Volume 49, Number 13 Pages 939—1038

July 1, 2024

# MISSOUR, ТП SALUS POPULI SUPREMA LEX ESTO ПП "The welfare of the people shall <u>be</u> the supreme law" ппппп пппп RECTSTER

John R. Ashcroft @ Secretary of State

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# MISSOURI



# REGISTER

July 1, 2024

# Vol. 49 No. 13 Pages 939-1038

# **EMERGENCY RULES**

Department of Mental Health
Division of Developmental Disabilities
Department of Commerce and Insurance
Board of Therapeutic Massage
EXECUTIVE ORDERS 954
PROPOSED RULES
Department of Conservation
Conservation Commission
Department of Public Safety
Office of the Director
Department of Social Services
MO HealthNet Division
Department of Health and Senior Services
Division of Community and Public Health
Division of Regulation and Licensure
Department of Commerce and Insurance
Board of Therapeutic Massage 1006

#### **ORDERS OF RULEMAKING Department of Conservation** Conservation Commission ..... 1008 Missouri Department of Transportation Highway Safety and Traffic Division ...... 1015 **Department of Public Safety** Department of Revenue Director of Revenue ..... 1019 **Retirement Systems** The Public School Retirement System of Missouri .... 1020

## IN ADDITION

Department of Health and Senior Services Missouri Health Facilities Review Committee . . . . . . 1021

# **DISSOLUTIONS** ..... 1022

#### SOURCE GUIDES

RULE CHANGES SINCE UPDATE.	1024
EMERGENCY RULES IN EFFECT	1029
EXECUTIVE ORDERS	1030
REGISTER INDEX.	1031

Register	Register	Code	Code
Filing Deadlines	Publication Date	Publication Date	Effective Date
April 1, 2024	May 1, 2024	May 31, 2024	June 30, 2024
April 15, 2024	May 15, 2024	May 31, 2024	June 30, 2024
May 1, 2024	June 3, 2024	June 30, 2024	July 30, 2024
May 15, 2024	June 17, 2024	June 30, 2024	July 30, 2024
June 3, 2024	July 1, 2024	July 31, 2024	August 30, 2024
June 17, 2024	July 15, 2024	July 31, 2024	August 30, 2024
July 1, 2024	August 1, 2024	August 31, 2024	September 30, 2024
July 15, 2024	August 15, 2024	August 31, 2024	September 30, 2024
August 1, 2024	September 3, 2024	September 30, 2024	October 30, 2024
August 15, 2024	September 16, 2024	September 30, 2024	October 30, 2024
September 3, 2024	October 1, 2024	October 31, 2024	November 30, 2024
September 16, 2024	October 15, 2024	October 31, 2024	November 30, 2024
October 1, 2024	November 1, 2024	November 30, 2024	December 30, 2024
October 15, 2024	November 15, 2024	November 30, 2024	December 30, 2024
November 1, 2024	December 2, 2024	December 31, 2024	January 29, 2025
November 15, 2024	December 16, 2024	December 31, 2024	January 29, 2025
December 2, 2024	January 2, 2025	January 31, 2025	February 28, 2025
December 16, 2024	January 15, 2025	January 31, 2025	February 28, 2025
January 2, 2025	February 3, 2025	February 28, 2025	March 30, 2025
January 15, 2025	February 18, 2025	February 28, 2025	March 30, 2025
February 3, 2025	March 3, 2025	March 31, 2025	April 30, 2025
February 18, 2025	March 17, 2025	March 31, 2025	April 30, 2025
March 3, 2025	April 1, 2025	April 30, 2025	May 30, 2025
March 17, 2025	April 15, 2025	April 30, 2025	May 30, 2025

Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule. To review the entire year's schedule, please see the website at sos.mo.gov/adrules/pubsched.

# HOW TO CITE RULES AND RSMO

# RULES

The rules are codified in the Code of State Regulations in this system-

Title	CSR	Division	Chapter	Rule
3	Code of	10-	4	115
Department	State	Agency	General area	Specific area
	Regulations	division	regulated	regulated

and should be cited in this manner: 3 CSR 10-4.115.

Each department of state government is assigned a title. Each agency or division in the department is assigned a division number. The agency then groups its rules into general subject matter areas called chapters and specific areas called rules. Within a rule, the first breakdown is called a section and is designated as (1). Subsection is (A) with further breakdown into paragraphs 1., subparagraphs A., parts (I), subparts (a), items I. and subitems a.

The rule is properly cited by using the full citation; for example, 3 CSR 10-4.115, NOT Rule 10-4.115.

Citations of RSMo are to the *Missouri Revised Statutes* as of the date indicated.

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The *Code* address is sos.mo.gov/adrules/csr/csr

The *Register* address is sos.mo.gov/adrules/moreg/moreg

These websites contain rulemakings and regulations as they appear in the Code and Registers.

#### MISSOURI REGISTER

Rules appearing under this heading are filed under the authority granted by section 536.025, RSMo. An emergency rule may be adopted by an agency if the agency finds that an immediate danger to the public health, safety, or welfare, or a compelling governmental interest requires emergency action; follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances; follows procedures which comply with the protections extended by the Missouri and the United States Constitutions; limits the scope of such rule to the circumstances creating an emergency and requiring emergency procedure, and at the time of or prior to the adoption of such rule files with the secretary of state the text of the rule together with the specific facts, reasons, and findings which support its conclusion that there is an immediate danger to the public health, safety, or welfare which can be met only through the adoption of such rule and its reasons for concluding that the procedure employed is fair to all interested persons and parties under the circumstances.

Rules filed as emergency rules may be effective not less than ten (10) business days after filing or at such later date as may be specified in the rule and may be terminated at any time by the state agency by filing an order with the secretary of state fixing the date of such termination, which order shall be published by the secretary of state in the Missouri Register as soon as practicable.

All emergency rules must state the period during which they are in effect, and in no case can they be in effect more than one hundred eighty (180) calendar days or thirty (30) legislative days, whichever period is longer. Emergency rules are not renewable, although an agency may at any time adopt an identical rule under the normal rulemaking procedures.

# TITLE 9 – DEPARTMENT OF MENTAL HEALTH Division 45 – Division of Developmental Disabilities Chapter 7 – Developmental Disabilities Health Home

#### **EMERGENCY RULE**

#### 9 CSR 45-7.010 Developmental Disabilities Health Home

PURPOSE: This rule establishes the requirements for designation as a Developmental Disabilities (DD) Health Home by the Missouri Department of Mental Health (DMH), Division of Developmental Disabilities (Division of DD), for the Missouri Department of Social Services (DSS), MO HealthNet Division (MHD), to support individuals with intellectual and developmental disabilities who have chronic conditions and are served by the Division of DD.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

EMERGENCY STATEMENT: This emergency rule is necessary to

preserve a compelling governmental interest as on June, 30, 2023, the Governor signed the fiscal year 2024 state operating budget bills, which included funds for the Division of Developmental Disabilities Health Home program; a cost to continue has been requested for fiscal year 2025. The State Plan Amendment was approved by Center for Medicare and Medicaid Services on April 29, 2024, for program implementation to begin July 1, 2024. The Division will be implementing the DD Health Home program July 1, 2024, at which time the Division will start auto-enrolling individuals who meet eligibility criteria to designated providers. Stakeholders were afforded the opportunity for informal public comment and have the opportunity to provide formal comment through rule promulgation. A proposed rule, which covers this same material, was published in the April 1, 2024, issue of the Missouri Register. The Division believes this emergency rule is fair to all interested persons and parties under the circumstances. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended the Missouri and United States Constitutions. The consequence of this emergency rule not being enacted is delay in services to qualifying individuals. This emergency rule was filed May 29, 2024, became effective July 1, 2024, and expires August 30, 2024.

#### (1) Definitions.

(A) Behavioral Health – The promotion of mental health, resilience, and well-being, the treatment of mental health and substance use disorders, and the support of individuals who experience and/or are in recovery from these conditions, along with their family or other natural supports, and communities.

(B) Centers for Medicare & Medicaid Services (CMS) – CMS is a federal agency within the United States Department of Health and Human Services that administers Medicaid programs.

(C) Chronic or At-Risk Conditions – For the purpose of DD Health Home eligibility, chronic or at-risk conditions are as follows:

1. Intellectual and/or developmental disability;

2. Diabetes;

3. Asthma;

4. Cardiovascular disease (CVD) or hypertension;

5. Chronic obstructive pulmonary disease (COPD);

6. Overweight (body mass index (BMI)>25);

7. Dementia;

8. Dependent on a ventilator;

9. One (1) of the Fatal Five Plus conditions or one (1) or more chronic conditions that could lead to one (1) of the following Fatal Five Plus conditions:

A. Pulmonary aspiration;

B. Bowel obstruction;

C. Gastroesophageal reflux disease (GERD);

D. Seizures;

E. Sepsis;

F. Dehydration;

10. Tobacco use;

11. Diagnosis of Autism Spectrum Disorder; and

12. Healthcare level of 3 or greater as identified by the Health Risk Screening Tool.

(D) EMR – Electronic medical records, also referred to as electronic health records (EHR).

(E) Health Home – À Health Home provides coordination of health care to individuals with chronic physical and/or behavioral health conditions, using a partnership or team approach between the Health Home team and individuals in order to achieve improved health care, to avoid preventable hospitalizations and emergency department use. (F) DD Health Home Enrollees – Individuals eligible for Division of DD services with one (1) or more chronic/at risk conditions as defined in enrollment/eligibility criteria section.

(G) DD Health Home Provider – DD Contracted Targeted Case Management (TCM) and/or DD Home and Community-Based Services (HCBS) certified or accredited waiver providers who meet criteria for DD health home provider eligibility.

(H) DD Health Home Team – DD Health Home core team shall consist of the following staff: Health Home Director, Nurse Care Manager, Physician Consultant (Advanced Practice Registered Nurse (APRN) as substitute and defined in the DD Health Home Provider Operations Manual), Specialized Healthcare Consultant, and DD Health Home Facilitator. Based on the unique needs of the individual, additional staff may be identified.

(I) Health Risk Screening Tool – The Health Risk Screening Tool (HRST) is a tool used to provide early detection of health risks and destabilization.

(J) Health Risk Support Plan (HRSP) – The HRSP are standardized electronic templates in the department's identified system which is a component of the individual's Individual Support Plan (ISP) and serves to identify implementation strategies to mitigate risk and improve health outcomes.

(K) Intellectual and/or Developmental Disability (IDD) -Adults and youth who meet the Missouri state statute definition of Developmental Disability, section 630.005(9), RSMo. "Developmental disability," a disability that is attributable to intellectual disability, cerebral palsy, epilepsy, head injury or autism, or a learning disability related to a brain dysfunction; or any other mental or physical impairment or combination of mental or physical impairments; and is manifested before the individual attains age twenty-two (22); and is likely to continue indefinitely; and results in substantial functional limitations in two (2) or more of the following areas of major life activities: self-care; receptive and expressive language development and use; learning; self-direction; capacity for independent living or economic self-sufficiency; mobility; and reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic care, habilitation or other services which may be of lifelong or extended duration and are individually planned and coordinated.

(L) Missouri Department of Social Services (DSS), MO HealthNet Division (MHD) – Single State Medicaid authority.

(M) Social Determinants of Health (SDOH), the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems.

(2) Developmental Disabilities Health Home Qualifications.

(A) Initial Provider Qualifications. In addition to being a DD service provider of TCM or DD HCBS waiver services, each DD Health Home provider must meet state qualifications, which may be amended from time to time as necessary and appropriate, but minimally require that each Health Home –

1. Must be enrolled in Missouri's Medicaid program and agree to comply with all Medicaid program requirements;

2. DD Health Home providers can either directly provide, or subcontract for the provision of DD Health Home services. The DD Health Home remains responsible for all DD Health Home program requirements, including services performed by the contractor;

3. Have strong, engaged leadership personally committed to and capable of leading the practice through the transformation process and sustaining transformed practices processes as demonstrated through the application process and agreement to participate in learning activities including in-person sessions and regularly scheduled phone calls; and that provider leadership in collaboration with the state have presented the state-developed introductory presentation to Missouri's DD Health Home initiative to provider staff and board of directors;

4. Meet the state's minimum access requirements as follows: Prior to implementation of DD Health Home service coverage, provide assurance of enhanced individual access to the health team, including the development of alternatives to face-to-face visits, such as telephone or email, twenty-four (24) hours per day seven (7) days per week;

5. Actively use MHD and DMH information technology (IT) systems to conduct care coordination and prescription monitoring for Medicaid individuals;

6. Utilize the department's identified system to input annual metabolic screening results, track and measure care of individuals, automate care reminders, and maintain other items as required by the department;

7. Routinely use an electronic health management tool to determine individualized health risks (i.e., Health Risk Screening Tool (HRST));

8. Routinely use an electronic health management tool to determine problematic prescribing patterns;

9. Conduct wellness interventions as indicated based on the individual's level of risk;

10. Agree to convene regular, ongoing, and documented internal DD Health Home team meetings to plan and implement DD Health Home healthcare goals and objectives of ongoing practice transformation;

11. Agree to participate in CMS and state-required evaluation activities;

12. Agree to develop required reports describing DD Health Home activities, efforts and progress in implementing DD Health Home services;

13. Maintain compliance with the terms and conditions as a DD Health Home provider or risk termination as a provider of DD Health Home services;

14. Present a proposed DD Health Home service delivery model the department determines will have a reasonable likelihood of being cost-effective. Cost effectiveness will be determined based on the size of the proposed DD Health Home, Medicaid caseload, percentage of caseload with eligible chronic conditions of individuals and other factors to be determined by DMH.

(B) Ongoing Provider Qualifications. Each provider must also –

1. Continue to have a strong, engaged leadership personally committed to and capable of leading the DD Health Home through the transformation process and sustaining transformed DD Health Home processes as evidenced by successful participation in the leadership training and learning collaborative developed for DD Health Home;

2. Coordinate care and build relationships with regional hospital(s) or hospital system(s) to develop a structure for transitional care planning, including communication of inpatient admissions of DD Health Home individuals, and maintain a mutual awareness and collaboration to identify individuals seeking emergency department services who might benefit from connection with a DD Health Home, and encourage hospital staff to notify the area DD Health Home staff of such opportunities;

3. Develop quality improvement plans to address gaps and opportunities for improvement identified during and after the application process;

# **EMERGENCY RULES**

4. Demonstrate development of fundamental DD Health Home functionality through an assessment process to be applied by Division of DD;

5. Demonstrate significant improvement on clinical indicators specified by and reported to Division of DD;

6. Submit data reports as required by DSS and/or Division of DD;

7. Provide DD Health Home services that demonstrate overall cost effectiveness;

8. Participate in technical assistance conference calls and webinars as requested by DSS and/or Division of DD;

9. Meet standards as determined by DMH.

(3) Scope of Services. This section describes the activities Division of DD providers will be required to engage in, and the responsibilities they will fulfill, if recognized as a DD Health Home.

(A) Division of DD Health Home Services. The DD Health Home Team shall assure the following health services are received, as necessary, by all individuals served in the DD Health Home:

1. Comprehensive care management. Comprehensive care management services include –

A. Determining level of participation in care management services based upon individualized information provided through the HRST and HRSP, and other individual information;

B. Assessment of preliminary service needs which includes reviewing and identifying gaps in the overall personcentered plan which may include the HRSP and Behavior Support Plan (BSP);

C. DD Health Home development of individual DD Health Home healthcare goals, preferences, and optimal clinical outcomes;

D. Assigning health team roles and responsibilities;

E. Developing guidelines for health teams to follow across risk levels or health conditions;

F. Monitoring of individual and population health status and service use to determine adherence to or variance from DD Health Home healthcare goals and identified service needs identified in the overall person-centered plan; and

G. Developing and disseminating reports that indicate the individual's progress toward meeting outcomes for individual satisfaction, health status, service delivery, and costs.

2. Care coordination. Care coordination is the implementation of the overall individual person-centered plan with active individual and family involvement through appropriate linkages, referrals, coordination, and follow-up to needed services and supports. Care coordination is designed to be delivered in a flexible manner best suited to the individual's preferences and to support DD Health Home healthcare goals that have been identified by developing linkages and skills in order to allow the individual to reach their full potential and increase their independence in obtaining and accessing services. Specific activities include but are not limited to -

A. Participating in hospital discharge processes to support the individual's transition to the community;

B. Communicating and consulting with the individual, providers, and collateral contacts; and

C. Facilitating regularly scheduled interdisciplinary team meetings to review person-centered plans and assess progress toward identified DD Health Home healthcare goals.

3. Health promotion. Health promotion shall minimally consist of educating and engaging the individual in making decisions that promote independent living skills and lifestyle choices that achieve the following goals:

A. Good health;

B. Proactively managing chronic conditions;

C. Identifying risk factors early; and

D. Screening for emerging health problems.

4. Health promotion services include but are not limited to –

A. Promoting the individual's education of their chronic conditions;

B. Developing self-management plans with the individual;

C. Conducting medication reviews and regimen compliance;

D. Providing support to the individual for improving social networks and health-promoting lifestyle interventions, including but not limited to preventative health practices for the IDD population, nutritional counseling, obesity reduction and prevention, and increasing physical activity; and

E. Assisting the individual to participate in DD Health Home healthcare goal planning with an emphasis on person-centered empowerment and the development of health literacy skills to help the individual understand and self- manage chronic health conditions.

5. Comprehensive transitional care from inpatient to other settings. Comprehensive transitional care services include but are not limited to -

A. Facilitating the individual's transition between care levels, such as a hospital, nursing facility and residential supports, or when opting for a new DD Health Home provider;

B. Collaborating and establishing relationships with the individual's physicians, nurses, social workers, discharge planners, pharmacists, and others to continue implementation of the overall person-centered plan. Specific focus is on increasing the individual's ability to manage care and live safely in the community, and shift the use of reactive care and treatment to proactive health promotion and self-management;

C. Communicating with and educating the individual and providers located at the setting from which the individual is transitioning, and at the setting to which the individual is transitioning;

D. Ensuring the individual's prompt access to follow-up care after discharge (e.g., care record from discharge entity, medication reconciliation, reviewing person-centered plan to assure access to needed community services, appointment scheduling); and

E. Providing care coordination services designed to streamline person-centered plans, reduce hospital admissions, ease the transition to long term services and supports, and interrupt patterns of frequent hospital emergency department use.

6. Individual and family support. Individual and family support is intended to assist the individual to facilitate and maintain quality of life and explore community options to promote overall quality of life through health stabilization and improved health outcomes. Activities include but are not limited to -

A. Educating and guiding in self-advocacy support with the individual;

B. Increasing the individual's health literacy skills and ability to self-manage their care;

C. Identifying resources for the individual to address the gaps identified in the overall person-centered plan to improve his or her overall health and ability to function within his or her family and in the community;

D. Educating the individual on the importance of obtaining and adhering to medications and other prescribed treatments; and E. Assisting the individual with developmental disabilities for whom primary services needs are more directly related to treatment (e.g., treatment for a behavioral health condition and/or particular healthcare condition(s)), referring and coordinating with the approved care management entity for the MO Community Mental Health Center (CMHC) Health Care Home or MO Primary Care Health Home for services more directly related to those aforementioned conditions.

7. Referral to community and social support services. Referral to community and social support services involves identifying gaps in the overall person-centered plan that are connecting the individual to community based resources and referrals that support Social Determinants of Health (SDOH). It also includes identifying resources to reduce barriers that will promote the individual's overall quality of life through health stabilization and improved overall health outcomes.

(B) DD Health Home Administration. Each DD Health Home provider shall employ a DD Health Home Director. The DD Health Home core team shall consist of the following staff: Nurse Care Manager, Physician Consultant (APRN as a substitute and defined in the DD Health Home Provider Operations Manual), Specialized Healthcare Consultant, and DD Health Home Facilitator. Based on the unique needs of the individual, additional staff may be identified.

(C) Learning Activities. The MO DD Health Homes will be supported as the state continually assesses the DD Health Homes to determine training needs. DD Health Homes will participate in a variety of centralized learning supports including but not limited to learning collaboratives, webinars, training and technical assistance including peer-led training and community resources.

(D) Department's Identified System. DD Health Homes shall utilize the department's identified system approved by the Division of DD. The department's identified system is a system for tracking information the Division of DD deems critical to the management of the health of the population being served through the DD Health Home, including dates of delivered and needed services, laboratory values needed to track chronic conditions, and other measures of health status. The department's identified system shall be used for -

1. Tracking;

2. Risk stratification;

3. Analysis of population health status and individual needs; and

4. Reporting as specified by the Division of DD.

(E) Data Reporting. DD Health Homes shall be required to submit the following reports to the Division of DD as specified:

1. Monthly updates identifying the DD Health Home's staffing patterns, enrollment status, hospital follow-ups, and notifications provided to primary healthcare providers; and

2. Other reports as specified by the Division of DD.

(4) Patient Eligibility and Enrollment. This section describes eligibility and enrollment requirements for DD Health Home.

(A) Eligibility. Individuals eligible for Division of DD services shall meet the following criteria to be eligible for services from a designated DD Health Home:

1. Have a chronic condition of intellectual and/or developmental disability; and

2. Have or be at risk of developing one (1) of the following conditions:

A. Diabetes;

B. Asthma;

C. Cardiovascular disease (CVD) or hypertension;

D. Chronic obstructive pulmonary disease (COPD);

- E. Overweight (body mass index (BMI)>25);
- F. Dementia;
- G. Dependent on a ventilator;

H. One (1) of the Fatal Five Plus conditions or one (1) or more chronic conditions that could lead to one (1) of the following Fatal Five Plus conditions:

(I) Pulmonary aspiration;

(II) Bowel obstruction;

(III) Gastroesophageal reflux disease (GERD);

(IV) Seizures;

(V) Sepsis;

(VI) Dehydration;

I. Tobacco use;

J. Diagnosis of Autism Spectrum Disorder; or

K. Healthcare level of 3 or greater as identified by the Health Risk Screening Tool.

(B) Enrollment Requirements. Individuals eligible for DD Health Home services will be assigned to eligible providers. Upon enrollment, individuals assigned to a DD Health Home will be informed by the Department of Mental Health. The notice will describe assignment of the individual to a DD Health Home, provide a brief description of DD Health Home services, and describe the process for the individual to change DD Health Home provider, and opt-out of receiving services from the assigned DD Health Home provider.

(5) DD Health Home Provider Designation Process.

(A) The Division of DD shall establish procedures under which a Medicaid-enrolled provider attains designation as a DD Health Home provider.

1. The designation process shall be person-centered and serve the following critical purposes –

A. To determine how well DD Health Home providers fulfill their responsibilities to individuals enrolled in a DD Health Home; and

B. To determine systems changes and practices needed so that DD Health Home providers will be more responsive to the individual's needs;

2. DD Health Home providers shall demonstrate innovation and initiative in pursuing, as well as commitment toward continuous quality improvement in realizing best practices and outcomes associated with –

A. Health Home core functional components –

(I) Provide quality-driven, cost-effective, culturally appropriate, and person- and family-centered Health Home services;

(II) Coordinate access to high quality health care services informed by evidence-based clinical practice guide-lines;

(III) Coordinate access to preventive and health promotion services, including prevention of mental illness and substance use disorders;

(IV) Coordinate and provide access to behavioral health services, including mental health and substance use;

(V) Coordinate access to comprehensive care management, care coordination, and transitional care across settings. Transitional care includes appropriate follow-up from inpatient to other settings, such as participation in discharge planning and facilitating transfer from a pediatric to an adult system of health care;

(VI) Coordinate access to chronic disease management, including self-management support to individuals and their families;

(VII) Coordinate access to individual and family supports, including referral to community, social support, and recovery services;

# **EMERGENCY RULES**

(VIII) Coordinate access to long-term care supports and services;

(IX) Develop a person-centered care plan for each individual that coordinates and integrates all of his or her clinical and non-clinical healthcare-related needs and services;

(X) Demonstrate a capacity to use health information technology to link services, facilitate communication among team members and between the health team and individual and family caregivers, and provide feedback to practices, as feasible and appropriate; and

(XI) Establish a continuous quality improvement program, and collect and report on data that permits an evaluation of increased coordination of care and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level; and

B. Service delivery system principles –

(I) Demonstrate clinical competency for serving the complex needs of health home enrollees using evidence-based protocols;

(II) Demonstrate the ability for effectively coordinating the full range of medical, behavioral health, long-term services and supports, and social services for medically complex individuals with chronic conditions;

(III) Provide Health Home services that operate under a "whole-person" approach to care using a comprehensive needs assessment and an integrated person-centered care planning process to coordinate care;

(IV) Have conflict of interest safeguards in place to assure enrollee rights and protections are not violated, and that services are coordinated in accordance with enrollee needs expressed in the person-centered care plan;

(V) Provide access to timely health care twenty-four (24) hours a day, seven (7) days a week to address any immediate care needs of their Health Home enrollees;

(VI) Have in place operational protocol, as well as communication procedures to assure care coordination across all elements of the healthcare system (hospitals, specialty providers, social service providers, other community based settings, etc.);

(VII) Have protocols for ensuring safe care transitions, including established agreements and relationships with hospitals and other community-based settings;

(VIII) Establish a continuous quality improvement program that includes a process for collection and reporting of Health Home data for quality monitoring and program performance; permits evaluation of increased coordination and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level;

(IX) Use data for population health management, tracking tests, referrals and follow-up, and medication management;

(X) Use health information technology to link services and facilitate communication among interdisciplinary team members and other providers to coordinate care and improve service delivery across the care continuum.

3. Upon initial application and on a biennial basis thereafter, all DD Health Home providers shall seek DD Health Home designation under this section except those providers appropriately accredited by nationally recognized accrediting bodies for DD Health Homes approved by Division of DD shall not be required to seek designation. The division director shall issue a DD Health Home designation to providers successfully completing the process and requirements of this section. (B) The Division of DD recognizes and deems as designated a provider that has attained full accreditation under standards for DD Health Home from a nationally recognized accrediting body. The deemed provider must –

1. Submit to the Division of DD a copy of the most recent accreditation survey report and verification of the the accreditation time period and dates within thirty (30) calendar days of receipt from the accrediting body.

2. Notify the Division of DD when accreditation surveys are scheduled or when the accrediting body makes complaint investigation visits.

3. Notify the Division of DD of any changes in accreditation status during the time period of accreditation and resurvey.

4. Identify the Division of DD as a primary stakeholder for contact by the accrediting body during survey and resurvey data-gathering processes.

5. The Division of DD may conduct a scheduled or unscheduled survey of an accredited DD Heath Home provider at any time to monitor ongoing compliance with the standards and requirements. If any survey finds conditions that are not in compliance with applicable standards, the Division of DD may require corrective action steps and may change the provider's designation status consistent with procedures set out in this rule.

(C) Participation in Designation. Participation may entail responding to surveys and requests for interviews with DD Health Home staff and individuals served. Providers shall provide all requested information as directed by the Division of DD. A provider must engage in the designation process in good faith. The provider must provide information and documentation that is accurate and complete. Failure to participate in good faith, including falsification or fabrication of any information used to determine compliance with requirements, may be grounds to deny issuance of or to revoke designation.

1. The Division of DD shall conduct a comprehensive survey at an organization for the purpose of determining compliance with DD Health Home standards, standards of care, program/service rules, and other requirements, except as stipulated in paragraph (5)(A)3.

A. The Division of DD shall provide advance notice and scheduling of routine, planned surveys.

B. The Division of DD shall notify the applicant regarding survey date(s), procedures, and a copy of any survey instrument that may be used. Survey procedures will include but are not limited to interviews with provider staff, individuals being served, and other interested parties; review of provider administrative records necessary to verify compliance with requirements; and review of personnel records and service documentation.

C. The applicant agrees, by act of submitting a DD Health Home application, to allow and assist Division of DD representatives in fully and freely conducting these survey procedures, initially and ongoing, and to provide Division of DD representatives reasonable and immediate access to premises, individuals, and requested information.

D. The surveyor(s) shall hold entrance and exit conferences with the organization to discuss survey arrangements and survey findings, respectively. If there are any deficiencies found during the survey, the provider will be required to submit a plan of correction before designation can be approved.

E. If a plan of correction is not required, the Division of DD shall issue DD Health Home designation to the provider's director within thirty (30) calendar days after the exit conference, indicating the DD Health Home provider can provide Health Home services.

F. Division of DD will identify and set timelines for issues/enhancements to be addressed with the DD Health Home provider. At the discretion of the Division of DD, a follow-up review will be completed once issues have been addressed. If issues/enhancements have been satisfactorily addressed, Division of DD will issue DD Health Home designation to the provider.

(I) The report shall note all deficiencies identified during the survey.

(II) The Division of DD shall send a notice of deficiency and the report.

(III) The DD Health Home provider shall make the report available to their staff and to the public upon request.

(IV) Within thirty (30) calendar days of the date that a notice of deficiency and the report is presented to the DD Health Home provider, the provider shall submit to the Division of DD a plan of correction. The plan must address each deficiency, specifying the method of correction and the date the correction shall be completed. The provider will work with the Division of DD to develop a plan of correction. No correction date will exceed ninety (90) calendar days.

(V) Within fifteen (15) calendar days after receiving the plan of correction, the Division of DD shall notify the DD Health Home provider of its decision to approve or require revisions of the proposed plan.

(VI) The Division of DD will assure that the plan of correction has been implemented and deficiencies corrected. Division of DD shall determine if it is necessary to make a return visit to the DD Health Home provider based on the criteria of the plan of correction.

(VII) In the event that the provider has not submitted a plan of correction acceptable to Division of DD within forty-five (45) calendar days of the original date that written notice of deficiencies was presented by certified mail to the DD Health Home provider, it shall be subject to expiration or denial of designation.

G. The Division of DD may grant designation on a temporary, initial, conditional, deemed, or compliance status. The Division of DD will notify the Division of DD Director of any change in the status of a provider.

(I) Temporary status may be granted to a DD Health Home provider if the designation process has not been completed prior to the expiration of an existing designation and the applicant is not at fault for failure or delay in completing the designation process.

(II) Initial status for a period of not exceeding one (1) year may be granted to a new provider based on a designation review which finds the program in compliance with requirements related to policy and procedure, facility, trainings and personnel to begin providing services. The initial designation will be awarded for one (1) year and a follow-up visit will occur prior to the initial designation expiration date to ensure the DD Health Home provider is demonstrating continued improvement and functionality.

(a) In the Division of DD's initial determination and granting of initial designation, the provider shall not be expected to fully comply with those standards which reflect ongoing program activities.

(b) The Division of DD shall conduct a comprehensive survey of the initially designated provider and shall make further determination of the provider's designation status no later than the expiration date of the initial designation.

(III) Conditional status may be granted to a provider following a survey by the Division of DD that determines that there are pervasive and/or significant deficiencies with standards that may affect quality of care to individuals and there is reasonable expectation that the provider can achieve compliance within a stipulated time period. The Division of DD may consider patterns and trends of performance identified during the survey.

(a) The period of conditional status shall not exceed one hundred eighty (180) calendar days. The Division of DD may directly monitor progress, may require the provider to submit progress reports, or both.

(IV) The Division of DD shall conduct a further survey within the one hundred eighty (180)-day period and make a further determination of the provider's compliance with standards.

(V) Designation status may be awarded to a provider for a period of two (2) years following a survey by the Division of DD that determines the provider meets all standards relating to quality of care and the safety, health, rights, and welfare of individuals served.

H. If deficiencies are cited during a survey, any and all such deficiencies must be corrected in accordance with the plan of correction prior to the Division of DD awarding designation status.

I. The Division of DD may investigate any complaint regarding the operation of a designated or deemed provider. If conditions are found that are not in compliance with applicable requirements, the Division of DD may, at its sole discretion for deemed providers, notify the accrediting body of any concerns.

J. The Division of DD may conduct a scheduled or unscheduled survey of a provider at any time to monitor ongoing compliance with the standards and requirements. If any survey finds conditions that are not in compliance with applicable standards, the Division of DD may require corrective action steps and may change the provider's designation status consistent with procedures set out in this rule.

K. The Division of DD may deny issuance of and may revoke designation based on a determination that includes but is not limited to -

(I) The nature of the deficiencies results in substantial probability of or actual jeopardy to individuals being served;

(II) Serious or repeated incidents of abuse or neglect of individuals being served or violations of rights have occurred;

(III) Fraudulent fiscal practices have transpired or significant and repeated errors in billings to the Division of DD have occurred;

(IV) Failure to participate in the designation process in good faith, including falsification or fabrication of any information used to determine compliance with requirements;

(V) The nature and extent of deficiencies results in the failure to conform to the standards of the program being offered; or

(VI) Compliance with standards has not been attained by an organization upon expiration of conditional designation.

L. An organization which has had designation denied or revoked may meet with the Division of DD Director or designee to appeal the decision to revoke designation.

