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SALUS POPULI SUPREMA LEX ESTO

“The welfare of the people shall be the supreme law.”



JOHN R. ASHCROFT
SECRETARY OF STATE

MISSOURI
REGISTER

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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 check out the website at www.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		Division	Chapter	Rule
3	CSR	10-	4	.115
Department	<i>Code of State Regulations</i>	Agency Division	General area regulated	Specific area 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.

Code and Register on the Internet

The *Code of State Regulations* and *Missouri Register* are available on the Internet.

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

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

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

Rules appearing under this heading are filed under the authority granted by section 536.025, RSMo 2000. 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) 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 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure

Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

EMERGENCY AMENDMENT

19 CSR 30-40.420 Trauma Center Designation Requirements. The department is amending sections (1)–(4) and relettering through-out; adding new sections (3) and (4); and adding the form included after the rule.

PURPOSE: This amendment adds an option and establishes requirements for hospitals which are verified as trauma centers by the American College of Surgeons to become designated as level I, II, III, or IV trauma centers without being reviewed by DHSS (the department). This amendment also adds an application for these hospitals which are verified as trauma centers by the American College of Surgeons to complete in order to become designated as level I, II, III, or IV trauma centers by the department.

EMERGENCY STATEMENT: Trauma is the fourth leading cause of death in Missouri. Trauma is also the most frequent cause of visits to the emergency department. Injuries account for the second highest total for inpatient hospital charges. Death rates in Missouri from injuries, suicides, falls, and motor vehicle injuries exceed the national rates. Research shows an organized, integrated system based on

regional medical resources saves the most lives and decreases permanent injuries. Missouri trauma centers provide a timely and medically appropriate focused approach to trauma care that provides patients with better trauma outcomes. During the 2017 legislative session, section 190.241, RSMo, was amended to add an option for hospitals to become designated as trauma centers by the department if the hospitals are verified as trauma centers by a national verifying or designating body at the level which corresponds to a level approved by rule. The department has approved the American College of Surgeons as the trauma verifying body that hospitals could be verified with in order to receive a designation from the department without being reviewed by the department. The department has determined the reviews conducted by the American College of Surgeons are comparable to reviews conducted by the department. Currently, there are three (3) adult trauma centers in Missouri that are verified as level I trauma centers by the American College of Surgeons. There is also one (1) pediatric trauma center in Missouri verified by the American College of Surgeons as a level I pediatric trauma center. One (1) level I adult trauma center and one (1) pediatric trauma center will have their renewal reviews by the department and the American College of Surgeons conducted within the next two (2) months. By having this rule in effect prior to the expiration of these two (2) hospitals' trauma center designations within the next two (2) months, then these hospitals will not have to meet the requirements of both the American College of Surgeons and the department. Overall, this rule will decrease the expense and staff time and involvement for the department and the hospitals in preparing for reviews conducted in conjunction with the American College of Surgeons for approximately four (4) hospitals in Missouri that are designated by the department and verified by the American College of Surgeons as trauma centers. As a result, the DHSS finds an immediate danger to the public health, safety, and/or welfare and a compelling governmental interest, which requires this emergency action. A proposed amendment, which covers the same material, is published in this issue of the *Missouri Register*. The copy 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*. The DHSS believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed February 2, 2018, becomes effective February 12, 2018, and expires August 10, 2018.

(1) Participation in Missouri's trauma center program is voluntary and no hospital shall be required to participate. No hospital shall in any way indicate to the public that it is a trauma center unless that hospital has been designated as such by the Emergency Medical Services (EMS) Bureau. Hospitals desiring trauma center designation shall apply to the EMS Bureau **either through the option outlined in section (2) or section (3)**. Only those hospitals found [by review] to be in compliance with the requirements of the rules in this chapter shall be designated by the EMS Bureau as trauma centers.

(2) Hospitals requesting to be reviewed and designated as a trauma center by the department shall meet the following requirements:

[(2)](A) The application required for trauma center designation shall be made upon forms prepared or prescribed by the EMS Bureau and shall contain information the EMS Bureau deems necessary to make a fair determination of eligibility for review and designation in accordance with the rules of this chapter[.];

[(A)](B) An application shall include the following information: designation level requested; name, address, and telephone number of hospital; name of chief executive officer, chairman/president of board of trustees, surgeon in charge of trauma care, trauma nurse coordinator/program manager, director of emergency medicine, and director of trauma intensive care; number of emergency department trauma

caseload, trauma team activations, computerized tomography scan capability, magnetic resonance imaging capability, operating rooms, intensive care unit/critical care unit beds, burn beds, rehabilitation beds, trauma surgeons, neurosurgeons, orthopedists, emergency department physicians, anesthesiologists, certified registered nurse anesthetists, pediatricians, and pediatric surgeons; date of application; and signatures of the chairman/president of board of trustees, hospital chief executive officer, surgeon in charge of trauma, and director of emergency medicine. The trauma center review and designation application form, included herein, is available at the EMS Bureau office or may be obtained by mailing a written request to Missouri Department of Health and Senior Services, EMS Bureau, PO Box 570, Jefferson City, MO 65102-0570./;

/(B)/(C) The EMS Bureau shall notify the hospital of any apparent omissions or errors in the completion of the application and shall contact the hospital to arrange a date for the review./;

/(C)/(D) Failure of a hospital to cooperate in arranging for a mutually suitable date for review shall constitute forfeiture of application when a hospital's initial review is pending or suspension of designation when a hospital's verification or validation review is pending./;

/(D)/(E) Hospitals designated as trauma centers under the previous designation system shall maintain their designation until a review is conducted using the rules of this chapter./;

/(3)/(F) The review of hospitals for trauma center designation shall include interviews with designated hospital staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter. The cost of any and all site reviews shall be paid by each applicant hospital or renewing trauma center unless adequate funding is available to the EMS Bureau to pay for reviews./;

/(A)/(G) For the purpose of reviewing trauma centers and hospitals applying for trauma center designation, the EMS Bureau shall use review teams consisting of two (2) surgeons and one (1) emergency physician who are experts in trauma care and one (1) trauma nurse coordinator/trauma program manager experienced in trauma center review. The team shall be disinterested politically and financially in the hospitals to be reviewed. Out-of-state review teams shall conduct levels I and II reviews. In-state reviewers may conduct level III reviews. In the event that out-of-state reviewers are unavailable, level II reviews may be conducted by in-state reviewers from EMS regions other than the region being reviewed with approval of the director of the Department of Health and Senior Services or his/her designee. When utilizing in-state review teams, the level II trauma center shall have the right to refuse one (1) review team./;

/(B)/(H) Any substantial deficiencies cited in the initial review or the validation review regarding patient care issues, especially those related to delivery of timely surgical intervention, shall require a focused review to be conducted. When deficiencies involve documentation or policy or equipment, the hospital's plan of correction shall be submitted to the EMS Bureau and verified by EMS Bureau personnel./;

/(C)/(I) The verification review shall be conducted in the same manner and detail as initial and validation reviews. A review of the physical plant will not be necessary unless a deficiency was cited in the physical plant in the preceding initial or validation review. If deficiencies relate only to a limited number of areas of hospital operations, a focused review shall be conducted. The review team for a focused review shall be comprised of review team members with the required expertise to evaluate corrections in the specified deficiency area./;

/(D)/(J) Validation reviews shall occur every five (5) years./; *[Level I and II trauma centers undergoing American College of Surgeons reverification review at shorter intervals may incorporate EMS Bureau personnel in these reviews and, if they successfully pass reverification and meet all requirements herein, submit that review for EMS Bureau reverification.]*

/(E)/(K) Upon completion of a review, the reviewers shall submit a report of their findings to the EMS Bureau. *[If this is also an American College of Surgeons (ACS) verification or reverification, the hospital shall request a copy of the report be sent directly to the EMS Bureau from the ACS verification committee.]* The report shall state whether the specific standards for trauma center designation have or have not been met; if not met, in what way they were not met. The report shall include the patient chart audits and a narrative summary to include pre-hospital, hospital, trauma service, emergency department, operating room, recovery room, clinical lab, intensive care unit, blood bank, rehabilitation, performance improvement and patient safety programs, education, outreach, research, chart review, and interviews. The EMS Bureau has final authority to determine compliance with the rules of this chapter./;

/(F)/(L) Within thirty (30) days after receiving a review report, the EMS Bureau shall return a copy of the report in whole to the chief executive officer of the hospital reviewed. Included with the report shall be notification indicating that the hospital has met the criteria for trauma center designation or has failed to meet the criteria for the designation level for which it applied and options the hospital may pursue./;

/(G)/(M) If a verification review is required, the hospital shall be allowed a period of six (6) months to correct deficiencies. A plan of correction form shall be provided to the EMS Bureau and shall be completed by the hospital and returned to the EMS Bureau within thirty (30) days after notification of review findings./;

/(H)/(N) Once a review is completed, a final report shall be prepared by the EMS Bureau. The final report shall be public record and shall disclose the standards by which the reviews were conducted and whether the standards were met. The reports filed by the reviewers shall be held confidential and shall be disclosed only to the hospital's chief executive officer or an authorized representative./;

/(4)/(O) The EMS Bureau shall have the authority to put on probation, suspend, revoke, or deny trauma center designation if there is reasonable cause to believe that there has been a substantial failure to comply with the requirements of the rules in this chapter. Once designated as a trauma center, a hospital may voluntarily surrender the designation at any time without giving cause, by contacting the EMS Bureau. In these cases, the application and review process shall be completed again before the designation may be reinstated./;

/(A)/(P) Trauma center designation shall be valid for a period of five (5) years from the date the trauma center is designated. Expiration of the designation shall occur unless the trauma center applies for validation review within this five- (5)-/ year period. Trauma center designation shall be site specific and not transferable when a trauma center changes location./;

/(B)/(Q) The EMS Bureau shall investigate complaints against trauma centers. Failure of the hospital to cooperate in providing documentation and interviews with appropriate staff may result in revocation of trauma center designation. Any hospital, which takes adverse action toward an employee for cooperating with the EMS Bureau regarding a complaint, is subject to revocation of trauma center designation.

(3) Hospitals seeking trauma center designation by the department based on their current verification as a trauma center by the American College of Surgeons shall meet the following requirements:

(A) An application for trauma center designation by the department for hospitals that have been verified as a trauma center by the American College of Surgeons shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a determination of eligibility for review and designation in accordance with the rules of this chapter. The application for trauma verified hospital designation form, included herein, is available at the Health Standards and Licensure (HSL) office, or online at the department's website

at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for trauma center designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation;

(B) Both sections A and B of the application for trauma verified hospital designation form, included herein, shall be complete before the department designates a hospital/trauma center. The department shall notify the hospital/trauma center of any apparent omissions or errors in the completion of the application for trauma verified hospital designation form. Upon receipt of a completed and approved application, the department shall designate such hospital as follows:

1. The department shall designate a hospital as a level I trauma center if such hospital has been verified as a level I trauma center (adult and pediatric) by the American College of Surgeons;

2. The department shall designate a hospital as a level II trauma center if such hospital has been verified as a level II trauma center (adult and pediatric) by the American College of Surgeons;

3. The department shall designate a hospital as a level III trauma center if such hospital has been verified as a level III trauma center (adult and pediatric) by the American College of Surgeons;

4. The department shall designate a hospital as a level IV trauma center if such hospital has been verified as a level IV trauma center (adult and pediatric) by the American College of Surgeons;

5. The department shall designate a hospital as a level I pediatric trauma center if such hospital has been verified as a level I trauma center (only treats children) by the American College of Surgeons;

6. The department shall designate a hospital as a level II pediatric trauma center if such hospital has been verified as a level II trauma center (only treats children) by the American College of Surgeons;

7. The department shall designate a hospital as a level I trauma center if such hospital has been verified as a level I trauma center (only treats adults) by the American College of Surgeons; and

8. The department shall designate a hospital as a level II trauma center if such hospital has been verified as a level II trauma center (only treats adults) by the American College of Surgeons;

(C) Annually from the date of designation by the department submit to the department proof of verification as a trauma center by the American College of Surgeons and the names and contact information of the medical director of the trauma center and the program manager of the trauma center;

(D) Within thirty (30) days of any changes submit to the department proof of verification as a trauma center by the American College of Surgeons and the names and contact information of the medical director of the trauma center and the program manager of the trauma center;

(E) Submit to the department a copy of the verifying organization's final trauma center verification survey results within thirty (30) days of receiving such results;

(F) Submit to the department a completed application for trauma verified hospital designation form every three (3) years;

(G) Participate in the emergency medical services regional system of trauma care in its respective emergency medical services region as defined in 19 CSR 30-40.302;

(H) Participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources;

(I) Submit data to meet the data submission requirements in 19 CSR 30-40.430;

(J) The designation of a hospital as a trauma center pursuant to section (3) shall continue if such hospital retains verification as a trauma center by the American College of Surgeons; and

(K) The department may remove a hospital's designation as a trauma center if requested by the hospital or the department determines that the verification by the American College of Surgeons has been suspended or revoked. The department may also remove a hospital's designation as a trauma center if the department determines the hospital's verification with the American College of Surgeons has expired. Any decision made by the department to withdraw the designation of a trauma center that is based on the revocation or suspension of a verification by the American College of Surgeons shall not be subject to judicial review.

(4) Hospitals that choose to apply to the department under sections (2) and (3) above and maintain a trauma designation with both the department and the American College of Surgeons may request either of the following two (2) options:

(A) Hospitals may choose to apply to the department under section (2) above and meet the requirements in section (2) above and 19 CSR 30-40.410 and 19 CSR 30-40.430. Hospitals may request a separate review by only the department pursuant to section (2). Hospitals may choose to apply to the department under section (3) above and meet the requirements set by the American College of Surgeons. Hospitals may request a separate review by only the American College of Surgeons; or

(B) Hospitals may choose to apply to the department under section (2) above and meet the requirements in section (2) above and 19 CSR 30-40.410 and 19 CSR 30-40.430. Hospitals may choose to apply to the department under section (3) above and meet the requirements set by the American College of Surgeons. Hospitals may request a joint review by both the American College of Surgeons and the department. In a joint review, department personnel shall be incorporated into these reviews upon the consent of the American College of Surgeons. During these joint reviews, the trauma review team chosen by the American College of Surgeons shall also include at least one (1) emergency department physician and at least one (1) trauma program manager (nurse). All costs for the review and review team shall be paid by the hospitals. If a hospital successfully passes the joint review by the department and the American College of Surgeons, then the hospital will be designated by the department as a trauma center under both sections (2) and (3) above.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION OF HEALTH STANDARDS AND LICENSURE
APPLICATION FOR TRAUMA VERIFIED HOSPITAL DESIGNATION

In accordance with the requirements of Chapter 190, RSMo, and the applicable regulations, this application is hereby submitted for designation as a trauma center. Please complete all information.		Organization's Trauma Identification Number	
CURRENT TRAUMA VERIFICATION ORGANIZATION AND LEVEL			
<p style="text-align: center;">ADULT AND PEDIATRIC (TREATS ADULTS AND CHILDREN)</p> <input type="checkbox"/> Level I Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Trauma Center by the American College of Surgeons <input type="checkbox"/> Level III Trauma Center by the American College of Surgeons <input type="checkbox"/> Level IV Trauma Center by the American College of Surgeons	<p style="text-align: center;">PEDIATRIC (TREATS CHILDREN ONLY)</p> <input type="checkbox"/> Level I Pediatric Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Pediatric Trauma Center by the American College of Surgeons	<p style="text-align: center;">ADULT (TREATS ADULTS ONLY)</p> <input type="checkbox"/> Level I Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Trauma Center by the American College of Surgeons	
HOSPITAL INFORMATION			
Name of Hospital (Name to Appear on Designation Certificate)			Telephone Number
Address (Street and Number)	City	Zip Code	
PROFESSIONAL INFORMATION			
Chief Executive Officer		Chairman/President of Board of Trustees	
Trauma Medical Director (Name, email, and contact phone number)		Trauma Program Manager (Name, email, and contact phone number)	
The following should be submitted to the department as indicated:			
<input type="checkbox"/> Proof of trauma verification with the American College of Surgeons with the expiration date of the verification.			
<input type="checkbox"/> Copy of the final trauma survey results from the American College of Surgeons.			
RESOURCE INFORMATION			
E.D. Trauma Caseload	Trauma Team Activations	C.T. Scan Capability	M.R.I. Capability
Operating Rooms	ICU/CCU Beds	Burn Beds	Rehab. Beds
Trauma Surgeons	Neurosurgeons	Orthopaedists	E.D. Physicians
Anesthesiologists	C.R.N.A.s	Pediatricians	Pediatric Surgeons
CERTIFICATION			
We, the undersigned, hereby certify that:			
A. We will annually and within thirty (30) days of any changes submit to the department proof of trauma verification with the American College of Surgeons.			
B. We will annually and within thirty (30) days of any changes submit to the department names and contact information of our medical director and the program manager of the trauma center.			
C. We will submit to the department a copy of our final trauma verification survey results from the American College of Surgeons within thirty (30) days of receiving such results.			
D. We will participate in the emergency medical services regional system of trauma care in our respective emergency medical services region as defined in 19 CSR 30-40.302.			
E. We will participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources.			
F. We will submit data to meet the data submission requirements outlined in 19 CSR 30-40.430.			
G. We understand that our designation as a trauma center by the department shall continue only if our hospital remains verified as a trauma center by the American College of Surgeons.			
Date of application _____			
Signed _____ Chairman/President of Board of Trustees, Owner, or one Partner of Partnership		Signed _____ Hospital Chief Executive Officer	
Signed _____ Trauma Medical Director		Signed _____ Director of Emergency Medicine	

AUTHORITY: sections 190.176 and 190.185, RSMo [Supp. 2007] 2016, and section 190.241, [HB 1790, 94th General Assembly, Second Regular Session, 2008] RSMo Supp. 2017. Emergency rule filed Aug. 28, 1998, effective Sept. 7, 1998, expired March 5, 1999. Original rule filed Sept. 1, 1998, effective Feb. 28, 1999. Amended: Filed May 19, 2008, effective Jan. 30, 2009. Emergency amendment filed Feb. 2, 2018, effective Feb. 12, 2018, expires Aug. 10, 2018. A proposed amendment covering this same material is published in this issue of the Missouri Register.

**Title 19—DEPARTMENT OF HEALTH
AND SENIOR SERVICES**

**Division 30—Division of Regulation and Licensure
Chapter 40—Comprehensive Emergency Medical Services
Systems Regulations**

EMERGENCY AMENDMENT

19 CSR 30-40.750 ST-Segment Elevation Myocardial Infarction (STEMI) Center Designation Application and Review. The department is amending and renumbering the rule text; adding a new section (3); and adding the form included after the rule.

PURPOSE: This amendment adds an option and establishes requirements for hospitals which are certified as STEMI centers by the Joint Commission, the American Heart Association, or the American College of Cardiology to become designated as level I, II, or III STEMI centers without being reviewed by DHSS (the department). This amendment also adds an application for these hospitals which are certified as STEMI centers by the Joint Commission, the American Heart Association, or the American College of Cardiology to complete in order to become designated as level I, II, or III STEMI centers by the department. This amendment also adds focus reviews to be conducted after an initial review. Additionally, this amendment prohibits hospitals from holding themselves out as STEMI centers designated by the department until STEMI initial reviews have been completed by the department for those hospitals applying to be reviewed and designated by the department as STEMI centers during the first round of applications. The department will give all hospitals designated as STEMI centers through sections (2) and (3) written approval of the date these hospitals may begin holding themselves out as department designated STEMI centers during the first round of applications.

EMERGENCY STATEMENT: Heart disease, including STEMI (a specific type of heart attack), is the leading cause of death in Missouri. A STEMI is a type of a heart attack which impairs blood flow to a person's heart muscle. Mortality and disability is reduced when specific therapies are administered to STEMI patients within a short period of time after the onset of STEMI symptoms. The quicker that blood flow is restored to the heart, the less damage is done to the heart muscle. STEMI centers will provide a timely and medically appropriate focused approach to STEMI care that provides patients with better STEMI outcomes. During the 2017 legislative session, section 190.241, RSMo, was amended to add an option for hospitals to become designated as STEMI centers by the department if the hospitals are certified as STEMI centers by the Joint Commission, the American Heart Association, and by other certifying bodies designated by the department. The department has identified other STEMI certifying bodies that hospitals could be certified with in order to receive a designation from the department without being reviewed by the department. The department has approved the American College of Cardiology as a certifying body in addition to the Joint Commission and the American Heart Association whose reviews are comparable to that conducted by the department. In September of 2015, the department began reviewing hospitals in Missouri that had submitted applications for STEMI review during the first round of

applications. The department is nearing the end of the review process for those hospitals that had submitted their STEMI applications to the department during the first round of applications. There are at least three (3) hospitals in Missouri that have submitted to the department an application for STEMI review during the first round of applications which have not yet been reviewed by the department and which already hold a designation with the Joint Commission or the American College of Cardiology. As a result of this amendment, these hospitals will not have to go through dual reviews with both the department and the Joint Commission or the American College of Cardiology. Further, renewal of STEMI designations will begin in September of 2018, because the designations last for a period of three (3) years. Having this amendment in effect prior to September of 2018, will decrease the expense and staff time and involvement for the department and the hospitals in preparing for reviews by both the department and the Joint Commission or the American College of Cardiology for approximately eleven (11) hospitals in Missouri that are designated by the department and certified by the Joint Commission or the American College of Cardiology as chest pain centers. As a result, the DHSS finds an immediate danger to the public health, safety, and/or welfare and a compelling governmental interest, which requires this emergency action. A proposed amendment, which covers the same material, is published in this issue of the Missouri Register. The copy 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. The DHSS believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed February 2, 2018, becomes effective February 12, 2018, and expires August 10, 2018.

