operator qualifications for licensure;

74 (8) Promulgate rules for acceptance of certification and
75 registration by a certification organization recognized by the board as
76 qualification for licensure;

77 (9) Promulgate rules for issuance of licenses to active military,
78 retired military personnel, and spouses of active-duty and retired
79 military personnel;

80 (10) Promulgate rules that address the unique requirements of
81 individuals working in rural health clinics as defined in Public Law 95-
82 210 and areas of the state the board deems too remote to contain a
83 sufficient number of qualified persons licensed under this chapter to
84 perform radiologic imaging or radiation therapy procedures; and

85 (11) Establish ethical, moral, and practice standards.

334.1010. 1. All fees payable pursuant to the provisions of
2 sections 334.1000 to 334.1070 shall be collected by the division of
3 professional registration, which shall transmit such funds to the
4 department of revenue for deposit in the state treasury to the credit of
5 the board of registration for the healing arts fund.

6 2. Upon appropriation by the general assembly, the money in the
7 fund shall be used to administer the provisions of sections 334.1000 to
8 334.1070.

334.1015. 1. Except as provided in this section, one hundred and
2 eighty days after the effective date of the rules initially promulgated
3 by the board, only a person licensed under the provisions of sections
4 334.1000 to 334.1070 or a licensed practitioner may perform radiologic
5 imaging or radiation therapy procedures on humans for diagnostic or
6 therapeutic purposes.

7 2. No person, corporation, or facility shall knowingly employ a
8 person who does not hold a license or who is not exempt from the
9 provisions of sections 334.1000 to 334.1070 to perform radiologic
10 imaging or radiation therapy procedures.

11 3. Nothing in this section relating to radiologic imaging or
12 radiation therapy shall limit or enlarge the practice of a licensed
13 practitioner.

14 4. The provisions of sections 334.1000 to 334.1070 shall not apply
15 to:

16 (1) A dental hygienist or dental assistant licensed under chapter
17 332;

18 (2) A resident physician or student enrolled in and attending a
19 school or college of medicine, chiropractic, podiatry, dentistry,
20 radiologic imaging, or radiation therapy who performs radiologic
21 imaging or radiation therapy procedures on humans while under the
22 direct supervision of a licensed practitioner or a person holding a
23 nuclear medicine technologist, radiation therapist, radiographer, or
24 radiologist assistant license;

25 (3) A person who is employed by the United States government
26 when performing radiologic imaging or radiation therapy associated
27 with that employment;

28 (4) A person performing radiologic imaging procedures on
29 nonhuman subjects or cadavers; or

30 (5) A certified registered nurse anesthetist, as defined in section
31 335.016, while practicing within the scope of practice set forth in
32 chapter 335.

 334.1020. 1. An applicant applying for licensure as a
2 radiographer or radiation therapist shall:

3 (1) Furnish evidence of such person's good moral character;

4 (2) Provide proof of current certification and registration
5 through the American Registry of Radiologic Technologists or a
6 certification organization in the area of practice; and

7 (3) Meet all other licensure requirements as established by the
8 board.

9 2. A licensee applying for license renewal as a radiographer or
10 radiation therapist shall:

11 (1) Meet the requirements for initial licensure; and

12 (2) Earn a minimum of twenty-four contact hours of continuing
13 education within the preceding twenty-four month period. Such
14 continuing education shall be in an area of the licensee's practice.
15 Qualifying continuing education activities shall include, but are not
16 limited to courses, including online courses, offered or approved by the
17 American College of Radiology, American Healthcare Radiology
18 Administrators, American Institute of Ultrasound in Medicine,
19 American Society of Radiologic Technologists, Canadian Association of
20 Medical Radiation Technologists, Radiological Society of North

21 **America, Society of Diagnostic Medical Sonography, Society of Nuclear**
22 **Medicine Technologist Section, Society for Vascular Ultrasound,**
23 **Section for Magnetic Resonance Technologists, a hospital or other**
24 **health care institution, regionally accredited schools of higher**
25 **reducation, or a state or local health department; and**

26 **(3) Meet all other requirements for renewal as established by the**
27 **board.**

334.1025. 1. An applicant applying for licensure as a nuclear
2 **medicine technologist or nuclear medicine advanced associate shall:**

3 **(1) Furnish evidence of such person's good moral character;**

4 **(2) Provide proof of current certification and registration**
5 **through the Nuclear Medicine Technology Certification Board, the**
6 **American Registry of Radiologic Technologists or a certification**
7 **organization approved by the board; and**

8 **(3) Meet all other licensure requirements as established by the**
9 **board.**

10 **2. A licensee applying for license renewal as a nuclear medicine**
11 **technologist or nuclear medicine advanced associate shall:**

12 **(1) Meet the requirements for initial licensure; and**

13 **(2) Meet all other requirements for renewal as established by the**
14 **board.**

334.1030. 1. An applicant applying for licensure as a radiologist
2 **assistant shall:**

3 **(1) Furnish evidence of such person's good moral character;**

4 **(2) Provide proof of current certification and registration by the**
5 **American Registry of Radiologic Technologists, the Certification Board**
6 **for Radiology Practitioner Assistants or a certification organization**
7 **approved by the board; and**

8 **(3) Meet all other licensure requirements as established by the**
9 **board.**

10 **2. A licensee applying for license renewal as a radiologist**
11 **assistant shall:**

12 **(1) Meet the requirements for initial licensure; and**

13 **(2) Meet all other licensure requirements established by the**
14 **board.**

334.1035. 1. An applicant applying for licensure as a limited x-
2 **ray machine operator shall:**

- 3 (1) Furnish evidence of such person's good moral character; and
- 4 (2) Provide proof of successful passage of an examination as
- 5 defined by the board; or
- 6 (3) Provide proof of current certification from the American
- 7 Chiropractic Registry of Radiologic Technologists for persons applying
- 8 for a limited x-ray machine operator license; or
- 9 (4) Provide proof of current certification from the American
- 10 Society of Podiatric Medical Assistants for persons applying for a
- 11 limited x-ray machine operator license in podiatric radiography; or
- 12 (5) Provide proof of current certification from the International
- 13 Society of Clinical Densitometry for persons applying for a limited x-
- 14 ray machine operator license in bone densitometry; and
- 15 (6) Provide proof of training in x-ray procedures, including a
- 16 minimum of one hundred hours of supervised experience performing
- 17 x-ray procedures. The hours shall be sufficient for individuals to be
- 18 licensed in any limited machine operator area for which such person
- 19 passes an examination. The hours shall be documented by the
- 20 applicant and verified by the applicant's supervisor; and
- 21 (7) Meet all other licensure requirements as established by the
- 22 board.
- 23 2. The board may issue a limited x-ray machine operator license
- 24 if the applicant meets the requirements for licensure under the
- 25 provisions of 334.1000 to 334.1070 and states the category or categories
- 26 the applicant has demonstrated competency in the areas of:
- 27 (1) Chest radiography, including radiography of the thorax,
- 28 heart, and lungs;
- 29 (2) Extremity radiography, including radiography of the upper
- 30 and lower extremities, including the pectoral girdle;
- 31 (3) Spine radiography, including radiography of the vertebral
- 32 column;
- 33 (4) Skull and sinus radiography, including radiography of the
- 34 skull and facial structures;
- 35 (5) Podiatric radiography, including radiography of the foot,
- 36 ankle, and lower leg below the knee;
- 37 (6) Bone densitometry, including performance and analysis of
- 38 bone density scans; or
- 39 (7) Other areas the board deems necessary to ensure necessary

40 services throughout the state.

