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SALUS POPULI SUPREMA LEX ESTO

*"The welfare of the people shall be the supreme law."*



ROBIN CARNAHAN  
SECRETARY OF STATE

MISSOURI  
REGISTER

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Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule. To review the entire year’s schedule, please check out the website at <http://www.sos.mo.gov/adrules/pubsched.asp>

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**RULES**—Cite material in the *Missouri Register* by volume and page number, for example, Vol. 28, *Missouri Register*, page 27. The approved short form of citation is 28 MoReg 27.

The rules are codified in the *Code of State Regulations* in this system—

Title	Code of State Regulations	Division	Chapter	Rule
1	CSR	10-	1.	010
Department		Agency, Division	General area regulated	Specific area regulated

They are properly cited by using the full citation, i.e., 1 CSR 10-1.010.

Each department of state government is assigned a title. Each agency or division within 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 paragraph 1., subparagraph A., part (I), subpart (a), item I. and subitem a.

**RSMo**—The most recent version of the statute containing the section number and the date.

**R**ules appearing under this heading are filed under the authority granted by section 536.025, RSMo 2000. An emergency rule may be adopted by an agency if the agency finds that an immediate danger to the public health, safety or welfare, or a compelling governmental interest requires emergency action; follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances; follows procedures which comply with the protections extended by the *Missouri* and the *United States Constitutions*; limits the scope of such rule to the circumstances creating an emergency and requiring emergency procedure, and at the time of or prior to the adoption of such rule files with the secretary of state the text of the rule together with the specific facts, reasons and findings which support its conclusion that there is an immediate danger to the public health, safety or welfare which can be met only through the adoption of such rule and its reasons for concluding that the procedure employed is fair to all interested persons and parties under the circumstances.

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

**A**ll 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 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 15—Hospital Program**

**EMERGENCY RULE**

**13 CSR 70-15.180 Grant to Trauma Hospitals for the Care Provided by Physicians Not Employed by the Hospital**

*PURPOSE: This rule establishes a one (1)-time grant of one (1) million dollars to a not-for-profit hospital, designated as a trauma hospital, in a county with more than one (1) million residents and within five (5) miles of an international airport for the care provided at the trauma hospital by physicians not employed by the hospital.*

*EMERGENCY STATEMENT: Individual and mass casualty events present special challenges to health care systems and professionals. Promulgation of this emergency rule is necessary to preserve the compelling governmental interest of allocating funding necessary to maintain the current level of hospital trauma coverage and prepare adequately for any potential mass casualty event by establishing a one (1)-time grant for a not-for-profit hospital, designated as a trauma hospital, in a county with more than one (1) million residents, and within five (5) miles of an international airport. This rule establishes a one (1)-time grant of one (1) million dollars to a not-for-profit hospital, designated as a trauma hospital(s), in a county with more*

*than one (1) million residents and within five (5) miles of an international airport for the care provided at the trauma hospital by physicians not employed by the hospital. The funding for this grant was not available until the state had determined that claims against appropriated funds had been satisfied for SFY 2007. Any delay in making this grant payment during state fiscal year 2007 (SFY 2007) could result in the closing of a vital trauma center within five (5) miles of an international airport. The trauma center continues to incur significant on-call costs for retaining physician services. This grant contains a requirement to continue to operate the trauma center for an additional two (2) years. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The division believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed June 6, 2007, effective June 16, 2007, expires December 12, 2007.*

(1) General Reimbursement Principles. A not-for-profit hospital, which reimburses physicians not employed by the hospital to provide emergency department services that has a trauma center designation, in a county with more than one (1) million residents, and within five (5) miles of an international airport shall receive a one (1)-time grant in order to invest the resources necessary to keep the trauma center open.

(2) Definitions.

(A) Trauma hospital. A trauma center designated by the Missouri Department of Health and Senior Services.

(3) Grant. The one (1)-time grant shall be one (1) million dollars.

(4) Any not-for-profit hospital(s) who receives this grant shall commit to maintaining the trauma center for a period of two (2) years beyond the date of payment. If the trauma center is closed within two (2) years of the date of payment the hospital shall return a proportional share of the grant to the state.

*AUTHORITY: sections 208.152, 208.153, and 208.201, RSMo 2000. Emergency rule filed June 6, 2007, effective June 16, 2007, expires Dec. 12, 2007.*

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

**Division 20—Division of Community and Public Health  
Chapter 20—Communicable Diseases**

**EMERGENCY AMENDMENT**

**19 CSR 20-20.010 Definitions Relating to Communicable, Environmental and Occupational Diseases.** The department is amending section (34) and adding a new section (37) and renumbering the sections thereafter.

