

House _____ Amendment NO. _____

Offered By _____

1 AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 203,
2 Page 1, Section A, Line 4, by inserting after said section and line the following:

3
4 "59.021. A candidate for county recorder where the offices of the clerk of the court and
5 recorder of deeds are separate, except in any city not within a county or any county having a charter
6 form of government, shall be at least twenty-one years of age, a registered voter, and a resident of
7 the state of Missouri as well as the county in which he or she is a candidate for at least one year
8 prior to the date of the general election. Upon election to office, the person shall continue to reside
9 in that county during his or her tenure in office. Each candidate for county recorder shall also
10 provide to the election authority a copy of a signed affidavit from a surety company authorized to do
11 business in this state indicating that the candidate meets the bond requirements for the office of
12 county recorder under this chapter.

13 59.100. 1. Every recorder elected prior to January 1, 2020, as provided in section 59.020,
14 before entering upon the duties of the office as recorder, shall enter into bond to the state, in a sum
15 set by the county commission of not less than one thousand dollars, with sufficient sureties, not less
16 than two, to be approved by the commission, conditioned for the faithful performance of the duties
17 enjoined on such person by law as recorder, and for the delivering up of the records, books, papers,
18 writings, seals, furniture and apparatus belonging to the office, whole, safe and undefaced, to such
19 officer's successor.

20 2. Every recorder elected after January 1, 2020, as provided in section 59.020, before
21 entering upon the duties of the office as recorder, shall enter into bond to the state, in a sum set by
22 the county commission of not less than five thousand dollars, with sufficient sureties, not less than
23 two, to be approved by the commission, conditioned for the faithful performance of the duties
24 enjoined on such person by law as recorder, and for the delivering up of the records, books, papers,
25 writings, seals, furniture, and apparatus belonging to the office, whole, safe, and undefaced, to such
26 officer's successor."; and

27
28 Further amend said bill, Page 8, Section 88.770, Line 79, by inserting after all of said section and
29 line the following:

30
31 "161.700. 1. This section shall be known as the "Holocaust Education and Awareness
32 Commission Act".

33 2. There is hereby created a permanent state commission known as the "Holocaust
34 Education and Awareness Commission". The commission shall be housed in the department of
35 elementary and secondary education and shall promote implementation of holocaust education and
36 awareness programs in Missouri in order to encourage understanding of the holocaust and

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discourage bigotry.

3. The commission shall be composed of twelve members to be appointed by the governor with advice and consent of the senate. The makeup of the commission shall be:

- (1) The commissioner of higher education;
- (2) The commissioner of elementary and secondary education;
- (3) The president of the University of Missouri system; and
- (4) Nine members of the public, representative of the diverse religious and ethnic heritage groups populating Missouri.

4. The holocaust education and awareness commission may receive such funds as appropriated from public moneys or contributed to it by private sources. It may sponsor programs or publications to educate the public about the crimes of genocide in an effort to deter indifference to crimes against humanity and human suffering wherever they occur.

5. The term "holocaust" shall be defined as the period from 1933 through 1945 when six million Jews and millions of others were murdered ~~[in Nazi concentration camps]~~ by Nazi Germany and its collaborators as part of a structured, state-sanctioned program of genocide.

6. The commission may employ an executive director and such other persons to carry out its functions.

192.990. 1. There is hereby established within the department of health and senior services the "Pregnancy-Associated Mortality Review Board" to improve data collection and reporting with respect to maternal deaths. The department may collaborate with localities and with other states to meet the goals of the initiative.

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

- (1) "Department", the Missouri department of health and senior services;
- (2) "Maternal death", the death of a woman while pregnant or during the one-year period following the date of the end of pregnancy, regardless of the cause of death and regardless of whether a delivery, miscarriage, or death occurs inside or outside of a hospital.

3. The board shall be composed of no more than eighteen members, with a chair elected from among its membership. The board shall meet at least twice per year and shall approve the strategic priorities, work processes, and products of the board. Members of the board shall be appointed by the director of the department. Members shall serve four-year terms, except that the initial terms shall be staggered so that approximately one-third serve three, four, and five-year terms.

4. The board shall have a multidisciplinary and diverse membership that represents a variety of medical and nursing specialties, including, but not limited to, obstetrics and maternal-fetal care, as well as state or local public health officials, epidemiologists, statisticians, community organizations, geographic regions, and other individuals or organizations that are most affected by maternal deaths and lack of access to maternal health care services.

