#### SECOND REGULAR SESSION

## [TRULY AGREED TO AND FINALLY PASSED]

#### CONFERENCE COMMITTEE SUBSTITUTE NO. 2 FOR

SENATE SUBSTITUTE FOR

# HOUSE BILL NO. 2149

# 101ST GENERAL ASSEMBLY

4028H.06T

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2022

# AN ACT

To repeal sections 197.400, 197.445, 327.312, 327.313, 327.314, 327.331, 334.100, 334.530, 334.655, 338.055, 345.015, and 345.050, RSMo, and to enact in lieu thereof seventeen new sections relating to professional licensing, with an emergency clause for a certain section.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 197.400, 197.445, 327.312, 327.313, 327.314, 327.331, 334.100,

- 2 334.530, 334.655, 338.055, 345.015, and 345.050, RSMo, are repealed and seventeen new
- 3 sections enacted in lieu thereof, to be known as sections 197.400, 197.445, 324.005, 327.312,
- 4 327.313, 327.314, 327.331, 332.325, 334.100, 334.530, 334.655, 338.055, 345.015, 345.022,
- 5 345.050, 345.052, and 345.085, to read as follows:

197.400. As used in sections 197.400 to 197.475, unless the context otherwise requires, the following terms mean:

- 3 (1) "Council", the home health services advisory council created by sections 197.400 4 to 197.475:
  - (2) "Department", the department of health and senior services;
- 6 (3) "Home health agency", a public agency or private organization or a subdivision or subunit of an agency or organization that provides two or more home health services at the
- 8 residence of a patient according to a [physician's] written [and signed] plan of treatment
- 9 signed by a physician, nurse practitioner, clinical nurse specialist, or physician assistant;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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- 10 (4) "Home health services", any of the following items and services provided at the 11 residence of the patient on a part-time or intermittent basis: nursing, physical therapy, speech 12 therapy, occupational therapy, home health aid, or medical social service;
  - (5) "Nurse practitioner, clinical nurse specialist", a person recognized by the state board of nursing pursuant to the provisions of chapter 335 to practice in this state as a nurse practitioner or clinical nurse specialist;
  - (6) "Part-time or intermittent basis", the providing of home health services in an interrupted interval sequence on the average of not to exceed three hours in any twenty-four-hour period;
  - [(6)] (7) "Patient's residence", the actual place of residence of the person receiving home health services, including institutional residences as well as individual dwelling units;
  - [(7)] (8) "Physician", a person licensed by the state board of registration for the healing arts pursuant to the provisions of chapter 334 to practice in this state as a physician and surgeon;
  - (9) "Physician assistant", a person licensed by the state board of registration for the healing arts pursuant to the provisions of chapter 334 to practice in this state as a physician assistant;
  - [(8)] (10) "Plan of treatment", a plan reviewed and signed as often as [medically] necessary by a physician [or], podiatrist, nurse practitioner, clinical nurse specialist, or a physician assistant, not to exceed sixty days in duration, and reviewed by a physician at least once every six months, prescribing items and services for an individual patient's condition;
  - [(9)] (11) "Podiatrist", a person licensed by the state board of podiatry pursuant to the provisions of chapter 330 to practice in this state as a podiatrist;
  - [(10)] (12) "Subunit" or "subdivision", any organizational unit of a larger organization which can be clearly defined as a separate entity within the larger structure, which can meet all of the requirements of sections 197.400 to 197.475 independent of the larger organization, which can be held accountable for the care of patients it is serving, and which provides to all patients care and services meeting the standards and requirements of sections 197.400 to 197.475.
- 197.445. 1. The department may adopt reasonable rules and standards necessary to carry out the provisions of sections 197.400 to 197.477. The rules and standards adopted shall not be less than the standards established by the federal government for home health agencies under Title XVIII of the Federal Social Security Act. The reasonable rules and standards shall be initially promulgated within one year of September 28, 1983.
  - 2. The rules and standards adopted by the department pursuant to the provisions of sections 197.400 to 197.477 shall apply to all health services covered by sections 197.400 to

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- 8 197.477 rendered to any patient being served by a home health agency regardless of source of 9 payment for the service, patient's condition, or place of residence, at which the home health 10 services are ordered by the physician [or], podiatrist, nurse practitioner, clinical nurse 11 specialist, or physician assistant. No rule or portion of a rule promulgated pursuant to the
- 12 authority of sections 197.400 to 197.477 shall become effective unless it has been
- 13 promulgated pursuant to the provisions of section 536.024.
  - 324.005. 1. Notwithstanding any requirements for licensure for all professional boards, commissions, committees, and offices within the division of professional registration to the contrary, a professional who has a current license to practice from another state, commonwealth, territory, or the District of Columbia shall be exempt from the licensure requirements of his or her respective licensure board in this state if:
- 6 (1) The professional is an active duty or reserve member of the Armed Forces of
  7 the United States, a member of the National Guard, a civilian employee of the United
  8 States Department of Defense, an authorized services contractor under 10 U.S.C.
  9 Section 1091, or a professional otherwise authorized by the United States Department of
  10 Defense:
- 11 (2) The professional practices the same occupation or profession at the same 12 practice level for which he or she holds a current license; and
  - (3) The professional is engaged in the practice of a professional through a partnership with the federal Innovative Readiness Training program within the United States Department of Defense.
  - 2. The exemption provided in this section shall not permit a professional to engage in practice except as part of the federal Innovative Readiness Training program within the United States Department of Defense. The exemption shall only apply while:
  - (1) The professional's practice is required by the program pursuant to military orders; and
- 21 (2) The services provided by the professional are within the scope of practice for the individual's respective profession in this state.
- 327.312. 1. **Prior to January 1, 2024,** any person may apply to the board for enrollment as a land surveyor-in-training who is a high school graduate, or who holds a Missouri certificate of high school equivalence (GED), and either:
- 4 (1) Has graduated and received a baccalaureate degree in an approved curriculum as
  5 defined by board regulation which shall include at least twelve semester hours of approved
  6 surveying course work as defined by board regulation of which at least two semester hours
  7 shall be in the legal aspects of boundary surveying; or
- 8 (2) Has passed at least sixty hours of college credit which shall include credit for at 9 least twenty semester hours of approved surveying course work as defined by board

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regulation of which at least two semester hours shall be in legal aspects of boundary surveying and present evidence satisfactory to the board that in addition thereto such person has at least one year of combined professional office and field experience in land surveying projects under the immediate personal supervision of a professional land surveyor; or

- (3) Has passed at least twelve semester hours of approved surveying course work as defined by board regulation of which at least two semester hours shall be in legal aspects of land surveying and in addition thereto has at least two years of combined professional office and field experience in land surveying projects under the immediate personal supervision of a professional land surveyor. Pursuant to this provision, not more than one year of satisfactory postsecondary education work shall count as equivalent years of satisfactory land surveying work as aforementioned.
- 2. The board shall issue a certificate of completion to each applicant who satisfies the requirements of the aforementioned land surveyor-in-training program and passes such examination or examinations as shall be required by the board.
- 3. Beginning January 1, 2024, any person may apply to the board for enrollment as a land surveyor-intern who is a high school graduate, or who holds a certificate of high school equivalence (GED), and has passed any examination required by the board pursuant to section 327.331.
- 327.313. Applications for enrollment as a land [surveyor-in-training] surveyorintern shall be typewritten on prescribed forms furnished to the applicant. The application
  shall contain applicant's statements showing the applicant's education, experience, and such
  other pertinent information as the board may require. Each application shall contain a
  statement that it is made under oath or affirmation and that the representations are true and
  correct to the best knowledge and belief of the applicant, subject to the penalties of making a
  false affidavit or declaration and shall be accompanied by the required fee.
- 327.314. **1. Prior to January 1, 2024,** any person may apply to the board for licensure as a professional land surveyor who has been enrolled as a land surveyor-in-training and has presented evidence to the satisfaction of the board that said person has acquired at least four years of satisfactory professional field and office experience in land surveying from the date of enrollment as a land surveyor-in-training. This experience shall have been under the immediate personal supervision of a professional land surveyor.
  - 2. Beginning January 1, 2024, any person may apply to the board for licensure who presents evidence satisfactory to the board that the applicant has met the requirements as provided in this subsection:
  - (1) An applicant shall be a high school graduate or hold a certificate of high school equivalence (GED), and either:

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- (a) Has graduated and received a baccalaureate degree in an approved curriculum, as defined by the board, which shall include at least fifteen semester hours of approved surveying course work, as defined by the board, of which at least six semester hours shall be in the legal aspects of boundary surveying; or
- (b) Has passed at least sixty hours of college credit which shall include at least fifteen semester hours of approved surveying course work, as defined by the board, of which at least six semester hours shall be in legal aspects of boundary surveying; or
- (c) Has passed at least fifteen semester hours of approved surveying coursework, as defined by the board, of which at least six semester hours shall be in legal aspects of land surveying;
- (d) An applicant meeting the requirements of paragraph (a) of this subdivision shall have acquired at least four years of satisfactory field and office experience in land surveying under the immediate personal supervision of a professional land surveyor;
- (e) An applicant meeting the requirements of paragraph (b) of this subdivision shall have acquired at least five years of satisfactory field and office experience in land surveying under the immediate personal supervision of a professional land surveyor;
- (f) An applicant meeting the requirements of paragraph (c) of this subdivision shall have acquired at least six years of satisfactory field and office experience in land surveying under the immediate personal supervision of a professional land surveyor. Pursuant to this provision, up to one year of post-secondary education, approved by the board, may count as equivalent work experience;
- 33 (2) An applicant shall pass any examinations required by the board pursuant to section 327.331;
  - (3) Any person enrolled as a land surveyor-in-training prior to January 1, 2024, shall only be required to meet the requirements in place pursuant to their enrollment.
  - 327.331. 1. After it has been determined that an applicant possesses the qualifications entitling the applicant to be examined, each applicant for examination and enrollment as a land surveyor-in-training and for examination and licensure as a professional land surveyor in Missouri shall appear before the board or its representatives for examination at the time and place specified.
  - 2. The examination or examinations shall be of such form, content and duration as shall be determined by the board to thoroughly test the qualifications of each applicant to become enrolled as a land [surveyor-in-training] surveyor-intern or to become licensed as a professional land surveyor in Missouri.
- 3. Any applicant to be eligible for enrollment or for license must make a grade on the applicable examination of at least seventy percent.

