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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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SECRETARY OF STATE

JOHN R. ASHCROFT

Administrative Rules Division

James C. Kirkpatrick State Information Center
600 W. Main
Jefferson City, MO 65101
(573) 751-4015

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•

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•

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December 2, 2019 December 16, 2019	January 2, 2020 January 15, 2020	January 30, 2020 January 30, 2020	February 29, 2020 February 29, 2020

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 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 sos.mo.gov/adrules/csr/csr

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

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

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

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

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

**Title 20—DEPARTMENT OF COMMERCE AND
INSURANCE
Division 2220—State Board of Pharmacy
Chapter 2—General Rules**

EMERGENCY RULE

20 CSR 2220-2.995 Board Approved Pilot and Research Projects

PURPOSE: This rule establishes application requirements and criteria for pilot projects authorized by section 338.143, RSMo.

EMERGENCY STATEMENT: Section 338.143, RSMo, was enacted in 2019 which granted the board authority to approve and establish requirements for pharmacy pilot or demonstration research projects related to technology assisted verification or remote medication dispensing that are designed to enhance patient care or safety, improve patient outcomes, or expand access to pharmacy services. Pursuant to section 338.143.4, RSMo, the board is required to submit a report to the General Assembly on related data or findings on or before December 31, 2022. The proposed emergency rule would establish requirements and criteria for potential pilot and demonstration projects to ensure patient safety and appropriate oversight. An early effective date is needed to allow potential participants to establish, apply for, operate, analyze, and report on research findings in sufficient time to allow the board to provide the legislatively mandated report by December 31, 2022. As a result, the Missouri State Board of Pharmacy finds the proposed rule is necessary to preserve a com-

... pelling governmental interest in that an early rule effective date is required to comply with the General Assembly's mandate to implement and report on project findings prior to December 31, 2022. Absent emergency action, the board and approved participants will be unable to meet the legislatively required deadlines prior to statutory expiration. A proposed rule which covers the same material is published in this issue of the Missouri Register. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the Missouri and United States Constitutions. The Missouri State Board of Pharmacy believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed September 13, 2019, becomes effective September 27, 2019, and expires March 24, 2020.

(1) This rule establishes requirements for the approval and operation of pharmacy pilot or demonstration research projects related to technology assisted verification or remote medication dispensing that are designed to enhance patient care or safety, improve patient outcomes, or expand access to pharmacy services, as authorized by section 338.143, RSMo.

(2) Applicants to operate a pilot program pursuant to this rule shall file an application on a form provided by the board. To be eligible, the applicant must hold a current and active license, registration, or permit from the board that is not under discipline.

(3) Proposal Requirements. Proposed pilot projects must be submitted to the board in writing and include-

(A) A one (1) page abstract of the project that includes the project's goals, purpose, scope, and proposed timelines;

(B) A narrative description of the following:

1. Activities that will be undertaken as part of the pilot project, including, the intended audience;

2. The goals and objectives of the project. Services and anticipated outcomes must be clearly described and align with section 338.143, RSMo;

3. A description of the capacity and structure the institution has in place to operate the proposed pilot program, including, staff and personnel who will be monitoring, supervising or participating in the pilot project and their relevant education, experience, or qualifications;

4. Procedures for training staff on project operations;

5. An explanation of how the proposal will enhance patient care or safety, improve patient outcomes, or expand access to pharmacy services for Missouri citizens;

6. A projected timeline for implementation and completion of the proposed pilot project. The proposed pilot project must be eligible for completion within eighteen (18) months of approval, unless otherwise authorized by the board;

7. Evaluation measures for assessing impact and effectiveness; and

8. A plan for pilot project termination.

(4) Pilot Projects shall be awarded at the discretion of the board with due consideration to public protection, patient safety, feasibility, the needs of the state, and the impact on pharmacy practice. Approved pilot projects shall report on program activities, as requested by the board. Approval of a pilot project may be withdrawn or rescinded by the board for the following:

(A) Any grounds authorized for discipline under section 338.055.2, RSMo;

(B) Failure to report on project operations, as requested by the board;

(C) To prevent or avoid patient harm or undue patient risk;

(D) To protect the public health, safety, or welfare; or

(E) Exceeding/Failure to comply with approved project guidelines. Deviations from approved pilot project operations must be reported to the board within five (5) business days.

*AUTHORITY: sections 338.140 and 338.143, RSMo Supp. 2019. Emergency rule filed Sept. 13, 2019, effective Sept. 27, 2019, expires March 24, 2020. A proposed rule covering this same material is published in this issue of the **Missouri Register**.*

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

PRIVATE COST: This emergency rule will cost private entities three thousand thirty-two dollars (\$3,032) in the time the emergency is effective.

**FISCAL NOTE
 PRIVATE COST**

I. Department Title: Department of Commerce and Insurance
Division Title: State Board of Pharmacy
Chapter Title: General Rules

Rule Number and Title:	20 CSR 2220-2.995 Board Approved Pilot and Research Projects
Type of Rulemaking:	Emergency Rule

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:
10	Entities applying to operate a pilot or research project pursuant to § 338.143	\$ 3,032 <i>(in the time the emergency is effective)</i>

III. ASSUMPTIONS/WORKSHEETS

The following general estimations were used to calculate private fiscal costs:

1. Section 338.143, RSMo, authorizes the Board to approve pilot or demonstration research projects to enhance patient safety, increase patient outcomes, or expand access to pharmacy services. Based on communication with other states and potential project operators, the Board estimates approximately ten (10) entities may apply to operate a pilot or demonstration research project authorized by section 338.143.
2. Participation in a pilot/demonstration research project is voluntary and project parameters would be established by approved participants. However, the Board estimates it will take a pharmacist/researcher approximately five (5) hours to complete the descriptive narrative required to apply for Board approval.
3. An hourly pharmacist/researcher salary of \$ 60.64 was estimated based on data reflected in the currently available United States Department of Labor, Bureau of Labor Statistics Occupational Outlook Handbook. As a result, the Board estimates a total cost of \$ 3,032 over the life of the rule (10 applicants x \$60.64 pharmacist hourly wage x 5 hours per descriptive narrative preparation).

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

EXECUTIVE ORDER

19-16

WHEREAS, the State of Missouri is committed to developing and maintaining a talented public workforce that reflects the rich diversity of the citizens of the State; and

WHEREAS, it is the policy of the State of Missouri to support and encourage individuals with disabilities to fully participate in the community and economic life of Missouri and engage in competitive integrated employment; and

WHEREAS, 79.8% of working-age people without a disability are employed, while only 37.1% of working-age people with a disability are employed; and

WHEREAS, the percentage of individuals with disabilities living in poverty in Missouri is 15.5% higher than the percentage of individuals without disabilities who are living in poverty; and

WHEREAS, the economic impact of unemployment and pay disparities between people with disabilities and those without disabilities results in forgone state tax revenue; and

WHEREAS, expanding job opportunities for people with disabilities saves federal and state government money by reducing dependency on cash and medical disability-related benefits; and

WHEREAS, the State of Missouri is committed to reducing discrimination, eliminating barriers to employment, and attracting talented candidates into state employment; and

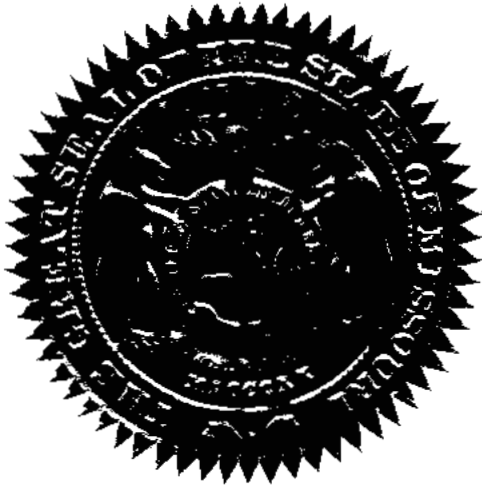
WHEREAS, to be competitive in the global economy, the State of Missouri must use the talents and important contributions of all workers, including individuals with disabilities; and

WHEREAS, the State of Missouri, as the state's largest employer, can serve as a model for the employment of individuals with disabilities through improved recruitment, hiring, and retention strategies:

NOW THEREFORE, I, MICHAEL L. PARSON, GOVERNOR OF THE STATE OF MISSOURI, by virtue of the authority vested in me by the Constitution and laws of the State of Missouri, do hereby order the commencement of the Missouri as a Model Employer initiative and direct:

1. The State of Missouri shall make best efforts to eliminate the disparity in the percentage of individuals with disabilities of working age in the population and the percentage of employees with disabilities in the State workforce, and set annual goals for continuing to increase the percentage of individuals with disabilities in the State workforce.
2. The Office of Administration shall, on an annual basis, collect data, based on voluntary self-disclosure, and report initial baseline numbers of state employees with disabilities. The Office of Administration shall report and evaluate the State's progress in increasing the percentage of employees with disabilities in the State workforce.

3. The Office of Administration, Division of Personnel, shall identify and designate a State Disability Employment Coordinator or Coordinators, who shall be responsible for advising all state agencies on disability policy and compliance with state and federal disability rights laws, collaborating with and supporting all state agencies concerning recruitment, hiring, and retention of employees with disabilities, and training of state employees and managers on disability-related issues.
4. Each state agency shall utilize best efforts, with the support of the State Disability Employment Coordinator or Coordinators, to recruit, hire, retain, and promote career advancement of individuals with disabilities, and to adopt best practices and strategies that will promote the recruitment, hiring, and retention of employees with the most significant disabilities including the use of supported employment, individual placement with support services, customized employment, internships, and job shadowing.
5. The Office of Administration and the State Disability Employment Coordinator or Coordinators shall ensure that all state employees participate in initial and periodic disability awareness training to build and sustain a culture of inclusion in the workplace which will include discussion of rights to reasonable accommodation in the workplace.
7. The Office of Administration and the State Disability Employment Coordinator or Coordinators shall work with each state agency to ensure that human resources and hiring managers are provided training in disability rights, hiring, and workplace policies, and best practices that promote a diverse and inclusive workforce.
8. The Office of Administration shall ensure that the State's web-based hiring portal is accessible for applicants with disabilities.
9. The director or commissioner of each state agency shall, within 30 days of this order, designate an employee or employees who will be responsible for overseeing the development, implementation, monitoring, and evaluation of strategies to recruit, hire, retain, and promote career advancement of people with disabilities, and who will serve as a contact person for Missouri Rehabilitation Services and other organizations that represent job seekers with disabilities.
10. Each agency's disability contact shall make best efforts to utilize the resources, services, and funding available through Missouri Rehabilitation Services and the Missouri Department of Higher Education and Workforce Development for work-based learning experiences, internships, and trainings for high school and college students with disabilities including youth with significant disabilities.
12. This executive order shall not be construed to require any state employee or candidate for state employment to disclose disability status involuntarily. This order shall not create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the State of Missouri, its departments, agencies, or entities, its officers, employees or agents, or any other person.



IN WITNESS 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, on this 9th day of September, 2019.

A handwritten signature in cursive script, reading "Michael L. Parson", written over a horizontal line.

Michael L. Parson
Governor

ATTEST:

A handwritten signature in cursive script, reading "John R. Ashcroft", written over a horizontal line.

John R. Ashcroft
Secretary of State

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 symbology under the heading of proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules 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.

Proposed Amendment Text Reminder:
Boldface text indicates new matter.

[Bracketed text indicates matter being deleted.]

**Title 12—DEPARTMENT OF REVENUE
Division 30—State Tax Commission
Chapter 3—Local Assessment of Property and
Appeals from Local Boards of Equalization**

PROPOSED RULE

12 CSR 30-3.030 Discovery

PURPOSE: This rule establishes the methods to be used by a party to a proceeding before the commission to obtain discovery and enforcement of discovery.

(1) Parties may obtain all available discovery in the same manner as the Missouri Supreme Court rules provide for civil actions in circuit court. The Commission and its Hearing Officers may, by order, enforce discovery for cause shown by the same methods, terms and conditions as provided by the Missouri Supreme Court rule in civil

actions in the circuit court, except as may otherwise be required by law.

AUTHORITY: sections 138.430 and 536.073, RSMo 2016 and Article X, section 14, Mo. Const. 1945. Original rule filed Sept. 12, 2019.

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

PRIVATE COST: The 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 Administrative Secretary, State Tax Commission of Missouri, PO Box 146, Jefferson City, MO 65102-0146. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 40—Family Support Division
Chapter 2—Income Maintenance**

PROPOSED AMENDMENT

13 CSR 40-2.050 Definition of Earned Income. The department is amending section (1) to remove the Temporary Assistance program from the list of programs governed by this rule.

PURPOSE: This amendment removes the Temporary Assistance program from the rule, since that program has its own definition of earned income under 13 CSR 40-2.310(4).

(1) In applying the earned income exemptions, as stated in section 209.240, RSMo, to an applicant for, or a recipient of, Supplemental Aid to the Blind and as stated in section 208.010, RSMo for an applicant for or recipient of MO HealthNet for the Aged, Blind, and Disabled (MHABD) *[or an applicant or recipient of Temporary Assistance for Needy Families (TANF)]*, the following definition of earned income will be used:

AUTHORITY: sections 207.022 and 660.017, RSMo 2016. Original rule filed Sept. 26, 1951, effective Oct. 6, 1951. For intervening history, please consult the Code of State Regulations. Amended: Filed Sept. 6, 2019.

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

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

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

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 40—Family Support Division
Chapter 2—Income Maintenance

PROPOSED RESCISSION

13 CSR 40-2.070 Definitions Relating to General Relief. This rule established the definition of “employable” and “unemployable” for purposes of qualifying for the General Relief program.

PURPOSE: This rule is being rescinded because funding for the General Relief cash assistance program has not existed since 2004, and medical assistance for the program was repealed in 2005 (Senate Bill 539). This rule no longer applies to any other program being administered by the Family Support Division.

AUTHORITY: sections 207.020, RSMo 1986. Filing dates for original rules are shown in the text of the rule. This version filed March 24, 1976. For intervening history, please consult the Code of State Regulations. Rescinded: Filed Sept. 6, 2019.

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

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

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

Title 20—DEPARTMENT OF COMMERCE AND
INSURANCE
Division 2220—State Board of Pharmacy
Chapter 2—General Rules

PROPOSED RULE

20 CSR 2220-2.995 Board Approved Pilot and Research Projects

PURPOSE: This rule establishes application requirements and criteria for pilot projects authorized by section 338.143, RSMo.

(1) This rule establishes requirements for the approval and operation of pharmacy pilot or demonstration research projects related to technology assisted verification or remote medication dispensing that are designed to enhance patient care or safety, improve patient outcomes, or expand access to pharmacy services, as authorized by section 338.143, RSMo.

(2) Applicants to operate a pilot program pursuant to this rule shall file an application on a form provided by the board. To be eligible, the applicant must hold a current and active license, registration, or permit from the board that is not under discipline.

(3) Proposal Requirements. Proposed pilot projects must be submitted to the board in writing and include—

(A) A one (1) page abstract of the project that includes the project’s goals, purpose, scope, and proposed timelines;

(B) A narrative description of the following:

1. Activities that will be undertaken as part of the pilot project, including, the intended audience;

2. The goals and objectives of the project. Services and anticipated outcomes must be clearly described and align with section 338.143, RSMo;

3. A description of the capacity and structure the institution has in place to operate the proposed pilot program, including, staff and personnel who will be monitoring, supervising, or participating in the pilot project and their relevant education, experience, or qualifications;

4. Procedures for training staff on project operations;

5. An explanation of how the proposal will enhance patient care or safety, improve patient outcomes, or expand access to pharmacy services for Missouri citizens;

6. A projected timeline for implementation and completion of the proposed pilot project. The proposed pilot project must be eligible for completion within eighteen (18) months of approval, unless otherwise authorized by the board;

7. Evaluation measures for assessing impact and effectiveness; and

8. A plan for pilot project termination.

(4) Pilot Projects shall be awarded at the discretion of the board with due consideration to public protection, patient safety, feasibility, the needs of the state, and the impact on pharmacy practice. Approved pilot projects shall report on program activities, as requested by the board. Approval of a pilot project may be withdrawn or rescinded by the board for the following:

(A) Any grounds authorized for discipline under section 338.055.2, RSMo;

(B) Failure to report on project operations, as requested by the board;

(C) To prevent or avoid patient harm or undue patient risk;

(D) To protect the public health, safety, or welfare; or

(E) Exceeding/Failure to comply with approved project guidelines. Deviations from approved pilot project operations must be reported to the board within five (5) business days.

AUTHORITY: sections 338.140 and 338.143, RSMo Supp. 2019. Emergency rule filed Sept. 13, 2019, effective Sept. 27, 2019, expires March 24, 2020. Original rule filed Sept. 13, 2019.

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 cost private entities approximately three thousand thirty-two dollars (\$3,032) in the aggregate over the life of the rule.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Board of Pharmacy, PO Box 625, 3605 Missouri Boulevard, Jefferson City, MO 65102, by facsimile at (573) 526-3464, or via email at pharmacy@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this rule in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
 PRIVATE COST**

I. Department Title: Department of Commerce and Insurance
Division Title: State Board of Pharmacy
Chapter Title: General Rules

Rule Number and Title:	20 CSR 2220-2.995 Board Approved Pilot and Research Projects
Type of Rulemaking:	Proposed Rule

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:
10	Entities applying to operate a pilot or research project pursuant to § 338.143	\$ 3,032 <i>(recurring over the life of the rule)</i>

III. ASSUMPTIONS/WORKSHEETS

The following general estimations were used to calculate private fiscal costs:

1. Section 338.143, RSMo, authorizes the Board to approve pilot or demonstration research projects to enhance patient safety, increase patient outcomes, or expand access to pharmacy services. Based on communication with other states and potential project operators, the Board estimates approximately ten (10) entities may apply to operate a pilot or demonstration research project authorized by section 338.143.
2. Participation in a pilot/demonstration research project is voluntary and project parameters would be established by approved participants. However, the Board estimates it will take a pharmacist/researcher approximately five (5) hours to complete the descriptive narrative required to apply for Board approval.
3. An hourly pharmacist/researcher salary of \$ 60.64 was estimated based on data reflected in the currently available United States Department of Labor, Bureau of Labor Statistics Occupational Outlook Handbook. As a result, the Board estimates a total cost of \$ 3,032 over the life of the rule (10 applicants x \$60.64 pharmacist hourly wage x 5 hours per descriptive narrative preparation).

