2016 Legislative Session in Review
Missouri Senate and House of Representatives push legislation “across the finish line” in final days of 2016 Session

With the Missouri Senate steering clear of a breakdown over controversial legislation, the Missouri House and Senate on Friday used the final hours of the 2016 Legislative Session to push several important pieces of legislation across the finish line and on to the governor’s desk for final action.

Late Thursday night, the Senate and House gave final passage to Senate Bill 823, which contained language that will prevent the Missouri Department of Revenue from issuing assessments based on a Missouri Supreme Court decision which overturned a quarter century’s worth of judicial precedent regarding sales tax exemptions for manufacturing equipment.

“While the Missouri Supreme Court had been moving with the times and recognizing a 21st century definition of manufacturing, the Court on April 5, 2016, issued a decision that attempts to turn back time and require an antiquated definition of manufacturing,” said Ray McCarty, president and CEO of Associated Industries of Missouri.

“Without this legislation, the Missouri Department of Revenue could increase taxes on Missouri businesses that have relied on this updated definition of manufacturing that was made by the Court and the Legislature over the last 25 years. Taxpayers need to be protected while we have a thorough debate in the next session of the legislature regarding the proper way to apply sales and use tax manufacturing and processing exemptions in the 21st century.”

Earlier in the week, the legislature passed these important bills:

- **Senate Bill 702** - Modifies the law relating to unemployment compensation benefits.
- **House Bill 2030** - Authorizes a tax deduction equal to fifty percent of the capital gain resulting from the sale of employer securities to a certain Missouri stock ownership plans.
- **Senate Bill 578** - Establishes the Missouri Commercial Receivership Act and exempts firearms from attachment in bankruptcy proceedings.
- **Senate Bill 700** - Modifies the law relating to workers’ compensation premium rates.
- **House Bill 1870** - Changes the laws regarding the Big Government Get Off My Back Act.
- **House Bill 2381** - Changes the laws regarding mine property
- **House Bill 2150** - Requires life insurance companies to compare policies, annuities, and accounts against a death master file for potential matches and to either pay beneficiaries or remit unclaimed benefits to state treasurer.
- **House Bill 1713** - Allows for greater representation by representatives of mining and industry on the state’s Clean Water Commission. Previously, agriculture, mining and industry membership was limited to two members. The change mandates that at least two members of the commission must represent agriculture, mining and industry.
- **Senate Bill 919** - Modifies provisions relating to beer coolers and “growlers”.

On Friday, the House sped through important legislation such as **Senate Bill 861**, which includes language important to freight forwarders; **House Bill 1582** dealing with withholding tax filing requirements for small businesses and electronic filing of W-2 forms for larger businesses; **House Bill 1435** which includes some sales tax refund language favored by Associated Industries of Missouri; **Senate Bill 1025** which exempts exercise classes from sales tax; and numerous other bills.

The Senate passed a few non-controversial bills before taking up the more controversial issues. The Senate adjourned about two hours before the constitutional deadline, something that has rarely been seen.

While the Senate finished its business early, the House continued to take up legislation until the session’s final moments.

“Associated Industries of Missouri thanks the legislature for passing meaningful tort reform bills, necessary tax bills, and many more business-friendly bills, and we thank them for not passing bills that would have increased the cost of doing business in Missouri,” said McCarty.
A quick look at House and Senate action this session

The following is a list of legislation that we at Associated Industries of Missouri have been keeping an eye on during the 2016 Legislative Session that were passed by the Missouri House and Senate. These bills are on their way to the governor's desk for final action:

**TAXES**

**House Bill 1435**, sponsored by Rep. Andrew Koenig, legislation drafted by AIM’s Tax Committee members that allows businesses to receive sales/use tax refunds when they have paid the taxes directly to DOR.

**House Bill 1582**, sponsored by Rep. Mike Kelley, helps small businesses by eliminating about 20,000 withholding tax returns each year. The bill raises the amount of withholding tax that may be collected without filing a quarterly return from $20 per quarter to $100 per quarter. These businesses would be able to file an annual withholding tax return under the bill.

**House Bill 2381**, sponsored by Rep. Craig Redmon, clears up confusion on how county assessors should handle property that is available for mining but that is not being used for that purpose. Any information provided to a county assessor or other public entity which administers tax policies that is by law declared to be confidential, including individual taxpayer information and a specific taxpayer’s mine property, shall not be disclosed.

**Senate Bill 794**, sponsored by Sen. Wayne Wallingford, mandates that all sales, rentals, repairs, and parts of durable medical equipment, prosthetic devices, and orthopedic devices will be exempt from state sales and use taxes.

**Senate Bill 823**, sponsored by Sen. Will Kraus, it includes a change in language that will delay broad enforcement of a State Supreme Court decision which overturned a quarter century’s worth of judicial precedent of sales tax exemptions for manufacturing equipment. The state high court decision came on April 5, 2016. The decision overturned previous decisions on what manufacturing equipment is and how it is exempt from state sales tax. Those decisions date back to 1990’s Bridge Data Co. v. Director of Revenue. Supporters of the amendment said the State Supreme Court’s most recent decision amounted to a judicially mandated tax increase.

**Senate Bill 867**, sponsored by Sen. David Sater, contains provisions relating to taxes, counties, sheltered workshops, consolidation of road districts, license office fees, museum districts, highway designations, alcohol at the St. Louis airport, commercial zones, and property managers in Kansas City. AIM supported language in the bill that any real property that is available for mining, but has not been bonded or permitted for such mining activity shall be assessed based upon how the property is currently being used. Any information provided to a county assessor or other public entity which administers tax policies that is by law declared to be confidential, including individual taxpayer information and a specific taxpayer's mine property, shall not be disclosed.
**Senate Bill 1025**, sponsored by Sen. Will Kraus, which exempts exercise classes from sales tax.

**ECONOMIC DEVELOPMENT**


**House Bill 1870**, sponsored by House Speaker Pro Tem Denny Hoskins, extends the "Big Government Get Off My Back Act" by five years. The Act provides an income tax deduction for small business (fewer than 50 employees) for each full time job created with an annual salary of at least the county average wage. The business will be allowed a deduction of $10,000 for each new full time job created or $20,000 for each full time job if the business offers health insurance and pays at least 50 percent of the premiums. The Act also specifies that any federal mandate compelling the state to enact, enforce or administer a federal regulatory program must be subject to authorization through state appropriation or statutory enactment. It also mandates that before the state enacts a user fee or new rule, that the department enacting the fee or rule must certify that it does not have an adverse impact on small businesses and that it is necessary to protect the life, health, or safety of the public.

In addition, tax payers would only be required to furnish health qualified insurance premium information if requested by DOR.

**House Bill 2030**, sponsored by Rep. Denny Hoskins, authorizes an income tax deduction for 50% of the net capital gain from the sale or exchange of employer securities of a Missouri corporation to a qualified Missouri employee stock ownership plan if, upon completion of the transaction, the qualified Missouri employee stock ownership plan owns at least 30% of all outstanding employer securities issued by the Missouri corporation.

**Senate Bill 861**, sponsored by Sen. Paul Wieland, contains several pieces of legislation dealing with transportation, tax breaks for businesses that return to Missouri, and tax breaks for those interested in repurposing the old Dodge plant at Fenton.

**Senate Bill 919**, sponsored by Sen. Eric Schmitt, will allow craft beer brewers to sell so-called growlers of their products in retail stores, while also allowing beer brewers to place coolers with their advertising on them in stores.

**Senate Concurrent Resolution 58**, sponsored by Sen. Joe Keaveny, urges the National Geospatial-Intelligence Agency to remain in St. Louis by building a new facility in the city. Legislators went on to pass this non-binding resolution even after the agency appeared to pick St. Louis for its new headquarters.
ENVIRONMENTAL

**House Bill 1713**, sponsored by Rep. Tim Remole, allows for greater representation by representatives of mining and industry on the state's Clean Water Commission. Previously, agriculture, mining and industry membership was limited to two members. The change mandates that at least two members of the commission must represent agriculture, mining and industry.

The change, supported by Associated Industries of Missouri, will allow for more representation from entities most effected by the decisions of the commission.

HEALTHCARE

**House Bill 1534**, sponsored by Rep. Tom Flanigan, extends the expiration dates from September 30, 2016 to September 30, 2017, for the Ground Ambulance, Nursing Facility, Medicaid Managed Care Organization, Hospital, Pharmacy, and Intermediate Care Facility for the Intellectually Disabled Reimbursement Allowance Taxes.

**Senate Bill 579**, sponsored by Sen. Rob Schaaf, requires the state Department of Health and Senior Services to update its list of communicable or infectious diseases that must be reported by hospitals and ambulatory care centers.

**Senate Bill 608**, sponsored by Sen. David Sater, includes a couple of pieces of legislation dealing with healthcare cost transparency.

**Senate Bill 865**, sponsored by Sen. David Sater, includes the Missouri Health Insurance Rate Transparency Act. Under this act, no health carrier shall deliver, issue for delivery, continue, or renew a health benefit plan until the rates for that plan have been filed with the Director of the Department of Insurance, Financial Institutions, and Professional Registration in the manner specified in the act.

**Senate Bill 875**, sponsored by Sen. Kurt Schaefer, allows a pharmacist to select an interchangeable biological product when filling a biological product prescription.

**Senate Bill 988**, sponsored by Sen. Will Kraus, modifies several provisions of state statutes relating to health care providers, requiring state hospitals, except mental health facilities, to obtain a certificate of need like other hospitals.

TORT AND LEGAL MATTERS

**Senate Bill 578**, sponsored by Sen. Joe Keaveny, attempts to spell out the steps necessary to place a business in receivership. Receivership is a rare occurrence in the business world, and currently, when a business goes into receivership, individual judges are left to make rules concerning the process. After years of researching the situation, the Missouri Bar drafted the language in the bill that it hopes will be used as a step-by-step guideline when the situation occurs. Senate Bill 578 also contains other provisions including language that allows a person to exempt firearms, firearm accessories and ammunition, not to exceed $1,500, from attachment in bankruptcy proceedings.
**Senate Bill 591**, sponsored by Sen. Mike Parson, aims to ensure witnesses purporting to be experts in a certain field do indeed meet that standard. It would allow Missouri to join 40 other states and the federal government in using federal standards to determine whether a witness is an expert or not in a court proceeding.

