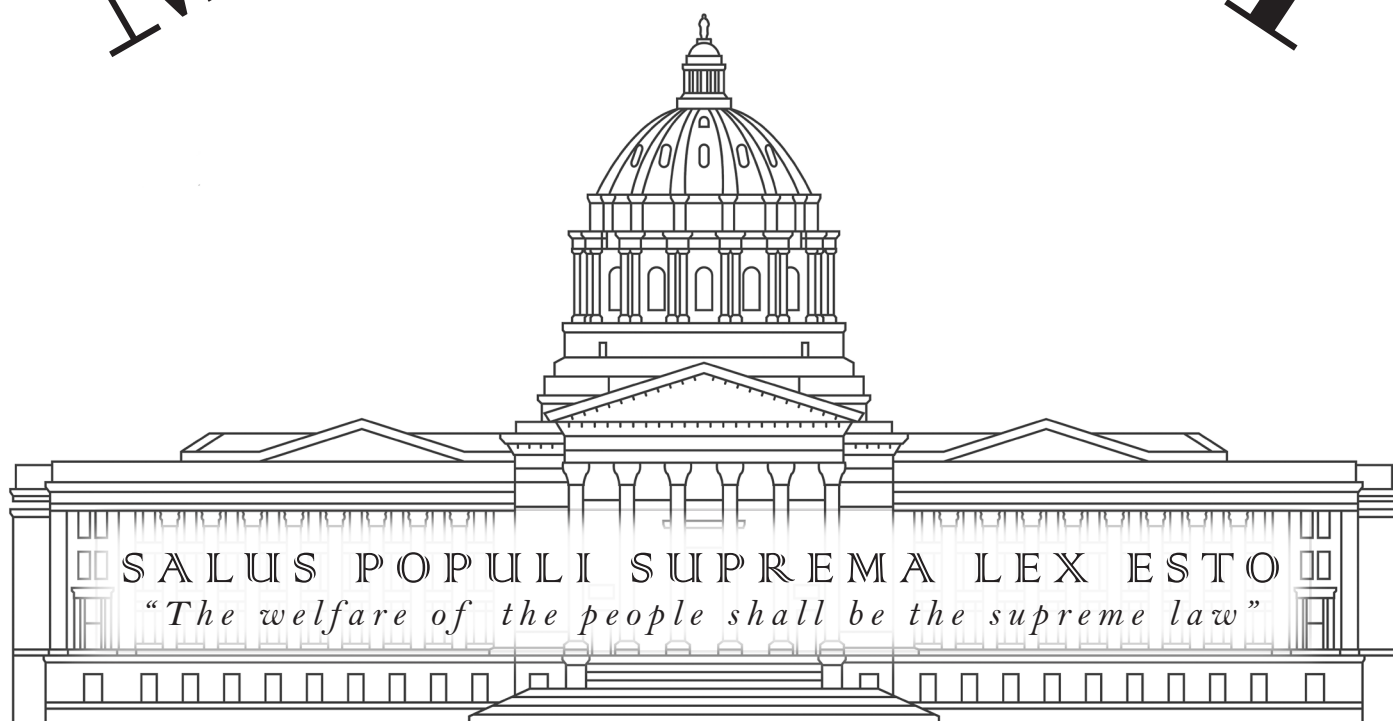


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MISSOURI



REGISTER

Denny Hoskins



Secretary of State

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MISSOURI



REGISTER

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Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule. To review the entire year's schedule, please see 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	CSR	Division	Chapter	Rule
3	<i>Code of</i>	10-	4	115
Department	<i>State</i>	Agency	General area	Specific area
	<i>Regulations</i>	division	regulated	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

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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 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30 – Division of Regulation and Licensure Chapter 35 – Hospices

EMERGENCY AMENDMENT

19 CSR 30-35.020 Hospice Providing Direct Care in a Hospice Facility. The department is amending portions of section (4) General Design and Construction Standards for New Inpatient Hospice Facilities.

PURPOSE: This emergency amendment eliminates the pre-construction plan review and approval process previously conducted by the department's Engineering Consultation Unit, clarifies a project notification requirement, and outlines the provision of relevant project information upon request to ensure efficient deployment of resources while maintaining regulatory oversight.

EMERGENCY STATEMENT: This emergency amendment is necessary to preserve a compelling governmental interest and protect the public health, safety, and welfare of vulnerable, terminally ill patients across Missouri. Following legislative and budgetary realignments for fiscal year 2027, the department's Engineering Consultation Unit (ECU) has been eliminated, terminating all pre-construction plan reviews and associated consultations. Without this emergency amendment, existing

administrative rules would continue to mandate a plan review and approval process that the department no longer has the staff or funding to execute. This structural contradiction would result in an immediate, indefinite freeze on all new construction, expansions, and conversions of inpatient hospice facilities, stalling vital healthcare infrastructure and preventing vulnerable patients from accessing necessary end-of-life care. By implementing a streamlined pre-construction notification protocol and shifting the burden of safety verification onto the facilities while maintaining final on-site inspection authority, the department prevents critical delays while safeguarding the public.

*As a result, the department finds a compelling government interest, which requires this emergency action. A proposed amendment, which covers the same material, is published in the September 15, 2026, issue of the **Missouri Register**. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the **Missouri** and **United States Constitutions**. The department believes that this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed Aug. 6, 2026, becomes effective Aug. 20, 2026, and expires Feb. 15, 2027.*

(4) General Design and Construction Standards for New Inpatient Hospice Facilities.

(A) Health and Safety Laws. The hospice shall meet all federal, state and local laws, ordinances, regulations and codes pertaining to health and safety, including but not limited to, provisions regulating construction, maintenance and equipment.

1. General Requirements.

A. *[After October 30, 1996, a]* A new hospice facility shall *[submit plans for approval to]* **notify** the Department *[of Health]* **of intention** for the construction of a new facility, expansion or renovation of an existing state certified hospice or the conversion of an existing facility not previously and continuously state certified and operated as a hospice facility under section 197.250, RSMo.

B. New hospice facilities shall be designed and constructed in conformance with this rule.

C. This rule is not intended to restrict innovations and improvements in design or construction techniques. Accordingly, the Department *[of Health]* may approve *[plans and specifications which contain]* deviations from this rule. Requests for deviations from requirements on physical facilities shall be in writing to the Department *[of Health]* and shall contain information which determines that the respective intent or objectives of this rule have been met. Approvals for deviations shall be in writing and both requests and approvals shall be made a part of the permanent Department *[of Health]* records for the hospice.

D. Where renovation or replacement work is done within an existing licensed facility, all new work, additions, or both, shall comply with the applicable sections of this rule. Where existing major structural elements make total compliance impractical or impossible, alternative proposals which result in an equivalency may be considered by the department.

E. In renovation projects and additions to existing state certified hospice facilities, only that portion of the total facility affected by the project shall comply with the applicable sections of this rule. However, upon construction completion, the facility shall satisfy all functional requirements for state certified hospices.

F. Those existing portions of the facility which are not included in the renovation but which are essential to the functioning of the complete facility as well as existing state

certified building areas that receive less than substantial amounts of new work shall, at a minimum, comply with the state certification requirements which were in effect at the time that the existing portion of the building was state certified.

G. All required fire exits shall be maintained throughout the construction and the work shall be phased as necessary to minimize disruption of the existing hospice operation.

2. Planning and Construction Procedures.

A. Any hospice facility constructed or renovated *[after October 30, 1996]* shall have plans and specifications prepared in conformance with Chapter 327, RSMo by an architect or engineer duly registered in Missouri. The owner of each new facility or the owner of an existing licensed inpatient hospice being added to or undergoing major alterations shall provide a program – scope of services – which describes space requirements, staffing patterns, departmental relationships, and other basic information relating to the objectives of the facility. The program may be general but it shall include a description of each function to be performed, approximate space needed for these functions, and the interrelationship of various functions and spaces. The program shall describe how essential services can be expanded in the future as the demand increases. Appropriate modifications or deletions in space requirements may be made when services are shared or purchased, provided the program indicates where the services are available and how they are to be provided. This program shall be submitted to the Department *[of Health]* for review along with the plans developed for the project. *[Schematic and preliminary plans showing the basic layout of the building and the general types of construction, mechanical and electrical systems and details may be submitted to the department before the larger and more complicated working drawings and specifications so that necessary corrections can be easily made before final plans are completed. Working drawings and specifications, complete in all respects, shall be prepared and submitted to the Department of Health for approval.]* These plans shall cover all phases of the construction project, including site preparation; paving; general construction; mechanical work, including plumbing, heating, ventilating, and air conditioning; electrical work; and all built-in equipment, including elevators, kitchen equipment, cabinet work, and the like. **Upon request by the department, the facility shall submit other information regarding the scope and details of any new construction project or significant renovation that will impact patient health, safety, and compliance with applicable rules.**

B. The *[D]*department *[of Health]* shall be notified in writing within five (5) days after construction begins. Construction shall be in conformance with plans and specifications *[approved by the Department of Health]* developed by the facility's architect or engineer of record. The department may elect to inspect the construction of hospice projects at any time during the development of the project. *[If construction of the project is not started within one (1) year or completed within a period of three (3) years after the date of the approval of the plans and specifications, the plans and specifications shall be resubmitted to the Department of Health for its approval and shall be amended, if necessary, to comply with the then current rules before construction work is started or continued.]*

C. References in this rule to National Fire Protection Association (NFPA) publications are those contained in the 12-volume 1994 *Compilation of NFPA Codes, Standards, Recommended Practices and Guides*. Where there are discrepancies between referenced NFPA publication

requirements and this rule, the requirements of this rule shall apply.

D. The design and construction of hospices shall conform to the most stringent requirements of this rule and the local governing building code and zoning ordinances.

3. Site.

A. Adequate paved pedestrian access shall be provided within the lot lines to the main entrance. Loading and unloading space for delivery vehicles shall be paved.

B. Adequate paved parking shall be provided. Parking space needs shall be determined by the local zoning requirement and the operational program but shall not be less than one (1) space for each of the maximum number of staff persons on duty at any given time plus one (1) parking space for each licensed inpatient bed in the facility.

C. Fire lanes shall be provided as required by local authority and kept clear to provide immediate access for fire fighting equipment.

D. The site shall provide reasonable access for those individuals to be served by the facility. The facility shall be on an all-weather road for easy access by vehicular traffic. Consideration should be given to locating the hospice to provide easy access to public transportation services which may be available in the community.

E. The site shall be located within the service area of a public fire department.

4. Roads, parking facilities, walks, ramps, and entrances shall be accessible and usable by persons with various physical handicaps.

A. At least one toilet, telephone, and drinking fountain shall be provided on each floor of a hospice which is accessible for use by handicapped public and staff.

B. Elevator controls and alarms shall be accessible to wheelchair occupants and shall be provided with tactile signage for the visually impaired.

C. Design details for handicapped accessible facilities should be consistent with the *Guidebook to: The Minimum Federal Guidelines of Requirements for Accessible Design* published January 6, 1981, by the U.S. Architectural and Transportation Barriers Compliance Board.

D. At least ten percent (10%) of the patient beds shall be located in handicapped-accessible rooms with accessible toilet rooms which open directly into the patient room. All other clinical areas to which patients have common access shall be handicapped-accessible.

5. Administrative and public areas shall be provided.

A. All hospices shall provide adequate work areas to support the administrative personnel and governing body. The facilities shall allow business to be conducted in a setting which provides confidentiality and privacy as required. The administrative offices may be located remotely from a hospice inpatient unit or may be housed within the inpatient facility.

B. Where administration is included within the inpatient facility, the following shall be provided:

(I) Administrator's office;

(II) Business office including a work area for quality assurance;

(III) Storage and work area for archived medical records;

(IV) Conference room for governing board meetings and personnel in-service training; and

(V) Office for director of patient-care services.

C. Each inpatient hospice facility shall provide the following public areas in a location separated from the clinical and service areas of the facility:

(I) Lobby/waiting room with reception;

- (II) Wheelchair-accessible public toilet;
 - (III) Wheelchair-accessible public drinking fountain;
- and
- (IV) Wheelchair-accessible public phone.

6. Design of patient-care units.

A. One or more patient-care units shall be provided. Each unit shall not exceed a maximum of twenty (20) beds.

B. Each patient-care unit shall be a continuous area which does not require patient-care traffic to traverse other areas and shall be restricted to only one (1) floor level. If justified by the program submitted under subparagraph (2) (A)2.A. of this rule, the department may consider approval of designs which provide for larger capacity patient-care units.

C. The bed area in a patient room exclusive of toilet rooms, closets, alcoves or vestibules, shall not be less than one hundred twenty (120) square feet in a private room and not less than two hundred (200) square feet in a semi-private room. Heating units and lavatories may protrude into this space.

D. No dimension for the bed area in any patient room shall be less than ten (10) feet.

E. No patient room shall house more than two (2) patients.

F. Each patient-care unit shall have not greater than fifty percent (50%) of its beds housed in semi-private rooms and the remaining rooms shall be limited to occupancy by one (1) patient. If justified by the program submitted under subparagraph (2)(A)2.A. of this rule, the department may consider approval of designs which provide other ratios of semi-private to private patient rooms.

G. Each patient shall have access to a toilet room without entering the general corridor area.

H. One (1) toilet may serve not more than two (2) adjacent rooms.

I. The toilet room shall contain a lavatory and water closet and shall be sized to permit access for the patient and an assisting member of the staff. The lavatory may be omitted from the toilet room if a lavatory is provided in the patient room.

J. At least one (1) patient room per patient-care unit shall be provided to be used for isolation. This unit shall have a toilet room equipped with a bathing facility which serves this room exclusively.

K. Mirrors shall be provided in each patient room or adjoining toilet room. Mirrors shall be at least three (3) feet high located within the bottom edge no more than three feet four inches (3'4") above the floor.

L. Patients shall have separate wardrobes, lockers or closets located within their respective patient rooms. A clothes rod and shelf shall be provided.

M. One or more windows shall be provided, with the sash not more than three (3) feet above the floor and with a gross area of not less than ten percent (10%) of the floor area of the room. In each patient room at least one (1) window to the outside shall be operable. Patient room windows shall be exposed to an outside area not less than thirty (30) feet horizontally opposite the window which contains no construction or grading which would further diminish the view and the exposure of the window to natural light.

N. Social spaces (dining, recreation, meditation) shall be provided throughout the facility with a cumulative area of not less than thirty (30) square feet per patient bed. One social space may serve more than one (1) patient-care unit provided it is directly accessible from each unit and is sized proportionate to the total number of patient beds it serves. No social space shall be smaller than one hundred fifty (150) square feet in area.

O. Unless bathing facilities are included in the toilets serving each patient room, central bathing facilities shall be provided in each patient-care unit at a ratio of not fewer than one for each ten (1:10) beds.

P. Each bathing facility shall be located in its own room and shall be directly accessible from the general corridor. The bathing facility may be either a tub, shower or tub/shower combination.

Q. However, at least one (1) handicapped-accessible shower shall be provided on each patient unit.

R. A locked cabinet for the storage of cleaning supplies shall be available in or near each bathroom.

7. Support and services areas. The following staff support and service areas shall be located directly accessible to each patient care unit:

A. Clean work and storage facilities shall be equipped with counter and sink and storage space provided for clean linen and supplies;

B. A separate soiled/decontamination utility room shall be equipped with a clinic sink (this fixture is not required where bedpan-flushing devices have been installed at each patient toilet), counter, and sink and sufficient floor space shall be provided to accommodate storage containers for soiled linen, trash, and infectious waste;

C. Space shall be provided for secure storage of staff personal items;

D. A staff station shall be located to provide visual supervision of the patient-care unit corridors. The station shall consist of a work counter and secure storage space for charts;

E. A medication storage and preparation station which has a means of locked storage for all medications shall be equipped with a work counter, sink, and refrigerator;

F. Separate locked storage facilities shall be provided in the station for controlled substances;

G. If medications are held in each patient room, the room shall include separate locked storage facilities for each patient's medications;

H. A nourishment station shall be equipped with a work counter, sink, and refrigerator and shall be provided physically remote from the medication preparation station;

I. Storage space shall be provided for mobile equipment used on the unit;

J. A janitor's closet shall be provided which is equipped with a mop sink and has sufficient space for the cleaning equipment and open supplies used to maintain the patient-care unit; and

K. All clean support functions may be located in one clean workroom provided the room is carefully designed to provide adequate storage and function separations.

8. Food service facilities shall be designed and equipped to meet the requirements of the scope of services outlined as follows:

A. Dietary facilities shall comply with 19 CSR 20-1.010;

B. In hospice facilities where food is prepared on-site, the dietary facilities shall, as a minimum, have—a storage space including cold storage for four- (4-) day supply, space and equipment for food preparation to facilitate efficient food preparation and to provide for a safe and sanitary environment, conveniently located handwashing facilities, space for preparing food for distribution to patients, warewashing facilities which are isolated from the food preparation and serving area, and storage facilities for waste which is inaccessible for insects and rodents and accessible to the outside for pickup or disposal.

C. The warewashing processes shall produce dietary ware which is free of pathogenic organisms; and

D. In hospice facilities where the food service is provided through a vendor contract, dietary facilities shall, as a minimum, include space for receiving and holding the food transport equipment, utility connections for food transport equipment to maintain appropriate serving temperatures, and a holding area for soiled dietary ware transport equipment which is out of the patient area and located near the service entrance for pick-up.

(B) Service Facilities Shall Meet the Following Standards:

1. Services including linen service.

A. Service facilities shall be provided in each inpatient hospice facility and located to be out of the normal public and clinical traffic flow.

B. A weather-protected service entrance shall be provided separate from entrances used by public and patients.

C. Space and facilities shall be provided for the sanitary storage and disposal of waste. Exterior dumpsters will suffice provided they can be accessed under the protection provided at the service entrance.

D. A general storage room shall be provided with an area not less than ten (10) square feet per bed for the first fifty (50) beds, plus eight (8) square feet per bed for the next twenty-five (25) beds, plus five square feet per bed for any additional beds over seventy-five (75). No storage room shall be less than one hundred (100) square feet of floor space. Off-site storage is acceptable, however, one half (1/2) of the required storage space shall be located in the inpatient hospice facility. General storage shall be concentrated in one area.

E. Space shall be provided to house mechanical equipment. The space shall be adequate for initial installation and ongoing maintenance access for each component of the systems housed in it. Mechanical equipment shall not be installed in rooms designated to house other functions.

F. A housekeeping room shall be provided with a janitor's sink and space to store opened containers of cleaning supplies and housekeeping equipment used to maintain the facility. This room is not required if the hospice is maintained by a contract cleaning service which transports the necessary cleaning supplies and equipment to the facility on a daily basis.

G. An oxygen storage room shall be provided. This room shall be enclosed with one- **(1-)** hour rated construction and shall have a powered or gravity vent to the outside. Permanent racks or fasteners shall be provided and used in the oxygen storage room to prevent accidental damage or dislocation of oxygen cylinders. In facilities storing quantities of oxygen less than one thousand five hundred (1,500) cubic feet in total, a power ventilated storage cabinet will comply. No ventilated gas storage facilities are required in hospices which store no medical gases within the building.

H. Laundry services may be provided by the hospice operator or may be obtained through contract with a linen service vendor. If laundry for the facility is done commercially, either entirely or in part, space shall be provided for the sorting, processing, and storing of both soiled and clean linen. Storage space shall be located to facilitate convenient pickup and delivery by commercial laundry personnel. Hospices with only one **(1)** patient-care unit may accommodate these functions within the utility facilities provided in the unit's staff support area.

I. Hospice-operated laundry facilities shall be designed and procedures instituted to prevent cross-contamination of clean and dirty linen. The laundry room shall be in a separate room from the kitchen, patients' rooms, the dining room, and the bathrooms or the nursing utility room. Adequate space shall be provided in the laundry room for the storing, sorting,

and processing of soiled linen. The processes of the laundry operation shall be appropriate to the production of patient linens which are free of pathogenic organisms. Space shall be provided for the storage of clean linen in a separate room from the laundry.

J. As may be required by the program, laundry facilities provided for cleaning patients' clothing exclusively shall be located in the patient-care unit but in a room separate from other functions. A residential-style laundry equipment installation is acceptable.

K. As required by the program, living and sleeping quarters, separate from patients' facilities, shall be provided for the employees and their families who may reside in the facility;

2. Elevators.

A. All inpatient hospice facilities having patient-care facilities located on any floor other than the main entrance floor shall have at least one (1) electric or electrohydraulic elevator. Hospice facilities with more than thirty (30) beds located on any floor other than the main entrance floor shall have at least two (2) elevators. Hospice facilities with more than two hundred (200) beds located on any floor other than the main entrance floor shall provide passenger and service elevators in numbers and at locations determined by a professionally conducted study of the hospice operation and its estimated vertical transportation needs.