41 **3. A licensee applying for license renewal as a limited x-ray**
42 **machine operator shall:**

43 **(1) Furnish evidence of such person's good moral character; and**

44 **(2) Provide proof of current certification from the American**
45 **Chiropractic Registry of Radiologic Technologists for persons applying**
46 **for a limited x-ray machine operator license; or**

47 **(3) Provide proof of current certification from the American**
48 **Society of Podiatric Medical Assistants for persons applying for a**
49 **limited x-ray machine operator license in podiatric radiography; or**

50 **(4) Provide proof of current certification from the International**
51 **Society of Clinical Densitometry for persons applying for a limited x-**
52 **ray machine operator license in bone densitometry; or**

53 **(5) Complete a minimum of twelve hours biennially of continuing**
54 **education, which shall include online options, that may be fulfilled by**
55 **approved continuing education activities as established by the board;**
56 **and**

57 **(6) Meet all other renewal requirements as established by the**
58 **board.**

334.1040. 1. Every person licensed pursuant to sections 334.1000
2 **to 334.1070 shall, on or before the licensing renewal date, apply to the**
3 **board for licensure for the next licensing period. The application for**
4 **renewal shall be made under oath on a form furnished to the applicant**
5 **by the board.**

6 **2. A notice shall be made available to each person licensed in**
7 **this state. The failure to receive the notice does not relieve any person**
8 **of the duty to renew such person's license and pay the renewal fee as**
9 **required by sections 334.1000 to 334.1070, nor shall it exempt such**
10 **person from the penalties provided by sections 334.1000 to 334.1070 for**
11 **failure to renew a license.**

12 **3. If an individual licensed pursuant to sections 334.1000 to**
13 **334.1070 does not renew such license for two consecutive renewal**
14 **periods, such license shall be deemed expired.**

15 **4. Upon application for renewal, submission by such person of**
16 **evidence satisfactory to the board that he or she is licensed to practice**
17 **in this state, and upon the payment of any required fees, the board**
18 **shall issue a license. The license shall contain the name of the**

19 applicant and his or her office address, the expiration date, the number
20 of licenses to practice, and if applicable, competency categories as
21 outlined in section 334.1035.

22 5. If the application is filed and the fee paid after the
23 registration renewal date, a delinquent fee shall be paid; except that,
24 if in the opinion of the board the applicant's failure to register is
25 caused by extenuating circumstances, including illness of the applicant
26 as defined by rule, the delinquent fee may be waived by the board.

334.1045. 1. A person who has been engaged in the practice of
2 radiologic imaging and radiation therapy, other than a radiologist
3 assistant, and who does not hold a current certification and
4 registration by a certification organization recognized by the board
5 may continue to practice in the radiologic imaging or radiation therapy
6 modality in which such person is currently employed, provided such
7 person:

8 (1) Submits an application approved by the board and pays the
9 licensure fee established by the board within one hundred eighty days
10 from the effective date of the initial rules promulgated by the board;

11 (2) Does not change the scope of his or her current practice or
12 current place of employment;

13 (3) Practices only under the supervision of a licensed
14 practitioner; and

15 (4) Meets all licensure requirements of sections 334.1000 to
16 334.1070 and the rules adopted by the board.

17 2. A licensee applying for license renewal pursuant to this
18 section shall:

19 (1) Complete a renewal application approved by the board;

20 (2) Pay the renewal fee established by the board;

21 (3) Meet all other renewal requirements as established by the
22 board;

23 (4) Provide proof of all continuing education requirements for
24 his or her modality biennially as prescribed by the board.

25 3. Persons licensed under a chapter other than chapter 334 who
26 violate the provisions of sections 334.1000 to 334.1070 shall be subject
27 to discipline by his or her respective licensing board.

334.1050. 1. The board may issue a temporary license to any
2 person whose certification and registration is pending and who meets

3 the requirements as defined by board rule. A temporary license shall
4 expire ninety days after the date of the next examination if the
5 applicant is required to take an examination. If the applicant does not
6 take the examination on the next scheduled date, the temporary license
7 shall expire. In all other cases, a temporary license shall expire upon
8 the granting or denial of a license. A temporary license shall not be
9 issued for a period longer than one hundred eighty days.

10 2. New graduates awaiting national certification and registration
11 may be issued a temporary license for employment purposes for a
12 period not to exceed one year.

334.1055. 1. Notwithstanding any other provision of law to the
2 contrary, any person licensed under sections 334.1000 to 334.1070 may
3 apply to the board for an inactive license status on a form furnished by
4 the board. Upon receipt of the completed inactive status application
5 form and the board's determination that the licensee meets the
6 requirements established by the board by rule, the board shall declare
7 the licensee inactive and shall place the licensee on an inactive status
8 list. A person whose license is inactive or who has discontinued his or
9 her practice because of retirement shall not practice his or her
10 profession within this state. Such person may continue to use the title
11 of his or her profession or the initials of his or her profession after his
12 or her name.

13 2. If a licensee is granted inactive status, the licensee may return
14 to active status by notifying the board in advance of his or her
15 intention, paying the appropriate fees, and meeting all established
16 requirements of the board as a condition of reinstatement.

334.1060. 1. Notwithstanding any other provision of law:

2 (1) A person holding a license under sections 334.1000 to 334.1070
3 may use radioactive substances, or equipment emitting ionizing
4 radiation for medical imaging or radiation therapy procedures on
5 humans for diagnostic or therapeutic purposes only by prescription of
6 an individual authorized by the state to prescribe medical imaging or
7 radiation therapy procedures and under the supervision of a licensed
8 practitioner.

9 (2) A person holding a license under sections 334.1000 to 334.1070
10 may use radioactive substances or equipment emitting ionizing
11 radiation for medical imaging and radiation therapy procedures on

12 humans for diagnostic or therapeutic purposes only within the scope
13 of that license as specified in sections 334.1000 to 334.1070 and under
14 the rules adopted by the board.

334.1065. 1. The board may refuse to issue or renew any license
2 under sections 334.1000 to 334.1070 for one or any combination of
3 causes listed in subsection 2 of this section or any cause listed in
4 section 334.100. The board shall notify the applicant in writing of the
5 reasons for refusal and shall advise the applicant of the applicant's
6 right to file a complaint with the administrative hearing commission as
7 provided in chapter 621. As an alternative to a refusal to issue or
8 renew any certificate, registration, or authority, the board may, at its
9 discretion, issue a license which is subject to reprimand, probation,
10 restriction, or limitation to an applicant for licensure for any one or
11 combination of causes listed in subsection 2 of this section or section
12 334.100. The board's order of reprimand, probation, limitation, or
13 restriction shall contain a statement of the discipline imposed, the
14 basis therefor, the date such action shall become effective and a
15 statement that the applicant has thirty days to request in writing a
16 hearing before the administrative hearing commission. If the board
17 issues a probationary, limited, or restricted license to an applicant for
18 licensure, either party may file a written petition with the
19 administrative hearing commission with thirty days of the effective
20 date of the probationary, limited, or restricted license seeking review
21 of the board's determination. If no written request for a hearing is
22 received by the administrative hearing commission with the thirty-day
23 period, the right to seek review of the board's decision shall be
24 considered waived.

25 2. The board may cause a complaint to be filed with the
26 administrative hearing commission as provided in chapter 621 against
27 any holder of a certificate of registration or authority, permit, or
28 license required by sections 334.1000 to 334.1070 or any person who has
29 failed to renew or has surrendered the person's certificate of
30 registration or license for any one or any combination of the following
31 causes:

32 (1) Violated or conspired to violate any provision of this chapter,
33 or any provision of any rule promulgated pursuant to sections 334.1000
34 to 334.1070; or

35 (2) Has been found guilty of unethical conduct as defined in the
36 ethical standards of certification organization, or its successor agency,
37 as adopted and published by the board and filed with the secretary of
38 state; or

39 (3) Any cause listed in section 334.100.

40 3. After the filing of such complaint before the administrative
41 hearing commission, the proceedings shall be conducted in accordance
42 with the provisions of chapter 621. Upon a finding by the commission
43 that the grounds for disciplinary action provided in subsection 2 of this
44 section are met, the board may singly or in combination:

45 (1) Warn, censure, or place the person named in the complaint
46 on probation on such terms and conditions as the board deems
47 appropriate for a period not to exceed ten years; or

48 (2) Suspend the person's license, certificate, or permit for a
49 period not to exceed three years; or

50 (3) Administer a public or private reprimand; or

51 (4) Deny the person's application for licensure; or

52 (5) Permanently withhold issuance of a license or require the
53 person to submit to the care, counseling, or treatment of physicians
54 designated by the board at the expense of the individual to be
55 examined; or

56 (6) Require the person to attend such continuing education
57 courses and pass such examinations as the board may direct; or

58 (7) Restrict or limit the person's license for an indefinite period
59 of time; or

60 (8) Revoke the person's license.