(I) The provider must notify the department's division director or designee in writing within ten (10) business days of the date on the termination letter. The appeal shall include the following -

(a) The name of the provider;

(b) The name and contact information of the person requesting the appeal;

(c) The reasons for appealing the decision; and

# **EMERGENCY RULES**

(d) Any documentation that supports the provider's position.

(II) The meeting shall take place within seven (7) business days from the date of the request.

(III) Within seven (7) business days of the meeting, the division director or designee shall make a final determination as to whether the decision remains in effect. The provider shall be notified of this decision by regular and certified mail.

(IV) The decision of the division director or designee shall be the final decision of the department.

M. A designation is valid only as long as the provider meets standards of care and other requirements.

N. The provider shall maintain the designation issued by the Division of DD in a readily available location.

O. Within seven (7) business days of the time a designated provider organization is discontinued, moved to a new location, or has a change in accreditation status, the provider shall provide written notice to the Division of DD of any such change.

P. The Division of DD shall designate only the provider(s) named in the application.

Q. The provider(s) may not transfer designation without the written approval of the department.

R. Within seven (7) calendar days of the effective date that a designated provider is sold or undergoes a change of ownership, the provider shall submit a written notice to the division of any such change. A change in ownership is considered to have occurred under the following circumstances:

(I) A new corporation, partnership, limited partnership, limited liability company, or other entity assumes ownership of the operation;

(II) An individual incorporates or forms a partnership;

(III) With respect to a designated provider which is a general partnership, a change occurs in the majority interest of the partners;

(IV) With respect to a designated provider which is a limited partnership, a change occurs in the majority interest of the general or limited partners;

(V) With respect to a designated provider which is a corporation, a change occurs in the persons who own, hold, or have the power to vote the majority of any class of stock issued by the corporation.

(VI) A designated provider's change of Federal Employer Identification Number (FEIN).

S. The organization must comply with other applicable requirements as set forth in 9 CSR 10-5.220 Privacy Rule of Health Insurance Portability and Accountability Act of 1996 (HIPAA).

(6) Demonstrated Evidence of DD Health Home Transformation.

(A) Providers are required to demonstrate evidence of transformation to the DD Health Home model on an ongoing basis using measures and standards established by the Division of DD and communicated to the providers. Transformation to the DD Health Home service delivery model is exhibited when a provider –

1. Demonstrates development of fundamental DD Health Home functionality initially upon enrollment, one (1) year prior to the expiration of the initial designation, and biennially thereafter, based on an assessment process determined by the Division of DD. Additional reviews may be indicated on a caseby-case basis. Providers must demonstrate continued improvement and functionality for as long as they maintain their DD Health Home designation; and 2. Demonstrates progress toward established goals and objectives related to the clinical indicators as determined by Division of DD.

(B) Notification of Staffing Changes. Providers are required to notify the Division of DD within seven (7) business days of staff changes in the DD Health Home Director, Physician Consultant (APRN as substitute), Nurse Care Manager(s), and DD Health Home Facilitator.

(C) Providers shall work cooperatively with the Division of DD to support approved training, technology, and administrative services required for ongoing implementation and support of the DD Health Homes.

(7) Health Home Payment Components. This section describes the payment process for Developmental Disabilities Health Homes.

(A) General.

1. All payments to a DD Health Home are contingent on the program meeting the DD Health Home requirements set forth in their Health Home applications, as determined by the state of Missouri. Failure to meet such requirements is grounds for revocation of Health Home status and for termination of payments.

2. Reimbursement for DD Health Home services will be in addition to a provider's existing reimbursement for services and procedures and will not change existing reimbursement for services and procedures that are not part of the DD Health Home.

3. The Division of DD reserves the right to make changes to the payment methodology.

(B) Types of Payments.

1. Clinical Care Management per Member per Month (PMPM) payment. Missouri will pay DD Health Homes the cost of staff primarily responsible for delivery of services not covered by other reimbursement (Health Home Director, Physician Consultant (APRN as substitute), Nurse Care Manager, Specialized Healthcare Consultant and DD Health Home Facilitator), whose duties are not otherwise reimbursable by MO HealthNet. In addition, the DD Health Home PMPM will include Health Home specific training, technical assistance, administration, and data analytics. Staff costs are based on the Bureau of Labor Statistics data. All DD Health Home providers will receive the same PMPM rate. The PMPM method will be reviewed periodically to determine the rate is economically efficient and consistent with quality of care.

(C) Minimum Criteria for Payment.

1. The individual is identified as meeting the DD Health Home eligibility criteria on the state-run DD Health Home department's identified system.

2. The individual is enrolled with a designated billing DD Health Home provider, and is enrolled in only one (1) Health Home at a time, regardless of type.

3. The minimum DD Health Home service required to merit payment of the PMPM is that the individual has received care management monitoring for treatment gaps that was documented or another DD Health Home service was provided that was documented.

4. The DD Health Home will report that the minimal service required for the PMPM rate payment occurred on a monthly DD Health Home attestation report.

(D) Except as otherwise noted in the plan, state-developed PMPM rates are the same for both governmental and private providers of DD Health Home services.

(8) Policies and Procedures. The organization shall maintain a policy and procedure manual which accurately describes and

**PAGE 950** 

guides the operation of its services and promotes compliance with applicable regulations. The policy and procedure manual shall be readily available to staff and the public upon request and shall include but is not limited to –

(A) The DD Health Home provider will develop policies and procedures in accordance with 9 CSR 10-5 to include –

1. 9 CSR 10-5.190 Background Screening Requirements;

2. 9 CSR 10-5.200 Report of Complaints of Abuse, Neglect and Misuse of Funds/Property;

3. 9 CSR 10-5.206 Report of Events; and

4. 9 CSR 10-5.220 Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) and 42 CFR;

(B) The DD Health Home provider will develop policies and procedures to address the following:

1. Opt-out process for individuals that otherwise qualify for DD Health Home services;

2. Transfer and discharge processes for DD Health Home individuals;

3. Primary care physician referrals;

4. Primary care physician or other specialty care coordination;

5. Twenty-four (24) hour coverage in accordance with paragraph (2)(A)3. of this rule;

6. Prescription monitoring;

7. Health Risk Screening Tool and routine monitoring;

8. Quality assurance/quality improvement process as related to DD Health Home;

9. Guidelines to follow across risk levels or health conditions;

10. Follow-up care after discharge related to transitional care;

11. Training requirements for DD Health Home staff;

12. DD Health Home data reporting;

13. Composition of DD Health Home team;

14. Notification of DD Health Home staffing changes;

15. Utilization of the department's identified system;

16. Complaints and grievances; and

17. Attestation and documentation.

(9) Incorporation by Reference. This rule incorporates by reference the following:

(A) The DD Health Home Provider Operations Manual is incorporated by reference and made a part of this rule as published May 15, 2024, by the Department of Mental Health, Division of Developmental Disabilities, at its website at https:// dmh.mo.gov/dev-disabilities/health-home. This rule does not incorporate any subsequent amendments or additions to this publication.

(10) Electronic Medical Records. DD Health Home providers are required to utilize and maintain electronic medical records of all individuals served. Electronic medical records systems must comply with state and federal regulations.

AUTHORITY: section 630.050, RSMo 2016. Original rule filed Feb. 26, 2024. Emergency rule filed May 29, 2024, became effective July 1, 2024, and expires August, 30, 2024. A proposed rule, which covers this same material, was published in the April 1, 2024, issue of the **Missouri Register**.

PUBLIC COST: This proposed rule is estimated to cost state agencies or political subdivisions \$24 million in the aggregate, of which \$2.4 million is state dollars and \$21.6 million is federal dollars.

PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.

# FISCAL NOTE PUBLIC COST

# I. Department Title: Title 9 – Department of Mental Health Division Title: Division 45 – Division of Developmental Disabilities Chapter Title: Chapter 7 – Developmental Disabilities Health Home

Rule Number and9 CSR 45-7 Developmental Disabilities Health Home	
Name:	
Type of	Proposed New Rule
Rulemaking:	

# II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Mental Health	SFY 2025 – estimated \$24 million (\$2.4 million state share and \$21.6 million federal share)

# III. WORKSHEET

# **DD Health Home Fiscal Impact - CSR**

Projected DD Health Home Individuals	20,000
Estimated Monthly PMPM	\$ 100.00
Estimated Monthly Cost	\$ 2,000,000
	12
Estimated Annual Cost	\$ 24,000,000

#### SFY 2025 (7/1/2024 to 6/30/2025) Estimated Monthly Cost \$ 2,000,000 # of Months in FFY in Which Payment will be Made 12 \$ 24,000,000 Estimated FFY 2024 Cost \$ FMAP (90.00%) 21,600,000 GR (10.00%) \$ 2,400,000 \$ 24,000,000 Estimated FFY 2024 Cost

# **IV. ASSUMPTIONS**

See above Worksheet.

# **EMERGENCY RULES**

# TITLE 20 – DEPARTMENT OF COMMERCE AND INSURANCE Division 2197 – Board of Therapeutic Massage Chapter 2 – Massage Therapist Licensure Requirements

#### **EMERGENCY AMENDMENT**

**20 CSR 2197-2.010 Application for Licensure**. The board is amending section (1).

*PURPOSE: This amendment updates and clarifies clock hours for licensure.* 

EMERGENCY STATEMENT: The Board of Therapeutic Massage is requesting to change the minimum clock hours for education requirements, for apprenticeship with a certified mentor and from a Coordinating Board of Higher Education (CBHE). This change is required to ensure that students who can qualify for federal grants and loans for Massage programs can meet the requirements for their programs and be able to receive aid, to complete their program. Currently, most Missouri entry-level programs and apprenticeships/mentorships (on average) provides at least six hundred twenty-five (625) clocked hours to graduate from their programs. The United States Department of Education is amending their rule effective July 1, 2024, regarding minimum education requirements. Students entering massage programs or mentorships will not aualify for federal aid with the current clock hour requirements. If the rule is not amended by July 1, 2024, it will restrict federal financial aid to the entry level competence standard (minimum) which is the role of regulation (as opposed to allowing funding for a quality education program for lifelong learning) restricts access to education for already disadvantaged students and has the opposite effect of the purpose of federal financial aid funding. Students will be deprived of loans, schools will close, the massage therapist labor shortage will be exacerbated.

Increasing the minimum number to six hundred twenty-five (625) hours of initial core education is required for students to acquire the core skills to safely practice massage therapy. As a result, the Board of Therapeutic Massage finds there is an immediate danger to the public health, safety, and/or welfare and a compelling governmental interest that requires this emergency action. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the **Missouri** and **United States Constitutions**. A proposed amendment covering the same material is published in this issue of the **Missouri Register**. The Board of Therapeutic Massage believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency amendment was filed May 24, 2024, becomes effective July 1, 2024, and expires February 27, 2025.

#### 20 CSR 2197-2.010 Application for Licensure

(1) A person who seeks licensure as a massage therapist and has completed either *[five hundred (500)]* six hundred twenty-five (625) clock hours of massage therapy training in an apprenticeship with a certified mentor and has successfully passed an examination approved by the board or massage therapy studies consisting of at least *[five hundred (500)]* six hundred twenty-five (625) clock hours of supervised instruction from a Coordinating Board of Higher Education (CBHE) certified school, Missouri Department of Elementary and Secondary Education (DESE) approved vocational program or school, or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education or an equivalent approving body for out-of-state applicants, shall be at least eighteen (18) years of age and shall submit the following:

(C) Official evidence of completing [five hundred (500)] six hundred twenty-five (625) clock hours of massage therapy training in an apprenticeship with a certified mentor or an official final transcript showing successful completion of a massage therapy program to be submitted directly to the board office from the certified mentor or massage therapy program which includes:

1. The applicant's name.

2. Date of enrollment.

3. Date of completion; and

4. Documentation that the massage therapy program consisted of at least *[five hundred (500)]* six hundred twenty-five (625) clock hours of supervised instruction which consisted of –

A. At least three hundred (300) clock hours dedicated to massage theory and practice techniques provided directly by the certified mentor or an instructor within a massage therapy program. An instructor for massage theory and practice techniques or certified mentor shall document at least two (2) years of massage therapy practice, and either be licensed as a massage therapist in this state or be licensure eligible, based upon board review of the instructor's credentials.

(I) An instructor of kinesiology or pathology within the massage therapy program shall submit verification of education and/or experience in kinesiology or pathology instruction and licensure as a massage therapist or licensure eligibility is not required.

B. At least [O]one hundred (100) clock hours dedicated to the study of anatomy and physiology provided by one (1) of the following:

(I) The certified mentor who must hold an associate, bachelor, or advanced degree in a science related field from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education that includes a course of study in anatomy and physiology. Such degrees include, but are not limited to, physical therapy, chiropractic, osteopathy, medicine, nursing, chemistry, or biology.

(II) A school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education, a massage therapy program approved by the Missouri CBHE, or an out-of-state school approved by an agency equivalent to the Missouri CBHE.

(III) The certified mentor who must have earned at least fifteen (15) semester hours or twenty-five (25) quarter hours in science or science related courses from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education. All course work must have a passing grade and at least eight (8) semester hours in fifteen (15) quarter hours of the course of study shall be in anatomy and physiology. For the purpose of this regulation a semester hour is equivalent to fifteen (15) clock hours and a quarter hour is equivalent to ten (10) clock hours.

(IV) An instructor within a massage therapy program who must hold an associate, bachelor, or advanced degree in a science related field that includes a course of study in anatomy and physiology. Such degrees include, but are not limited to, physical therapy, chiropractic, osteopathy, medicine, nursing, chemistry, or biology from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education; or

(V) An instructor within a massage therapy program who must have earned at least fifteen (15) semester hours or twenty-five (25) quarter hours in science or science related courses from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education. All course work must have a passing grade and at least eight (8) semester hours or fifteen (15) quarter hours of the course of study shall be in anatomy and physiology. For the purpose of this regulation a semester hour is equivalent to fifteen (15) clock hours and a quarter hour is equivalent to ten (10) clock hours.

C. At least *[F]*fifty (50) clock hours dedicated to business practice, professional ethics, hygiene, and massage law in the state of Missouri provided by a certified mentor or an instructor within a massage therapy program with documented experience/education in a related field; *[and]* 

D. At least *[F]* fifty (50) clock hours dedicated to ancillary therapies provided by a certified mentor or an instructor(s) within a massage therapy program with documented experience/education in a related field. The fifty (50) clock hours shall include at a minimum cardiopulmonary resuscitation (CPR) and first aid provided by an instructor who holds the respective instructor certification; and

E. Applicants for licensure shall have completed no less than six hundred twenty-five (625) clock hours. Hours may be completed in any combination identified in subsection (1)(C) as long as the minimum number of hours are met in each category; and

(E) An applicant completing a massage therapy program consisting of less than [five hundred (500)] six hundred twentyfive (625) hours of supervised instruction from a Missouri Coordinating Board of Higher Education (CBHE) approved school, Missouri Department of Elementary and Secondary Education (DESE) approved vocational program or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education or an equivalent approving agency for out-of-state schools, or who has completed a massage therapy program deficient in clock hours according to 20 CSR 2197-2.010(1)(C)4.A.-D. may complete deficiencies at either a Missouri CBHE approved school, DESE approved vocational program, mentorship approved by the board, or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education, or an out-of-state school approved by an agency equivalent to CBHE; and

AUTHORITY: sections 324.240, 324.243, 324.245, 324.265, 324.267, and 324.270, RSMo 2016. This rule originally filed as 4 CSR 197-2.010. Original rule filed Feb. 25, 2000, effective Sept. 30, 2000. For intervening history, please consult the **Code of State Regulations**. Emergency filed May 24, 2024, effective July 1, 2024, expires February 27, 2025. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.

PUBLIC COST: This emergency amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the time the emergency is effective.

PRIVATE COST: This emergency amendment will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective. he Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo.

#### EXECUTIVE ORDER 24-07

WHEREAS, Governor Michael L. Parson declared a State of Emergency under Executive Order 24-06 on May 2, 2024; and

WHEREAS, Executive Order 24-06 is set to expire on May 30, 2024; and

WHEREAS, I have been advised by the State Emergency Management Agency that extending Executive Order 24-06, and the State of Emergency declared therein, is necessary to continue addressing the ongoing and forecasted severe storm systems; and

WHEREAS, the severe storm systems beginning on April 25, 2024, and continuing, have created or have the potential to create a condition of distress and hazard to the safety, welfare, and property of the people of the State of Missouri beyond the capabilities of some local jurisdictions and other established agencies; and

WHEREAS, the State of Missouri will continue to be proactive where the health and safety of its people are concerned.

NOW, THEREFORE, I, MICHAEL L. KEHOE, ACTING GOVERNOR OF THE STATE OF MISSOURI, by virtue of the authority vested in me by the Constitution and the laws of the State of Missouri, including sections 44.100 and 44.110, RSMo, do hereby extend Executive Order 24-06, and the State of Emergency declared therein, until June 30, 2024, unless terminated or extended by subsequent order.

I further authorize and direct state agencies to provide assistance as needed.



Seal of the State of Missouri, in the City of Jefferson, on this 30th day of May, 2024.

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great

MICHAEL L. KEHOE ACTING GOVERNOR

JOHN R. ASHCRO SECRETARY OF STATE

ATTEST:

**RECEIVED & FILED** 

MAY 3 0 2024

SECRETARY OF STATE COMMISSIONS DIVISION

# **PROPOSED RULES**

The text of proposed rules and changes will appear under this heading. A notice of proposed rulemaking is required to contain an explanation of any new rule or any change in an existing rule and the reasons therefor. This explanation is set out in the PURPOSE section of each rule. A citation of the legal authority to make rules is also required, and appears following the text of the rule, after the word "Authority."

**E**ntirely new rules are printed without any special symbology under the heading of proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules that are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

A n important function of the *Missouri Register* is to solicit and encourage public participation in the rulemaking process. The law provides that for every proposed rule, amendment, or rescission there must be a notice that anyone may comment on the proposed action. This comment may take different forms.

I f an agency is required by statute to hold a public hearing before making any new rules, then a Notice of Public Hearing will appear following the text of the rule. Hearing dates must be at least thirty (30) days after publication of the notice in the *Missouri Register*. If no hearing is planned or required, the agency must give a Notice to Submit Comments. This allows anyone to file statements in support of or in opposition to the proposed action with the agency within a specified time, no less than thirty (30) days after publication of the notice in the *Missouri Register*.

A n agency may hold a public hearing on a rule even though not required by law to hold one. If an agency allows comments to be received following the hearing date, the close-of-comments date will be used as the beginning day in the ninety- (90-) day count necessary for the filing of the order of rulemaking.

I f an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice, file a new notice of proposed rulemaking, and schedule a hearing for a date not less than thirty (30) days from the date of publication of the new notice.

Proposed Amendment Text Reminder: Boldface text indicates new matter. [Bracketed text indicates matter being deleted.]

# TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.430 Trout Permit**. The commission is amending section (1).

PURPOSE: This amendment increases the fee for a Trout Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

(1) Required in addition to the prescribed fishing permit to possess and transport trout, except in areas where a daily trout fishing tag is required or as prescribed in 3 CSR 10-6.535(5). Fee: *[ten dollars (\$10)]* twelve dollars (\$12).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section

252.040, RSMo 2016. This rule was previously filed as 3 CSR 10-5.237. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated two hundred four thousand three hundred and two dollars (\$204,302) annually.

### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.430 Trout Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

[	Estimate of the number of	Classification by types of	Estimate in the aggregate as
	entities by class which would	the business entities which	to the cost of compliance with
	likely be affected by the	would likely be affected:	the rule by the affected
	adoption of the proposed rule:	_	entities:
	Approximately 105,924	Individuals purchasing a	\$204,302 annual aggregate
	individuals	Trout Permit	

# III. WORKSHEET

[98,378 (individual adults purchasing a Trout Permit) X \$2.00 (adult permit price increase)] + [7,546 individual youth purchasing a Trout Permit X \$1.00 (youth permit price increase)] = \$196,756 + 7,546 = \$204,302

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 105,924 individuals will be purchasing a Trout Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.435 Migratory Bird Hunting Permit**. The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Migratory Bird Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

Required of any person sixteen (16) years of age or older in addition to the prescribed hunting permit to pursue, take, possess, and transport waterfowl, doves, snipe, woodcock, and rails, except for blue, snow, or Ross's geese during the Conservation Order in accordance with federal regulations as prescribed in 3 CSR 10-7.440. Fee: *[six dollars and fifty cents (\$6.50)]* seven dollars and fifty cents (\$7.50).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.240, RSMo 2016. This rule was previously filed as 3 CSR 10-5.256. Original rule filed Sept. 10, 1991, effective Feb. 6, 1992. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated sixty-three thousand three hundred sixtyseven dollars (\$63,367) annually.

I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.435 Migratory Bird Hunting Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

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Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 63,367	Individuals purchasing a	\$63,367 annual aggregate
individuals	Migratory Bird Hunting	
	Permit	

# III. WORKSHEET

63,367 (Individuals purchasing a Migratory Bird Hunting Permit) X \$1.00 (permit price increase) = \$63,367

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 63,367 individuals purchasing a Migratory Bird Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.440 Daily Fishing Permit**. The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Daily Fishing Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport fish, frogs, mussels, clams, turtles, crayfish, and live bait. Fee: *[eight dollars (\$8)]* nine dollars (\$9) per day. A permit may be purchased for multiple days.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 20, 1995, effective Jan. 1, 1996. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated two hundred eighteen thousand five hundred and forty-two dollars (\$218,542) annually.

I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.440 Daily Fishing Permit
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 129,216	Individuals purchasing a	\$218,542 annual aggregate
individuals	Daily Fishing Permit	

# III. WORKSHEET

[4,312 (residents purchasing a Daily Fishing Permit for one day) X \$1.00 (permit price increase)] + [80,241 (nonresidents purchasing a Daily Fishing Permit for one day) X \$1.00 (permit price increase)] + [44,663 (nonresidents purchasing a Daily Fishing Permit for three days) X \$3.00 (permit price increase for three days)] = \$218,542

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 4,312 residents purchasing a Daily Fishing Permit for one day, 80,241 nonresidents purchasing a Daily Fishing Permit for one day, and 44,663 nonresidents purchasing a Daily Fishing Permit for three days. These estimates are based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.445 Daily Small Game Hunting Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Daily Small Game Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To chase, pursue, take, possess, and transport birds (except turkeys), mammals (except black bears, deer, elk, and furbearers), and frogs, and to chase furbearers for training dogs during the closed season. Fee: [fourteen dollars and fifty cents (\$14.50)] fifteen dollars (\$15.00) per day. A permit may be purchased for multiple days.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 20, 1995, effective Jan. 1, 1996. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated twelve thousand nine hundred forty-six dollars (\$12,946) annually.

### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5–Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.445 Daily Small Game Hunting Permit	
Type of Rulemaking:	Proposed Amendment	

# II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Approximately 14,436 individuals	Individuals purchasing a Daily Small Game Hunting Permit	\$12,946 annual aggregate

# III. WORKSHEET

[8,708 (individuals purchasing a Daily Small Game Hunting Permit for one day) X \$0.50 (permit price increase)] + [5,728 (individuals purchasing a Daily Small Game Hunting Permit for three days) X \$1.50 (permit price increase for three days)] = \$12,946

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 8,708 individuals purchasing a Daily Small Game Hunting Permit for one day and 5,728 individuals purchasing a Daily Small Game Hunting Permit for three days. These estimates are based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.540 Nonresident Fishing Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Fishing Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To pursue, take, possess, and transport fish, frogs, mussels, clams, turtles, crayfish, and live bait. Fee: *[fifty-one dollars (\$51)]* fifty-three dollars and fifty cents (\$53.50).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.245. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated one hundred forty-nine thousand seventy dollars (\$149,070) annually.

### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.540 Nonresident Fishing Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

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	Estimate of the number of	Classification by types of	Estimate in the aggregate as
	entities by class which would	the business entities which	to the cost of compliance with
	likely be affected by the	would likely be affected:	the rule by the affected
	adoption of the proposed rule:		entities:
	Approximately 59,628	Nonresidents purchasing a	\$149,070 annual aggregate
	individuals	Nonresident Fishing	
		Permit	

# III. WORKSHEET

59,628 (nonresidents purchasing a Nonresident Fishing Permit) X \$2.50 (permit price increase) = \$149,070

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 59,628 nonresidents purchasing a Nonresident Fishing Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.545 Nonresident Small Game Hunting Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Small Game Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To chase, pursue, take, possess, and transport birds (except turkeys), mammals (except black bears, deer, elk, and furbearers), and frogs, and to chase furbearers for training dogs during the closed season. Fee: [ninety-eight dollars (\$98)] one hundred two dollars (\$102).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.270. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated twenty-eight thousand eighty-four dollars (\$28,084) annually.

### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5–Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.545 Nonresident Small Game Hunting Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 7,021	Nonresidents purchasing a	\$28,084 annual aggregate
individuals	Nonresident Small Game	
	Hunting Permit	

# III. WORKSHEET

7,021 (Nonresidents purchasing a Nonresident Small Game Hunting Permit) X \$4.00 (permit price increase) = \$28,084

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 7,021 nonresidents purchasing a Nonresident Small Game Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.551 Nonresident Firearms Any-Deer Hunting Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Firearms Any-Deer Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To pursue, take, possess, and transport one (1) deer of either sex statewide during the firearms deer hunting season. Fee: *[two hundred seventy-six dollars and fifty cents (\$276.50)]* two hundred eighty-eight dollars (\$288).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 11, 1997, effective March 1, 1998. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated two hundred forty-two thousand one hundred twenty-one dollars (\$242,121) annually.

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5–Wildlife Code: Permits

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Rule Number and Name:	3 CSR 10-5.551 Nonresident Firearms Any-Deer Hunting	l
	Permit	
Type of Rulemaking:	Proposed Amendment	

# II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:	-	entities:
Approximately 21,054	Nonresidents purchasing a	\$242,121 annual aggregate
individuals	Nonresident Firearms Any-	
	Deer Hunting Permit	

# III. WORKSHEET

21,054 (Nonresidents purchasing a Nonresident Firearms Any-Deer Hunting Permit) X \$11.50 (permit price increase) = \$242,121

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 21,054 nonresidents purchasing a Nonresident Firearms Any-Deer Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.552 Nonresident Firearms Antlerless Deer Hunting Permit.** The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Nonresident Firearms Antlerless Deer Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport one (1) antlerless deer during the firearms deer hunting season. A Nonresident Firearms Any-Deer Hunting Permit, Nonresident Managed Deer Hunting Permit, or a Nonresident Landowner Firearms Any-Deer Hunting Permit is required as a prerequisite to this permit. Fee: *[twenty-six dollars (\$26)]* twenty-seven dollars (\$27).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 8, 1998, effective March 1, 1999. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated eleven thousand thirty dollars (\$11,030) annually.

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

•	
Rule Number and Name:	3 CSR 10-5.552 Nonresident Firearms Antlerless Deer
	Hunting Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

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Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 11,030	Nonresidents purchasing a	\$11,030 annual aggregate
individuals	Nonresident Firearms	
	Antlerless Deer Hunting	
	Permit	

#### III. WORKSHEET

11,030 (Nonresidents purchasing a Nonresident Firearms Antlerless Deer Hunting Permit) X \$1.00 (permit price increase) = \$11,030

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 11,030 residents purchasing a Nonresident Firearms Antlerless Deer Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.554 Nonresident Archery Antlerless Deer Hunting Permit.** The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Archery Antlerless Deer Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To pursue, take, possess, and transport one (1) antlerless deer during the archery hunting season. A Nonresident Archer's Hunting Permit or a Nonresident Landowner Archer's Hunting Permit is required as a prerequisite to this permit. Fee: *[twenty-six dollars (\$26.00)]* twenty-seven dollars (\$27.00).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed April 29, 2004, effective Sept. 30, 2004. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated four thousand three hundred eighty-eight dollars (\$4,388) annually.

# I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.554 Nonresident Archery Antlerless Deer
	Hunting Permit
Type of Rulemaking:	Proposed Amendment

# II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as		
entities by class which would	the business entities which	to the cost of compliance with		
likely be affected by the	would likely be affected:	the rule by the affected		
adoption of the proposed rule:		entities:		
Approximately 4,388	Nonresidents purchasing a	\$4,388 annual aggregate		
individuals	Nonresident Archery			
	Antlerless Deer Hunting			
	Permit			

# III. WORKSHEET

4,388 (Nonresidents purchasing a Nonresident Archery Antlerless Deer Hunting Permit) X \$1.00 (permit price increase) = \$4,388

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 4,388 nonresidents purchasing a Nonresident Archery Antlerless Deer Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

# **MISSOURI REGISTER**

# TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.559 Nonresident Managed Deer Hunting Permit.** The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Nonresident Managed Deer Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport deer during a prescribed managed deer hunt. Fee: *[two hundred seventy-six dollars and fifty cents (\$276.50)]* two hundred eighty-eight dollars (\$288).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 8, 1998, effective March 1, 1999. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

# TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits PROPOSED AMENDMENT

**3 CSR 10-5.560 Nonresident Archer's Hunting Permit**. The commission is amending the text of the rule.

PURPOSE: This amendment increases the fee for a Nonresident Archer's Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport deer and wild turkey during the fall deer and turkey archery season and small game (except furbearers) during prescribed seasons. Fee: [two hundred seventy-six dollars and fifty cents (\$276.50)] two hundred eighty-eight dollars (\$288).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.275. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated one hundred sixty-nine thousand nine hundred fifty-nine dollars (\$169,959) annually.

I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	CSR 10-5.560 Nonresident Archer's Hunting Permit	
Type of Rulemaking:	Proposed Amendment	

#### II. SUMMARY OF FISCAL IMPACT

ľ	Estimate of the number of	Classification by types of	Estimate in the aggregate as	
	entities by class which would	the business entities which	to the cost of compliance with	
	likely be affected by the	would likely be affected:	the rule by the affected	
	adoption of the proposed rule:		entities:	
	Approximately 14,779	Nonresidents purchasing a	\$169,959 annual aggregate	
	individuals	Nonresident Archer's		
		Hunting Permit		

#### III. WORKSHEET

14,779 (Nonresidents purchasing a Nonresident Archer's Hunting Permit) X \$11.50 (permit price increase) = \$169,959

# IV. ASSUMPTIONS

For the permit year 2024, we estimate 14,779 nonresidents purchasing a Nonresident Archer's Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.565 Nonresident Turkey Hunting Permits.** The commission is amending section (1).

*PURPOSE: This amendment increases the fee for a Nonresident Turkey Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

(1) To pursue, take, possess, and transport wild turkey during the prescribed season.

(Å) Spring Season Permit. Fee: [two hundred thirty-three dollars and fifty cents (\$233.50)] two hundred forty-three dollars and fifty cents (\$243.50).

