



**Rules of
Department of Insurance,
Financial Institutions and
Professional Registration**

**Division 2230—State Board of Podiatric Medicine
Chapter 2—General Rules**

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**Title 20—DEPARTMENT OF
INSURANCE, FINANCIAL
INSTITUTIONS AND
PROFESSIONAL REGISTRATION
Division 2230—State Board of Podiatric
Medicine
Chapter 2—General Rules**

20 CSR 2230-2.010 Application for License by Examination

PURPOSE: This rule outlines the requirements and procedures for obtaining a podiatry license by examination.

(1) Application for a permanent Missouri license to practice podiatric medicine must be made on the forms provided by the board.

(2) Application forms may be obtained from the board office at PO Box 423, Jefferson City, MO 65102-0423 or by visiting the board's website at <http://pr.mo.gov/podiatrists.asp>. A copy of the current statutory provisions and board rules regarding the practice of podiatric medicine will be provided with the application form.

(3) No application will be considered unless it is fully completed and properly attested. Items necessary to complete the application include:

(A) Each section on the application form itself;

(B) A recent photograph;

(C) The current Permanent Application Processing Fee;

(D) An official transcript from the college of podiatric medicine from which the applicant graduated. If the applicant has attended more than one college of podiatric medicine in order to obtain all of his/her credits for graduation, the applicant shall submit official transcripts from all colleges he/she attended;

(E) A certified score report from the National Board of Podiatric Medical Examiners or such other designee of the board, certifying satisfactory completion of all parts of the National Board Examination;

(F) Proof that the applicant's fingerprints have been submitted to the Missouri State Highway Patrol for criminal history records checks; and

(G) Proof of good moral character in the form of reference letters from persons who have known the applicant for at least two (2) years, on forms provided by the board, from three (3) of the following four (4) classes of individuals:

1. An employer;

2. A teacher or other instructor of podiatric medicine;

3. A high school or undergraduate college instructor; and

4. A member of the community where the applicant resides.

(4) Every applicant for a permanent Missouri license graduating from a podiatric medical school in 1994 and thereafter shall provide the State Board of Podiatric Medicine with satisfactory evidence of having completed an acceptable postgraduate clinical residency.

(5) For purposes of this rule, a postgraduate clinical residency is a formal, structured postgraduate training program of at least twelve (12) months which is approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association. Postgraduate clinical residency programs must be sponsored by and conducted in an institution such as a hospital, or conducted by a college of podiatric medicine accredited by the Council on Podiatric Medical Education of the American Podiatric Medical Association.

(6) Applicants desiring to perform ankle surgery will be required to complete a twenty-four (24)-month postgraduate clinical residency in podiatric surgery.

(7) All applicants must be evaluated upon completion of at least a twelve (12)-month postgraduate clinical residency program by the residency director, using forms provided by the board, which will attest to the applicant's competence in the practice of podiatric medicine and surgery.

(8) The applicant shall request that the regulatory entity in each state, United States territory, province, or country in which a license, certificate, registration or permit is held or has ever been held submit verification of licensure, certification, registration or permit directly to the board. The verification shall include the license, registration, certification or permit issued; the number; status; issue and expiration dates; information regarding any disciplinary action; method of licensure, registration or certification; the name and title of person verifying information; the date; and the entity's seal.

(9) Each applicant must successfully complete the examination(s) developed and administered by the National Board of Podiatric Medical Examiners (NBPME) or such other designee of the board and successfully complete the Missouri Law Examination administered by the State Board of Podiatric Medicine. The applicants achieving a passing score as established by NBPME or such other

designee of the board on the National Board Examinations and achieving at least ninety percent (90%) on the open book test for the Missouri Law Examination, shall be deemed to have passed the board's examination. The applicant will be required to pay the Missouri Law Examination Administration Fee directly to the board office. The NBPME examinations are computer-based examinations. The National Board Examinations are administered by the Chauncey Group International for the NBPME, or such other designee of the board. Applicants must submit a completed registration form along with the test fee and school transcript directly to the Chauncey Group or designee of the board.

AUTHORITY: sections 330.010 and 330.040, RSMo Supp. 2006 and 330.140, RSMo 2000. This rule originally filed as 4 CSR 230-2.010. Original rule filed Dec. 23, 1975, effective Jan. 2, 1976. Rescinded and readopted: Filed Dec. 9, 1981, effective March 11, 1982. Amended: Filed Nov. 12, 1982, effective Feb. 11, 1983. Amended: Filed Oct. 24, 1983, effective March 11, 1984. Amended: Filed Nov. 5, 1984, effective March 11, 1985. Emergency amendment filed Oct. 13, 1989, effective Nov. 11, 1989, expired March 10, 1990. Amended: Filed Oct. 13, 1989, effective Jan. 12, 1990. Amended: Filed March 4, 1991, effective Sept. 30, 1991. Amended: Filed Feb. 4, 1992, effective June 25, 1992. Amended: Filed Aug. 9, 1993, effective March 10, 1994. Amended: Filed June 1, 1999, effective Nov. 30, 1999. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.010, effective Aug. 28, 2006. Amended: Filed July 11, 2007, effective Jan. 30, 2008.*

**Original authority: 330.010, RSMo 1939, amended 1945, 1961, 1969, 1976, 1995, 1998, 2005; 330.040, RSMo 1939, amended 1981, 2005; and 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*

Op. Atty. Gen. No. 133, Fulkerson (3-6-70). The General Business and Corporation Law of Missouri, which permits corporations to be organized for any lawful purpose, does not authorize organization of a corporation to engage in practice of chiropody-podiatry where statute regulating such practice contemplates only licensing of individuals.

Op. Atty. Gen. No. 37, Hansen (6-27-56). It would not be lawful for the State Board of Chiropody to accept the examination of the National Board of Chiropody Examiners as a written examination given by the board and in lieu of examination by the board.



20 CSR 2230-2.020 Professional Conduct Rules

PURPOSE: This rule ensures that licensed podiatrists and their affiliated firms are registered correctly with the secretary of state and with the State Board of Podiatric Medicine and also ensures that a licensee with this board files a list of assumed trade names or any other names the licensee shall use, other than what is registered with the board.

