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## **END OF SESSION REPORT 2007**

The 94<sup>th</sup> General Assembly adjourned at 6:00 p.m., on Friday, May 18. Many of the high profile bills gained final approval on the last day of session. The Senate passed eight percent, 57 of the 710 bills introduced at the beginning of the legislature. The House passed 5.8 percent, 76 of the 1,292 bills introduced. Many of the bills were rolled into “omnibus” bills dealing with specific issues. The problem with this tactic is the omnibus bills often die because of the numerous amendments added during debate.

The Governor considered it a successful session, citing the passage of MO HealthNet – the state’s new Medicaid plan and MOHELA – the college capital bill, as key victories.

Legislation Important to the MISSOURI NURSES ASSOCIATION:

### **MISSOURI CONTINUING HEALTH IMPROVEMENT ACT OF 2007**

After numerous changes and threats of a special legislative session from the governor, the healthcare reform bill was passed Friday afternoon. Both chambers presented radically different versions of the bill in the weeks leading up to the vote. The conference committee finally reached a compromise early Friday morning. The legislation, called MO HealthNet, is now on the Governor’s desk awaiting his signature.

Senate Bill 577 revamps the Medicaid program to emphasize primary care and sets up a pilot program to subsidize health insurance for low-income workers whose employers don’t offer medical coverage. The legislation specifies that every program participant will be enrolled in a health improvement plan and be provided a health care home.

The bill also expands women’s health services to some 90,000 low- and moderate-income residents. Many opponents of the plan state that MO HealthNet doesn’t go far enough in restoring healthcare to the nearly 100,000 people who lost coverage several years ago. The bill restores coverage to some 3,200 disabled workers and allows former foster children to keep Medicaid coverage until they turn 21. It also allows more than 20,000 children to become eligible for the Children’s Health Insurance Program. The Ticket to Work legislation (HB39) was rolled into the omnibus healthcare bill.

MONA advocated for nurses to be included in the definition of “healthcare provider”. In another section, Section 208.152 clarifies that the services of certified pediatric or family nursing practitioners will be covered for Medicaid payments if they are working in a collaborative practice agreement.

Rep. Robert Schaaf, the House bill sponsor, is a physician from St. Joseph. MONA was successful in deleting a section from the bill that would have prohibited nurses from owning their own practice. Rep. Steve Tilley offered the amendment on MONA’s behalf in committee.

Schaaf won a commitment to study how to raise fees for medical providers by nearly \$300 million within four years.

### PRESCRIPTIVE AUTHORITY FOR CONTROLLED SUBSTANCES

While we didn’t gain final approval for advanced practice registered nurses to prescribe controlled substances, I believe we made progress on the issue. The oppositions’ lack of willingness to compromise on the issue infuriated lawmakers. House sponsor Rep. Kenny Jones and Senate sponsor Delbert Scott have gotten commitments from House Professional Registration Chairman Jay Wasson and the Speaker of the House Rod Jetton to make the doctors’ organizations come to the table and work out a compromise for next year.

The Senate adopted language for Schedule V authority twice and defeated an amendment to remove it from an omnibus professional registration bill. Senator Tim Green offered the amendments in the Senate. The House had debate for Schedules III-V. Those amendments did not make it to final passage; however, it kept the issue in the forefront.

### LICENSING CHANGES – House Bill 308 and House Bill 780

Two omnibus professional registration bills made it to final passage. House sponsor Rep. Jay Wasson worked to keep our language included in the bills. Rep. Tim Meadows and Rep. Ellen Brandom introduced pieces of the legislation listed below in two other bills.

Amongst an entire host of licensing issues, listed below are the changes regarding the licensing of nurses:

- (1) Establishes a lapsed and a retired license status;
- (2) Requires the notice of a disciplinary hearing before the State Board of Nursing to be served by certified mail. If this cannot be accomplished, the board may publish the notice in a local newspaper;
- (3) Authorizes the board to implement an impaired nurse program to promote early intervention and treatment of nurses who may be impaired by reasons of illness, substance abuse, or mental illness;