Title 20—DEPARTMENT OF COMMERCE AND INSURANCE
Division 2233—State Committee of Marital and Family Therapists
Chapter 1—General Rules
PROPOSED AMENDMENT

20 CSR 2233-1.010 Committee Information—General Organization. The committee is deleting sections (1), (4), and (5), renumbering as necessary and amending the remaining sections.

PURPOSE: This amendment clarifies state committee organization and administrative duties.

[(1) The purpose of the state committee is to advise the division on the regulation of the practice of marital and family therapy concerning the health, safety, and welfare of the inhabitants of this state; to protect the inhabitants of this state from harm through the dangerous, dishonest, incompetent, or the unlawful practice of marital and family therapy and to assist the division in implementing and sustaining a system for the examination and regulation of licensed marital and family therapists, provisional licensed marital and family therapists, and supervised marital and family therapists (S-MFT).]

[(2)](1) The state committee [shall] will meet at least once a year and as frequently as the business of the division and state committee requires. Annually the state committee shall and annually elect a chairperson and secretary by a majority of state committee member votes and in the absence of the chairperson, the secretary shall preside. [All notices of meetings shall be posted in compliance with Chapter 610, RSMo.]

[(3)](2) [The director of the Division of Professional Registration or a]A designated representative of the division [shall] will be responsible for keeping the minutes of state committee proceedings and perform other duties as requested by the division or state committee.

[(4) State committee meetings will generally consist of receiving applications, interviewing applicants, investigating complaints and inquiries, determining disciplinary actions regarding licensed marital and family therapists, provisional licensed marital and family therapists, and supervised marital and family therapists, and making recommendations to the division concerning state committee matters.

(5) Unless otherwise provided by the statutes or regulations, all meetings of the board may be conducted according to Robert's Rules of Order.]

AUTHORITY: section[s] 337.700, RSMo 2016, and section 337.727[.1.(10)], RSMo Supp. [2011] 2019. This rule originally filed as 4 CSR 233-1.010. Original rule filed Dec. 31, 1997, effective July 30, 1998. Moved to 20 CSR 2233-1.010, effective Aug. 28, 2006. Amended: Filed Nov. 15, 2011, effective April 30, 2012. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE
Division 2233—State Committee of Marital and Family Therapists
Chapter 1—General Rules
PROPOSED RESCISSION

20 CSR 2233-1.020 Policy for Release of Public Records. This rule established the policy in compliance with sections 610.010–610.030, RSMo, regarding the release of information on any meeting, record, or vote of the state committee.

PURPOSE: The rule is being rescinded to eliminate duplicative language.

AUTHORITY: section 337.727.1(10), RSMo 2000. This rule originally filed as 4 CSR 233-1.020. Original rule filed Dec. 31, 1997, effective July 30, 1998. Moved to 20 CSR 2233-1.020, effective Aug. 28, 2006. Amended: Filed June 27, 2008, effective Dec. 30, 2008. Rescinded: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE
Division 2233—State Committee of Marital and Family Therapists
Chapter 1—General Rules
PROPOSED AMENDMENT

20 CSR 2233-1.030 Complaint Handling and Disposition. The committee is amending sections (2), (3), and (5) and deleting sections (6) and (7).

PURPOSE: This amendment clarifies the public complaint procedure.

(2) Complaints [shall] will be mailed or delivered to the following address: Missouri State Committee of Marital and Family Therapists, 3605 Missouri Boulevard, P.O. Box 1335, Jefferson City, MO 65102. However, actual receipt of the complaint by the state committee at its administrative offices in any manner [shall] will be

sufficient. *[Complaints may be based upon personal knowledge or upon information and belief, reciting information received from other sources.]*

(3) All complaints shall be made in writing and *[shall]* fully identify the complainant by name and address. Verbal or telephone communications may be considered or processed as complaints, however, the person making such communication *[shall be asked to]* **must** supplement the communication with a written complaint. Individuals with special needs as addressed by the Americans with Disabilities Act may notify the state committee office at (573) 751-0870 for assistance. The TTY number for the hearing impaired is (800) 735-2966 through Relay Missouri and (800) 735-2466 through Voice Relay Missouri.

(5) Each complaint received under this rule shall be acknowledged in writing. The complainant and complaint respondent *[shall]* **will** be notified of the ultimate disposition of the complaint.

[(6) This rule shall not be deemed to limit the authority of the state committee or division to file a complaint with the Administrative Hearing Commission charging a LMFT, PLMFT, or S-MFT with any actionable conduct or violation, whether or not such a complaint exceeds the scope of the acts charged in a preliminary public complaint filed with the state committee and whether or not any public complaint has been filed with the state committee.]

(7) The division and state committee interpret this rule, which is required by law, to exist for the benefit of those members of the public who submit complaints to the state committee. This rule is not deemed to protect, or inure to the benefit of those LMFTs, PLMFTs, S-MFTs, or other persons against whom the state committee has instituted or may institute administrative or judicial proceedings concerning possible violations of the provisions of sections 337.700–337.739, RSMo.]

AUTHORITY: section[s] 337.700, **RSMo 2016**, and section 337.727.1.(7) and (10), **RSMo Supp. [2011] 2019**. This rule originally filed as 4 CSR 233-1.030. Original rule filed Dec. 31, 1997, effective July 30, 1998. Moved to 20 CSR 2233-1.030, effective Aug. 28, 2006. Amended: Filed Nov. 15, 2011, effective April 30, 2012. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE

Division 2233—State Committee of Marital and Family Therapists

Chapter 1—General Rules

PROPOSED AMENDMENT

20 CSR 2233-1.050 Name and Address Changes. The committee

is amending sections (2) and (3).

PURPOSE: This amendment clarifies requirements to update licensure information.

(2) A licensed marital and family therapist, provisional licensed marital and family therapist, or supervised marital and family therapist whose name is changed *[by marriage or court order]* shall notify the *[division]* **state committee** within thirty (30) days of the name change and provide *[a copy of the appropriate document verifying]* **documentation authorizing** the name change.

(3) A licensed marital and family therapist, provisional licensed marital and family therapist, or supervised marital and family therapist whose address has changed shall inform the *[division]* **state committee** of the address changes by sending a letter, **email or fax** to the state committee's office within thirty (30) days of the effective date of the change.

AUTHORITY: section[s] 337.700, **RSMo 2016**, and section 337.727.1.(1) and (10), **RSMo Supp. [2011] 2019**. This rule originally filed as 4 CSR 233-1.050. Original rule filed Dec. 31, 1997, effective July 30, 1998. Moved to 20 CSR 2233-1.050, effective Aug. 28, 2006. Amended: Filed Nov. 15, 2011, effective April 30, 2012. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE

Division 2233—State Committee of Marital and Family Therapists

Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.010 Educational Requirements. The committee is deleting sections (3), (4), and (9), adding new section (6), renumbering as necessary, amending sections (1), (3)-(5), (7), (9), and (10).

PURPOSE: This amendment clarifies the educational requirements for provisional licensure and licensure as a marital and family therapist.

(1) To apply for licensure or supervision, an applicant shall have received a graduate degree at the master, specialist or doctoral level with either a major in marriage and family therapy or an equivalent graduate course of study in a mental health discipline from a regionally accredited institution acceptable to the United States Department of Education.

(A) For the purpose of this rule, a master's or doctoral degree in marital and family therapy from a program accredited by the Commission on Accreditation for Marriage and Family Therapy

Education (COAMFTE) or its successor organization meets the educational requirements for licensure. A master or doctoral degree awarded prior to COAMFTE accreditation meets the educational requirement for licensure if the degree was awarded within two (2) years of the program receiving accreditation.

(B) For the purpose of this rule, a master's or doctoral degree from a program in marriage, couple, and family counseling accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) or its successor organization meets the education requirements for licensure. A master's or doctoral degree awarded prior to CACREP accreditation meets the educational requirement for licensure if the degree was awarded within two (2) years of the program receiving accreditation.

[(A)](C) A graduate program in marriage and family therapy that is not COAMFTE or CACREP accredited shall consist of at least forty-five (45) semester hours or sixty (60) quarter hours of study in the area of marriage and family therapy; or

[(B)](D) An equivalent graduate course of study in a mental health discipline shall consist of at least forty-five (45) semester hours or sixty (60) quarter hours of study. The applicant shall have completed graduate or postgraduate course work in each core area as defined in 20 CSR 2233-2.010(7)(A)-(F).

[(3) For graduate training beginning prior to January 1, 1981, an applicant shall have completed the following:

(A) Six (6) semester hours or ten (10) quarter hours of study in the area of marriage and family therapy or mental health intervention. For the purpose of this rule, mental health intervention shall be defined as course work covering therapeutic methods for the assessment and treatment of mental disorders; and

(B) Six (6) semester hours or ten (10) quarter hours of study in the areas of human development and family studies or human development; and

(C) Three (3) semester hours or five (5) quarter hours of practicum.

(D) An applicant shall meet all of the educational requirements and shall apply for supervision or licensure by August 31, 2007.

(4) For graduate training beginning after January 1, 1981 and before August 31, 2000, applicants shall have completed the following:

(A) Six (6) semester hours or (10) ten quarter hours of study in the area of marriage and family therapy; and

(B) Six (6) semester hours or (10) ten quarter hours of study in the area of human development and family studies; and

(C) Three (3) semester hours or five (5) quarter hours of research methodology; and

(D) Three (3) semester hours or five (5) quarter hours of study in the area of ethics and professional studies; and

(E) Three (3) semester hours or five (5) quarter hours of practicum.

(F) An applicant shall meet all of the educational requirements for licensure and shall apply for licensure or supervision by August 31, 2007.]

[(5)](3) [For graduate training beginning after August 31, 2000, the] An applicant for licensure or supervision shall have completed the following:

(A) Three (3) semester hours or five (5) quarter hours of study in the area of theoretical foundations of marriage and family therapy; and

(B) Twelve (12) semester hours or twenty (20) quarter hours of study in the area of the practice of marriage and family therapy; and

(C) Six (6) semester hours or ten (10) quarter hours of study in the area of human development and family studies; and

(D) Three (3) semester hours or five (5) quarter hours of study in the area of ethics and professional studies; and

(E) Three (3) semester hours or five (5) quarter hours of study in the area of research methodology; and

(F) Six (6) semester hours or ten (10) quarter hours of practicum in marital and family therapy, including at least five hundred (500) hours of client contact.

[(6)](G) [Effective August 28, 2008 an applicant for supervision or licensure shall document completion of t]Three (3) semester hours or five (5) quarter hours of study in the area of diagnostic systems either within the curriculum leading to a master, doctoral, or specialist degree, or [a] post master's graduate level course work prior to the issuance of a license.

[(A) This regulation shall not apply to a person with an application for supervision or licensure filed with the state committee prior to August 28, 2008.]

[(7)](4) Graduate course work in marriage and family therapy or a course of study in a mental health discipline from a school, college or university or other institution of higher learning outside the United States may be considered in compliance with these rules if, at the time the applicant was enrolled and graduated, the school, college, university or other institution of higher learning maintained a standard of training substantially equivalent to the standards of training of those institutions accredited by one (1) of the regional accrediting commissions recognized by the United States Department of Education. An official transcript from the college, university, or other institution of higher learning outside of the United States must be sent to the committee. If the applicant's official transcript is not in English, the applicant shall obtain a credential evaluation from a nationally recognized translation service that compares the courses listed on the transcript with U.S. standards, in order to determine content and equivalency in terms of U.S. education. The applicant shall authorize the release of the translation to the committee. Any costs associated with the translation are the applicant's responsibility.

(A) A graduate program in marriage and family therapy shall consist of at least forty-five (45) semester hours or sixty (60) quarter hours of study in the area of marriage and family therapy; or

(B) An equivalent graduate course of study in a mental health discipline shall consist of at least forty-five (45) semester hours or sixty (60) quarter hours of study. The applicant shall have completed] comprised of graduate or postgraduate course work in each core area as defined in 20 CSR 2233-2.010(8)(A)-(G).

[(8)](5) A course shall be counted once in granting credit for a core area and [shall] be an in-depth study solely devoted to a particular core area. No core area credit shall be given for courses which contain only a component or some aspects of a core area. The core areas are defined as follows:

(A) Theoretical Foundations of Marriage and Family Therapy—Courses in this area cover the development, theoretical foundations, contemporary conceptual directions, and critical philosophical issues of marriage and family therapy;

(B) The Practice of Marriage and Family Therapy—Courses in this area cover the historical development, theoretical foundations, contemporary conceptual directions, and critical philosophical issues of marriage and family therapy and applied marriage and family therapy practice. Within the context of systems theory and marriage and family therapy, courses will cover assessment, evaluation and treatment of dysfunctional relationship patterns and mental disorders consistent with the scope of practice as defined in section 337.700(7), RSMo. Major] and include marriage and family therapy assessment methods and instruments [shall be covered];

(C) Human Development and Family Studies—Courses in this area cover the life cycle of individuals, couples and families and the modification of relationship dynamics over time from a systems perspective. Courses shall address issues of relationships, normal development and dysfunctional patterns, as well as issues of sexuality, gender,

ethnicity, race, socioeconomic status, religion, culture and other issues of diversity which emerge in a pluralistic society;

(D) Ethics and Professional Studies—Courses in this area cover the development of professional commitment, identity, and accountability. Studies *[shall]* include professional socialization and professional organizations, licensure and credentials, legal responsibilities and liabilities of clinical practice and research, business ethics in professional practice, family law, confidentiality, professional marital and family therapy codes of ethics, and cooperation with members of other mental health professions. *The course shall be* specific to the practice and profession of marriage and family therapy;

(E) Research Methodology—Courses in this area cover an understanding of research methodology and data analysis with the ability to evaluate research. Course content shall include both qualitative and quantitative research;

(F) Practicum in Marriage and Family Therapy—The practicum or internship consists of direct, face-to-face client contact to include couple and family formats. Individual supervision with one (1) or two (2) students in face-to-face consultation with a supervisor shall be provided. Students shall be trained to make relevant assessments of client systems; and

(G) *[Effective August 28, 2008]* Diagnostic Systems—Courses in this area provide an understanding and a working knowledge of psychodiagnostics using classification systems with an emphasis on the current edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM). Course content regarding the DSM must include understanding the organizational structure, professional terminology used in the manual, and competence in its application as it is used in the assessment process and subsequent treatment planning relative to the practice of marital and family therapy.

[(9)] Any course offered primarily via correspondence course, Internet (such as a chat room or discussion group), electronic mail (email), or similar delivery method or system or by audio or video tape or non-interactive communication, shall not be acceptable for course work pursuant to 20 CSR 2233-2.010 (8)(A)–(G), even if credit is awarded by the educational institution and the offering appears on the transcript.

(A) For the purpose of this rule non-interactive communication shall be defined as those courses transmitted via satellite in which the student has no means of simultaneously interacting with the course instructor visually and verbally during the transmission of course information.]

(6) Distance learning includes cyber/distance (electronic) learning/education and must be a formal education process in which instruction occurs when the student and the instructor are not located in the same place and uses technology such as on-line learning tools, e-mail, video conferencing, and other related technologies.

(A) Any course or graduate program offered primarily via distance learning shall be evaluated by the state committee in the same manner as onsite graduate programs or course work as defined in 20 CSR 2233-2.010.

*[(10)](7) Independent studies, courses listed on the transcript as a seminar, and readings courses shall be clearly delineated on the transcript and shall be submitted to the state committee for review and approval. It *[shall be]* is the applicant's responsibility to document that the course work is in compliance with the core course requirements defined in 20 CSR 2233-2.010 (8)(A)–(G). The applicant may submit course descriptions from course catalogs, syllabi, bulletins or through written documentation from an appropriate school official stating that the course was an in-depth study of a particular core area.*

[(11)](8) Undergraduate level course work is in compliance with core requirements as defined in this rule if the applicant's official

transcript clearly shows that the course was awarded graduate credit by the school.

*[(12)](9) Courses provided by a post-degree institute accredited by an accrediting body which has been approved by the United States Department of Education may be acceptable as meeting core course requirements defined in 20 CSR 2233-2.010 [(8)(A)–(G)]. It *[shall be]* is the applicant's responsibility to document that the course work is in compliance with the core course requirements defined in this rule. The applicant may submit course descriptions from course catalogs, syllabi, bulletins, or through written documentation from an appropriate official stating that the course was an in-depth study of a particular core area.*

*[(13)](10) The applicant has the burden of demonstrating that the academic course work and training constituted a program of study in marriage and family therapy or a mental health discipline. A final determination of whether the program of study which formed the basis of the applicant's degree was marriage and family therapy or a mental health discipline *[shall be]* is within the discretion of the state committee.*

[(14)](11) The state committee shall review an applicant's educational credentials upon request from an applicant and upon receipt of official educational transcripts received directly from the university or post-degree institute accredited by an accrediting body which has been approved by the United States Department of Education and upon payment of the fee as defined in 20 CSR 2233-1.040(1)(H). All information shall be submitted to the state committee no later than thirty (30) days prior to a regularly scheduled state committee meeting to be reviewed at that meeting.

[(15)](12) The state committee shall review an applicant's proposed plan for obtaining an appropriate educational degree and/or course work upon receiving a request from an individual, receipt of the photocopies of official school documents, such as course syllabi or catalog descriptions of course work and degree programs, and upon payment of the fee as defined in 20 CSR 2233-1.040(1)(H). All information shall be submitted to the state committee no later than thirty (30) days prior to a regularly scheduled state committee meeting to be reviewed at that meeting.

AUTHORITY: section 337.715, RSMo [Supp. 2007] 2016, and section 337.727, RSMo [2000] Supp. 2019. This rule originally filed as 4 CSR 233-2.010. Original rule filed Dec. 31, 1997, effective July 30, 1998. Amended: Filed May 22, 2001, effective Nov. 30, 2001. Moved to 20 CSR 2233-2.010, effective Aug. 28, 2006. Amended: Filed Nov. 15, 2007, effective May 30, 2008. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND
INSURANCE**
**Division 2233—State Committee of Marital and Family
Therapists**
Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.020 Supervised Marital and Family Work Experience. The committee is deleting sections (4)-(5) and (14)-(15), renumbering as necessary, amending sections (1)-(3), (5)-(9), (11)-(13) and (16).