**Senate Bill 847**, sponsored by Sen. Ed Emery, says that, in any lawsuit over medical care, the actual cost of the care or treatment shall not exceed the dollar amounts paid by, or on behalf of, a patient whose care is at issue — plus any remaining amount necessary to satisfy the financial obligation for medical care by a health care provider. Projected future costs of care are not addressed in the legislation.

**WORKERS’ COMPENSATION**

**Senate Bill 613**, sponsored by Sen. Mike Cunningham, enacts new provisions of law relating to the workers' compensation insurance premiums of volunteer fire departments. This bill and **Senate Bill 700** also contain in the amount of expenses that may be paid by an employer without filing a workers’ compensation claim, thereby protecting the employer’s experience rating modification.

**Senate Bill 700**, sponsored by Sen. Dave Schatz, modifies the law relating to workers' compensation premium rates.

**INSURANCE**

**House Bill 2150**, sponsored by Rep. John Wiemann, requires life insurance companies to compare policies, annuities, and accounts against a death master file for potential matches and to either pay beneficiaries or remit unclaimed benefits to state treasurer.

**House Bill 2194**, sponsored by Rep. Denny Hoskins, changes the laws regarding insurance policy renewal so that insurers are no longer required to non-renew when transferring a policy to an affiliate.

**UNEMPLOYMENT**


**Senate Bill 702**, sponsored by Sen. Brian Munzlinger, gives authority to the Division of Employment Security to reclaim:

- Overpaid unemployment compensation benefits;
- Benefits obtained by reason of nondisclosure or misrepresentation of a material fact; or
- Benefits obtained by reason of error, omission, or lack of knowledge of a material fact on the part of the Division of Employment Security through billing, setoffs against state and federal tax refunds, intercepts of lottery winnings, and collection efforts as provided under current law.

The legislation further requires 15% of payments made toward a penalty assessed for benefits fraudulently received to be immediately deposited into the state unemployment compensation fund. The remaining penalty amount due is credited to the special employment security fund.
MISCELLANEOUS

House Resolution 1103, sponsored by Rep. Todd Richardson, Speaker of the House, commends the Boeing Company for its contributions to our state and the U.S. aerospace industry in honor of its 100th anniversary.


Senate Bill 732, sponsored by Sen. Brian Munzlinger, requires the Department of Public Safety, in cooperation with any statewide organization representing broadcasters, to establish a program for training and certifying broadcast engineers and technical personnel as first informer broadcasters.

The program must provide training and education concerning the restoration, repair, and resupply of broadcaster facilities and equipment in emergency or disaster areas and the personal safety of first informer broadcasters. Under this act, state and local governmental agencies must allow first informer broadcasters access to emergency or disaster areas to restore, repair, or resupply critical broadcaster facilities and equipment. The statewide association involved in establishing the training program must pay the costs of developing and implementing the program.
HB 1434 - Establishes additional rules and procedures for certain counties' tax increment financing commission
Primary Sponsor: Representative Andrew Koenig (R)

TAFP SUMMARY: SCS HCS HBs 1434 & 1600 -- TAX INCREMENT FINANCING

This bill changes the laws regarding tax increment financing. In its main provisions, the bill:

(1) Specifies that a recommendation of approval on a proposed redevelopment plan, project, designation, or amendment by a TIF commission in St. Charles, Jefferson, and St. Louis counties must only be deemed to occur if a majority of the commissioners voting vote for approval. A tied vote must be considered a recommendation in opposition;

(2) Changes the provisions regarding economic activity taxes. Currently, any municipality can approve a proposed redevelopment plan, project, designation, or amendment if it did not receive a recommendation from the majority of the members of its tax increment financing commission upon a two-thirds majority vote of its governing body. The bill limits that authority in any municipality in St. Louis County, St. Charles County, or Jefferson County to include only a redevelopment plan, project, designation, or amendment in which the economic activity taxes generated do not exceed the costs associated with the demolition of buildings and the clearing and grading of land;

(3) Adds transparency language for TIF commissions;

(4) Currently, county boards, upon voter approval, may levy a property tax for the purpose of establishing and maintaining county sheltered workshops, residences, facilities, and/or other related services. This bill prohibits the adoption of any tax increment financing from superseding, altering, or reducing the sheltered workshop levy; and

(5) Requires the governing body of a municipality to submit a report of each redevelopment plan and redevelopment project in existence on December 31 of the preceding year to the Department of Revenue by November 15 each year and requires the Commissioner of Administration to publish the data in the reports on the Missouri Accountability Portal. Any municipality that does not comply with such reporting requirements within 60 days from the certified mail notification from the department will be prohibited from adopting any new tax increment financing plan for five years.
HB 1435 - Modifies current provisions regarding sales tax refund claims
Primary Sponsor: Representative Andrew Koenig (R)

TAFP SUMMARY: SS HB 1435 -- SALES TAX REFUND CLAIMS

This bill clarifies that the limitations on sales tax refund claims will not apply for a refund claim filed by a purchaser that originally paid the sales tax to a vendor or seller, the claim is for use tax remitted by the purchaser, or an additional refund claim is filed by a person legally obligated to remit the tax because of additional information, an exemption certificate, a decision of a court, or changes to regulations or department policies.

HB 1530 - Modifies the law relating to unemployment compensation benefits
Primary Sponsor: Representative Wanda Brown (R)

TAFP SUMMARY: HB 1530 -- UNEMPLOYMENT COMPENSATION BENEFITS

Currently, when an individual or employer repays the state for overpayment of unemployment compensation benefits, payments made toward the penalty amount due are credited to the Special Employment Security Fund. This bill requires 15% of the total amount of benefits fraudulently obtained to be deposited into the Unemployment Compensation Fund and the remaining penalty amount must be credited to the Special Employment Security Fund.

HB 1534 - Extends the expiration date on various federal reimbursement allowances for two years
Primary Sponsor: Representative Tom Flanigan (R)

TAFP SUMMARY: SCS HB 1534 -- FEDERAL REIMBURSEMENT ALLOWANCES

This bill extends the sunsets from September 30, 2016 to September 30, 2017, for the Ground Ambulance, Nursing Facility, Medicaid Managed Care Organization, Hospital, Pharmacy, and Intermediate Care Facility for the Intellectually Disabled Reimbursement Allowance Taxes.

HB 1582 - Changes the laws regarding the withholding tax filing requirements for certain small businesses
Primary Sponsor: Representative Mike Kelley (R)

TAFP SUMMARY: SCS HB 1582 -- WITHHOLDING TAX RETURNS WITHHOLDING TAX FILING REQUIREMENTS (Section 143.221, RSMo)

Currently, an employer is allowed to file an annual withholding tax return instead of four quarterly returns when the aggregate amount withheld is less than $20 in each of the four preceding quarters. The bill changes the amount to less than $100 in each of the four preceding quarters if the employer is not otherwise required to file a withholding return on a quarterly or monthly basis.

ELECTRONIC FILING OF FORM W-2 (Section 143.591)
Beginning January 1, 2018, employers with 250 or more employees must file their Form W-2s electronically to the state unless granted a waiver for the federal requirement to file electronically by the Internal Revenue Service.

**HB 1713** - Requires the Department of Natural Resources to provide information regarding advanced technologies to upgrade existing lagoon-based wastewater systems to meet any new or existing discharge requirements
Primary Sponsor: Rep. Tim Remole (R)

**TAFP SUMMARY: SCS HCS HB 1713 -- WATER SYSTEMS.** This bill authorizes any political subdivision to use a design-build contractor for waste water and water treatment projects. The Department of Economic Development is required to consider design-build waste water or water treatment projects when disbursing grants under the Community Development Block Grant program. The Department of Natural Resources is prohibited from precluding design-build contracts from being considered for funding from the Water and Wastewater Loan Fund.

The bill modifies the term "water resource project" to mean a project containing planning, design, construction, or renovation of public water supply, flood control storage, or treatment or transmission facilities for public water supply. The bill changes the name of the "Multipurpose Water Resource Program Renewable Water Program Fund" to the "Multipurpose Water Resource Program Fund."

The Department of Natural Resources is required to establish rules by which water resource project sponsors can remit contributions to the fund. Any plan submitted to the Director of the Department of Natural Resources for the construction of a water resource project must include a schedule, proposed by the sponsor, to remit contributions back to the fund. The contributions are to be used to administer the fund and to provide financial assistance under the Multipurpose Water Resource Program.

The bill requires public water systems under Chapter 640, RSMo, and water supply districts under Chapter 247 to notify the Department of Health and Senior Services, Department of Natural Resources, and its customers, at least 90 days prior to any meeting held at which a vote to modify the fluoridation of water in the system or district will occur. If the water system is an investor-owned water supply, the entity calling for the modifications is responsible for the meeting and the notice requirements.

The bill also makes changes to the member requirements of the Clean Water Commission. It will allow for greater representation by representatives of mining and industry on the state’s Clean Water Commission. Previously, agriculture, mining and industry membership was limited to two members. The change mandates that at least two members of the commission must represent agriculture, mining and industry.

The Department of Natural Resources must provide any municipality or community currently served by a wastewater treatment system with information regarding options to upgrade the existing lagoon system to meet discharge requirements. The information must include available advanced technologies including biological treatment options. The municipality or community, or a third party it hires, may conduct an analysis, including feasibility and cost, of available options to meet the discharge requirements. If upgrading or expanding the existing system is feasible, cost effective and will meet the discharge requirements, the department must allow the entity to implement the option.
This bill contains an emergency clause.