(1) The practice of podiatric medicine under a trade name or assumed name is prohibited, unless the trade name or assumed name is properly registered with the secretary of state pursuant to the provisions of sections 417.200-417.230, RSMo, or otherwise.

(2) Every person licensed to engage in the practice of podiatric medicine in this state shall file with the board a list of assumed names, trade names, or any names other than the name under which a license to practice has been issued by the board, that is used in his or her practice, before using such name.

(3) A person engaged in the practice of podiatric medicine under any assumed name, trade name, or any name other than the name under which a license to practice has been issued by the board, shall immediately disclose to any person, upon request and without condition, the licensed name of each and every person involved in the practice of podiatric medicine under the assumed name, trade name, or any other name.

(4) A person engaged in the practice of podiatric medicine shall require any subordinate to immediately disclose to any person, upon request and without condition, the licensed name of each and every person involved in the practice of podiatric medicine under an assumed name, trade name, or any other name.

AUTHORITY: sections 330.140, RSMo 2000 and 330.160.2, RSMo Supp. 2006.* This rule originally filed as 4 CSR 230-2.020. Original rule filed Dec. 23, 1975, effective Jan. 2, 1976. Rescinded and readopted: Filed Jan. 4, 1980, effective April 11, 1980. Rescinded and readopted: Filed Dec. 9, 1981, effective March 11, 1982. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.020, effective Aug. 28, 2006. Rescinded and readopted: Filed July 11, 2007, effective Jan. 30, 2008.

*Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998 and 330.160, RSMo 1939, amended 1951, 1981, 1999, 2005.

20 CSR 2230-2.021 Advertising Regulation

PURPOSE: This rule sets forth the content and methods that podiatrists who are licensed by the State Board of Podiatric Medicine shall follow if they advertise their services to the public in Missouri.

(1) Nothing in these rules shall be construed as allowing any advertisement or solicitation which is false, misleading or deceptive. Any advertisement or solicitation which is false, misleading or deceptive is prohibited.

(2) Any podiatrist whose office or practice is the subject of any advertisement or solicitation is responsible for the form and content of that advertisement or solicitation.

(3) Definitions. The following words and terms when used in this rule shall have the following meaning:

(A) Advertisement shall mean any attempt, directly or indirectly, by publication, dissemination or circulation in print, or electronic media which, directly or indirectly, induces or attempts to induce any person or entity to purchase or enter into an agreement to purchase services, treatment or related goods from a podiatrist;

(B) Electronic media shall include radio, television, email and Internet;

(C) Print media shall include, but not be limited to, newspapers, magazines, periodicals, professional journals, telephone directories, circulars, handbills, flyers, billboards, signs, matchcovers, Internet, email, and other items, documents or comparable publications, the content of which is disseminated by means of the printed word;

(D) Range of fees shall refer to an expressly stated upper and lower limit on the fees charged for services or goods offered by a podiatrist; and

(E) Solicitation shall mean any conduct other than that which has been defined as advertising which occurs outside the podiatrist's office and which, directly or indirectly, induces or attempts to induce any person or entity to purchase or enter into an agreement to purchase services, treatment or related goods from a podiatrist.

(4) A podiatrist shall maintain a record of all advertisements and solicitations including, but not limited to:

(A) A recording or transcript, including any visual images broadcast, shall be maintained for a period of three (3) years together with the name of the television or radio station(s) and the date(s) of broadcast for any advertisement in electronic media;

(B) An actual copy, photocopy or photograph of any advertisement in print media shall be maintained for a period of three (3) years together with the name of the publication(s) or location(s) of publication or display and the date(s) of publication or display;

(C) A memorandum or other written record of every solicitation shall be maintained for a period of three (3) years. The memorandum or written record shall include the content, time, date and location of the solicitations; and

(D) Failure to maintain these records shall constitute misconduct.

(5) Podiatrists may use advertisements as defined in sections (3) and (4).

(6) Podiatrists may engage in solicitation, personally or through agents or representatives, except podiatrists shall *not* advertise or solicit using—

(A) Any form of aerial display; and

(B) Sound equipment from a motor vehicle.

(7) False, misleading or deceptive advertising or soliciting includes, but is not limited to, the following:

(A) Use of a trade name or assumed name in connection with a podiatrist's practice that does not comply in every respect with the requirements of 20 CSR 2230-2.020;

(B) Statements of any nature which indicate that a certain podiatrist performs all of the work, when, in fact, all or part of the work or service is performed by another;

(C) Any offer of a professional service which the podiatrist knows or should know is beyond the podiatrist's ability to perform or that is for any other reason not readily available;

(D) Any advertisement or solicitation which suppresses, omits or conceals any material fact under circumstances which a podiatrist knows or should know that the suppression, omission or concealment is improper or prohibits a prospective patient from making a full and informed judgment on the basis of the information set forth;

(E) Any advertisement which fails to identify the podiatrist's profession by not including the word podiatrist, doctor of podiatric medicine or DPM following the podiatrist's name;

(F) Those types of advertisements or solicitation specified in section 330.160.2(14), RSMo;

(G) Any advertisement or solicitation which, through method of delivery or through content, is intended to or is reasonably likely to result in undue pressure, undue



influence or overreaching with regard to a prospective patient;

(H) Any offer to pay, give or accept a fee or other consideration to or from a third party for the referral of a patient;

(I) Any offer of goods or services for a specific fee, range of fees, discount or for free which is not honored for a minimum of ninety (90) days following the last advertisement or solicitation or for the other specific time period set forth in the advertisement or solicitation. If the offer sets forth a specific time period, the time period may be less than ninety (90) days;

(J) Any offer of free goods or services without disclosing that other goods or services which are ordinarily required in connection with the free goods or services are not free, unless those other goods or services are also offered free of charge; and

(K) Any offer of goods or services for no fee or for a discount which does not include the regular fee or range of fees for those goods or services. As an alternative, the offer may state that the regular fee services will be provided to any member of the public upon request. At the time that the regular fee or range of fees is provided in response to a request, information regarding the specific time period during which the regular fee or range of fees will be honored, must be provided.