61 4. In any order of revocation, the board may provide that the
62 person shall not apply for reinstatement of the person's license for a
63 period of time ranging from two to seven years following the date of the
64 order of revocation. All stay orders shall toll such time period.

65 5. Before restoring to good standing a license, certificate, or
66 permit issued under this chapter which has been in a revoked,
67 suspended, or inactive state for any cause for more than two years, the
68 board may require the applicant to attend such continuing education
69 courses and pass such examinations as the board may direct.

70 6. A person who violates any provision of sections 334.1000 to
71 334.1070 shall be guilty of a class A misdemeanor. Each act of such

72 **unlawful practice shall constitute a distinct and separate offense.**

334.1070. 1. **The board may promulgate rules to implement the provisions of sections 334.1000 to 334.1070. 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, 2019, shall be invalid and void.**

2. **Any authority to promulgate rules to implement the provisions of sections 334.1000 to 334.1070, to issue interpretation of those provisions, or to establish the scope of practice for licenses issued pursuant to sections 334.1000 to 334.1035 shall not include the authority to define, regulate, or interpret the scope of practice of certified nurse anesthetists as defined in section 335.016.**

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

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

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

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

- 19 (4) "Board" or "state board", the state board of nursing;
- 20 (5) "Certified clinical nurse specialist", a registered nurse who is currently
21 certified as a clinical nurse specialist by a nationally recognized certifying board
22 approved by the board of nursing;
- 23 (6) "Certified nurse midwife", a registered nurse who is currently certified
24 as a nurse midwife by the American College of Nurse Midwives, or other
25 nationally recognized certifying body approved by the board of nursing;
- 26 (7) "Certified nurse practitioner", a registered nurse who is currently
27 certified as a nurse practitioner by a nationally recognized certifying body
28 approved by the board of nursing;
- 29 (8) "Certified registered nurse anesthetist", a registered nurse who is
30 currently certified as a nurse anesthetist by the [Council on Certification of
31 Nurse Anesthetists, the Council on Recertification of Nurse Anesthetists,]
32 **National Board of Certification and Recertification for Nurse**
33 **Anesthetists** or other nationally recognized certifying body approved by the
34 board of nursing;
- 35 (9) "Executive director", a qualified individual employed by the board as
36 executive secretary or otherwise to administer the provisions of this chapter
37 under the board's direction. Such person employed as executive director shall not
38 be a member of the board;
- 39 (10) "Inactive nurse", as defined by rule pursuant to section 335.061;
- 40 (11) "Lapsed license status", as defined by rule under section 335.061;
- 41 (12) "Licensed practical nurse" or "practical nurse", a person licensed
42 pursuant to the provisions of this chapter to engage in the practice of practical
43 nursing;
- 44 (13) "Licensure", the issuing of a license **to a person who has met**
45 **specified requirements authorizing the person** to practice **advanced**
46 **practice**, professional, or practical nursing [to candidates who have met the
47 specified requirements] and the recording of the names of those persons as
48 holders of a license to practice **advanced practice**, professional, or practical
49 nursing;
- 50 (14) "**Practice of practical nursing**", the performance for compensation
51 of selected acts for the promotion of health and in the care of persons who are ill,
52 injured, or experiencing alterations in normal health processes. Such
53 performance requires substantial specialized skill, judgment and knowledge. All
54 such nursing care shall be given under the direction of a person licensed by a

55 state regulatory board to prescribe medications and treatments or under the
56 direction of a registered professional nurse. For the purposes of this chapter, the
57 term "direction" shall mean guidance or supervision provided by a person licensed
58 by a state regulatory board to prescribe medications and treatments or a
59 registered professional nurse, including, but not limited to, oral, written, or
60 otherwise communicated orders or directives for patient care. When practical
61 nursing care is delivered pursuant to the direction of a person licensed by a state
62 regulatory board to prescribe medications and treatments or under the direction
63 of a registered professional nurse, such care may be delivered by a licensed
64 practical nurse without direct physical oversight;

65 (15) "**Practice of professional nursing**", the performance for
66 compensation of any act **or action** which requires substantial specialized
67 education, judgment and skill based on knowledge and application of principles
68 derived from the biological, physical, social, **behavioral** and nursing sciences,
69 including, but not limited to:

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

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

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

78 (d) The coordination, **initiation, performance**, and assistance in the
79 **determination and** delivery of a plan of health care with all members of a
80 health team;

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

83 (16) [A] "Registered professional nurse" or "registered nurse", a person
84 licensed pursuant to the provisions of this chapter to engage in the practice of
85 professional nursing;

86 (17) "Retired license status", any person licensed in this state under this
87 chapter who retires from such practice. Such person shall file with the board an
88 affidavit, on a form to be furnished by the board, which states the date on which
89 the licensee retired from such practice, an intent to retire from the practice for
90 at least two years, and such other facts as tend to verify the retirement as the

91 board may deem necessary; but if the licensee thereafter reengages in the
92 practice, the licensee shall renew his or her license with the board as provided by
93 this chapter and by rule and regulation.

335.046. 1. An applicant for a license to practice as a registered
2 professional nurse shall submit to the board a written application on forms
3 furnished to the applicant. The original application shall contain the applicant's
4 statements showing the applicant's education and other such pertinent
5 information as the board may require. The applicant shall be of good moral
6 character and have completed at least the high school course of study, or the
7 equivalent thereof as determined by the state board of education, and have
8 successfully completed the basic professional curriculum in an accredited or
9 approved school of nursing and earned a professional nursing degree or
10 diploma. Each application shall contain a statement that it is made under oath
11 or affirmation and that its representations are true and correct to the best
12 knowledge and belief of the person signing same, subject to the penalties of
13 making a false affidavit or declaration. Applicants from non-English-speaking
14 lands shall be required to submit evidence of proficiency in the English
15 language. The applicant must be approved by the board and shall pass an
16 examination as required by the board. The board may require by rule as a
17 requirement for licensure that each applicant shall pass an oral or practical
18 examination. Upon successfully passing the examination, the board may issue
19 to the applicant a license to practice nursing as a registered professional
20 nurse. The applicant for a license to practice registered professional nursing
21 shall pay a license fee in such amount as set by the board. The fee shall be
22 uniform for all applicants. Applicants from foreign countries shall be licensed as
23 prescribed by rule.

24 2. An applicant for license to practice as a licensed practical nurse shall
25 submit to the board a written application on forms furnished to the
26 applicant. The original application shall contain the applicant's statements
27 showing the applicant's education and other such pertinent information as the
28 board may require. Such applicant shall be of good moral character, and have
29 completed at least two years of high school, or its equivalent as established by the
30 state board of education, and have successfully completed a basic prescribed
31 curriculum in a state-accredited or approved school of nursing, earned a nursing
32 degree, certificate or diploma and completed a course approved by the board on
33 the role of the practical nurse. Each application shall contain a statement that

34 it is made under oath or affirmation and that its representations are true and
35 correct to the best knowledge and belief of the person signing same, subject to the
36 penalties of making a false affidavit or declaration. Applicants from
37 non-English-speaking countries shall be required to submit evidence of their
38 proficiency in the English language. The applicant must be approved by the
39 board and shall pass an examination as required by the board. The board may
40 require by rule as a requirement for licensure that each applicant shall pass an
41 oral or practical examination. Upon successfully passing the examination, the
42 board may issue to the applicant a license to practice as a licensed practical
43 nurse. The applicant for a license to practice licensed practical nursing shall pay
44 a fee in such amount as may be set by the board. The fee shall be uniform for all
45 applicants. Applicants from foreign countries shall be licensed as prescribed by
46 rule.

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

54 4. The board shall not deny a license because of sex, religion, race, ethnic
55 origin, age or political affiliation.