*PURPOSE: This emergency amendment clarifies the definition of quarantine and adds the definition of statewide pandemic.*

*EMERGENCY STATEMENT: According to the "National Strategy for Pandemic Influenza," issued by the federal Homeland Security Council, November 2005, a current pandemic threat stems from an unprecedented outbreak of avian influenza (H5N1) in Asia and Europe, caused by the H5N1 strain of the Influenza A virus. A notable and worrisome feature of the H5N1 virus is its ability to infect a wide range of hosts, including birds and humans. As of the*

date of that document, the virus was known to have infected one hundred twenty-one (121) people in four (4) countries, resulting in sixty-two (62) deaths within two (2) years. Although the virus has not yet shown an ability to transmit efficiently between humans, as is seen with the annual influenza virus, there is concern that it will acquire this capability through genetic mutation or exchange of genetic material with a human influenza virus. Although, it is impossible to know whether the currently circulating H5N1 virus will cause a human pandemic, the widespread nature of H5N1 in birds and the likelihood of mutations over time raise concerns that the virus will become transmissible between humans, with potentially catastrophic consequences. If this does not happen with the current H5N1 strain, history suggests that a different influenza virus will emerge and result in the next pandemic. As of June 2007, the number of confirmed cases of H5N1 grew to three hundred thirteen (313), and the number of deaths to one hundred ninety-one (191), from four (4) confirmed cases and four (4) deaths in 2003, as reported to the World Health Organization. Because there is little pre-existing natural immunity to H5N1 virus infection in the human population and the development of vaccines against new diseases is a lengthy process, an influenza pandemic could result, with potentially high rates of illness and death in Missouri and worldwide. Unless and until the current administrative rule is amended local health authorities may use varying standards in responding to a pandemic and for closing public and private schools and places of public and private assembly in the event of a statewide pandemic.

This change in the definition of quarantine is necessary because the existing definition does not make a clear distinction between quarantine and isolation. Quarantine refers to limiting the movements of otherwise healthy individuals who have been exposed to a communicable disease, while isolation concerns individuals known to have a communicable disease. Also, this change will make Missouri's definition consistent with the definition provided by the U.S. Centers for Disease Control and Prevention. Without these amendments there would be increased confusion and decreased effective response among agencies and officials responding to an emergent situation, which would prove detrimental to the citizens of Missouri.

Pursuant to section 536.025, RSMo, the Department of Health and Senior Services has a compelling governmental interest that requires emergency action in order to safeguard the health of the people of Missouri and to prevent the spread of infectious, contagious, communicable or dangerous diseases into and within the state of Missouri by ensuring that such actions are coordinated at the state, rather than the local level, in the event of a statewide pandemic. A proposed amendment was filed June 15, 2007. Because of the lengthy delay in the effective date of the proposed amendment, an emergency amendment is necessary. 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. No other changes are proposed. The Department of Health and Senior Services believes this emergency amendment is fair to all interested persons and parties under the circumstances. Emergency amendment filed June 15, 2007, effective July 6, 2007, expires January 1, 2008.

(34) Quarantine is a [period of detention for] restriction of movement of persons or animals that [may] have been exposed to a [reportable] communicable disease, but have not yet developed disease. The period of [time] quarantine will not be longer than the [longest period of communicability] entire incubation period of the disease. The purpose of quarantine is to prevent effective contact with the general population.

(A) Complete quarantine is a limitation of freedom of movement of persons or animals exposed to a reportable disease, for a period of time not longer than the [longest period of communicability] entire incubation period of the disease, in order to prevent effective contact with the general population.

(37) Statewide pandemic is an outbreak of a particularly dangerous disease affecting a high proportion of the population, appearing in three (3) or more counties, as declared by the director of the Department of Health and Senior Services.

[(37)] (38) Terrorist event is the unlawful use of force or violence committed by a group or individual against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political or social objectives. Terrorist attacks are classified as chemical, biological, or radiological.

(A) Chemical means any weapon that is designed or intended to cause widespread death or serious bodily injury through the release, dissemination, or impact of toxic or poisonous chemicals or precursors of toxic or poisonous chemicals.

(B) Biological means any microorganism, virus, infectious substance, or biological product that may be engineered as a result of biotechnology, or any naturally occurring or bioengineered component of any such microorganism, virus, infectious substance, or biological product.

(C) Radiological means any weapon that is designed to release radiation or radioactivity at a level dangerous to human life.

[(38)] (39) Toxic substance is any substance, including any raw materials, intermediate products, catalysts, final products or by-products of any manufacturing operation conducted in a commercial establishment that has the capacity through its physical, chemical or biological properties to pose a substantial risk of death or impairment, either immediately or later, to the normal functions of humans, aquatic organisms or any other animal.

[(39)] (40) Unusual diseases—Examples include, but are not limited to, the following:

- (A) Diseases uncommon to a geographic area, age group, or anatomic site;
- (B) Cases of violent illness resulting in respiratory failure;
- (C) Absence of a competent natural vector for a disease; or
- (D) Occurrence of hemorrhagic illness.