(1) Participation in Missouri's STEMI center program is voluntary and no hospital shall be required to participate. No hospital shall hold itself out to the public as a state-designated STEMI center unless it is designated as such by the Department of Health and Senior Services (department). Hospitals desiring STEMI center designation shall apply to the department **either through the option outlined in section (2) or section (3)**. Only those hospitals found *[by review]* to be in compliance with the requirements of the rules of this chapter shall be designated by the department as STEMI centers.

(2) Hospitals requesting to be reviewed and designated as a STEMI center by the department shall meet the following requirements:

(A) An application for STEMI center designation shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a fair determination of eligibility for review and designation in accordance with the rules of this chapter. The STEMI center review and designation application form, included herein, is available at the Health Standards and Licensure (HSL) office, or online at the department's website at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for STEMI center designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation $[.]$;

(B) Both sections A and B of the STEMI center review and designation application form, included herein, shall be complete before the department will arrange a date for the review. The department shall notify the hospital/STEMI center of any apparent omissions or errors in the completion of the STEMI center review and designation application form. When the STEMI center review and designation application form is complete, the department shall contact the hospital/STEMI center to arrange a date for the review $[.]$;

(C) The hospital/STEMI center shall cooperate with the department in arranging for a mutually suitable date for any announced

reviews/./;

/(2)/(D) The different types of **site** reviews to be conducted on hospitals/STEMI centers **seeking STEMI center designation by the department** include:

/(A)/1. An initial review shall occur on a hospital applying to be initially designated as a STEMI center. An initial review shall include interviews with designated hospital staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter;

/(B)/2. A validation review shall occur on a designated STEMI center applying for renewal of its designation as a STEMI center. Validation reviews shall occur no less than every three (3) years. A validation review shall include interviews with designated STEMI center staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter; and

/(C)/3. A focus review shall occur on a designated STEMI center in which an **initial or** validation review was conducted and substantial deficiency(ies) were cited. A review of the physical plant will not be necessary unless a deficiency(ies) was cited in the physical plant in the preceding validation review. The focus review team shall be comprised of a representative from the department and may include a qualified contractor(s) with the required expertise to evaluate corrections in areas where deficiencies were cited/./;

/(3)/(E) STEMI center designation shall be valid for a period of three (3) years from the date the STEMI center/hospital is designated.

/(A)/1. STEMI center designation shall be site specific and non-transferable when a STEMI center changes location.

/(B)/2. Once designated as a STEMI center, a STEMI center may voluntarily surrender the designation at any time without giving cause/./ by contacting the department in writing. In these cases, the application and review process shall be completed again before the designation may be reinstated/./;

/(4)/(F) For the purpose of reviewing previously designated STEMI centers and hospitals applying for STEMI center designation, the department shall use review teams consisting of qualified contractors. These review teams shall consist of one (1) STEMI coordinator or STEMI program manager who has experience in STEMI care and one (1) emergency medicine physician experienced in STEMI care. The review team shall also consist of at least one (1) and no more than two (2) cardiologist(s)/interventional cardiologist(s) who are experts in STEMI care. One (1) representative from the department will also be a participant of the review team. This representative shall coordinate the review with the hospital/STEMI center and the other review team members.

/(A)/1. Any individual interested in becoming a qualified contractor to conduct reviews shall—

/1./A. Send the department a curriculum vitae (CV) or *[resume] résumé* that includes his or her experience and expertise in STEMI care and whether an individual is in good standing with his or her licensing boards. A qualified contractor shall be in good standing with his or her respective licensing boards;

/2./B. Provide the department evidence of his or her previous site survey experience (state and/or national designation survey process); and

/3./C. Submit a list to the department that details any ownership he or she may have in a Missouri hospital(s), whether he or she has been terminated from any Missouri hospital(s), any lawsuits he or she has currently or had in the past with any Missouri hospital(s), and any Missouri hospital(s) for which his or her hospital privileges have been revoked.

/(B)/2. Qualified contractors for the department shall enter into a written agreement with the department indicating, that among other things, they agree to abide by Chapter 190, RSMo, and the rules in this chapter, during the review process/./;

/(5)/(G) Out-of-state review team members shall conduct levels I

and II hospital/STEMI center reviews. Review team members are considered out-of-state review team members if they work outside of the state of Missouri. In-state review team members may conduct levels III and IV hospital/STEMI center reviews. Review team members are considered in-state review team members if they work in the state of Missouri. In the event that out-of-state reviewers are unavailable, levels I and II STEMI center reviews may be conducted by in-state reviewers from Emergency Medical Services (EMS) regions as set forth in 19 CSR 30-40.302 other than the region being reviewed with the approval of the director of the department or his/her designee. When utilizing in-state review teams, levels I and II hospital/STEMI centers shall have the right to refuse one (1) in-state review team or certain members from one (1) in-state review team/./;

/(6)/(H) Hospitals/STEMI centers shall be responsible for paying expenses related to the costs of the qualified contractors to review their respective hospitals/STEMI center during initial, validation, and focus reviews. The department shall be responsible for paying the expenses of its representative. Costs of the review to be paid by the hospital/STEMI center include:

/(A)/1. An honorarium shall be paid to each qualified contractor of the review team. Qualified contractors of the review team for level I and II STEMI center reviews shall be paid six hundred dollars (\$600) for the day of travel per reviewer and eight hundred fifty dollars (\$850) for the day of the review per reviewer. Qualified contractors of the review team for level III and IV STEMI center reviews shall be paid five hundred dollars (\$500) for the day of travel per reviewer and five hundred dollars (\$500) for the day of the review per reviewer. This honorarium shall be paid to each qualified contractor of the review team at the time the site survey begins;

/(B)/2. Airfare shall be paid for each qualified contractor of the review team, if applicable;

/(C)/3. Lodging shall be paid for each qualified contractor of the review team. The hospital/STEMI center shall secure the appropriate number of hotel rooms for the qualified contractors and pay the hotel directly; and

/(D)/4. Incidental expenses, if applicable, for each qualified contractor of the review team shall not exceed two hundred fifty dollars (\$250) and may include the following:

/1./A. Airport parking;

/2./B. Checking bag charges;

/3./C. Meals during the review; and

/4./D. Mileage to and from the review if no airfare was charged by the reviewer. Mileage shall be paid at the federal mileage rate for business miles as set by the Internal Revenue Service (IRS). Federal mileage rates can be found at the website www.irs.gov/;

/(7)/(I) Upon completion of a review, the qualified contractors from the review team shall submit a report of their findings to the department. This report shall state whether the specific standards for STEMI center designation have or have not been met and if not met, in what way they were not met. This report shall detail the hospital/STEMI center's strengths, weaknesses, deficiencies, and recommendations for areas of improvement. This report shall also include findings from patient chart audits and a narrative summary of the following areas: prehospital, hospital, STEMI service, emergency department, operating room, angiography suites, recovery room, clinical lab, intensive care unit, rehabilitation, performance improvement and patient safety programs, education, outreach, research, chart review, and interviews. The department shall have the final authority to determine compliance with the rules of this chapter/./;

/(8)/(J) The department shall return a copy of the report to the chief executive officer, the STEMI medical director, and the STEMI program manager/coordinator of the hospital/STEMI center reviewed. Included within the report shall be notification indicating whether the hospital/STEMI center has met the criteria for STEMI center designation or has failed to meet the criteria for STEMI center designation as requested. Also, if a focus review of the STEMI center is required, the time frame for this focus review will be shared

with the chief executive officer, the STEMI medical director, and the STEMI program manager/coordinator of the STEMI center reviewed./;

[(9)](K) When the hospital/STEMI center is found to have deficiencies, the hospital/STEMI center shall submit a plan of correction to the department. The plan of correction shall include identified deficiencies, actions to be taken to correct deficiencies, time frame in which the deficiencies are expected to be resolved, and the person responsible for the actions to resolve the deficiencies. A plan of correction form shall be completed by the hospital and returned to the department within thirty (30) days after notification of review findings and designation. If a focus review is required, the STEMI center shall be allowed a minimum period of six (6) months to correct deficiencies./;

(L) No hospital shall hold itself out as a STEMI center designated by the department until given written approval by the department. The department shall give written approval to the hospitals to begin holding themselves out as designated STEMI centers by the department after all initial STEMI reviews have been completed for those hospitals which applied for STEMI review and designation with the department during the first round of applications and the time for plans of corrections have expired;

[(10)](M) A STEMI center shall make the department aware in writing within thirty (30) days if there are any changes in the STEMI center's name, address, contact information, chief executive officer, STEMI medical director, or STEMI program manager/coordinator./;

[(11)](N) Any person aggrieved by an action of the department affecting the STEMI center designation pursuant to Chapter 190, RSMo, including the revocation, the suspension, or the granting of, refusal to grant, or failure to renew a designation, may seek a determination by the Administrative Hearing Commission under Chapter 621, RSMo. It shall not be a condition to such determination that the person aggrieved seek reconsideration, a rehearing, or exhaust any other procedure within the department./; **and**

[(12)](O) The department may deny, place on probation, suspend, or revoke such designation in any case in which it has reasonable cause to believe that there has been a substantial failure to comply with the provisions of Chapter 190, RSMo, or any rules or regulations promulgated pursuant to this chapter. If the department has reasonable cause to believe that a hospital is not in compliance with such provisions or regulations, it may conduct additional announced or unannounced site reviews of the hospital to verify compliance. If a STEMI center fails two (2) consecutive on-site reviews because of substantial noncompliance with standards prescribed by sections 190.001 to 190.245, RSMo, or rules adopted by the department pursuant to sections 190.001 to 190.245, RSMo, its center designation shall be revoked.

(3) Hospitals seeking STEMI center designation by the department based on their current certification as a STEMI center by the Joint Commission, American Heart Association, or American College of Cardiology shall meet the following requirements:

(A) An application for STEMI center designation by the department for hospitals that have been certified as a STEMI/chest pain center by the Joint Commission, American Heart Association, or American College of Cardiology shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a determination of eligibility for review and designation in accordance with the rules of this chapter. The application for STEMI certified hospital designation form, included herein, is available at the Health Standards and Licensure (HSL) office, or online at the department's website at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for STEMI cen-

ter designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation;

(B) Both sections A and B of the application for STEMI certified hospital designation form, included herein, shall be complete before the department designates a hospital/STEMI center. The department shall notify the hospital/STEMI center of any apparent omissions or errors in the completion of the application for STEMI certified hospital designation form. Upon receipt of a completed and approved application, the department shall designate such hospital as follows:

1. The department shall designate a hospital as a level I STEMI center if such hospital has been certified as a comprehensive cardiac center by the Joint Commission;

2. The department shall designate a hospital as a level II STEMI center if such hospital has been certified as any of the following:

A. Mission lifeline Percutaneous Coronary Intervention (PCI)/STEMI receiving center by the American Heart Association;

B. Chest pain center with PCI center by the American College of Cardiology; or

C. Chest pain with PCI and resuscitation center by the American College of Cardiology;

3. The department shall designate a hospital as a level III STEMI center if such hospital has been certified as any of the following:

A. Mission lifeline non/PCI STEMI referral center by the American Heart Association;

B. Chest pain center by the Joint Commission;

C. Primary Acute Myocardial Infarction (AMI) center by the Joint Commission; or

D. Chest pain center by the American College of Cardiology;

(C) No hospital shall hold itself out as a STEMI center designated by the department until given written approval by the department. The department shall give written approval to the hospitals to begin holding themselves out as designated STEMI centers by the department after all initial STEMI reviews have been completed for those hospitals which applied for STEMI review and designation with the department during the first round of applications and the time for plans of corrections have expired. This does not prohibit the hospitals from holding themselves out as certified STEMI/chest pain centers by the Joint Commission, the American Heart Association, or the American College of Cardiology;

(D) Annually from the date of designation by the department submit to the department proof of certification as a STEMI/chest pain center by the Joint Commission, the American Heart Association, or the American College of Cardiology and the names and contact information of the medical director of the STEMI/chest pain center and the program manager of the STEMI chest pain center;

(E) Within thirty (30) days of any changes submit to the department proof of certification as a STEMI/chest pain center by the Joint Commission, the American Heart Association, or the American College of Cardiology and the names and contact information of the medical director of the STEMI/chest pain center and the program manager of the STEMI/chest pain center;

(F) Submit to the department a copy of the certifying organization's final STEMI/chest pain center certification survey results within thirty (30) days of receiving such results;

(G) Submit to the department a completed application for STEMI certified hospital designation form every three (3) years;

(H) Participate in the emergency medical services regional system of STEMI care in its respective emergency medical services region as defined in 19 CSR 30-40.302;

(I) Any hospital designated as a level III STEMI center that is certified by the Joint Commission, the American Heart Association, or the American College of Cardiology shall have a formal agreement with a level I or level II STEMI center designated by the department for physician consultative services for evaluation of STEMI patients;

(J) Participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources;

(K) Submit data to meet the data submission requirements in section 190.241, RSMo, and 19 CSR 30-40.760;

(L) The designation of a hospital as a STEMI center pursuant to section (3) shall continue if such hospital retains certification as a STEMI center by the Joint Commission, the American Heart Association, or the American College of Cardiology; and

(M) The department may remove a hospital's designation as a STEMI center if requested by the hospital or the department determines that the Joint Commission, the American Heart Association, or American College of Cardiology certification has been suspended or revoked. The department may also remove a hospital's designation as a STEMI center if the department determines the hospital's certification with the Joint Commission, the American Heart Association, or American College of Cardiology has expired. Any decision made by the department to withdraw the designation of a STEMI center that is based on the revocation or suspension of a certification by the Joint Commission, the American Heart Association, or the American College of Cardiology shall not be subject to judicial review.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION OF HEALTH STANDARDS AND LICENSURE
**APPLICATION FOR ST-ELEVATION MYOCARDIAL INFARCTION (STEMI)
CERTIFIED HOSPITAL DESIGNATION**

SECTION A		Organization's STEMI Identification Number	
In accordance with the requirements of Chapter 190, RSMo, and the applicable regulations, this application is hereby submitted for designation as a STEMI center. Please complete all information.			
Current STEMI Certification Organization and Level			
<p>LEVEL I</p> <input type="checkbox"/> Joint Commission, Comprehensive Cardiac Center	<p>LEVEL II</p> <input type="checkbox"/> American Heart Association, Mission Lifeline Percutaneous Coronary Intervention (PCI)/ STEMI Receiving Center <input type="checkbox"/> American College of Cardiology, Chest Pain with PCI Center <input type="checkbox"/> American College of Cardiology, Chest Pain with PCI and Resuscitation Center	<p>LEVEL III</p> <input type="checkbox"/> American Heart Association, Mission Lifeline Non/PCI STEMI Referral Center <input type="checkbox"/> Joint Commission, Chest Pain Center <input type="checkbox"/> Joint Commission, Primary Acute Myocardial Infarction (AMI) Center <input type="checkbox"/> American College of Cardiology, Chest Pain Center	
HOSPITAL INFORMATION			
Name of Hospital (Name to Appear on Designation Certificate)			Telephone Number
Address (Street and Number)		City	Zip Code
PROFESSIONAL INFORMATION			
Chief Executive Officer		Chairman/President of Board of Trustees	
STEMI Medical Director (Name, email, and contact phone number)		STEMI Program Manager (Name, email, and contact phone number)	
Section B			
The following should be submitted to the department as indicated:			
<input type="checkbox"/> Proof of STEMI certification with the Joint Commission, American Heart Association or American College of Cardiology with the expiration date of the certification. <input type="checkbox"/> Copy of the final STEMI survey results from the Joint Commission, American Heart Association or American College of Cardiology.			
If applying for Level III STEMI Center designation, the following should be submitted to the Department:			
<input type="checkbox"/> Formal agreement with Level I or Level II STEMI center for physician consultative services for evaluation of STEMI patients.			
CERTIFICATION			
We, the undersigned, hereby certify that: A. We will annually and within thirty (30) days of any changes submit to the department proof of STEMI certification with the Joint Commission, American Heart Association or American College of Cardiology. B. We will annually and within thirty (30) days of any changes submit to the department names and contact information of our medical director and the program manager of the STEMI center. C. We will submit to the department a copy of our final STEMI certification survey results from the Joint Commission, American Heart Association or American College of Cardiology within thirty (30) days of receiving such results. D. We will participate in the emergency medical services regional system of STEMI care in our respective emergency medical services region as defined in 19 CSR 30-40.302. E. We will participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources. F. We will submit data to meet the data submission requirements outlined in section 190.241, RSMo, and 19 CSR 30-40.760. G. We understand that our designation as a STEMI center by the department shall continue only if our hospital remains certified as a STEMI center by the Joint Commission, American Heart Association or American College of Cardiology.			
Date of application _____			
Signed _____ Chairman/President of Board of Trustees, Owner, or one Partner of Partnership		Signed _____ Hospital Chief Executive Officer	
Signed _____ STEMI Medical Director		Signed _____ Director of Emergency Medicine	

*AUTHORITY: [section 192.006, RSMo 2000, and] sections 190.185 and 192.006, RSMo 2016, and section 190.241, RSMo Supp. [2012] 2017. Original rule filed Nov. 15, 2012, effective June 30, 2013. Emergency amendment filed Feb. 2, 2018, effective Feb. 12, 2018, expires Aug. 10, 2018. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.*

The Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo 2016.



**Office of the Governor
State of Missouri**

Proclamation

WHEREAS, Article IV, Section 27, authorizes the Governor to control the rate at which any appropriation is expended by allotment and, further, authorizes the Governor to reduce the expenditures of the state or any of its agencies below their appropriations whenever the actual revenues are less than the revenue estimates upon which the appropriations were based; and

WHEREAS, in addition to the power to control the rate of expenditure established in Article IV, Section 27, three percent of each appropriation, with the exception of amounts for personal service to pay salaries fixed by law, shall be set aside pursuant to section 33.290, RSMo, as a reserve fund and not subject to expenditure except with the approval of the Governor; and

WHEREAS, Article IV, Section 27.2, provides that the Governor notify the General Assembly "whenever the rate at which any appropriation shall be expended is not equal quarterly allotments, the sum of which shall be equal to the amount of the appropriation"; and

WHEREAS, due to a variety of factors, including the three percent reserve that is legally required by section 33.290, RSMo, the rate at which most appropriations are expended is not in "equal quarterly allotments, the sum of which shall be equal to the amount of the appropriation"; and

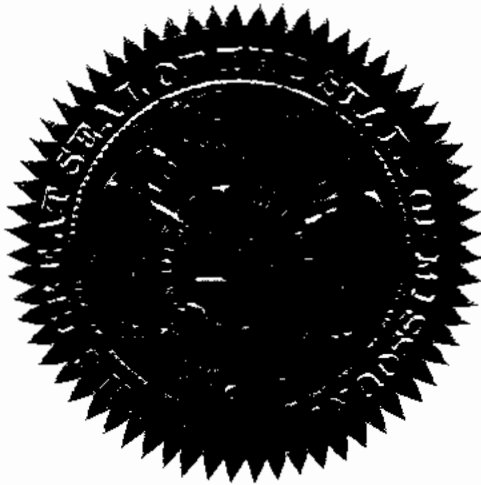
WHEREAS, Article IV, Section 27.3, provides that the Governor notify the General Assembly "when the governor reduces one or more items or portions of items of appropriation of money as a result of actual revenues being less than the revenue estimates upon which the appropriations were based."

NOW THEREFORE, I, Eric R. Greitens, GOVERNOR OF THE STATE OF MISSOURI, pursuant to Article IV, Section 27, do hereby make the following notification to the Ninety-Ninth General Assembly of the State of Missouri:

I hereby notify the General Assembly, pursuant to Article IV, Section 27.2 of the Missouri Constitution, that, through the second quarter of fiscal year 2018, the rate of expenditure for each of the appropriation lines in the fiscal year 2018 budget attached as Exhibit A is not in equal quarterly allotments, the sum of which shall be equal to the amount of the appropriation.

I further notify the General Assembly, pursuant to Article IV, Section 27.3 of the Missouri Constitution, that, in the third quarter of fiscal year 2018, I have taken no action to permanently reduce one or more items or portions of items of appropriation of money as a result of actual revenues being less than the revenue estimates upon which the appropriations were based in the fiscal year 2018 budget.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Missouri, in the City of Jefferson, this 14th day of February 2018.