335.047. 1. The Missouri state board of nursing may promulgate
2 **rules under chapter 536 establishing the licensure, renewal procedures,**
3 **fees, and the discipline of advanced practice registered nurses. An**
4 **application for licensure may be denied or the license of an advanced**
5 **practice registered nurse may be suspended or revoked by the board**
6 **in the same manner and for violation of the standards as set forth by**
7 **section 335.066, or such other standards of conduct set by the board by**
8 **rule.**

9 2. Any rule or portion of a rule, as that term is defined in section
10 **536.010, that is created under the authority delegated in this section**
11 **shall become effective only if it complies with and is subject to all of**
12 **the provisions of chapter 536, and, if applicable, section 536.028. This**
13 **section and chapter 536 are nonseverable and if any of the powers**
14 **vested with the general assembly pursuant to chapter 536 to review, to**

15 **delay the effective date, or to disapprove and annul a rule are**
16 **subsequently held unconstitutional, then the grant of rulemaking**
17 **authority and any rule proposed or adopted after August 28, 2019, shall**
18 **be invalid and void.**

19 **3. Nothing in this section shall prohibit a certified advance**
20 **practice registered nurse from continuing to practice with a**
21 **certification before such licensing rules are established by the board.**

22 **4. Nothing in this section shall prohibit a certified registered**
23 **nurse anesthetist as defined in section 335.016 from providing**
24 **anesthesia services without a collaborative practice arrangement**
25 **provided that he or she is under the supervision of an anesthesiologist**
26 **or other physician, dentist, or podiatrist who is immediately available,**
27 **if needed, pursuant to subsection (7) of section 334.104.**

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

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

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

24 **4. The board may issue a license by endorsement to an advanced**
25 **practice registered nurse licensed under the laws of another state if, in**
26 **the opinion of the board, the applicant meets the qualifications for**
27 **licensure in this jurisdiction. An advanced practice registered nurse**
28 **licensed under this subsection shall practice in accordance with the**
29 **laws of this state.**

 335.056. 1. The license of every person licensed under the provisions of
2 [sections 335.011 to 335.096] **this chapter** shall be renewed as provided. An
3 application for renewal of license shall be mailed to every person to whom a
4 license was issued or renewed during the current licensing period. The applicant
5 shall complete the application and return it to the board by the renewal date with
6 a renewal fee in an amount to be set by the board. The fee shall be uniform for
7 all applicants. The certificates of renewal shall render the holder thereof a legal
8 practitioner of nursing for the period stated in the certificate of renewal. Any
9 person who practices nursing as **an advanced practice registered nurse**, a
10 registered professional nurse, or [as] a licensed practical nurse during the time
11 his **or her** license has lapsed shall be considered an illegal practitioner and shall
12 be subject to the penalties provided for violation of the provisions of sections
13 335.011 to [335.096] **335.099**.

14 **2. A licensee's advanced practice registered nursing license and**
15 **his or her professional nursing license shall be treated as one license**
16 **for the purpose of discipline, renewal, and assessment of renewal fees.**

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

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

14 3. Any person who holds a license [or recognition] to practice advanced

15 practice nursing in this state may use the title "Advanced Practice Registered
16 Nurse", **the designations of "certified registered nurse anesthetist",**
17 **"certified nurse midwife", "certified clinical nurse specialist", and**
18 **"certified nurse practitioner",** and the [abbreviation] **abbreviations "APRN",**
19 [and any other title designations appearing on his or her license] **"CRNA",**
20 **"CNM", "CNS", and "NP", respectively.** No other person shall use the title
21 "Advanced Practice Registered Nurse" or the abbreviation "APRN". No other
22 person shall assume any title or use any abbreviation or any other words, letters,
23 signs, or devices to indicate that the person using the same is an advanced
24 practice registered nurse.

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

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

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

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

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

4 (2) Practice [professional or practical] nursing as defined by sections
5 335.011 to [335.096] **335.099** under cover of any diploma, license, or record
6 illegally or fraudulently obtained or signed or issued unlawfully or under
7 fraudulent representation;

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

10 provisions of sections 335.011 to [335.096] **335.099**;

11 (4) Use in connection with his **or her** name any designation tending to
12 imply that he **or she** is a licensed **advanced practice registered nurse, a**
13 **licensed** registered professional nurse, or a licensed practical nurse unless duly
14 licensed so to practice under the provisions of sections 335.011 to [335.096]
15 **335.099**;

16 (5) Practice [professional nursing or practical] nursing during the time his
17 **or her** license issued under the provisions of sections 335.011 to [335.096]
18 **335.099** shall be suspended or revoked; or

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

336.080. 1. Every licensed optometrist who continues in active practice
2 or service shall, on or before the renewal date, renew his or her license and pay
3 the required renewal fee and present satisfactory evidence to the board of his or
4 her attendance for a minimum of thirty-two hours of board-approved continuing
5 education, or their equivalent during the preceding two-year continuing education
6 reporting period as established by rule and regulation. **As part of the thirty-**
7 **two hours of continuing education, a licensed optometrist shall be**
8 **required to obtain two hours in the area of Missouri jurisprudence, as**
9 **approved by the board.** The continuing education requirement may be waived
10 by the board upon presentation to it of satisfactory evidence of the illness of the
11 optometrist or for other good cause as defined by rule and regulation. The board
12 shall not reject any such application if approved programs are not available
13 within the state of Missouri. Every license which has not been renewed on or
14 before the renewal date shall expire.

15 2. Any licensed optometrist who permits his or her license to expire may
16 renew it within five years of expiration upon payment of the required reactivation
17 fee and presentation of satisfactory evidence to the board of his or her attendance
18 for a minimum of forty-eight hours of board-approved continuing education, or
19 their equivalent, during the five years.

337.020. 1. Each person desiring to obtain a license, whether temporary,
2 provisional or permanent, as a psychologist shall make application to the
3 committee upon such forms and in such manner as may be prescribed by the
4 committee and shall pay the required application fee. The form shall include a
5 statement that the applicant has completed two hours of suicide assessment,

6 referral, treatment, and management training that meets the guidelines
7 developed by the committee. [The committee shall not charge an application fee
8 until such time that the application has been approved. In the event that an
9 application is denied or rejected, no application fee shall be charged.] The
10 application fee shall not be refundable. Each application shall contain a
11 statement that it is made under oath or affirmation and that its representations
12 are true and correct to the best knowledge and belief of the person signing the
13 application, subject to the penalties of making a false affidavit or declaration.

14 2. Each applicant, whether for temporary, provisional or permanent
15 licensure, shall submit evidence satisfactory to the committee that the applicant
16 is at least twenty-one years of age, is of good moral character, and meets the
17 appropriate educational requirements as set forth in either section 337.021 or
18 337.025, or is qualified for licensure without examination pursuant to section
19 337.029. In determining the acceptability of the applicant's qualifications, the
20 committee may require evidence that it deems reasonable and proper, in
21 accordance with law, and the applicant shall furnish the evidence in the manner
22 required by the committee.

23 3. The committee with assistance from the division shall issue a
24 permanent license to and register as a psychologist any applicant who, in
25 addition to having fulfilled the other requirements of sections 337.010 to 337.090,
26 passes the examination for professional practice in psychology and such other
27 examinations in psychology which may be adopted by the committee, except that
28 an applicant fulfilling the requirement of section 337.029 shall upon successful
29 completion of the jurisprudence examination and completion of the oral
30 examination be permanently licensed without having to retake the examination
31 for professional practice in psychology.

32 4. The committee, with assistance from the division, shall issue a
33 provisional license to, and register as being a provisionally licensed psychologist,
34 any applicant who is a graduate of a recognized educational institution with a
35 doctoral degree in psychology as defined in section 337.025, and who otherwise
36 meets all requirements to become a licensed psychologist, except for passage of
37 the national and state licensing exams, oral examination and completion of the
38 required period of postdegree supervised experience as specified in subsection 2
39 of section 337.025.

40 5. A provisional license issued pursuant to subsection 4 of this section
41 shall only authorize and permit the applicant to render those psychological

42 services which are under the supervision and the full professional responsibility
43 and control of such person's postdoctoral degree licensed supervisor. A
44 provisional license shall automatically terminate upon issuance of a permanent
45 license, upon a finding of cause to discipline after notice and hearing pursuant
46 to section 337.035, upon the expiration of one year from the date of issuance
47 whichever event first occurs, or upon termination of supervision by the licensed
48 supervisor. The provisional license may be renewed after one year with a
49 maximum issuance of two years total per provisional licensee. The committee by
50 rule shall provide procedures for exceptions and variances from the requirement
51 of a maximum issuance of two years due to vacations, illness, pregnancy and
52 other good causes.