[(40)] (41) Unusual manifestation of illness—Examples include, but are not limited to, the following:

- (A) Multiple persons presenting with a similar clinical syndrome at a steady or increasing rate;
- (B) Large numbers of rapidly fatal cases, with or without recognizable signs and symptoms;
- (C) Two (2) or more persons, without a previous medical history, presenting with convulsions;
- (D) Persons presenting with grayish colored tissue damage; or
- (E) Adults under the age of fifty (50) years, without previous medical history, presenting with adult respiratory distress syndrome (ARDS).

[(41)] (42) Varicella (Chickenpox) severity of illness shall include the following categories:

- (A) Mild—less than fifty (50) lesions (able to count lesions within thirty (30) seconds);
- (B) Moderate—fifty to five hundred (50–500) lesions (anything in between mild and severe); and
- (C) Severe—more than five hundred (500) lesions (difficult to see the skin) or lesions with complications.

*AUTHORITY: sections 192.006 and 260.203, RSMo 2000 and 192.020, RSMo Supp. [2005] 2006. This rule was previously filed as 13 CSR 50-101.010. Original rule filed July 15, 1948, effective Sept. 13, 1948. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 15, 2007, effective July 6, 2007, expires Jan. 1, 2008. A proposed amendment covering this same material is published in this issue of the Missouri Register.*

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

**Division 20—Division of Community and Public Health  
Chapter 20—Communicable Diseases**

**EMERGENCY AMENDMENT**

**19 CSR 20-20.050 Quarantine or Isolation Practices and Closing of Schools and Places of Public and Private Assembly.** The department is amending section (3).

*PURPOSE:* This emergency amendment clarifies who may close public and private schools and places of public and private assembly in the event of a statewide pandemic.

*EMERGENCY STATEMENT:* According to the "National Strategy for Pandemic Influenza," issued by the federal Homeland Security Council, November 2005, a current pandemic threat stems from an unprecedented outbreak of avian influenza (H5N1) in Asia and Europe, caused by the H5N1 strain of the Influenza A virus. A notable and worrisome feature of the H5N1 virus is its ability to infect a wide range of hosts, including birds and humans. As of the date of that document, the virus was known to have infected one hundred twenty-one (121) people in four (4) countries, resulting in sixty-two (62) deaths within two (2) years. Although the virus has not yet shown an ability to transmit efficiently between humans, as is seen with the annual influenza virus, there is concern that it will acquire this capability through genetic mutation or exchange of genetic material with a human influenza virus. Although, it is impossible to know whether the currently circulating H5N1 virus will cause a human pandemic, the widespread nature of H5N1 in birds and the likelihood of mutations over time raise concerns that the virus will become transmissible between humans, with potentially catastrophic consequences. If this does not happen with the current H5N1 strain, history suggests that a different influenza virus will emerge and result in the next pandemic. As of June 2007, the number of confirmed cases of H5N1 grew to three hundred thirteen (313), and the number of deaths to one hundred ninety-one (191), from four (4) confirmed cases and four (4) deaths in 2003, as reported to the World Health Organization. Because there is little pre-existing natural immunity to H5N1 virus infection in the human population and the development of vaccines against new diseases is a lengthy process, an influenza pandemic could result, with potentially high rates of illness and death in Missouri and worldwide. In light of diseases such as measles, drug resistant tuberculosis, and severe acute respiratory syndrome (SARS), entering the United States via airline passengers who had traveled overseas, the threat of such diseases or other communicable, contagious or dangerous diseases, such as avian influenza poses a constant threat to the health and welfare of the citizens of Missouri. Tourists, immigrants, parents of children adopted in foreign countries, troops returning from overseas, and international students enrolled in universities throughout Missouri are possible sources for the introduction of contagious, communicable, and dangerous diseases into the state. It is critical to have consistent procedures in place to handle outbreaks of such diseases. At recent emergency preparedness meetings with the Department of Health and Senior Services and the local public health agencies, the department became aware that the local public health agencies' guidelines for the closure of schools and private and public places of assembly in such situations are not only inconsistent with the other local public health agencies within the state, but also with scientific guidelines issued by the federal Centers for Disease Control and Prevention. Unless and until the current administrative rule is amended local health authorities may use varying standards in responding to a pandemic and for closing public and private schools and places of public and private assembly in the event of a statewide pandemic. Pursuant to section 536.025, RSMo, the Department of Health and Senior Services has a compelling governmental interest that requires emergency action in

order to safeguard the health of the people of Missouri and to prevent the spread of infectious, contagious, communicable or dangerous diseases into and within the state of Missouri by ensuring that such actions are coordinated at the state, rather than the local level, in the event of a statewide pandemic. A proposed amendment was filed June 15, 2007. Because of the lengthy delay in the effective date of the proposed amendment, an emergency amendment is necessary. 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*. No other changes are proposed. The Department of Health and Senior Services believes this emergency amendment is fair to all interested persons and parties under the circumstances. Emergency amendment filed June 15, 2007, effective July 6, 2007, expires January 1, 2008.