**HB 1870** - Changes the laws regarding the Big Government Get Off My Back Act  
Primary Sponsor: Representative Denny Hoskins (R)

TAFP SUMMARY: HB 1870 -- THE COLLECTION OF MONEY BY PUBLIC ENTITIES (Sections 1.310 and 143.173, RSMo)

This bill extends the provisions of The Collection of Money by Public Entities which provides tax relief to certain small businesses for five years beginning August 28, 2016. The bill: (1) Specifies that any federal mandate compelling the state to enact, enforce, or administer a federal regulatory program must be subject to authorization through appropriation or statutory enactment; (2) Extends the restriction on an increase of any state-imposed user fee and the requirement that any state agency proposing a rule must certify that it does not have an adverse impact on small businesses; that it is necessary to protect the life, health, or safety of the public; or that any small business is exempt from the rule; and (3) Specifies the definition of “small business” to include businesses with fewer than 50 employees. The bill authorizes, for tax years 2016 through 2021, an income tax deduction for a small business for each full-time job created with an annual salary of at least the county average wage as determined by the Department of Economic Development. To be a full-time job, the employee must work at least an average of 35 hours per week for a 52-week period. The business will be allowed a deduction of $10,000 for each new full-time job created or $20,000 for each full-time job if the business offers health insurance and pays at least 50% of the premiums.

**BUSINESS LICENSE TAXES (Section 94.360)**  
This bill provides that after May 1, 2016 a municipality shall not impose a business license tax on any business under more than one of the following Sections; 94.110, 94.270, or 94.360 pertaining to various different businesses. However, that restriction shall not apply to any tax levied by a fourth class city for a project from which bonds are outstanding as of May 1, 2005, or business license taxes imposed by the City of St. Louis or Kansas City.

**QUALIFIED HEALTH INSURANCE (Section 143.121)**  
This bill removes the taxpayers' duty to provide the Department of Revenue with proof of the amount of qualified health insurance premiums paid for the purposes of determining one's federal adjusted gross income. The department may request for such proof though.

**FEDERAL WORK AUTHORIZATION PROGRAM (Section 285.530)**  
This bill provides that businesses entities, as a condition for the award of any contract or grant exceeding $5000 by the state or by any political subdivision thereof, state subsidized tax credit, tax abatement, or loan from the state, shall swear by affidavit that it is participating in a federal work authorization program with respect to those employees working in connection with those contracted services, unless participation in such a federal work authorization program would result in a substantial difficulty or expense.

**HB 2030** - Authorizes a tax deduction equal to fifty percent of the capital gain resulting from the sale of employer securities to a certain Missouri stock ownership plans
Primary Sponsor: Representative Denny Hoskins (R)

TAFP SUMMARY: SCS HCS HB 2030 -- STOCK OWNERSHIP TAX DEDUCTION

Beginning January 1, 2017, this bill authorizes an income tax deduction for 50% of the net capital gain from the sale or exchange of employer securities of a Missouri corporation to a qualified Missouri employee stock ownership plan if, upon completion of the transaction, the qualified Missouri employee stock ownership plan owns at least 30% of all outstanding employer securities issued by the Missouri corporation. The provisions of the bill will expire on December 31, six years after the effective date.

HB 2150 - Requires life insurance companies to compare policies, annuities, and accounts against a death master file for potential matches and to either pay beneficiaries or remit unclaimed benefits to state treasurer
Primary Sponsor: Representative John Wiemann (R)

TAFP SUMMARY: HCS HB 2150 -- UNCLAIMED LIFE INSURANCE BENEFIT ACT

This bill creates the Unclaimed Life Insurance Benefits Act. The bill requires life insurance companies to compare policies, annuities, and accounts against the United States Social Security Administration's death master file on at least a semiannual basis to find potential matches on insureds who have passed away. The life insurance company shall then make a good faith effort to find potential beneficiaries and provide them with appropriate claims forms for the purpose of paying any benefits due. In the event such beneficiaries or owners cannot be found the company shall remit the unclaimed benefits to the State Treasurer as unclaimed property under Section 447.510, RSMo. These provisions will apply to companies that used the death master file prior to January 1, 2018 to find annuitants that were deceased retrospectively. All other companies the provision will apply to new accounts issued or entered into on or after January 1, 2018.

HB 2194 - Changes the laws regarding insurance policy renewal so that insurers are no longer required to non-renew when transferring a policy to an affiliate
Primary Sponsor: Representative Denny Hoskins (R)

TAFP SUMMARY: SS SCS HCS HB 2194 -- REGULATION OF INSURANCE WORKERS COMPENSATION (Section 387.955, RSMo)

Currently, the rating plan prohibits an adjustment to the experience modification of an employer if the total medical cost does not exceed $1000. This bill changes that amount to 20% of the current split point of primary excess losses under the uniform experience rating plan. When premium modifications result due to a schedule rating plan with an underwriter determining individual risk characteristics, then up to an additional 10% credit may be given for a reduction in the insurer's expenses, rather than "an additional 10%" reduction.

AFFIDAVIT REQUIREMENTS FOR INSURERS (Section 374.205)
This bill allows insurance companies to file one affidavit, when market conduct reports from the Department of Insurance, Financial Institutions and Professional Registration are adopted, indicating
acceptance of such reports rather than requiring all directors of a company to file an affidavit. This affidavit will be executed by its general counsel or chief legal officer.

**RENEWAL OF INSURANCE POLICIES (Sections 375.004 and 379.118)**
This bill specifies that when an insurer transfers an insurance policy among affiliated insurers within an insurance holding company that it is not considered to be a cancellation or nonrenewal. If the transfer policy is substantially different than the original policy the insurer must notify the insured at least 15 days in advance of the effective date of the assignment or transfer.

**INSURERS (Section 379.125)**
This bill will allow property and casualty insurers and reinsurers to write limited amounts of life insurance business outside of the United States which is written or assumed as a rider attached to a base policy, provided the aggregate premium assumed annually does not exceed 3% of the capital and surplus of the company as of December 31 of the previous year.

**SELF SERVICE STORAGE INSURANCE (Section 379.1640)**
This bill creates a regulatory system for self-service storage insurance and the selling of such insurance. A limited lines self-service storage producer is allowed to offer and disseminate self-service storage insurance. Producers shall meet certain licensing and training criteria and maintain a register of individuals that offer self-service storage insurance for the producer and provide such information to the Department of Insurance, Financial Institutions and Professional Registration upon request. Employees and authorized representatives offering self-service storage insurance shall receive training that meets minimum standards as outlined, which shall be reviewed and approved by the department director. Producers offering self-service storage insurance shall provide brochures or other print materials to prospective purchasers that meet minimum standards as outlined in the bill. Self-service storage insurance producer's employees and authorized representatives shall not engage in certain activities including evaluating the technical terms of the policies or holding themselves out as insurance producers. Limited lines self-service storage insurance producers, operators, employees and authorized representatives can offer self-service storage insurance policies in an amount not to exceed $5,000 per customer per unit.

**HB 2381** - Changes the laws regarding mine property  
Primary Sponsor: Representative Craig Redmon (R)

**TAFP SUMMARY: SS HCS HB 2381 -- PROPERTY TAX ON MINES**
This bill specifies that any real property that is readily available for mining but has not been bonded or permitted for such mining activity shall be assessed according to how the real property is currently being used. Any information provided to a county assessor or other public entity which administers tax policies that is by law declared to be confidential, including individual taxpayer information and a specific taxpayer's mine property, shall not be disclosed.

**HR 1103** - Commends the Boeing Company for its contributions to our state and the U.S. aerospace industry in honor of its 100th anniversary  
Primary Sponsor: Representative Todd Richardson (R)
TAFP SUMMARY: HR 1103 -- Commends the Boeing Company for its contributions to our state and the U.S. aerospace industry in honor of its 100th anniversary

SB 578 - Establishes the Missouri Commercial Receivership Act and exempts firearms from attachment in bankruptcy proceedings  
Primary Sponsor: Senator Joseph Keaveny (D)

TAFP SUMMARY: CCS/HCS/SCS/SB 578 -- JUDICIAL PROCEEDINGS.

The bill allows the presiding judge of any circuit containing a diagnostic and reception center operated by the Department of Corrections and a mental health facility operated by the Department of Mental Health which houses certain persons specified in the act to appoint a circuit court marshal.

This bill provides that when an annual judicial performance report indicates for three consecutive years that a judicial circuit is in need of two or more full-time judicial positions then, subject to appropriations, there shall be one additional circuit judge position authorized in that circuit.

This bill also adds a circuit court judge to the Twenty-Sixth Judicial Circuit. The judge shall be elected in 2020, and until such time the Governor shall appoint someone to serve as judge.

The bill allows a person to exempt firearms, firearm accessories and ammunition, not to exceed $1,500, from attachment in bankruptcy proceedings.

This bill establishes the Missouri Commercial Receivership Act. The bill grants the court authority to appoint a receiver whenever the court deems necessary. A receiver shall have the duty to keep and preserve any money deposited with the court, and any property and business or business interests entrusted to the receiver pending any legal or equitable action concerning such money, property, or business interest. The appointment of a receiver may be sought as an independent claim and remedy, and does not need to be in addition to another legal claim. A debtor and all parties to the action shall receive seven days’ notice of any application for the appointment of a receiver. Notice shall also be given to all other parties in interest.

When a receiver is appointed in a foreign jurisdiction with respect to the debtor’s property the court shall appoint, upon application by the receiver or any party to the foreign action, the same person acting as receiver for the property in this state. Following the appointment, the court shall give effect to orders or judgments of the court in the foreign jurisdiction affecting the property in this state unless to do so would be manifestly unjust or inequitable.

The order appointing a receiver must describe the property by category, individual items, or both if the receiver is to take charge of less than substantially all of the debtor’s property. The receiver will be deemed a general receiver with authority to take charge over all of the debtor’s property unless expressly stated otherwise in the order.

According to the bill, a receiver is either a general receiver or a limited receiver depending on how much possession and control over the debtor's property the court grants the receiver.
Within 10 business days of the appointment of a receiver or the conversion of a limited receiver to a general receiver, the receiver shall give notice of the appointment or conversion to all interested parties including the Secretary of State or the state and federal taxing authorities. The bill provides the content of such notice and states that the notice must be sent by first class mail. Additionally, a general receiver must publish notice of the receivership in a newspaper of general circulation in the county in which estate property is located once a week for three weeks. A debtor must cooperate with all reasonable requests for information by the receiver in order to assist in satisfying the notice requirements.

Any person may serve as a receiver unless the person has been found guilty of a felony, is party to the action, is related to the debtor or is a partner, director, attorney, employee, or creditor of the debtor, has an interest materially adverse to the interests of persons affected by the receivership, or is a sheriff of any county. A receiver must execute a bond with one or more sureties approved by the court and in an amount specified by the court. As of the time of appointment, a receiver has the same powers and priority as a creditor that obtained a judicial lien on all of the debtor's property that is subject to the receivership, but must satisfy real property recording requirements as established in the bill.

