FISCAL NOTE
PUBLIC COST

I. Department Title: Department of Health and Senior Services
Division Title: Division of Regulation and Licensure
Chapter Title: 19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities

Rule Number and Title:	19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
(34) Skilled Nursing Facilities	$40,129.20 annually
(15) Residential Care Facilities and Assisted Living Facilities	$5,751.00 annually
TOTAL COSTS =	**$45,880.20 annually**

III. WORKSHEET

Designated facility staff person

Median wages were used to calculate the average pay per hour for a designated facility staff person:

Manager/Administrator: $47.26 per hour
Licensed Practical Nurse (LPN): $22.23 per hour
Registered Nurse (RN): $35.24 per hour.
Social Services "designee": $23.07per hour

$47.26 + $22.23 + $35.24 + $23.07/4 = $31.95 average pay per hour for a designated facility staff person.

34 SNFs with a combined total of 3,139 licensed beds (residents) x 40%= 1256 residents choosing to utilize electronic monitoring devices.
15 public RCFs and ALFs with a combined total of 449 licensed beds (residents) x 40% =180 residents choosing to utilize electronic monitoring devices.

Costs of a designed facility staff person on public SNFs
One (1) facility staff person @ $31.95 per hour for one (1) hour x 1256 residents of 34 public owned SNFs = $40,129.20

Costs of a designed facility staff person on public RCF/ALFs
One (1) facility staff person @$31.95 per hour for one (1) hour x 180 residents of 15 public owned RCFs/ALFs = $5,751.00

Total for costs for public entities (RCF/ALF/SNF) to designate a staff person for oversight/management to ensure appropriate placement of an electronic monitoring device and to ensure the required prescribed form is properly completed, signed, and placed in the resident's medical record: $40,129.20+ $ $5,751 = **$45,880.20**

IV. ASSUMPTIONS

At least one (1) designated facility staff person will be needed for oversight/management to ensure appropriate placement of an electronic monitoring device and that the required prescribed form is properly completed, signed, and placed in the resident's medical record. The department assumes the facility may designate a manager/administrator, a licensed nurse, or a social services "designee" to complete this task. Furthermore, the department assumes it will take this designated staff person at least one (1) hour to review the prescribed form for completeness, file the form in the resident's medical record, and then work with the resident or their representative to determine appropriate placement of the electronic monitoring device.

The department is estimating once the emergency rule period ends on February 28, 2021 the number of residents or the resident's guardian or legal representative requesting to place an electronic monitoring device in the resident's room and the number of required forms needing to be completed will decrease. It is estimated on an annual basis at least forty percent (40%) of residents will need to have the required form completed to install an electronic monitoring device. This number is high because the Department has received an overwhelming response from families asking questions about this new law and expressing a desire to place electronic monitoring devices into their loved ones' rooms. Finally, as residents move in and out of facilities, move rooms and roommates change, then forms will have to be completed based on the situation.

There are a currently 34 public owned skilled nursing care facilities (SNFs) and 0 public owned intermediate care facilities that are licensed by the department:

Licensed ICFs = 0
Licensed SNFs = 34

There are currently 15 public owned residential care facilities (RCFs) and assisted living facilities (ALFs) that are licensed by the department:

Licensed RCFs/RCF IIs = 11
Licensed ALFs = 4

There are 0 public owned ICFs and 34 SNFs with a combined total of 3,139 licensed beds. The department estimates at least forty percent (40%) of residents, the residents' guardians or legal representatives will request to place and use an electronic monitoring device in the residents' rooms which would be 1,256 licensed beds/residents.

There are 15 public RCFs and ALFs with a combined total of 449 licensed beds. The department estimates at least forty percent (40%) of residents, or the residents' guardians

or legal representatives will request to place and use an electronic monitoring device in the residents' rooms which would be 180 licensed beds/residents.

