The House met pursuant to adjournment.

Speaker Pro Tem Hoskins in the Chair.


_He who is slow to anger is better than the mighty, and he who rules his spirit than he who takes a city. (Proverbs 16:32)_

O Loving God, before whom we bow in adoration and unto whom we lift our hearts in prayer, help us to improve our self-control that we may do our duties and respond to our responsibilities with deep courage and true happiness.

May we feel Your guiding hand through all the scattered details of our daily life and in the stress of this hour may we hear Your still small voice and feel underneath us Your everlasting arms holding us steady, keeping us strong, and leading us in the way we should go.

Bless all efforts to remove harmful pride and reduce discord and prosper all endeavors to redouble our good will and reaffirm our faith in You and our state.

Finally, grant eternal rest to Governor Joseph P. Teasdale who served as our chief executive from 1977-1981. May his soul rest in peace and his family have comfort.

And the House says, “Amen!”

The Pledge of Allegiance to the flag was recited.

The Speaker appointed the following to act as Honorary Pages for the Day, to serve without compensation: Louise Pfeifer and Nathan Hunter Wilkerson.

The Journal of the sixty-seventh day was approved as printed.

**HOUSE RESOLUTION**

Representative Bernskoetter offered House Resolution No. 3261.

**HOUSE COURTESY RESOLUTIONS OFFERED AND ISSUED**

House Resolution No. 3211 through House Resolution No. 3260
HOUSE BILLS WITH SENATE AMENDMENTS

SCS HCS HB 1217, as amended, relating to the unlawful transfer or assignment of pension benefits, was taken up by Representative Dugger.

On motion of Representative Dugger, SCS HCS HB 1217, as amended, was adopted by the following vote:

AYES: 132

Allen, Anders, Anderson, Austin, Bahr
Barnes, Bernskoetter, Berry, Black, Brattin
Brown, Burlison, Burns, Carpenter, Cierpiot
Conway 104, Conway 10, Cookson, Cornejo, Crawford
Cross, Davis, Diehl, Dohrman, Dugger
Dunn, Elmer, Engler, English, Englund
Entlicher, Fitzwater, Flanigan, Fraker, Frame
Franklin, Frederick, Gannon, Gatschenberger, Gosen
Guermsey, Haahr, Haefner, Hampton, Hansen
Harris, Hicks, Higdon, Hinson, Hoskins
Hough, Houghton, Hummel, Hurst, Johnson
Justus, Keene, Kelley 127, Kirkton, Koenig
Kolkmeyer, Korman, Kratky, LaFaver, Lair
Lant, Lauer, Leara, Lichtenegger, Love
Lynch, Marshall, Mayfield, McCaherty, McCann Beatty
McDonald, McGaugh, McKenna, McManus, Meredith
Messenger, Miller, Montecillo, Moon, Morris
Neely, Neth, Nichols, Norr, Otto
Parkinson, Pfautsch, Phillips, Pierson, Pike
Redmon, Rehder, Reiboldt, Remole, Rhoads
Richardson, Riddle, Rizzo, Roorda, Ross
Rowden, Rowland, Runions, Scharnhorst, Schatz
Schieber, Schupp, Shull, Shumake, Smith
Solon, Sommer, Spencer, Stream, Swan
Swearingen, Thomson, Torpey, Walker, Walton Gray
Webber, White, Wieland, Wilson, Wood
Wright, Zerr

NOES: 013

Butler, Colona, Curtis, Ellington, Gardner
Hubbard, May, McNeil, Mims, Mitten
Pace, Peters, Pogue

PRESENT: 002

Kelly 45, Morgan

ABSENT WITH LEAVE: 012

Cox, Curtman, Fitzpatrick, Funderburk, Grisamore
Hodges, Jones 50, Molendorp, Muntzel, Newman
Schieffer, Mr. Speaker

VACANCIES: 004
On motion of Representative Dugger, SCS HCS HB 1217, as amended, was truly agreed to and finally passed by the following vote:

### AYES: 132

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<thead>
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### NOES: 013

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<td>Walton Gray</td>
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### PRESENT: 002

| Kelly 45       | Morgan         |                |            |              |

### ABSENT WITH LEAVE: 012

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<td>Mr. Speaker</td>
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### VACANCIES: 004

Speaker Pro Tem Hoskins declared the bill passed.
The emergency clause was defeated by the following vote:

**AYES: 095**

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**NOES: 049**

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**PRESENT: 003**

- Kelly 45
  - Norr
  - Roorda

**ABSENT WITH LEAVE: 012**

- Carpenter
  - Conway 10
- Hough
  - Jones 50
- Pierson
  - Rowland

**VACANCIES: 004**
MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate refuses to adopt the Conference Committee Report on SS SCS HB 1490, as amended, and requests the House to grant further conference thereon; and further that the Senate conferees are allowed to exceed the differences in Section 161.855.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on HCS SCS SB 492, as amended.

Senators: Pearce, Brown, Romine, Keaveny and Sifton

HOUSE BILLS WITH SENATE AMENDMENTS

SS HCS HB 1075, relating to unclaimed property, was taken up by Representative Miller.

On motion of Representative Miller, SS HCS HB 1075 was adopted by the following vote:

AYES: 142

Anders        Anderson        Austin        Bahr          Barnes
Bernskoetter  Berry          Black         Brattin       Brown
Burlison      Burns          Butler        Carpenter     Cierpiot
Colona        Conway 10      Conway 104   Cookson       Cornejo
Crawford      Cross          Curtis        Curtman       Davis
Diehl         Dohrmann      Dugger        Dunn          Ellington
Elmer         Engler         English       Englund       Entlicher
Fitzpatrick   Fitzwater      Fraker        Frame         Franklin
Frederick     Gannon         Gatschenberger Gosen        Grisamore
Guernsey      Haahr          Haefner       Hampton       Hansen
Harris        Hicks          Higdon        Hinson        Hoskins
Hough         Houghton       Hubbard       Hummel        Hurst
Johnson       Jones 50       Justus        Keeney        Kelley 127
Koenig        Kolkmeyer     Korman        Kratky        LaFaver
Lair          Lant          Lauer         Leara         Lichtenegger
Love          Lynch          May           Mayfield      McCaherty
McCann Beatty  McDonald      McGaugh       McKenna       McManus
McNeil        Meredith      Messenger     Miller        Mims
Mitten        Moon          Morgan        Morris        Neely
Neth          Nichols       Norr          Otto          Pace
Parkinson     Pfautsch      Phillips      Pierson       Pike
Redmon        Rehdor        Reiboldt     Remole         Rhoads
Richardson    Riddle        Rizzo         Roorda        Ross
Rowden        Rowland       Runions       Scharmhorst   Schatz
Schieber      Schieffer     Shull         Shumake       Smith
Solon         Sommer        Spencer       Stream        Swan
Swearengen    Thomson       Torpey        Walker        Webber
White         Wieland       Wilson        Wood          Wright
Zerr          Mr. Speaker
On motion of Representative Miller, **SS HCS HB 1075** was truly agreed to and finally passed by the following vote:

**AYES:** 135

Allen Allen Anders Anderson Austin Bahr
Barnes Bernskoetter Berry Black Brattin
Brown Burlison Burns Butler Carpenter
Cierpiot Colona Conway Conway 10 Cookson
Cornejo Crawford Cross Curtis Curtman
Davis Diehl Dohrmann Dugger Dunn
Elmer English Englund Entlicher Fitzpatrick
Fitzwater Fraker Frame Franklin Fredericksen
Gannon Gatschenberger Gosen Grisamore Guernsey
Haahr Haefner Hampton Hansen Harris
Hicks Higdon Hinson Hoskins Hough
Houghton Hubbard Hummel Hurst Johnson
Jones 50 Justus Keeney Kelley 127 Kelly 45
Koenig Kolkmeyer Korman Kratky LaFaver
Lair Lant Lauer Leara Lichtenegger
Lynch May Mayfield McCaherty McCann Beatty
McDonald McGaugh McKenna McManus McNeil
Meredith Messenger Miller Moon Morgan
Neth Nichols Norr Otto Pace
Parkinson Pfautsch Phillips Pierson Pike
Rehder Reiboldt Remole Rhoads Richardson
Riddle Rizzo Roorda Ross Rowden
Rowland Runions Schamhorst Schatz Schieber
Schieffer Shull Shumake Smith Solon
Sommer Stream Swan Swearingen Thomson
Torpéy Walker Webber White Wieland
Wilson Wood Wright Zerr Mr. Speaker
Speaker Pro Tem Hoskins declared the bill passed.

The emergency clause was adopted by the following vote:

AYES: 131

NOES: 019

PRESENT: 000
MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate refuses to recede from its position on SS HCS HB 1685 and grants the House a conference thereon.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate refuses to concur in HCS SB 615, as amended, and requests the House to recede from its position and, failing to do so, grant the Senate a conference thereon.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate refuses to concur in HCS SB 656, as amended, and requests the House to recede from its position and, failing to do so, grant the Senate a conference thereon.

HOUSE BILLS WITH SENATE AMENDMENTS

SS SCS HCS HJR 90, relating to early voting, was taken up by Representative Dugger.

Representative Redmon assumed the Chair.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 099

Allen  Anderson  Austin  Bahr  Barnes
Bernskoetter  Berry  Brattin  Brown  Burlison
Conway 104  Cookson  Cornejo  Crawford  Cross
Curtman  Davis  Diehl  Dohrman  Dugger
Elmer  Engler  Entlicher  Fitzpatrick  Fitzwater
Flanigan  Fraker  Franklin  Frederick  Gannon
Gatschenberger  Gosen  Grisamore  Haahr  Haefer
Hampton  Hansen  Hicks  Higdon  Hinson
Hoskins  Hough  Houghton  Hurst  Johnson
Jones 50  Justus  Keeney  Kelley 127  Koenig
Kolkmeyer  Korman  Lair  Lant  Lauer
Leara  Lichtenegger  Love  Lynch  Marshall
McCaherty  McGaugh  Messenger  Miller  Moon
Morris  Neely  Neth  Parkinson  Pfautsche
Phillips  Pike  Pogue  Redmon  Rehder
Reiboldt  Remole  Rhoads  Richardson  Riddle
Speaker Pro Tem Hoskins resumed the Chair.

On motion of Representative Dugger, SS SCS HCS HJR 90 was adopted by the following vote:

AYES: 094

Allen  Anderson  Austin  Bahr  Barnes  Barnes
Berns koetter  Berry  Brattin  Brown  Burlison
Cierpiot  Conway 104  Cookson  Cornejo  Crawford
Cross  Davis  Diehl  Dohrmann  Dugger
Elmer  Engler  Entlicher  Fitzpatrick  Fitzwater
Flanigan  Fraker  Franklin  Frederick  Gannon
Gosen  Grisamore  Guernesey  Haahr  Haefner
Hampton  Hansen  Hicks  Hinson  Hoskins
Hough  Houghton  Johnson  Jones 50  Justus
Keener  Kelley 127  Koenig  Kolkmeyer  Korman
Lair  Lant  Lauer  Leara  Lichtenegger
Love  Lynch  McGaugh  Messenger  Miller
Morris  Neely  Neth  Parkinson  Pfautsch
Phillips  Pike  Redmon  Rehder  Reiboldt
Remole  Rhoads  Richardson  Riddle  Ross
Rowden  Rowland  Schatz  Schieber  Shull
Shumake  Solon  Sommer  Spencer  Stream
Swan  Thomson  Torpey  Walker  White
Wieland  Wood  Zerr  Mr. Speaker
On motion of Representative Dugger, **SS SCS HCS HJR 90** was truly agreed to and finally passed by the following vote:

**AYES:** 92

Allen, Bernskoetter, Cross, Elmer, Flanigan, Gatschenberger, Haefner, Hoskins, Justus, Lair, Lynch, Neely, Pike, Rhoads, Rowland, Solon, Thomson, Zerr

**NOES:** 57

Anders, Colona, Ellington, Harris, Kelly 45, May, McManus, Mitten, Norr, Pogue, Schupp, Wilson
Speaker Pro Tem Hoskins declared the bill passed.

**THIRD READING OF SENATE BILLS**

**HCS SB 794**, relating to insurance regulation, was taken up by Representative Gosen.

On motion of Representative Gosen, **HCS SB 794** was adopted.

On motion of Representative Gosen, **HCS SB 794** was read the third time and passed by the following vote:

**AYES: 143**

Allen Anders Anderson Austin Bahr
Barnes Bernskoetter Berry Black Brattin
Brown Burlison Burns Butler Carpenter
Cierpiot Colona Conway 10 Conway 104 Cookson
Cornejo Crawford Cross Curtis Curtman
Davis Diehl Dohrman Dugger Dunn
Elmer Engler Englund Entlicher Fitzpatrick
Fitzwater Flanigan Fraker Frame Franklin
Frederick Gannon Gatschenberger Gosen Grisamore
Guernsey Haahr Haefner Hampton Hansen
Harris Hicks Higdon Hinson Hoskins
Hough Houghton Hubbard Hummel Kelley 127 Kelly 45
Johnson Justus Keeney Kelley 127 Kratky
Kirkton Koenig Kolkmeyer Korman Kratky
LaFaver Lair Lant Lauer Leura
Lichtenegger Love Lynch Marshall Mayfield
McCaherty McCann Beatty McDonald McGaugh McKenna
McManus Meredith Messenger Miller Mims
Mitten Molendorp Montecillo Moon Morgan
Morris Neely Nichols Norr Otto
Pace Parkinson Plautsch Phillips Pierson
Pike Redmon Rehder Reiboldt Remole
Rhoads Richardson Riddle Rizzo Roorda
Ross Rowden Rowland Runions Scharnhorst
Schieber Schieffer Schupp Shull Shumake
Solon Sommer Spencer Stream Swan
Speaker Pro Tem Hoskins declared the bill passed.

**SCS SB 731,** relating to property regulations in certain cities and counties, was taken up by Representative Colona.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

**AYES: 093**

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**NOES: 048**

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On motion of Representative Colona, **SCS SB 731** was truly agreed to and finally passed by the following vote:

**AYES: 125**

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**NOES: 021**

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</table>
Speaker Pro Tem Hoskins declared the bill passed.

Speaker Jones assumed the Chair.

**APPOINTMENT OF CONFERENCE COMMITTEE**

The Speaker appointed the following Conference Committee to act with a like committee from the Senate on the following bill:

**SS HCS HB 1685:** Representatives Neely, Richardson and Mitten

Speaker Pro Tem Hoskins resumed the Chair.

On motion of Representative Diehl, the House recessed until 1:15 p.m.

**AFTERNOON SESSION**

The hour of recess having expired, the House was called to order by Speaker Jones.

**HOUSE BILLS WITH SENATE AMENDMENTS**

**SS HJR 68,** relating to a temporary tax to improve the state highway system, city streets, county roads, and the transportation system, was taken up by Representative Hinson.

Speaker Pro Tem Hoskins resumed the Chair.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

**AYES: 096**

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On motion of Representative Hinson, SS HJR 68 was adopted by the following vote:

AYES: 106

Allen    Anders    Anderson    Austin    Barnes
        Bernskoetter    Black    Brown    Burns    Colona
        Conway 10    Conway 104    Cookson    Cross    Curtis
        Davis    Diehl    Dohrmann    Elmer    English
        Englund    Entlicher    Fitzwater    Flanagan    Fraker
        Frame    Franklin    Gannon    Gatschenberger    Gosen
        Guernsey    Haefner    Hampton    Hansen    Harris
        Hicks    Higdon    Hummel    Hurst    Justus
        Houghton    Hubbard    Hummel    Korman    Kratky
        Kelley 127    Kelly 45    Kolkmeyer    Korman    Lichtenegger
        Lair    Lant    Lauer    Leara    Lichtenegger
        Love    Lynch    McCaherty    McCann Beatty    McDonald
        McGaugh    McKenna    McManus    Meredith    Messenger
        Miller    Mims    Molendorp    Montecillo    Morgan

NOES: 049

Anders    Black    Burns    Butler    Carpenter
        Colona    Conway 10    Curtis    Dunn    English
        Englund    Frame    Gardner    Harris    Hubbard
        Hummel    Kelly 45    Kirkton    Kratky    LaFaver
        Marshall    May    Mayfield    McCann Beatty    McDonald
        McKenna    McManus    McNeil    Meredith    Mims
        Mitten    Montecillo    Moon    Morgan    Nichols
        Otto    Pace    Peters    Pierson    Rizzo
        Roorda    Runions    Schieffer    Schupp    Smith
        Swearingen    Walton Gray    Webber    Wright

PRESENT: 000

ABSENT WITH LEAVE: 014

Conway 104    Cox    Ellington    Fitzwater    Funderburk
        Grisamore    Hodges    Kelley 127    Muntzel    Newman
        Norr    Schamhorst    Stream    Zerr

VACANCIES: 004

Sixty-eighth Day—Wednesday, May 14, 2014
On motion of Representative Hinson, **SS HJR 68** was truly agreed to and finally passed by the following vote:

**AYES:** 105

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</table>
Speaker Pro Tem Hoskins declared the bill passed.

**BILLS CARRYING REQUEST MESSAGES**

**SS SCS HB 1490, as amended**, relating to elementary and secondary education standards, was taken up by Representative Bahr.

Representative Bahr moved that the House grant further conference on **SS SCS HB 1490, as amended**, and that the conferees be allowed to exceed the differences in Section 161.855.

Which motion was adopted.

**HCS SB 656, as amended**, relating to firearms, was taken up by Representative Elmer.

Representative Elmer moved that the House refuse to recede from its position on **HCS SB 656, as amended**, and grant the Senate a conference.

Which motion was adopted.

**HCS SB 615, as amended**, relating to court costs, was taken up by Representative Austin.

Representative Austin moved that the House refuse to recede from its position on **HCS SB 615, as amended**, and grant the Senate a conference.

Which motion was adopted.
BILLS IN CONFERENCE

HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended, relating to elementary and secondary education, was taken up by Representative Stream.

Representative Stream moved that the House conferees on HCS SCS SBs 493, 485, 516, 534, 545, 595, 616 & 624, as amended, be allowed to exceed the differences in Sections 161.084, 167.826, and 167.828.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 095

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ABSENT WITH LEAVE: 016

Brown  Cox  Fitzpatrick  Funderburk  Grisamore
Haahr  Hinson  Hodges  Hough  McDonald
Muntzel  Newman  Norr  Pogue  Rowden
Torpey

VACANCIES: 004

Representative Stream again moved that the House conferees on HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended, be allowed to exceed the differences in Sections 161.084, 167.826, and 167.828.

Which motion was adopted.

Speaker Jones resumed the Chair.

APPOINTMENT OF CONFERENCE COMMITTEES

The Speaker appointed the following Conference Committees to act with like committees from the Senate on the following bills:

HCS SB 615: Representatives Austin, Cornejo and Colona
HCS SB 656: Representatives Elmer, Jones (50) and Butler

RE-APPOINTMENT OF CONFERENCE COMMITTEE

The Speaker re-appointed the following Conference Committee to act with a like committee from the Senate on the following bill:

SS SCS HB 1490: Representatives Bahr, Diehl and Montecillo

Speaker Pro Tem Hoskins resumed the Chair.

THIRD READING OF SENATE BILLS

HCS SB 506, relating to agriculture, was taken up by Representative Guernsey.

HCS SB 506 was laid over.

COMMITTEE REPORT

Committee on Fiscal Review, Chairman Flanigan reporting:

Mr. Speaker: Your Committee on Fiscal Review, to which was referred HCS SB 506, begs leave to report it has examined the same and recommends that it Do Pass.
THIRD READING OF SENATE BILLS

HCS SB 506, relating to agriculture, was again taken up by Representative Guernsey.

Representative Houghton offered House Amendment No. 1.

_House Amendment No. 1_

AMEND House Committee Substitute for Senate Bill No. 506, Pages 5-6, Section 192.300, Lines 1-41, by deleting all of said section and lines from the bill; and

Further amend said bill, Page 14, Section 267.169, Lines 1-12, by deleting all of said section and lines from the bill; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Houghton, House Amendment No. 1 was adopted.

Representative Korman offered House Amendment No. 2.

_House Amendment No. 2_

AMEND House Committee Substitute for Senate Bill No. 506, Page 22, Section 304.180, Lines 113-133, by deleting all of said lines and inserting in lieu thereof the following:

"9. [Notwithstanding subsection 3 of this section or any other provision of law to the contrary, the total gross weight of any vehicle or combination of vehicles hauling livestock may be as much as, but shall not exceed, eighty-five thousand five hundred pounds while operating on U.S. Highway 36 from St. Joseph to U.S. Highway 63, on U.S. Highway 65 from the Iowa state line to U.S. Highway 36, and on U.S. Highway 63 from the Iowa state line to U.S. Highway 36, and on U.S. Highway 63 to U.S. Highway 36 to Missouri Route 17. The provisions of this subsection shall not apply to vehicles operated on the Dwight D. Eisenhower System of Interstate and Defense Highways.

10.] Notwithstanding any provision of this section or any other law to the contrary, the"; and

Further amend said bill, page, and section, Line 135, by inserting after the word "facility" the words "or livestock"; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Korman, House Amendment No. 2 was adopted.

Representative Richardson offered House Amendment No. 3.

_House Amendment No. 3_

AMEND House Committee Substitute for Senate Bill No. 506, Page 27, Section 537.325, Line 125, by inserting after all of said section and line the following:

"Section 1. 1. No later than January 1, 2015, the department of agriculture shall propose a rule regarding renewable fuels and the labeling of motor fuel pumps.

2. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the
provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Richardson, **House Amendment No. 3** was adopted.

Representative Dugger offered **House Amendment No. 4**.

**House Amendment No. 4**

AMEND House Committee Substitute for Senate Bill No. 506, Page 23, Section 340.396, Line 6, by inserting after all of said section and line the following:

"442.571. 1. Except as provided in sections 442.586 and 442.591, no alien or foreign business shall acquire by grant, purchase, devise, descent or otherwise agricultural land in this state if the total aggregate alien and foreign ownership of agricultural acreage in this state exceeds one percent of the total aggregate agricultural acreage in this state. [No such] A sale[,] or transfer[, or acquisition] of any agricultural land in this state shall [occur unless such sale, transfer, or acquisition is approved by] be submitted to the director of the department of agriculture for review in accordance with subsection 3 of this section only if there is no completed Internal Revenue Service Form W-9 signed by the purchaser. No person may hold agricultural land as an agent, trustee, or other fiduciary for an alien or foreign business in violation of sections 442.560 to 442.592, provided, however, that no security interest in such agricultural land shall be divested or invalidated by such violation.

2. Any alien or foreign business who acquires agricultural land in violation of sections 442.560 to 442.592 remains in violation of sections 442.560 to 442.592 for as long as he or she holds an interest in the land, provided, however, that no security interest in such agricultural land shall be divested or invalidated by such violation.

3. [All] Subject to the provisions of subsection 1 of this section, such proposed acquisitions by grant, purchase, devise, descent, or otherwise of agricultural land in this state shall be submitted to the department of agriculture to determine whether such acquisition of agricultural land is conveyed in accordance with the one percent restriction on the total aggregate alien and foreign ownership of agricultural land in this state. The department shall establish by rule the requirements for submission and approval of requests under this subsection.

4. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be invalid and void."; and

Further amend said bill, Page 27, Section 275.352, Line 6, by inserting after all of said section and line the following:

"Section B. Because immediate action is necessary to ensure the ability of citizens to obtain timely financing for the purchase of agricultural land, the repeal and reenactment of section 442.571 of section A of this act is deemed necessary for the immediate preservation of the public health, welfare, peace, and safety, and is hereby declared to be an emergency act within the meaning of the constitution, and the repeal and reenactment of section 442.571 of section A of this act shall be in full force and effect upon its passage and approval."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Dugger, **House Amendment No. 4** was adopted.
Representative Jones (50) moved the previous question.

Which motion was adopted by the following vote:

**AYES: 094**

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**PRESENT: 000**

**ABSENT WITH LEAVE: 017**

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**VACANCIES: 004**
On motion of Representative Guernsey, **HCS SB 506, as amended**, was adopted by the following vote:

**AYES: 107**

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**PRESENT: 001**

Schatz

**ABSENT WITH LEAVE: 006**

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**VACANCIES: 004**
On motion of Representative Guernsey, **HCS SB 506, as amended**, was read the third time and passed by the following vote:

| AYES: 105 |
|---|---|---|---|---|
| Allen  | Anders  | Anderson  | Austin  | Bahr  |
| Berry  | Brown  | Burlison  | Burns  | Butler  |
| Cierpiot  | Colona  | Conway 10  | Conway 104  | Cookson  |
| Cornejo  | Crawford  | Curtis  | Curtman  | Davis  |
| Diehl  | Dohrman  | Dugger  | Ellington  | Elmer  |
| English  | Englund  | Entlicher  | Fitzpatrick  | Fitzwater  |
| Flanigan  | Fraker  | Franklin  | Gannon  | Gardner  |
| Gatschenberger  | Gosen  | Guernsey  | Haahr  | Haefner  |
| Hampton  | Hansen  | Hicks  | Hoskins  | Houghton  |
| Hubbard  | Hurst  | Johnson  | Jones 50  | Justus  |
| Keeney  | Kelley 127  | Koenig  | Kolkmeyer  | Korman  |
| Lair  | Lant  | Lear  | Lichtenegger  | Love  |
| Lynch  | Mayfield  | McDonald  | McGaugh  | Messenger  |
| Miller  | Mims  | Molendorp  | Moon  | Morris  |
| Muntzel  | Neth  | Norr  | Pace  | Peters  |
| Pfautsch  | Phillips  | Pike  | Redmon  | Reiboldt  |
| Remole  | Rhoads  | Richardson  | Riddle  | Ross  |
| Rowden  | Rowland  | Schieffer  | Shull  | Shumake  |
| Smith  | Solon  | Sommer  | Spencer  | Stream  |
| Swan  | Thomson  | Torpey  | Walker  | Walton Gray  |
| Wieland  | Wood  | Wright  | Zerr  | Mr. Speaker  |

| NOES: 043 |
|---|---|---|---|
| Barnes  | Bernskoetter  | Black  | Brattin  | Carpenter  |
| Cross  | Dunn  | Engler  | Frame  | Frederick  |
| Harris  | Higdon  | Hought  | Kelly 45  | Kirkton  |
| Kratky  | LaFaver  | Lauer  | Marshall  | May  |
| McCaherty  | McCann Beatty  | McKenna  | McManus  | McNeil  |
| Meredith  | Mitten  | Montecillo  | Morgan  | Neely  |
| Nichols  | Otto  | Parkinson  | Pogue  | Rehder  |
| Rizzo  | Runions  | Schieber  | Schupp  | Swearingen  |
| Webber  | White  | Wilson  |  |  |

| PRESENT: 002 |
|---|---|
| Hinson  | Schatz  |

| ABSENT WITH LEAVE: 009 |
|---|---|---|---|
| Cox  | Funderburk  | Grisamore  | Hodges  | Hummel  |
| Newman  | Pierson  | Roorda  | Scharnhorst  |

| VACANCIES: 004 |

Speaker Pro Tem Hoskins declared the bill passed.
The emergency clause was defeated by the following vote:

**AYES: 096**

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**PRESENT: 000**

**ABSENT WITH LEAVE: 008**

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**VACANCIES: 004**

Representative Keeney assumed the Chair.
HCS SB 992, relating to the Board of Public Buildings, was taken up by Representative Diehl.

On motion of Representative Diehl, HCS SB 992 was adopted.

On motion of Representative Diehl, HCS SB 992 was read the third time and passed by the following vote:

AYES: 114

Allen Anders Anderson Austin Bahr
Barnes Bernskoetter Berry Black Brattin
Brown Burlison Cierpiot Conway 10 Conway 104
Cookson Cornejo Crawford Cross Curtis
Davis Diehl Dohrman Dugger Elmer
Engler English Englund Entlicher Fitzpatrick
Flanigan Fraker Frederick Gannon Gatschenberger
Gosen Guernsey Haahr Haefner Hampton
Hansen Harris Hicks Higdon Hinson
Hoskins Hough Houghton Hubbard Hurst
Johnson Jones 50 Justus Keeney Kelley 127
Kelly 45 Koenig Kolkmeyer Korman Kratky
Lair Lant Lauer Leara Lichtenegger
Lynch May McCaherty McDonald McGaugh
Mesenger Miller Molendorp Moon Morris
Muntzel Neely Neth Nichols Parkinson
Peters Pfautsch Phillips Pike Pogue
Richardson Rehder Reiboldt Remole Rhoads
Richardson Riddle Ross Rowden Rowland
Scharnhorst Schatz Schieffer Shull Shumake
Solon Sommen Spencer Stream Swan
Thomson Torpey Walker White Wieland
Wilson Wood Zerr Mr. Speaker

NOES: 036

Burns Butler Carpenter Colona Dunn
Ellington Frame Gardner Hummel Kirkton
LaFaver Marshall Mayfield McCann Beatty McKenna
McManus McNeil Meredith Mims Mitten
Montecillo Morgan Norr Otto Pace
Pieron Rizzo Roorda Runions Schieber
Schupp Smith Swearingen Walton Gray Webber
Wright

PRESENT: 000

ABSENT WITH LEAVE: 009

Cox Curtman Fitzwater Franklin Funderburk
Grisamore Hodges Love Newman

VACANCIES: 004

Representative Keeney declared the bill passed.
HCS SB 727, relating to farmers’ markets, was taken up by Representative Johnson.

Representative Johnson offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Bill No. 727, Page 2, Section 208.018, Lines 1-17, by deleting all of said lines and inserting in lieu thereof the following:

"208.018. 1. Subject to federal approval, the department of social services shall establish a pilot program for the purpose of providing Supplemental Nutrition Assistance Program (SNAP) participants with access and the ability to afford fresh food when purchasing fresh food at farmers' markets. The pilot program shall be established in at least one rural area and one urban area. Under the pilot program, such participants shall be able to:

1) Purchase fresh fruit, vegetables, meat, fish, poultry, eggs, and honey with SNAP benefits with an electronic benefit transfer (EBT) card; and

2) Receive a dollar-for-dollar match for every SNAP dollar spent at a participating farmers’ market or vending urban agricultural zone as defined in section 262.900 in an amount up to ten dollars per week whenever the participant purchases fresh food with an EBT card.

2. For purposes of this section, the term “farmers’ market” shall mean a market with multiple stalls at which farmer-producers sell agricultural products, particularly fresh fruit and vegetables, directly to the general public at a central or fixed location.

3. Purchases of approved fresh food by SNAP participants under this section shall automatically trigger matching funds reimbursement into the central farmers' market vendor accounts by the department."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Johnson, House Amendment No. 1 was adopted.

Representative Wieland offered House Amendment No. 2.