B. Inside dimensions of patient-use elevators shall be not less than five feet four inches (5'4") by eight feet (8') with a capacity of **three thousand five hundred (3,500)** pounds. Cab and hoistway doors shall be not less than three feet ten inches (3'10") clear opening.

C. Elevators shall be equipped with an automatic leveling device of the two- **(2-)** way automatic maintaining type with an accuracy of plus or minus one-half inch **(1/2")**.

D. Elevator call buttons, controls, and door safety stops shall be of a type that will not be activated by heat or smoke.

E. Elevator controls, alarm buttons, and telephones shall be accessible to wheelchair occupants and usable by others with various physical disabilities.

F. Elevator hoistway doors shall be fire rated to maintain the integrity of the fire-rated shaft enclosure;

3. Chutes and dumbwaiters.

A. Chutes and dumbwaiters may be installed in hospice facilities as required by the operational program.

B. Linen and trash chutes shall be of fire-resistant material and shall be installed with flushing ring, vent to atmosphere, and floor drain at the floor of the chute discharge. An automatic sprinkler shall be provided at the top of each linen and trash chute.

C. Service openings to chutes shall not be located in corridors or passageways but shall be located in a room having a fire-resistant construction of not less than one hour. Doors to the rooms shall be not less than **three-quarter- (3/4-)** hour labeled doors equipped with an automatic closing device.

D. Service openings to chutes and other vertical openings shall have an approved self-closing labeled fire door rating not less than the fire-resistant rating of the shaft in which the chute is installed.

E. Chutes shall discharge directly into collection rooms separate from the incinerator, laundry, or other services. Separate collection rooms shall be provided for trash and for linen. These rooms shall have a fire-resistant construction of not less than one **(1)** hour. Doors to these rooms shall be not less than **three-quarter- (3/4-)** hour labeled doors equipped with an automatic closing device.

F. Dumbwaiters, conveyors, and material-handling

systems shall not open directly into a corridor or exitway but shall open into a room enclosed by construction having a fire resistance of not less than one hour and provided with a **three-quarter- (3/4-) hour** labeled fire door with a self-closing device.

G. Where horizontal conveyors and material-handling systems penetrate fire-rated walls or smoke walls, the penetrations shall be protected to maintain the integrity of the wall;

4. General design, finish, and life safety requirements.

A. A continuous system of unobstructed corridors, referred to as required corridors, shall extend through the enclosed portion of each story of the building, connecting all rooms and spaces with each other and with all entrances, exitways, and elevators, with the following exceptions: work suites such as the administrative suite and dietary area, which are occupied primarily by employed personnel, may have within them corridors or aisles as considered advisable, but are not subject to the regulations applicable to required corridors. Areas may be open to the required corridor system as permitted by NFPA 101 (1994), *The Life Safety Code*.

B. The arrangement of the physical plant shall provide for separation of the administrative/business, service and public areas from patient service areas.

C. Ceilings shall be at a height of at least eight feet (8'). Ceilings in corridors, storage rooms, toilet rooms, and other minor rooms shall not be less than seven feet six inches (7'6"). Suspended fixtures located in the path of normal traffic shall not be less than six feet eight inches (6'8") above the floor.

D. Handrails may be provided on both sides of all corridors and aisles used by patients and, if provided, corridor handrails shall have ends return to the wall.

E. New inpatient hospice facilities shall be designed and constructed in compliance with Chapters Five through Seven and Chapter Twelve of NFPA 101 (1994), *Life Safety Code* and NFPA 99 (1993) *Standard for Health Care Facilities*, NFPA 13 (1994) *Standard for Installation of Sprinkler Systems* and NFPA 90A (1993) *Standard for the Installation of Air Conditioning and Ventilation Systems*. Section 12-6 of NFPA 101 shall not apply to these facilities.

F. Hardware on toilet room doors shall be operable from both the inside and the outside. All toilet room doors shall provide a net clear opening of not less than **thirty-two [32] inches (32")**.

G. The corridor doors from all patient-use areas as well as all doors through which patients may need to pass for emergency exit shall be not less than thirty-six (36) inches wide.

H. Every window in patient-use areas shall be provided with shades, curtains or drapes. Curtains and drapes shall be made of fabric which is treated to be or is inherently flame-retardant.

I. The floors of toilets, baths, utility rooms, and janitor's closets shall have smooth, waterproof surfaces which are wear-resistant. The floors of kitchens and food preparation areas shall be waterproof, greaseproof, smooth, and resistant to heavy wear.

J. The walls of all rooms where food and drink are prepared, served, or stored shall have a smooth surface with painted or equally washable finish. At the base they shall be waterproof and free from spaces which may harbor insects. The walls of kitchens, utility rooms, baths, warewashing rooms, janitor's closets, and spaces with sinks shall have waterproof, painted, glazed, or similar finishes to a point above the splash and spray line.

K. The ceilings of all kitchens, sculleries, and other rooms where food and drink are prepared shall be painted

with washable paint.

L. All casework in the facility shall be finished with at least a sealer on all interior surfaces. Casework with sinks installed in the counter shall be caulked to provide a watertight joint between the backsplash and the wall.

M. All floor covering used in inpatient hospice facilities shall have either Class A or B fire ratings as required by Chapter Twelve of NFPA 101 (1994), *The Life Safety Code*.

N. Stairways, ramps, elevator hoistways, light or ventilation shafts, chutes, and other vertical openings between stories shall be enclosed with construction which is equal to or greater than the required floor assembly rating of the building's construction type.

O. The number of stories in a building housing a hospice facility shall be determined by counting the number of occupiable levels in the building regardless of their location at, above, or below grade.

P. Each room or patient-use area shall be conspicuously and unmistakably identifiable at its entrance by patients, visitors, and staff.

Q. All signage within six feet (6') of the floor shall be tactile to be usable by visually impaired persons.

R. Fire-resistant ratings –

(I) Definitions –

(a) Fire-separation distance is the distance in feet measured from the building face to the closest interior lot line, to the centerline of a street or public way or to an imaginary line between two (2) buildings on the same property.

(b) Fire-protection rating is the time in hours, or fractions of an hour, that an opening protective assembly will resist fire exposure as determined in accordance with the test procedures set forth in ASTM E119.

(II) Exterior walls with a fire-separation distance less than five feet (5') shall have a fire-resistant rating of one (1) hour.

(III) In exterior walls with a fire-separation distance of three feet or less, no openings will be allowed, from three feet (3') to five feet (5') no unprotected openings will be allowed, and protected openings will be allowed with a total aggregate area of fifteen percent (15%) of the wall surface.

(IV) Approved fire protective assemblies shall be fixed, self-closing, or equipped with approved automatic-closing devices, a fire-resistant rating of not less than three-quarters (3/4) of an hour shall be required.

(V) Fire protective assemblies are not required where outside automatic sprinklers are installed for the protection of the exterior openings. The sprinklers shall be installed in accordance with NFPA 13;

5. Structural design.

A. All new facilities and additions to all areas of existing licensed facilities which undergo major remodeling, in all their parts, shall be of sufficient strength to resist all stresses imposed by dead loads, live loads, and lateral or uplift forces such as wind, without exceeding, in any of the structural materials, the allowable working stress established for these materials by generally accepted good engineering practice.

B. Foundations shall rest on solid ground or properly compacted fill and shall be carried to a depth of not less than one foot below the estimated frost line or shall rest on leveled rock or load-bearing piles when solid ground is not encountered. When engineered fill is used, site preparation and placement of fill shall be done under the direct full-time supervision of the soils engineer. The soils engineer shall issue a final report on the compacted fill operation and certify its compliance with the job specifications. Reasonable care shall be taken to establish proper soil-bearing values for soil at the

building site. If the bearing capacity of the soil is in question, a recognized load test may be used to determine the safe bearing value. Footings, piers, and foundation walls shall be adequately protected against deterioration from the action of groundwater;

6. Electrical systems.

A. The entire electrical system shall be designed, installed, and tested in compliance with NFPA 70 (1993) *The National Electrical Code* and NFPA 99 (1993) *Standard for Health Care Facilities*.

B. Emergency lighting shall be provided for exits, stairs, and exit access corridors which shall be supplied by an emergency service and automatic electric generator or battery lighting system. This emergency lighting system shall be equipped with an automatic transfer switch. If battery lights are used, they shall be wet cell units or other rechargeable-type batteries equipped with automatic trickle charger. These units shall be rated at four (4) hours.

C. Patient rooms shall have a minimum general illumination of ten foot-candles, a night-light, and a patient's reading light. The general illumination fixtures and the night-light shall be switched at the patient room door.

D. Ceiling lighting fixtures, if used, shall be of a type which are shaded or globed to minimize glare.

E. Each patient room shall have not less than one duplex receptacle on each wall in the room. The spacing of receptacles around the perimeter of the room shall not be greater than twelve (12) feet.

F. All occupied areas shall be adequately lighted as required by the duties performed in the space.

G. Night-lights shall be provided in corridor, stairways, and patient rooms. Toilets adjacent to patient rooms are not required to have night-lights.

H. An electrically powered communication system shall be provided which allows staff to respond to patient calls regardless of patient location.

I. An electrically powered fire alarm system shall be provided as required by NFPA 101 (1994) *The Life Safety Code*. The fire alarm system shall have an emergency back-up source of electrical power and a direct connection for notifying the fire department or fire department dispatch service. Fire alarm manual pull stations shall be provided at each exit and at each staff workstation in the patient-care units. Smoke detectors shall be installed in social space rooms which open directly to the corridor, in the vicinity of any smoke or fire door which is permitted to be held open by a magnetic hold-open device, and in the corridors at intervals not exceeding **thirty [30] feet (30')**.

J. Portable fire extinguishers shall be provided as required by NFPA 101 (1994) *The Life Safety Code* and the local authority;

7. Mechanical systems.

A. The heating, ventilation, and air-conditioning systems shall be capable of providing temperature ranges between 72°F–80°F in all patient-care areas. The heating system shall be capable of maintaining a winter indoor temperature of not less than 72°F in all nonpatient areas. The air-conditioning system shall be capable of maintaining a summer indoor temperature of not more than 80°F in all nonpatient areas.

B. The heating system shall have automatic controls adequate to provide comfortable conditions in all portions of the building at all times.

C. Heating, ventilation, and air-conditioning systems installed in inpatient hospice facilities shall be designed, installed, and balanced in compliance with NFPA 90A (1993) *Standard for the Installation of Air Conditioning and Ventilation*

Systems, and shall provide the pressure relationships and at least the minimum air change rates indicated in Table 1.

TABLE 1 – VENTILATION REQUIREMENTS

Area Designation	Pressure Relationship to Adjacent Areas	Minimum Air Changes of Outdoor Air Per Hour Supplied to Room	Minimum Total Air Changes Per Hour Supplied to Room	All Air Exhausted Directly to Outdoors	Air Returned From This Room
Patient Room	E	2	2	Optional	Optional
Patient Area Corridor and Patient Living Room	P	2	2	Optional	Optional
Soiled Workroom and Soiled Linen Holding	N	Optional	6	Yes	No
Clean Staff Work Area	P	2	6	Optional	Optional
Toilet Room	N	Optional	6	Yes	No
Clean Linen Storage	P	Optional	2	Optional	Optional
Designated Smoking Area	N	Optional	10	Yes	No
Food Preparation Area	E	2	6	Yes	No
Warewashing	N	Optional	6	Yes	No
Dietary and General Storage	V	Optional	2	Optional	Optional
Linen and Trash Chute Room	N	Optional	6	Yes	No
Medical Gas Storage and Manifold Rooms	N	Optional	6	Yes	No
Administrative and Public Areas	E	2	2	Optional	Optional

P= Positive
N= Negative
V= Variable
E= Equal

D. All air-moving, heating, ventilation, and air-conditioning equipment shall be equipped with at least one (1) filter located upstream of the conditioning equipment. If a pre-filter is employed, the pre-filter shall be upstream of the conditioning equipment and the main filter shall be located farther downstream. All filters shall be easily accessible for maintenance. Filter frames shall be durable and carefully dimensioned and shall provide an airtight fit with the enclosing ductwork. All joints between the filter segments and the enclosing ductwork shall be sealed to preclude air leakage.

E. Outside air intakes shall be located no less than **twenty-five [25] feet (25')** from exhaust outlets of ventilation systems, combustion equipment stacks, clinical suction discharges, and plumbing vent stacks or from areas which may collect vehicular exhaust and other noxious fumes.

F. Corridors shall not be used to supply air to or exhaust air from any room, except that air from corridors may be used to ventilate bathrooms, toilet rooms, janitor's closets, and small electrical or telephone closets opening directly onto corridors provided that ventilation can be accomplished by the undercutting of doors. The installation of louvers in corridor doors is prohibited. The space above the finished ceiling may be used as a plenum for return air only.

G. Exhaust hoods in meal preparation areas shall comply with the requirements of NFPA 96 (1994). All hoods and cooktop surfaces in meal preparation areas shall be equipped with automatic fire suppression systems, automatic fan controls and fuel shutoff;

8. Plumbing systems.

A. The entire plumbing system, its design, operation, and maintenance shall comply with the requirements of all applicable local and state codes including the requirements set forth in this rule.

B. Plumbing fixtures.

(I) All plumbing fixtures shall be of nonabsorptive acid-resistant material.

(II) Clinical sinks shall have a bedpan-flushing device and shall have an integral trap in which the upper portion of a visible trap seal provides a water surface.

(III) Showers and tubs shall be provided with nonslip surfaces.

(IV) Water closets in patient areas shall be quiet operating types.

(V) Stools in patient toilet facilities shall be the elongated bowl type with nonreturn stops, backflow preventers, and silencers. Seats shall be the split type and white in color.

(VI) Grab bars or handrails shall be provided adjacent to all bathtubs.

(VII) All lavatories shall be trimmed with valving operable without the use of hands.

C. Water supply systems.

(I) A reliable source of potable water shall be provided at the site to supply water in sufficient quantities to meet the various use demands of the hospice. The source of water shall have been tested and approved by the Missouri Department of Natural Resources.

(II) The water supply systems shall be designed to supply water at sufficient pressure to operate all fixtures and equipment during maximum demand periods.

(III) Each water service main, branch main, riser and branch to a group of fixtures shall be valved. Stop valves shall be provided at each fixture.

(IV) Reduced pressure backflow preventers shall be installed on water service entrance, hose bibbs, janitors' sinks, bedpan-flushing attachments, and on all other fixtures

to which hoses or tubing can be attached. The installation of backflow preventors shall provide safeguards against waterline expansion.

(V) The water supply system shall be designed to provide hot water at each hot water outlet at all times. The water-heating equipment shall have sufficient capacity to supply five (5) gallons of water at **one hundred twenty degrees Fahrenheit (120°F)** per hour per bed for hospice fixtures and eight gallons per bed for kitchen and laundry. Lesser capacities may be accepted upon submission of the calculation for the anticipated demand of all fixtures and equipment in the building. Hot water at showers and bathing facilities shall not exceed **one hundred ten degrees Fahrenheit (110°F)**. Hot water at handwashing facilities shall not exceed **one hundred twenty degrees Fahrenheit (120°F)**. Hot water circulating mains and risers shall be run from the hot storage tank to a point directly below the highest fixture at the end of each branch main.

D. Drainage systems.

(I) All fixtures and equipment shall be connected through traps to soil and waste piping and to the sewer and they shall all be properly vented to the outside.

(II) Courts, yards, and drives which do not have natural drainage from the building shall have catch basins and drains to low ground, storm-water drainage system or dry wells.

(III) The building sanitary drain system shall be piped in cast iron, steel, copper, or plastic.

(IV) Building sewers shall discharge into a community sewerage system when available. If such a system is not available, a facility providing sewage treatment shall conform to the rules of the Department of Natural Resources.

(V) Drainage piping shall not be installed within the ceiling or exposed in food preparation centers, food service facilities, food storage areas, and clean linen storage rooms; special precautions shall be taken to protect any of these areas from possible leakage or condensation from necessary overhead drainage piping systems. These special precautions include requiring noncorrosive drip troughs with a minimum four-inch outside diameter to be installed under the drainage pipe in the direction of slope to a point where the pipe leaves the protected space and terminates at that point—usually at a wall. The trough shall be supported with noncorrosive strap hangers and screws from the pipe above. Trough joints and hanging screw penetrations shall be sealed to maintain watertight integrity throughout.

E. Natural or liquefied petroleum (LP) gas systems.

(I) Where gas-fire equipment is used, all gas piping, fittings, tanks and specialties shall be provided and installed in compliance with NFPA 54 (1992), NFPA 58 (1992), and the instructions of the gas supplier, except where more strict requirements are stated. Where liquefied petroleum gas (LPG) is used, compliance with the rules of the Missouri Department of Agriculture is also required.

(II) Where gas piping enters the building below grade, it shall have an outside vent as follows: a concrete box shall be made **eighteen (18) inches by eighteen (18) inches** with three-inch (3") thick walls, of a height to rest on top of the entering gas pipe, and the top of the box to coming within six inches (6") of top grade. The box shall be filled with coarse gravel. A one- (1-) inch upright vent line shall be to **one-half (1/2)** the depth of the box and extend **twelve (12) inches** above grade with a screened U-vent looking down. The vent line shall be anchored securely to the building wall.

(III) Gas outlets and gas-fired equipment shall not be installed in any patients' bedrooms.

F. Where a piped central medical gas distribution

system is installed, the oxygen piping, outlets, manifold rooms, and storage rooms shall be installed in accordance with the requirements of Chapter 4 of NFPA 99 (1993); and

9. Fire prevention and general operating requirements.

A. The hospice facility shall be maintained in a manner which provides a clean safe environment for the delivery of patient care and shall, until remodeled or renovated with the *[approval]* **notification** of the Department *[of Health]*, remain compliant with the codes and regulations under which the facility was constructed.

B. Exitways shall always be maintained free of obstructions.

C. Curtains, drapes, and cubicle curtains shall be maintained in a manner which does not compromise their fire-resistant properties.

D. Smoking may be permitted in the patient's room by the patient only, and designated smoking areas by others. Designated smoking areas shall be ventilated as required by Table 1 of this rule. Modification of the patient room ventilation system is not required to permit occasional authorized smoking by a patient.

E. All waste containers shall be of noncombustible construction.

F. Electrical systems and medical gas systems shall be tested according to the provisions of NFPA 99 (1993) and shall be modified as necessary to comply with the operational requirements of that standard.

AUTHORITY: section 197.270, RSMo 2016. Original rule filed March 8, 1996, effective Oct. 30, 1996. Rescinded and readopted: Filed Jan. 3, 2001, effective Aug. 30, 2001. Amended: Filed Sept. 11, 2007, effective March 30, 2008. Emergency amendment filed Aug. 6, 2026, effective Aug. 20, 2026, expires Feb. 15, 2027.

PUBLIC COST: This emergency amendment 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 amendment will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective.

The text of proposed rules and changes will appear under this heading. A 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 explanation is set out in the PURPOSE section of each rule. A citation of the legal authority to make rules is also required, and 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 that 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, 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 10 – DEPARTMENT OF NATURAL RESOURCES

Division 20 – Clean Water Commission

Chapter 6 – Permits

PROPOSED RESCISSION

10 CSR 20-6.011 Fees. This regulation explained how the Department of Natural Resources implemented fees authorized by the Missouri Clean Water Law. It set the procedures for collection of fees from permit holders. Fees were collected for state operating permits, several permits, and construction permits.

PURPOSE: This rule is being rescinded as the proposed amendments are more than fifty percent (50%) of the rule. A proposed readoption of this rule will follow.

AUTHORITY: section 644.054, RSMo Supp. 2018. Emergency rule filed July 27, 1990, effective Sept. 12, 1990, expired Jan. 10,

1991. Original rule filed July 17, 1990, effective Dec. 31, 1990. For intervening history, please consult the Code of State Regulations. Amended: Filed Aug. 13, 2026.

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 OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Natural Resources. To be considered, comments must be received by the end of the public comment period, which is 5 p.m. Oct. 23, 2026. A public hearing is scheduled for Oct. 16, 2026, at 1 p.m., at the Department of Natural Resources, East Elm Street Conference Center, 1730 East Elm St., Jefferson City, MO 65101. A virtual option is available at <https://stateofmo.webex.com/stateofmo/j.php?MTID=m78579e32d00b56d4cdd09d599e7f07c0>, meeting number (access code) 2870 391 7727, password DNR, or call-in number 1-650-479-3207. Comments may also be submitted to Susan Mills, Water Protection Program, PO Box 176, Jefferson City, MO 65102-0176, via email at susan.mills@dnr.mo.gov, or online at <https://apps5.mo.gov/proposed-rules/welcome.action#OPEN>.