The Department is not including the costs a facility may incur as a result of proper placement of residents' electronic monitoring devices because section 198.622, RSMo requires that the resident or the resident's guardian or legal representative is responsible to pay for all costs associated with conducting electronic monitoring, except for the costs of electricity.

The Department is also not including the costs of the facility to ensure all staff are knowledgeable of the applicable laws as this can be completed during in-service trainings that is already occurring or through other methods of training the facilities already utilize with their employees.

The Department is not including costs for the facility staff to help control (turn off and on) the electronic monitoring devices as indicated by the resident and any of the resident's roommates on their respective electronic monitoring forms. Any assistance that staff may provide to help control (turn off and on) the electronic monitoring devices will be part of the care already being given to the residents and roommates for activities of daily living. For example, a certified nurse assistant may turn off the electronic monitoring device before dressing a resident who has an electronic monitoring device pointed towards the resident because the resident checked the box on the resident's electronic monitoring device form electing to have the electronic monitoring device turned off when dressing.

Finally, the Department is not including costs to the facility or to the family to post electronic monitoring notices as these notices can be done on paper that the facility or families already have at their disposal.

FISCAL NOTE
PRIVATE COST

I. Department Title: Department of Health and Senior Services
Division Title: Division of Regulation and Licensure
Chapter Title: 19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities

Rule Number and Title:	19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities
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:
505	Intermediate Care Facilities and Skilled Nursing Facilities	$689,129.55 annually
636	Residential Care Facilities and Assisted Living Facilities	$347,871.60 annually
	TOTAL COSTS =	**$1,037,001.10 annually**

III. WORKSHEET

Designated facility staff person on private entities

Median wages were used to calculate the average pay per hour for a designated facility staff person:

Manager/Administrator: $47.26 per hour
Licensed Practical Nurse (LPN): $22.23 per hour
Registered Nurse (RN): $35.24 per hour.
Social Services "designee": $23.07per hour

= $47.26 + $22.23 + $35.24 + $23.07/4 = $31.95 per hour.

505 private ICFs and SNFs with a combined total of 53,922 licensed beds x .40= 21,569 licensed beds/residents who will utilize electronic monitoring devices.

636 private RCFs and ALFs with a combined total of 27,220 licensed beds x .40= 10,888 licensed beds/residents who will utilize electronic monitoring devices.

Costs of a designed facility staff person on private ICF/SNFs
One (1) facility staff person @$31.95 per hour for one (1) hour x 21,569 residents = $689,129.55

Costs of a designed facility staff person on private RCF/ALFs
One (1) facility staff person @$31.95 per hour for one (1) hour x 10,888 residents = $347,871.60

Total for costs for private (RCF/ALF/ICF/SNF) entities to designate a staff person for oversight/management to ensure appropriate placement of an electronic monitoring device and to ensure the required prescribed form is properly completed, signed, and placed in the resident's medical record: $689,129.55 + $347,871.60 = $1,037,001.10

IV. ASSUMPTIONS

At least one (1) designated facility staff person will be needed for oversight/management to ensure appropriate placement of an electronic monitoring device and to ensure the required prescribed form is properly completed, signed, and placed in the resident's medical record. The department assumes the facility may designate a manager/administrator, a licensed nurse, or a social services "designee" to complete this task. Furthermore, the department assumes it will take this designated staff person at least one (1) hour to review the prescribed form for completeness, file the form in the resident's medical record, and then determine appropriate placement of the electronic monitoring device.

The department is estimating once the emergency rule period ends on February 28, 2021 the number of residents or the resident's guardian or legal representative requesting to place an electronic monitoring device in the resident's room and the number of required forms needing to be completed will decrease. It is estimated on an annual basis at least forty percent (40%) of residents will need to have the required form completed to install an electronic monitoring device.

There are 505 private ICFs and SNFs with a combined total of 53,922 licensed beds. The department estimates at least forty percent (40%) of resident's, or the resident's guardian or legal representative will request to place and use an electronic monitoring device in the resident's room which would be 21,569 licensed beds/residents.