House Amendment No. 2

AMEND House Committee Substitute for Senate Bill No. 727, Page 3, Section 208.018, Line 38, by adding after all of said section and line the following:

"208.247. 1. Pursuant to the option granted the state by 21 U.S.C. Section 862a(d), an individual who has pled guilty or nolo contendre to or is found guilty under federal or state law of a felony involving possession or use of a controlled substance shall be exempt from the prohibition contained in 21 U.S.C. Section 862a(a) against eligibility for food stamp program benefits for such convictions, if such person, as determined by the department:

1) Meets one of the following criteria:

(a) Is currently successfully participating in a substance abuse treatment program approved by the division of alcohol and drug abuse within the department of mental health; or

(b) Is currently accepted for treatment in and participating in a substance abuse treatment program approved by the division of alcohol and drug abuse, but is subject to a waiting list to receive available treatment, and the individual remains enrolled in the treatment program and enters the treatment program at the first available opportunity; or

(c) Has satisfactorily completed a substance abuse treatment program approved by the division of alcohol and drug abuse; or

(d) Is determined by a division of alcohol and drug abuse certified treatment provider not to need substance abuse treatment; and
(2) Is successfully complying with, or has already complied with, all obligations imposed by the court, the division of alcohol and drug abuse, and the division of probation and parole; and

(3) Does not plead guilty or nolo contendere to or is not found guilty of an additional controlled substance misdemeanor or felony offense after release from custody or, if not committed to custody, such person does not plead guilty or nolo contendere to or is not found guilty of an additional controlled substance misdemeanor or felony offense, within one year after the date of conviction. Such a plea or conviction within the first year after conviction shall immediately disqualify the person for the exemption; and

(4) Has demonstrated sobriety through voluntary urinalysis testing paid for by the participant.

2. Eligibility based upon the factors in subsection 1 of this section shall be based upon documentary or other evidence satisfactory to the department of social services, and the applicant shall meet all other factors for program eligibility.

3. The department of social services, in consultation with the division of alcohol and drug abuse, shall promulgate rules to carry out the provisions of this section including specifying criteria for determining active participation in and completion of a substance abuse treatment program.

4. The exemption under this section shall not apply to an individual who has pled guilty to or is found guilty of two subsequent felony offenses involving possession or use of a controlled substance after the date of the first controlled substance felony conviction.”; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Wieland, **House Amendment No. 2** was adopted.

On motion of Representative Johnson, **HCS SB 727, as amended**, was adopted.

On motion of Representative Johnson, **HCS SB 727, as amended**, was read the third time and passed by the following vote:

**AYES: 129**

Allen Anders Anderson Austin Bahr
Barnes Bernskoetter Berry Black Brattin
Brown Burns Butler Carpenter Cornejo Crawford
Colona Conway 10 Cookson Dohrman Dunn
Curtis Davis Diehl Engler Entlicher
Elmer Engler English Enlund Gardner
Fitzpatrick Flanigan Franklin Gannon Hampton
Gatschenberger Gosen Guernsey Haefner Houghton
Hansen Harris Hicks Hoskins Houghton
Hubbard Hummel Hurst Johnson Justus
Keeney Kelley 127 Kelly 45 Kirkton Koenig
Kolkmeyer Korman Kratky LaFaver Lair
Lant Lauer Lichtenegger Love Lynch
May Mayfield McCaherty McCann Beatty McDonald
McGaugh McKenna McManus McNeil Meredith
Miller Mims Mitten Molendorp Montecillo
Morgan Morris Muntzel Neely Neth
Nichols Norr Otto Pace Peters
Pfautsch Phillips Pierson Pike Redmon
Rehder Reiboldt Remole Rhoads Richardson
Riddle Rizzo Roorda Rowden Rowland
Runions Schamhorst Schatz Schieffer Schupp
Shull Shumake Smith Solon Sommer
Spencer Stream Swan Swearingen Thomson
Walker Walton Gray Webber White Wieland
Wilson Wood Wright Zerr
Representative Keeney declared the bill passed.

MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on **SS HCS HB 1685**.

Senators: Schaaf, Wasson, Sater, LeVota, and Holsman

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on **HCS SB 656, as amended**.

Senators: Kraus, Munzlinger, Dixon, Keaveny, and Holsman

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on **HCS SB 615, as amended**.

Senators: Dixon, Schaefer, Schmitt, Justus, and Keaveny

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and adopted **HCS for SB 504, as amended**, and has taken up and passed **HCS SB 504, as amended**.
Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and adopted House Amendment No. 1 and House Amendment No. 2 to SS SB 745 and has taken up and passed SS SB 745, as amended.

THIRD READING OF SENATE BILLS

SB 500, relating to no-contest clauses, was taken up by Representative Kelly (45).

Representative Austin offered House Amendment No. 1.

House Amendment No. 1

AMEND Senate Bill No. 500, Page 1, in the title, Line 3, by deleting the words "no-contest clauses" and inserting in lieu thereof the words "trust instruments"; and

Further amend said bill and said page, Section A, Line 3, by inserting immediately after said line the following:

"456.950. 1. As used in this section, "qualified spousal trust" means a trust:
(1) The settlors of which are husband and wife at the time of the creation of the trust; and
(2) The terms of which provide that during the joint lives of the settlors all property or interests in property transferred to, or held by, the trustee are:
   (a) Held and administered in one trust for the benefit of both settlors, revocable by either or both settlors acting together while either or both are alive, and each settlor having the right to receive distributions of income or principal, whether mandatory or within the discretion of the trustee, from the entire trust for the joint lives of the settlors and for the survivor's life; or
   (b) Held and administered in two separate shares of one trust for the benefit of each of the settlors, with the trust revocable by each settlor with respect to that settlor's separate share of that trust without the participation or consent of the other settlor, and each settlor having the right to receive distributions of income or principal, whether mandatory or within the discretion of the trustee, from that settlor's separate share for that settlor's life; or
   (c) Held and administered under the terms and conditions contained in paragraphs (a) and (b) of this subdivision.
2. A qualified spousal trust may contain any other trust terms that are not inconsistent with the provisions of this section.
3. Any property or interests in property [held as tenants by the entirety by a husband and wife] that is at any time transferred to the trustee of a qualified spousal trust of which the husband and wife are the settlors, shall thereafter be [held and] administered as provided by the trust terms in accordance with paragraph (a), (b), or (c) of subdivision (2) of subsection 1 of this section[, and all such]. All trust property and interests in property that is deemed for purposes of this section to be held as tenants by the entirety, including the proceeds thereof, the income thereon, and any property into which such property, proceeds, or income may be converted, shall [thereafter] have the same immunity from the claims of the separate creditors of the settlors as would have existed if the settlors had continued to hold that property as husband and wife as tenants by the entirety. Property or interest in property held by a husband and wife as tenants by the entirety or as joint tenants or other form of joint ownership with right of survivorship shall be conclusively deemed for purposes of this section to be held as tenants by the entirety upon its transfer to the qualified spousal trust. All such transfers shall retain said immunity, so long as:
   (1) Both settlers are alive and remain married; and
   (2) The property, proceeds, or income continue to be held in trust by the trustee of the qualified spousal trust.
4. Property or interests in property held by a husband and wife that is not held as tenants by the entirety or deemed held as tenants by the entirety for purposes of this section and is transferred to a qualified spousal trust shall be held as directed in the qualified spousal trust's governing instrument or in the instrument of transfer and the rights of any claimant to any interest in that property shall not be affected by this section.
5. Upon the death of each settlor, all property and interests in property held by the trustee of the qualified spousal trust shall be distributed as directed by the then current terms of the governing instrument of such trust. Upon
the death of the first settlor to die, if immediately prior to death the predeceased settlor's interest in the qualified spousal trust was then held in such settlor's separate share, the property or interests in property in such settlor's separate share may pass into an irrevocable trust for the benefit of the surviving settlor upon such terms as the governing instrument shall direct, including without limitation a spendthrift provision as provided in section 456.5-502.

6. No transfer by a husband and wife as settlors to a qualified spousal trust shall affect or change either settlor's marital property rights to the transferred property or interest therein immediately prior to such transfer in the event of dissolution of marriage of the spouses, unless both spouses otherwise expressly agree in writing.

7. This section shall apply to all trusts which fulfill the criteria set forth in this section for a qualified spousal trust regardless of whether such trust was created before or after August 28, 2011.

456.2-205. 1. Subject to the exception in subsection 2 of this section, a provision in a trust instrument requiring the mediation or arbitration of disputes between or among the beneficiaries, a fiduciary, a person granted nonfiduciary powers under the trust instrument, or any combination of such persons is enforceable.

2. A provision in a trust instrument requiring the mediation or arbitration of disputes relating to the validity of a trust is not enforceable unless all interested persons with regard to the dispute consent to the mediation or arbitration of the dispute.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Austin, House Amendment No. 1 was adopted.

On motion of Representative Kelly (45), SB 500, as amended, was read the third time and passed by the following vote:

AYES: 139

Allen    Anders    Anderson    Austin    Bahr
Barnes   Bernskoetter Berry    Black    Brattin
Brown    Burlison Burns    Butler    Cierpiot
Colona   Conway 10 Conway 104 Cookson    Cornejo
Crawford Cross    Curtis    Curtman    Davis
Diehl    Dohrman    Dugger    Dunn    Ellington
Engler    English    Englund    Entlicher    Fitzpatrick
Fitzwater Flanigan    Fraker    Frame    Franklin
Frederick Gannon    Gardner    Gatschenberger    Gosen
Haahr    Haefner    Hampton    Hansen    Harris
Hicks    Hoskins    Houghton    Hubbard    Hummel
Hurst    Johnson    Justus    Keeney    Kelley 127
Kelly 45 Kirkton    Koenig    Kolkmeyer    Korman
Kratky    LaFaver    Lair    Lant    Lauer
Leara    Lichtenegger    Love    Lynch    May
Mayfield McCaherty    McCann Beatty    McDonald    McGaugh
McKenna    McManus    McNeil    Meredith    Messenger
Miller    Mims    Mitten    Molendorp    Montecillo
Moon    Morgan    Morris    Muntzel    Nef
Norr    Otto    Pace    Peters    Pfautsch
Phillips  Pierson    Pike    Rehder    Reiboldt
Remole    Rhoads    Richardson    Riddle    Rizzo
Roorda    Ross    Rowden    Rowland    Runions
Scharnhorst Schatz    Schieber    Schieffer    Schupp
Shull    Shumake    Smith    Solon    Sommer
Spencer    Stream    Swan    Swearingen    Thomson
Walker    Walton Gray    Webber    White    Wieland
Wilson    Wood    Wright    Mr. Speaker
Representative Keeney declared the bill passed.

MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate conferees on HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended, are allowed to exceed the differences on Sections 161.084, 167.826 and 167.828.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed SS SCS HCS HB 1231, entitled:


With Senate Amendment No. 1, Senate Amendment No. 2, Senate Amendment No. 3, Senate Amendment No. 4, Senate Amendment No. 5, Senate Amendment No. 6 and Senate Amendment No. 7.

Senate Amendment No. 1

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 20, Section 105.711, Line 11 of said page, by inserting after all of said line the following:

"211.442. As used in sections 211.442 to 211.487, unless the context clearly indicates otherwise, the following terms mean:

(1) “Child”, an individual under eighteen years of age;
(2) “Minor”, any person who has not attained the age of eighteen years;
(3) “Parent”, a biological parent or parents of a child, as well as, the husband of a natural mother at the time the child was conceived, or a parent or parents of a child by adoption, including both the mother and the putative father of a child. The putative father of a child shall have no legal relationship unless he, prior to the entry of a decree under sections 211.442 to 211.487, has acknowledged the child as his own by affirmatively asserting his paternity];

(a) A biological parent or parents who have a parent and child relationship as defined under subdivision (4) of section 210.817 and section 210.819;
(b) The presumed father of a child under subdivisions (1), (2) and (3) of section 210.822;"
(c) The acknowledged father under section 210.823;
(d) The adjudicated parent under sections 210.817 to 210.853;
(e) A parent or parents of a child by adoption; or
(f) The putative father of a child who has, before the birth or within fifteen days of the birth of the child:
   a. Established a relationship with the child under section 453.045; and
   b. Filed a parentage action under sections 210.817 to 210.853 and properly served notice upon the mother.

211.444. 1. The juvenile court may, upon petition of the juvenile officer, the court appointed guardian ad litem, or a child-placing agency licensed under sections 210.481 to 210.536 in conjunction with a placement with such agency under subsection 6 of section 453.010, or the court before which a petition for adoption has been filed pursuant to the provisions of chapter 453, terminate the rights of a parent or approve the consent to adoption or waiver of consent to adoption, by a parent or of a named father to a child, including a child who is a ward of the court, if the court finds that such termination or consent to adoption or waiver of consent to adoption is in the best interests of the child and the parent has consented in writing to the termination of his or her parental rights or consented or waived consent to the adoption.

2. The written consent required by subsection 1 of this section may be executed before or after the institution of the proceedings and shall be acknowledged before a notary public. In lieu of such acknowledgment, the signature of the person giving the written consent shall be witnessed by at least two adult persons who are present at the execution whose signatures and addresses shall be plainly written thereon and who determine and certify that the consent is knowingly and freely given. The two adult witnesses shall not be the prospective parents. The notary public or witnesses shall verify the identity of the party signing the consent.

3. The written consent required by subsection 1 of this section shall be valid and effective only after the child is at least forty-eight hours old and if it complies with the other requirements of section 453.030.; and

Further amend said bill, Page 27, Section 452.556, Line 4 of said page, by inserting after all of said line the following:

"453.010. 1. Any person desiring to adopt another person as his or her child shall petition the juvenile division of the Missouri circuit court of the county in which:
   (1) The person seeking to adopt resides or within one hundred and fifty miles of such county;
   (2) The child sought to be adopted was born;
   (3) The child is located at the time of the filing of the petition; [or]
   (4) Either birth person resides or within one hundred and fifty miles of such county; or

(5) The placing agency or intermediary has offices.

2. A petition to adopt shall not be dismissed or denied on the grounds that the petitioner is not domiciled or does not reside in any of the venues set forth in subdivision (2), (3) or (4) of subsection 1 of this section.

3. If the person sought to be adopted is a child who is under the prior and continuing jurisdiction of a court pursuant to the provision of chapter 211, any person desiring to adopt such person as his or her child shall petition the juvenile division of the circuit court which has jurisdiction over the child for permission to adopt such person as his or her child. Upon receipt of a motion from the petitioner and consent of the receiving court, the juvenile division of the circuit court which has jurisdiction over the child may transfer jurisdiction to the juvenile division of a circuit court within any of the alternative venues set forth in subsection 1 of this section.

4. If the petitioner has a spouse living and competent to join in the petition, such spouse may join therein, and in such case the adoption shall be by them jointly. If such a spouse does not join the petition the court in its discretion may, after a hearing, order such joinder, and if such order is not complied with may dismiss the petition.

5. Upon receipt of a properly filed petition, a court, as defined in this section, shall hear such petition in a timely fashion. A court or any child-placing agency shall not deny or delay the placement of a child for adoption when an approved family is available, regardless of the approved family's residence or domicile. The court shall expedite the placement of a child for adoption pursuant to subsection 3 of this section.

6. A licensed child-placing agency may file a petition for transfer of custody if a birth parent consents in writing by power of attorney for placement of a minor child, a consent to adoption, or any other document which evidences a desire to place the child with the licensed child-placing agency for the purposes of transfer of custody of the child to the licensed child-placing agency. The written consent obtained from the birth parent shall strictly comply with section 453.030.
1900  Journal of the House

453.040. The consent to the adoption of a child is not required of:
(1) A parent whose rights with reference to the child have been terminated pursuant to law, including section
211.444 or section 211.447 or other similar laws in other states;
(2) A parent of a child who has legally consented to a future adoption of the child;
(3) A parent whose identity is unknown and cannot be ascertained at the time of the filing of the petition;
(4) A man who has not been established to be the father and who is not presumed by law to be the father, and
who, after the conception of the child, executes a verified statement denying paternity and disclaiming any interest
in the child and acknowledging that this statement is irrevocable when executed and follows the consent as set forth in
section 453.030;
(5) A parent or other person who has not executed a consent and who, after proper service of process, fails to
file an answer or make an appearance in a proceeding for adoption or for termination of parental rights at the time such
cause is heard;
(6) A parent who has a mental condition which is shown by competent evidence either to be permanent or such
that there is no reasonable likelihood that the condition can be reversed and which renders the parent unable to knowingly
provide the child the necessary care, custody and control;
(7) A parent who has for a period of at least six months, for a child one year of age or older, or at least sixty
days, for a child under one year of age, immediately prior to the filing of the petition for adoption, willfully abandoned
the child or, for a period of at least six months immediately prior to the filing of the petition for adoption, willfully,
substantially and continuously neglected to provide him with necessary care and protection;
(8) A man who is on notice that he may be the biological father of a child under section 453.061 but who
has not developed a consistent and substantial relationship with his child under section 453.045 and whose consent
is not required under section 453.030 or not required or is waived under subsection 7 of section 192.016;
(9) A man who is on notice that he may be the biological father of a child under section 453.061 but who
has not developed a consistent and substantial relationship with his child under section 453.045 and whose consent
is not required under section 453.030 or not required or is waived under subsection 7 of section 192.016;
(9) A parent whose rights to the child may be terminated for any of the grounds set forth in section 211.447
and whose rights have been terminated after hearing and proof of such grounds as required by sections 211.442 to
211.487. Such petition for termination may be filed as a count in an adoption petition.

453.045. 1. A man whose consent to adoption is waived or not required under sections 192.016, 453.030,
or 453.040 nonetheless preserves his rights to intervene in an action for termination of parental rights or in an
action for adoption or to file a paternity action for a child after a petition for either adoption or termination of
parental rights has been filed with the court, where he can prove that he has previously developed a consistent
and substantial relationship with the child commensurate with his means and abilities, including but not limited
to, by providing his share of consistent prenatal financial support and consistent prenatal and natal medical care
for the mother and baby, consistent child support payments commensurate with his ability to pay, consistent
contact and visitation with the child, and assistance with educational and medical care of the child, unless he can
prove that he was actively thwarted from doing so by the mother, or other actual or legal custodian.

2. Failure to develop such relationship pursuant to subsection 1 of this section waives such man’s rights
to intervene in an action for termination of parental rights or in an action for adoption or to file a paternity action
for a child after a petition for either adoption or termination of parental rights has been filed with the court.

453.080. 1. The court shall conduct a hearing to determine whether the adoption shall be finalized. Out of
state adoptive petitioners may appear by their attorney and by video conference rather than in person, as long
as the child also appears by video conference or in person. During such hearing, the court shall ascertain whether:
(1) The person sought to be adopted, if a child, has been in the lawful and actual custody of the petitioner for
a period of at least six months prior to entry of the adoption decree; except that the six-month period may be waived if
the person sought to be adopted is a child who is under the prior and continuing jurisdiction of a court pursuant to chapter
211 and the person desiring to adopt the child is the child’s current foster parent. “Lawful and actual custody” shall
include a transfer of custody pursuant to the laws of this state, another state, a territory of the United States, or another
country;
(2) The court has received and reviewed a postplacement assessment on the monthly contacts with the adoptive
family pursuant to section 453.077, except for good cause shown in the case of a child adopted from a foreign country;
(3) The court has received and reviewed an updated financial affidavit;
(4) The court has received the recommendations of the guardian ad litem and has received and reviewed the
recommendations of the person placing the child, the person making the assessment and the person making the
postplacement assessment;
(5) There is compliance with the uniform child custody jurisdiction act, sections 452.440 to 452.550;
Sixty-eighth Day–Wednesday, May 14, 2014  1901

(6) There is compliance with the Indian Child Welfare Act, if applicable;
[(7)] (6) There is compliance with the Interstate Compact on the Placement of Children pursuant to section
210.620; and
[(8)] (7) It is fit and proper that such adoption should be made.
2. If a petition for adoption has been filed pursuant to section 453.010 and a transfer of custody has occurred
pursuant to section 453.110, the court may authorize the filing for finalization in another state if the adoptive parents are
domiciled in that state.
3. If the court determines the adoption should be finalized, a [decree] judgment shall be issued setting forth
the facts and ordering that from the date of the [decree] judgment the adoptee shall be for all legal intents and purposes
the child of the petitioner or petitioners. The court may decree that the name of the person sought to be adopted be
changed, according to the prayer of the petition.
4. Before the completion of an adoption, the exchange of information among the parties shall be at the
discretion of the parties. Prospective adoptive parents and parents of a prospective adoptee may enter into a post
adoption contact agreement to allow communication, exchange of photographs or contact after the adoption
between the parents, siblings, or other relatives of the adoptee and the adoptee and adoptive parents. The court
shall not order any party to enter into a post adoption contact agreement. Upon completion of an adoption, further
contact among the parties shall be at the discretion of the adoptive parents, and such adoptive parents may exercise
their discretion to enter into a post adoption contact agreement with the former parents of an adoptee to allow
contact between a former parent or sibling of the adoptee and the adoptee or adoptive parents. The agreement
shall be in writing and be approved by the court at or before the finalization of the adoption. The agreement shall
include:
(1) An acknowledgment by the former parents that the adoption is irrevocable, even if the adoptive
parents do not abide by the post adoption contact agreement; and
(2) An acknowledgment by the adoptive parents that the agreement grants the former parents the right
to seek to enforce the post adoption privileges set forth in the agreement.

The court shall not approve an agreement unless the agreement is approved by the adoptive parents with whom
the agreement is being made. The court shall enforce a written agreement made in accordance with this
subsection unless enforcement is not within the best interests of the adoptee. The court shall not have jurisdiction
to deny continuing contact between the adopted person and the birth parent, or an adoptive parent and a birth parent.
Additionally, the court shall not have jurisdiction to deny an exchange of identifying information between an adoptive
parent and a birth parent.
5. For purposes of this section, “post adoption contact agreement”, shall mean a written agreement
approved by the court pursuant to the provisions listed under subsection 4 of this section.

453.110. 1. No person, agency, organization or institution shall surrender custody of a minor child, or transfer
the custody of such a child to another, and no person, agency, organization or institution shall take possession or charge
of a minor child so transferred, without first having filed a petition before the circuit court sitting as a juvenile court of
the county where the child may be, praying that such surrender or transfer may be made, and having obtained such an
order from such court approving or ordering transfer of custody. Where filing such petition is impractical prior to
lawful placement for care pursuant to subsection 5 of this section, such petition shall be filed within twenty days
of execution of proper power of attorney or when the Interstate Compact for Placement of Children approval
under section 210.620 is obtained, whichever is later.
2. If any filing is made late or such surrender or transfer is made without first obtaining such an order or
compliance with subsection 5 of this section, such court shall, on petition of any public official or interested person,
agency, organization or institution, order an investigation and report as described in section 453.070 to be completed
by the division of family services and shall make such order as to the custody of such child in the best interest of such
child.
3. Any person violating the terms of this section shall be guilty of a class D felony.
4. The investigation required by subsection 2 of this section shall be initiated by the children's division [of
family services] within forty-eight hours of the filing of the court order requesting the investigation and report and shall
be completed within thirty days. The court shall order the person having custody in violation of the provisions of this
section to pay the costs of the investigation and report.
5. This section shall not be construed to prohibit any parent, agency, organization or institution from placing
a child with another individual for care under proper power of attorney if the right to supervise the care of the child
and to resume custody thereof is retained, or from placing a child with a licensed foster home within the state under proper power of attorney through a child-placing agency licensed by this state as part of a preadoption placement.

6. After the filing of a petition for the transfer of custody for the purpose of adoption, the court may enter an order of transfer of custody if the court finds all of the following:
   (1) A family assessment has been made as required in section 453.070 and has been reviewed by the court;
   (2) A recommendation has been made by the guardian ad litem;
   (3) A petition for transfer of custody for adoption has been properly filed or an order terminating parental rights has been properly filed;
   (4) The financial affidavit has been filed as required under section 453.075;
   (5) The written report regarding the child who is the subject of the petition containing the information has been submitted as required by section 453.026;
   (6) Compliance with the Indian Child Welfare Act, if applicable; [and]
   (7) Compliance with the Interstate Compact on the Placement of Children pursuant to section 210.620; and
   (8) The parties have notified the court of any persons not a party to the adoption who have physical custody or claims to have rights of legal custody, physical custody, or visitation rights with respect to minor child; of any other legal proceedings concerning the minor child; and have affirmed a continuing duty to inform the court of any proceeding in this or any other state that could affect the current proceeding.

7. A hearing on the transfer of custody for the purpose of adoption is not required if:
   (1) The conditions set forth in subsection 6 of this section are met;
   (2) The parties agree and the court grants leave; and
   (3) Parental rights have been terminated pursuant to section 211.444 or 211.447.

Further amend the title and enacting clause accordingly.

Senator Amendment No. 2

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 6, Section 56.807, Line 23 of said page, by inserting immediately after "5." the following: "(1)"; and

Further amend Line 26 of said page, by striking "(1)" and inserting in lieu thereof the following: "(a)"; and

Further amend Line 27 of said page, by striking "subdivision (3)" and inserting in lieu thereof the following: "paragraph (c)"; and further amend said line, by striking "subsection" and inserting in lieu thereof the following: "subdivision"; and

Further amend said bill and section, Page 7, Line 1 of said page, by striking "(2)" and inserting in lieu thereof the following: "(b)"; and

Further amend Line 3 of said page, by striking "(3)" and inserting in lieu thereof the following: "(c)"; and

Further amend Line 8 of said page, by inserting immediately after said line the following:

"(2) Beginning August 28, 2015, the county contribution set forth in paragraphs (a) to (c) of subdivision (1) of this subsection shall be adjusted in accordance with the following schedule based upon the prosecuting attorneys and circuit attorneys' retirement system's annual actuarial valuation report. If the system's funding ratio is:
   (a) One hundred twenty percent or more, no monthly sum shall be transmitted;
   (b) More than one hundred ten percent but less than one hundred twenty percent, the monthly sum transmitted shall be reduced fifty percent;
   (c) At least ninety percent and up to and including one hundred ten percent, the monthly sum transmitted shall remain the same;
   (d) At least eighty percent and less than ninety percent, the monthly sum transmitted shall be increased fifty percent; and
   (e) Less than eighty percent, the monthly sum transmitted shall be increased one hundred percent.".
Sixty-eighth Day—Wednesday, May 14, 2014

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 56, Section 650.120, Lines 24-25 of said page, by striking all of the underlined language from both of said lines; and

Further amend said bill and section, Page 57, Line 23 of said page, by striking the opening bracket "[" and the closing bracket "]" from said line; and further amend Lines 25-27 of said page, by striking all of the underlined language from all of said lines.

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 23, Section 302.067, Line 13 of said page, by inserting immediately after said line the following:

"334.950.  1.  As used in this section, the following terms shall mean:
   (1)  "Child abuse medical resource centers", medical institutions affiliated with accredited children's hospitals or recognized institutions of higher education with accredited medical school programs that provide training, support, mentoring, and peer review to SAFE CARE providers in Missouri;
   (2)  "SAFE CARE provider", a physician, advanced practice nurse, or physician's assistant licensed in this state who provides medical diagnosis and treatment to children suspected of being victims of abuse and who receives:
      (a)  Missouri-based initial intensive training regarding child maltreatment from the SAFE CARE network;
      (b)  Ongoing update training on child maltreatment from the SAFE CARE network;
      (c)  Peer review and new provider mentoring regarding the forensic evaluation of children suspected of being victims of abuse from the SAFE CARE network;
   (3)  "Sexual assault forensic examination child abuse resource education network" or “SAFE CARE network”, a network of SAFE CARE providers and child abuse medical resource centers that collaborate to provide forensic evaluations, medical training, support, mentoring, and peer review for SAFE CARE providers for the medical evaluation of child abuse victims in this state to improve outcomes for children who are victims of or at risk for child maltreatment by enhancing the skills and role of the medical provider in a multidisciplinary context.

   2.  Child abuse medical resource centers may collaborate directly or through the use of technology with SAFE CARE providers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

   3.  SAFE CARE providers who are a part of the SAFE CARE network in Missouri may collaborate directly or through the use of technology with other SAFE CARE providers and child abuse medical resource centers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

   4.  The SAFE CARE network shall develop recommendations concerning medically based screening processes and forensic evidence collection for children who may be in need of an emergency examination following an alleged sexual assault. Such recommendations shall be provided to the SAFE CARE providers, child advocacy centers, hospitals and licensed practitioners that provide emergency examinations for children suspected of being victims of abuse.

   5.  **The department of public safety shall establish rules and make payments to SAFE CARE providers, out of appropriations made for that purpose, who provide forensic examinations of persons under eighteen years of age who are alleged victims of physical abuse.**

   6.  The department shall establish maximum reimbursement rates for charges submitted under this section, which shall reflect the reasonable cost of providing the forensic exam.

   7.  The department shall only reimburse providers for forensic evaluations and case reviews. The department shall not reimburse providers for medical procedures, facility fees, supplies, or laboratory/radiology tests.
8. In order for the department to provide reimbursement, the child shall be the subject of a child abuse investigation or reported to the children's division as a result of the examination.

9. A minor may consent to examination under this section. Such consent is not subject to disaffirmance because of the individual's status as a minor, and the consent of a parent or guardian of the minor is not required for such examination.

Further amend the title and enacting clause accordingly.

Senate Amendment No. 5

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 23, Section 302.067, Line 11 of said page, by striking the word "or"; and

Further amend Line 13 of said page, by inserting immediately after "permit" the following:

"; or

(4) The department may require an applicant to present such documents demonstrating lawful presence or citizenship specified in this section in order to correct any known or presumed error on the driver's license, nondriver's license, or instruction permit".

Senate Amendment No. 6

AMEND Senate Substitute for Senate Committee Substitute for House Committee Substitute for House Bill No. 1231, Page 8, Section 56.807, Line 18 of said page, by inserting after all of said line the following:

"57.095. Notwithstanding the provisions of section 537.600 to the contrary, sheriffs or any other law enforcement officers shall have immunity from any liability, civil or criminal, while conducting service of process at the direction of any court to the extent that the officers' actions do not violate clearly established statutory or constitutional rights of which a reasonable person would have known."; and

Further amend the title and enacting clause accordingly.

Senate Amendment No. 7

AMEND Senate Substitute for Senate Committee Substitute House Committee Substitute for House Bill No. 1231, Page 27, Section 452.556, Line 4 of said page, by inserting after all of said line the following:

"454.500. 1. At any time after the entry of an order pursuant to sections 454.470 and 454.475, the obligated parent, the division, or the person or agency having custody of the dependent child may file a motion for modification with the director. Such motion shall be in writing, shall set forth the reasons for modification, and shall state the address of the moving party. The motion shall be served by the moving party in the manner provided for in subsection 5 of section 454.465 upon the obligated parent or the party holding the support rights, as appropriate. In addition, if the support rights are held by the division of family services on behalf of the state, a true copy of the motion shall be mailed by the moving party by certified mail to the person having custody of the dependent child at the last known address of that person. A hearing on the motion shall then be provided in the same manner, and determinations shall be based on considerations set out in section 454.475, unless the party served fails to respond within thirty days, in which case the director may enter an order by default. If the child for whom the order applies is no longer in the custody of a person receiving public assistance or receiving support enforcement services from the department, or a division thereof, pursuant to section 454.425, the director may certify the matter for hearing to the circuit court in which the order was filed pursuant to section 454.490 in lieu of holding a hearing pursuant to section 454.475. If the director certifies the matter for hearing to the circuit court, service of the motion to modify shall be had in accordance with the provisions of subsection 5 of section 452.370. If the director does not certify the matter for hearing to the circuit court, service of the motion to modify shall be considered complete upon personal service, or on the date of mailing, if sent by certified mail."
For the purpose of 42 U.S.C. 666(a)(9)(C), the director shall be considered the appropriate agent to receive the notice of the motion to modify for the obligee or the obligor, but only in those instances in which the matter is not certified to circuit court for hearing, and only when service of the motion is attempted on the obligee or obligor by certified mail.