PURPOSE: This amendment defines the requirements for distance supervision.

(1) The phrase supervised clinical experience as used in section 337.715.1(2), RSMo, [shall mean] means post-degree training in the practice of marital and family therapy as defined in section 337.700(7), RSMo, beginning after the satisfactory completion of the educational requirements set forth in 20 CSR 2233-2.010 and obtained under the supervision of an acceptable supervisor as defined in 20 CSR 2233-2.021.

(2) [Supervision shall be registered on a form provided by the state committee and accompanied by the required fee and include a background check as defined in 20 CSR 2233-2.020(2)(A). Supervised experience in marital and family therapy shall be considered effective the date the application and fee is received in the state committee office and contingent upon the state committee's approval. For the purpose of supervision, the results of a background check shall be valid for two (2) years.] The effective date of a registration of supervision or a change of supervision shall be determined by the state committee with consideration given to when the application is complete with all required documentation. The state committee will inform the applicant of the effective date of supervision or change of supervision in writing.

(A) The following must be on file with the state committee for an application for supervision or change of supervision application to be considered complete and officially filed:

1. A registration of supervision or change of supervision application form, provided by the state committee, that is legible and printed in black or blue ink;
2. Application for supervision or change of supervision application fee;
3. Official graduate transcript(s) sent to the state committee by the educational institution(s);
4. When applicable, a written agreement, affiliating the licensure supervisor to the setting where the supervised marital and family therapist or provisionally licensed marital and family therapist will obtain licensure supervision; and

[(A)]5. [For the purpose of conducting a background check the applicant shall provide proof of submission of fingerprints to the Missouri State Highway Patrol's approved vendor(s) for both a Missouri State Highway Patrol and Federal Bureau of Investigation criminal background check. Proof shall consist of any documentation acceptable to the state committee.] Background check with submission of fingerprints to the Missouri State Highway Patrol's approved vendor(s) for both a Missouri State Highway Patrol and Federal Bureau of Investigation criminal background check. Any fees due for the background check shall be paid by the applicant directly to the Missouri State Highway Patrol or its approved vendor(s);/.

[(B)](3) A provisional licensed marital and family therapist (PLMFT) or supervised-marital and family therapist (S-MFT) shall notify the state committee within fifteen (15) days of changing supervisors or settings by filing a change of supervision form and paying

the fee as defined in 20 CSR 2233-1.040(1)(J). [The change of supervision shall be effective the date the change of supervision form is received in the state committee office and contingent upon the state committee's approval.]

[(3) An application for supervised marital and family therapy experience or a change in the supervisory experience shall be reviewed and approved by the state committee, and the applicant shall be informed, in writing, of the state committee's decision.]

[(A)](4) A provisional license issued to an applicant with a master's degree in compliance with 20 CSR 2233-2.010 [shall be] is valid for at least [two (2)] **three (3)** years from the date of issuance and [shall be deemed valid] until the expiration date of the license or upon termination of supervision, whichever occurs first or unless the license is disciplined by the state committee. Upon **written** request **from the applicant and prior to the expiration date of the provisional license**, the state committee may extend a provisional license for good cause at the discretion of the state committee. [A written request, outlining the reason(s) for the extension, shall be submitted to the state committee prior to the expiration date of the provisional license.]

[(4) Applicants for supervised experience in marital and family therapy whose graduate training began prior to January 1, 1981, shall complete all educational requirements as defined in 20 CSR 2233-2.010(3) and shall apply for supervision by August 31, 2007.

(A) For the purpose of this rule, if an applicant for supervision is deficient in three (3) semester hours or five (5) quarter hours in the area of human development and family studies, supervised experience in marital and family therapy may be approved by the state committee and begin prior to the completion of the required course work.

(5) Applicants for supervised experience in marital and family therapy whose graduate training began after January 1, 1981, and before August 31, 2000, shall complete all educational requirements as defined in 20 CSR 2233-2.010(4) and shall apply for supervision by August 31, 2007.

(A) For the purpose of this rule, if an applicant for supervision is deficient three (3) semester hours or five (5) quarter hours in the area of human development and family studies; and/or

(B) If the applicant for supervised experience in marital and family therapy is deficient three (3) semester hours or five (5) quarter hours in the area of research methodology, supervised experience in marital and family therapy may be approved by the state committee and may begin prior to the completion of the required course work.]

[(6)](5) Applicants for supervised experience in marital and family therapy [whose graduate training began after August 31, 2000,] shall complete all education requirements as defined in 20 CSR 2233-2.010(5).

(A) For the purpose of this rule, if an applicant for supervision is deficient [three (3) semester hours or five (5) quarter hours in the area of human development and family studies; and/or

(B) If the applicant for supervision is deficient three (3) semester hours or five (5) quarter hours in the area of research methodology; and/or

(C) If the applicant for supervision is deficient three (3) semester hours or five (5) quarter hours of practicum,] **in any of the core areas pursuant to 20 CSR 2233-2.010(3)(A)-(G)** supervision may be approved by the state committee and **the applicant** may begin prior to the completion of all required course work.

[(7)](6) A supervisor shall not be a relative of the applicant. For the purpose of this rule a relative *[shall be]* is defined as a parent, spouse, child, sibling of the whole or half blood, grandparent, grandchild, aunt, uncle, or cousin of the applicant, or one who is or has been related by marriage.

[(8)](7) A supervisor shall be licensed as a marital and family therapist, professional counselor, psychologist, clinical social worker, or psychiatrist in Missouri for supervised experience in this state to be considered for licensure. For the purpose of this *[regulation]* rule an inactive, provisional, expired, temporary, or retired license shall not meet this requirement.

[(9)](8) The characteristics of acceptable supervision shall include in **no less than twenty-four (24) calendar months and** no more than sixty (60) calendar months:

[(A)] *A minimum of three thousand (3,000) hours of supervised experience in marital and family therapy; and]*

[(B)](A) A minimum fifteen hundred (1,500) hours of *[the three thousand (3,000) hours of]* supervised experience in marital and family therapy *[shall be]* direct client contact. **The PLMFT or S-MFT must obtain at least fifteen (15) hours of supervised experience within a calendar month in order for the experience to be considered by the state committee and must be in compliance with 20 CSR 2233-2.020; and**

1. For the purpose of these rules, direct client contact *[shall be defined as]* is face-to-face interaction between the client and PLMFT or S-MFT *[in the same room; and]*.

[(C)] *A minimum of twenty-four (24) calendar months of supervised experience. The PLMFT or S-MFT must obtain at least fifteen (15) hours of supervised experience within a calendar month in order for the experience to be considered by the state committee and must be in compliance with 20 CSR 2233-2.020(1), (2), (4), or (5) or (6), (7), and (8); and]*

[(D)](B) A minimum of two (2) hours every two (2) weeks or one (1) hour every week of *[individual]* face-to-face supervision with the registered supervisor. For the purpose of this regulation an hour of individual face-to-face supervision *[shall be defined as]* is **no less than** fifty (50) continuous minutes and two (2) hours *[shall be defined at]* is no less than one hundred (100) continuous minutes *[with the registered supervisor and supervised marital and family therapist or provisional licensed marital and family therapist in the same physical space].*

1. At least half of the supervision shall be individual face-to-face supervision which may consist of no more than two (2) PLMFTs or S-MFTs meeting with the registered supervisor.

2. The remaining supervision may be group supervision. For the purpose of this rule, group supervision may consist of at least three (3) and no more than six (6) PLMFTs or S-MFTs or combination thereof.

3. The PLMFT or S-MFT must complete a minimum of two hundred (200) hours of supervision, at least half of which one hundred (100) hours must be in individual face-to-face supervision.

4. *[The use of electronic communication is not acceptable for meeting face-to-face supervision requirements of this rule unless the communication is verbally and visually interactive between the supervisor and PLMFT or S-MFT]* **An applicant for supervision may submit a request for supervision by electronic methods to meet the face-to-face supervision requirements of this rule. When using electronic methods for supervision, the supervisor and S-MFT or PLMFT shall ensure that the system utilized for communications is a secure, real-time system that provides for visual and audio interaction between the S-MFT or PLMFT and supervisor and all data storage and communications are private and protected consistent with all applicable laws and rules; and**

[(E)](C) The services provided by a PLMFT or S-MFT shall be performed under the registered supervisor's full order, control, over-

sight, and guidance. The PLMFT or S-MFT shall remain under the supervision until licensed as a marital and family therapist.

1. A PLMFT or S-MFT shall not engage in independent, private practice *[and shall not]* offer therapy *[from any office]* that is not affiliated with *[a mental health group, practice, mental health agency, mental health clinic, school, or hospital]* **the supervisor approved by the state committee for licensure supervision.**

2. A PLMFT or S-MFT shall not engage in marketing or advertising services without including the name and license number of the registered supervisor.

3. A PLMFT or S-MFT shall not bill clients for therapeutic services. Billing and *[remuneration]* **payment** for marital and family therapy provided by the PLMFT or S-MFT shall be facilitated by *[the organization employing or affiliated with the PLMFT, S-MFT, or the registered supervisor]* **the supervisor approved by the state committee for licensure supervision.**

4. While receiving licensure supervision and providing marital and family therapy as defined in section 337.700(7), RSMo, or representing themselves as a PLMFT, a provisional licensed marital and family therapist shall use one (1) of the following terms: PLMFT or provisional licensed marital and family therapist.

5. A person shall use one (1) of the following terms while under supervision for licensure and not provisionally licensed: S-MFT or supervised marital and family therapist.

6. The registered supervisor shall read and cosign all written reports, to include their license number, including treatment plans and progress notes prepared by the PLMFT or S-MFT. If the setting prohibits the cosign/signing of reports, it *[shall be]* the responsibility of the PLMFT or S-MFT to document that written reports, to include treatment plans and progress notes, have been reviewed by the registered supervisor; *and]*.

[(F)] *Effective August 28, 2008, a S-MFT shall demonstrate supervision of diagnosis as a core component of the postgraduate supervised experience. 20 CSR 2233-2.020(9)(F) shall not apply to individuals with an application for supervision or licensure filed with the state committee prior to August 28, 2008; and*

[(G)] *Effective August 28, 2010, a PLMFT shall demonstrate supervision of diagnosis as a core component of the postgraduate supervised experience.]*

[(10)](9) The supervisor and PLMFT or S-MFT shall be employed by or affiliated by contract with the same *[professional]* **licensure supervision** setting and the *[professional]* **licensure supervision** setting shall not include private practice in which the PLMFT or S-MFT operates, manages, or has an ownership interest in the private practice.

[(11)](10) During the period of supervised experience in marital and family therapy, the PLMFT or S-MFT shall inform the client that the PLMFT or S-MFT is under supervision for licensure, along with the name and address and license number of the registered supervisor.

[(12)](11) *[Within two (2) months of completing supervision as defined in this rule, the PLMFT or S-MFT shall submit an application for licensure.]* Any PLMFT or S-MFT who *[does]* **has not** *[apply]* **applied** for licensure within that period of time *[shall be]* prohibited from providing services pursuant to section 337.700(7), RSMo **unless the PLMFT or S-MFT continues licensure supervision approved by the committee.**

[(13)](12) For individuals applying for supervised experience in marital and family therapy on the basis of a doctoral or specialist's degree in marriage and family therapy or a mental health discipline as defined in 20 CSR 2233-2.010(1)(A) or (B) or based upon thirty (30) graduate hours of post-master's course work in marital and family therapy or a mental health discipline as defined in 20 CSR 2233-2.010(1)(A) or

(B), additional supervised experience in marital and family therapy shall include the following to be completed in no **less than twelve (12) months and no** more than twenty-four (24) calendar months:

[(A) At least fifteen hundred (1,500) hours of supervised experience in marital and family therapy; and]

[(B)](A) At least seven hundred fifty (750) hours of supervised experience in marital and family therapy [shall be] direct client contact in which the applicant for supervision shall engage in the practice of marital and family therapy as defined in section 337.700(7), RSMo; and

[(C)](B) [A minimum of twelve (12) calendar months of supervised experience.] The PLMFT or S-MFT must obtain at least fifteen (15) hours of supervised experience within a calendar month in order for the experience to be considered by the state committee and must be in compliance with 20 CSR 2233-2.020(10), (11), and (12); and

[(D) The state committee may grant credit for up to twelve (12) months and fifteen hundred (1,500) hours of supervised clinical experience as part of the specialist's or doctoral degree or thirty (30) post master's graduate hours of study in marital and family therapy or a mental health discipline as defined in 20 CSR 2233-2.010(1)(A) or (B). In order to complete the requirement, the applicant shall obtain supervised experience in marital and family therapy pursuant to 20 CSR 2233-2.020(13)(A); and]

*[(E)](C) A provisional license issued to an applicant with thirty (30) semester hours of post-degree graduate course work, specialist, or doctoral degree in compliance with 20 CSR 2233-2.010 [shall be] is valid for at least [one (1) year] **two (2) years** from the date of issuance and [shall be deemed] is valid until the expiration date or termination of supervision, whichever occurs first, or unless the license is disciplined by the state committee. Upon **written request from the applicant and prior to the expiration date of the provisional license**, the state committee may extend a provisional license for good cause at the discretion of the state committee. [A written request, outlining the reason(s) for the extension, shall be submitted to the state committee prior to the expiration of the provisional license.]*

[(14) Effective August 28, 2008, a S-MFT shall demonstrate supervision of diagnosis as a core component of the post-graduate supervised experience. 20 CSR 2233-2.020(9)(F) shall not apply to individuals with an application for supervision or licensure filed with the state committee prior to August 28, 2008.

(15) Effective August 28, 2010, a PLMFT shall demonstrate supervision of diagnosis as a core component of the post-graduate supervised experience.

(16) Applicants with supervised experience in marital and family therapy completed before August 28, 1995, may submit supervised experience in marital and family therapy for review and approval on a form pursuant to 20 CSR 2233-2.020. Verification of supervision shall include a verification of supervision form signed by the supervisor.]

[(A)](D) If a supervisor is deceased or cannot be located by the applicant, the applicant shall provide documentation verifying supervised hours and time providing marital and family therapy. Approval of the supervised experience shall be at the discretion of the state committee.

AUTHORITY: sections 337.700[,], and 337.715, **RSMo 2016**, and section 337.727, **RSMo Supp. [2011] 2019**. This rule originally filed as 4 CSR 233-2.020. Original rule filed Dec. 31, 1997, effective July 30, 1998. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE

Division 2233—State Committee of Marital and Family Therapists

Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.021 Registered Supervisors and Supervisory Responsibilities. The committee is amending sections (1) and (3).

PURPOSE: This amendment clarifies the number of individuals a licensee may supervise.

(1) **A supervisor may not have more than a combined total of ten (10) supervisees including S-MFTs, PLMFTs and/or licensure supervision candidates from other mental health disciplines at the same time.** In order to provide supervision for a provisional licensed marital and family therapist (PLMFT) or supervised-marital and family therapist (S-MFT), a supervisor shall document the following to the state committee:

(3) The supervisor and/or applicant for supervision [shall] have the burden of demonstrating that the supervisor has the required education and experience outlined within this [regulation] rule.

AUTHORITY: sections 337.700[,], and 337.715, **RSMo 2016**, and section 337.727, **RSMo Supp. [2011] 2019**. This rule originally filed as 4 CSR 233-2.021. Original rule filed Dec. 31, 1997, effective July 30, 1998. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE
Division 2233—State Committee of Marital and Family Therapists
Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.030 Application for Licensure. The committee is amending sections (2), (4), and (5) and making section (6) subsection (5)(B).

PURPOSE: This amendment clarifies the requirements for submitting an application for licensure.

[(2) An application shall not be considered as officially filed unless it is typewritten or printed in black ink, signed, notarized, accompanied by all documents required by the state committee to include a background check, and the applicant pays the required application fee pursuant to 20 CSR 2233-1.040(1)(A). The application fee shall be in the form of a cashier's check, personal check, or money order. For the purpose of licensure the results of a criminal background check shall be valid for two (2) years.

(A) For the purpose of conducting a background check the applicant shall provide proof of submission of fingerprints to the Missouri State Highway Patrol's approved vendor(s) for both a Missouri State Highway Patrol and Federal Bureau of Investigation criminal background check. Proof shall consist of any documentation acceptable to the state committee. Any fees due for the background check shall be paid by the applicant directly to the Missouri State Highway Patrol or its approved vendor(s).]

(2) The following must be on file with the state committee for an application for licensure to be considered complete and officially filed:

(A) An application for licensure on a form, provided by the state committee, that is legible and printed in black or blue ink;

(B) Application for licensure fee;

(C) Official graduate transcript(s) sent to the state committee by the educational institution(s);

(D) Documentation of post degree supervised experience in compliance with 20 CSR 2233-2.020;

(E) Official scores from the Examination in Marital and Family Therapy as developed by the Association of Marital and Family Therapy Regulatory Boards or its successor organization; and

(F) Background check with submission of fingerprints to the Missouri State Highway Patrol's approved vendor(s) for both a Missouri State Highway Patrol and Federal Bureau of Investigation criminal background check.

(4) Following review, the applicant [shall] will be informed in writing of the decision regarding the application for licensure.

(5) An applicant with a license to engage in the practice of marital and family therapy in another state or territory as defined in section 337.715.2, RSMo, may apply for licensure in Missouri upon submitting acceptable evidence of his/her qualifications to the division.

(A) An application for licensure shall be reviewed by the state committee, and the applicant [shall be] informed, in writing, of the state committee's decision.

[(6)](B) For the purpose of this rule, "acceptable evidence" [shall] includes, [but] and is not [be] limited to, a completed application for licensure on forms provided by the state committee, documentation of licensure which [shall] contains information concerning the requirements for licensure, the method of licensing including

examination results, date of original licensure, current status of the applicant's license, and payment of the applicable fee.

AUTHORITY: sections 337.700(9)[,] and 337.706.2, RSMo 2016, and section 337.727(6) and (10), RSMo Supp. [2011] 2019. This rule originally filed as 4 CSR 233-2.030. Original rule filed Dec. 31, 1997, effective July 30, 1998. For intervening history, please consult the Code of State Regulations. Amended: Filed Sept. 5, 2019.