53 6. The committee, with assistance from the division, shall immediately
54 issue a temporary license to any applicant for licensure either by reciprocity
55 pursuant to section 337.029, or by endorsement of the score from the examination
56 for professional practice in psychology upon receipt of an application for such
57 licensure and upon proof that the applicant is either licensed as a psychologist
58 in another jurisdiction, is a diplomate of the American Board of Professional
59 Psychology, or is a member of the National Register of Health Services Providers
60 in Psychology.

61 7. A temporary license issued pursuant to subsection 6 of this section
62 shall authorize the applicant to practice psychology in this state, the same as if
63 a permanent license had been issued. Such temporary license shall be issued
64 without payment of an additional fee and shall remain in full force and effect
65 until the earlier of the following events:

66 (1) A permanent license has been issued to the applicant following
67 successful completion of the jurisprudence examination and the oral interview
68 examination;

69 (2) In cases where the committee has found the applicant ineligible for
70 licensure and no appeal has been taken to the administrative hearing
71 commission, then at the expiration of such appeal time; or

72 (3) In cases where the committee has found the applicant ineligible for
73 licensure and the applicant has taken an appeal to the administrative hearing
74 commission and the administrative hearing commission has also found the
75 applicant ineligible, then upon the rendition by the administrative hearing
76 commission of its findings of fact and conclusions of law to such effect.

77 8. Written and oral examinations pursuant to sections 337.010 to 337.090

78 shall be administered by the committee at least twice each year to any applicant
79 who meets the educational requirements set forth in either section 337.021 or
80 337.025 or to any applicant who is seeking licensure either by reciprocity
81 pursuant to section 337.029, or by endorsement of the score from the examination
82 of professional practice in psychology. The committee shall examine in the areas
83 of professional knowledge, techniques and applications, research and its
84 interpretation, professional affairs, ethics, and Missouri law and regulations
85 governing the practice of psychology. The committee may use, in whole or in part,
86 the examination for professional practice in psychology national examination in
87 psychology or such other national examination in psychology which may be
88 available.

89 9. If an applicant fails any examination, the applicant shall be permitted
90 to take a subsequent examination, upon the payment of an additional
91 reexamination fee. This reexamination fee shall not be refundable.

337.029. 1. A psychologist licensed in another jurisdiction who has had
2 no violations and no suspensions and no revocation of a license to practice
3 psychology in any jurisdiction may receive a license in Missouri, provided the
4 psychologist passes a written examination on Missouri laws and regulations
5 governing the practice of psychology and meets one of the following criteria:

- 6 (1) Is a diplomate of the American Board of Professional Psychology;
- 7 (2) Is a member of the National Register of Health Service Providers in
8 Psychology;
- 9 (3) [Is currently licensed or certified as a psychologist in another
10 jurisdiction who is then a signatory to the Association of State and Provincial
11 Psychology Board's reciprocity agreement;
- 12 (4)] Is currently licensed or certified as a psychologist in another state,
13 territory of the United States, or the District of Columbia and:
 - 14 (a) Has a doctoral degree in psychology from a program accredited, or
15 provisionally accredited, either by the American Psychological Association or the
16 Psychological Clinical Science Accreditation System, or that meets the
17 requirements as set forth in subdivision (3) of subsection 3 of section 337.025;
 - 18 (b) Has been licensed for the preceding five years; and
 - 19 (c) Has had no disciplinary action taken against the license for the
20 preceding five years; or

21 [(5)] (4) Holds a current certificate of professional qualification (CPQ)
22 issued by the Association of State and Provincial Psychology Boards (ASPPB).

23 2. Notwithstanding the provisions of subsection 1 of this section,
24 applicants may be required to pass an oral examination as adopted by the
25 committee.

26 3. A psychologist who receives a license for the practice of psychology in
27 the state of Missouri on the basis of reciprocity as listed in subsection 1 of this
28 section or by endorsement of the score from the examination of professional
29 practice in psychology score will also be eligible for and shall receive certification
30 from the committee as a health service provider if the psychologist meets one or
31 more of the following criteria:

32 (1) Is a diplomate of the American Board of Professional Psychology in one
33 or more of the specialties recognized by the American Board of Professional
34 Psychology as pertaining to health service delivery;

35 (2) Is a member of the National Register of Health Service Providers in
36 Psychology; or

37 (3) Has completed or obtained through education, training, or experience
38 the requisite knowledge comparable to that which is required pursuant to section
39 337.033.

 337.050. 1. There is hereby created and established a "State Committee
2 of Psychologists", which shall consist of seven licensed psychologists and one
3 public member. The state committee of psychologists existing on August 28,
4 1989, is abolished. Nothing in this section shall be construed to prevent the
5 appointment of any current member of the state committee of psychologists to the
6 new state committee of psychologists created on August 28, 1989.

7 2. Appointments to the committee shall be made by the governor upon the
8 recommendations of the director of the division, upon the advice and consent of
9 the senate. The division, prior to submitting nominations, shall solicit nominees
10 from professional psychological associations and licensed psychologists in the
11 state. The term of office for committee members shall be five years, and
12 committee members shall not serve more than ten years. No person who has
13 previously served on the committee for ten years shall be eligible for
14 appointment. In making initial appointments to the committee, the governor
15 shall stagger the terms of the appointees so that two members serve initial terms
16 of two years, two members serve initial terms of three years, and two members
17 serve initial terms of four years.

18 3. Each committee member shall be a resident of the state of Missouri for
19 one year, shall be a United States citizen, and shall, other than the public

20 member, have been licensed as a psychologist in this state for at least three
21 years. Committee members shall reflect a diversity of practice specialties. To
22 ensure adequate representation of the diverse fields of psychology, the committee
23 shall consist of at least two psychologists who are engaged full time in the
24 doctoral teaching and training of psychologists, and at least two psychologists
25 who are engaged full time in the professional practice of psychology. In addition,
26 the first appointment to the committee shall include at least one psychologist who
27 shall be licensed on the basis of a master's degree who shall serve a full term of
28 five years. Nothing in sections 337.010 to 337.090 shall be construed to prohibit
29 full membership rights on the committee for psychologists licensed on the basis
30 of a master's degree. If a member of the committee shall, during the member's
31 term as a committee member, remove the member's domicile from the state of
32 Missouri, then the committee shall immediately notify the director of the division,
33 and the seat of that committee member shall be declared vacant. All such
34 vacancies shall be filled by appointment of the governor with the advice and
35 consent of the senate, and the member so appointed shall serve for the unexpired
36 term of the member whose seat has been declared vacant.

37 4. The public member shall be at the time of the public member's
38 appointment a citizen of the United States; a resident of this state for a period
39 of one year and a registered voter; a person who is not and never was a member
40 of any profession licensed or regulated pursuant to sections 337.010 to 337.093
41 or the spouse of such person; and a person who does not have and never has had
42 a material, financial interest in either the providing of the professional services
43 regulated by sections 337.010 to 337.093, or an activity or organization directly
44 related to any profession licensed or regulated pursuant to sections 337.010 to
45 337.093. The duties of the public member shall not include the determination of
46 the technical requirements to be met for licensure or whether any person meets
47 such technical requirements or of the technical competence or technical judgment
48 of a licensee or a candidate for licensure.

49 5. The committee shall hold a regular annual meeting at which it shall
50 select from among its members a chairperson and a secretary. A quorum of the
51 committee shall consist of a majority of its members. In the absence of the
52 chairperson, the secretary shall conduct the office of the chairperson.

53 6. Each member of the committee shall receive, as compensation, an
54 amount set by the division not to exceed fifty dollars for each day devoted to the
55 affairs of the committee and shall be entitled to reimbursement for necessary and

56 actual expenses incurred in the performance of the member's official duties.

57 7. Staff for the committee shall be provided by the director of the division
58 of professional registration.

59 8. The governor may remove any member of the committee for misconduct,
60 inefficiency, incompetency, or neglect of office.