TITLE 10 – DEPARTMENT OF NATURAL RESOURCES

Division 20 – Clean Water Commission

Chapter 6 – Permits

PROPOSED RULE

10 CSR 20-6.011 Fees

PURPOSE: This rule explains how the Department of Natural Resources implements fees authorized by the Missouri Clean Water Law and sets the procedures for collection of fees from permit holders for state operating permits and construction permits.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. This rule incorporates American Society for Testing and Materials (ASTM) International standards, and the Environmental Protection Agency (EPA) standards by reference and sets forth additional state standards. The entire text of the rule is printed here.

(1) Fees – General.

(A) Pursuant to section 644.057, RSMo, beginning on January 1, 2015, all persons who build, erect, alter, replace, operate, use, or maintain wastewater treatment facilities shall pay the appropriate fees prescribed by this rule.

(B) Definitions.

1. Definitions as set forth in the Missouri Clean Water Law and 10 CSR 20-2.010 apply to those terms when used in this regulation.

2. Single family residential customers, as used in this rule, mean connections to a publicly owned treatment

works treating domestic sewage from a residential property intended for single-family use. This definition does not include duplexes, multiplexes, apartment complexes, or other multi-family residential properties, unless each unit has their own individual connection.

3. Privately owned treatment works. A treatment works serving a residential area, restaurant, commercial concern, or other operation that only produces domestic sewage as defined in section 701.025, RSMo.

(C) Submit fees associated with this rule to the Missouri Department of Natural Resources. In the event a check used for the payment of operating fees is returned to the department marked insufficient funds, the person forwarding the check shall be given fifteen (15) days to correct the insufficiency. If payment has not been corrected after fifteen (15) days, the person may be referred to the attorney general's office and assessed late penalties, pursuant to section 644.055, RSMo. When a check used for the payment of a construction fee is returned to the department marked insufficient funds, review of the application shall cease and the applicant shall be notified. If the insufficiency is not corrected after ten (10) days, the application shall be returned as incomplete.

(D) Each payment shall identify the following: Missouri state operating permit (MSOP) number, payment period, and applicant, or the permittee name and address. Persons who own or operate more than one (1) facility may submit one (1) check to cover all annual permit fees, but are responsible for submitting the appropriate information to allow proper credit of each permit account.

(E) Annual fees shall be paid in full on their due date. Permittees who discharge less than their design or only discharge intermittently, seasonally, or for a short period of time must pay the entire annual fee. Fees are annual fees and may not be prorated. In the event the discharge is eliminated, the permittee is responsible for requesting termination of the permit. When permits are revoked or denied, the annual fees are forfeited. It is unlawful to discharge water contaminants into waters of the state without a permit. An additional late fee of fifty dollars (\$50) may be added each month the fee is late, to cover additional department administrative efforts.

(F) Annual fees are the responsibility of the permittee. Failure to receive a statement due to mailing errors, change of address, ownership changes, or other reason(s) is not an excuse for failure to remit the fees. Penalties shall be charged as provided in section 644.055, RSMo.

(G) All persons who are subject to fees under section 644.052.2, 644.052.4, or 644.052.5, RSMo, shall remit their first annual fee with their original application, as well as any required application fee, and pay an annual fee each year on the anniversary date of their permit. Permittees with permits in effect at the time these sections become effective shall remit annual fees on the anniversary date of the permit.

(H) Where a person has the permit responsibility for more than one (1) operating permit, the department may combine the billings by issuing all operating permits with the same expiration date. Each facility will continue to operate under and be governed by the separate provisions of each individual permit.

(I) After permit issuance, fees are due annually until the permit is terminated by the department.

(2) Fees – Amounts.

(A) A privately owned treatment works or an industry which treats only human sewage, or publicly owned treatment works (POTWs) with less than two hundred (200) connections shall annually pay a fee based upon the design flow of the facility

as follows:

1. If the design flow is less than five thousand (5,000) gallons per day, eight hundred fifty dollars (\$850);

2. If the design flow is equal to or greater than five thousand (5,000) gallons per day but less than ten thousand (10,000) gallons per day, one thousand six hundred dollars (\$1,600);

3. If the design flow is equal to or greater than ten thousand (10,000) gallons per day but less than twenty-five thousand (25,000) gallons per day, two thousand five hundred dollars (\$2,500); or

4. If the design flow is equal to or greater than twenty-five thousand (25,000) gallons per day, five thousand dollars (\$5,000).

(B) Persons who produce, manage, store, or land apply industrial process wastes, wastewater, or wastewater treatment residuals which require a site-specific permit shall annually pay –

1. If the industry is a class IA or must apply for a site-specific permit for a concentrated animal feeding operation as defined by the commission, five thousand dollars (\$5,000) annually. The application fee for a new or expanding site-specific concentrated animal feeding operation permit shall be five thousand dollars (\$5,000); or

2. For facilities requiring operating permits based upon categorical standards pursuant to 40 CFR 401.10, as published by the EPA Docket Center, EPA West, 1301 Constitution Avenue NW, Washington, DC 20004, June 4, 1982, which is incorporated by reference and does not include any subsequent amendments or additions, the following annual fees are required:

A. If the facility is rated minor and has a design flow less than one million (1,000,000) gallons per day, five thousand dollars (\$5,000) annually;

B. If the facility is rated minor and has a design flow greater than or equal to one million (1,000,000) gallons per day, five thousand dollars (\$5,000) annually; or

C. If the facility is rated major, five thousand dollars (\$5,000) annually.

(C) Persons requiring a site-specific permit solely for industrial storm water shall pay an annual fee of –

1. For sites with deeded acreage less than ten (10) acres, three thousand five hundred dollars (\$3,500) annually; or

2. For sites with deeded acreage greater than or equal to ten (10) acres, five thousand dollars (\$5,000) annually.

(D) Persons requiring a site-specific permit primarily for land application, including associated storage of process wastes, including but not limited to industrial process wastes, industrial wastewater, industrial wastewater treatment residuals, domestic biosolids, and third-party managers of domestic wastewater or septage shall pay five thousand dollars (\$5,000) annually. Additionally, new permit applications require an application fee of three thousand seven hundred fifty dollars (\$3,750); major modifications require a modification application fee of two thousand five hundred dollars (\$2,500).

(E) Persons who produce industrial process wastewater, stormwater, or a combination thereof who are not included in subsections (2)(B) or (2)(C) of this section shall annually pay –

1. If the facility is rated minor and has a design flow less than one million (1,000,000) gallons per day, five thousand dollars (\$5,000) annually; or

2. If the facility is rated minor and has a design flow greater than or equal to one million (1,000,000) gallons per day, five thousand dollars (\$5,000) annually; or

3. If the facility is rated major, five thousand dollars (\$5,000) annually.

(F) Persons required to obtain a general permit or permit by

rule shall pay –

1. For the discharge of storm water from a land disturbance site –

A. Five hundred fifty dollars (\$550) annually if the site is at least one (1) acre and less than five (5) acres;

B. Six hundred seventy-five dollars (\$675) annually if the site is equal to or greater than five (5) acres but less than ten (10) acres;

C. Eight hundred twenty-five dollars (\$825) annually if the site is equal to or greater than ten (10) acres but less than twenty-five (25) acres;

D. One thousand six hundred seventy-five dollars (\$1,675) annually if the site is equal to or greater than twenty-five (25) acres but less than one hundred (100) acres;

E. Three thousand three hundred twenty-five dollars (\$3,325) annually if the site is equal to or greater than one hundred (100) acres but less than five hundred (500) acres; or

F. Five thousand dollars (\$5,000) annually if the site is equal to or greater than five hundred (500) acres; and

G. Any permit issued to a public agency or private party for multiple sites shall pay a single fee based upon the estimated acreage of all the sites as follows:

(I) One thousand six hundred seventy-five dollars (\$1,675) annually if the sites are less than one hundred (100) acres;

(II) Three thousand three hundred twenty-five dollars (\$3,325) annually if the sites are equal to or greater than one hundred (100) acres but less than five hundred (500) acres; or

(III) Five thousand dollars (\$5,000) annually if the sites are equal to or greater than five hundred (500) acres;

2. For the operation of an animal feeding operation or a concentrated animal feeding operation not included under subsection (2)(B) of this rule –

A. For a class IA concentrated animal feeding operation as defined by the commission, five thousand dollars (\$5,000) annually. The application fee for a new or expanding class IA facility shall be five thousand dollars (\$5,000);

B. For a class IB concentrated animal feeding operation required to have a national pollutant discharge elimination system permit (MOG01), as defined by the commission and rule, two thousand five hundred dollars (\$2,500) in 2028 and 2029, and thereafter, five thousand dollars (\$5,000) annually. The application fee for a new or expanding class IB facility with an MOG01 permit shall be three thousand seven hundred fifty dollars (\$3,750);

C. For a class IC or class II concentrated animal feeding operation required to have a national pollutant discharge elimination system permit (MOG01), as defined by the commission and rule, one thousand seven hundred fifty dollars (\$1,750) in 2028 and 2029, and thereafter, three thousand five hundred dollars (\$3,500) annually. The application fee for a new or expanding class IC or class II facility shall be three thousand seven hundred fifty dollars (\$3,750);

D. For a class IB concentrated animal feeding operation required to have a no-discharge state-only permit (MOGS1), as defined by the commission and rule, one thousand eight hundred dollars (\$1,800) in 2028 and 2029, and thereafter, three thousand six hundred dollars (\$3,600) annually. The application fee for a new or expanding class IB facility with an MOGS1 permit shall be three thousand seven hundred fifty dollars (\$3,750); or

E. For a class IC concentrated animal feeding operation required to have a no-discharge state-only permit (MOGS1), as defined by the commission and rule, three hundred dollars (\$300) in 2028, four hundred fifty dollars (\$450) in 2029, and thereafter, six hundred dollars (\$600) annually. The application

fee for a new or expanding class IC facility with an MOGS1 permit shall be two thousand five hundred dollars (\$2,500);

3. For the discharge of storm water from a municipal separate storm sewer system (MS4), three thousand dollars (\$3,000) annually;

4. For treatment works treating domestic sewage, fees in subsections (2)(A) or (2)(G); and

5. For a permit for the discharge or land application of process wastes, wastewater, or storm water potentially contaminated by activities not included in paragraphs (2)(F)1.-4. of this rule –

A. For facilities required to obtain a general permit with low complexity, eight hundred fifty dollars (\$850) annually; or

B. For facilities required to obtain a general permit with medium complexity, one thousand two hundred dollars (\$1,200) annually; or

C. For facilities required to obtain a general permit with high complexity, one thousand nine hundred dollars (\$1,900) annually; and

D. General permit complexity will be determined through the required public participation process, incorporated into the master general permit, and subject to permit appeal pursuant to section 621.250, RSMo.

(G) Persons with a direct or indirect sewer service connection to a public sewer system owned or operated by a city, public sewer district, public water district, other POTW, or any district formed pursuant to the provisions of section 30(a) of Article VI of the *Missouri Constitution* shall pay an annual fee as outlined in paragraphs (2)(G)1.-6., below. The fees provided for in this subsection shall be collected by the agency billing such customer for sewer service and remitted to the department. Fees may be collected by a person or entity other than the permittee, and such person or entity may establish their own billing and invoicing with the department, so long as all connections to any POTW are appropriately assessed and included in annual fee calculations. The permittee shall collect and remit the specified fees on an annual basis, either directly or through an approved third party. The annual fees shall be –

1. For single-family residential customers of sewer systems that serve twenty thousand (20,000) customers or more, one dollar and thirty cents (\$1.30) per residential connection;

2. For single-family residential customers of sewer systems that serve less than twenty thousand (20,000) but greater than or equal to two hundred (200) customers, one dollar and sixty cents (\$1.60) per residential connection;

3. For Significant Industrial Users or Categorical Industrial Users, as defined in 40 CFR 403.3(v), as published by the EPA Docket Center, EPA West, 1301 Constitution Avenue NW, Washington, DC 20004, October 14, 2005, which is incorporated by reference and does not include any subsequent amendments or additions, discharging to a POTW without an approved pretreatment program, four thousand dollars (\$4,000);

4. For Significant Industrial Users or Categorical Industrial Users, as defined in 40 CFR 403.3(v), as published by the EPA Docket Center, EPA West, 1301 Constitution Avenue NW, Washington, DC 20004, October 14, 2005, which is incorporated by reference and does not include any subsequent amendments or additions, discharging to a POTW with an approved pretreatment program, two hundred fifty dollars (\$250);

5. For users not listed in paragraphs (2)(G)1.-4. above, seventeen dollars (\$17); or

6. For POTWs with less than two hundred (200) connections, fees shall be assessed based on flow for non-POTW treatment works treating domestic sewage in subsection (2)(A).

(H) For the purpose of permit modification fees, non-substantive changes are those listed as minor modifications in

40 CFR section 122.63, as published by the EPA Docket Center, EPA West, 1301 Constitution Avenue NW, Washington, DC 20004, October 22, 2015, which is incorporated by reference and does not include any subsequent amendments or additions. Persons requesting transfers of, or modifications to, state operating permits that charge a service connection fee shall pay five hundred dollars (\$500). Persons requesting a modification to an operating permit shall pay the following fees, unless expressly included in other subsections within this section:

1. Two hundred fifty dollars (\$250) for transfers of responsible authority or other minor modifications;
2. Five hundred dollars (\$500) for a modification of a general permit;
3. One thousand dollars (\$1,000) for transfers from site-specific permits to general permits; or
4. A fee equal to twenty-five percent (25%) of the annual operating fee assessed for the facility for other changes.

(I) Persons requesting water quality certifications, modifications to water quality certifications, or mitigation reviews in accordance with section 401 of the federal Clean Water Act shall pay a fee of—

1. Five hundred dollars (\$500) for a project that requires a Finding of No Significant Impact or other documentation pursuant to the federal National Environmental Policy Act, but does not require an environmental impact statement;
2. Three hundred dollars (\$300) for modifications to a water quality certification;
3. Five thousand dollars (\$5,000) for a project that does require an environmental impact statement pursuant to the federal National Environmental Policy Act, a monitoring plan, or environmental study;
4. Three hundred dollars (\$300) for mitigation review requests; and
5. Applicants shall submit the standard application form for a section 404 permit as administered by the U.S. Army Corps of Engineers or similar information required for other federal licenses and permits, except that the fee is waived for water quality certifications issued to and accepted by the U.S. Army Corps of Engineers for activities authorized pursuant to a general permit or nationwide permit issued pursuant to section 404 of the federal Clean Water Act.

(3) On Demand Service Fees.

(A) All persons requesting the following services, certifications, or permit exemptions shall submit their request with the associated one- (1-) time fee:

1. Variance and provisional variance requests shall include a one thousand dollar (\$1,000) fee, except that variances based on significant economic impact shall pay a two hundred fifty dollar (\$250) fee;
2. A request for a section 316(a) variance shall include a fee of five thousand dollars (\$5,000);
3. A request for a section 316(b) variance shall include a fee of five thousand dollars (\$5,000);
4. Each request for a no-exposure certification shall include a fee of three hundred dollars (\$300), including required renewals;
5. A request for a de minimis permit exemption shall include a processing fee of one hundred fifty dollars (\$150);
6. A request for a standard mixing zone study shall include a fee of one thousand dollars (\$1,000);
7. A request for a complex mixing zone study shall include a fee of four thousand dollars (\$4,000);
8. A request for a use attainability analysis shall include a fee of five thousand dollars (\$5,000); and

9. A request for a site-specific metals translator, biotic ligand model, or similar site-specific calculation adjustments (excluding hardness) shall include a fee of two thousand dollars (\$2,000). A request for calculation adjustments based on hardness does not require a fee.

(4) Engineering Fees.

(A) Construction permit fees shall be tendered together with the construction permit application. Incomplete construction permit applications and related engineering documents will be returned by the department if they are not completed in the time frame established by the department in a comment letter to the owner. Construction permit, facility plan, and antidegradation review fees for returned or incomplete applications shall be forfeited.

(B) Application fees for construction applications being processed by the department that are withdrawn by the applicant shall be forfeited.

(C) The antidegradation review fees shall be assessed as follows:

1. For facilities covered under a general permit that includes a general antidegradation determination, five hundred dollars (\$500);
2. For treatment works treating domestic sewage with a design flow less than five hundred thousand gallons per day (500,000 gpd), two thousand dollars (\$2,000);
3. For treatment works treating domestic sewage with a design flow of five hundred thousand gallons per day (500,000 gpd) or more, four thousand dollars (\$4,000); or
4. For all other facilities, five thousand dollars (\$5,000).

(D) The facility plan review fees shall be assessed as follows:

1. For facilities covered under a general permit that includes a general antidegradation determination or specific facility plans, five hundred dollars (\$500);
2. For treatment works treating domestic sewage with a design flow less than five hundred thousand gallons per day (500,000 gpd), or for pump-and-haul permit-exempted treatment works treating domestic sewage or septage, or for no-discharge industrial earthen basins, one thousand five hundred dollars (\$1,500);
3. For treatment works treating domestic sewage with a design flow of five hundred thousand gallons per day (500,000 gpd) or more, three thousand five hundred dollars (\$3,500);
4. For all other facilities, five thousand dollars (\$5,000); and
5. All facility plan reviews include thirty-two (32) hours of department review time. Additional hours of department review time beyond thirty-two (32) hours will be charged at a rate of thirty-five dollars (\$35) per hour.

(E) Construction permit review fees shall be assessed as follows:

1. For facilities covered under a general permit that includes a general antidegradation determination or specific facility plans, five hundred dollars (\$500);
2. For treatment works treating domestic sewage with a design flow less than five hundred thousand gallons per day (500,000 gpd), or for pump-and-haul permit-exempted treatment works treating domestic sewage or septage, or for no-discharge industrial earthen basins, one thousand five hundred dollars (\$1,500);
3. For treatment works treating domestic sewage with a design flow of five hundred thousand gallons per day (500,000 gpd) or more, three thousand five hundred dollars (\$3,500);
4. For all other facilities, five thousand dollars (\$5,000); and
5. All construction permit application reviews include

seventy-two (72) hours of department review time. Additional hours of department review time beyond seventy-two (72) hours will be charged at a rate of forty-two dollars (\$42) per hour. If construction permit applications are submitted prior to department approval of an associated facility plan, both the facility plan and construction permit review fees shall be assessed, and the total hours of review time will be limited to seventy-two (72) hours for both the facility plan and the construction permit application. Additional review hours beyond seventy-two (72) hours will be charged at a rate of forty-two dollars (\$42) per hour.

(F) Sewer extension permit applications shall include a fee of one thousand dollars (\$1,000).

*AUTHORITY: section 644.054, RSMo Supp. 2026. Emergency rule filed July 27, 1990, effective Sept. 12, 1990, expired Jan. 10, 1991. Original rule filed July 17, 1990, effective Dec. 31, 1990. For intervening history, please consult the **Code of State Regulations**. Rescinded and readopted: Filed Aug. 13, 2026.*

PUBLIC COST: This proposed rule may cost up to \$6,978,784 annually for state agencies and political subdivisions.

PRIVATE COST: This proposed rule may cost up to \$11,188,687 annually combined for all private entities.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Natural Resources. To be considered, comments must be received by the end of the public comment period, which is 5 p.m. Oct. 23, 2026. A public hearing is scheduled for Oct. 16, 2026, at 1 p.m., at the Department of Natural Resources, East Elm Street Conference Center, 1730 East Elm St., Jefferson City, MO 65101. A virtual option is available at <https://stateofmo.webex.com/stateofmo/j.php?MTID=m78579e32d00b56d4cdd09d599e7f07c0>, meeting number (access code) 2870 391 7727, password DNR, or call-in number 1-650-479-3207. Comments may also be submitted to Susan Mills, Water Protection Program, PO Box 176, Jefferson City, MO 65102-0176, via email at susan.mills@dnr.mo.gov, or online at <https://apps5.mo.gov/proposed-rules/welcome.action#OPEN>.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title: Department of Natural Resources
Division Title: Division of Environmental Quality
Chapter Title: Chapter 6 - Permits**

Rule Number and Name:	10 CSR 20-6.011 Fees
Type of Rulemaking:	Rule (Re-adoption)

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Publicly Owned Industrial Facilities	\$57,544 total annual fees
Publicly Owned Land Disturbance Sites	\$252,162 total annual fees
Publicly Owned Construction and Engineering Fees	\$495,000 total annual fees
Publicly Owned Domestic Wastewater Systems	\$5,636,078 total annual fees
MS4s	\$498,000 total annual fees
On-Demand Services and Other Fees for Publicly Owned Systems	\$40,000 total annual fees

III. WORKSHEET

The fees are listed above by fee category. Additional information may found online at: <https://dnr.mo.gov/about-us/forums-stakeholder-groups/clean-water-fees>.