(B) Fall Season Permit. Fee: [one hundred thirty-five dollars and fifty cents (\$135.50)] one hundred forty-one dollars and fifty cents (\$141.50).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.267. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.* 

PRIVATE COST: This proposed amendment will cost private entities an estimated seventy-five thousand eight hundred eighty dollars (\$75,880) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

	Rule Number and Name:	3 CSR 10-5.565 Nonresident Turkey Hunting Permits	
	Type of Rulemaking:	Proposed Amendment	

#### II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as	
entities by class which would	the business entities which	to the cost of compliance with	
likely be affected by the	would likely be affected:	the rule by the affected	
adoption of the proposed rule:		entities:	
Approximately 7507 individuals	Nonresidents purchasing a	\$75,880 annual aggregate	
in the Spring and	Nonresident Turkey		
approximately 135 in the Fall	Hunting Permit		

#### III. WORKSHEET

7,507 (Nonresidents purchasing a Nonresident Turkey Hunting Permit for Spring Season) X \$10.00 (permit price increase) = \$75,070

135 (Nonresidents purchasing a Nonresident Turkey Hunting Permit for Fall Season) X \$6.00 (permit price increase) = \$810

\$75.070 (Spring) + \$810 (Fall) = \$75,880

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 7,642 nonresidents purchasing a Nonresident Turkey Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

#### **PAGE 977**

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.567 Nonresident Conservation Order Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Conservation Order Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To pursue, take, possess, and transport blue, snow, or Ross's geese during the Conservation Order in accordance with federal regulations and as prescribed in 3 CSR 10-7.440. Fee: [forty-nine dollars (\$49)] fifty-one dollars (\$51).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Oct. 10, 2008, effective July 1, 2009. For intervening history, please consult the **Code of State** *Regulations*. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated nine thousand two hundred forty-four dollars (\$9,244) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5–Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.567 Nonresident Conservation Order Permit
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 4,622	Nonresidents purchasing a	\$9,244 annual aggregate
individuals	Nonresident Conservation	
	Order Permit	

#### III. WORKSHEET

4,622 (Nonresidents purchasing a Nonresident Conservation Order Permit) X \$2.00 (permit price increase) = \$9,244

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 4,622 nonresidents purchasing a Nonresident Conservation Order Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.570 Nonresident Furbearer Hunting and Trapping Permit**. The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Nonresident Furbearer Hunting and Trapping Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To chase, pursue, take, possess, transport, and sell furbearers. Fee: *[two hundred dollars and fifty cents (\$200.50)]* two hundred eight dollars and fifty cents (\$208.50).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule previously filed as 3 CSR 10-5.292. Original rule filed June 29, 1981, effective Oct. 11, 1981. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated two thousand nine hundred eighty-four dollars (\$2,984) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

N	
Rule Number and Name:	3 CSR 10-5.570 Nonresident Furbearer Hunting and
	Trapping Permit
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

ſ	Estimate of the number of	Classification by types of	Estimate in the aggregate as
	entities by class which would	the business entities which	to the cost of compliance with
	likely be affected by the	would likely be affected:	the rule by the affected
	adoption of the proposed rule:		entities:
[	Approximately 373 individuals	Nonresidents purchasing a	\$2,984 annual aggregate
		Nonresident Furbearer	
		Hunting and Trapping	
		Permit	

#### III. WORKSHEET

373 (Nonresidents purchasing a Nonresident Furbearer Hunting and Trapping Permit) X \$8.00 (permit price increase) = \$2,984

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 373 residents purchasing a Nonresident Furbearer Hunting and Trapping Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.576 Nonresident Landowner Firearms Any-Deer Hunting Permit.** The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Nonresident Landowner Firearms Any-Deer Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport one (1) deer of either sex from qualifying land statewide during the firearms deer hunting season, by nonresident landowners as defined in this Code. Fee: [two hundred three dollars and fifty cents (\$203.50)] two hundred twelve dollars (\$212).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 19, 2000, effective March 1, 2001. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated seven thousand three hundred ninety-five dollars (\$7,395) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5–Wildlife Code: Permits

• •	
Rule Number and Name:	3 CSR 10-5.576 Nonresident Landowner Firearms Any-
	Deer Hunting Permit
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as	
entities by class which would	the business entities which	to the cost of compliance with	
likely be affected by the	would likely be affected:	the rule by the affected	
adoption of the proposed rule:		entities:	
Approximately 870 individuals	Nonresidents purchasing a	\$7,395 annual aggregate	
	Nonresident Landowner		
	Firearms Any-Deer		
	Hunting Permit		

#### III. WORKSHEET

870 (Nonresidents purchasing a Nonresident Landowner Firearms Any-Deer Hunting Permit) X \$8.50 (permit price increase) = \$7,395

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 870 residents purchasing a Nonresident Landowner Firearms Any-Deer Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.579 Nonresident Landowner Turkey Hunting Permits.** The commission is amending section (1).

PURPOSE: This amendment increases the fee for a Nonresident Landowner Firearms Turkey Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

(1) To pursue, take, possess, and transport wild turkey from qualifying land during the prescribed season, by nonresident landowners as defined in this Code.

(A) Spring Season Permit. Fee: [one hundred seventy-two dollars (\$172)] one hundred seventy-nine dollars and fifty cents (\$179.50).

(B) Fall Season Permit. Fee: *[one hundred dollars (\$100)]* one hundred four dollars and fifty cents (\$104.50).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 19, 2000, effective March 1, 2001. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated two thousand three hundred forty-eight dollars (\$2,348) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

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Rule Number and Name:	3 CSR 10-5.579 Nonresident Landowner Firearms Turkey
	Hunting Permits
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

ſ	Estimate of the number of	Classification by types of	Estimate in the aggregate as
	entities by class which would	the business entities which	to the cost of compliance with
	likely be affected by the	would likely be affected:	the rule by the affected
	adoption of the proposed rule:		entities:
	Approximately 301 individuals	Nonresidents purchasing a	\$2,348 annual aggregate
	in the Spring and	Nonresident Landowner	
	approximately 20 in the Fall	Firearms Turkey Hunting	
		Permit	

#### III. WORKSHEET

301 (Nonresidents purchasing a Nonresident Landowner Firearms Turkey Hunting Permit for Spring Season) X \$7.50 (permit price increase) = \$2,258

20 (Nonresidents purchasing a Nonresident Landowner Firearms Turkey Hunting Permit for Fall Season) X \$4.50 (permit price increase) = \$90

\$2,258 (Spring) + \$90 (Fall) = \$2,348

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 321 nonresidents purchasing a Nonresident Landowner Firearms Turkey Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.580 Nonresident Landowner Archer's Hunting Permit**. The commission is amending the text of this rule.

*PURPOSE: This amendment increases the fee for a Nonresident Landowner Archer's Hunting Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.* 

To pursue, take, possess, and transport deer from qualifying land during the fall deer archery season and small game (except furbearers) during prescribed seasons, by nonresident landowners as defined in this Code. Fee: [two hundred three dollars and fifty cents (\$203.50)] two hundred twelve dollars (\$212).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 19, 2000, effective March 1, 2001. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities an estimated three thousand seven hundred six dollars (\$3,706) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### FISCAL NOTE PRIVATE ENTITY COST

#### I. Department Title: Department of Conservation Division Title: Division 10 – Conservation Commission Chapter Title: Chapter 5—Wildlife Code: Permits

Rule Number and Name:	3 CSR 10-5.580 Nonresident Landowner Archer's Hunting Permit
Type of Rulemaking:	Proposed Amendment

#### II. SUMMARY OF FISCAL IMPACT

Estimate of the number of	Classification by types of	Estimate in the aggregate as
entities by class which would	the business entities which	to the cost of compliance with
likely be affected by the	would likely be affected:	the rule by the affected
adoption of the proposed rule:		entities:
Approximately 436 individuals	Nonresidents purchasing a Nonresident Landowner	\$3,706 annual aggregate
	Archer's Hunting Permit	

#### III. WORKSHEET

436 (Nonresidents purchasing a Nonresident Landowner Archer's Hunting Permit) X \$8.50 (permit price increase) = \$3,706

#### IV. ASSUMPTIONS

For the permit year 2024, we estimate 436 residents purchasing a Nonresident Landowner Archer's Hunting Permit. This estimate is based on permit year 2021 sales minus 5%, as historically permit sales are in a slight downward trend.

The commission based its proposed permit-price increases on information from the Federal Bureau of Labor Statistics' Consumer Price Index (CPI) related to cost-of-living increases from 2008 to 2022. CPI is a commonly used measurement of the average changes over time in prices paid by consumers for consumer goods and services. The commission is recommending a gradual price increase over 10 years at a CPI of 75% for resident permits and 100% for non-resident and commercial permits.

## **MISSOURI REGISTER**

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **PROPOSED AMENDMENT**

**3 CSR 10-5.605 Nonresident Deer Management Assistance Program Permit.** The commission is amending the text of this rule.

PURPOSE: This amendment increases the fee for a Nonresident Firearms Deer Management Assistance Program Permit to reflect a more current cost adjustment based on changes in the Consumer Price Index.

To pursue, take, possess, and transport one (1) antlerless deer from property enrolled in the department's deer management assistance program. A Nonresident Firearms Any-Deer Hunting Permit, Nonresident Landowner Firearms Any-Deer Hunting Permit, Nonresident Archer's Hunting Permit, or a Nonresident Landowner Archer's Hunting Permit is required as a prerequisite to this permit. Fee: *[twenty-six dollars (\$26.00)]* **twenty-seven dollars (\$27.00)**.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Aug. 28, 2018, effective March 1, 2019. For intervening history, please consult the **Code of State Regulations**. Amended: Filed May 24, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at https://short.mdc.mo.gov/Z49. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 1 – General Organization

#### **PROPOSED AMENDMENT**

**11 CSR 30-1.010 Organization and Operations**. The director is amending section (3).

*PURPOSE: This proposed amendment updates the current organization and methods of operation of the Department of Public Safety.* 

(3) The Department of Public Safety carries out its programs through the following major administrative divisions and units:

[(G) Office of the Adjutant General, in cooperation with the Department of Public Safety, is responsible for the development

and implementation of plans to prepare against civil disturbances, natural disasters and other emergency situations, and provides assistance during and following these events;]

[(H)](G) State Emergency Management Agency teaches Missourians how to prepare for natural disasters, responds with assistance during a disaster, and provides recovery resources following a disaster; and

[(/)](H) Veterans Commission provides benefits, assistance, skilled nursing care, and interment of eligible veterans in Missouri.

AUTHORITY: section 536.023, RSMo 2016. Original rule filed Dec. 31, 1975, effective Jan. 10, 1976. Amended: Filed Nov. 16, 1993, effective June 6, 1994. Amended: Filed March 1, 2019, effective Oct. 30, 2019. Amended: Filed May 17, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Public Safety, Director's Office, PO Box 749, Jefferson City, MO 65102-0749. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 8 – Local Government/School District Partnership Program

#### PROPOSED RESCISSION

**11 CSR 30-8.010 Definitions**. This rule defined terms used in the rules which pertain to the administration and operations of the Local Government/School District Partnership Program.

PURPOSE: The director's office has determined that this rule is no longer necessary because money has not been appropriated to this fund since 2003.

AUTHORITY: sections 589.300–589.310, RSMo (1994) and (Cum. Supp. 1996). Emergency rule filed Aug. 6, 1996, effective Aug. 16, 1996, expired Feb. 11, 1997. Original rule filed Sept. 20, 1996, effective April 30, 1997. Rescinded: Filed May 17, 2024.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Public Safety, Director's Office, PO Box 749, Jefferson City, MO 65102-0749. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

## **PROPOSED RULES**

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 8 – Local Government/School District Partnership Program

#### **PROPOSED RESCISSION**

**11 CSR 30-8.020 Eligible Applicants**. This rule established criteria to determine the eligibility of applicant agencies to receive assistance from the Local Government/School District Partnership Program.

PURPOSE: The director's office has determined that this rule is no longer necessary because money has not been appropriated to this fund since 2003.

AUTHORITY: sections 589.300–589.310, RSMo (1994) and (Cum. Supp. 1996). Emergency rule filed Aug. 6, 1996, effective Aug. 16, 1996, expired Feb. 11, 1997. Original rule filed Sept. 20, 1996, effective April 30, 1997. Rescinded: Filed May 17, 2024.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Public Safety, Director's Office, PO Box 749, Jefferson City, MO 65102-0749. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 8 – Local Government/School District Partnership Program

#### **PROPOSED RESCISSION**

**11 CSR 30-8.030 Notification and Filing Procedure**. This rule established the procedure for applying for assistance from the Local Government/School District Partnership Program.

PURPOSE: The director's office has determined that this rule is no longer necessary because money has not been appropriated to this fund since 2003.

AUTHORITY: sections 589.307, RSMo (1994). Emergency rule filed Aug. 6, 1996, effective Aug. 16, 1996, expired Feb. 11, 1997. Original rule filed Sept. 20, 1996, effective April 30, 1997. Rescinded: Filed May 17, 2024.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Public Safety, Director's Office, PO Box 749, Jefferson City, MO 65102-0749. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 8 – Local Government/School District Partnership Program

#### PROPOSED RESCISSION

**11 CSR 30-8.040 Contract Awards, Monitoring and Review.** This rule established the procedure for awarding, monitoring, and reviewing programs funded by the Local Government/ School District Partnership Program.

PURPOSE: The director's office has determined that this rule is no longer necessary because money has not been appropriated to this fund since 2003.

AUTHORITY: sections 589.300–589.310, RSMo (1994) and (Cum. Supp. 1996). Emergency rule filed Aug. 6, 1996, effective Aug. 16, 1996, expired Feb. 11, 1997. Original rule filed Sept. 20, 1996, effective April 30, 1997. Rescinded: Filed May 17, 2024.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Public Safety, Director's Office, PO Box 749, Jefferson City, MO 65102-0749. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 30 – Office of the Director Chapter 19 – Viewing Crime Scene Photographs and Video Recordings

#### **PROPOSED RULE**

#### 11 CSR 30-19.010 Credentialed Members of the Press Viewing Crime Scene Photographs and Videos

PURPOSE: This rule sets forth requirements for credentialed members of the press to view crime scene photographs and video recordings closed under section 610.205, RSMo.

(1) For purposes of this rule a "bona fide credentialed member of the press" is a member of the press who is acting in their capacity as a reporter and who represents a bona fide media organization, which is an organization that has demonstrable editorial oversight, a verifiable street address and telephone number, and has reported on matters of public concern.

(2) Any state or local agency closing crime scene photographs or video recordings pursuant to section 610.205, RSMo, notwithstanding any other provision of law to the contrary, shall make those photographs or video recordings viewable to any bona fide credentialed member of the press within fifteen (15) business days of receipt of a written request to the agency's custodian of records by the bona fide credentialed member of the press to view the photographs or video recordings. The custodian of records shall attempt to notify the next of kin of the written request for viewing within three (3) days not including the day of receipt.

(3) The viewing shall be in person and consist of the bona fide credentialed member of the press being shown the photographs or video recordings in the presence of a designated member of the agency.

(4) The bona fide credentialed member of the press shall not remove, duplicate, or record either by audio, video, or other means any material viewed under this rule.

AUTHORITY: section 610.205, RSMo Supp. 2016. Original rule filed May 17, 2024.

*PUBLIC COST: This proposed rule will not cost public entities more than five hundred dollars (\$500) in the aggregate.* 

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Public Safety by mailing Attn: 11 CSR 30-19.010, Department of Public Safety, 1101 Riverside Drive, PO Box 749, Jefferson City, MO 65101 or via email at dpsinfo@dps.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 13 – DEPARTMENT OF SOCIAL SERVICES Division 70 – MO HealthNet Division Chapter 8 – Program of All-Inclusive Care for the Elderly

#### **PROPOSED RULE**

# 13 CSR 70-8.020 Oversight of PACE Organizations and Providers

PURPOSE: This rule establishes a process of cooperation between the MO HealthNet Division (MHD) and Program of All-Inclusive Care for the Elderly (PACE) organizations and their providers to safeguard against unnecessary and inappropriate utilization of care and services provided to PACE participants.

(1) Scope. This rule implements the oversight and compliance requirements for the Program of All-Inclusive Care for the Elderly (PACE).

(2) Definitions. For purposes of this regulation, the following words and phrases are defined as follows:

(A) "Electronic medical records" (EMR) are defined at 13 CSR

70-3.210(1) Electronic Retention of Records;

(B) "PACE organization" (PO) shall refer to the entity that provides services to participants under a PACE program agreement with CMS and the SAA;

(C) "Participant" shall refer to a person who receives services through the MO HealthNet Division (MHD) and the PACE organization; and

(D) "State administering agency" (SAA) shall refer to the Missouri Department of Social Services, MO HealthNet Division (MHD), which for purposes of this rule includes Missouri Medicaid Audit and Compliance (MMAC).

(3) Oversight Process.

(A) The PACE organization shall cooperate with the SAA's evaluation, oversight, and ongoing monitoring. The PACE organization's cooperation shall include the following:

1. Permitting the SAA access to inspect any physical locations involved with the PACE organization's services;

2. Giving the SAA access to the PO's electronic medical records for five (5) consecutive days each month as determined by the SAA for focused reviews.

A. The PO will have ten (10) business days after notification by email to provide access to the PO's EMR for its focused review;

3. Providing the SAA with copies of any requested records regarding the PACE organization and services offered to PACE participants through file transfer protocol (FTP) or encrypted email within five (5) business days of the request; and

4. Conducting an annual audit which the SAA may conduct remotely and on-site.

A. A remote audit may include but not be limited to a review of participant files, grievance and appeals logs, call logs, service logs, changes to policies and procedures, and personnel files.

B. An on-site audit may include but not be limited to observations of participants in any settings, and observations and reviews of compliance with policies and procedures.

(B) The PO will be referred to MMAC for any suspected cases of fraud, waste, and abuse.

(4) The PACE organizations and their providers shall comply with the provisions of 13 CSR 70-3.030 and are subject to 13 CSR 65-2.

AUTHORITY: sections 208.153, 208.201, and 660.017, RSMo 2016, and section 208.152, RSMo Supp. 2023. Original rule filed May 16, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### **PAGE 990**

## **PROPOSED RULES**

#### TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES Division 20 – Division of Community and Public Health Chapter 80 – Coroner Standards and Training Commission

#### **PROPOSED RULE**

## 19 CSR 20-80.010 Training Standards Relating to the Office of the Coroner

## *PURPOSE: This rule establishes training standards relating to the office of county coroner.*

(1) To fulfill the requirements set forth in sections 58.035 and 58.095, RSMo, at least twenty (20) hours of classroom instruction is required each calendar year and shall relate to the operation of the office, the legal responsibilities of the office, and the technical skills and knowledge required of the office. Acceptable training shall include but not be limited to instruction in best practices or standards, as certified, recognized, or otherwise endorsed by nationally or internationally recognized organizations such as the American Academy of Forensic Sciences, International Association of Coroners and Medical Examiners, and the National Institute of Justice, relating to administrative standards and ethics of the profession, pathology, toxicology, histology, and other associated medico-legal sciences.

(A) Relating to coroner training standards, particular instructional emphasis shall include and be provided, at a minimum, on properly conducting, establishing, facilitating, overseeing, performing, or utilizing the following:

1. Autopsies;

- 2. Body or remains handling and transport;
- 3. Chain of custody and confidentiality;
- 4. Ethical conduct;
- 5. Etiology and medical certification;
- 6. Evidence, inventory, property, and samples;
- 7. Illicit drug handling;
- 8. Infant and child fatalities;
- 9. Laboratory services;
- 10. Mass fatalities;
- 11. Notification procedures;
- 12. Organ and tissue donation;
- 13. Occupational deaths;
- 14. Personal protective equipment;

15. Release of documents, photographs, and other information;

- 16. Reporting of probable contagious diseases;
- 17. Scene investigation, documentation, and safety;
- 18. Sample or specimen collection; and
- 19. Statutory and regulatory requirements.

AUTHORITY: section 58.035, RSMo Supp. 2023. Original rule filed May 31, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Department of Health and Senior Services, Bureau of Vital Records, Dylan Bryant, State Registrar, PO Box 570, Jefferson City, MO 65102, or via email at Dylan.Bryant@health.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES

#### Division 30 – Division of Regulation and Licensure Chapter 40 – Comprehensive Emergency Medical Services Systems Regulations

#### **PROPOSED AMENDMENT**

**19 CSR 30-40.600 Outside the Hospital Do-Not-Resuscitate (OHDNR)**. The department is amending sections (1)–(4), adding a new section (3), updating and adding forms, and renumbering as necessary.

PURPOSE: This amendment adds criteria regarding patients under the age of eighteen (18) and emergency medical services, adds advanced emergency medical technicians and paramedics to the definition of emergency personnel and criteria regarding electronic handling of do-not-resuscitate orders, updates the OHDNR order form and instruction form that are included herein, adds department-approved OHDNR forms from other states and TROPP, and updates the revision date of the State Operations Manual Appendix V.

(1) As used in this rule, the following terms shall mean[:] -

(D) "Emergency medical services personnel," paid or volunteer firefighters, law enforcement officers, first responders, emergency medical technicians, **advanced emergency medical technicians, paramedics,** or other emergency service personnel acting within the ordinary course and scope of their professions, but excluding physicians;

(J) "Patient," a person eighteen (18) years of age or older who is not incapacitated, as defined in section 475.010, RSMo, and who is otherwise competent to give informed consent to an *[outside the hospital do-not-resuscitate]* OHDNR order at the time such order is issued, and who, with his or her attending physician, has executed an [outside the hospital do-notresuscitate] OHDNR order under sections 190.600 to 190.621. RSMo. A person who has a patient's representative shall also be a patient for the purposes of sections 190.600 to 190.621, RSMo, if the person or the person's patient's representative has executed an [outside the hospital do-not-resuscitate] OHDNR order under sections 190.600 to 190.621, RSMo. A person under eighteen (18) years of age shall also be a patient for purposes of sections 190.600 to 190.621, RSMo, if the person has had a do-not-resuscitate order issued on his or her behalf under the provisions of section 191.250, RSMo; and

(K) "Patient's representative" –

1. An attorney-in-fact designated in a durable power of attorney for health care for a patient determined to be incapacitated under sections 404.800 to 404.872, RSMo; [or]

2. A guardian or limited guardian appointed under Chapter 475, RSMo, to have responsibility for an incapacitated patient[.]; or

3. A patient under the age of eighteen (18) years may have an OHDNR order signed by at least one (1) parent, by at least one (1) of the patient's legal guardian(s), or by a juvenile or family court under the provisions of section 191.250, RSMo, if the patient is under juvenile court jurisdiction under section 211.031, RSMo.

(2) A properly executed OHDNR order -

(F) Shall be signed and dated by the patient or the patient's legal representative and the patient's attending physician. A patient's attending physician may electronically sign his/her name to the OHDNR order form. A patient under the age of eighteen (18) years shall not sign and date an OHDNR order form for himself or herself. A patient under the age of eighteen (18) years may have an OHDNR order signed by at least one (1) parent, by at least one (1) of the patient's legal guardian(s), or by a juvenile or family court under the provisions of section 191.250, RSMo, if the patient is under juvenile court jurisdiction under section 211.031, RSMo;

(H) May be photocopied *[or]*, faxed, **or saved as an electronic copy**, and this photocopy *[or]*, **electronic copy**, **or** other complete facsimile of the original OHDNR order may be used for any purpose for which the original OHDNR order may be used;

(I) May be revoked at any time[. A] by a patient or a patient's representative [may revoke an OHDNR order by:]. If a patient is under the age of eighteen (18), an OHDNR order may be revoked by the patient under the age of eighteen (18), by either parent, by the patient's legal guardian, or by a juvenile or family court under the provisions of section 191.250, RSMo, if the patient is under juvenile court jurisdiction under section 211.031, RSMo. An OHDNR order may be revoked by –

1. Signing in the box on the OHDNR order form labeled revocation provision. The revocation provision box shall remain unsigned in order for the OHDNR order to remain in effect;

2. Expressing to emergency medical services personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire to be resuscitated; or

3. Destroying a patient's original OHDNR order form and any applicable OHDNR identification such as an identification card, bracelet, or necklace; and

(3) Emergency medical services personnel are authorized to comply with the OHDNR protocol when presented with OHDNR identification or an OHDNR order meeting the requirements in section (2) above. The department also authorizes emergency medical services personnel to comply with the OHDNR protocol when presented with the following forms that do not have to be purple in color, which are in compliance with the provisions of sections 190.600 to 190.621, RSMo, and are included herein –

(A) Alaska Physician Orders for Life Sustaining Treatment (POLST) Form – Emergency medical services personnel and anyone listed in section 190.606, RSMo, as immune from liability are only authorized to comply with the specific do-not-resuscitate section in Alaska's POLST Form;

(B) State of Arkansas Emergency Medical Services Do-Not-Resuscitate Order;

(C) Georgia Physician Orders for Life-Sustaining Treatment (POLST) Form – Emergency medical services personnel and anyone listed in section 190.606, RSMo, as immune from liability are only authorized to comply with the specific do-not-resuscitate section in Georgia's POLST Form;

(D) State of Indiana Out of Hospital Do-Not-Resuscitate Declaration and Order Form;

(E) New Mexico Emergency Medical Services (EMS) Do

-Not-Resuscitate (DNR) Form;

(F) Kansas–Missouri Transportable Physician Orders for Patient Preferences (TPOPP/POLST) – This form shall be signed in compliance with Missouri law by the patient's attending physician as defined in subsection (1)(A) above and the patient defined in subsection (1)(J) above or the patient's representative in subsection (1)(K) above. Emergency medical services personnel and anyone listed in section 190.606, RSMo, as immune from liability are only authorized to comply with the specific do-not-resuscitate section in the Kansas-Missouri TPOPP/POLST as long as the physician and patient or patient's representative have signed the form in accordance with Missouri law.

[(3)](4) [Emergency medical services personnel are authorized to comply with the OHDNR protocol when presented with OHDNR identification or an OHDNR order] The OHDNR protocol includes the following standardized methods or procedures:

(A) An OHDNR order shall only be effective when the patient has not been admitted to or is not being treated within a hospital or has not yet come to the emergency department as defined in the Emergency Medical Treatment and Active Labor Act (EMTALA), 42 U.S.C. section 1395dd, and the regulation 42 *C[.JF[.JR[.]* section 489.24(a) and referenced in the Centers for Medicare *[and]*& Medicaid Services State Operations Manual Appendix V–Interpretive Guideline–Responsibilities of Medicare Participating Hospitals in Emergency Cases (*[Rev. 1,* 05-21-04] Rev. 191, 07-19-19);

(B) Emergency medical services personnel shall not comply with an OHDNR order or the OHDNR protocol when the patient or patient's representative expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire to be resuscitated;

(C) Emergency medical services personnel shall not comply with an OHDNR order or the OHDNR protocol when the patient under eighteen (18) years of age, either parent of such patient, the patient's legal guardian, or the juvenile or family court if the patient is under juvenile court jurisdiction under section 211.031, RSMo, expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire for the patient to be resuscitated;

[(C)](D) An OHDNR order shall not be effective during such time as the patient is pregnant;

[(D)](E) A properly executed OHDNR order authorizes emergency medical services personnel to withhold or withdraw cardiopulmonary resuscitation from the patient in the event of cardiac or respiratory arrest. Emergency medical services personnel shall not withhold or withdraw other medical interventions, such as intravenous fluids, oxygen, or therapies other than cardiopulmonary resuscitation such as those to provide comfort care or alleviate pain. Nothing in this regulation shall prejudice any other lawful directives concerning such medical interventions and therapies;

[(E)](F) If any doubt exists about the validity of the OHDNR identification or an OHDNR order, resuscitation shall be initiated and medical control shall be contacted;

[(F)](G) If the OHDNR order or OHDNR identification is presented after basic or advanced life support procedures have started, the emergency medical services personnel shall honor the form and withhold or withdraw cardiopulmonary resuscitation from a patient who is suffering cardiac or respiratory arrest;

[(G)](H) After noting the properly executed OHDNR order or OHDNR identification, no cardiac monitoring is necessary and

no medical control contact is necessary; and

[(H)](I) Emergency medical services personnel shall document review of the OHDNR order and/or OHDNR identification in the patient care record.

[(4)](5) Single Color, Form, and Design for Additional/Optional OHDNR Identification.

(A) The OHDNR identification card -

1. Shall be signed and dated by the patient or the patient's legal representative and the patient's attending physician;

2. Shall be printed on card stock that is purple in color; and

3. Shall be three and seven-sixteenths by four and one-eighth (3 7/16  $\times$  4 1/8) inches in size and may be folded and/or laminated.

(B) The OHDNR bracelet -

1. Shall contain a representation of the geographical shape of Missouri with the word "STOP" etched in purple, imposed over the geographical shape of Missouri on the face of the bracelet; and

2. Shall contain the inscription "MO OHDNR order" on the back of the bracelet.

(C) The OHDNR necklace –

1. Shall include a medallion containing a representation of the geographical shape of Missouri with the word "STOP" etched in purple, imposed over the geographical shape of Missouri on the face of the medallion; and

2. Shall contain the inscription "MO OHDNR order" on the back of the medallion.

(D) OHDNR bracelet and necklace vendors shall obtain approval from the department prior to manufacturing and distributing an initial OHDNR bracelet and necklace for a Missouri resident. To obtain approval from the department, OHDNR bracelet and necklace vendors shall submit to the department –

1. A document expressing an interest in manufacturing and distributing OHDNR bracelets and necklaces for Missouri residents;

2. A document stating that the OHDNR vendor understands and agrees to manufacture and distribute the OHDNR bracelet and necklace for each patient only after being shown an OHDNR order issued by the patient's attending physician for the patient requesting the OHDNR bracelet or necklace. This OHDNR order must be executed by the patient or patient's representative and the patient's attending physician and on the form created by the department, included herein;

3. A document stating that the OHDNR vendor understands and agrees to send with the OHDNR bracelet or necklace a statement with the words, "Pursuant to sections 190.600– 190.621, RSMo, this OHDNR identification shall only be worn by a person who has executed an effective OHDNR order"; and

4. A prototype of the necklace and/or bracelet that meets the specifications as described herein in subsection (4)(B) or (4)(C).

(E) After review of the required documentation and prototype from an OHDNR vendor, the department may approve the OHDNR vendor to manufacture and distribute OHDNR bracelets and necklaces. A list of approved OHDNR bracelet or necklace vendors is available at the EMS Bureau office, online at www.dhss.mo.gov/EMS or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, EMS Bureau, PO Box 570, Jefferson City, MO 65102-0570.

(F) Department-approved OHDNR vendors shall be shown, for each patient requesting an OHDNR bracelet or necklace, an effective OHDNR order issued by the patient's attending

physician for the patient requesting the OHDNR bracelet or necklace. To be effective, this OHDNR order must be executed by the patient or patient's representative and the patient's attending physician and on the form created by the department, included herein.

(G) Department-approved OHDNR vendors shall send with each OHDNR necklace or bracelet manufactured and distributed to a Missouri resident a statement with the words, "Pursuant to sections 190.600–190.621, RSMo, this OHDNR identification shall only be worn by a person who has executed an effective OHDNR order."

#### OUTSIDE THE HOSPITAL DO-NOT-RESUSCITATE (OHDNR) ORDER

I,, authorize emergency medical services personnel to (name) withhold or withdraw cardiopulmonary resuscitation from me in the event I suffer cardiac or respiratory arrest. Cardiac arrest means my heart stops beating and respiratory arrest means I stop breathing.				
I understand that in the event that I suffer card and no medical procedure to restart breathing				
I understand this decision will <b>not</b> prevent me interventions, such as intravenous fluids, oxyg such as those deemed necessary to provide o (e.g. paramedics) and/or medical care directed	gen or therapies other than o comfort care or to alleviate p	cardiopulmonary resuscitation ain by any health care provider		
I understand I may revoke this order at any tin	ne.			
I give permission for this OHDNR order to be paramedics), doctors, nurses, or other health	S 1			
I hereby agree to the "Outside The Hospital D	o-Not-Resuscitate" (OHDN	R) Order.		
Patient – Printed or Typed Name		Date		
Patient's Signature or Patient Representative'	Date			
REVOCATION PROVISION				
I hereby revoke the above declaration.				
	s Signature	Date		
I hereby revoke the above declaration.	s Signature	Date		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the	VICES PERSONNEL TO W ROM THE PATIENT IN THE patient/patient's representa	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST.	VICES PERSONNEL TO W ROM THE PATIENT IN THE patient/patient's representa	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the documented in the patient's permanent medic	VICES PERSONNEL TO W ROM THE PATIENT IN THE patient/patient's representa	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR tive, medically appropriate and		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the documented in the patient's permanent medic	VICES PERSONNEL TO W ROM THE PATIENT IN THE patient/patient's representa al record.	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR tive, medically appropriate and		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the documented in the patient's permanent medic Attending Physician's Signature (Mandatory)	CONTRACTOR OF CO	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR tive, medically appropriate and Date Attending Physician's		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the documented in the patient's permanent medic Attending Physician's Signature (Mandatory) Attending Physician – Printed or Typed Name Address – Printed or Typed	Patient/patient's representa patient/patient's representa ral record.	Attending Physician's Telephone No.		
I hereby revoke the above declaration. Patient's Signature or Patient Representative' I AUTHORIZE EMERGENCY MEDICAL SER CARDIOPULMONARY RESUSCITATION FR RESPIRATORY ARREST. I affirm this order is the expressed wish of the documented in the patient's permanent medic Attending Physician's Signature (Mandatory) Attending Physician – Printed or Typed Name	VICES PERSONNEL TO W ROM THE PATIENT IN THE patient/patient's representa al record. Attending Physician's License No.	/ITHHOLD OR WITHDRAW EVENT OF CARDIAC OR tive, medically appropriate and Date Attending Physician's Telephone No. Facility or Agency Name TSIDE THE HEALTH CARE FACILITY.		

Emergency Medical Services personnel shall not comply with an outside the hospital do-not-resuscitate order when the patient or the patient's representative expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire to be resuscitated or if the patient is or is believed to be pregnant. Emergency medical services personnel shall not comply with a OHDNR order or the OHDNR protocol when the patient under eighteen (18) years of age, either parent of such patient, the patient's legal guardian, or the juvenile or family court if the patient is under juvenile court jurisdiction under section 211.031, RSMo expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire for the patient to be resuscitated.