Eric R. Greitens
Governor

Attest:

Secretary of State

Exhibit A

#	Agency	Budget Appropriation Line
1	ELEM & SEC EDUCATION-OPER	02.015
2	ELEM & SEC EDUCATION-OPER	02.015
3	REVENUE-OPERATING	04.145
4	REVENUE-OPERATING	04.145
5	REVENUE-OPERATING	04.145
6	REVENUE-OPERATING	04.145
7	REVENUE-OPERATING	04.145
8	REVENUE-OPERATING	04.145
9	REVENUE-OPERATING	04.145
10	REVENUE-OPERATING	04.145
11	REVENUE-OPERATING	04.145
12	REVENUE-OPERATING	04.145
13	OFFICE ADMINISTRATION-OPER	05.007
14	OFFICE ADMINISTRATION-OPER	05.165
15	HEALTH & SENIOR SERVICES-OPER	10.735
16	SOCIAL SERVICES-OPERATING	11.510
17	SOCIAL SERVICES-OPERATING	11.555
18	STATE TREASURER-OPERATING	12.125
19	PUBLIC DEFENDER-OPERATING	12.400
20	PUBLIC DEFENDER-OPERATING	12.400

Under this heading will appear the text of proposed rules and changes. The 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 is set out in the Purpose section with each rule. Also required is a citation to the legal authority to make rules. This appears following the text of the rule, after the word "Authority."

Entirely new rules are printed without any special symbolology 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 which are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

An 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.

If 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*.

An 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.

If an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice and 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.

(B) Federal political action committee – a political committee under 52 U.S.C. 30101(4) that is not an authorized committee of a federal candidate under 52 U.S.C. 30101(6) or a federal committee of a national, state, or local political party under 52 U.S.C. 30101(4)(C), (14), or (15);

(C) Commission – The Missouri Ethics Commission;

(D) Continuing committee/Political action committee – a committee defined as a continuing committee under Mo. Const. Art. VIII, section 23.7(6)(c) and section 130.011(10), RSMo, and Mo. Const. Art. VIII, section 23.7(20), or a political action committee under Mo. Const. Art. VIII, section 23.7(20);

(E) Domicile – the address of a committee listed on a statement of organization as defined in section 130.026.6, RSMo; and

(F) Out-of-state committee - a campaign finance committee registered according to the campaign finance disclosure laws of a state, other than the State of Missouri, or a federal political action committee as defined in this rule, which is registered and reporting with the Federal Election Commission.

AUTHORITY: sections 105.955.14(7) and 105.961.3, RSMo 2016. Original rule filed Feb. 7, 2018.

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 Ethics Commission, 3411A Knipp Drive, Jefferson City MO. 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 1—OFFICE OF ADMINISTRATION Division 50—Missouri Ethics Commission Chapter 5—Committee Registration and Reporting

PROPOSED RULE

1 CSR 50-5.020 Registration Requirements for Committees Domiciled Outside the State of Missouri and Out-of-State Committees

PURPOSE: This rule clarifies and makes consistent the rules requiring committees domiciled outside the state of Missouri and out-of-state committees, including certain federal committees, to register and file campaign finance disclosure reports with the Missouri Ethics Commission. The rule also clarifies federal committees which qualify as federal political action committees for purposes of contributions to Missouri committees under the Missouri Constitution.

(1) Committees domiciled outside the State of Missouri and out-of-state committees which meet the conditions of section 130.021.10, RSMo shall be required to register as a Missouri continuing committee/political action committee with the commission.

(2) Committees falling within the requirements of section (1) shall be required to—

(A) Appoint a treasurer who is a resident of the State of Missouri;

(B) Have a single official fund depository within the State of Missouri as defined in section 130.021.4(1), RSMo and shall maintain at least one official depository account in the committee's name;

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

Title 1—OFFICE OF ADMINISTRATION Division 50—Missouri Ethics Commission Chapter 5—Committee Registration and Reporting

PROPOSED RULE

1 CSR 50-5.010 Definitions

PURPOSE: This rule sets out the definitions of terms used in Chapter 1 CSR 50-5 of Missouri Ethics Commission to clarify registration and reporting requirements for certain types of committees.

(1) As used in this chapter, the following terms mean:

(A) Committee domiciled outside of this state - a campaign finance committee registered according to the campaign finance disclosure laws of a state, other than the State of Missouri, or as a federal political action committee, as defined in this rule, which is registered and reporting with the Federal Election Commission;

(C) Include the words “federal committee” in the committee name in order to identify themselves as a federal political action committee under Mo. Const. Art. VIII, section 23.3(12); and

(D) File a statement of organization identified as a continuing/political action committee no later than sixty (60) days prior to the election for which the committee receives contributions or make expenditures, and prior to making a contribution or expenditure in the State of Missouri.

(3) A committee domiciled outside the State of Missouri or an out-of-state committee which does not meet the conditions of section 130.021(10), RSMo shall be required to comply with out-of-state reporting requirements under sections 130.049 and 130.050, RSMo.

(4) Federal political action committees domiciled within the State of Missouri shall be required to follow the requirements of section (2) if they meet the definition of a continuing committee/political action committee under Mo. Const. Art. 23, Section 7 and Mo. Const. Art. 23, Section 7; and section 130.011(10), RSMo.

(5) A federal political action committee meeting the requirements of this rule shall be considered a “federal political action committee” for purposes of contributing to Missouri continuing committees/political action committees pursuant to Mo. Const. Art. 23, Section 7.

(6) Any committee required to file statements of organization under this rule shall be required to follow all reporting and recordkeeping requirements under Chapter 130, RSMo.

AUTHORITY: MO CONST. Art. 23, section 7; and sections 105.955.14(7), 105.961.3, 130.011(10), 130.021.4, and 130.021.5, RSMo 2016. Original rule filed Feb. 7, 2018.

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 Ethics Commission, 3411A Knipp Drive, Jefferson City MO. 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 4—Wildlife Code: General Provisions**

PROPOSED AMENDMENT

3 CSR 10-4.200 Chronic Wasting Disease; Management Zone. The commission proposes to add new subsection (2)(C) and re-letter the subsequent subsection of this rule.

PURPOSE: This amendment allows the placement of feed to attract feral hogs for elimination efforts within a Chronic Wasting Disease Management Zone.

(2) Within a Chronic Wasting Disease (CWD) Management Zone, the placement of grain, salt products, minerals, and other consumable natural and manufactured products is prohibited. The following exceptions apply:

(A) Feed placed within one hundred (100) feet of any residence or occupied building; or

(B) Feed placed in such a manner to reasonably exclude access by deer; or

(C) Feed placed as part of a feral hog or CWD management effort authorized by an agent of the department; or

[(C)](D) Feed and minerals present solely as a result of normal agricultural or forest management or crop and wildlife food production practices.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section 252.040, RSMo 2016. Original rule filed Dec. 15, 2015, effective May 30, 2016. Amended: Filed March 1, 2017, effective Aug. 30, 2017. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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 7—Wildlife Code: Hunting; Seasons, Methods,
Limits**

PROPOSED AMENDMENT

3 CSR 10-7.410 Hunting Methods. The commission proposes to add new subsection (1)(P) and re-letter subsequent subsections of this rule.

PURPOSE: This amendment allows Missouri residents under the age of eighteen (18) who are terminally ill to take one (1) deer or one (1) turkey during the fall deer and turkey season with a firearm or approved method on privately-owned land upon receipt of a method exemption from the department.

(1) Wildlife may be hunted and taken only in accordance with the following:

(P) Any resident of Missouri under the age of eighteen (18) diagnosed with a terminal illness may use a firearm or approved method for the season to hunt and take one (1) deer and one (1) turkey during any portion of the fall firearms or archery seasons on privately-owned land upon receipt of a method exemption. To receive a method exemption, the person must be sponsored by and participate in a hunt organized by a nonprofit charitable organization that has within its mission to provide opportunities and experiences for terminally ill persons. For purposes of this section, “terminal illness” means an incurable or irreversible condition with a corresponding life expectancy that does not exceed twelve (12) months, which has been documented by a licensed physician. Such person must hunt in the immediate presence of a properly licensed adult hunter who is eighteen (18) years of age or older and who has in his/her possession a valid hunter education certificate card or was born before January 1, 1967. A method exemption shall be issued only once to an individual and will only be valid during the designated seasons within

a twelve- (12-) month period.

/(P)/(Q) Hunter Orange. During the youth, November, and antlerless portions of the firearms deer hunting season, all hunters shall wear a cap or hat and a shirt, vest, or coat having the outermost color commonly known as hunter orange which shall be plainly visible from all sides while being worn. Camouflage orange garments do not meet this requirement. This requirement shall not apply to migratory game bird hunters, to hunters using archery methods while hunting within municipal boundaries where discharge of firearms is prohibited, to hunters on federal or state public hunting areas where deer hunting is restricted to archery methods, or to hunters in closed counties during the antlerless portion of the firearms deer hunting season.

/(Q)/(R) Computer-Assisted Remote Hunting. Except as otherwise permitted in this Code, wildlife may be taken only in the immediate physical presence of the taker and may not be taken by use of computer-assisted remote hunting devices.

/(R)/(S) Wildlife may not be hunted, pursued, or taken with the use of poisons or tranquilizing drugs.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section 252.040, RSMo [2000] 2016. Original rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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 9—Wildlife Code: Confined Wildlife: Privileges,
Permits, Standards**

PROPOSED AMENDMENT

3 CSR 10-9.105 General Provisions. The commission proposes to add new sections (2)–(5), re-number the subsequent section, and amend the authority section of this rule.

PURPOSE: This amendment clarifies requirements and establishes expiration dates for permits authorized in this chapter and corrects an inaccurate reference in the authority section.

(2) Permits listed in this chapter may be obtained only upon satisfaction of all requirements imposed by this code, including payment of fees at the time of application.

(3) Permits listed in this chapter are nontransferable. No permit or permit application referenced in this chapter may be loaned, falsified, altered, or misrepresented in any manner.

(4) The acceptance of a permit listed in this chapter shall constitute an acknowledgement of the duty to comply with the provisions of this code.

(5) Except as provided in 3 CSR 10-9.425, permits listed in this chapter are valid from July 1 through June 30 of the prescribed permit year(s) listed on the permit.

/(2)/(6) Confined wildlife held under permit within the provision of this chapter shall include only those species on the following Approved Confined Wildlife Species List:

Approved Confined Wildlife Species List

Species Code No.	Common Name	Scientific Name
Class I Wildlife Breeders		
Game Birds		
	Ducks, Mallard	<i>Anas platyrhynchos</i>
	Grouse, Blue	<i>Dendragapus obscurus</i>
	Grouse, Greater Sage-	<i>Centrocercus urophasianus</i>
	Grouse, Gunnison Sage-	<i>Centrocercus minimus</i>
	Grouse, Ruffed	<i>Bonasa umbellus</i>
	Grouse, Sharp-tailed	<i>Tympanuchus phasianellus</i>
	Grouse, Spruce	<i>Falcipectens canadensis</i>
	Partridge, Gray	<i>Perdix perdix</i>
	Pheasant, Ring-necked (all subspecies)	<i>Phasianus colchicus</i>
	Ptarmigan, Rock	<i>Lagopus mutus</i>
	Ptarmigan, White-tailed	<i>Lagopus leucurus</i>
	Ptarmigan, Willow	<i>Lagopus lagopus</i>
	Quail, Bobwhite (all subspecies)	<i>Colinus virginianus</i>
	Quail, California	<i>Callipepla californica</i>
	Quail, Gable's	<i>Callipepla gambelii</i>
	Quail, Mountain	<i>Oreortyx pictus</i>
	Quail, Scaled	<i>Callipepla squamata</i>
	Turkey, Wild (all subspecies)	<i>Melagris gallopava</i>
Mammals		
	Armadillo, Nine-banded	<i>Dasypus novemcinctus</i>
	Badger	<i>Taxidea taxus</i>
	Beaver	<i>Castor canadensis</i>
	Bobcat	<i>Lynx rufus</i>
	Chipmunk, Eastern	<i>Tamias striatus</i>
	Coyote	<i>Canis latrans</i>
	Deer, Mule	<i>Odocoileus hemionus</i>
	Deer, White-tailed	<i>Odocoileus virginianus</i>
	Fox, Gray	<i>Urocyon cinereoargenteus</i>
	Fox, Red	<i>Vulpes vulpes</i>
	Groundhog (Woodchuck)	<i>Marmota monax</i>
	Mink	<i>Neovison vison</i>
	Muskrat	<i>Ondatra zibethicus</i>
	Opossum	<i>Didelphis virginiana</i>
	Otter, River	<i>Lontra canadensis</i>
	Rabbit, Eastern Cottontail	<i>Sylvilagus floridanus</i>
	Rabbit, Swamp	<i>Sylvilagus aquaticus</i>
	Raccoon	<i>Procyon lotor</i>
	Squirrel, Eastern Gray	<i>Sciurus carolinensis</i>
	Squirrel, Fox	<i>Sciurus niger</i>
	Squirrel, Franklin's Ground	<i>Spermophilus franklinii</i>
	Squirrel, Thirteen-lined Ground	<i>Spermophilus tridecemlineatus</i>
	Squirrel, Southern Flying	<i>Glaucomys volans</i>
	Weasel, Least	<i>Mustela nivalis</i>
	Weasel, Long-tailed	<i>Mustela frenata</i>
Amphibians		
Salamanders		
	Newt, Central	<i>Notophthalmus viridescens</i>
	Salamander, Tiger	<i>Ambystoma tigrinum</i>
Frogs and Toads		
	Bullfrog	<i>Rana catesbeiana</i>
	Frog, Green (Bronze)	<i>Rana clamitans</i>
	Frog, Southern Leopard	<i>Rana sphenoccephala</i>
	Toad, American	<i>Bufo americanus</i>
	Treefrog, Eastern (Cope's) Gray	<i>Hyla versicolor/chrysocephala</i>
	Treefrog, Green	<i>Hyla cinerea</i>

Species Code No.	Common Name	Scientific Name
Reptiles		
Turtles	Cooter, River	<i>Pseudemys concinna</i>
	Slider, Red-eared	<i>Trachemys scripta elegans</i>
	Softshell, Smooth	<i>Apalone mutica</i>
	Softshell, Spiny	<i>Apalone spinifera</i>
	Turtle, Ornate Box	<i>Terrapene ornate</i>
	Turtle, Alligator Snapping	<i>Macrochelys temminckii</i>
	Turtle, Common Map	<i>Graptemys geographica</i>
	Turtle, Common Musk (Stinkpot)	<i>Sternotherus odoratus</i>
	Turtle, Common Snapping	<i>Chelydra serpentina</i>
	Turtle, Mississippi Mud	<i>Kinosternon subrubrum</i>
	Turtle, Southern Painted	<i>Chrysemys picta dorsalis</i>
	Turtle, Three-toed Box	<i>Terrapene carolina triunguis</i>
	Turtle, Western Painted	<i>Chrysemys picta belli</i>
Lizards	Lizard, Eastern Collared	<i>Crotaphytus collaris</i>
	Lizard, Prairie (Fence)	<i>Sceloporus consobrinus (undulates)</i>
	Lizard, Slender Glass	<i>Ophisaurus attenuatus</i>
	Lizard, Texas Horned	<i>Phrynosoma cornutum</i>
	Skink, Five-lined	<i>Eumeces fasciatus</i>
Snakes	Bullsnake	<i>Pituophis catenifer sayi</i>
	Kingsnake, Prairie	<i>Lampropeltis calligaster</i>
	Kingsnake, Speckled	<i>Lampropeltis getula holbrooki</i>
	Snake, Black Rat	<i>Elaphe obsoleta obsoleta</i>
	Snake, Eastern Garter	<i>Thamnophis sirtalis sirtalis</i>
	Snake, Eastern Hog-nosed	<i>Heterodon platirhinos</i>
	Snake, Great Plains Rat	<i>Elaphe guttata emoryi</i>
	Snake, Red Milk	<i>Lampropeltis triangulum sypila</i>
	Snake, Red-sided Garter	<i>Thamnophis sirtalis parietalis</i>
	Snake, Western Hog-nosed (Dusty and Plains)	<i>Heterodon nasicus</i>
Class II Wildlife Breeders	Bear, Black (& hybrids)	<i>Ursus americanus</i>
	Copperhead	<i>Agkistrodon contortrix</i>
	Cottonmouth	<i>Agkistrodon piscivorus</i>
	Lion, Mountain (& hybrids)	<i>Puma concolor</i>
	Rattlesnake, Pygmy	<i>Sistrurus miliarius</i>
	Rattlesnake, Timber (Canebrake)	<i>Crotalus horridus</i>
	Wolf, Gray (& hybrids)	<i>Canis lupus</i>
Game Bird Hunting Preserves	Ducks, Mallard	<i>Anas platyrhynchos</i>
	Partridges, Exotic (all species)	All species
	Pheasants (all species)	All species
	Quail (all species)	All species
Big Game Hunting Preserves	Antelope, Pronghorn	<i>Antilocapra americana</i>
	Boar, Wild (including feral hogs, razorback hogs, European boars and other pig species)	
	Caribou (Reindeer)	<i>Rangifer tarandus</i>
	Deer, Fallow	<i>Dama dama</i>
	Deer, Mule	<i>Odocoileus hemionus</i>
	Deer, Red	<i>Cervus species</i>
	Deer, Sika	<i>Cervus nippon</i>
	Deer, White-tailed	<i>Odocoileus virginianus</i>
	Elk	<i>Cervus elaphus</i>
	Goat, Mountain	<i>Oreamnos americanus</i>
	Moose	<i>Alces alces</i>
	Sheep, Bighorn	<i>Ovis canadensis</i>
	Sheep, Dall	<i>Ovis dalli</i>
	Ungulates (other species)	deer, antelope deer, goats, sheep, etc.

Species Code No.	Common Name	Scientific Name
Wildlife Hobby		
	Badger	<i>Taxidea taxus</i>
	Beaver	<i>Castor canadensis</i>
	Bobcat	<i>Lynx rufus</i>
	Coyote	<i>Canis latrans</i>
	Fox, Gray	<i>Urocyon cinereoargenteus</i>
	Fox, Red	<i>Vulpes vulpes</i>
	Groundhog (Woodchuck)	<i>Marmota monax</i>
	Mink	<i>Neovison vison</i>
	Muskrat	<i>Ondatra zibethicus</i>
	Opossum	<i>Didelphis virginiana</i>
	Otter, River	<i>Lontra canadensis</i>
	Pheasant, Ring-necked (all subspecies)	<i>Phasianus colchicus</i>
	Quail, Bobwhite (all subspecies)	<i>Colinus virginianus</i>
	Rabbit, Eastern Cottontail	<i>Sylvilagus floridanus</i>
	Rabbit, Swamp	<i>Sylvilagus aquaticus</i>
	Raccoon	<i>Procyon lotor</i>
	Squirrel, Eastern Gray	<i>Sciurus carolinensis</i>
	Squirrel, Fox	<i>Sciurus niger</i>
	Weasel, Least	<i>Mustela nivalis</i>
	Weasel, Long-tailed	<i>Mustela frenata</i>
Wildlife Collector's Permit		
Species and numbers of each are limited to those specified on the permit.		
Resident Falconry Permit		
Birds of prey as permitted under 3 CSR 10-9.422.		
Hound Running Area Operator and Dealer Permit		
	Coyote	<i>Canis latrans</i>
	Fox, Gray	<i>Urocyon cinereoargenteus</i>
	Fox, Red	<i>Vulpes vulpes</i>
Field Trial Permit		
	Ducks, Mallard	<i>Anas platyrhynchos</i>
	Partridges, Exotic (all species)	All species
	Pheasants (all species)	All species
	Quail (all species)	All species
Dog Training Area Permit		
	Drake, Mallard	<i>Anas platyrhynchos</i>
	Partridges, Exotic (all species)	All species
	Pheasants (all species)	All species
	Quail (all species)	All species

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section [252.240] 252.040, RSMo [2000] 2016. Original rule filed June 9, 1993, effective Jan. 1, 1994. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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.

3 CSR 10-9.442 Falconry. The commission proposes to amend subsection (4)(A) and the authority section of this rule.

PURPOSE: This amendment reflects updates to the avian taxonomic classification hierarchy recognized by the American Ornithological Society that moves kites, hawks, eagles, and allies out of the order Falconiformes to the order Accipitriformes and corrects an inaccurate reference in the authority section.

(4) An applicant for a permit shall submit an application with information including the number of raptors possessed and the species, age, sex, date of acquisition, and source of each. An applicant under eighteen (18) years of age must have a parent or legal guardian co-sign the application. Falconry permits are issued by classes as follows:

(A) Apprentice Class—A permittee shall be at least twelve (12) years old and shall have a sponsor holding a general or master falconry permit. A sponsor shall have no more than three (3) apprentices at any one (1) time. An apprentice may possess only one (1) wild caught, captive-bred, or hybrid raptor of the order *Accipitriformes*, *Strigiformes*, or *Falconiformes* except the following: Osprey, [American] swallow-tailed kite, Mississippi kite, bald eagle, white-tailed eagle, Steller's sea-eagle, northern harrier, Swainson's hawk, ferruginous hawk, sharp-shinned hawk, golden eagle, peregrine falcon, prairie falcon, flammulated owl, burrowing owl, barn owl, long-eared owl, and short-eared owl and may obtain not more than two (2) raptors from the wild during the twelve- (12-)/- month reporting

**Title 3—DEPARTMENT OF CONSERVATION
Division 10—Conservation Commission
Chapter 9—Wildlife Code: Confined Wildlife: Privileges,
Permits, Standards**

PROPOSED AMENDMENT

period. An apprentice permittee may not possess a bird taken from the wild as a nestling or that is imprinted on humans;

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section [252.240] 252.040, RSMo [2000] 2016. This rule previously filed as 3 CSR 10-7.442. Original rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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 10—Wildlife Code: Commercial Permits:
Seasons, Methods, Limits**

PROPOSED AMENDMENT

3 CSR 10-10.705 Commercialization. The commission proposes to number the first section, add new sections (2)–(5), and amend the authority section of this rule.