IV. ASSUMPTIONS

We assume the number of sites will remain relatively stable and all permittees will pay their fees on time.

**FISCAL NOTE
PRIVATE COST**

- I. Department Title: Department of Natural Resources
Division Title: Division of Environmental Quality
Chapter Title: Chapter 6 - Permits**

Rule Number and Title:	10 CSR 20-6.011 Fees
Type of Rulemaking:	Rule (Re-adoption)

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:
3,064 Industrial Sites	Businesses, including small businesses	\$4,220,456 total annual fees
5,500 Land Disturbance Sites	Businesses, including small businesses	\$1,983,631 total annual fees
1,750 Domestic Wastewater Systems	Businesses, including small businesses	\$4,213,100 total annual fees
520 Concentrated Animal Feeding Operations (CAFOs)	Businesses, including small businesses	\$346,500 total annual fees
50 Land Application Sites	Businesses, including small businesses	\$250,000 total annual fees
75+ On Demand Services and other fees	Businesses, including small businesses	\$152,000 total annual fees
3 Construction/ Engineering Sites	Businesses, including small businesses	\$23,000 total annual fees

III. WORKSHEET

The fees are listed above by fee category. Additional information may found online at: <https://dnr.mo.gov/about-us/forums-stakeholder-groups/clean-water-fees>.

IV. ASSUMPTIONS

We assume the number of sites will remain relatively stable and all permittees will pay their fees on time.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 35 – Dental Program**

PROPOSED AMENDMENT

13 CSR 70-35.010 Dental Benefits and Limitations, MO HealthNet Program. The MO HealthNet Division is amending sections (1)-(5), removing section (6), and renumbering as necessary.

PURPOSE: This amendment updates terminology, incorporation by reference language, graduation requirements for dentist specialists, adds language to define “physician,” and clarifies the prior authorization approval period to provide full transparency, accountability, and clarity to stakeholders and the public.

(1) Administration. The MO HealthNet ~~[d]~~Dental ~~[p]~~Program shall be administered by the ~~[MO HealthNet Division.]~~ Department of Social Services, **MO HealthNet Division**. The dental services covered and not covered, the limitations under which services are covered, and the maximum allowable fees for all covered services shall be determined by the MO HealthNet Division and shall be included in the MO HealthNet Dental ~~[Provider] Manual~~, which is incorporated by reference and made part of this rule as published by the Department of Social Services, MO HealthNet Division, 615 Howerton Court, Jefferson City, MO 65109, ~~[at its website at www.dss.mo.gov/mhd, May 2, 2016]~~**revised October 28, 2025**. This rule does not incorporate any subsequent amendments or additions. Dental services covered by the MO HealthNet program shall include only those which are clearly shown to be medically necessary. The division reserves the right to effect changes in services, limitations, and fees with proper notification to MO HealthNet dental providers.

(2) Provider Participation. A dentist shall be licensed by the dental board of the state in which s/he is practicing and shall have signed a participation agreement to provide dental services under the MO HealthNet program. An oral surgeon or other dentist specialist shall be licensed in his/her specialty area by the dental board of the state in which s/he is practicing. In those states not having a specialty licensure requirement, the dentist specialist shall be a graduate of and hold a certificate from a graduate training program in that specialty in an accredited dental school **or specialty training program**. In either case, the dental specialist shall have signed a participation agreement to provide dental services under the MO HealthNet program. A dental hygienist shall be licensed by the dental board of the state for at least three (3) consecutive years and practicing in a public health setting to provide fluoride treatments, teeth cleaning, and sealants to MO HealthNet/~~MO HealthNet for Kids~~ eligible children ages zero (0) to twenty (20). **A physician must be a duly licensed Doctor of Medicine (MD) or Doctor of Osteopathy (DO) licensed in accordance with the licensing provisions of the state in which s/he practices, and must have a current MO HealthNet participation agreement and provider number.**

(3) Participant Eligibility. The MO HealthNet dental provider ~~[shall]~~**must** ascertain the ~~[patient's]~~**participant's** MO HealthNet **eligibility** status before any service is performed. The participant's MO HealthNet/~~MO HealthNet for Kids~~ eligibility is determined by the **Department of Social Services**, Family Support Division. The participant's eligibility ~~[shall]~~**must** be verified from a current MO HealthNet/~~MO HealthNet for~~

~~Kids~~ identification card or a letter of new approval in the participant's possession~~]. The patient must be a MO HealthNet eligible participant under the MO HealthNet/MO HealthNet for Kids program] and must be active on the date the service is performed.~~ The MO HealthNet Division is not allowed to pay for any service to a patient who is not eligible under the MO HealthNet/~~MO HealthNet for Kids~~ program.

(A) Coverage of dental services for adults is limited to certain categories of service and may require prior authorization: trauma of the mouth, jaw, teeth, or other contiguous sites as a result of injury; treatment of a disease/medical condition without which the health of the individual would be adversely affected; preventive services; restorative services; periodontal treatment; oral surgery; extractions; radiographs; pain evaluation and relief; infection control; and general anesthesia. Further detail on covered adult dental services may be referenced ~~[at www.dss.mo.gov/mhd]~~ **in the MO HealthNet Dental Manual**.

(4) Prior Authorization. When prior authorization is required, the form provided by the MO HealthNet Division, or its contracted agent shall be used. The dental service shall not be started until written approval has been received. Telephone approval shall not be given. Prior authorization shall be effective for a period of one hundred ~~[twenty (120)]~~**eighty (180) days or until the participant turns twenty-one (21) years of age, whichever comes first**, from the date of written approval. Prior authorization approves the medical necessity of the requested dental service. It shall not guarantee payment for that service as the patient must be a MO HealthNet eligible participant on the date the service is performed. The division reserves the right to request documentation regarding any specific request for prior authorization.

(5) Orthodontia Services. When an eligible participant is believed to have a condition that may require orthodontic treatment, the attending dentist should refer the participant to a qualified dentist or orthodontist for preliminary examination to determine if the treatment will be approved. The fact that the participant has moderate or even severe orthodontic problems~~],~~ or has been advised by a dentist or orthodontist to have treatment is not, by itself, a guarantee that the patient will qualify for orthodontia services through MO HealthNet. Coverage is determined solely by meeting the criteria listed below in subsections (5)(A) and (5)(B) or (5)(C).

(A) To be eligible for orthodontia services, the participant must meet all ~~[of]~~ the following general requirements:

1. Be under twenty-one (21) years of age; and
2. Have good oral hygiene documented in the child's treatment plan; and

3. Have permanent dentition. Exceptions to having permanent dentition are as follows:

A. Participant has a primary tooth retained due to ectopic or missing permanent tooth; or

B. Participant may have primary teeth present if they have cleft palate, severe traumatic deviations, or an impacted maxillary central incisor; or

C. Participant may have primary teeth if they are thirteen (13) years of age or older.

(B) The determination whether ~~[or not]~~ a participant will be approved for orthodontic services shall be initially screened using the Handicapping Labio-Lingual Deviation (HLD) Index. The HLD Index must be fully completed in accordance with the instructions. The division will approve orthodontic services when the individual meets all ~~[of]~~ the criteria in subsection (5) (A) above and one (1) of the criteria listed in paragraphs 1. to

7. below –

1. Has a cleft palate;
2. Has a deep impinging overbite when the lower incisors are damaging the soft tissue of the palate (lower incisor contact only on the palate is not sufficient);
3. Has a cross-bite of individual anterior teeth when damage of soft tissue is present;
4. Has severe traumatic deviations;
5. Has an over-jet greater than nine millimeters (9 mm) or reverse over-jet of greater than three and one-half millimeters (3.5 mm);
6. Has an impacted maxillary central incisor; or
7. Scores twenty-eight (28) points or greater on the HLD Index.

(C) If the participant meets the criteria in subsection (5)(A) above but does not meet any of the criteria in subsection (5)(B), the division will consider whether orthodontic services should be provided based upon other evidence that orthodontic services are medically necessary[—].

1. The division shall consider additional information of a substantial nature about the presence of severe deviations affecting craniofacial health. Other deviations shall be considered *[to be]* severe if, left untreated, they would cause irreversible damage to the teeth and underlying structures, result in disease related bone and tooth loss, or craniofacial deformities associated with developmental disabilities in chewing or speaking.

2. Other evidence shall include information of a substantial nature about the presence of a medical condition which is directly affected by the condition of the mouth or underlying structures. Orthodontic treatment shall be considered *[to be]* medically necessary if, without the orthodontic treatment, the medical condition would be adversely affected and would result in pain, infection, illness, or significant and immediate impact on the normal function of the body and the individual's ability to function. In addition, such orthodontic treatment must be demonstrated to be 1) of clear clinical benefit to the eligible participant; 2) *[A]*appropriate for the injury or illness in question; and 3) *[C]*conform to the standards of generally accepted orthodontic practice as supported by applicable medical and scientific literature. In addition to documentation from an orthodontist or dentist, a recommendation for orthodontic treatment in relation to a medical condition must also be supported by documented evidence of the medical condition from a licensed *[medical doctor]*physician, board certified to diagnose the medical condition.

3. In addition, the division may consider information of a substantial nature about the presence of mental, emotional, and/or behavioral problems, disturbances, or dysfunctions, as defined in the most current edition of the *Diagnostic Statistical Manual* of the American Psychiatric Association, and which may be caused by the participant's daily functioning as it relates to a dentofacial deformity. The MO HealthNet Division will only consider cases where a diagnostic evaluation has been performed by a licensed psychiatrist or a licensed psychologist who has accordingly limited his or her practice to child psychiatry or child psychology. The evaluation must clearly and substantially document how the dentofacial deformity is related to the child's mental, emotional, and/or behavioral problems and must clearly and substantially document that orthodontic treatment is medically necessary and will significantly ameliorate the problems.

4. Orthodontic treatment shall not be considered *[to be]* medically necessary when –

- A. The orthodontic treatment is for aesthetic or cosmetic reasons only; or

B. The orthodontic treatment is to correct crowded teeth only, if the child can adequately protect the periodontium with reasonable oral hygiene measures; or

C. The child has demonstrated a lack of motivation to maintain reasonable standards of oral hygiene and oral hygiene is deficient.

[(6) Services, Covered and Noncovered. The MO HealthNet Dental Provider Manual shall provide the detailed listing of procedure codes for services covered by the MO HealthNet Dental Program. Pricing information can be obtained from the fee schedule posted at www.dss.mo.gov/mhd/providers/pages/cptagree.htm.]

[(7)](6) General Regulations. General regulations of the MO HealthNet program apply to the dental program.

[(8)](7) Records Retention. Sanctions may be imposed by the MO HealthNet agency against a provider for failing to make available, and disclosing to the MO HealthNet agency or its authorized agents, all records relating to services provided to MO HealthNet participants or records related to MO HealthNet payments, whether or not the records are comingled with non-MO HealthNet records in compliance with 13 CSR 70-3.030. These records must be retained for five (5) years from the date of service. Fiscal and medical records coincide with and fully document services billed to the MO HealthNet agency. Providers must furnish or make the records available for inspection or audit by the Department of Social Services or its representative upon request. Failure to furnish, reveal, or retain adequate documentation for services billed to the MO HealthNet program, as specified above, is a violation of this regulation.

AUTHORITY: sections 208.152[,] and 208.153, RSMo Supp. [2015]2026, and section[s 208.153 and] 208.201, RSMo [Supp. 2013]2016. This rule was previously filed as 13 CSR 40-81.040. Original rule filed Jan. 21, 1964, effective Jan. 31, 1964. For intervening history, please consult the Code of State Regulations. Amended: Filed Aug. 6, 2026.

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. A public hearing will not be scheduled.

TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30 – Division of Regulation and Licensure Chapter 35 – Hospices

PROPOSED AMENDMENT

19 CSR 30-35.020 Hospice Providing Direct Care in a Hospice

Facility. The department is amending section (4).

PURPOSE: This amendment eliminates the pre-construction plan review and approval process previously conducted by the department's Engineering Consultation Unit, clarifies a project notification requirement, and outlines the provision of relevant project information upon request to ensure efficient deployment of resources while maintaining regulatory oversight.

(4) General Design and Construction Standards for New Inpatient Hospice Facilities.

(A) Health and Safety Laws. The hospice shall meet all federal, state, and local laws, ordinances, regulations and codes pertaining to health and safety, including but not limited to[,] provisions regulating construction, maintenance, and equipment.

1. General [R]requirements.

A. *[After October 30, 1996, a]* A new hospice facility shall *[submit plans for approval to]* **notify** the [D]department *[of Health]* **of intention** for the construction of a new facility, expansion, or renovation of an existing state-certified hospice or the conversion of an existing facility not previously and continuously state-certified and operated as a hospice facility under section 197.250, RSMo.

B. New hospice facilities shall be designed and constructed in conformance with this rule.

C. This rule is not intended to restrict innovations and improvements in design or construction techniques. Accordingly, the [D]department *[of Health]* may approve *[plans and specifications which contain]* deviations from this rule. Requests for deviations from requirements on physical facilities shall be in writing to the [D]department *[of Health]* and shall contain information which determines that the respective intent or objectives of this rule have been met. Approvals for deviations shall be in writing and both requests and approvals shall be made a part of the permanent [D]department *[of Health]* records for the hospice.

D. Where renovation or replacement work is done within an existing licensed facility, all new work, additions, or both[,] shall comply with the applicable sections of this rule. Where existing major structural elements make total compliance impractical or impossible, alternative proposals which result in an equivalency may be considered by the department.

E. In renovation projects and additions to existing state-certified hospice facilities, only that portion of the total facility affected by the project shall comply with the applicable sections of this rule. However, upon construction completion, the facility shall satisfy all functional requirements for state-certified hospices.

F. Those existing portions of the facility which are not included in the renovation but which are essential to the functioning of the complete facility as well as existing state-certified building areas that receive less than substantial amounts of new work shall, at a minimum, comply with the state certification requirements which were in effect at the time that the existing portion of the building was state certified.

G. All required fire exits shall be maintained throughout the construction and the work shall be phased as necessary to minimize disruption of the existing hospice operation.

2. Planning and [C]construction [P]procedures.

A. Any hospice facility constructed or renovated *[after October 30, 1996]* shall have plans and specifications prepared in conformance with Chapter 327, RSMo, by an architect or engineer duly registered in Missouri. The owner of each new facility or the owner of an existing licensed inpatient

hospice being added to or undergoing major alterations shall provide a program – scope of services – which describes space requirements, staffing patterns, departmental relationships, and other basic information relating to the objectives of the facility. The program may be general but it shall include a description of each function to be performed, approximate space needed for these functions, and the interrelationship of various functions and spaces. The program shall describe how essential services can be expanded in the future as the demand increases. Appropriate modifications or deletions in space requirements may be made when services are shared or purchased, provided the program indicates where the services are available and how they are to be provided. This program shall be submitted to the [D]department *[of Health]* for review along with the plans developed for the project. *[Schematic and preliminary plans showing the basic layout of the building and the general types of construction, mechanical and electrical systems and details may be submitted to the department before the larger and more complicated working drawings and specifications so that necessary corrections can be easily made before final plans are completed. Working drawings and specifications, complete in all respects, shall be prepared and submitted to the Department of Health for approval.]* These plans shall cover all phases of the construction project, including site preparation[:]; paving; general construction; mechanical work, including plumbing, heating, ventilating, and air conditioning; electrical work; and all built-in equipment, including elevators, kitchen equipment, cabinet work, and the like. **Upon request by the department, the facility shall submit other information regarding the scope and details of any new construction project or significant renovation that will impact patient health, safety, and compliance with applicable rules.**

B. The [D]department *[of Health]* shall be notified in writing within five (5) days after construction begins. Construction shall be in conformance with plans and specifications *[approved by the Department of Health]* **developed by the facility's architect or engineer of record.** The department may elect to inspect the construction of hospice projects at any time during the development of the project. *[If construction of the project is not started within one (1) year or completed within a period of three (3) years after the date of the approval of the plans and specifications, the plans and specifications shall be resubmitted to the Department of Health for its approval and shall be amended, if necessary, to comply with the then current rules before construction work is started or continued.]*

C. References in this rule to National Fire Protection Association (NFPA) publications are those contained in the **twelve-** (12-) volume *1994 Compilation of NFPA Codes, Standards, Recommended Practices and Guides*. Where there are discrepancies between referenced NFPA publication requirements and this rule, the requirements of this rule shall apply.

D. The design and construction of hospices shall conform to the most stringent requirements of this rule and the local governing building code and zoning ordinances.

3. Site.

A. Adequate paved pedestrian access shall be provided within the lot lines to the main entrance. Loading and unloading space for delivery vehicles shall be paved.

B. Adequate paved parking shall be provided. Parking space needs shall be determined by the local zoning requirement and the operational program but shall not be less than one (1) space for each of the maximum number of staff persons on duty at any given time plus one (1) parking space

for each licensed inpatient bed in the facility.

C. Fire lanes shall be provided as required by local authority and kept clear to provide immediate access for fire fighting equipment.

D. The site shall provide reasonable access for those individuals to be served by the facility. The facility shall be on an all-weather road for easy access by vehicular traffic. Consideration should be given to locating the hospice to provide easy access to public transportation services which may be available in the community.

E. The site shall be located within the service area of a public fire department.

4. Roads, parking facilities, walks, ramps, and entrances shall be accessible and usable by persons with various physical handicaps.

A. At least one (1) toilet, telephone, and drinking fountain shall be provided on each floor of a hospice which is accessible for use by handicapped public and staff.

B. Elevator controls and alarms shall be accessible to wheelchair occupants and shall be provided with tactile signage for the visually impaired.

C. Design details for handicapped accessible facilities should be consistent with the *Guidebook to: The Minimum Federal Guidelines of Requirements for Accessible Design* published January 6, 1981, by the U.S. Architectural and Transportation Barriers Compliance Board.

D. At least ten percent (10%) of the patient beds shall be located in handicapped-accessible rooms with accessible toilet rooms which open directly into the patient room. All other clinical areas to which patients have common access shall be handicapped-accessible.

5. Administrative and public areas shall be provided.

A. All hospices shall provide adequate work areas to support the administrative personnel and governing body. The facilities shall allow business to be conducted in a setting which provides confidentiality and privacy as required. The administrative offices may be located remotely from a hospice inpatient unit or may be housed within the inpatient facility.

B. Where administration is included within the inpatient facility, the following shall be provided:

(I) Administrator's office;

(II) Business office including a work area for quality assurance;

(III) Storage and work area for archived medical records;

(IV) Conference room for governing board meetings and personnel in-service training; and

(V) Office for director of patient-care services.

C. Each inpatient hospice facility shall provide the following public areas in a location separated from the clinical and service areas of the facility:

(I) Lobby/waiting room with reception;

(II) Wheelchair-accessible public toilet;

(III) Wheelchair-accessible public drinking fountain;

and

(IV) Wheelchair-accessible public phone.

6. Design of patient-care units.

A. One (1) or more patient-care units shall be provided. Each unit shall not exceed a maximum of twenty (20) beds.

B. Each patient-care unit shall be a continuous area which does not require patient-care traffic to traverse other areas and shall be restricted to only one (1) floor level. If justified by the program submitted under subparagraph (2) (A)2.A. of this rule, the department may consider approval of designs which provide for larger capacity patient-care units.

C. The bed area in a patient room exclusive of toilet

rooms, closets, alcoves, or vestibules[,] shall not be less than one hundred twenty (120) square feet in a private room and not less than two hundred (200) square feet in a semi-private room. Heating units and lavatories may protrude into this space.

D. No dimension for the bed area in any patient room shall be less than ten (10) feet.

E. No patient room shall house more than two (2) patients.

F. Each patient-care unit shall have not greater than fifty percent (50%) of its beds housed in semi-private rooms and the remaining rooms shall be limited to occupancy by one (1) patient. If justified by the program submitted under subparagraph (2)(A)2.A. of this rule, the department may consider approval of designs which provide other ratios of semi-private to private patient rooms.

G. Each patient shall have access to a toilet room without entering the general corridor area.

H. One (1) toilet may serve not more than two (2) adjacent rooms.

I. The toilet room shall contain a lavatory and water closet and shall be sized to permit access for the patient and an assisting member of the staff. The lavatory may be omitted from the toilet room if a lavatory is provided in the patient room.

J. At least one (1) patient room per patient-care unit shall be provided to be used for isolation. This unit shall have a toilet room equipped with a bathing facility which serves this room exclusively.

K. Mirrors shall be provided in each patient room or adjoining toilet room. Mirrors shall be at least three [(3)] feet (3') high located with the bottom edge no more than three feet four inches (3'4") above the floor.