Statutory citation 190.600-190.621 RSMo

#### Outside the Hospital Do-Not Resuscitate Order Definitions and Protocol

DEFINITIONS OF KEY TERM	S FOR THE OUTSIDE THE HOSPITAL DO-NOT RESUSCITATE (DNR) ORDER
Attending physician	(1) A physician licensed under Chapter 334, RSMo, selected by or assigned to a patient who has primary responsibility for treatment and care of the patient; or (2) If more than one physician shares responsibility for the treatment and care of a patient, one such physician who has been designated the attending physician by the patient or the patient's representative shall serve as the attending physician.
Cardiopulmonary resuscitation (CPR)	Emergency medical treatment administered to a patient in the event of the patient's cardiac or respiratory arrest, and shall include cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, defibrillation, administration of cardiac resuscitation medications, and related procedures.
Emergency medical services personnel	Paid or volunteer firefighters, law enforcement officers, first responders, emergency medical technicians, advanced emergency medical technicians, paramedics, or other emergency service personnel acting within the ordinary course and scope of their professions but excluding physicians.
Outside the hospital do-not resuscitate identification	A standardized identification card, bracelet, or necklace of a single color, form and design as set forth in 19 CSR 30-40.600 that signifies that the patient's attending physician has issued an outside the hospital do-not resuscitate order for the patient and has documented the grounds for the order in the patient's medical file.
Outside the hospital do-not resuscitate order	A written physician's order signed by the patient and the attending physician, or the patient's representative and the attending physician, which authorizes emergency medical services personnel to withhold or withdraw cardiopulmonary resuscitation from the patient in the event of cardiac or respiratory arrest.
Patient	A person eighteen years of age or older who is not incapacitated, as defined in section 475.010, RSMo, and who is otherwise competent to give informed consent to an outside the hospital do-not-resuscitate order at the time such order is issued, and who, with his or her attending physician, has executed an outside the hospital do-not-resuscitate order under sections 190.600 to 190.621, RSMo. A person who has a patient's representative shall also be a patient for the purposes of sections 190.600 to 190.621, RSMo, if the person or the person's patient's representative has executed an outside the hospital do-not-resuscitate order under sections 190.600 to 190.621, RSMo, A person under sections 190.600 to 190.621, RSMo, if the person or the person's patient's representative has executed an outside the hospital do-not-resuscitate order under sections 190.600 to 190.621, RSMo. A person under eighteen (18) years of age shall also be a patient for purposes of sections 190.600 to 190.621, RSMo if the person has had a do-not-resuscitate order issued on his or her behalf under the provisions of section 191.250, RSMo
Patient's representative	(1) An attorney in fact designated in a durable power of attorney for health care for a patient determined to be incapacitated under sections 404.800 to 404.872, RSMo; or (2) A guardian or limited guardian appointed under Chapter 475, RSMo, to have responsibility for an incapacitated patient. A patient under the age of eighteen (18) years may have an OHDNR order signed by at least one (1) parent; by at least one (1) of the patient's legal guardian(s); or by a juvenile or family court under the provisions of section 191.250, RSMo, if the patient is under juvenile court jurisdiction under section 211.031, RSMo.
QUESIDE	HE HOSPITAL DO NOT - RESUSCITATE (OHDNR) PROTOCOL

OUTSIDE THE HOSPITAL DO-NOT- RESUSCITATE (OHDNR) PROTOCOL Emergency medical services personnel are authorized to comply with the OHDNR protocol when presented with OHDNR identification or an OHDNR order. The Outside the Hospital Do Not Resuscitate (OHDNR) protocol includes the following standardized methods or procedures:

(1) An OHDNR order shall only be effective when the patient has not been admitted to or is not being treated within a hospital or has not yet come to the emergency department as defined in the Emergency Medical Treatment and Active Labor Act (EMTALA), 42 U.S.C. 1395dd, and the regulation 42 C.F.R. 489.24(a) and referenced in the Centers for Medicare and Medicaid Services State Operations Manual Appendix V – Interpretive Guideline – Responsibilities of Medicare Participating hospitals in Emergency Cases (Rev. 191, 07-19-19);

(2) Emergency medical services personnel shall not comply with an OHDNR order or the OHDNR protocol when the patient or patient's representative expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire to be resuscitated;

(3) Emergency medical services personnel shall not comply with a OHDNR order or the OHDNR protocol when the patient under eighteen (18) years of age, either parent of such patient, the patient's legal guardian, or the juvenile or family court if the patient is under juvenile court jurisdiction under section 211.031, RSMo expresses to such personnel in any manner, before or after the onset of a cardiac or respiratory arrest, the desire for the patient to be resuscitated;

(4) An OHDNR order shall not be effective during such time as the patient is pregnant;

(5) A properly executed OHDNR order authorizes emergency medical services personnel to withhold or withdraw

cardiopulmonary resuscitation from the patient in the event of cardiac or respiratory arrest. Emergency medical services personnel shall not withhold or withdraw other medical interventions, such as intravenous fluids, oxygen, or therapies other than personnel shall not withhold or withdraw other medical interventions, such as intravenous fluids, oxygen, or therapies other than personnel shall not withhold or withdraw other medical interventions, such as intravenous fluids, oxygen, or therapies other than personnels. Notice in this person of the person

cardiopulmonary resuscitation such as those to provide comfort care or alleviate pain. Nothing in this regulation shall prejudice any other lawful directives concerning such medical interventions and therapies; (6) If any doubt exists about the validity of the OHDNR identification or an OHDNR order, resuscitation shall be initiated and

medical control shall be contacted;

(7) If the OHDNR order or OHDNR identification is presented after Basic or Advanced Life Support procedures have started, the emergency medical services personnel shall honor the form and withhold or withdraw cardiopulmonary resuscitation from a patient

who is suffering cardiac or respiratory arrest;
 (8) After noting the properly executed OHDNR order or OHDNR identification, no cardiac monitoring is necessary and no medical control contact is necessary; and

(9) Emergency medical services personnel shall document review of the OHDNR order and/or OHDNR identification in the patient care record.

**MISSOURI REGISTER** 

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			Medical Record #:				
	Alaska POLST (Physici	an Orders for Life Sustaining Tre	eatment) Form				
Неа	Health care providers should complete this form only after a conversation with their patient or the patient's representative. The POLST decision-making process is for patients who are at risk for a life-threatening clinical event because they have a						
		ion, which may include advanced frailty.	atening clinical event because they have a				
Pati	ient Information.	Having a POLST form is al	ways voluntary.				
		Patient First Name:					
Thi	s is a medical order,	Middle Name/Initial:	Preferred name:				
not	an Advance Directive.	Last Name:	Suffix (Jr, Sr, etc):				
		DOB (mm/dd/yyyy):/ State	where form was completed:				
		Gender: 🗌 M 📄 F 📄 X Social Security Nu	nber's last 4 digits (optional): xxx-xx				
A. C	ardiopulmonary Resuscitatio	n Orders. Follow these orders if patient has	no pulse and is not breathing.				
( <b>1</b>	YES CPR: Attempt Resusci	tation, including mechanical ventilation,	NO CPR: Do Not Attempt Resuscitation.				
Pick	defibrillation and cardiove in Section B)	rsion. (Requires choosing Full Treatments	(May choose any option in Section B)				
B. Ir	,	w these orders if patient has a pulse and/o	r is breathing.				
		th patient or patient representative regularly to e based on goals and specific outcomes.	nsure treatments are meeting patient's care goals.				
		if choose CPR in Section A). Goal: Attempt to si ical treatments as indicated to attempt to prolong li	ustain life by all medically effective means. Provide fe, including intensive care.				
	Selective Treatments. Goa	l: Attempt to restore function while avoiding inte	nsive care and resuscitation efforts (ventilator,				
Pick 1		/ / / / / / / / / / / / / / / /	, antibiotics and IV fluids as indicated. Avoid intensive nless another treatment preference is documented in				
	and manual treatment of air		nanagement; allow natural death. Use oxygen, suction nents listed in full or select treatments unless consistent ent setting.				
	dditional Orders or Instructio	ns. These orders are in addition to those above	e.g., blood products, dialysis).				
[EM:	[EMS protocols may limit emergency responder ability to act on orders in this section.]						
D. N	Aedically Assisted Nutrition ((	Offer food by mouth if desired by patient, sa	fe and tolerated)				
1			icial means of nutrition desired				
Pic	Provide feeding through new or existing surgically-placed tubes     Intrial period for artificial nutrition but no surgically-placed tubes     Discussed but no decision made (standard of care provided)						
	GNATURE: Patient or Patient						
		I have discussed my treatment options and goa ents are consistent with the patient's known w					
	(optional)						
	er than patient, print full name of pe enting (or non-opposition in instance		Authority:				
		der (required, eSigned documents are valid)	Verbal orders are acceptable with follow up signature.				
	I have confirmed that this order was discussed with the patient or his/her representative. The orders reflect the patient's known wishes, to the best of my knowledge. [Note: Only licensed health care providers authorized by law to sign POLST form in Alaska may sign this order.]						
	(required)		Id/yyyy): Required Phone #:				
Print	ed Full Name:	/	/ License/Cert. #:				

A copied, faxed or electronic version of this form is a legal and valid medical order. This form does not expire. Version 1, June 3, 2020.

**PAGE 996** 

## **PROPOSED RULES**

### Alaska POLST Form – Page 2 \*\*\*\*\*ATTACH TO PAGE 1\*\*\*\*\*\*

Patient Full Name:					
Form Completion Information (required)					
Reviewed patient's advance directive to confirm       Yes; date of the document reviewed:         no conflict with POLST orders:       Conflict exists, notified patient (if patient lacks capacity, noted in chart)         (A POLST form does not replace an advance directive or living will)       Advance directive not available         0       No advance directive exists					
Check everyone who       Patient with decision-making capacity       Court Appointed Guardian       Parent of Minor         participated in discussion:       Legal Surrogate / Health Care Agent       Other:					
Professional Assisting Health Care Provider w/ Form Completion (if applicable):     Date (mm/dd/yyyy):     Phone #:       Full Name:     /     /					
This individual is the patient's: Physician's Assistant Social Worker Nurse Clergy Other:					
<b>Contact Information (optional)</b> Patient's Emergency Contact. (Note: Listing a person here does <u>not</u> grant them authority to be a legal representative. Only an advance directive or state law can grant that authority.)					
Full Name:     Legal Representative     Phone #:       Day:     ()       Other emergency contact     Night:					
Primary Care Provider Name: Phone: ( )					
Patient is enrolled in hospice Name of Agency: Agency Phone: ()					
Form Information & Instructions					
<ul> <li>Completing a POLST form: <ul> <li>Provider should document basis for this form in the patient's medical record notes.</li> <li>Patient representative is determined by Alaska Statute, and in accordance with state law, may be able execute or void this POLST form only if the patient lacks decision-making capacity.</li> <li>Only licensed health care providers authorized to sign POLST forms in Alaska (M.D./D.O.) can sign this form.</li> <li>Original (if available) is given to patient; provider keeps a copy in medical record.</li> <li>Last 4 digits of SSN are optional but can help identify / match a patient to their form.</li> <li>If a translated POLST form is used during conversation, attach the translation to the signed English form.</li> <li>The most recently completed valid POLST form supersedes all previously completed POLST forms.</li> </ul> </li> <li>Using a POLST form: <ul> <li>Any incomplete section of POLST creates no presumption about patient's preferences for treatment. Provide standard of care.</li> <li>No defibrillator (including automated external defibrillators) or chest compressions should be used if "No CPR" is chosen.</li> <li>For all options, use medication by any appropriate route, positioning, wound care and other measures to relieve pain and suffering.</li> </ul> </li> <li>Reviewing a POLST form: This form does not expire but should be reviewed whenever the patient: <ul> <li>(1) is transferred from one care setting or level to another;</li> <li>(2) has a substantial change in health status;</li> <li>(3) changes primary provider; or</li> <li>(4) changes his/her treatment preferences or goals of care.</li> </ul> </li> </ul>					
<ul> <li>Modifying a POLST form: This form cannot be modified. If changes are needed, void form and complete a new POLST form.</li> <li>Voiding a POLST form:         <ul> <li>If a patient or patient representative (for patients lacking capacity) wants to void the form: destroy paper form and contact patient's health care provider to void orders in patient's medical record (and POLST registry, if applicable).</li> <li>For health care providers: destroy patient copy (if possible), note in patient record form is voided and notify registries (if applicable).</li> <li>This form may be added to a secure electronic registry so health care providers can find it.</li> </ul> </li> <li>For Barcodes / ID Sticker</li> </ul>					

#### STATE OF ARKANSAS EMERGENCY MEDICAL SERVICES DO NOT RESUSCITATE ORDER

Patient's Full Name:

Signature of Patient or Health Care Proxy or Legal Guardian

Date

#### ATTENDING PHYSICIAN'S ORDER

I, the undersigned, state that I am the physician for the patient named above.

I hereby direct any and all qualified Emergency Medical Services personnel, commencing on the effective date noted below, to withhold cardiopulmonary resuscitation (cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, defibrillation, administration of cardiac resuscitation medications, and related procedures) from the patient in the event of the patient's cardiac or respiratory arrest. I further direct such personnel to provide to the patient other medical interventions such as intravenous fluids, oxygen, or other therapies deemed necessary to provide comfort care or alleviate pain.

Signature of Attending Physician

Physician's Telephone number (emergency #)

Physician's Printed/Typed Name

Date Order Written

**PAGE 998** 

# **PROPOSED RULES**

Georgia Departme	nt of Public Health		_	PHYSICIAN OF	DEES FOR LIFE-SUSTAINING TREATMENT		
Т	PHYSICIAN ORDERS FOR LIFE- SUSTAINING TREATMENT (POLST) This is a Physician Order guided by the patient's medical condition and based upon personal preferences verbalized to the Physician or expressed in an Advance Directive.						
Patient's Na							
Last four di	(First) gits of SSN:	(Middle) Date of Birth	Gender: M	lale 🔲 1	(Last) Female 🗆		
A CODE STATUS Check all that apply	CARDIOPULMONARY R CARDIOPULMONARY R CAttempt Resuscitation (CPR). CAllow Natural Death (AND) - Do Resuscitation Orders are to remain When not in cardiopulmonary arree	Not Attempt Resuscitation of the second seco	ation. gical or invasive procedu		nd is not breathing.		
B Check One	B Check B Check B Che						
C Check One	Check Determine use or limitation of antibiotics when infection occurs.						
D	ARTIFICIALLY ADMIINISTERED NUTRITION/FLUIDS						
Check One In Each Column	Check       No artificial nutrition by tube.       No IV fluids.         One       Defined trial period of artificial nutrition by tube.       Defined trial period of IV fluids.         In Each       Long-term artificial nutrition by tube.       Long-term IV fluids.						
E       To the best of my knowledge these orders are consistent with the patient's current medical condition and preferences as indicated by:         Check       My discussion with the Patient       My discussion with the Patient's Authorized Representative         My review of the Patient's Advance Directive       Verbal consent was given for an "allow natural death" order							
Physician's	Printed Name	Physician's Signature			Date		
<b>.</b>					Phone		
License No. Patient's Pri	State	Patient's Signature		Date	Phone		
Patient Authorized Representative's Printed Name (if patient lacks decision making capacity )       Representative's Signature (if patient lacks decision making capacity)       Date       Phone					Phone		

#### DIRECTIONS FOR HEALTH CARE PROFESSIONALS

- This form should be completed by a health care professional based on the patient's medical condition, and on the patient's wishes, as expressed to the physician by the patient while in a competent condition, or in the patient's advance directive, or by a representative of the patient acting with legal authority.
- This form should be signed by a physician, **and** also by the patient **or**, if the patient lacks decision making capacity, a representative acting with legal authority on behalf of the patient.
- Use of original form is strongly encouraged. Photocopies and faxes of signed POLST forms are valid.
- Any incomplete section of POLST implies full treatment for that section.
- Do not use a defibrillator (including AEDs) on a person who has chosen "allow natural death."
- Always offer fluids and nutrition by mouth if medically feasible.
- Transfer the patient to a setting better able to provide comfort when it cannot be achieved in the current care setting (*e.g.*, treatment of a hip fracture).
- A patient with capacity, or the authorized representative of a patient without capacity, may request alternative treatment.
- Treatment of dehydration is a measure which prolongs life. A patient who desires IV fluids should indicate "Limited Additional Intervention" or higher level of care.

#### SUBSEQUENT REVIEW OF THE POLST FORM

This form should be reviewed when (i) the patient is transferred from one care setting or care level to another (ii) released to return home (iii) there is substantial change in the patient's health status, or (iv) the patient's treatment preferences change. If this POLST is voided, replaced, or becomes invalid, then draw a line through sections A though D, write "VOID" in large letters with date and time, and sign by the line. After voiding the form, a new form may be completed. *If no new form is completed, full treatment and resuscitation may be provided.* 

	•			-
Date/Time of	Location of Review	Print	Outcome of Review	Physician
Review		Name of		Signature
		Reviewer		-
			No Change	
			Form Voided, new form	
			completed	
			E Form Voided, no new form	
			No Change	
			E Form Voided	
			New Form Completed	
			E Form Voided, no new form	

# This form was prepared by the Georgia Department of Public Health pursuant to Official Code of Georgia Section 29-4-18(l). O.C.G.A. § 29-4-18(k)(3) provides:

"Any person who acts in good faith in accordance with a Physician Order for Lifesustaining treatment developed pursuant to subsection (1) of this Code section shall have all of the immunity granted pursuant to Code Section 31-32-10." O.C.G.A. § **31-32-10 provides, in pertinent part:** "Each health care provider, health care facility, and any other person who acts in good faith reliance ... shall be protected and released to the same extent as though such person had interacted directly with the [patient] as a fully competent person."

# **PROPOSED RULES**



STATE OF INDIANA OUT OF HOSPITAL DO NOT RESUSCITATE DECLARATION AND ORDER

State Form 49559 (R / 9-11)



This declaration and order is effective on the date of execution and remains in effect until the death of the declarant or revocation.

OUT OF HOSPITAL DO NOT RESUSCITATE DECLARATION						
Declaration made this day of,, being of sound mind and at least eighteen (18) years of age, willfully and voluntarily make known my desires that my dying shall not be artificially prolonged under the circumstances set forth below.						
I declare: My attending physician has certified that I am a qualified person, meaning that I have a terminal condition or a medical condition such that, if I suffer cardiac or pulmonary failure, resuscitation would be unsuccessful or within a short period I would experience repeated cardiac or pulmonary failure resulting in death.						
	I direct that, if I experience cardiac or pulmonary failure in a location other than an acute care hospital, cardiopulmonary resuscitation procedures be withheld or withdrawn and that I be permitted to die naturally. My medical care may include any medical procedure necessary to provide me with comfort care or to alleviate pain.					
I understand that I may revoke this Out of Hospital Do Not Resonance or canceling this document, or by communicating to health can	are providers at the scene the desire to revoke the					
	full import of this declaration					
Signature of declarant						
Printed name of declarant						
City and state of residence						
The declarant is personally known to me, and I believe the declarant to be of sound mind. I did not sign the declarant's signature above, for, or at the direction of, the declarant. I am not a parent, spouse, or child of the declarant. I am not entitled to any part of the declarant's estate or directly financially responsible for the declarant's medical care. I am competent and at least eighteen (18) years of age.						
Signature of witness	Printed name	Date (month, day, year)				
Signature of witness	Printed name	Date (month, day, year)				

OUT OF HOSPITAL DO NOT RESUSCITATE ORDER					
I,, the attending physician of, have certified the declarant as a qualified person to make an Out Of Hospital Do Not Resuscitate Declaration, and I order health care providers having actual notice of this Out Of Hospital Do Not Resuscitate Declaration and Order not to initiate or continue cardiopulmonary resuscitation procedures on behalf of the declarant, unless the Out Of Hospital Do Not Resuscitate Declaration is revoked.					
Signature of attending physician					
Printed name of attending physician Medical license number Date (month, day, year)					



EMS 🗱 DNR

# **INSTRUCTIONS**

#### Purpose

This standardized **EMS-DNR Order (Order)** has been developed by the EMS Bureau within the Epidemiology and Response Division of the New Mexico Department of Health (DOH). It is in compliance with Section 24-10B-4I, NMSA 1978 which directs the EMS Bureau to develop a program to authorize EMS providers to honor advance directives to withhold or terminate care. The program is described fully in NMAC 7.27.6. A copy may be obtained by calling the EMS Bureau at 505-476-8200 or online at www.nmems.org.

For covered persons in cardiac or respiratory arrest, resuscitative measures to be withheld include external chest compressions, intubation, defibrillation, administration of cardiac medications and artificial respiration. The **Order** does not effect the provision of other emergency medical care, including oxygen administration, suctioning, control of bleeding, administration of analgesics and comfort care.

#### Applicability

This **Order** applies only to resuscitation attempts by health care providers in the **prehospital** setting --i.e., in patients' homes, in a long term care facility, during transport to or from a heath care facility, or in other locations outside acute care hospitals.

#### Instructions

Any adult person may execute an **Order** in conjunction with a physician. The physician, or physician's designee, shall explain to the person the full meaning of the **Order**, the available alternatives and how the **Order** may be revoked. Both the physician, or the physician's designee upon a verbal order from the physician, and the person for whom the **Order** is executed, shall sign the **Order**.

If the person for whom the **Order** is contemplated is unable to give informed consent, or is a minor, the physician, or physician's designee, shall provide the same explanation of the **Order**, the available alternatives, and how the **Order** may be revoked to an authorized heath care decision maker. If the authorized health care decision maker gives informed consent, both the physician, or the physician's designee upon a verbal order from the physician, and the authorized health care decision maker shall sign the document

**ONE SIGNED COPY** of the **Order** should be retained by the patient and placed in an envelope. Staple the Envelope Cover Sheet (which is included in this PDF document) **"EMS DNR Order inside"** to the envelope. <u>The completed form</u> (and/or the approved EMS bracelet or neck medallion) must be readily available to EMS personnel in order for the **Order** to be honored. Resuscitation attempts may be initiated until the form (or EMS bracelet/medallion) is presented and the identity of the patient is confirmed by the EMS personnel. It is recommended that the white envelope containing the **Order** be located in an obvious place that is readily available to emergency responders.

**ONE SIGNED COPY** should be retained by the physician and made part of the patient's permanent medical record. Additional copies should be made so that the **Order** can be maintained in all of the appropriate medical records.

**ONE SIGNED COPY** of the form may be used by the patient to order an *optional* EMS bracelet or neck medallion inscribed with the words "DO NOT RESUSCITATE - EMS" The MedicAlert Foundation (2323 Colorado Avenue, Turlock, CA 95382) is the EMS Bureau approved supplier of the medallions, which will be issued only upon receipt of the properly completed **Order** (together with an enrollment form and the appropriate fee). If a MedicAlert enrollment form is needed, call 1.888.633.4298 and ask for an EMS-DNR form. The fee can be waived for patients who cannot afford it, as certified by the physician or the physician's designee. Although optional, use of an EMS-DNR bracelet facilitates prompt identification of the patient and therefore is strongly encouraged.

#### Revocation

An **Order** may be revoked at any time orally or by performing an act such as burning, tearing, canceling, obliterating or by destroying the order of any part of it by the person on whose behalf it was executed or by the persons' authorized health care decision maker. If an **Order** is revoked, the patient's physician should be notified immediately and all copies of the form should be destroyed, including any copies on file with MedicAlert Foundation. All medallions and associated wallet cards should be destroyed.

#### **Additional Resources available**

To obtain a New Mexico Durable Power of Attorney for Health Care Decision Form or a Values History Form, contact the Center for Health Law and Ethics, 1111 Stanford, N.E., Albuquerque NM 87131 or call 505-277-5006. The cost for the Values form is \$3.00 and may be requested in English or Spanish.

EMS-DNR forms may be downloaded from the EMS Bureau's website, www.nmems.org. For DNR program implementation questions, please call the EMS Bureau at 505-476-8200.

# **ENVELOPE COVER SHEET**







Note: Staple this cover sheet to the envelope containing the signed EMS-DNR Order.



# EMS SDNR

# EMERGENCY MEDICAL SERVICES (EMS) DO NOT RESUSCITATE (DNR) FORM

## AN ADVANCE DIRECTIVE TO LIMIT THE SCOPE OF EMS CARE

NOTE: THIS ORDER TAKES PRECEDENCE OVER A DURABLE HEALTH CARE POWER OF ATTORNEY FOR EMS TREATMENT ONLY

I, \_\_\_\_\_\_, request limited EMS care as described in this document. If my heart stops beating or if I stop breathing, no medical procedure to restore breathing or heart functioning will be instituted, by any health care provider, including but not limited to EMS personnel.

I understand that this decision will not prevent me from receiving other EMS care, such as oxygen and other comfort care measures.

I understand that I may revoke this Order at any time.

I give permission for this information to be given to EMS personnel, doctors, nurses and other health care professionals. I hereby agree to this DNR order.

Signature

OR

Signature/Authorized Health Care Decision Maker

I affirm that this patient/authorized health care decision maker is making an informed decision and that this is the expressed directive of the patient. I hereby certify that I or my designee have explained to the patient the full meaning of the Order, available alternatives, and how the Order may be revoked. I or my designee have provided an opportunity for the patient/authorized health care decision maker to ask and have answered any questions regarding the execution of this form. A copy of this Order has been placed in the medical record. In the event of cardiopulmonary arrest, no chest compressions, artificial ventilations, intubation, defibrillation, or cardiac medications are to be initiated.

Physician's Signature/Date

Physician's Name-PRINT

Physician's Address/Phone

Note: please print three (3) copies

ONE SIGNED COPY: To be kept by patient in white envelope and immediately available to Emergency Responders ONE SIGNED COPY: To be kept in patient's permanent medical record ONE SIGNED COPY: If DNR Bracelet/Medallion is desired send to MedicAlert with enrollment form

### PAGE 1004

	FORM SHA	LL ACCOMPANY	PERSON	WHEN TRANS	FERRED (	OR DIS	CHARGED
Kansas – Missouri Transportable Physician Orders for Patient Preferences (TPOPP/POLST) This Medical Order set is based on the patient's current medical condition and preferences. Any section not completed indicates default treatment							
	for that section. The original						
Last Name	e:	First Name, MI:					
Date of Birth: Last 4 SSN or Patient ID#:							
A.	and in ulmonowy awast follow and we in <b>D</b> and <b>C</b>						ng. If patient is not in
ONE							
В.	INITIAL TREATMENT ORDERS: Follow these orders if patient has a pulse and/or is breathing.						
CHECK ONE	Reassess and discuss	treatments with p	atient and	/or representative	e regularly	to ensu	are patients care goals are met.
	Provide appropriate m		dicated in an	attempt to prolong lif	fe, including ir		by all medically effective means. advanced airway interventions,
	defibrillation, and card	ents. <u>GOAL: Attempt</u> ioversion). May use nor treatment needs cannot	i-invasive po	sitive airway pressure	ntensive care a e, antibiotics a	<u>nd resusci</u> nd IV flu	itation efforts (i.e., ventilator, ids as indicated. Avoid intensive care.
	oxygen, suction and m	Treatments. <u>GOAI</u> anual treatment of airv comfort goal. Transfer	vay obstructi	on as needed for com	fort. Avoid tre	eatments l	tent only; allow natural death. Use listed in full or selective treatments ng.
C.	MEDICALLY ADMIN	ISTERED NUTRIT	TION: Offe	er food by mouth if	f desired by	patient,	is safe and tolerated.
CHECK ONE	<ul> <li>Provide feeding through new or existing surgically-placed tubes</li> <li>Trial period for medically assisted nutrition but no surgically-placed tubes</li> <li>No medically assisted means of nutrition desired</li> <li>Not discussed or no decision made</li> </ul>						
D.	ADDITIONAL ORDER other orders. [EMS Protoc						ime trials, blood products, and n.]
E.	INFORMATION AND	SIGNATURES (E-	Signed doo	cuments are valid)			
CHECK ALL THAT APPLY	□ Patient □ Agent/DPOA Health Care □ Patient of minor □ Legal guardian						□ Legal guardian
	Signature of patient or recognized decision maker (all fields required): By signing this form, the patient/recognized decision maker voluntarily acknowledges that this treatment order is consistent with the known desires and/or best interest of the patient.						
	Print name:		Signatur	e:			The most recently completed valid TPOPP/ POLST form supersedes all previously completed TPOPP/POLST forms.
Address: Relationship: Phone:							
	Signature of authorized healthcare provider (all fields required): My signature below indicates to the best of my knowledge that these orders are consistent with the person's medical condition and preferences. (verbal orders are acceptable with follow up signature)						
	Print name of authorized provider and/or Physician: Phone:						
	Signature of authoriz	ed provider:				Date:	
	HIPAAIPERMITS DISCLOS	SURE TO HEALTH CAP	REPROFES	SIONALS AND PROX	Y DECISION N	MAKERS	AS NECESSARY FOR TREATMENT
© Center Fo	or Practical Bioethics, 1111 Main,	, Suite 500 (Harzfeld Buil	ding), Kansas	City, MO 64105   816-2	221-1100	2021	Kansas-Missouri TPOPP

**MISSOURI REGISTER** 

EORM_SH Patient Last Name:	ALL ACCOMPANY PE First Name, MI:	RSON WHEN TRAN		CHARGED N/Patient ID#:
ADVANCE CARE DIR	ECTIVES & EMERG	ENCY CONTACTS		
Healthcare Direction	e Directives (Check all ctive (Living Will) ves Unavailable Durable Power of Attorney	☐ Other Instructions of ☐ No Advance Direction	ves Exist	(Phone):
Patient's Emergen	cy Contact (if other tha	n person signing for	m) and Provider(s)	
Primary Care I Hospice Care A	Provider Name: Agency (If Applicable) N	Phone	e: Phone:	
	ders and Others Assisti			
☐ Social Worker ☐ Health Care Agent ☐ Patient Advocate		:	□ Clergy □ Family Member □ Other:	<ul> <li>Palliative Care Provider</li> <li>"Person of Care and Concern"</li> </ul>
Instructions for Completing	TPOPP/POLST			
<ul> <li>receiving providers in co for that inpatient setting v</li> <li>TPOPP/POLST is a phys</li> <li>TPOPP/POLST must be be signed by a physician, <i>I</i></li> <li>Photocopies and Faxes or</li> </ul>	mpliance with institutional p will assess the patient. ician order set and as such do completed by a health care APRN, or PA in compliance w	olicy. On admission to the bes not replace Advance E provider based on patient ith state law, regulation, ar hs are valid. Use of origin	hospital setting, a phys Directives but should set preferences and medic d scope of practice; and	orders are to be respected by all sician who will issue appropriate orders rve to clarify them. ral indications. Upon completion it must by patient <i>(or representative)</i> to be valid. puraged. A copy shall be retained in
Using TPOPP/POLST (Any incomplete section • SECTION A:	of TPOPP/POLST implies fu	Il treatment for that section	on).	
<ul> <li>If found pulseless used on a person if</li> <li>SECTION B:</li> </ul>	and not breathing, no defibri "Do Not Attempt Resuscita	llator (including automate tion" is selected.	d external defibrillator.	s) or chest compressions should be
	not be achieved in the current ting able to provide comfort	t setting, the person, inclu (e.g., treatment of a hip fr	iding someone with "Co acture).	omfort-focused Treatments" should be
<ul> <li>Non-invasive posi (BiPAP), and bag v</li> <li>Reviewing TPOPP/POLST</li> <li>TPOPP/POLST form shi</li> </ul>	valve mask (BVM) assisted re	continuous positive airw spirations.	ay pressure <i>(CPAP)</i> , bi-	level positive airway pressure
- There is a substant	ferred from one care setting ial change in the person's here the person's here the person's here the person of the	ealth status, or	r, or	
Modifying and Voiding TP	OPP/POLST			
• A patient with capacity ca It is recommended that rev and dating.	n, at any time, request alterna vocation be documented by d	ative treatment or revoke a rawing a line through Sec	TPOPP/POLST by an trions A through D, writ	y means that indicates intent to revoke. ing "VOID" in large letters, and signing
• A legally recognized decising desires of the patient or, if	sion-maker may request to m 'unknown, the patient's best	odify the orders, in collab interests.	oration with the physic	ian/APRN/PA, based on the known
For information, clir	ical guidance resources	s or to obtain more fo	orms, contact: TPC	OPP@practicalbioethics.org
				S AS NECESSARY FOR TREATMENT

© Center For Practical Bioethics, 1111 Main, Suite 500 (Harzfeld Building), Kansas City, MO 64105 | 816-221-1100

2021

## **PROPOSED RULES**

AUTHORITY: section 190.618, RSMo 2016, and section 190.613, RSMo Supp. [2008] 2023. Original rule filed Jan. 9, 2009, effective Aug. 30, 2009. Amended: Filed May 22, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with George Miller at George.Miller@health.mo.gov or Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, MO 65101-0570. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

#### TITLE 20 – DEPARTMENT OF COMMERCE AND INSURANCE Division 2197 – Board of Therapeutic Massage Chapter 2 – Massage Therapist Licensure Requirements

#### **PROPOSED AMENDMENT**

**20 CSR 2197-2.010 Application for Licensure**. The board is amending section (1).

#### PURPOSE: This amendment updates and clarifies clock hours for licensure.

(1) A person who seeks licensure as a massage therapist and has completed either [five hundred (500)] six hundred twenty-five (625) clock hours of massage therapy training in an apprenticeship with a certified mentor and has successfully passed an examination approved by the board or massage therapy studies consisting of at least [five hundred (500)] six hundred twenty-five (625) clock hours of supervised instruction from a Coordinating Board of Higher Education (CBHE) certified school, Missouri Department of Elementary and Secondary Education (DESE) approved vocational program or school, or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education or an equivalent approving body for out-of-state applicants[,] shall be at least eighteen (18) years of age and shall submit the following:

(C) Official evidence of completing [five hundred (500)] six hundred twenty-five (625) clock hours of massage therapy training in an apprenticeship with a certified mentor or an official final transcript showing successful completion of a massage therapy program to be submitted directly to the board office from the certified mentor or massage therapy program which includes[:]-

- 1. The applicant's name;
- 2. Date of enrollment;
- 3. Date of completion; and

4. Documentation that the massage therapy program consisted of at least *[five hundred (500)]* six hundred twenty-five (625) clock hours of supervised instruction which consisted of –

A. At least three hundred (300) clock hours dedicated to

massage theory and practice techniques provided directly by the certified mentor or an instructor within a massage therapy program. An instructor for massage theory and practice techniques or certified mentor shall document at least two (2) years of massage therapy practice and either be licensed as a massage therapist in this state or be licensure eligible, based upon board review of the instructor's credentials.