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE
Division 2233—State Committee of Marital and Family Therapists
Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.040 Examination Requirements. The committee is proposing to add new section (5).

PURPOSE: This amendment sets out the responsibilities of an examination candidate.

(5) The applicant shall comply with the examination provider's rules for test administration related to applicant conduct and security and authorize the examination provider to submit the examination results to the state committee along with a report of any adverse incident(s) involving the applicant's conduct. Any cost associated with taking the approved examination or sending the examination results to the board is the applicant's responsibility. Any challenge, and cost related to such challenge, to an examination question, the method of examination, or any other matters concerning the examination shall be addressed to the examination provider.

AUTHORITY: section 337.727.1(1), (3), (6) and (10), RSMo [2000] Supp. 2019. This rule originally filed as 4 CSR 233-2.040. Original rule filed Dec. 31, 1997, effective July 30, 1998. Amended: Filed May 22, 2001, effective Nov. 30, 2001. Moved to 20 CSR 2233-2.040, effective Aug. 28, 2006. Amended: Filed Nov. 15, 2007, effective May 30, 2008. Amended: Filed Sept. 5, 2019.

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 State

Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE

Division 2233—State Committee of Marital and Family Therapists

Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

20 CSR 2233-2.050 Renewal of License. The committee is amending sections (1), (4), (5), and (8)-(10).

PURPOSE: This amendment clarifies the requirements for renewing a license.

(1) A licensed marital and family therapist shall renew the license on or before the expiration of the license by submitting the renewal notice and fee [to the division as set forth in 20 CSR 2233-1.040(1)(D)].

(A) [Renewal fees] A renewal postmarked after the expiration date of the license shall be subject to a late fee as defined in 20 CSR 2233-1.040(1)(D)1. or 2., in addition to paying the renewal fee.

(4) [Any licensed marital and family therapist failing to renew the license within the sixty- (60) day period set forth in section 337.712.2, RSMo, and wishing to restore the license shall make application to the division or state committee by submitting an application for reinstatement of license and the delinquency fee as set forth in 20 CSR 2233-1.040(1)(D)1. or 2. and shall document compliance with the continuing education requirements of this regulation.] A licensed marital and family therapist failing to renew the license may request information on reinstating the license from the state committee.

(5) [Effective August 28, 2008, a] A licensed marital and family therapist shall **document and** obtain forty (40) contact hours of continuing education (CE) prior to the expiration date of a license and [such hours should consist of] **with** at least twenty (20) hours of formal continuing education hours [with]. [t]The balance of hours [to be self-study] can be self-study or additional formal continuing education hours. For the purpose of this [regulation] a contact hour shall consist of fifty (50) minutes.

(A) Formal continuing education shall consist of one (1) or a combination of any of the following:

1. Postgraduate course work offered by a regionally accredited educational institution[. Such course work shall be] relevant to marital and family therapy as defined in section 337.700(7) and (8), RSMo, and [shall not be part of the] **not** graduate course work required for licensure. One (1) semester hour of graduate credit constitutes fifteen (15) hours of continuing education[.];

2. Presenting research at a formal professional meeting. [A presentation shall include a paper presented in a professional journal, book, or original chapter in an edited book. Credit will be given at the rate four (4) hours for each paper or presentation.] No credit [would be] is granted for any subsequent presentation on the same subject matter during the same renewal period. **The licensee may include hours of research associated with the presentation;**

3. Attending relevant professional meetings when such meetings include verification of attendance. Such meetings can be international,

national, regional, state, or local, and must be related to the profession[. The licensee shall be eligible to receive three (3) hours of continuing education credit for a full day of meeting attendance];

4. Attending work shops, seminars, or continuing education courses relevant to marital and family therapy as defined in section 337.700(7) and (8), RSMo. Upon request by the state committee the licensee shall provide verification of attendance such as a certificate or letter of attendance indicating the date, time, and number of hours of continuing education from the workshop, seminar, or course provider[.];

5. Written contributions to relevant professional books, journals, or periodicals[. A licensee shall be eligible to receive three (3) hours of continuing education for publication in a nonreferee journal, six (6) hours of continuing education for publication in a referee journal, eight (8) continuing education hours for each chapter in a book, ten (10) continuing education hours for editing a book, and fifteen (15) continuing education hours for the publication of a book.];

6. Presenting at relevant professional meetings such as international, national, regional, state, or local professional associations[. A licensee would be eligible for a maximum of three (3) hours per presentation.];

7. A licensed marital and family therapist who is a faculty member at an accredited educational institution may receive up to a maximum of twenty (20) hours per year of continuing education credit for teaching at the educational institution. The area(s) taught by the licensee must relate to the following core areas: Theoretical Foundations of Marriage and Family Therapy, The Practice of Marriage and Family Therapy, Human Development and Family Studies, Ethics and Professional Studies, and Research Methodology[. For the purpose of this regulation, the licensee must teach a minimum of four (4) clock hours.]; or

8. A licensed marital and family therapist teaching formal continuing education hours may receive up to a maximum of four (4) hours per biennial cycle of continuing education credit. The CE must relate to the following core areas: Theoretical Foundations of Marriage and Family Therapy, The Practice of Marriage and Family Therapy, Human Development and Family Studies, Ethics and Professional Studies, [and] **Diagnosis, or** Research Methodology. [For the purpose of this regulation the licensee must teach a minimum of four (4) clock hours.]

(B) A licensed marital and family therapist may obtain up to twenty (20) hours of self-study continuing education. Self-study of professional material includes relevant books, journals, periodicals, tapes, and other materials and preparation for relevant lectures and talks to public groups. Preparation credit may not be claimed pursuant to this regulation for presentations that are used for CE in the aforementioned paragraphs 1., 2., 6., 7., or 8.

(8) For the license renewal the licensed marital and family therapist shall verify the number of CE hours earned during the last two (2) years immediately preceding the expiration date of the license on a form provided by the state committee. The licensed marital and family therapist [shall] **does not need to** submit the actual record of CE attendance to the state committee except in the case of a continuing education audit or when requested by the state committee.

(9) Each licensed marital and family therapist shall maintain a complete record of all CE hours earned for four (4) years. Formal CE credit hours shall be documented by the sponsor or CE provider and maintained by the licensee. The licensee is responsible for maintaining the record of [formal self-study] CE hours earned and such documentation shall contain, at a minimum, the number of hours earned and [these hours shall be] separated [in] **into** the various categories defined in subsection (5)(A) of this regulation. The state committee may conduct an audit of the documentation to verify compliance with the continuing education requirement. A licensed marital and family

therapist shall assist the state committee in its audit by providing timely and complete responses to the state committee's inquiries. A response is considered timely if received in the committee office within thirty (30) days of a written request by the state committee for such information.

(10) A licensed marital and family therapist *[who cannot]* **unable to** complete the requisite number of CE hours because of personal illness, military service, or other circumstances beyond the licensed marital and family therapist's control may apply to the state committee for an extension of time to complete the continuing education requirements or a waiver. Any extension of time to complete the continuing education requirements or waiver shall be granted solely in the discretion of the state committee. The licensed marital and family therapist must make a written application for extension of time at least thirty (30) days before the expiration date of the license. *[The licensed marital and family therapist shall]* **and** provide full and complete written documentation *[of the grounds supporting the reasons for which an extension or waiver is sought].*

AUTHORITY: *section[s] 337.700, RSMo 2016, and sections 337.712[,] and 337.727(1) and (10), RSMo Supp. [2011] 2019. This rule originally filed as 4 CSR 233-2.050. Original rule filed Dec. 31, 1997, effective July 30, 1998. For intervening history, please consult the Code of State Regulations. Amended: Filed Sept. 5, 2019.*

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND INSURANCE

Division 2233—State Committee of Marital and Family Therapists

Chapter 3—Ethical Standards

PROPOSED AMENDMENT

20 CSR 2233-3.010 General Principles. The committee is deleting section (17), renumbering as necessary and amending sections (2), (5), (16), and (18).

PURPOSE: *This amendment rescinds unnecessary regulatory language.*

(2) Client or patient (hereinafter client) *[shall mean]* is a person, group, or any other recipient of marital and family therapy as defined in section 337.700(7), RSMo, or the client's legal guardian. A corporate entity or other organization can be a client when the professional contract is to provide services that benefit the organization as well as the individual or group.

(5) When developing competency in a new service or technique, the marital and family therapist shall engage in ongoing consultation with other therapists or relevant professionals and *[shall]* seek appro-

prate education and/or training in the new area, service, or technique. The therapist shall inform any client whose treatment will involve a newly developing service or technique of its innovative nature; the known risks associated with the new service or technique and the client's right to freedom of choice concerning services received.

(16) In deciding whether to offer marital and family therapy to a person already receiving similar services elsewhere, the therapist shall carefully consider the treatment issues and the potential client's welfare. The therapist shall discuss these issues with the client to minimize the probable risks of confusion and conflict, and *[shall]* proceed with caution and sensitivity to the therapeutic issues.

[(17)] **A therapist shall be familiar with any relevant law concerning the reporting of abuse of children and vulnerable adults, and shall comply with all applicable laws.]**

[(18)](17) When providing therapy as part of a team or when interacting with other appropriate professionals concerning the welfare of the client, the therapist may share confidential information about the client provided the therapist takes reasonable steps to assure that all persons receiving the information are informed about the confidential nature of the information and abide by the rules of confidentiality.

[(19)](18) The therapist shall limit access to client records and *[shall]* assure that all persons working under his/her authority comply with the requirements for confidentiality of client records.

[(20)](19) The therapist shall not mislead or withhold from any client, prospective client, or third-party payer, information about the cost of his/her professional services.

[(21)](20) The therapist shall not exploit a client or responsible payer by charging a fee that is excessive for the therapeutic services performed.

[(22)](21) The primary obligation of the therapist employed by an institution, agency, or school is to persons entitled to services through the institution, agency, or school. A therapist shall not accept a private fee or any other form of remuneration from those persons unless the policies of a particular institution, agency, or school make explicit provision for private work with its clients by members of its staff. In those instances, the client or guardian shall be fully apprised of available services and all applicable policies, prior to entering into a client-therapist relationship with the therapist.

[(23)](22) The therapist shall use, administer, and review assessment techniques competently and shall maintain current knowledge about research developments and revisions concerning the techniques that are used.

AUTHORITY: *sections 337.700[,] and 337.730.2(15), RSMo 2016, and section 337.727(6) and (10), RSMo Supp. [2011] 2019. This rule originally filed as 4 CSR 233-3.010. Original rule filed Dec. 31, 1997, effective July 30, 1998. Moved to 20 CSR 2233-3.010, effective Aug. 28, 2006. Amended: Filed June 27, 2008, effective Dec. 30, 2008. Amended: Filed Nov. 15, 2011, effective May 30, 2012. Amended: Filed Sept. 5, 2019.*

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 State Committee of Marital and Family Therapists, Gloria Lindsey, Executive Director, PO Box 1335, Jefferson City, MO 65102, by faxing comments to (573) 751-0735, or by emailing comments to maritalfam@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 COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 1—General Organization and Procedures**

PROPOSED AMENDMENT

20 CSR 2267-1.010 Definitions. The office is adding new section (2); renumbering as necessary; and amending renumbered sections (1), (3), (4), (11), (13), (16)–(18), (22)–(28), (30), (31), (33), (36), (37), and (38).

PURPOSE: This amendment adds the definition of “apprentice” and redefines “owner/operator.”

(1) “Antiseptic” *[means]* is a chemical product or substance that kills or inhibits the growth of bacteria and organisms on skin, living tissue, or work areas.

(2) “Apprentice” is any person registered with the division to engage in learning the practice of tattooing, body piercing, or branding under the supervision of a Missouri licensed practitioner.

[(2)](3) “Approved” *[means]* is acceptable to the Office of Tattooing, Body Piercing and Branding based on its determination of conformance to these rules and generally accepted standards of public health.

[(3)](4) “Autoclave” *[means]* is an apparatus, device, or mechanism for sterilizing articles by using superheated steam under pressure.

[(4)](5) “Body pierce” and “body piercing” is the perforation of human tissue other than an ear for a nonmedical purpose.

[(5)](6) “Body piercer” is any individual who, for a fee, performs body-piercing procedures on a human being, excluding the ears, at the patron’s request, including but not limited to:

- (A) Nose;
- (B) Tongue;
- (C) Nipple;
- (D) Eyebrow;
- (E) Navel;
- (F) Labrets (lips and around the mouth);
- (G) Male genitals;
- (H) Female genitals;
- (I) Multiple piercing in the same area; and
- (J) Unusual piercing, including the earl, which is surface to surface piercing located across the bridge of the nose and/or the madison which is surface to surface piercing located near the clavicle.

[(6)](7) “Body piercing establishment” is the premises where a body piercer performs body piercing.

[(7)](8) “Brand” and “branding” is a permanent mark made on human tissue by burning with a hot iron or other instrument.

[(8)](9) “Brander” is any individual who, for a fee, performs brand-

ing on a patron at the patron’s request.

[(9)](10) “Branding establishment” is the premises where a brander performs the process of branding.

[(10)](11) “Cleaning” is the removal of foreign material, soil, dirt, and any other type of debris from all equipment coming into contact with a patron[,] and is normally accomplished with detergent, water, and mechanical action.

[(11)](12) “Controlled substance” is any substance defined in section 195.010, RSMo.

[(12)](13) “Division” is the Division of Professional Registration, *[for the S]tate of Missouri.*

[(13)](14) “Disinfectant” is a chemical that is capable of destroying disease-causing organisms on inanimate objects, with the exception of bacterial spores.

[(14)](15) “Hot water” is water at a temperature of one hundred eleven degrees Fahrenheit (111°F) or higher.

[(15)](16) “Instruments used for tattooing, body piercing, or branding” are hand pieces, needles, needle bars, and other instruments that may come in contact with a patron’s body during tattooing, body piercing, and branding procedures.

[(16)](17) “Jewelry” is any personal ornament inserted into a newly pierced area, which must be made of surgical implant grade stainless steel, solid fourteen karat (14K) or eighteen karat (18K) white or yellow gold, sterling silver, niobium, titanium, or platinum. Jewelry shall be free of nicks, scratches, or irregular surfaces and properly sterilized prior to use in a piercing procedure. Ear studs are not considered jewelry for purposes of these regulations.

[(17)](18) “Minor” is a person under the age of eighteen (18).

[(18)](19) “Needle” is either of the following:

(A) The implement used to insert dyes or pigments into the dermis of the skin during permanent color or tattoo procedures; or

(B) The implement used to pierce or puncture a hole in any part of the human body, other than ears, for the purpose of inserting jewelry or other objects.

[(19)](20) “Needle bar” is the metal or plastic device used to attach the needle to a tattoo machine.

[(20)](21) “Office” is the Missouri Office of Tattooing, Body Piercing and Branding.

[(21)](22) “Owner”/“Operator” is the *[owner or]* person responsible *[to the owner]* for the operation of a tattoo, body piercing, and/or branding establishment.

[(22)](23) “Patron” is a person receiving a tattoo, body pierce, or brand.

[(23)](24) “Permanent cosmetic tattooing” includes eyeliner, eyebrows, lip liner, full lip color, repigmentation, or camouflage.

[(24)](25) “Practitioner” is a tattooist, body piercer, and/or brander.

[(25)](26) “Premises” is an entire building, structure, or area where tattooing, body piercing, and/or branding are performed. Establishments located in buildings that are also used as residences must be separated from the living quarters by solid floor to ceiling partitions and shall have a separate entrance from the residence.

[(26)](27) “Sharps container” is a puncture-resistant leak-proof container that can be closed for the purpose of handling, storing, transporting, and disposing of sharps waste. The containers shall be clearly and distinctly labeled with the “biohazard” symbol.

[(27)](28) “Sharps waste” is any solid waste that consists of medical equipment or clinical laboratory articles and implements that may cause punctures or cuts, such as tattoo needles, body piercing needles, hypodermic needles, syringes with attached needles, and lancets, whether contaminated or disinfected.

[(28)](29) “Single-use” is a product or item that is disposed of after one use, such as a needle, cotton swab or ball, tissue or paper product, a paper or soft plastic cup, nonabsorbent gloves, and/or gauze and other sanitary coverings.

[(29)](30) “Sterilization” is the killing of all organisms and spores through use of an autoclave operated at a minimum of two hundred fifty degrees Fahrenheit (250°F) and/or one hundred twenty-one degrees Celsius (121°C) at a pressure of at least fifteen (15) pounds per square inch for not less [then] than thirty (30) minutes.

[(30)](31) “Tattoo” is:—

(A) An indelible mark made on the body of another person by the insertion of a pigment under the skin; or

(B) An indelible design made on the body of another person by production of scars other than branding.

[(31)](32) “Tattoo establishment” is the premises where a tattooist performs tattooing on patrons.

[(32)](33) “Tattoo machine” (operable tattoo machine) is an electrical instrument used in conjunction with a tube, needle, and needle bar to make indelible marks on the skin.

[(33)](34) “Tattooist” is any individual who, for a fee, tattoos a patron at the patron’s request.

[(34)](35) “Tempered water” is water ranging in temperature of eighty-five degrees Fahrenheit (85°F) to less than one hundred ten degrees Fahrenheit (110°F).

[(35)](36) “Temporary establishment” is a single portable building structure, area, or location where tattooists, body piercers, and branders perform tattooing, body piercing, and/or branding for a maximum of fourteen (14) consecutive days per event.

[(36)](37) “Ultrasonic cleaning” [means] is a cleaning device that operates at forty to sixty (40–60) hertz.

[(37)](38) “Universal precautions” is an approach to infection control as defined by the Center for Disease Control (CDC). According to the concept of universal precautions, all human blood and certain body fluids are treated as if known to be infectious for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and other blood borne pathogens.

AUTHORITY: sections 324.520 and 324.522, RSMo [Supp. 2001] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-1.010, effective Aug. 28, 2006. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and Branding
Chapter 1—General Organization and Procedures

PROPOSED AMENDMENT

20 CSR 2267-1.020 Name, Telephone, and Address Changes. The office is amending the title, purpose, and sections (2) and (5).

PURPOSE: This amendment adds a telephone number to the list of contact information a licensee shall keep updated with the division.