The court has exclusive authority over the receiver, and exclusive possession and control of all real property and all tangible and intangible personal property in which the receiver has been appointed to keep and preserve. The court also has exclusive authority to determine all controversies relating to the collection, preservation, application and distribution of all property, and all claims against the receiver arising out of the exercise of the receiver's performance of duties.

The bill specifies the powers and authority of a receiver which include paying expenses incidental to the preservation and use of estate property, performing all duties associated with operating a business in the ordinary course of operation, intervening in any action in which a claim is asserted against the debtor, seeking advice from the court about a course of action, and obtaining appraisals of estate property. Additional powers may be granted to the receiver by statute, court rule, or by the court. A receiver may demand that a person turn over any estate property that is within the possession or control of that person. A receiver may seek to compel turnover of estate property, and unless a bona fide dispute over the receiver's right to possession of the estate property exists, failure to relinquish possession of the property is punishable as contempt.

A debtor must make available for inspection by a general receiver all information and data as established by the bill, and must cooperate fully with the receiver in the administration of the estate and discharge of the receiver's duties. After the appointment of a general receiver, the debtor must file with the court and submit to the receiver certain information including a list of all known creditors and a true list of all estate property.

A general receiver must file with the court a monthly report of the receiver's operations and financial affairs, and a limited receiver shall file all reports as the court requires.

The order of appointing a general receiver shall operate as a stay of certain actions as specified in the bill, but shall not operate as a stay of criminal proceedings against the debtor; actions establishing paternity, or actions modifying or enforcing alimony, maintenance or support orders; any act to perfect or to maintain the perfection of an interest in estate property; an action by a governmental unit to enforce its police or regulatory power; the enforcement of a judgment obtained in an action by a
governmental unit to enforce its police or regulatory power; the exercise of a right of setoff; or any action pending in another court.

A utility providing service to estate property must provide fifteen days notice, or notice as required by the Public Service Commission for a customer of that class, before altering or discontinuing service to the estate property. Additionally, the court may prohibit the alteration or cessation of utility service if the receiver can furnish adequate assurance of payment for service. Any utility regulated by the Public Service Commission which does not provide notice or comply with the court’s order is subject to the appropriate remedial measures by the commission. A receiver may bring an action to enforce compliance with this bill against any utility not regulated by the Public Service Commission which does not provide notice or comply with the court’s order.

A receiver may assume or reject any executory contract or unexpired lease of the debtor upon order of the court following notice and a hearing. Any obligation or liability incurred by a general receiver on account of the receiver's assumption of the executory contract or unexpired lease shall be treated as an expense of the receivership, and rejection of a contract or lease is to be treated as a breach of contract or lease occurring immediately prior to the receiver's appointment.

If a receiver is authorized to operate the debtor’s business or manage the debtor’s property, the receiver may obtain unsecured credit and incur unsecured debt in the ordinary course of business as an administrative expense. The receiver may obtain credit or incur debt other than in the ordinary course of business with the authorization of the court and following notice and a hearing.

The bill grants a receiver the right to sue and be sued without leave of court in all circumstances necessary for the receivership. A judgment against a general receiver or the debtor is not a lien on estate property and no executions shall be issued on such property.

A receiver and the agents, attorneys, and employees of the receivership shall have judicial immunity for acts and omissions committed in connection with official duties on behalf of the court and within the scope of the appointment. A person may bring an action against a receiver or the agents, attorneys, and employees of the receivership only after filing an application with the court and the court granting such application after notice and hearing. With the court’s approval, the receiver may employ attorneys, accountants, appraisers, auctioneers, or other professionals to assist the receiver. The receiver and any professionals employed must maintain itemized billing records.

Creditors and parties of interest and other persons submitting written claims in the receivership are bound by the acts of the receiver and court orders relating to the receivership regardless of whether the person is a party to the receivership action. The receiver shall maintain a master mailing list of all parties and parties in interest that file and serve a notice of appearance in the receivership. All persons on the master list must be given 30 days notice prior to certain hearings and other proceedings specified in the bill.

Certain claims shall be in the form as required by the bill, served on the receiver, and filed with the court. The claims administration process shall be administered by a general receiver and may be administered by a limited receiver when ordered by the court. Prior to the entry of an order approving the general receiver’s final report, the receiver or any party in interest may file with the court an objection to a claim. A copy of the objection shall be mailed to the creditor who has 30 days to file with the court suggestions
in support of the claim. The bill establishes the order of priority on a pro rata basis for the distribution of claims not disallowed by the court.

The court shall remove or replace the receiver if the receiver fails to perform the duties prescribed under the bill or ordered by the court. Upon distribution of all property of the estate or completion of the receiver's duties, the receiver shall file a motion with the court to be discharged. The receiver's final report and accounting which includes all receipts and disbursements of the estate shall be included in the petition for discharge and filed with the court.

The bill specifies that firearms, firearm accessories, and ammunition, not to exceed $1,500 in aggregate value, are exempt from attachment and execution in bankruptcy.

**SB 579** - Modifies provisions relating to infection reporting of health care facilities and telehealth services
Primary Sponsor: Senator Rob Schaaf (R)

**TAFP SUMMARY: SB 579** -- This bill changes the law regarding the provision of health care.

Under current law, the Department is required to disseminate reports to the public based on data compiled showing infection incidence rates for certain infections for hospitals and ambulatory surgical centers. This act adds other infections to be reported, including: hospital and ambulatory surgical center procedure infections that meet certain requirements, central line-related bloodstream infections, health care-associated infections specified by the Centers for Medicare and Medicaid Services (CMS), and other categories of infections established by the Department through rule. The Department shall make such reports available to the public for at least 2 years.

This act requires the Infection Control Advisory Panel to make recommendations to the Department regarding CMS' reporting requirements by January 1, 2017. The panel recommendations shall address which hospitals shall be required, as a condition of licensure, to use specified national networks for data collection, risk analysis and adjustment, or public reporting of infection data. After considering the panel's recommendations, the Department shall implement guidelines from the Centers for Disease Control and Prevention's National Healthcare Safety Network, or its successor. As a condition of licensure, those hospitals that meet the minimum public reporting requirements shall participate in the National Healthcare Safety Network program. Those hospitals shall permit the program to disclose facility-specific data. Those facilities not participating in the program shall submit facility-specific data to the Department as a condition of licensure.

This act also provides that no later than August 28, 2017, each hospital and ambulatory surgical center, excluding mental health facilities, shall establish an antibiotic stewardship program for evaluating the judicious use of antibiotics, especially antibiotics that are the last line of defense against resistant infections. The stewardship program procedures shall be made available to the Department upon inspection. Hospitals shall meet specified national standards for reporting antimicrobial usage or resistance and shall authorize the National HealthCare Safety Network, or its successor, to disclose to the Department facility-specific reported data. Such data shall not be disclosed to the public except under specific circumstances. Beginning January 1, 2018, and every year thereafter, the Department shall report the General Assembly on the incidence, type, and distribution of antimicrobial-resistant infections in the state.
These provisions are substantially similar to SCS/HCS/HB 1066 (2015) and similar to SCS/SB 10 (2015) and SB 910 (2014).

This act also defines "telehealth" or "telemedicine" as the delivery of health care services by means of information and communication technologies which facilitate the assessment, diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while such patient is at the originating site and the health care provider is at the distant site. Telehealth shall also include the use of asynchronous store-and-forward technology. Any licensed health care provider shall be authorized to provide telehealth services if such services are within the scope of practice for which the health care provider is licensed and are provided under the same standard of care as services provided in person. Additionally, no originating site for shall be required to maintain immediate availability of on-site clinical staff during the telehealth service, unless such is necessary to meet the standard of care for the treatment of the patient’s medical condition when the treating health care provider has not previously seen the patient in person in a clinical setting, is not at the originating site, and is not providing coverage for a health care provider with an established relationship with the patient.

Additionally, physicians practicing telemedicine shall ensure that a properly established physician-patient relationship, as described in this act, exists with the person receiving telemedicine services. No health care provider shall prescribe any drug, controlled substance, or other treatment to a patient based solely on a telephone evaluation. However, physicians, or their delegates, on-call physicians, advanced practice registered nurses, physician assistants, or assistant physicians in a supervision agreement may prescribe any drug, controlled substance, or other treatment within his or her scope of practice to a patient based solely on an evaluation over the telephone if a previously-established and ongoing valid physician-patient relationship exists. No health care provider shall prescribe any drug, controlled substance, or other treatment based solely on an Internet request or an Internet questionnaire.

This act specifies the licensed individuals who shall be considered eligible health care providers for the provision of telehealth services for MO HealthNet participants. Additionally, this act specifies the originating sites where a MO HealthNet participant may receive telehealth services.

This act addresses the use of asynchronous store-and-forward technology in the practice of telehealth services for MO HealthNet participants. "Asynchronous store-and-forward" is defined in the act as the transfer of a patient’s clinically important digital samples, such as still images, videos, audio, and text files, and relevant data from an originating site through the use of a camera or similar recording device that stores digital samples that are forwarded via telecommunication to a distant site for consultation by a consulting provider without requiring the simultaneous presence of the patient and the patient’s treating provider. The Department of Social Services, in consultation with the Departments of Mental Health and Health and Senior Services, shall promulgate rules governing the use of asynchronous store-and-forward technology in the practice of telehealth in MO HealthNet. The act also specifies reimbursement for asynchronous store-and-forward services for the treating provider and the consulting provider.

This act establishes the "Telehealth Services Advisory Committee" to advise the Department of Social Services and to propose rules relating to telehealth services through asynchronous store-and-forward technology. The act specifies the committee members, appointments, and other terms.

This act establishes a statewide home telemonitoring program for the MO HealthNet program. Home telemonitoring services are health care services that require scheduled remote monitoring of data related to a patient's health. The act specifies the individuals for whom home telemonitoring services
may be made available. If the Department of Social Services determines that home telemonitoring is not cost effective, the Department may discontinue the program and stop providing reimbursement through MO HealthNet for such services.