L. Patients shall have separate wardrobes, lockers, or closets located within their respective patient rooms. A clothes rod and shelf shall be provided.

M. One or more windows shall be provided, with the sash not more than three [(3)] feet (3') above the floor and with a gross area of not less than ten percent (10%) of the floor area of the room. In each patient room at least one (1) window to the outside shall be operable. Patient room windows shall be exposed to an outside area not less than thirty [(30)] feet (30') horizontally opposite the window which contains no construction or grading which would further diminish the view and the exposure of the window to natural light.

N. Social spaces (dining, recreation, meditation) shall be provided throughout the facility with a cumulative area of not less than thirty (30) square feet per patient bed. One (1) social space may serve more than one (1) patient-care unit provided it is directly accessible from each unit and is sized proportionate to the total number of patient beds it serves. No social space shall be smaller than one hundred fifty (150) square feet in area.

O. Unless bathing facilities are included in the toilets serving each patient room, central bathing facilities shall be provided in each patient-care unit at a ratio of not fewer than one for each ten (1:10) beds.

P. Each bathing facility shall be located in its own room and shall be directly accessible from the general corridor. The bathing facility may be either a tub, shower, or tub/shower combination.

Q. However, at least one (1) handicapped-accessible shower shall be provided on each patient unit.

R. A locked cabinet for the storage of cleaning supplies shall be available in or near each bathroom.

7. Support and services areas. The following staff support

and service areas shall be located directly accessible to each patient care unit:

A. Clean work and storage facilities shall be equipped with counter and sink and storage space provided for clean linen and supplies;

B. A separate soiled/decontamination utility room shall be equipped with a clinic sink (this fixture is not required where bedpan-flushing devices have been installed at each patient toilet)[,]. [c]Counter and sink and sufficient floor space shall be provided to accommodate storage containers for soiled linen, trash, and infectious waste;

C. Space shall be provided for secure storage of staff personal items;

D. A staff station shall be located to provide visual supervision of the patient-care unit corridors. The station shall consist of a work counter and secure storage space for charts;

E. A medication storage and preparation station which has a means of locked storage for all medications shall be equipped with a work counter, sink, and refrigerator;

F. Separate locked storage facilities shall be provided in the station for controlled substances;

G. If medications are held in each patient room, the room shall include separate locked storage facilities for each patient's medications;

H. A nourishment station shall be equipped with a work counter, sink, and refrigerator and shall be provided physically remote from the medication preparation station;

I. Storage space shall be provided for mobile equipment used on the unit;

J. A janitor's closet shall be provided which is equipped with a mop sink and has sufficient space for the cleaning equipment and open supplies used to maintain the patient-care unit; and

K. All clean support functions may be located in one (1) clean workroom provided the room is carefully designed to provide adequate storage and function separations.

8. Food service facilities shall be designed and equipped to meet the requirements of the scope of services outlined as follows:

A. Dietary facilities shall comply with 19 CSR 20-1.010;

B. In hospice facilities where food is prepared on-site, the dietary facilities shall, [as] at a minimum, have[—] a storage space including cold storage for four- (4-) day supply, space and equipment for food preparation to facilitate efficient food preparation and to provide for a safe and sanitary environment, conveniently located handwashing facilities, space for preparing food for distribution to patients, warewashing facilities [which] that are isolated from the food preparation and serving area, and storage facilities for waste [which] that is inaccessible for insects and rodents and accessible to the outside for pickup or disposal.

C. The warewashing processes shall produce dietary ware which is free of pathogenic organisms; and

D. In hospice facilities where the food service is provided through a vendor contract, dietary facilities shall, [as] at a minimum, include space for receiving and holding the food transport equipment, utility connections for food transport equipment to maintain appropriate serving temperatures, and a holding area for soiled dietary ware transport equipment [which] that is out of the patient area and located near the service entrance for pick-up.

(B) Service [F]facilities [S]shall [M]meet the [F]following [S] standards:

1. Services including linen service.

A. Service facilities shall be provided in each inpatient hospice facility and located to be out of the normal public and

clinical traffic flow.

B. A weather-protected service entrance shall be provided separate from entrances used by public and patients.

C. Space and facilities shall be provided for the sanitary storage and disposal of waste. Exterior dumpsters will suffice provided they can be accessed under the protection provided at the service entrance.

D. A general storage room shall be provided with an area not less than ten (10) square feet per bed for the first fifty (50) beds, plus eight (8) square feet per bed for the next twenty-five (25) beds, plus five (5) square feet per bed for any additional beds over seventy-five (75). No storage room shall be less than one hundred (100) square feet of floor space. Off-site storage is acceptable[,]; however, one half (1/2) of the required storage space shall be located in the inpatient hospice facility. General storage shall be concentrated in one area.

E. Space shall be provided to house mechanical equipment. The space shall be adequate for initial installation and ongoing maintenance access for each component of the systems housed in it. Mechanical equipment shall not be installed in rooms designated to house other functions.

F. A housekeeping room shall be provided with a janitor's sink and space to store opened containers of cleaning supplies and housekeeping equipment used to maintain the facility. This room is not required if the hospice is maintained by a contract cleaning service which transports the necessary cleaning supplies and equipment to the facility on a daily basis.

G. An oxygen storage room shall be provided. This room shall be enclosed with one- (1-) hour rated construction and shall have a powered or gravity vent to the outside. Permanent racks or fasteners shall be provided and used in the oxygen storage room to prevent accidental damage or dislocation of oxygen cylinders. In facilities storing quantities of oxygen less than one thousand five hundred (1,500) cubic feet in total, a power ventilated storage cabinet will comply. No ventilated gas storage facilities are required in hospices which store no medical gases within the building.

H. Laundry services may be provided by the hospice operator or may be obtained through contract with a linen service vendor. If laundry for the facility is done commercially, either entirely or in part, space shall be provided for the sorting, processing, and storing of both soiled and clean linen. Storage space shall be located to facilitate convenient pickup and delivery by commercial laundry personnel. Hospices with only one (1) patient-care unit may accommodate these functions within the utility facilities provided in the unit's staff support area.

I. Hospice-operated laundry facilities shall be designed and procedures instituted to prevent cross-contamination of clean and dirty linen. The laundry room shall be in a separate room from the kitchen, patients' rooms, the dining room, and the bathrooms or the nursing utility room. Adequate space shall be provided in the laundry room for the storing, sorting, and processing of soiled linen. The processes of the laundry operation shall be appropriate to the production of patient linens [which] that are free of pathogenic organisms. Space shall be provided for the storage of clean linen in a separate room from the laundry.

J. As may be required by the program, laundry facilities provided for cleaning patients' clothing exclusively shall be located in the patient-care unit but in a room separate from other functions. A residential-style laundry equipment installation is acceptable.

K. As required by the program, living and sleeping quarters, separate from patients' facilities, shall be provided

for the employees and their families who may reside in the facility;

2. Elevators.

A. All inpatient hospice facilities having patient-care facilities located on any floor other than the main entrance floor shall have at least one (1) electric or electrohydraulic elevator. Hospice facilities with more than thirty (30) beds located on any floor other than the main entrance floor shall have at least two (2) elevators. Hospice facilities with more than two hundred (200) beds located on any floor other than the main entrance floor shall provide passenger and service elevators in numbers and at locations determined by a professionally conducted study of the hospice operation and its estimated vertical transportation needs.

B. Inside dimensions of patient-use elevators shall be not less than five feet four inches (5'4") by eight feet (8') with a capacity of three thousand five hundred (3,500) pounds. Cab and hoistway doors shall be not less than three feet ten inches (3'10") clear opening.

C. Elevators shall be equipped with an automatic leveling device of the two-way automatic maintaining type with an accuracy of plus or minus one-half [(1/2)] inch (1/2").

D. Elevator call buttons, controls, and door safety stops shall be of a type that will not be activated by heat or smoke.

E. Elevator controls, alarm buttons, and telephones shall be accessible to wheelchair occupants and usable by others with various physical disabilities.

F. Elevator hoistway doors shall be fire rated to maintain the integrity of the fire-rated shaft enclosure;

3. Chutes and dumbwaiters.

A. Chutes and dumbwaiters may be installed in hospice facilities as required by the operational program.

B. Linen and trash chutes shall be of fire-resistant material and shall be installed with flushing ring, vent to atmosphere, and floor drain at the floor of the chute discharge. An automatic sprinkler shall be provided at the top of each linen and trash chute.

C. Service openings to chutes shall not be located in corridors or passageways but shall be located in a room having a fire-resistant construction of not less than one (1) hour. Doors to the rooms shall be not less than three-quarter- (3/4-) [-]hour labeled doors equipped with an automatic closing device.

D. Service openings to chutes and other vertical openings shall have an approved self-closing labeled fire door rating not less than the fire-resistant rating of the shaft in which the chute is installed.

E. Chutes shall discharge directly into collection rooms separate from the incinerator, laundry, or other services. Separate collection rooms shall be provided for trash and for linen. These rooms shall have a fire-resistant construction of not less than one (1) hour. Doors to these rooms shall be not less than three-quarter- (3/4-) [-]hour labeled doors equipped with an automatic closing device.

F. Dumbwaiters, conveyors and material-handling systems shall not open directly into a corridor or exitway but shall open into a room enclosed by construction having a fire resistance of not less than one (1) hour and provided with a three-quarter- (3/4-) [-]hour labeled fire door with a self-closing device.

G. Where horizontal conveyors and material-handling systems penetrate fire-rated walls or smoke walls, the penetrations shall be protected to maintain the integrity of the wall;

4. General design, finish, and life safety requirements.

A. A continuous system of unobstructed corridors, referred to as required corridors, shall extend through the

enclosed portion of each story of the building, connecting all rooms and spaces with each other and with all entrances, exitways and elevators, with the following exceptions: work suites such as the administrative suite and dietary area, which are occupied primarily by employed personnel, may have within them corridors or aisles as considered advisable, but are not subject to the regulations applicable to required corridors. Areas may be open to the required corridor system as permitted by NFPA 101 (1994), *The Life Safety Code*.

B. The arrangement of the physical plant shall provide for separation of the administrative/business, service, and public areas from patient service areas.

C. Ceilings shall be at a height of at least eight [(8)] feet (8'). Ceilings in corridors, storage rooms, toilet rooms, and other minor rooms shall not be less than seven feet six inches (7'6"). Suspended fixtures located in the path of normal traffic shall not be less than six feet eight inches (6'8") above the floor.

D. Handrails may be provided on both sides of all corridors and aisles used by patients and, if provided, corridor handrails shall have ends return to the wall.

E. New inpatient hospice facilities shall be designed and constructed in compliance with Chapters Five (5) through Seven (7) and Chapter Twelve (12) of NFPA 101 (1994), *Life Safety Code* and NFPA 99 (1993) *Standard for Health Care Facilities*, NFPA 13 (1994) *Standard for Installation of Sprinkler Systems* and NFPA 90A (1993) *Standard for the Installation of Air Conditioning and Ventilation Systems*. Section 12-6 of NFPA 101 shall not apply to these facilities.

F. Hardware on toilet room doors shall be operable from both the inside and the outside. All toilet room doors shall provide a net clear opening of not less than **thirty-two [(32)]** inches (32").

G. The corridor doors from all patient-use areas as well as all doors through which patients may need to pass for emergency exit shall be not less than thirty-six [(36)] inches (36") wide.

H. Every window in patient-use areas shall be provided with shades, curtains, or drapes. Curtains and drapes shall be made of fabric which is treated to be or is inherently flame-retardant.

I. The floors of toilets, baths, utility rooms, and janitor's closets shall have smooth, waterproof surfaces which are wear-resistant. The floors of kitchens and food preparation areas shall be waterproof, greaseproof, smooth, and resistant to heavy wear.

J. The walls of all rooms where food and drink are prepared, served, or stored shall have a smooth surface with painted or equally washable finish. At the base they shall be waterproof and free from spaces which may harbor insects. The walls of kitchens, utility rooms, baths, warewashing rooms, janitor's closets, and spaces with sinks shall have waterproof, painted, glazed, or similar finishes to a point above the splash and spray line.

K. The ceilings of all kitchens, sculleries, and other rooms where food and drink are prepared shall be painted with washable paint.

L. All casework in the facility shall be finished with at least a sealer on all interior surfaces. Casework with sinks installed in the counter shall be caulked to provide a watertight joint between the backsplash and the wall.

M. All floor covering used in inpatient hospice facilities shall have either Class A or B fire ratings as required by Chapter Twelve (12) of NFPA 101 (1994), *The Life Safety Code*.

N. Stairways, ramps, elevator hoistways, light or ventilation shafts, chutes, and other vertical openings between stories shall be enclosed with construction which is

equal to or greater than the required floor assembly rating of the building's construction type.

O. The number of stories in a building housing a hospice facility shall be determined by counting the number of occupiable levels in the building regardless of their location at, above, or below grade.

P. Each room or patient-use area shall be conspicuously and unmistakably identifiable at its entrance by patients, visitors, and staff.

Q. All signage within six feet (6') of the floor shall be tactile to be usable by visually impaired persons.

R. Fire-resistant ratings –

(I) Definitions –

(a) Fire-separation distance is the distance in feet measured from the building face to the closest interior lot line, to the centerline of a street or public way or to an imaginary line between two (2) buildings on the same property[.]; **and**

(b) Fire-protection rating is the time in hours, or fractions of an hour, that an opening protective assembly will resist fire exposure as determined in accordance with the test procedures set forth in ASTM E119[.];

(II) Exterior walls with a fire-separation distance less than five feet (5') shall have a fire-resistant rating of one (1) hour[.];

(III) In exterior walls with a fire-separation distance of three feet (3') or less, no openings will be allowed, from three feet (3') to five feet (5') no unprotected openings will be allowed, and protected openings will be allowed with a total aggregate area of fifteen percent (15%) of the wall surface[.];

(IV) Approved fire protective assemblies shall be fixed, self-closing, or equipped with approved automatic-closing devices[.]. **[a]A** fire-resistant rating of not less than three-quarters (3/4) of an hour shall be required[.]; **and**

(V) Fire protective assemblies are not required where outside automatic sprinklers are installed for the protection of the exterior openings. The sprinklers shall be installed in accordance with NFPA 13;

5. Structural design.

A. All new facilities and additions to all areas of existing licensed facilities which undergo major remodeling, in all their parts, shall be of sufficient strength to resist all stresses imposed by dead loads, live loads, and lateral or uplift forces such as wind, without exceeding, in any of the structural materials, the allowable working stress established for these materials by generally accepted good engineering practice.

B. Foundations shall rest on solid ground or properly compacted fill and shall be carried to a depth of not less than one foot (1') below the estimated frost line or shall rest on leveled rock or load-bearing piles when solid ground is not encountered. When engineered fill is used, site preparation and placement of fill shall be done under the direct full-time supervision of the soils engineer. The soils engineer shall issue a final report on the compacted fill operation and certify its compliance with the job specifications. Reasonable care shall be taken to establish proper soil-bearing values for soil at the building site. If the bearing capacity of the soil is in question, a recognized load test may be used to determine the safe bearing value. Footings, piers, and foundation walls shall be adequately protected against deterioration from the action of groundwater;

6. Electrical systems.

A. The entire electrical system shall be designed, installed and tested in compliance with NFPA 70 (1993) *The National Electrical Code* and NFPA 99 (1993) *Standard for Health Care Facilities*.

B. Emergency lighting shall be provided for exits,

stairs, and exit access corridors, which shall be supplied by an emergency service and automatic electric generator or battery lighting system. This emergency lighting system shall be equipped with an automatic transfer switch. If battery lights are used, they shall be wet cell units or other rechargeable-type batteries equipped with automatic trickle charger. These units shall be rated at four (4) hours.

C. Patient rooms shall have a minimum general illumination of ten (10) foot-candles, a night-light, and a patient's reading light. The general illumination fixtures and the night-light shall be switched at the patient room door.

D. Ceiling lighting fixtures, if used, shall be of a type which are shaded or globed to minimize glare.

E. Each patient room shall have not less than one (1) duplex receptacle on each wall in the room. The spacing of receptacles around the perimeter of the room shall not be greater than twelve **[(12)]** feet **(12')**.

F. All occupied areas shall be adequately lighted as required by the duties performed in the space.

G. Night-lights shall be provided in corridor, stairways, and patient rooms. Toilets adjacent to patient rooms are not required to have night-lights.

H. An electrically powered communication system shall be provided which allows staff to respond to patient calls regardless of patient location.

I. An electrically powered fire alarm system shall be provided as required by NFPA 101 (1994) *The Life Safety Code*. The fire alarm system shall have an emergency back-up source of electrical power and a direct connection for notifying the fire department or fire department dispatch service. Fire alarm manual pull stations shall be provided at each exit and at each staff workstation in the patient-care units. Smoke detectors shall be installed in social space rooms which open directly to the corridor, in the vicinity of any smoke or fire door which is permitted to be held open by a magnetic hold-open device, and in the corridors at intervals not exceeding thirty **[(30)]** feet **(30')**.

J. Portable fire extinguishers shall be provided as required by NFPA 101 (1994) *The Life Safety Code* and the local authority;

7. Mechanical systems.

A. The heating, ventilation and air-conditioning systems shall be capable of providing temperature ranges between **seventy-two degrees Fahrenheit and eighty degrees Fahrenheit (72°F–80°F)** in all patient-care areas. The heating system shall be capable of maintaining a winter indoor temperature of not less than **seventy-two degrees Fahrenheit (72°F)** in all nonpatient areas. The air-conditioning system shall be capable of maintaining a summer indoor temperature of not more than **eighty degrees Fahrenheit (80°F)** in all nonpatient areas.

B. The heating system shall have automatic controls adequate to provide comfortable conditions in all portions of the building at all times.

C. Heating, ventilation, and air-conditioning systems installed in inpatient hospice facilities shall be designed, installed and balanced in compliance with NFPA 90A (1993) *Standard for the Installation of Air Conditioning and Ventilation Systems*, and shall provide the pressure relationships and at least the minimum air change rates indicated in Table 1.

TABLE 1 – VENTILATION REQUIREMENTS

Area Designation	Pressure Relationship to Adjacent Areas	Minimum Air Changes of Outdoor Air Per Hour Supplied to Room	Minimum Total Air Changes Per Hour Supplied to Room	All Air Exhausted Directly to Outdoors	Air Returned From This Room
Patient Room	E	2	2	Optional	Optional
Patient Area Corridor and Patient Living Room	P	2	2	Optional	Optional
Soiled Workroom and Soiled Linen Holding	N	Optional	6	Yes	No
Clean Staff Work Area	P	2	6	Optional	Optional
Toilet Room	N	Optional	6	Yes	No
Clean Linen Storage	P	Optional	2	Optional	Optional
Designated Smoking Area	N	Optional	10	Yes	No
Food Preparation Area	E	2	6	Yes	No
Warewashing	N	Optional	6	Yes	No
Dietary and General Storage	V	Optional	2	Optional	Optional
Linen and Trash Chute Room	N	Optional	6	Yes	No
Medical Gas Storage and Manifold Rooms	N	Optional	6	Yes	No
Administrative and Public Areas	E	2	2	Optional	Optional

P= Positive
 N= Negative
 V= Variable
 E= Equal

D. All air-moving, heating, ventilation, and air-conditioning equipment shall be equipped with at least one (1) filter located upstream of the conditioning equipment. If a pre-filter is employed, the pre-filter shall be upstream of the conditioning equipment and the main filter shall be located farther downstream. All filters shall be easily accessible for maintenance. Filter frames shall be durable and carefully dimensioned and shall provide an airtight fit with the enclosing ductwork. All joints between the filter segments and the enclosing ductwork shall be sealed to preclude air leakage.

E. Outside air intakes shall be located no less than twenty-five (25) feet from exhaust outlets of ventilation systems, combustion equipment stacks, clinical suction discharges, and plumbing vent stacks or from areas which may collect vehicular exhaust and other noxious fumes.

F. Corridors shall not be used to supply air to or exhaust air from any room, except that air from corridors may be used to ventilate bathrooms, toilet rooms, janitor's closets, and small electrical or telephone closets opening directly onto corridors, provided that ventilation can be accomplished by the undercutting of doors. The installation of louvers in corridor doors is prohibited. The space above the finished ceiling may be used as a plenum for return air only.

G. Exhaust hoods in meal preparation areas shall comply with the requirements of NFPA 96 (1994). All hoods and cooktop surfaces in meal preparation areas shall be equipped with automatic fire suppression systems, automatic fan controls, and fuel shutoff;

8. Plumbing systems.

A. The entire plumbing system, its design, operation, and maintenance shall comply with the requirements of all applicable local and state codes including the requirements set forth in this rule.

B. Plumbing fixtures.

(I) All plumbing fixtures shall be of nonabsorptive acid-resistant material.