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- 12 4. Any person who passes the examination hereinabove specified shall be entitled to be enrolled as a land [surveyor-in-training] surveyor-intern or licensed as a professional land 13 surveyor, as the case may be, in Missouri and shall receive a certificate of enrollment or a license, as the case may be. 15
- 332.325. 1. The Missouri dental board may collaborate with the department of 2 health and senior services and the office of dental health within the department of health and senior services to approve pilot projects designed to examine new methods of 4 extending care to medically underserved populations, as defined in 42 U.S.C. Section 300e-1(7). These pilot projects may employ techniques or approaches to care that may necessitate a waiver of the requirements of this chapter and regulations promulgated thereunder; provided:
  - The project plan has a clearly stated objective of serving a specific **(1)** underserved population that warrants, in the opinion of a majority of the board, granting approval for a pilot project;
    - (2) The project has a finite start date and termination date;
  - (3) The project clearly defines the new techniques or approaches it intends to examine to determine if it results in an improvement in access or quality of care;
  - (4) The project plan identifies specific and limited locations and populations to participate in the pilot project;
  - (5) The project plan clearly establishes minimum guidelines and standards for the pilot project, including, but not limited to, provisions for protecting safety of participating patients;
  - (6) The project plan clearly defines the measurement criteria it will use to evaluate the outcomes of the pilot project on access and quality of care; and
  - (7) The project plan identifies reporting intervals to communicate interim and final outcomes to the board.
  - 2. The board may promulgate rules and regulations 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, 2022, shall be invalid and void.
- 32 3. The provisions of this section shall expire on August 28, 2026. The board shall provide a final report on approved projects and related data or findings to the general 33

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assembly on or before December 31, 2025. The name, location, approval dates, and general description of an approved pilot project shall be deemed a public record pursuant to chapter 610.

334.100. 1. The board may refuse to issue or renew any certificate of registration or authority, permit or license required pursuant to this chapter for one or any combination of causes stated in subsection 2 of this section. The board shall notify the applicant in writing of 4 the reasons for the refusal and shall advise the applicant of the applicant's right to file a complaint with the administrative hearing commission as provided by chapter 621. As an alternative to a refusal to issue or renew any certificate, registration or authority, the board may, at its discretion, issue a license which is subject to probation, restriction or limitation to an applicant for licensure for any one or any combination of causes stated in subsection 2 of this section. The board's order of probation, limitation or restriction shall contain a statement 10 of the discipline imposed, the basis therefor, the date such action shall become effective, and a statement that the applicant has thirty days to request in writing a hearing before the administrative hearing commission. If the board issues a probationary, limited or restricted 12 13 license to an applicant for licensure, either party may file a written petition with the administrative hearing commission within thirty days of the effective date of the probationary, 15 limited or restricted license seeking review of the board's determination. If no written request for a hearing is received by the administrative hearing commission within the thirty-day 16 period, the right to seek review of the board's decision shall be considered as waived. 17

- 2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by this chapter or any person who has failed to renew or has surrendered the person's certificate of registration or authority, permit or license for any one or any combination of the following causes:
- (1) Use of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by this chapter;
- (2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to this chapter, for any offense involving fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
- (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to this chapter or in obtaining permission to take any examination given or required pursuant to this chapter;

- (4) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:
- (a) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation; willfully and continually overcharging or overtreating patients; or charging for visits to the physician's office which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;
- (b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;
- (c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests or medical or surgical services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience or licensure to perform such responsibilities;
- (e) Misrepresenting that any disease, ailment or infirmity can be cured by a method, procedure, treatment, medicine or device;
- (f) Performing or prescribing medical services which have been declared by board rule to be of no medical or osteopathic value;
- (g) Final disciplinary action by any professional medical or osteopathic association or society or licensed hospital or medical staff of such hospital in this or any other state or territory, whether agreed to voluntarily or not, and including, but not limited to, any removal, suspension, limitation, or restriction of the person's license or staff or hospital privileges, failure to renew such privileges or license for cause, or other final disciplinary action, if the action was in any way related to unprofessional conduct, professional incompetence, malpractice or any other violation of any provision of this chapter;
- (h) Signing a blank prescription form; or dispensing, prescribing, administering or otherwise distributing any drug, controlled substance or other treatment without sufficient examination including failing to establish a valid physician-patient relationship pursuant to section 334.108, or for other than medically accepted therapeutic or experimental or investigative purposes duly authorized by a state or federal agency, or not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, except as authorized in section 334.104;
- (i) Exercising influence within a physician-patient relationship for purposes of engaging a patient in sexual activity;
  - (i) Being listed on any state or federal sexual offender registry;
- 70 (k) Terminating the medical care of a patient without adequate notice or without 71 making other arrangements for the continued care of the patient;

- (l) Failing to furnish details of a patient's medical records to other treating physicians or hospitals upon proper request; or failing to comply with any other law relating to medical records;
- 75 (m) Failure of any applicant or licensee to cooperate with the board during any 76 investigation;
- 77 (n) Failure to comply with any subpoena or subpoena duces tecum from the board or 78 an order of the board;
  - (o) Failure to timely pay license renewal fees specified in this chapter;
  - (p) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;
  - (q) Failing to inform the board of the physician's current residence and business address:
  - (r) Advertising by an applicant or licensee which is false or misleading, or which violates any rule of the board, or which claims without substantiation the positive cure of any disease, or professional superiority to or greater skill than that possessed by any other physician. An applicant or licensee shall also be in violation of this provision if the applicant or licensee has a financial interest in any organization, corporation or association which issues or conducts such advertising;
    - (s) Any other conduct that is unethical or unprofessional involving a minor;
  - (5) Any conduct or practice which is or might be harmful or dangerous to the mental or physical health of a patient or the public; or incompetency, gross negligence or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by this chapter. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;
  - (6) Violation of, or attempting to violate, directly or indirectly, or assisting or enabling any person to violate, any provision of this chapter or chapter 324, or of any lawful rule or regulation adopted pursuant to this chapter or chapter 324;
  - (7) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
  - (8) Revocation, suspension, restriction, modification, limitation, reprimand, warning, censure, probation or other final disciplinary action against the holder of or applicant for a license or other right to practice any profession regulated by this chapter by another state, territory, federal agency or country, whether or not voluntarily agreed to by the licensee or applicant, including, but not limited to, the denial of licensure, surrender of the license,

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- allowing the license to expire or lapse, or discontinuing or limiting the practice of medicine while subject to an investigation or while actually under investigation by any licensing authority, medical facility, branch of the Armed Forces of the United States of America, insurance company, court, agency of the state or federal government, or employer;
- 113 (9) A person is finally adjudged incapacitated or disabled by a court of competent 114 jurisdiction;
  - (10) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by this chapter who is not registered and currently eligible to practice pursuant to this chapter; or knowingly performing any act which in any way aids, assists, procures, advises, or encourages any person to practice medicine who is not registered and currently eligible to practice pursuant to this chapter. A physician who works in accordance with standing orders or protocols or in accordance with the provisions of section 334.104 shall not be in violation of this subdivision;
  - (11) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
- 124 (12) Failure to display a valid certificate or license if so required by this chapter or 125 any rule promulgated pursuant to this chapter;
  - (13) Violation of the drug laws or rules and regulations of this state, including but not limited to any provision of chapter 195, any other state, or the federal government;
  - (14) Knowingly making, or causing to be made, or aiding, or abetting in the making of, a false statement in any birth, death or other certificate or document executed in connection with the practice of the person's profession;
    - (15) Knowingly making a false statement, orally or in writing to the board;
  - (16) Soliciting patronage in person or by agents or representatives, or by any other means or manner, under the person's own name or under the name of another person or concern, actual or pretended, in such a manner as to confuse, deceive, or mislead the public as to the need or necessity for or appropriateness of health care services for all patients, or the qualifications of an individual person or persons to diagnose, render, or perform health care services;
  - (17) Using, or permitting the use of, the person's name under the designation of "Doctor", "Dr.", "M.D.", or "D.O.", or any similar designation with reference to the commercial exploitation of any goods, wares or merchandise;
  - (18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630 or for payment from Title XVIII or Title XIX of the Social Security Act;
- 144 (19) Failure or refusal to properly guard against contagious, infectious or 145 communicable diseases or the spread thereof; maintaining an unsanitary office or

performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;