These provisions are substantially similar to provisions in HCS/SS/SCS/SB 621 (2016), HB 1923 (2016) and HCS/SCS/SB 230 (2015).

SB 591 - Modifies provisions relating to expert witnesses

Primary Sponsor: Senator Mike Parson (R)

TAFP SUMMARY: SB 591 -- EXPERT WITNESSES

This bill specifies that a witness who is qualified as an expert may testify in the form of an opinion or otherwise if the expert's specialized knowledge will help the trier of fact to understand the evidence or to determine a fact in issue, the testimony is based on sufficient facts or data, the testimony is the product of reliable principles and methods, and the expert has reliably applied the principles and methods to the facts of the case.

An expert may base an opinion on facts or data in the case that the expert has been made aware of or personally observed. If experts in the particular field would reasonably rely on those kinds of facts or data in forming an opinion on the subject, such facts or data need not be admissible for the opinion to be admitted.

However, if the facts or data would otherwise be inadmissible, the proponent of the opinion may disclose them to the jury only if their probative value in helping the jury evaluate the opinion substantially outweighs their prejudicial effect.

An expert opinion is not objectionable just because it embraces an ultimate issue. In a criminal case, an expert witness must not state an opinion about whether the defendant did or did not have a mental state or condition that constitutes an element of the crime charged or of a defense.

Unless the court orders otherwise, an expert may state an opinion and give the reasons for it without first testifying to the underlying facts or data. However, the expert may be required to disclose those facts or data on cross-examination.

A landowner is competent to testify as to the reasonable market value of his or her land, in accordance with case law specified in the bill.

SB 608 - Modifies several provisions relating to health care

Primary Sponsor: Senator David Sater (R)

TAFP SUMMARY: CCS#2 HCS SS SB 608 -- HEALTH CARE MENINGOCOCCAL MENINGITIS (Sections 167.638 and 174.335, RSMo)

The bill requires the Department of Health and Senior Services to develop a brochure that includes information on all meningococcal vaccines receiving a Category A or B recommendation from the Advisory Committee on Immunization Practices and a recommendation that the current student or
entering student receive meningococcal vaccines in accordance with current Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention guidelines. Currently, all public institutions of higher education, beginning with the 2004-05 school year, require all students who live on campus to have received the meningococcal vaccine no more than five years prior to enrollment and in accordance with the latest recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention unless the student has a signed statement of medical or religious exemption in his or her file. This bill includes sorority and fraternity residences as on campus living.

HEALTH CARE COST REDUCTION AND TRANSPARENCY ACT (Section 191.875) This bill establishes the Health Care Cost Reduction and Transparency Act that requires each health care provider licensed in Missouri to make available to the public and on its Internet website the most current price information required under these provisions in a manner that is easily understood by the public. Beginning July 1, 2018, ambulatory surgical centers and imaging centers must provide an estimate of the current direct payment price information for the 25 most common reported health care services or procedures or 20 of the most common imaging procedures. Beginning July 1, 2017, the bill requires hospitals to provide the amount that would be charged without discounts for each of the 100 most prevalent diagnosis-related groups as defined by the Medicare program. Upon written request of a patient for the direct payment cost of a particular health care service or procedure, imaging procedure, or surgery procedure reported under these provisions, a health care provider or facility must provide the information to the patient in writing, either electronically or by mail, within three business days after receiving the request. Posting of such charges on the health care provider’s or facility’s website will constitute compliance with these provisions. It shall be a condition of participation in the MO HealthNet program for health care providers located in a Kansas border county to comply with these provisions. If such provider does not comply then a health care provider shall not include any provider located in a Missouri border county.

PALLIATIVE CARE (Sections 191.1075, 191.1080, and 191.1085) The bill creates the "Missouri Palliative Care and Quality of Life Interdisciplinary Council," to consult with and advise the Department of Health and Senior Services on matters related to the establishment, maintenance, operation, and outcomes evaluation of palliative care initiatives in the state, as well as submit an annual report to the General Assembly assessing the availability of palliative care in the state for patients at early stages of serious disease and analyzing barriers with greater access to palliative care. The bill also creates the "Palliative Care Consumer and Professional Information and Education Program," which must be designed to maximize the effectiveness of palliative care in the state by ensuring the public availability of comprehensive and accurate information about palliative care. The program is required to encourage hospitals to have a palliative care presence on their Intranet or Internet website and to develop and distribute information about palliative care to patients. These provisions of this bill expire on August 28, 2022. The bill establishes this state as a member of a compact to facilitate the interstate practice of physical therapy. The primary purpose of the compact is to preserve the regulatory authority of states to protect public health and safety through the current system of state licensure. The compact will become effective after it has been approved by 10 member states. The bill outlines specific requirements that a state must complete in order to participate in the compact and that a licensee must adhere to in order to exercise privileges thereunder. The bill adds services rendered by licensed occupational therapists to services that cannot require a higher co-payment or coinsurance than is required for the services of a primary care physician office visit. The bill requires health carriers to clearly state the availability of occupational therapy services and requires the Oversight Division of the Joint Committee on Legislative Research to perform an actuarial analysis of the cost impact health carriers, insureds, and other payers
for occupational therapy coverage beginning September 1, 2016, and submit a report by December 31, 2016.

CERTIFICATE OF NEED (Section 197.315) Currently, facilities operated by the state are not required to obtain a certificate of need, appropriation of funds to such facilities by the General Assembly are deemed in compliance with certificate of need provisions, and such facilities are deemed to have received an appropriate certificate of need without payment of any fee or charge. The bill requires hospitals operated by the state and licensed under Chapter 197, to obtain a certificate of need and comply with the other provisions of certificate of need except for Department of Mental Health state-operated psychiatric hospitals. Certain types of equipment can still be purchased without a certificate of need.

VACCINATIONS (Section 198.054) Between October 1 and March 1 of each year, all licensed long-term care facilities must assist their employees, volunteers, and health care workers to obtain a vaccination for the influenza virus by either offering the vaccination at the facility or by providing information as to how to independently obtain it.

MO HEALTHNET COPAYMENTS (Section 208.142) Beginning October 1, 2016, the Department of Social Services shall require MO HealthNet participants to pay an $8 co-payment fee for use of a hospital emergency department for the treatment of a condition that is not an emergency medical condition. The bill permits the Department of Social Services to utilize best clinical practices to achieve cost efficacy when administering the MO HealthNet pharmacy program.

MO HEALTHNET MISSED APPOINTMENT FEES (Section 208.148) This provision permits fee-for-service MO HealthNet health care providers, to the extent permitted by laws pertaining to the termination of patient care, to charge a missed appointment fee to MO HealthNet participants that such participants must pay before scheduling another appointment with that provider. The fee may be charged for missed appointments or for failing to cancel an appointment within 24 hours prior to the appointment. The permissible fees are as follows: No charge for the first missed appointment in a three-year period, $5 for the second missed appointment in a three-year period, $10 for the third missed appointment in a three-year period, and $20 for the fourth and each subsequent missed appointment in a three-year period. Health care providers shall waive the fee in cases of inclement weather. The health care provider shall not charge to nor shall the MO HealthNet participant be reimbursed by the MO HealthNet program for the missed appointment fee.

MO HEALTHNET REIMBURSEMENT (Section 208.152) Beginning July 1, 2016, and subject to appropriations, the bill requires the MO HealthNet Division within the Department of Social Services to reimburse eligible providers, including psychologists of behavioral, social, and psychophysiological services, including psychologists for the prevention, treatment, or management of physical health problems. A provider must be reimbursed utilizing the specified behavior assessment and intervention reimbursement codes or their successor codes under the Current Procedural Terminology coding system maintained by the American Medical Association.

JOINT COMMITTEE ON PUBLIC ASSISTANCE (208.952) This bill modifies the Joint Committee on MO HealthNet to create a permanent Joint Committee on Public Assistance. The committee must have as its purpose the study of the efficacy of public assistance programs within the state, determine the resources needed to continue and improve the programs, and develop recommendations on how to reduce dependency and promote public assistance recipient self-sufficiency as may be appropriate. The
committee must receive and obtain information from the departments of Social Services, Mental Health, Health and Senior Services, Elementary and Secondary Education, and any other department as applicable, regarding projected enrollment growth, budgetary matters, and any other information deemed relevant to the committee’s purpose. The committee must meet at least twice a year. A portion of the meeting must be set aside for public testimony. The committee is authorized to hire staff and enter into employment contracts, including an executive director, to conduct special reviews or investigations of the state’s public assistance programs. The committee must also conduct an annual rolling five-year forecast of the state’s public assistance programs and make recommendations to the General Assembly. The bill also repeals a section of law relating to a rolling five-year MO HealthNet forecast conducted by the Legislative Budget Office.

PHYSICAL THERAPY LICENSURE COMPACT (Sections 334.1200-334.1233) The bill establishes this state as a member of a compact to facilitate the interstate practice of physical therapy. The primary purpose of the compact is to preserve the regulatory authority of states to protect public health and safety through the current system of state licensure. The compact will become effective after it has been approved by 10 member states. The bill outlines specific requirements that a state must complete in order to participate in the compact and that a licensee must adhere to in order to exercise privileges thereunder. In order to facilitate and coordinate implementation and administration of the compact, the bill establishes the Physical Therapy Compact Commission. The commission shall: (1) Promulgate uniform rules, having the force and effect of laws, to be binding in all member states; (2) Be comprised of one delegate from each of the member states, to be selected by the state’s licensing board; (3) Conduct meetings that are open to the public, except under specific circumstances; (4) Pay the reasonable expenses of its establishment, organization and ongoing activities; and (5) Provide for the development, maintenance, and utilization of a coordinated database and reporting system containing licensure, adverse action and investigative information on all licensed individuals in member states. Any member state may withdraw from the compact at any time by enacting a statute repealing the compact. Such withdrawal shall take effect six months after the enactment of the repealing statute. In addition to the voluntary removal of a member state, the commission may make a determination that a member state has defaulted in the performance of its obligations or responsibilities under the compact. If the state fails to cure the default, a majority of the member states may vote to remove the state from the compact.

