

Issue Brief

STATE ISSUE BRIEF • MAY 19, 2020

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

Status of Selected Health Care Legislation Summary of the 2020 Session of the Missouri General Assembly

The Missouri General Assembly’s 2020 legislative session ended Friday, May 15. The following describes the outcomes of various legislative proposals affecting hospitals and health care. The governor has until Tuesday, July 14, to approve or veto most of these enacted bills. Gubernatorial action on appropriations bills very likely will occur before Wednesday, July 1, the start of the state fiscal year.

LEGISLATION TRULY AGREED AND FINALLY PASSED

Budget And Appropriations

- Appropriates funding to support the expected increase in payments to hospitals for Medicaid services in fiscal year 2021, which begins July 1, 2020. ([HB 2011](#))
- Authorizes an additional \$190 million in FRA-supported Medicaid Disproportionate Share Hospital payments in FY 2021, implementing new payment capacity enabled by successful MHA litigation against the Centers for Medicare & Medicaid Services’ implementation of Medicaid DSH audits. ([HB 2011](#))
- Enables \$35 million in grants using federal COVID-19 federal stimulus funds to be distributed to at least 10 small rural hospitals. ([HB 2010](#))
- Authorizes \$60 million in additional funding for unbudgeted Medicaid fee-for-service hospital services provided in the current state fiscal year. ([HB 2014](#))

Hospital Liability

- Creates a more rigorous threshold for awarding punitive damages in lawsuits against health care providers and others. ([SB 591](#))
- Bars lawsuits against health care providers based on the Missouri Merchandising Practices Act if the claim could be brought as a medical malpractice lawsuit. ([SB 591](#))

4712 Country Club Drive
Jefferson City, MO 65109

P.O. Box 60
Jefferson City, MO 65102

573-893-3700
www.mhanet.com



continued

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION TRULY AGREED AND FINALLY PASSED

Prompt Credentialing By Insurers

- Sets new deadlines for insurers to request further information and act on a practitioner’s application to be credentialed for the insurer’s provider network. ([HB 1682](#))
- Mandates that, if the practitioner credentialing application is approved, the insurer will make payments for the practitioner’s covered services on behalf of the contracted entity from the date of application to its approval. The contracted entity for which the practitioner is providing services must submit all claims within six months of the credentialing approval. ([HB 1682](#))
- Prohibits practitioners applying to be credentialed in an insurer’s provider network from billing the patient for services delivered during the credentialing review period. ([HB 1682](#))
- States that insurer credentialing will not be required for payment if the practitioner is providing temporary coverage for an absent practitioner as described in the legislation. ([HB 1682](#))

Health Insurance Payments

- Mandates that health insurers can recoup overpayments only from the provider to whom the original payment was made, or the third party billing the claim on behalf of that provider. Notices of recoupment must include the date and type of service, and identify the patient. . ([HB 1682](#))
- Revises the interest and penalties payable by insurers for failure to pay health care providers according to statutory deadlines and when payment denials by insurers are reversed on appeal. ([HB 1682](#))

Hospital Provider Tax

- Reauthorizes the hospital Federal Reimbursement Allowance and the other state provider taxes for one year. ([HB 2456](#))

Occupational And Professional Licensure

- Revises occupational and professional licensure reciprocity standards to apply to nearly all professions and occupations, and waive Missouri educational and experience requirements for those who currently are licensed in good standing in another state and have had that license for at least one year. ([HB 2046](#))
- Provides that occupational and professional licenses issued under this expanded reciprocity standard only will be valid in Missouri and are not transferrable to or from an interstate licensure compact. The new reciprocity standards will not apply to Missouri licensure boards participating in an interstate licensure compact. ([HB 2046](#))
- Revises standards for applying criminal convictions to occupational or professional license actions with exemptions for various professions, including medicine, nursing and pharmacy. ([HB 2046](#))
- Bars local governments from creating new types of occupational licenses after Aug. 28, 2020. ([HB 2046](#))
- Prohibits state licensure boards from using licensure fees to fund continuing education classes, but they may be used to educate licensees about changes in law or regulatory standards. ([HB 2046](#))
- Revises the occupational licensure standards for athletic trainers. ([HB 2046](#))
- Provides for expedited occupational licensure reciprocity for spouses of resident or nonresident active duty military personnel. ([HB 1511](#))