5. The duties of the board shall be limited to:

- (1) Conducting ongoing comprehensive, multidisciplinary reviews of all maternal deaths;
- (2) Identifying factors associated with maternal deaths;
- (3) Reviewing medical records and other relevant data, which shall include, to the extent available:

(a) A description of the maternal deaths determined by matching each death record of a maternal death to a birth certificate of an infant or fetal death record, as applicable, and an indication of whether the delivery, miscarriage, or death occurred inside or outside of a hospital;

(b) Data collected from medical examiner and coroner reports, as appropriate; and

(c) Using other appropriate methods or information to identify maternal deaths, including deaths from pregnancy outcomes not identified under paragraph (a) of this subdivision;

(4) Consulting with relevant experts, as needed;

(5) Analyzing cases to produce recommendations for reducing maternal mortality;

(6) Disseminating recommendations to policy makers, health care providers and facilities, and the general public;

(7) Recommending and promoting preventative strategies and making recommendations for systems changes;

(8) Protecting the confidentiality of the hospitals and individuals involved in any maternal deaths;

(9) Examining racial and social disparities in maternal deaths;

(10) Subject to appropriation, providing for voluntary and confidential case reporting of maternal deaths to the appropriate state health agency by family members of the deceased, and other appropriate individuals, for purposes of review by the board;

(11) Making publicly available the contact information of the board for use in such reporting;

(12) Conducting outreach to local professional organizations, community organizations, and social services agencies regarding the availability of the review board; and

(13) Ensuring that data collected under this section is made available, as appropriate and practicable, for research purposes, in a manner that protects individually identifiable or potentially identifiable information and that is consistent with state and federal privacy laws.

6. The board may contract with other entities consistent with the duties of the board.

7. (1) Before June 30, 2020, and annually thereafter, the board shall submit to the Director of the Centers for Disease Control and Prevention, the director of the department, the governor, and the general assembly a report on maternal mortality in the state based on data collected through ongoing comprehensive, multidisciplinary reviews of all maternal deaths, and any other projects or efforts of the board. The data shall be collected using best practices to reliably determine and include all maternal deaths, regardless of the outcome of the pregnancy and shall include data, findings, and recommendations of the committee, and, as applicable, information on the implementation during such year of any recommendations submitted by the board in a previous year.

(2) The report shall be made available to the public on the department's website and the director shall disseminate the report to all health care providers and facilities that provide women's health services in the state.

8. The director of the department, or his or her designee, shall provide the board with the copy of the death certificate and any linked birth or fetal death certificate for any maternal death occurring within the state.

9. Upon request by the department, health care providers, health care facilities, clinics, laboratories, medical examiners, coroners, law enforcement agencies, driver's license bureaus, other state agencies, and facilities licensed by the department shall provide to the department data related to maternal deaths from sources such as medical records, autopsy reports, medical examiner's reports, coroner's reports, law enforcement reports, motor vehicle records, social services records, and other sources as appropriate. Such data requests shall be limited to maternal deaths which have occurred within the previous twenty-four months. No entity shall be held liable for civil damages or be subject to any criminal or disciplinary action when complying in good faith with a request from the department for information under the provisions of this subsection.

10. (1) The board shall protect the privacy and confidentiality of all patients, decedents, providers, hospitals, or any other participants involved in any maternal deaths. In no case shall any individually identifiable health information be provided to the public or submitted to an information clearinghouse.

(2) Nothing in this subsection shall prohibit the board or department from publishing statistical compilations and research reports that:

(a) Are based on confidential information relating to mortality reviews under this section;

1 and

2 (b) Do not contain identifying information or any other information that could be used to
3 ultimately identify the individuals concerned.

4 (3) Information, records, reports, statements, notes, memoranda, or other data collected
5 under this section shall not be admissible as evidence in any action of any kind in any court or
6 before any other tribunal, board, agency, or person. Such information, records, reports, notes,
7 memoranda, data obtained by the department or any other person, statements, notes, memoranda, or
8 other data shall not be exhibited nor their contents disclosed in any way, in whole or in part, by any
9 officer or representative of the department or any other person. No person participating in such
10 review shall disclose, in any manner, the information so obtained except in strict conformity with
11 such review project. Such information shall not be subject to disclosure under chapter 610.

12 (4) All information, records of interviews, written reports, statements, notes, memoranda, or
13 other data obtained by the department, the board, and other persons, agencies, or organizations so
14 authorized by the department under this section shall be confidential.