NURSE LICENSURE COMPACT (Sections 335.360-335.415) Codifies changes to the Nurse Licensure Compact adopted by the National Council of State Boards of Nursing on May 4, 2015. The new Compact language must become effective and binding on the earlier of these dates: (1) The date of legislative enactment of this Compact into law by at least 26 states; or (2) December 31, 2018. The bill repeals the current nurse licensure compact effective December 31, 2018 or upon the enactment of the new compact language by at least 26 states.

DISPENSING OF EMERGENCY SUPPLY OF MEDICATION (Section 338.200) This bill provides that only a licensed pharmacist can make the determination to dispense an emergency supply of medication without the authorization from the prescriber.

MAINTENANCE MEDICATION (Section 338.202) The bill permits a pharmacist to dispense varying quantities of maintenance medication per fill up to the total number of dosage units as authorized by the prescriber, unless the prescriber has specified that dispensing a prescription for maintenance medication in an initial amount is medically necessary. When the dispensing of the maintenance medication is based
on refills then the pharmacist must dispense no more than a 90-day supply and the patient must have already been prescribed the medication for three months.

PRESCRIPTION DRUG COVERAGE (Section 376.379) The bill requires health carriers or managed care plans offering health benefit plans with prescription drug coverage to offer medication synchronization services that aligns prescription refill dates. Charging more than the normal co-payment is prohibited for quantities less than prescribed.

PHARMACY BENEFIT MANAGERS (Section 376.388) Requires each contract between a pharmacy benefit manager (PBM) and a pharmacy or pharmacy's contracting representative to include sources utilized to determine maximum allowable cost and update such pricing information at least every seven days. A PBM must maintain a procedure to eliminate products from the maximum allowable cost (MAC) list of drugs or modify maximum allowable cost pricing within seven days if the drugs do not meet the standards as provided in the bill. A PBM must reimburse pharmacies for drugs subject to maximum allowable cost pricing based upon pricing information which has been updated within seven days. A drug must not be placed on a MAC list unless there are at least two therapeutically equivalent multi-source generic drugs, or at least one generic drug available from only one manufacturer and is generally available for purchase from national or regional wholesalers. All contracts must include a process to internally appeal, investigate, and resolve disputes regarding MAC pricing as provided in the bill. Appeals must be upheld if the pharmacy being reimbursed for the drug on the MAC list was not reimbursed according to the provisions of the bill or the drug does not meet the requirements for being placed on the MAC list.

OCCUPATIONAL THERAPY SERVICES (Section 376.1235) Adds services rendered by licensed occupational therapists to services that cannot require a higher co-payment or coinsurance than is required for the services of a primary care physician office visit. The bill requires health carriers to clearly state the availability of occupational therapy services and requires the Oversight Division of the Joint Committee on Legislative Research to perform an actuarial analysis of the cost impact health carriers, insureds, and other payers for occupational therapy coverage beginning September 1, 2016, and submit a report by December 31, 2016.

PRESCRIPTION EYE DROP REFILLS (Section 376.1237) Extends the termination date on provisions relating to the refilling of prescription eye drops to January 1, 2020.

HEALTH CARE PRICE TRANSPARENCY (Section 376.2020) Under this bill, no contract provision between a health carrier and a health care provider shall be enforceable if such provision prohibits, conditions, or in any way restricts any party to such contract from disclosing to an enrollee, patient, or potential patient the contractual payment amount for a health care service.

SB 613 - Enacts new provisions of law relating to the workers' compensation insurance premiums of volunteer fire departments
Primary Sponsor: Senator Mike Cunningham (R)

TAFP SUMMARY: SCS SB 613 -- WORKERS' COMPENSATION This bill permits volunteer fire protection associations to apply to the State Fire Marshal for grants for the purpose of funding the workers' compensation insurance premiums for the association's volunteer firefighters. Grants shall be disbursed by the Marshal, subject to appropriations, based upon the number of volunteer firefighters which
received workers' compensation benefits from claims arising out of and in the course of the prevention or control of fire or the underwater recovery of drowning victims in the preceding calendar year.

WORKERS' COMPENSATION PREMIUM RATES--SPLIT POINT Currently, the uniform experience rating plan of workers' compensation insurance must prohibit an adjustment to the experience modification of an employer if the total medical cost does not exceed $1,000, the employer pays all of the medical costs, there is no lost time from the employment (subject to exceptions), and no claim is filed. This bill changes the medical cost amount limit to 20% of the current split point of primary and excess losses under the uniform experience rating plan. The bill further provides that, for purposes of calculating the premium credit under the Missouri contracting classification premium adjustment program, an employer within the construction group of code classifications may submit to the advisory organization the required payroll record information for the first, second, third, or fourth calendar quarter of the year prior to the workers' compensation policy beginning or renewal date, provided the employer clearly indicates for which quarter the payroll information is being submitted.

SB 657 - Modifies provisions relating to liability for the use of incompatible motor fuel
Primary Sponsor: Senator Brian Munzlinger (R)

TAFP SUMMARY: HCS SS SCS SB 657 -- MOTOR VEHICLES. This bill specifies that if a person is required to have an ignition interlock device installed on his or her vehicle, he or she may apply to the court for an employment exemption variance to allow him or her to drive an employer-owned vehicle not equipped with an ignition interlock device for employment purposes only. The bill prohibits this exemption from being granted to a person who is self-employed or who wholly or partially owns an entity that owns an employer-owned vehicle.

Any person granted an employment exemption variance under these provisions is prohibited from driving, operating, or being in physical control of an employer-owned vehicle used for transporting children under 18 years of age or vulnerable persons, or an employer-owned vehicle for personal use.

The bill specifies that except in cases of fraud or misrepresentation on the application for coverage, an owner or operator of an underground storage tank may not be denied insurance benefits by the Petroleum Storage Tank Insurance Fund or other provider of financial responsibility solely because the owner or operator's claim comes from a release of a regulated petroleum substance deemed incompatible with the storage tank system.

Any refiner, supplier, wholesaler, distributor, retailer, or other vendor of motor fuel that contains or is blended with any amount of ethanol, biodiesel, or other renewable fuel that complies with labeling and motor fuel quality laws may not be liable for any damages related to a customer's purchase of motor fuel as long as the selection of motor fuel was made by the customer and not the vendor. Motor fuel that contains or is blended with a renewable fuel may not be considered a defective product if the fuel complies with motor fuel quality laws.

No motor vehicle manufacturer, motor vehicle dealer or manufacturer or dealer of internal combustion engines or products powered by an internal combustion engine, except in cases of fraud or misrepresentation, is liable for property damages related to customer's purchase of motor fuel containing or blended with any amount of ethanol, biodiesel, or other renewable fuel or biofuel if the
selection and purchase of the fuel was made by the customer and does not comply with the fuel recommendations in the owner manual.

Currently, the fee for the inspection of certain motor fuels shall not be less than 1.5 cents per barrel and shall not exceed 2.5 cents per barrel. This bill specifies that the per barrel fee may not exceed 4 cents per barrel from 2017 to 2021, and may not exceed 5 cents per barrel from 2022 and thereafter.

SB 700 - Modifies the law relating to workers’ compensation premium rates
Primary Sponsor: Senator Dave Schatz (R)

TAFP SUMMARY: CCS SB 700 -- WORKERS’ COMPENSATION

VETERANS’ ORGANIZATION EXEMPTION (Section 287.090, RSMo) This bill exempts veterans’ organization volunteers who are not paid wages from coverage under workers’ compensation statutes. This bill also allows volunteer fire protection associations to apply to the state fire marshal for grants to help fund the associations’ costs related to workers’ compensation insurance premiums for volunteer firefighters. Subject to appropriations, the state fire marshal shall disburse grants to each applying association according to the schedule specified in the bill. Grant money disbursed under this section shall be used only for the purpose of paying for the workers’ compensation premiums of volunteer firefighters.

VOLUNTEER FIREFIGHTERS WORKERS’ COMPENSATION GRANTS (Section 287.245) Furthermore, the uniform experience rating plan of workers’ compensation insurance currently prohibits an adjustment to the experience modification of an employer if the total medical cost does not exceed $1,000, the employer pays all of the medical costs, there is no lost time, with some exceptions, from employment, and no claim is filed. This bill changes the medical cost maximum to 20% of the current split point of primary and excess losses under the uniform experience rating plan.

WORKERS’ COMPENSATION PREMIUM RATES (Section 287.975) Additionally, this bill provides that, for purposes of calculating the premium credit under the Missouri contracting classification premium adjustment program, an employer within the construction group of code classifications may submit to the advisory organization the required payroll record information for all calendar quarters of the year prior to the workers’ compensation policy start or renewal date, provided the employer clearly indicates for which quarter the payroll information is being submitted.

SB 702 - Modifies the law relating to unemployment compensation benefits
Primary Sponsor: Senator Brian Munzlinger (R)

TAFP SUMMARY: SB 702 -- UNEMPLOYMENT COMPENSATION BENEFITS Currently, when an individual or employer repays the state for overpayment of unemployment compensation benefits, payments made toward the penalty amount due are credited to the Special Employment Security Fund. This bill requires 15% of the total amount of benefits fraudulently obtained to be deposited into the Unemployment Compensation fund and the remaining penalty amount to be credited to the Special Employment Security Fund.
Additionally, this bill states that taxicab drivers shall not be considered employees of the company that leases taxicabs to the drivers or that provides dispatching or rider referral services unless the driver is shown to be an employee of the taxicab company by application of the IRS 20-factor right-to-control test.

SB 732 - Modifies numerous provisions relating to public safety
Primary Sponsor: Senator Brian Munzlinger (R)

TAFP SUMMARY: CCS HCS SS SB 732 -- EMERGENCY RESPONSES

REPORTING OF DOMESTIC VIOLENCE INCIDENTS (Section 43.545, RSMo) This bill requires the State Highway Patrol to include all reported incidents of domestic violence in its system of reporting for compilation in the annual crime report.