(II) Clinical sinks shall have a bedpan-flushing device and shall have an integral trap in which the upper portion of a visible trap seal provides a water surface.

(III) Showers and tubs shall be provided with nonslip surfaces.

(IV) Water closets in patient areas shall be quiet operating types.

(V) Stools in patient toilet facilities shall be the elongated bowl type with nonreturn stops, backflow preventers, and silencers. Seats shall be the split type and white in color.

(VI) Grab bars or handrails shall be provided adjacent to all bathtubs.

(VII) All lavatories shall be trimmed with valving operable without the use of hands.

C. Water supply systems.

(I) A reliable source of potable water shall be provided at the site to supply water in sufficient quantities to meet the various use demands of the hospice. The source of water shall have been tested and approved by the Missouri Department of Natural Resources.

(II) The water supply systems shall be designed to supply water at sufficient pressure to operate all fixtures and equipment during maximum demand periods.

(III) Each water service main, branch main, riser, and branch to a group of fixtures shall be valved. Stop valves shall be provided at each fixture.

(IV) Reduced pressure backflow preventers shall be installed on water service entrance, hose bibbs, janitors' sinks, bedpan-flushing attachments, and on all other fixtures

to which hoses or tubing can be attached. The installation of backflow preventors shall provide safeguards against waterline expansion.

(V) The water supply system shall be designed to provide hot water at each hot water outlet at all times. The water-heating equipment shall have sufficient capacity to supply five (5) gallons of water at **one hundred twenty degrees Fahrenheit** (120°F) per hour per bed for hospice fixtures and eight (8) gallons per bed for kitchen and laundry. Lesser capacities may be accepted upon submission of the calculation for the anticipated demand of all fixtures and equipment in the building. Hot water at showers and bathing facilities shall not exceed **one hundred ten degrees Fahrenheit** (110°F). Hot water at handwashing facilities shall not exceed **one hundred twenty degrees Fahrenheit** (120°F). Hot water circulating mains and risers shall be run from the hot storage tank to a point directly below the highest fixture at the end of each branch main.

D. Drainage systems.

(I) All fixtures and equipment shall be connected through traps to soil and waste piping and to the sewer and they shall all be properly vented to the outside.

(II) Courts, yards, and drives which do not have natural drainage from the building shall have catch basins and drains to low ground, storm-water drainage system, or dry wells.

(III) The building sanitary drain system shall be piped in cast iron, steel, copper, or plastic.

(IV) Building sewers shall discharge into a community sewerage system when available. If such a system is not available, a facility providing sewage treatment shall conform to the rules of the Department of Natural Resources.

(V) Drainage piping shall not be installed within the ceiling or exposed in food preparation centers, food service facilities, food storage areas, and clean linen storage rooms; special precautions shall be taken to protect any of these areas from possible leakage or condensation from necessary overhead drainage piping systems. These special precautions include requiring noncorrosive drip troughs with a minimum four-inch (4") outside diameter to be installed under the drainage pipe in the direction of slope to a point where the pipe leaves the protected space and terminates at that point—usually at a wall. The trough shall be supported with noncorrosive strap hangers and screws from the pipe above. Trough joints and hanging screw penetrations shall be sealed to maintain watertight integrity throughout.

E. Natural or liquefied petroleum (LP) gas systems.

(I) Where gas-fire equipment is used, all gas piping, fittings, tanks, and specialties shall be provided and installed in compliance with NFPA 54 (1992), NFPA 58 (1992), and the instructions of the gas supplier, except where more strict requirements are stated. Where liquefied petroleum gas (LPG) is used, compliance with the rules of the Missouri Department of Agriculture is also required.

(II) Where gas piping enters the building below grade, it shall have an outside vent as follows: a concrete box shall be made **eighteen inches (18") [inches]** by **eighteen inches (18") [inches]** with three-inch (3") thick walls, of a height to rest on top of the entering gas pipe, and the top of the box to coming within six **[(6)] inches (6")** of top grade. The box shall be filled with coarse gravel. A one-inch (1") upright vent line shall be to **one-half (1/2)** the depth of the box and extend **[(12)] twelve inches (12")** above grade with a screened U-vent looking down. The vent line shall be anchored securely to the building wall.

(III) Gas outlets and gas-fired equipment shall not be installed in any patients' bedrooms.

F. Where a piped central medical gas distribution

system is installed, the oxygen piping, outlets, manifold rooms, and storage rooms shall be installed in accordance with the requirements of Chapter 4 of NFPA 99 (1993); and

9. Fire prevention and general operating requirements.

A. The hospice facility shall be maintained in a manner which provides a clean safe environment for the delivery of patient care and shall, until remodeled or renovated with the *[approval]* notification of the *[D]*department *[of Health]*, remain compliant with the codes and regulations under which the facility was constructed.

B. Exitways shall always be maintained free of obstructions.

C. Curtains, drapes, and cubicle curtains shall be maintained in a manner which does not compromise their fire-resistant properties.

D. Smoking may be permitted in the patient's room by the patient only, and designated smoking areas by others. Designated smoking areas shall be ventilated as required by Table 1 of this rule. Modification of the patient room ventilation system is not required to permit occasional authorized smoking by a patient.

E. All waste containers shall be of noncombustible construction.

F. Electrical systems and medical gas systems shall be tested according to the provisions of NFPA 99 (1993) and shall be modified as necessary to comply with the operational requirements of that standard.

AUTHORITY: section 197.270, RSMo [2000] 2016. Original rule filed March 8, 1996, effective Oct. 30, 1996. Rescinded and readopted: Filed Jan. 3, 2001, effective Aug. 30, 2001. Amended: Filed Sept. 11, 2007, effective March 30, 2008. Emergency amendment filed Aug. 6, 2026, effective Aug. 20, 2026, expires Feb. 15, 2027. Amended: Filed Aug. 6, 2026.

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 Mindy Laughlin at Mindy.Laughlin@health.mo.gov or Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, MO 65101-0570. 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 2110 – Missouri Dental Board Chapter 2 – General Rules

PROPOSED AMENDMENT

20 CSR 2110-2.120 Dental Assistants. The board is amending sections (1), (2), (4), and (5).

PURPOSE: This amendment creates a new category of periodontal expanded function permits.

(1) Definitions.

(G) Expanded functions permit—A permit issued by the Missouri Dental Board authorizing a dental assistant, certified dental assistant, or Missouri licensed dental hygienist to perform expanded functions duties upon delegation from a Missouri licensed dentist. Expanded functions permits will be issued in the following categories: restorative I, restorative II, removable prosthodontics, fixed prosthodontics, **periodontal**, and orthodontics.

(2) Prohibited Acts.

(A) A registered and currently licensed dentist may not delegate to a dental assistant or certified dental assistant, as defined in subsections (1)(B) and (C) respectively, the performance of the following procedures:

1. Diagnosis, including interpretation of dental radiographs and treatment planning;

2. Cutting of tooth structure;

3. Surgical procedures on hard and soft tissues including, but not limited to, the removal of teeth and the cutting and suturing of soft tissues;

4. The prescription, injection, and parenteral administration of drugs;

5. The final bending of archwire prior to ligation;

6. *[The]* **Subgingival** scaling of teeth; and

7. Administration of nitrous oxide-oxygen analgesia except that a dental assistant or certified dental assistant may assist in the administration of and monitor nitrous oxide-oxygen analgesia with specific training as provided in section (3) of this rule.

(4) Expanded Functions Permits.

(B) The board shall issue the appropriate expanded functions permit upon receipt of a completed application form, payment of the appropriate fee specified in 20 CSR 2110-2.170, and proof of competence as defined in subsection (1)(I) that the dental assistant has complied with the requirements of subsection (4)(A) of this rule. The requirements of this section must be completed within one (1) year of the date of submission of the application form. The board-issued expanded functions permit must be displayed in plain view in any facility where the dental assistant will be providing expanded functions prior to delegation of expanded functions to that dental assistant.

*[(C)]*1. Any dental assistant or certified dental assistant to whom a dentist could legally delegate expanded functions duties prior to December 1, 2012, or any dental assistant or certified dental assistant who meets the qualifications for a board-issued expanded functions permit prior to December 1, 2012, may submit their proof of competence to the Missouri Dental Board and be issued an expanded functions permit prior to December 1, 2012.

2. Any dental assistant or certified dental assistant who received a board-issued expanded functions permit as an oral preventative assistant prior to August 26, 2026, pursuant to the Oral Preventative Assistant Pilot Project specified in 20 CSR 2110-2.134 may submit their proof of competence to the Missouri Dental Board and be issued an expanded functions permit prior to February 1, 2027.

[(D)](C) Beginning March 1, 2013, every expanded functions permit issued by the board shall be renewed every five (5) years. In order to renew an expanded functions permit, the dental assistant shall submit to the board –

1. A completed renewal application form provided by the board for each permit the permit holder wishes to renew;

2. The renewal fee specified in 20 CSR 2110-2.170 payable to the Missouri Dental Board for each permit the permit holder wishes to renew;

3. Satisfactory evidence of completion of sixteen (16) hours of continuing education from board-approved sponsors as specified in 20 CSR 2110-2.240(1)(C) during the five- (5-) year period immediately preceding the expiration date. All sixteen (16) hours of continuing education for renewal must be directly related to the updating and maintaining of knowledge and skills in the treatment, health, and safety of the individual dental patient. Permit holders shall only be required to complete sixteen (16) hours of continuing education regardless of the number of permits the permit holder wishes to renew. For any permits that are issued twelve (12) months or less from the expiration date of that permit, the permit holder shall only be required to obtain four (4) hours of board-approved continuing education to renew those permits. Each permit holder shall maintain documentation of completion of the required continuing education hours for five (5) years after the completion of the permit period in which the continuing education was earned; and

4. Evidence of current certification in the American Heart Association's Basic Life Support for the Healthcare Provider (BLS), or an equivalent certification approved by the Missouri Dental Board. Board-approved courses shall meet the American Heart Association guidelines for cardiopulmonary resuscitation (CPR) and emergency cardiovascular care (ECC) and provide written and manikin testing on the course material by an instructor who is physically present with the students. Online only courses will not be accepted to satisfy the BLS requirement.

[(E)](D) An expanded functions permit shall expire if not renewed on or before the permit expiration date. An expired permit can be renewed at any time within one (1) year of the permit expiration date. Any expired expanded functions permit that is not renewed within one (1) year of the expiration date shall be void.

(5) Categories.

(A) Functions delegable to a dental assistant possessing a board-issued permit to perform expanded functions are divided into five (5) categories[;]: restorative I, restorative II, removable prosthodontics, fixed prosthodontics, **periodontal**, and orthodontics and are listed below by category.

1. Restorative I –

- A. Sizing and cementing of prefabricated crowns;
- B. Placing, condensing, carving, and finishing amalgam for Class I, V, and VI restorations;
- C. Placing and finishing composite for Class I, V, and VI restorations; and
- D. Minor palliative care of dental emergencies (place sedative filling).

2. Restorative II –

- A. Sizing and cementing of prefabricated crowns;
- B. Placing, condensing, carving, and finishing amalgam for Class I, II, III, IV, V, and VI restorations;
- C. Placing and finishing composite for Class I, II, III, IV, V, and VI restorations; and
- D. Minor palliative care of dental emergencies (place sedative filling).

3. Orthodontics –

- A. Preliminary bending of archwire;
- B. Removal of orthodontic bands and bonds;
- C. Final cementation of any permanent orthodontic appliance or prosthesis;
- D. Making impressions for the fabrication of any orthodontic prosthesis/appliance; and
- E. Placement and cementation of orthodontic brackets and/or bands.

4. Prosthodontics – Fixed –

- A. Apply tissue retracting material prior to impression of a fixed prosthesis;
- B. Extra-oral adjustments of fixed prosthesis;
- C. Final cementation of any permanent appliance or prosthesis;
- D. Making impressions for the fabrication of any removable or fixed prosthesis/appliance; and
- E. Sizing and cementing of prefabricated crowns.

5. Prosthodontics – Removable –

- A. Placement of temporary soft liners in a removable prosthesis;
- B. Extra-oral adjustments of removable prosthesis during and after insertion; and
- C. Making impressions for the fabrication of any removable or fixed prosthesis/appliance.

6. Periodontal –

- A. Supragingival scaling; and
- B. Comprehensive periodontal charting.

*AUTHORITY: sections 332.011, 332.031.2., and 332.098, RSMo 2016. This rule originally filed as 4 CSR 110-2.120. Original rule filed Dec. 12, 1975, effective Jan. 12, 1976. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Aug. 17, 2026.*

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

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

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Dental Board, PO Box 1367, Jefferson City, MO 65102, by facsimile at (573) 751-8216, or via email at dental@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**TITLE 20 – DEPARTMENT OF COMMERCE
AND INSURANCE**

**Division 2110 – Missouri Dental Board
Chapter 2 – General Rules**

PROPOSED AMENDMENT

20 CSR 2110-2.170 Fees. The board is amending subsection (1) (E).

PURPOSE: This amendment establishes the fee for a Periodontal Expanded Functions Permit.

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

(E) Certification/Permit Fees

1. Dentists

- A. Deep Sedation/General Anesthesia
 - (I) Individual Permit Fee \$100
 - (II) Site Certificate Permit Fee \$100
 - (III) Individual Permit Renewal Fee \$100
 - (IV) Site Certificate Renewal Fee \$100
- B. Moderate Sedation (Enteral, Parenteral, or Pediatric)

(I) Individual Permit Fee	\$100
(II) Site Certificate Permit Fee	\$100
(III) Individual Permit Renewal Fee	\$100
(IV) Site Certificate Renewal Fee	\$100
2. Dental Hygienists	
A. Administration of Nitrous Oxide Analgesia	\$ 10
B. Local Anesthesia	\$ 10
C. Expanded Functions	
(I) Restorative I Permit Fee	\$ 10
(II) Restorative II Permit Fee	\$ 10
(III) Removable Prosthodontics Permit Fee	\$ 10
(IV) Fixed Prosthodontics Permit Fee	\$ 10
(V) Orthodontics Permit Fee	\$ 10
3. Dental Assistants	
A. Monitoring Nitrous Oxide Analgesia	\$ 10
B. Expanded Functions Permit	
(I) Restorative I Permit Fee	\$ 10
(II) Restorative II Permit Fee	\$ 10
(III) Removable Prosthodontics Permit Fee	\$ 10
(IV) Fixed Prosthodontics Permit Fee	\$ 10
(V) Orthodontics Permit Fee	\$ 10
(VI) Periodontal Permit Fee	\$ 10
4. Dental Faculty Permit	\$100
5. Dental Faculty Permit Renewal	\$100

AUTHORITY: section 332.031, RSMo 2016, and sections 43.543 and 332.183, RSMo Supp. [2024] 2026. This rule originally filed as 4 CSR 110-2.170. Emergency rule filed June 30, 1981, effective July 9, 1981, expired Nov. 6, 1981. Original rule filed June 30, 1981, effective Oct. 11, 1981. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Aug. 17, 2026.

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 thousand dollars (\$1,000) annually for the life of the rule.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Dental Board, PO Box 1367, Jefferson City, MO 65102, by facsimile at (573) 751-8216, or via email at dental@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

PRIVATE FISCAL NOTE

I. RULE NUMBER

Title 20 -Department of Commerce and Insurance
Division 2110—Missouri Dental Board
Chapter 2 - General Rules
Proposed Amendment to 20 CSR 2110-2.170 Fees

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated costs for the life of the rule by affected entities:
100	Periodontal Permit (Fee @ \$10)	\$1,000
	Estimated Cost Beginning in FY27 and Annually Thereafter	\$1,000

III. WORKSHEET

See Table Above

IV. ASSUMPTION

1. The Missouri Dental Association believes the board will receive 100 permit applications from dental assistants for a periodontal permit annually.

**TITLE 20 – DEPARTMENT OF COMMERCE
AND INSURANCE**

**Division 2263 – State Committee for Social Workers
Chapter 1 – General Rules**

PROPOSED AMENDMENT

20 CSR 2263-1.015 General Organization. The committee is amending the purpose statement.

PURPOSE: This amendment corrects a citation in the purpose statement.

PURPOSE: This rule complies with sections 337.600–337.639, RSMo, which permit the department to adopt rules governing the conduct of the State Committee for Social Workers.

AUTHORITY: sections 337.627, RSMo [2000] Supp. 2025 and section 337.622, RSMo 2016 [and 337.677, RSMo Supp. 2001]. This rule originally filed as 4 CSR 263-1.015. Original rule filed Dec. 30, 1998, effective July 30, 1999. Amended: Filed Nov. 13, 2002, effective June 30, 2003. Moved to 20 CSR 2263-1.015, effective Aug. 28, 2006. Amended: Filed Aug. 11, 2026.

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 State Committee for Social Workers, PO Box 1335, Jefferson City, MO 65102, by fax at (573) 526-3489, or via email at lcsw@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 2263 – State Committee for Social Workers
Chapter 2 – Licensure Requirements**

PROPOSED AMENDMENT

20 CSR 2263-2.082 Continuing Education. The committee is amending section (2).

PURPOSE: This amendment updates continuing education requirements.

(2) As part of the thirty (30) continuing education (CE) hours required for each renewal cycle, each applicant for renewal or reinstatement of a license shall complete –

(A) Three (3) clock hours of ethics presented by a social worker who has graduated from an accredited school of social work or by a professional who has knowledge of ethics as it relates to the practice of social work; *[and]*

(B) Two (2) hours of suicide assessment, referral, treatment, and management training[.]; **and**

(C) **Two (2) hours of sex and human trafficking training for the first renewal cycle after initial licensure and one**

(1) hour of sex and human trafficking training for each licensure renewal thereafter, consistent with the guidelines established in sections 210.1505 and 337.618, RSMo. The provisions of this subsection shall become effective on January 1, 2027, and shall expire on December 31, 2031.

*AUTHORITY: sections 337.618 and 337.627, RSMo Supp. [2025] 2026. This rule originally filed as 4 CSR 263-2.082. Original rule filed June 25, 2004, effective Dec. 30, 2004. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Aug. 11, 2026.*

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 State Committee for Social Workers, PO Box 1335, Jefferson City, MO 65102, by fax at (573) 526-3489, or via email at lcsw@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 that has been changed from the text 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 that 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 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 2 – Income Tax**

ORDER OF RULEMAKING

By the authority vested in the Department of Revenue under section 143.773, RSMo 2016, the department rescinds a rule as follows:

12 CSR 10-2.135 Frivolous Returns is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 15, 2026 (51 MoReg 758). No changes have been made to 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 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 103 – Sales/Use Tax – Imposition of Tax**

ORDER OF RULEMAKING

By the authority vested in the Department of Revenue under section 144.705, RSMo 2016, the department rescinds a rule as follows:

12 CSR 10-103.170 Aggregate Amount Defined is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 15, 2026 (51 MoReg 758). No changes have been made to 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 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 103 – Sales/Use Tax – Imposition of Tax**

ORDER OF RULEMAKING

By the authority vested in the Department of Revenue under section 144.705, RSMo 2016, the department rescinds a rule as follows:

12 CSR 10-103.310 Timely Filing is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 15, 2026 (51 MoReg 758). No changes have been made to 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 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 111 – Sales/Use Tax – Machinery and
Equipment Exemptions**

ORDER OF RULEMAKING

By the authority vested in the Department of Revenue under section 144.054, RSMo Supp. 2026, the department rescinds a rule as follows:

12 CSR 10-111.101 Items Used or Consumed by Commercial Printers, as Defined in Section 144.054, RSMo is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on June 15, 2026 (51 MoReg 758-759). No changes have been made to 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 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 113 – Sales/Use Tax – Use Tax**

ORDER OF RULEMAKING

By the authority vested in the Department of Revenue under

sections 144.270 and 144.705, RSMo 2016, the department amends a rule as follows:

12 CSR 10-113.200 Determining Whether a Transaction is Subject to Sales Tax or Use Tax **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 15, 2026 (51 MoReg 759-761). No changes have been made to 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 200 – Insurance Solvency and Company
Regulation**

**Chapter 12 – Missouri and Extended Missouri Mutual
Companies**

ORDER OF RULEMAKING

By the authority vested in the Director of the Department of Commerce and Insurance, under sections 380.471 and 380.561, RSMo 2016, the director amends a rule as follows:

20 CSR 200-12.020 Extended Missouri Mutual Companies' Approved Investments **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on May 15, 2026 (51 MoReg 646-648). No changes have been made to 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.

This section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs, and other items required to be published in the *Missouri Register* by law.