- (20) Any candidate for licensure or person licensed to practice as a physical therapist, paying or offering to pay a referral fee or, notwithstanding section 334.010 to the contrary, practicing or offering to practice professional physical therapy independent of the prescription and direction of a person licensed and registered as a physician and surgeon pursuant to this chapter, as a dentist pursuant to chapter 332, as a podiatrist pursuant to chapter 330, as an advanced practice registered nurse under chapter 335, or any licensed and registered physician, dentist, podiatrist, or advanced practice registered nurse practicing in another jurisdiction, whose license is in good standing;
- (21) Any candidate for licensure or person licensed to practice as a physical therapist, treating or attempting to treat ailments or other health conditions of human beings other than by professional physical therapy and as authorized by sections 334.500 to 334.620;
- (22) Any person licensed to practice as a physician or surgeon, requiring, as a condition of the physician-patient relationship, that the patient receive prescribed drugs, devices or other professional services directly from facilities of that physician's office or other entities under that physician's ownership or control. A physician shall provide the patient with a prescription which may be taken to the facility selected by the patient and a physician knowingly failing to disclose to a patient on a form approved by the advisory commission for professional physical therapists as established by section 334.625 which is dated and signed by a patient or guardian acknowledging that the patient or guardian has read and understands that the physician has a pecuniary interest in a physical therapy or rehabilitation service providing prescribed treatment and that the prescribed treatment is available on a competitive basis. This subdivision shall not apply to a referral by one physician to another physician within a group of physicians practicing together;
- (23) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed or administered by another physician who is authorized by law to do so;
- (24) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section 302.525;
- (25) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement or licensee's professional health program;
- (26) Revocation, suspension, limitation, probation, or restriction of any kind whatsoever of any controlled substance authority, whether agreed to voluntarily or not, or voluntary termination of a controlled substance authority while under investigation;
- (27) For a physician to operate, conduct, manage, or establish an abortion facility, or for a physician to perform an abortion in an abortion facility, if such facility comes under the

definition of an ambulatory surgical center pursuant to sections 197.200 to 197.240, and such facility has failed to obtain or renew a license as an ambulatory surgical center.

- 3. Collaborative practice arrangements, protocols and standing orders shall be in writing and signed and dated by a physician prior to their implementation.
- 4. After the filing of such complaint before the administrative hearing commission, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, warn, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed ten years, or may suspend the person's license, certificate or permit for a period not to exceed three years, or restrict or limit the person's license, certificate or permit for an indefinite period of time, or revoke the person's license, certificate, or permit, or administer a public or private reprimand, or deny the person's application for a license, or permanently withhold issuance of a license or require the person to submit to the care, counseling or treatment of physicians designated by the board at the expense of the individual to be examined, or require the person to attend such continuing educational courses and pass such examinations as the board may direct.
- 5. In any order of revocation, the board may provide that the person may not apply for reinstatement of the person's license for a period of time ranging from two to seven years following the date of the order of revocation. All stay orders shall toll this time period.
- 6. Before restoring to good standing a license, certificate or permit issued pursuant to this chapter which has been in a revoked, suspended or inactive state for any cause for more than two years, the board may require the applicant to attend such continuing medical education courses and pass such examinations as the board may direct.
- 7. In any investigation, hearing or other proceeding to determine a licensee's or applicant's fitness to practice, any record relating to any patient of the licensee or applicant shall be discoverable by the board and admissible into evidence, regardless of any statutory or common law privilege which such licensee, applicant, record custodian or patient might otherwise invoke. In addition, no such licensee, applicant, or record custodian may withhold records or testimony bearing upon a licensee's or applicant's fitness to practice on the ground of privilege between such licensee, applicant or record custodian and a patient.
- 8. The act of lawfully dispensing, prescribing, administering, or otherwise distributing ivermectin tablets or hydroxychloroquine sulfate tablets for human use shall not be grounds for denial, suspension, revocation, or other disciplinary action by the board.
- 334.530. 1. A candidate for license to practice as a physical therapist shall furnish evidence of such person's educational qualifications by submitting satisfactory evidence of

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- completion of a program of physical therapy education approved as reputable by the board or eligibility to graduate from such a program within ninety days. A candidate who presents satisfactory evidence of the person's graduation from a school of physical therapy approved as reputable by the American Medical Association or, if graduated before 1936, by the American
- 7 Physical Therapy Association, or if graduated after 1988, the Commission on Accreditation
- 8 for Physical Therapy Education or its successor, is deemed to have complied with the
- 9 educational qualifications of this subsection.
  - 2. Persons desiring to practice as physical therapists in this state shall appear before the board at such time and place as the board may direct and be examined as to their fitness to engage in such practice. Applicants shall meet the qualifying standards for such examinations, including any requirements established by any entity contracted by the board to administer the board-approved examination. Applications for examination shall be in writing, on a form furnished by the board and shall include evidence satisfactory to the board that the applicant possesses the qualifications set forth in subsection 1 of this section and meets the requirements established to qualify for examination. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the applicant, subject to the penalties of making a false affidavit or declaration.
  - 3. The examination of qualified candidates for licenses to practice physical therapy shall test entry-level competence as related to physical therapy theory, examination and evaluation, physical therapy diagnosis, prognosis, treatment, intervention, prevention, and consultation.
  - 4. The examination shall embrace, in relation to the human being, the subjects of anatomy, chemistry, kinesiology, pathology, physics, physiology, psychology, physical therapy theory and procedures as related to medicine, surgery and psychiatry, and such other subjects, including medical ethics, as the board deems useful to test the fitness of the candidate to practice physical therapy.
  - 5. No person who has failed on six or more occasions to achieve a passing score on the examination required by this section shall be eligible for licensure by examination under this section.
- 6. The applicant shall pass a test administered by the board on the laws and rules related to the practice of physical therapy in Missouri.
  - 334.655. 1. A candidate for licensure to practice as a physical therapist assistant shall furnish evidence of the person's educational qualifications. The educational requirements for licensure as a physical therapist assistant are:
- 4 (1) A certificate of graduation from an accredited high school or its equivalent; and

- 5 (2) Satisfactory evidence of completion of an associate degree program of physical 6 therapy education accredited by the commission on accreditation of physical therapy 7 education or eligibility to graduate from such a program within ninety days.
  - 2. Persons desiring to practice as a physical therapist assistant in this state shall appear before the board at such time and place as the board may direct and be examined as to the person's fitness to engage in such practice. Applicants shall meet the qualifying standards for such examinations, including any requirements established by any entity contracted by the board to administer the board-approved examination. Applications for examination shall be on a form furnished by the board and shall include evidence satisfactory to the board that the applicant possesses the qualifications provided in subsection 1 of this section and meets the requirements established to qualify for examination. Each application shall contain a statement that the statement is made under oath of affirmation and that its representations are true and correct to the best knowledge and belief of the person signing the statement, subject to the penalties of making a false affidavit or declaration.
  - 3. The examination of qualified candidates for licensure to practice as physical therapist assistants shall embrace an examination which shall cover the curriculum taught in accredited associate degree programs of physical therapy assistant education. Such examination shall be sufficient to test the qualification of the candidates as practitioners.
  - 4. The examination shall include, as related to the human body, the subjects of anatomy, kinesiology, pathology, physiology, psychology, physical therapy theory and procedures as related to medicine and such other subjects, including medical ethics, as the board deems useful to test the fitness of the candidate to practice as a physical therapist assistant.
  - 5. No person who has failed on six or more occasions to achieve a passing score on the examination required by this section shall be eligible for licensure by examination under this section.
  - **6.** The applicant shall pass a test administered by the board on the laws and rules related to the practice as a physical therapist assistant in this state.
  - [6.] 7. The board shall license without examination any legally qualified person who is a resident of this state and who was actively engaged in practice as a physical therapist assistant on August 28, 1993. The board may license such person pursuant to this subsection until ninety days after the effective date of this section.
  - [7:] 8. A candidate to practice as a physical therapist assistant who does not meet the educational qualifications may submit to the board an application for examination if such person can furnish written evidence to the board that the person has been employed in this state for at least three of the last five years under the supervision of a licensed physical therapist and such person possesses the knowledge and training equivalent to that obtained in

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an accredited school. The board may license such persons pursuant to this subsection until ninety days after rules developed by the state board of healing arts regarding physical therapist assistant licensing become effective.