2. A motion for modification made pursuant to this section shall not stay the director from enforcing and collecting upon the existing order pending the modification proceeding unless so ordered by the court.

3. Only payments accruing subsequent to the service of the motion for modification upon all named parties to the motion may be modified. Modification may be granted only upon a showing of a change of circumstances so substantial and continuing as to make the terms unreasonable. In a proceeding for modification of any child support award, the director, in determining whether or not a substantial change in circumstances has occurred, shall consider all financial resources of both parties, including the extent to which the reasonable expenses of either party are, or should be, shared by a spouse or other person with whom he or she cohabits, and the earning capacity of a party who is not employed. If the application of the guidelines and criteria set forth in supreme court rule 88.01 to the financial circumstances of the parties would result in a change of child support from the existing amount by twenty percent or more, then a prima facie showing has been made of a change of circumstances so substantial and continuing as to make the present terms unreasonable.

4. If the division has entered an order under section 454.470 or 454.500, and an additional child or children not the subject of the order are born to the parties, the division may, following the filing of a motion to modify, service of process, and opportunity for a hearing pursuant to this section, modify the underlying child support order to include a single child support obligation for all children of the parties in conformity with the criteria set forth in supreme court rule 88.01.

5. The circuit court may, upon such terms as may be just, relieve a parent from an administrative order entered against that parent because of mistake, inadvertence, surprise, or excusable neglect.

[5.] 6. No order entered pursuant to section 454.476 shall be modifiable pursuant to this section, except that an order entered pursuant to section 454.476 shall be amended by the director to conform with any modification made by the court that entered the court order upon which the director based his or her order.

[6.] 7. When the party seeking modifications has met the burden of proof set forth in subsection 3 of this section, then the child support shall be determined in conformity with the criteria set forth in supreme court rule 88.01.

[7.] 8. The last four digits of the Social Security number of the parents shall be recorded on any order entered pursuant to this section. The full Social Security number of each party and each child shall be retained in the manner required by section 509.520."; and

Further amend the title and enacting clause accordingly.

In which the concurrence of the House is respectfully requested.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and adopted the Conference Committee Report #2 on HCS SB 693, as amended, and has taken up and passed CCS#2 HCS SB 693.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed SCS HCS 2141, entitled:

An act to repeal sections 142.803, 142.869, 323.010, 323.025, 323.050, 413.225, and 413.226, RSMo, and to enact in lieu thereof seven new sections relating to alternative motor fuel, with an effective date and an existing penalty provision.

With Senate Amendment No. 1.
AMEND Senate Committee Substitute for House Committee Substitute for House Bill No. 2141, Page 6, Section 142.869, Line 41, by inserting after all of said line the following:

“305.230. 1. The state highways and transportation commission shall administer an aeronautics program within this state. The commission shall encourage, foster and participate with the political subdivisions of this state in the promotion and development of aeronautics. The commission may provide financial assistance in the form of grants from funds appropriated for such purpose to any political subdivision or instrumentality of this state acting independently or jointly or to the owner or owners of any privately owned airport designated as a reliever by the Federal Aviation Administration for the planning, acquisition, construction, improvement or maintenance of airports, or for other aeronautical purposes.

2. Any political subdivision or instrumentality of this state or the owner or owners of any privately owned airport designated as a reliever by the Federal Aviation Administration receiving state funds for the purchase, construction, or improvement, except maintenance, of an airport shall agree before any funds are paid to it to control by ownership or lease the airport for a period equal to the useful life of the project as determined by the commission following the last payment of state or federal funds to it. In the event an airport authority ceases to exist for any reason, this obligation shall be carried out by the governing body which created the authority.

3. Unless otherwise provided, grants to political subdivisions, instrumentalities or to the owner or owners of any privately owned airport designated as a reliever by the Federal Aviation Administration shall be made from the aviation trust fund. In making grants, the commission shall consider whether the local community has given financial support to the airport in the past. Priority shall be given to airports with local funding for the past five years with no reduction in such funding. The aviation trust fund is a revolving trust fund exempt from the provisions of section 33.080 relating to the transfer of funds to the general revenue funds of the state by the state treasurer. All interest earned upon the balance in the aviation trust fund shall be deposited to the credit of the same fund.

4. The moneys in the aviation trust fund shall be administered by the commission and, when appropriated, shall be used for the following purposes:

   (1) As matching funds on an up to ninety percent state/ten percent local basis, except in the case where federal funds are being matched, when the ratio of state and local funds used to match the federal funds shall be fifty percent state/fifty percent local:

      (a) For preventive maintenance of runways, taxiways and aircraft parking areas, and for emergency repairs of the same;

      (b) For the acquisition of land for the development and improvement of airports;

      (c) For the earthwork and drainage necessary for the construction, reconstruction or repair of runways, taxiways, and aircraft parking areas;

      (d) For the construction, or restoration of runways, taxiways, or aircraft parking areas;

      (e) For the acquisition of land or easements necessary to satisfy Federal Aviation Administration safety requirements;

      (f) For the identification, marking or removal of natural or manmade obstructions to airport control zone surfaces and safety areas;

      (g) For the installation of runway, taxiway, boundary, ramp, or obstruction lights, together with any work directly related to the electrical equipment;

      (h) For the erection of fencing on or around the perimeter of an airport;

      (i) For purchase, installation or repair of air navigational and landing aid facilities and communication equipment;

      (j) For engineering related to a project funded under the provisions of this section and technical studies or consultation related to aeronautics;

      (k) For airport planning projects including master plans and site selection for development of new airports, for updating or establishing master plans and [and], airport layout plans, airport business plans, and strategic plans at existing airports;

      (l) For the purchase, installation, or repair of safety equipment and such other capital improvements and equipment as may be required for the safe and efficient operation of the airport;
(m) If at least [six] four million five hundred thousand dollars is deposited into the aviation trust fund in the previous calendar year, [up to two million dollars may be expended annually upon] funds may be spent for the study or promotion of expanded domestic or international scheduled commercial service, the study or promotion of intrastate scheduled commercial service, the promotion of aviation in the state, or to assist airport sponsors participating in a federally funded air service program supporting intrastate scheduled commercial service, subject to the following provisions:

a. No more than two million dollars may be spent from the aviation trust fund for the purposes provided in this paragraph in any calendar year; and

b. The commission shall be required to expend at least four million dollars of the annual, calendar year deposits into the aviation trust fund for purposes other than the purposes described in this paragraph;

(2) As total funds, with no local match:

(a) For providing air markers, windsocks, and other items determined to be in the interest of the safety of the general flying public;

(b) For the printing and distribution of state aeronautical charts and state airport directories on an annual basis, and a newsletter on a quarterly basis or the publishing and distribution of any public interest information deemed necessary by the commission;

(c) For the conducting of aviation safety workshops;

(d) For the promotion of aerospace education;

(3) As total funds with no local match, up to five hundred thousand dollars per year may be used for the cost of operating existing air traffic control towers that do not receive funding from the Federal Aviation Administration or the United States Department of Defense, except no more than one hundred sixty-seven thousand dollars per year may be used for any individual control tower;

(4) As total funds with a local match, up to five hundred thousand dollars per year may be used for air traffic control towers partially funded by the federal government under a cost-share program. Any expenditures under this program require a nonfederal match, comprised of a ratio of fifty percent state and fifty percent local funds. No more than one hundred thousand dollars per year may be expended for any individual control tower.

5. In the event of a natural or manmade disaster which closes any runway or renders inoperative any electronic or visual landing aid at an airport, any funds appropriated for the purpose of capital improvements or maintenance of airports may be made immediately available for necessary repairs once they are approved by the commission. For projects designated as emergencies by the commission, all requirements relating to normal procurement of engineering and construction services are waived.

6. As used in this section, the term “instrumentality of the state” shall mean any state educational institution as defined in section 176.010 or any state agency which owned or operated an airport on January 1, 1997, and continues to own or operate such airport.”; and

Further amend the title and enacting clause accordingly.

In which the concurrence of the House is respectfully requested.

On motion of Representative Diehl, the House recessed until 6:45 p.m.
EVENING SESSION

The hour of recess having expired, the House was called to order by Speaker Jones.

Representative Rizzo suggested the absence of a quorum.

The following roll call indicated a quorum present:

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**VACANCIES: 004**
HOUSE BILLS WITH SENATE AMENDMENTS

SS#2 SCS HB 1495, relating to early stage business development corporations, was taken up by Representative Torpey.

Representative Torpey moved that the House refuse to adopt SS#2 SCS HB 1495 and request the Senate to recede from its position and, failing to do so, grant the House a conference.

Which motion was adopted.

SCS HB 1468, relating to workers’ compensation, was taken up by Representative Dohrman.

Representative Elmer assumed the Chair.

Representative Dohrman moved that the House refuse to adopt SCS HB 1468 and request the Senate to recede from its position and, failing to do so, grant the House a conference.

Which motion was adopted.

SCS HB 1553, as amended, relating to political subdivisions, was taken up by Representative Dohrman.

Representative Dohrman moved that the House refuse to adopt SCS HB 1553, as amended, and request the Senate to recede from its position and, failing to do so, grant the House a conference.

Which motion was adopted.

SS HCR 9, relating to Ozark riverways, was taken up by Representative Cookson.

Representative Cookson offered House Perfecting Amendment No. 1.

House Perfecting Amendment No. 1

AMEND Senate Substitute for House Concurrent Resolution No. 9, Page 3, Line 16, by deleting the words "Secretary of the Senate" and inserting in lieu thereof the words "Chief Clerk of the Missouri House of Representatives"; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

Representative Roorda raised a point of order that House Perfecting Amendment No. 1 is substantive in nature and not truly a perfecting amendment.

Representative Elmer requested a parliamentary ruling.

The Parliamentary Committee ruled the point of order not well taken.

On motion of Representative Cookson, House Perfecting Amendment No. 1 was adopted.
Journal of the House

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 096

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NOES: 048

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PRESENT: 000

ABSENT WITH LEAVE: 015

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VACANCIES: 004
On motion of Representative Cookson, SS HCR 9, as amended by House Perfecting Amendment No. 1, was adopted by the following vote:

AYES: 102

Allen        Anderson       Austin        Bahr        Barnes
Bernskoetter Berry        Black        Brattin      Brown
Burlison     Cierpiot      Conway 104    Cookson     Cornejo
Crawford     Cross         Curtman      Davis       Diehl
Dohrman      Dugger        Elmer        Engler      Entlicher
Fitzwater    Flanigan      Fraker       Franklin    Frederick
Gannon       Gatschenberger Gosen       Guernsey    Haahr
Hampton      Hansen        Harris       Hicks       Higdon
Hoskins      Houghton      Hurst        Johnson     Jones 50
Justus       Keeney        Kelley 127    Koenig      Kolkmeyer
Korman       Lair          Lant         Lauer       Leara
Lichtenegger Love         Lynch        Marshall    McCaherty
McGaugh      McKenna       Messenger    Miller      Moon
Morris       Muntzel       Neth         Parkinson    Pfautsch
Phillips     Pierson       Pike         Pogue       Rehder
Reiboldt     Remole        Rhoads       Richardson  Riddle
Ross         Rowden        Rowland      Scharnhorst Schieber
Schieffer    Shumake       Smith        Solon       Sommer
Spencer      Stream        Swan         Thomson     Torpey
Walker       White         Wieland      Wilson      Wood
Zerr         Mr. Speaker   

NOES: 042

Anders        Burns         Butler        Carpenter    Colona
Conway 10     Curtis        Dunn          Carpenter    Colona
Englund       Frame         Gardner       Hubbard      Hummel
Kirkton       Kratky        LaFaver       May          Mayfield
McCann Beatty McDonald      McManus       McNeil       Meredith
Mims          Mitten        Molendrop     Montecillo   Morgan
Nichols       Norr          Otto          Pace         Rizzo
Roorda        Runions       Schupp        Swearingen  Walton Gray
Webber        Wright        

PRESENT: 001

Peters

ABSENT WITH LEAVE: 014

Cox          Fitzpatrick    Funderburk    Grisamore    Haefner
Hinson       Hodges         Hough        Kelly 45     Neely
Newman       Redmon         Schatz        Shull        

VACANCIES: 004

Representative Neth assumed the Chair.
MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and adopted the Conference Committee Report on HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended, and has taken up and passed CCS HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended.

Emergency clause adopted.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed SS SCS HCS HB 1371, entitled:


In which the concurrence of the House is respectfully requested.

BILLS CARRYING REQUEST MESSAGES

HCS SB 621, as amended, relating to judicial procedures, was taken up by Representative Cornejo.

Representative Cornejo moved that the House grant the Senate a further conference on HCS SB 621, as amended.

Which motion was adopted.

HOUSE BILLS WITH SENATE AMENDMENTS

SCS HCS HBs 1307 & 1313, relating to the required waiting period before having an abortion, was taken up by Representative Elmer.

Representative Redmon raised a point of order that an inquiry was not confined to the question under debate pursuant to Rule 81.

Representative Neth requested a parliamentary ruling.
The point of order was withdrawn.

Speaker Jones resumed the Chair.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

**AYES: 101**

Allen          Anderson          Austin          Bahr          Barnes
Bernskoetter   Berry            Brattin         Brown         Burlison
Cierpiot       Conway 104       Cookson         Cornejo        Crawford
Cross          Curtman          Davis           Diehl          Dohrman
Dugger         Elmer            Engler          Entlicher      Fitzpatrick
Fitzwater      Flanigan         Fraker          Frederick      Gannon
Gatschenberger Gosen            Guernsey         Haahr          Hampton
Hansen         Hicks            Higdon          Hinson         Hoskins
Hough          Houghton         Hurst           Johnson        Jones 50
Justus         Keeney           Kelley 127       Koenig         Kolkmeyer
Korman         Lair             Lant            Lauer          Leara
Lichtenegger   Love             Lynch           McCaherty      McGaugh
Messenger      Miller           Molendorp       Moon           Morris
Neely          Neth             Parkinson       Pfautsch       Phillips
Pike           Pogue            Redmon          Rehder         Reiboldt
Remole         Rhoads           Richardson      Riddle         Ross
Rowden         Rowland          Scharnhorst     Schatz         Schieber
Shull          Shumake          Solon           Sommer         Spencer
Stream         Swan             Thomson         Torpey         Walker
White          Wieland          Wilson          Wood           Zerr

Mr. Speaker

**NOES: 048**

Anders          Black            Burns           Butler         Carpenter
Colona          Conway 10       Curtis          Dunn           Ellington
English         Englund          Frame           Gardner        Harris
Hubbard         Hummel          Kelly 45        Kirkton        LaFaver
Marshall        May             Mayfield        McCann Beatty  McDonald
McKenna         McManus         McNeil          Meredith       Mims
Mitten          Montecillo      Morgan          Nichols        Norr
Otto            Pace            Peters           Pierson        Rizzo
Roorda          Runions         Schieffer       Schupp         Swearingen

**PRESENT: 000**

**ABSENT WITH LEAVE: 010**

Cox             Franklin         Funderburk       Grisamore       Haefner
Hodges          Kraty            Muntzel         Newman         Smith

**VACANCIES: 004**
On motion of Representative Elmer, SCS HCS HBs 1307 & 1313 was adopted by the following vote:

**AYES: 111**

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**NOES: 40**

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| Curtis    | Dunn     | Ellington | England | Frame |
| Gardner   | Hubbard  | Hummel | Kelly 45 | Kirkton |
| LaFaver   | May      | McCann Beatty | McDonald | McManus |
| McNeil    | Meredith | Mims   | Mitten  | Mlodendorp |
| Montecillo | Morgan  | Nichols | Norr  | Otto |
| Pace      | Peters   | Pierson | Rizzo | Schupp |
| Smith     | Swearingen | Walton Gray | Webber | Wright |

**PRESENT: 000**

**ABSENT WITH LEAVE: 008**

| Cox       | Funderburk | Grisamore | Haefner | Hodges |
| Kratky    | Muntzel    | Newman  |        |        |

**VACANCIES: 004**
On motion of Representative Elmer, **SCS HCS HBs 1307 & 1313** was truly agreed to and finally passed by the following vote:

**AYES: 111**

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**PRESENT: 001**

| Peters | |

**ABSENT WITH LEAVE: 008**

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**VACANCIES: 004**

Speaker Jones declared the bill passed.
MESSAGES FROM THE SENATE

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed SCS HCS HB 1831, entitled:

An act to repeal section 210.211, RSMo, and to enact in lieu thereof one new section relating to child care facilities.

With Senate Amendment No. 2.

Senate Amendment No. 2

AMEND Senate Committee Substitute for House Committee Substitute for House Bill No. 1831, Page 1, Section A, Line 2, by inserting immediately after said line the following:

"210.027. For child-care providers who receive state or federal funds for providing child-care [services in the home] fee assistance, either by direct payment or through reimbursement to a child-care beneficiary, the department of social services shall:

(1) Establish publicly available website access to provider-specific information about any health and safety licensing or regulatory requirements for the providers, and including dates of inspections, history of violations, and compliance actions taken, as well as the consumer education information required under subdivision (12) of this section;
(2) Establish or designate one hotline for parents to submit complaints about child care providers;
(3) Be authorized to revoke the registration of a registered provider for due cause;
((2)) (4) Require providers to be at least eighteen years of age;
((3)) (5) Establish minimum requirements for building and physical premises to include:
(a) Compliance with state and local fire, health, and building codes, which shall include the ability to evacuate children in the case of an emergency; and
(b) Emergency preparedness and response planning.

Child care providers shall meet these minimum requirements prior to receiving federal assistance. Where there are no local ordinances or regulations regarding smoke detectors, the department shall require providers, by rule, to install and maintain an adequate number of smoke detectors in the residence or other building where child care is provided;
((4)) (6) Require providers to be tested for tuberculosis on the schedule required for employees in licensed facilities;
((5)) (7) Require providers to notify parents if the provider does not have immediate access to a telephone;
((6)) (8) Make providers aware of local opportunities for training in first aid and child care;
(9) Promulgate rules and regulations to define pre-service training requirements for child care providers and employees pursuant to applicable federal laws and regulations;
(10) Establish procedures for conducting unscheduled onsite monitoring of child care providers prior to receiving state or federal funds for providing child care services either by direct payment or through reimbursement to a child care beneficiary, and annually thereafter;
(11) Require child care providers who receive assistance under applicable federal laws and regulations to report to the department any serious injuries or death of children occurring in child care;
(12) With input from statewide stakeholders such as parents, child care providers or administrators, and system advocate groups, establish a transparent system of quality indicators appropriate to the provider setting that shall provide parents with a way to differentiate between child care providers available in their communities as required by federal rules. The system shall describe the standards used to assess the quality of child care providers and the measurement approaches for such assessment. The system shall indicate whether the provider meets Missouri's registration or licensing standards, is in compliance with applicable health and safety requirements, and the nature of any violations related to registration or licensing requirements. The system shall also indicate if the provider utilizes nationally-recognized curricula and if the provider is in compliance with staff
Sixty-eighth Day—Wednesday, May 14, 2014

[72x695]educational requirements. Such system of quality indicators established under this subdivision with the input from stakeholders shall be promulgated by rules. Any rule or portion of a rule, as that term is defined in section 536.010 that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536, and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536, to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void. This subdivision shall not be construed as authorizing the operation, establishment, maintenance, or mandating or offering of incentives to participate in a quality rating system under section 161.216.”; and

Further amend the title and enacting clause accordingly.

In which the concurrence of the House is respectfully requested.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed SS SCS HB 1865, entitled: An act to repeal section 143.451, RSMo, and to enact in lieu thereof two new sections relating to taxation.

In which the concurrence of the House is respectfully requested.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate refuses to recede from its position on SS#2 SCS HB 1495 and grants the House a conference thereon.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on SS#2 SCS HB 1495.

Senators: Dixon, Schmitt, Schaefer, Justus, and Keaveny

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the President Pro Tem has appointed the following Conference Committee to act with a like committee from the House on HCS SB 621, as amended.

Senators: Dixon, Schmitt, Schaefer, Justus, and Keaveny

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed HB 1693.

Emergency clause adopted.

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed HB 2163.
THIRD READING OF SENATE BILLS

HCS SB 508, relating to health insurance, was taken up by Representative Molendorp.

Representative Allen offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Bill No. 508, Page 6, Section 376.2004, Lines 37 through 42, by deleting all of said lines and inserting in lieu thereof the following:

"6. Each applicant for licensure shall submit two full sets of fingerprints to the state highway patrol for the purpose of obtaining a state and federal criminal records check under section 43.540 and Public Law 92-554. The department shall not issue a license if such person has been convicted of a felony offense or a misdemeanor offense involving fraud or dishonesty."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Allen, House Amendment No. 1 was adopted.

Representative McManus offered House Amendment No. 2.

House Amendment No. 2

AMEND House Committee Substitute for Senate Bill No. 508, Page 2, Section 43.530, Line 23, by inserting after all of said line the following:

"105.711. 1. There is hereby created a "State Legal Expense Fund" which shall consist of moneys appropriated to the fund by the general assembly and moneys otherwise credited to such fund pursuant to section 105.716.

2. Moneys in the state legal expense fund shall be available for the payment of any claim or any amount required by any final judgment rendered by a court of competent jurisdiction against:

   (1) The state of Missouri, or any agency of the state, pursuant to section 536.050 or 536.087 or section 537.600;
   (2) Any officer or employee of the state of Missouri or any agency of the state, including, without limitation, elected officials, appointees, members of state boards or commissions, and members of the Missouri National Guard upon conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state, or any agency of the state, provided that moneys in this fund shall not be available for payment of claims made under chapter 287;
   (3) (a) Any physician, psychiatrist, pharmacist, podiatrist, dentist, nurse, or other health care provider licensed to practice in Missouri under the provisions of chapter 330, 332, 334, 335, 336, 337 or 338 who is employed by the state of Missouri or any agency of the state under formal contract to conduct disability reviews on behalf of the department of elementary and secondary education or provide services to patients or inmates of state correctional facilities on a part-time basis, and any physician, psychiatrist, pharmacist, podiatrist, dentist, nurse, or other health care provider licensed to practice in Missouri under the provisions of chapter 330, 332, 334, 335, 336, 337, or 338 who is under formal contract to provide services to patients or inmates at a county jail on a part-time basis;

   (b) Any physician licensed to practice medicine in Missouri under the provisions of chapter 334 and his professional corporation organized pursuant to chapter 356 who is employed by or under contract with a city or county health department organized under chapter 192 or chapter 205, or a city health department operating under a city charter, or a combined city-county health department to provide services to patients for medical care caused by pregnancy, delivery, and child care, if such medical services are provided by the physician pursuant to the contract without compensation or the physician is paid from no other source than a governmental agency except for patient co-payments required by federal or state law or local ordinance;
(c) Any physician licensed to practice medicine in Missouri under the provisions of chapter 334 who is employed by or under contract with a federally funded community health center organized under Section 315, 329, 330 or 340 of the Public Health Services Act (42 U.S.C. 216, 254c) to provide services to patients for medical care caused by pregnancy, delivery, and child care, if such medical services are provided by the physician pursuant to the contract or employment agreement without compensation or the physician is paid from no other source than a governmental agency or such a federally funded community health center except for patient co-payments required by federal or state law or local ordinance. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of one million dollars for all claims arising out of and judgments based upon the same act or acts alleged in a single cause against any such physician, and shall not exceed one million dollars for any one claimant;

(d) Any physician licensed pursuant to chapter 334 who is affiliated with and receives no compensation from a nonprofit entity qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which offers a free health screening in any setting or any physician, nurse, physician assistant, dental hygienist, dentist, or other health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 who provides health care services within the scope of his or her license or registration at a city or county health department organized under chapter 192 or chapter 205, a city health department operating under a city charter, or a combined city-county health department, or a nonprofit community health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, excluding federally funded community health centers as specified in paragraph (c) of this subdivision and rural health clinics under 42 U.S.C. 1396d(l)(1), if such services are restricted to primary care and preventive health services, provided that such services shall not include the performance of an abortion, and if such health services are provided by the health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 without compensation. MO HealthNet or Medicare payments for primary care and preventive health services provided by a health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, or 338 who volunteers at a community health clinic is not compensation for the purpose of this section if the total payment is assigned to the community health clinic. For the purposes of the section, “community health clinic” means a nonprofit community health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1987, as amended, that provides primary care and preventive health services to people without health insurance coverage. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars, for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars. Liability or malpractice insurance obtained and maintained in force by or on behalf of any health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 shall not be considered available to pay that portion of a judgment or claim for which the state legal expense fund is liable under this paragraph;

(e) Any physician, nurse, physician assistant, dental hygienist, or dentist licensed or registered to practice medicine, nursing, or dentistry or to act as a physician assistant or dental hygienist in Missouri under the provisions of chapter 332, 334, or 335, or lawfully practicing, who provides medical, nursing, or dental treatment within the scope of his license or registration to students of a school whether a public, private, or parochial elementary or secondary school or summer camp, if such physician's treatment is restricted to primary care and preventive health services and if such medical, dental, or nursing services are provided by the physician, dentist, physician assistant, dental hygienist, or nurse without compensation. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars, for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars; or

(f) Any physician licensed under chapter 334, or dentist licensed under chapter 332, providing medical care without compensation to an individual referred to his or her care by a city or county health department organized under chapter 192 or 205, a city health department operating under a city charter, or a combined city-county health department, or nonprofit health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or a federally funded community health center organized under Section 315, 329, 330, or 340 of the Public Health Services Act, 42 U.S.C. Section 216, 254c; provided that such treatment shall not include the performance of an abortion. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of one million dollars for all claims arising
out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed one million dollars for any one claimant, and insurance policies purchased under the provisions of section 105.721 shall be limited to one million dollars. Liability or malpractice insurance obtained and maintained in force by or on behalf of any physician licensed under chapter 334, or any dentist licensed under chapter 332, shall not be considered available to pay that portion of a judgment or claim for which the state legal expense fund is liable under this paragraph;

(4) Staff employed by the juvenile division of any judicial circuit;

(5) Any attorney licensed to practice law in the state of Missouri who practices law at or through a nonprofit community social services center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or through any agency of any federal, state, or local government, if such legal practice is provided by the attorney without compensation. In the case of any claim or judgment that arises under this subdivision, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars;

(6) Any social welfare board created under section 205.770 and the members and officers thereof upon conduct of such officer or employee while acting in his or her capacity as a board member or officer, and any physician, nurse, physician assistant, dental hygienist, dentist, or other health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 who is referred to provide medical care without compensation by the board and who provides health care services within the scope of his or her license or registration as prescribed by the board; or

(7) Any person who is selected or appointed by the state director of revenue under subsection 2 of section 136.055 to act as an agent of the department of revenue, to the extent that such agent's actions or inactions upon which such claim or judgment is based were performed in the course of the person's official duties as an agent of the department of revenue and in the manner required by state law or department of revenue rules.

3. The department of health and senior services shall promulgate rules regarding contract procedures and the documentation of care provided under paragraphs (b), (c), (d), (e), and (f) of subdivision (3) of subsection 2 of this section. The limitation on payments from the state legal expense fund or any policy of insurance procured pursuant to the provisions of section 105.721, provided in subsection 7 of this section, shall not apply to any claim or judgment arising under paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section. Any claim or judgment arising under paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section shall be paid by the state legal expense fund or any policy of insurance procured pursuant to section 105.721, to the extent damages are allowed under sections 538.205 to 538.235. Liability or malpractice insurance obtained and maintained in force by any health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 for coverage concerning his or her private practice and assets shall not be considered available under subsection 7 of this section to pay that portion of a judgment or claim for which the state legal expense fund is liable under paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section. However, a health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 may purchase liability or malpractice insurance for care rendered under paragraphs (c), (d), (e), and (f) of subdivision (3) of subsection 2 of this section which exceed the amount of liability coverage provided by the state legal expense fund under those paragraphs. Even if paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section is repealed or modified, the state legal expense fund shall be available for damages which occur while the pertinent paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section is in effect.

4. The attorney general shall promulgate rules regarding contract procedures and the documentation of legal practice provided under subdivision (5) of subsection 2 of this section. The limitation on payments from the state legal expense fund or any policy of insurance procured pursuant to section 105.721 as provided in subsection 7 of this section shall not apply to any claim or judgment arising under subdivision (5) of subsection 2 of this section. Any claim or judgment arising under subdivision (5) of subsection 2 of this section shall be paid by the state legal expense fund or any policy of insurance procured pursuant to section 105.721 to the extent damages are allowed under sections 538.205 to 538.235. Liability or malpractice insurance otherwise obtained and maintained in force shall not be considered available under subsection 7 of this section to pay that portion of a judgment or claim for which the state legal expense fund is liable under subdivision (5) of subsection 2 of this section. However, an attorney may obtain liability or malpractice insurance for care rendered under paragraphs (c), (d), (e), and (f) of subdivision (3) of subsection 2 of this section which exceed the amount of liability coverage provided by the state legal expense fund under subdivision (5) of subsection 2 of this section. Even if subdivision (5) of subsection 2 of this section is repealed or amended, the state legal expense fund shall be available for damages which occur while the pertinent subdivision (5) of subsection 2 of this section is in effect.
5. All payments shall be made from the state legal expense fund by the commissioner of administration with the approval of the attorney general. Payment from the state legal expense fund of a claim or final judgment award against a health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338, described in paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section, or against an attorney in subdivision (5) of subsection 2 of this section, shall only be made for services rendered in accordance with the conditions of such paragraphs. In the case of any claim or judgment against an officer or employee of the state or any agency of the state based upon conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state or any agency of the state that would give rise to a cause of action under section 537.600, the state legal expense fund shall be liable, excluding punitive damages, for:

(1) Economic damages to any one claimant; and
(2) Up to three hundred fifty thousand dollars for noneconomic damages.

The state legal expense fund shall be the exclusive remedy and shall preclude any other civil actions or proceedings for money damages arising out of or relating to the same subject matter against the state officer or employee, or the officer's or employee's estate. No officer or employee of the state or any agency of the state shall be individually liable in his or her personal capacity for conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state or any agency of the state. The provisions of this subsection shall not apply to any defendant who is not an officer or employee of the state or any agency of the state in any proceeding against an officer or employee of the state or any agency of the state. Nothing in this subsection shall limit the rights and remedies otherwise available to a claimant under state law or common law in proceedings where one or more defendants is not an officer or employee of the state or any agency of the state.

6. The limitation on awards for noneconomic damages provided for in this subsection shall be increased or decreased on an annual basis effective January first of each year in accordance with the Implicit Price Deflator for Personal Consumption Expenditures as published by the Bureau of Economic Analysis of the United States Department of Commerce. The current value of the limitation shall be calculated by the director of the department of insurance, financial institutions and professional registration, who shall furnish that value to the secretary of state, who shall publish such value in the Missouri Register as soon after each January first as practicable, but it shall otherwise be exempt from the provisions of section 536.021.