61 9. In addition to the powers set forth elsewhere in sections 337.010 to
62 337.090, the division may adopt rules and regulations, not otherwise inconsistent
63 with sections 337.010 to 337.090, to carry out the provisions of sections 337.010
64 to 337.090. The committee may promulgate, by rule, "Ethical Rules of Conduct"
65 governing the practices of psychology which rules shall be based upon the ethical
66 principles promulgated and published by the American Psychological Association.

67 10. Any rule or portion of a rule, as that term is defined in section
68 536.010, that is promulgated to administer and enforce sections 337.010 to
69 337.090, shall become effective only if the agency has fully complied with all of
70 the requirements of chapter 536 including but not limited to section 536.028 if
71 applicable, after August 28, 1998. All rulemaking authority delegated prior to
72 August 28, 1998, is of no force and effect and repealed as of August 28, 1998,
73 however nothing in this act shall be interpreted to repeal or affect the validity of
74 any rule adopted and promulgated prior to August 28, 1998. If the provisions of
75 section 536.028 apply, the provisions of this section are nonseverable and if any
76 of the powers vested with the general assembly pursuant to section 536.028 to
77 review, to delay the effective date, or to disapprove and annul a rule or portion
78 of a rule are held unconstitutional or invalid, the purported grant of rulemaking
79 authority and any rule so proposed and contained in the order of rulemaking
80 shall be invalid and void, except that nothing in this act shall affect the validity
81 of any rule adopted and promulgated prior to August 28, 1998.

82 11. The committee may sue and be sued in its official name, and shall
83 have a seal which shall be affixed to all certified copies or records and papers on
84 file, and to such other instruments as the committee may direct. All courts shall
85 take judicial notice of such seal. Copies of records and proceedings of the
86 committee, and of all papers on file with the division on behalf of the committee
87 certified under the seal shall be received as evidence in all courts of record.

88 12. When applying for a renewal of a license pursuant to section 337.030,
89 each licensed psychologist shall submit proof of the completion of at least forty
90 hours of continuing education credit within the two-year period immediately
91 preceding the date of the application for renewal of the license, **with a**

92 **minimum of three of the forty hours of continuing education dedicated**
93 **to professional ethics.** The type of continuing education to be considered shall
94 include, but not be limited to:

95 (1) Attending recognized educational seminars, the content of which are
96 primarily psychological, as defined by rule;

97 (2) Attending a graduate level course at a recognized educational
98 institution where the contents of which are primarily psychological, as defined by
99 rule;

100 (3) Presenting a recognized educational seminar, the contents of which are
101 primarily psychological, as defined by rule;

102 (4) Presenting a graduate level course at a recognized educational
103 institution where the contents of which are primarily psychological, as defined by
104 rule; and

105 (5) Independent course of studies, the contents of which are primarily
106 psychological, which have been approved by the committee and defined by rule.
107 The committee shall determine by administrative rule the amount of training,
108 instruction, self-instruction or teaching that shall be counted as an hour of
109 continuing education credit.

338.010. 1. The "practice of pharmacy" means the interpretation,
2 implementation, and evaluation of medical prescription orders, including any
3 legend drugs under 21 U.S.C. Section 353; receipt, transmission, or handling of
4 such orders or facilitating the dispensing of such orders; the designing, initiating,
5 implementing, and monitoring of a medication therapeutic plan as defined by the
6 prescription order so long as the prescription order is specific to each patient for
7 care by a pharmacist; the compounding, dispensing, labeling, and administration
8 of drugs and devices pursuant to medical prescription orders and administration
9 of viral influenza, pneumonia, shingles, hepatitis A, hepatitis B, diphtheria,
10 tetanus, pertussis, and meningitis vaccines by written protocol authorized by a
11 physician for persons at least seven years of age or the age recommended by the
12 Centers for Disease Control and Prevention, whichever is higher, or the
13 administration of pneumonia, shingles, hepatitis A, hepatitis B, diphtheria,
14 tetanus, pertussis, meningitis, and viral influenza vaccines by written protocol
15 authorized by a physician for a specific patient as authorized by rule; the
16 participation in drug selection according to state law and participation in drug
17 utilization reviews; the proper and safe storage of drugs and devices and the
18 maintenance of proper records thereof; consultation with patients and other

19 health care practitioners, and veterinarians and their clients about legend drugs,
20 about the safe and effective use of drugs and devices; and the offering or
21 performing of those acts, services, operations, or transactions necessary in the
22 conduct, operation, management and control of a pharmacy. No person shall
23 engage in the practice of pharmacy unless he is licensed under the provisions of
24 this chapter. This chapter shall not be construed to prohibit the use of auxiliary
25 personnel under the direct supervision of a pharmacist from assisting the
26 pharmacist in any of his or her duties. This assistance in no way is intended to
27 relieve the pharmacist from his or her responsibilities for compliance with this
28 chapter and he or she will be responsible for the actions of the auxiliary
29 personnel acting in his or her assistance. This chapter shall also not be
30 construed to prohibit or interfere with any legally registered practitioner of
31 medicine, dentistry, or podiatry, or veterinary medicine only for use in animals,
32 or the practice of optometry in accordance with and as provided in sections
33 195.070 and 336.220 in the compounding, administering, prescribing, or
34 dispensing of his or her own prescriptions.

35 2. Any pharmacist who accepts a prescription order for a medication
36 therapeutic plan shall have a written protocol from the physician who refers the
37 patient for medication therapy services. The written protocol and the prescription
38 order for a medication therapeutic plan shall come from the physician only, and
39 shall not come from a nurse engaged in a collaborative practice arrangement
40 under section 334.104, or from a physician assistant engaged in a [supervision
41 agreement] **collaborative practice arrangement** under section 334.735.

42 3. Nothing in this section shall be construed as to prevent any person,
43 firm or corporation from owning a pharmacy regulated by sections 338.210 to
44 338.315, provided that a licensed pharmacist is in charge of such pharmacy.

45 4. Nothing in this section shall be construed to apply to or interfere with
46 the sale of nonprescription drugs and the ordinary household remedies and such
47 drugs or medicines as are normally sold by those engaged in the sale of general
48 merchandise.

49 5. No health carrier as defined in chapter 376 shall require any physician
50 with which they contract to enter into a written protocol with a pharmacist for
51 medication therapeutic services.

52 6. This section shall not be construed to allow a pharmacist to diagnose
53 or independently prescribe pharmaceuticals.

54 7. The state board of registration for the healing arts, under section

55 334.125, and the state board of pharmacy, under section 338.140, shall jointly
56 promulgate rules regulating the use of protocols for prescription orders for
57 medication therapy services and administration of viral influenza vaccines. Such
58 rules shall require protocols to include provisions allowing for timely
59 communication between the pharmacist and the referring physician, and any
60 other patient protection provisions deemed appropriate by both boards. In order
61 to take effect, such rules shall be approved by a majority vote of a quorum of each
62 board. Neither board shall separately promulgate rules regulating the use of
63 protocols for prescription orders for medication therapy services and
64 administration of viral influenza vaccines. Any rule or portion of a rule, as that
65 term is defined in section 536.010, that is created under the authority delegated
66 in this section shall become effective only if it complies with and is subject to all
67 of the provisions of chapter 536 and, if applicable, section 536.028. This section
68 and chapter 536 are nonseverable and if any of the powers vested with the
69 general assembly pursuant to chapter 536 to review, to delay the effective date,
70 or to disapprove and annul a rule are subsequently held unconstitutional, then
71 the grant of rulemaking authority and any rule proposed or adopted after August
72 28, 2007, shall be invalid and void.

73 8. The state board of pharmacy may grant a certificate of medication
74 therapeutic plan authority to a licensed pharmacist who submits proof of
75 successful completion of a board-approved course of academic clinical study
76 beyond a bachelor of science in pharmacy, including but not limited to clinical
77 assessment skills, from a nationally accredited college or university, or a
78 certification of equivalence issued by a nationally recognized professional
79 organization and approved by the board of pharmacy.

80 9. Any pharmacist who has received a certificate of medication therapeutic
81 plan authority may engage in the designing, initiating, implementing, and
82 monitoring of a medication therapeutic plan as defined by a prescription order
83 from a physician that is specific to each patient for care by a pharmacist.