- 338.055. 1. The board may refuse to issue any certificate of registration or authority, permit or license required pursuant to this chapter for one or any combination of causes stated in subsection 2 of this section or if the designated pharmacist-in-charge, manager-in-charge, or any officer, owner, manager, or controlling shareholder of the applicant has committed any act or practice in subsection 2 of this section. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.
  - 2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by this chapter or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:
  - (1) Use of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by this chapter;
  - (2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated under this chapter, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;
  - (3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to this chapter or in obtaining permission to take any examination given or required pursuant to this chapter;
- 25 (4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation 26 by fraud, deception or misrepresentation;
  - (5) Incompetence, misconduct, gross negligence, fraud, misrepresentation or dishonesty in the performance of the functions or duties of any profession licensed or regulated by this chapter;
- 30 (6) Violation of, or assisting or enabling any person to violate, any provision of this chapter, or of any lawful rule or regulation adopted pursuant to this chapter;
  - (7) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license, or diploma from any school;

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- (8) Denial of licensure to an applicant or disciplinary action against an applicant or the holder of a license or other right to practice any profession regulated by this chapter granted by another state, territory, federal agency, or country whether or not voluntarily agreed to by the licensee or applicant, including, but not limited to, surrender of the license 39 upon grounds for which denial or discipline is authorized in this state;
  - (9) A person is finally adjudged incapacitated by a court of competent jurisdiction;
  - (10) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by this chapter who is not registered and currently eligible to practice under this chapter;
  - (11) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
  - (12) Failure to display a valid certificate or license if so required by this chapter or any rule promulgated hereunder;
    - (13) Violation of any professional trust or confidence;
  - (14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
  - (15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
  - (16) The intentional act of substituting or otherwise changing the content, formula or brand of any drug prescribed by written, electronic, or oral prescription without prior written or oral approval from the prescriber for the respective change in each prescription; provided, however, that nothing contained herein shall prohibit a pharmacist from substituting or changing the brand of any drug as provided under section 338.056, and any such substituting or changing of the brand of any drug as provided for in section 338.056 shall not be deemed unprofessional or dishonorable conduct unless a violation of section 338.056 occurs;
  - (17) Personal use or consumption of any controlled substance unless it is prescribed, dispensed, or administered by a health care provider who is authorized by law to do so.
  - After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate, or permit. The board may impose additional discipline on a licensee, registrant, or permittee found to have violated any disciplinary terms previously imposed under this section or by agreement. The additional discipline may include, singly or

in combination, censure, placing the licensee, registrant, or permittee named in the complaint on additional probation on such terms and conditions as the board deems appropriate, which additional probation shall not exceed five years, or suspension for a period not to exceed three years, or revocation of the license, certificate, or permit.

- 4. If the board concludes that a licensee or registrant has committed an act or is engaging in a course of conduct which would be grounds for disciplinary action which constitutes a clear and present danger to the public health and safety, the board may file a complaint before the administrative hearing commission requesting an expedited hearing and specifying the activities which give rise to the danger and the nature of the proposed restriction or suspension of the licensee's or registrant's license. Within fifteen days after service of the complaint on the licensee or registrant, the administrative hearing commission shall conduct a preliminary hearing to determine whether the alleged activities of the licensee or registrant appear to constitute a clear and present danger to the public health and safety which justify that the licensee's or registrant's license or registration be immediately restricted or suspended. The burden of proving that the actions of a licensee or registrant constitute a clear and present danger to the public health and safety shall be upon the state board of pharmacy. The administrative hearing commission shall issue its decision immediately after the hearing and shall either grant to the board the authority to suspend or restrict the license or dismiss the action.
- 5. If the administrative hearing commission grants temporary authority to the board to restrict or suspend the licensee's or registrant's license, such temporary authority of the board shall become final authority if there is no request by the licensee or registrant for a full hearing within thirty days of the preliminary hearing. The administrative hearing commission shall, if requested by the licensee or registrant named in the complaint, set a date to hold a full hearing under the provisions of chapter 621 regarding the activities alleged in the initial complaint filed by the board.
- 6. If the administrative hearing commission dismisses the action filed by the board pursuant to subsection 4 of this section, such dismissal shall not bar the board from initiating a subsequent action on the same grounds.
- 7. The board shall not deny, revoke, or suspend, or otherwise take any disciplinary action against, a certificate of registration or authority, permit, or license required by this chapter for any person due to the lawful dispensing, distributing, or selling of ivermectin tablets or hydroxychloroquine sulfate tablets for human use in accordance with prescriber directions. A pharmacist shall not contact the prescribing physician or the patient to dispute the efficacy of ivermectin tablets or hydroxychloroquine sulfate tablets for human use unless the physician or patient

#### inquires of the pharmacist about the efficacy of ivermectin tablets or hydroxychloroquine sulfate tablets. 109

345.015. As used in sections 345.010 to 345.080, the following terms mean:

- (1) "Audiologist", a person who is licensed as an audiologist pursuant to sections 2 3 345.010 to 345.080 to practice audiology;
- 4 (2) "Audiology aide", a person who is registered as an audiology aide by the board, 5 who does not act independently but works under the direction and supervision of a licensed Such person assists the audiologist with activities which require an audiologist. 6 understanding of audiology but do not require formal training in the relevant academics. To be eligible for registration by the board, each applicant shall submit a registration fee and:
- 9 (a) Be at least eighteen years of age;
- (b) Furnish evidence of the person's educational qualifications which shall be at a 10 minimum: 11
  - a. Certification of graduation from an accredited high school or its equivalent; and
- 13 b. On-the-job training;
- (c) Be employed in a setting in which direct and indirect supervision are provided on 14 a regular and systematic basis by a licensed audiologist. 15

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- 17 However, the aide shall not administer or interpret hearing screening or diagnostic tests, fit or dispense hearing instruments, make ear impressions, make diagnostic statements, determine 18 case selection, present written reports to anyone other than the supervisor without the 20 signature of the supervisor, make referrals to other professionals or agencies, use a title other than audiology aide, develop or modify treatment plans, discharge clients from treatment or 22 terminate treatment, disclose clinical information, either orally or in writing, to anyone other than the supervising audiologist, or perform any procedure for which he or she is not qualified, has not been adequately trained or both; 24
  - (3) "Board", the state board of registration for the healing arts;
  - "Clinical fellowship", the supervised professional employment period following completion of the academic and practicum requirements of an accredited training program under this chapter;
  - (5) "Commission", the advisory commission for speech-language pathologists and audiologists;
- [(5)] (6) "Hearing instrument" or "hearing aid", any wearable device or instrument 31 designed for or offered for the purpose of aiding or compensating for impaired human hearing 32 33 and any parts, attachments or accessories, including ear molds, but excluding batteries, cords, 34 receivers and repairs;

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- 35 [(6)] (7) "Person", any individual, organization, or corporate body, except that only individuals may be licensed pursuant to sections 345.010 to 345.080; 36
  - [(7)] (8) "Practice of audiology":
- (a) The application of accepted audiologic principles, methods and procedures for the 39 measurement, testing, interpretation, appraisal and prediction related to disorders of the auditory system, balance system or related structures and systems;
- 41 (b) Provides consultation or counseling to the patient, client, student, their family or 42 interested parties;
  - (c) Provides academic, social and medical referrals when appropriate;
  - (d) Provides for establishing goals, implementing strategies, methods and techniques, for habilitation, rehabilitation or aural rehabilitation, related to disorders of the auditory system, balance system or related structures and systems;
    - (e) Provides for involvement in related research, teaching or public education;
  - (f) Provides for rendering of services or participates in the planning, directing or conducting of programs which are designed to modify audition, communicative, balance or cognitive disorder, which may involve speech and language or education issues;
  - Provides and interprets behavioral and neurophysiologic measurements of auditory balance, cognitive processing and related functions, including intraoperative monitoring;
  - (h) Provides involvement in any tasks, procedures, acts or practices that are necessary for evaluation of audition, hearing, training in the use of amplification or assistive listening devices:
  - (i) Provides selection, assessment, fitting, programming, and dispensing of hearing instruments, assistive listening devices, and other amplification systems;
  - (j) Provides for taking impressions of the ear, making custom ear molds, ear plugs, swim molds and industrial noise protectors;
    - (k) Provides assessment of external ear and cerumen management;
- 62 (1) Provides advising, fitting, mapping assessment of implantable devices such as 63 cochlear or auditory brain stem devices;
- 64 Provides information in noise control and hearing conservation including education, equipment selection, equipment calibration, site evaluation and employee 65 66 evaluation;
  - (n) Provides performing basic speech-language screening test;
  - (o) Provides involvement in social aspects of communication, including challenging behavior and ineffective social skills, lack of communication opportunities;
- 70 (p) Provides support and training of family members and other communication partners for the individual with auditory balance, cognitive and communication disorders; 71

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- 72 (q) Provides aural rehabilitation and related services to individuals with hearing loss 73 and their families;
  - (r) Evaluates, collaborates and manages audition problems in the assessment of the central auditory processing disorders and providing intervention for individuals with central auditory processing disorders;
- 77 (s) Develops and manages academic and clinical problems in communication 78 sciences and disorders;
- 79 (t) Conducts, disseminates and applies research in communication sciences and 80 disorders;
  - [(8)] (9) "Practice of speech-language pathology":
  - (a) Provides screening, identification, assessment, diagnosis, treatment, intervention, including but not limited to prevention, restoration, amelioration and compensation, and follow-up services for disorders of:
- 85 articulation, fluency, voice, including respiration, phonation and Speech: 86 resonance:
  - b. Language, involving the parameters of phonology, morphology, syntax, semantics and pragmatic; and including disorders of receptive and expressive communication in oral, written, graphic and manual modalities;
- 90 c. Oral, pharyngeal, cervical esophageal and related functions, such as dysphagia, 91 including disorders of swallowing and oral functions for feeding; orofacial myofunctional 92 disorders;
- 93 d. Cognitive aspects of communication, including communication disability and other 94 functional disabilities associated with cognitive impairment;
  - e. Social aspects of communication, including challenging behavior, ineffective social skills, lack of communication opportunities;
    - (b) Provides consultation and counseling and makes referrals when appropriate;
- (c) Trains and supports family members and other communication partners of 99 individuals with speech, voice, language, communication and swallowing disabilities;
- (d) Develops and establishes effective augmentative and alternative communication techniques and strategies, including selecting, prescribing and dispensing of augmentative 102 aids and devices; and the training of individuals, their families and other communication partners in their use;
- 104 (e) Selects, fits and establishes effective use of appropriate prosthetic/adaptive 105 devices for speaking and swallowing, such as tracheoesophageal valves, electrolarynges, or 106 speaking valves;
- 107 (f) Uses instrumental technology to diagnose and treat disorders of communication and swallowing, such as videofluoroscopy, nasendoscopy, ultrasonography and stroboscopy; 108