7. Except as provided in subsection 3 of this section, in the case of any claim or judgment that arises under sections 537.600 and 537.610 against the state of Missouri, or an agency of the state, the aggregate of payments from the state legal expense fund and from any policy of insurance procured pursuant to the provisions of section 105.721 shall not exceed the limits of liability as provided in sections 537.600 to 537.610. No payment shall be made from the state legal expense fund or any policy of insurance procured with state funds pursuant to section 105.721 unless and until the benefits provided to pay the claim by any other policy of liability insurance have been exhausted.

8. The provisions of section 33.080 notwithstanding, any moneys remaining to the credit of the state legal expense fund at the end of an appropriation period shall not be transferred to general revenue.

9. Any rule or portion of a rule, as that term is defined in section 536.010, that is promulgated under the authority delegated in sections 105.711 to 105.726 shall become effective only if it has been promulgated pursuant to the provisions of chapter 536. Nothing in this section shall be interpreted to repeal or affect the validity of any rule filed or adopted prior to August 28, 1999, if it fully complied with the provisions of chapter 536. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 1999, shall be invalid and void."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative McManus, House Amendment No. 2 was adopted.
Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 092

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VACANCIES: 004

On motion of Representative Molendrop, **HCS SB 508, as amended**, was adopted.
On motion of Representative Molendorp, **HCS SB 508, as amended**, was read the third time and passed by the following vote:

**AYES: 133**

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<thead>
<tr>
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<td>Justus</td>
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<td>McDonald</td>
<td>McGaugh</td>
<td>McKenna</td>
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<td>Wright</td>
<td>Zerr</td>
<td>Mr. Speaker</td>
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**NOES: 014**

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<td>Morris</td>
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<td>Pogue</td>
<td>Smith</td>
<td>Spencer</td>
<td>Walton Gray</td>
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**PRESENT: 000**

**ABSENT WITH LEAVE: 012**

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<td>Muntzel</td>
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<td>Parkinson</td>
<td>Scharnhorst</td>
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**VACANCIES: 004**

Speaker Jones declared the bill passed.
HCS SB 607, relating to sales tax for public safety, was taken up by Representative Hough.

Representative Guernsey offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Bill No. 607, Page 9, Section 144.080, Line 37, by inserting after all of said section and line the following:

"304.154. 1. Beginning January 1, [2005] 2014, a towing company operating a tow truck pursuant to the authority granted in section 304.155 or 304.157 shall:
   (1) Have and occupy a verifiable business address and display such address in a location visible from the street;
   (2) Have a fenced, secure, and lighted storage lot or an enclosed, secure building for the storage of motor vehicles, with a total area for storing vehicles, either inside or outside, of at least two thousand square feet and fencing a minimum of seven feet high;
   (3) Be available twenty-four hours a day, seven days a week. Availability shall mean that an employee of the towing company or an answering service answered by a person is able to respond to a tow request;
   (5) Have and maintain an operational telephone with the telephone number published or available through directory assistance;
   [((4)] [6] Maintain a valid insurance policy issued by an insurer authorized to do business in this state, or a bond or other acceptable surety providing coverage for the death of, or injury to, persons and damage to property for each accident or occurrence in the amount of at least five hundred thousand dollars per incident prescribed by the United States Department of Transportation;
   [((5)] [7] Provide workers' compensation insurance for all employees of the towing company if required by chapter 287; [and]
   [((6)] [8] Maintain current motor vehicle registrations on all tow trucks currently operated within the towing company fleet.

2. The initial tow performed under sections 304.155 and 304.157 shall remain in the state of Missouri unless authorized by the vehicle owner or their agent.

3. Tows performed under section 304.155 shall not be dispatched through a third party dispatch system or management company, unless hired by the towing company. The provisions of this subsection shall not apply to any home rule city with more than four hundred thousand inhabitants and located in more than one county.

4. Counties may adopt ordinances with respect to towing company standards in addition to the minimum standards contained in this section. A towing company located in a county of the second, third, [and] or fourth classification or located in any county of the first classification with more than one hundred one thousand but fewer than one hundred fifteen thousand inhabitants or located in any county of the third classification without a township form of government and with more than twenty-three thousand but fewer than twenty-six thousand inhabitants and with a city of the fourth classification with more than two thousand four hundred but fewer than two thousand seven hundred inhabitants as the county seat is exempt from the provisions of this section."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Guernsey, House Amendment No. 1 was adopted.
Representative Swearingen offered **House Amendment No. 2.**

*House Amendment No. 2*

AMEND House Committee Substitute for Senate Bill No. 607, Page 5, Section 94.902, Lines 8-9, by deleting all of said line and inserting in lieu thereof the following words:

"hundred but fewer than twenty-five thousand inhabitants[.];

(4) Any city of the third classification with more than four thousand but fewer than four thousand five hundred inhabitants and located in any county of the first classification with more than two hundred thousand but fewer than two hundred sixty thousand inhabitants; or

(5) Any special charter city with more than twenty-nine thousand but fewer than"; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Swearingen, **House Amendment No. 2** was adopted.

On motion of Representative Hough, **HCS SB 607, as amended**, was adopted.

On motion of Representative Hough, **HCS SB 607, as amended**, was read the third time and passed by the following vote:

**AYES: 093**

Allen
Brown
Cookson
Davis
Engler
Fraker
Gosen
Higdon
Hubbard
Kolkmeyer
Lichtenegger
McDonald
Miller
Neth
Phillips
Roorda
Shull
Swearingen
Weland

Anders
Carpenter
Cornejo
Diehl
English
Franklin
Guernsey
Hinson
Jones 50
Korman
Love
McGaugh
Mims
Nichols
Pike
Rowland
Solon
Thomson
Wood

Austin
Colona
Crawford
Dohrman
Englund
Frederick
Hampton
Hoskins
Justus
Lair
Lynch
McKenna
Molendorp
Nor
Redmon
Runions
Sommer
Torpey
Zerr

Bernskoetter
Conway 10
Cross
Dunn
Fitzwater
Gannon
Hansen
Hough
Kelley 127
Lant
May
Meredith
Morgan
Otto
Reiboldt
Schatz
Stream
Walker

Black
Conway 104
Curtis
Elmer
Flanigan
Gatschenberger
Harris
Houghton
Kelly 45
Lauer
McCann Beatty
Messenger
Morris
Pfautech
Riddle
Schieffer
Swan
White

**NOES: 054**

Anderson
Burlison
Fitzpatrick
Hummel
Koenig
Mayfield
Montecillo
Peters

Bahr
Butler
Frame
Hurst
Kratky
McCaherty
Moon
Pierson

Barnes
Curtman
Gardner
Johnson
LaFaver
McManus
Neely
Pogue

Berry
Dugger
Haahr
Keeney
Leara
McNeil
Pace
Rehder

Brattin
Ellington
Hicks
Kirkton
Marshall
Mitten
Parkinson
Remole
Speaker Jones declared the bill passed.

**RE-APPOINTMENT OF CONFERENCE COMMITTEE**

The Speaker re-appointed the following Conference Committee to act with a like committee from the Senate on the following bill:

**HCS SB 621**: Representatives Cox, Cornejo and Colona

**THIRD READING OF SENATE BILLS**

**SCS SB 729**, relating to a tax credit for donations to innovation campuses, was taken up by Representative Lauer.

Representative Franklin offered **House Amendment No. 1**.

*House Amendment No. 1*

AMEND Senate Committee Substitute for Senate Bill No. 729, Page 3, Section 620.700, Line 87, by inserting immediately after said line the following:

"620.750. 1. The department of economic development, subject to an appropriation not to exceed five million dollars each fiscal year, shall develop and implement rural regional development grants as provided in this section.

2. Rural regional development grants may be provided to qualified rural regional development groups. After the award of a grant, the group shall:
   (1) Track and monitor job creation and investment in the region using quantitative measures that measure progress toward preestablished goals;
   (2) Establish a process for enrolling commercial and industrial development sites in the region in the state-certified sites program or maintain a list of state-certified commercial and industrial development sites in the region;
   (3) Measure the skills of the region’s workforce;
   (4) Provide an organizational chart demonstrating that private businesses and local governmental and educational officials are involved in the group; and
   (5) Provide documentation of the group’s financial activities for the current year.

3. A rural regional development group shall not qualify for a rural regional development grant if:
   (1) The group’s region includes a county or portion of another state outside the state of Missouri; or
   (2) The group maintains an operating budget greater than two hundred fifty thousand dollars."
4. Applications for rural regional development grants shall only be submitted for a rural regional development group by a regional planning commission created under chapter 251 or other legally created regional planning commission. A regional planning commission may submit applications on behalf of more than one rural regional development group, except that a regional planning commission shall not submit an application on behalf of a group that the regional planning commission does not recognize as the economic development authority for the county that the authority represents.

5. The regional planning commission may charge an application fee for the grants developed under this section. The regional planning commission shall be allowed to claim reimbursement from the grant recipient for actual costs of administering the grants.

6. A single grant shall not exceed one hundred fifty thousand dollars. Each of the nineteen regions of the state represented by a regional planning commission created under chapter 251 or other legally created regional planning commission shall not receive more than two grants per region annually.

7. Grants provided under this section shall be distributed based on a rural regional development group’s years in operation. The eligible amount shall be:
   (1) For a group in operation two years or more on a matching basis of three dollars of state funds for every one dollar of funds provided or raised by the rural regional development group, including the value of in-kind services, supplies, or equipment.
   (2) For groups in operation less than two years on a matching basis of one dollar of state funds for every one dollar of funds provided or raised by the rural regional development group, including the value of in-kind services, supplies, or equipment.

8. Uses for the grants may include, but are not limited to, the following activities:
   (1) Workforce development activities, such as evaluation and education;
   (2) Entrepreneurship training for pre-venture and existing businesses;
   (3) Development of regional marketing techniques and activities;
   (4) International trade training for new-to-export businesses in the region;
   (5) In-depth market research and financial analysis for businesses in the region;
   (6) Demographic and market opportunity research to assist regional planning commissions in developing their comprehensive economic development strategy.

9. The grant recipient shall annually report to the governor; the director of the department of economic development; the senate committee on commerce, consumer protection and the environment; the house committee on economic development and any successor committees thereto, the allocation of the grants and the purposes for which the funding was used.

10. The department of economic development may promulgate rules governing the award of grants under this section. Any rule or portion of a rule, as that term is defined in section 536.010 that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all the provisions of chapter 536, and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536, to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

Representative Roorda raised a point of order that House Amendment No. 1 goes beyond the scope of the bill.

The Chair ruled the point of order not well taken.

On motion of Representative Franklin, House Amendment No. 1 was adopted.
Representative Fitzwater offered **House Amendment No. 2.**

**House Amendment No. 2**

AMEND Senate Committee Substitute for Senate Bill No. 729, Page 1, Section A, Line 2, by inserting immediately after said line the following:

"135.305. A Missouri wood energy producer shall be eligible for a tax credit on taxes otherwise due under chapter 143, except sections 143.191 to 143.261, as a production incentive to produce processed wood products in a qualified wood-producing facility using Missouri forest product residue. The tax credit to the wood energy producer shall be five dollars per ton of processed material. The credit may be claimed for a period of five years and is to be a tax credit against the tax otherwise due. No new tax credits, provided for under sections 135.300 to 135.311, shall be authorized after June 30, [2013] 2020. In no event shall the aggregate amount of all tax credits allowed under sections 135.300 to 135.311 exceed six million dollars in any given fiscal year and is subject to appropriations."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Fitzwater, **House Amendment No. 2** was adopted.

Representative McGaugh offered **House Amendment No. 3.**

**House Amendment No. 3**

AMEND Senate Committee Substitute for Senate Bill No. 729, Page 1, Lines 2 and 3 of the title, by deleting the words "a tax credit for donations to innovation campuses" and inserting in lieu thereof the words "tax credits"; and

Further amend said bill, Page 1, Section A, Line 2, by inserting immediately after said line the following:

"135.710. 1. As used in this section, the following terms mean:

(1) "Alternative fuel vehicle refueling property", property in this state owned by an eligible applicant and used for storing alternative fuels and for dispensing such alternative fuels into fuel tanks of motor vehicles owned by such eligible applicant or private citizens;

(2) "Alternative fuels", any motor fuel at least seventy percent of the volume of which consists of one or more of the following:

(a) Ethanol;
(b) Natural gas;
(c) Compressed natural gas, or CNG;
(d) Liquified natural gas, or LNG;
(e) Liquified petroleum gas, or LP gas, propane, or autogas;
(f) Any mixture of biodiesel and diesel fuel, without regard to any use of kerosene;
(g) Hydrogen;

[2] [(3) "Department", the department of [natural resources] economic development;]

(4) "Electric vehicle recharging property", property in this state owned by an eligible applicant and used for recharging electric motor vehicles owned by such eligible applicant or private citizens; [(3) [(5) "Eligible applicant", a business entity or private citizen that is the owner of [a qualified] an electric vehicle recharging property or an alternative fuel vehicle refueling property;]

(6) "Qualified Missouri contractor", a contractor whose principal place of business is located in Missouri and has been located in Missouri for a period of not less than five years;
[(4)] (7) "Qualified [alternative fuel vehicle refueling] property", [property in this state owned by an eligible applicant and used for storing alternative fuels and for dispensing such alternative fuels into fuel tanks of motor vehicles owned by such eligible applicant or private citizens] an electric vehicle recharging property or an alternative fuel vehicle refueling property which, if constructed after August 28, [2008] 2014, was constructed with at least fifty-one percent of the costs being paid to [qualified Missouri contractors for the]:
   (a) Fabrication of premanufactured equipment or process piping used in the construction of such facility;
   (b) Construction of such facility; and
   (c) General maintenance of such facility during the time period in which such facility receives any tax credit under this section.

If no qualified Missouri contractor is located within seventy-five miles of the property, the requirement that fifty-one percent of the costs shall be paid to qualified Missouri contractors shall not apply.

(5) "Qualified Missouri contractor", a contractor whose principal place of business is located in Missouri and has been located in Missouri for a period of not less than five years.

2. For all tax years beginning on or after January 1, [2009] 2015, but before January 1, [2012] 2018, any eligible applicant who installs and operates a qualified [alternative fuel vehicle refueling] property shall be allowed a credit against the tax otherwise due under chapter 143, excluding withholding tax imposed by sections 143.191 to 143.265, or due under chapter 147 or chapter 148 for any tax year in which the applicant is constructing the [refueling] qualified property. The credit allowed in this section per eligible applicant who is a private citizen shall not exceed fifteen hundred dollars or per eligible applicant that is a business entity shall not exceed the lesser of twenty thousand dollars or twenty percent of the total costs directly associated with the purchase and installation of any alternative fuel storage and dispensing equipment or any recharging equipment on any qualified [alternative fuel vehicle refueling] property, which shall not include the following:
   (1) Costs associated with the purchase of land upon which to place a qualified [alternative fuel vehicle refueling] property;
   (2) Costs associated with the purchase of an existing qualified [alternative fuel vehicle refueling] property; or
   (3) Costs for the construction or purchase of any structure.

3. Tax credits allowed by this section shall be claimed by the eligible applicant at the time such applicant files a return for the tax year in which the storage and dispensing or recharging facilities were placed in service at a qualified [alternative fuel vehicle refueling] property, and shall be applied against the income tax liability imposed by chapter 143, chapter 147, or chapter 148 after all other credits provided by law have been applied. The cumulative amount of tax credits which may be claimed by eligible applicants claiming all credits authorized in this section shall not exceed [the following amounts:
   (1) In taxable year 2009, three million dollars;
   (2) In taxable year 2010, two million dollars; and
   (3) In taxable year 2011,] one million dollars in any calendar year, subject to appropriations.

4. If the amount of the tax credit exceeds the eligible applicant's tax liability, the difference shall not be refundable. Any amount of credit that an eligible applicant is prohibited by this section from claiming in a taxable year may be carried forward to any of such applicant's two subsequent taxable years. Tax credits allowed under this section may be assigned, transferred, sold, or otherwise conveyed.

5. [An alternative fuel vehicle refueling] Any qualified property, for which an eligible applicant receives tax credits under this section, which ceases to sell alternative fuel or recharge electric vehicles shall cause the forfeiture of such eligible applicant's tax credits provided under this section for the taxable year in which the [alternative fuel vehicle refueling] qualified property ceased to sell alternative fuel or recharge electric vehicles and for future taxable years with no recapture of tax credits obtained by an eligible applicant with respect to such applicant's tax years which ended before the sale of alternative fuel or recharging of electric vehicles ceased.

6. The director of revenue shall establish the procedure by which the tax credits in this section may be claimed, and shall establish a procedure by which the cumulative amount of tax credits is apportioned equally among all eligible applicants claiming the credit. To the maximum extent possible, the director of revenue shall establish the procedure described in this subsection in such a manner as to ensure that eligible applicants can claim all the tax credits possible up to the cumulative amount of tax credits available for the taxable year. No eligible applicant claiming a tax credit under this section shall be liable for any interest or penalty for filing a tax return after the date fixed for filing such return as a result of the apportionment procedure under this subsection.
7. Any eligible applicant desiring to claim a tax credit under this section shall submit the appropriate application for such credit with the department. The application for a tax credit under this section shall include any information required by the department. The department shall review the applications and certify to the department of revenue each eligible applicant that qualifies for the tax credit.

8. The department and the department of revenue may promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2008, shall be invalid and void.

9. [Pursuant to] The provisions of section 23.253 of the Missouri sunset act notwithstanding:
   (1) The provisions of the new program authorized under this section shall automatically sunset [six] three years after [August 28, 2008] December 31, 2014, unless reauthorized by an act of the general assembly; and
   (2) If such program is reauthorized, the program authorized under this section shall automatically sunset [twelve] six years after the effective date of the reauthorization of this section; and
   (3) This section shall terminate on December thirty-first of the calendar year immediately following the calendar year in which the program authorized under this section is sunset; and
   (4) The provisions of this subsection shall not be construed to limit or in any way impair the department's ability to redeem tax credits authorized on or before the date the program authorized under this section expires or a taxpayer's ability to redeem such tax credits.

137.010. The following words, terms and phrases when used in laws governing taxation and revenue in the state of Missouri shall have the meanings ascribed to them in this section, except when the context clearly indicates a different meaning:

(1) "Grain and other agricultural crops in an unmanufactured condition" shall mean grains and feeds including, but not limited to, soybeans, cow peas, wheat, corn, oats, barley, kaïr, rye, flax, grain sorghums, cotton, and such other products as are usually stored in grain and other elevators and on farms; but excluding such grains and other agricultural crops after being processed into products of such processing, when packaged or sacked. The term "processing" shall not include hulling, cleaning, drying, grating, or polishing;

(2) "Hydroelectric power generating equipment", very-low-head turbine generators with a nameplate generating capacity of at least four hundred kilowatts but not more than six hundred kilowatts and machinery and equipment used directly in the production, generation, conversion, storage, or conveyance of hydroelectric power to land-based devices and appurtenances used in the transmission of electrical energy;

(3) "Intangible personal property", for the purpose of taxation, shall include all property other than real property and tangible personal property, as defined by this section;

(4) "Real property" includes land itself, whether laid out in town lots or otherwise, and all growing crops, buildings, structures, improvements and fixtures of whatever kind thereon, hydroelectric power generating equipment, the installed poles used in the transmission or reception of electrical energy, audio signals, video signals or similar purposes, provided the owner of such installed poles is also an owner of a fee simple interest, possessor of an easement, holder of a license or franchise, or is the beneficiary of a right-of-way dedicated for public utility purposes for the underlying land; attached wires, transformers, amplifiers, substations, and other such devices and appurtenances used in the transmission or reception of electrical energy, audio signals, video signals or similar purposes when owned by the owner of the installed poles, otherwise such items are considered personal property; and stationary property used for transportation or storage of liquid and gaseous products, including, but not limited to, petroleum products, natural gas, propane or LP gas equipment, water, and sewage;

(5) "Tangible personal property" includes every tangible thing being the subject of ownership or part ownership whether animate or inanimate, other than money, and not forming part or parcel of real property as herein defined, but does not include household goods, furniture, wearing apparel and articles of personal use and adornment, as defined by the state tax commission, owned and used by a person in his home or dwelling place.
Section 1. Notwithstanding any other provisions of law to the contrary, the license of a trailer, as defined in section 301.010, shall be permanent until the owner of the trailer sells, trades, or disposes of the trailer. After the initial registration and licensing of the trailer, no annual registration shall be required and no annual fee shall be charged."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

Representative Hummel raised a point of order that House Amendment No. 3 goes beyond the scope of the bill.

The Chair ruled the point of order not well taken.

Representative Brattin offered House Amendment No. 1 to House Amendment No. 3.

AMEND House Amendment No. 3 to Senate Committee Substitute for Senate Bill No. 729, Page 4, Lines 17-20, by deleting all of said lines and inserting in lieu thereof the phrase"; and"; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Brattin, House Amendment No. 1 to House Amendment No. 3 was adopted.

On motion of Representative McGaugh, House Amendment No. 3, as amended, was adopted.

Representative Korman offered House Amendment No. 4.

AMEND Senate Committee Substitute for Senate Bill No. 729, Page 1, Section A, Line 2, by inserting immediately after said line the following:

"135.700. 1. For all tax years beginning on or after January 1, 1999, a grape grower or wine producer shall be allowed a tax credit against the state tax liability incurred pursuant to chapter 143, exclusive of the provisions relating to the withholding of tax as provided in sections 143.191 to 143.265, in an amount equal to twenty-five percent of the purchase price of all new and used equipment and materials used directly in the growing of grapes or the production of wine in the state. Each grower or producer shall apply to the department of economic development and specify the total amount of such new equipment and materials purchased during the calendar year. The department of economic development shall certify to the department of revenue the amount of such tax credit to which a grape grower or wine producer is entitled pursuant to this section. The provisions of this section notwithstanding, a grower or producer may only apply for and receive the credit authorized by this section for five tax periods.

2. For the taxable years beginning on or after August 28, 2014, the total amount of tax credits allowed under subsection 1 of this section shall not exceed two hundred thousand dollars annually.

3. For all tax years beginning on or after January 1, 2015, a distillery or microbrewery, as defined in section 311.195, shall be allowed a tax credit against the state tax liability incurred under chapter 143, exclusive of the provisions relating to the withholding of tax as provided in sections 143.191 to 143.265, in an amount equal to twenty-five percent of the purchase price of all new and used equipment and materials used directly in the..."
distilling of spirits or brewing of beer in the state, subject to the limitations provided in this section. Each distiller
or brewer shall apply to the department of economic development and specify the total amount of such new and
used equipment and materials purchased during the calendar year. The department of economic development
shall certify to the department of revenue the amount of such tax credit to which a distillery or microbrewery is
entitled under this section. The provisions of this section notwithstanding, a distiller or brewer may apply for
and receive the credit authorized by this section for no more than five consecutive tax periods with a total
maximum of ten tax periods.

4. For the tax years beginning on or after January 1, 2015, the total amount of tax credits authorized
under subsection 3 shall not exceed two hundred thousand dollars per taxable year and shall be subject to
appropriations. The amount of tax credit claimed shall not exceed the amount of the taxpayer’s state tax liability
for the taxable year for which the credit is claimed, and such taxpayer shall not be allowed to claim a tax credit
in excess of twenty-five thousand dollars per taxable year.

5. Of the two hundred thousand dollars of tax credits authorized under subsection 3, no more than one
hundred thousand dollars shall go to each of the groups of taxpayers classifying as distillers and brewers except
as provided in this subsection. After the conclusion of the third quarter of a taxable year, the remaining balance
of tax credits authorized shall be issued to any qualified applicant, regardless of whether a distiller or brewer,
on a first-come, first-served filing basis.”; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Korman, House Amendment No. 4 was adopted.

On motion of Representative Lauer, SCS SB 729, as amended, was read the third time and
passed by the following vote:

AYES: 092

Allen  Anders  Austin  Bernskoetter  Berry
Black  Brown  Cierpiot  Conway 10  Conway 104
Cookson  Cornejo  Crawford  Cross  Elmer
Davis  Diehl  Dohrman  Engler  Fraker
English  Englund  Fitzwater  Flanigan  Gatschenberger
Franklin  Frederick  Gannon  Hicks  Gosen
Hampton  Hansen  Harris  Higdon  Jones 50
Hoskins  Hough  Houghton  Hubbard  Kornmeyer
Justus  Kelley 127  Kelly 45  Lauer
Krakty  Lai  Lant  Leara  McCoy
Lichtenegger  Love  Lynch  Mayfield  McCalherty
McDonald  McEldown  McKenna  Messenger  Miller
Molendrop  Morris  Neely  Pfautsch  Phillips
Pike  Redmon  Reiboldt  Richardson  Riddle
Roorda  Rowden  Rowland  Scharnhorst  Schatz
Schieffer  Shull  Shumake  Solon  Sommer
Spencer  Stream  Swan  Swearingen  Thomson
Torpey  Walker  Webber  Wieland  Wood
Zerr  Mr. Speaker

NOES: 055

Anderson  Bahr  Barnes  Brattin  Burlison
Butler  Carpenter  Colona  Curtman  Dunn
Fitzpatrick  Frame  Gardner  Guernsey  Haahr
Hinson  Hummel  Hurst  Johnson  Keeney
Kirkton  Koenig  LaFaver  Marshall  May
McCann Beatty  McManus  McNeil  Meredith  Mims
Speaker Jones declared the bill passed.

**HCS SCS SB 809**, relating to licensure by the Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects, was taken up by Representative Elmer.

On motion of Representative Elmer, **HCS SCS SB 809** was adopted.

On motion of Representative Elmer, **HCS SCS SB 809** was read the third time and passed by the following vote:

**AYES**: 140

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**ABSENT WITH LEAVE**: 011

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**VACANCIES**: 004
Speaker Jones declared the bill passed.

**APPOINTMENT OF CONFERENCE COMMITTEE**

The Speaker appointed the following Conference Committee to act with a like committee from the Senate on the following bill:

**SS#2 SCS HB 1495:** Representatives Torpey, Swan and Schupp

**THIRD READING OF SENATE BILLS**

**HCS SCS SB 852,** relating to county governance, was taken up by Representative Rhoads.

Representative Rhoads offered **House Amendment No. 1.**

_House Amendment No. 1_

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting immediately after all of said line the following:

"191.630. As used in sections 191.630 and 191.631, the following terms mean:

1. "Care provider", a person who is employed as an emergency medical care provider, firefighter, or police officer;

2. "Contagious or infectious disease", hepatitis in any form and any other communicable disease as defined in section 192.800, except AIDS or HIV infection as defined in section 191.650, determined to be life-threatening to a person exposed to the disease as established by rules adopted by the department, in accordance with guidelines of the Centers for Disease Control and Prevention of the Department of Health and Human Services|Communicable disease|, acquired immunodeficiency syndrome (AIDS), cutaneous anthrax, hepatitis in any form, human immunodeficiency virus (HIV), measles, meningococcal disease, mumps, pertussis, pneumatic plague, rubella, severe acute respiratory syndrome (SARS-CoV), smallpox, tuberculosis, varicella disease, vaccinia, viral hemorrhagic fevers, and other such diseases as the department may define by rule or regulation;"
(2) "Communicable disease tests", tests designed for detection of communicable diseases. Rapid testing of the source patient in line with the Occupational Safety and Health Administration (OSHA) enforcement of the Centers for Disease Control and Prevention (CDC) guidelines shall be recommended;
(3) "Coroner or medical examiner", the same meaning as defined in chapter 58;
(4) "Department", the Missouri department of health and senior services;
(5) "Designated infection control officer", the person or persons within the entity or agency who are responsible for managing the infection control program and for coordinating efforts surrounding the investigation of an exposure such as:
(a) Collecting, upon request, facts surrounding possible exposure of an emergency care provider or Good Samaritan to a communicable disease;
(b) Contacting facilities that receive patients or clients of potentially exposed emergency care providers or Good Samaritans to ascertain if a determination has been made as to whether the patient or client has had a communicable disease and to ascertain the results of that determination; and
(c) Notifying the emergency care provider or Good Samaritan as to whether there is reason for concern regarding possible exposure;
(6) "Emergency [medical] care provider", a person who is serving as a licensed or certified person trained to provide emergency and nonemergency medical care as a first responder, emergency responder, firefighter, law enforcement officer, sheriff, deputy sheriff, registered nurse, physician, medical helicopter pilot, or other certification or licensure levels adopted by rule of the department;
(7) "Exposure", a specific eye, mouth, other mucous membrane, nonintact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties;
(8) "HIV", the same meaning as defined in section 191.650;
(9) "Hospital", the same meaning as defined in section 197.020;
(10) "Source patient", any person who is sick or injured and requiring the care or services of a Good Samaritan or emergency care provider, for whose blood or other potentially infectious materials have resulted in exposure.

191.631. 1. (1) Notwithstanding any other law to the contrary, if [a] an emergency care provider or a Good Samaritan sustains an exposure from a person while rendering emergency health care services, the person to whom the emergency care provider or Good Samaritan was exposed is deemed to consent to a test to determine if the person has a contagious or infectious communicable disease and is deemed to consent to notification of the emergency care provider or the Good Samaritan of the results of the test, upon submission of an exposure report by the emergency care provider or the Good Samaritan to the hospital where the person is delivered by the emergency care provider.
(2) The hospital where the [person] source patient is delivered shall conduct the test. The sample and test results shall only be identified by a number and shall not otherwise identify the person tested.
(3) A hospital shall have written policies and procedures for notification of [a] an emergency care provider or Good Samaritan pursuant to this section. The hospital shall include local representation of designated infection control officers during the process to develop or review such policies. The policies shall be substantially the same as those in place for notification of hospital employees. The policies and procedures shall include designation of a representative of the emergency care provider to whom notification shall be provided and who shall, in turn, notify the emergency care provider. The identity of the designated [representative] local infection control officer of the emergency care provider shall not be disclosed to the [person] source patient tested. The designated [representative] local infection control officer shall inform the hospital of those parties who receive the notification, and following receipt of such information and upon request of the person tested, the hospital shall inform the person of the parties to whom notification was provided.
(4) A coroner and medical examiner shall have written policies and procedures for notification of an emergency care provider and Good Samaritan pursuant to this section. The coroner or medical examiner shall include local representation of a designated infection control officer during the process to develop or review such policies. The policies shall be substantially the same as those in place for notification of coroner or medical examiner employees. The policies and procedures shall include designation of a representative of the emergency care providers to whom notification shall be provided and who shall, in turn, notify the emergency care provider. The identity of the designated local infection control officer of the emergency care provider shall not be disclosed to the source patient tested. The designated local infection control officer shall inform the coroner or medical
examiner of those parties who receive the notification, and following receipt of such information and upon request of the person tested, the coroner or medical examiner shall inform the person of the parties to whom notification was provided.

2. If a person tested is diagnosed or confirmed as having a [contagious or infectious] communicable disease pursuant to this section, the hospital, coroner, or medical examiner shall notify the emergency care provider, Good Samaritan or the designated [representative] local infection control officer of the emergency care provider who shall then notify the care provider.

3. The notification to the emergency care provider or the Good Samaritan shall advise the emergency care provider or the Good Samaritan of possible exposure to a particular [contagious or infectious] communicable disease and recommend that the emergency care provider or Good Samaritan seek medical attention. The notification shall be provided as soon as is reasonably possible following determination that the individual has a [contagious or infectious] communicable disease. The notification shall not include the name of the person tested for the [contagious or infectious] communicable disease unless the person consents. If the emergency care provider or Good Samaritan who sustained an exposure determines the identity of the person diagnosed or confirmed as having a [contagious or infectious] communicable disease, the identity of the person shall be confidential information and shall not be disclosed by the emergency care provider or the Good Samaritan to any other individual unless a specific written release is obtained by the person diagnosed with or confirmed as having a [contagious or infectious] communicable disease.

