

CCS HCS SB 501 -- HEALTH CARE

This bill modifies several provisions relating to health care.

HEALTH CARE RECORDS

This bill changes the fees for the search, retrieval, and copying of a patient's health care records by a health care provider. Additionally, a health care provider may disclose a deceased patient's health care records or payment records to specified persons in the bill (Section 191.227, RSMo).

HEALTH CARE DIRECTIVES REGISTRY

This bill requires the Department of Health and Senior Services to contract with a third party for the establishment of a health care directives registry for the purpose of providing a place to securely store an advance health care directive online and to give authorized health care providers immediate access to the directive. The third party contractor shall be solely responsible for the administration and maintenance of the registry. All data and information contained in the registry shall remain confidential and shall be exempt from the Sunshine Law. An "advance health care directive" is defined as either a power of attorney for health care or a declaration signed by an adult declarant containing the person's direction concerning a health care decision.

All documents shall be submitted electronically to the registry at intake points, such as licensed health care providers and licensed attorneys, and signed electronically with a unique identifier, such as a Social Security number, a driver's license number, or another unique government-issued identifier. The electronic submission shall be accompanied by a fee not to exceed \$10.

The department may promulgate rules to carry out these provisions, which may include, but not be limited to, a determination of who may access the registry, including physicians, other licensed health care providers, the declarant, and his or her legal representative or designee. Failure to register a document with the registry or failure to notify the registry of the revocation of a document shall not affect the validity of the document or revocation (Section 194.600).

DRUG OR ALCOHOL OVERDOSES

This bill allows a person who, in good faith, seeks or obtains medical assistance for himself or herself or someone else who is experiencing a drug or alcohol overdose or other medical emergency shall not be arrested, charged, prosecuted, convicted, or have his

or her property subject to civil forfeiture or otherwise penalized for offenses specified in the bill if the evidence, charge, prosecution, conviction, seizure, or penalty was gained as a result of seeking or obtaining medical assistance.

This bill shall not prevent a police officer from arresting a person for an outstanding warrant or prevent a person from being arrested, charged, or prosecuted based on an offense other than the specified offenses in the bill, whether the offense arises from the same circumstances as the seeking of medical assistance. Additionally, the protection from prosecution under this bill for possession offenses shall not be grounds for suppression of evidence or dismissal in charges unrelated to this bill.

Any police officer who is in contact with any person or persons in need of emergency medical assistance under this bill shall provide appropriate information and resources for substance-related assistance (Section 195.205).

OPIOID ANTAGONIST

This bill gives the Director of the Department of Health and Senior Services, or a licensed physician with the express written consent of the director if the director is not a licensed physician, the authority to issue a statewide standing order for an opioid antagonist. A physician issuing such an order shall not be subject to any criminal or civil liability or professional disciplinary action associated with the order (Section 196.206).

EPINEPHRINE AUTO-INJECTORS

This bill allows a physician to prescribe epinephrine (EPI) auto-injectors in the name of an authorized entity for use in certain emergency situations. Pharmacists, physicians, and other persons authorized to dispense prescription medications may dispense EPI auto-injectors under a prescription issued in the name of an authorized entity. An "authorized entity" is defined as any entity or organization at or in connection with locations where allergens capable of causing anaphylaxis may be present, including but not limited to restaurants, recreation camps, youth sports leagues, amusement parks, and sports arenas.

The bill also allows such authorized entities to acquire and stock a supply of EPI auto-injectors under a prescription issued in accordance with the provisions of the bill. An employee or agent of an authorized entity or any other person who has completed the required training shall be allowed to use the EPI auto-injector on the premises of or in connection with the authorized entity to provide it to any individual who the employee, agent, or other

person believes in good faith is experiencing anaphylaxis, regardless of whether the individual has a prescription for the EPI auto-injector or has been previously diagnosed with an allergy. The employee or agent shall not administer or provide the auto-injector to a person who is 18 years of age or younger without the verbal consent of a parent or guardian who is present at the time, unless the child will be in imminent danger without the use of the auto-injector.

The bill specifies the required training and the procedures for making the EPI auto-injectors available to individuals other than trained persons, as long as the auto-injectors are secured and properly stored. The bill also requires all basic life support ambulances and stretcher vans to be equipped with EPI auto-injectors and staffed by at least one person trained in the use of the auto-injectors.