AUTHORITY: sections 330.140, RSMo 2000 and 330.160, RSMo Supp. 2006. This rule originally filed as 4 CSR 230-2.021. Original rule filed Oct. 15, 1985, effective Jan. 12, 1986. Amended: Filed Nov. 4, 1986, effective Jan. 30, 1987. Amended: Filed May 16, 1995, effective Dec. 30, 1995. Amended: Filed Oct. 30, 1997, effective April 30, 1998. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.021, effective Aug. 28, 2006. Amended: Filed July 11, 2007, effective Jan. 30, 2008.*

**Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998 and 330.160, RSMo 1939, amended 1951, 1981, 1999, 2005.*

20 CSR 2230-2.022 Podiatric Titles

PURPOSE: This rule clarifies that no person other than a licensed podiatrist may use the podiatric medical titles defined in this rule.

(1) Only persons who hold a license to practice podiatric medicine in this state may use the words podiatric medicine, podiatry, podiatric, podiatrist, foot specialist, chiropody or chiropodist, or variations of these words in connection with his/her practice. Any person

who holds a license to practice podiatric medicine in this state may also use the abbreviation DPM in connection with his/her practice. No other person shall assume any title or use any abbreviation or other words including, but not limited to, the words and abbreviation listed in this rule, letters, signs or devices to indicate the person using the same is a licensed podiatrist.

AUTHORITY: sections 330.140 and 330.200, RSMo 2000. This rule originally filed as 4 CSR 230-2.022. Original rule filed Aug. 11, 1992, effective Feb. 26, 1993. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.022, effective Aug. 28, 2006.*

**Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998 and 330.200, RSMo 1939, amended 1981.*

20 CSR 2230-2.023 Infection Control

PURPOSE: This rule establishes guidelines for contagious, infectious or communicable disease protection.

(1) A podiatric physician shall guard against contagious, infectious and communicable diseases.

(2) Podiatric physicians who perform surgery should be generally familiar with the Center for Disease Control's "Guideline for Prevention of Surgical Site Infection, 1999," available at <http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/SSI.pdf>.

(3) Podiatric physicians who practice in office settings may find helpful the Center for Disease Control's "Guidelines for Infection Control in Dental Health-Care Settings—2003," available at <http://www.cdc.gov/mmwr/PDF/rr/rr5217.pdf>.

(4) A podiatric physician shall be adequately trained in how to guard against contagious, infectious and communicable diseases.

(A) At a minimum, two (2) hours of the continuing education obtained by a podiatric physician during a continuing education cycle shall be directly related to guarding against contagious, infectious and communicable diseases in podiatric practice.

(5) A podiatric physician shall have an adequate written protocol setting out how the podiatric physician guards against contagious, infectious and communicable diseases in the practice of podiatric medicine. A written protocol is not adequate if it does not

address guarding against contagious, infectious and communicable diseases in the following particulars:

(A) Locations.

1. In any office where the podiatric physician practices; and

2. At any other place where the podiatric physician routinely engages in professional practice.

A. A podiatric physician may, after adequate review, accept the adequate written protocol that guards against contagious, infectious and communicable diseases of any place other than the physician's own office, unless the podiatric physician becomes aware, or should be aware, that the protocol is not being followed.

(B) Training.

1. Every member of the staff of a podiatric physician shall be appropriately trained in how to guard against contagious, infectious and communicable diseases.

A. Non-medical staff shall, at a minimum, be trained to recognize and report to the podiatric physician, or other medically trained staff, personal illness and reports of contagious, infectious and communicable diseases among patients.

B. A record of the training provided to each member of the staff of a podiatric physician shall be maintained throughout the person's employment and for at least three (3) years after the person's termination.

2. A podiatric physician shall ensure that any place where he/she is routinely engaged in the practice of podiatric medicine appropriately trains its staff in how to recognize personal illness and guard against contagious, infectious and communicable diseases and shall preserve in writing the evidence upon which he/she relied in making the training assessment.

(C) Equipment.

1. A podiatric physician shall adequately guard against contagious, infectious and communicable diseases in the use of equipment.

2. A podiatric physician who uses sterilizing equipment shall test the equipment in strict compliance with the manufacturer's instructions.

3. A podiatric physician may rely on the sterilization of equipment performed by another only after having made and recorded appropriate inquiry and being reasonably assured that the person or entity's procedures are adequate.

(D) Record Keeping.

1. Patient records shall reflect the podiatric physician's practice of guarding against contagious, infectious and communicable diseases as medically necessary.

2. A podiatric physician shall maintain a "Contagion, Infection and Communicable



Disease Log” wherein a summary of the facts related to an exposure or report of contagious, infectious and communicable diseases is maintained. Such a summary shall include the date and time of the report, a unique identifier for the person(s) exposed to or reported to be afflicted by the contagious, infectious or communicable disease that will allow identification of medical or personnel records without disclosing a person’s name in the log, the general nature of the contagious, infectious or communicable disease, the immediate response of the podiatric physician, and a statement of the outcome of the case (e.g., patient deceased, resolved after treatment with antibiotics).

A. The podiatric physician shall at least monthly review the “Contagion, Infection and Communicable Disease Log” for the purpose of identifying any trends or repeated occurrences. The date and time of the review shall be written in the log followed by the podiatric physician’s signature.

B. The “Contagion, Infection and Communicable Disease Log” shall be maintained for at least three (3) years.

3. A podiatric physician who operates sterilization equipment in the practice of podiatric medicine shall maintain maintenance and test records for at least three (3) years.

4. A podiatric physician shall maintain a copy of the current protocol required by this rule. Previous versions shall be maintained for three (3) years after the last date they were used.

5. A podiatric physician shall maintain a detailed record of the training provided to staff members related to contagious, infectious and communicable diseases, distinct from the records of training of individual staff members, for at least three (3) years.

(E) Reports.

1. A podiatric physician shall provide a copy of the written protocol to the board upon request.

2. A podiatric physician shall provide a copy of the detailed record of the training provided to staff members related to contagious, infectious and communicable diseases, distinct from the records of training of individual staff members, to the board upon request.

AUTHORITY: section 330.140, RSMo 2000. Original rule filed July 11, 2007, effective Jan. 30, 2008.*

**Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*

PURPOSE: This rule clarifies the license renewal requirements and procedures.

(1) All Missouri podiatric physicians shall notify the board office of all offices, shared or individual; or changes in office addresses and designate at which address mail is to be received.