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- 109 (g) Provides aural rehabilitative and related counseling services to individuals with 110 hearing loss and to their families;
- 111 (h) Collaborates in the assessment of central auditory processing disorders in cases in 112 which there is evidence of speech, language or other cognitive communication disorders; 113 provides intervention for individuals with central auditory processing disorders;
- 114 (i) Conducts pure-tone air conduction hearing screening and screening tympanometry 115 for the purpose of the initial identification or referral;
- 116 (j) Enhances speech and language proficiency and communication effectiveness, 117 including but not limited to accent reduction, collaboration with teachers of English as a 118 second language and improvement of voice, performance and singing;
  - (k) Trains and supervises support personnel;
- 120 (l) Develops and manages academic and clinical programs in communication sciences 121 and disorders;
- 122 (m) Conducts, disseminates and applies research in communication sciences and 123 disorders:
- 124 (n) Measures outcomes of treatment and conducts continuous evaluation of the 125 effectiveness of practices and programs to improve and maintain quality of services;
  - [(9)] (10) "Speech-language pathologist", a person who is licensed as a speech-language pathologist pursuant to sections 345.010 to 345.080; who engages in the practice of speech-language pathology as defined in sections 345.010 to 345.080;
  - [(10)] (11) "Speech-language pathology aide", a person who is registered as a speech-language aide by the board, who does not act independently but works under the direction and supervision of a licensed speech-language pathologist. Such person assists the speech-language pathologist with activities which require an understanding of speech-language pathology but do not require formal training in the relevant academics. To be eligible for registration by the board, each applicant shall submit a registration fee and:
    - (a) Be at least eighteen years of age;
- 136 (b) Furnish evidence of the person's educational qualifications which shall be at a 137 minimum:
  - a. Certification of graduation from an accredited high school or its equivalent; and
- b. On-the-job training;
- 140 (c) Be employed in a setting in which direct and indirect supervision is provided on a 141 regular and systematic basis by a licensed speech-language pathologist.
- However, the aide shall not administer or interpret hearing screening or diagnostic tests, fit or dispense hearing instruments, make ear impressions, make diagnostic statements, determine case selection, present written reports to anyone other than the supervisor without the

signature of the supervisor, make referrals to other professionals or agencies, use a title other than speech-language pathology aide, develop or modify treatment plans, discharge clients from treatment or terminate treatment, disclose clinical information, either orally or in writing, to anyone other than the supervising speech-language pathologist, or perform any procedure for which he or she is not qualified, has not been adequately trained or both;

- [(11)] (12) "Speech-language pathology assistant", a person who is registered as a speech-language pathology assistant by the board, who does not act independently but works under the direction and supervision of a licensed speech-language pathologist practicing for at least one year or speech-language pathologist practicing under subdivision (1) or (6) of subsection 1 of section 345.025 for at least one year and whose activities require both academic and practical training in the field of speech-language pathology although less training than those established by sections 345.010 to 345.080 as necessary for licensing as a speech-language pathologist. To be eligible for registration by the board, each applicant shall submit the registration fee, supervising speech-language pathologist information if employment is confirmed, if not such information shall be provided after registration, and furnish evidence of the person's educational qualifications which meet the following:
- (a) Hold a bachelor's level degree from an institution accredited or approved by a regional accrediting body recognized by the United States Department of Education or its equivalent; and
- (b) Submit official transcripts from one or more accredited colleges or universities presenting evidence of the completion of bachelor's level course work and requirements in the field of speech-language pathology as established by the board through rules and regulations;
- (c) Submit proof of completion of the number and type of clinical hours as established by the board through rules and regulations.
- 345.022. 1. Any person in the person's clinical fellowship shall hold a provisional license to practice speech-language pathology or audiology. The board may issue a provisional license to an applicant who:
- (1) Has met the requirements for practicum and academic requirements from an accredited training program under this chapter;
- (2) Submits an application to the board on a form prescribed by the board. Such form shall include a plan for the content and supervision of the clinical fellowship, as well as evidence of good moral and ethical character; and
- 9 (3) Submits to the board an application fee, as set by the board, for the 10 provisional license.
  - 2. A provisional license is effective for one year and may be extended for an additional twelve months only for purposes of completing the postgraduate clinical experience portion of the clinical fellowship; provided, that the applicant has passed the

14 national examination and shall hold a master's degree from an approved training 15 program in his or her area of application.

- 3. Within twelve months of issuance of the provisional license, the applicant shall pass an examination promulgated or approved by the board.
- 4. Within twelve months of issuance of a provisional license, the applicant shall complete the requirements for the master's or doctoral degree from a program accredited by the Council on Academic Accreditation of the American Speech-Language-Hearing Association or other accrediting agency approved by the board in the area in which licensure is sought.

345.050. [1-] To be eligible for licensure by the board by examination, each applicant shall submit the application fee and shall furnish evidence of such person's current competence and shall:

- 4 (1) Hold a master's or a doctoral degree from a program that was awarded 5 "accreditation candidate" status or is accredited by the Council on Academic Accreditation of the American Speech-Language-Hearing Association or other accrediting agency approved 5 by the board in the area in which licensure is sought;
  - (2) Submit official transcripts from one or more accredited colleges or universities presenting evidence of the completion of course work and clinical practicum requirements equivalent to that required by the Council on Academic Accreditation of the American Speech-Language-Hearing Association or other accrediting agency approved by the board; [and]
  - (3) Present written evidence of completion of a clinical fellowship from supervisors. The experience required by this subdivision shall follow the completion of the requirements of subdivisions (1) and (2) of this subsection. This period of employment shall be under the direct supervision of a person who is licensed by the state of Missouri in the profession in which the applicant seeks to be licensed. Persons applying with an audiology clinical doctoral degree are exempt from this provision; and
  - (4) Pass an examination promulgated or approved by the board. The board shall determine the subject and scope of the examinations.
  - [2. To be eligible for licensure by the board without examination, each applicant shall make application on forms prescribed by the board, submit the application fee, submit an activity statement and meet one of the following requirements:
  - (1) The board shall issue a license to any speech-language pathologist or audiologist who is licensed in another country and who has had no violations, suspension or revocations of a license to practice speech language pathology or audiology in any jurisdiction; provided that, such person is licensed in a country whose requirements are substantially equal to, or greater than, Missouri at the time the applicant applies for licensure; or

29 (2) Hold the certificate of clinical competence issued by the American Speech-30 Language Hearing Association in the area in which licensure is sought.]

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

- (1) "Board", the Missouri board of registration for the healing arts;
- 3 (2) "Commission", the advisory commission for speech-language pathologists 4 and audiologists;
  - (3) "License", a license, certificate, registration, permit, accreditation, or military occupational specialty that enables a person to legally practice an occupation or profession in a particular jurisdiction;
  - (4) "Military", the Armed Forces of the United States including the Air Force, Army, Coast Guard, Marine Corps, Navy, Space Force, National Guard, and any other military branch that is designated by Congress as part of the Armed Forces of the United States, and all reserve components and auxiliaries. Such term also includes the military reserves and militia of the United States territory or state;
  - (5) "Nonresident military spouse", a nonresident spouse of an active duty member of the Armed Forces of the United States who has been transferred or is scheduled to be transferred to an adjacent state and is or will be domiciled in the state of Missouri, or has moved to the state of Missouri on a permanent change-of-station basis;
  - (6) "Resident military spouse", a spouse of an active duty member of the Armed Forces of the United States who has been transferred or is scheduled to be transferred to the state of Missouri, who is domiciled in the state of Missouri, or who has Missouri as his or her home of record.
  - 2. Any person who holds a valid current speech-language pathologist or audiologist license issued by another state, a branch or unit of the military, a territory of the United States, or the District of Columbia, and who has been licensed for at least one year in the other jurisdiction, may submit an application for a speech-language pathologist or audiologist license in Missouri along with proof of current licensure and proof of licensure for at least one year in the other jurisdiction, to the board.
    - 3. The board shall:
  - (1) Within six months of receiving an application described in subsection 2 of this section, waive any examination, educational, or experience requirements for licensure in this state for the applicant if it determines that there were minimum education requirements and, if applicable, work experience and clinical supervision requirements in effect and the other state verifies that the person met those requirements in order to be licensed or certified in that state. The board may require an applicant to take and pass an examination specific to the laws of this state; or

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- (2) Within thirty days of receiving an application described in subsection 2 of this section from a nonresident military spouse or a resident military spouse, waive any 37 examination, educational, or experience requirements for licensure in this state for the applicant and issue such applicant a license under this section if such applicant otherwise meets the requirements of this section.
  - 4. (1) The board shall not waive any examination, educational, or experience requirements for any applicant who has had his or her license revoked by a board outside the state; who is currently under investigation, who has a complaint pending, or who is currently under disciplinary action, except as provided in subdivision (2) of this subsection, with a board outside the state; who does not hold a license in good standing with a board outside the state; who has a criminal record that would disqualify him or her for licensure in Missouri; or who does not hold a valid current license in the other jurisdiction on the date the board receives his or her application under this section.
  - (2) If another jurisdiction has taken disciplinary action against an applicant, the board shall determine if the cause for the action was corrected and the matter resolved. If the matter has not been resolved by that jurisdiction, the board may deny a license until the matter is resolved.
  - 5. Nothing in this section shall prohibit the board from denying a license to an applicant under this section for any reason described in section 345.065.
  - 6. Any person who is licensed under the provisions of this section shall be subject to the board's jurisdiction and all rules and regulations pertaining to the practice as a speech-language pathologist or audiologist in this state.
  - 7. This section shall not be construed to waive any requirement for an applicant to pay any fees.