STATE EMERGENCY MANAGEMENT AGENCY VOLUNTEER PROGRAM (Section 44.023) This bill also adds building officials and building inspectors employed by local governments, who are qualified by training and experience, who have been certified by the State Emergency Management Agency (SEMA), and who perform their duties under the direction of a licensed architect or engineer to the list of volunteers for the emergency volunteer program to be administered by SEMA in the event of a disaster. Volunteers may offer their services or equipment for up to five consecutive days for in-state deployments. Volunteers will help local jurisdictions determine whether affected structures may remain occupied, must be restricted in use, or must be unoccupied pending demolition. Such volunteers shall be immune from liability for any acts committed in the performance of their official duties unless such acts constituted willful misconduct or gross negligence. Enrolled volunteers shall be provided Workers’ Compensation Insurance by SEMA during their official duties, and emergency volunteers who are certified by SEMA shall be considered employees of the state for purposes of the Emergency Mutual Aid Compact and shall be eligible for out-of-state deployments.

URBAN SEARCH AND RESCUE REIMBURSEMENT (Section 44.032) This bill allows urban search and rescue task forces to be reimbursed from the Missouri Disaster Fund for any reasonable and necessary expenditures incurred while responding to any declared emergency.

UNARMED GUARDS WORKING ON OR NEAR GAMBLING BOATS (Section 84.720) This bill also stipulates that any individual who holds an occupational license issued by the Missouri Gaming Commission for the purpose of performing the duties of an unarmed security guard while working on an excursion gambling boat, or at a facility adjacent to an excursion gambling boat, shall be exempt from certain licensing requirements.

LIBERTY AND NORTH KANSAS CITY SALES TAX FOR PUBLIC SAFETY (Section 94.902) This bill further authorizes the cities of Liberty and North Kansas City to impose, upon voter approval, a sales tax of up to .5% solely for the purpose of improving the public safety of the city, including expenditures on equipment, salaries and benefits, and facilities for police, fire, and emergency medical providers.

DISTRICT BOARD MEMBERS ELIGIBLE FOR EMPLOYMENT (Section 190.055) This bill stipulates that individual district board members shall not be eligible for employment within 12 months of termination of service as a member of the board unless such employment is on a volunteer basis.
EMS ADVISORY COMMITTEES (Section 190.102) This bill adds development, review, and recommendation for action to be taken on community and regional time-critical diagnosis plans to the list of items the regional EMS advisory committee must advise and make recommendations on. The bill requires the regional EMS medical director to serve as a member of the regional EMS committee. The EMS medical director must serve a term of four years. The southwest, northwest, and Kansas City regional EMS medical directors must be elected to an initial two-year term. The central, east central, and southeast regional EMS medical directors must be elected to an initial four-year term. All subsequent terms will be four years.

LIABILITY FOR EMTs TRANSPORTING OR RESTRINGING PATIENTS (Section 190.144) This bill also prohibits any emergency medical technician licensed under Sections 190.142 or 190.143 to be subject to liability if he or she acts in good faith and without gross negligence when transporting or physically or chemically restraining a patient. The Department of Health and Senior Services may refuse to issue or renew a certificate, permit, or license and file a complaint with the Administrative Hearing Commission if certain actions are violated.

DEPARTMENT OF HEALTH AND SENIOR SERVICES INVESTIGATIONS (Section 190.165) If the department conducts investigations, the department, prior to interviewing a licensee who is the subject of the investigation, must explain to the licensee that he or she has the right to consult legal counsel or have legal counsel present; have anyone present whom he or she deems necessary or desirable; and refuse to answer any question or refuse to provide or sign any written statement. If a licensee asserts any right herein listed, this shall not be considered by the department to be a failure to cooperate with a department investigation. Finally, the department may only impose a suspension or revocation as a disciplinary action only if it first files the requisite complaint with the Administrative Hearing Commission. The commission may not grant summary decisions in situations where the licensee files an answer contesting the department's intended action.

RECORDS PERTAINING TO APPLICANTS CONSIDERED CLOSED (Section 190.173) Complaints, investigatory reports, and any information pertaining to any applicant or certificate, license, or permit holder shall be disclosed only upon written consent of the person whose records are involved.

LICENSED HOSPITALS AND NURSING HOMES POLICIES AND PROCEDURES (Section 190.240) Additionally, this bill establishes that hospitals licensed under Chapter 198 must have policies and procedures regarding transportation of patients. Hospitals and nursing homes shall establish policies and procedures that require the hospital or facility to give advance notification to emergency medical services personnel prior to the transportation of any at-risk behavioral health patient. Physicians treating an at-risk behavioral patient in an emergency situation who reasonably believe the patient may cause imminent serious harm to himself, herself, or others unless the patient is immediately transported to another appropriate facility to place the patient on a temporary involuntary hold for a period of time necessary to effectuate the patient's transport. During the transport, the EMS personnel may rely on the physician's hold order as a basis for implied consent to treat and transport the patient and the personnel must not be liable for any claims of negligence, false imprisonment, or invasion of privacy based on the temporary hold, treatment, or transport of the patient. The bill specifies that these provisions must not be construed to limit the patient's rights under the federal Mental Health Patient's Bill of Rights.

STROKE CENTER DESIGNATION (Section 190.241) This bill changes the laws regarding stroke center designation for hospitals by adding an alternative process for hospitals to obtain a stroke center
designation. If a hospital applies for stroke center designation using the alternative process, the Department of Health and Senior Services must designate the hospital using specified guidelines. The department is permitted to remove a hospital's designation as a stroke center if the hospital requests removal of the designation or the department determines that the certificate recognizing the hospital as a stroke center has been suspended or revoked. The bill requires the department to report to the certifying organization any complaint it receives related to the certification of a stroke center designated under these provisions and must also advise the complainant of which organization certified the stroke center and provide the necessary contact information should the complainant wish to pursue a complaint with the certifying organization. The bill specifies additional requirements for any hospital receiving designation as a stroke center under these provisions.

FIRST INFORMER BROADCASTERS’ ACT (Section 190.260) This bill requires the Department of Public Safety, in cooperation with any statewide organization representing broadcasters, to establish a program for training and certifying broadcast engineers and technical personnel as first informer broadcasters. The training will concern restoration, repair, and resupply of any broadcaster facilities and equipment in an area affected by emergency or disaster and first informer broadcasters’ personal safety.

MEDICAL HELIPAD FENCES (Section 190.265) Under this bill, any rules and regulations promulgated by the Department of Health and Senior Services, or any interpretation of such rules, shall not require hospitals to have a fence or other barriers around a hospital helipad. Additionally, the department shall not promulgate any rules and regulations with respect to the operation or construction of a helipad located at a hospital. Finally, hospitals shall ensure that helipads are free of obstruction and safe for use by a helicopter while on the ground, during approach, and takeoff.

MANDATED ELDER ABUSE REPORTING (Sections 192.2400 and 192.2475) Currently, certain types of people must report to the Department of Health and Senior Services if the person has reasonable cause to suspect that a person 60 years of age or older or an eligible adult has been subject to abuse, bullying, or neglect. This bill adds first responders to the list of mandated reporters. A provision regarding an investigation of abuse by an in-home services client manager and local area agency on aging training is repealed.

MEDICAL SERVICES REIMBURSEMENT (Sections 208.1030 and 208.1032) The bill permits an eligible provider to receive MO HealthNet supplemental reimbursement to the extent provided by law in addition to the rate of payment that the provider would otherwise receive for Medicaid ground emergency medical transportation services. A provider must be eligible for Medicaid supplemental reimbursement if the provider meets specified characteristics during the state reporting period and an eligible provider’s Medicaid supplemental reimbursement must be calculated and paid as specified in the bill. An eligible provider, as a condition of receiving supplemental reimbursement, must enter into and maintain an agreement with the designee of the Department of Social Services for the purposes of implementing the provisions of the bill and reimbursing the department for the costs of administering these provisions. The non-federal share of the supplemental reimbursement submitted to the Centers for Medicare and Medicaid Services for purposes of claiming federal financial participation must be paid and certified as specified in the bill. The bill delineates the process for when an applicable governmental entity elects to seek supplemental reimbursement on behalf of an eligible provider owned or operated by, or contracted with the entity. The bill authorizes the department to seek any necessary federal approvals for the implementation of the provisions of the bill and permits the department to limit the program to those costs that are allowable expenditures under Title XIX of the Social Security Act.
The bill authorizes the department to design and implement in consultation and coordination with eligible providers an intergovernmental transfer program relating to ground emergency medical transport services, including specified services, in order to increase capitation payments for the purpose of increasing reimbursement to eligible providers. A provider is eligible for increased reimbursement under this section only if the provider meets certain conditions in an applicable state fiscal year. To the extent intergovernmental transfers are voluntarily made by and accepted from an eligible provider or a governmental entity affiliated with an eligible provider, the department must make increased capitation payments as specified in the bill to applicable MO HealthNet managed care plans and coordinated care organizations for covered ground emergency medical transportation services.

The intergovernmental transfer program must be implemented on the date federal approval is obtained, and only to the extent intergovernmental transfers from the eligible provider, or the governmental entity with which it is affiliated, are provided for this purpose. The department must implement the intergovernmental transfer program and increased capitation payments on a retroactive basis as permitted by federal law. Participation in the intergovernmental transfers is voluntary on the part of the transferring entities for purposes of all applicable federal laws.

The bill specifies conditions of participation for MO HealthNet managed care plans, coordinated care organizations, eligible providers, and governmental entities affiliated with eligible providers. The provisions of the bill must be implemented only if and to the extent federal financial participation is available and is not otherwise jeopardized, and any necessary federal approvals have been obtained. To the extent that the director of the department determines that the payments made under the provisions of the bill do not comply with federal Medicaid requirements, the director retains the discretion to return or not accept an intergovernmental transfer, and may adjust payments as necessary to comply with federal Medicaid requirements.

VOLUNTEER FIRE PROTECTION ASSOCIATION GRANTS (Section 287.245) This bill permits volunteer fire protection associations to apply to the State Fire Marshal grants for the purpose of funding the Workers’ Compensation Insurance premiums for the association’s volunteer firefighters. Grants shall be disbursed by the marshal, subject to appropriations, based upon the number of volunteer firefighters which received workers’ compensation benefits from claims arising out of and in the course of the prevention or control of fire or the underwater recovery of drowning victims in the preceding calendar year.