(2) Each applicant for license renewal shall certify to the board that s/he has attended twenty-four (24) hours of board-approved continuing medical education (CME) for the biennial renewal period immediately preceding the biennial license renewal date. Applicants who qualify under section 330.010.2, RSMo to perform surgery of the ankle must certify that s/he has attended an additional twenty-six (26) hours of board-approved CME for the biennial renewal period immediately preceding the biennial license renewal date. Prior to January 2005, a copy of Foot & Ankle Board Certification or certificate of a twenty-four (24)-month postgraduate clinical residency program in podiatric surgery shall be on file with the state board for acceptance of the additional CMEs, before the endorsement of “Ankle Surgery Certified” will be added to their biennial renewal license. After January 2005, a certificate of completion of a twenty-four (24)-month postgraduate clinical residency program in podiatric surgery is required for acceptance of the additional CMEs and the “Ankle Surgery Certified” endorsement.

(3) The reporting period for satisfying the CME requirements shall be the twenty-four (24)-month period immediately preceding the biennial license renewal date, which is February 28 of each even-numbered year. All CME hours shall be board approved. CME hours earned after the biennial renewal date (February 28 of even-numbered years) shall apply to the next reporting cycle. A renewal license will not be issued until all renewal requirements have been met.

(4) For the license renewal due on February 28, 2006, and each subsequent renewal thereafter, the licensee shall certify that s/he has obtained at least twenty-four (24) or fifty (50) hours, whichever is relevant, of continuing medical education during the two (2)-year period preceding the renewal on the renewal form provided by the board. The renewal form shall be submitted directly to the board, either by mail or online renewal, by February 28 of each even-numbered year. The licensee shall not submit the record of CME attendance to the board except in the case of a board audit.

(5) Every licensee shall maintain full and complete records of all approved CME hours earned for the two (2) previous reporting periods in addition to the current reporting period. The records shall document the titles of the courses taken, dates, locations, course sponsors, number of hours earned and certificate of attendance or completion. The board may conduct an audit of licensees to verify compliance with the continuing education requirements. Licensees shall assist the board in its audits by providing timely and complete responses to the board’s inquiries.

(6) Violation of any provision of this rule shall be grounds for discipline in accordance with section 330.160, RSMo.

(7) The following guidelines govern the CME requirements needed to apply for biennial licensure renewal:

(A) Educational programs approved by the Council of Podiatric Medical Education of the American Podiatric Medical Association are currently approved by the board.

(B) The board will review for consideration of CME credits, the following postgraduate study to meet the standards for biennial license renewal. The licensee shall submit a copy of the program schedule, the outline, and the appropriate Continuing Education Board Review Fee to the board office not less than sixty (60) days prior to the date of the program. The outline must indicate the program’s subject matter, the number of hours required for its presentation and the identity and qualifications of the speakers and instructors. After reviewing the schedule and outline, the board may grant approval. If the board approves the program, the credit will be accepted and the licensee may count the CME hours toward the total number of required hours. If the postgraduate study request is submitted after the sixty (60)-day deadline, payment of the Continuing Medical Education Reporting Period Late Fee will be required. The following programs may be reviewed by the board for CME credit:

1. Educational programs, appropriate to the practice of podiatric medicine, presented by:

A. A hospital accredited by the Joint Commission on Hospital Accreditation;

B. American Medical Association (AMA); or

C. American Osteopathic Association (AOA) or its equivalent.

2. Meetings. Registered attendance at relevant podiatric medicine related professional meetings (international, national, regional, state or local). CME credits may be granted for no more than four (4) hours per day for professional meeting attendance.



3. Presenting or speaking at a formal professional meeting in the area of podiatric medicine or a related field. CME credits may be granted at the rate of four (4) hours for each presentation. No CME credit based on the same presentation will be allowed for use in the subsequent two (2)-year reporting period.

4. Writing a paper published in a professional journal, writing an original chapter in a book or an edited book, or for editing or writing a book, in the area of podiatric medicine or a related field. Credits may be granted for the year of publication or presentation. CME credits may be granted at the rate of four (4) hours for each paper, eight (8) hours for each chapter in a book, ten (10) hours for editing a book, and fifteen (15) hours for the publication of a book. No CME credit based on the same materials will be allowed for use in the subsequent two (2)-year reporting period.

(C) Licensees who attend the open session of the Missouri State Board of Podiatric Medicine's board meetings will receive one (1) hour of CME credit per meeting. To qualify, licensees must sign in at the beginning of the open meeting and sign out at the end of the open meeting.

(D) Licensees who give presentations in accordance with this rule will receive up to two (2) CME credit hours for each hour of the original presentation and an hour-for-hour credit for subsequent presentation of the same material for a total of up to six (6) hours per each two (2)-year reporting period for licensees who are required to obtain twenty-four (24) hours of CME credit, or a total of up to twelve (12) hours per each two (2)-year reporting period for licensees who are required to obtain fifty (50) hours of CME credit.

(E) Licensees who are required to obtain twenty-four (24) hours of CME credit in a two (2)-year reporting period may use up to six (6) hours of self-study CME credit in each reporting period, in accordance with this rule. Licensees who are required to obtain fifty (50) hours of CME credit in a two (2)-year reporting period may use up to twelve (12) hours of self-study CME credit in each reporting period, in accordance with this rule.

(F) Licensees who are required to obtain twenty-four (24) hours of CME credit in a two (2)-year reporting period may carry over up to six (6) CME credit hours earned in excess of the required twenty-four (24) hours to the next two (2)-year reporting period. Licensees who are required to obtain fifty (50) hours of CME credit in a two (2)-year reporting period may carry over up to twelve

(12) CME credit hours earned in excess of the required fifty (50) hours to the next two (2)-year reporting period.

(G) An applicant who has not satisfied the CME requirements in accordance with this rule shall be required to meet the CME requirements retroactively as well as pay the required Continuing Medical Education Reporting Period Late Fee.

(H) Exceptions to the provisions of this rule include the following:

1. Licensees who were in training at least a minimum of six (6) months during the CME reporting period at a residency program approved by the Council of Podiatric Medical Education of the American Podiatric Medical Association are exempt from obtaining the required CME hours for the continuing medical education reporting period that the licensee was in the residency program. The residency program director must complete the form provided by the board, attesting that the applicant has attended an approved postgraduate clinical residency program for not less than six (6) months during the twenty-four (24)-month continuing medical education renewal reporting period. The certificate must indicate that the applicant was in good standing and indicate the dates of attendance during the postgraduate clinical residency program. The licensee shall maintain this certificate in his/her records of CME attendance.