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION TRULY AGREED AND FINALLY PASSED

Sexual Assault Forensic Examinations

- Directs the Missouri Department of Health and Senior Services to establish, by July 2022, a statewide telehealth network to provide training and continuous access to advisors for forensic examinations to collect evidence of sexual assault. ([SB 569](#))
- Makes funding of the state telehealth network subject to legislative appropriations. ([SB 569](#))
- Requires hospitals, as of January 2023, to perform a sexual assault forensic examination on request by the alleged victim or guardian when the victim is at least 14 years old. Practitioners are to have received training equivalent to what is offered by the state telehealth network. If the examining practitioners do not have specified credentials, the hospital will use telehealth services, such as the state telehealth network, to support the examination. ([SB 569](#))
- Provides for waivers of the telehealth aspects of sexual assault forensic examinations based on lack of access to broadband services or cessation of state telehealth network operations. ([SB 569](#))
- Directs hospitals, as of October 2021, to annually submit data on their delivery of sexual assault forensic examinations, the number of evidence collection kits submitted to law enforcement and their use of the state telehealth network. ([SB 569](#))
- Creates various rights for alleged victims of sexual assault in the gathering of evidence, and the investigation and prosecution of the crime. ([SB 569](#))
- Creates a “Missouri Rights of Victims of Sexual Assault Task Force” to produce a report by Dec. 31, 2021. ([SB 569](#))
- Revises standards for state government’s electronic system to track kits used to gather forensic evidence of sexual assault crimes. Alleged victims will register to use the system, and all providers, law enforcement, laboratories, courts and others with custody of the kits will participate in the system. Records will be confidential. ([SB 569](#))
- Directs the Missouri Department of Public Safety to develop a central repository for storing unreported evidence collection kits, most of which will be retained for five years. ([SB 569](#))

Motorcycle Helmets

- Permits those age 26 and older to operate motorcycles without wearing helmets if they have insurance coverage for treatment of injuries caused by an accident. ([HB 1963](#))

Pharmacy

- Authorizes a practitioner to receive a prescribed controlled substance directly from a pharmacy to be administered to the patient. ([HB 1682](#))
- Establishes a process for expedited updates of the state’s controlled substances list based on federal changes. ([HB 1896](#))
- Establishes standards for remote site dispensing pharmacies in which pharmacy technicians or intern pharmacists are supervised using a continuous, real-time video and audio link with a pharmacist. ([HB 1682](#))
- Lowers the amount of pseudoephedrine or related drugs that can be sold or dispensed to an individual in a 30-day period, and caps the amount that can be sold to or acquired by a person in a 12-month period. ([HB 1896](#), [HB 1682](#))
- Allows pseudoephedrine or related drugs to be dispensed without a prescription, within statutory limits, but the prescription requirement will be reinstated if methamphetamine laboratory seizure incidents exceed 300 in a calendar year. ([HB 1896](#), [HB 1682](#))
- Invalidates local ordinances requiring a prescription to dispense pseudoephedrine or related drugs. ([HB 1896](#), [HB 1682](#))
- Directs DHSS to create a prescription abuse registry of adults who choose to be listed, with access to the registry limited to health care providers. ([HB 1896](#))
- Authorizes a new type of pharmacy license for “charitable pharmacies.” ([HB 2046](#), [HB 1682](#))
- Creates a system of state licensure for pharmacy benefit managers. ([HB 1682](#))

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION TRULY AGREED AND FINALLY PASSED

COVID-19

- Authorizes DHSS to use federal funds to pay for the expense of COVID-19 testing and analysis recommended by a health care provider. The payment will not supplant the resident’s health insurance coverage, is capped at \$150 per test, is limited to Missouri residents and is subject to legislative appropriations. ([HB 1682](#))
- Prohibits a health insurer from reducing its coverage of testing for COVID-19 during a state of emergency declared by the governor, except as a result of nonpayment of premiums. ([HB 1682](#))

Opioids

- Directs that settlements or awards from the state’s litigation against drug manufacturers and distributors, based on damages caused by the promotion and use of opioids, will be used exclusively for opioid addiction treatments and services, as well as health care and law enforcement costs related to opioid addiction treatment. ([HB 1682](#))