84 10. Nothing in this section shall be construed to allow a pharmacist to
85 make a therapeutic substitution of a pharmaceutical prescribed by a physician
86 unless authorized by the written protocol or the physician's prescription order.

87 11. "Veterinarian", "doctor of veterinary medicine", "practitioner of
88 veterinary medicine", "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)",
89 "VMB", "MRCVS", or an equivalent title means a person who has received a
90 doctor's degree in veterinary medicine from an accredited school of veterinary

91 medicine or holds an Educational Commission for Foreign Veterinary Graduates
92 (EDFVG) certificate issued by the American Veterinary Medical Association
93 (AVMA).

94 12. In addition to other requirements established by the joint
95 promulgation of rules by the board of pharmacy and the state board of
96 registration for the healing arts:

97 (1) A pharmacist shall administer vaccines by protocol in accordance with
98 treatment guidelines established by the Centers for Disease Control and
99 Prevention (CDC);

100 (2) A pharmacist who is administering a vaccine shall request a patient
101 to remain in the pharmacy a safe amount of time after administering the vaccine
102 to observe any adverse reactions. Such pharmacist shall have adopted emergency
103 treatment protocols;

104 (3) In addition to other requirements by the board, a pharmacist shall
105 receive additional training as required by the board and evidenced by receiving
106 a certificate from the board upon completion, and shall display the certification
107 in his or her pharmacy where vaccines are delivered.

108 13. A pharmacist shall inform the patient that the administration of the
109 vaccine will be entered into the ShowMeVax system, as administered by the
110 department of health and senior services. The patient shall attest to the
111 inclusion of such information in the system by signing a form provided by the
112 pharmacist. If the patient indicates that he or she does not want such
113 information entered into the ShowMeVax system, the pharmacist shall provide
114 a written report within fourteen days of administration of a vaccine to the
115 patient's primary health care provider, if provided by the patient, containing:

116 (1) The identity of the patient;

117 (2) The identity of the vaccine or vaccines administered;

118 (3) The route of administration;

119 (4) The anatomic site of the administration;

120 (5) The dose administered; and

121 (6) The date of administration.

338.140. 1. The board of pharmacy shall have a common seal, and shall
2 have power to adopt such rules and bylaws not inconsistent with law as may be
3 necessary for the regulation of its proceedings and for the discharge of the duties
4 imposed pursuant to sections 338.010 to 338.198, and shall have power to employ
5 an attorney to conduct prosecutions or to assist in the conduct of prosecutions

6 pursuant to sections 338.010 to 338.198.

7 2. The board shall keep a record of its proceedings.

8 3. The board of pharmacy shall make annually to the governor and, upon
9 written request, to persons licensed pursuant to the provisions of this chapter a
10 written report of its proceedings.

11 4. The board of pharmacy shall appoint an advisory committee composed
12 of six members, one of whom shall be a representative of pharmacy but who shall
13 not be a member of the pharmacy board, three of whom shall be representatives
14 of wholesale drug distributors as defined in section 338.330, one of whom shall
15 be a representative of drug manufacturers, and one of whom shall be a licensed
16 veterinarian recommended to the board of pharmacy by the board of veterinary
17 medicine. The committee shall review and make recommendations to the board
18 on the merit of all rules and regulations dealing with pharmacy distributors,
19 wholesale drug distributors, drug manufacturers, and veterinary legend drugs
20 which are proposed by the board.

21 5. A majority of the board shall constitute a quorum for the transaction
22 of business.

23 6. Notwithstanding any other provisions of law to the contrary, the board
24 may issue letters of reprimand, censure or warning to any holder of a license or
25 registration required pursuant to this chapter for any violations that could result
26 in disciplinary action as defined in section 338.055. **Alternatively, at the
27 discretion of the board, the board may enter into a voluntary
28 compliance agreement with a licensee, permit holder, or registrant to
29 ensure or promote compliance with chapter 338 and the rules of the
30 board, in lieu of board discipline. The agreement shall be a public
31 record. The time limitation identified in section 324.043 for
32 commencing a disciplinary proceeding shall be tolled while an
33 agreement authorized by this section is in effect.**

339.190. 1. A real estate licensee shall be immune from liability for
2 statements made by engineers, land surveyors, geologists, environmental hazard
3 experts, wood-destroying inspection and control experts, termite inspectors,
4 mortgage brokers, home inspectors, or other home inspection experts unless:

5 (1) The statement was made by a person employed by the licensee or the
6 broker with whom the licensee is associated;

7 (2) The person making the statement was selected by and engaged by the
8 licensee. For purposes of this section, the ordering of a report or inspection alone

9 shall not constitute selecting or engaging a person; or

10 (3) The licensee knew prior to closing that the statement was false or the
11 licensee acted in reckless disregard as to whether the statement was true or false.

12 2. A real estate licensee shall not be the subject of any action and no
13 action shall be instituted against a real estate licensee for any information
14 contained in a seller's disclosure for residential, commercial, industrial, farm, or
15 vacant real estate furnished to a buyer, unless the real estate licensee is a
16 signatory to such or the licensee knew prior to closing that the statement was
17 false or the licensee acted in reckless disregard as to whether the statement was
18 true or false.

19 3. A real estate licensee acting as a courier of documents referenced in
20 this section shall not be considered to be making the statements contained in
21 such documents.

22 **4. A real estate licensee shall not be the subject of any action and**
23 **no action shall be instituted against a real estate licensee for the**
24 **accuracy of any information about the size or area, in square footage**
25 **or otherwise, of a property or of improvements on the property if the**
26 **real estate licensee obtains the information from a source other than**
27 **the real estate licensee or the seller and the licensee discloses the**
28 **source of the information, unless the real estate licensee knew the**
29 **information was false at the time the real estate licensee transmitted**
30 **or published the information or the licensee acted with reckless**
31 **disregard as to whether such information was true or false.**

630.175. 1. No person admitted on a voluntary or involuntary basis to
2 any mental health facility or mental health program in which people are civilly
3 detained pursuant to chapter 632 and no patient, resident or client of a
4 residential facility or day program operated, funded or licensed by the department
5 shall be subject to physical or chemical restraint, isolation or seclusion unless it
6 is determined by the head of the facility, the attending licensed physician, or in
7 the circumstances specifically set forth in this section, by an advanced practice
8 registered nurse in a collaborative practice arrangement, or a physician assistant
9 or an assistant physician with a [supervision agreement] **collaborative**
10 **practice arrangement**, with the attending licensed physician that the chosen
11 intervention is imminently necessary to protect the health and safety of the
12 patient, resident, client or others and that it provides the least restrictive
13 environment. An advanced practice registered nurse in a collaborative practice

14 arrangement, or a physician assistant or an assistant physician with a
15 [supervision agreement] **collaborative practice arrangement**, with the
16 attending licensed physician may make a determination that the chosen
17 intervention is necessary for patients, residents, or clients of facilities or
18 programs operated by the department, in hospitals as defined in section 197.020
19 that only provide psychiatric care and in dedicated psychiatric units of general
20 acute care hospitals as hospitals are defined in section 197.020. Any
21 determination made by the advanced practice registered nurse, physician
22 assistant, or assistant physician shall be documented as required in subsection
23 2 of this section and reviewed in person by the attending licensed physician if the
24 episode of restraint is to extend beyond:

25 (1) Four hours duration in the case of a person under eighteen years of
26 age;

27 (2) Eight hours duration in the case of a person eighteen years of age or
28 older; or

29 (3) For any total length of restraint lasting more than four hours duration
30 in a twenty-four-hour period in the case of a person under eighteen years of age
31 or beyond eight hours duration in the case of a person eighteen years of age or
32 older in a twenty-four-hour period.

33 The review shall occur prior to the time limit specified under subsection 6 of this
34 section and shall be documented by the licensed physician under subsection 2 of
35 this section.

36 2. Every use of physical or chemical restraint, isolation or seclusion and
37 the reasons therefor shall be made a part of the clinical record of the patient,
38 resident or client under the signature of the head of the facility, or the attending
39 licensed physician, or the advanced practice registered nurse in a collaborative
40 practice arrangement, or a physician assistant or an assistant physician with a
41 [supervision agreement] **collaborative practice arrangement**, with the
42 attending licensed physician.