2. For the first renewal of a podiatrist's license, the board will consider the passing score of the national board (Part III) exam as satisfying twelve (12) hours of the required twenty-four (24) hours of CME as required by this rule if the national board (Part III) exam was taken within the CME reporting period.

3. A licensee who has obtained American Podiatric Specialty Board certification or recertification during the reporting period shall be deemed to have obtained the required hours of CME. The licensee shall maintain documentation evidencing the certification or recertification.

4. A licensee who participated in a fellowship program in an approved teaching institution shall be deemed to have obtained the required hours of CME if at least sixty (60) days of the reporting period were spent in the fellowship and the fellowship is determined to be advanced training. The licensee shall maintain documentation from the fellowship program director verifying the number of days in the program and that the program is advanced training.

5. Pursuant to section 41.946, RSMo and notwithstanding any other provision of law, any person licensed or certified to prac-

tice a trade or profession by the state of Missouri or any branch or agency thereof that requires an annual period of continuing education or training as a condition of continued or renewed licensing or certification, and who is or becomes a member of the National Guard or of any reserve component of the Armed Forces of the United States who is called to full-time active duty in the service of the United States under competent orders shall, during the period of full-time active duty, be exempt from any such requirement for continuing education or training without his/her status, license, certification or right to practice his/her trade or profession being affected and shall not be required, upon returning from full-time active duty, to make up or retake any training or education for which s/he was exempt under the provisions of this section.

(I) A licensee who cannot complete the required hours of CME because of personal illness or other circumstances beyond the licensee's control, which the board deems to be sufficient to impose an insurmountable hardship may apply for an extension of time to complete the CME requirements. Any extension of time to complete the CME requirements will be granted solely at the discretion of the board. The licensee shall make a written application for extension of time prior to the February 28 deadline for completion of the CME requirement. The application for extension shall be accompanied by the Continuing Medical Education Reporting Period Late Fee. The licensee shall provide full and complete written documentation of the grounds supporting the reasons for which an extension is sought.

1. Illness extensions may be granted only to a licensee who has suffered a personal illness or personal disability of a nature as to prevent him/her from engaging in the active practice of podiatry for at least a majority of the reporting period. At a minimum, the licensee shall provide the board with written documentation from the licensee's treating physician stating the nature of the illness or disability, the period of the illness or disability, any limitations on the licensee's activities that resulted from the illness or disability, documentation of the number of CME hours earned in the two (2)-year reporting period and a plan for completing the balance of the CME requirement.

2. The board, solely at its discretion, may grant an extension based on unforeseeable circumstances beyond the licensee's control that impose an insurmountable hardship precluding the licensee from obtaining the required CME. At a minimum, the licensee shall provide written documentation



explaining specifically and in detail the nature of the circumstances, why the circumstances were unforeseeable and beyond the licensee's control, the period during which the circumstances were in existence, documentation of the number of CME credits earned in the two (2)-year reporting period and the licensee's plan for completing the balance of the CME requirement.

3. An extension of time shall not be granted to any licensee who obtained an extension in the immediately preceding CME reporting period in which the licensee held an active license.

(8) Any application for biennial license renewal received by the board more than six (6) months after the renewal date shall be void and the applicant shall be required to make new application and pay the applicable fees in accordance with section 330.030, RSMo, which shall include successful completion of the Missouri Law Examination administered by the board.

(9) A Missouri licensed podiatrist has the ongoing obligation to keep the board informed if the licensee has been finally adjudicated or found guilty, or entered a plea of guilty or *nolo contendere*, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated under Chapter 330, RSMo, for any offense an essential element of which is fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence was imposed. The licensee shall provide this information to the board within thirty (30) days of being finally adjudicated or found guilty.

AUTHORITY: sections 330.010, 330.070 and 330.140, RSMo 2000. This rule originally filed as 4 CSR 230-2.030. Original rule filed Dec. 23, 1975, effective Jan. 2, 1976. Rescinded and readopted: Filed Dec. 9, 1981, effective March 11, 1982. Amended: Filed Nov. 12, 1982, effective Feb. 11, 1983. Amended: Filed Dec. 6, 1982, effective March 11, 1983. Amended: Filed Sept. 24, 1984, effective Feb. 13, 1985. Amended: Filed Oct. 15, 1985, effective Jan. 12, 1986. Amended: Filed July 17, 1989, effective Oct. 12, 1989. Amended: Filed Aug. 2, 1991, effective Dec. 9, 1991. Amended: Filed Feb. 4, 1992, effective June 25, 1992. Amended: Filed Oct. 30, 1997, effective May 30, 1998. Amended: Filed Aug. 20, 1998, effective Jan. 30, 1999. Amended: Filed April 29, 1999, effective Oct. 30, 1999. Amended: Filed Sept.*

1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.030, effective Aug. 28, 2006.

**Original authority: 330.010, RSMo 1939, amended 1945, 1961, 1969, 1976, 1995, 1998; 330.070 RSMo 1945, amended 1947, 1971, 1981, 1999; and 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*

Op. Atty. Gen. No. 410, Fulkerson (12-5-68). *It would be valid exercise of inherent police power of state to adopt legislation requiring reasonable "continuing education" program in the field of podiatry as condition to annual registration.*

20 CSR 2230-2.041 Public Complaint Handling and Disposition Procedure

PURPOSE: This rule establishes a procedure for the receipt, handling and disposition of public complaints by the board, pursuant to the mandate of section 4.16(6) of the Omnibus State Reorganization Act of 1974, Appendix B, RSMo.

(1) The State Board of Podiatric Medicine shall receive and process each complaint made against any licensee, permit holder, registrant or applicant of the board, or unlicensed individual or entity, which complaint alleges certain acts or practices which may constitute one (1) or more violations of the provisions of Chapter 330, RSMo. Any member of the public or the profession or any federal, state or local official, may make and file a complaint with the board. Complaints shall be received from sources outside Missouri and processed in the same manner as those originating within Missouri. No member of the State Board of Podiatric Medicine shall file a complaint with this board while holding that office, unless that member is excused from further board deliberations or activity concerning the matters alleged within that complaint. The executive director or any staff member of the board may file a complaint pursuant to this rule in the same manner as any member of the public.