(I) An instructor of kinesiology or pathology within the massage therapy program shall submit verification of education and/or experience in kinesiology or pathology instruction and licensure as a massage therapist or licensure eligibility is not required;

B. **At least** *[O]***o**ne hundred (100) clock hours dedicated to the study of anatomy and physiology provided by one (1) of the following:

(I) The certified mentor who must hold an associate, bachelor, or advanced degree in a science-related field from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education that includes a course of study in anatomy and physiology. Such degrees include[,] but are not limited to[,] physical therapy, chiropractic, osteopathy, medicine, nursing, chemistry, or biology;

(II) A school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education, a massage therapy program approved by the Missouri CBHE, or an out-of-state school approved by an agency equivalent to the Missouri CBHE;

(III) The certified mentor who must have earned at least fifteen (15) semester hours or twenty-five (25) quarter hours in science or science-related courses from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education. All course work must have a passing grade and at least eight (8) semester hours *[in]* or fifteen (15) quarter hours of the course of study shall be in anatomy and physiology. For the purpose of this regulation a semester hour is equivalent to fifteen (15) clock hours and a quarter hour is equivalent to ten (10) clock hours;

(IV) An instructor within a massage therapy program who must hold an associate, bachelor, or advanced degree in a science-related field that includes a course of study in anatomy and physiology. Such degrees include[,] but are not limited to[,] physical therapy, chiropractic, osteopathy, medicine, nursing, chemistry, or biology from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education; or

(V) An instructor within a massage therapy program who must have earned at least fifteen (15) semester hours or twenty-five (25) quarter hours in science or science-related courses from a college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the U.S. Department of Education. All course work must have a passing grade and at least eight (8) semester hours or fifteen (15) quarter hours of the course of study shall be in anatomy and physiology. For the purpose of this regulation a semester hour is equivalent to fifteen (15) clock hours and a quarter hour is equivalent to ten (10) clock hours;

C. At least *[F]*fifty (50) clock hours dedicated to business practice, professional ethics, hygiene, and massage law in the state of Missouri provided by a certified mentor or an instructor within a massage therapy program with documented

experience/education in a related field; [and]

D. At least *[F]* fifty (50) clock hours dedicated to ancillary therapies provided by a certified mentor or an instructor(s) within a massage therapy program with documented experience/education in a related field. The fifty (50) clock hours shall include at a minimum cardiopulmonary resuscitation (CPR) and first aid provided by an instructor who holds the respective instructor certification; and

E. Applicants for licensure shall have completed no less than six hundred twenty-five (625) clock hours. Hours may be completed in any combination identified in subsection (1)(C) as long as the minimum number of hours are met in each category; and

(E) An applicant completing a massage therapy program consisting of less than [five hundred (500)] six hundred twenty-five (625) hours of supervised instruction from a Missouri Coordinating Board of Higher Education (CBHE) approved school, Missouri Department of Elementary and Secondary Education (DESE) approved vocational program or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education or an equivalent approving agency for out-of-state schools, or who has completed a massage therapy program deficient in clock hours according to 20 CSR 2197-2.010(1)(C)4.A.-/D.JE. may complete deficiencies at either a Missouri CBHE approved school, DESE approved vocational program, mentorship approved by the board, or school, college, university, or other institution of higher learning in the United States accredited by a regional accrediting commission recognized by the United States Department of Education, or an out-of-state school approved by an agency equivalent to CBHE; and

AUTHORITY: sections 324.240, 324.243, 324.245, **[324.265,]** 324.267, and 324.270, RSMo 2016, and section 324.265, RSMo Supp. 2023. This rule originally filed as 4 CSR 197-2.010. Original rule filed Feb. 25, 2000, effective Sept. 30, 2000. For intervening history, please consult the Code of State Regulations. Emergency filed May 24, 2024, effective July 1, 2024, expires Feb. 27, 2025. Amended: Filed May 24, 2024.

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.* 

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.* 

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Board of Therapeutic Massage, PO Box 1335, Jefferson City, MO 65102, by facsimile at (573) 751-0735, or via email at massagether@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

## **ORDERS OF RULEMAKING**

This section will contain the final text of the rules proposed by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order or rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*; an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted that has been changed from the text contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than thirty (30) days after the date of publication of the revision to the *Code of State Regulations*.

The agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments that are opposed in whole or in part to the proposed rule. The ninety-(90-) day period during which an agency shall file its order of rulemaking for publication in the Missouri Register begins either: 1) after the hearing on the proposed rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 4 – Wildlife Code: General Provisions

#### ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-4.113 Ginseng is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 448-451). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: The Conservation Commission received comments from two (2) individuals on the proposed amendment.

COMMENT #1: The commission received comments from two (2) individuals who voiced general opposition to proposed changes to this rule, however specific comments pertained to proposed amendments to 3 CSR 10-11.155 Decoys and Blinds. RESPONSE: The commission thanks the individuals for their comments. No changes have been made as a result of this comment.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 4 – Wildlife Code: General Provisions

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-4.117 Prohibited Species is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 452). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-5.205 Permits Required; Exceptions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 452). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective **July 1**, 2025.

SUMMARY OF COMMENTS: The Conservation Commission received comments from two (2) individuals on the proposed amendment.

COMMENT #1: The commission received comments from one (1) individual who voiced general opposition to proposed changes to this rule; however, specific comments pertained to proposed amendments to 3 CSR 10-11.155 Decoys and Blinds. RESPONSE: The commission thanks the individual for their comments. No changes have been made as a result of this comment.

COMMENT #2: The commission received comment from one (1) individual who voiced opposition to proposed changes to this rule, stating low-income residents should not have to pay for a permit.

RESPONSE: The commission thanks the individual for their comments. The average number of roots per pound of ginseng reported for the 2022-2023 Missouri harvest season was 199.35. Considering a conservative estimated value of ginseng to be \$450 per pound, each root is roughly \$2.25. Therefore, someone purchasing a residential ginseng harvest permit would need to gather about nine (9) roots to cover the cost of the permit. This would be less than eight (8) ounces of ginseng

July 1, 2024 Vol. 49, No. 13

**MISSOURI REGISTER** 

**PAGE 1009** 

root and is an extremely small amount to cover the initial cost necessary to legally harvest ginseng. No changes have been made to the rule as a result of this comment.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

# **3 CSR 10-5.215** Permits and Privileges: How Obtained; Not Transferable **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 452-453). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: No comments were received.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission adopts a rule as follows:

#### 3 CSR 10-5.800 Resident Ginseng Harvester Permit is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2024 (49 MoReg 453-454). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: No comments were received.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 5 – Wildlife Code: Permits

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission adopts a rule as follows:

## 3 CSR 10-5.805 Nonresident Ginseng Harvester Permit is adopted.

A notice of proposed rulemaking containing the text of the

proposed rule was published in the *Missouri Register* on April 1, 2024 (49 MoReg 455-456). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: No comments were received.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 6 – Wildlife Code: Sport Fishing: Seasons, Methods, Limits

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-6.415 Restricted Zones is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 457). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Conservation Commission received comments from three (3) individuals on the proposed amendment.

COMMENT #1: The commission received comments from three (3) individuals who voiced general opposition to proposed changes to this rule; however, specific comments pertained to proposed amendments to 3 CSR 10-11.155 Decoys and Blinds. RESPONSE: The commission thanks the individuals for their comments. No changes have been made as a result of this comment.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

#### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-7.410 Hunting Methods is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 457-458). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Conservation Commission received comments from five (5) individuals on the proposed amendment.

COMMENT #1: The commission received comments from four (4) individuals who voiced general support for proposed changes to this rule.

RESPONSE: The commission thanks the individuals for their comments. No changes have been made as a result of this comment.

COMMENT #2: The commission received comments from one (1) individual who voiced opposition to proposed changes to this rule, citing concerns individuals would use unmanned motor-driven air conveyances to locate animals to hunt instead of using them for recovery, and suggested operators of such methods be required to call the department before each use.

RESPONSE: The commission thanks the individual for their comments. The restrictions and requirements of the proposed amendment are specifically tailored to provide an additional tool for lawful hunters to recover wounded animals without impacting the general prohibition on the use of aircraft to pursue and take wildlife. The department considered many restrictions and requirements during the development of the proposed amendment to address the risk of illegal hunting under the guise of wounded animal recovery, including a requirement to notify the department before each use. Ultimately, restrictions on the possession of hunting implements during recovery activities, express restrictions on wildlife harassment, and landowner permission requirements were proposed to deter and address any misuse of this equipment. As with all regulations, the department will monitor the effectiveness of these restrictions, and would consider modifications should the need arise. No changes have been made to the rule as a result of this comment.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

#### ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

# 3 CSR 10-7.431 Deer Hunting Seasons: General Provisions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 458). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Conservation Commission received comments from four (4) individuals on the proposed amendment.

COMMENT #1: The commission received comments from two (2) individuals who voiced general support for proposed changes to this rule.

RESPONSE: The commission thanks the individuals for their comments. No changes have been made as a result of this comment.

COMMENT #2: The commission received comments from two (2) individuals who voiced opposition to proposed changes to this rule; however, specific comments were not related to the current proposal but instead related to requiring nonresidents to draw for deer permits in Missouri.

RESPONSE: The commission thanks the individuals for their comments. No changes have been made as a result of this comment.

#### TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

#### **ORDER OF RULEMAKING**

By authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-7.433 is amended.

This rule establishes the firearms deer hunting seasons, limits, and provisions for hunting and is exempted by section 536.021, RSMo 2016, from the requirements for filing as a proposed amendment.

The Department of Conservation amended 3 CSR 10-7.433 by establishing the firearms deer hunting seasons, limits, and provisions for hunting.

#### 3 CSR 10-7.433 Deer: Firearms Hunting Season

(1) The firearms deer hunting season is comprised of seven (7) portions.

(A) Antlerless portions: October 11 through 13, 2024, and December 7 through 15, 2024; use any legal deer hunting method to take antlerless deer in Adair, Audrain, Barry, Barton, Bates, Benton, Bollinger, Boone, Buchanan, Caldwell, Callaway, Camden, Cape Girardeau, Carroll, Cass, Cedar, Chariton, Christian, Clark, Clay, Clinton, Cole, Cooper, Crawford, Dade, Dallas, Daviess, DeKalb, Dent, Douglas, Franklin, Gasconade, Gentry, Greene, Grundy, Harrison, Henry, Hickory, Howard, Howell, Jackson, Jasper, Jefferson, Johnson, Knox, Laclede, Lafayette, Lawrence, Lewis, Lincoln, Linn, Livingston, Macon, Madison, Maries, Marion, McDonald, Mercer, Miller, Moniteau, Monroe, Montgomery, Morgan, Newton, Oregon, Osage, Ozark, Perry, Pettis, Phelps, Pike, Platte, Polk, Pulaski, Putnam, Ralls, Randolph, Ray, Reynolds, Ripley, Saline, Schuyler, Scotland, Shannon, Shelby, St. Charles, St. Clair, St. Francois, St. Louis, Ste. Genevieve, Stone, Sullivan, Taney, Texas, Vernon, Warren, Washington, Webster, Worth, and Wright counties.

(B) Youth portions: November 2 through 3, 2024, and November 29 through December 1, 2024; for persons at least six (6) but not older than fifteen (15) years of age; use any legal deer hunting method to take one (1) deer statewide during the November 2 through 3, 2024, portion; use any legal deer hunting method to take deer statewide during the November 29 through December 1, 2024, portion.

(C) November portion: November 16 through 26, 2024; use any legal deer hunting method to take deer statewide.

(D) CWD portion: November 27 through December 1, 2024; use any legal deer hunting method to take deer in Adair, Audrain, Barry, Barton, Bollinger, Boone, Caldwell, Camden, Carroll, Cedar, Chariton, Christian, Clark, Clay, Clinton, Cole, Crawford, Dallas, Dent, Douglas, Franklin, Gasconade, Greene, Grundy, Hickory, Howard, Howell, Jasper, Jefferson, Knox, Laclede, Lewis, Linn, Livingston, Macon, Madison, Maries, McDonald, Mercer, Monroe, Montgomery, Newton, Oregon, Osage, Ozark, Pemiscot, Perry, Phelps, Polk, Pulaski, Putnam, Randolph, Ray, Ripley, Saline, Schuyler, Scotland, Shannon, Shelby, St. Charles, St. Clair, St. Francois, Ste. Genevieve, Stone, Sullivan, Taney, Vernon, Warren, Washington, and Webster counties.

(E) Alternative methods portion: December 28, 2024, through January 7, 2025; use muzzleloader and archery methods, crossbows, atlatl, handguns, and air-powered guns as defined in 3 CSR 10-7.431 to take deer statewide.

SUMMARY OF PUBLIC COMMENTS: Seasons and limits are exempted from the requirement of filing as a proposed amendment under section 536.021, RSMo.

This amendment was filed May 30, 2024, becomes effective **July 1, 2024**.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

## ORDER OF RULEMAKING

By authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-7.435 is amended.

This rule establishes the special deer harvest restrictions for certain counties and is exempted by section 536.021, RSMo 2016, from the requirements for filing as a proposed amendment.

The Department of Conservation amended 3 CSR 10-7.435 by establishing deer harvest restrictions.

#### 3 CSR 10-7.435 Deer: Special Harvest Provisions

(1) Only antlerless deer and antlered deer with at least one (1) antler having at least four (4) antler points may be taken in the counties of Andrew, Atchison, Bates, Benton, Buchanan, Callaway, the portion of Cass County not included in the Kansas City urban zone, Cooper, Daviess, DeKalb, Gentry, Harrison, Henry, Holt, Johnson, Lafayette, Lincoln, Marion, Miller, Moniteau, Morgan, Nodaway, Pettis, Pike, the portion of Platte County not included in the Kansas City urban zone, Ralls, and Worth. No other antlered deer may be taken.

(A) An antler point is at least one inch (1") long from base to tip.

(B) The end of the main beam is a point.

(2) These special provisions apply to all deer hunting seasons and permittees, except the provisions of this rule shall not apply to persons that are fifteen (15) years of age or younger on September 15 of the current year.

SUMMARY OF PUBLIC COMMENTS: Seasons and limits are exempted from the requirement of filing as a proposed amendment under section 536.021, RSMo.

This amendment was filed May 30, 2024, becomes effective **July 1, 2024**.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

#### **ORDER OF RULEMAKING**

By authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-7.437 is amended.

This rule establishes deer harvest limits by county and is exempted by section 536.021, RSMo 2016, from the requirements for filing as a proposed amendment.

The Department of Conservation amended 3 CSR 10-7.437 by establishing deer harvest limits by county.

### 3 CSR 10-7.437 Deer: Antlerless Deer Hunting Permit Availability

(1) Archery Deer Hunting Season.

(A) Resident and Nonresident Archery Antlerless Deer Hunting Permits are valid statewide.

#### (2) Firearms Deer Hunting Season.

(A) Resident and Nonresident Firearms Antlerless Deer Hunting Permits are not valid in the counties of: Atchison, Dunklin, Mississippi, New Madrid, and Pemiscot.

(B) Only one (1) Resident or Nonresident Firearms Antlerless Deer Hunting Permit per person may be filled in the counties of: Andrew, Bollinger, Butler, Carter, Holt, Iron, Nodaway, Reynolds, Scott, Stoddard, and Wayne.

(C) Only two (2) Resident or Nonresident Firearms Antlerless Deer Hunting Permits per person may be filled in the counties of: Buchanan, Caldwell, Clinton, Dade, DeKalb, Jasper, Lawrence, Madison, Ray, Shannon, and Texas.

(D) Only four (4) Resident or Nonresident Firearms Antlerless Deer Hunting Permits per person may be filled in the counties of: Adair, Audrain, Barry, Barton, Bates, Benton, Boone, Caldwell, Callaway, Camden, Cape Girardeau, Carroll, Cass, Cedar, Chariton, Christian, Clark, Clay, Cole, Cooper, Crawford, Dallas, Daviess, Dent, Douglas, Franklin, Gasconade, Gentry, Greene, Grundy, Harrison, Henry, Hickory, Howard, Howell, Jackson, Jasper, Jefferson, Johnson, Knox, Laclede, Lafayette, Lewis, Lincoln, Linn, Livingston, Macon, Maries, Marion, McDonald, Mercer, Miller, Moniteau, Monroe, Montgomery, Morgan, Newton, Oregon, Osage, Ozark, Perry, Pettis, Phelps, Pike, Platte, Polk, Pulaski, Putnam, Ralls, Randolph, Ray, Ripley, Saline, Schuyler, Scotland, Shelby, St. Charles, St. Clair, St. Francois, St. Louis, Ste. Genevieve, Stone, Sullivan, Taney, Vernon, Warren, Washington, Webster, Worth, and Wright.

SUMMARY OF PUBLIC COMMENTS: Seasons and limits are exempted from the requirement of filing as a proposed amendment under section 536.021, RSMo.

This amendment was filed May 30, 2024, becomes effective **July 1, 2024**.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 7 – Wildlife Code: Hunting: Seasons, Methods, Limits

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-7.700 Elk Hunting Seasons: General Provisions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 458-459). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

## ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

### 3 CSR 10-10.705 Commercialization is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 459). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective **July 1**, 2025.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-10.707 Resident Fur Dealer's Permit is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 459-461). No changes have been made

to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-10.708 Nonresident Fur Dealer's Permit is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 462-463). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission adopts a rule as follows:

3 CSR 10-10.800 Resident Ginseng Dealer Permit is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2024 (49 MoReg 464-465). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission adopts a rule as follows:

## **MISSOURI REGISTER**

PAGE 1013

# 3 CSR 10-10.805 Nonresident Ginseng Dealer Permit is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2024 (49 MoReg 466-467). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 10 – Wildlife Code: Commercial Permits: Seasons, Methods, Limits

#### ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission adopts a rule as follows:

## **3 CSR 10-10.810** Ginseng Dealers: Privileges, Recordkeeping, Reporting Requirements **is adopted**.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2024 (49 MoReg 468-470). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective **July 1, 2025**.

SUMMARY OF COMMENTS: The Conservation Commission received comments from one (1) individual on the proposed rule.

COMMENT #1: The commission received comments from one (1) individual who voiced opposition to the proposed rule, and who stated ginseng dealers should be allowed to sell or give away certified ginseng beyond the harvest season or harvest year and that dealers should be allowed to transport uncertified ginseng.

RESPONSE: The commission thanks the individual for their comments. There is no language in the proposed rule that would restrict buying or selling certified ginseng beyond the current harvest season or harvest year. Additionally, the holder of a Ginseng Dealer Permit can transport uncertified ginseng that comes from a licensed harvester or exempt landowner. No changes have been made to the rule as a result of this comment.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 11 – Wildlife Code: Special Regulations for Department Areas

## ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-11.130 Vehicles, Bicycles, Horses, and Horseback Riding is amended. A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 471). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 11 – Wildlife Code: Special Regulations for Department Areas

### **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

### 3 CSR 10-11.155 Decoys and Blinds is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 471). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Conservation Commission received comments from one thousand two hundred fifty-two (1,252) individuals and four (4) organizations on the proposed amendment.

COMMENT #1: The commission received comments from thirty-four (34) individuals and four (4) organizations who voiced support for proposed changes to this rule.

RESPONSE: The commission thanks the individuals for their comments. No changes have been made to the rule as a result of this comment.

COMMENT #2: The commission received comments from fourteen (14) of the thirty-four (34) individuals and four (4) organizations who voiced support for proposed changes to this rule, and whose specific comments included support for increasing hunting opportunities.

RESPONSE: The commission thanks the individuals for their comments. The intent of the changes to this rule is to provide additional opportunities for waterfowl hunting in the Upper Mississippi Conservation Area and to address historic administrative burdens associated with semi-permanent blinds being left by users for clean-up by department staff. No changes have been made to the rule as a result of this comment.

COMMENT #3: The commission received comments from seven (7) of the thirty-four (34) individuals and four (4) organizations who voiced support for proposed changes to this rule, and who voiced concern over people currently borrowing or paying to use Conservation ID numbers belonging to others in order to ensure getting drawn for a blind.

RESPONSE: The commission thanks the individuals for their comments. We have tried to modify the blind drawing process over the years to minimize these types of activities and with this proposed rule change, these issues will not occur in the future. No changes have been made to the rule as a result of this comment.

COMMENT #4: The commission received comments from three (3) of the thirty-four (34) individuals and four (4) organizations who voiced support for proposed changes to this rule, and who voiced concern that those in opposition are forging comments/petitions in an attempt to monopolize the area. Specific comments were similar to this one: "The people opposing this are forging documents/petitions and comment forms to make it appear as if they have a large following. They do not! There [*sic*] trying to claim public land as their own. Please pass this regulation and help all hunters."

RESPONSE: The commission thanks the individuals for their comments. We have conducted a thorough review of all comments received and have removed duplicates. No changes have been made to the rule as a result of this comment.

COMMENT #5: The commission received comments from one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule.

RESPONSE: The commission thanks the individuals for their comments. No changes were made to the rule as a result of this comment.

COMMENT #6: The commission received comments from one hundred twenty-nine (129) of the one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule, who voiced concern the proposed changes to this rule would result in safety issues associated with boating and hunting from a boat on the Mississippi River. RESPONSE: The commission thanks the individuals for their comments. Boating on the Mississippi River, or any body of water, requires adherence to rules and regulations put in place for safety purposes. The proposed changes to this rule will still require hunters to follow all watercraft rules and regulations such as wearing personal flotation devices, not overloading watercraft, and having all required safety gear in the watercraft. No changes have been made to the rule as a result of this comment.

COMMENT #7: The commission received comments from one hundred fifty-nine (159) of the one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule, who stated proposed changes would result in youth, the elderly, and people with disabilities no longer being able to hunt on the Mississippi River.

RESPONSE: The commission thanks the individuals for their comments. The proposed changes to this rule may require hunters to modify the way they hunt on the Mississippi River. For some locations it may be best to hunt from a boat blind; other locations are more conducive to utilizing a temporary blind or another form of a hide. All of these hunting methods can be adapted to different styles of hunting and can accommodate hunters of different ages and abilities. No changes have been made to the rule as a result of this comment.

COMMENT #8: The commission received comments from one hundred sixteen (116) of the one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule, who stated the proposed changes to this rule would result in a loss of the tradition of hunting from constructed semi-permanent blinds on the Mississippi River.

RESPONSE: The commission thanks the individuals for their comments. Proposed changes to this rule would result in waterfowl hunters selecting other methods of hunting such as from boat blinds, temporary blinds, and other forms of hides. While we acknowledge this is a break in a longstanding tradition, many waterfowl hunting methods will still be permitted, and that flexibility should accommodate both current and new waterfowl hunters. No changes have been made to the rule as a result of this comment.

COMMENT #9: The commission received comments from forty-five (45) of the one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule, who voiced concern the proposed changes to this rule would result in enforcement issues and hunters fighting with each other over hunting locations.

RESPONSE: The commission thanks the individuals for their comments. Public hunting locations in Missouri, especially for waterfowl hunting, are very popular because they are a limited resource, and each one is unique with its own set of variables. Hunters who are using public resources should take responsibility for being courteous to all the other hunters who also want to hunt. Fighting amongst waterfowl hunters has occurred under the current Mississippi River Blind Program and local law enforcement and department conservation agents have handled those issues. This proposed rule change would be handled the same way. If hunters can't be courteous to each other and fighting occurs, local law enforcement and conservation agents will handle these issues. No changes have been made to the rule as a result of this comment.

COMMENT #10: The commission received comments from nine (9) of the one thousand two hundred eighteen (1,218) individuals who voiced opposition to proposed changes to this rule, who stated constructed blinds are currently open to all hunters if not occupied a half hour before legal shooting time by the registrant or a co-registrant.

RESPONSE: The commission thanks the individuals for their comments. Currently, the restricted portion of the Upper Mississippi Conservation Area accommodates approximately ninety-two (92) staked locations whereby those are the only locations where waterfowl hunting can legally occur. The proposed changes to this rule will open many more locations and opportunities for waterfowl hunting by making all of the currently restricted portion available for hunting on a first-come first-served basis. No changes have been made to the rule as a result of this comment.

## TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 20 – Wildlife Code: Definitions

## **ORDER OF RULEMAKING**

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

#### 3 CSR 10-20.805 Definitions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on April 1, 2024 (49 MoReg 471-476). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

## **MISSOURI REGISTER**

SUMMARY OF COMMENTS: The Conservation Commission received comments from one (1) individual on the proposed amendment.

COMMENT #1: The commission received comments from one (1) individual who voiced general support for proposed changes to this rule.

RESPONSE: The commission thanks the individual for their comments. No changes have been made as a result of this comment.

## TITLE 7 – MISSOURI DEPARTMENT OF TRANSPORTATION

## Division 60 – Highway Safety and Traffic Division Chapter 2 – Breath Alcohol Ignition Interlock Device Certification and Operational Requirements

#### **ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130, 302.304, 302.309, 302.525, and 577.041, RSMo 2016, and sections 302.060 and 302.440-302.462, RSMo Supp. 2023, the commission amends a rule as follows:

#### 7 CSR 60-2.010 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 276-278). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code* of *State Regulations*.

SUMMARY OF COMMENTS: The Missouri Highways and Transportation Commission received one (1) comment from one (1) ignition interlock manufacturer on the proposed amendment.

COMMENT #1: Consumer Safety Technology, LLC, submitted a comment regarding the definition of start or starting to further encompass the inclusion of electric vehicles.

RESPONSE AND EXPLANATION OF CHANGE: Paragraph (1)(A)38. will be changed to reflect this recommendation.

#### 7 CSR 60-2.010 Definitions

(1) Definitions.

(A) The following words and terms as used in 7 CSR 60-2.010 through 7 CSR 60-2.060 have the following meaning:

1. Alcohol retest setpoint—The breath alcohol concentration at which the ignition interlock device is set for the running retest;

2. Alcohol setpoint – The breath alcohol concentration at which the ignition interlock device prevents the vehicle from starting;

3. Alveolar air – Deep lung air or alveolar breath, which is the last portion of a prolonged, uninterrupted exhalation;

4. Authorized service provider (ASP) – The entity designated by the manufacturer to provide services to include but not be limited to installation, monitoring, maintenance, and removal of the breath alcohol ignition interlock device;

5. Bogus breath sample – Any sample other than an unaltered, undiluted, and unfiltered alveolar air sample from

a driver;

6. Breath alcohol concentration (BrAC) – The amount of alcohol in a given amount of breath, expressed in weight per volume (% weight/volume) based on grams of alcohol per two hundred ten (210) liters of breath;

7. Breath alcohol ignition interlock device (BAIID) – A breath testing device, including all parts necessary for operation, e.g. handset and camera, installed in a vehicle that prevents it from operating if breath test results show a BrAC that meets or exceeds the alcohol setpoint. The device also requires the driver to continue to pass repeated breath tests while the vehicle is running to ensure that the driver remains below the alcohol setpoint. However, the interlock device will not interfere with the normal operation of the vehicle while it is in use;

8. Breath – Expired human breath containing primarily alveolar air;

9. Calibration – The process which ensures an accurate alcohol concentration reading on a device;

10. Camera – A feature of the device that incorporates photo identification or digital images of the person who is providing the breath test;

11. Circumvention – To bypass the correct operation of a BAIID by starting the vehicle by any means without first providing a breath test;

12. Commission – The Missouri Highways and Transportation Commission created by article IV, section 29, Constitution of Missouri;

13. Department – The Missouri Department of Transportation created by article IV, section 29, Constitution of Missouri;

14. Designated monitoring period – The period of time indicated by the Department of Revenue for required monitoring of the driver's ignition interlock use by the manufacturer;

15. Device – Breath alcohol ignition interlock device;

16. Division – The Highway Safety and Traffic Division under the department that is delegated the authority to administer the provisions of 7 CSR 60-2.010 through 7 CSR 60-2.060;

17. Download – The transfer of information from the interlock device's memory onto disk or other electronic or digital transfer protocol;

18. Emergency service – Unforeseen circumstances in the use and/or operation of a breath alcohol ignition interlock device, not covered by training or otherwise documented, which requires immediate action;

19. Filtered breath sample -A breath sample which has been filtered through a substance in an attempt to remove alcohol from the sample;

20. Global positioning system (GPS) – A feature of the device that will log the location (longitude and latitude), date, and time of each breath sample including any refusal, any circumvention attempt, and any attempt to tamper with the ignition interlock device;

21. Initial breath test -A breath test required to start a vehicle to ensure that the driver's BrAC is below the alcohol setpoint;

22. Installation – Mechanical placement and electrical connection of a breath alcohol ignition interlock device in a vehicle by a technician;

23. ISO – International Organization for Standardization;

24. Lockout – A condition of the device which prevents a vehicle's engine from starting unless it is serviced or recalibrated;

25. Manufacturer – A person or company responsible for

the design, construction, and/or production of a BAIID;

26. Mechanical override code – Method of overriding the breath sample requirement during the mechanical servicing of a vehicle by a mechanic utilizing a unique code provided by the manufacturer;

27. Mobile service – A portable operation of an authorized service provider, whether contained within a vehicle or temporarily erected on location, which includes all personnel and equipment necessary to conduct ignition interlock device related business and services, separately and simultaneously with its parent fixed location service centers. The mobile service center shall comply with all of the requirements provided for an authorized service provider herein;

28. Operator – Any person who operates a vehicle that has a court-ordered or Department of Revenue-required breath alcohol ignition interlock device installed;

29. Override lockout code – Method of overriding a lockout condition by providing a unique code;

30. Permanent lockout – A condition in which the device will not accept a breath test until serviced by an ASP;

31. Pure breath sample – Expired human breath containing primarily alveolar air and having a breath alcohol concentration below the alcohol setpoint of twenty-five thousandths (.025);

32. Real-time reporting – The near real-time transmission of ignition interlock data between the manufacturer's server and the operator's ignition interlock while the device is in use;

33. Refusal – The failure of a driver to provide a breath sample and complete the breath test when prompted by the device;

34. Relative within second degree of consanguinity or affinity – A spouse or domestic partner, parent, step-parent, child, step-child, grandparent, step-grandparent, grandchild, step-grandchild, brother, step-brother, sister, step-sister, mother-in-law, father-in-law, grandparent-in-law, grandchildin-law, brother-in-law, or sister-in-law;

35. Retest – Two (2) additional chances to provide a breath sample below the alcohol setpoint when the first sample failed; or three (3) chances to provide a breath alcohol sample below the alcohol setpoint on the running retest;

36. Running retest – A subsequent breath test that must be conducted within five (5) minutes after starting the vehicle and randomly during each subsequent thirty- (30-) minute time period thereafter while the vehicle is in operation;

37. Service lockout – A condition of the breath alcohol ignition interlock device that occurs when the operator fails to have the device serviced during a certain period of time and results in a permanent lockout condition;

38. Start or starting – To manipulate a vehicle's inputs or systems or to activate a motor, thereby initiating the transition of a stationary vehicle into motor-powered, driver-controlled motion;

39. Tampering—An overt, purposeful attempt to physically alter or disable an ignition interlock device, or disconnect it from its power source, or remove, alter, or deface physical anti-tampering measures, so a driver can start the vehicle without taking and passing an initial breath test and/ or blocking, moving, or disabling the camera, if required;

40. Technician – A person trained by the authorized service provider to possess the skills necessary to install, service, calibrate, and/or remove ignition interlock devices;

41. Temporary lockout – A condition in which the device will not allow the vehicle to start for fifteen (15) minutes after three (3) failed attempts to blow a pure breath sample within a ten- (10-) minute period; and

42. Violations reset-A feature of a device in which a

service reminder is activated due to one (1) of the following reasons:

A. Two (2) fifteen (15) minute temporary lockouts within a thirty- (30-) day period;

B. Any three (3) running retest refusals within a thirty-(30-) day period;

C. Any three (3) breath samples, after startup, at or above the alcohol setpoint within a thirty- (30-) day period;

D. Any attempts to circumvent or tamper with a device; or

E. When a device is not serviced on its service date.

## TITLE 7 – MISSOURI DEPARTMENT OF TRANSPORTATION

## Division 60 – Highway Safety and Traffic Division Chapter 2 – Breath Alcohol Ignition Interlock Device Certification and Operational Requirements

### ORDER OF RULEMAKING

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130, 302.304, 302.309, 302.525, 577.041, 577.600, 577.605, and 577.612, RSMo 2016, and sections 302.060 and 302.440-302.462, RSMo Supp. 2023, the commission amends a rule as follows:

### 7 CSR 60-2.030 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 278-279). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code* of *State Regulations*.