There are 636 private RCFs and ALFs with a combined total of 27,220 licensed beds. The department estimates at least forty percent (40%) of resident's, or the resident's guardian or legal representative will request to place and use an electronic monitoring device in the resident's room which would be 10,888 licensed beds/residents.

This fiscal note does not include costs a facility may incur as a result of proper placement of a residents electronic monitoring device because section 198.622, RSMo requires that the resident or the resident's guardian or legal representative is responsible to pay for all costs associated with conducting electronic monitoring, except for the costs of electricity.

The Department is also not including the costs of the facility to ensure all staff are knowledgeable of the applicable laws as this can be completed during in-service trainings

that already occurring or through other methods of training the facilities already utilize with their employees.

The Department is not including costs for the facility staff to help control (turn off and on) the electronic monitoring devices as indicated by the resident and any of the resident's roommates on their respective electronic monitoring forms. Any assistance that staff may provide to help control (turn off and on) the electronic monitoring devices will be part of the care already being given to the residents and roommates for activities of daily living. For example, a certified nurse assistant may turn off the electronic monitoring device before dressing a resident who has an electronic monitoring device pointed towards the resident because the resident checked the box on the resident's electronic monitoring device form electing to have the electronic monitoring device turned off when dressing.

Finally, the Department is not including costs to the facilities to post electronic monitoring notices as these notices can be done on paper that the facilities already have at their disposal.

Title 20—DEPARTMENT OF COMMERCE AND INSURANCE
Division 500—Property and Casualty
Chapter 4—Rating Laws

PROPOSED AMENDMENT

20 CSR 500-4.200 Rate and Supplementary Rates Information Filings. The director is amending the forms which follow the rule as exhibits in the *Code of State Regulations* and deleting the actual amount of the filing fee in Exhibit A.

PURPOSE: This proposed amendment will accurately reflect filing fees as stated in 374.230(6) RSMo, updated on January 1, 2019 and allows for text within the exhibits to be more legible.

(4) Required Filing Documents. All insurer filings which refer to a rating organization prospective loss costs reference filing shall include, in the order listed, the following documents:

(A) Reference Filing Adoption Form (Exhibit A);

(B) Summary of Supporting Information Form (Exhibit B);

(C) Expense Constant Supplement Form (Exhibit C, if needed); and

Exhibit A

Date:_____

Insurer Rate Filing
Adoption of Advisory Organization
Prospective Loss Costs
Reference Filing Adoption Form

Space Reserved for Insurance Department Use

1. INSURER NAME & ADDRESS _____

_____

_____

PERSON RESPONSIBLE FOR FILING _____

TITLE _____ TELEPHONE #_____

2. INSURER NAIC #_____

3. LINE OF INSURANCE _____

4. ADVISORY ORGANIZATION _____

5. ADVISORY ORGANIZATION REFERENCE FILING #_____

6. The above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files to be deemed to have independently submitted as its own filing the prospective loss costs in the captioned Reference Filing.

The insurer's rates will be the combination of the prospective loss costs and the loss costs multipliers and, if utilized, the expense constants specified in the attachments.

7. PROPOSED RATE LEVEL CHANGE _____% EFFECTIVE DATE _____

8. PRIOR RATE LEVEL CHANGE _____% EFFECTIVE DATE _____

9. ATTACH "SUMMARY OF SUPPORTING INFORMATION FORM"

(Use a separate Summary for each insurer---selected loss cost multiplier)

10. CHECK ONE OF THE FOLLOWING-

☐ The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and, if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Director, or amended or withdrawn by the insurer.

☐ The insurer hereby files to have its loss costs multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

11. Attach filing fee. Section 374.230 (6). RSMo.

Exhibit B

Date:_____

Insurer Name: _____
NAIC Number: _____

Insurer Rate Filing
Adoption of Advisory Organization Prospective Loss Costs
Summary of Supporting Information Form

Calculation of Company Loss Cost Multiplier

1. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies:

_____

2. Lost Cost Modification:

A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:
(CHECK ONE)

☐ Without modification (factor = 1.000)

☐ With the following modifications (s). (Cite the nature and percent modification, and attach supporting data, rationale, or both, for the modification.)