PURPOSE: This amendment clarifies requirements and establishes expiration dates for permits authorized in this chapter and corrects an inaccurate reference in the authority section.

(1) Wildlife may be bought, sold, offered for sale, exchanged, transported, or delivered only under the conditions of the prescribed permit, or as otherwise provided in this chapter. No affidavit, receipt, or other document may be issued or used in lieu of the required permit. Any permit issued or obtained by false statement or through fraud, or while permits are revoked or denied by the commission, shall be invalid. The commission may suspend, revoke, or deny a permit or privilege for cause, but not until an opportunity has been afforded for a hearing before the commission or its authorized representative. Hearings under this section shall be contested cases pursuant to Chapter 536, RSMo and any person aggrieved by a final decision shall be entitled to judicial review as provided in Chapter 536, RSMo.

(2) Permits for commercial wildlife may be obtained only upon satisfaction of all requirements imposed by this code, including payment of fees at the time of application.

(3) No commercial wildlife permit, or commercial wildlife permit application, may be loaned, falsified, altered, or misrepresented in any manner.

(4) The acceptance of a permit for commercial wildlife shall constitute an acknowledgement of the duty to comply with the provisions of this code.

(5) Permits for commercial wildlife are nontransferable and are valid from July 1 through June 30 of the prescribed permit year.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section [252.240] 252.040, RSMo [2000] 2016. Original rule filed Aug. 18, 1970, effective Dec. 31, 1970. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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 12—Wildlife Code: Special Regulations for
Areas Owned by Other Entities**

PROPOSED AMENDMENT

3 CSR 10-12.109 Closed Hours. The commission proposes to add subsection (1)(H) and re-letter subsequent subsections of this rule.

PURPOSE: This proposed amendment establishes closed hours at Kearney (Jesse James Park Lake) an area managed in cooperation with other public entities.

(1) Closed Hours. The following areas are closed to public use from 10:00 p.m. to 4:00 a.m. daily; however, hunting, fishing, trapping, dog training, camping, launching boats, and landing boats are permitted at any time on areas where these activities are authorized, except as further restricted in this chapter.

(H) Kearney (Jesse James Park Lake)

[(H)](I) Kirksville (Hazel Creek Lake, Spur Pond)

[(I)](J) Lancaster (City Lake, Paul Bloch Memorial Pond)

[(J)](K) La Plata City Lake

[(K)](L) Liberty (Fountain Bluff Park Ponds Nos. 1, 2, 3, 4, 5, 6, 7, and 8)

[(L)](M) Macon County (Fairground Lake)

[(M)](N) Marceline (Marceline City Lake, Old Marceline City Reservoir)

[(N)](O) Memphis (Lake Showme)

[(O)](P) Milan (Elmwood Lake)

[(P)](Q) Monroe City (Route J Reservoir)

[(Q)](R) Palmyra (Akerson Access)

[(R)](S) Pemiscot County (Triangle Boat Club Access)

[(S)](T) Pleasant Hill (Pleasant Hill City Lake and Porter Park Lake)

[(T)](U) Rockaway Beach Access

[(U)](V) Sedalia Water Department (Spring Fork Lake)

[(V)](W) Springfield City Utilities (Fellows Lake, Lake Springfield, Tailwaters Access)

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. and section 252.040, RSMo 2016. Original rule filed June 1, 2001, effective Oct. 30, 2001. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 9, 2018.

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 <http://mdc.mo.gov/node/24141>. 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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 2—Traffic Regulation**

PROPOSED AMENDMENT

7 CSR 10-2.020 Ordering Limitation of Weights on, or Closing of, Certain State Roads. The Missouri Highways and Transportation Commission is amending section (1) and deleting sections (2) through (3).

PURPOSE: This amendment removes unnecessary language while retaining the chief engineer's power to close or impose vehicle weight limits on any road in the state highway system for the purpose of the construction or maintenance of such road, or for the safety of the traveling public. Any closure or weight limit shall have a sign posted along the road to alert the traveling public.

(1) [The acting chief counsel called the commission's attention to the fact that at various times and places certain state bridges and roadways would be seriously damaged or entirely destroyed if subjected to the full statutory weights of vehicles; that such conditions are often created in only a few hours or minutes, with little or no warning, due to floods, weather conditions, traffic accidents, explosions, etc.; that it is often impossible and almost always impractical (if damage or destruction of the bridge or roadway is to be prevented) to delay limiting use of bridge or roadway until the commission can be convened in formal session to pass a resolution ordering limitation of use in each specific case; and that it has been contended by some that because of Article IV, Section 16, of the Missouri Constitution no order of the commission limiting such use of any state highway can take effect in less than ten (10) days after it has been filed in the office of the secretary of state. It was moved, seconded and unanimously carried that the following resolution be adopted by the State Highways and Transportation Commission of Missouri and filed immediately in the office of the secretary of state.] The chief engineer, or his or her designee, may close wholly or in part, or set a maximum vehicle weight limit on, any road within the state highway system as he or she finds necessary for the safety of the traveling public or for the purpose of, or related to, the construction or maintenance of the state roadway system. Any closure or maximum weight limit imposed on any state highway shall be subject to the posting of signs that shall be located along the highway in the chief engineer's sole discretion to give notice to the traveling public.

[(2) Whereas the State Highways and Transportation Commission of Missouri has power under section 227.250 RSMo (1986), to close temporarily for the purpose of construction or repair any portion of a state highway to public use and to issue regulations controlling the use of state high-

ways and all properties relating thereto; and, whereas, under sections 304.210, 304.230 and 304.240, RSMo (1986), whenever by reason of thawing of frost or rains or due to new construction the roads are in a soft condition, the maximum weights of motor vehicles may be limited by the State Highways and Transportation Commission of Missouri to such an amount and in such manner as will preserve the road under such conditions; it is made the duty of the sheriff of each county to see that such limitations are enforced; any peace officer or police officer of any county or city is empowered to arrest on sight or upon warrant any person violating the said limitations; and any such violation is made a misdemeanor; and whereas, under section 227.220, RSMo (1986), any person who shall willfully or negligently damage any state highway shall be liable for the amount of such damage, which may be recovered in the name of the state by the State Highways and Transportation Commission of Missouri; and whereas the destruction or damaging of any state highway bridge or roadway may cause incalculable and irreparable loss and damage to the traveling public, as well as great cost to the state and its taxpayers; and, whereas it is often impossible for the statutory two (2)-days' written notice to be served upon the members and this commission convened to limit weights on or close roads in time to save bridges, pavements and roadways which may from time-to-time be weakened or endangered by flood, weather, explosion, earthquake, accident or other cause.

(3) Now, therefore, the State Highways and Transportation Commission of Missouri declares its purpose to exercise fully such authority so conferred upon it to preserve the state highways and, in order to effectively carry out said purpose, orders that:

(A) The chief engineer of this commission shall hereafter do the following without further orders from the commission and without individual orders for each separate occasion to wit:

1. Close, wholly or in part, and during such time as s/he may find are necessary, any portion of any state highway to the use of vehicles of such types, sizes, weights, speeds and tires, proceeding in such directions and under such weather conditions, as well as to such other public use, as s/he may find necessary for the purpose of construction or repair of such portion of highway; and

2. Whenever by reason of thawing of frost, or rains or due to new construction s/he finds the roads are in a soft condition, s/he shall determine to what amount and in what manner the weights of motor vehicles must be limited in order to preserve any portion or all of the state highways under such conditions; and s/he shall give notice of all such limitations by posting notices at convenient and public places along such road, roads or parts thereof where such limitation of weights is found necessary.

(B) All such findings and acts of said chief engineer under this order shall for all intents and purposes be the findings and acts of this commission.

(C) The commission's chief counsel is authorized to file in this or any other state, prosecute and compromise, such civil suits as s/he may find necessary to obtain any lien and/or recover the amount of any injury which shall be caused to any portion of the state highways by any violation of law or by any negligence.]

AUTHORITY: sections 227.250 and 304.210, RSMo [1986] 2016. Original rule filed Feb. 17, 1950, effective Feb. 27, 1950. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission, Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 13—Plant Collection from Right-of-Way**

PROPOSED RESCISSION

7 CSR 10-13.010 Permit Specifications for Removal of Plants. This rule provided guidelines for issuing special permits covering the digging or removal of plants and plant parts from state highway system right of way established in sections 229.475 through 229.479, RSMo.

PURPOSE: This rule is being rescinded because plant collection activities may be addressed by issuance of a standard commission permit that is required to be obtained by persons and entities that want to work on Commission Right of Way, therefore this specific rule is not necessary.

AUTHORITY: sections 227.030 and 229.475–229.479, RSMo (1994). Original rule filed June 11, 1996, effective Dec. 30, 1996. Rescinded: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 16—Rest Areas**

PROPOSED AMENDMENT

7 CSR 10-16.020 Definitions. The Missouri Highways and Transportation Commission is amending section (1) and subsections (1)(A) through (1)(I), deleting subsection (1)(D), and relettering as necessary.

PURPOSE: This amendment incorporates federal statutes consistent

with section 536.031.4, RSMo, deletes an unnecessary definition for newsrack, updates the definitions for publication vending machine and publication vending machine bin, and deletes unnecessary restrictive wording.

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.

(1) Definitions. When used in administrative rules 7 CSR 10-16.020 through 7 CSR 10-16.050, [the following] these words and phrases have the following meaning [set forth in this rule]:

(A) "Commission" [means] - the Missouri Highways and Transportation Commission, and where appropriate, its authorized agents and representatives in the Missouri Department of Transportation;

(B) "Licensee" [means the Association of Sheltered Workshop Managers, Inc., a not-for-profit Missouri organization, or] - a [successor] public agency or private not-for-profit entity which contracts with the commission[, if the Association of Sheltered Workshop Managers, Inc. should ever cease to be the licensee at its own election or at the election of the commission];

(C) "License fee" [means] - the fee charged by the commission's licensee to a publisher or the publisher's agent to lease [publication vending machine] space in a commission publication vending machine [bin];

[(D)] "Newsrack" means any self-service or coin-operated box, container, storage unit, or other dispenser owned, installed, used, and maintained by a publisher for the display, sale, and/or distribution of publications in a rest area;]

[(E)](D) "Publication" [means] - a newspaper, pamphlet, newsletter, or magazine printed and distributed to convey news and information or other matters of public interest, which may include advertisements;

[(F)](E) "Publication vending machine" or "machine" [means the individual units owned and installed by the commission in the publication vending machine bin and in which only one (1) publication may be offered for sale;] - the device owned and installed by the commission, at its own discretion, at rest areas which is capable of holding one (1) or more publication vending machine bins;

[(G)](F) "Publication vending machine bin" or "bin" [means the device owned and installed by the commission, which is capable of holding up to four (4) publication vending machines and is placed at the rest areas in the sole discretion of the commission for the purpose of leasing space to a licensee or a publisher or its agent to sell publications;] - the individual units owned and installed by the commission for a publisher to distribute a single publication;

[(H)](G) "Publisher" [means] - any person who has paid a license fee to the commission's licensee to lease [publication vending machine space in commission-owned machines] a bin to [sell] distribute its publication; and

[(I)](H) "Rest area" [or "rest and recreation area" means] - a commission roadside facility along a Missouri interstate highway with parking facilities for the rest, safety, or other needs of motorists. This term includes the facilities described in sections 226.750 through 226.790, RSMo, and in Title 23, *United States Code* section 111(b). **Title 23 U.S.C. section 111(b) is incorporated by reference into and made a part of this rule as published by the United States Superintendent of Documents, 732 N Capitol Street NW, Washington, D.C. 20402-0001, website: <http://bookstore.gpo.gov>**

on January 1, 2012. This rule does not incorporate any subsequent amendments or additions to the United States Code in 23 U.S.C. 111(b). This term [shall] also includes any commission-designated welcome center facility [located in Missouri designated as a welcome center or tourist information center by the commission].

AUTHORITY: section 29 of Art. IV, Mo. Const., sections 226.020, 226.150, 226.750–226.790, and 227.030, RSMo [2000] 2016, Title 23, United States Code section III (b), and Title 23, Code of Federal Regulations part 752. Emergency rule filed Jan. 19, 1996, effective Feb. 1, 1996, expired July 29, 1996. Original rule filed Jan. 16, 1996, effective July 30, 1996. Rescinded and readopted: Filed July 2, 2010, effective Feb. 28, 2011. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 16—Rest Areas**

PROPOSED AMENDMENT

7 CSR 10-16.025 Public Information. The Missouri Highways and Transportation Commission is amending the purpose statement and sections (1) and (2), adding a new section (2), and renumbering section (2).

PURPOSE: This amendment updates the rule to be consistent with state laws that give the Rehabilitation Services for the Blind jurisdictional rights to regulate and administer vending on state property, clarifies the application of the rules if the Rehabilitation Services for the Blind declines to exercise its rights, and updates the point of contact and contact information to obtain information regarding the rule.

PURPOSE: This rule provides guidelines to interested persons regarding the placement and licensing of publication vending machine spaces on interstate highway rest areas for [sale or] distribution of publications to the public.

(1) [Commission Jurisdiction. Rules 7 CSR 10-16.020 through 7 CSR 10-16.050 shall apply unless the state of Missouri through the Bureau of the Blind of the Division of Family Services decides to exercise its jurisdictional right to regulate and administer the vending of publications as provided in section 8.710, RSMo. Currently the commission has the authority to regulate and administer publication vending operations on rest areas because the Bureau of the Blind has declined to exercise regulation and administration over the vending of publications in such rest areas. However, the commission may not operate any commercial vending

machines or other commercial facilities itself in rest and recreation areas, as provided in section 226.790, RSMo.] Section 8.710, RSMo, provides jurisdictional rights to regulate and administer vending on state of Missouri property through the Department of Social Services, Family Support Division, Rehabilitation Services for the Blind.

(2) 7 CSR 10-16.020 through 7 CSR 10-16.050 apply if Rehabilitation Services for the Blind declines to exercise its right to regulate and administer vending of publications in rest areas. However, the commission itself may not operate any commercial vending machines or other commercial facilities in rest areas, as provided in section 226.790, RSMo.

[(2)](3) [How to Obtain Information.] Information regarding publications vending operations in machines on rest [and recreation] areas may be obtained in person, or by writing, or phoning the [State Maintenance Engineer, Maintenance Division] General Services Director, General Services Division, Missouri Department of Transportation, PO Box 270, [105 W. Capitol Avenue,] Jefferson City, MO 65102-0270. The phone number of the division [engineer] director is (573) 751-[2785]1650.

AUTHORITY: section 29 of Art. IV, Mo. Const., sections 226.020, 226.150, 226.750–226.790, and 227.030, RSMo [2000] 2016, Title 23, United States Code section III (b), and Title 23, Code of Federal Regulations part 752. Original rule filed July 2, 2010, effective Feb. 28, 2011. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 16—Rest Areas**

PROPOSED AMENDMENT

7 CSR 10-16.035 Commission Responsibilities and Requirements. The Missouri Highways and Transportation Commission is amending the purpose statement, section (1), and subsections (2)(A) through (2)(E).

PURPOSE: This amendment clarifies the type of bins permitted in the rest areas and deletes unnecessary and restrictive wording.

PURPOSE: This rule provides the commission's responsibilities and requirements for the placement of publication vending machines on interstate highway rest areas for [sale or] distribution of publications to the public.

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.

(1) Location of Bins and Machines. In order to ensure the safety of patrons of rest areas, to protect the physical integrity of the rest area building and facilities, and to provide for the general aesthetics of the rest areas, *[no] only* publication vending machines *[shall be] owned and installed by the commission are permitted* at a rest area *[except those machines owned and installed by the commission]*. *[At each rest area, t/The commission [shall provide one (1) publication vending machine bin which may hold up to four (4) individual machines to allow the vending of publications as provided in 7 CSR 10-16.020 through 7 CSR 10-16.050. The commission, in its sole discretion, shall locate and install the bins on the exterior of the rest area buildings and adjacent to the entrance and exit doors of the rest areas. The commission will provide additional bins and machines provided there are publishers that have made application under 7 CSR 10-16.045 to lease such additional machine spaces. No machine shall dispense more than one (1) publication.]*, in its sole discretion as provided in 7 CSR 10-16.020 through 7 CSR 10-16.050, will provide and install publication vending machines in easily accessible locations on the exterior near doors of the rest area buildings. Only one (1) publication will be dispensed in each bin.

(2) Procedures for Noncompliance with Rules.

(A) *[Prohibitions. A publisher shall not—] Noncompliance.* The following are identified as a publisher's noncompliance with these rules:

1. *[Install its own newsrack(s)] Installation of noncommission equipment for purpose of publication distribution;*
2. Failure to pay required license fee(s);
3. Damage to commission bin(s) and/or machine(s); or
4. Failure to pay the cost of the commission's remedial action(s).

(B) Notice of Violation and Commission Remedial Action. The commission *[shall]*, in its sole discretion as provided in 7 CSR 10-16.020 through 7 CSR 10-16.050, may take any remedial action *[it deems] deemed* necessary and appropriate to address the publisher's noncompliance *[with 7 CSR 10-16.020 through 7 CSR 10-16.050]*. Such remedial action *[shall include, but]* is not limited to~~,~~ the following:

1. Seizure and removal of the publisher's *[newsracks] non-commission equipment and storage of such equipment at a site determined in the commission's sole discretion;*
2. Revocation of the publisher's authority to participate in the publication vending machine program, removal of all the publisher's publications in any commission machines, and prevention of such publisher from future use of commission machines; and/or
3. Repair of the damaged commission bin(s) and/or machine(s).

(C) Timing and Costs of Remedial Action. The commission may take such remedial action(s) immediately and without prior approval of the publisher. The publisher is responsible to pay all costs of *[any]* remedial actions taken by the commission under 7 CSR 10-16.035(2)(B) *[shall be paid by the publisher]*.

(D) Notice of Remedial Action. After the commission takes any remedial action(s) authorized by 7 CSR *[10-16.030(2)(B)] 10-16.035(2)(B)*, the commission shall provide written notice to the publisher, either by certified U.S. mail or by electronic mail within ten (10) days *[send written notice to the publisher, either by certified U.S. mail or by electronic mail, stating]*. The written notice will include the alleged violation, the remedial action(s) taken by the commission, and the action(s) the publisher is

required to take~~,~~ including, but not limited to 1) retrieving the noncompliant publisher newsracks and 2) payment of all delinquent license fees and payment of all costs incurred by the commission to carry out the remedial action(s). If the commission is unable to determine the mailing address or electronic mail address of the publisher, it shall make~~,~~. The commission will make reasonable effort to locate either the mailing address or the electronic address of the publisher in order to send the written notice. In the event the mailing address or electronic mail address cannot be determined in the ten (10) days, *[notice shall be satisfied by]* the commission will post~~[ing]~~ a written notice consistent with this 7 CSR *[10-16.030(2)(D)] 10-16.035(2)(D)* in a conspicuous place located at the rest area and on the Missouri Department of Transportation website.

(E) Opportunity for Informal Hearing. If the publisher disagrees with the allegation(s) of noncompliance and the remedial action(s) taken as set forth in the commission's written notice, the publisher *[shall have thirty (30) days from the date on the notice to]* may request an informal hearing before the department's *[State Maintenance Engineer] General Services Director*, or the *[State Maintenance Engineer's] General Services Director's* designee, no later than thirty (30) days from the date on the notice. Such request for an informal hearing shall be addressed to the Commission Secretary, PO Box 270, Jefferson City, MO 65102. *[Such informal hearing shall be conducted at a date, time, and location as determined by t/The department's [State Maintenance Engineer] General Services Director, or the [State Maintenance Engineer's] General Services Director's designee, determines the date, time, and location of the informal hearing.* A publisher's failure to request a hearing within the time allowed under this 7 CSR 10-16.035(2)(E), or a publisher's failure to appear at the hearing, will result in the publisher's forfeiture of the opportunity for the informal hearing.

AUTHORITY: section 29 of Art. IV, Mo. Const., sections 226.020, 226.150, 226.750–226.790, and 227.030, RSMo [2000] 2016, Title 23, United States Code section III (b), and Title 23, Code of Federal Regulations part 752. Original rule filed July 2, 2010, effective Feb. 28, 2011. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 16—Rest Areas**

PROPOSED AMENDMENT

7 CSR 10-16.045 Licensee Responsibilities and Requirements. The Missouri Highways and Transportation Commission is amending the purpose statement and sections (1) through (4).

PURPOSE: This amendment clarifies the responsibilities of the licensee, expands on the purpose of the license fees, and deletes unnecessary restrictive wording.

PURPOSE: This rule provides the licensee's responsibilities and requirements for the placement of publication vending machines on interstate highway rest areas for [sale or] distribution of publications to the public.

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.