PURPOSE: This rule outlines the requirements and procedures for notifying the division of a name, telephone, and/or address change.

(2) A licensed operator shall ensure that his or her correct name, **telephone number**, and mailing address [is] **are** on file with the division.

(5) A practitioner whose mailing address **or telephone number** has changed shall inform the division of the [address] changes within thirty (30) days of the effective date.

AUTHORITY: section 324.522, RSMo [Supp. 2001] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-1.020, effective Aug. 28, 2006. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and Branding
Chapter 1—General Organization and Procedures

PROPOSED AMENDMENT

20 CSR 2267-1.030 Tattoo, Body Piercing, and Branding Establishment—Change of Name, [Ownership] Owner/Operator, or Location. The office is amending the title, purpose, and sections (1) and (3) and deleting section (4).

PURPOSE: This amendment changes the requirements relating to

notifying the division of a change of name, owner/operator, or location. This amendment also outlines the requirements for deleting or adding a co-owner.

PURPOSE: This rule outlines the requirements and procedures for notifying the division of a change of name, [ownership] owner/operator or location of a tattoo, body piercing, or branding establishment.

(1) Change of Establishment Name.

(A) The establishment operator shall notify the division of the proposed name change **at least fifteen (15) days** prior to changing the business name and before revising any printed or electronic materials or advertisements.

(B) A duplicate license fee shall be submitted to the division along with written notification of the change of name at least [thirty (30)] **fifteen (15)** days prior to the effective date of the proposed change.

(3) Change of [Ownership] Owner/Operator.

(A) The owner/operator of a tattoo, body piercing, and/or branding establishment shall promptly notify the division of his or her intention to cease operations and shall supply the division with the name and mailing address of the new owner/operator, if any. An establishment license is not transferable. A new owner/operator shall submit a notarized application and fee as required in 20 CSR 2267-2.010 and 20 CSR 2267-2.020 and obtain a new license before operating the establishment.

(B) **Adding co-owner. The co-owners shall submit a notarized application to the division and obtain a new license. No additional fee is required.**

(C) **Deleting co-owner. If a co-owner(s) ceases ownership of an establishment, the establishment's remaining owner(s) shall notify the division of this change in writing. The written notice shall serve as documentation of the change, and a new application shall not be required.**

[(4) Refusal to permit a survey inspection, if required by the division, shall constitute grounds for discipline or denial.]

AUTHORITY: section 324.522, RSMo [Supp. 2007] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-1.030, effective Aug. 28, 2006. Amended: Filed June 16, 2008, effective Dec. 30, 2008. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 2—Licensing Requirements**

PROPOSED AMENDMENT

20 CSR 2267-2.010 Licenses. The office is amending sections (2)

and (4).

PURPOSE: This amendment clarifies that an apprentice can practice tattoo, body piercing, and/or branding without a practitioner license. The amendment also adds language regarding verification of licensure, certification, registration, or permit from other states, United States territories, provinces, or countries.

(2) No person, **other than an apprentice**, shall tattoo, body pierce, and/or brand another person[,]; use or assume the title of tattooist, body piercer, and/or brander[,]; designate or represent themselves to be a tattooist, body piercer, and/or brander unless he or she has obtained a license from the division for the profession practiced. An application for a practitioner license shall be notarized[,], and accompanied by the appropriate fee[,], and evidence of having successfully completed the following:

(C) An apprenticeship, which shall include at least three hundred (300) documented hours of practical experience that includes at a minimum fifty (50) completed procedures in each area that the applicant has filed an application for licensure. The documented work shall be certified and supervised by a currently licensed Missouri practitioner, **a currently licensed Missouri professional whose scope of practice includes tattooing, body piercing, and/or branding**, or by a practitioner who is licensed to practice tattooing, body piercing, and/or branding in another state, territory, or commonwealth whose requirements for licensure are substantially equivalent to the requirements for licensure in Missouri. A supervising practitioner shall register a person needing to meet the requirement set forth in [20 CSR 2267-2.010(2)(C)] **this subsection** by submitting an affidavit acknowledging the supervisory relationship on a form prescribed by the office. The affidavit shall be submitted by the supervising practitioner within ten (10) business days of beginning the supervisory relationship. The supervising practitioner shall be present during the entire procedure and shall be licensed in the same field of practice in which the applicant has filed a license application. Proof of having completed the apprenticeship requirement set forth in this section shall be submitted on forms prescribed by the office. The apprentice shall notify the office in writing within ten (10) business days of the termination of the supervisory relationship; or

(F) **All applicants shall ensure that each state, District of Columbia, United States territory, province, or country in which a license, certificate, registration, or permit to practice tattooing, body piercing, or branding is held or has ever been held to submit verification of licensure, certification, registration, or permit directly to the division. The verification shall include the license, registration, certification, or permit issued, the number, status, issue and expiration dates, information regarding disciplinary action and the name and title of the person verifying information with date and board seal.**

(4) The division shall not issue a license to a new or temporary tattoo, body piercing, and/or branding establishment [for a new operator at an existing establishment] without completing an inspection of the establishment to ensure that the establishment complies with the requirements set forth in these rules.

AUTHORITY: section 324.522, RSMo [Supp. 2008] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-2.010, effective Aug. 28, 2006. Amended: Filed April 10, 2008, effective Nov. 30, 2008. Amended: Filed July 22, 2009, effective Jan. 30, 2010. Amended: Filed Sept. 13, 2019.

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

PRIVATE COST: This proposed amendment will cost private entities approximately one hundred dollars (\$100) annually for the life of the

rule. It is 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.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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.*

PRIVATE ENTITY FISCAL NOTE

I. RULE NUMBER

Title 20 -Department of Commerce and Insurance
Division 2267 - Office of Tattoo, Piercing and Branding
Chapter 2 - Licensing Requirements
Proposed Amendment to 20 CSR 2267-2.010 Licenses

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated annual cost of compliance with the amendment by affected entities:
10	Verification @ \$10	\$100
	Estimated Annual Cost of Compliance for the Life of the Rule	\$100

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. The above figures were based on FY20 projections.
2. The division does not anticipate any growth in the number of verifications received each year.
3. Most states have eliminated the verification fee, however, the \$10 amount is an average verification fee charged by the remaining states.
4. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation, and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

**Title 20—DEPARTMENT OF COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 2—Licensing Requirements**

PROPOSED AMENDMENT

20 CSR 2267-2.020 Fees. The office is amending sections (1) and (3).

PURPOSE: This amendment establishes a fee for temporary courtesy licenses for non-resident military spouses authorized by section 324.008, RSMo.

(1) The operator of a tattoo, body piercing, or branding establishment shall pay *[a biennial license]* fees to the office as follows:

- (A) Establishment **application fee** \$200
- (B) Combined establishment **application fee** \$300
- (C) Establishment **renewal fee** \$200
 - [1. Effective April 1, 2019 through June 30, 2019 \$100]*
- (D) Combined establishment **renewal fee** \$300
 - [1. Effective April 1, 2019 through June 30, 2019 \$150]*

(3) A person who wishes to practice as a tattooist, body piercer, or brander shall pay *[a biennial]* fees to the division as follows:

- (A) Practitioner **application fee** \$100
- (B) **Renewal fee** for practitioner \$100
 - [1. Effective April 1, 2019 through June 30, 2019 \$50]*
- (C) Combined practitioner **application fee** \$120
- (D) **Renewal fee** for combined practitioner \$120
 - [1. Effective April 1, 2019 through June 30, 2019 \$60]*
- (E) **Temporary Courtesy License Application Filing Fee for nonresident military spouse** \$50

AUTHORITY: sections 41.950, 324.008, and 324.522, RSMo 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Amended: Filed Feb. 15, 2005, effective Aug. 30, 2005. Moved to 20 CSR 2267-2.020, effective Aug. 28, 2006. For intervening history, please consult the Code of State Regulations. Amended: Filed Sept. 13, 2019.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate. It will increase the revenue by thirty-five thousand one hundred fifty dollars (\$35,150) biennially for the life of the rule. It is 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 cost private entities approximately thirty-five thousand one hundred fifty dollars (\$35,150) biennially for the life of the rule. It is 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.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573) 526-3489, or via email at tattoo@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.

PUBLIC FISCAL NOTE

I. RULE NUMBER

Title 20 - Department of Insurance, Financial Institutions and Professional Registration
 Division 2267 - Office of Tattoo, Piercing and Branding
 Chapter 2 - Licensing Requirements
 Proposed Amendment to 20 CSR 2267-2.020 - Fees

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Increase of Revenue	
Office of Tattooing, Body Piercing and Branding	\$35,150	
	Total Increase in Revenue Biennially for the Life of the Rule	\$35,150

III. WORKSHEET

See Table Above

IV. ASSUMPTIONS

1. The estimated revenue is based on the costs reflected in the Private Entity Fiscal Note filed with this amendment.

Note: The public fiscal note for this rule only reflects the cost for this particular process. However, private entity fees are set at an amount to cover the total actual cost incurred by the office, which includes personal service, expense and equipment, and transfers.

PRIVATE FISCAL NOTE

I. RULE NUMBER

Title 20 -Department of Commerce and Insurance
Division 2267 - Office of Tattooing, Body Piercing and Branding
Chapter 2 - Licensing Requirements
Proposed Amendment to 20 CSR 2267-2.020 Fees

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated cost of compliance with the amendment by affected entities:
37	Establishment Renewal Fee (Renewal Fee @ \$200)	\$7,400
22	Combined Establishment Renewal Fee (Renewal Fee @ \$300)	\$6,600
175	Practitioner Biennial Renewal Fee (Annual Renewal Fee @ \$100)	\$17,500
36	Combined Practitioner Biennial Renewal Fee (Annual Renewal Fee @ \$100)	\$3,600
1	Temporary Courtesy License Application Fee (Temporary License Fee @ \$50)	\$50
Estimated Biennial Cost of the Amendment		\$35,150

III. WORKSHEET

See Table Above

IV. ASSUMPTIONS

1. The above figures were based on FY17 actuals and FY20 projections.
2. Pursuant to section 324.008, RSMo, which was enacted in 2011, occupational licensing boards shall establish by rule the criteria for the issuance of a temporary courtesy license to a nonresident spouse of an active-duty member of the military who is transferred to this state so that they may lawfully practice their profession. The office anticipates that there will be very few nonresident military spouse temporary courtesy license applicants. It is estimated that the board will have one (1) applicant biennially.
3. It is anticipated that the total costs will recur for the life of the rule, may vary with inflation, and is expected to increase at the rate projected by the Legislative Oversight Committee expected to increase at the rate projected by the Legislative Oversight Committee.

Note: The division is statutorily obligated to enforce and administer the provisions of sections 324.520 to 324.526, RSMo. Pursuant to section 324.522, RSMo, the division is responsible for establishing fees by rule. Fees are set, pursuant to section 324.524, RSMo, so that the revenue produced does not exceed three times the amount of the appropriation from the tattoo fund for the preceding fiscal year.

**Title 20—DEPARTMENT OF COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 2—Licensing Requirements**

PROPOSED AMENDMENT

20 CSR 2267-2.030 License Renewal. The office is amending sections (1) and (6).

PURPOSE This amendment inserts the correct statutory reference in section (1) and adds language which allows the holder of an establishment license to renew within two (2) years of their establishment license expiring.

(1) All practitioner and establishment licenses shall be renewed biennially. All licenses shall be renewed in odd numbered years and shall expire on June 30 as defined in 20 CSR 2231-2.010. Failure of a practitioner or the holder of an establishment license to renew the license shall cause the license to expire. A practitioner who continues to practice or a holder of an establishment license who continues to operate without a valid license shall be deemed to be practicing in violation of sections 324.520 to [324.524] **324.526**, RSMo.

(6) A holder of an establishment license who fails to renew said license by the expiration date [shall reapply under the regulations in effect at the time of reapplication.] **will cause the license to expire. Within two (2) years of the expiration date, the owner/operator may submit payment of the renewal fee, provide a completed renewal form as provided by the division and a statement regarding whether the establishment has been operating since the date of expiration. No original application for licensure is required if renewing within two (2) years of the license expiring.**

AUTHORITY: section 324.522, RSMo [Supp. 2008] **2016**. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-2.030, effective Aug. 28, 2006. Amended: Filed June 16, 2008, effective Dec. 30, 2008. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Sept. 13, 2019.

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

PRIVATE COST: This proposed amendment will cost private entities one hundred thirty-two dollars and thirty cents (\$132.30) biennially for the life of the rule. It is 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.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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.

PRIVATE FISCAL NOTE

I. RULE NUMBER

**Title 20 -Department of Commerce and Insurance
 Division 2267 - Office of Tattoo, Piercing and Branding
 Chapter 2 - Licensing Requirements
 Proposed Amendment to 20 CSR 2267-2.030 License Renewal**

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated cost of compliance with the amendment by affected entities:
270	Renewal Application Postage (Postage @ \$0.49)	\$132.30
	Estimated Biennial Cost of the Amendment for the Life of the Rule	\$132.30

III. WORKSHEET

See Table Above

IV. ASSUMPTIONS

1. Based on FY 2017 actuals, the division estimates that 211 practitioners and 59 establishments, biennially, will renew their licenses within two (2) years of the expiration date.
2. Not all fees are reported in this fiscal note. Please refer to 20 CSR 2267-2.020 for renewal fees. Applicants and licensees will be required to pay the fees and costs as required by the respective rule.
3. The postage expense described above do not result in any revenue to the office.
4. It is anticipated that the total 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.

Note: The division is statutorily obligated to enforce and administer the provisions of sections 324.520 to 324.526, RSMo. Pursuant to section 324.522, RSMo, the division shall by rule and regulation set the amount of fees authorized by sections 324.520 to 324.526, RSMo, so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the division for administering the provisions of sections 324.520 to 324.526, RSMo.

**Title 20—DEPARTMENT OF COMMERCE AND
INSURANCE**
**Division 2267—Office of Tattooing, Body Piercing, and
Branding**
Chapter 2—Licensing Requirements

PROPOSED RULE

**20 CSR 2267-2.034 Issuance of Temporary Courtesy License to
Nonresident Military Spouse**

PURPOSE: This rule states the requirements and procedures for a nonresident spouse of an active-duty member of the military who is transferred to this state in the course of the member's military duty to obtain a temporary courtesy license to practice for one hundred eighty (180) days.

(1) The division shall grant a temporary courtesy license without meeting further requirements for licensure to a "nonresident military spouse" as defined in section 324.008.1, RSMo, who provides the office the following:

(A) A completed application form;

(B) A non-refundable application fee, as established by the division pursuant to rule, made payable to the Office of Tattooing, Body Piercing and Branding;

(C) Verification sent directly to the division from the state, district, or territory from where the applicant holds a current and active license;

(D) Proof that the applicant has been engaged in active practice in the state, district, or territory of the United States in which the applicant is currently licensed for at least (2) years in the five (5) years immediately preceding this application;

(E) Verification sent directly to the division from each state, district, or territory of the United States in which the applicant has ever been licensed verifying that—

1. The applicant is, or was at the time of licensure, in good standing;

2. The applicant has not committed an act in any jurisdiction where the applicant has or had a license that would have constituted grounds for the refusal, suspension, or revocation of a license or certificate to practice at the time the act was committed; and

3. The applicant has not been disciplined by a licensing or credentialing entity in another jurisdiction and is not the subject of an unresolved complaint, review procedure, or disciplinary proceeding by a licensing or credentialing entity in another jurisdiction;

(F) If the division is unable to determine if the licensing requirements of the state, district, or territory in which the applicant is currently licensed are equivalent to Missouri's licensing requirements, the applicant shall submit documentation regarding the licensing requirements equivalency; and

(G) Such additional information as the division may request to determine eligibility for a temporary courtesy license.

(2) Any temporary courtesy license issued pursuant to this rule shall be valid for one hundred eighty (180) days from the date of issuance and may be extended for another one hundred eighty (180) days upon submission of a written request by the holder of the temporary courtesy license.

(3) If a nonresident military spouse seeks full licensure in this state during the time while the temporary courtesy license is valid, he or she may request full licensure by filing a written request with the division. Any fees paid for a temporary courtesy license shall be credited towards the application fees due for full licensure.

AUTHORITY: sections 324.008 and 324.522, RSMo 2016. Original rule filed Sept. 13, 2019.

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 cost private entities twelve dollars and ninety-eight cents (\$12.98) biennially for the life of the rule. It is 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.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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.

PRIVATE FISCAL NOTE

I. RULE NUMBER

**Title 20 -Department of Insurance, Financial Institutions and Professional Registration
Division 2267 - Office of Tattoo, Piercing and Branding
Chapter 2 - Licensing Requirements
Proposed Amendment to 20 CSR 2267-2.034 Issuance of Temporary Courtesy License to Nonresident
Military Spouse**

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated cost of compliance with the amendment by affected entities:
1	Temporary Courtesy License (Verification @ \$10)	\$10.00
1	Temporary Courtesy License (Postage @ \$0.98)	\$0.98
1	Temporary Courtesy License (Notary Fee @ \$2)	\$2.00
Estimated Biennial Cost of the Amendment for the Life of the Rule		\$12.98

III. WORKSHEET

See Table Above

IV. ASSUMPTIONS

1. Pursuant to section 324.008, RSMo, which was enacted in 2011, occupational licensing boards shall establish by rule the criteria for the issuance of a temporary courtesy license to a nonresident spouse of an active-duty member of the military who is transferred to this state so that they may lawfully practice their profession. The division anticipates that there will be very few nonresident military spouse temporary courtesy license applicants. It is estimated that the division will have one (1) applicant biennially.
2. Not all fees are reported in this fiscal note. Please refer to 20 CSR 2267-2.020 for the temporary courtesy license application fee. Applicants will be required to pay the fees and costs as required by the respective rule.
3. The expenses described above do not result in any revenue to the office.
4. It is anticipated that the total 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.

Note: The division is statutorily obligated to enforce and administer the provisions of sections 324.520 to 324.526, RSMo. Pursuant to section 324.522, RSMo, the division shall by rule and regulation set the amount of fees authorized by sections 324.520 to 324.526, RSMo, so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the division for administering the provisions of sections 324.520 to 324.526, RSMo.