SUMMARY OF COMMENTS: The Missouri Highways and Transportation Commission received three (3) comments on the proposed amendment.

COMMENT #1: Smart Start, Inc., submitted a comment related to the fifteen- (15-) minute temporary lockout period. RESPONSE AND EXPLANATION OF CHANGE: Paragraph (1)(C)3. will be changed based on the comment to align the language with the changes proposed in paragraph (1)(C)2.

COMMENT #2: Smart Start, Inc., submitted a comment regarding the alcohol set point language.

RESPONSE AND EXPLANATION OF CHANGE: Paragraph (1)(C)5. will be changed based on the comment to align the language with the current language in paragraph (1)(C)1. and 7 CSR 60-2.030(1)(D)4.

COMMENT #3: Smart Start, Inc., submitted a comment requesting additional language be added for lighting installation for the hearing impaired.

RESPONSE AND EXPLANATION OF CHANGE: Subparagraph (1) (D)4.B. will be changed based on the comment to effectively notify deaf or hard of hearing drivers of a required breath test.

#### 7 CSR 60-2.030 Standards and Specifications

(1) Device standards and specifications. To be certified, a breath alcohol ignition interlock device must –

(C) Alcohol set point to start vehicle -

1. Have an alcohol set point below twenty-five thousandths

(.025) for initial breath test to start the vehicle;

2. Permit a maximum of two (2) attempts to blow a breath sample below the alcohol set point within a ten- (10-) minute period;

3. Cause a fifteen- (15-) minute temporary lockout when two (2) failed startup attempts occur within a ten- (10-) minute period;

4. Present a violations reset message when two (2) fifteen-(15-) minute temporary lockouts occur within a thirty- (30-) day period; and

5. When a breath sample provided is at or above the alcohol set point, the operator shall provide a second breath sample below the alcohol set point within ten (10) minutes, or it shall be reported as a violation by the manufacturer;

(D) Alcohol retest set point and running retest.

1. Provide a running retest feature.

2. Have an alcohol retest set point of twenty-five thousandths (.025).

3. Request a running retest within five (5) minutes after the start of the vehicle and randomly during each subsequent thirty- (30-) minute time period thereafter while the vehicle is in operation.

4. Activate the vehicle's horn, or other installed alarm, until the operator shuts off the engine when a device calculates a breath sample at or above the alcohol retest set point of twenty-five thousandths (.025) or when a device records a failure to provide a running retest sample within five (5) minutes.

A. Any aftermarket alarm or siren installed in a vehicle by the Authorized Service Provider (ASP) will be installed inside the passenger compartment of the vehicle.

B. Upon request of the driver, aftermarket lighting shall be installed within the vehicle by the ASP to notify hearing impaired drivers of a requested breath test. Such lighting shall be demonstrated to the division upon request.

5. Present a violations reset message when three (3) running retest breath samples at or above the alcohol retest set point occur within a thirty- (30-) day period or when three (3) running retest refusals are recorded within a thirty- (30-) day period;

## TITLE 7 – MISSOURI DEPARTMENT OF TRANSPORTATION Division 60 – Highway Safety and Traffic Division Chapter 2 – Breath Alcohol Ignition Interlock Device

Certification and Operational Requirements

### **ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130, 302.304, 302.309, 302.525, 577.041, 577.600, 577.605, and 577.612, RSMo 2016, and sections 302.060 and 302.440-302.462, RSMo Supp. 2023, the commission amends a rule as follows:

## 7 CSR 60-2.040 Responsibilities of Manufacturers is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 279). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Highways and Transportation Commission received one (1) comment on the proposed amendment.

COMMENT #1: RoadGuard Interlock, LLC, submitted a comment regarding the intention of the proposed amendment related to the additional documentation of the operator's downloaded data.

RESPONSE: There will be no changes made in response to this comment. This proposed amendment expands quality assurance measures for manufacturers when monitoring the operator's data to reduce instances of violations of 7 CSR 60-2, specifically as pertains to actions by authorized service providers (ASP) and/or operators during the servicing period. This is a data check that should already be occurring by the manufacturer(s) at time of operator certification.

## TITLE 7 – MISSOURI DEPARTMENT OF TRANSPORTATION Division 60 – Highway Safety and Traffic Division Chapter 2 – Breath Alcohol Ignition Interlock Device Certification and Operational Requirements

## ORDER OF RULEMAKING

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130, 302.304, 302.309, 302.525, 577.041, 577.600, 577.605, and 577.612, RSMo 2016, and sections 302.060 and 302.440-302.462, RSMo Supp. 2023, the commission amends a rule as follows:

#### 7 CSR 60-2.050 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 279-280). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code* of *State Regulations*.

SUMMARY OF COMMENTS: The Missouri Highways and Transportation Commission received six (6) comments on the proposed amendment.

COMMENT #1: Smart Start, Inc., commented regarding the requirement of vehicle registration documentation. RESPONSE AND EXPLANATION OF CHANGE: Subsection (1)(K) will be changed to incorporate the language 'license plate' to clarify intent.

COMMENT #2: RoadGuard Interlock, LLC, commented regarding clarification of the requirement of vehicle registration documentation by authorized service providers. RESPONSE AND EXPLANATION OF CHANGE: Language will be added to subsection (1)(K) to clarify intent.

COMMENT #3: Consumer Safety Technology, LLC, commented regarding the requirement of vehicle registration documentation, specifically who and how the vehicle registration is documented. Consumer Safety Technology, LLC, believes this requirement to be a friction point with customers and becomes a hindrance to BAIID installation.

RESPONSE AND EXPLANATION OF CHANGE: Subsection (1)(K) will be changed to clarify intent and how registration shall be documented/stored.

COMMENT #4: Smart Start, Inc., commented related to the identification verification requirement and how the authorized service provider is expected to address the scenario if the individual with the BAIID requirement is not present at time of service.

RESPONSE AND EXPLANATION OF CHANGE: Subsection (1)(U) will be changed to incorporate the documentation at time of service or removal, although the requirement will remain for time of installation.

COMMENT #5: RoadGuard Interlock, LLC, suggests removing the requirement for identification verification requirement at time of service, but supports the requirement at time of installation.

RESPONSE AND EXPLANATION OF CHANGE: Subsection (1)(U) will be changed to reflect this comment.

COMMENT #6: Consumer Safety Technology, LLC, commented concerning the proposed additional requirement, stating it would be difficult for manufacturers to monitor, especially after installation. Consumer Safety Technology, LLC, also inquired what type and level of verification is expected and what is to be used to verify.

RESPONSE AND EXPLANATION OF CHANGE: Subsection (1)(U) will be changed to incorporate the documentation at time of service or removal, although the requirement will remain for time of installation.

# 7 CSR 60-2.050 Breath Alcohol Ignition Interlock Device Security

(1) A manufacturer shall require and take steps to ensure that its authorized service providers –

(K) Document on the manufacturer's server vehicle mileage as displayed on the vehicle odometer and vehicle registration (license plate) when a device is installed, serviced, and/or removed;

(U) The individual with the BAIID requirement shall be present at the time of device installation. The authorized service provider shall document whether the individual with the BAIID requirement is present at time of device service or removal.

## TITLE 7 – MISSOURI DEPARTMENT OF TRANSPORTATION Division 60 – Highway Safety and Traffic Division Chapter 2 – Breath Alcohol Ignition Interlock Device

Certification and Operational Requirements

## **ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130, 302.304, 302.309, 302.525, 577.041, 577.600, 577.605, and 577.612, RSMo 2016, and sections 302.060 and 302.440-302.462, RSMo Supp. 2023, the commission amends a rule as follows:

## 7 CSR 60-2.060 Device Suspension and Decertification is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 280). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Highways and Transportation Commission received no comments on the proposed amendment.

## TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 70 – Division of Alcohol and Tobacco Control Chapter 2 – Rules and Regulations

## ORDER OF RULEMAKING

By the authority vested in the Division of Alcohol and Tobacco Control under section 311.660, RSMo Supp. 2023, the division amends a rule as follows:

#### 11 CSR 70-2.130 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 1, 2024 (49 MoReg 155-156). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Division of Alcohol and Tobacco Control received thirty-three (33) comments on the proposed amendment.

COMMENT #1: Thirty-one (31) individuals with no known official affiliation to a stakeholder made substantially identical comments: Matthew Klein, Caitlyn Lamb, Chloe Halterman, Tammy Roderick, Grant Weinhaus, Mike Lynch, Tanya Johnson, Kyle Schmelig, Paul Hicks, Samantha Parsons, Michelle Gardner, Heather Jones, D.F. Pratt, Donna Murphy, Emily Hill, Zachary Vaugh, Ruth Farrer, Theresa Licavoli, Mark Bartlett, Tina Asberry-Suda, Sawyer Beast, Jennifer Nax, Stefanie Zelsman, Danielle Freeman, Kelsey Volner, Asia Grant, Jessica Ousley, Thomas Smith, Wesley Hall, Edward Lowery, Barbara Hammett all questioned the need to "ban" smoking marijuana on licensed premises by arguing that there is a right to smoke marijuana on liquor-licensed premises under the 2023 constitutional amendment.

RESPONSE: The consumption of marijuana on a licensed premise is currently unlawful. The amendment to this regulation allows consumption of marijuana on a licensed premise with regulation. No changes were made as a result of this comment.

COMMENT #2: Andrew Mullins, Director of MoCann, suggested to soften the regulation of marijuana events contemplated by 11 CSR 70-2.130(14) through lowering the number of days required to give the division of alcohol and tobacco control notice from 30 days to 10 days, allow temporary barriers between rooms allowing marijuana consumption and liquor consumption respectively, and remove the requirement that there is a four-hour window between allowing the consumption of marijuana and the consumption of liquor.

RESPONSE AND EXPLANATION OF CHANGES: The division agrees to lower the requirement of 30 days' notice to 21 days' notice. The division seeks to answer all applications within 21 days, which is the minimum amount of notice we could accept. The division cannot agree to remove the permanent structure requirement because non-permanent structures

would have to be evaluated on a case-by-case basis by our agents slowing down the process of getting approved. Further, the division has had problems with temporary structures being removed as soon as agents complete the inspection. Finally, the division will lower the requirement of a 4-hour cooling-off period between consumption to 1-hour; however, the lower the cool-down period, the more likely a liquor licensee could sell to an already intoxicated person, which constitutes a violation of section 311.310, RSMo.

COMMENT #3: David Overfelt, of the Missouri Retailers Association, commented that 11 CSR 70-2.130(17) "creates an unnecessary signage requirement and enforcement that further complicates store operations."

RESPONSE: The division believes that the regulation is narrowly tailored to keep the public informed about which products contain intoxicating liquor that are not located in a section clearly designated for liquor products. This is especially necessary as more historically non-alcoholic brands (i.e., Coca-Cola, Mountain Dew, Lipton Tea, etc.) are producing liquor products under similar appearing branding. No changes were made as a result of this comment.

### 11 CSR 70-2.130 Retailer's Conduct of Business

(14) No person holding a license for the retail sale of intoxicating liquor may permit any person to smoke or imbibe marijuana on or about the licensed premises while the retail establishment is open to the public. No licensee shall create any non-public or quasi-public areas on or about the licensed premises for marijuana usage anytime when intoxicating liquor is being sold, displayed for sale, or consumed. A licensee may seek permission for, and the supervisor of alcohol and tobacco control may permit, a special event where consumption of marijuana occurs on or about the licensed premise (a "marijuana event"). The licensee must notify the supervisor of alcohol and tobacco control not less than twenty-one (21) days in advance of the marijuana event and describe the event, including the exact location of the marijuana event on the licensed premise. To be eligible, the marijuana event must occur during allowable hours of operation pursuant to section 311.290, RSMo, or any other provision of Chapter 311 relating to opening and closing; no intoxicating liquor may be sold, displayed for sale, or consumed on or about the portion of the licensed premises used for the marijuana event, and all refrigerators, cabinets, cases, boxes, and taps from which intoxicating liquor is dispensed shall be kept securely locked during the event. If the licensee wishes to continue the sale of intoxicating liquor on a separate portion of the licensed premise, not described for the marijuana event, that portion of the licensed premise must be separated by a permanent floorto-ceiling wall and be inaccessible from the patrons of the marijuana event. All patrons permitted to smoke or imbibe marijuana during the marijuana event must be quarantined from those patrons consuming intoxicating liquor and must be marked with a wristband. No patron of the marijuana event may consume intoxicating beverages on the licensed premise within one (1) hour of the commencement or conclusion of the marijuana event.

## TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 70 – Division of Alcohol and Tobacco Control

### Chapter 2 – Rules and Regulations

## **ORDER OF RULEMAKING**

By the authority vested in the Division of Alcohol and Tobacco Control under section 311.660, RSMo Supp. 2023, the division amends a rule as follows:

### 11 CSR 70-2.140 All Licensees is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 1, 2024 (49 MoReg 156). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 11 – DEPARTMENT OF PUBLIC SAFETY Division 70 – Division of Alcohol and Tobacco Control Chapter 2 – Rules and Regulations

### ORDER OF RULEMAKING

By the authority vested in the Division of Alcohol and Tobacco Control under section 311.660, RSMo Supp. 2023, the division withdraws a proposed amendment as follows:

### 11 CSR 70-2.190 Unlawful Discrimination and Price Scheduling is withdrawn.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 1, 2024 (49 MoReg 156-157). This proposed amendment is withdrawn.

SUMMARY OF COMMENTS: The Division of Alcohol and Tobacco Control received two comments on this proposed amendment. Brad Bates, of the Missouri Beer Wholesalers Association, questioned how the proposed amendment would interact with 27 CFR 11. Doug Nelson, representing Breakthru Beverage Group and Southern Glazer's Wine and Spirits, expressed broad opposition and threatened that wholesalers would intentionally discriminate against retailers. Nelson opined that the Division of Alcohol and Tobacco Control would have no authority to enforce against such discrimination. RESPONSE: As a result, the supervisor is withdrawing this rulemaking.

## TITLE 12 – DEPARTMENT OF REVENUE Division 10 – Director of Revenue Chapter 26 – Dealer Licensure

**ORDER OF RULEMAKING** 

By the authority vested in the Director of Revenue under sections 301.114 and 301.221, RSMo 2016, and sections 301.553 and 301.559, RSMo Supp. 2023, the director amends a rule as follows:

#### 12 CSR 10-26.221 Good Moral Character of Motor Vehicle Dealers, Manufacturers, Boat Dealers, Salvage Dealers, and Title Service Agents is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2024 (49 MoReg 280-281). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## TITLE 16 – RETIREMENT SYSTEMS Division 10 – The Public School Retirement System of Missouri Chapter 5 – Retirement, Options and Benefits

## **ORDER OF RULEMAKING**

By the authority vested in the Public School Retirement System under section 169.020, RSMo Supp. 2023, the division amends a rule as follows:

## 16 CSR 10-5.010 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on March 1, 2024 (49 MoReg 359-360). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Public School Retirement System received one (1) comment on the proposed amendment.

COMMENT #1: The Director of the Joint Committee on Administrative Rules noted that the amendment to subsection (6)(D) references 20 CFR 404.430 and that the referenced section needs to be incorporated by reference pursuant to section 536.031, RSMo. She believes this may be done by either adding the incorporation language at the end of subsection (6)(D) or adding another section.

RESPONSE AND EXPLANATION OF CHANGE: Subsection (6) (D) will be changed to add the incorporation by reference language.

### 16 CSR 10-5.010 Service Retirement

(6) Part-time employment is any employment which is less than full-time. Temporary-substitute employment is any employment either in a position held by a regularly employed person who is temporarily absent or in a position which is temporarily vacant.

(D) A retiree receiving a retirement benefit, other than a disability benefit, from PSRS may be employed by an employer included in that system in a position that does not normally require a person employed in that position to be duly certificated

by the Department of Elementary and Secondary Education and through such employment may earn, beginning on August 28, 2023, and ending on June 30, 2028, up to one hundred and thirty-three percent (133%) of the annual earnings exemption amount applicable to a Social Security recipient before the calendar year of attainment of full retirement age under 20 CFR section 404.430, and after June 30, 2028, up to the annual earnings exemption amount applicable to a Social Security recipient before the calendar year of attainment of full retirement age under 20 CFR section 404.430, without a discontinuance of the retiree's retirement allowance. The Social Security annual earnings exemption amount applied shall be the exemption amount in effect for the calendar year in which the school year begins. The employer shall contribute to the Public Education Employee Retirement System of Missouri (PEERS) at the rate set for that system on all salary as defined in section 169.010, RSMo, and 16 CSR 10-3.010(9) of the person so employed. Such employee shall not contribute on such earnings and shall earn no service credit in either system for such employment. If such employment exceeds the limitation on compensation, the retiree's retirement benefit from PSRS shall cease until the employment terminates or a new school year begins, and such person shall become a member of and contribute to any retirement system described in this subsection if the person satisfies the retirement system's membership eligibility requirements. A PSRS retiree who meets PSRS eligibility requirements after exceeding the limits set forth above shall not be eligible to elect membership in PEERS under section 169.712, RSMo. The provisions of this subsection shall not apply to positions held by a PSRS retiree employed by a community college included in the system, or an employer under section 169.130.4, RSMo. 20 CFR 404.430, dated May 19, 2005, is incorporated by reference in this rule as published by the National Archives in the Code of Federal Regulations and available at the National Archives, 700 Pennsylvania Ave. NW, Washington, DC 20408-0001, or at ecfr.gov. This rule does not incorporate any subsequent amendments or additions.

## TITLE 16 – RETIREMENT SYSTEMS Division 10 – The Public School Retirement System of Missouri Chapter 6 – The Public Education Employee Retirement System of Missouri

## **ORDER OF RULEMAKING**

By the authority vested in the Public School Retirement System under section 169.610, RSMo 2016, the division amends a rule as follows:

#### 16 CSR 10-6.060 Service Retirement is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on March 1, 2024 (49 MoReg 360). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

July 1, 2024 Vol. 49, No. 13

This section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs, and other items required to be published in the *Missouri Register* by law.

## TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES Division 60 – Missouri Health Facilities Review Committee Chapter 50 – Certificate of Need Program

## NOTIFICATION OF REVIEW: APPLICATION REVIEW SCHEDULE

The Missouri Health Facilities Review Committee has initiated review of the CON applications listed below. A decision is tentatively scheduled for July 25, 2024. These applications are available for public inspection at the address shown below.

### **Date Filed**

**Project Number**: Project Name City (County) Cost, Description

#### 6/10/2024

**#6112 HT**: Saint Luke's North Hospital Kansas City (Platte County) \$4,263,896, Replace MRI unit

## 6/12/2024

**#6098 HT**: Mercy Hospital South St. Louis (St. Louis County) \$1,402,974, Replace cardiac cath lab

#### 6/13/2024

**#6114 HT**: Christian Hospital Northwest Florissant (St. Louis County) \$2,111,042, Replace MRI unit

**#6115 HT**: Barnes – Jewish Hospital St. Louis (St. Louis City) \$2,131,288, Replace interventional EP lab

Any person wishing to request a public hearing for the purpose of commenting on these applications must submit a written request to this effect, which must be received by July 14, 2024. All written requests and comments should be sent to:

Chairman Missouri Health Facilities Review Committee c/o Certificate of Need Program 920 Wildwood Dr. PO Box 570 Jefferson City, MO 65102 For additional information, contact Alison Dorge at alison. dorge@health.mo.gov. The Secretary of State is required by sections 347.141 and 359.481, RSMo, to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript by email to adrules.dissolutions@sos.mo.gov.

## NOTICE OF WINDING UP FOR LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND CLAIMANTS AGAINST VACANCY GALLERY, LLC

VACANCY GALLERY LLC, a Missouri limited liability company, filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State on May 18, 2024. Any and all claims against VACANCY GALLERY LLC may be sent to:

Carmody MacDonald P.C. 120 S. Central Ave., Suite 1800 St. Louis, MO 63105

Each claim must include:

1) The name, address, and telephone number of the claimant;

2) The amount of the claim;

3) The basis for the claim; and

4) The documentation of the claim.

A claim against VACANCY GALLERY LLC will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

### NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS AGAINST MYERS VETERINARY SERVICE, LLC

On the 22nd day of May, 2024, Myers Veterinary Service LLC filed its Notice of Dissolution with the Missouri Secretary of State. The dissolution was effective on the 22nd day of May, 2024. You are hereby notified that if you believe you have a claim against Myers Veterinary Service LLC you must submit a summary in writing of the circumstances surrounding your claim to the Limited Liability Company at:

Jennifer M. Snider, Witt, Hicklin, Snider & Fain, P.C., 2300 Higgins Road, PO Box 1517, Platte City MO 64079.

The summary of your claim must include the following information:

1) The name, address and telephone number of the claimant;

2) The amount of the claim;

3) The date on which the event on which the claim is based occurred;

4) A brief description of the nature of the debt or basis for the claim; and

5) Copies of any document supporting your claim.

The deadline for claim submission is ninety (90) calendar days from the effective date of this notice. All claims against Myers Veterinary Service LLC will be barred unless the proceeding to enforce the claim is commenced within two (2) years after the publication of this notice.

## NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS AGAINST KPJS PROPERTIES, LLC

On May 30, 2024, KPJS Properties LLC filed its Notice of Winding Up with the Missouri Secretary of State. The event was effective on May 28, 2024. You are hereby notified that if you believe you have a claim against KPJS Properties LLC you must submit a summary in writing of the circumstances surrounding your claim to the Company to:

Jennifer M. Fain, Witt, Hicklin, Snider & Fain, P.C. 2300 Higgins Road, PO Box 1517 Platte City MO 64079

The summary of your claim must include the following information:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The date on which the event on which the claim is based occurred;
- 4) A brief description of the nature of the debt or the basis for the claim; and
- 5) Copies of any document supporting your claim.

The deadline for claim submission is the ninety (90) calendar days from the effective date of this notice. All claims against KPJS Properties LLC will be barred unless the proceeding to enforce the claim is commenced within two (2) years after the publication of this notice.

## NOTICE OF WINDING UP TO ALL CREDITORS AND CLAIMANTS OF HUBER PARK, LLC

You are hereby notified that Huber Park LLC, a Missouri limited liability company (the "Company"), filed a Notice of Winding Up for Limited Liability Company with the Secretary of the State of Missouri on the 31st day of May, 2024. The claim must be mailed to:

Huber Park LLC c/o Carmody MacDonald P.C. 120 S. Central Ave., Ste. 1800 St. Louis, MO 63105

In order to file a claim with the Company, you must furnish:

1) The name and address of the claimant;

2) Amount of claim;

3) Basis for the claim;

4) Documentation of the claim; and

5) The date(s) on which the event(s) on which the claim is based occurred.

A claim against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication date of this notice.

## **RULE NUMBER EMERGENCY** Agency OFFICE OF ADMINISTRATION 1 CSR 10 State Officials' Salary Compensation Schedule DEPARTMENT OF AGRICULTURE 2 CSR 30-1.020 2 CSR 30-10.010 2 CSR 70-25.005 2 CSR 70-25.010 Animal Health Animal Health 49 MoReg 395 **Plant Industries** Plant Industries

MISSOURI

REGISTER

#### July 1, 2024 **RULE CHANGES SINCE UPDATE TO CODE OF STATE REGULATIONS** Vol. 49, No. 13

PROPOSED

49 MoReg 272 49 MoReg 397

49 MoReg 848

49 MoReg 848

Order

49 MoReg 912

IN ADDITION

47 MoReg 1457

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*. Citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year – 48 (2023) and 49 (2024). MoReg refers to Missouri Register and the numbers refer to a specific Register page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable, RAN indicates a rule action notice, RUC indicates a rule under consideration, and F indicates future effective date.

2 CSR 70-25.020	Plant Industries		49 MoReg 850	
2 CSR 70-25.030	Plant Industries		49 MoReg 851	
2 CSR 70-25.050	Plant Industries		49 MoReg 851	
2 CSR 70-25.060	Plant Industries		49 MoReg 852	
2 CSR 70-25.070	Plant Industries		49 MoReg 853	
2 CSR 70-25.080	Plant Industries		49 MoReg 854	
2 CSR 70-25.090	Plant Industries		49 MoReg 854	
2 CSR 70-25.100	Plant Industries		49 MoReg 855	
2 CSR 70-25.110	Plant Industries		49 MoReg 857	
2 CSR 70-25.120	Plant Industries		49 MoReg 864	
2 CSR 70-25.130	Plant Industries		49 MoReg 865	
2 CSR 70-25.140	Plant Industries		49 MoReg 866	
2 CSR 70-25.150 2 CSR 70-25.153	Plant Industries		49 MoReg 866	
2 CSR 70-25.155 2 CSR 70-25.156	Plant Industries Plant Industries		49 MoReg 870 49 MoReg 871	
2 CSR 70-25.160	Plant Industries		49 MoReg 873R	
2 CSR 70-25.100	Plant Industries		49 MoReg 873	
2 CSR 70-25.170	Plant Industries		49 MoReg 873	
2 CSR 70 25.100	State Milk Board		48 MoReg 2276	49 MoReg 652
2 CSR 90-10.011	Weights, Measures and Consumer Protection		49 MoReg 874	15 Money 001
2 CSR 90-10.012	Weights, Measures and Consumer Protection		49 MoReg 874	
2 CSR 90-10.020	Weights, Measures and Consumer Protection		49 MoReg 875	
2 CSR 90-10.040	Weights, Measures and Consumer Protection		49 MoReg 876	
2 CSR 90-36.005	Weights, Measures and Consumer Protection		49 MoReg 603	
2 CSR 90-36.010	Weights, Measures and Consumer Protection		49 MoReg 604	
2 CSR 90-36.015	Weights, Measures and Consumer Protection		49 MoReg 605	
2 CSR 100-14.010	Missouri Agricultural and Small Business		49 MoReg 329	49 MoReg 824
0.00D 110, 4.010	Development Authority	40 M-D 000	40 M-P 070	40 M - D 010
2 CSR 110-4.010	Office of the Director	49 MoReg 263	49 MoReg 272	49 MoReg 912
2 CSR 110-4.020 2 CSR 110-4.040	Office of the Director	49 MoReg 263 49 MoReg 264	49 MoReg 273	49 MoReg 912
2 CSR 110-4.040 2 CSR 110-4.050	Office of the Director		49 MoReg 273 49 MoReg 274	49 MoReg 913
2 C3K 110-4.030	Office of the Director	49 MoReg 265	49 MOREY 2/4	49 MoReg 913
	DEPARTMENT OF CONSERVATION			
3 CSR 10-4.113	Conservation Commission		49 MoReg 448	This Issue
3 CSR 10-4.117	Conservation Commission		49 MoReg 452	This Issue
3 CSR 10-5.205	Conservation Commission		49 MoReg 452	This Issue
3 CSR 10-5.210	Conservation Commission		49 MoReg 731	
3 CSR 10-5.215	Conservation Commission		49 MoReg 452	This Issue
3 CSR 10-5.360	Conservation Commission		49 MoReg 138	49 MoReg 743
3 CSR 10-5.365	Conservation Commission		49 MoReg 140	49 MoReg 743
3 CSR 10-5.430	Conservation Commission		This Issue	
3 CSR 10-5.435	Conservation Commission		This Issue	
3 CSR 10-5.440	Conservation Commission		This Issue	
3 CSR 10-5.445	Conservation Commission		This Issue	
3 CSR 10-5.540	Conservation Commission		This Issue	
3 CSR 10-5.545	Conservation Commission		This Issue	
<u>3 CSR 10-5.551</u>	Conservation Commission		This Issue	
3 CSR 10-5.552 3 CSR 10-5.554	Conservation Commission Conservation Commission		This Issue	
3 CSR 10-5.554 3 CSR 10-5.559	Conservation Commission		This Issue This Issue	
3 CSR 10-5.560	Conservation Commission		49 MoReg 140	49 MoReg 744
9 COK 10-0.000			This Issue	TO MONEY /TT
3 CSR 10-5.565	Conservation Commission		49 MoReg 142	49 MoReg 744
2 231110 01000			This Issue	
3 CSR 10-5.567	Conservation Commission		This Issue	
3 CSR 10-5.570	Conservation Commission		This Issue	
3 CSR 10-5.576	Conservation Commission		This Issue	
3 CSR 10-5.579	Conservation Commission		49 MoReg 142	49 MoReg 745
0.00D 10 5 500	Commention Commission		This Issue	40 M-D745
3 CSR 10-5.580	Conservation Commission		49 MoReg 142	49 MoReg 745
3 CSR 10-5.605	Conservation Commission		This Issue This Issue	
<u>3 CSR 10-5.605</u> 3 CSR 10-5.800	Conservation Commission Conservation Commission		49 MoReg 453	This Issue
3 CSR 10-5.800	Conservation Commission		49 MoReg 453 49 MoReg 455	This Issue
3 CSR 10-5.805	Conservation Commission		49 MoReg 455 49 MoReg 457	This Issue
3 CSR 10-7.410	Conservation Commission		49 MoReg 457	This Issue
3 CSR 10-7.431	Conservation Commission		49 MoReg 458	This Issue
3 CSR 10-7.433	Conservation Commission		10 Inotice 100	This Issue
				10040
		1024		