Insurance Benefit Plans

- Expands the types, frequency and thresholds of mammography services for which health insurers are mandated to provide coverage. ([SB 551](#), [HB 1682](#))
- Prohibits a person’s status as a living organ donor from being used as a sole factor in underwriting, pricing or limiting the benefits of health or long-term care insurance policies. ([SB 551](#))

Emergency Services

- Authorizes physician assistants to serve as ground ambulance staff and waives the mileage separation restrictions of a collaborative practice arrangement when doing so. ([HB 2046](#), [HB 1682](#))
- Sets standards for emergency medical services personnel to use in following outside-the-hospital do-not-resuscitate documents from other states. ([HB 1682](#))
- Requires that cardiopulmonary resuscitation training classes must encompass the use of automatic external defibrillators. ([HB 1682](#))
- Authorizes trained law enforcement officers, firefighters and other first responders to possess and use EpiPens in the emergency treatment of anaphylaxis. ([HB 1682](#))
- Authorizes medical alert notifications to appear on driver’s licenses. ([HB 1963](#), [SB 782](#))

Consent To Treatment

- Applies state law governing the ability of minors to consent to medical care on their own behalf to mental health treatment. ([HB 1414](#))
- Establishes additional ways to validate that an unaccompanied minor is able to independently consent to and contract for services. ([HB 1414](#))
- Creates liability protections for health care providers and others who follow state law in providing services directly to a minor without parental consent. ([HB 1414](#))

Broadband

- Extends the duration of a state broadband grant program and sets minimum internet speed requirements for grant recipients. ([HB 1768](#), [HB 2120](#))

Medical Marijuana

- Clarifies that physician certifications for medical marijuana use that are completed via telehealth must comply with state standards for the patient interview and examination. ([HB 1896](#), [HB 1682](#))

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION TRULY AGREED AND FINALLY PASSED

Hospice

- Eliminates required investigations by coroners and medical examiners of physician-certified natural deaths of hospice patients and extends notification deadlines of those deaths. ([HB 2046](#))

Obstetrical Care

- Directs hospitals and ambulatory surgical centers providing labor and delivery services to provide patients and their families with information about postpartum depression. Subject to appropriation and federal approval, Medicaid coverage of postpartum depression treatment will be provided for up to one year to women who begin treatment within 60 days of giving birth. ([HB 1682](#))

Medical Records

- Clarifies that reports or records of the Missouri State Public Health Laboratory regarding testing done on behalf of a law enforcement agency will be confidential until the investigation is completed. ([HB 1682](#))

Death Records

- Raises fees charged for death records, with the proceeds used for coroner training. ([HB 2046](#))
- Allows the county sheriff to appoint a medical professional to attest to death certificates if the county coroner has not completed or kept current with required training. ([HB 2046](#))

Organ Transplants

- Bars decisions to allocate an anatomical gift for transplants from being based on a potential recipient’s disability or congenital condition, unless it has been determined by a physician’s evaluation to be medically significant. ([SB 551](#))
- Exempts potential organ transplant recipients with a disability or congenital condition from being required to demonstrate post-transplant independent living capacity if there is evidence of sufficient compensatory support and assistance. ([SB 551](#))

Medicaid Coverage

- Authorizes the Missouri Department of Social Services to apply for a waiver of federal standards to allow for Medicaid coverage in a federally defined Institution for Mental Disease for enrollees in a Missouri Department of Mental Health substance abuse treatment program. ([HB 1414](#), [HB 1682](#))
- Authorizes Medicaid coverage of homeless youth, subject to federal approval of a Medicaid plan amendment. ([HB 1414](#))
- Extends Medicaid coverage of developmental disability services to out-of-state military personnel or their immediate family while they temporarily reside in Missouri during military service. For Missouri residents, Medicaid coverage of developmental disability services will be suspended while out of state for a military posting but immediately reinstated upon return to Missouri. ([SB 656](#), [SB 718](#))

Behavioral Health Care

- Defines and includes psychiatric service dogs in state laws regulating service dogs and establishes criminal penalties for misrepresenting a service dog. ([SB 644](#), [SB 656](#))