Title 20—DEPARTMENT OF COMMERCE AND INSURANCE

Division 2267—Office of Tattooing, Body Piercing, and Branding
Chapter 3—Establishments

PROPOSED AMENDMENT

20 CSR 2267-3.010 Tattoo, Body Piercing and Branding Establishments. The office is amending subsection (1)(F) and adding section (4).

PURPOSE: The amendment clarifies that establishment records should be kept where inspectors can gain reasonable access and adds new language that refusal to grant an inspection shall be grounds for discipline or denial.

(1) Each operator of a licensed establishment shall—
(F) Be responsible for maintaining client records, in a manner where inspectors can gain reasonable access, for a minimum of two (2) years. If a tattoo requires more than one (1) visit to be completed, client records shall be maintained for two (2) years following the completion of the work;

(4) Refusal to permit an inspection, if required by the division, shall constitute grounds for discipline or denial.

AUTHORITY: section 324.522, RSMo [Supp. 2001] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-3.010, effective Aug. 28, 2006. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND INSURANCE

Division 2267—Office of Tattooing, Body Piercing, and Branding
Chapter 4—Temporary Establishments

PROPOSED AMENDMENT

20 CSR 2267-4.010 Temporary Establishment License. The division is amending sections (2) and (3).

PURPOSE: This amendment further defines the operation and facility requirements of a temporary establishment.

(2) Operator of a Temporary Establishment.
(A) The operator of a temporary establishment shall:
1. Hold a current license in the [S]state of Missouri or in another state and be at least eighteen (18) years old;
2. Submit a notarized application with the required temporary establishment fee;
3. Provide the division with a list of all practitioners who will

be working at the temporary establishment. Such a list shall set forth each practitioner's current license number and the status of his or her license; [and]

4. Only employ or allow licensed practitioners and registered apprentices to perform tattooing, body piercing, and/or branding procedures on the premises of the licensed establishment;

5. Ensure that each practitioner employed or practicing at the licensed establishment engages in the safe and sanitary practice of tattooing, body piercing, and/or branding including but not limited to the use of universal precautions and proper hygiene;

6. Conspicuously display for the public in the establishment the license issued by the division for the establishment and the license of each practitioner working in the establishment. A photograph of each practitioner shall be in close proximity to the license for that individual. The photograph shall measure approximately two inches by two inches (2" × 2") and shall have been taken within the last two (2) years;

7. Be responsible for maintaining client records for a minimum of two (2) years. If a tattoo requires more than one (1) visit to be completed, client records shall be maintained for two (2) years following the completion of the work;

8. Maintain all equipment used to perform tattooing, body piercing, and branding procedures in a safe and sanitary condition;

9. Provide for the removal of biohazardous waste, garbage, and refuse in a safe and sanitary manner;

10. Provide for the safe storage and removal of flammable materials; and

[4.]11. Be responsible for all practitioners.

(3) Facility.

(A) Each temporary establishment shall be equipped with[:/]—

1. An approved toilet and handwashing facility;

2. Potable water under pressure;

3. Hot or tempered water for handwashing and cleaning; [and/]

4. Connection to an approved sewage collection system[./];

5. Properly sterilized instruments and evidence of a spore test performed on sterilization equipment thirty (30) days or less prior to the date of the event must be provided; or single-use prepackaged, sterilized equipment obtained from reputable suppliers or manufacturers allowed;

6. Floors of the facility, which shall be smooth and impervious or be covered with an impermeable barrier;

7. A panel or other barrier of sufficient height and width to effectively separate a patron on whom a procedure is being performed from observers or waiting patrons, which shall be in place or readily available at the patron's request. A panel or barrier shall be in place or readily available and must be used during any tattooing, body piercing, or branding of the genital area; and

8. Easily cleanable waste containers with non-absorbent, durable plastic liners, which shall be used for disposal of all tissue, towels, gauze pads, and other similar items used on patrons. Infectious waste, including but not limited to sharps waste, shall be placed in a properly marked biohazard bag or sharps container and disposed of by an approved biohazardous waste company. All items which are single use and are not considered sharps waste that come in contact with body fluids must be placed in a biohazard container and disposed of by an approved biohazardous waste company.

(B) Each temporary establishment shall be constructed according to the following specification[s/]:

1. Each temporary facility shall be restricted to a stationary physical location, such as inside a permanent building[./]; and

2. Each temporary facility shall be equipped with a roof to prevent dust and debris from entering the establishment[.]

(C) No animals, except for those providing services to persons with disabilities, are permitted in a tattoo, body piercing, and/or

branding establishment.

AUTHORITY: sections 324.522 and 324.526, RSMo [Supp. 2001] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-4.010, effective Aug. 28, 2006. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 5—Standards of Practice**

PROPOSED AMENDMENT

20 CSR 2267-5.010 Standards of Practice. The division is amending subsections (1)(A) and (2)(A), and paragraph (3)(A)5.

PURPOSE: This amendment corrects statutory references and removes the restriction on alcoholic beverages under section (3).

(1) Competence.

(A) Each licensed tattooist, body piercer, or brander shall:

1. Practice within his or her scope of practice and shall not attempt any procedure that is beyond his or her level of competence or training;

2. Perform only those procedures for which he or she holds a license to perform pursuant to sections 324.520 to [324.524] 324.526, RSMo; and

3. Maintain the safe and sanitary practice of his or her profession, taking all necessary precautions to prevent the transfer of disease or infection from one patron to another, or from the licensee to a patron.

(2) Identification.

(A) Each practitioner shall carry on his or her person proper picture identification when practicing pursuant to sections 324.520 to [324.524] 324.526, RSMo. When requested to produce identification by an authorized agent of the division or office the licensee shall comply. A licensee's failure to produce proper picture identification upon request of an authorized agent shall be grounds for discipline by the division.

(3) Client Welfare.

(A) Each practitioner shall:

1. Conduct business and professional activities with honesty and integrity;

2. Obtain a signed informed consent from each patron prior to performing a tattooing, body piercing, and/or branding procedures;

3. Not engage in the practice of tattooing, body piercing, or branding on a patron with an exposed rash, skin lesion, boil, or any situation where contraindications exist;

4. Not engage in the practice of tattooing, body piercing, or branding while under the influence of alcohol or drug(s);

5. Not allow smoking or consumption of food or alcohol in the area where a tattoo, body piercing, or branding procedure is performed. Licensees and patrons may consume non-alcoholic beverages during the procedure. *Alcoholic beverages shall not be consumed on the premises;*

6. Utilize universal precautions at all times as defined in 20 CSR 2267-1.010. This includes hand washing before and after each procedure and refraining from exposing clients to infectious or contagious diseases;

7. Thoroughly wash his or her hands and the exposed portions of his or her arms with dispensed soap and tempered water before and after each procedure and more often as necessary to keep them clean;

8. Dry his or her hands and arms with individual single-service towels;

9. Maintain a high degree of personal cleanliness and conform to good hygiene practices during procedures;

10. Wear clean, washable outer clothing;

11. Wear non-absorbent gloves when preparing the skin and while performing each procedure. The non-absorbent gloves shall be for single-use only and disposed of after the completion of each procedure;

12. If while performing a tattoo, body piercing, or body branding, the practitioner's glove is pierced, torn, or otherwise contaminated, the contaminated gloves shall be immediately discarded and replaced with new gloves; and

13. If interrupted during a procedure and the interruption requires the use of the hands, a practitioner shall rewash his or her hands and put on new gloves before resuming the procedure.

AUTHORITY: section 324.522, RSMo [Supp. 2007] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-5.010, effective Aug. 28, 2006. Amended: Filed June 16, 2008, effective Dec. 30, 2008. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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 COMMERCE AND
INSURANCE
Division 2267—Office of Tattooing, Body Piercing, and
Branding
Chapter 5—Standards of Practice**

PROPOSED AMENDMENT

20 CSR 2267-5.040 Preparation and Care of Site. The division is amending section (1).

PURPOSE: This amendment corrects the statutory reference in section (1).

(1) Before beginning any procedure regulated pursuant to sections

324.520 to [324.524] **324.526**, RSMo, the tattooist, body piercer, or brander shall clean the skin area for the tattooing, body piercing, or branding and then prepare the area with an antiseptic. The solution shall be applied with cotton, gauze, or single-use toweling.

AUTHORITY: section 324.522, RSMo [Supp. 2001] 2016. Original rule filed Aug. 15, 2002, effective Feb. 28, 2003. Moved to 20 CSR 2267-5.040, effective Aug. 28, 2006. Amended: Filed Sept. 13, 2019.

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 Office of Tattooing, Body Piercing, and Branding, PO Box 1335, Jefferson City, MO 65102, via facsimile at (573)526-3489, or via email at tattoo@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.*

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

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

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.005 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1516-1520). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received two (2) comments for the proposed amendment.

COMMENT #1: A staff member indicated that “intake evaluation” should be changed to “eligibility determination” and “comprehensive” should be added before “assessment” in subsection (6)(A).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees these wording changes are necessary to be consistent with language used in other department CSRs and internal policies and procedures. The language in the rule has been changed.

COMMENT #2: A staff member indicated that “intake evaluation” should be changed to “eligibility determination” and “comprehensive” should be added before “assessment” in subsection (7)(A).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees these wording changes are necessary to be consistent with language used in other department CSRs and internal policies and procedures. The language in the rule has been changed.

9 CSR 30-4.005 Eligibility Criteria and Admission Criteria for Community Psychiatric Rehabilitation Programs

(6) Eligibility criteria for admission to a CPR program shall include:
(A) Disability—there is clear evidence of serious and/or substantial impairment in the individual’s ability to function at an age or developmentally appropriate level due to serious psychiatric disorder in each of the following two (2) areas of behavioral functioning as indicated by the eligibility determination and comprehensive assessment:

1. Social role functioning/family life—the ability to sustain functionally the role of a worker, student, homemaker, family member, or a combination of these; and

2. Daily living skills/self-care skills—the ability to engage in personal care (such as grooming, personal hygiene) and community living (handling individual finances, using community resources, performing household chores), learning ability/self-direction and activities appropriate to the individual’s age, developmental level, and social role functioning.

(B) Diagnosis—a licensed diagnostician certifies a primary diagnosis based on the *Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5)* published by and available from the American Psychiatric Association, 1000 Wilson Boulevard, Suite 1825, Arlington, VA 22209-3901 or the *International Classification of Diseases Tenth Revision (ICD-10)* published by and available from the World Health Organization, 525 23rd Street N.W., Washington, DC 20037. The diagnosis may coexist with other psychiatric diagnoses. Specific diagnoses for eligibility can be found in the *MO HealthNet CPR Provider Manual* published by and available from the Missouri Department of Social Services, 615 Howerton Court, PO Box 6500, Jefferson City, MO 65102-6500. The referenced documents do not include any later revisions or updates.

(C) Duration—rehabilitation services shall be provided for individuals whose mental illness is of sufficient duration as evidenced by one (1) or more of the following:

1. Received psychiatric treatment more intensive than outpatient more than once in a lifetime (crisis services, alternative home care, partial hospital, inpatient);

2. Experienced an occurrence of continuous residential care, other than hospitalization, for a period long enough to disrupt the normal living situation;

3. Exhibited the psychiatric disability for one (1) year or more; or

4. Treatment of the psychiatric disorder has been or will be required for longer than six (6) months.

(D) For adults and children age six (6) and above a functional assessment may be used to establish eligibility for CPR services, including results from a standardized assessment prescribed by the department.

(E) Individuals currently enrolled in a CPR program for youth are automatically eligible for admission to an adult CPR program when the transfer is determined to be clinically appropriate and documented in the record.

(7) Children and youth under the age of eighteen (18) may be provisionally admitted to a CPR program based on the following:

(A) Disability—there is clear evidence of serious and/or substantial impairment in the child’s ability to function at an age or developmentally appropriate level due to serious psychiatric disorder in each of the following two (2) areas of behavioral functioning as indicated by the eligibility determination and comprehensive assessment:

1. Social role functioning/family life—the child is at risk of out-of-home or out-of-school placement; and

2. Daily living skills/self-care skills—the child is unable to engage in personal care, such as grooming and personal hygiene, and in community living such as performing school work or household chores, learning, self-direction or activities appropriate to the individual's age, developmental level, and social role functioning.

(B) Diagnosis—if a child is exhibiting behaviors or symptoms consistent with a non-established CPR eligible diagnosis, he/she may be provisionally admitted for further evaluation. There may be insufficient clinical information because of rapidly changing developmental needs to determine if a CPR diagnosis is appropriate without an opportunity to observe and evaluate the child's behavior, mood, and functional status. In such cases documentation must clearly support the individual's level of functioning based on disability as defined in paragraph (A) of this rule.

(C) Duration—there must be documented evidence of the child's functional disability as defined in subsection (A) of this section for a period of ninety (90) days prior to provisional admission.

(D) Provisional admission shall not exceed ninety (90) days. Immediately upon completion of the ninety (90) days, or sooner if the individual has been determined to have an eligible diagnosis as indicated in subsection (A) of this section, the diagnosis must be documented and he/she may continue to receive services in the program.

(E) If a child who was provisionally admitted is determined to be ineligible for CPR services, staff shall directly assist the individual and/or family in arranging follow-up services needed. Arrangements for follow-up services must be documented in the discharge summary.

(F) All admission documentation is required for those provisionally admitted with the exception of the comprehensive assessment which may be deferred for ninety (90) days.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.010 Definitions is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1505). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

**9 CSR 30-4.020 Procedures to Obtain Certification
is rescinded.**

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1505). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

**9 CSR 30-4.030 Certification Standards Definitions
is rescinded.**

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1505). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

**9 CSR 30-4.031 Procedures to Obtain Certification for
Centers is rescinded.**

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1506). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.032 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1506-1507). Those sections with changes are reprinted

here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received two (2) comments for the proposed amendment.

COMMENT #1: A staff member recommended the wording in section (1) be revised by adding, “as a CPR program” after “certified or deemed certified.”

RESPONSE AND EXPLANATION OF CHANGE: The department agrees with this recommendation for clarification and consistency purposes and changed the language in section (1).

COMMENT #2: A staff member noted that the CSR number used in subsection (3)(B) is incorrect and should be changed to 9 CSR 30-4.005.

RESPONSE AND EXPLANATION OF CHANGE. The department agrees and corrected the CSR number in this subsection.

9 CSR 30-4.032 Administrative Structure for Community Psychiatric Rehabilitation Programs

(1) Each organization that is certified or deemed certified as a CPR program by the department shall comply with requirements set forth in Department of Mental Health Core Rules for Psychiatric and Substance Use Disorder Treatment Programs, 9 CSR 10-7.090 Governing Authority and Program Administration.

(3) The CPR program shall maintain a policy and procedure manual for all aspects of its operations including, but not limited to:

(A) Personnel and staff development in accordance with 9 CSR 30-4.034;

(B) Admission criteria, referral process, and transfer of records in accordance with 9 CSR 30-4.005;

(C) Provision of core and optional CPR services as specified in 9 CSR 30-4.043; and

(D) Specialized programs and/or services as specified in department contracts.

Title 9—DEPARTMENT OF MENTAL HEALTH Division 30—Certification Standards Chapter 4—Mental Health Programs

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.033 Fiscal Management of Community Psychiatric Rehabilitation Programs is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1507). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 9—DEPARTMENT OF MENTAL HEALTH Division 30—Certification Standards Chapter 4—Mental Health Programs

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental

Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.034 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1507-1510). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received one (1) comment for the proposed amendment.

COMMENT: A staff member recommended the word “agency” in section (1) be changed to “organization” and “as a CPR program” be added after “certified or deemed certified.”

RESPONSE AND EXPLANATION OF CHANGE: The department agrees with this recommendation for clarification and consistency purposes and changed the language in section (1).

9 CSR 30-4.034 General Staffing Requirements for Community Psychiatric Rehabilitation Programs

(1) Each organization that is certified or deemed certified as a CPR program by the department shall comply with requirements set forth in Department of Mental Health Core Rules for Psychiatric and Substance Use Disorder Treatment Programs, 9 CSR 10-7.110 Personnel.

Title 9—DEPARTMENT OF MENTAL HEALTH Division 30—Certification Standards Chapter 4—Mental Health Programs

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.035 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1510-1515). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received four (4) comments for the proposed amendment.

COMMENT #1: A staff member recommended the wording in section (1) be revised by changing “agency” to “organization” and adding “as a CPR program” after “certified or deemed certified.”

RESPONSE AND EXPLANATION OF CHANGE: The department agrees with this recommendation for clarification and consistency purposes and changed the language in section (1).

COMMENT #2: A staff member recommended paragraph (3)(A)22. be changed from “Military service history” to “Status as a current or former member of the U.S. Armed forces” to be consistent with terminology used in other department CSRs.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and changed the language in this section to ensure consistency with other department CSRs.

COMMENT #3: A staff member recommended paragraph (5)(B)7.

be revised by adding “and the” after “parent/guardian.”
RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change to provide clarification.

COMMENT #4: A staff member indicated that use of the wording, “in accordance with department policy” in section (8) is confusing and should be revised.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and revised the language to be more descriptive by changing the language to “with the timeframes established by the department.”

9 CSR 30-4.035 Eligibility Determination, Assessment, and Treatment Planning in Community Psychiatric Rehabilitation Programs

(1) Each organization that is certified or deemed certified as a CPR program by the department shall comply with requirements set forth in Department of Mental Health Core Rules for Psychiatric and Substance Use Disorder Treatment Programs, 9 CSR 10-7.030 Service Delivery Process and Documentation.

(3) Initial Comprehensive Assessment. A comprehensive assessment must be completed within thirty (30) days of eligibility determination.