43 3. Physical or chemical restraint, isolation or seclusion shall not be
44 considered standard treatment or habilitation and shall cease as soon as the
45 circumstances causing the need for such action have ended.

46 4. The use of security escort devices, including devices designed to restrict
47 physical movement, which are used to maintain safety and security and to
48 prevent escape during transport outside of a facility shall not be considered
49 physical restraint within the meaning of this section. Individuals who have been

50 civilly detained under sections 632.300 to 632.475 may be placed in security
51 escort devices when transported outside of the facility if it is determined by the
52 head of the facility, or the attending licensed physician, or the advanced practice
53 registered nurse in a collaborative practice arrangement, or a physician assistant
54 or an assistant physician with a [supervision agreement] **collaborative**
55 **practice arrangement**, with the attending licensed physician that the use of
56 security escort devices is necessary to protect the health and safety of the patient,
57 resident, client, or other persons or is necessary to prevent escape. Individuals
58 who have been civilly detained under sections 632.480 to 632.513 or committed
59 under chapter 552 shall be placed in security escort devices when transported
60 outside of the facility unless it is determined by the head of the facility, or the
61 attending licensed physician, or the advanced practice registered nurse in a
62 collaborative practice arrangement, or a physician assistant or an assistant
63 physician with a [supervision agreement] **collaborative practice**
64 **arrangement**, with the attending licensed physician that security escort devices
65 are not necessary to protect the health and safety of the patient, resident, client,
66 or other persons or is not necessary to prevent escape.

67 5. Extraordinary measures employed by the head of the facility to ensure
68 the safety and security of patients, residents, clients, and other persons during
69 times of natural or man-made disasters shall not be considered restraint,
70 isolation, or seclusion within the meaning of this section.

71 6. Orders issued under this section by the advanced practice registered
72 nurse in a collaborative practice arrangement, or a physician assistant or an
73 assistant physician with a [supervision agreement] **collaborative practice**
74 **arrangement**, with the attending licensed physician shall be reviewed in person
75 by the attending licensed physician of the facility within twenty-four hours or the
76 next regular working day of the order being issued, and such review shall be
77 documented in the clinical record of the patient, resident, or client.

78 7. For purposes of this subsection, “division” shall mean the division of
79 developmental disabilities. Restraint or seclusion shall not be used in
80 habilitation centers or community programs that serve persons with
81 developmental disabilities that are operated or funded by the division unless such
82 procedure is part of an emergency intervention system approved by the division
83 and is identified in such person’s individual support plan. Direct-care staff that
84 serve persons with developmental disabilities in habilitation centers or
85 community programs operated or funded by the division shall be trained in an

86 emergency intervention system approved by the division when such emergency
87 intervention system is identified in a consumer's individual support plan.

630.875. 1. This section shall be known and may be cited as the
2 "Improved Access to Treatment for Opioid Addictions Act" or "IATOA Act".

3 2. As used in this section, the following terms mean:

4 (1) "Department", the department of mental health;

5 (2) "IATOA program", the improved access to treatment for opioid
6 addictions program created under subsection 3 of this section.

7 3. Subject to appropriations, the department shall create and oversee an
8 "Improved Access to Treatment for Opioid Addictions Program", which is hereby
9 created and whose purpose is to disseminate information and best practices
10 regarding opioid addiction and to facilitate collaborations to better treat and
11 prevent opioid addiction in this state. The IATOA program shall facilitate
12 partnerships between assistant physicians, physician assistants, and advanced
13 practice registered nurses practicing in federally qualified health centers, rural
14 health clinics, and other health care facilities and physicians practicing at remote
15 facilities located in this state. The IATOA program shall provide resources that
16 grant patients and their treating assistant physicians, physician assistants,
17 advanced practice registered nurses, or physicians access to knowledge and
18 expertise through means such as telemedicine and Extension for Community
19 Healthcare Outcomes (ECHO) programs established under section 191.1140.

20 4. Assistant physicians, physician assistants, and advanced practice
21 registered nurses who participate in the IATOA program shall complete the
22 necessary requirements to prescribe buprenorphine within at least thirty days of
23 joining the IATOA program.

24 5. For the purposes of the IATOA program, a remote collaborating [or
25 supervising] physician working with an on-site assistant physician, physician
26 assistant, or advanced practice registered nurse shall be considered to be on-site.
27 An assistant physician, physician assistant, or advanced practice registered nurse
28 collaborating with a remote physician shall comply with all laws and
29 requirements applicable to assistant physicians, physician assistants, or advanced
30 practice registered nurses with on-site supervision before providing treatment to
31 a patient.

32 6. An assistant physician, physician assistant, or advanced practice
33 registered nurse collaborating with a physician who is waiver-certified for the use
34 of buprenorphine may participate in the IATOA program in any area of the state

35 and provide all services and functions of an assistant physician, physician
36 assistant, or advanced practice registered nurse.

37 7. The department may develop curriculum and benchmark examinations
38 on the subject of opioid addiction and treatment. The department may
39 collaborate with specialists, institutions of higher education, and medical schools
40 for such development. Completion of such a curriculum and passing of such an
41 examination by an assistant physician, physician assistant, advanced practice
42 registered nurse, or physician shall result in a certificate awarded by the
43 department or sponsoring institution, if any.

44 8. An assistant physician, physician assistant, or advanced practice
45 registered nurse participating in the IATOA program may also:

- 46 (1) Engage in community education;
- 47 (2) Engage in professional education outreach programs with local
48 treatment providers;
- 49 (3) Serve as a liaison to courts;
- 50 (4) Serve as a liaison to addiction support organizations;
- 51 (5) Provide educational outreach to schools;
- 52 (6) Treat physical ailments of patients in an addiction treatment program
53 or considering entering such a program;
- 54 (7) Refer patients to treatment centers;
- 55 (8) Assist patients with court and social service obligations;
- 56 (9) Perform other functions as authorized by the department; and
- 57 (10) Provide mental health services in collaboration with a qualified
58 licensed physician.

59 The list of authorizations in this subsection is a nonexclusive list, and assistant
60 physicians, physician assistants, or advanced practice registered nurses
61 participating in the IATOA program may perform other actions.

62 9. When an overdose survivor arrives in the emergency department, the
63 assistant physician, physician assistant, or advanced practice registered nurse
64 serving as a recovery coach or, if the assistant physician, physician assistant, or
65 advanced practice registered nurse is unavailable, another properly trained
66 recovery coach shall, when reasonably practicable, meet with the overdose
67 survivor and provide treatment options and support available to the overdose
68 survivor. The department shall assist recovery coaches in providing treatment
69 options and support to overdose survivors.

70 10. The provisions of this section shall supersede any contradictory

71 statutes, rules, or regulations. The department shall implement the improved
72 access to treatment for opioid addictions program as soon as reasonably possible
73 using guidance within this section. Further refinement to the improved access
74 to treatment for opioid addictions program may be done through the rules
75 process.

76 11. The department shall promulgate rules to implement the provisions
77 of the improved access to treatment for opioid addictions act as soon as
78 reasonably possible. Any rule or portion of a rule, as that term is defined in
79 section 536.010, that is created under the authority delegated in this section shall
80 become effective only if it complies with and is subject to all of the provisions of
81 chapter 536 and, if applicable, section 536.028. This section and chapter 536 are
82 nonseverable, and if any of the powers vested with the general assembly pursuant
83 to chapter 536 to review, to delay the effective date, or to disapprove and annul
84 a rule are subsequently held unconstitutional, then the grant of rulemaking
85 authority and any rule proposed or adopted after August 28, 2018, shall be
86 invalid and void.

2 [334.719. Any person who is a resident of this state and
3 who was actively engaged as an athletic trainer on September 28,
4 1983, shall be entitled to continue to practice as such but, within
5 six months of that date, comply with the provisions of section
6 334.708 to 334.715. For the purposes of this section a person is
7 actively engaged as an athletic trainer if he is employed on a salary
8 basis by an educational institution, a professional athletic
9 organization, or any other bona fide athletic organization for the
10 duration of the institutional year or the athletic organization's
11 season, and one of his job responsibilities requires him to perform
the duties of an athletic trainer.]

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