**TITLE 7 – MISSOURI DEPARTMENT
OF TRANSPORTATION
Division 10 – Missouri Highways and Transportation
Commission
Chapter 4 – Uniform Relocation Assistance**

STATEMENT OF ACTUAL COST

7 CSR 10-4.020 Relocation Assistance Program

The original estimated cost and fiscal note for the public cost to this rule was published in the *Missouri Register* on November 15, 2024 (49 MoReg 1704-1707). The cost to state agencies and political subdivisions has exceeded the cost estimate by more than ten percent (10%). Therefore, pursuant to section 536.200.3, RSMo, it is necessary to publish the cost estimate together with the actual cost of the first full fiscal year. The estimated cost to state agencies and political subdivisions was one hundred seventy-three thousand one hundred dollars and eighteen cents (\$173,100.18) and, at the end of the first full fiscal year, the actual cost to state agencies and political subdivisions was two hundred seventy-five thousand seven hundred twenty dollars (\$275,720).

**TITLE 19 – DEPARTMENT OF HEALTH
AND SENIOR SERVICES
Division 60 – Missouri Health Facilities Review
Committee
Chapter 50 – Certificate of Need Program**

**NOTIFICATION OF REVIEW:
APPLICATION REVIEW SCHEDULE**

The Missouri Health Facilities Review Committee has initiated review of the CON applications listed below. A decision is tentatively scheduled for September 24, 2026. These applications are available for public inspection at the address shown below.

Date Filed

Project Number: Project Name
City (County)
Cost, Description

8/13/2026

#6339 HT: Research Medical Center
Kansas City (Jackson County)
\$4,570,164, Replace MRI

Any person wishing to request a public hearing for the purpose of commenting on these applications must submit a written request to this effect, which must be received by September 13, 2026. All written requests and comments should be sent to –

Chairman
Missouri Health Facilities Review Committee
c/o Certificate of Need Program
920 Wildwood Drive
PO Box 570
Jefferson City, MO 65102

For additional information contact Alison Dorge at alison.dorge@health.mo.gov.

The Secretary of State is required by sections 347.141 and 359.481, RSMo, to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript by email to adrules.dissolutions@sos.mo.gov.

NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS AGAINST MAVERICK CONVERTING, INC

On August 5, 2026, Maverick Converting, Inc., a Missouri corporation, filed its Articles of Dissolution with the Missouri Secretary of State. Said corporation requests that all persons and organizations who have claims against it present them immediately by letter to the corporation at the following address:

Maverick Converting, Inc.
9503 N. Congress Ave.
Kansas City, MO 64153

All claims must include –

- 1) The name and address of the claimant;
- 2) The amount claimed;
- 3) The basis for and a description of the claim; and
- 4) The date(s) on which the event(s) on which the claim is based occurred.

Notice: Any claims against will be barred unless a proceeding to enforce the claim is commenced within two (2) years after the publication date of the three (3) notices authorized by statute, whichever is published last.

NOTICE OF WINDING UP TO ALL CREDITORS AND CLAIMANTS OF BP PROPS, LLC

BP Props, LLC, a Missouri limited liability company, filed its Notice of Winding Up with the Missouri Secretary of State on May 25, 2026. All persons or organizations having claims against BP Props, LLC, are requested to present their claims in writing to –

BP Props, LLC
c/o Billie Powell, Registered Agent
5301 Loughborough Ave.
Saint Louis, MO 63109-3756

Each claim must include the following information:

- 1) The name, address, telephone number, and email address of the claimant;
- 2) The amount of the claim;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) Documentation supporting the claim.

A claim against BP Props, LLC, will be barred unless a proceeding to enforce the claim is commenced within three (3) years after publication of this notice, pursuant to Section 347.141 of the Revised Statutes of Missouri.

NOTICE OF WINDING UP TO ALL CREDITORS AND CLAIMANTS OF GATEWAY CUSTARD, LLC

On August 10, 2026, Gateway Custard, LLC, a Missouri Limited Liability Company, filed Notice of Winding Up with the Secretary of State of Missouri. Any and all claims against the Company may be sent to –

Gateway Custard, LLC
Attn: Bill Welch
PO Box 109
Camdenton, MO 65020

Each claim should include the following:

- 1) The name, address, and telephone number of claimant;
- 2) The amount of claim;
- 3) The basis of the claim; and
- 4) The documents related to the claim.

Any and all claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the date of this publication of this notice.

NOTICE OF WINDING UP TO ALL CREDITORS AND CLAIMANTS OF CAROLINA CUSTARD, LLC

On August 10, 2026, Carolina Custard, LLC, a Missouri Limited Liability Company, filed Notice of Winding Up with the Secretary of State of Missouri. Any and all claims against the Company may be sent to –

Carolina Custard, LLC
Attn: Bill Welch
PO Box 109
Camdenton, MO 65020

Each claim should include the following:

- 1) The name, address, and telephone number of claimant;
- 2) The amount of claim;
- 3) The basis of the claim; and
- 4) The documents related to the claim.

Any and all claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the date of this publication of this notice.

NOTICE OF WINDING UP TO ALL CREDITORS AND CLAIMANTS OF MO CUSTARD, LLC

On August 10, 2026, MO Custard, LLC, a Missouri Limited Liability Company, filed Notice of Winding Up with the Secretary of State of Missouri. Any and all claims against the Company may be sent to –

MO Custard, LLC
Attn: Bill Welch
PO Box 109
Camdenton, MO 65020

Each claim should include the following:

- 1) The name, address, and telephone number of claimant;
- 2) The amount of claim;
- 3) The basis of the claim; and
- 4) The documents related to the claim.

Any and all claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the date of this publication of this notice.

NOTICE TO CREDITORS AND CLAIMANTS OF KDE FARM, LLC

KDE Farm, LLC, a Missouri limited liability company (the “Company”) has dissolved and is in the process of winding up its affairs. On August 12, 2026, the Company filed a Notice of Winding Up with the Missouri Secretary of State pursuant to RSMo section 347.137. All claims against the Company should be presented in accordance with this notice. Claims should be in writing and sent to the Company at this mailing address:

KDE Farm, LLC
Attn: Kathryn Ewing
2756 Wyoming St.
St. Louis, MO 63118

The claim must contain –

- 1) The name, address, and telephone number of the claimants;
- 2) The amount of the claim or other relief demanded;
- 3) The basis of the claim and any documents related to the claim; and
- 4) The date(s) as of which the event(s) on which the claim is based occurred.

Any and all claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

NOTICE TO CREDITORS AND CLAIMANTS OF BRICK CITY WELLNESS, LLC

Brick City Wellness, LLC, a Missouri limited liability company (the “Company”) has dissolved and is in the process of winding up its affairs. On August 12, 2026, the Company filed a Notice of Winding Up with the Missouri Secretary of State pursuant to RSMo

section 347.137. All claims against the Company should be presented in accordance with this notice. Claims should be in writing and sent to the Company at this mailing address:

Brick City Wellness, LLC
Attn: Kathryn Ewing
2756 Wyoming St.
St. Louis, MO 63118

The claim must contain –

- 1) The name, address, and telephone number of the claimants;
- 2) The amount of the claim or other relief demanded;
- 3) The basis of the claim and any documents related to the claim; and
- 4) The date(s) as of which the event(s) on which the claim is based occurred.

Any and all claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS AGAINST SWAY PROPERTIES, LLC

On August 4, 2026, Sway Properties, LLC, a Missouri limited liability company, filed its Articles of Termination with the Missouri Secretary of State. You are hereby notified that if you believe you have a claim against Sway Properties, LLC, you must submit in writing a description of the circumstances surrounding your claim to –

Sexton, Bender, Hill & Steinman, P.C.
Attn: J. Brian Hill
2900 NE Brooktree Ln., Ste. 100
Gladstone, MO 64119

The summary of your claim must include the following information:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The date on which the event or which the claim is based occurred; and
- 4) A brief description of the nature of the debt or the basis for the claim.

All claims against Sway Properties, LLC, will be barred unless a proceeding to enforce such claim is commenced within three (3) years after the publication of this Notice.

NOTICE OF DISSOLUTION OF LIMITED LIABILITY COMPANY TO ALL CREDITORS AND CLAIMANTS AGAINST HERBERT HELLING PROPERTIES, LLC

On August 10, 2026, Herbert Helling Properties, LLC, a Missouri limited liability company (hereinafter the “Company”), filed its Notice of Winding Up for a Limited Liability Company with the Missouri Secretary of State. Any claims against the Company may be sent to –

Christina L. Worley
PO Box 30088
Columbia, MO 65205

Each claim must include the following information:

- 1) The name, address, and phone number of claimant;
- 2) The amount claimed;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) Documentation in support of the claim.

All claims against the Company will be barred unless the proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*. Citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year – 50 (2025) and 51 (2026). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable, RAN indicates a rule action notice, RUC indicates a rule under consideration, and F indicates future effective date.

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
OFFICE OF ADMINISTRATION					
1 CSR	Notice of Periodic Rule Review				50 MoReg 960
1 CSR 10	State Officials' Salary Compensation Schedule				51 MoReg 371
1 CSR 60-1.010	Joint Oversight Task Force for Prescription Drug Monitoring		51 MoReg 551		
DEPARTMENT OF AGRICULTURE					
2 CSR	Notice of Periodic Rule Review				50 MoReg 960
2 CSR 30-6.015	Animal Health		51 MoReg 685		
2 CSR 30-6.020	Animal Health		51 MoReg 688		
2 CSR 30-6.030	Animal Health		51 MoReg 693		
2 CSR 70-11.060	Plant Industries		51 MoReg 862		
2 CSR 70-11.070	Plant Industries		51 MoReg 862		
2 CSR 70-30-015	Plant Industries		51 MoReg 862		
2 CSR 90	Weights, Measures and Consumer Protection				51 MoReg 726
DEPARTMENT OF CONSERVATION					
3 CSR	Notice of Periodic Rule Review				50 MoReg 960
3 CSR 10-4.200	Conservation Commission				
3 CSR 10-5.205	Conservation Commission		51 MoReg 863		
3 CSR 10-5.215	Conservation Commission				
3 CSR 10-5.281	Conservation Commission		51 MoReg 864		
3 CSR 10-5.310	Conservation Commission		51 MoReg 865		
3 CSR 10-5.320	Conservation Commission		51 MoReg 865		
3 CSR 10-5.330	Conservation Commission		51 MoReg 865		
3 CSR 10-5.331	Conservation Commission		51 MoReg 866		
3 CSR 10-5.345	Conservation Commission		51 MoReg 866		
3 CSR 10-5.445	Conservation Commission		51 MoReg 866		
3 CSR 10-5.545	Conservation Commission		51 MoReg 867		
3 CSR 10-5.925	Conservation Commission		51 MoReg 867		
3 CSR 10-5.950	Conservation Commission		51 MoReg 869		
3 CSR 10-7.405	Conservation Commission				
3 CSR 10-7.410	Conservation Commission				
3 CSR 10-7.431	Conservation Commission				
3 CSR 10-7.432	Conservation Commission				
3 CSR 10-7.433	Conservation Commission				
3 CSR 10-7.435	Conservation Commission				
3 CSR 10-7.439	Conservation Commission				
3 CSR 10-7.440	Conservation Commission				
3 CSR 10-7.450	Conservation Commission				
3 CSR 10-7.705	Conservation Commission				
3 CSR 10-7.710	Conservation Commission				
3 CSR 10-7.900	Conservation Commission				
3 CSR 10-7.905	Conservation Commission				
3 CSR 10-11.115	Conservation Commission				
3 CSR 10-11.140	Conservation Commission		51 MoReg 871		
3 CSR 10-11.150	Conservation Commission		51 MoReg 874		
3 CSR 10-11.186	Conservation Commission				
3 CSR 10-12.110	Conservation Commission				
3 CSR 10-12.130	Conservation Commission				
DEPARTMENT OF ECONOMIC DEVELOPMENT					
4 CSR	Notice of Periodic Rule Review				50 MoReg 960
DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION					
5 CSR	Notice of Periodic Rule Review				50 MoReg 960
5 CSR 20-100.130	Division of Learning Services		50 MoReg 1533		
5 CSR 20-400.210	Division of Learning Services		51 MoReg 923		
5 CSR 20-400.380	Division of Learning Services		51 MoReg 923		
5 CSR 20-400.500	Division of Learning Services		51 MoReg 925		
5 CSR 20-400.530	Division of Learning Services		51 MoReg 928		
5 CSR 20-400.540	Division of Learning Services		51 MoReg 930		
5 CSR 20-400.550	Division of Learning Services		51 MoReg 936		
5 CSR 20-400.570	Division of Learning Services		51 MoReg 939		
5 CSR 20-500.290	Division of Learning Services		51 MoReg 755		
5 CSR 25-100.330	Office of Childhood		51 MoReg 551	51 MoReg 1132	
5 CSR 25-200.060	Office of Childhood	51 MoReg 751	51 MoReg 757		
DEPARTMENT OF HIGHER EDUCATION AND WORKFORCE DEVELOPMENT					
6 CSR	Notice of Periodic Rule Review				50 MoReg 960
MISSOURI DEPARTMENT OF TRANSPORTATION					
7 CSR	Notice of Periodic Rule Review				51 MoReg 832
7 CSR 10-4.020	Missouri Highways and Transportation Commission				This Issue
7 CSR 10-10.010	Missouri Highways and Transportation Commission		51 MoReg 397	51 MoReg 1070	
7 CSR 10-10.020	Missouri Highways and Transportation Commission		51 MoReg 399	51 MoReg 1070	

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
7 CSR 10-10.030	Missouri Highways and Transportation Commission		51 MoReg 399R	51 MoReg 1070R	
7 CSR 10-10.040	Missouri Highways and Transportation Commission		51 MoReg 399R	51 MoReg 1070R	
7 CSR 10-10.050	Missouri Highways and Transportation Commission		51 MoReg 400R	51 MoReg 1071R	
7 CSR 10-10.060	Missouri Highways and Transportation Commission		51 MoReg 400R	51 MoReg 1071R	
7 CSR 10-10.070	Missouri Highways and Transportation Commission		51 MoReg 400R	51 MoReg 1071R	
7 CSR 10-10.080	Missouri Highways and Transportation Commission		51 MoReg 401R	51 MoReg 1071R	
7 CSR 10-10.090	Missouri Highways and Transportation Commission		51 MoReg 401	51 MoReg 1071	
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS					
8 CSR	Notice of Periodic Rule Review				51 MoReg 832
8 CSR 50-2.070	Division of Workers' Compensation		51 MoReg 693		
DEPARTMENT OF MENTAL HEALTH					
9 CSR	Notice of Periodic Rule Review				51 MoReg 832
9 CSR 30-4.045	Certification Standards		51 MoReg 941		
9 CSR 30-4.195	Certification Standards		51 MoReg 695R		
DEPARTMENT OF NATURAL RESOURCES					
10 CSR	Notice of Periodic Rule Review				51 MoReg 832
10 CSR 10-6.070	Air Conservation Commission		51 MoReg 502		
10 CSR 10-6.075	Air Conservation Commission		51 MoReg 506		
10 CSR 10-6.080	Air Conservation Commission		51 MoReg 511		
10 CSR 20-6.011	Clean Water Commission		This Issue R		
10 CSR 23-1.010	Well Installation		51 MoReg 696		
10 CSR 23-1.090	Well Installation		51 MoReg 696		
10 CSR 23-2.010	Well Installation		51 MoReg 302	51 MoReg 1072Wd	51 MoReg 370
10 CSR 23-2.020	Well Installation		51 MoReg 697		
10 CSR 25-7	Hazardous Waste Management Commission				51 MoReg 726
10 CSR 80-2.010	Solid Waste Management		51 MoReg 1022R		
			51 MoReg 1022		
10 CSR 80-3.010	Solid Waste Management		51 MoReg 1026R		
			51 MoReg 1027		
DEPARTMENT OF PUBLIC SAFETY					
DEPARTMENT OF REVENUE					
12 CSR 10-2.135	Director of Revenue		51 MoReg 758R	This Issue R	
12 CSR 10-10.040	Director of Revenue		51 MoReg 1115		
12 CSR 10-10.050	Director of Revenue		51 MoReg 1115R		
12 CSR 10-23.305	Director of Revenue		51 MoReg 877R		
12 CSR 10-24.160	Director of Revenue		51 MoReg 877		
12 CSR 10-41.030	Director of Revenue		51 MoReg 877		
12 CSR 10-103.170	Director of Revenue		51 MoReg 758R	This Issue R	
12 CSR 10-103.180	Director of Revenue		51 MoReg 879R		
12 CSR 10-103.185	Director of Revenue		51 MoReg 879		
12 CSR 10-103.310	Director of Revenue		51 MoReg 758R	This Issue R	
12 CSR 10-103.630	Director of Revenue		51 MoReg 880R		
12 CSR 10-103.640	Director of Revenue		51 MoReg 880R		
12 CSR 10-108.700	Director of Revenue		51 MoReg 1066		
12 CSR 10-111.101	Director of Revenue		51 MoReg 758R	This Issue R	
12 CSR 10-113.200	Director of Revenue		51 MoReg 759	This Issue	
12 CSR 40-40.200	State Lottery		51 MoReg 1116		
12 CSR 40-60.030	State Lottery		51 MoReg 1116		
12 CSR 40-96.010	State Lottery		51 MoReg 1116		
12 CSR 40-96.020	State Lottery		51 MoReg 1117		
12 CSR 40-96.030	State Lottery		51 MoReg 1117		
12 CSR 40-100.010	State Lottery		51 MoReg 552	51 MoReg 1132	
DEPARTMENT OF SOCIAL SERVICES					
13 CSR 35-35.130	Children's Division		51 MoReg 512	51 MoReg 1072	
13 CSR 70-3.120	MO HealthNet Division		51 MoReg 1118		
13 CSR 70-3.230	MO HealthNet Division		51 MoReg 804		
13 CSR 70-3.300	MO HealthNet Division	51 MoReg 1099R			
13 CSR 70-3.310	MO HealthNet Division	51 MoReg 1099R			
13 CSR 70-4.120	MO HealthNet Division		51 MoReg 442	51 MoReg 896	
13 CSR 70-10.005	MO HealthNet Division		51 MoReg 1118R		
13 CSR 70-10.010	MO HealthNet Division		51 MoReg 1118R		
13 CSR 70-10.100	MO HealthNet Division		51 MoReg 1119R		
13 CSR 70-15.010	MO HealthNet Division	50 MoReg 1036	51 MoReg 444	51 MoReg 896	
13 CSR 70-15.015	MO HealthNet Division	51 MoReg 1099			
13 CSR 70-15.020	MO HealthNet Division		51 MoReg 517	51 MoReg 947	
13 CSR 70-15.030	MO HealthNet Division		51 MoReg 457	51 MoReg 947	
13 CSR 70-15.110	MO HealthNet Division	51 MoReg 855	51 MoReg 880		
13 CSR 70-15.160	MO HealthNet Division	51 MoReg 1102	51 MoReg 1119		
13 CSR 70-25.160	MO HealthNet Division		51 MoReg 761		
13 CSR 70-35.010	MO HealthNet Division		This Issue		
13 CSR 70-45.010	MO HealthNet Division		51 MoReg 640		
13 CSR 70-70.010	MO HealthNet Division		51 MoReg 1124		
13 CSR 70-94.020	MO HealthNet Division	51 MoReg 921	51 MoReg 945		
13 CSR 70-94.030	MO HealthNet Division		51 MoReg 457	51 MoReg 947	
ELECTED OFFICIALS					
15 CSR 30-12.010	Secretary of State		51 MoReg 1066		