(1) Commission Licensee. The commission may grant [to a licensee] an exclusive license to [authorize publishers to lease machine space. This licensee shall regulate and administer all machines at all Missouri rest and recreation areas in accordance with 1) a contract between the commission and the licensee and 2) 7 CSR 10-16.020 through 7 CSR 10-16.050,] a licensee to regulate and administer all machines at all Missouri rest areas. Regulation will be in accordance with: 1) a contract between the commission and the licensee; and 2) 7 CSR 10-16.020 through 7 CSR 10-16.050. The licensee may either [by operating] operate the machines itself or [by executing] execute sub-licensing agreements with the publisher or the publisher's agent [which] with such sub-licensing agreement [shall become] effective upon execution by both parties. However, that license between the commission and the licensee [shall be terminated] terminates effective with the date [that] the [Bureau of Rehabilitation Services for the Blind assumes regulation and jurisdiction of machines in rest areas, and upon the effective date of that occurrence all sub-licensing agreements between the licensee and a publisher or its agent [shall be terminated] terminate.

(2) [Machine Space] Bin Rental. The licensee may lease [machine spaces within the] bins to such publishers or such publishers' agents [and such spaces shall be available] only on a first-come, first-served basis. The licensee may maintain a waiting list for interested publishers [for whom space in the existing] if a bin is not available.

(3) License Fees Authorized. [The licensee shall collect a] **Payment of a license fee [of] to the licensee is a legal condition precedent before a publication may be vended in a rest area bin. The twelve dollars (\$12) per year license fee is due** from each publisher or its agent for each [machine space in a rest area] bin to cover the administrative and maintenance costs the licensee, or its affiliated organization or agent, [shall] sustains due to the operation of the machine and the debris the machine will generate. [Payment of this license fee to the licensee is a legal condition precedent before a publication may be vended in a rest area machine.]

(4) Publication Display Requirements. The visible contents of the publication as displayed in the machine shall not be offensive to members of the general public. The licensee, through its authorized representatives, retains final approval of the manner in which a publication is ultimately displayed for [sale or] distribution in a machine in a rest area.

AUTHORITY: section 29 of Art. IV, Mo. Const., sections 226.020, 226.150, 226.750–226.790, and 227.030, RSMo [2000] 2016, Title 23, United States Code section III (b), and Title 23, Code of Federal

Regulations part 752. Original rule filed July 2, 2010, effective Feb. 28, 2011. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and Transportation
Commission
Chapter 16—Rest Areas**

PROPOSED AMENDMENT

7 CSR 10-16.050 Publisher Responsibilities and Requirements. The Missouri Highways and Transportation Commission is amending the purpose statement and sections (1) through (8), deleting sections (2) and (9), and renumbering sections (3) through (7).

PURPOSE: This amendment clarifies only bins and machines owned by the commission may be installed at rest areas, deletes the unnecessary language regarding coin mechanisms, clarifies the terms of the agreement, expands on the publisher's responsibilities, deletes redundant language regarding a publisher's liability for damage caused to commission bins and machines, and deletes unnecessary restrictive wording.

PURPOSE: This rule provides the publisher's responsibilities and requirements for the [sale] distribution of publications in publication vending machines in interstate highway rest areas.

(1) [Newsrack Prohibition] **Publication Vending Machines.** [No bin or machine shall be installed at a rest area except the] **Only** bins and machines owned and provided by the commission **may be installed at a rest area.** [If any newsrack is installed at a rest area by a publisher or its agent, such newsrack shall be removed from the rest area and stored by the commission, and all removal and storage costs incurred by the commission shall be borne by the licensee, or the publisher, or its agent.]

[(2) **Coin Mechanism.** The coin mechanism for a machine is the responsibility of the licensee, or the publisher or agent who rents the machine space from the licensee.]

[(3)](2) **Duration of Rental Agreement.** Each agreement between a licensee and a publisher or the publisher's agent authorizing the rental of one (1) or more [machine spaces] **bins** may be for no less than (1) year in duration. Occupants of any rental space will be evicted from the rental space thirty (30) days after the expiration of the rental agreement unless renewed by agreement prior to the end of the thirty (30) days. [Any renewal leases of machine space shall have] **To renew the lease of machine space, all license fees are required to be paid in full to the licensee [by the publisher or its agent from the date of the start of the renewal period].**

Failure to pay *[all license fees shall result in the cancellation of] the license fee in full results in cancellation of the license and assignment of the machine space to the next party on the licensee's waiting list [pursuant to a validly executed agreement].*

[(4)](3) Termination of Sub-licensing Agreement. Both the licensee and the publisher or its agent [shall have the right to] may terminate their sub-licensing agreement, provided no less than thirty (30)-days written notice is given. Upon termination of the sub-licensing agreement, the licensee shall refund [to the publisher the portion of the license fee covering the entire term of the agreement paid in advance by the publisher that is equal to one-twelfth (1/12) of the annual license fee] the pro-rata share of the annual license fee for any remaining unused months of the term of the agreement.

[(5)](4) Publisher Responsible for Damages to Bins and Machines. The commission is responsible for the total cost to purchase, install, and improve a bin or machine [shall be borne by the commission]. [The licensee, or the publisher or its agent, shall bear the costs of installing, maintaining, and removing the coin mechanism. The publisher or its agent shall provide the licensee with the key or other device that allows for the removal of the coin mechanism.] The publisher shall:

(A) [b/Be responsible for any damage caused by it or its agents to the commission bin(s) or machine(s) and the contents thereof; and [shall]

(B) [r/Reimburse the commission any costs incurred by the commission in repairing the damage, including the cost of replacement of the bin(s) or machine(s), as determined in the commission's sole discretion.

[(6)](5) Restocking of Publications. Stocking the bins at all rest areas with the current edition of a publication at least as often as the publication is published, weekend or special editions excluded, is the responsibility of [E]each licensee, or a publisher or its agent[, shall restock the machines at all rest areas with the current edition of a publication at least as often as the publication is published, weekend or special editions excluded]. The licensee, or a publisher or its agent, [shall] is also [remove] responsible for removal of any outdated issues of such publication from within each [machine] bin and [remove] all debris [which is not properly placed in rest area trash containers] from the rest area grounds.

[(7)](6) No Advertisements on Machines. [Commission] No advertisements are to be displayed on commission bins and machines [shall have no advertisement displayed].

[(8)](7) Notice Requirements. [On a prominent place on each machine, the licensee, or a publisher or its agent, shall affix and display] It is the responsibility of the licensee, and if applicable to a publisher, based on information supplied by the publisher or its agent, to display the following notice, "For Information Regarding Any Problems With Your Use of This Machine Call _____ - _____, or write _____." [The notice shall provide] in a prominent place on each bin with the appropriate telephone number (with area code) and the mailing address of a contact person or agent for the licensee, or a publisher or its agent[, for refund requests or other vending problems. Such notice shall be created by the licensee, and if applicable to a publisher, shall be based on information supplied by the publisher or its agent].

[(9) Publisher Liability. Each publisher and its agents shall be liable for damage sustained to the commission's bins, machines, and the contents thereof that is caused by the publisher or its agents.]

AUTHORITY: section 29 of Art. IV, Mo. Const., sections 226.020, 226.150, 226.750–226.790, and 227.030, RSMo [2000] 2016, Title 23, United States Code section III (b), and Title 23, Code of Federal Regulations part 752. Original rule filed July 2, 2010, effective Feb. 28, 2011. Amended: Filed Feb. 9, 2018.

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 Missouri Highways and Transportation Commission. Pamela J. Harlan, Secretary to the Commission, 105 W. Capitol Avenue, PO Box 270, Jefferson City, MO 65102 or Pamela.Harlan@modot.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 10—DEPARTMENT OF NATURAL RESOURCES Division 100—Petroleum Storage Tank Insurance Fund Board of Trustees Chapter 2—Definitions

PROPOSED AMENDMENT

10 CSR 100-2.010 Definitions. The board is deleting section (1), adding new sections (8), (19), (23), amending sections (12) and (13), and renumbering as necessary.

PURPOSE: Instead of incorporating by reference numerous definitions of terms that are not used in the board's rules, this amendment adds explicit definitions for three (3) terms used in the board's rules, corrects one definition, and amends one definition to reflect a statutory change.

[(1) Unless defined otherwise, the definitions provided in 10 CSR 26-2.012 shall apply.]

[(2)](1) "Aboveground storage tank" means any one (1) or a combination of tanks, including pipes connected thereto, used to contain an accumulation of petroleum and the volume of which, including the volume of the aboveground pipes connected thereto, is ninety percent (90%) or more above the surface of the ground, and is utilized for the sale of products regulated by Chapter 414, RSMo. It does not include:

(A) A farm or residential tank of one thousand one hundred (1,100) gallons or less used for storing motor fuel for noncommercial purposes;

(B) Tanks used for storing heating oil for consumptive use on the premises where stored;

(C) Septic tanks;

(D) Pipeline facilities, including gathering lines, regulated under—
1. The federal Natural Gas Pipeline Safety Act of 1968 (P.L. 90-481), as amended; or

2. The federal Hazardous Liquid Pipeline Act of 1979 (P.L. 96-129), as amended;

(E) Pipeline facilities regulated under state laws comparable to the provisions of law referred to in subsection (D) of this section;

(F) Surface impoundments, pits, ponds, or lagoons;

(G) Storm water or waste water collection systems;

(H) Flow-through process tanks;

(I) Liquid traps or associated gathering lines directly related to oil or gas production and gathering operations;

(J) Storage tanks situated in an underground area, such as a basement, cellar, mineworking, drift, shaft, or tunnel, if the storage tank is situated upon or above the surface of the floor; and

(K) Transformers, circuit breakers, or other electrical equipment.

[(3)](2) “Airline company” means any person, firm, partnership, corporation, trustee, receiver or assignee, and all other persons, whether or not in a representative capacity, undertaking to engage in the carriage of persons or cargo for hire by commercial aircraft pursuant to certificates of convenience and necessity issued by the federal Civil Aeronautics Board, or successor thereof, or any noncertificated air carrier authorized to engage in irregular and infrequent air transportation by the federal Civil Aeronautics Board, or successor thereof.

[(4)](3) “Annual aggregate” means the dollar amount of all benefits available to a fund participant for the period of time stated on the declarations page of each participation agreement issued by the board, regardless of how many separate occurrences, releases, or third party claims may occur during this same period. State law establishes the annual aggregate at two (2) million dollars.

[(5)](4) “Board” means the board of trustees of the Petroleum Storage Tank Insurance Fund, or its employee, designated agent, or representative.

[(6)](5) “Bodily injury” means physical injury, sickness, disease or damage to the body sustained by a person, including death resulting from any of these at any time. It does not include any loss or damage of an intangible nature, such as pain and suffering, mental distress, or loss of use of any benefit. Nor does it mean personal injury.

[(7)](6) “Claim” means a written demand for money or services, including the service of a lawsuit, which is filed and adjudicated in a manner consistent with Missouri law.

[(8)](7) “Cleanup” consists of all actions necessary to investigate, contain, control, analyze, assess, treat, remediate, or mitigate the risks of a petroleum release to achieve risk-based standards established by the Department of Natural Resources.

(8) “Contaminated” or “Contamination” means one (1) or more petroleum chemicals of concern in soil, surface water, or ground water exceed risk-based standards established by the Missouri Department of Natural Resources.

(12) “Fund beneficiary” means any person who takes responsibility for cleanup of [property where] **one (1) or more releases from tanks [previously were in use, but were]** taken out of use prior to December 31, 1997, and who qualifies to receive monies from the Petroleum Storage Tank Insurance Fund under section 319.131.9 or 319.131.10, RSMo.

(13) “Fund participant” means an owner or operator of a tank who has applied for and been accepted by the board as a person for whom the Petroleum Storage Tank Insurance Fund is serving as [the] a financial responsibility mechanism [required by] **under** section 319.114, RSMo, or [for whom the Petroleum Storage Tank Insurance Fund is providing insurance coverage for releases from aboveground storage tanks] **section 414.036, RSMo;** or the owner of land upon which such a tank is located, if such person is named as an additional insured; or any other person named as an additional insured by the board.

(19) “Petroleum storage tank” or “Tank” means:

(A) An underground storage tank, as defined in section 319.100, RSMo, which is used to store petroleum; or

(B) An aboveground storage tank, as defined in this rule.

[(19)](20) “Pipeline terminal” means a large storage facility which receives product via pipeline.

[(20)](21) “Property damage” means physical injury to or destruction of tangible property, excluding all resulting loss of use of that property. It does not include loss or damage of an intangible nature. Loss or damage of an intangible nature includes, but is not limited to, loss or interruption of business, pain and suffering, lost income, mental distress, loss of use of any benefit, and punitive damages.

[(21)](22) “Railroad corporation” means all corporations, companies or individuals now owning or operating, or which may hereafter own or operate, any railroad in this state.

(23) “Release” includes, but is not limited to, any spilling, leaking, emitting, discharging, escaping, leaching, or disposing from a petroleum storage tank into groundwater, surface water, or subsurface soils.

[(22)](24) “Site” means real property held under one (1) deed, except that in exceptional circumstances involving very large tracts of land, the board may, at its discretion, recognize separate portions of a large tract as separate tank sites.

[(23)](25) “Tank” means—

(A) An underground storage tank, as defined in section 319.100, RSMo, which is used to store petroleum; or

(B) An aboveground storage tank, as defined in this rule.

AUTHORITY: section 319.129, RSMo [Supp. 2012] 2016. Original rule filed April 1, 1999, effective Nov. 30, 1999. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 15, 2018.

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 Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102, by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. No public hearing is scheduled.

**Title 10—DEPARTMENT OF NATURAL RESOURCES
Division 100—Petroleum Storage Tank Insurance Fund
Board of Trustees
Chapter 4—Participation Requirements**

PROPOSED AMENDMENT

10 CSR 100-4.010 Participation Requirements for Underground Storage Tanks. The board is amending sections (2)–(7) of this rule.

PURPOSE: This amendment clarifies procedures for UST owners and operators who wish to apply for pollution liability insurance coverage, reduces paperwork required to obtain coverage for new USTs, reduces paperwork required to renew coverage, allows the board more flexibility to further reduce its paperwork requirements in the future, eliminates the option of paying participation fees semi-annually, and increases the participation fee for owners and operators whose tanks are forty (40) years old or older.

(2) Any owner or operator who wishes to participate in the fund shall so indicate by applying for coverage on a form specified by the board. An application shall—

(A) Include a certification that the petroleum tanks meet or exceed and are in compliance with all technical standards established by *[the U.S. Environmental Protection Agency and rules established by]* the Missouri Department of Natural Resources and the Missouri Department of Agriculture;

(C) Include information on all tanks known to exist at the site, including aboveground storage tanks and underground storage tanks which contain a hazardous substance, or which are out of use *[or permanently closed in place]*;

(D) Include documentation as required by the board to demonstrate that the applicant has a reasonable assurance of the integrity of all USTs on the site which are in use. This documentation shall include:

1. *[Six (6)] At least two (2) current months' leak detection records, except in the following cases:*

A. For *[new UST systems, or for]* USTs installed before **July 1, 2017**, or compartments of such tanks, which are being put into use for the first time, one (1) current month's leak detection record from an automatic tank gauge, interstitial monitoring, statistical inventory reconciliation, or daily inventory reconciliation shall be provided; or current tank and line tightness tests shall be provided;

B. For UST systems being put back into use after being out of use, current tank and line tightness tests shall be provided; and

C. For operating UST systems being purchased by a new owner, current tank and line tightness tests shall be provided if *[six (6)] at least two (2) current months' leak detection records* are not available from the prior owner;

2. Evidence that pressurized lines are equipped with line leak detectors which are in working order, unless the entire UST system is a double-wall system and monitoring devices are adequate to detect a leak;

3. Evidence that the cathodic protection system, if any, is functioning properly;

4. Evidence that the tank lining, if any, has been properly installed and inspected according to accepted industry practices;

5. Evidence that the UST is equipped with corrosion protection and spill/overflow prevention devices, as required in 10 CSR 26-2;

6. Line and/or tank tightness tests, as required in 10 CSR 26-2; and

7. Any other documentation as may reasonably be required by the board; *[and]*

(E) Include documentation as required by the board demonstrating that the applicant has the ability to pay the first ten thousand dollars (\$10,000) in the event he or she makes a claim for benefits from the fund.

1. For non-public entities, such documentation shall include:

A. A letter of credit for this amount from a federally-insured financial institution in the favor of the Petroleum Storage Tank Insurance Fund;

B. One (1) or more certificates of deposit which total this amount. The applicant shall submit documentation from the custodian of such certificates that assures the board of their existence and preservation for the purposes described herein;

C. Financial statements indicating that the net worth of the applicant is at least one hundred thousand dollars (\$100,000), or that the applicant has at least fifty thousand dollars (\$50,000) working capital;

D. A written guarantee from another person or entity demonstrating the ability to pay this amount in a manner outlined in this rule. The provider of the guarantee shall disclose the relationship between that person or entity and the applicant;

E. A letter signed by an officer of a federally-insured financial institution attesting to the ability of the applicant to pay this amount; or

F. Any other method determined by the board to be reasonable and sufficient.

2. For public entities, documentation requirements are as follows:

A. Cities with a population greater than three thousand (3,000), none;

B. Cities with a population of three thousand (3,000) or less, a copy of the most recent annual audit of the city's finances, or a current set of financial statements;

C. First class or second class counties, or charter counties, none;

D. Third class counties, a copy of the most recent annual audit of the county's finances, or a current set of financial statements; or

E. Schools, sewer districts, fire districts, and other similar entities, a copy of current financial statements*[/]*; and

(F) Applicants must apply for coverage on all tanks in use at a site or the board will not insure any of the tanks. The only exceptions are aboveground tanks not required by the Department of Agriculture to have financial responsibility.

(3) Procedures Regarding Payment of Fees.

(A) Participation fees shall be paid by all applicants, as follows:

1. *[Double-wall or secondary containment tank and piping systems that meet the requirements of 10 CSR 26-2.020 (includes UST systems that have secondary containment of the tank and piping) shall be assessed]* **For double-walled USTs less than forty (40) years old** – one hundred dollars (\$100) per tank annually; *[and]*

2. *[All]* For other USTs *[shall be assessed]* **less than forty (40) years old** – one hundred twenty-five dollars (\$125) per tank annually*[/]*; and

3. **For USTs that are forty (40) years old or older – two hundred dollars (\$200) per tank annually.**

[(E) Any fund participant who owns fifty (50) or more petroleum storage tanks may pay participation fees in semi-annual installments.]

(4) The board shall review applications within thirty (30) days of receipt and shall respond to such applications in writing with a notice of acceptance, a request for clarification or information, or a rejection of the application.

(A) If the response is a notice of acceptance, it shall include the *[effective date and period of coverage]* **items specified in section (5) of this rule.**

(5) Upon determination that an applicant has met the requirements for participation in the fund, the board shall issue a *[document]* **declarations page and participation agreement** to the applicant *[confirming that fact, and]*, specifying the effective date of coverage and other terms and conditions of such coverage as the board may deem appropriate.

(B) The *[document]* **declarations page and participation agreement** shall confirm *[that the fund is providing]* coverage for risks associated with sudden or non-sudden accidental releases arising from the operation of USTs, including costs of cleaning up such releases, third-party property damage, and third-party bodily injury, subject to the limits specified in sections 319.129 through 319.131, RSMo. These benefits are subject to the following limits:

1. A per occurrence limit of one (1) million dollars;

2. An annual aggregate limit of two (2) million dollars; and

3. A deductible of ten thousand dollars (\$10,000) per occurrence.

(C) The *[document]* **declarations page** shall *[include a cover page which identifies]* **specify** the person or persons being insured by the fund, the name and location of the business or operation where the USTs are located, and the specific USTs which are covered. *[A separate participation document shall be issued for*

each site.]

(6) In order to continue their participation in the fund, participants are required to renew their participation annually.

(B) Participants shall submit such information as may be required by the board, *including information specified in section (2) of this rule,* prior to the end of their coverage period.

[(C)] Any participant who fails to do so shall receive a notice from the board, giving the participant sixty (60) days to submit such information in order to continue participation in the fund. At the end of the sixty (60) days, if the participant has failed to submit the required information, coverage may be cancelled.

(C) Applicants must apply to renew their coverage on all tanks in use at a site or the board will not insure any of the tanks. The only exceptions are aboveground tanks not required by the Department of Agriculture to have financial responsibility.

(D) Upon determination that the participant has met the requirements for continued participation in the fund, the board shall issue a *[document]* **new declarations page** confirming that fact, *and* specifying the effective date(s) of coverage *[and]*. *[o]* **Other terms and conditions of such coverage [as the board may deem appropriate] contained in the participation agreement previously issued for that site shall remain in effect for the new coverage period.**

(F) If at the end of a policy period, all of the previously-insured USTs have been taken out of use, the owner/operator of the tank(s) shall no longer be insured for costs resulting from sudden or non-sudden releases, since there cannot be a release from an empty tank. Instead, the owner or operator may apply for an extended reporting period. The extended reporting period allows named persons to give notice of claim for a release which occurred while the previously-insured tank(s) was/were in use, but which is not yet known.

1. Participation fees for the extended reporting period shall be paid at the same rates as specified in subsection (3)(A) above.

2. Terms and conditions of coverage shall be contained in *[documents]* **an endorsement to the participation agreement** issued by the board to the fund participant(s).