This bill exempts certain persons and entities from liability for any injuries or related damages that result from the administration or self-administration of an EPI auto-injector in accordance with the provisions of the bill that may constitute ordinary negligence. The immunity shall not apply to acts or omissions constituting reckless disregard for the safety of others, or willful or wanton conduct, and shall be in addition to and not in lieu of the protections provided under the Good Samaritan emergency law. No trained person who is in compliance with this law and who in good faith and with reasonable care fails to administer the EPI auto-injector shall be liable for that failure (Section 196.990).

HOSPITAL LICENSURE

Beginning July 1, 2018, the bill specifies that compliance with Medicare conditions of participation shall be deemed to constitute compliance with the standards for hospital licensure in this state. Nothing in this bill shall preclude the Department of Health and Senior Services from promulgating regulations, with specific statutory authorization, to define separate regulatory standards that do not duplicate the Medicare conditions of participation. Regulations promulgated by the department that duplicate or conflict with Medicare conditions of participation shall lapse and expire on and after July 1, 2018.

These provisions contain a delayed effective date of July 1, 2018 (Sections 197.005, 197.040, 197.050, 197.070, 197.071, 197.080, and 197.100).

IMMUNIZATION EDUCATION

This bill requires all Missouri assisted living facilities, to

notify residents and staff, no later than October 1 each year, where in the facility the latest edition of the Vaccine Informational Sheet published by the Centers for Disease Control and Prevention has been posted. Nothing in this bill shall be construed to require any assisted living facility to pay for an influenza vaccination, allow the Department of Health and Senior Services to promulgate any rules to implement this provision, or cite any facility for acting in good faith to post the Vaccine Informational Sheet (Section 198.053).

PROFESSIONAL REGISTRATION

This bill provides that the Division of Professional Registration, within the Department of Insurance, Financial Institutions and Professional Registration, shall allow a licensee to submit payment for fees in the form of personal check, money order, cashier's check, credit card, or electronic check. An applicant or licensee may apply for licensure or renewal in writing or electronically. A licensee may make requests for an extension of time to complete continuing education requirement, notify the board or commission of changes in name, business name, home address, work address, or provide any other items required as part of licensure in writing or electronically (Section 324.003).

SPORTS MEDICINE

This bill permits a physician to travel into Missouri with an athletic team and provide sports-related medical services to specified individuals related to the athletic team, band, dance team, or cheerleading squad, so long as the physician is currently licensed to practice medicine in another state and has a written agreement with an athletic team located in the state where the physician is licensed. The bill prohibits such physician from providing medical services at a health care facility in Missouri (Section 334.010).

ASSISTANT PHYSICIANS

This bill modifies the definition of "assistant physician" to allow any medical school graduate who has met the requirements to be an assistant physician between August 28, 2014, and August 28, 2017, to be deemed to be in compliance with the requirements of becoming an assistant physician (Section 334.036).

PHYSICIAN ASSISTANTS

This bill removes the requirement that a physician assistant may only dispense drugs, medicines, devices, or therapies pursuant to a physician supervision agreement (Section 334.735).

PSYCHOLOGIST INTERNSHIPS

This bill changes the experience requirements for initial licensure as a psychologist. The bill specifies that supervised professional experience may be accrued through preinternship, internship, predoctoral postinternship, or postdoctoral experiences. Each applicant shall complete 1,500 hours of supervised professional experience as part of his or her required internship, along with an additional 2,000 hours through preinternship, predoctoral postinternship, internship, or postdoctoral experiences (Sections 337.010 and 337.025).

VACCINE PROTOCOLS

This bill requires pharmacists to administer vaccines by protocol in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (Section 338.010).

SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS

This bill provides that license renewal for speech-language pathologists and audiologists shall occur no less frequently than every three years. Additionally, the continued competence requirements for licensed speech-language pathologists and audiologists may include up to 30 hours triennially of continuing education, examination, self-evaluation, peer review, performance appraisal, or practical simulation (Section 345.051).

MEDICATION-ASSISTED TREATMENT

This bill allows participants in drug courts, family courts, and veterans courts to receive medication-assisted treatment under the care of a licensed physician if the participant requires such treatment for substance abuse dependence. A participant assigned to a substance abuse treatment program for substance abuse or dependence shall not be in violation of the terms or conditions of the program on the basis of his or her participation in medication-assisted treatment (Sections 478.004 and 487.200).

DRUG TAKE-BACK PROGRAM

This bill gives the Missouri Board of Pharmacy the ability to allocate funds to develop a drug take-back program to collect and dispose of Schedule II and III controlled substances (Section 1).