- (4) Allows the board to ask for an expedited hearing before the Administrative Hearing Commission if the board determines that a nurse has committed an act which is a clear and present danger to the public. Fifteen days after the complaint and after a preliminary hearing, the board may immediately restrict or suspend the license. Temporary authority to suspend a license becomes final if the nurse does not request a full hearing within 30 days;
- (5) Allows for the sealing of records if the board, commission, or a court of competent jurisdiction determines that a complaint does not constitute a violation of the Nursing Practice Act and is unsubstantiated;
- (6) Allows a person holding the title of advanced practice registered nurse to use the title or any other title appearing on his or her license;
- (7) Makes it unlawful for any unlicensed person to use the title of nurse;
- (8) Specifies that reports made to the board do not violate the federal Health Insurance Portability and Accountability Act because the board qualifies as a health oversight agency;
- (9) Defines "temporary nursing staffing agency" as any person, firm, partnership, or corporation doing business within the state that supplies, on a temporary basis, registered nurses or licensed practical nurses to a hospital, nursing home, or other facility; and
- (10) Allows a person listed as a Christian Science nurse in the Christian Science Journal to use the title Christian Science nurse.

## MIDWIFERY

Senator John Loudon added an amendment to the Health Insurance legislation (HB818) relating to "tocologists". It wasn't until the bill passed both chambers and was on the Governor's desk, that someone realized "tocologists" are midwives. The language would allow any person who holds a current certification for the minister of religion or a certification in the science of childbirth, midwifery, or obstetrics by an organization accredited by the National Organization for Competency Assurance to provide services related to pregnancy, including prenatal, delivery, and postpartum services.

Therefore, the legislature amended all of the language from HB 818, minus the midwife language onto House Bill 364, another insurance bill, and sent that to the Governor. The Governor is expected to veto HB818.

## NURSING STUDENT LOAN PROGRAM – Senate Bill 513

This bill revises the definition of "qualified employment" as it applies to the Professional and Practical Nursing Student Loan Program to include "any" agency, institution, or

organization located in an area of need as determined by the Department of Health and Senior Services. Senator Dan Clemens and Representative Tom Loehner introduced this bill.

#### OUTSIDE THE HOSPITAL DO-NOT RESUSCITATE ACT

Representative Mark Bruns sponsored Senate Bill 182 which establishes the Outside the Hospital Do-not-resuscitate Act which requires that a copy of a do-not-resuscitate order must be included as the first page of a patient's medical record. Anyone who knowingly executes, falsifies, or forges an order without the individual's consent or knowingly conceals or withholds the knowledge of a revocation of an order will be guilty of a class D felony.

#### PHYSICIAN ASSISTANTS – House Bill 497

This bill expands the definition of "supervision" of physician assistants to allow supervising physicians to be available via telecommunication for consultation, assistance, or intervention. The physician assistants had to give a lot to get this passed. After January 1, 2008, a physician assistant applicant will be required to have a master's degree in a health or medical science related field.

#### EMERGENCY MANAGEMENT – House Bill 579

This bill transfers the State Emergency Management Agency from the Office of the Adjutant General to the Department of Public Safety and allows for the deployment of any health care professional who is licensed, registered, or certified in this or any other state and volunteers during an emergency declared by the Governor. Currently, only workers licensed, registered, or certified in this state are allowed to be deployed. The bill grants the volunteers immunity from civil damages for their services. The Department of Health and Senior Services is allowed to recruit, train, and accept the services of citizen volunteers to dispense medication in a public health emergency.

#### CRIME VICTIMS – House Bill 583

The crime bill makes various changes to law, and there is a section relating to medical providers for forensic examinations of certain victims of sexual offenses. The legislation requires the Department of Health and Senior Services to make payments to medical providers for the exams.

#### CHILDREN'S VISION EXAMINATIONS – Senate Bill 16

Senator Delbert Scott and Representative Steve Tilley worked on compromise legislation during the interim to require public school students enrolling in kindergarten or first grade to receive a vision examination from a state licensed optometrist or physician. The school districts opposed the legislation stating it was an unfunded mandate on parents and schools.

#### HEALTH CARE PROVIDER TAX – Senate Bill 4

This act extends the sunsets for the Medicaid Managed Care Organization reimbursement allowance and the Pharmacy Tax from June 30, 2007 to June 30, 2009. The sunset of the Federal Reimbursement Allowance assessment and Nursing Facility Reimbursement Allowance are extended from September 30, 2007 to September 30, 2011.

#### SUPPLEMENTAL NURSING CARE PROGRAM – Senate Bill 418

Under current law, the maximum amount of personal needs payments a resident of a long-term care facility can receive under the Supplemental Nursing Care Program is \$25 a month. This act modifies the amount to be equal to the Medicaid vendor nursing facility personal needs allowance amount.

#### PRIMARY SEAT BELTS AND HELMET LAW REPEAL

Both pieces of legislation failed to make it to final passage.