(2) Complaints should be mailed or delivered to the following address: State Board of Podiatric Medicine, 3605 Missouri Boulevard, PO Box 423, Jefferson City, MO 65102-0423. However, actual receipt of the complaint by the board at its administrative offices in any manner shall be sufficient. Complaints shall be made based upon personal knowledge or upon information and belief, reciting information received from other sources.

(3) All complaints shall be made in writing. Complaints shall be made on forms provided by the board and available upon request. Oral or telephone communications will not be considered or processed as complaints, but the person making the communications will be provided with a complaint form and requested to complete and return the form to the board in written form. Any member of the administrative staff of the board may make and file a complaint based upon information and belief, in reliance upon oral, telephone or written communications received by the board, unless that staff member believes those communications to be false.

(4) Each complaint received under this rule shall be logged in a book and/or database maintained by the board for that purpose. Complaints shall be logged in consecutive order as received. The log book and/or database shall contain a record of each complainant's name and address; the name and address of the subject(s) of the complaint; the date each complaint is received by the board; a brief statement of the acts complained of, including the name of any person injured or victimized by the alleged acts or practices; a notation whether the complaint resulted in its dismissal by the board or informal charges being filed with the Administrative Hearing Commission; and the ultimate disposition of the complaint. The log book and/or database shall be a closed record of the board.

(5) Each complaint received under this rule shall be acknowledged in writing. The acknowledgment shall state that the complaint is being referred to the board for consideration at its next regularly scheduled meeting. The complainant shall be informed as to whether the complaint is being investigated and later as to whether the complaint has been dismissed by the board, or is being referred to legal counsel for filing with the Administrative Hearing Commission. The complainant shall be notified of the ultimate disposition of the complaint, excluding judicial appeals, and shall be provided with copies of the decisions (if any) of the Administrative Hearing Commission and the board at that time; provided, that the provisions of this section shall not apply to complaints filed by staff members of the board based on information and belief, acting in reliance on third-party information received by the board.

(6) Both the complaint and any information obtained as a result of the investigation shall be considered a closed record and shall not be available for inspection by the general public. However, upon written request to the



board, a copy of the complaint and any attachments to the complaint may be provided to any licensee who is the subject of that complaint or his/her counsel.

(7) This rule shall not be deemed to limit the board's authority to file a complaint with the Administrative Hearing Commission charging a licensee or temporary license holder of the board with any actionable conduct or violation, whether or not that complaint exceeds the scope of the acts charged in a preliminary public complaint filed with the board, and whether or not any public complaint has been filed with the board.

(8) The board interprets this rule, which is required by law, to exist for the benefit of those members of the public who submit complaints to the board, and for those persons or entities within the legislative and executive branches of government having supervisory or other responsibilities or control over the professional licensing boards. This rule is not deemed to protect or inure to the benefit of those licensees or temporary license holders or other persons against whom the board has instituted or may institute administrative or judicial proceedings concerning possible violations of the provisions of Chapter 330, RSMo.

AUTHORITY: section 330.140, RSMo 2000 and 620.010.15(6), RSMo Supp. 2004. This rule originally filed as 4 CSR 230-2.041. Original rule filed Feb. 9, 1982, effective May 13, 1982. Amended: Filed Oct. 30, 1997, effective April 30, 1998. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.041, effective Aug. 28, 2006.*

**Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998 and 620.010, RSMo 1973, amended 1981, 1983, 1986, 1989, 1990, 1993, 1994, 1995, 1999, 2001.*

20 CSR 2230-2.045 Public Records

PURPOSE: This rule establishes standards of compliance with Chapter 610, RSMo, as it relates to public records of the State Board of Podiatric Medicine.

(1) All public records of the State Board of Podiatric Medicine shall be open for inspection and copying by the general public at the board's office during normal business hours, holidays excepted, except for those records closed pursuant to section 610.021, RSMo. All public meetings of the State Board of Podiatric Medicine, not closed pursuant to

the provisions of section 610.021, RSMo, will be open to the public.

(2) The State Board of Podiatric Medicine establishes the executive director of the board as the custodian of its records as required by section 610.023, RSMo. The executive director is responsible for maintaining the board's records and for responding to requests for access to public records and may appoint deputy custodians as necessary for the efficient operation of the board.

(3) When the custodian believes that requested access is not required under Chapter 610, RSMo, the custodian shall inform the requesting party that compliance cannot be made, specifying what sections of Chapter 610, RSMo, require that the record remain closed. Correspondence or documentation of the denial shall be copied to the board's general counsel. The custodian also shall inform the requesting party that s/he may appeal directly to the board for access to the records requested. The appeal and all pertinent information shall be placed on the agenda for the board's next regularly scheduled meeting. If the board reverses the decision of the custodian, the board shall direct the custodian to advise the requesting party and supply access to the information during regular business hours at the requesting party's convenience.

(4) The custodian shall maintain a file that will contain copies of all written requests for access to records and responses to these requests. The requests shall be maintained on file with the board for a period of one (1) year and will be maintained as a public record of the board open for inspection by any member of the general public during regular business hours.

(5) Whenever a request for inspection of public records is made and the individual inspecting the records requests copies of the records, the board may charge a reasonable fee for the cost of inspecting and copying the records. The fee charged by the board shall be as follows:

(A) A fee for copying public records shall not exceed the actual cost of the document search and duplication; and

(B) The board may require payment for these fees prior to making the copies.

AUTHORITY: sections 330.140, 610.010-610.035, and 620.010.14, RSMo 2000. This rule originally filed as 4 CSR 230-2.045. Original rule filed Nov. 1, 2001, effective April 30, 2002. Moved to 20 CSR 2230-2.045, effective Aug. 28, 2006.*

**Original authority: 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998; 610.010-610.035, see Missouri Revised Statutes; and 620.010, RSMo 1973, amended 1981, 1983, 1986, 1989, 1990, 1993, 1994, 1995, 1999, 2001.*

20 CSR 2230-2.050 Reciprocity

PURPOSE: This rule clarifies the requirements for Missouri licensure by reciprocity.

(1) An applicant for a Missouri license by reciprocity shall submit an application on the form provided by the board.