4. This section does not require or permit, unless otherwise provided, a hospital to administer a test for the express purpose of determining the presence of a [contagious or infectious] communicable disease; except that testing may be performed if the person consents and if the requirements of this section are satisfied.

5. This section does not preclude a hospital, coroner, or medical examiner from providing notification to [a] an emergency care provider or Good Samaritan under circumstances in which the hospital's, coroner's, or medical examiner's policy provides for notification of the hospital's, coroner's, or medical examiner's own employees of exposure to a [contagious or infectious] communicable disease that is not life-threatening if the notice does not reveal a patient's name, unless the patient consents.

6. A hospital, coroner, or medical examiner participating in good faith in complying with the provisions of this section is immune from any liability, civil or criminal, which may otherwise be incurred or imposed.

7. A hospital's duty of notification pursuant to this section is not continuing but is limited to diagnosis of a [contagious or infectious] communicable disease made in the course of admission, care, and treatment following the rendering of health care services to which notification pursuant to this section applies.

8. A hospital, coroner, or medical examiner that performs a test in compliance with this section or that fails to perform a test authorized pursuant to this section is immune from any liability, civil or criminal, which may otherwise be incurred or imposed.

9. [A hospital has no duty to perform the test authorized.

10.] The department shall adopt rules to implement this section. The department may determine by rule the [contagious or infectious] communicable diseases for which testing is reasonable and appropriate and which may be administered pursuant to this section. No rule or portion of a rule promulgated under the authority of this section shall become effective unless it has been promulgated pursuant to chapter 536.

11.] 10. The employer of an agency which employs or sponsors the emergency care provider who sustained an exposure pursuant to this section shall pay the costs of testing for the person who is the source of the exposure and of the testing of the emergency care provider if the exposure was sustained during the course of [employment] the provider's expected duties.

11. All emergency care providers shall respond to and treat any patient regardless of the status of the patient's HIV or other communicable disease infection.

12. Ambulance services and emergency medical response agencies licensed under chapter 190 shall establish and maintain local policies and provide training regarding exposure of personnel to patient blood and body fluids as well as general protection from communicable diseases. The training provided and the policies established shall be in substantial compliance with the appropriate CDC and OSHA guidelines.

13. Hospitals, nursing homes, and other medical facilities and practitioners who transfer patients known to have a communicable disease or to be subject to an order of quarantine or an order of isolation shall notify the emergency care providers who are providing the transportation services of the potential risk of exposure to a communicable disease, including communicable diseases of a public health threat.

14. The department shall promulgate regulations regarding all of the following:
(1) The type of exposure that would prompt notification of the emergency care provider or Good Samaritan, which shall cover, at a minimum, methods of potential transmission of any diseases designated under P.L. 101-381 or diseases additionally identified from the department's list of communicable diseases;

(2) The process to be used by the emergency care provider, Good Samaritan, licensed facility, coroner, medical examiner, and designated infection control officer for the reports required by this section, the process to be used to evaluate requests received from emergency care providers and Good Samaritans, and for informing emergency care providers and Good Samaritans as to their obligations to maintain the confidentiality of information received; and

(3) The method by which emergency care providers and Good Samaritans shall be provided information and advice in a timely manner related to the risk of infection from communicable diseases as a result of aid or medical care."; and

Further amend said bill, Page 9, Section 590.750, Line 12, by inserting after all of said line the following:

"[192.800. As used in this section, the following terms mean:
(1) "Communicable disease", an illness due to an infectious agent or its toxic products and transmitted directly or indirectly to a susceptible host from an infected person, animal or arthropod or through the agency of an intermediate host or a vector through the inanimate environment;
(2) "Designated officer", an employee of the department or a city or county health officer, or designee, located in or employed by appropriate agencies serving geographical regions and appointed by the director of the department of health and senior services, whose duties consist of:
(a) Collecting, upon request, facts surrounding possible exposure of a first responder or Good Samaritan to a communicable disease or infection;
(b) Contacting facilities that receive patients or clients of potentially exposed first responders or Good Samaritans to ascertain if a determination has been made as to whether the patient or client has had a communicable disease or infection and to ascertain the results of that determination; and
(c) Notifying the first responder or Good Samaritan as to whether or not there is reason for concern regarding possible exposure;
(3) "First responder", any person trained and authorized by law or rule to render emergency medical assistance or treatment. Such persons may include, but shall not be limited to, emergency first responders, police officers, sheriffs, deputy sheriffs, firefighters, ambulance attendants and attendant drivers, emergency medical technicians, mobile emergency medical technicians, emergency medical technician-paramedics, registered nurses or physicians;
(4) "Good Samaritan", any person who renders emergency medical assistance or aid until such time as relieved of these duties by a first responder;
(5) "Licensed facility", a facility licensed under chapter 197 or a state medical facility.]

[192.802. The department of health and senior services shall ensure that first responders or Good Samaritans are notified if there is reason to believe an exposure has occurred which may present a significant risk of a communicable disease as a result of attending or transporting a patient to a licensed facility. At the request of any first responder, the licensed facility shall notify any such first responder and at the request of any Good Samaritan, the designated officer shall notify such Good Samaritan. Notification will be made as soon as practicable, but not later than forty-eight hours, to the department of health and senior services or a designated officer.]

[192.804. 1. First responders or Good Samaritans who attended or transported a patient who believe that they may have received an exposure which may present a significant risk of a communicable disease by a patient may provide a written request concerning the suspected exposure to either the licensed facility that received the patient or the designated officer, detailing the nature of the alleged exposure. The form shall inform the first responder or Good Samaritan, in bold print, of the provisions of subsections 1 and 6 of section 191.656 regarding confidentiality and consequences of violation of confidentiality provisions. The first responder or Good Samaritan shall be given a copy of the request form.

2. If the licensed facility, designated officer, coroner or medical examiner makes a determination that there was an exposure to a communicable disease, the report to the first responder or Good Samaritan shall provide the name of the communicable disease involved, the date on which the patient was assisted or transported, and any advice or information about the communicable disease as provided by rule by the department of health and senior services and shall, in addition, inform the first responder or the Good Samaritan of the provisions of subsections 1 and 6 of section
191.656 regarding confidentiality and consequences of violation of confidentiality provisions. This section shall not be construed to authorize the disclosure of any identifying information with respect to the patient, first responder or Good Samaritan.

[192.806.  1. The department of health and senior services shall promulgate regulations, pursuant to the provisions of section 192.006 and chapter 536, concerning:
   (1) The type of exposure that would prompt notification of the first responder or Good Samaritan, which shall cover at a minimum, methods of potential transmission of any diseases designated under P.L. 101-381 or diseases additionally identified from the department of health and senior services’ list of communicable diseases;
   (2) The process to be used by the first responder, Good Samaritan, licensed facility, coroner, medical examiner and designated officer for the reports required by this section, the process to be used to evaluate requests received from first responders and Good Samaritans, and for informing first responders and Good Samaritans as to their obligations to maintain the confidentiality of information received;
   (3) The method by which first responders and Good Samaritans shall be provided information and advice in a timely manner related to the risk of infection from communicable diseases as a result of provision of aid or medical care;
   (4) The need for employers of first responders to provide training to employees regarding the use of universal precautions.

2. All licensed facilities, medical examiners, coroners, first responders and Good Samaritans shall be required to comply with the regulations promulgated pursuant to sections 192.800 to 192.808.

[192.808.  1. Sections 192.800 to 192.808 shall not be construed to authorize or require a licensed facility to test any patient for any communicable disease, nor shall mandatory testing of any person be required, except as provided for in sections 191.659, 191.662 and 191.674.

2. All emergency response employees are required to respond to and treat any patient regardless of HIV or other communicable disease infection.

3. Sections 192.800 to 192.808 shall not be construed to require or permit the department of health and senior services or its designated officers to collect information concerning HIV infection in a form that permits the identity of the patient to be determined, except as otherwise provided by law.]; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Rhoads, House Amendment No. 1 was adopted.

Representative Rowden offered House Amendment No. 2.

House Amendment No. 2

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 9, Section 590.750, Line 12, by inserting after said line the following:

"[300.320. A funeral composed of a procession of vehicles shall be identified as such by the display upon the outside of each vehicle of a pennant or other identifying insignia or by such other method as may be determined and designated by the traffic division.]; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Rowden, House Amendment No. 2 was adopted.
Representative Wilson offered **House Amendment No. 3.**

**House Amendment No. 3**

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 1, Section 44.095, Lines 12 and 13, by deleting all of said lines; and

Further amend said section and page, Line 15, by deleting the first occurrence of a comma, ";"; and

Further amend said page, section and line, by deleting the words, "or noncritical incidents,"; and

Further amend said section, Page 2, Lines 21 to 24, by deleting all of said lines and renumbering said section accordingly; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Wilson, **House Amendment No. 3** was adopted.

Representative Torpey offered **House Amendment No. 4.**

**House Amendment No. 4**

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting immediately after said line the following:

"287.243. 1. This section shall be known and may be cited as the "Line of Duty Compensation Act".

2. As used in this section, unless otherwise provided, the following words shall mean:

(1) "Air ambulance pilot", a person certified as an air ambulance pilot in accordance with sections 190.001 to 190.245 and corresponding regulations applicable to air ambulances adopted by the department of health and senior services, division of regulation and licensure, 19 CSR 30-40.005, et seq.;

(2) "Air ambulance registered professional nurse", a person licensed as a registered professional nurse in accordance with sections 335.011 to 335.096 and corresponding regulations adopted by the state board of nursing, 20 CSR 2200-4, et seq., who provides registered professional nursing services as a flight nurse in conjunction with an air ambulance program that is certified in accordance with sections 190.001 to 190.245 and the corresponding regulations applicable to such programs;

(3) "Emergency medical technician", a person licensed in emergency medical care in accordance with standards prescribed by sections 190.001 to 190.245 and by rules adopted by the department of health and senior services under sections 190.001 to 190.245;

(4) "Firefighter", any person, including a volunteer firefighter, employed by the state or a local governmental entity as an employer defined under subsection 1 of section 287.030, or otherwise serving as a member or officer of a fire department either for the purpose of the prevention or control of fire or the underwater recovery of drowning victims;

(5) "Killed in the line of duty", when [a] any person defined in this section loses [one's] **his or her** life [as a result of an injury received in the active performance of his or her duties within the ordinary scope of his or her respective profession while the individual is on duty and but for the individual's performance, death would have not occurred] when:

(a) Death is caused by an accident or the willful act of violence of another;

(b) The law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is in the active performance of his or her duties in his or her respective profession and there is a relationship between the accident or commission of the act of violence and the performance of the duty, even if the individual is off duty; the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is traveling to or from employment; or the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance
registered professional nurse, or firefighter is taking any meal break or other break which takes place while that
individual is on duty;

(c) Death is the natural and probable consequence of the injury; and

(d) Death occurs within three hundred weeks from the date the injury was received.

The term excludes death resulting from the willful misconduct or intoxication of the law enforcement officer, emergency
medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter. The division of
workers' compensation shall have the burden of proving such willful misconduct or intoxication;

(6) "Law enforcement officer", any person employed by the state or a local governmental entity as a police
officer, peace officer certified under chapter 590, or serving as an auxiliary police officer or in some like position
involving the enforcement of the law and protection of the public interest at the risk of that person's life;

(7) "Local governmental entity", includes counties, municipalities, townships, board or other political
subdivision, cities under special charter, or under the commission form of government, fire protection districts,
ambulance districts, and municipal corporations;

(8) "State", the state of Missouri and its departments, divisions, boards, bureaus, commissions, authorities, and
collages and universities;

(9) "Volunteer firefighter", a person having principal employment other than as a firefighter, but who is carried
on the rolls of a regularly constituted fire department either for the purpose of the prevention or control of fire or the
underwater recovery of drowning victims, the members of which are under the jurisdiction of the corporate authorities
of a city, village, incorporated town, or fire protection district. Volunteer firefighter shall not mean an individual who
volunteers assistance without being regularly enrolled as a firefighter.

3. (1) A claim for compensation under this section shall be filed by the estate of the deceased with the division
of workers' compensation not later than one year from the date of death of a law enforcement officer, emergency medical
technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter. If a claim is made within one
year of the date of death of a law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance
registered professional nurse, or firefighter killed in the line of duty, compensation shall be paid, if the division finds that
the claimant is entitled to compensation under this section.

(2) The amount of compensation paid to the claimant shall be twenty-five thousand dollars, subject to
appropriation, for death occurring on or after June 19, 2009.

4. Notwithstanding subsection 3 of this section, no compensation is payable under this section unless a claim
is filed within the time specified under this section setting forth:

(1) The name, address, and title or designation of the position in which the law enforcement officer, emergency medical
technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter was serving at the time
of his or her death;

(2) The name and address of the claimant;

(3) A full, factual account of the circumstances resulting in or the course of events causing the death at issue; and

(4) Such other information that is reasonably required by the division.

When a claim is filed, the division of workers' compensation shall make an investigation for substantiation of matters
set forth in the application.

5. The compensation provided for under this section is in addition to, and not exclusive of, any pension rights,
death benefits, or other compensation the claimant may otherwise be entitled to by law.

6. Neither employers nor workers' compensation insurers shall have subrogation rights against any
compensation awarded for claims under this section. Such compensation shall not be assignable, shall be exempt from
attachment, garnishment, and execution, and shall not be subject to setoff or counterclaim, or be in any way liable for
any debt, except that the division or commission may allow as lien on the compensation, reasonable attorney's fees for
services in connection with the proceedings for compensation if the services are found to be necessary. Such fees are
subject to regulation as set forth in section 287.260.

7. Any person seeking compensation under this section who is aggrieved by the decision of the division of
workers' compensation regarding his or her compensation claim, may make application for a hearing as provided in
section 287.450. The procedures applicable to the processing of such hearings and determinations shall be those
established by this chapter. Decisions of the administrative law judge under this section shall be binding, subject to
review by either party under the provisions of section 287.480.

8. Pursuant to section 23.253 of the Missouri sunset act:

(1) The provisions of the new program authorized under this section shall automatically sunset six years after
June 19, 2009, unless reauthorized by an act of the general assembly; and
(2) If such program is reauthorized, the program authorized under this section shall automatically sunset twelve years after the effective date of the reauthorization of this section; and

(3) This section shall terminate on September first of the calendar year immediately following the calendar year in which the program authorized under this section is sunset.

9. The provisions of this section, unless specified, shall not be subject to other provisions of this chapter.

10. There is hereby created in the state treasury the "Line of Duty Compensation Fund", which shall consist of moneys appropriated to the fund and any voluntary contributions, gifts, or bequests to the fund. The state treasurer shall be custodian of the fund and shall approve disbursements from the fund in accordance with sections 30.170 and 30.180. Upon appropriation, money in the fund shall be used solely for paying claims under this section. Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund. The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.

11. The division shall promulgate rules to administer this section, including but not limited to the appointment of claims to multiple claimants, record retention, and procedures for information requests. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly under chapter 536 are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after June 19, [2009] 2019, shall be invalid and void.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Torpey, House Amendment No. 4 was adopted.

Representative Fitzwater offered House Amendment No. 5.

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting after all of said section and line the following:

"227.411. Highway A connecting Highway 32 and Highway 49 in Iron and Reynolds counties shall be designated the “Latham Memorial Highway”. The department of transportation shall erect and maintain appropriate signs designating such highway, with the costs for such designation to be paid by private donations."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Fitzwater, House Amendment No. 5 was adopted.

Representative Schatz offered House Amendment No. 6.

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting immediately after said line the following:

"301.067. 1. For each trailer or semitrailer there shall be paid an annual fee of seven dollars fifty cents, and in addition thereto such permit fee authorized by law against trailers used in combination with tractors operated under the supervision of the motor carrier and railroad safety division of the department of economic development. The fees
for tractors used in any combination with trailers or semitrailers or both trailers and semitrailers (other than on passenger-
carrying trailers or semitrailers) shall be computed on the total gross weight of the vehicles in the combination with load.

2. Any trailer or semitrailer may at the option of the registrant be registered for a period of three years upon payment of a registration fee of twenty-two dollars and fifty cents.

3. Any trailer as defined in section 301.010 or semitrailer [which is operated coupled to a towing vehicle by a fifth wheel and kingpin assembly or by a trailer converter dolly] may, at the option of the registrant, be registered permanently upon the payment of a registration fee of fifty-two dollars and fifty cents. The permanent plate and registration fee is vehicle specific. The plate and the registration fee paid is nontransferable and nonrefundable, except those covered under the provisions of section 301.442.

301.227. 1. Whenever a vehicle is sold for salvage, dismantling or rebuilding, the purchaser shall forward to the director of revenue within ten days the certificate of ownership or salvage certificate of title and the proper application and fee of eight dollars and fifty cents, and the director shall issue a negotiable salvage certificate of title to the purchaser of the salvaged vehicle. On vehicles purchased during a year that is no more than six years after the manufacturer's model year designation for such vehicle, it shall be mandatory that the purchaser apply for a salvage title. On vehicles purchased during a year that is more than six years after the manufacturer's model year designation for such vehicle, then application for a salvage title shall be optional on the part of the purchaser. Whenever a vehicle is sold for destruction and a salvage certificate of title, junking certificate, or certificate of ownership exists, the seller, if licensed under sections 301.217 to 301.221, shall forward the certificate to the director of revenue within ten days, with the notation of the date sold for destruction and the name of the purchaser clearly shown on the face of the certificate.

2. Whenever a vehicle is classified as "junk", as defined in section 301.010, the purchaser may forward to the director of revenue the salvage certificate of title or certificate of ownership and the director shall issue a negotiable junking certificate [to the purchaser of the vehicle] which shall authorize the holder to possess, transport, or, by assignment, transfer ownership in such parts, scrap, or junk. The director may also issue a junking certificate to a possessor of a vehicle manufactured twenty-six years or more prior to the current model year who has a bill of sale for said vehicle but does not possess a certificate of ownership, provided no claim of theft has been made on the vehicle and the highway patrol has by letter stated the vehicle is not listed as stolen after checking the registration number through its nationwide computer system. Such certificate may be granted within thirty days of the submission of a request.

3. [Upon receipt of a properly completed application for a junking certificate, the director of revenue shall issue to the applicant a junking certificate which shall authorize the holder to possess, transport, or, by assignment, transfer ownership in such parts, scrap or junk, and a certificate of title shall not again be issued for such vehicle; except that, the initial purchaser] Notwithstanding any other provision of law, for any vehicle with a junk or substantially equivalent designation, whether so designated in Missouri or any other state, regardless of whether such designation has been subsequently changed erroneously or by law in this or any other state, the department shall only issue a junking certificate, and a salvage or original certificate of title shall not thereafter be issued for such vehicle. If the vehicle has not previously been designated as junk or any other substantially equivalent designation from this state or any other state, the applicant making the original junking certification application shall, within ninety days, be allowed to rescind [his] the application for a junking certificate by surrendering the junking certificate and apply for a salvage certificate of title in [his] the applicant's name. The seller of a vehicle for which a junking certificate has been applied for or issued shall disclose such fact in writing to any prospective buyers before sale of such vehicle; otherwise the sale shall be voidable at the option of the buyer.

4. No scrap metal operator shall acquire or purchase a motor vehicle or parts thereof without, at the time of such acquisition, receiving the original certificate of title or salvage certificate of title or junking certificate from the seller of the vehicle or parts, unless the seller is a licensee under sections 301.219 to 301.221.

5. All titles and certificates required to be received by scrap metal operators from nonlicensees shall be forwarded by the operator to the director of revenue within ten days of the receipt of the vehicle or parts.

6. The scrap metal operator shall keep a record, for three years, of the seller's name and address, the salvage business license number of the licensee, date of purchase, and any vehicle or parts identification numbers open for inspection as provided in section 301.225.

7. Notwithstanding any other provision of this section, a motor vehicle dealer as defined in section 301.550 and licensed under the provisions of sections 301.550 to 301.572 may negotiate one reassignment of a salvage certificate of title on the back thereof.
8. Notwithstanding the provisions of subsection 1 of this section, an insurance company which settles a claim for a stolen vehicle may apply for and shall be issued a negotiable salvage certificate of title without the payment of any fee upon proper application within thirty days after settlement of the claim for such stolen vehicle. However, if the insurance company upon recovery of a stolen vehicle determines that the stolen vehicle has not sustained damage to the extent that the vehicle would have otherwise been declared a salvage vehicle pursuant to subdivision (51) of section 301.010, then the insurance company may have the vehicle inspected by the Missouri state highway patrol, or other law enforcement agency authorized by the director of revenue, in accordance with the inspection provisions of subsection 9 of section 301.190. Upon receipt of title application, applicable fee, the completed inspection, and the return of any previously issued negotiable salvage certificate, the director shall issue an original title with no salvage or prior salvage designation. Upon the issuance of an original title the director shall remove any indication of the negotiable salvage title previously issued to the insurance company from the department's electronic records.

9. Notwithstanding subsection 4 of this section or any other provision of the law to the contrary, if a motor vehicle is inoperable and is at least ten model years old, or the parts are from a motor vehicle that is inoperable and is at least ten model years old, a scrap metal operator may purchase or acquire such motor vehicle or parts without receiving the original certificate of title, salvage certificate of title, or junking certificate from the seller of the vehicle or parts, provided the scrap metal operator verifies with the department of revenue, via the department's online record access, that the motor vehicle is not subject to any recorded security interest or lien and the scrap metal operator complies with the requirements of this subsection. In lieu of forwarding certificates of titles for such motor vehicles as required by subsection 5 of this section, the scrap metal operator shall forward a copy of the seller's state identification along with a bill of sale to the department of revenue. The bill of sale form shall be designed by the director and such form shall include, but not be limited to, a certification that the motor vehicle is at least ten model years old, is inoperable, is not subject to any recorded security interest or lien, and a certification by the seller that the seller has the legal authority to sell or otherwise transfer the seller's interest in the motor vehicle or parts. Upon receipt of the information required by this subsection, the department of revenue shall cancel any certificate of title and registration for the motor vehicle. If the motor vehicle is inoperable and at least twenty model years old, then the scrap metal operator shall not be required to verify with the department of revenue whether the motor vehicle is subject to any recorded security interests or liens. As used in this subsection, the term "inoperable" means a motor vehicle that is in a rusted, wrecked, discarded, worn out, extensively damaged, dismantled, and mechanically inoperative condition and the vehicle's highest and best use is for scrap purposes. The director of the department of revenue is directed to promulgate rules and regulations to implement and administer the provisions of this section, including but not limited to, the development of a uniform bill of sale. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2012, shall be invalid and void."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

HCS SCS SB 852, as amended, with House Amendment No. 6, pending, was laid over.

HCS SB 660, relating to reproductive health care, was taken up by Representative Swan.

Representative Swan offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Bill No. 660, Page 2, Section 197.730, Line 4, by deleting all of said line and inserting in lieu thereof the following:

"federal funding under 42 U.S.C. Section 1396d(l)(2)(B);"
Further amend said bill, page, and section, Line 20, by deleting the phrase "42 U.S.C 254b(a)(1)" and inserting in lieu thereof the phrase "42 U.S.C. Section 254b(a)(1)"; and

Further amend said bill, page, and section, Line 24, by deleting the comma after the word "funds"; and

Further amend said bill, page, and section, Line 26, by deleting the comma after the phrase "of this section"; and

Further amend said bill, page, and section, Line 34, by deleting the word "also"; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Swan, House Amendment No. 1 was adopted.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 095

Allen  Anderson  Austin  Barnes  Bernskoetter
Berry  Brattin  Brown  Burlison  Cierpion
Conway 104  Cookson  Cornejo  Crawford  Cross
Curtman  Davis  Diehl  Dohrmann  Dugger
Elmer  Engler  Entlicher  Fitzpatrick  Fitzwater
Flanagan  Fraker  Franklin  Frederick  Gannon
Gatschenberger  Gosen  Guernsey  Haahr  Hampton
Hansen  Hicks  Higdon  Hinson  Hoskins
Houghton  Hurst  Johnson  Jones  Justus
Keeney  Kelley 127  Koenig  Kolkmeyer  Korman
Lair  Lant  Lauer  Lichtenegeger  Love
Lynch  McCaherty  McGaugh  Messenger  Miller
Moon  Morris  Neely  Neth  Pfautsch
Phillips  Pike  Pogue  Redmon  Rehder
Reiboldt  Remole  Rhoads  Richardson  Riddle
Ross  Rowden  Rowland  Schatz  Schieber
Shull  Shumake  Solon  Sommer  Spencer
Stream  Swan  Thomson  Torpey  Walker
White  Wieland  Wilson  Zerr  Mr. Speaker

NOES: 047

Anders  Black  Burns  Butler  Carpenter
Colona  Conway 10  Burns  Curtis  Dunn  Ellington
English  Frame  Gardner  Harris  Hubbard
Hummel  Kelly 45  Kirkton  Kratky  LaFaver
May  Mayfield  McCann Beatty  McDonald  McKenna
McNeil  Meredith  Mims  Mitten  Montecillo
Morgan  Nichols  Norr  Otto  Pace
Peters  Pierson  Rizzo  Roorda  Runions
Schieffer  Schupp  Smith  Swearingen  Walton Gray
Webber  Wright

PRESENT: 000
On motion of Representative Swan, HCS SB 660, as amended, was adopted.

On motion of Representative Swan, HCS SB 660, as amended, was read the third time and passed by the following vote:

AYES: 109

NOES: 038

PRESENT: 000
Speaker Jones declared the bill passed.

HCS SS#2 SB 754, relating to health care, was taken up by Representative Flanigan.

Representative Allen offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 5, Section 196.990, Line 90, by inserting after all of said section and line the following:

"208.631. 1. Notwithstanding any other provision of law to the contrary, the MO HealthNet division shall establish a program to pay for health care for uninsured children. Coverage pursuant to sections 208.631 to [208.659] 208.658 is subject to appropriation. The provisions of sections 208.631 to [208.569] 208.658, health care for uninsured children, shall be void and of no effect if there are no funds of the United States appropriated by Congress to be provided to the state on the basis of a state plan approved by the federal government under the federal Social Security Act. If funds are appropriated by the United States Congress, the department of social services is authorized to manage the state children's health insurance program (SCHIP) allotment in order to ensure that the state receives maximum federal financial participation. Children in households with incomes up to one hundred fifty percent of the federal poverty level may meet all Title XIX program guidelines as required by the Centers for Medicare and Medicaid Services. Children in households with incomes of one hundred fifty percent to three hundred percent of the federal poverty level shall continue to be eligible as they were and receive services as they did on June 30, 2007, unless changed by the Missouri general assembly.

2. For the purposes of sections 208.631 to [208.659] 208.658, "children" are persons up to nineteen years of age. "Uninsured children" are persons up to nineteen years of age who are emancipated and do not have access to affordable employer-subsidized health care insurance or other health care coverage or persons whose parent or guardian have not had access to affordable employer-subsidized health care insurance or other health care coverage for their children [for six months] prior to application, are residents of the state of Missouri, and have parents or guardians who meet the requirements in section 208.636. A child who is eligible for MO HealthNet benefits as authorized in section 208.151 is not uninsured for the purposes of sections 208.631 to [208.659] 208.658.

208.636. Parents and guardians of uninsured children eligible for the program established in sections 208.631 to [208.657] 208.658 shall:

1. Furnish to the department of social services the uninsured child's Social Security number or numbers, if the uninsured child has more than one such number;
2. Cooperate with the department of social services in identifying and providing information to assist the state in pursuing any third-party insurance carrier who may be liable to pay for health care;
3. Cooperate with the department of social services, division of child support enforcement in establishing paternity and in obtaining support payments, including medical support; and
4. Demonstrate upon request their child's participation in wellness programs including immunizations and a periodic physical examination. This subdivision shall not apply to any child whose parent or legal guardian objects in writing to such wellness programs including immunizations and an annual physical examination because of religious beliefs or medical contraindications; and
5. Demonstrate annually that their total net worth does not exceed two hundred fifty thousand dollars in total value."
208.640. 1. Parents and guardians of uninsured children with incomes of more than one hundred fifty but less than three hundred percent of the federal poverty level who do not have access to affordable employer-sponsored health care insurance or other affordable health care coverage may obtain coverage for their children under this section. Health insurance plans that do not cover an eligible child's preexisting condition shall not be considered affordable employer-sponsored health care insurance or other affordable health care coverage. For the purposes of sections 208.631 to [208.659] 208.658, "affordable employer-sponsored health care insurance or other affordable health care coverage" refers to health insurance requiring a monthly premium of:

(1) Three percent of one hundred fifty percent of the federal poverty level for a family of three for families with a gross income of more than one hundred fifty and up to one hundred eighty-five percent of the federal poverty level for a family of three;

(2) Four percent of one hundred eighty-five percent of the federal poverty level for a family of three for a family with a gross income of more than one hundred eighty-five and up to two hundred twenty-five percent of the federal poverty level;

(3) Five percent of two hundred twenty-five percent of the federal poverty level for a family of three for a family with a gross income of more than two hundred twenty-five but less than three hundred percent of the federal poverty level.

The parents and guardians of eligible uninsured children pursuant to this section are responsible for a monthly premium as required by annual state appropriation; provided that the total aggregate cost sharing for a family covered by these sections shall not exceed five percent of such family's income for the years involved. No co-payments or other cost sharing is permitted with respect to benefits for well-baby and well-child care including age-appropriate immunizations. Cost-sharing provisions for their children under sections 208.631 to [208.659] 208.658 shall not exceed the limits established by 42 U.S.C. Section 1397cc(e). If a child has exceeded the annual coverage limits for all health care services, the child is not considered insured and does not have access to affordable health insurance within the meaning of this section.

2. The department of social services shall study the expansion of a presumptive eligibility process for children for medical assistance benefits.

208.643. 1. The department of social services shall implement policies establishing a program to pay for health care for uninsured children by rules promulgated pursuant to chapter 536, either statewide or in certain geographic areas, subject to obtaining necessary federal approval and appropriation authority. The rules may provide for a health care services package that includes all medical services covered by section 208.152, except nonemergency transportation.

2. Available income shall be determined by the department of social services by rule, which shall comply with federal laws and regulations relating to the state's eligibility to receive federal funds to implement the insurance program established in sections 208.631 to [208.657] 208.658.

208.646. There shall be a thirty-day waiting period after enrollment for uninsured children in families with an income of more than two hundred twenty-five percent of the federal poverty level before the child becomes eligible for insurance under the provisions of sections 208.631 to [208.660] 208.658. If the parent or guardian with an income of more than two hundred twenty-five percent of the federal poverty level fails to meet the co-payment or premium requirements, the child shall not be eligible for coverage under sections 208.631 to [208.660] 208.658 for [six months] ninety days after the department provides notice of such failure to the parent or guardian.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Allen, House Amendment No. 1 was adopted.
Representative Frederick offered House Amendment No. 2.