#### 345.085. SECTION 1. PURPOSE

The purpose of this Compact is to facilitate interstate practice of audiology and speech-language pathology with the goal of improving public access to audiology and speech-language pathology services. The practice of audiology and speech-language pathology occurs in the state where the patient/client/student is located at the time of the patient/client/student encounter. The Compact preserves the regulatory authority of states to protect public health and safety through the current system of state licensure.

This Compact is designed to achieve the following objectives:

- 9 1. Increase public access to audiology and speech-language pathology services by 10 providing for the mutual recognition of other member state licenses;
  - 2. Enhance the states' ability to protect the public's health and safety;
- 12 Encourage the cooperation of member states in regulating multistate 13 audiology and speech-language pathology practice;

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- 4. Support spouses of relocating active duty military personnel;
- 5. Enhance the exchange of licensure, investigative and disciplinary information between member states:
- 6. Allow a remote state to hold a provider of services with a compact privilege in that state accountable to that state's practice standards; and
- 7. Allow for the use of telehealth technology to facilitate increased access to audiology and speech-language pathology services.

#### **SECTION 2. DEFINITIONS**

As used in this Compact, and except as otherwise provided, the following definitions shall apply:

- A. "Active duty military" means full-time duty status in the active uniformed service of the United States, including members of the National Guard and Reserve on active duty orders pursuant to 10 U.S.C. Chapter 1209 and 1211.
- B. "Adverse action" means any administrative, civil, equitable or criminal action permitted by a state's laws which is imposed by a licensing board or other authority against an audiologist or speech-language pathologist, including actions against an individual's license or privilege to practice such as revocation, suspension, probation, monitoring of the licensee, or restriction on the licensee's practice.
- C. "Alternative program" means a non-disciplinary monitoring process approved by an audiology or speech-language pathology licensing board to address impaired practitioners.
- D. "Audiologist" means an individual who is licensed by a state to practice audiology.
- E. "Audiology" means the care and services provided by a licensed audiologist as set forth in the member state's statutes and rules.
- F. "Audiology and Speech-Language Pathology Compact Commission" or "Commission" means the national administrative body whose membership consists of all states that have enacted the Compact.
  - G. "Audiology and speech-language pathology licensing board," "audiology licensing board," "speech-language pathology licensing board," or "licensing board" means the agency of a state that is responsible for the licensing and regulation of audiologists and/or speech-language pathologists.
  - H. "Compact privilege" means the authorization granted by a remote state to allow a licensee from another member state to practice as an audiologist or speech-language pathologist in the remote state under its laws and rules. The practice of audiology or speech-language pathology occurs in the member state where the patient/client/student is located at the time of the patient/client/student encounter.

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- 51 "Current significant investigative information" means investigative 52 information that a licensing board, after an inquiry or investigation that includes 53 notification and an opportunity for the audiologist or speech-language pathologist to respond, if required by state law, has reason to believe is not groundless and, if proved 54 55 true, would indicate more than a minor infraction.
- 56 J. "Data system" means a repository of information about licensees, including, 57 but not limited to, continuing education, examination, licensure, investigative, compact privilege and adverse action. 58
  - K. "Encumbered license" means a license in which an adverse action restricts the practice of audiology or speech-language pathology by the licensee and said adverse action has been reported to the National Practitioners Data Bank (NPDB).
  - L. "Executive Committee" means a group of directors elected or appointed to act on behalf of, and within the powers granted to them by, the Commission.
  - M. "Home state" means the member state that is the licensee's primary state of residence.
- 66 N. "Impaired practitioner" means individuals whose professional practice is 67 adversely affected by substance abuse, addiction, or other health-related conditions.
  - O. "Licensee" means an individual who currently holds an authorization from the state licensing board to practice as an audiologist or speech-language pathologist.
    - P. "Member state" means a state that has enacted the Compact.
- 71 Q. "Privilege to practice" means a legal authorization permitting the practice of 72 audiology or speech-language pathology in a remote state.
- R. "Remote state" means a member state other than the home state where a 74 licensee is exercising or seeking to exercise the compact privilege.
- "Rule" means a regulation, principle or directive promulgated by the Commission that has the force of law. 76
  - "Single-state license" means an audiology or speech-language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state.
- 80 U. "Speech-language pathologist" means an individual who is licensed by a state 81 to practice speech-language pathology.
- V. "Speech-language pathology" means the care and services provided by a 82 83 licensed speech-language pathologist as set forth in the member state's statutes and 84 rules.
- 85 W. "State" means any state, commonwealth, district or territory of the United States of America that regulates the practice of audiology and speech-language 86 pathology. 87

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- 88 X. "State practice laws" means a member state's laws, rules and regulations that 89 govern the practice of audiology or speech-language pathology, define the scope of 90 audiology or speech-language pathology practice, and create the methods and grounds 91 for imposing discipline.
  - "Telehealth" means the application of telecommunication technology to deliver audiology or speech-language pathology services at a distance for assessment, intervention and/or consultation.

#### SECTION 3. STATE PARTICIPATION IN THE COMPACT

- A. A license issued to an audiologist or speech-language pathologist by a home state to a resident in that state shall be recognized by each member state as authorizing an audiologist or speech-language pathologist to practice audiology or speech-language pathology, under a privilege to practice, in each member state.
- B. A state must implement or utilize procedures for considering the criminal history records of applicants for initial privilege to practice. These procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining an applicant's criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that state's criminal records.
- A member state must fully implement a criminal background check requirement, within a time frame established by rule, by receiving the results of the Federal Bureau of Investigation record search on criminal background checks and use the results in making licensure decisions.
- 110 2. Communication between a member state, the Commission and among member states regarding the verification of eligibility for licensure through the Compact shall not include any information received from the Federal Bureau of Investigation relating to a federal criminal records check performed by a member state under Public Law 92-544. 114
  - C. Upon application for a privilege to practice, the licensing board in the issuing remote state shall ascertain, through the data system, whether the applicant has ever held, or is the holder of, a license issued by any other state, whether there are any encumbrances on any license or privilege to practice held by the applicant, whether any adverse action has been taken against any license or privilege to practice held by the applicant.
- 121 D. Each member state shall require an applicant to obtain or retain a license in the home state and meet the home state's qualifications for licensure or renewal of 122 123 licensure, as well as, all other applicable state laws.
  - E. For an audiologist:

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- 1. Must meet one of the following educational requirements:
- a. On or before, Dec. 31, 2007, has graduated with a master's degree or doctorate in audiology, or equivalent degree regardless of degree name, from a program that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor, or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - b. On or after, Jan. 1, 2008, has graduated with a Doctoral degree in audiology, or equivalent degree, regardless of degree name, from a program that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor, or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - c. Has graduated from an audiology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.
  - 2. Has completed a supervised clinical practicum experience from an accredited educational institution or its cooperating programs as required by the Commission;
    - 3. Has successfully passed a national examination approved by the Commission;
    - 4. Holds an active, unencumbered license:
  - 5. Has not been convicted or found guilty, and has not entered into an agreed disposition, of a felony related to the practice of audiology, under applicable state or federal criminal law;
- 150 6. Has a valid United States Social Security or National Practitioner 151 Identification number.
  - F. For a speech-language pathologist:
  - 1. Must meet one of the following educational requirements:
  - a. Has graduated with a master's degree from a speech-language pathology program that is accredited by an organization recognized by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - b. Has graduated from a speech-language pathology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable

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- country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.
- 163 **2.** Has completed a supervised clinical practicum experience from an 164 educational institution or its cooperating programs as required by the Commission;
- 3. Has completed a supervised postgraduate professional experience as required by the Commission;
  - 4. Has successfully passed a national examination approved by the Commission;
- 5. Holds an active, unencumbered license;
- 6. Has not been convicted or found guilty, and has not entered into an agreed disposition, of a felony related to the practice of speech-language pathology, under applicable state or federal criminal law;
- 7. Has a valid United States Social Security or National Practitioner Italian Identification number.
  - G. The privilege to practice is derived from the home state license.
  - H. An audiologist or speech-language pathologist practicing in a member state must comply with the state practice laws of the state in which the client is located at the time service is provided. The practice of audiology and speech-language pathology shall include all audiology and speech-language pathology practice as defined by the state practice laws of the member state in which the client is located. The practice of audiology and speech-language pathology in a member state under a privilege to practice shall subject an audiologist or speech-language pathologist to the jurisdiction of the licensing board, the courts and the laws of the member state in which the client is located at the time service is provided.
  - I. Individuals not residing in a member state shall continue to be able to apply for a member state's single-state license as provided under the laws of each member state. However, the single-state license granted to these individuals shall not be recognized as granting the privilege to practice audiology or speech-language pathology in any other member state. Nothing in this Compact shall affect the requirements established by a member state for the issuance of a single-state license.
    - J. Member states may charge a fee for granting a compact privilege.
- 191 K. Member states must comply with the bylaws and rules and regulations of the 192 Commission.