(A) The application shall be submitted with the following documentation:

1. A copy of the applicant's original license to practice podiatric medicine, which must have been obtained by examination if that license has lapsed, proof of interim licensure satisfactory to the board;

2. Proof of the original licensing state's educational requirements for licensure as a podiatrist;

3. A recent photograph;

4. The current Reciprocity License Fee;

5. An official transcript from the college of podiatric medicine from which the applicant graduated. If the applicant attended more than one (1) college of podiatric medicine in order to obtain all of the credits necessary for graduation, the applicant shall submit official transcripts from all podiatric colleges he/she attended;

6. Proof of age;

7. Proof that the applicant's fingerprints have been submitted to the Missouri State Highway Patrol for criminal history records checks;

8. Proof of good moral character in the form of reference letters from persons who have known the applicant for at least five (5) years, on forms provided by the board, from three (3) of the following four (4) classes of individuals:

A. An employer;

B. A person with whom the applicant has practiced podiatric medicine;

C. The chief of staff of a hospital where the applicant has privileges of any type; and

D. A member of the community where the applicant resides or practices; and

9. The applicant shall provide the board with a request directed to the regulatory entity in each state, United States territory, province, or country in which a license, certificate, registration or permit is held or has ever been held to submit verification of licensure, certification, registration or permit directly to the board. The request shall be accompanied by any fee required by the



regulatory entity. The verification shall include:

A. The license, registration, certificate or permit issued, the number, status, issue and expiration dates;

B. Information regarding any disciplinary action;

C. Method of licensure, registration or certification;

D. The name and title of the person verifying information;

E. The date; and

F. The entity's seal.

(B) Application forms may be obtained from the board office at PO Box 423, Jefferson City, MO 65102-0423 or by visiting the board's website at <http://pr.mo.gov/podiatrists.asp>. A copy of the current statutory provisions and board rules regarding the practice of podiatric medicine will be provided with the application form.

(C) No application will be considered unless each section of the application form is fully completed, the form is properly attested and all required documentation is completed and submitted to the board.

(D) A reciprocity applicant shall achieve a score of ninety percent (90%) or greater on the Missouri Law Examination administered by the board as an open book exam. The applicant shall be required to pay the Missouri Law Examination Administration Fee. The board's Missouri Law Examination will test the applicant's knowledge of Missouri statutes and rules relating to podiatric medicine.

(2) All credentials required by this rule for licensure by reciprocity must be in the possession of the board office at least thirty (30) days before any regular meeting of the board in order for the application to be considered by the board.

(3) Applicants for licensure by reciprocity may be required to appear in person before the board in order for the application to be approved.

(4) The board reserves the exclusive right to pass upon the standards of qualifications of the various states from which applicants may be accepted without examination and it reserves the right to reject an applicant on educational, moral, ethical, professional or other grounds.

(5) For every person desiring to enter the profession of podiatric medicine within Missouri, the board shall conduct a criminal history background check through the Missouri State Highway Patrol. Applicants shall submit to the board the applicable fee for the crimi-

nal history background check as determined by the Missouri State Highway Patrol.

AUTHORITY: sections 330.030, RSMo Supp. 2006 and 330.140, RSMo 2000. This rule originally filed as 4 CSR 230-2.050. Original rule filed Dec. 23, 1975, effective Jan. 2, 1976. Amended: Filed April 14, 1981, effective July 12, 1981. Rescinded and readopted: Filed Dec. 9, 1981, effective March 11, 1982. Amended: Filed March 4, 1991, effective Sept. 30, 1991. Amended: Filed Feb. 3, 1992, effective June 25, 1992. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.050, effective Aug. 28, 2006. Amended: Filed July 11, 2007, effective Jan. 30, 2008.*

**Original authority: 330.030, RSMo 1939, amended 1943, 1945, 1947, 1953, 1965, 1981, 2005 and 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*

20 CSR 2230-2.065 Temporary Licenses for Internship/Residency

PURPOSE: This rule interprets section 330.065, RSMo.

(1) Any applicant desiring to serve a period of internship/residency in a Missouri hospital may do so without obtaining a permanent license from the board if he/she qualifies for and obtains a temporary license for internship/residency for a two (2)-year period from the board. Any applicant desiring to obtain a temporary license shall make application on the form provided by the board. The applicant shall also submit evidence to the board that he/she meets the requirements of this section. There shall be an application fee which shall accompany all applications for a temporary license and shall be nonrefundable.

(2) Application forms may be obtained from the board office at PO Box 423, Jefferson City, MO 65102-0423 or by visiting the board's website at <http://pr.mo.gov/podiatrists.asp>. A copy of the current statutory provisions and board rules regarding the practice of podiatric medicine will be provided with the application form.

(3) No application will be considered unless it is fully completed and properly attested. Items necessary to complete the application include:

(A) Each section on the application form itself;

(B) A recent photograph;

(C) The current Temporary Application Processing Fee;

(D) An official transcript from a college of podiatric medicine;

(E) A certified score report from the National Board of Podiatric Medical Examiners, certifying satisfactory completion of Parts I and II of the National Board Examination; and

(F) A letter from the residency director at the Missouri hospital accredited by the American Podiatric Medical Association where the applicant will be serving his/her internship/residency program with the beginning and ending dates of the postgraduate clinical residency program.

(4) No person temporarily registered as an intern/resident shall practice podiatric medicine outside the physical confines of the sponsoring hospital; provided, however, that an intern/resident may practice at any facility approved for the residency by the Council on Podiatric Medical Education of the American Podiatric Medical Association.

(5) For newly established postgraduate clinical internship/residency programs, a temporary license may be issued to applicants when the postgraduate clinical internship/residency program is accorded preliminary approval or candidate status by the Council on Podiatric Medical Education of the American Podiatric Medical Association. However, an intern/resident who applies for a permanent license upon completion of such a postgraduate clinical internship/residency program will not be eligible for permanent licensure until his/her postgraduate clinical internship/residency program completes all the steps necessary for and receives approval or accreditation by the Council on Podiatric Medical Education of the American Podiatric Medical Association. The date on which the Council on Podiatric Medical Education of the American Podiatric Medical Association deems the postgraduate clinical internship/residency program approved or accredited shall be the starting date from which an intern/resident shall receive credit toward the intern's/resident's required period of postgraduate clinical internship/residency.