House Amendment No. 2

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 2, Section 191.1140, Line 14, by inserting after all of said section and line the following:

"195.070. 1. A physician, podiatrist, dentist, a registered optometrist certified to administer pharmaceutical agents as provided in section 336.220, or an assistant physician in accordance with section 334.037 or a physician assistant in accordance with section 334.747 in good faith and in the course of his or her professional practice only, may prescribe, administer, and dispense controlled substances or he or she may cause the same to be administered or dispensed by an individual as authorized by statute.

2. An advanced practice registered nurse, as defined in section 335.016, but not a certified registered nurse anesthetist as defined in subdivision (8) of section 335.016, who holds a certificate of controlled substance prescriptive authority from the board of nursing under section 335.019 and who is delegated the authority to prescribe controlled substances under a collaborative practice arrangement under section 334.104 may prescribe any controlled substances listed in Schedules III, IV, and V of section 195.017. However, no such certified advanced practice registered nurse shall prescribe controlled substance for his or her own self or family. Schedule III narcotic controlled substance prescriptions shall be limited to a one hundred twenty-hour supply without refill.

3. A veterinarian, in good faith and in the course of the veterinarian's professional practice only, and not for use by a human being, may prescribe, administer, and dispense controlled substances and the veterinarian may cause them to be administered by an assistant or orderly under his or her direction and supervision.

4. A practitioner shall not accept any portion of a controlled substance unused by a patient, for any reason, if such practitioner did not originally dispense the drug.

5. An individual practitioner shall not prescribe or dispense a controlled substance for such practitioner's personal use except in a medical emergency."

Further amend said bill, Page 5, Section 208.798, Line 2, by inserting after all of said line the following:

"334.035. Except as otherwise provided in section 334.036, every applicant for a permanent license as a physician and surgeon shall provide the board with satisfactory evidence of having successfully completed such postgraduate training in hospitals or medical or osteopathic colleges as the board may prescribe by rule.

334.036. 1. For purposes of this section, the following terms shall mean:

(1) "Assistant physician", any medical school graduate who:

(a) Is a resident and citizen of the United States or is a legal resident alien;

(b) Has successfully completed Step 1 and Step 2 of the United States Medical Licensing Examination or the equivalent of such steps of any other board-approved medical licensing examination within the two-year period immediately preceding application for licensure as an assistant physician, but in no event more than three years after graduation from a medical college or osteopathic medical college;

(c) Has not completed an approved postgraduate residency and has successfully completed Step 2 of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the immediately preceding two-year period unless when such two-year anniversary occurs he or she was serving as a resident physician in an accredited residency in the United States and continued to do so within thirty days prior to application for licensure as an assistant physician; and

(d) Has proficiency in the English language;

(2) "Assistant physician collaborative practice arrangement", an agreement between a physician and an assistant physician that meets the requirements of this section and section 334.037;

(3) "Medical school graduate", any person who has graduated from a medical college or osteopathic medical college described in section 334.031.

2. (1) An assistant physician collaborative practice arrangement shall limit the assistant physician to providing only primary care services and only in medically underserved rural or urban areas of this state or in any pilot project areas established in which assistant physicians may practice.

(2) For a physician-assistant physician team working in a rural health clinic under the federal Rural Health Clinic Services Act, P.L. 95-210, as amended:
(a) An assistant physician shall be considered a physician assistant for purposes of regulations of the Centers for Medicare and Medicaid Services (CMS); and

(b) No supervision requirements in addition to the minimum federal law shall be required.

3. (1) For purposes of this section, the licensure of assistant physicians shall take place within processes established by rules of the state board of registration for the healing arts. The board of healing arts is authorized to establish rules under chapter 536 establishing licensure and renewal procedures, supervision, collaborative practice arrangements, fees, and addressing such other matters as are necessary to protect the public and discipline the profession. An application for licensure may be denied or the licensure of an assistant physician may be suspended or revoked by the board in the same manner and for violation of the standards as set forth by section 334.100, or such other standards of conduct set by the board by rule.

(2) Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.

4. An assistant physician shall clearly identify himself or herself as an assistant physician and shall be permitted to use the terms "doctor", "Dr.", or "doc". No assistant physician shall practice or attempt to practice without an assistant physician collaborative practice arrangement, except as otherwise provided in this section and in an emergency situation.

5. The collaborating physician is responsible at all times for the oversight of the activities of and accepts responsibility for primary care services rendered by the assistant physician.

6. The provisions of section 334.037 shall apply to all assistant physician collaborative practice arrangements. To be eligible to practice as an assistant physician, a licensed assistant physician shall enter into an assistant physician collaborative practice arrangement within six months of his or her initial licensure and shall not have more than a six-month time period between collaborative practice arrangements during his or her licensure period. Any renewal of licensure under this section shall include verification of actual practice under a collaborative practice arrangement in accordance with this subsection during the immediately preceding licensure period.

334.037. 1. A physician may enter into collaborative practice arrangements with assistant physicians. Collaborative practice arrangements shall be in the form of written agreements, jointly agreed-upon protocols, or standing orders for the delivery of health care services. Collaborative practice arrangements, which shall be in writing, may delegate to an assistant physician the authority to administer or dispense drugs and provide treatment as long as the delivery of such health care services is within the scope of practice of the assistant physician and is consistent with that assistant physician's skill, training, and competence and the skill and training of the collaborating physician.

2. The written collaborative practice arrangement shall contain at least the following provisions:

(1) Complete names, home and business addresses, zip codes, and telephone numbers of the collaborating physician and the assistant physician;

(2) A list of all other offices or locations besides those listed in subdivision (1) of this subsection where the collaborating physician authorized the assistant physician to prescribe;

(3) A requirement that there shall be posted at every office where the assistant physician is authorized to prescribe, in collaboration with a physician, a prominently displayed disclosure statement informing patients that they may be seen by an assistant physician and have the right to see the collaborating physician;

(4) All specialty or board certifications of the collaborating physician and all certifications of the assistant physician;

(5) The manner of collaboration between the collaborating physician and the assistant physician, including how the collaborating physician and the assistant physician shall:

(a) Engage in collaborative practice consistent with each professional’s skill, training, education, and competence;

(b) Maintain geographic proximity; except, the collaborative practice arrangement may allow for geographic proximity to be waived for a maximum of twenty-eight days per calendar year for rural health clinics as defined by P.L. 95-210, as long as the collaborative practice arrangement includes alternative plans as required in paragraph (c) of this subdivision. Such exception to geographic proximity shall apply only to independent
rural health clinics, provider-based rural health clinics if the provider is a critical access hospital as provided in 42 U.S.C. Section 1395i-4, and provider-based rural health clinics if the main location of the hospital sponsor is greater than fifty miles from the clinic. The collaborating physician shall maintain documentation related to such requirement and present it to the state board of registration for the healing arts when requested; and

(c) Provide coverage during absence, incapacity, infirmity, or emergency by the collaborating physician;

(6) A description of the assistant physician's controlled substance prescriptive authority in collaboration with the physician, including a list of the controlled substances the physician authorizes the assistant physician to prescribe and documentation that it is consistent with each professional's education, knowledge, skill, and competence;

(7) A list of all other written practice agreements of the collaborating physician and the assistant physician;

(8) The duration of the written practice agreement between the collaborating physician and the assistant physician;

(9) A description of the time and manner of the collaborating physician's review of the assistant physician's delivery of health care services. The description shall include provisions that the assistant physician shall submit a minimum of ten percent of the charts documenting the assistant physician's delivery of health care services to the collaborating physician for review by the collaborating physician, or any other physician designated in the collaborative practice arrangement, every fourteen days; and

(10) The collaborating physician, or any other physician designated in the collaborative practice arrangement, shall review every fourteen days a minimum of twenty percent of the charts in which the assistant physician prescribes controlled substances. The charts reviewed under this subdivision may be counted in the number of charts required to be reviewed under subdivision (9) of this subsection.

3. The state board of registration for the healing arts under section 334.125 shall promulgate rules regulating the use of collaborative practice arrangements for assistant physicians. Such rules shall specify:

(1) Geographic areas to be covered;

(2) The methods of treatment that may be covered by collaborative practice arrangements;

(3) In conjunction with deans of medical schools and primary care residency program directors in the state, the development and implementation of educational methods and programs undertaken during the collaborative practice service which shall facilitate the advancement of the assistant physician's medical knowledge and capabilities, and which may lead to credit toward a future residency program for programs that deem such documented educational achievements acceptable; and

(4) The requirements for review of services provided under collaborative practice arrangements, including delegating authority to prescribe controlled substances.

Any rules relating to dispensing or distribution of medications or devices by prescription or prescription drug orders under this section shall be subject to the approval of the state board of pharmacy. Any rules relating to dispensing or distribution of controlled substances by prescription or prescription drug orders under this section shall be subject to the approval of the department of health and senior services and the state board of pharmacy. The state board of registration for the healing arts shall promulgate rules applicable to assistant physicians that shall be consistent with guidelines for federally funded clinics. The rulemaking authority granted in this subsection shall not extend to collaborative practice arrangements of hospital employees providing inpatient care within hospitals as defined in chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

4. The state board of registration for the healing arts shall not deny, revoke, suspend, or otherwise take disciplinary action against a collaborating physician for health care services delegated to an assistant physician provided the provisions of this section and the rules promulgated thereunder are satisfied.

5. Within thirty days of any change and on each renewal, the state board of registration for the healing arts shall require every physician to identify whether the physician is engaged in any collaborative practice arrangement, including collaborative practice arrangements delegating the authority to prescribe controlled substances, and also report to the board the name of each assistant physician with whom the physician has entered into such arrangement. The board may make such information available to the public. The board shall track the reported information and may routinely conduct random reviews of such arrangements to ensure that arrangements are carried out for compliance under this chapter.
6. A collaborating physician shall not enter into a collaborative practice arrangement with more than three full-time equivalent assistant physicians. Such limitation shall not apply to collaborative arrangements of hospital employees providing inpatient care service in hospitals as defined in chapter 197 or population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

7. The collaborating physician shall determine and document the completion of at least a one-month period of time during which the assistant physician shall practice with the collaborating physician continuously present before practicing in a setting where the collaborating physician is not continuously present. Such limitation shall not apply to collaborative arrangements of providers of population-based public health services as defined by 20 CSR 2150-5.100 as of April 30, 2008.

8. No agreement made under this section shall supersede current hospital licensing regulations governing hospital medication orders under protocols or standing orders for the purpose of delivering inpatient or emergency care within a hospital as defined in section 197.020 if such protocols or standing orders have been approved by the hospital's medical staff and pharmaceutical therapeutics committee.

9. No contract or other agreement shall require a physician to act as a collaborating physician for an assistant physician against the physician's will. A physician shall have the right to refuse to act as a collaborating physician, without penalty, for a particular assistant physician. No contract or other agreement shall limit the collaborating physician's ultimate authority over any protocols or standing orders or in the delegation of the physician's authority to any assistant physician, but such requirement shall not authorize a physician in implementing such protocols, standing orders, or delegation to violate applicable standards for safe medical practice established by a hospital's medical staff.

10. No contract or other agreement shall require any assistant physician to serve as a collaborating assistant physician for any collaborating physician against the assistant physician's will. An assistant physician shall have the right to refuse to collaborate, without penalty, with a particular physician.

11. All collaborating physicians and assistant physicians in collaborative practice arrangements shall wear identification badges while acting within the scope of their collaborative practice arrangement. The identification badges shall prominently display the licensure status of such collaborating physicians and assistant physicians.

12. (1) An assistant physician assistant with a certificate of controlled substance prescriptive authority as provided in this section may prescribe any controlled substance listed in schedule III, IV, or V of section 195.017 when delegated the authority to prescribe controlled substances in a collaborative practice arrangement. Such authority shall be filed with the state board of registration for the healing arts. The collaborating physician shall maintain the right to limit a specific scheduled drug or scheduled drug category that the assistant physician is permitted to prescribe. Any limitations shall be listed in the collaborative practice arrangement. Assistant physicians shall not prescribe controlled substances for themselves or members of their families. Schedule III controlled substances shall be limited to a five-day supply without refill. Assistant physicians who are authorized to prescribe controlled substances under this section shall register with the federal Drug Enforcement Administration and the state bureau of narcotics and dangerous drugs, and shall include the Drug Enforcement Administration registration number on prescriptions for controlled substances.

(2) The collaborating physician shall be responsible to determine and document the completion of at least one hundred twenty hours in a four-month period by the assistant physician during which the assistant physician shall practice with the collaborating physician on-site prior to prescribing controlled substances when the collaborating physician is not on-site. Such limitation shall not apply to assistant physicians of population-based public health services as defined in 20 CSR 2150-5.100 as of April 30, 2009.

(3) An assistant physician shall receive a certificate of controlled substance prescriptive authority from the state board of registration for the healing arts upon verification of licensure under section 334.036.

334.735. 1. As used in sections 334.735 to 334.749, the following terms mean:
   (1) "Applicant", any individual who seeks to become licensed as a physician assistant;
   (2) "Certification" or "registration", a process by a certifying entity that grants recognition to applicants meeting predetermined qualifications specified by such certifying entity;
   (3) "Certifying entity", the nongovernmental agency or association which certifies or registers individuals who have completed academic and training requirements;
   (4) "Department", the department of insurance, financial institutions and professional registration or a designated agency thereof;
(5) "License", a document issued to an applicant by the board acknowledging that the applicant is entitled to practice as a physician assistant;

(6) "Physician assistant", a person who has graduated from a physician assistant program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation or by its successor agency, who has passed the certifying examination administered by the National Commission on Certification of Physician Assistants and has active certification by the National Commission on Certification of Physician Assistants who provides health care services delegated by a licensed physician. A person who has been employed as a physician assistant for three years prior to August 28, 1989, who has passed the National Commission on Certification of Physician Assistants examination, and has active certification of the National Commission on Certification of Physician Assistants;

(7) "Recognition", the formal process of becoming a certifying entity as required by the provisions of sections 334.735 to 334.749;

(8) "Supervision", control exercised over a physician assistant working with a supervising physician and oversight of the activities of and accepting responsibility for the physician assistant's delivery of care. The physician assistant shall only practice at a location where the physician routinely provides patient care, except existing patients of the supervising physician in the patient's home and correctional facilities. The supervising physician must be immediately available in person or via telecommunication during the time the physician assistant is providing patient care. Prior to commencing practice, the supervising physician and physician assistant shall attest on a form provided by the board that the physician shall provide supervision appropriate to the physician assistant's training and that the physician assistant shall not practice beyond the physician assistant's training and experience. Appropriate supervision shall require the supervising physician to be working within the same facility as the physician assistant for at least four hours within one calendar day for every fourteen days on which the physician assistant provides patient care as described in subsection 3 of this section. Only days in which the physician assistant provides patient care as described in subsection 3 of this section shall be counted toward the fourteen-day period. The requirement of appropriate supervision shall be applied so that no more than thirteen calendar days in which a physician assistant provides patient care shall pass between the physician's four hours working within the same facility. The board shall promulgate rules pursuant to chapter 536 for documentation of joint review of the physician assistant activity by the supervising physician and the physician assistant.

2. (1) A supervision agreement shall limit the physician assistant to practice only at locations described in subdivision (8) of subsection 1 of this section, where the supervising physician is no further than fifty miles by road using the most direct route available and where the location is not so situated as to create an impediment to effective intervention and supervision of patient care or adequate review of services.

(2) For a physician-physician assistant team working in a rural health clinic under the federal Rural Health Clinic Services Act, P.L. 95-210, as amended, no supervision requirements in addition to the minimum federal law shall be required.

3. The scope of practice of a physician assistant shall consist only of the following services and procedures:

(1) Taking patient histories;
(2) Performing physical examinations of a patient;
(3) Performing or assisting in the performance of routine office laboratory and patient screening procedures;
(4) Performing routine therapeutic procedures;
(5) Recording diagnostic impressions and evaluating situations calling for attention of a physician to institute treatment procedures;
(6) Instructing and counseling patients regarding mental and physical health using procedures reviewed and approved by a licensed physician;
(7) Assisting the supervising physician in institutional settings, including reviewing of treatment plans, ordering of tests and diagnostic laboratory and radiological services, and ordering of therapies, using procedures reviewed and approved by a licensed physician;
(8) Assisting in surgery;
(9) Performing such other tasks not prohibited by law under the supervision of a licensed physician as the physician's assistant has been trained and is proficient to perform; and
(10) Physician assistants shall not perform or prescribe abortions.

4. Physician assistants shall not prescribe nor dispense any drug, medicine, device or therapy unless pursuant to a physician supervision agreement in accordance with the law, nor prescribe lenses, prisms or contact lenses for the aid, relief or correction of vision or the measurement of visual power or visual efficiency of the human eye, nor administer or monitor general or regional block anesthesia during diagnostic tests, surgery or obstetric procedures. Prescribing and dispensing of drugs, medications, devices or therapies by a physician assistant shall be pursuant to a
physician assistant supervision agreement which is specific to the clinical conditions treated by the supervising physician and the physician assistant shall be subject to the following:

(1) A physician assistant shall only prescribe controlled substances in accordance with section 334.747;
(2) The types of drugs, medications, devices or therapies prescribed or dispensed by a physician assistant shall be consistent with the scopes of practice of the physician assistant and the supervising physician;
(3) All prescriptions shall conform with state and federal laws and regulations and shall include the name, address and telephone number of the physician assistant and the supervising physician;
(4) A physician assistant, or advanced practice registered nurse as defined in section 335.016 may request, receive and sign for noncontrolled professional samples and may distribute professional samples to patients;
(5) A physician assistant shall not prescribe any drugs, medicines, devices or therapies the supervising physician is not qualified or authorized to prescribe; and
(6) A physician assistant may only dispense starter doses of medication to cover a period of time for seventy-two hours or less.

5. A physician assistant shall clearly identify himself or herself as a physician assistant and shall not use or permit to be used in the physician assistant's behalf the terms "doctor", "Dr." or "doc" nor hold himself or herself out in any way to be a physician or surgeon. No physician assistant shall practice or attempt to practice without physician supervision or in any location where the supervising physician is not immediately available for consultation, assistance and intervention, except as otherwise provided in this section, and in an emergency situation, nor shall any physician assistant bill a patient independently or directly for any services or procedure by the physician assistant; except that, nothing in this subsection shall be construed to prohibit a physician assistant from enrolling with the department of social services as a MO HealthNet provider while acting under a supervision agreement between the physician and physician assistant.

6. For purposes of this section, the licensing of physician assistants shall take place within processes established by the state board of registration for the healing arts through rule and regulation. The board of healing arts is authorized to establish rules pursuant to chapter 356 establishing licensing and renewal procedures, supervision, supervision agreements, fees, and addressing such other matters as are necessary to protect the public and discipline the profession. An application for licensing may be denied or the license of a physician assistant may be suspended or revoked by the board in the same manner and for violation of the standards as set forth by section 334.100, or such other standards of conduct set by the board by rule or regulation. Persons licensed pursuant to the provisions of chapter 335 shall not be required to be licensed as physician assistants. All applicants for physician assistant licensure who complete a physician assistant training program after January 1, 2008, shall have a master's degree from a physician assistant program.

7. "Physician assistant supervision agreement" means a written agreement, jointly agreed-upon protocols or standing order between a supervising physician and a physician assistant, which provides for the delegation of health care services from a supervising physician to a physician assistant and the review of such services. The agreement shall contain at least the following provisions:

(1) Complete names, home and business addresses, zip codes, telephone numbers, and state license numbers of the supervising physician and the physician assistant;
(2) A list of all offices or locations where the physician routinely provides patient care, and in which of such offices or locations the supervising physician has authorized the physician assistant to practice;
(3) All specialty or board certifications of the supervising physician;
(4) The manner of supervision between the supervising physician and the physician assistant, including how the supervising physician and the physician assistant shall:
   (a) Attest on a form provided by the board that the physician shall provide supervision appropriate to the physician assistant's training and experience and that the physician assistant shall not practice beyond the scope of the physician assistant's training and experience nor the supervising physician's capabilities and training; and
   (b) Provide coverage during absence, incapacity, infirmity, or emergency by the supervising physician;
   (5) The duration of the supervision agreement between the supervising physician and physician assistant; and
   (6) A description of the time and manner of the supervising physician's review of the physician assistant's delivery of health care services. Such description shall include provisions that the supervising physician, or a designated supervising physician listed in the supervision agreement review a minimum of ten percent of the charts of the physician assistant's delivery of health care services every fourteen days.
8. When a physician assistant supervision agreement is utilized to provide health care services for conditions other than acute self-limited or well-defined problems, the supervising physician or other physician designated in the supervision agreement shall see the patient for evaluation and approve or formulate the plan of treatment for new or significantly changed conditions as soon as practical, but in no case more than two weeks after the patient has been seen by the physician assistant.

9. At all times the physician is responsible for the oversight of the activities of, and accepts responsibility for, health care services rendered by the physician assistant.

10. It is the responsibility of the supervising physician to determine and document the completion of at least a one-month period of time during which the licensed physician assistant shall practice with a supervising physician continuously present before practicing in a setting where a supervising physician is not continuously present.

11. No contract or other agreement shall require a physician to act as a supervising physician for a physician assistant against the physician's will. A physician shall have the right to refuse to act as a supervising physician, without penalty, for a particular physician assistant. No contract or other agreement shall limit the supervising physician's ultimate authority over any protocols or standing orders or in the delegation of the physician's authority to any physician assistant, but this requirement shall not authorize a physician in implementing such protocols, standing orders, or delegation to violate applicable standards for safe medical practice established by the hospital's medical staff.

12. Physician assistants shall file with the board a copy of their supervising physician form.

13. No physician shall be designated to serve as supervising physician for more than three full-time equivalent licensed physician assistants. This limitation shall not apply to physician assistant agreements of hospital employees providing inpatient care service in hospitals as defined in chapter 197.

Further amend said bill, Page 13, Section 338.220, Line 54, by inserting after all of said section and line the following:

"Section 1. 1. As used in this section, the following terms shall mean:
(1) "Assistant physician", a person licensed to practice under section 334.036 in a collaborative practice arrangement under section 334.037;
(2) "Department", the department of health and senior services;
(3) "Medically underserved area":
  (a) An area in this state with a medically underserved population;
  (b) An area in this state designated by the United States secretary of health and human services as an area with a shortage of personal health services;
  (c) A population group designated by the United States secretary of health and human services as having a shortage of personal health services;
  (d) An area designated under state or federal law as a medically underserved community; or
  (e) An area that the department considers to be medically underserved based on relevant demographic, geographic, and environmental factors;
(4) "Primary care", physician services in family practice, general practice, internal medicine, pediatrics, obstetrics, or gynecology;
(5) "Start-up money", a payment made by a county or municipality in this state which includes a medically underserved area for reasonable costs incurred for the establishment of a medical clinic, ancillary facilities for diagnosing and treating patients, and payment of physicians, assistant physicians, and any support staff.

2. (1) The department shall establish and administer a program under this section to increase the number of medical clinics in medically underserved areas. A county or municipality in this state that includes a medically underserved area may establish a medical clinic in the medically underserved area by contributing start-up money for the medical clinic and having such contribution matched wholly or partly by grant moneys from the medical clinics in medically underserved areas fund established in subsection 3 of this section. The department shall seek all available moneys from any source whatsoever, including, but not limited to, moneys from health care foundations to assist in funding the program.

(2) A participating county or municipality that includes a medically underserved area may provide start-up money for a medical clinic over a two-year period. The department shall not provide more than one hundred thousand dollars to such county or municipality in a fiscal year unless the department makes a specific finding of need in the medically underserved area."
(3) The department shall establish priorities so that the counties or municipalities which include the neediest medically underserved areas eligible for assistance under this section are assured the receipt of a grant.

3. (1) There is hereby created in the state treasury the "Medical Clinics in Medically Underserved Areas Fund", which shall consist of any state moneys appropriated, gifts, grants, donations, or any other contribution from any source for such purpose. The state treasurer shall be custodian of the fund. In accordance with sections 30.170 and 30.180, the state treasurer may approve disbursements. The fund shall be a dedicated fund and, upon appropriation, money in the fund shall be used solely for the administration of this section.

(2) Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund.

(3) The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.

4. To be eligible to receive a matching grant from the department, a county or municipality that includes a medically underserved area shall:

(1) Apply for the matching grant; and

(2) Provide evidence satisfactory to the department that it has entered into an agreement or combination of agreements with a collaborating physician or physicians for the collaborating physician or physicians and assistant physician or assistant physicians in accordance with a collaborative practice arrangement under section 334.037 to provide primary care in the medically underserved area for at least two years.

5. The department shall promulgate rules necessary for the implementation of this section, including rules addressing:

(1) Eligibility criteria for a medically underserved area;

(2) A requirement that a medical clinic utilize an assistant physician in a collaborative practice arrangement under section 334.037;

(3) Minimum and maximum county or municipality contributions to the start-up money for a medical clinic to be matched with grant moneys from the state;

(4) Conditions under which grant moneys shall be repaid by a county or municipality for failure to comply with the requirements for receipt of such grant moneys;

(5) Procedures for disbursement of grant moneys by the department;

(6) The form and manner in which a county or municipality shall make its contribution to the start-up money; and

(7) Requirements for the county or municipality to retain interest in any property, equipment, or durable goods for seven years including, but not limited to, the criteria for a county or municipality to be excused from such retention requirement.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Frederick, House Amendment No. 2 was adopted.

Representative Scharnhorst offered House Amendment No. 3.

House Amendment No. 3

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 1, Section A, Line 4, by inserting after all of said section and line the following:

"191.761. 1. Beginning July 1, 2015, the department of health and senior services shall provide a courier service to transport collected, donated umbilical cord blood samples to a nonprofit umbilical cord blood bank located in a city not within a county in existence as of the effective date of this section. The collection sites shall only be those facilities designated and trained by the blood bank in the collection and handling of umbilical cord blood specimens.

2. The department may promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with
the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule
are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted
after August 28, 2014, shall be invalid and void.

197.168. Each year between October first and March first and in accordance with the latest
recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and
Prevention, each hospital licensed under this chapter shall offer, prior to discharge and with the approval of the
attending physician or other practitioner authorized to order vaccinations or as authorized by physician-
approved hospital policies or protocols for influenza vaccinations pursuant to state hospital regulations,
immunizations against influenza virus to all inpatients sixty-five years of age and older unless contraindicated
for such patient and contingent upon the availability of the vaccine."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Scharnhorst, House Amendment No. 3 was adopted.

Representative Stream offered House Amendment No. 4.

House Amendment No. 4

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 13, Section 338.220,
Line 54, by inserting after all of said section and line the following:

"376.845. 1. This section shall be known and may be cited as "Katie's Law".
2. For the purposes of this section the following terms shall mean:
(1) "Eating disorder", anorexia nervosa, bulimia nervosa, binge eating disorder, eating disorders not
otherwise specified, and any other severe eating disorder contained in the most recent version of the Diagnostic
and Statistical Manual of Mental Disorders published by the American Psychiatric Association;
(2) "Health benefit plan", shall have the same meaning as such term is defined in section 376.1350;
however, for purposes of this section "health benefit plan" does not include a supplemental insurance policy,
including a life care contract, accident-only policy, specified disease policy, hospital policy providing a fixed daily
benefit only, Medicare supplement policy, long-term care policy, short-term major medical policy of six months
or less duration, or any other supplemental policy;
(3) "Health carrier", shall have the same meaning as such term is defined in section 376.1350;
(4) "Medical care", health care services needed to diagnose, prevent, treat, cure, or relieve physical
manifestations of an eating disorder, and shall include inpatient hospitalization, partial hospitalization, residential
care, intensive outpatient treatment, follow-up outpatient care and counseling;
(5) "Nutritional care", counseling and consultation services provided by a licensed and registered
dietitian;
(6) "Pharmacy care", counseling and consultation services provided by a licensed and Registered
Dietitian. "Pharmacy care" includes medications used to address symptoms of an eating disorder prescribed by
a licensed physician, and any health-related services deemed medically necessary to determine the need or
effectiveness of the medications, but only to the extent that such medications are included in the insured's health
benefit plan;
(7) "Psychiatric care", direct or consultative services provided by a psychiatrist licensed in the state in
which the psychiatrist practices, and shall include inpatient hospitalization, partial hospitalization, residential
care, intensive outpatient treatment, follow-up outpatient care and counseling;
(8) "Therapy", behavioral interventions provided by a therapist licensed in the state in which the
therapist practices;
(9) "Treatment of eating disorders", care prescribed or ordered for an individual diagnosed with an
eating disorder by a licensed physician, psychologist, psychiatrist, or therapist, pursuant to the powers granted
under such licensed physician's, psychologist's, psychiatrist's, or therapist's license, including, but not limited to:
(a) Medical care;
(b) Psychological care;
(c) Psychiatric care;
(d) Nutritional care;
(e) Therapy;
(f) Pharmacy care.

3. In accordance with the provisions of section 376.1550, all health benefit plans that are delivered, issued for delivery, continued or renewed, if written inside the state of Missouri, or written outside the state of Missouri but covering Missouri residents, shall provide coverage for the diagnosis and treatment of eating disorders as required in section 376.1550.

4. (1) Coverage provided under this section is limited to medically necessary treatment that is ordered by a licensed treating physician, psychologist, psychiatrist, or therapist, pursuant to the powers granted under such licensed physician's, psychologist's, psychiatrist's, or therapist's license, in accordance with a treatment plan.

(2) The treatment plan, upon request by the health benefit plan or health carrier, shall include all elements necessary for the health benefit plan or health carrier to pay claims. Such elements include, but are not limited to, a diagnosis, proposed treatment by type, frequency and duration of treatment, and goals.

(3) If the individual is receiving treatment for an eating disorder, a health carrier shall have the right to review the treatment plan not more than once every six months unless the health carrier and the individual's treating physician, psychologist, psychiatrist, or therapist agree that a more frequent review is necessary. Any such agreement regarding the right to review a treatment plan more frequently shall only apply to a particular individual being treated for an eating disorder and shall not apply to all individuals being treated for eating disorders by a provider. The cost of obtaining any review or treatment plan shall be borne by the health benefit plan or health carrier, as applicable.

(4) Coverage provided under this section shall not be subject to any limits on the number of days of medically necessary treatment, except as provided in the treatment plan.

5. The provisions of sections 376.1350 to 376.1399 shall apply to this section. Medical necessity determinations for treatment of eating disorders shall not solely be based upon a patient's weight or weight level. Medical necessity determinations shall consider the overall medical and psychological needs of the individual with an eating disorder. Coverage shall include integrated modalities of the various types of treatments of eating disorders as defined in this section, when such treatment is deemed medically or psychiatrically necessary by the patient's licensed physician, psychologist, psychiatrist, or therapist in accordance with the Practice Guidelines for the Treatment of Patients with Eating Disorders adopted by the American Psychiatric Association.

6. (1) By June 1, 2016, and every June first thereafter until 2021, the department of insurance, financial institutions and professional registration shall submit a report to the general assembly regarding the implementation of the coverage required under this section. The report shall include, but shall not be limited to, the following:

(a) The total number of insureds diagnosed with an eating disorder;
(b) The total cost of all claims paid out in the immediately preceding calendar year for coverage required by this section;
(c) The cost of such coverage per insured per month; and
(d) The average cost per insured for coverage of eating disorders;

(2) All health carriers and health benefit plans subject to the provisions of this section shall provide the department with the data requested by the department for inclusion in the annual report.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Stream, House Amendment No. 4 was adopted.
Representative Franklin offered **House Amendment No. 5.**

**House Amendment No. 5**

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 5, Section 196.990, Line 90, by inserting after all of said section and line the following:

"208.662. 1. There is hereby established within the department of social services the "Show-Me Healthy Babies Program" as a separate children's health insurance program (CHIP) for any low-income unborn child. The program shall be established under the authority of Title XXI of the federal Social Security Act, the State Children's Health Insurance Program, as amended, and 42 CFR 457.1.