# **MISSOURI REGISTER**

RULE NUMBER 3 CSR 10-7.435	AGENCY EMERGENCY Conservation Commission	y Proposed	ORDER This Issue	IN ADDITION
3 CSR 10-7.437	Conservation Commission		This Issue	
CSR 10-7.440	Conservation Commission		49 MoReg 746	
CSR 10-7.455	Conservation Commission		49 MoReg 747	
CSR 10-7.700	Conservation Commission	49 MoReg 458	This Issue	
CSR 10-7.705	Conservation Commission		49 MoReg 748	
CSR 10-7.710	Conservation Commission		49 MoReg 748	
CSR 10-7.900	Conservation Commission	49 MoReg 793	49 MoReg 749	
CSR 10-7.905	Conservation Commission	15 Money / 55	49 MoReg 749	
CSR 10-7.505		40 MoDog 450	This Issue	
	Conservation Commission	49 MoReg 459		
CSR 10-10.707	Conservation Commission	49 MoReg 459	This Issue	
CSR 10-10.708	Conservation Commission	49 MoReg 462	This Issue	
CSR 10-10.800	Conservation Commission	49 MoReg 464	This Issue	
CSR 10-10.805	Conservation Commission	49 MoReg 466	This Issue	
3 CSR 10-10.810	Conservation Commission	49 MoReg 468	This Issue	
3 CSR 10-11.130	Conservation Commission	49 MoReg 471	This Issue	
CSR 10-11.155	Conservation Commission	49 MoReg 471	This Issue	
CSR 10-20.805	Conservation Commission	49 MoReg 471	This Issue	
	DEPARTMENT OF ECONOMIC DEVELOPMENT			
		AT		
CSR 20-100.110	DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION Division of Learning Service	49 MoReg 731		
5 CSR 20-200.180	Division of Learning Services	49 MoReg 876		
5 CSR 20-400.385	Division of Learning Services	49 MoReg 539		
5 CSR 20-400.540	Division of Learning Services	49 MoReg 540		
CSR 20-400.580	Division of Learning Services	49 MoReg 276	49 MoReg 914	
CSR 20-400.610	Division of Learning Services	49 MoReg 877		
CSR 20-400.650	Division of Learning Services	49 MoReg 879		
CSR 20-400.650	Division of Learning Services	49 MoReg 880		
CSR 20-400.660	Division of Learning Services	49 MoReg 880 49 MoReg 882		
		49 WOKEY 882		
CSR 20-500.120	Division of Learning Services	49 MoReg 336		
CSR 20-500.140	Division of Learning Services	49 MoReg 337		
5 CSR 20-500.150	Division of Learning Services	49 MoReg 337		
CSR 20-500.160	Division of Learning Services	49 MoReg 338		
CSR 25-100.340	Office of Childhood 49 MoReg 81	1 49 MoReg 89	49 MoReg 749	
CSR 30-660.090	Division of Financial and Administrative Services	49 MoReg 607R		
COD 10 1 010	DEPARTMENT OF HIGHER EDUCATION AND WORKFORCE DE			
5 CSR 10-1.010	Commissioner of Higher Education	49 MoReg 735		
5 CSR 10-5.010	Commissioner of Higher Education	49 MoReg 540R 49 MoReg 541		
6 CSR 10-9.010	Commissioner of Higher Education	48 MoReg 2276	49 MoReg 753	
	MISSOURI DEPARTMENT OF TRANSPORTATION			
7 CSR 10-25.030	Missouri Highways and Transportation Commission	49 MoReg 89	49 MoReg 914	
7 CSR 10-25.060	Missouri Highways and Transportation Commission	49 MoReg 90	49 MoReg 914	
	Missouri Highways and Transportation Commission			
7 CSR 10-25.071	Missouri Highways and Transportation Commission	49 MoReg 90	49 MoReg 915	
7 CSR 10-25.072	Missouri Highways and Transportation Commission	49 MoReg 91	49 MoReg 915	
7 CSR 10-25.073	Missouri Highways and Transportation Commission	49 MoReg 91	49 MoReg 915	
CSR 60-2.010	Highway Safety and Traffic Division	49 MoReg 276	This Issue	
CSR 60-2.030	Highway Safety and Traffic Division	49 MoReg 278	This Issue	
CSR 60-2.040				
	Highway Safety and Traffic Division Highway Safety and Traffic Division	49 MoReg 279	This Issue	
CSR 60-2.050				
CSR 60-2.060		49 MoReg 279	This Issue	
	Highway Safety and Traffic Division	49 MoReg 280	This Issue	
	Highway Safety and Traffic Division Motor Carrier and Railroad Safety	49 MoReg 280 49 MoReg 91	This Issue 49 MoReg 915	
	Highway Safety and Traffic Division Motor Carrier and Railroad Safety	49 MoReg 280 49 MoReg 91	This Issue 49 MoReg 915	
	Highway Safety and Traffic Division Motor Carrier and Railroad Safety Motor Carrier and Railroad Safety	49 MoReg 280	This Issue	
7 CSR 265-10.030	Highway Safety and Traffic Division Motor Carrier and Railroad Safety	49 MoReg 280 49 MoReg 91	This Issue 49 MoReg 915	
CSR 265-10.030	Highway Safety and Traffic Division Motor Carrier and Railroad Safety Motor Carrier and Railroad Safety DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS Division of Labor Standards DEPARTMENT OF MENTAL HEALTH	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146	This Issue 49 MoReg 915 49 MoReg 915	
2 CSR 265-10.030 3 CSR 30-2.020 9 CSR 10-7.030	Highway Safety and Traffic Division Motor Carrier and Railroad Safety Motor Carrier and Railroad Safety <b>DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS</b> Division of Labor Standards <b>DEPARTMENT OF MENTAL HEALTH</b> Director, Department of Mental Health	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160	Highway Safety and Traffic Division Motor Carrier and Railroad Safety Motor Carrier and Railroad Safety <b>DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS</b> Division of Labor Standards <b>DEPARTMENT OF MENTAL HEALTH</b> Director, Department of Mental Health Certification Standards	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58	This Issue 49 MoReg 915 49 MoReg 915	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160	Highway Safety and Traffic Division Motor Carrier and Railroad Safety Motor Carrier and Railroad Safety <b>DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS</b> Division of Labor Standards <b>DEPARTMENT OF MENTAL HEALTH</b> Director, Department of Mental Health	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 57	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 607	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 477 49 MoReg 607 49 MoReg 608	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Well Installation         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 5R 49 MoReg 5R 49 MoReg 607 49 MoReg 608 49 MoReg 608	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.050	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Well Installation         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.050 0 CSR 23-3.080	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.030 0 CSR 23-3.080 0 CSR 23-3.090	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 55 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 615	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 45-7.010 CSR 23-1.010 CSR 23-1.010 CSR 23-3.030 CSR 23-3.030 CSR 23-3.080 CSR 23-3.090 CSR 23-3.090 CSR 23-3.110	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 615 49 MoReg 631	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
2 CSR 265-10.030           3 CSR 30-2.020           9 CSR 30-3.160           9 CSR 45-7.010           0 CSR 23-1.140           0 CSR 23-3.030           0 CSR 23-3.030           0 CSR 23-3.080           0 CSR 23-3.110           0 CSR 23-3.080           0 CSR 23-3.010	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 612 49 MoReg 631 49 MoReg 632	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.050 0 CSR 23-3.080 0 CSR 23-3.090 0 CSR 23-3.110 0 CSR 23-3.110 0 CSR 23-3.090 0 CSR 23-3.050 0 CSR 23-3.050	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 615 49 MoReg 631	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 30-3.160 CSR 23-1.010 0 CSR 23-1.010 0 CSR 23-3.030 0 CSR 23-3.050 0 CSR 23-3.080 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.010 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-5.050 0 CSR 23-5.050 0 CSR 25-7	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 55 49 MoReg 57 49 MoReg 67 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 612 49 MoReg 613 49 MoReg 631 49 MoReg 633	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	49 MoReg 654
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 45-7.010 CSR 23-1.010 CSR 23-1.010 CSR 23-3.030 CSR 23-3.030 CSR 23-3.030 CSR 23-3.080 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-5.050 CSR 23-5.050 CSR 25-7 CSR 40-10.025	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 608 49 MoReg 615 49 MoReg 613 49 MoReg 633 49 MoReg 633 49 MoReg 633	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	49 MoReg 654
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.030 0 CSR 23-3.080 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-5.050 0 CSR 25-7 0 CSR 40-10.025	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 607 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 615 49 MoReg 631 49 MoReg 633	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	49 MoReg 654
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.050 0 CSR 23-3.050 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-5.050 0 CSR 25-7 0 CSR 40-10.025 0 CSR 40-10.040	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 608 49 MoReg 615 49 MoReg 613 49 MoReg 633 49 MoReg 633 49 MoReg 633	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.050 0 CSR 23-3.050 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-3.090 0 CSR 23-5.050 0 CSR 25-7 0 CSR 40-10.025 0 CSR 40-10.040	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Division of Energy	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 57 49 MoReg 57 49 MoReg 67 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 608 49 MoReg 615 49 MoReg 613 49 MoReg 633 49 MoReg 633 49 MoReg 633	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 30-2.020 CSR 10-7.030 CSR 30-3.160 CSR 45-7.010 0 CSR 23-1.010 0 CSR 23-1.140 0 CSR 23-3.030 0 CSR 23-3.030 0 CSR 23-3.090 0 CSR 23-5.050 0 CSR 23-5.050 0 CSR 25-7 0 CSR 40-10.025 0 CSR 40-10.040 0 CSR 140-2.020 1 CSR 30-1.010	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Bazardous Waste Management Commission         Missouri Mining Commission         Safe Drinking Water Commission         Division of Energy         DEPARTMENT OF PUBLIC SAFETY         Office of the Director	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 612 49 MoReg 612 49 MoReg 631 49 MoReg 633 49 MoReg 633 49 MoReg 633 49 MoReg 633 49 MoReg 558 49 MoReg 558	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
CSR 265-10.030 CSR 265-10.030 CSR 30-2.020 CSR 30-3.160 CSR 30-3.160 CSR 23-1.140 CSR 23-1.140 CSR 23-3.050 CSR 23-3.050 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.090 CSR 23-3.050 CSR 23-5.050 CSR 40-10.025 CSR 40-	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Bazardous Waste Management Commission         Missouri Mining Commission         Safe Drinking Water Commission         Division of Energy         DEPARTMENT OF PUBLIC SAFETY         Office of the Director	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 612 49 MoReg 612 49 MoReg 631 49 MoReg 633 49 MoReg 633 49 MoReg 633 49 MoReg 558 71 MoReg 558	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	
7 CSR 265-10.015 7 CSR 265-10.030 3 CSR 30-2.020 9 CSR 10-7.030 9 CSR 30-3.160 9 CSR 30-3.160 9 CSR 45-7.010 10 CSR 23-1.140 10 CSR 23-1.140 10 CSR 23-3.030 10 CSR 23-3.030 10 CSR 23-3.090 10 CSR 23-5.050 10 CSR 25-7 10 CSR 40-10.025 10 CSR 30-8.010 11 CSR 30-8.020	Highway Safety and Traffic Division         Motor Carrier and Railroad Safety         Motor Carrier and Railroad Safety         DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS         Division of Labor Standards         DEPARTMENT OF MENTAL HEALTH         Director, Department of Mental Health         Certification Standards         Division of Developmental Disabilities         This Issue         DEPARTMENT OF NATURAL RESOURCES         Well Installation         Bazardous Waste Management Commission         Missouri Mining Commission         Safe Drinking Water Commission         Division of Energy         DEPARTMENT OF PUBLIC SAFETY         Office of the Director	49 MoReg 280 49 MoReg 91 49 MoReg 92 49 MoReg 92 49 MoReg 146 49 MoReg 555 49 MoReg 58 49 MoReg 58 49 MoReg 607 49 MoReg 607 49 MoReg 608 49 MoReg 608 49 MoReg 612 49 MoReg 612 49 MoReg 612 49 MoReg 631 49 MoReg 633 49 MoReg 633 49 MoReg 633 49 MoReg 633 49 MoReg 558 49 MoReg 558	This Issue 49 MoReg 915 49 MoReg 915 49 MoReg 753	49 MoReg 654 49 MoReg 825

## PAGE 1026

# **RULE CHANGES SINCE UPDATE**

July 1, 2024 Vol. 49, No. 13

Rule Number	Agency	Emergency	Proposed	Order	IN ADDITION
11 CSR 30-8.040	Office of the Director		This Issue R		
11 CSR 30-19.010 11 CSR 70-2.010	Office of the Director Division of Alcohol and Tobacco Control	49 MoReg 601	This Issue 49 MoReg 154	49 MoReg 915	
11 CSR 70-2.010	Division of Alcohol and Tobacco Control	49 MoReg 601	49 MoReg 154	49 MoReg 915	
11 CSR 70-2.130	Division of Alcohol and Tobacco Control	jj	49 MoReg 155	This Issue	
11 CSR 70-2.140	Division of Alcohol and Tobacco Control		49 MoReg 156	This Issue	
11 CSR 70-2.190 11 CSR 90-4.010	Division of Alcohol and Tobacco Control Missouri 911 Service Board		49 MoReg 156 49 MoReg 793	This Issue	
11 CSR 90-4.010	Missouri 911 Service Board		49 MoReg 794		
11 CSR 90-4.030	Missouri 911 Service Board		49 MoReg 794		
11 CSR 90-4.040	Missouri 911 Service Board		49 MoReg 794		
11 CSR 90-4.050	Missouri 911 Service Board		49 MoReg 795		
11 CSR 90-4.060 11 CSR 90-4.080	Missouri 911 Service Board Missouri 911 Service Board		49 MoReg 795 49 MoReg 796		
11 CSR 90-4.090	Missouri 911 Service Board		49 MoReg 796		
11 CSR 90-4.100	Missouri 911 Service Board		49 MoReg 796		
11 CSR 90-4.150	Missouri 911 Service Board		49 MoReg 797		
	DEPARTMENT OF REVENUE				
12 CSR 10-2.015	Director of Revenue		48 MoReg 2277	49 MoReg 652	
12 CSR 10-2.030	Director of Revenue		49 MoReg 157	49 MoReg 916	
12 CSR 10-2.150	Director of Revenue		49 MoReg 559	0	
12 CSR 10-2.155	Director of Revenue		49 MoReg 887		
12 CSR 10-2.165 12 CSR 10-2.190	Director of Revenue Director of Revenue		49 MoReg 340 49 MoReg 342		
12 CSR 10-2.190	Director of Revenue		49 MoReg 342 49 MoReg 158	49 MoReg 916	
12 CSR 10-2.240	Director of Revenue		49 MoReg 160	49 MoReg 916	
12 CSR 10-2.730	Director of Revenue		49 MoReg 397		
12 CSR 10-2.740	Director of Revenue		49 MoReg 345		
12 CSR 10-4.622 12 CSR 10-10.135	Director of Revenue Director of Revenue		49 MoReg 398R 49 MoReg 162R	49 MoReg 917R	
12 CSR 10-10.135	Director of Revenue		49 MoReg 486	49 MOKEY 917K	
12 CSR 10-23.160	Director of Revenue		49 MoReg 280	This Issue	
40,000,40,00,400	moved to 12 CSR 10-26.221			10.14 D 650	
12 CSR 10-23.420 12 CSR 10-23.465	Director of Revenue Director of Revenue		48 MoReg 2287 49 MoReg 281	49 MoReg 653 49 MoReg	
12 CSK 10-23.403	moved to 12 CSR 10-26.021		49 MOREY 201	49 MOREY	
12 CSR 10-23.475	Director of Revenue		49 MoReg 398		
12 CSR 10-24.060	Director of Revenue		49 MoReg 888		
12 CSR 10-24.160	Director of Revenue		49 MoReg 281		
12 CSR 10-24.190 12 CSR 10-24.200	Director of Revenue Director of Revenue		49 MoReg 282 49 MoReg 637		
12 CSR 10-24.325	Director of Revenue		49 MoReg 736		
12 CSR 10-24.330	Director of Revenue		48 MoReg 1544	49 MoReg 101	
12 CSR 10-24.340	Director of Revenue		49 MoReg 353		
12 CSR 10-24.350 12 CSR 10-24.390	Director of Revenue Director of Revenue		49 MoReg 283 49 MoReg 736		
12 CSR 10-24.390	Director of Revenue		49 MoReg 737		
12 CSR 10-24.405	Director of Revenue		49 MoReg 738		
12 CSR 10-24.420	Director of Revenue		49 MoReg 888		
12 CSR 10-24.430	Director of Revenue		49 MoReg 738		
12 CSR 10-24.440 12 CSR 10-24.480	Director of Revenue Director of Revenue		49 MoReg 637R 49 MoReg 739		
12 CSR 10-24.480	Director of Revenue		49 MoReg 399		
12 CSR 10-26.020	Director of Revenue		49 MoReg 283		
12 CSR 10-26.021	Director of Revenue		49 MoReg 281	49 MoReg 917	
10 CCD 10 0C 100	formerly 12 CSR 10-23.465		40 M - D 004		
12 CSR 10-26.120 12 CSR 10-26.221	Director of Revenue Director of Revenue		49 MoReg 284 49 MoReg 280	This Issue	
12 001 10-20,221	formerly 12 CSR 10-23.160		-13 MORCY 200	11113 13300	
12 CSR 10-26.231	Director of Revenue	49 MoReg 395	49 MoReg 400		
12 CSR 10-41.040	Director of Revenue		49 MoReg 284R	40.14 2 2 2 2	
12 CSR 10-44.010	Director of Revenue		49 MoReg 162	49 MoReg 917	
12 CSR 10-44.100 12 CSR 10-400.200	Director of Revenue Director of Revenue		49 MoReg 162 49 MoReg 353R	49 MoReg 917	
12 CSR 10-400.200 12 CSR 30-4.010	State Tax Commission		49 MoReg 163	49 MoReg 753	
13 CSR 35-60.040	DEPARTMENT OF SOCIAL SERVICES Children's Division	48 MoReg 1673	49 MoReg 400R		
19 C31 30-00.040	CHIRICH 2 DIVISION	-10 MOKEY 10/3	49 MoReg 400k 49 MoReg 400		
13 CSR 35-60.050	Children's Division	48 MoReg 1674	49 MoReg 353R		
12 CCD 2E 71 01E	Children's Division	-	49 MoReg 354		
13 CSR 35-71.015 13 CSR 35-71.020	Children's Division	48 MoReg 1675	49 MoReg 798 49 MoReg 356R		
		_	49 MoReă 356		
13 CSR 35-71.045	Children's Division	48 MoReg 1676	49 MoReg 560R		
12 CCD 2E 71 200	Childron's Division		49 MoReg 560		
<u>13 CSR 35-71.300</u> 13 CSR 70-3.200	Children's Division MO HealthNet Division		49 MoReg 802 49 MoReg 638		
13 CSR 70-3.200	MO HealthNet Division		49 MoReg 804		
13 CSR 70-8.020	MO HealthNet Division		This Issue		
13 CSR 70-10.020	MO HealthNet Division	49 MoReg 435	49 MoReg 486		
13 CSR 70-10.120	MO HealthNet Division	49 MoReg 441	49 MoReg 492		
13 CSR 70-15.220 13 CSR 70-20.320	MO HealthNet Division MO HealthNet Division		49 MoReg 358 49 MoReg 495		
13 CSR 70-20.320 13 CSR 70-25.160	MO HealthNet Division		49 MoReg 495 49 MoReg 638		
10 001 / 0-20,100	MO HOHMOU DIVISION		-15 money 050		

## **MISSOURI REGISTER**

PAGE 1027

ULE NUMBER 3 CSR 70-94.030 3 CSR 70-98.020	AGENCY EMERGENC MO HealthNet Division 49 MoReg 7 MO HealthNet Division		Order	IN ADDITIO
J CSR 70-50.020		45 Money book		
- CSD 20 2 00F	ELECTED OFFICIALS		40 MoDog 752	
5 CSR 30-3.005 5 CSR 30-3.020	Secretary of State Secretary of State	49 MoReg 5 49 MoReg 5	49 MoReg 753 49 MoReg 754	
5 CSR 30-3.020	Secretary of State	49 MoReg 5	49 MoReg 754	
5 CSR 30-3.040	Secretary of State	49 MoReg 7	49 MoReg 754	
5 CSR 30-3.050	Secretary of State	49 MoReg 7	49 MoReg 754	
5 CSR 30-4.010	Secretary of State	49 MoReg 8	49 MoReg 754	
CSR 30-7.020	Secretary of State	49 MoReg 8R	49 MoReg 755W	
CSR 30-8.010	Secretary of State	49 MoReg 9	49 MoReg 755	
CSR 30-9.010	Secretary of State	49 MoReg 9R	49 MoReg 755R	
CSR 30-9.020 CSR 30-10.010	Secretary of State Secretary of State	49 MoReg 9 49 MoReg 10	49 MoReg 755 49 MoReg 755	
CSR 30-10.010	Secretary of State	49 MoReg 10	49 MoReg 755	
CSR 30-10.025	Secretary of State	49 MoReg 12	49 MoReg 756	
CSR 30-10.030	Secretary of State	49 MoReg 13	49 MoReg 756	
CSR 30-10.040	Secretary of State	49 MoReg 15	49 MoReg 756	
CSR 30-10.050	Secretary of State	49 MoReg 15	49 MoReg 756	
CSR 30-10.060	Secretary of State	49 MoReg 16	49 MoReg 756	
CSR 30-10.080	Secretary of State	49 MoReg 16	49 MoReg 756	
CSR 30-10.090	Secretary of State	49 MoReg 20	49 MoReg 757	
CSR 30-10.110	Secretary of State	49 MoReg 20	49 MoReg 757	
CSR 30-10.120 CSR 30-10.130	Secretary of State	49 MoReg 21 49 MoReg 22R	49 MoReg 757 49 MoReg 757R	
CSR 30-10.130 CSR 30-10.140	Secretary of State Secretary of State	49 MoReg 22R 49 MoReg 22	49 MoReg 7578 49 MoReg 758	
CSR 30-10.140	Secretary of State	49 MoReg 22 49 MoReg 23	49 MoReg 758	
CSR 30-10.150	Secretary of State	49 MoReg 24	49 MoReg 758	
CSR 30-15.010	Secretary of State	49 MoReg 24	49 MoReg 758	
CSR 30-15.020	Secretary of State	49 MoReg 25	49 MoReg 758	
CSR 30-15.030	Secretary of State	49 MoReg 25	49 MoReg 758	
	RETIREMENT SYSTEMS			
CSR 10-5.010	The Public School Retirement System of Missouri	49 MoReg 359	This Issue	
CSR 10-6.060	The Public School Retirement System of Missouri	49 MoReg 360	This Issue	
CSR 20-1.010	Missouri Local Government Employees' Retirement System (LAGERS)	49 MoReg 642		
CSR 20-2.150	Missouri Local Government Employees'	49 MoReg 642		
C3K 20-2.150	Retirement System (LAGERS)	49 MOREY 042		
CCD 20 80 010	DEPARTMENT OF HEALTH AND SENIOR SERVICES	This Issue		
OCSR 20-80.010 OCSR 30-1.064	Division of Community and Public Health Division of Regulation and Licensure	This Issue 49 MoReg 497		
CSR 30-40.600	Division of Regulation and Licensure	This Issue		
CSR 30-40.810	Division of Regulation and Licensure 49 MoReg 4			
CSR 60-50	Missouri Health Facilities Review Committee			49 MoReg 65
CSR 60-50.430	Missouri Health Facilities Review Committee	49 MoReg 815		49 MoReg 76
CSR 60-50.430	Missouri Health Facilities Review Committee	49 MoReg 815		
CSR 60-50.450	Missouri Health Facilities Review Committee	49 MoReg 818		
	DEDARTMENT OF COMMERCE AND INSURANCE			
) CSR	DEPARTMENT OF COMMERCE AND INSURANCE Applied Behavior Analysis Maximum Benefit			
) CSR				49 MoReg 30
	Construction Claims Binding Arbitration Cap			
	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice			49 MoReg 30
) CSR	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap			49 MoReg 30 49 MoReg 30
) CSR ) CSR	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review			49 MoReg 30 49 MoReg 30 49 MoReg 92
) CSR ) CSR ) CSR	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits			49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
OCSR OCSR OCSR OCSR	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap	<u>/Ο Μοροσ <sup>20Ε</sup></u>		49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health	49 MoReg 285 49 MoReg 295	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900 ) CSR 400-13.100	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health	49 MoReg 295	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
0 CSR 0 CSR 0 CSR 0 CSR 0 CSR 0 CSR 400-5.900 0 CSR 400-13.100 0 CSR 2010-4.020	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects. Professional		49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900 ) CSR 400-13.100 ) CSR 2010-4.020	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Survevors, and	49 MoReg 295 49 MoReg 499	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900 ) CSR 400-13.100 ) CSR 2010-4.020 ) CSR 2030-14.020	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499 49 MoReg 739	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900 ) CSR 400-13.100 ) CSR 2010-4.020 ) CSR 2030-14.020 ) CSR 2030-14.030	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
) CSR ) CSR ) CSR ) CSR ) CSR ) CSR 400-5.900 ) CSR 400-13.100 ) CSR 2010-4.020 ) CSR 2030-14.020 ) CSR 2030-14.030	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
0 CSR 0 CSR 0 CSR 0 CSR 0 CSR 0 CSR 400-5.900 0 CSR 400-13.100 0 CSR 2010-4.020 0 CSR 2030-14.020 0 CSR 2030-14.030	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499 49 MoReg 739	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
<ul> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR 400-5.900</li> <li>) CSR 400-13.100</li> <li>) CSR 2010-4.020</li> <li>) CSR 2030-14.020</li> <li>) CSR 2030-14.030</li> <li>) CSR 2030-14.040</li> </ul>	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
<ul> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR 400-5.900</li> <li>CSR 400-13.100</li> <li>CSR 2010-4.020</li> <li>CSR 2030-14.020</li> <li>CSR 2030-14.030</li> <li>CSR 2030-14.040</li> <li>CSR 2040-5.040</li> </ul>	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740 49 MoReg 741	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
<ul> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR 400-5.900</li> <li>CSR 400-13.100</li> <li>CSR 2010-4.020</li> <li>CSR 2030-14.020</li> <li>CSR 2030-14.030</li> <li>CSR 2030-14.040</li> <li>CSR 2030-14.040</li> <li>CSR 2040-5.040</li> <li>CSR 2040-5.040</li> <li>CSR 2085-3.010</li> </ul>	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Board of Cosmetology and Barber Examiners	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740 49 MoReg 741 49 MoReg 889	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
<ul> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR 400-5.900</li> <li>) CSR 400-13.100</li> <li>) CSR 2010-4.020</li> <li>) CSR 2030-14.020</li> <li>) CSR 2030-14.030</li> <li>) CSR 2030-14.040</li> <li>) CSR 2040-5.040</li> <li>) CSR 2085-3.010</li> <li>) CSR 2085-8.070</li> </ul>	Construction Claims Binding Arbitration Cap Non-Economic Damages in Medical Malpractice Cap Notice of Periodic Rule Review Sovereign Immunity Limits State Legal Expense Fund Cap Life, Annuities and Health Life, Annuities and Health Missouri State Board of Accountancy Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects Office of Athletics Board of Cosmetology and Barber Examiners Board of Cosmetology and Barber Examiners	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740 49 MoReg 741 49 MoReg 889 49 MoReg 819	49 MoReg 917	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45
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<ul> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR</li> <li>) CSR 400-5.900</li> <li>) CSR 400-13.100</li> <li>) CSR 2010-4.020</li> <li>) CSR 2030-14.020</li> <li>) CSR 2030-14.030</li> <li>) CSR 2030-14.040</li> <li>) CSR 2030-14.040</li> <li>) CSR 2040-5.040</li> <li>) CSR 2040-5.040</li> <li>) CSR 2085-3.010</li> <li>) CSR 2085-8.070</li> <li>) CSR 2110-2.134</li> <li>) CSR 2110-2.134</li> <li>) CSR 2115-2.040</li> </ul>	Construction Claims Binding Arbitration CapNon-Economic Damages in Medical MalpracticeCapNotice of Periodic Rule ReviewSovereign Immunity LimitsState Legal Expense Fund CapLife, Annuities and HealthMissouri State Board of AccountancyMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsOffice of AthleticsBoard of Cosmetology and Barber ExaminersBoard of Cosmetology and Barber ExaminersBoard of Cosmetology and Barber ExaminersMissouri Dental BoardMissouri Dental BoardState Board of Embalmers49 MoReg 7State Board of Registration for the Healing ArtsBoard of Examiners for Hearing Instrument	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740 49 MoReg 740 49 MoReg 741 49 MoReg 889 49 MoReg 819 49 MoReg 819 49 MoReg 642 49 MoReg 643	48 MoReg 964	49 MoReg 30 49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45 49 MoReg 30
<ul> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR</li> <li>CSR 400-5.900</li> <li>CSR 400-13.100</li> <li>CSR 2010-4.020</li> <li>CSR 2030-14.020</li> <li>CSR 2030-14.030</li> <li>CSR 2030-14.040</li> <li>CSR 2030-14.040</li> <li>CSR 2040-5.040</li> <li>CSR 2040-5.040</li> <li>CSR 2085-8.070</li> <li>CSR 2040-5.040</li> <li>CSR 2040-5.040</li> <li>CSR 2040-5.040</li> <li>CSR 2085-1.010</li> <li>CSR 2150-2.080</li> <li>CSR 2150-5.100</li> </ul>	Construction Claims Binding Arbitration CapNon-Economic Damages in Medical MalpracticeCapNotice of Periodic Rule ReviewSovereign Immunity LimitsState Legal Expense Fund CapLife, Annuities and HealthLife, Annuities and HealthMissouri State Board of AccountancyMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsMissouri Board for Architects, ProfessionalEngineers, Professional Land Surveyors, andProfessional Landscape ArchitectsOffice of AthleticsBoard of Cosmetology and Barber ExaminersBoard of Cosmetology and Barber ExaminersBoard of Cosmetology and Barber ExaminersMissouri Dental BoardMissouri Dental BoardState Board of Embalmers49 MoReg 7State Board of Registration for the Healing Arts	49 MoReg 295 49 MoReg 499 49 MoReg 739 49 MoReg 740 49 MoReg 740 49 MoReg 740 49 MoReg 740 49 MoReg 741 49 MoReg 740 49 MoReg 819 49 MoReg 643 48 MoReg 317 89 49 MoReg 819 49 MoReg 364 49 MoReg 360	48 MoReg 964 49 MoReg 919	49 MoReg 30 49 MoReg 30 49 MoReg 92 49 MoReg 45

# **RULE CHANGES SINCE UPDATE**

Rule Number	Agency	Emergency	Proposed	Order	IN ADDITION
20 CSR 2200-4.200	State Board of Nursing		49 MoReg 363	49 MoReg 919	
20 CSR 2200-6.030	State Board of Nursing	49 MoReg 268	49 MoReg 296	49 MoReg 759	
20 CSR 2220-4.010	State Board of Pharmacy		49 MoReg 647	J	
20 CSR 2231-2.010	State Board of Pharmacy	49 MoReg 133	49 MoReg 165	49 MoReg 760	
20 CSR 2245-3.005	Real Estate Appraisers	0	49 MoReg 895	0	
20 CSR 2245-5.020	Real Estate Appraisers		49 MoReg 896		
20 CSR 2245-6.018	Real Estate Appraisers		49 MoReg 899		
20 CSR 2250-5.020	Missouri Real Éstate Commission		49 MoReg 92	49 MoReg 653	
20 CSR 2263-2.085	State Committee for Social Workers		49 MoReg 741		
20 CSR 2267-5.010	Office of Tattooing, Body Piercing, and Branding		49 MoReg 366	49 MoReg 920	
20 CSR 2270-1.021	Missouri Veterinary Medical Board		49 MoReg 296	49 MoReg 920	
20 CSR 2270-2.031	Missouri Veterinary Medical Board		49 MoReg 366	49 MoReg 920	
20 CSR 2270-2.041	Missouri Veterinary Medical Board		49 MoReg 367	49 MoReg 920	
20 CSR 2270-3.020	Missouri Veterinary Medical Board		49 MoReg 367	49 MoReg 920	
20 CSR 2270-4.041	Missouri Veterinary Medical Board		49 MoReg 367	49 MoReg 920	
20 CSR 4240-2.075	Public Service Commission		49 MoReg 651		
20 CSR 4240-2.115	Public Service Commission		49 MoReg 651		
20 CSR 4240-10.030	Public Service Commission		49 MoReg 902		
20 CSR 4240-40.100	Public Service Commission		49 MoReg 909		
20 CSR 4240-123.080	Public Service Commission		49 MoReg 823		

MISSOURI CONSOLIDATED HEALTH CARE PLAN Notice of Periodic Rule Review

22 CSR

49 MoReg 922

# **EMERGENCY RULE TABLE**

PUBLICATION

MISSOURI REGISTER

**EXPIRATION** 

EFFECTIVE

## AGENCY

## Department of Agriculture

An implue of Agriculture
Animal Health         2 CSR 30-10.010       Inspection of Meat and Poultry49 MoReg 395 Feb. 29, 2024 Aug. 26, 2024         Office of the Director
2 CSR 110-4.010         Who Shall Register
2 CSR 110-4.040       Procedure for Filing.       .49 MoReg 264       Jan. 24, 2024.       July 21, 2024         2 CSR 110-4.050       Process for Approval       .49 MoReg 265
Department of Mental Health
Division of Developmental Disabilities 9 CSR 45-7.010 Developmental Disabilities Health HomeThis IssueJuly 1, 2024Aug. 30, 2024
Department of Public Safety
Division of Alcohol and Tobacco Control
11 CSR 70-2.010         Definitions
Department of Revenue
Director of Revenue 12 CSR 10-26.231 Maximum Dealer Administrative Fees
Department of Social Services
Children's Division 13 CSR 35-38.010 Adoption and Guardianship SubsidyNext IssueJune 25, 2024Feb. 27, 2025
MO HealthNet Division 13 CSR 70-10.020 Prospective Reimbursement Plan for Nursing Facility
and HIV Nursing Facility Services
<b>13 CSR 70-94.030</b> Transformation of Rural Community Health (ToRCH)49 MoReg 785 May 6, 2024Nov. 1, 2024
Department of Health and Senior Services Division of Regulation and Licensure
<b>19 CSR 30-40.810</b> Ground Ambulance Transport of Patients to Locations That Are Not Hospitals
Department of Commerce and Insurance
State Board of Embalmers and Funeral Directors 20 CSR 2120-2.106 Preneed Funeral Contract Audit Fee Waiver
Board of Therapeutic Massage 20 CSR 2197-2.010 Application for Licensure
State Board of Nursing
20 CSR 2200-6.030 Intravenous Infusion Treatment Administration by Qualified Practical Nurses; Supervision by a Registered
Professional Nurse
<b>20 CSR 2231-2.010</b> Designation of License Renewal Dates and Related Application and Renewal Information
Missouri State Committee of Interpreters 20 CSR 2232-1.040 Fees