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
15 CSR 30-12.020	Secretary of State		51 MoReg 1067		
15 CSR 30-14.010	Secretary of State		51 MoReg 1068		
15 CSR 30-51.030	Secretary of State		51 MoReg 804		
15 CSR 30-51.040	Secretary of State		51 MoReg 805		
15 CSR 30-51.055	Secretary of State		51 MoReg 806		
15 CSR 30-51.070	Secretary of State		51 MoReg 807		
15 CSR 30-51.155	Secretary of State		51 MoReg 811		
15 CSR 30-51.160	Secretary of State		51 MoReg 811		
15 CSR 30-51.172	Secretary of State		51 MoReg 812		
15 CSR 30-52.030	Secretary of State		51 MoReg 812		
RETIREMENT SYSTEMS					
DEPARTMENT OF HEALTH AND SENIOR SERVICES					
19 CSR 30-20.011	Division of Regulation and Licensure		51 MoReg 643	51 MoReg 1132	
19 CSR 30-20.015	Division of Regulation and Licensure		51 MoReg 643	51 MoReg 1133	
19 CSR 30-20.030	Division of Regulation and Licensure	51 MoReg 1107	51 MoReg 1124		
19 CSR 30-30.030	Division of Regulation and Licensure	51 MoReg 1108	51 MoReg 1125		
19 CSR 30-30.040	Division of Regulation and Licensure	51 MoReg 1109	51 MoReg 1125		
19 CSR 30-30.100	Division of Regulation and Licensure	51 MoReg 1109	51 MoReg 1126		
19 CSR 30-35.020	Division of Regulation and Licensure	This Issue	This Issue		
19 CSR 60-50	Missouri Health Facilities Review Committee				This Issue
19 CSR 60-50.410	Missouri Health Facilities Review Committee	51 MoReg 1110	51 MoReg 1126		
19 CSR 60-50.430	Missouri Health Facilities Review Committee	51 MoReg 1111	51 MoReg 1127		
19 CSR 100-1.180	Division of Cannabis Regulation		51 MoReg 1129		
19 CSR 100-1.200	Division of Cannabis Regulation		51 MoReg 553		
DEPARTMENT OF COMMERCE AND INSURANCE					
20 CSR	Applied Behavior Analysis Maximum Benefit				51 MoReg 317
20 CSR	Construction Claims Binding Arbitration Cap				51 MoReg 317
20 CSR	Non-Economic Damages in Medical Malpractice Cap				51 MoReg 317
20 CSR	Sovereign Immunity Limits				51 MoReg 215
20 CSR	State Legal Expense Fund Cap				51 MoReg 317
20 CSR 200-9.800	Insurance Solvency and Company Regulation		51 MoReg 458	51 MoReg 1073	
20 CSR 200-12.020	Insurance Solvency and Company Regulation		51 MoReg 646	This Issue	
20 CSR 1135-1.010	State Banking Board		51 MoReg 762		
20 CSR 1140-6.070	Division of Finance		51 MoReg 763R		
20 CSR 1140-10.030	Division of Finance		51 MoReg 763R		
20 CSR 1140-14.010	Division of Finance		51 MoReg 763R		
20 CSR 2030-6.015	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects		51 MoReg 403	51 MoReg 896	
20 CSR 2030-13.010	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects		51 MoReg 406	51 MoReg 896	
20 CSR 2063-1.015	Behavior Analyst Advisory Board		51 MoReg 459	51 MoReg 897	
20 CSR 2063-2.005	Behavior Analyst Advisory Board		51 MoReg 461	51 MoReg 897	
20 CSR 2063-4.005	Behavior Analyst Advisory Board		51 MoReg 1068		
20 CSR 2063-5.005	Behavior Analyst Advisory Board		51 MoReg 813		
20 CSR 2110-2.120	Missouri Dental Board		51 MoReg 406	51 MoReg 1073	
20 CSR 2110-2.130	Missouri Dental Board		This Issue		
20 CSR 2110-2.131	Missouri Dental Board		51 MoReg 406	51 MoReg 1073	
20 CSR 2110-2.170	Missouri Dental Board		51 MoReg 886		
20 CSR 2117-1.070	Office of Statewide Electrical Contractors	51 MoReg 752	This Issue		
20 CSR 2120-2.060	State Board of Embalmers and Funeral Directors		51 MoReg 764		
20 CSR 2120-2.060	State Board of Embalmers and Funeral Directors		51 MoReg 1129		
20 CSR 2145-1.040	Missouri Board of Geologist Registration		51 MoReg 464	51 MoReg 897	
20 CSR 2205-1.050	Missouri Board of Occupational Therapy		51 MoReg 466	51 MoReg 1073	
20 CSR 2220-2.197	State Board of Pharmacy		51 MoReg 469	51 MoReg 897	
20 CSR 2220-7.080	State Board of Pharmacy		51 MoReg 560	51 MoReg 1133	
20 CSR 2232-1.040	Missouri State Committee of Interpreters		51 MoReg 469	51 MoReg 897	
20 CSR 2233-2.010	State Committee of Marital and Family Therapists		51 MoReg 1130		
20 CSR 2235-1.020	State Committee of Psychologists		51 MoReg 472	51 MoReg 898	
20 CSR 2263-1.015	State Committee for Social Workers		This Issue		
20 CSR 2263-2.082	State Committee for Social Workers		This Issue		
20 CSR 4240-3.010	Public Service Commission		51 MoReg 815		
20 CSR 4240-3.030	Public Service Commission		51 MoReg 815		
20 CSR 4240-3.100	Public Service Commission		51 MoReg 816		
20 CSR 4240-3.130	Public Service Commission		51 MoReg 816		
20 CSR 4240-3.135	Public Service Commission		51 MoReg 817		
20 CSR 4240-3.140	Public Service Commission		51 MoReg 818		
20 CSR 4240-3.150	Public Service Commission		51 MoReg 818		
20 CSR 4240-3.155	Public Service Commission		51 MoReg 818		
20 CSR 4240-3.156	Public Service Commission		51 MoReg 819		
20 CSR 4240-3.162	Public Service Commission		51 MoReg 819		
20 CSR 4240-3.200	Public Service Commission		51 MoReg 821		
20 CSR 4240-3.205	Public Service Commission		51 MoReg 822		
20 CSR 4240-3.230	Public Service Commission		51 MoReg 822		
20 CSR 4240-3.255	Public Service Commission		51 MoReg 823		
20 CSR 4240-3.300	Public Service Commission		51 MoReg 823		
20 CSR 4240-3.400	Public Service Commission		51 MoReg 824		
20 CSR 4240-3.625	Public Service Commission		51 MoReg 824		
20 CSR 4240-4.010	Public Service Commission		51 MoReg 886		
20 CSR 4240-4.015	Public Service Commission		51 MoReg 886		
20 CSR 4240-4.017	Public Service Commission		51 MoReg 887		

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
20 CSR 4240-4.040	Public Service Commission		51 MoReg 888		
20 CSR 4240-23.040	Public Service Commission		51 MoReg 312	51 MoReg 947	
20 CSR 4240-28.012	Public Service Commission		51 MoReg 888		
20 CSR 4240-28.014	Public Service Commission		51 MoReg 889		
20 CSR 4240-29.010	Public Service Commission		51 MoReg 889		
20 CSR 4240-29.020	Public Service Commission		51 MoReg 890		
20 CSR 4240-29.030	Public Service Commission		51 MoReg 890		
20 CSR 4240-29.100	Public Service Commission		51 MoReg 891		
20 CSR 4240-31.016	Public Service Commission		51 MoReg 891		
20 CSR 4240-34.020	Public Service Commission		51 MoReg 892		
20 CSR 4240-34.090	Public Service Commission		51 MoReg 892		
20 CSR 4240-36.020	Public Service Commission		51 MoReg 893		
20 CSR 4240-36.030	Public Service Commission		51 MoReg 893		
20 CSR 4240-36.040	Public Service Commission		51 MoReg 894		
20 CSR 4240-36.050	Public Service Commission		51 MoReg 895		
20 CSR 4240-40.020	Public Service Commission		51 MoReg 697		
20 CSR 4240-40.030	Public Service Commission		51 MoReg 699		
20 CSR 4240-120.011	Public Service Commission		51 MoReg 709		
20 CSR 4240-120.110	Public Service Commission		51 MoReg 710		
20 CSR 4240-123.010	Public Service Commission		51 MoReg 710		
20 CSR 4240-123.020	Public Service Commission		51 MoReg 711		
20 CSR 4240-123.030	Public Service Commission		51 MoReg 711		
20 CSR 4240-123.040	Public Service Commission		51 MoReg 712		
20 CSR 4240-123.090	Public Service Commission		51 MoReg 712		
20 CSR 4240-124.010	Public Service Commission		51 MoReg 713		
20 CSR 4240-124.020	Public Service Commission		51 MoReg 713		
20 CSR 4240-124.060	Public Service Commission		51 MoReg 713		
20 CSR 4240-125.010	Public Service Commission		51 MoReg 714		
20 CSR 4240-125.040	Public Service Commission		51 MoReg 714		
20 CSR 4240-125.060	Public Service Commission		51 MoReg 715		
20 CSR 4240-126.010	Public Service Commission		51 MoReg 716		
20 CSR 4240-126.020	Public Service Commission		51 MoReg 716		
20 CSR 4240-127.010	Public Service Commission		51 MoReg 717		

MISSOURI CONSOLIDATED HEALTH CARE PLAN

MISSOURI DEPARTMENT OF THE NATIONAL GUARD

AGENCY	PUBLICATION	EFFECTIVE	EXPIRATION
Office of Administration			
Personnel Advisory Board and Division of Personnel			
1 CSR 20-5.020	Leaves of Absence	Next Issue	Sept. 9, 2026 March 7, 2027
Department of Elementary and Secondary Education			
Office of Childhood			
5 CSR 25-200.060	Eligibility and Authorization for Child Care Subsidy	51 MoReg 751	May 27, 2026 Feb. 25, 2027
Department of Social Services			
MO HealthNet Division			
13 CSR 70-3.300	Complementary Health and Alternative Therapies for Chronic Pain Management	51 MoReg 1099R	Aug. 10, 2026 Feb. 25, 2027
13 CSR 70-3.310	Chiropractic Services.	51 MoReg 1099R	Aug. 10, 2026 Feb. 25, 2027
13 CSR 70-15.015	Supplemental Payments.	51 MoReg 1099	Aug. 10, 2026 Feb. 25, 2027
13 CSR 70-15.110	Federal Reimbursement Allowance (FRA)	51 MoReg 855	July 1, 2026 Feb. 25, 2027
13 CSR 70-15.160	Outpatient Hospital Services Reimbursement Methodology.	51 MoReg 1102	Aug. 10, 2026 Feb. 25, 2027
13 CSR 70-94.020	Provider-Based Rural Health Clinic	51 MoReg 921	July 1, 2026 Feb. 25, 2027
Department of Health and Senior Services			
Division of Regulation and Licensure			
19 CSR 30-20.030	Construction Standards for New Hospitals.	51 MoReg 1107	Aug. 6, 2026 Feb. 1, 2027
19 CSR 30-30.030	General Design and Construction Standards for Ambulatory Surgical Centers.	51 MoReg 1108	Aug. 6, 2026 Feb. 1, 2027
19 CSR 30-30.040	Preparation of Plans and Specifications for Ambulatory Surgical Centers.	51 MoReg 1109	Aug. 6, 2026 Feb. 1, 2027
19 CSR 30-30.100	General Design and New Construction Standards for Birthing Centers.	51 MoReg 1109	Aug. 6, 2026 Feb. 1, 2027
19 CSR 30-35.020	Hospice Providing Direct Care in a Hospice Facility.	This Issue	Aug. 20, 2026 Feb. 15, 2027
Missouri Health Facilities Review Committee			
19 CSR 60-50.410	Letter of Intent Package	51 MoReg 1110	Aug. 6, 2026 Feb. 1, 2027
19 CSR 60-50.430	Application Package	51 MoReg 1111	Aug. 6, 2026 Feb. 1, 2027
Department of Commerce and Insurance			
Office of Statewide Electrical Contractors			
20 CSR 2117-1.070	Fees.	51 MoReg 752	June 1, 2026 Feb. 25, 2027

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

ORDER	SUBJECT MATTER	FILED DATE	PUBLICATION
2026			
26-17	Establishes the Missouri Child Welfare Task Force to develop recommendations for a statewide child welfare safety universal standard	August 25, 2026	Next Issue
26-16	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to the severe weather event starting on July 9, 2026	July 10, 2026	51 MoReg 1021
26-15	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to the severe weather event starting on June 4, 2026	June 10, 2026	51 MoReg 861
26-14	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to the ongoing and forecasted severe storm systems	May 18, 2026	51 MoReg 803
26-13	Extends Executive Order 26-10 until May 31, 2026	April 30, 2026	51 MoReg 684
26-12	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to the ongoing and forecasted severe storm systems	April 17, 2026	51 MoReg 683
26-11	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in preparation of the 2026 FIFA World Cup. The Adjutant General is ordered to call into active service any state militia deemed necessary to support civilian authorities and state agencies are authorized to provide assistance as needed	April 13, 2026	51 MoReg 639
26-10	Extends Executive Order 26-07 until April 30, 2026	March 31, 2026	51 MoReg 550
26-09	Extends Executive Order 25-34 until September 1, 2026	March 31, 2026	51 MoReg 549
26-08	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to the ongoing and forecasted severe storm systems	March 5, 2026	51 MoReg 501
26-07	Extends Executive Order 26-06 until March 31, 2026	February 27, 2026	51 MoReg 441
26-06	Extends Executive Order 25-38 until February 28, 2026	January 30, 2026	51 MoReg 342
26-05	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated. The Adjutant General is ordered to call into active service any state militia deemed necessary to support civilian authorities in response to the ongoing and forecasted severe winter storm systems	January 22, 2026	51 MoReg 341
26-04	Establishes the Missouri Advanced Nuclear Energy Task Force	January 13, 2026	51 MoReg 298
26-03	Formalizes the Missouri Government Responsibility, Efficiency, Accountability and Transformation (Missouri GREAT) initiative and creates the Missouri GREAT Operational Task Force	January 13, 2026	51 MoReg 295
26-02	Orders a strategic framework for the integration of Artificial Intelligence within state government operations to be developed; the Director of the Department of Economic Development to review current business environment for Artificial Intelligence; the Director of the Natural Resources with the Public Service Commission to review energy regulations and infrastructure; and the Commissioner of the Department of Higher Education and Workforce Development in collaboration with the Department of Economic Development to undertake initiatives to prepare Missouri's workforce and education systems for the AI-driven economy	January 13, 2026	51 MoReg 293
26-01	Establishes an A-F school grade card system	January 13, 2026	51 MoReg 291

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2025			
25-38	Extends Executive Order 25-31 until January 31, 2026	December 31, 2025	51 MoReg 190
25-37	Orders state offices to be closed on Wednesday, December 24, 2025	December 19, 2025	51 MoReg 189
25-36	Declares a State of Emergency and exempts hours of service requirements for vehicles transporting residential heating fuels until January 2, 2026	December 15, 2025	51 MoReg 59
25-35	Orders state offices to be closed on Friday, December 26, 2025	December 5, 2025	50 MoReg 1813
25-34	Extends Executive Order 25-29 and directs 21 additional counties declared in Drought Alert until April 1, 2026	November 26, 2025	51 MoReg 6
25-33	Orders state offices to be closed on Friday, November 28, 2025	November 7, 2025	50 MoReg 1812
25-32	Reinstates with revisions the "Missouri Manual for Courts-Martial, 2025."	November 7, 2025	50 MoReg 1811
25-31	Extends Executive Order 25-28 until December 31, 2025	October 29, 2025	50 MoReg 1745
25-30	Orders the Director of the Missouri Department of Social Services to prepare and submit a request for a waiver to the United States Department of Agriculture to authorize alterations to Missouri's SNAP program in a manner that prioritizes healthy food and nutritional value	September 28, 2025	50 MoReg 1531
25-29	Declares a Drought Alert in several Missouri counties, directs the Director of the Department of Natural Resources to promote the use of Condition Monitoring Observer Reports, and directs all state agencies to provide assistance to affected communities	September 22, 2025	50 MoReg 1530
25-28	Extends portions of Executive Order 25-27 until October 31, 2025	August 28, 2025	50 MoReg 1317
25-27	Extends Executive Orders 25-23 and 25-24 until August 31, 2025	June 30, 2025	50 MoReg 1075
25-26	Designates members of his staff to have supervisory authority over departments, divisions, and agencies of state government	June 24, 2025	50 MoReg 1073
25-25	Declares a State of Emergency and orders the Adjutant General to call into active service any state militia deemed necessary to support civilian authorities due to civil unrest in Missouri	June 12, 2025	50 MoReg 987
Proclamation	Convenes the First Extraordinary Session of the First Regular Session of the One Hundred Third General Assembly to appropriate money to specific areas as well as enact legislation regarding income tax deductions, the Missouri Housing Trust Fund, tax credits, and economic incentives	May 27, 2025	50 MoReg 888
25-24	Orders the Director of the Missouri Department of Health and Senior Services and the State Board of Pharmacy vested with full discretionary authority to temporarily waive or suspend statutory or administrative rule or regulation to serve the interests of public health and safety in the aftermath of severe weather that began on March 14, 2025	May 20, 2025	50 MoReg 887
25-23	Extends Executive Orders 25-20 and 25-22 until June 30, 2025	May 13, 2025	50 MoReg 769
25-22	Extends Executive Orders 25-19, 25-20, and 25-21 until May 14, 2025	April 14, 2025	50 MoReg 690
25-21	Directs the Adjutant General to call into active service any state militia deemed necessary to support civilian authorities due to the severe weather beginning April 1, 2025	April 2, 2025	50 MoReg 689
25-20	Orders that the Director of the Missouri Department of Natural Resources is vested with authority to temporarily waive or suspend statutory or administrative rule or regulation to serve the interests of public health and safety in the aftermath of severe weather that began on March 14, 2025	March 20, 2025	50 MoReg 567
25-19	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted severe storm systems beginning on March 14	March 14, 2025	50 MoReg 531

ORDER	SUBJECT MATTER	FILED DATE	PUBLICATION
25-18	Orders all executive agencies to comply with the principle of equal protection and ensure all rules, policies, employment practices, and actions treat all persons equally. Executive agencies are prohibited from considering diversity, equity, and inclusion in their hiring decisions, and no state funds shall be utilized for activities that solely or primarily support diversity, equity, and inclusion initiatives	February 18, 2025	50 MoReg 413
25-17	Declares a State of Emergency and activates the Missouri State Emergency Operations Plan due to forecasted severe winter storm systems and exempts hours of service requirements for vehicles transporting residential heating fuel until March 10, 2025	February 10, 2025	50 MoReg 411
25-16	Establishes the Governor's Workforce of the Future Challenge for the Missouri Department of Elementary and Secondary Education, with the Missouri Department of Education and Workforce Development, to improve existing career and technical education delivery systems	January 28, 2025	50 MoReg 361
25-15	Orders the Office of Childhood within the Missouri Department of Elementary and Secondary Education to improve the state regulatory environment for child care facilities and homes	January 28, 2025	50 MoReg 360
25-14	Establishes the Missouri School Funding Modernization Task Force to develop recommendations for potential state funding models for K-12 education	January 28, 2025	50 MoReg 358
25-13	Orders Executive Department directors and commissioners to solicit input from their respective agency stakeholders and establishes rulemaking requirements for state agencies	January 23, 2025	50 MoReg 356
25-12	Establishes a Code of Conduct for all employees of the Office of the Governor	January 23, 2025	50 MoReg 354
25-11	Designates members of his staff to have supervisory authority over departments, divisions, and agencies of state government	January 23, 2025	50 MoReg 352
25-10	Declares a State of Emergency and activates the Missouri State Emergency Operations Plan due to forecasted severe winter storm systems and exempts hours of service requirements for vehicles transporting products utilized by poultry and livestock producers in their farming and ranching operations until January 24, 2025	January 17, 2025	50 MoReg 350
25-09	Directs the Commissioner of Administration to ensure all flags of the United States and the State of Missouri are flown at full staff at all state buildings and grounds on January 20, 2025 for a period of 24 hours	January 15, 2025	50 MoReg 290
25-08	Declares a State of Emergency and activates the Missouri State Emergency Operations Plan and exempts hours of service requirements for vehicles transporting residential heating fuel until February 2, 2025	January 13, 2025	50 MoReg 288
25-07	Orders the Department of Corrections and the Missouri Parole Board to assemble a working group to develop recommendations to rulemaking for the parole process	January 13, 2025	50 MoReg 287
25-06	Orders the Director of the Department of Public Safety and the Superintendent of the Missouri State Highway Patrol to modify the Patrol's salary schedule by reducing the time of service required to reach the top salary tier from 15 years of service to 12 years of service	January 13, 2025	50 MoReg 286
25-05	Directs the Department of Public Safety in collaboration with the Missouri State Highway Patrol to include immigration status in the state's uniform crime reporting system and to facilitate the collection of such information across the state	January 13, 2025	50 MoReg 285

ORDER	SUBJECT MATTER	FILED DATE	PUBLICATION
25-04	Directs the Director of the Department of Public Safety in collaboration with the Superintendent of the Missouri State Highway Patrol to establish and maintain a memorandum of understanding with the U.S. Department of Homeland Security and actively collaborate with federal agencies. The Superintendent of the Missouri State Highway Patrol shall designate members for training in federal immigration enforcement	January 13, 2025	50 MoReg 284
25-03	Establishes the “Blue Shield Program” within the Department of Public Safety to recognize local governments committed to public safety within their community	January 13, 2025	50 MoReg 282
25-02	Establishes “Operation Relentless Pursuit,” a coordinated law enforcement initiative	January 13, 2025	50 MoReg 281
25-01	Declares a State of Emergency and activates the Missouri State Emergency Operations Plan due to forecasted severe winter storm systems and exempts hours of service requirements for vehicles transporting residential heating fuel until January 13, 2025	January 3, 2025	50 MoReg 279

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