2. For an unborn child to be enrolled in the show-me healthy babies program, his or her mother shall not be eligible for coverage under Title XIX of the federal Social Security Act, the Medicaid program, as it is administered by the state, and shall not have access to affordable employer-subsidized health care insurance or other affordable health care coverage that includes coverage for the unborn child. In addition, the unborn child shall be in a family with income eligibility of no more than three hundred percent of the federal poverty level, or the equivalent modified adjusted gross income, unless the income eligibility is set lower by the general assembly through appropriations. In calculating family size as it relates to income eligibility, the family shall include, in addition to other family members, the unborn child, or in the case of a mother with a multiple pregnancy, all unborn children.

3. Coverage for an unborn child enrolled in the show-me healthy babies program shall include all prenatal care and pregnancy-related services that benefit the health of the unborn child and that promote healthy labor, delivery, and birth. Coverage need not include services that are solely for the benefit of the pregnant mother, that are unrelated to maintaining or promoting a healthy pregnancy, and that provide no benefit to the unborn child. However, the department may include pregnancy-related assistance as defined in 42 U.S.C. 1397ll.

4. There shall be no waiting period before an unborn child may be enrolled in the show-me healthy babies program. In accordance with the definition of child in 42 CFR 457.10, coverage shall include the period from conception to birth. The department shall develop a presumptive eligibility procedure for enrolling an unborn child. There shall be verification of the pregnancy.

5. Coverage for the child shall continue for up to one year after birth, unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations.

6. Pregnancy-related and postpartum coverage for the mother shall begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth day after the pregnancy ends, unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations. The department may include pregnancy-related assistance as defined in 42 U.S.C. 1397ll.

7. The department shall provide coverage for an unborn child enrolled in the show-me healthy babies program in the same manner in which the department provides coverage for the children's health insurance program (CHIP) in the county of the primary residence of the mother.

8. The department shall provide information about the show-me healthy babies program to maternity homes as defined in section 135.600, pregnancy resource centers as defined in section 135.630, and other similar agencies and programs in the state that assist unborn children and their mothers. The department shall consider allowing such agencies and programs to assist in the enrollment of unborn children in the program, and in making determinations about presumptive eligibility and verification of the pregnancy.

9. Within sixty days after the effective date of this section, the department shall submit a state plan amendment or seek any necessary waivers from the federal Department of Health and Human Services requesting approval for the show-me healthy babies program.

10. At least annually, the department shall prepare and submit a report to the governor, the speaker of the house of representatives, and the president pro tempore of the senate analyzing and projecting the cost savings and benefits, if any, to the state, counties, local communities, school districts, law enforcement agencies, correctional centers, health care providers, employers, other public and private entities, and persons by enrolling unborn children in the show-me healthy babies program. The analysis and projection of cost savings and benefits, if any, may include but need not be limited to:

(1) The higher federal matching rate for having an unborn child enrolled in the show-me healthy babies program versus the lower federal matching rate for a pregnant woman being enrolled in MO HealthNet or other federal programs;
(2) The efficacy in providing services to unborn children through managed care organizations, group or individual health insurance providers or premium assistance, or through other nontraditional arrangements of providing health care;

(3) The change in the proportion of unborn children who receive care in the first trimester of pregnancy due to a lack of waiting periods, by allowing presumptive eligibility, or by removal of other barriers, and any resulting or projected decrease in health problems and other problems for unborn children and women throughout pregnancy; at labor, delivery, and birth; and during infancy and childhood;

(4) The change in healthy behaviors by pregnant women, such as the cessation of the use of tobacco, alcohol, illicit drugs, or other harmful practices, and any resulting or projected short-term and long-term decrease in birth defects; poor motor skills; vision, speech, and hearing problems; breathing and respiratory problems; feeding and digestive problems; and other physical, mental, educational, and behavioral problems; and

(5) The change in infant and maternal mortality, pre-term births and low birth weight babies and any resulting or projected decrease in short-term and long-term medical and other interventions.

11. The show-me healthy babies program shall not be deemed an entitlement program, but instead shall be subject to a federal allotment or other federal appropriations and matching state appropriations.

12. Nothing in this section shall be construed as obligating the state to continue the show-me healthy babies program if the allotment or payments from the federal government end or are not sufficient for the program to operate, or if the general assembly does not appropriate funds for the program.

13. Nothing in this section shall be construed as expanding MO HealthNet or fulfilling a mandate imposed by the federal government on the state."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Franklin, House Amendment No. 5 was adopted.

Representative Kelly (45) offered House Amendment No. 6.

House Amendment No. 6

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 1, Section A, Line 4, by inserting after all of said section and line the following:

"174.335. 1. Beginning with the 2004-2005 school year and for each school year thereafter, every public institution of higher education in this state shall require all students who reside in on-campus housing to [sign a written waiver stating that the institution of higher education has provided the student, or if the student is a minor, the student's parents or guardian, with detailed written information on the risks associated with meningococcal disease and the availability and effectiveness of] have received the meningococcal vaccine unless a signed statement of medical or religious exemption is on file with the institution's administration. A student shall be exempted from the immunization requirement of this section upon signed certification by a physician licensed under chapter 334, indicating that either the immunization would seriously endanger the student’s health or life or the student has documented the disease or laboratory evidence of immunity to the disease. A student shall be exempted from the immunization requirement of this section if he or she objects in writing to the institution’s administration that immunization violates his or her religious beliefs.

2. [Any student who elects to receive the meningococcal vaccine shall not be required to sign a waiver referenced in subsection 1 of this section and shall present a record of said vaccination to the institution of higher education.

3. Each public university or college in this state shall maintain records on the meningococcal vaccination status of every student residing in on-campus housing at the university or college, including any written waivers executed pursuant to subsection 1 of this section.

4. Nothing in this section shall be construed as requiring any institution of higher education to provide or pay for vaccinations against meningococcal disease."
191.761. 1. Beginning July 1, 2015, the department of health and senior services shall provide a courier service to transport collected, donated umbilical cord blood samples to a nonprofit umbilical cord blood bank located in a city not within a county in existence as of the effective date of this section. The collection sites shall only be those facilities designated and trained by the blood bank in the collection and handling of umbilical cord blood specimens.

2. The department may promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.

Further amend said bill, Page 5, Section 196.990, Line 90, by inserting after all of said section and line the following:

"197.168. Each year between October first and March first and in accordance with the latest recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, each hospital licensed under this chapter shall offer, prior to discharge and with the approval of the attending physician or other practitioner authorized to order vaccinations or as authorized by physician-approved hospital policies or protocols for influenza vaccinations pursuant to state hospital regulations, immunizations against influenza virus to all inpatients sixty-five years of age and older unless contraindicated for such patient and contingent upon the availability of the vaccine."; and

Further amend said bill by amending the title, enacting clause, andintersectional references accordingly.

On motion of Representative Kelly (45), House Amendment No. 6 was adopted.

Representative McManus offered House Amendment No. 7.

House Amendment No. 7

AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 754, Page 1, Section A, Line 4, by inserting after all of said line the following:

"105.711. 1. There is hereby created a "State Legal Expense Fund" which shall consist of moneys appropriated to the fund by the general assembly and moneys otherwise credited to such fund pursuant to section 105.716.

2. Moneys in the state legal expense fund shall be available for the payment of any claim or any amount required by any final judgment rendered by a court of competent jurisdiction against:

(1) The state of Missouri, or any agency of the state, pursuant to section 536.050 or 536.087 or section 537.600;

(2) Any officer or employee of the state of Missouri or any agency of the state, including, without limitation, elected officials, appointees, members of state boards or commissions, and members of the Missouri National Guard upon conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state, or any agency of the state, provided that moneys in this fund shall not be available for payment of claims made under chapter 287;

(3) (a) Any physician, psychiatrist, pharmacist, podiatrist, dentist, nurse, or other health care provider licensed to practice in Missouri under the provisions of chapter 330, 332, 334, 335, 336, 337 or 338 who is employed by the state of Missouri or any agency of the state under formal contract to conduct disability reviews on behalf of the department of elementary and secondary education or provide services to patients or inmates of state correctional facilities on a part-time basis, and any physician, psychiatrist, pharmacist, podiatrist, dentist, nurse, or other health care provider licensed to practice in Missouri under the provisions of chapter 330, 332, 334, 335, 336, 337, or 338 who is under formal contract to provide services to patients or inmates at a county jail on a part-time basis;
(b) Any physician licensed to practice medicine in Missouri under the provisions of chapter 334 and his professional corporation organized pursuant to chapter 356 who is employed by or under contract with a city or county health department organized under chapter 192 or chapter 205, or a city health department operating under a city charter, or a combined city-county health department to provide services to patients for medical care caused by pregnancy, delivery, and child care, if such medical services are provided by the physician pursuant to the contract without compensation or the physician is paid from no other source than a governmental agency except for patient co-payments required by federal or state law or local ordinance;

(c) Any physician licensed to practice medicine in Missouri under the provisions of chapter 334 who is employed by or under contract with a federally funded community health center organized under Section 315, 329, 330 or 340 of the Public Health Services Act (42 U.S.C. 216, 254c) to provide services to patients for medical care caused by pregnancy, delivery, and child care, if such medical services are provided by the physician pursuant to the contract or employment agreement without compensation or the physician is paid from no other source than a governmental agency or such a federally funded community health center except for patient co-payments required by federal or state law or local ordinance. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars; or

(d) Any physician licensed pursuant to chapter 334 who is affiliated with and receives no compensation from a nonprofit entity qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which offers a free health screening in any setting or any physician, nurse, physician assistant, dental hygienist, dentist, or other health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 who provides health care services within the scope of his or her license or registration at a city or county health department organized under chapter 192 or chapter 205, a city health department operating under a city charter, or a combined city-county health department, or a nonprofit community health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, excluding federally funded community health centers as specified in paragraph (c) of this subdivision and rural health clinics under 42 U.S.C. 1396d(d)(1), if such services are restricted to primary care and preventive health services, provided that such services shall not include the performance of an abortion, and if such health services are provided by the health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 without compensation. MO HealthNet or Medicare payments for primary care and preventive health services provided by a health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 who volunteers at a [free] community health clinic is not compensation for the purpose of this section if the total payment is assigned to the [free] community health clinic. For the purposes of the section, "[free] community health clinic" means a nonprofit community health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1987, as amended, that provides primary care and preventive health services to people without health insurance coverage [for the services provided without charge]. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars, for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars. Liability or malpractice insurance obtained and maintained in force by or on behalf of any health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 shall not be considered available to pay that portion of a judgment or claim for which the state legal expense fund is liable under this paragraph;

(e) Any physician, nurse, physician assistant, dental hygienist, or dentist licensed or registered to practice medicine, nursing, or dentistry or to act as a physician assistant or dental hygienist in Missouri under the provisions of chapter 332, 334, or 335, or lawfully practicing, who provides medical, nursing, or dental treatment within the scope of his license or registration to students of a school whether a public, private, or parochial elementary or secondary school or summer camp, if such physician's treatment is restricted to primary care and preventive health services and if such medical, dental, or nursing services are provided by the physician, dentist, physician assistant, dental hygienist, or nurse without compensation. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars, for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars; or
(f) Any physician licensed under chapter 334, or dentist licensed under chapter 332, providing medical care without compensation to an individual referred to his or her care by a city or county health department organized under chapter 192 or 205, a city health department operating under a city charter, or a combined city-county health department, or nonprofit health center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or a federally funded community health center organized under Section 315, 329, 330, or 340 of the Public Health Services Act, 42 U.S.C. Section 216, 254c; provided that such treatment shall not include the performance of an abortion. In the case of any claim or judgment that arises under this paragraph, the aggregate of payments from the state legal expense fund shall be limited to a maximum of one million dollars for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed one million dollars for any one claimant, and insurance policies purchased under the provisions of section 105.721 shall be limited to one million dollars. Liability or malpractice insurance obtained and maintained in force by or on behalf of any physician licensed under chapter 334, or any dentist licensed under chapter 332, shall not be considered available to pay that portion of a judgment or claim for which the state legal expense fund is liable under this paragraph;

(4) Staff employed by the juvenile division of any judicial circuit;

(5) Any attorney licensed to practice law in the state of Missouri who practices law at or through a nonprofit community social services center qualified as exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or through any agency of any federal, state, or local government, if such legal practice is provided by the attorney without compensation. In the case of any claim or judgment that arises under this subdivision, the aggregate of payments from the state legal expense fund shall be limited to a maximum of five hundred thousand dollars for all claims arising out of and judgments based upon the same act or acts alleged in a single cause and shall not exceed five hundred thousand dollars for any one claimant, and insurance policies purchased pursuant to the provisions of section 105.721 shall be limited to five hundred thousand dollars;

(6) Any social welfare board created under section 205.770 and the members and officers thereof upon conduct of such officer or employee while acting in his or her capacity as a board member or officer, and any physician, nurse, physician assistant, dental hygienist, dentist, or other health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338 who is referred to provide medical care without compensation by the board and who provides health care services within the scope of his or her license or registration as prescribed by the board; or

(7) Any person who is selected or appointed by the state director of revenue under subsection 2 of section 136.055 to act as an agent of the department of revenue, to the extent that such agent's actions or inactions upon which such claim or judgment is based were performed in the course of the person's official duties as an agent of the department of revenue and in the manner required by state law or department of revenue rules.

3. The department of health and senior services shall promulgate rules regarding contract procedures and the documentation of care provided under paragraphs (b), (c), (d), (e), and (f) of subdivision (3) of subsection 2 of this section. The limitation on payments from the state legal expense fund or any policy of insurance procured pursuant to the provisions of section 105.721, provided in subsection 7 of this section, shall not apply to any claim or judgment arising under paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section. Any claim or judgment arising under paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section shall be paid by the state legal expense fund or any policy of insurance procured pursuant to section 105.721, to the extent that such agent's actions or inactions upon which such claim or judgment is based were performed in the course of the person's official duties as an agent of the department of revenue and in the manner required by state law or department of revenue rules.

The attorney general shall promulgate rules regarding contract procedures and the documentation of legal practice provided under subdivision (5) of subsection 2 of this section. The limitation on payments from the state legal expense fund or any policy of insurance procured pursuant to section 105.721 as provided in subsection 7 of this section shall not apply to any claim or judgment arising under subdivision (5) of subsection 2 of this section. Any claim or judgment arising under subdivision (5) of subsection 2 of this section shall be paid by the state legal expense fund or any policy of insurance procured pursuant to section 105.721 to the extent damages are allowed under sections 538.205 to
538.235. Liability or malpractice insurance otherwise obtained and maintained in force shall not be considered available under subsection 7 of this section to pay that portion of a judgment or claim for which the state legal expense fund is liable under subdivision (5) of subsection 2 of this section. However, an attorney may obtain liability or malpractice insurance for coverage of liability claims or judgments based upon legal practice rendered under subdivision (5) of subsection 2 of this section that exceed the amount of liability coverage provided by the state legal expense fund under subdivision (5) of subsection 2 of this section. Even if subdivision (5) of subsection 2 of this section is repealed or amended, the state legal expense fund shall be available for damages that occur while the pertinent subdivision (5) of subsection 2 of this section is in effect.

5. All payments shall be made from the state legal expense fund by the commissioner of administration with the approval of the attorney general. Payment from the state legal expense fund of a claim or final judgment award against a health care professional licensed or registered under chapter 330, 331, 332, 334, 335, 336, 337, or 338, described in paragraph (a), (b), (c), (d), (e), or (f) of subdivision (3) of subsection 2 of this section, or against an attorney in subdivision (5) of subsection 2 of this section, shall only be made for services rendered in accordance with the conditions of such paragraphs. In the case of any claim or judgment against an attorney or employee of the state or any agency of the state based upon conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state or any agency of the state that would give rise to a cause of action under section 537.600, the state legal expense fund shall be liable, excluding punitive damages, for:

1. Economic damages to any one claimant; and
2. Up to three hundred fifty thousand dollars for noneconomic damages.

The state legal expense fund shall be the exclusive remedy and shall preclude any other civil actions or proceedings for money damages arising out of or relating to the same subject matter against the state officer or employee, or the officer's or employee's estate. No officer or employee of the state or any agency of the state shall be individually liable in his or her personal capacity for conduct of such officer or employee arising out of and performed in connection with his or her official duties on behalf of the state or any agency of the state. The provisions of this subsection shall not apply to any defendant who is not an officer or employee of the state or any agency of the state in any proceeding against an officer or employee of the state or any agency of the state. Nothing in this subsection shall limit the rights and remedies otherwise available to a claimant under state law or common law in proceedings where one or more defendants is not an officer or employee of the state or any agency of the state.

6. The limitation on awards for noneconomic damages provided for in this subsection shall be increased or decreased on an annual basis effective January first of each year in accordance with the Implicit Price Deflator for Personal Consumption Expenditures as published by the Bureau of Economic Analysis of the United States Department of Commerce. The current value of the limitation shall be calculated by the director of the department of insurance, financial institutions and professional registration, who shall furnish that value to the secretary of state, who shall publish such value in the Missouri Register as soon after each January first as practicable, but it shall otherwise be exempt from the provisions of section 536.021.

7. Except as provided in subsection 3 of this section, in the case of any claim or judgment that arises under sections 537.600 and 537.610 against the state of Missouri, or an agency of the state, the aggregate of payments from the state legal expense fund and from any policy of insurance procured pursuant to the provisions of section 105.721 shall not exceed the limits of liability as provided in sections 537.600 to 537.610. No payment shall be made from the state legal expense fund or any policy of insurance procured with state funds pursuant to section 105.721 unless and until the benefits provided to pay the claim by any other policy of liability insurance have been exhausted.

8. The provisions of section 33.080 notwithstanding, any moneys remaining to the credit of the state legal expense fund at the end of an appropriation period shall not be transferred to general revenue.

9. Any rule or portion of a rule, as that term is defined in section 536.010, that is promulgated under the authority delegated in sections 105.711 to 105.726 shall become effective only if it has been promulgated pursuant to the provisions of chapter 536. Nothing in this section shall be interpreted to repeal or affect the validity of any rule filed or adopted prior to August 28, 1999, if it fully complied with the provisions of chapter 536. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 1999, shall be invalid and void."; and
Further amend said bill, Page 2, Section 191.1140, Line 14, by inserting after all of said line the following:

"192.769.  1. On completion of a mammogram, a mammography facility certified by the United States Food and Drug Administration (FDA) or by a certification agency approved by the FDA shall provide to the patient the following notice:
"If your mammogram demonstrates that you have dense breast tissue, which could hide abnormalities, and you have other risk factors for breast cancer that have been identified, you might benefit from supplemental screening tests that may be suggested by your ordering physician. Dense breast tissue, in and of itself, is a relatively common condition. Therefore, this information is not provided to cause undue concern, but rather to raise your awareness and to promote discussion with your physician regarding the presence of other risk factors, in addition to dense breast tissue. A report of your mammography results will be sent to you and your physician. You should contact your physician if you have any questions or concerns regarding this report."

2. Nothing in this section shall be construed to create a duty of care beyond the duty to provide notice as set forth in this section.

3. The information required by this section or evidence that a person violated this section is not admissible in a civil, judicial, or administrative proceeding.

4. A mammography facility is not required to comply with the requirements of this section until January 1, 2015."; and

Further amend said bill, Page 5, Section 196.990, Line 90, by inserting after all of said line the following:

"208.141.  1. The department of social services shall reimburse a hospital for prescribed medically necessary donor human breast milk provided to a MO HealthNet participant if:
(1) The participant is an infant under the age of three months;
(2) The participant is critically ill;
(3) The participant is in the neonatal intensive care unit of the hospital;
(4) A physician orders the milk for the participant;
(5) The department determines that the milk is medically necessary for the participant;
(6) The parent or guardian signs and dates an informed consent form indicating the risks and benefits of using banked donor human milk; and
(7) The milk is obtained from a donor human milk bank that meets the quality guidelines established by the department.

2. An electronic web-based prior authorization system using the best medical evidence and care and treatment guidelines consistent with national standards shall be used to verify medical need.

3. The department shall promulgate rules for the implementation of this section, including setting forth rules for the required documentation by the physician and the informed consent to be provided to and signed by the parent or guardian of the participant. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536, and, if applicable, section 536.028. This section and chapter 536, are nonseverable, and if any of the powers vested with the general assembly under chapter 536, to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void."; and

Further amend said title, enacting clause and intersectional references accordingly.

On motion of Representative McManus, House Amendment No. 7 was adopted.

HCS SS#2 SB 754, as amended, was laid over.
HCS SS SB 860, relating to taxation, was taken up by Representative Crawford.

Representative Diehl offered House Amendment No. 1.

House Amendment No. 1

AMEND House Committee Substitute for Senate Substitute for Senate Bill No. 860, Page 1, Section A, Line 3, by inserting after all of said section and line the following:

"137.133. In any county with a charter form of government and with more than nine hundred fifty thousand inhabitants, any correspondence by the assessor with a taxpayer requesting information from the taxpayer shall include the following statement in bold, fourteen point font: "Disclosure of information requested on this document is voluntary and not required by law. Any information disclosed may become public record.". The provisions of this section shall not apply to requests for information required to be disclosed under sections 137.092 and 137.155."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Diehl, House Amendment No. 1 was adopted.

Representative Englund offered House Amendment No. 2.

House Amendment No. 2

AMEND House Committee Substitute for Senate Substitute for Senate Bill No. 860, Page 5, Section 144.080, Line 37, by inserting immediately after said line the following:

"144.083. 1. The director of revenue shall require all persons who are responsible for the collection of taxes under the provisions of section 144.080 to procure a retail sales license at no cost to the licensee which shall be prominently displayed at the licensee's place of business, and the license is valid until revoked by the director or surrendered by the person to whom issued when sales are discontinued. The director shall issue the retail sales license within ten working days following the receipt of a properly completed application. Any person applying for a retail sales license or reinstatement of a revoked sales tax license who owes any tax under sections 144.010 to 144.510 or sections 143.191 to 143.261 must pay the amount due plus interest and penalties before the department may issue the applicant a license or reinstate the revoked license. All persons beginning business subsequent to August 13, 1986, and who are required to collect the sales tax shall secure a retail sales license prior to making sales at retail. Such license may, after ten days' notice, be revoked by the director of revenue only in the event the licensee shall be in default for a period of sixty days in the payment of any taxes levied under section 144.020 or sections 143.191 to 143.261. Notwithstanding the provisions of section 32.057 in the event of revocation, the director of revenue may publish the status of the business account including the date of revocation in a manner as determined by the director.

2. The possession of a retail sales license and a statement from the department of revenue that the licensee owes no tax due under sections 144.010 to 144.510, sections 144.600 to 144.745, or sections 143.191 to [143.261] 143.265 shall be a prerequisite to the issuance or renewal of any city or county occupation license or any state license which is required for conducting any business where goods are sold at retail. The date of issuance on the statement that the licensee owes no tax due shall be no more than ninety days before the date of submission for application or renewal of the local license. The revocation of a retailer's license by the director shall render the occupational license or the state license null and void.

3. No person responsible for the collection of taxes under section 144.080 shall make sales at retail unless such person is the holder of a valid retail sales license. After all appeals have been exhausted, the director of revenue may notify the county or city law enforcement agency representing the area in which the former licensee's business is located that the retail sales license of such person has been revoked, and that any county or city occupation license of such person is also revoked. The county or city may enforce the provisions of this section, and may prohibit further sales at retail by such person.
4. In addition to the provisions of subsection 2 of this section, beginning January 1, [2009] 2018, the possession of a statement from the department of revenue stating no tax is due for any individual or corporation subject to the tax under sections [143.191 to 143.265 or sections 144.010 to 144.510] 143.011 to 143.071 shall also be a prerequisite to the issuance or renewal of any city or county occupation license or any state license required for conducting any business where goods are sold at retail. The statement of no tax due shall be dated no [longer] more than ninety days before the date of submission for application or renewal of the city or county license.

5. Notwithstanding any law or rule to the contrary, sales tax shall only apply to the sale price paid by the final purchaser and not to any off-invoice discounts or other pricing discounts or mechanisms negotiated between manufacturers, wholesalers, and retailers."

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Englund, House Amendment No. 2 was adopted.

On motion of Representative Crawford, HCS SS SB 860, as amended, was adopted.

On motion of Representative Crawford, HCS SS SB 860, as amended, was read the third time and passed by the following vote:

AYES: 112

Allen, Bahr, Barnes
Bernskaetter, Bahr, Bernskoetter, Brown, Burtison
Cierpilot, Black, Boulton
Cross, Boulton, Curtman
Dohrman, Burger, Elmer
Englund, Fitzpatrick, Flanigan
Fraker, Gannon, Flanagan
Guermsey, Hansen, Harris
Hicks, Houghton, Hurst
Johnson, Justus, Kelley
Kelly 45, Koenig, Kolkmeyer
Kratky, Lant, Lauer
Lichtenegger, Lynch, May
Mayfield, McGaugh, Meredith
Messenger, Mitten, Moon
Morris, Neth, Nichols
Phillips, Redmon, Rehder
Remole, Richardson, Roorda
Ross, Rowland, Schatz
Schieffer, Shumake, Sommer
Spencer, Swan, Thomson
Torpey, White, Wieland
Zerr, Mr. Speaker

NOES: 031

Anders, Butler, Carpenter, Colona
Dunn, Gardner, Hubbard, Hummel
LaFaver, McManus, McNeil, Mins
Montecillo, Noll, Otto, Pace
Peters, Pogue, Rizzo, Runions
Schieber, Schupp, Walton Gray, Webber
Wright, Schupp, Smith, Webber
PRESENT: 000

ABSENT WITH LEAVE: 016

Brattin Conway 10 Cox Ellington Funderburk
Gatschenberger Grisamore Haefner Hinson Hodges
Hough McDonald Muntzel Newman Parkinson
Wood

VACANCIES: 004

Speaker Jones declared the bill passed.

**SS SB 866**, relating to installment loan lenders, was taken up by Representative Dugger.

Speaker Pro Tem Hoskins resumed the Chair.

On motion of Representative Dugger, **SS SB 866** was truly agreed to and finally passed by the following vote:

AYES: 128

Allen Anders Anderson Austin Bahr
Barnes Bernskoetter Berry Black Brattin
Brown Burlison Burns Butler Carpenter
Cierpiot Colona Conway 10 Conway 104 Cookson
Cornejo Crawford Cross Curtis Curtman
Davis Diehl Dohrmann Dugger Dunn
Engler English Englund Entlicher Fitzpatrick
Fitzwater Flanigan Fraker Franklin Frederick
Gannon Gatschenberger Guernsey Haahr Hampton
Hansen Harris Hicks Higdon Hoskins
Houghton Hubbard Hummel Johnson Jones 50
Justus Keeney Kelley 127 Kelly 45 Koenig
Kolkmeyer Korman Lair Lant Lauer
Leann Lichtenegeyer Love Lynch May
Mayfield McCaherty McCann Beatty McGaugh McKenna
McManus McNeil Meredith Messenger Miller
Mims Mitten Molendorp Morgan Neely
Nichols Norr Otto Pace Parkinson
Pfautsch Phillips Pierson Pike Redmon
Rehder Remole Rhoads Richardson Riddle
Rizzo Roorda Ross Rowden Rowland
Runions Scharnhorst Schatz Schieffer Schupp
Shumake Smith Solon Sommer Spencer
Stream Swan Swearingen Thomson Walker
Walton Gray Webber White Wieland Wilson
Wood Zerr Mr. Speaker

NOES: 014

Ellington Frame Gardener Hurst Kirkton
Krakty LaFaver Marshall Montecillo Moon
Peters Pogue Schieber Wright
Journal of the House

PRESENT: 000

ABSENT WITH LEAVE: 017

Cox Elmer Funderburk Gosen Grisamore
Haefner Hinson Hodges Hough McDonald
Morris Muntzel Neth Newman Reiboldt
Shull Torpey

VACANCIES: 004

Speaker Pro Tem Hoskins declared the bill passed.

HCS SCS SB 852, as amended, with House Amendment No. 6 pending, relating to public safety, was again taken up by Representative Rhoads.

Representative Riddle offered House Amendment No. 1 to House Amendment No. 6.

House Amendment No. 1 to House Amendment No. 6

AMEND House Amendment No. 6 to House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 2, Line 47, by deleting the opening bracket and on Page 3, Line 28, by deleting the closing bracket; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Riddle, House Amendment No. 1 to House Amendment No. 6 was adopted.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 096

Allen Anderson Austin Bahr Barnes
Bernscoetter Berry Brattin Brown Burlison
Cerpetti Conway 104 Cookson Cornejo Crawford
Cross Curtman Davis Diehl Dohrman
Dugger Elmer Engler Entlicher Fitzpatrick
Fitzwater Flanigan Fraker Frederick Gannon
Gatschenberger Gosen Haahr Hampton Hansen
Hicks Higdon Hoskins Hough Houghton
Hurst Johnson Jones 50 Justus Keeney
Kelley 127 Koenig Kolkmeyer Korman Lair
Lant Lauer Leara Lichtenegger Love
Lynch McCaherty McGaugh Messenger Miller
Moon Neely Neth Parkinson Pfautsch
Phillips Pike Pogue Redmon Rehder
Remolet Rhoads Richardson Riddle Ross
Rowden Rowland Scharnhorst Schatz Schieber
Shull Shumake Solon Sommer Spencer
On motion of Representative Schatz, House Amendment No. 6, as amended, was adopted.

Representative Black offered House Amendment No. 7.

House Amendment No. 7

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 9, Section 590.750, Line 12, by inserting after all of said section and line the following:

"632.520. 1. For purposes of this section, the following terms mean:

(1) "Employee of the department of mental health", a person who is an employee of the department of mental health, an employee or contracted employee of a subcontractor of the department of mental health, or an employee or contracted employee of a subcontractor of an entity responsible for confining offenders as authorized by section 632.495;

(2) "Offender", a person ordered to the department of mental health after a determination by the court that the person meets the definition of a sexually violent predator, a person ordered to the department of mental health after a finding of probable cause under section 632.489, or a person committed for control, care, and treatment by the department of mental health under sections 632.480 to 632.513;

(3) "Secure facility", a facility operated by the department of mental health or an entity responsible for confining offenders as authorized by section 632.495;

2. No offender shall knowingly commit violence to an employee of the department of mental health or to another offender housed in a secure facility. Violation of this subsection shall be a class B felony.