#### SECTION 4. COMPACT PRIVILEGE

- A. To exercise the compact privilege under the terms and provisions of the Compact, the audiologist or speech-language pathologist shall:
  - 1. Hold an active license in the home state;
- 197 2. Have no encumbrance on any state license;

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- 3. Be eligible for a compact privilege in any member state in accordance with Section 3:
- 4. Have not had any adverse action against any license or compact privilege within the previous 2 years from date of application;
- 5. Notify the Commission that the licensee is seeking the compact privilege within a remote state(s);
  - 6. Pay any applicable fees, including any state fee, for the compact privilege;
  - 7. Report to the Commission adverse action taken by any non-member state within 30 days from the date the adverse action is taken.
- B. For the purposes of the compact privilege, an audiologist or speech-language pathologist shall only hold one home state license at a time.
  - C. Except as provided in Section 6, if an audiologist or speech-language pathologist changes primary state of residence by moving between two-member states, the audiologist or speech-language pathologist must apply for licensure in the new home state, and the license issued by the prior home state shall be deactivated in accordance with applicable rules adopted by the Commission.
- D. The audiologist or speech-language pathologist may apply for licensure in advance of a change in primary state of residence.
  - E. A license shall not be issued by the new home state until the audiologist or speech-language pathologist provides satisfactory evidence of a change in primary state of residence to the new home state and satisfies all applicable requirements to obtain a license from the new home state.
  - F. If an audiologist or speech-language pathologist changes primary state of residence by moving from a member state to a non-member state, the license issued by the prior home state shall convert to a single-state license, valid only in the former home state.
- G. The compact privilege is valid until the expiration date of the home state license. The licensee must comply with the requirements of Section 4A to maintain the compact privilege in the remote state.
  - H. A licensee providing audiology or speech-language pathology services in a remote state under the compact privilege shall function within the laws and regulations of the remote state.
- I. A licensee providing audiology or speech-language pathology services in a remote state is subject to that state's regulatory authority. A remote state may, in accordance with due process and that state's laws, remove a licensee's compact privilege in the remote state for a specific period of time, impose fines, and/or take any other necessary actions to protect the health and safety of its citizens.

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- 235 J. If a home state license is encumbered, the licensee shall lose the compact 236 privilege in any remote state until the following occur:
  - 1. The home state license is no longer encumbered; and
- 238 2. Two years have elapsed from the date of the adverse action.
- 239 K. Once an encumbered license in the home state is restored to good standing, 240 the licensee must meet the requirements of Section 4A to obtain a compact privilege in 241 any remote state.
  - L. Once the requirements of Section 4J have been met, the licensee must meet the requirements in Section 4A to obtain a compact privilege in a remote state.

## SECTION 5. COMPACT PRIVILEGE TO PRACTICE TELEHEALTH

Member states shall recognize the right of an audiologist or speech-language pathologist, licensed by a home state in accordance with Section 3 and under rules promulgated by the Commission, to practice audiology or speech-language pathology in any member state via telehealth under a privilege to practice as provided in the Compact and rules promulgated by the Commission.

#### SECTION 6. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES

Active duty military personnel, or their spouse, shall designate a home state where the individual has a current license in good standing. The individual may retain the home state designation during the period the service member is on active duty. Subsequent to designating a home state, the individual shall only change their home state through application for licensure in the new state.

#### **SECTION 7. ADVERSE ACTIONS**

- A. In addition to the other powers conferred by state law, a remote state shall have the authority, in accordance with existing state due process law, to:
- 1. Take adverse action against an audiologist's or speech-language pathologist's privilege to practice within that member state.
- Issue subpoenas for both hearings and investigations that require the 262 attendance and testimony of witnesses as well as the production of evidence. Subpoenas issued by a licensing board in a member state for the attendance and testimony of witnesses or the production of evidence from another member state shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and 266 procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state in which the witnesses or evidence are 269 located.
- 270 3. Only the home state shall have the power to take adverse action against an 271 audiologist's or speech-language pathologist's license issued by the home state.

- B. For purposes of taking adverse action, the home state shall give the same priority and effect to reported conduct received from a member state as it would if the conduct had occurred within the home state. In so doing, the home state shall apply its own state laws to determine appropriate action.
  - C. The home state shall complete any pending investigations of an audiologist or speech-language pathologist who changes primary state of residence during the course of the investigations. The home state shall also have the authority to take appropriate action(s) and shall promptly report the conclusions of the investigations to the administrator of the data system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any adverse actions.
  - D. If otherwise permitted by state law, the member state may recover from the affected audiologist or speech-language pathologist the costs of investigations and disposition of cases resulting from any adverse action taken against that audiologist or speech-language pathologist.
  - E. The member state may take adverse action based on the factual findings of the remote state, provided that the member state follows the member state's own procedures for taking the adverse action.
    - F. Joint Investigations:
  - 1. In addition to the authority granted to a member state by its respective audiology or speech-language pathology practice act or other applicable state law, any member state may participate with other member states in joint investigations of licensees.
  - 2. Member states shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the Compact.
  - G. If adverse action is taken by the home state against an audiologist's or speech-language pathologist's license, the audiologist's or speech-language pathologist's privilege to practice in all other member states shall be deactivated until all encumbrances have been removed from the state license. All home state disciplinary orders that impose adverse action against an audiologist's or speech-language pathologist's license shall include a statement that the audiologist's or speech-language pathologist's privilege to practice is deactivated in all member states during the pendency of the order.
  - H. If a member state takes adverse action, it shall promptly notify the administrator of the data system. The administrator of the data system shall promptly notify the home state of any adverse actions by remote states.

- I. Nothing in this Compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action.
- 310 SECTION 8. ESTABLISHMENT OF THE AUDIOLOGY AND SPEECH-
- 311 LANGUAGE PATHOLOGY COMPACT COMMISSION
- A. The Compact member states hereby create and establish a joint public agency
- 313 known as the Audiology and Speech-Language Pathology Compact Commission:
- 1. The Commission is an instrumentality of the Compact states.
- 2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative
- 319 dispute resolution proceedings.
- 320 3. Nothing in this Compact shall be construed to be a waiver of sovereign 321 immunity.
- 322 B. Membership, Voting and Meetings:
- 1. Each member state shall have two (2) delegates selected by that member state's licensing board. The delegates shall be current members of the licensing board.
- 325 One shall be an audiologist and one shall be a speech-language pathologist.
- 2. An additional five (5) delegates, who are either a public member or board
- 327 administrator from a state licensing board, shall be chosen by the Executive Committee
- 328 from a pool of nominees provided by the Commission at Large.
- 3. Any delegate may be removed or suspended from office as provided by the law
- 330 of the state from which the delegate is appointed.
- 4. The member state board shall fill any vacancy occurring on the Commission,
- 332 within 90 days.
- 5. Each delegate shall be entitled to one (1) vote with regard to the promulgation
- 334 of rules and creation of bylaws and shall otherwise have an opportunity to participate in
- 335 the business and affairs of the Commission.
- 6. A delegate shall vote in person or by other means as provided in the bylaws.
- 337 The bylaws may provide for delegates' participation in meetings by telephone or other
- 338 means of communication.
- 7. The Commission shall meet at least once during each calendar year.
- 340 Additional meetings shall be held as set forth in the bylaws.
- 341 C. The Commission shall have the following powers and duties:
- 1. Establish the fiscal year of the Commission;
- 343 2. Establish bylaws;
- 344 3. Establish a Code of Ethics;

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- 4. Maintain its financial records in accordance with the bylaws;
- 5. Meet and take actions as are consistent with the provisions of this Compact and the bylaws;
  - 6. Promulgate uniform rules to facilitate and coordinate implementation and administration of this Compact. The rules shall have the force and effect of law and shall be binding in all member states;
  - 7. Bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any state audiology or speech-language pathology licensing board to sue or be sued under applicable law shall not be affected;
    - 8. Purchase and maintain insurance and bonds:
- 9. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a member state;
  - 10. Hire employees, elect or appoint officers, fix compensation, define duties, grant individuals appropriate authority to carry out the purposes of the Compact, and to establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;
- 361 11. Accept any and all appropriate donations and grants of money, equipment, supplies, materials and services, and to receive, utilize and dispose of the same; provided that at all times the Commission shall avoid any appearance of impropriety and/or conflict of interest;
  - 12. Lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve or use, any property, real, personal or mixed; provided that at all times the Commission shall avoid any appearance of impropriety;
- 368 13. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise 369 dispose of any property real, personal, or mixed;
  - 14. Establish a budget and make expenditures;
- **15. Borrow money**;
- 372 16. Appoint committees, including standing committees composed of members, 373 and other interested persons as may be designated in this Compact and the bylaws;
- 374 **17.** Provide and receive information from, and cooperate with, law enforcement agencies;
  - 18. Establish and elect an Executive Committee; and
- 19. Perform other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the state regulation of audiology and speech-language pathology licensure and practice.
  - D. The Executive Committee

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- The Executive Committee shall have the power to act on behalf of the Commission according to the terms of this Compact:
  - 1. The Executive Committee shall be composed of ten (10) members:
- a. Seven (7) voting members who are elected by the Commission from the current membership of the Commission;
- b. Two (2) ex-officios, consisting of one nonvoting member from a recognized national audiology professional association and one nonvoting member from a recognized national speech-language pathology association; and
  - c. One (1) ex-officio, nonvoting member from the recognized membership organization of the audiology and speech-language pathology licensing boards.
    - E. The ex-officio members shall be selected by their respective organizations.
- 392 1. The Commission may remove any member of the Executive Committee as 393 provided in bylaws.
  - 2. The Executive Committee shall meet at least annually.
  - 3. The Executive Committee shall have the following duties and responsibilities:
  - a. Recommend to the entire Commission changes to the rules or bylaws, changes to this Compact legislation, fees paid by Compact member states such as annual dues, and any commission Compact fee charged to licensees for the compact privilege;
- b. Ensure Compact administration services are appropriately provided, to contractual or otherwise;
  - c. Prepare and recommend the budget;
  - d. Maintain financial records on behalf of the Commission;
- e. Monitor Compact compliance of member states and provide compliance reports to the Commission;
  - f. Establish additional committees as necessary; and
  - g. Other duties as provided in rules or bylaws.
  - 4. Meetings of the Commission

All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under the rulemaking provisions in Section 10.