## MISSOURI REGISTER

# **EXECUTIVE ORDERS**

Order	Subject Matter	Filed Date	PUBLICATION
	2024		
24-07	Extends Executive Order 23-06 and the State of Emergency until June 30, 2024	May 30, 2024	This Issue
24-06	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted severe storm systems	May 2, 2024	49 MoReg 847
24-05	Extends Executive Order 23-05 to address drought-response efforts until September 1, 2024	April 26, 2024	49 MoReg 792
24-04	Designates members of his staff to have supervisory authority over departments, divisions and agencies of state government	February 29, 2024	49 MoReg 447
24-03	Declares a State of Emergency and declares Missouri will imple- ment the Emergency Mutual Aid Compact (EMAC) agreement with the State of Texas to provide support with border operations	February 20, 2024	49 MoReg 446
24-02	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted winter storm systems	January 11, 2024	49 MoReg 270
24-01	Orders the Dept. of Agriculture to establish rules regarding acquisitions of agricultural land by foreign businesses	January 2, 2024	49 MoReg 136
	2023		
23-10	Extends Executive Order 23-05 to address drought-response efforts until May 1, 2024	November 17, 2023	48 MoReg 2267
23-09	Orders state offices to be closed on Friday, November 24, 2023	November 9, 2023	48 MoReg 2149
23-08	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted severe storm systems	August 5, 2023	48 MoReg 1684
23-07	Designates members of his staff to have supervisory authority over departments, divisions and agencies of state government	July 28, 2023	48 MoReg 1595
23-06	Rescinds Executive Order 17-20	June 29, 2023	48 MoReg 1423
23-05	Declares drought alerts for 60 Missouri counties in accordance with the Missouri Drought Mitigation and Response Plan	May 31, 2023	48 MoReg 1179
23-04	Designates members of the governor's staff as having supervisory authority over each department, division, or agency of state gov- ernment	April 14, 2023	48 MoReg 911
23-03	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to severe storm systems	March 31, 2023	48 MoReg 795
23-02	Extends Executive Order 22-08, the State of Emergency, and waivers until February 28, 2023	January 24, 2023	48 MoReg 433
		January 19, 2023	48 MoReg 431

July 1, 2024 Vol. 49, No. 13

## INDEX

## The rule number and the MoReg publication date follow each entry to this index.

#### ADMINISTRATION, OFFICE OF

state official's salary compensation schedule; 1 CSR 10; 10/3/22

#### AGRICULTURE, DEPARTMENT OF

animal health

inspection of meat and poultry; 2 CSR 30-10.010; 3/15/24 laboratory services and fees; 2 CSR 30-1.020; 2/15/24, 6/17/24 Missouri agricultural and small business development authority

description of operation, definitions, and method of certification; 2 CSR 100-14.010; 3/1/24, 6/3/24

office of the director interest defined; 2 CSR 110-4.020; 2/15/24, 6/17/24 procedure for filing; 2 CSR 110-4.040; 2/15/24, 6/17/24 process for approval; 2 CSR 110-4.050; 2/15/24, 6/17/24 who shall register; 2 CSR 110-4.010; 2/15/24, 6/17/24 plant industries

application for a certified commercial applicator license, [a] certified noncommercial applicator license, [or a] certified public operator license, *certified private* applicator license, certified provisional private applicator license, pesticide dealer license, or noncertified RUP applicator license; 2 CSR 70-25.060; 6/17/24

application for a pesticide dealer license; 2 CSR 70-25.160; 6/17/24

certification allowances and effective date of new categories; 2 CSR 70-25.005; 6/17/24

certification categories for certified commercial applicators, certified noncommercial applicators, and certified public operators; 2 CSR 70-25.100; 6/17/24

certification categories for private applicators and certified provisional private applicators; 2 CSR 70-25.140; 6/17/24 classification of licenses; 2 CSR 70-25.030; 6/17/24

contents of records maintained by certified commercial applicators, certified noncommercial applicators, and certified public operators; 2 CSR 70-25.120; 6/17/24 contents of records maintained by pesticide dealers;

2 CSR 70-25.180; 6/17/24

[course of instruction and] standards of competence for [certified] the certification of private applicators; 2 CSR 70-25.150; 6/17/24

definitions; 2 CSR 70-25.010; 6/17/24

examinations for certified commercial applicators, certified noncommercial applicators, [and] certified public operators, certified private applicators, certified provisional private applicators, noncertified RUP applicators, and pesticide dealers; 2 CSR 70-25.090; 6/17/24

requirements for certified commercial applicators [or public operators] in structural pest control; 2 CSR 70-25.070; 6/17/24

requirements for a certified private applicator license or certified provisional private applicator license; 2 CSR 70-25.130; 6/17/24

responsibilities of certified commercial applicators or their employers; application requirements, qualifications, and stipulations for pesticide technician trainees and pesticide technicians; 2 CSR 70-25.156; 6/17/24

review of certification or license; 2 CSR 70-25.050; 6/17/24 standards of competence for the certification of

commercial applicators, noncommercial applicators, [and] public operators, and noncertified RUP applicators; 2 CSR 70-25.110; 6/17/24

stipulations and training requirements for noncertified RUP applicators; 2 CSR 70-25.153; 6/17/24

stipulations for a pesticide dealer license; 2 CSR 70-25.170; 6/17/24

stipulations for a certified commercial applicator license, [a] certified noncommercial applicator license, [or a] certified public operator license, certified private applicator license, certified provisional private applicator license, noncertified RUP applicator license, pesticide

technician license, and pesticide dealer license; 2 CSR 70-25.080; 6/17/24 to whom licenses are issued; 2 CSR 70-25.020; 6/17/24 state milk board inspection fees; 2 CSR 80-5.010; 12/15/24, 5/1/24 weights, measures and consumer protection definitions; 2 CSR 90-36.005; 5/1/24 egg inspection and enforcement [of Missouri egg laws]; 2 CSR 90-36.010; 5/1/24 egg license requirements; 2 CSR 90-36.015; 5/1/24 inspection authority – duties; 2 CSR 90-10.011; 6/17/24 NFPA Manual No. 58, *Storage and Handling of Liquefied* Petroleum Gases; 2 CSR 90-10.040; 6/17/24 NFPA Manual No. 54, National Fuel Gas Code; 2 CSR 90-10.020; 6/17/24 propane safety commission annual budget plan; 2 CSR 90; 8/1/23 registration - training; 2 CSR 90-10.012; 6/17/24 CONSERVATION, DEPARTMENT OF commercialization; 3 CSR 10-10.705; 4/1/24, 7/1/24 black bear hunting season: application and draw process; 3 CSR 10-7.905; 5/15/24 black bear hunting season: general provisions; 3 CSR 10-7.900; 5/15/24, 6/3/24 daily fishing permit; 3 CSR 10-5.440; 7/1/24 daily small game hunting permit; 3 CSR 10-5.445; 7/1/24 decoys and blinds; 3 CSR 10-11.155; 4/1/24, 7/1/24

deer: antlerless deer hunting permit availability; 3 CSR 10-7.437; 7/1/24

deer: firearms hunting season; 3 CSR 10-7.433; 7/1/24

deer hunting seasons: general provisions; 3 CSR 10-7.431; 4/1/24, 7/1/24

deer: special harvest provisions; 3 CSR 10-7.435; 7/1/24 definitions; 3 CSR 10-20.805; 4/1/24, 7/1/24

elk: application and draw process; 3 CSR 10-7.710; 5/15/24

- elk: hunting season; 3 CSR 10-7.705; 5/15/24
- elk hunting seasons: general provisions; 3 CSR 10-7.700; 4/1/24, 7/1/24

ginseng; 3 CSR 10-4.113; 4/1/24, 7/1/24

ginseng dealers: privileges, record keeping, reporting requirements; 3 CSR 10-10.810; 4/1/24, 7/1/24

hunting methods; 3 CSR 10-7.410; 4/1/24, 7/1/24

migratory bird hunting permit; 3 CSR 10-5.435; 7/1/24 migratory game birds and waterfowl: seasons, limits;

3 CSR 10-7.440; 5/15/24 nonresident archer's hunting permit; 3 CSR 10-5.560; 2/1/24,

- 5/15/24, 7/1/24
- nonresident archery antlerless deer hunting permit; 3 CSR 10-5.554; 7/1/24

nonresident conservation order permit; 3 CSR 10-5.567; 7/1/24 nonresident deer management assistance program permit;

3 CSR 10-5.605; 7/1/24

- nonresident firearms antlerless deer hunting permit; 3 CSR 10-5.552; 7/1/24
- nonresident firearms any-deer hunting permit; 3 CSR 10-5.551; 7/1/24
- nonresident fishing permit; 3 CSR 10-5.540; 7/1/24
- nonresident furbearer hunting and trapping permit; 3 CSR 10-5.570; 7/1/24

nonresident fur dealer's permit; 3 CSR 10-10.708; 4/1/24, 7/1/24

- nonresident ginseng dealer permit; 3 CSR 10-10.805; 4/1/24, 7/1/24
- nonresident ginseng harvester permit; 3 CSR 10-5.805; 4/1/24, 7/1/24

nonresident landowner archer's hunting permit; 3 CSR 10-5.580; 2/1/24, 5/15/24, 7/1/24

- nonresident landowner firearms any-deer hunting permit; 3 CSR 10-5.576; 7/1/24
- nonresident landowner turkey hunting permits; 3 CSR 10-5.579; 2/1/24, 4/1/24, 5/15/24, 7/1/24

## INDEX

nonresident managed deer hunting permit; 3 CSR 10-5.559; 7/1/24 nonresident small game hunting permit; 3 CSR 10-5.545; 7/1/24

nonresident turkey hunting permits; 3 CSR 10-5.565; 2/1/24, 5/15/24, 7/1/24

permits and privileges: how obtained; not transferable; 3 CSR 10-5.215; 4/1/24, 7/1/24

permits required; exceptions; 3 CSR 10-5.205; 4/1/24, 7/1/24 permits to be signed and carried; 3 CSR 10-5.210; 5/15/24 prohibited species; 3 CSR 10-4.117; 4/1/24, 7/1/24 resident archer's hunting permit; 3 CSR 10-5.360; 2/1/24, 5/15/24

resident fur dealer's permit; 3 CSR 10-10.707; 4/1/24, 7/1/24 resident ginseng dealer permit; 3 CSR 10-10.800; 4/1/24, 7/1/24

resident ginseng harvester permit; 3 CSR 10-5.800; 4/1/24, 7/1/24

resident turkey hunting permits; 3 CSR 10-5.365; 2/1/24, 5/15/24 restricted zones; 3 CSR 10-6.415; 4/1/24, 7/1/24 trout permit; 3 CSR 10-5.430; 7/1/24

turkeys: seasons, methods, limits; 3 CSR 10-7.455; 1/16/24, 2/1/24, 5/15/24

vehicles, bicycles, horses, and horseback riding; 3 CSR 10-11.130; 4/1/24, 7/1/24

#### **CREDIT AND FINANCE**

### ECONOMIC DEVELOPMENT, DEPARTMENT OF

#### ELECTED OFFICIALS

secretary of state

absentee balloting; 15 CSR 30-10.080; 1/2/24, 5/15/24 ballot management systems; 15 CSR 30-10.120; 1/2/24, 5/15/24

centralized voter registration system advisory committee; 15 CSR 30-7.020; 1/2/24, 5/15/24

certification statements for new or modified electronic voting systems; 15 CSR 30-10.020; 1/2/24, 5/15/24 closing polling places ballot marking devices; 15 CSR 30-10.150; 1/2/24, 5/15/24 definitions; 15 CSR 30-10.010; 1/2/24, 5/15/24

election authority's certification statement; 15 CSR 30-10.025; 1/2/24, 5/15/24 election procedures; 15 CSR 30-10.050; 1/2/24, 5/15/24

electronic ballot tabulation – counting preparation; 15 CSR 30-10.040; 1/2/24, 5/15/24

electronic ballot tabulation – counting preparation and logic and accuracy testing; 15 CSR 30-10.140; 1/2/24, 5/15/24

electronic ballot tabulation – election procedures; 15 CSR 30-10.060; 1/2/24, 5/15/24 electronic ballot tabulation – election procedures (ballot marking devices and precinct counters); 15 CSR 30-10.160; 1/2/24, 5/15/24

initiative, referendum, new party, and independent candidate petitions missouri voter registration system and other computerized processing options; 15 CSR 30-15.030; 1/2/24, 5/15/24 manual recount; 15 CSR 30-10.110; 1/2/24, 5/15/24

postcard voter application and forms; 15 CSR 30-4.010; 1/2/24, 5/15/24

procedure for recount or contested election;

15 CSR 30-10.090; 1/2/24, 5/15/24 procedures for identity verification for provisional ballots for registered voters under voter identification law, counting approved ballots, and recordkeeping;

15 CSR 30-3.040; 1/2/24, 5/15/24 procedures for registered voters returning to the polling place with identification; 15 CSR 30-3.030; 1/2/24, 5/15/24

processing procedures for initiative, referendum, new party, and independent candidate petitions; 15 CŚR 30-15.020; 1/2/24, 5/15/24

provisional ballots and envelopes; 15 CSR 30-8.010; 1/2/24, 5/15/24

provisional ballots and envelopes for registered voters under voter identification law; 15 CSR 30-3.020; 1/2/24, 5/15/24

signature verification procedures for initiative, referendum, new party, and independent petitions; 15 CSR 30-15.010;

1/2/24, 5/15/24

- uniform counting standards optical scan voting systems; 15 CSR 30-9.020; 1/2/24, 5/15/24

15 CSR 30-9.020; 1/2/24, 5/15/24 uniform counting standards – punch card voting systems; 15 CSR 30-9.010; 1/2/24, 5/15/24 voter education and voting device preparation; 15 CSR 30-10.030; 1/2/24, 5/15/24 voter education and voting device preparation (DREs and precinct counters); 15 CSR 30-10.130; 1/2/24, 5/15/24 voter identification; 15 CSR 30-3.005; 1/2/24, 5/15/24 voter inquiries as to whether provisional hallot for

voter inquiries as to whether provisional ballot for

registered voter was counted; 15 CSR 30-3.050; 1/2/24, 5/15/24

treasurer

#### ELEMENTARY AND SECONDARY EDUCATION, DEPARTMENT OF

financial and administrative services, division of charter school local education agency (LEA) attendance hour reporting; 5 CSR 30-660.090; 5/1/24 learning services, division of

area [vocational school] career center service regions; 5 CSR 20-200.180; 6/17/24 begining teacher assistance program; 5 CSR 20-400.385;

- 4/15/24
- certification requirements for career continuous student services certificate; 5 CSR 20-400.650; 6/17/24
- certification requirements for career education (adult) certificate; 5 CSR 20-400.670; 6/17/24

certification requirements for career education (secondary) 7-12 certificates; 5 CSR 20-400.660; 6/17/24

certification requirements for gifted education (kindergarten – grade 12); 5 CSR 20-400.580; 2/15/24, 6/17/24

certification requirements for initial administrator certificate; 5 CSR 400-610; 6/17/24

certification requirements for teacher of secondary education (grades 9-12); 5 CSR 20-400.540; 4/15/24 definitions; 5 CSR 20-500.120; 3/1/24 eligibility; 5 CSR 20-500.150; 3/1/24 minimum standards; 5 CSR 20-500.140; 3/1/24

order of selection for services; 5 CSR 20-500.160; 3/1/24 programs for gifted children; 5 CSR 20-100.110; 5/15/24 office of childhood

early childhood education standards; 5 CSR 25-100.340; 1/16/24, 5/15/24

### **EXECUTIVE ORDERS**

declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted severe storm systems; 24-06; 5/2/24 extends Executive Order 23-06 and the State of Emergency

until June 30, 2024; 24-07; 7/1/24

#### HEALTH AND SENIOR SERVICES, DEPARTMENT OF

## community and public health, division of

training standards relating to the office of the coroner; 19 CSR 20-80.010; 7/1/24

injury prevention, head injury rehabilitation and local health services, division of

Missouri health facilities review committee

application package; 19 CSR 60-50.430; 6/3/24 criteria and standards for equipment and new hospitals; 19 CSR 60-50.440; 6/3/24

- criteria and standards for long-term care; 19 CSR 60-50.450; 6/3/24
- Missouri health facilities review committee; 19 CSR 60-50; 5/1/24

office of the director regulation and licensure, division of

ground ambulance transport of patients to locations that are not hospitals; 19 CSR 30-40.810; 4/1/24

outside the hospital do-not-resuscitate (OHDNR);

19 CSR 30-40.600; 7/1/24 partial filling of controlled substance prescriptions; 19 CSR 30-1.064; 4/1/24

July 1, 2024 Vol. 49, No. 13

## **MISSOURI REGISTER**

#### HIGHER EDUCATION AND WORKFORCE DEVELOPMENT, DEPARTMENT OF

commissioner of higher education

departmental organization; 6 CSR 10-1.010; 5/15/24

rules for certification of proprietary schools; 6 CSR 10-5.010; 4/15/24

rules for the posting of consumer information; 6 CSR 10-9.010; 12/15/23, 5/15/24

#### **INSURANCE**

applied behavior analysis maximum benefit; 20 CSR; 2/15/24 construction claims binding arbitration cap; 20 CSR; 2/15/24 non-economic damages in medical malpractice cap;

20 CSR; 2/15/24

sovereign immunity limits; 20 CSR; 1/2/24 state legal expense fund; 20 CSR; 2/15/24 health insurance rates; 20 CSR 400-13.100; 2/15/24, 6/17/24 suitability in annuity transactions; 20 CSR 400-5.900; 2/15/24

#### LABOR AND INDUSTRIAL RELATIONS, DEPARTMENT OF labor standards, division of

standard practices for safety and operation; 8 CSR 30-2.020; 2/1/24, 5/15/24

## MENTAL HEALTH, DEPARTMENT OF

certification standards

- institutional treatment centers; 9 CSR 30-3.160; 1/2/24, 5/1/24 developmental disabilities, division of
- developmental disabilities health home; 9 CSR 45-7.010; 4/1/24, 7/1/24 director, department of mental health

service delivery process and documentation; 9 CSR 10-7.030; 4/15/24

licensing rules

## MISSOURI CONSOLIDATED HEALTH CARE PLAN

notice of periodic rule review; 20 CSR; 6/17/24

## NATURAL RESOURCES, DEPARTMENT OF

air conservation commssion energy, division of general provisions; 10 CSR 140-2.020; 6/3/24 clean air commission disposal of wastewater in residential housing developments; 10 CSR 20-6.030; 10/16/23 wastewater treatment lagoons and wastewater irrigation alternatives; 10 CSR 20-8.200; 10/16/23 pumping stations; 10 CSR 20-8.130; 10/16/23 <u>hazardous waste management commission</u> permit modifications list; 10 CSR 25-7; 5/1/24 Missouri mining commission geologic resources fees; 10 CSR 40-10.025; 6/17/24 safe drinking water commission prohibition of lead pipes, lead pipe fittings, and lead solder and flux; 10 CSR 60-10.040; 4/15/24 solid waste management well installation construction standards for closed-loop heat pump wells; 10 CSR 23-5.050; 5/1/24 construction standards for monitoring wells; 10 CSR 23-4.060; 5/1/24 definitions; 10 CSR 23-1.010; 5/1/24 drilling areas; 10 CSR 23-3.090; 5/1/24 liners; 10 CSR 23-3.080; 5/1/24 plugging of water wells; 10 CSR 23-3.110; 5/1/24 pump installation and wellhead completion; 10 CSR 23-3.050: 5/1/24 standards for construction of water wells; 10 CSR 23-3.030 5/1/24 vehicle and machine registration; 10 CSR 23-1.140; 5/1/24 PROFESSIONAL REGISTRATION

notice of periodic rule review; 20 CSR; 6/17/24 accountancy, Missouri state board of qualifying programs; 20 CSR 2010-4.020; 4/1/24

athletics, office of rules for professional boxing; 20 CSR 2040-5.040; 5/15/24 cosmetology and barber examiners, board of fees; 20 CSR 2085-3.010; 6/17/24 general rules and application requirements for all schools; 20 CSR 2085-12.010; 6/3/24 instructor renewal and inactive license requirements; 20 CSR 2085-8.070; 6/3/24 embalmers and funeral directors, state board of preneed funeral contract audit fee waiver; 20 CSR 2120-2.106; 6/3/24 examiners for hearing instrument specialists, board of continuing education requirements; 20 CSR 2165-2.050; 2/1/24, 5/15/24 Missouri board for architects, professional engineers, professional land surveyors, and professional landscape architects definition of baccalaureate degree from approved curriculum as used in section 327.314.2(1)(a), RSMo; 20 CSR 2030-14.020; 5/15/24 definition of fifteen semester hours of approved surveying course work as used in section 327.314.2(1)(c), RSMo; 20 CSR 2030-14.040; 5/15/24 definition of sixty semester hours of approved curriculum as used in section 327.314.2(1)(b), RSMo; 20 CSR 2030-14.030; 5/15/24 Missiori dental board dental hygienists; 20 CSR 2110-2.130; 5/1/24 oral preventive assistant pilot project; 20 CSR 2110-2.134; 5/1/24 Missouri real estate commission application and license fees; 20 CSR 2250-5.020; 1/16/24, 5/1/24 trainee real estate appraiser registration; 20 CSR 2245-3.005; 6/17/24 Missouri veterinary medical board examinations; 20 CSR 2270-2.031; 3/1/24, 6/17/24 20 CSR 2270-3.020; 3/1/24, 6/17/24 fees; 20 CSR 2270-1.021; 2/15/24, 6/17/24 minimum standards for medical records; 20 CSR 2270-4.041; 3/1/24, 6/17/24 reexamination; 20 CSR 2270-2.041; 3/1/24, 6/17/24 nursing, state board of collaborative practice; 20 CSR 2200-4.200; 3/1/24, 6/17/24 intravenous infusion treatment administration by qualified practical nurses; supervision by a registered professional nurse; 20 CSR 2200-6.030; 2/15/24, 5/15/24 pharmacy, state board of class B hospital pharmacy compounding for drug shortages; 20 CSR 2220-2.410; 8/1/23, 11/15/23 general fees; 20 CSR 2220-4.010; 5/1/24 professional counselors, committee for professional registration, division of designation of license renewal dates and related application and renewal information; 20 CSR 2231-2.010; 2/1/24, 5/15/24 real estate appraisers application, certificate and license fees; 20 CSR 2245-5.020; 6/17/24 AQB 2026 licensure critera; 20 CRS 2245-6.018; 6/17/24 trainee real estate appraiser registration; 20 CSR 2245-3.005; 6/17/24 registration for the healing arts, state board of collaborative practice arrangement with nurses; 20 CSR 2150-5.100; 3/1/24, 6/17/24 physician licensure fees; 20 CSR 2150-2.080; 5/1/24 social workers, state committee for restoration of license; 20 CSR 2263-2.085; 5/15/24 tattooing, body piercing, and branding, office of standards of practice; 20 CSR 2267-5.010; 3/1/24, 6/17/24

therapeutic massage, board of application for licensure; 20 CSR 2197-2.010; 7/1/24 fees; 20 CSR 2197-1.040; 4/15/24

## PUBLIC SAFETY, DEPARTMENT OF

alcohol and tobacco control, division of

- all licensees; 11 CSR 70-2.140; 2/1/24, 7/1/24 application for license; 11 CSR 70-2.020; 2/1/24, 5/1/24, 6/17/24 definitions; 11 CSR 70-2.010; 2/1/24, 5/1/24, 6/17/24 retailer's conduct of business; 11 CSR 70-2.130; 2/1/24, 7/1/24 unlawful discrimination and price scheduling;

- 11 CSR 70-2.190; 2/1/24, 7/1/24 Missouri gaming commission
- Missouri 911 service board
  - computer-based continuing education training for 911 telecommunicators; 11 CSR 90-4.100; 6/3/24
  - definitions; 11 CSR 90-4.020; 6/3/24
  - emergency medical dispatch services requirements; 11 ČSR 90-4.150; 6/3/24
  - exemptions and waiver of initial training requirement; 11 CSR 90-4.040; 6/3/24
  - general organization; 11 CSR 90-4.010; 6/3/24
  - initial training; 11 CSR 90-4.030; 6/3/24
  - minimum standards for continuing education training; 11 CSR 90-4.060; 6/3/24
  - out-of-state, federal and organizations or commercial entities continuing education credit for 911 telecommunicators; 11 CSR 90-4.090; 6/3/24
  - procedure to obtain approval for an individual continuing education course for 911 telecommunicators; 11 CSR 90-4.080; 6/3/24
  - requirements for continuing education; 11 CSR 90-4.050; 6/3/24
- office of the director
  - contract awards, monitoring and review; 11 CSR 30-8.040; 7/1/24

  - definitions; 11 CSR 30-8.010; 7/1/24 eligible applicants; 11 CSR 30-8.020; 7/1/24
  - notification and filing procedure; 11 CSR 30-8.030; 7/1/24 organization and operation; 11 CSR 30-1.010; 7/1/24

  - viewing crime scene photographs and video recordings; 11 CSR 30-19.010; 7/1/24

## PUBLIC SERVICE COMMISSION

code for modular units; 20 CSR 4240-123.080; 6/3/24 intervention; 20 CSR 4240-2.075; 5/1/24 renewable natural gas program; 20 CSR 4240-40.100; 6/17/24 standards of quality; 20 CSR 4240-10.030; 6/17/24 stipulations and agreements; 20 CSR 4240-2.115; 5/1/24

#### **RETIREMENT SYSTEMS**

election of trustees; 16 CSR 20-2.150; 5/1/24 general organization; 16 CSR 20-1.010; 5/1/24 service retirement; 16 CSR 10-5.010; 3/1/24; 7/1/24 16 CSR 10-6.060; 3/1/24; 7/1/24

#### **REVENUE, DEPARTMENT OF**

#### director of revenue

- adoption tax credit; 12 CSR 10-2.740; 3/1/24
- back of driver license, permits, and nondriver license; 12 10-24.430; 5/15/24
- boater identification indicator on driver or nondriver license; 12 CSR 10-24.480; 5/15/24
- commercial [driver instruction] learner's permit; 12 CSR 10-24.390; 5/15/24
- delegation of authority to administer Missouri driver[s] license examinations and the actual demonstration of ability to exercise due care in the operation of a motor vehicle of the classification for which the license is sought; 12 CSR 10-24.060; 6/17/24

department of revenue instruction permits; 12 CSR 10-24.402; 5/15/24

determination of timeliness; 12 CSR 10-2.240; 2/1/24, 6/17/24 driver license classes; 12 CSR 10-24.200; 5/1/24

driver license retesting requirements after a license, school bus [permit]endorsement, or temporary instruction permit expires/examination results to be invalid after one (1) year; 12 CSR 10-24.190; 2/15/24

- excess traffic violation revenue; 12 CSR 10-44.100; 2/1/24, 6/17/24
- expenses related to production of tax exempt interest income; 12 CSR 10-2.730; 3/15/24
- federal income tax deduction; 12 CSR 10-10.135; 2/1/24, 6/17/24
- fees and required documentation for designating manufactured homes as real or personal property; 12 CSR 10-23.475; 3/15/24
- financial responsibility inoperable/stored vehicles; 12 CSR 10-25.140; 3/15/24

good moral character of motor vehicle dealers, manufacturers, boat dealers, salvage dealers, and title service agents; 12 CSR 10-26.221; 2/15/24, 7/1/24

- group testing of commercial motor vehicle drivers by
- Missouri state highway patrol; 12 CSR 10-24.350; 2/15/24 issuance of biennial salvage business licenses;
- 12 CSR 10-26.021; 2/15/24, 6/17/24
- interest, additions to tax and penalty; 12 CSR 10-10.140; 4/1/24
- license denial for suspension, revocation, disqualification or cancellation; 12 CSR 10-24.325; 5/15/24 license requirements for auctions, dealers, franchisors, and
- manufacturers; 12 CSR 10-26.020; 2/15/24
- marketing organizations soliciting sales through exempt entity fund-raising activities; 12 CSR 10-4.622; 3/15/24 maximum dealer administrative fees; 12 CSR 10-26.231;
- 3/15/24
- Missouri school bus operator's [permit] endorsement driving history guidelines; 12 CSR 10-24.160; 2/15/24 motor voter registration application form; 12 CSR 10-24.440;
- 5/1/24
- net operating losses on corporate income tax returns; 12 CSR 10-2.165; 3/1/24
- net operating losses on individual income tax returns; 12 CSR 10-2.710; 2/1/24, 6/17/24
- non-standard tax periods, subsequent change of accounting period, and personal and dependency exemption deductions; 12 CSR 10-2.030; 2/1/24, 6/17/24
- partnership and S corporation [shareholders composite individual income tax return filing requirements, withholding of income tax requirements and partnership/S corporation withholding exemption] annual return filing requirements, composite returns, and nonresident partner/shareholder income tax withholding; 12 CSR 10-2.190; 3/1/24

proof of state of domicile requirements for commercial driver license applicants; 12 CSR 10-24.405; 5/15/24

- procedures for filing complaints with the director of revenue; 12 CSR 10-26.120; 2/15/24
- receipt of mail, email, and fax of complianance documents; 12 CSR 10-24.340; 3/1/24
- regulated investment companies; 12 CSR 10-2.155; 6/17/24
- retribution of bad checks; 12 CSR 10-41.040; 2/14/24 SALT parity act implementation; 12 CSR 10-2.436; 7/3/23
- secure power of attorney requirements; 12 CSR 10-23.420; 12/15/23, 5/1/24
- special needs adoption tax credit; 12 CSR 10-400.200; 3/1/24 standards governing motorcycle helmet construction;
- 12 CSR 10-24.420; 6/17/24
- tax exempt status of the united states government-related obligations; 12 CSR 10-2.150; 4/15/24 tire fee application; 12 CSR 10-44.010; 2/1/24, 6/17/24

withholding of tax; 12 CSR 10-2.015; 12/15/23, 5/1/24

- state tax commission
  - agricultural land productive values; 12 CSR 30-4.010; 2/1/24, 5/15/24

## **RETIREMENT SYSTEMS**

election of trustees; 16 CSR 20-2.150; 5/1/24 general organization; 16 CSR 20-1.010; 5/1/24 service retirement; 16 CSR 10-5.010; 3/1/24 16 CSR 10-6.060; 3/1/34

#### SOCIAL SERVICES, DEPARTMENT OF

## children's division background checks for personnel of residnetial care facilities and child placing agencies; 13 CSR 35-71.015; 6/3/24 basic residential treatment for children and youth core requirements (applicable to all agencies) – basis for licensure and licensing procedures; 13 CSR 35-71.020; 9/15/23, 3/1/24 care of children; 13 CSR 35-60.050; 9/15/23, 3/1/24 family homes offering foster care; 13 CSR 35-60.010; 9/15/23 license application, renewal, and monitoring; 13 CSR 30-71-020; 3/1/24 notification requirements for licensed-exempt residential care facilities; 13 CSR 35-71.300; 6/3/24 personnel; 13 CSR 35-71.045; 4/15/24 physical and environmental standards; 13 CSR 35-60.040; 9/15/23, 3/15/24 protection and care of the child; 13 CSR 35-71.070; 9/15/23 family support division mo healthnet division ambulance service reimbursement allowance; 13 CSR 70-3.200; 5/1/24 disproportionate share hospital (DSH) payments; 13 CSR 70-15.220; 3/1/24 doula services; 13 CSR 70-25.160; 5/1/24 electrionic visit verification (EVV); 13 CSR 70-3.320; 6/3/24 oversight of PACE Organizations and providers; 13 CŠR 70-8.020; 7/Ĭ/24 pharmacy reimbursement allowance; 13 CSR 70-20.320; 4/1/24 prior authorization committee for non-pharmaceutical behavioral health services; 13 CSR 70-98.020; 6/17/24 prospective reimbursement plan for nursing facility and HIV nursing facility services; 13 CSR 70-10.020; 4/1/24 reimbursement for nurse assistant training; 13 CSR 70-10.120; 4/1/24 transformation of rural community health (ToRCH); 13 CSR 70-94.030; 6/3/24 TRANSPORTATION, MISSOURI DEPARTMENT OF highway safetyand traffic division breath alcohol ignition interlock device security; 7 CSR 60-2.050; 2/15/24, 7/1/24 definitions; 7 CSR 60-2.010; 2/15/24, 7/1/24 device suspension and decertification; 7 CSR 60-2.060; 2/15/24, 7/1/24 responsibilities of manufactures; 7 CSR 60-2.040; 2/15/24, 7/1/24 standards and specifications; 7 CSR 60-2.030; 2/15/24, 7/1/24 Missouri highways and transportation commission application for international fuel tax agreement license; 7 CSR 10-25.071; 1/16/24, 6/17/24 apportion registration pursuant to the international registration plan; 7 CSR 10-25.030; 1/16/24, 6/17/24 fuel tax returns; 7 CSR 10-25.072; 1/16/24, 6/17/24 record keeping requirements; 7 CSR 10-25.073; 1/16/24, 6/17/24 trip permits and hunter's (unladen) permits; 7 CSR 10-25.060; 1/16/24, 6/17/24 motor carrier and railroad safety application requirements for the issuance and transfer of interstate motor carrier authority; 7 CSR 265-10.015; 1/16/24, 6/17/24 insurance; 7 CSR 265-10.030; 1/16/24, 6/17/24



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Are you new to rulemaking or in need of a refresher course to assist you in filing rules or understanding the rulemaking process?

The Administrative Rules Division offers group and individual classes for rule drafting and preparation of rule packets. Please call Curtis at (573) 751-2022 or email curtis.treat@sos.mo.gov to schedule a class.

We offer both in-person and virtual classes.

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