3. No offender shall knowingly damage any building or other property owned or operated by the department of mental health. Violation of this subsection shall be a class C felony."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

On motion of Representative Black, House Amendment No. 7 was adopted.
AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting after all of said line the following:

"334.950. 1. As used in this section, the following terms shall mean:

(1) "Child abuse medical resource centers", medical institutions affiliated with accredited children's hospitals or recognized institutions of higher education with accredited medical school programs that provide training, support, mentoring, and peer review to SAFE CARE providers in Missouri;

(2) "SAFE CARE provider", a physician, advanced practice nurse, or physician's assistant licensed in this state who provides medical diagnosis and treatment to children suspected of being victims of abuse and who receives:

(a) Missouri-based initial intensive training regarding child maltreatment from the SAFE CARE network;

(b) Ongoing update training on child maltreatment from the SAFE CARE network;

(c) Peer review and new provider mentoring regarding the forensic evaluation of children suspected of being victims of abuse from the SAFE CARE network;

(3) "Sexual assault forensic examination child abuse resource education network" or "SAFE CARE network", a network of SAFE CARE providers and child abuse medical resource centers that collaborate to provide forensic evaluations, medical training, support, mentoring, and peer review for SAFE CARE providers for the medical evaluation of child abuse victims in this state to improve outcomes for children who are victims of or at risk for child maltreatment by enhancing the skills and role of the medical provider in a multidisciplinary context.

2. Child abuse medical resource centers may collaborate directly or through the use of technology with SAFE CARE providers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

3. SAFE CARE providers who are a part of the SAFE CARE network in Missouri may collaborate directly or through the use of technology with other SAFE CARE providers and child abuse medical resource centers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

4. The SAFE CARE network shall develop recommendations concerning medically based screening processes and forensic evidence collection for children who may be in need of an emergency examination following an alleged sexual assault. Such recommendations shall be provided to the SAFE CARE providers, child advocacy centers, hospitals and licensed practitioners that provide emergency examinations for children suspected of being victims of abuse.

5. The department of public safety shall establish rules and make payments to SAFE CARE providers, out of appropriations made for that purpose, who provide forensic examinations of persons under eighteen years of age who are alleged victims of physical abuse.

6. The department shall establish maximum reimbursement rates for charges submitted under this section, which shall reflect the reasonable cost of providing the forensic exam.

7. The department shall only reimburse providers for forensic evaluations and case reviews. The department shall not reimburse providers for medical procedures, facility fees, supplies or laboratory/radiology tests.

8. In order for the department to provide reimbursement, the child shall be the subject of a child abuse investigation or reported to the children's division as a result of the examination.

9. A minor may consent to examination under this section. Such consent is not subject to disaffirmance because of the individual's status as a minor, and the consent of a parent or guardian of the minor is not required for such examination."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.
Representative Hinson offered **House Substitute Amendment No. 1 for House Amendment No. 8**.

**House Substitute Amendment No. 1**

for  

**House Amendment No. 8**

AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 852, Page 4, Section 105.935, Line 54, by inserting after all of said line the following:

"334.950.  1. As used in this section, the following terms shall mean:

(1) "Child abuse medical resource centers", medical institutions affiliated with accredited children's hospitals or recognized institutions of higher education with accredited medical school programs that provide training, support, mentoring, and peer review to SAFE CARE providers in Missouri;

(2) "SAFE CARE provider", a physician, advanced practice nurse, or physician's assistant licensed in this state who provides medical diagnosis and treatment to children suspected of being victims of abuse and who receives:

(a) Missouri-based initial intensive training regarding child maltreatment from the SAFE CARE network;

(b) Ongoing update training on child maltreatment from the SAFE CARE network;

(c) Peer review and new provider mentoring regarding the forensic evaluation of children suspected of being victims of abuse from the SAFE CARE network;

(3) "Sexual assault forensic examination child abuse resource education network" or "SAFE CARE network", a network of SAFE CARE providers and child abuse medical resource centers that collaborate to provide forensic evaluations, medical training, support, mentoring, and peer review for SAFE CARE providers for the medical evaluation of child abuse victims in this state to improve outcomes for children who are victims of or at risk for child maltreatment by enhancing the skills and role of the medical provider in a multidisciplinary context.

2. Child abuse medical resource centers may collaborate directly or through the use of technology with SAFE CARE providers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

3. SAFE CARE providers who are a part of the SAFE CARE network in Missouri may collaborate directly or through the use of technology with other SAFE CARE providers and child abuse medical resource centers to promote improved services to children who are suspected victims of abuse that will need to have a forensic medical evaluation conducted by providing specialized training for forensic medical evaluations for children conducted in a hospital, child advocacy center, or by a private health care professional without the need for a collaborative agreement between the child abuse medical resource center and a SAFE CARE provider.

4. The SAFE CARE network shall develop recommendations concerning medically based screening processes and forensic evidence collection for children who may be in need of an emergency examination following an alleged sexual assault. Such recommendations shall be provided to the SAFE CARE providers, child advocacy centers, hospitals and licensed practitioners that provide emergency examinations for children suspected of being victims of abuse.

5. **The department of public safety shall establish rules and make payments to SAFE CARE providers, out of appropriations made for that purpose, who provide forensic examinations of persons under eighteen years of age who are alleged victims of physical abuse.**

6. The department shall establish maximum reimbursement rates for charges submitted under this section, which shall reflect the reasonable cost of providing the forensic exam.

7. The department shall only reimburse providers for forensic evaluations and case reviews. The department shall not reimburse providers for medical procedures, facility fees, supplies or laboratory/radiology tests.

8. In order for the department to provide reimbursement, the child shall be the subject of a child abuse investigation or reported to the children’s division as a result of the examination.

9. A minor may consent to examination under this section. Such consent is not subject to disaffirmance because of the individual's status as a minor, and the consent of a parent or guardian of the minor is not required for such examination."; and
Further amend said bill, Page 4, Section 105.935, Line 54, by inserting after all of said line the following:

"287.243. 1. This section shall be known and may be cited as the "Line of Duty Compensation Act".
2. As used in this section, unless otherwise provided, the following words shall mean:
   (1) "Air ambulance pilot", a person certified as an air ambulance pilot in accordance with sections 190.001 to 190.245 and corresponding regulations applicable to air ambulances adopted by the department of health and senior services, division of regulation and licensure, 19 CSR 30-40.005, et seq.;
   (2) "Air ambulance registered professional nurse", a person licensed as a registered professional nurse in accordance with sections 335.011 to 335.096 and corresponding regulations adopted by the state board of nursing, 20 CSR 2200-4, et seq., who provides registered professional nursing services as a flight nurse in conjunction with an air ambulance program that is certified in accordance with sections 190.001 to 190.245 and the corresponding regulations applicable to such programs;
   (3) "Emergency medical technician", a person licensed in emergency medical care in accordance with standards prescribed by sections 190.001 to 190.245 and by rules adopted by the department of health and senior services under sections 190.001 to 190.245;
   (4) "Firefighter", any person, including a volunteer firefighter, employed by the state or a local governmental entity as an employer defined under subsection 1 of section 287.030, or otherwise serving as a member or officer of a fire department either for the purpose of the prevention or control of fire or the underwater recovery of drowning victims;
   (5) "Killed in the line of duty", when [a] any person defined in this section loses [one's] his or her life [as a result of an injury received in the active performance of his or her duties within the ordinary scope of his or her respective profession while the individual is on duty and but for the individual's performance, death would have not occurred] when:
      (a) Death is caused by an accident or the willful act of violence of another;
      (b) The law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is in the active performance of his or her duties in his or her respective profession and there is a relationship between the accident or commission of the act of violence and the performance of the duty, even if the individual is off duty; the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is traveling to or from employment; or the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is taking any meal break or other break which takes place while that individual is on duty;
      (c) Death is the natural and probable consequence of the injury; and
      (d) Death occurs within three hundred weeks from the date the injury was received.
The term excludes death resulting from the willful misconduct or intoxication of the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter. The division of workers' compensation shall have the burden of proving such willful misconduct or intoxication;
   (6) "Law enforcement officer", any person employed by the state or a local governmental entity as a police officer, peace officer certified under chapter 590, or serving as an auxiliary police officer or in some like position involving the enforcement of the law and protection of the public interest at the risk of that person's life;
   (7) "Local governmental entity", includes counties, municipalities, townships, board or other political subdivision, cities under special charter, or under the commission form of government, fire protection districts, ambulance districts, and municipal corporations;
   (8) "State", the state of Missouri and its departments, divisions, boards, bureaus, commissions, authorities, and colleges and universities;
   (9) "Volunteer firefighter", a person having principal employment other than as a firefighter, but who is carried on the rolls of a regularly constituted fire department either for the purpose of the prevention or control of fire or the underwater recovery of drowning victims, the members of which are under the jurisdiction of the corporate authorities of a city, village, incorporated town, or fire protection district. Volunteer firefighter shall not mean an individual who volunteers assistance without being regularly enrolled as a firefighter.
3. (1) A claim for compensation under this section shall be filed by the estate of the deceased with the division of workers' compensation not later than one year from the date of death of a law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter. If a claim is made within one year of the date of death of a law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter killed in the line of duty, compensation shall be paid, if the division finds that the claimant is entitled to compensation under this section.
(2) The amount of compensation paid to the claimant shall be twenty-five thousand dollars, subject to appropriation, for death occurring on or after June 19, 2009.

4. Notwithstanding subsection 3 of this section, no compensation is payable under this section unless a claim is filed within the time specified under this section setting forth:
   (1) The name, address, and title or designation of the position in which the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter was serving at the time of his or her death;
   (2) The name and address of the claimant;
   (3) A full, factual account of the circumstances resulting in or the course of events causing the death at issue; and
   (4) Such other information that is reasonably required by the division.

When a claim is filed, the division of workers’ compensation shall make an investigation for substantiation of matters set forth in the application.

5. The compensation provided for under this section is in addition to, and not exclusive of, any pension rights, death benefits, or other compensation the claimant may otherwise be entitled to by law.

6. Neither employers nor workers’ compensation insurers shall have subrogation rights against any compensation awarded for claims under this section. Such compensation shall not be assignable, shall be exempt from attachment, garnishment, and execution, and shall not be subject to setoff or counterclaim, or be in any way liable for any debt, except that the division or commission may allow as lien on the compensation, reasonable attorney’s fees for services in connection with the proceedings for compensation if the services are found to be necessary. Such fees are subject to regulation as set forth in section 287.260.

7. Any person seeking compensation under this section who is aggrieved by the decision of the division of workers’ compensation regarding his or her compensation claim, may make application for a hearing as provided in section 287.450. The procedures applicable to the processing of such hearings and determinations shall be those established by this chapter. Decisions of the administrative law judge under this section shall be binding, subject to review by either party under the provisions of section 287.480.

8. Pursuant to section 23.253 of the Missouri sunset act:
   (1) The provisions of the new program authorized under this section shall automatically sunset six years after June 19, [2009] 2019, unless reauthorized by an act of the general assembly; and
   (2) If such program is reauthorized, the program authorized under this section shall automatically sunset twelve years after the effective date of the reauthorization of this section; and
   (3) This section shall terminate on September first of the calendar year immediately following the calendar year in which the program authorized under this section is sunset.

9. The provisions of this section, unless specified, shall not be subject to other provisions of this chapter.

10. There is hereby created in the state treasury the “Line of Duty Compensation Fund”, which shall consist of moneys appropriated to the fund and any voluntary contributions, gifts, or bequests to the fund. The state treasurer shall be custodian of the fund and shall approve disbursements from the fund in accordance with sections 30.170 and 30.180. Upon appropriation, money in the fund shall be used solely for paying claims under this section. Notwithstanding the provisions of section 33.080 to the contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit of the general revenue fund. The state treasurer shall invest moneys in the fund in the same manner as other funds are invested. Any interest and moneys earned on such investments shall be credited to the fund.

11. The division shall promulgate rules to administer this section, including but not limited to the appointment of claims to multiple claimants, record retention, and procedures for information requests. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after June 19, 2009, shall be invalid and void.

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.
Representative Roorda raised a point of order that House Substitute Amendment No. 1 for House Amendment No. 8 is not properly drafted.

The point of order was withdrawn.

Representative LaFaver raised a point of order that House Substitute Amendment No. 1 for House Amendment No. 8 was not timely distributed.

The Chair ruled the point of order not well taken.

On motion of Representative Hinson, House Substitute Amendment No. 1 for House Amendment No. 8 was adopted.

Representative Diehl moved the previous question.

Which motion was adopted by the following vote:

AYES: 093

Anderson  Austin  Bahr  Barnes  Bernskoetter
Berry    Brattin  Brown  Burlison  Cierpiot
Conway 104 Cookson  Cornejo  Crawford  Cross
Davis    Diehl   Dohrman Dugger   Engler
Entlicher Fitzpatrick  Fitzwater  Flanigan  Fraker
Frederick Gannon  Gatschenberger Gosen  Grisamore
Guernsey Haahr   Hampton  Hansen  Hicks
Higdon   Hinson  Hoskins  Houghton  Hurst
Johnson Jones 50 Justus  Keeney  Kelley 127
Koenig   Korman  Lair   Lant   Leara
Lichtenegger Love  Lynch  Marshall  McCaherty
McGaugh  Messenger  Miller  Molendorg  Moon
Morris   Neely   Parkinson Pfautsch  Phillips
Pike     Pogue  Redmon  Rehder  Remole
Rhoads   Richardson  Riddle  Ross  Rowden
Rowland  Scharnhorst Schieber  Shull  Shumake
Solon    Sommer  Spencer  Stream  Swan
Thomson  Torpey  Walker  White  Wieland
Wilson   Wood   Mr. Speaker

NOES: 049

Anders  Black  Burns  Butler  Carpenter
Colona Conway 10  Curtis  Dunn  Ellington
English Englund  Frame  Gardner  Harris
Hubbard Hummel Kelly 45  Kirkton  Kratky
LaFaver May   Mayfield  McCann Beatty  McDonald
McKenna McManus  McNeil  Meredith  Mims
Mitten Montecillo Morgan Nichols  Norr
Otto    Pace  Peters  Pierson  Rizzo
Roorda  Runions Schieffer  Schupp  Smith
Swearingen Walton Gray  Webber  Wright

PRESENT: 000
ABSENT WITH LEAVE: 017

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VACANCIES: 004

On motion of Representative Rhoads, **HCS SCS SB 852, as amended**, was adopted.

On motion of Representative Rhoads, **HCS SCS SB 852, as amended**, was read the third time and passed by the following vote:

**AYES: 122**

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**NOES: 026**

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PRESENT: 000
1976  *Journal of the House*

**ABSENT WITH LEAVE: 011**

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**VACANCIES: 004**

Speaker Pro Tem Hoskins declared the bill passed.

**HCS SS SB 884**, relating to insurance for dental services, was taken up by Representative Gosen.

On motion of Representative Gosen, **HCS SS SB 884** was adopted.

On motion of Representative Gosen, **HCS SS SB 884** was read the third time and passed by the following vote:

**AYES: 141**

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**NOES: 004**

| Gardner | Marshall | Pogue | Smith |

**PRESENT: 000**
Speaker Pro Tem Hoskins declared the bill passed.

HCS SS#2 SB 754, as amended, relating to health care, was again taken up by Representative Flanigan.

On motion of Representative Flanigan, HCS SS#2 SB 754, as amended, was adopted.

On motion of Representative Flanigan, HCS SS#2 SB 754, as amended, was read the third time and passed by the following vote:

AYES: 132

NOES: 015
Speaker Pro Tem Hoskins declared the bill passed.

**SCS SB 635**, relating to incentives for interstate business relocation, was taken up by Representative Jones (110).

On motion of Representative Jones (110), **SCS SB 635** was truly agreed to and finally passed by the following vote:

**AYES:** 144


**NOES:** 003

Marshall Pogue Schieber

**PRESENT:** 000
Speaker Pro Tem Hoskins declared the bill passed.

COMMITTEE REPORTS

Committee on Fiscal Review, Chairman Flanigan reporting:

Mr. Speaker: Your Committee on Fiscal Review, to which was referred HCS SS SB 575, begs leave to report it has examined the same and recommends that it **Do Pass**.

Mr. Speaker: Your Committee on Fiscal Review, to which was referred HCS SB 584, begs leave to report it has examined the same and recommends that it **Do Pass**.

Committee on Rules, Chairman Riddle reporting:

Mr. Speaker: Your Committee on Rules, to which was referred SCR 43, begs leave to report it has examined the same and recommends that it **Do Pass**.

Mr. Speaker: Your Committee on Rules, to which was referred HCS SJR 30, begs leave to report it has examined the same and recommends that it **Do Pass**.

Mr. Speaker: Your Committee on Rules, to which was referred HCS SS SB 507, begs leave to report it has examined the same and recommends that it **Do Pass**.

Mr. Speaker: Your Committee on Rules, to which was referred HCS SS SCS SB 707, begs leave to report it has examined the same and recommends that it **Do Pass**.

Mr. Speaker: Your Committee on Rules, to which was referred SCS SB 829, begs leave to report it has examined the same and recommends that it **Do Pass**.
D. Adam Crumbliss  
Chief Clerk  
Missouri House of Representatives  
201 West Capitol Avenue  
Jefferson City, MO 65101

Re: Possible Personal Interest in Legislation

Dear Mr. Crumbliss:

Pursuant to Section 105.461, RSMo, I am hereby filing a written report of a possible personal interest in legislation in which the House of Representatives may vote during the legislative session. I am a small business owner in Independence, Missouri.

In compliance with Section 105.461, RSMo, please publish this report in the Journal of the House.

Sincerely,

/s/ Noel Torpey  
State Representative  
District 29

CONFERENCE COMMITTEE REPORT NO. 2  
ON  
SENATE SUBSTITUTE  
FOR  
SENATE COMMITTEE SUBSTITUTE  
FOR  
HOUSE BILL NO. 1490

The Conference Committee appointed on Senate Substitute for Senate Committee Substitute for House Bill No. 1490, with Senate Amendment No. 1, Senate Amendment No. 4, Senate Amendment No. 5, Senate Amendment No. 6, Senate Amendment No. 7, Senate Amendment No. 8, Senate Amendment No. 9, Senate Amendment No. 10, Senate Amendment No. 11 to Senate Amendment No. 11, Senate Amendment No. 11 as amended, Senate Amendment No. 12, Senate Amendment No. 14, and Senate Amendment No. 15, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the Senate recede from its position on Senate Substitute for Senate Committee Substitute for House Bill No. 1490, as amended;

2. That the House recede from its position on House Bill No. 1490;

3. That the attached Conference Committee Substitute No. 2 for Senate Substitute for Senate Committee Substitute for House Bill No. 1490, be Third Read and Finally Passed.
The Conference Committee appointed on Senate Substitute for Senate Committee Substitute for House Bill No. 1504, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the Senate recede from its position on Senate Substitute for Senate Committee Substitute for House Bill No. 1504;

2. That the House recede from its position on House Bill No. 1504;

3. That the attached Conference Committee Substitute for Senate Substitute for Senate Committee Substitute for House Bill No. 1504, be Third Read and Finally Passed.

FOR THE HOUSE: FOR THE SENATE:

/s/ Caleb Rowden /s/ Tom Dempsey
/s/ Kathie Conway /s/ Eric Schmitt
/s/ Michele Kratky /s/ Gary Romine
/s/ Jolie Justus /s/ Joseph Keaveny
CONFERENCE COMMITTEE REPORT
ON
SENATE SUBSTITUTE
FOR
HOUSE COMMITTEE SUBSTITUTE
FOR
HOUSE BILL NO. 1685

The Conference Committee appointed on Senate Substitute for House Committee Substitute for House Bill No. 1685, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the Senate recede from its position on Senate Substitute for House Committee Substitute for House Bill No. 1685;

2. That the House recede from its position on House Committee Substitute for House Bill No. 1685;

3. That the attached Conference Committee Substitute for Senate Substitute for House Committee Substitute for House Bill No. 1685, be Third Read and Finally Passed.

FOR THE HOUSE: FOR THE SENATE:

/s/ Jim Neely /s/ Rob Schaaf
/s/ Todd Richardson /s/ Jay Wasson
/s/ Gina Mitten /s/ David Sater
/s/ Paul LeVota /s/ Jason Holsman

CONFERENCE COMMITTEE REPORT
ON
HOUSE COMMITTEE SUBSTITUTE
FOR
SENATE COMMITTEE SUBSTITUTE
FOR
SENATE BILLS NOS. 493, 485, 495, 516, 534, 545, 595, 616 & 624

The Conference Committee appointed on House Committee Substitute for Senate Committee Substitute for Senate Bills Nos. 493, 485, 495, 516, 534, 545, 595, 616 & 624, with House Amendment Nos. 1 & 2 to House Amendment No. 1, House Amendment No. 1 as amended, House Amendment No. 1 to House Amendment No. 2, House Amendment No. 2 as amended, House Amendment No. 1 to House Amendment No. 3, House Amendment No. 3 as amended, House Amendment No. 4, House Amendment No. 1 to House Amendment No. 5, House Amendment No. 5 as amended, House Amendment No. 6, House Amendment No. 1 to
House Amendment No. 7, House Amendment No. 7 as amended, House Amendments Nos. 8, 9, and 10, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the House recede from its position on House Committee Substitute for Senate Committee Substitute for Senate Bills Nos. 493, 485, 495, 516, 534, 545, 595, 616 & 624, as amended;

2. That the Senate recede from its position on Senate Committee Substitute for Senate Bills Nos. 493, 485, 495, 516, 534, 545, 595, 616 & 624;

3. That the attached Conference Committee Substitute for House Committee Substitute for Senate Committee Substitute for Senate Bills Nos. 493, 485, 495, 516, 534, 545, 595, 616 & 624 be Third Read and Finally Passed.

FOR THE SENATE:  
/s/ David Pearce  
/s/ Eric Schmitt  
/s/ Ed Emery  
/s/ Maria Chappelle-Nadal  
/s/ Shalonn "Kiki" Curls

FOR THE HOUSE:  
/s/ Rick Stream  
/s/ Steve Cookson

CONFERENCE COMMITTEE REPORT NO. 2  
on  
HOUSE COMMITTEE SUBSTITUTE  
for  
SENATE BILL NO. 621

The Conference Committee appointed on House Committee Substitute for Senate Bill No. 621, with House Amendment Nos. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, and 11, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the House recede from its position on House Committee Substitute for Senate Bill No. 621, as amended;

2. That the Senate recede from its position on Senate Bill No. 621;

3. That the attached Conference Committee Substitute No. 2 for House Committee Substitute for Senate Bill No. 621 be Third Read and Finally Passed.
CONVENTION COMMITTEE REPORT #2
ON
HOUSE COMMITTEE SUBSTITUTE
FOR
SENATE BILL NO. 693

The Conference Committee appointed on House Committee Substitute for Senate Bill No. 693, with House Amendment Nos. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, and 11, House Amendment No. 1 to House Amendment No. 12, House Amendment No. 12, as amended, and House Amendment Nos. 13, 14, and 15, begs leave to report that we, after free and fair discussion of the differences, have agreed to recommend and do recommend to the respective bodies as follows:

1. That the House recede from its position on House Committee Substitute for Senate Bill No. 693, as amended;

2. That the Senate recede from its position on Senate Bill No. 693;

3. That the attached Conference Committee Substitute No. 2 for House Committee Substitute for Senate Bill No. 693 be Third Read and Finally Passed.

FOR THE SENATE: FOR THE HOUSE:
/s/ Mike Parson /s/ Caleb Jones
/s/ Bob Dixon /s/ Kevin Elmer
/s/ Gary Romine /s/ Jeremy LaFaver
/s/ Joseph P. Keaveny /s/ Paul Levota

ADJOURNMENT

On motion of Representative Diehl, the House adjourned until 10:00 a.m., Thursday, May 15, 2014.
COMMITEE HEARINGS

BUDGET
Thursday, May 15, 2014, 4:00 PM or Upon Afternoon Adjournment/Recess, House Hearing Room 3.
Executive session may be held on any matter referred to the committee.
OA budget and planning.

FISCAL REVIEW
Thursday, May 15, 2014, 8:30 AM, House Hearing Room 2.
Executive session may be held on any matter referred to the committee.

FISCAL REVIEW
Friday, May 16, 2014, 8:00 AM, House Hearing Room 2.
Executive session may be held on any matter referred to the committee.

HOUSE CALENDAR

SIXTY-NINTH DAY, THURSDAY, MAY 15, 2014

HOUSE JOINT RESOLUTIONS FOR PERFECTION

1  HCS HJR 62 - Bahr
2  HJR 70 - Jones (50)

HOUSE BILLS FOR PERFECTION

1  HB 1821 - Diehl
2  HB 1342 - Scharnhorst
3  HCS HB 1350 - Richardson
4  HCS HB 1116 - Hicks
5  HCS HB 1662 - Richardson
6  HB 1474 - Brattin
7  HCS HB 1967 - Koenig
8  HCS#2 HB 1153 - Pace
9  HB 1314 - Frederick
10 HCS HB 1484 - Korman
11 HB 1541 - Hubbard
12 HCS HB 1583 - Berry
13 HCS HB 1728 - Love
14 HB 2070 - Hough
15 HCS HB 2078 - Funderburk
16 HCS HB 2131 - Elmer
17 HB 2155 - Scharnhorst
18 HCS HB 1054 - Barnes
1986  Journal of the House

19  HCS HB 1056 - Johnson
20  HCS HB 1183 - Gosen
21  HCS HB 1478 - Swan
22  HB 1486 - Fitzpatrick
23  HB 1543 - Hinson
24  HCS HB 1725 - Frederick
25  HCS HB 1743 - Funderburk
26  HCS HB 1935 - Austin
27  HCS HB 1949 - Thomson
28  HCS HB 1990 - Fitzwater
29  HB 1993 - Bernskoetter
30  HCS HB 2049 - Fitzpatrick
31  HB 2099 - Franklin
32  HB 1142 - Flanigan
33  HB 1152 - Pace
34  HCS HB 1200 - Burlison
35  HCS HB 1247 - Wood
36  HCS HBs 1258 & 1267 - Rowden
37  HCS HB 1448 - Cox
38  HB 1668 - Allen
39  HCS HB 1807 - Solon
40  HCS HB 1823 - Berry
41  HB 1976 - Spencer
42  HB 2053 - Curtman
43  HB 2219 - Peters
44  HB 1111 - Rowland
45  HCS HB 1488 - Bahr
46  HCS HB 1492 - Lichtenegger
47  HCS HB 1540 - Fitzwater
48  HB 1737 - Burlison
49  HCS HB 1842 - Frederick
50  HCS HB 2209 - Molendorp
51  HB 1065 - Grisamore
52  HCS HB 1309 - Sommer
53  HB 1347 - Haahr
54  HCS HB 1364 - Bahr
55  HB 1544 - Rowden
56  HB 1562 - Kratky
57  HCS HB 1634 - Hough
58  HCS HB 1639 - Funderburk
59  HCS HB 1734 - Fraker
60  HCS HB 1845 - Anderson
61  HB 1899 - Pfautsch
62  HCS HB 2038 - Hicks
63  HCS HB 2112 - Gatschenberger
Sixty-eighth Day–Wednesday, May 14, 2014

HOUSE CONCURRENT RESOLUTIONS FOR THIRD READING

HCS HCR 41 - Moon

HOUSE BILLS FOR THIRD READING

1   HB 1770 - Burlison
2   HCS HB 2118 - Cox

HOUSE BILLS FOR THIRD READING - CONSENT

HB 1568 - Frederick

HOUSE CONCURRENT RESOLUTIONS

1   HCR 8 - Richardson
2   HCR 16 - Guernsey
3   HCR 27 - May
4   HCR 50 - Shumake

SENATE JOINT RESOLUTIONS FOR THIRD READING

SCS SJR 27 - Curtman
SENATE BILLS FOR THIRD READING

1. SB 652 - Funderburk
2. SCS SB 613 - Funderburk
3. SB 766 - Mitten
4. SB 628, E.C. - Wilson
5. SB 718 - Davis
6. SB 601 - Funderburk
7. SS SCS SB 767 - Diehl
8. HCS SCS SB 567 - Swan
9. SCS SBs 638 & 647 - Engler
10. HCS SB 773, E.C. - Spencer
11. HCS SB 584 - Burlison
12. SCS SB 623, (Fiscal Review 5/7/14) - McGaugh
13. HCS SCS SB 664, (Fiscal Review 5/7/14) - Miller
14. HCS SS SB 758 - McManus
15. HCS SB 605, (Fiscal Review 5/8/14) - Haahr
16. HCS SB 717 - Burlison
17. HCS#2 SCS SB 777, (Fiscal Review 5/12/14), E.C. - Cierpiot
18. HCS SS SB 498, (Fiscal Review (5/12/14) - Molendorp
19. SB 527 - Swan
20. HCS SS SB 575 - Haahr
21. HCS SB 591, (Fiscal Review (5/13/14) - Reiboldt
22. HCS SCS SB 630, (Fiscal Review (5/13/14) - Dugger
23. HCS SB 655 - Hoskins
24. SB 674 - Flanigan
25. HCS SCS SB 680, (Fiscal Review (5/13/14) - Wieland
26. HCS SS SB 691 - Elmer
27. SB 695 - Mitten
28. HCS SB 786 - Gosen
29. HCS SCS SB 824, (Fiscal Review (5/13/14) - Cornejo
30. SB 844, E.C. - Hough
31. HCS SCS SB 854, (Fiscal Review (5/13/14) - Elmer
32. HCS SS SB 869, (Fiscal Review (5/13/14) - Torpey
33. HCS SCS SB 873, (Fiscal Review (5/13/14) - Torpey
34. HCS SB 874 - Gosen
35. HCS SCS SB 896 - Engler
36. SCS SB 642 - Engler
37. HCS SB 696 - Cornejo
38. SB 708, E.C. - Dugger
39. SB 818 - Davis
40. SB 842 - Kelley (127)
SENATE CONCURRENT RESOLUTIONS FOR THIRD READING

SCR 20 - Pierson

HOUSE BILLS WITH SENATE AMENDMENTS

1 SS SCS HCS HB 1124 - Kolkmeyer
2 SCS HCS HB 2141, as amended - Diehl

BILLS CARRYING REQUEST MESSAGES

1 SCS HB 1468, (request Senate recede/grant conference) - Dohrman
2 SCS HB 1553, (request Senate recede/grant conference) - Dohrman

BILLS IN CONFERENCE

1 CCR SCS SB 612, HA 1, HA 2, HA 3, HA 4 & HA 5 - Hoskins
2 CCR HCS SCS SBs 493, 485, 495, 516, 534, 545, 595, 616, & 624, as amended (exceed differences), E.C. - Stream
3 CCR#2 HCS SCS SB 716, as amended - Scharnhorst
4 CCR HCS SB 662, as amended - Koenig
5 CCR#2 HCS SB 693, as amended - Parson
6 HCS SB 614, as amended - Cox
7 CCR#2 HCS SCS SB 672, as amended - Jones (50)
8 CCR SS SCS HB 1504 - Rowden
9 HCS SCS SB 492, as amended - Thomson
10 CCR SS HCS HB 1685 - Neely
11 CCR#2 SS SCS HB 1490, as amended (exceed differences), E.C. - Bahr
12 HCS SB 656, as amended, E.C. - Elmer
13 HCS SB 615, as amended, E.C. - Austin
14 CCR#2 HCS SB 621, as amended, E.C. - Cornejo
15 SS#2 SCS HB 1495 - Torpey

SENATE CONCURRENT RESOLUTIONS

1 SS SCR 22 - Ross
2 SCR 17 - Hough
3 SCR 31 - Wieland
4 SCR 32 - Frederick
5 SCR 34 - Torpey