(6) The temporary license for postgraduate clinical internship/residency, upon approval by the board for good cause shown, may be renewed for an additional one (1)-year period. If during the period of internship/residency specified in the temporary license, the holder thereof shall transfer from the postgraduate clinical internship/residency program offered by the hospital specified in his/her application, the holder must, before such transfer, receive approval for the transfer from the board. Upon approval of the



transfer, the temporary license shall remain valid for two (2) years from the original date of issuance.

(7) An applicant approved for a temporary license shall be required to pay the current Temporary License Fee.

(8) For every person desiring to enter the profession of podiatric medicine within Missouri, the board shall conduct a criminal history background check through the Missouri State Highway Patrol. Applicants shall submit to the board the applicable fee for the criminal history background check as determined by the Missouri State Highway Patrol.

(9) Temporary internship/residency applicants who apply for a permanent license upon completion of at least a twelve (12)-month postgraduate clinical residency training program shall be assessed the Permanent Application Processing Fee at that time and shall be assessed the Permanent License Fee if approved by the board.

(10) Violation of this rule shall be treated as cause for initiation of disciplinary proceedings against a temporary licensee under section 330.160.2(5) and (6), RSMo.

AUTHORITY: sections 330.010 and 330.065, RSMo Supp. 2006 and 330.140, RSMo 2000. This rule originally filed as 4 CSR 230-2.065. Original rule filed Dec. 9, 1981, effective March 11, 1982. Amended: Filed Aug. 9, 1993, effective March 10, 1994. Amended: Filed Oct. 25, 1995, effective May 30, 1996. Amended: Filed Oct. 30, 1997, effective April 30, 1998. Amended: Filed June 1, 1999, effective Nov. 30, 1999. Amended: Filed Aug. 12, 1999, effective Feb. 29, 2000. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.065, effective Aug. 28, 2006. Amended: Filed July 11, 2007, effective Jan. 30, 2008.*

**Original authority: 330.010, RSMo 1939, amended 1945, 1961, 1969, 1976, 1995, 1998, 2005; 330.065, RSMo 1981, 2005; and 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*

20 CSR 2230-2.070 Fees

PURPOSE: This rule establishes and fixes the various fees and charges authorized by Chapter 330, RSMo.

(1) The following fees are established by the State Board of Podiatric Medicine:

- | | |
|---------------------------|----------|
| (A) Permanent License Fee | \$ 50.00 |
| (B) Temporary License Fee | \$ 25.00 |

(C) Reciprocity License Fee	\$200.00
(D) Missouri Law Examination Administrative Fee	\$ 25.00
(E) Duplicate License Fee	\$ 10.00
(F) Biennial Renewal Fee	\$200.00
1. Effective December 1, 2017 through February 28, 2018	\$ 5.00
(G) Inactive Biennial Renewal Fee	\$100.00
1. Effective December 1, 2017 through February 28, 2018	\$ 5.00
(H) Renewal Late Fee (per month)	\$ 30.00
(I) Certification of Grades Fee	\$ 5.00
(J) Reciprocity Certification Fee	\$ 10.00
(K) Certification of Corporation Fee	\$ 10.00
(L) Temporary Application Processing Fee	\$100.00
(M) Uncollectible Fee (uncollectible check or other uncollectible financial instrument)	\$ 25.00
(N) Permanent Application Processing Fee	\$150.00
(O) Continuing Education Board Review Fee	\$ 25.00
(P) Background Check Fee (amount determined by the Missouri State Highway Patrol)	
(Q) CME Reporting Period Late Fee	\$ 50.00

(2) All fees are nonrefundable.

(3) The provisions of this rule are declared severable. If any fee fixed by this rule is held invalid by a court of competent jurisdiction or by the Administrative Hearing Commission, the remaining provisions of this rule shall remain in full force and effect, unless otherwise determined by a court of competent jurisdiction or by the Administrative Hearing Commission.

AUTHORITY: sections 330.095 and 330.140, RSMo 2016. This rule originally filed as 4 CSR 230-2.070. Emergency rule filed June 30, 1981, effective July 9, 1981, expired Nov. 11, 1981. Original rule filed June 30, 1981, effective Nov. 12, 1981. Amended: Filed Nov. 10, 1981, effective Feb. 11, 1982. Amended: Filed Feb. 9, 1982, effective May 13, 1982. Amended: Filed Nov. 12, 1982, effective Feb. 11, 1983. Emergency amendment filed Dec. 1, 1983, effective Dec. 11, 1983, expired March 29, 1984. Amended: Filed Dec. 1, 1983, effective March 11, 1984. Amended: Filed April 3, 1984, effective Aug. 12, 1984. Amended: Filed Sept. 24, 1984, effective Jan. 13, 1985. Amended: Filed June 18, 1987, effective Sept. 11, 1987. Amended: Filed July 17, 1989, effective Oct. 12, 1989.*

Emergency amendment filed Oct. 13, 1989, effective Nov. 11, 1989, expired March 10, 1990. Amended: Filed Oct. 13, 1989, effective Jan. 12, 1990. Amended: Filed May 1, 1991, effective Sept. 30, 1991. Amended: Filed June 18, 1991, effective Oct. 31, 1991. Amended: Filed Feb. 3, 1992, effective June 25, 1992. Amended: Filed Nov. 2, 1992, effective May 6, 1993. Amended: Filed Sept. 23, 1993, effective May 9, 1994. Amended: Filed Aug. 30, 1995, effective Feb. 25, 1996. Amended: Filed Oct. 30, 1997, effective April 30, 1998. Amended: Filed April 29, 1999, effective Oct. 30, 1999. Amended: Filed Jan. 28, 2000, effective July 30, 2000. Amended: Filed Dec. 9, 2002, effective June 30, 2003. Amended: Filed Sept. 1, 2004, effective March 30, 2005. Moved to 20 CSR 2230-2.070, effective Aug. 28, 2006. Emergency amendment filed Nov. 10, 2015, effective Nov. 20, 2015, expired May 17, 2016. Amended: Filed April 14, 2017, effective Oct. 30, 2017.

**Original authority: 330.095, RSMo 1999 and 330.140, RSMo 1945, amended 1981, 1993, 1995, 1998.*