(3) The local health authority, the director of the Department of Health and Senior Services or the director's designated representative is empowered to close any public or private school or other place of public or private assembly when, in the opinion of the local health authority, the director of the Department of Health and Senior Services or the director's designated representative, the closing is necessary to protect the public health. **However, in a statewide pandemic, only the director of the Department of Health and Senior Services or the director's designated representative shall have the authority to close a public or private school or other place of public or private assembly. The director or designated representative shall consult with the local health authorities prior to any such closing.** Any school or other place of public or private assembly that is ordered closed shall not reopen until permitted by whomever ordered the closure.

*AUTHORITY:* section 192.020, RSMo [1994] Supp. 2006. This rule was previously filed as 13 CSR 50-101.061. Original rule filed Dec. 11, 1981, effective May 13, 1982. Emergency amendment filed June 15, 2007, effective July 6, 2007, expires Jan. 1, 2008. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**T**he Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo Supp. 2006.

## EXECUTIVE ORDER

07-16

WHEREAS, forensic science is the application of science to the law; and

WHEREAS, the successful investigation and prosecution of crimes routinely depends on the accurate scientific analysis of evidence conducted in crime laboratories at the state and local levels; and

WHEREAS, the crime laboratories located within the State of Missouri process evidence from thousands of cases annually and present their findings in state courts of law, having a direct influence on the determination of a person's innocence or guilt; and

WHEREAS, it is essential that all crime laboratories in the state provide the highest quality forensic science services to the citizens of the State of Missouri in the most efficient manner.

NOW, THEREFORE, I, Matt Blunt, Governor of the State of Missouri, by virtue of the authority vested in me by the Constitution and laws of the State of Missouri, hereby create and establish the Governor's "Crime Laboratory Review Commission" within the Missouri Department of Public Safety. The purpose of the commission is to provide independent review of any state or local Missouri crime laboratory receiving any amount of state-administered funding.

1. The establishment of the Crime Laboratory Review Commission is necessary in order to be eligible to receive federal grant funds for crime laboratories in Missouri.
2. The commission shall consist of six members appointed by the Governor. The members shall include: one senior manager from an ASCLD/LAB accredited crime laboratory within the state who has experience as a forensic scientist, one sworn administrator from a law enforcement agency, one prosecuting attorney, one defense attorney, one crime victims' advocate, and one representative of the Missouri Department of Public Safety.
3. The commission members shall not be compensated for their services other than reimbursement of costs directly associated with the execution of their duties.
4. The term "Crime Laboratory" shall mean any forensic science laboratory operated or supported financially by the state or any unit of city, county, or other local Missouri government that examines physical evidence in criminal matters and provides expert or opinion testimony in a state court of law.



5. The commission shall have the power to:
  - (A) Assess the capabilities and needs of Missouri crime laboratories, as well as their ability to deliver quality forensic services in a timely manner to law enforcement agencies in the State of Missouri, and make recommendations for improvements;
  - (B) Authorize independent external investigations into allegations of serious negligence or misconduct affecting the integrity of forensic results. The commission shall solicit input and guidance from any appropriate experts, as it deems necessary in the process of the inquiry;
  - (C) Appoint members to inspection or investigative teams to assist in carrying out the functions designated in sections 4(A) and 4(B) above;
  - (D) Issue reprimands to crime laboratories and to employees of crime laboratories found to be negligent in the execution of their responsibilities;
  - (E) Make recommendations for changes in procedures of crime laboratories found to be negligent in the execution of their responsibilities; and
  - (F) Issue a report to the Missouri Department of Public Safety summarizing any findings of negligence or misconduct of a crime laboratory or an employee of a crime laboratory and make recommendations regarding revocation or suspension of grant funding that the commission deems warranted.
6. The commission shall meet at least annually to review the current status of crime laboratories in the State of Missouri.
7. The commission shall submit an annual report to the Governor summarizing its activities and any suggestions to improve the crime laboratory system in the State of Missouri.
8. The Department of Public Safety shall have the authority to revoke any grant monies from a laboratory if the laboratory does not cooperate with the commission or if allegations of serious misconduct or negligence are substantiated by the commission.
9. This order complies with requirements in the federal "Justice For All Act of 2004."



IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Missouri, in the City of Jefferson, on this 7th day of June, 2007.

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**Matt Blunt**  
**Governor**

**ATTEST:**

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**Robin Carnahan**  
**Secretary of State**