15 (5) All proceedings and activities of the board, opinions of members of such board formed
16 as a result of such proceedings and activities, and records obtained, created, or maintained under this
17 section, including records of interviews, written reports, statements, notes, memoranda, or other data
18 obtained by the department or any other person, agency, or organization acting jointly or under
19 contract with the department in connection with the requirements of this section, shall be
20 confidential and shall not be subject to subpoena, discovery, or introduction into evidence in any
21 civil or criminal proceeding; provided, however, that nothing in this section shall be construed to
22 limit or restrict the right to discover or use in any civil or criminal proceeding anything that is
23 available from another source and entirely independent of the board's proceedings.

24 (6) Members of the board shall not be questioned in any civil or criminal proceeding
25 regarding the information presented in or opinions formed as a result of a meeting or
26 communication of the board; provided, however, that nothing in this section shall be construed to
27 prevent a member of the board from testifying to information obtained independently of the board or
28 which is public information.

29 11. The department may use grant program funds to support the efforts of the board and may
30 apply for additional federal government and private foundation grants as needed. The department
31 may also accept private, foundation, city, county, or federal moneys to implement the provisions of
32 this section.

33 221.520. 1. As used in this section, the following terms shall mean:

34 (1) "Extraordinary circumstance", a substantial flight risk or some other extraordinary
35 medical or security circumstance that dictates restraints be used to ensure the safety and security of
36 a pregnant prisoner in her third trimester or a postpartum prisoner within forty-eight hours
37 postdelivery, the staff of the county or city jail or medical facility, other prisoners, or the public;

38 (2) "Labor", the period of time before a birth during which contractions are present;

39 (3) "Major bodily function", functions of the immune system, normal cell growth, and
40 digestive, bowel, bladder, neurological, respiratory, circulatory, endocrine, and reproductive
41 functions;

42 (4) "Medical emergency", a condition that, based on reasonable medical judgment, so
43 complicates the medical condition of a pregnant woman as to necessitate the immediate removal of
44 restraints to avert the death of the pregnant woman or for which a delay in removal of restraints will
45 create a serious risk of substantial and irreversible physical impairment of a major bodily function of
46 the pregnant woman;

47 (5) "Physician", any person licensed by the state board of registration for the healing arts to
48 practice medicine in this state;

49 (6) "Postpartum", the period of recovery immediately following childbirth, which is six

weeks for a vaginal birth or eight weeks for a cesarean birth, or longer if so determined by a physician or nurse;

(7) "Reasonable medical judgment", a medical judgment made by a reasonably prudent physician, knowledgeable about the case and the treatment possibilities with respect to the medical conditions involved;

(8) "Restraints", any physical restraint or other device used to control the movement of a person's body or limbs

(9) "Third trimester", gestational age, which is the length of pregnancy as measured from the first day of the woman's last menstrual period, of twenty-eight weeks or more;

(10) "Unborn child", the offspring of human beings from the moment of conception until birth and at every state of its biological development, including the human conceptus, zygote, morula, blastocyst, embryo, and fetus.

2. A county or city jail shall not use restraints on a pregnant prisoner in her third trimester, whether during transportation to and from visits to health care providers and court proceedings or medical appointments and examinations, or during labor, delivery, or forty-eight hours postdelivery.

3. Pregnant prisoners shall be transported in vehicles equipped with seatbelts.

4. Any time restraints are used on a pregnant prisoner in her third trimester or on a postpartum prisoner within forty-eight hours postdelivery, as documented by a physician and for which the county or city officer or sheriff or jailer has written notice, the restraints shall be the least restrictive available and the most reasonable under the circumstances. Only in extraordinary circumstances, as determined by a county or city officer or jail official, shall ankle or waist restraints be used on any such offender.

5. If, based on his or her reasonable medical judgment, a doctor, nurse, or other licensed health care provider treating the pregnant prisoner in her third trimester or the postpartum prisoner within forty-eight hours postdelivery, as previously documented by a physician, finds that a medical emergency exists and requests that restraints not be used, the county or city officer or sheriff or jailer accompanying such prisoner shall immediately remove all restraints.

6. In the event a county or city officer or sheriff or jailer determines that extraordinary circumstances exist and restraints are necessary, the officer, sheriff, or jailer shall fully document in writing within forty-eight hours of the incident the reasons he or she determined such extraordinary circumstances existed, the type of restraints used, and the reasons those restraints were considered the least restrictive available and the most reasonable under the circumstances. Such documents shall be kept on file by the county or city jail for at least five years from the date the restraints were used.

7. The county or city jail shall inform female prisoners, in writing and orally, of any policies and practices developed in accordance with this section upon admission to the jail, and post the policies and practices in locations in the jail where such notices are commonly posted and will be seen by female prisoners."; and

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