- 5. The Commission or the Executive Committee or other committees of the Commission may convene in a closed, non-public meeting if the Commission or Executive Committee or other committees of the Commission must discuss:
  - a. Non-compliance of a member state with its obligations under the Compact;
- b. The employment, compensation, discipline or other matters, practices or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;
  - c. Current, threatened, or reasonably anticipated litigation;

- d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;
  - e. Accusing any person of a crime or formally censuring any person;
- f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;
- g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
  - h. Disclosure of investigative records compiled for law enforcement purposes;
  - i. Disclosure of information related to any investigative reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact; or
- j. Matters specifically exempted from disclosure by federal or member state statute.
  - 6. If a meeting, or portion of a meeting, is closed pursuant to this provision, the Commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision.
  - 7. The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.
    - 8. Financing of the Commission:
  - a. The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.
  - b. The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.
  - c. The Commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission, which shall promulgate a rule binding upon all member states.

- 9. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the member states, except by and with the authority of the member state.
  - 10. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the Commission.
    - F. Qualified Immunity, Defense, and Indemnification:
  - 1. The members, officers, executive director, employees and representatives of the Commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities; provided that nothing in this paragraph shall be construed to protect any person from suit and/or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person.
  - 2. The Commission shall defend any member, officer, executive director, employee or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.
  - 3. The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

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- 490 The Commission shall provide for the development, maintenance, and 491 utilization of a coordinated database and reporting system containing licensure, adverse 492 action, and investigative information on all licensed individuals in member states.
- 493 B. Notwithstanding any other provision of state law to the contrary, a member 494 state shall submit a uniform data set to the data system on all individuals to whom this 495 Compact is applicable as required by the rules of the Commission, including:
  - 1. Identifying information;
- 497 2. Licensure data;
  - 3. Adverse actions against a license or compact privilege;
- 499 4. Non-confidential information related to alternative program participation;
  - 5. Any denial of application for licensure, and the reason(s) for denial; and
- 501 6. Other information that may facilitate the administration of this Compact, as 502 determined by the rules of the Commission.
  - C. Investigative information pertaining to a licensee in any member state shall only be available to other member states.
- D. The Commission shall promptly notify all member states of any adverse 506 action taken against a licensee or an individual applying for a license. Adverse action information pertaining to a licensee in any member state shall be available to any other member state.
- E. Member states contributing information to the data system may designate 510 information that may not be shared with the public without the express permission of the contributing state.
- F. Any information submitted to the data system that is subsequently required to be expunged by the laws of the member state contributing the information shall be 514 removed from the data system.

#### SECTION 10. RULEMAKING

- A. The Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Section and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.
- B. If a majority of the legislatures of the member states rejects a rule, by enactment of a statute or resolution in the same manner used to adopt the Compact within 4 years of the date of adoption of the rule, the rule shall have no further force and effect in any member state.
- 523 C. Rules or amendments to the rules shall be adopted at a regular or special 524 meeting of the Commission.
- 525 Prior to promulgation and adoption of a final rule or rules by the 526 Commission, and at least thirty (30) days in advance of the meeting at which the rule

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- shall be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking: 528
  - 1. On the website of the Commission or other publicly accessible platform; and
- 530 2. On the website of each member state audiology or speech-language pathology 531 licensing board or other publicly accessible platform or the publication in which each
- state would otherwise publish proposed rules. 532
  - E. The Notice of Proposed Rulemaking shall include:
- 534 1. The proposed time, date, and location of the meeting in which the rule shall be 535 considered and voted upon;
- 536 2. The text of the proposed rule or amendment and the reason for the proposed 537 rule;
- 538 3. A request for comments on the proposed rule from any interested person; and
- 539 4. The manner in which interested persons may submit notice to the Commission 540 of their intention to attend the public hearing and any written comments.
  - F. Prior to the adoption of a proposed rule, the Commission shall allow persons to submit written data, facts, opinions and arguments, which shall be made available to the public.
- 544 G. The Commission shall grant an opportunity for a public hearing before it 545 adopts a rule or amendment if a hearing is requested by:
  - 1. At least twenty-five (25) persons;
  - 2. A state or federal governmental subdivision or agency; or
- 548 3. An association having at least twenty-five (25) members.
- 549 H. If a hearing is held on the proposed rule or amendment, the Commission shall 550 publish the place, time, and date of the scheduled public hearing. If the hearing is held 551 via electronic means, the Commission shall publish the mechanism for access to the 552 electronic hearing.
- 553 1. All persons wishing to be heard at the hearing shall notify the executive 554 director of the Commission or other designated member in writing of their desire to 555 appear and testify at the hearing not less than five (5) business days before the scheduled 556 date of the hearing.
- 2. Hearings shall be conducted in a manner providing each person who wishes to 558 comment a fair and reasonable opportunity to comment orally or in writing.
- 559 3. All hearings shall be recorded. A copy of the recording shall be made 560 available on request.
- 561 4. Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the Commission at hearings 562 563 required by this section.

- I. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.
  - J. If no written notice of intent to attend the public hearing by interested parties is received, the Commission may proceed with promulgation of the proposed rule without a public hearing.
  - K. The Commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.
  - L. Upon determination that an emergency exists, the Commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the Compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:
    - 1. Meet an imminent threat to public health, safety, or welfare;
    - 2. Prevent a loss of Commission or member state funds; or
  - 3. Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule.
  - M. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing and delivered to the chair of the Commission prior to the end of the notice period. If no challenge is made, the revision shall take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.
- 594 SECTION 11. OVERSIGHT, DISPUTE RESOLUTION, AND 595 ENFORCEMENT
  - A. Dispute Resolution
  - 1. Upon request by a member state, the Commission shall attempt to resolve disputes related to the Compact that arise among member states and between member and non-member states.

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- 600 2. The Commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate. 601
  - B. Enforcement
- 603 1. The Commission, in the reasonable exercise of its discretion, shall enforce the 604 provisions and rules of this Compact.
- 605 2. By majority vote, the Commission may initiate legal action in the United 606 States District Court for the District of Columbia or the federal district where the 607 Commission has its principal offices against a member state in default to enforce 608 compliance with the provisions of the Compact and its promulgated rules and bylaws. 609 The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing member shall be awarded all costs of litigation, 610 611 including reasonable attorney's fees.
- 3. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or state law. SECTION 12. DATE OF IMPLEMENTATION OF THE INTERSTATE COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT 616
  - A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact.
  - B. Any state that joins the Compact subsequent to the Commission's initial adoption of the rules shall be subject to the rules as they exist on the date on which the Compact becomes law in that state. Any rule that has been previously adopted by the Commission shall have the full force and effect of law on the day the Compact becomes law in that state.
- 628 C. Any member state may withdraw from this Compact by enacting a statute 629 repealing the same.
- 630 1. A member state's withdrawal shall not take effect until six (6) months after 631 enactment of the repealing statute.
- 632 2. Withdrawal shall not affect the continuing requirement of the withdrawing 633 state's audiology or speech-language pathology licensing board to comply with the 634 investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal. 635

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- D. Nothing contained in this Compact shall be construed to invalidate or prevent any audiology or speech-language pathology licensure agreement or other cooperative arrangement between a member state and a non-member state that does not conflict with the provisions of this Compact.
  - E. This Compact may be amended by the member states. No amendment to this Compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

## **SECTION 13. CONSTRUCTION AND SEVERABILITY**

This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or provision of this Compact is declared to be contrary to the constitution of any member state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any member state, the Compact shall remain in full force and effect as to the member state affected as to all severable matters.

# SECTION 14. BINDING EFFECT OF COMPACT AND OTHER LAWS

- A. Nothing herein prevents the enforcement of any other law of a member state that is not inconsistent with the Compact.
- B. All laws in a member state in conflict with the Compact are superseded to the extent of the conflict.
  - C. All lawful actions of the Commission, including all rules and bylaws promulgated by the Commission, are binding upon the member states.
  - D. All agreements between the Commission and the member states are binding in accordance with their terms.
  - E. In the event any provision of the Compact exceeds the constitutional limits imposed on the legislature of any member state, the provision shall be ineffective to the extent of the conflict with the constitutional provision in question in that member state.

Section B. Because of the urgent need of low-income Missouri residents for access to quality health care services, the enactment of section 324.005 of this act is deemed necessary

- 3 for the immediate preservation of the public health, welfare, peace, and safety, and is hereby
- 4 declared to be an emergency act within the meaning of the constitution, and the enactment of
- 5 section 324.005 of this act shall be in full force and effect upon its passage and approval.

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