3. The extended reporting period shall consist of one- (1-) year increments. It shall not last for more than five (5) years after it first commences, and in no case beyond the sunset date of the fund established by the Missouri General Assembly.

4. The board reserves the right to grant extended reporting periods at its sole discretion.

(7) The following procedures shall be followed when there is a change of ownership, change of operator, *[or]* change of landowner, **or a new tank is installed:**

(A) If, *during the period of coverage as specified by the board,* the ownership of a UST changes **during the period of coverage**, coverage shall cease *[and the former owner shall be given]* **on the date ownership changes. At its sole discretion, the board may offer the former owner an opportunity to purchase an extended reporting period, as described in subsection (6)(F) of this rule;**

(B) If, during the period of coverage as specified by the board, the operator of the UST changes, the owner shall notify the board in writing of the change and the effective date of such change. The board shall *[acknowledge the change in writing]* **issue an endorsement to the participation agreement** which shall include *[notice of]* the effective date of termination of participation by the previous operator; *[and]*

(C) If, during the period of coverage as specified by the board, the owner of the real estate on which the tank(s) is located changes, the fund participant shall notify the board **in writing** of the change *[at the time the participant renews coverage.]* **and the effective date of such change. The board shall issue an endorsement to the participation agreement which shall include the effective date of termination of participation by the previous landowner; and**

(D) If, during the period of coverage as specified by the board, a fund participant installs one (1) or more additional tanks at an insured site and desires coverage for the new tank(s), the fund participant must notify the board, provide such information as the board may require to demonstrate the integrity of the new tank(s), and pay the new tank fee(s) and a pro-rata portion of the annual fee(s) assessed in section (3) of this rule.

AUTHORITY: sections 319.129, 319.131, and 319.133, RSMo [Supp. 2012] 2016. Original rule filed April 1, 1999, effective Nov. 30, 1999. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 15, 2018.

PUBLIC COST: The proposed amendment is estimated to cost the Petroleum Storage Tank Insurance Fund Board of Trustees six thousand dollars (\$6,000) in one- (1-) time costs to modify its software.

PRIVATE COST: The proposed amendment is estimated to cost private entities fifty-one thousand nine hundred seventy-five dollars (\$51,975) in the first year for increased participation fees to insure underground tanks that are forty (40) years old or older and to insure tanks in use at PSTIF-insured sites but not currently insured by the PSTIF. It is anticipated some of these owners will remove and/or replace their old tanks in future years, thereby reducing their participation fees; however, other currently-insured tanks will age and will be affected by the fee increase in future years, so the board assumes similar annual costs would be incurred by its insureds for the next few years.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102, by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Department of Natural Resources
Division Title: Petroleum Storage Tank Insurance Fund Board of Trustees
Chapter Title: Participation Requirements

Rule Number and Name:	10 CSR 100-4.010 UST Participation Requirements
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Petroleum Storage Tank Insurance Fund Board of Trustees	\$6,000

III. WORKSHEET

Costs are onetime expenses to modify PSTIF Board of Trustees' software: \$5,000 to change participation fee for insured USTs 40+ years old, plus \$1,000 to program software for endorsement when new tank is added to participation agreement.

IV. ASSUMPTIONS

IT contractor has committed to make these programming changes for these not-to-exceed costs.

FISCAL NOTE
PRIVATE COST

- I. Department Title:** Department of Natural Resources
Division Title: Petroleum Storage Tank Insurance Fund Board of Trustees
Chapter Title: Participation Requirements

Rule Number and Title:	10 CSR 100-4.010 UST Participation Requirements
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 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:
250 owners of 677 PSTIF-insured USTs 40+ years old	Fuel storage locations	\$50,775 in additional participation fees
3 owners of insured sites where a tank is in use and not currently insured with PSTIF	Fuel storage locations	\$1,200

III. WORKSHEET

A. Currently, the PSTIF Board of Trustees insures 677 USTs that are 40+ years old. The proposed fee would increase the annual cost of participation by \$75:

$$677 \text{ USTs} \times \$75 = \$50,775$$

On average, UST sites insured by the PSTIF Board have 2.71 tanks per site; this ratio was used to estimate the number of sites affected:

$$677 \text{ USTs} \div 2.71 \text{ tanks/site} = 250 \text{ sites}$$

B. A maximum of three site owners would be required to insure up to 3 additional tanks with PSTIF:

$$3 \text{ sites} \times \$400 = \$1200$$

IV. ASSUMPTIONS

A. Some entities may own more than one site with tanks 40+ years old, but for this fiscal note it was assumed the 250 sites are all owned by different persons.

Some of the 677 USTs are empty and will be removed in the next year; this will reduce the number of tanks affected by the higher fee. But with each passing year, additional insured tanks will “age” to 40; their owners would then also be subject to the higher fee. It is assumed that, over time, this will provide an incentive for removal and/or replacement of these high-risk tanks, ultimately reducing the number of owners paying this higher fee. However, to be conservative, it is assumed an equivalent number of tanks and owners would be paying the increased fee each year for the near term.

B. No more than three PSTIF-insured UST sites are known to have one or more tanks in use that are not currently insured with the PSTIF; the only known instances are sites with insured USTs where ASTs are also in use and are not PSTIF-insured. This rule amendment would require those owners to insure their additional tank(s) when their PSTIF participation agreement renews in the next twelve months. On average, it is assumed the additional participation fees required to insure the ASTs at each of these three sites, plus the owner's time to prepare and submit the paperwork, would be \$400 per year.

**Title 10—DEPARTMENT OF NATURAL RESOURCES
Division 100—Petroleum Storage Tank Insurance Fund
Board of Trustees
Chapter 4—Participation Requirements**

PROPOSED AMENDMENT

10 CSR 100-4.020 Participation Requirements for Aboveground Storage Tanks. The board is amending sections (2)–(7) of this rule.

PURPOSE: The purpose of the amendment is clarify procedures for AST owners and operators who wish to apply for pollution liability insurance coverage, eliminate the option of paying participation fees semi-annually, make language regarding extended reporting period endorsements consistent with the rule for UST owners/operators, and allow the board flexibility to reduce paperwork in the future.

(2) Any owner or operator who wishes to participate in the fund shall so indicate by applying for coverage on a form specified by the board. An application shall—

(D) Include documentation as required by the board to demonstrate that the applicant has a reasonable assurance of the integrity of all ASTs on the site which are in use or temporarily out of use. This documentation shall include:

1. A demonstration, performed within the previous twelve (12) months, that any piping which is connected to or part of the aboveground storage tank(s) for which coverage is being sought is liquid tight; and

2. Other documentation as may reasonably be required by the board; *[and]*

(E) Include documentation as required by the board in order to demonstrate that the applicant has the ability to pay the first ten thousand dollars (\$10,000) in the event he or she makes a claim for benefits from the fund. Such documentation shall include:

1. A letter of credit for this amount from a federally-insured financial institution in the favor of the Petroleum Storage Tank Insurance Fund;

2. One (1) or more certificates of deposit which total this amount. The applicant shall submit documentation from the custodian of such certificates that assures the board of their existence and preservation for the purposes described herein;

3. Financial statements indicating that the net worth of the applicant is at least one hundred thousand dollars (\$100,000), or that the applicant has at least fifty thousand dollars (\$50,000) working capital;

4. A written guarantee from another person or entity demonstrating the ability to pay this amount in a manner outlined in this rule. The provider of the guarantee shall disclose the relationship between that person or entity and the applicant;

5. A letter signed by an officer of a federally-insured financial institution attesting to the ability of the applicant to pay this amount; or

6. Any other method determined by the board to be reasonable and sufficient.; **and**

(F) Applicants must apply for coverage on all tanks in use at a site or the board will not insure any of the tanks. The only exceptions are aboveground tanks not required by the Department of Agriculture to have financial responsibility.

(3) Procedures Regarding Payment of Fees.

(A) Participation fees shall be paid by all applicants, as follows:

1. **For [T]tanks less than twenty-five thousand (25,000) gallons [shall be assessed] - one hundred dollars (\$100) per tank annually;** and

2. **For [T]tanks [of] twenty-five thousand (25,000) gallons or larger [shall be assessed] - two hundred dollars (\$200) per tank annually.**

[(E) Any fund participant who owns fifty (50) or more

petroleum storage tanks may pay participation fees in semi-annual installments.]

(4) The board shall review applications within thirty (30) days of receipt and shall respond to such applications in writing with a notice of acceptance, a request for clarification or information, or a rejection of the application.

(A) If the response is a notice of acceptance, it shall include the *[effective date and period of coverage] items specified in section (5) of this rule.*

(5) Upon determination that an applicant has met the requirements for participation in the fund, the board shall issue a *[document] declarations page and participation agreement* to the applicant *[confirming that fact and]*, specifying the effective date of coverage and other terms and conditions of such coverage as the board may deem appropriate.

(B) The *[document] declarations page and participation agreement* shall confirm *[that the fund is providing financial protection] coverage* for risks associated with sudden or non-sudden accidental releases arising from the operation of ASTs, including costs of cleaning up such releases, third-party property damage, and third-party bodily injury, subject to the limits specified in sections 319.129 through 319.131, RSMo. These benefits are subject to the following limits:

1. A per occurrence limit of one (1) million dollars;
2. An annual aggregate limit of two (2) million dollars; and
3. A deductible of ten thousand dollars (\$10,000) per occurrence.

(C) The *[document] declarations page* shall *[include a cover page which identifies] specify* the person or persons being insured by the fund, the name and location of the business or operation where the tanks are located, and the specific tanks which are covered. *[A separate participation document] shall be issued for each site.]*

(6) In order to continue participation in the fund, participants are required to renew their participation annually.

(D) Applicants must apply to renew their coverage on all tanks in use at a site or the board will not insure any of the tanks. The only exceptions are aboveground tanks not required by the Department of Agriculture to have financial responsibility.

[(D)](E) Upon determination that the participant has met the requirements for continued participation in the fund, the board shall issue a [document to the applicant] new declarations page confirming that fact and specifying the effective date of coverage *[and]*. *[o]Other terms and conditions of such coverage [as the board may deem appropriate] contained in the participation agreement previously issued for that site shall remain in effect for the new coverage period.*

[(E)](F) In order to continue participation in the fund, participants shall pay such fees as are set forth in subsection (3)(A) above. If such fees are not submitted with the renewal application, and the application is accepted, the board shall notify the applicant of the amount of such fees which are due and shall indicate that such fees are due and payable within ten (10) days. Failure by the applicant to submit such fees in a timely manner shall result in nonrenewal of coverage on the date that such fees were due.

[(F)](G) If at the end of a participation period, all of the previously-insured ASTs have been taken out of use, the owner and/or operator of the tank(s) shall no longer be insured for costs resulting from sudden or non-sudden releases, since there cannot be a release from an empty tank. Instead, the owner or operator may apply for an extended reporting period. The extended reporting period allows named persons to give notice of claim for a release which occurred while the previously-insured tank(s) was/were in use, but which is not yet known.

1. Participation fees for the extended reporting period shall be

paid on such tanks at the same rates as specified in subsection (3)(A) above.

[2. Coverage provided by the fund shall be limited to one (1) million dollars.

3. A ten thousand dollar (\$10,000) deductible shall apply.]

*[4.]2. [All other terms and conditions of coverage provided by the fund shall be contained in the document] **Terms and conditions of coverage shall be contained in an endorsement to the participation agreement** issued by the board to the fund participant(s).*

[5.]3. The extended reporting period shall consist of one- (1-) year increments, but shall not last for more than five (5) years after it commences and in no case beyond the sunset date of the fund established by the Missouri General Assembly.

*[6.]4. The board reserves the right to *[issue such coverage]* **grant extended reporting periods** at its sole discretion.*

(7) The following procedures shall be followed when there is a change of ownership, change of *[operation, or]* **operator, or** change of landowner, **or a new tank is installed:**

(A) *If, during the period of coverage as specified by the board,] the ownership of an AST changes **during the period of coverage**, coverage shall cease *[and the former owner shall be given] on the date ownership changes. At its sole discretion, the board may offer the former owner an opportunity to purchase an extended reporting period, as described in subsection (6)(F) of this rule;**

(B) If, during the period of coverage as specified by the board, the operator of the AST changes, the owner shall notify the board in writing of the change and the effective date of such change. The board shall *[acknowledge the change in writing] **issue an endorsement to the participation agreement** which shall include *[notice of]* the effective date of termination of participation by the previous operator; *[and]**

(C) If, during the period of coverage as specified by the board, the owner of the real estate on which the tank(s) are located changes, the fund participant shall notify the board in writing of the change *[at the time the participant renews coverage.] **and the effective date of such change. The board shall issue an endorsement to the participation agreement which shall include the effective date of termination of participation by the previous landowner; and***

(D) **If, during the period of coverage as specified by the board, a fund participant installs one (1) or more additional tanks at an insured site and desires coverage for the new tank(s), the fund participant must notify the board, provide such information as the board may require to demonstrate the integrity of the new tank(s), and pay the new tank fee(s) and a pro-rata portion of the annual fee(s) assessed in section (3) of this rule.**

*AUTHORITY: sections 319.129, 319.131, and 319.133, RSMo [Supp. 2012] 2016. Original rule filed April 1, 1999, effective Nov. 30, 1999. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 15, 2018.*

PUBLIC COST: The proposed amendment is estimated to cost the Petroleum Storage Tank Insurance Fund Board of Trustees one thousand dollars (\$1,000) in one- (1-) time costs to modify its software.

PRIVATE COST: The proposed amendment is estimated to cost two (2) private entities that insure their aboveground tanks but not the underground tanks at the same site eight hundred dollars (\$800) to insure all tanks at these sites.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102,

by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Department of Natural Resources
Division Title: Petroleum Storage Tank Insurance Fund Board of Trustees
Chapter Title: Participation Requirements

Rule Number and Name:	10 CSR 100-4.020 UST Participation Requirements
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Petroleum Storage Tank Insurance Fund Board of Trustees	\$1,000

III. WORKSHEET

Cost is onetime expense to modify PSTIF Board of Trustees' software to generate endorsement when new tank is added to participation agreement.

IV. ASSUMPTIONS

IT contractor has committed to make these programming changes for these not-to-exceed costs.

**FISCAL NOTE
PRIVATE COST**

- I. **Department Title:** Department of Natural Resources
Division Title: Petroleum Storage Tank Insurance Fund Board of Trustees
Chapter Title: Participation Requirements

Rule Number and Title:	10 CSR 100-4.020 AST Participation Requirements
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 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:
2 owners of insured sites where a tank is in use and not currently insured with PSTIF	Fuel storage locations	\$800

III. **WORKSHEET**

Two site owners would be required to insure up to 3 additional tanks with PSTIF:
 2 sites x \$400 = \$800

IV. **ASSUMPTIONS**

Staff believes there may be one or two PSTIF-insured AST sites where USTs are also in use and are not currently PSTIF-insured. Therefore, it is assumed two PSTIF-insured AST sites with one or more tanks in use that are not currently insured with the PSTIF would be affected by this rule amendment. The amendment would require those owners to insure their additional tank(s) when their PSTIF participation agreement renews in the next twelve months. On average, it is assumed the additional participation fees required to insure the USTs at each of these two sites, plus the owner's time to prepare and submit the paperwork, would be \$400 per year.

**Title 10—DEPARTMENT OF NATURAL RESOURCES
Division 100—Petroleum Storage Tank Insurance Fund
Board of Trustees
Chapter 5—Claims**

PROPOSED AMENDMENT

10 CSR 100-5.010 Claims for Cleanup Costs. The board is amending sections (1), (4), (6), (9), and (10) of this rule.

PURPOSE: This amendment eliminates the requirement to file a notice of claim when planning to remove tanks, corrects and clarifies existing text, and eliminates language regarding deadlines that are no longer pertinent.

(1) A notice of claim must be submitted in writing to the board as soon as reasonably possible after a fund participant or beneficiary described in section (4) of this rule:

(B) Receives notice of the assertion of an obligation to pay cleanup costs or damages as a result of a release from tanks on the property; or

[(C) Plans to remove one (1) or more petroleum storage tanks; or]

[(D)](C) Learns that petroleum contamination exists on **or near a tank** site at levels such that a cleanup is required by the Department of Natural Resources.

(4) Fund participants or beneficiaries may *[receive monies]* **request pre-approval and reimbursement of costs** from the fund—

(A) For a release that occurs or is discovered on a date that the participant is participating in the fund.

1. The fund participant must provide notice of claim to the board while the participant is insured and before expiration or cancellation of the participant's coverage, or during an extended reporting period granted by the board under 10 CSR 100-4.010 or 10 CSR 100-4.020.

2. Fund participants must get cleanup costs approved in advance, as described in this rule.

[3. For cleanup costs resulting from a release from an aboveground storage tank, costs incurred prior to July 1, 1997, are not eligible.]

[4.]3. A fund participant who has properly made a claim may request that the board assign his or her benefits for cleanup costs to another party, and the board may, with the consent of the other party and at the board's sole discretion, agree to such assignment;

(B) For a site where one (1) or more petroleum storage tank(s) was/were in use on December 31, 1997, the owner or operator applied to participate in the fund by December 31, 1997, that application was ultimately accepted by the board, there are ongoing costs of cleanup associated with a release from one (1) or more of those tanks which occurred prior to the date the application was accepted, and the cleanup began after August 28, 1989.

1. Fund participants must get cleanup costs approved in advance, as described in this rule.

[2. Costs incurred prior to the date of acceptance by the board of the application for participation are not eligible.]

[3.]2. In order to maintain its status as an eligible site, the owner or operator of any petroleum storage tanks at the site must maintain participation in the fund as long as such tanks are in use. Failure to do so shall result in the site becoming ineligible; costs incurred after the date of cancellation or nonrenewal of participation in the fund are not eligible. Should the owner or operator elect to participate in the fund again, he or she may become eligible under subsection (4)(A) for any new release*./;*

(C) For a site where a release occurred as a result of the operation of one (1) or more petroleum storage tanks, cleanup began or will begin after August 28, 1989, and the tank(s) from which the release occurred was/were taken out of use prior to December 31, 1997,

provided such site was documented by or reported to the Department of Natural Resources prior to December 31, 1997.

1. For the purposes of this subsection, evidence of a site being documented by or reported to the Department of Natural Resources may include, but is not limited to:

A. Completion of a tank registration form;

B. Completion of the notification form circulated by the Department of Natural Resources in 1995–1997;

C. A letter, sent via U.S. mail or overnight delivery service, identifying the location of the site and indicating the existence or prior existence of tanks on the site;

D. A written message transmitted via facsimile, identifying the location of the site and indicating the existence or prior existence of tanks on the site;

E. A Site Assessment Report or similar report, submitted to the department, identifying the site as one where tanks were previously operated; or

F. Any other similar documentation which is determined by the board to provide reasonable evidence of such fact.

[2. Costs incurred prior to August 28, 1995, are not eligible.]

[3.]2. Fund beneficiaries may be required by the board to provide evidence that the site was documented by or reported to the Department of Natural Resources prior to December 31, 1997.

[4.]3. Fund beneficiaries must get cleanup costs approved in advance, as described in this rule;

(D) For a site described in subsection (4)(B) or (4)(C), except the release occurred and was being remediated prior to August 28, 1989.

1. Fund participants and beneficiaries must get cleanup costs approved in advance, as described in this rule*./;* **and**

[2. Costs incurred prior to August 28, 1996 are not eligible; and]

(E) For a site where underground storage tanks which contained petroleum were taken out of use prior to December 31, 1985, and the current owner purchased such site before December 31, 1985, provided such site was reported to the board on or before June 30, 2000. For the purposes of this subsection, current owner shall mean the person who owns a site at the time it is reported to the Petroleum Storage Tank Insurance Fund Board of Trustees or its designated representative.

1. Fund beneficiaries must get cleanup costs approved in advance, as described in this rule.

[2. Costs incurred prior to August 28, 1999, are not eligible.]

(6) The following persons may request **preapproval of costs and reimbursement** from the fund:

(9) The *[fund]* **board** will recognize eligible, reasonable, and necessary costs incurred for the following activities:

(A) Costs incurred to characterize the extent of and assess risks posed by *[petroleum contamination which results from]* a release from a petroleum storage tank; and

(10) Costs not associated with cleanup of a release from a petroleum storage tank are not eligible. Such costs include, but are not limited to:

(D) Costs of excavation, transport, treatment or disposal of soil which is not contaminated with petroleum at levels such that the Department of Natural Resources requires corrective action, except that—

1. The cost of removal of concrete or similar surface material, overburden, or fill material which is necessary to access contaminated soil for removal is eligible; and

2. Costs for *[removal,]* transport*./,* and treatment or disposal of backfill which surrounds underground tanks or piping, which is removed during tank closure activities, and which is contaminated at a level such that the Department of Natural Resources prohibits

placement of the material back into the excavated area, are eligible;

(E) Costs for environmental site assessments, or similar work, the purpose of which is to determine whether *for not* a release has occurred;

(L) Paving or resurfacing, except as required as a result of necessary cleanup activities. Claims for resurfacing shall be paid on a depreciated basis, or on the basis of the actual cash value of the surface which existed immediately prior to the cleanup; *in no case shall costs for resurfacing be recognized as eligible expenses unless the costs of cleanup were incurred after May 3, 1999;*

AUTHORITY: sections 319.129 and 319.131, RSMo [Supp. 2014] 2016. Original rule filed April 1, 1999, effective Nov. 30, 1999. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 15, 2018.