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION TRULY AGREED AND FINALLY PASSED

Medical Malpractice Insurers

- Provides that the composition and terms of the board of directors of a medical malpractice insurer, organized under Chapter 383 of Missouri law, will be set by its plan of operation, as will its scope of medical malpractice coverage. ([SB 551](#))
- Limits liability of a member insurer and the board of directors of a medical malpractice insurer organized under Chapter 383 of Missouri law. ([SB 551](#))

Long-term Care

- Creates standards governing the placement and use of electronic devices to monitor residents of long-term care facilities. ([HB 1387](#))
- Revises state standards governing the delivery of personal care services. ([HB 1682](#))

Governmental Hospitals

- Bans public entities, including governmental hospitals, from contracting with an entity unless the contractor agrees to refrain from boycotting the nation of Israel or its companies. Contractors with fewer than 10 employees or contracts of less than \$100,000 are exempted. ([SB 739](#))
- Establishes restrictions and criminal penalties for using a drone to fly above, enable escapes from or illicit deliveries to a state mental hospital. ([HB 1963](#))
- Directs how unexpended sales tax funds of a closed governmental hospital in Ripley County will be distributed for local health purposes. ([HB 1854](#), [HB 1682](#))

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION DEFEATED

Budget And Appropriations

- Implements a fee schedule for Medicaid outpatient hospital services based on 90% of Medicare payment rates, with a projected loss of \$100 million in hospital payments. (HB 2011)
- Supplants \$500,000 in general revenue funding of the Missouri Poison Center with \$500,000 in hospital provider tax. (HB 2010)

Facility Fees

- Prohibits a hospital or other provider-based facility from charging a facility fee, except as permitted for Medicare or Medicaid patients. (SB 904, HB 2311, amendment to HB 1682)

Hospital Employment Standards

- Restricts use of covenants not to compete in employment contracts with health care practitioners. (HB 2326, SB 932)
- Prohibits an employer or insurer from requiring a physician to maintain board certification as a condition of employment or network participation. (SB 933, SB 891, amendment to HB 1383)

Guns In Hospitals

- Expands the ability of those with concealed weapons permits to bring their weapons into areas of a hospital accessible to the public. (HB 1638, SB 663 and others)

Price Transparency

- Sets different limits on what a for-profit and not-for-profit health care provider may charge an uninsured or self-pay patient if the provider does not comply with various price transparency obligations. (HB 1415)

Medicaid

- Prohibits Medicaid payments for treating enrollees who are residents of other states, which would eliminate \$220 million in Medicaid hospital payments. (SB 985, SB 934)
- Asks the state’s voters whether Medicaid enrollees should be required to work or participate in work alternative programs, unless otherwise exempted. (HJR 106, SJR 60, SJR 32)
- Asks the state’s voters whether to prohibit Medicaid payments for treating Medicaid enrollees who are residents of other states. (HJR 106, SJR 60)
- Asks the state’s voters whether to change the state constitution to mimic federal law in guaranteeing health insurance coverage of preexisting conditions and coverage of dependent children until the age of 26. (HJR 106, SJR 60)
- Asks the state’s voters whether to make all Medicaid spending contingent on legislative appropriations, with no rights or entitlements to Medicaid coverage without appropriations authority. (HJR 106, SJR 60)
- Directs DSS to apply for a waiver of federal requirements so that Medicaid coverage no longer would be provided retroactively during a period described as “prior quarter” coverage. (SB 684)
- Requires DSS to apply for a federal Medicaid waiver to implement a global block grant for Missouri’s Medicaid program. (SB 524)
- Calls for a demonstration project regarding the use of direct primary care arrangements in Medicaid. (HB 1416)
- Authorizes as much as one year of continued eligibility for children covered by Medicaid. (HB 2379, HB 1670)

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION DEFEATED

Pharmacy

- Creates a state-operated prescription drug monitoring program to replace the voluntary system currently covering most Missourians. (HB 1693, SB 677)