_____

_____

B. Loss Cost Modification Expressed as a Factor
(See examples below.)

NOTE: If Expense Constants Are Utilized, Attach "Expense Constants Are Utilized, Attach Constant Supplement" Or Other Supporting Information. Do Not Complete Items 3---7 Below.

3. Development of Expected Loss Ration. (Attach exhibit detailing insurer expense data or other supporting information or both.)

Selected Provisions

A.	Total Production Expense	_____%
B.	General Expense	_____%
C.	Taxes, Licenses & Fees	_____%
D.	Underwriting Profit & Contingencies	_____%
E.	Other (explain)	_____%
F.	TOTAL	_____%

4A. Expected Loss Ratio: ELR = 100% - 3F = _____%

4B. ELR in decimal form = _____

5. Company Formula Loss Cost Multiplier. (2B / 4B) = _____

6. Company Selected Loss Cost Multiplier = _____
Explain any differences between 5 and 6:

_____

_____

7. Rate level change for the coverages to which this page applies _____%

Example 1: Loss Cost modification factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss Cost modification factor: If your company's loss cost modification is +15%, a factor of 1.15 (1.000 + .150) should be used.

Exhibit C

Date:_____

Insurer Name: _____
NAIC Number: _____

Expense Constant Supplement
Calculation of Company Loss Cost Multiplier with Expense Constants

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data, or other supporting information, or both.)

	Overall	Selected Provisions Variable	Fixed
A. Total Production Expense	_____	_____	_____
B. General Expense	_____	_____	_____
C. Taxes, License & Fees	_____	_____	_____
D. Underwriting Profit & Contingencies	_____	_____	_____
E. Other (explain)	_____	_____	_____
F. TOTAL	_____	_____	_____

4. A. Expected Loss Ratio: ELR = 100% - Overall 3F = _____
B. ELR expressed in decimal form = _____
C. Variable Expected Loss Ratio VELR = 100% - Variable 3F = _____
D. VELR in decimal form = _____

5. Formula Expense Constant:
[(1.00 ÷ 4B) – (1.00 ÷ 4D)] × Average Underlying Loss Cost = _____

Formula Variable Loss Cost Multiplier: (2B ÷ 4D) = _____

6. Selected Expense Constant = _____

Selected Variable Loss Cost Multiplier = _____

7. Explain any differences between 5 and 6:
_____
_____
_____

8. Rate level change for the coverages to which this page applies _____%

*AUTHORITY: sections 374.045, 379.316, [and 379.321, RSMo 1986 and] 379.882, and 379.888, RSMo [Supp. 1990] **2016, and section 379.321, RSMo Supp. 2020**. This rule was previously filed as 4 CSR 190-16.045. Original rule filed Jan. 17, 1990, effective May 1, 1990. Amended: Filed Aug. 21, 2020.*

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 OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Commerce and Insurance, Attention: Stewart Freilich, PO Box 690, Jefferson City, Missouri 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. A public hearing is scheduled for 9:30 am, November 4, 2020, at 301 W. High Street, Room 530, Jefferson City, MO 65101.*

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

PROPOSED RULE

20 CSR 2220-2.195 Prospective Drug Utilization Review

PURPOSE: This rule establishes requirements for prospective drug utilization review prior to dispensing a prescription or medication order.

(1) Prospective Drug Review.

(A) Prior to dispensing or otherwise approving medication for patient use, pharmacists shall use their professional judgment to review available patient records to assess therapeutic appropriateness.

(B) The pharmacist shall take appropriate steps within their professional judgment to address or resolve identified therapeutic appropriateness issues. Prospective drug review may only be performed by a pharmacist or an intern pharmacist working under the supervision of a Missouri licensed pharmacist.