(A) Documentation of the initial comprehensive assessment must include, at a minimum:

1. Basic information (demographics, age, language spoken);
2. Presenting concerns from the perspective of the individual, including reason for referral/referral source, what occurred to cause him/her to seek services;
3. Risk assessment (suicide, safety, risk to others);
4. Trauma history (experienced and/or witnessed abuse, neglect, violence, sexual assault);
5. Mental health treatment history;
6. Mental status;
7. Substance use treatment history and current use including alcohol, tobacco, and/or other drugs; for children/youth prenatal exposure to alcohol, tobacco, or other substances;
8. Medication information, including current medications, medication allergies/adverse reactions, efficacy of current or previously used medications;
9. Physical health summary (health screen, current primary care, vision and dental, date of last examinations, current medical concerns, body mass index, tobacco use status, and exercise level; immunizations for children/youth and medical concerns expressed by family members that may impact the child/youth);
10. Functional assessment using an instrument approved by the department (challenges, problems in daily living, barriers);
11. Risk-taking behaviors including child/youth risk behavior(s);
12. Living situation, including where living and with whom, financial situation, guardianship, need for assistive technology, and parental/guardian custodial status for children/youth;
13. Family, including cultural identity, current and past family life experiences, family functioning/dynamics, relationships, current issues/concerns impacting children/youth;
14. Developmental information, including an evaluation of current areas of functioning such as motor development, sensory, speech problems, hearing and language problems, emotional, behavioral, intellectual functioning, self-care abilities;
15. Spiritual beliefs/religious orientation;
16. Sexuality, including current sexual activity, safe sex practices, and sexual orientation;
17. Need for and availability of social, community, and natural supports/resources such as friends, pets, meaningful activities, leisure/recreational interests, self-help groups, resources from other agencies, interactions with peers including child/youth and family;
18. Legal involvement history;

19. Legal status such as guardianship, representative payee, conservatorship, probation/parole;

20. Education, including intellectual functioning, literacy level, learning impairments, attendance, achievement;

21. Employment, including current work status, work history, interest in working, and work skills;

22. Status as a current or former member of the U.S. Armed Forces;

23. Clinical formulation, an interpretive summary including identification of co-occurring or co-morbid disorders, psychological/social adjustment to disabilities and/or disorders;

24. Diagnosis;

25. Individual's expression of service preferences;

26. Assessed needs/treatment recommendations such as life goals, strengths, preferences, abilities, barriers; and

27. Signature of the staff person completing the assessment.

(5) Initial Treatment Plan. An individual treatment plan must be developed within forty-five (45) days of completion of eligibility determination for CPR services.

(A) The treatment plan is developed collaboratively with the individual or parent/guardian and a QMHP, the individual's community support supervisor, if different from the QMHP, and a physician/physician extender.

(B) Documentation for completion of the initial treatment plan must include, at a minimum:

1. Identifying information;
2. Goals as expressed by the person served and family members/natural supports, as appropriate, that are measurable, achievable, time-specific with start date, strength/skill based and include supports/resources needed to meet goals and potential barriers to achieving goals;
3. Specific treatment objectives, including a start date, that are understandable to the individual served, sufficiently specific to assess progress, responsive to the disability or concern, and reflective of age, development, culture, and ethnicity;
4. Specific interventions including action steps, modalities, and services to be used, duration and frequency of interventions, who is responsible for the intervention, and action steps of the individual served and his/her family/natural supports;
5. Identification of other agency/community resources and supports including others providing services, plans for coordinating with other agencies, services needed beyond the scope of the CPR program to be addressed through referral/services with another organization;
6. Anticipated discharge and continuing recovery planning which includes, but is not limited to, criteria for service conclusion, how will the individual served and/or parent/guardian and clinician know treatment goals have been accomplished; and
7. Signature of the individual or parent/guardian and the QMHP/community support supervisor.

A. Physician/physician extender signature must be obtained within ninety (90) days of completion of the eligibility determination after a face-to-face meeting, consultation, or case review. The physician/physician extender signature certifies treatment is needed and services are appropriate, as described in the treatment plan, and does not recertify the diagnosis.

B. A licensed psychologist may approve the treatment plan when the person served is not currently receiving prescribed medications and the clinical recommendations do not include a need for prescribed medications.

(C) If obtaining the individual's signature on the treatment plan is determined to be detrimental to their well-being and he/she does not sign the plan, a progress note must justify the lack of signature.

1. For persons eighteen (18) years of age and younger, the parent/guardian must sign the treatment plan. Lack of parent/guardian signature must be justified in a progress note.

2. For adults with a legal guardian, the guardian's signature

must be obtained. Lack of the guardian's signature must be justified in a progress note and include two (2) reasonable attempts to obtain the signature. Reasonable attempts include home visits, phone calls, mailed letters, and faxes to the guardian.

(8) Functional Assessment. A department-approved functional assessment must be completed with each individual as part of the initial comprehensive assessment. The functional assessment shall be updated in accordance with the timeframes established by the department to assess current level of functioning, progress toward treatment objectives, and appropriateness of continued services. The treatment plan shall be revised to incorporate the results of the initial functional assessment and subsequent updates.

(A) Documentation of the initial functional assessment and regular updates shall include, at a minimum:

1. Barriers, issues, or problems conveyed by the individual, parent/guardian, family/natural supports, and/or staff indicating the need for focused services;
2. A brief explanation of any changes or progress in the daily living functional abilities in the prior ninety (90) days; and
3. A description of the changes for the treatment plan based on information obtained from the functional assessment.

(B) Documentation of the findings from the functional assessment includes any of the following:

1. A narrative section with the treatment plan that includes the functional update content requirements;
2. A narrative section on the functional assessment with the content requirements; or
3. A progress note in the individual record documenting the content requirements.

(C) Completed functional assessments must be available to department staff and other authorized representatives for review/audit purposes upon request.

(D) For individuals receiving services in a community residential program, the functional assessment must be completed a minimum of every ninety (90) days and documented in the individual record.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.038 Client Rights for Community Psychiatric Rehabilitation Programs is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1515). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo

2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.039 Service Provision is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1515). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.040 Quality Assurance is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1515-1516). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.043 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1520-1526). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received four (4) comments for the proposed amendment.

COMMENT #1: A staff member requested that "APN" be changed to "APRN" in subsection (2)(H).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change to ensure consistent use of terminology in CSRs.

COMMENT #2: A staff member requested that subparagraphs (2)(I)1.B. and (2)(I)1.C. be combined.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and combined these subparagraphs to provide clarity and renumbered the remaining subparagraphs as necessary.

COMMENT #3: A staff member requested that “APN” be changed to “APRN” in subsection (2)(J).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change to ensure consistent use of terminology in the CSRs.

COMMENT #4: A staff member requested that the year 2004 be removed from “Individuals with Disabilities Education Act” in subsection (3)(D).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees the year should not be included and made this change.

9 CSR 30-4.043 Service Provision, Staff Qualifications, and Documentation Requirements for Community Psychiatric Rehabilitation Programs

(2) Core Services. At a minimum, CPR programs shall directly provide the following core services, or ensure the services are available through a subcontract as specified in 9 CSR 10-7.090(6):

(A) Eligibility determination, in accordance with 9 CSR 30-4.005;

(B) Initial comprehensive assessment, in accordance with 9 CSR 30-4.035;

(C) Annual assessment, in accordance with 9 CSR 30-4.035;

(D) Treatment planning, in accordance with 9 CSR 30-4.035;

(E) Community support, in accordance with 9 CSR 30-4.047;

(F) Crisis Intervention and Resolution—face-to-face emergency or telephone intervention available twenty-four (24) hours a day, on an unscheduled basis, to assist individuals in resolving a crisis and providing support and assistance to promote a return to routine, adaptive functioning. Services must be provided by a qualified mental health professional (QMHP). Nonmedical staff providing crisis intervention and resolution must have immediate, twenty-four (24) hour telephone access to consultation with a physician/physician extender. Minimum service functions shall include, but are not limited to—

1. Interacting with the identified individual and their family members/natural supports, legal guardian, or a combination of these;

2. Specifying factors that led to the individual’s crisis state, when known;

3. Identifying maladaptive reactions exhibited by the individual;

4. Evaluating potential for rapid regression;

5. Attempting to resolve the crisis; and

6. Referring the individual for treatment in an alternative setting when indicated.

7. Documentation must include—

A. A description of the precipitating event(s)/situation when known;

B. A description of the individual’s mental status;

C. The intervention(s) initiated to resolve the individual’s crisis state;

D. The individual’s response to the intervention(s);

E. The individual’s disposition; and

F. Planned follow-up by staff.

(G) Medication Administration—assures the appropriate administration and continuing effectiveness of medication(s) being prescribed for the individual served. Services must be provided by a physician, assistant physician, physician assistant, registered professional nurse (RN), licensed practical nurse (LPN), advanced practice nurse (APRN), psychiatric resident, or psychiatric pharmacist. Key service functions shall include—

1. Administering therapeutic injections of medication (subcutaneous or intramuscular);

2. Monitoring lab tests/levels including consultation with the physician(s), individual served, and community support specialist;

3. Coordinating medication needs with the individual served and his or her family members/natural supports, as appropriate, and pharmacy staff, including the use of indigent drug programs (does not include routine placing of prescription orders and refills with pharmacies);

4. Setting up medication boxes;

5. Delivering medication to the individual’s home;

6. Educating the individual about medications;

7. Recording the individual’s initial histories and vital signs;

8. Ensuring medication is taken as prescribed;

9. Monitoring side effects of medication including the use of standardized evaluations; and

10. Monitoring prescriber’s orders for treatment modifications and educating the individual served.

(H) Medication Services—goal-oriented interaction with the individual served regarding the need for medication and management of a medication regimen. A physician assistant, assistant physician, psychiatric resident, APRN, or psychiatric pharmacist may provide this service, subject to the guidelines and limitations promulgated for each specialty in statutes and administrative rules.

1. Individuals requiring or requesting medication shall be seen by a qualified staff person within fifteen (15) days, or sooner, if clinically indicated. All efforts shall be made to ensure established psychotropic medications are continued without interruption. Medication services must occur at least every six (6) months for individuals taking psychiatric medications. Key service functions shall include, but are not limited to—

A. Review of the individual’s presenting condition;

B. Mental status exam;

C. Review of symptoms and medication side effects;

D. Review of the individual’s functioning;

E. Review of the individual’s ability to self-administer medication;

F. Education on the effects of medication and its relationship to the individual’s mental illness and his/her choice of medication; and

G. Prescription of medications when indicated.

2. Documentation for medication services must include, at a minimum:

A. A description of the individual’s presenting condition;

B. Pertinent medical and psychiatric findings;

C. Observations and conclusions;

D. Any side effects of medication as reported by the individual;

E. Actions and recommendations regarding the individual’s ongoing medication regimen; and

F. Pertinent information reported by family members/natural supports regarding a change in the individual’s condition or an unusual or unexpected occurrence in his or her life, or both.

(I) Metabolic Syndrome Screening—identifies risk factors for obesity, hypertension, hyperlipidemia, and diabetes. The screening is required annually for adults and children/youth who are receiving antipsychotic medication.

1. Services must be provided by an RN or LPN. Key service functions shall include, but are not limited to—

A. Taking and recording vital signs;

B. Conducting lab tests to assess lipid levels and blood glucose levels and/or HgbA1c, or arranging and coordinating lab tests to assess lipid levels and blood glucose levels and/or HgbA1c;

C. Obtaining results of recently completed lab tests from other health care providers to assess lipid levels and blood glucose levels and/or HgbA1c; and

D. Recording the results of the metabolic screening on a form/tool approved by the department.

2. Metabolic syndrome screening is limited to no more than one (1) screening every ninety (90) days, per individual. If the lab tests are conducted by a nurse, an analyzer approved by the department must be used.

3. Documentation must reflect completion of the Metabolic Syndrome Screening and Monitoring Tool and a summary progress note.

(J) Physician Consultation/Professional Consultation—medical services provided by a physician, assistant physician, physician assistant,

APRN, psychiatric resident, or a psychiatric pharmacist. The service is intended to provide direction to treatment and consists of a review of an individual's current medical situation either through consultation with one (1) staff person, or a team discussion(s) related to a specific individual. This service cannot be substituted for supervision or face-to-face intervention with the individual. Key service functions shall include, but are not limited to:

1. An assessment of the individual's presenting condition as reported by staff;
2. Review of the treatment plan through consultation;
3. Participant-specific consultation with staff especially in situations which pose a high risk of psychiatric decompensation, hospitalization, or safety issues; and
4. Participant-specific recommendations regarding high risk issues and, when needed, to promote early intervention.

(K) Psychosocial Rehabilitation for Adults, in accordance with 9 CSR 30-4.046.

(3) Optional Services. In addition to the core services defined in subsection (2) of this rule, the following optional services may be provided directly by the CPR program, or through a subcontract as specified in 9 CSR 10-7.090(6):

(A) Adult Inpatient Diversion, in accordance with 9 CSR 30-4.045;

(B) Assertive Community Treatment (ACT), in accordance with 9 CSR 30-4.032;

(C) Children's Inpatient Diversion, in accordance with 9 CSR 30-4.045;

(D) Day Treatment for Children/Youth—an intensive array of services provided to children/youth in a highly structured and supervised environment designed to reduce symptoms of a psychiatric disorder and maximize the child's functioning so they can attend school and interact in their community and family setting. Services are individualized based on the child's needs and include a multidisciplinary approach to care under the direction of a physician. The provision of educational services must comply with the Individuals with Disabilities Education Act and section 167.126, RSMo.

1. Hours of operation are based on program capacity, staffing availability, space requirements, and as specified by the department.

2. Eligibility criteria includes—

A. For children six (6) years of age and older, he or she must be at risk of inpatient or residential placement as a result of a serious emotional disturbance (SED);

B. For children five (5) years of age or younger, he or she must exhibit one (1) or more of the following:

(I) Has been expelled from multiple day care/early learning programs due to emotional or behavioral dysregulation in relation to SED or diagnosis based on the 2016 edition of the *Diagnostic Classification of Mental Health and Development Disorders of Infancy and Early Childhood* (DC:0-5™), published by and available from ZERO TO THREE, 1255 23rd St. NW, Suite 350, Washington, DC 20037, telephone (202) 638-1144 or (800) 899-4301. The document incorporated by reference does not include any later amendments or additions;

(II) Is at risk for placement in an acute psychiatric hospital or residential treatment center as a result of a SED; or

(III) Has a score in the seriously impaired functioning level on the standardized functional tools approved by the department for this age range.

3. Key service functions shall include, but are not limited to:

A. Providing integrated treatment combining education, counseling, and family interventions;

B. Promoting active involvement of the parent/guardian in the program;

C. Consulting and coordinating with the child's/family's private service providers, as applicable, to establish and maintain continuity of care;

D. Coordinating and sharing information with the child's

school, including discharge planning, consistent with the Family Educational Rights and Privacy Act and Health Insurance Portability and Accountability Act (HIPAA);

E. Requesting screening and assessment reports from the child's school to determine any special education needs;

F. Planning the individualized educational needs of the child with his or her school; and

G. Providing other core services as prescribed by the department.

4. For programs serving children three (3) to five (5) years of age, services must be provided by a team of at least one (1) QMHP and one (1) appropriately certified, licensed, or credentialed ancillary staff. For programs serving school-age children, services must be provided by a team consisting of at least one (1) QMHP and two (2) appropriately certified, licensed, or credentialed ancillary staff. Ancillary staff include—

A. Occupational therapists;

B. Physical therapists;

C. Assistant behavior analysts;

D. Individuals with a bachelor's degree in child development, psychology, social work, or education; and

E. Individuals with an associate's degree, or two (2) years of college, and two (2) years of experience in a mental health or child-related field.

5. Documentation must include relevant information reported by family members/natural supports regarding a change in the child's condition or an unusual or unexpected occurrence in his/her life.

(E) Evidence-Based Practices for Children and Youth, in accordance with 9 CSR 30-4.045;

(F) Family Assistance—services focus on development of home and community living skills and communication and socialization skills for children and youth, including coordination of community-based services. Staff must have a high school diploma or equivalent and two (2) years of experience working with children who have a SED or have experienced abuse and neglect. Staff must also complete training approved by/provided by the department and be supervised by a QMHP. Key service functions shall include, but are not limited to:

1. Modeling appropriate behaviors and coping skills for the child;

2. Exposing the child to activities that encourage positive choices, promote self-esteem, support academic achievement, and develop problem-solving skills for home and school;

3. Teaching appropriate social skills through hands-on experiences; and

4. Mentoring appropriate social interactions with the child or resolving conflict with peers.

(G) Family Support—provides a support system for parents/caregivers of a child or youth seventeen (17) years of age and younger who has a SED. Activities are directed and authorized by the individualized treatment plan. Services must be provided by a family member of a child who has or had a behavioral or emotional disorder. The family member must have a high school diploma or equivalent certificate, complete training required by the department, and be supervised by a QMHP. Key service functions shall include, but are not limited to:

1. Providing information and support to the parents/caregivers so they have a better understanding of the child's needs and options to be considered as part of treatment;

2. Assisting the parents/caregivers in understanding the planning process and importance of their voice in the development and implementation of the individualized treatment plan;

3. Providing support to empower the parents/caregivers to be a voice for the child and family in the planning meeting;

4. Working with the family to highlight the importance of individualized planning and the strengths-based approach;

5. Assisting the family in understanding the roles of various providers and the importance of the team approach;

6. Discussing the benefits of natural supports within the family and community;

7. Introducing methods for problem-solving and developing strategies to address issues needing attention;

8. Providing support and information to parents and caregivers to shift from being the decision maker to the support person as the child/youth becomes more independent;

9. Connecting families to community resources;

10. Empowering parents and caregivers and children/youth to become involved in activities related to planning, developing, implementing, and evaluating programs and services; and

11. Connecting parents, caregivers, children/youth to others with similar lived experiences to increase their support system.

(H) Individual Professional PSR and Group Professional PSR—mental health interventions provided on an individual or group basis. A skills-based approach is utilized to address identified behavioral problems and functional deficits related to a mental disorder that interfere with an individual's personal, family, or community adjustment. Maximum group size is one (1) professional to eight (8) individuals. This service cannot be provided to individuals under the age of five (5). Services must be provided by the following staff who complete training required by the department:

1. A professional counselor licensed or provisionally licensed under Missouri law with specialized training in mental health services;

2. A licensed clinical social worker or master social worker licensed under Missouri law with specialized training in mental health services;

3. A licensed, provisionally licensed, or temporarily licensed psychologist under Missouri law with specialized training in mental health services; or

4. A marital and family therapist licensed or provisionally licensed under Missouri law with specialized training in mental health services.