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

PRIVATE COST: The 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 Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102, by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. No public hearing is scheduled.

**Title 10—DEPARTMENT OF NATURAL RESOURCES
Division 100—Petroleum Storage Tank Insurance Fund
Board of Trustees
Chapter 5—Claims**

PROPOSED AMENDMENT

10 CSR 100-5.030 Third-Party Claims. The board is amending section (5) of this rule.

PURPOSE: This amendment corrects an inadvertent omission.

(5) The fund does not provide third-party coverage of any kind for releases from petroleum storage tanks at sites described in 10 CSR 100-5.010(4)(B), (4)(C), *for* (4)(D), or **(4)(E)**.

AUTHORITY: sections 319.129 and 319.131, RSMo [Supp. 1998] 2016. Original rule filed April 1, 1999, effective Nov. 30, 1999. Amended: Filed Feb. 15, 2018.

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

PRIVATE COST: The 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 Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102, by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. No public hearing is scheduled.

**Title 10—DEPARTMENT OF NATURAL RESOURCES
Division 100—Petroleum Storage Tank Insurance Fund
Board of Trustees
Chapter 6—UST Operator Training**

PROPOSED AMENDMENT

10 CSR 100-6.010 UST Operator Training. The board is amending section (3) of this rule.

PURPOSE: This amendment clarifies that persons must be trained before being expected to respond to an emergency.

(3) Required Designations.

(C) Within thirty (30) days of bringing a new UST(s) into use after July 1, 2016, the owner or operator must ensure that he/she has designated at least one **(1)** Qualified Class A/B Operator and has designated Qualified Class C Operators. **Any employee responsible for initially addressing emergencies presented by a spill or release from an underground storage tank system must become a Qualified Class C Operator prior to assuming that responsibility.**

(D) Should a vacancy occur, the owner or operator of a UST that is in use must ensure that he/she has a Qualified Class A/B Operator *[and/or Qualified Class C Operator(s)]* within thirty (30) days of the respective vacancy. **Any employee responsible for initially addressing emergencies presented by a spill or release from an underground storage tank system must become a Qualified Class C Operator prior to assuming that responsibility.**

AUTHORITY: section 319.130, RSMo [Supp 2014] 2016. Original rule filed Aug. 1, 2014, effective March 30, 2015. Amended: Filed Feb. 15, 2018.

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

PRIVATE COST: The 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 Petroleum Storage Tank Insurance Fund Board of Trustees, Carol Eighmey, Executive Director, PO Box 836, Jefferson City, MO 65102, by fax at (573) 522-2354, or via email to pstif@sprintmail.com. To be considered, comments must be received by April 20, 2018. 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 30-40.420 Trauma Center Designation Requirements. The department is amending sections (1)–(4) and relettering throughout; adding new sections (3) and (4); and adding the form included after the rule.

PURPOSE: This amendment adds an option and establishes requirements for hospitals which are verified as trauma centers by the American College of Surgeons to become designated as level I, II, III, or IV trauma centers without being reviewed by DHSS (the department). This amendment also adds an application for these hospitals

which are verified as trauma centers by the American College of Surgeons to complete in order to become designated as level I, II, III, or IV trauma centers by the department. This amendment also changes the EMS Bureau to the department.

(1) Participation in Missouri's trauma center program is voluntary and no hospital shall be required to participate. No hospital shall in any way indicate to the public that it is a trauma center unless that hospital has been designated as such by the *[Emergency Medical Services (EMS) Bureau] Department of Health and Senior Services (the department)*. Hospitals desiring trauma center designation shall apply to the *[EMS Bureau] department either through the option outlined in section (2) or section (3)*. Only those hospitals found *[by review]* to be in compliance with the requirements of the rules in this chapter shall be designated by the *[EMS Bureau] department* as trauma centers.

(2) Hospitals requesting to be reviewed and designated as a trauma center by the department shall meet the following requirements:

[(2)](A) The application required for trauma center designation shall be made upon forms prepared or prescribed by the *[EMS Bureau] department* and shall contain information the *[EMS Bureau] department* deems necessary to make a fair determination of eligibility for review and designation in accordance with the rules of this chapter.*[/i];*

[(A)](B) An application shall include the following information: designation level requested; name, address, and telephone number of hospital; name of chief executive officer, chairman/president of board of trustees, surgeon in charge of trauma care, trauma nurse coordinator/program manager, director of emergency medicine, and director of trauma intensive care; number of emergency department trauma caseload, trauma team activations, computerized tomography scan capability, magnetic resonance imaging capability, operating rooms, intensive care unit/critical care unit beds, burn beds, rehabilitation beds, trauma surgeons, neurosurgeons, orthopedists, emergency department physicians, anesthesiologists, certified registered nurse anesthetists, pediatricians, and pediatric surgeons; date of application; and signatures of the chairman/president of board of trustees, hospital chief executive officer, surgeon in charge of trauma, and director of emergency medicine. The trauma center review and designation application form, included herein, is available at the *[EMS Bureau] Health Standards and Licensure (HSL) office* or may be obtained by mailing a written request to Missouri Department of Health and Senior Services, *[EMS Bureau] HSL*, PO Box 570, Jefferson City, MO 65102-0570.*[/i];*

[(B)](C) The *[EMS Bureau] department* shall notify the hospital of any apparent omissions or errors in the completion of the application and shall contact the hospital to arrange a date for the review.*[/i];*

[(C)](D) Failure of a hospital to cooperate in arranging for a mutually suitable date for review shall constitute forfeiture of application when a hospital's initial review is pending or suspension of designation when a hospital's verification or validation review is pending.*[/i];*

[(D)](E) Hospitals designated as trauma centers under the previous designation system shall maintain their designation until a review is conducted using the rules of this chapter.*[/i];*

[(3)](F) The review of hospitals for trauma center designation shall include interviews with designated hospital staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter. The cost of any and all site reviews shall be paid by each applicant hospital or renewing trauma center unless adequate funding is available to the *[EMS Bureau] department* to pay for reviews.*[/i];*

[(A)](G) For the purpose of reviewing trauma centers and hospitals applying for trauma center designation, the *[EMS Bureau] department* shall use review teams consisting of two (2) surgeons and one (1) emergency physician who are experts in trauma care and

one (1) trauma nurse coordinator/trauma program manager experienced in trauma center review. The team shall be disinterested politically and financially in the hospitals to be reviewed. Out-of-state review teams shall conduct levels I and II reviews. In-state reviewers may conduct level III reviews. In the event that out-of-state reviewers are unavailable, level II reviews may be conducted by in-state reviewers from EMS regions other than the region being reviewed with approval of the director of the Department of Health and Senior Services or his/her designee. When utilizing in-state review teams, the level II trauma center shall have the right to refuse one (1) review team.*[/i];*

[(B)](H) Any substantial deficiencies cited in the initial review or the validation review regarding patient care issues, especially those related to delivery of timely surgical intervention, shall require a focused review to be conducted. When deficiencies involve documentation or policy or equipment, the hospital's plan of correction shall be submitted to the *[EMS Bureau] department* and verified by *[EMS Bureau] department* personnel.*[/i];*

[(C)](I) The verification review shall be conducted in the same manner and detail as initial and validation reviews. A review of the physical plant will not be necessary unless a deficiency was cited in the physical plant in the preceding initial or validation review. If deficiencies relate only to a limited number of areas of hospital operations, a focused review shall be conducted. The review team for a focused review shall be comprised of review team members with the required expertise to evaluate corrections in the specified deficiency area.*[/i];*

[(D)](J) Validation reviews shall occur every five (5) years.*[/i]; *[Level I and II trauma centers undergoing American College of Surgeons reverification review at shorter intervals may incorporate EMS Bureau personnel in these reviews and, if they successfully pass reverification and meet all requirements herein, submit that review for EMS Bureau reverification.]**

[(E)](K) Upon completion of a review, the reviewers shall submit a report of their findings to the *[EMS Bureau] department*. *[If this is also an American College of Surgeons (ACS) verification or reverification, the hospital shall request a copy of the report be sent directly to the EMS Bureau from the ACS verification committee.]* The report shall state whether the specific standards for trauma center designation have or have not been met; if not met, in what way they were not met. The report shall include the patient chart audits and a narrative summary to include pre-hospital, hospital, trauma service, emergency department, operating room, recovery room, clinical lab, intensive care unit, blood bank, rehabilitation, performance improvement and patient safety programs, education, outreach, research, chart review, and interviews. The *[EMS Bureau] department* has final authority to determine compliance with the rules of this chapter.*[/i];*

[(F)](L) Within thirty (30) days after receiving a review report, the *[EMS Bureau] department* shall return a copy of the report in whole to the chief executive officer of the hospital reviewed. Included with the report shall be notification indicating that the hospital has met the criteria for trauma center designation or has failed to meet the criteria for the designation level for which it applied and options the hospital may pursue.*[/i];*

[(G)](M) If a verification review is required, the hospital shall be allowed a period of six (6) months to correct deficiencies. A plan of correction form shall be provided to the *[EMS Bureau] department* and shall be completed by the hospital and returned to the *[EMS Bureau] department* within thirty (30) days after notification of review findings.*[/i];*

[(H)](N) Once a review is completed, a final report shall be prepared by the *[EMS Bureau] department*. The final report shall be public record and shall disclose the standards by which the reviews were conducted and whether the standards were met. The reports filed by the reviewers shall be held confidential and shall be disclosed only to the hospital's chief executive officer or an authorized representative.*[/i];*

[(4)](O) The *[EMS Bureau]* department shall have the authority to put on probation, suspend, revoke, or deny trauma center designation if there is reasonable cause to believe that there has been a substantial failure to comply with the requirements of the rules in this chapter. Once designated as a trauma center, a hospital may voluntarily surrender the designation at any time without giving cause, by contacting the *[EMS Bureau]* department. In these cases, the application and review process shall be completed again before the designation may be reinstated./;

[(A)](P) Trauma center designation shall be valid for a period of five (5) years from the date the trauma center is designated. Expiration of the designation shall occur unless the trauma center applies for validation review within this five- (5)-[-] year period. Trauma center designation shall be site specific and not transferable when a trauma center changes location./; and

[(B)](Q) The *[EMS Bureau]* department shall investigate complaints against trauma centers. Failure of the hospital to cooperate in providing documentation and interviews with appropriate staff may result in revocation of trauma center designation. Any hospital, which takes adverse action toward an employee for cooperating with the *[EMS Bureau]* department regarding a complaint, is subject to revocation of trauma center designation.

(3) Hospitals seeking trauma center designation by the department based on their current verification as a trauma center by the American College of Surgeons shall meet the following requirements:

(A) An application for trauma center designation by the department for hospitals that have been verified as a trauma center by the American College of Surgeons shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a determination of eligibility for review and designation in accordance with the rules of this chapter. The application for trauma verified hospital designation form, included herein, is available at the Health Standards and Licensure (HSL) office, or online at the department's website at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for trauma center designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation;

(B) Both sections A and B of the application for trauma verified hospital designation form, included herein, shall be complete before the department designates a hospital/trauma center. The department shall notify the hospital/trauma center of any apparent omissions or errors in the completion of the application for trauma verified hospital designation form. Upon receipt of a completed and approved application, the department shall designate such hospital as follows:

1. The department shall designate a hospital as a level I trauma center if such hospital has been verified as a level I trauma center (adult and pediatric) by the American College of Surgeons;

2. The department shall designate a hospital as a level II trauma center if such hospital has been verified as a level II trauma center (adult and pediatric) by the American College of Surgeons;

3. The department shall designate a hospital as a level III trauma center if such hospital has been verified as a level III trauma center (adult and pediatric) by the American College of Surgeons;

4. The department shall designate a hospital as a level IV trauma center if such hospital has been verified as a level IV trauma center (adult and pediatric) by the American College of Surgeons;

5. The department shall designate a hospital as a level I pediatric trauma center if such hospital has been verified as a level I pediatric trauma center (only treats children) by the American College of Surgeons;

6. The department shall designate a hospital as a level II pediatric trauma center if such hospital has been verified as a level II pediatric trauma center (only treats children) by the American College of Surgeons;

7. The department shall designate a hospital as a level I trauma center if such hospital has been verified as a level I trauma center (only treats adults) by the American College of Surgeons; and

8. The department shall designate a hospital as a level II trauma center if such hospital has been verified as a level II trauma center (only treats adults) by the American College of Surgeons;

(C) Annually from the date of designation by the department submit to the department proof of verification as a trauma center by the American College of Surgeons and the names and contact information of the medical director of the trauma center and the program manager of the trauma center;

(D) Within thirty (30) days of any changes submit to the department proof of verification as a trauma center by the American College of Surgeons and the names and contact information of the medical director of the trauma center and the program manager of the trauma center;

(E) Submit to the department a copy of the verifying organization's final trauma center verification survey results within thirty (30) days of receiving such results;

(F) Submit to the department a completed application for trauma verified hospital designation form every three (3) years;

(G) Participate in the emergency medical services regional system of trauma care in its respective emergency medical services region as defined in 19 CSR 30-40.302;

(H) Participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources;

(I) Submit data to meet the data submission requirements in 19 CSR 30-40.430;

(J) The designation of a hospital as a trauma center pursuant to section (3) shall continue if such hospital retains verification as a trauma center by the American College of Surgeons; and

(K) The department may remove a hospital's designation as a trauma center if requested by the hospital or the department determines that the verification by the American College of Surgeons has been suspended or revoked. The department may also remove a hospital's designation as a trauma center if the department determines the hospital's verification with the American College of Surgeons has expired. Any decision made by the department to withdraw the designation of a trauma center that is based on the revocation or suspension of a verification by the American College of Surgeons shall not be subject to judicial review.

(4) Hospitals that choose to apply to the department under sections (2) and (3) above and maintain a trauma designation with both the department and the American College of Surgeons may request either of the following two (2) options:

(A) Hospitals may choose to apply to the department under section (2) above and meet the requirements in section (2) above and 19 CSR 30-40.410 and 19 CSR 30-40.430. Hospitals may request a separate review by only the department pursuant to section (2). Hospitals may choose to apply to the department under section (3) above and meet the requirements set by the American College of Surgeons. Hospitals may request a separate review by only the American College of Surgeons; or

(B) Hospitals may choose to apply to the department under section (2) above and meet the requirements in section (2) above and 19 CSR 30-40.410 and 19 CSR 30-40.430. Hospitals may

choose to apply to the department under section (3) above and meet the requirements set by the American College of Surgeons. Hospitals may request a joint review by both the American College of Surgeons and the department. In a joint review, department personnel shall be incorporated into these reviews upon the consent of the American College of Surgeons. During these joint reviews, the trauma review team chosen by the American College of Surgeons shall also include at least one (1) emergency department physician and at least one (1) trauma program manager (nurse). All costs for the review and review team shall be paid by the hospitals. If a hospital successfully passes the joint review by the department and the American College of Surgeons, then the hospital will be designated by the department as a trauma center under both sections (2) and (3) above.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION OF HEALTH STANDARDS AND LICENSURE
APPLICATION FOR TRAUMA VERIFIED HOSPITAL DESIGNATION

In accordance with the requirements of Chapter 190, RSMo, and the applicable regulations, this application is hereby submitted for designation as a trauma center. Please complete all information.		Organization's Trauma Identification Number	
CURRENT TRAUMA VERIFICATION ORGANIZATION AND LEVEL			
<p style="text-align: center;">ADULT AND PEDIATRIC (TREATS ADULTS AND CHILDREN)</p> <input type="checkbox"/> Level I Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Trauma Center by the American College of Surgeons <input type="checkbox"/> Level III Trauma Center by the American College of Surgeons <input type="checkbox"/> Level IV Trauma Center by the American College of Surgeons	<p style="text-align: center;">PEDIATRIC (TREATS CHILDREN ONLY)</p> <input type="checkbox"/> Level I Pediatric Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Pediatric Trauma Center by the American College of Surgeons	<p style="text-align: center;">ADULT (TREATS ADULTS ONLY)</p> <input type="checkbox"/> Level I Trauma Center by the American College of Surgeons <input type="checkbox"/> Level II Trauma Center by the American College of Surgeons	
HOSPITAL INFORMATION			
Name of Hospital (Name to Appear on Designation Certificate)		Telephone Number	
Address (Street and Number)	City	Zip Code	
PROFESSIONAL INFORMATION			
Chief Executive Officer		Chairman/President of Board of Trustees	
Trauma Medical Director (Name, email, and contact phone number)		Trauma Program Manager (Name, email, and contact phone number)	
The following should be submitted to the department as indicated:			
<input type="checkbox"/> Proof of trauma verification with the American College of Surgeons with the expiration date of the verification.			
<input type="checkbox"/> Copy of the final trauma survey results from the American College of Surgeons.			
RESOURCE INFORMATION			
E.D. Trauma Caseload	Trauma Team Activations	C.T. Scan Capability	M.R.I. Capability
Operating Rooms	ICU/CCU Beds	Burn Beds	Rehab. Beds
Trauma Surgeons	Neurosurgeons	Orthopaedists	E.D. Physicians
Anesthesiologists	C.R.N.A.s	Pediatricians	Pediatric Surgeons
CERTIFICATION			
We, the undersigned, hereby certify that: A. We will annually and within thirty (30) days of any changes submit to the department proof of trauma verification with the American College of Surgeons. B. We will annually and within thirty (30) days of any changes submit to the department names and contact information of our medical director and the program manager of the trauma center. C. We will submit to the department a copy of our final trauma verification survey results from the American College of Surgeons within thirty (30) days of receiving such results. D. We will participate in the emergency medical services regional system of trauma care in our respective emergency medical services region as defined in 19 CSR 30-40.302. E. We will participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources. F. We will submit data to meet the data submission requirements outlined in 19 CSR 30-40.430. G. We understand that our designation as a trauma center by the department shall continue only if our hospital remains verified as a trauma center by the American College of Surgeons.			
Date of application _____			
Signed _____ Chairman/President of Board of Trustees, Owner, or one Partner of Partnership		Signed _____ Hospital Chief Executive Officer	
Signed _____ Trauma Medical Director		Signed _____ Director of Emergency Medicine	

AUTHORITY: sections 190.176 and 190.185, RSMo [Supp. 2007] 2016, and section 190.241, [HB 1790, 94th General Assembly, Second Regular Session, 2008] RSMo Supp. 2017. Emergency rule filed Aug. 28, 1998, effective Sept. 7, 1998, expired March 5, 1999. Original rule filed Sept. 1, 1998, effective Feb. 28, 1999. Amended: Filed May 19, 2008, effective Jan. 30, 2009. Emergency amendment filed Feb. 2, 2018, effective Feb. 12, 2018, expires Aug. 10, 2018. Amended: Filed Feb. 2, 2018.

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 Dean Linneman, Director, Department of Health and Senior Services, Division of Regulation and Licensure, PO Box 570, Jefferson City, MO 65102. 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 30-40.750 ST-Segment Elevation Myocardial Infarction (STEMI) Center Designation Application and Review. The department is amending and renumbering the rule text; adding a new section (3); and adding the form included after the rule.

PURPOSE: This amendment adds an option and establishes requirements for hospitals which are certified as STEMI centers by the Joint Commission, the American Heart Association, or the American College of Cardiology to become designated as level I, II, or III STEMI centers without being reviewed by DHSS (the department). This amendment also adds an application for these hospitals which are certified as STEMI centers by the Joint Commission, the American Heart Association, or the American College of Cardiology to complete in order to become designated as level I, II, or III STEMI centers by the department. This amendment also adds focus reviews to be conducted after an initial review. Additionally, this amendment prohibits hospitals from holding themselves out as STEMI centers designated by the department until STEMI initial reviews have been completed by the department for those hospitals applying to be reviewed and designated by the department as STEMI centers during the first round of applications. The department will give all hospitals designated as STEMI centers through sections (2) and (3) written approval of the date these hospitals may begin holding themselves out as department designated STEMI centers during the first round of applications.

(1) Participation in Missouri's STEMI center program is voluntary and no hospital shall be required to participate. No hospital shall hold itself out to the public as a state-designated STEMI center unless it is designated as such by the Department of Health and Senior Services (department). Hospitals desiring STEMI center designation shall apply to the department **either through the option outlined in section (2) or section (3)**. Only those hospitals found [by review] to be in compliance with the requirements of the rules of this chapter shall be designated by the department as STEMI centers.