AUTHORITY: sections 338.100 and 338.280, RSMo 2016, and sections 338.035 and 338.140, RSMo Supp. 2020. Original rule filed Sept. 1, 2020.

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 hundred thirty thousand three hundred sixty-one dollars and fifty cents ($330,361.50) 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 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 2220-2.195 Prospective Drug Utilization Review**
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:
1,538	Resident Missouri Pharmacies	$ 330,361.50 *recurring annually over the life of the rule*

III. ASSUMPTIONS/WORKSHEETS

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

1. Based on staff research and licensee feedback, drug utilization review (DUR) is currently required for designated Medicare patients, and by private insurers and third-party accreditation entities (e.g., Joint Commission). Additionally, a Board survey revealed the majority of Missouri hospitals and larger chain pharmacies currently require a DUR pursuant to their internal policies/procedures. Further, a significant number of pharmacy electronic systems are equipped with electronic DUR capabilities that will substantially assist pharmacists with DUR functions.
2. Approximately 1,538 resident Missouri pharmacies were licensed by the Board at the end of FY 19. Based on the above feedback and research, the Board estimates 99% of all Missouri resident pharmacies are currently performing a prospective DUR, as required by the rule and will not be fiscally impacted. The Board estimates the remaining 1% of Missouri resident pharmacies, or fifteen (15) pharmacies, will be required to take additional measures to comply with the proposed DUR requirements.
3. The Board estimates an average of one (1) hour of additional pharmacist time would be needed to perform the required DUR, for each of the estimated 15 pharmacies not currently in compliance with the rule. An hourly pharmacist salary of $ 60.34 is estimated based on 2019 data from the United States Bureau of Labor Statistics Occupational Employment and Wages.
4. Accordingly, the Board estimates private fiscal impact of $ 330,361.50 per year, recurring annually over the life of the rule ($60.34 pharmacist hourly salary x 1 hour x 365 days per year x 15 resident pharmacies).
5. Total estimated costs may vary with inflation and increase at the rate projected by the Legislative Oversight Committee.

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 of 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 20—DEPARTMENT OF COMMERCE AND INSURANCE
Division 2220—State Board of Pharmacy
Chapter 3—Negative Generic Drug Formulary

ORDER OF RULEMAKING

By the authority vested in the State Board of Pharmacy under section 338.280, RSMo 2016, the board amends a rule as follows:

20 CSR 2220-3.040 Return and Reuse of Drugs and Devices **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 15, 2020 (45 MoReg 947-948). 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 board received one (1) comment on the proposed amendment.

COMMENT #1: G.L.O. & Associates recommended the board add an additional subsection to the rule to prohibit commingling of return-to-stock medication with different National Drug Code (NDC) numbers in the same unit, container or cartridge, "unless the change in NDC number only relates to a different package size."
RESPONSE: The board believes additional research/licensee engagement is needed to determine when a new NDC is assigned and if the reasons for a change in NDC number would be readily known by a pharmacist. As a result, no changes have been made in response to the comment at this time. However, the board will take the comment under advisement during its future deliberations on pharmacy operational standards. The board will also educate licensees to ensure appropriate staff training/education once the rule becomes effective.

Title 20—DEPARTMENT OF COMMERCE AND INSURANCE
Division 2250—Missouri Real Estate Commission
Chapter 5—Fees

ORDER OF RULEMAKING

By the authority vested in the Missouri Real Estate Commission under section 339.120, RSMo Supp. 2019, the commission amends a rule as follows:

20 CSR 2250-5.020 Application and License Fees **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 15, 2020 (45 MoReg 948-950). 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 20—DEPARTMENT OF COMMERCE AND INSURANCE
Division 2263—State Committee for Social Workers
Chapter 1—General Rules

ORDER OF RULEMAKING

By the authority vested in the State Committee for Social Workers under section 337.627, RSMo Supp. 2019, the committee amends a rule as follows:

20 CSR 2263-1.035 Fees **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 15, 2020 (45 MoReg 951-952). 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.