(I) Integrated Treatment for Co-Occurring Disorders (ITCD), in accordance with 9 CSR 30-4.0431;

(J) Intensive CPR, in accordance with 9 CSR 30-4.045;

(K) Metabolic Syndrome Screening—optional service for individuals not receiving antipsychotic medications and, if provided, must be in accordance with paragraph (2)(I) of this rule;

(L) Peer Support—assists individuals in their recovery from a behavioral health disorder in a person-centered, recovery-focused manner. Individuals direct their own recovery and advocacy processes to develop skills for coping with and managing their symptoms, and identify and utilize natural support systems to maintain and enhance community living skills. Services are directed toward achievement of specific goals defined by the person served and specified in the individual treatment plan.

1. Services are provided by Certified Peer Specialists who have at least a high school diploma or equivalent certificate, complete applicable training and testing required by the department, and are supervised by a QMHP. Certified Peer Specialists are part of the individual's treatment team and participate in staff meetings/discussions related to services, but they cannot be assigned an independent caseload. The Certified Peer Specialist Code of Ethics must be followed. Job duties include, but are not limited to:

A. Starting and sustaining mutual support groups;

B. Promoting dialogues on recovery and resilience;

C. Teaching and modeling skills to manage symptoms;

D. Teaching and modeling skills to assist in solving problems;

E. Supporting efforts to find and maintain paid employment;

F. Using the stages in recovery concept to promote self-determination; and

G. Assisting peers in setting goals and following through on wellness and health activities.

2. Certified Peer Specialists use the power of peers to support, encourage, and model recovery and resilience from behavioral health

disorders in ways that are specific to the needs of each individual. Services may be provided on an individual or group basis and are designed to assist individuals in achieving the goals and objectives on their individual treatment plan or recovery plan. Activities emphasize the opportunity for individuals to support each other as they move forward in their recovery. Interventions may include, but are not limited to—

A. Sharing lived experiences of recovery, sharing and supporting the use of recovery tools, and modeling successful recovery behaviors;

B. Helping individuals recognize their capacity for resilience;

C. Helping individuals connect with other peers and their community at large;

D. Helping individuals who have behavioral health disorders develop a network for information and support;

E. Assisting individuals in making independent choices and taking a proactive role in their treatment;

F. Assisting individuals in identifying strengths and personal resources to aid in their recovery; and

G. Helping individuals set and achieve recovery goals.

(M) Professional Parent Home-Based Services, in accordance with 9 CSR 30-4.045;

(N) Psychosocial Rehabilitation Illness Management and Recovery (PSR-IMR), in accordance with 9 CSR 30-4.046;

(O) Psychosocial Rehabilitation for Youth, in accordance with CSR 30-4.046; and

(P) Intensive Home-Based Services for Children and Youth, in accordance with 9 CSR 30-4.045.

Title 9—DEPARTMENT OF MENTAL HEALTH Division 30—Certification Standards Chapter 4—Mental Health Programs

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.0431 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1526-1528). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received three (3) comments for the proposed amendment.

COMMENT #1: A staff member recommended that "Agencies" be changed to "Organizations" in section (2).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change to ensure consistency in the CSRs.

COMMENT #2: A staff member indicated the link to the document referenced in section (2) is incorrect and needs to be revised.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and inserted the correct link to the document in this section.

COMMENT #3: A staff member requested that "licensed prescriber" be changed to "physician/physician extender" in paragraph (5)(A)1.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change to ensure consistent use of terminology in the CSRs.

9 CSR 30-4.0431 Integrated Treatment for Co-Occurring Disorders (ITCD) in Community Psychiatric Rehabilitation Programs

(2) Organizations certified or deemed certified by the department as CPR programs may offer further specialized treatment for co-occurring psychiatric and substance use disorders and shall use the *Integrated Treatment for Co-Occurring Disorders: The Evidence resource KIT* published in 2010 by the U. S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Publication No. SMA-08-4366, Rockville, MD 20009. This publication may be downloaded at <https://store.samhsa.gov/product/Integrated-Treatment-for-Co-Occurring-Disorders-Evidence-Based-Practices-EBP-KIT/SMA08-4367>. The resource KIT incorporated by reference with this rulemaking does not include any later amendments or additions.

(5) Personnel and Staff Development. ITCD shall be delivered by a multidisciplinary team responsible for coordinating a comprehensive array of services available to the individual through CPR with the amount and frequency of service commensurate with the individual's assessed need.

(A) The multidisciplinary team shall include, but is not limited to, the following individuals:

1. A physician/physician extender;
2. A registered professional nurse;
3. A qualified mental health professional (QMHP);
4. Additional staff sufficient to provide community support and retain the responsibility for acquisition of appropriate housing and employment services;
5. A qualified addiction professional (QAP) defined as a person who demonstrates substantial knowledge and skill regarding substance use disorders by being one (1) of the following:
 - A. A physician or QMHP who is licensed or provisionally licensed in Missouri; or
 - B. A person who is certified or registered as a QAP by the Missouri Credentialing Board.

Title 9—DEPARTMENT OF MENTAL HEALTH Division 30—Certification Standards Chapter 4—Mental Health Programs

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.0432 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1528-1533). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received eight (8) comments for the proposed amendment.

COMMENT #1: A staff member recommended that “Agencies” be changed to “Organizations” and “by the department” be added after “as Community Psychiatric Rehabilitation (CPR) providers” in section (2).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made these changes to ensure consistency in CSR language.

COMMENT #2: A staff member indicated the link to the document referenced in section (2) is incorrect.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and inserted the correct link to the document referenced in this section.

COMMENT #3: A staff member requested the title for section (7) be changed to “Eligibility” Criteria rather than “Admission” Criteria. The staff member also requested the second sentence in this section be revised to better explain the eligibility criteria and that the CSR number cited be changed to 9 CSR 30-4.005.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and changed the section title and revised the second sentence to provide clarification, and corrected the CSR number.

COMMENT #4: A staff member requested subsection (7)(C) be revised to better explain the conditions which qualify an individual for ACT services.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and revised this subsection to provide clarification.

COMMENT #5: A staff member requested the term “admission” be changed to “eligibility” in subsection (8)(B).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and changed the term to “eligibility” to be consistent with other terminology used in this rule.

COMMENT #6: A staff member requested that “licensed prescriber” be changed to “physician/physician extender” in subsection (8)(I).

RESPONSE AND EXPLANATION OF CHANGE. The department agrees and changed the terminology to “physician/physician extender” to be consistent with other CSR language.

COMMENT #7: A staff member requested the term “identified” in subsection (9)(A) be changed to “specified”.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and changed the term to “specified” to provide clarification.

COMMENT #8: A staff member requested that subsection (10)(B) be revised because the sentence is confusing as written.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and revised this subsection to provide clarity.

9 CSR 30-4.0432 Assertive Community Treatment (ACT) in Community Psychiatric Rehabilitation Programs

(2) Organizations certified or deemed certified as Community Psychiatric Rehabilitation (CPR) providers by the department may offer ACT services and shall use the *Assertive Community Treatment: How to Use the Evidence-Based Practice KIT* published in 2008 by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services, Publication No. SMA-08-4344, Rockville, MD 20008. This publication may be downloaded at <https://store.samhsa.gov/product/Assertive-Community-Treatment-ACT-Evidence-Based-Practices-EBP-KIT/sma08-4345>. Agencies shall also use *A Manual for ACT Start-Up* by Deborah J. Allness, M.S.S.W. and William H. Knoedler, M.D., published in 2003 by National Alliance for the Mentally Ill (NAMI), 3803 N. Fairfax Drive, Suite 100, Arlington, VA 22203, (703) 524-7600. The documents incorporated by reference with this rule do not include any later amendments or additions.

(7) Eligibility Criteria. Adults or transition-age youth who receive ACT services typically have needs that have not been effectively addressed by traditional, less intensive behavioral health services. Individuals shall have at least one (1) of the diagnoses as specified

by the department, meet one (1) or more of the conditions specified in this rule, and meet all other CPR admission criteria as defined in 9 CSR 30-4.005.

(C) Individuals must meet one (1) or more of the following conditions to receive ACT services:

1. Recent discharge from an extended stay of three (3) months or more in a state hospital for an adult or an extended stay in a residential facility for transition-age youth (ages 16-25);

2. High utilization of two (2) admissions or more per year in an acute psychiatric hospital and/or six (6) or more per year for psychiatric emergency services;

3. Have a co-occurring substance use disorder greater than six (6) months duration;

4. Exhibit socially disruptive behavior with high risk of involvement in the justice system including arrest and incarceration;

5. Reside in substandard housing, is homeless, or at imminent risk of becoming homeless;

6. Experience the symptoms of an initial episode of psychosis within the past two (2) years (hallucinations, delusions or false beliefs, confused thinking, or other cognitive difficulties) leading to a significant decrease in overall functioning; or

7. Other indications demonstrating that the adult or transition-age youth has difficulty thriving in the community.

(8) Admission Process.

(B) When the team receives a referral for ACT services, the team leader shall confirm the individual meets the ACT eligibility criteria.

(I) The team's physician/physician extender shall approve the treatment plan. A licensed psychologist, as a team member, may approve the treatment plan only in instances when the individual is currently receiving no prescribed medications and the clinical recommendations do not include a need for prescribed medications.

(9) Comprehensive Assessment and Treatment Planning.

(A) To be in compliance with this standard, the team shall follow a systematic process including admission, comprehensive and ongoing assessment, and continuous treatment planning utilizing the assessment and treatment planning protocol and components included in the publication, *A Manual for ACT Start-Up* and in the fidelity protocol specified by the department.

(10) Service Provision.

(B) At least two (2) hours of direct ACT services shall be available on each day of the weekend and on holidays.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.045 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1533-1536). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received one (1) comment for the proposed amendment.

COMMENT #1: A staff member requested that Chapter 6 be added

to subsection (7)(B) where 9 CSR 40 is referenced.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and added Chapter 6 to provide clarification for the rules referenced in this subsection.

9 CSR 30-4.045 Intensive Community Psychiatric Rehabilitation (ICPR)

(7) Intensive Home-Based Services for Children and Youth. Intensive therapeutic interventions are provided to improve the child's functioning and prevent them from being removed from their natural home and placed into a more restrictive residential treatment setting due to a SED.

(B) Providers must complete extensive, specialized training required by the department and meet department licensure requirements as specified in 9 CSR 40-6.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.046 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1536-1539). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received one (1) comment for this proposed amendment.

COMMENT #1: A staff member requested that Chapter 9 be added to section (1) where 9 CSR 40 is referenced.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and added Chapter 9 to provide clarification for the CSR being referenced in this section.

9 CSR 30-4.046 Psychosocial Rehabilitation (PSR) in Community Psychiatric Rehabilitation Programs

(1) The PSR program must be accredited by CARF International, The Joint Commission, Council on Accreditation, or other accrediting body recognized by the department. If the Psychosocial Rehabilitation (PSR) program is not accredited, department licensure rules as specified in 9 CSR 40-9 shall apply.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health rescinds a rule as follows:

9 CSR 30-4.160 Client Records is rescinded.

A notice of proposed rulemaking containing the proposed rescission

was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1539). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.190 Outpatient Mental Health Treatment Programs is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1539-1540). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH
Division 30—Certification Standards
Chapter 4—Mental Health Programs**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Mental Health under sections 630.192, and 630.193 to 630.198, RSMo 2016, Department of Mental Health amends a rule as follows:

9 CSR 30-4.195 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1540-1543). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received four (4) comments for the proposed amendment.

COMMENT #1: A staff member requested subsection (4)(D) be revised because the sentence is confusing as currently written.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and revised the sentence to provide clarification.

COMMENT #2: A staff member requested that “individuals with limited English proficiency” be added to paragraph (5)(B)6. and paragraph (5)(K)6.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and added “individuals with limited English proficiency” to paragraph (5)(B)6. and (5)(K)6.

COMMENT #3: A staff member requested subsection (5)(P) be revised because as written it could be misinterpreted that this requirement can be avoided if the program does not have an established relationship with the local police department.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and revised the sentence to provide clarification that the requirement must be met regardless of whether the program has arrangements with their local police department.

COMMENT #4: A staff member requested that paragraph (6)(A)4. be revised to add “Department of Social Services” before “Family Support Division”, add the word “and” after “Children’s Division,” and add “Division of” before “Senior and Disability Services.”

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and added this terminology to clarify the state agency and division designations.

9 CSR 30-4.195 Access Crisis Intervention (ACI) Programs

(4) Records and Documentation Requirements.

(D) When a call is received on behalf of another individual who is in crisis, the caller and the individual in crisis must both be identified as recipients of the crisis intervention services provided by the ACI program. For data collection purposes, the identified service recipient is the individual in crisis.

(5) Treatment.

(B) ACI programs must operate or arrange for a twenty-four- (24-) hour per day, seven (7) day per week telephone hotline. Each program shall have a written description of the telephone hotline system including the following:

1. Name of the agency or contractor that operates the hotline;
2. Numbers and qualifications of hotline staff;
3. Written documentation that clinical supervision is provided including, but not limited to: meeting minutes, supervision logs, or peer review processes;
4. Written description of how the telephone hotline is staffed;
5. Written documentation of case reviews and quality assurance activities relating to hotline services;
6. Written documentation of how telephone hotline services are provided to individuals who are deaf, have limited English proficiency, or are from cultural minority groups;
7. Written description of ongoing hotline outreach activities; and
8. Written description of a process for identifying and utilizing community resources in the delivery of telephone hotline service.

(K) ACI programs must operate a twenty-four- (24-) hour per day, seven (7) day per week mobile response system. Each program shall have a written description of the mobile response system including the following:

1. Name of the agency or contractor that operates the mobile response system;
2. Written description of how mobile crisis response teams are staffed twenty-four (24) hours per day, seven (7) days per week;
3. Numbers and qualifications of staff;
4. Written documentation that clinical supervision is provided including, but not limited to: meeting minutes, supervision logs, or peer review processes;
5. Written documentation of case reviews and quality assurance activities relating to mobile response services; and
6. Written documentation of how mobile response services respond to individuals who are deaf, have limited English proficiency, or are from cultural minority groups.

(M) Mobile response shall not be provided exclusively in emergency rooms, jails, or mental health facilities.

(P) In crisis situations in which law enforcement need to be contacted by the ACI staff, the ACI staff must make the initial contact and remain involved until the crisis is resolved, by phone or with the mobile response team.

1. ACI staff shall first contact law enforcement officers trained in crisis intervention, if they are available in the city/county where the crisis situation is taking place and ACI staff have established arrangements to make direct contact with them.

(6) Performance Improvement.

(A) Each administrative agent must develop a community outreach/education plan that includes details of how the following groups will become familiar with the ACI system:

1. Families/natural supports;
2. Individuals receiving services;
3. Advocates of individuals receiving services;
4. State agencies including, but not limited to, the Department of Social Services, Family Support Division, Children's Division, and Division of Youth Services; the Department of Health and Senior Services, Division of Senior and Disability Services; and the Department of Corrections, Division of Probation and Parole;
5. Emergency responders (law enforcement agencies, 911, paramedics);
6. Primary and secondary schools;
7. Court system including, but not limited to, juvenile, family, mental health, and drug courts;
8. Residential care programs, homeless shelters, public housing;
9. Public health agencies;
10. Community health centers;
11. Primary care medical offices; and
12. General public.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 70—MO HealthNet Division
Chapter 3—Conditions of Provider Participation,
Reimbursement and Procedure of General Applicability

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, MO HealthNet Division, under section 208.152, RSMo Supp. 2019, and section 660.017, RSMo 2016, the division adopts a rule as follows:

13 CSR 70-3.310 Chiropractic Services is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on June 17, 2019 (44 MoReg 1666-1668). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES
Division 70—MO HealthNet Division
Chapter 20—Pharmacy Program

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, MO HealthNet Division, under sections 208.201, 338.505, and 660.017, RSMo 2016, the division amends a rule as follows:

13 CSR 70-20.320 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 3, 2019 (44 MoReg 1557-1558). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Department of Social Services received three (3) comments on the proposed amendment.

COMMENT #1: Drew Oestreich, Director of the Pharmacy Agent Corporation (PAC) stated that the PAC is in support of this rule change.

RESPONSE: The Department of Social Services (DSS) appreciates the comment from the PAC.

COMMENT #2: Ron L. Fitzwater, CEO of the Missouri Pharmacy Association (MPA) stated that the MPA is in support of this rule change.

RESPONSE: The Department of Social Services (DSS) appreciates the comment from the MPA.

COMMENT #3: Aaron Mealy, Special Assistant, Department of Social Services (DSS) commented that the authority needs to be updated to include 660.017, RSMo, which is generally applicable to all DSS regulations.

RESPONSE AND EXPLANATION OF CHANGE: The Department of Social Services will add 660.017, RSMo to the authority.

13 CSR 70-20.320 Pharmacy Reimbursement Allowance

AUTHORITY: sections 208.201, 338.505, and 660.017, RSMo 2016. Emergency rule filed June 20, 2002, effective July 1, 2002, expired Feb. 27, 2003. Original rule filed July 15, 2002, effective Feb. 28, 2003. For intervening history, please consult the Code of State Regulations. Amended: Filed April 26, 2019.

Title 15—ELECTED OFFICIALS
Division 50—Treasurer

Chapter 4—Missouri Education Savings Program

ORDER OF RULEMAKING

By the authority vested in the State Treasurer's Office under sections 166.415, RSMo Supp. 2019, and section 536.023, RSMo 2016, the treasurer amends a rule as follows:

15 CSR 50-4.010 General Organization is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 15, 2019 (44 MoReg 2012). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 15—ELECTED OFFICIALS
Division 50—Treasurer

Chapter 4—Missouri Education Savings Program

ORDER OF RULEMAKING

By the authority vested in the State Treasurer's Office under section 166.415, RSMo Supp. 2019, and section 536.023, RSMo 2016, the treasurer amends a rule as follows:

15 CSR 50-4.020 Missouri Education Savings Program is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 15, 2019 (44 MoReg 2012-2013). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed

amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 15—ELECTED OFFICIALS
Division 50—Treasurer
Chapter 4—Missouri Education Savings Program

ORDER OF RULEMAKING

By the authority vested in the State Treasurer's Office under section 166.415, RSMo Supp. 2019, and section 536.023, RSMo 2016, the treasurer amends a rule as follows:

**15 CSR 50-4.030 Missouri MOST 529 Matching Grant Program
is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 15, 2019 (44 MoReg 2013-2014). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.