Occupational And Professional Licensure

- Authorizes Missouri’s participation in the Interstate Medical Licensure Compact. (HB 2256)
- Expands the ability of advanced practice registered nurses, physician assistants and assistant physicians to order patient restraints in a hospital setting. (HB 2381, SB 943)
- Expands and clarifies the authority of certified registered nurse anesthetists to order and administer controlled substances in the course of providing anesthesia services. (HB 2057, SB 863)
- Creates a system of occupational licensure for those performing radiologic imaging or therapy. (HB 2431)
- Removes the current requirement that a physical therapist must have a prescription or referral from a physician to treat a patient, with limits established for the scope of the exemption. (HB 1869)
- Provides for APRNs to be licensed separately as such, rather than as a registered nurse with an APRN certification. (SB 714 and others)
- Revamps standards governing the supervision of APRNs, including a statutory definition of their scope of practice under the auspices of the State Board of Nursing. (HB 2226, SB 965)
- Shifts authority to regulate APRNs from the Board of Nursing to the State Board of Registration for the Healing Arts. (SB 1078)

Health Insurance Payments

- Caps the penalty against health insurers for delaying provider payments at 5% of the unpaid balance of the claim. (HB 2089, SB 850)
- Creates various standards governing health insurers’ payments for services. (HB 1513)

Liability Of Hospitals

- Restricts liability of health care providers and others for actions taken to provide services and treatment during a declared public health emergency. (Amendments to HB 1682, SB 662, HB 2046)
- Provides for liability protections for health care providers performing a lawfully conducted body cavity search. (SB 763)

Certificate Of Need

- Repeals the state certificate of need laws. (HB 1786, SB 708)

Workplace Violence

- Requires hospitals to implement workplace violence protection plans. (SB 533)
- Creates various standards and crimes related to hospital security. (HB 1753)

Health Information

- Permits the otherwise allowable use of individually identifiable information held by a health information exchange, unless the individual has declined to allow access to his or her information. (HB 2464)

Hospital Provider Tax

- Bars the payment of administrative fees to support a voluntary pooling arrangement involving hospital provider tax revenue and Medicaid payments. (SB 930)

LEGEND

HB = House Bill

SB = Senate Bill

HJR = House Joint Resolution

SJR = Senate Joint Resolution

Links to enacted bills will be to the “Truly Agreed and Finally Passed” version. There may be a short delay in posting final versions.

LEGISLATION DEFEATED

Insurer Provider Networks

- Requires practitioners who deliver services at a health care facility to contract with all the health insurers contracted with that facility, accept each insurer’s network payment rate and not balance bill patients. (HB 2589, HB 2712)
- Directs that insurers include any provider in its network that is willing to accept network payment rates. (HB 1974)

Prisoner Care

- Restricts law enforcement officers’ ability to release a person from custody during or immediately preceding hospital care. (SB 1073)
- Establishes new requirements for hospital emergency departments to follow in collecting and storing forensic evidence from gunshot wounds and stabbings. (HB 2086)

Emergency Care

- Allows local EMS agencies to determine where to transport stroke, STEMI and trauma patients during a health emergency declared by the governor. (Amendments to SB 600, SB 660 and others)
- Prevents the distance to another trauma center from being considered in designating trauma centers. (HB 2520, SB 1034)
- Creates a bleeding control initiative for public schools. (HB 1991)

Insurance Benefit Plans

- Expands the ability of Missouri insurers to sell short-term policies of coverage that are exempted from federal benefit plan requirements. (SB 836, HB 2083, HB 1922)
- Allows the Consolidated Health Care Plan to only offer high-deductible policies of coverage to its enrollees. (SB 849)

Medical Education

- Authorizes state tax credits for physicians who serve as medical preceptors. (HB 2036)

Mental Health

- Changes statutory standards governing access to antipsychotic medications in the Medicaid program. (HB 1875)
- Requires physicians to counsel pregnant patients using a perinatal risk assessment for substance use form. (HB 2672)
- Bars mental health professionals from engaging in conversion therapy designed to change the patient’s sexual orientation or gender identity. (SB 658)

Governmental Hospitals

- Restricts the capacity of local governments, including governmental hospitals, to engage in state legislative advocacy during work hours. (HB 1347)

Medical Treatment Standards

- Restricts the capacity to offer medical treatment services to minors related to gender reassignment. (HB 2051, HB 1721, and others)

Elderly Care

- Creates an Alzheimer’s State Plan Task Force. (HB 1683, SB 823)