(2) Hospitals requesting to be reviewed and designated as a STEMI center by the department shall meet the following requirements:

(A) An application for STEMI center designation shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a fair determination of eligibility for review and designation in accordance with the rules of this chapter. The STEMI center review and designation application form, included herein, is available at the Health Standards and Licensure (HSL) office, [or] online at the department's website at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for STEMI center designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation[.];

(B) Both sections A and B of the STEMI center review and designation application form, included herein, shall be complete before the department will arrange a date for the review. The department shall notify the hospital/STEMI center of any apparent omissions or errors in the completion of the STEMI center review and designation application form. When the STEMI center review and designation application form is complete, the department shall contact the hospital/STEMI center to arrange a date for the review[.];

(C) The hospital/STEMI center shall cooperate with the department in arranging for a mutually suitable date for any announced reviews[.];

[(2)](D) The different types of site reviews to be conducted on hospitals/STEMI centers seeking STEMI center designation by the department include:

[(A)]1. An initial review shall occur on a hospital applying to be initially designated as a STEMI center. An initial review shall include interviews with designated hospital staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter;

[(B)]2. A validation review shall occur on a designated STEMI center applying for renewal of its designation as a STEMI center. Validation reviews shall occur no less than every three (3) years. A validation review shall include interviews with designated STEMI center staff, a review of the physical plant and equipment, and a review of records and documents as deemed necessary to assure compliance with the requirements of the rules of this chapter; and

[(C)]3. A focus review shall occur on a designated STEMI center in which an initial or validation review was conducted and substantial deficiency(ies) were cited. A review of the physical plant will not be necessary unless a deficiency(ies) was cited in the physical plant in the preceding validation review. The focus review team shall be comprised of a representative from the department and may include a qualified contractor(s) with the required expertise to evaluate corrections in areas where deficiencies were cited[.];

[(3)](E) STEMI center designation shall be valid for a period of three (3) years from the date the STEMI center/hospital is designated.

[(A)]1. STEMI center designation shall be site specific and non-transferable when a STEMI center changes location.

[(B)]2. Once designated as a STEMI center, a STEMI center may voluntarily surrender the designation at any time without giving cause, by contacting the department in writing. In these cases, the application and review process shall be completed again before the designation may be reinstated[.];

[(4)](F) For the purpose of reviewing previously designated STEMI centers and hospitals applying for STEMI center designation, the department shall use review teams consisting of qualified contractors. These review teams shall consist of one (1) STEMI coordinator or STEMI program manager who has experience in STEMI care and one (1) emergency medicine physician experienced in STEMI care. The review team shall also consist of at least one

(1) and no more than two (2) cardiologist(s)/interventional cardiologist(s) who are experts in STEMI care. One (1) representative from the department will also be a participant of the review team. This representative shall coordinate the review with the hospital/STEMI center and the other review team members.

[(A)]1. Any individual interested in becoming a qualified contractor to conduct reviews shall—

[1.A.] Send the department a curriculum vitae (CV) or *[resume] résumé* that includes his or her experience and expertise in STEMI care and whether an individual is in good standing with his or her licensing boards. A qualified contractor shall be in good standing with his or her respective licensing boards;

[2.B.] Provide the department evidence of his or her previous site survey experience (state and/or national designation survey process); and

[3.C.] Submit a list to the department that details any ownership he or she may have in a Missouri hospital(s), whether he or she has been terminated from any Missouri hospital(s), any lawsuits he or she has currently or had in the past with any Missouri hospital(s), and any Missouri hospital(s) for which his or her hospital privileges have been revoked.

[(B)]2. Qualified contractors for the department shall enter into a written agreement with the department indicating, that among other things, they agree to abide by Chapter 190, RSMo, and the rules in this chapter, during the review process*./;*

[(5)](G) Out-of-state review team members shall conduct levels I and II hospital/STEMI center reviews. Review team members are considered out-of-state review team members if they work outside of the state of Missouri. In-state review team members may conduct levels III and IV hospital/STEMI center reviews. Review team members are considered in-state review team members if they work in the state of Missouri. In the event that out-of-state reviewers are unavailable, levels I and II STEMI center reviews may be conducted by in-state reviewers from Emergency Medical Services (EMS) regions as set forth in 19 CSR 30-40.302 other than the region being reviewed with the approval of the director of the department or his/her designee. When utilizing in-state review teams, levels I and II hospital/STEMI centers shall have the right to refuse one (1) in-state review team or certain members from one (1) in-state review team*./;*

[(6)](H) Hospitals/STEMI centers shall be responsible for paying expenses related to the costs of the qualified contractors to review their respective hospitals/STEMI center during initial, validation, and focus reviews. The department shall be responsible for paying the expenses of its representative. Costs of the review to be paid by the hospital/STEMI center include:

[(A)]1. An honorarium shall be paid to each qualified contractor of the review team. Qualified contractors of the review team for level I and II STEMI center reviews shall be paid six hundred dollars (\$600) for the day of travel per reviewer and eight hundred fifty dollars (\$850) for the day of the review per reviewer. Qualified contractors of the review team for level III and IV STEMI center reviews shall be paid five hundred dollars (\$500) for the day of travel per reviewer and five hundred dollars (\$500) for the day of the review per reviewer. This honorarium shall be paid to each qualified contractor of the review team at the time the site survey begins;

[(B)]2. Airfare shall be paid for each qualified contractor of the review team, if applicable;

[(C)]3. Lodging shall be paid for each qualified contractor of the review team. The hospital/STEMI center shall secure the appropriate number of hotel rooms for the qualified contractors and pay the hotel directly; and

[(D)]4. Incidental expenses, if applicable, for each qualified contractor of the review team shall not exceed two hundred fifty dollars (\$250) and may include the following:

[1.A.] Airport parking;

[2.B.] Checking bag charges;

[3.C.] Meals during the review; and

[4.D.] Mileage to and from the review if no airfare was

charged by the reviewer. Mileage shall be paid at the federal mileage rate for business miles as set by the Internal Revenue Service (IRS). Federal mileage rates can be found at the website www.irs.gov/*./;*

[(7)](I) Upon completion of a review, the qualified contractors from the review team shall submit a report of their findings to the department. This report shall state whether the specific standards for STEMI center designation have or have not been met and if not met, in what way they were not met. This report shall detail the hospital/STEMI center's strengths, weaknesses, deficiencies, and recommendations for areas of improvement. This report shall also include findings from patient chart audits and a narrative summary of the following areas: prehospital, hospital, STEMI service, emergency department, operating room, angiography suites, recovery room, clinical lab, intensive care unit, rehabilitation, performance improvement and patient safety programs, education, outreach, research, chart review, and interviews. The department shall have the final authority to determine compliance with the rules of this chapter*./;*

[(8)](J) The department shall return a copy of the report to the chief executive officer, the STEMI medical director, and the STEMI program manager/coordinator of the hospital/STEMI center reviewed. Included within the report shall be notification indicating whether the hospital/STEMI center has met the criteria for STEMI center designation or has failed to meet the criteria for STEMI center designation as requested. Also, if a focus review of the STEMI center is required, the time frame for this focus review will be shared with the chief executive officer, the STEMI medical director, and the STEMI program manager/coordinator of the STEMI center reviewed*./;*

[(9)](K) When the hospital/STEMI center is found to have deficiencies, the hospital/STEMI center shall submit a plan of correction to the department. The plan of correction shall include identified deficiencies, actions to be taken to correct deficiencies, time frame in which the deficiencies are expected to be resolved, and the person responsible for the actions to resolve the deficiencies. A plan of correction form shall be completed by the hospital and returned to the department within thirty (30) days after notification of review findings and designation. If a focus review is required, the STEMI center shall be allowed a minimum period of six (6) months to correct deficiencies*./;*

(L) No hospital shall hold itself out as a STEMI center designated by the department until given written approval by the department. The department shall give written approval to the hospitals to begin holding themselves out as designated STEMI centers by the department after all initial STEMI reviews have been completed for those hospitals which applied for STEMI review and designation with the department during the first round of applications and the time for plans of corrections have expired;

[(10)](M) A STEMI center shall make the department aware in writing within thirty (30) days if there are any changes in the STEMI center's name, address, contact information, chief executive officer, STEMI medical director, or STEMI program manager/coordinator*./;*

[(11)](N) Any person aggrieved by an action of the department affecting the STEMI center designation pursuant to Chapter 190, RSMo, including the revocation, the suspension, or the granting of, refusal to grant, or failure to renew a designation, may seek a determination by the Administrative Hearing Commission under Chapter 621, RSMo. It shall not be a condition to such determination that the person aggrieved seek reconsideration, a rehearing, or exhaust any other procedure within the department*./;* **and**

[(12)](O) The department may deny, place on probation, suspend, or revoke such designation in any case in which it has reasonable cause to believe that there has been a substantial failure to comply with the provisions of Chapter 190, RSMo, or any rules or regulations promulgated pursuant to this chapter. If the department has reasonable cause to believe that a hospital is not in compliance with such provisions or regulations, it may conduct additional announced

or unannounced site reviews of the hospital to verify compliance. If a STEMI center fails two (2) consecutive on-site reviews because of substantial noncompliance with standards prescribed by sections 190.001 to 190.245, RSMo, or rules adopted by the department pursuant to sections 190.001 to 190.245, RSMo, its center designation shall be revoked.

(3) Hospitals seeking STEMI center designation by the department based on their current certification as a STEMI center by the Joint Commission, American Heart Association, or American College of Cardiology shall meet the following requirements:

(A) An application for STEMI center designation by the department for hospitals that have been certified as a STEMI/chest pain center by the Joint Commission, American Heart Association, or American College of Cardiology shall be made upon forms prepared or prescribed by the department and shall contain information the department deems necessary to make a determination of eligibility for review and designation in accordance with the rules of this chapter. The application for STEMI certified hospital designation form, included herein, is available at the Health Standards and Licensure (HSL) office, or online at the department's website at www.health.mo.gov, or may be obtained by mailing a written request to the Missouri Department of Health and Senior Services, HSL, PO Box 570, Jefferson City, MO 65102-0570. The application for STEMI center designation shall be submitted to the department no less than sixty (60) days and no more than one hundred twenty (120) days prior to the desired date of the initial designation or expiration of the current designation;

(B) Both sections A and B of the application for STEMI certified hospital designation form, included herein, shall be complete before the department designates a hospital/STEMI center. The department shall notify the hospital/STEMI center of any apparent omissions or errors in the completion of the application for STEMI certified hospital designation form. Upon receipt of a completed and approved application, the department shall designate such hospital as follows:

1. The department shall designate a hospital as a level I STEMI center if such hospital has been certified as a comprehensive cardiac center by the Joint Commission;

2. The department shall designate a hospital as a level II STEMI center if such hospital has been certified as any of the following:

A. Mission lifeline Percutaneous Coronary Intervention (PCI)/STEMI receiving center by the American Heart Association;

B. Chest pain center with PCI center by the American College of Cardiology; or

C. Chest pain with PCI and resuscitation center by the American College of Cardiology;

3. The department shall designate a hospital as a level III STEMI center if such hospital has been certified as any of the following:

A. Mission lifeline non/PCI STEMI referral center by the American Heart Association;

B. Chest pain center by the Joint Commission;

C. Primary Acute Myocardial Infarction (AMI) center by the Joint Commission; or

D. Chest pain center by the American College of Cardiology;

(C) No hospital shall hold itself out as a STEMI center designated by the department until given written approval by the department. The department shall give written approval to the hospitals to begin holding themselves out as designated STEMI centers by the department after all initial STEMI reviews have been completed for those hospitals which applied for STEMI review and designation with the department during the first round of applications and the time for plans of corrections have expired. This does not prohibit the hospitals from holding them-

selves out as certified STEMI/chest pain centers by the Joint Commission, the American Heart Association, or the American College of Cardiology;

(D) Annually from the date of designation by the department submit to the department proof of certification as a STEMI/chest pain center by the Joint Commission, the American Heart Association, or the American College of Cardiology and the names and contact information of the medical director of the STEMI/chest pain center and the program manager of the STEMI chest pain center;

(E) Within thirty (30) days of any changes submit to the department proof of certification as a STEMI/chest pain center by the Joint Commission, the American Heart Association, or the American College of Cardiology and the names and contact information of the medical director of the STEMI/chest pain center and the program manager of the STEMI chest pain center;

(F) Submit to the department a copy of the certifying organization's final STEMI/chest pain center certification survey results within thirty (30) days of receiving such results;

(G) Submit to the department a completed application for STEMI certified hospital designation form every three (3) years;

(H) Participate in the emergency medical services regional system of STEMI care in its respective emergency medical services region as defined in 19 CSR 30-40.302;

(I) Any hospital designated as a level III STEMI center that is certified by the Joint Commission, the American Heart Association, or the American College of Cardiology shall have a formal agreement with a level I or level II STEMI center designated by the department for physician consultative services for evaluation of STEMI patients;

(J) Participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources;

(K) Submit data to meet the data submission requirements in section 190.241, RSMo, and 19 CSR 30-40.760;

(L) The designation of a hospital as a STEMI center pursuant to section (3) shall continue if such hospital retains certification as a STEMI center by the Joint Commission, the American Heart Association, or the American College of Cardiology; and

(M) The department may remove a hospital's designation as a STEMI center if requested by the hospital or the department determines that the Joint Commission, the American Heart Association, or American College of Cardiology certification has been suspended or revoked. The department may also remove a hospital's designation as a STEMI center if the department determines the hospital's certification with the Joint Commission, the American Heart Association, or American College of Cardiology has expired. Any decision made by the department to withdraw the designation of a STEMI center that is based on the revocation or suspension of a certification by the Joint Commission, the American Heart Association, or the American College of Cardiology shall not be subject to judicial review.



**MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION OF HEALTH STANDARDS AND LICENSURE
APPLICATION FOR ST-ELEVATION MYOCARDIAL INFARCTION (STEMI)
CERTIFIED HOSPITAL DESIGNATION**

SECTION A		
In accordance with the requirements of Chapter 190, RSMo, and the applicable regulations, this application is hereby submitted for designation as a STEMI center. Please complete all information.	Organization's STEMI Identification Number _____	
Current STEMI Certification Organization and Level		
<p align="center">LEVEL I</p> <input type="checkbox"/> Joint Commission, Comprehensive Cardiac Center	<p align="center">LEVEL II</p> <input type="checkbox"/> American Heart Association, Mission Lifeline Percutaneous Coronary Intervention (PCI)/ STEMI Receiving Center <input type="checkbox"/> American College of Cardiology, Chest Pain with PCI Center <input type="checkbox"/> American College of Cardiology, Chest Pain with PCI and Resuscitation Center	<p align="center">LEVEL III</p> <input type="checkbox"/> American Heart Association, Mission Lifeline Non/PCI STEMI Referral Center <input type="checkbox"/> Joint Commission, Chest Pain Center <input type="checkbox"/> Joint Commission, Primary Acute Myocardial Infarction (AMI) Center <input type="checkbox"/> American College of Cardiology, Chest Pain Center
HOSPITAL INFORMATION		
Name of Hospital (Name to Appear on Designation Certificate) _____		
Telephone Number _____		
Address (Street and Number) _____	City _____ Zip Code _____	
PROFESSIONAL INFORMATION		
Chief Executive Officer _____	Chairman/President of Board of Trustees _____	
STEMI Medical Director (Name, email, and contact phone number) _____	STEMI Program Manager (Name, email, and contact phone number) _____	
Section B		
The following should be submitted to the department as indicated:		
<input type="checkbox"/> Proof of STEMI certification with the Joint Commission, American Heart Association or American College of Cardiology with the expiration date of the certification. <input type="checkbox"/> Copy of the final STEMI survey results from the Joint Commission, American Heart Association or American College of Cardiology.		
If applying for Level III STEMI Center designation, the following should be submitted to the Department:		
<input type="checkbox"/> Formal agreement with Level I or Level II STEMI center for physician consultative services for evaluation of STEMI patients.		
CERTIFICATION		
We, the undersigned, hereby certify that: A. We will annually and within thirty (30) days of any changes submit to the department proof of STEMI certification with the Joint Commission, American Heart Association or American College of Cardiology. B. We will annually and within thirty (30) days of any changes submit to the department names and contact information of our medical director and the program manager of the STEMI center. C. We will submit to the department a copy of our final STEMI certification survey results from the Joint Commission, American Heart Association or American College of Cardiology within thirty (30) days of receiving such results. D. We will participate in the emergency medical services regional system of STEMI care in our respective emergency medical services region as defined in 19 CSR 30-40.302. E. We will participate in local and regional emergency medical services systems by reviewing and sharing outcome data and providing training and clinical educational resources. F. We will submit data to meet the data submission requirements outlined in section 190.241, RSMo, and 19 CSR 30-40.760. G. We understand that our designation as a STEMI center by the department shall continue only if our hospital remains certified as a STEMI center by the Joint Commission, American Heart Association or American College of Cardiology.		
Date of application _____		
Signed _____ Chairman/President of Board of Trustees, Owner, or one Partner of Partnership	Signed _____ Hospital Chief Executive Officer	
Signed _____ STEMI Medical Director	Signed _____ Director of Emergency Medicine	

AUTHORITY: [section 192.006, RSMo 2000, and] sections 190.185 and 192.006, RSMo 2016, and section 190.241, RSMo Supp. [2012] 2017. Original rule filed Nov. 15, 2012, effective June 30, 2013. Emergency amendment filed Feb. 2, 2018, effective Feb. 12, 2018, expires Aug. 10, 2018. Amended: Filed Feb. 2, 2018.

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 Dean Linneman, Director, Department of Health and Senior Services, Division of Regulation and Licensure, PO Box 570, Jefferson City, MO 65102. 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.

anticipated that the costs will recur for the life of the rule, may vary with inflation, and are expected to increase at the rate projected by the Legislative Oversight Committee.

PRIVATE COST: This proposed amendment will save private entities approximately one hundred ninety-two thousand five hundred dollars (\$192,500) from September 1, 2018 to August 31, 2020. In addition, the proposed amendment will cost private entities approximately one hundred dollars (\$100) biennially for the life of the rule.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Dental Board, PO Box 1367, Jefferson City, MO 65102, by facsimile at (573) 751-8216, or via email at dental@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.

**Title 20—DEPARTMENT OF INSURANCE,
FINANCIAL INSTITUTIONS AND PROFESSIONAL
REGISTRATION
Division 2110—Missouri Dental Board
Chapter 2—General Rules**

PROPOSED AMENDMENT

20 CSR 2110-2.170 Fees. The board is amending subsections (1)(C) and (1)(D) and section (3).

PURPOSE: The rule is being amended for a one- (1-) time reduction in renewal fees and creates a late renewal fee for limited teaching licenses.

(1) The following fees are established by the Missouri Dental Board:

(C) Biennial License Renewal Fee	
1. Dentist License	\$150
A. Effective September 1, 2018 to August 31, 2020	\$100
2. Dental Specialist License	\$150
A. Effective September 1, 2018 to August 31, 2020	\$100
3. Dental Hygienist License	\$ 60
4. Limited Teaching License	\$250
(D) Renewal Penalty Fee—Dentist/Dental Specialist/Dental Hygienist/ Limited Teaching License	\$100

(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: section 332.031, RSMo [2000] 2016. This rule originally filed as 4 CSR 110-2.170. Emergency rule filed June 30, 1981, effective July 9, 1981, expired Nov. 6, 1981. Original rule filed June 30, 1981, effective Oct. 11, 1981. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Feb. 2, 2018.

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions approximately one hundred ninety-two thousand five hundred dollars (\$192,500) from September 1, 2018 to August 31, 2020. Effective September 1, 2020, the renewal fee will revert to its original cost, and the additional costs will end. It is

PUBLIC FISCAL NOTE

I. RULE NUMBER

Title 20 -Department of Insurance, Financial Institutions and Professional Registration
 Division 2110 - Missouri Dental Board
 Chapter 2 - General Rules
 Proposed Amendment to 20 CSR 2110-2.170 - Fees

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Loss of Revenue	
Missouri Dental Board	\$192,500	
	Total Loss of Revenue for September 1, 2018, to August 31, 2020	\$192,500

Affected Agency or Political Subdivision	Estimated Increase of Revenue	
Missouri Dental Board	\$100	
	Estimated Increased Revenue Beginning in FY19 and Continuing Biennially for the Life of the Rule	\$100

III. WORKSHEET

See Private Entity Fiscal Note

IV. ASSUMPTION

1. The total loss of revenue is based on the cost savings to private entities reflected in the Private Fiscal Note filed with this rule.
2. The board utilizes a rolling five-year financial analysis process to evaluate its fund balance, establish fee structure, and assess budgetary needs. The five-year analysis is based on the projected revenue, expenses, and number of licensees. Based on the board's recent five-year analysis, the board voted on a reduction in individual biennial renewal fees for dentist, dental specialist and dental hygienist.

PRIVATE FISCAL NOTE

I. RULE NUMBER

**Title 20 -Department of Insurance, Financial Institutions and Professional Registration
Division 2110 - Missouri Dental Board
Chapter 2 - General Rules
Proposed Amendment to 20 CSR 2110-2.170 - Fees**

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated savings for the life of the rule by affected entities:
3,200	Biennial Renewal Fee (Dentist) (Renewal Fee Decrease @ \$50)	\$160,000
650	Biennial Renewal Fee (Dental Specialist) (Renewal Fee Decrease @ \$50)	\$32,500
	Estimated Total Cost Savings for September 1, 2018, to August 31, 2020	\$192,500

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated cost for the life of the rule by affected entities:
1	Limited Teaching License (Renewal Penalty Fee @ \$100)	\$100
	Estimated Cost of Compliance Beginning in FY19 and Continuing Biennially for the Life of the Rule	\$100

III. WORKSHEET

See Table Above

IV. ASSUMPTION

1. The above figures are based on FY 2019 projections.
2. Individual dentist and dental specialist renew biennially. This fiscal note shows the number expected to renew biennially.
3. It is anticipated that the total fiscal savings will occur beginning in FY2019, may vary with inflation, and is expected to increase at the rate projected by the Legislative Oversight Committee.