MOVE OVER LAW (Sections 304.022 and 307.175) This bill adds stationary public utility vehicles displaying lighted amber or amber and white lights and any other stationary vehicle located on the side of the roadway to the list of vehicles for which drivers of every motor vehicle must move over or slow down. This bill further adds vehicles and equipment owned by contractors that are performing work for the Department of Transportation that are stationary in a work zone when highway workers are present to the list of vehicles that are permitted to use amber or amber and white lights.

FIRE PROTECTION DISTRICT DIRECTORS (Sections 321.130 and 321.210) This bill provides that a person who is qualified to serve as director of a fire protection district must be over the age of 24 and must be a resident and voter in the district for at least one year before election or appointment. Fees for filing nominations and declarations of candidacy shall be equal to the amount paid by a candidate for county office.
MOBILE VIDEO RECORDINGS (Section 610.100) This bill requires a mobile video recording that is recorded in a nonpublic location to be closed, except that any person who is depicted in the recording or whose voice is in the recording, or his or her agent as specified in the bill, may obtain a complete, unaltered, and unedited copy of the recording upon written request.

Mobile video recordings are considered closed records until any related investigation becomes inactive, except that a legal guardian or parent of a minor child depicted in a mobile video recording or whose voice is in the recording may obtain records for purposes of investigating any civil claim or defense, and such person may obtain a complete, unaltered and unedited incident report related to the mobile video recording.

Any person may bring action in the circuit court that has jurisdiction to authorize disclosure of a mobile video recording, and the court may order that all or part of a mobile video recording be released to the person bringing the action. The bill specifies various factors the court is to consider when determining whether a mobile video recording shall be disclosed.

Any person who requests and receives a mobile video recording that was recorded in a nonpublic location is prohibited from displaying or disclosing the recording, including any description or account of any or all of the recording, without first giving direct notice to any person not affiliated with a law enforcement agency whose image or sound is contained in the recording. Upon receiving notice, each person who appears in the recording has 10 days to file and serve an action seeking an order from a court with jurisdiction to prohibit all or some of the intended display, disclosure, description, or account of the recording. Any person who fails to comply will be subject to damages in a civil actions proceeding.

CRIME SCENE EVIDENCE (Section 610.205) This bill specifies that crime scene photographs and video recordings, including photographs and video recordings created or produced by a state or local agency or by a perpetrator or suspect at a crime scene, which depict or describe a deceased person in a state of dismemberment, decapitation, or similar mutilation including where the deceased person's genitalia are exposed, are considered closed records and not be subject to disclosure under open records laws. Such material may be disclosed to the decedent's next-of-kin or to an individual who has secured a written release from the next-of-kin. It is the responsibility of the next-of-kin to show proof of the familial relationship.

The bill authorizes a circuit court judge to order the disclosure of such photographs or video records in closed criminal investigations upon findings in writing that disclosure is in the public interest and outweighs any privacy interest that may be asserted by the deceased person's next-of-kin. In making such determination, the court must consider whether disclosure is necessary for public evaluation of governmental performance, the seriousness of the intrusion into the family's right to privacy, and whether disclosure is the least intrusive means available considering the availability of similar information in other public records. In any such action, the court is required to review the photographs or video recordings in question in camera with the custodian of the crime scene materials present and may condition any disclosure on any conditions the court deems necessary to accommodate the interests of the parties. Prior to releasing any crime scene material, the custodian of the material must give the deceased person's next-of-kin at least two weeks' notice and the court is prohibited from ordering a
disclosure which would disregard or shorten the duration of this notice requirement. These provisions
apply to all undisclosed material which is in the custody of a state or local agency on the effective date of
this section and to any such material which comes into the custody of a state or local agency after such
date.

These provisions do not apply to disclosure of crime scene material to counsel representing a convicted
defendant in a habeas corpus action, on a motion for new trial, or in a federal habeas corpus action
under 28 U.S.C. Section 2254 or 2255 for the purpose of preparing to file or litigating such proceedings.
Counsel may disclose these materials to his or her client and any expert or investigator assisting counsel
but is prohibited from otherwise disseminating these materials, except to the extent they may be
necessary exhibits in court proceedings.

A request for disclosure must clearly state that the request is being made for the purpose of preparing to
file and litigate proceedings enumerated in these provisions.

SB 794 - Creates a sales tax exemption for parts of certain types of medical equipment
Primary Sponsor: Senator Wayne Wallingford (R)

TAFP SUMMARY: SCS SB 794 -- TAXATION
This bill authorizes a state and local sales and use tax exemption for all sales, rentals, parts, and repairs
of durable medical equipment and prosthetic devices, parts for certain types of health care related
equipment and class III medical devices that use electric fields for treatment.

SB 823 - Modifies provisions relating to sales tax
Primary Sponsor: Senator Will Kraus (R)

TAFP SUMMARY: CCS HCS SCS SB 823 -- TAXATION

TAXATION OF BED AND BREAKFAST INNS (Section 137.016, RSMo) This bill changes the classification of a
bed and breakfast inn in which the owner resides and has six or less rooms for rent from commercial
property to residential property for real property taxation purposes.

PRODUCTION EXEMPTIONS (Section 144.026) This bill prohibits the Director of the Department of
Revenue from sending notice to any taxpayer regarding the decision in IBM Corp. v. Director of Revenue,
Case No. 94999 (Mo. banc 2016) prior to August 28, 2017 relating to sales tax.

SALES TAX ON INTERNET ACCESS (Section 144.030) This bill authorizes a state and local sales and use tax
exemption for Internet access or the use of interest access regardless of whether the tax is imposed on a
provider or buyer of interest access.

SALES TAX BONDING REQUIREMENTS (Section 144.087) This bill changes the amount of bonding required
for a retail sales tax license with the Department of Revenue from three times to two times the license'
average monthly tax liability, and changes the bond term from two years to one year.

SB 847 - Modifies provisions relating to the collateral source rule and provides that parties may
introduce evidence of the actual cost, rather than the value, of the medical care rendered
Primary Sponsor: Senator Ed Emery (R)
TAFP SUMMARY: SS#2 SB 847 -- COLLATERAL SOURCE RULE
This bill specifies that special damages claimed by the plaintiff at trial that have been satisfied by a payment from a defendant, the defendant’s insurer, or authorized representative prior to trial are not recoverable. The defendant is entitled to deduct such payments towards special damages from any judgment as provided in current law. Parties may introduce evidence of the actual cost, rather than the value, of the medical care or treatment to the plaintiff. The bill repeals a provision of law which provides that there is a rebuttable presumption that the value of the medical treatment provided is represented by the dollar amount necessary to satisfy the financial obligation to the health care provider. The actual cost of the medical care or treatment cannot exceed the dollar amounts paid by or on behalf of a patient whose care is at issue plus any remaining amount necessary to satisfy the financial obligation for medical care by a health care provider after adjustment for any contractual discounts, or price reduction.

SB 861 - Modifies provisions relating to transportation facilities  
Primary Sponsor: Senator Paul Wieland (R)

TAFP SUMMARY: CCS HCS SCS SB 861 -- TRANSPORTATION FACILITIES

ADVANCED INDUSTRIAL MANUFACTURING ZONES (Section 68.075, RSMo)This bill creates the Advanced Industrial Manufacturing Zones Act. Port authorities located in Missouri are authorized to establish an advanced industrial manufacturing (AIM) zone, which is an area that is being developed or redeveloped for any purpose so long as any infrastructure and building built or improved is in the development area. A zone may include any portion of the area located in the authority's jurisdiction, and its boundaries must be determined by the authority. More than one zone may exist within the authority’s jurisdiction. The bill creates the Port Authority AIM Zone Fund consisting of 50% of the state withholding tax from new jobs within the zone after development or redevelopment has begun. The money in the fund must be used for expenses to continue expanding, developing, and redeveloping zones identified by the port authority board of commissioners. No more than 10% of the total amount collected within the zones of a port authority may be appropriated by the legislature for the administration of a port authority. The authority must approve any projects, disperse money in the fund, and submit an annual budget for the collected funds to the Department of Economic Development explaining how and when the money will be spent. No new AIM zones may be established after August 28, 2035. Existing AIM zones shall expire when any obligations being funded by the AIM zone are retired.

BRING JOBS HOME ACT (Section 143.1100)This bill establishes the Bring Jobs Home Act and authorizes an income tax deduction equal to 50% of the eligible insourcing expenses associated with eliminating a business located outside of the state and reestablishing it in Missouri. The elimination may occur in a year other than the year the relocation occurs, and the expenses must be under a written insourcing plan. To be eligible for the tax deduction, the number of full-time employees in Missouri for the year the deduction is claimed must exceed the number of full-time employees for the year preceding the year in which the eligible insourcing expenses were paid or incurred. Eligible insourcing expenses must be taken into account during the taxable year that the plan has been completed and all eligible insourcing expenses have been paid or incurred or, if the taxpayer chooses, the first taxable year after the taxable year the expenses have been paid or incurred. A deduction will not be allowed for any expenses incurred when dissolving a business in Missouri and relocating it to another state. The maximum annual amount of tax deductions is $5 million and will be allowed on a first come first served filing basis. Any deduction that cannot be claimed in the taxable year can be carried forward up to five years. If a taxpayer is
allowed a deduction under this program and within 10 years of receiving the deduction eliminates the
business unit for which the deduction was allowed, the taxpayer must repay the state an amount equal
to the amount of the deduction. The provisions of the bill will expire six years after the effective date.

TRANSPORTATION FACILITIES TAX INCENTIVE (Sections 143.2100- 143.2115) This bill creates three types
of income tax deductions for entities transporting cargo through water port facilities and airports in
Missouri. The deductions will be administered by the Department of Economic Development. Beginning
January 1, 2017, but before January 1, 2023, manufacturers or distributors shipping cargo by waterborne
vessel through a water port facility or by airplane through an airport located in Missouri may be eligible
for a deduction. The taxpayer must increase by 5% the volume of cargo they transport through a port
facility over the prior year’s total. The 5% increase requirement will be waived if the cargo is transported
through a new port facility that is expected to transport at least 25,000 twenty-foot equivalent units
(TEUs) in its first calendar year. Taxpayers must have transported at least 75 net tons of
noncontainerized cargo or ten loaded TEUs in the prior year to be eligible for the deduction. The
deduction will be $50 per TEU over the prior year’s cargo volume. For cargo transported through a new
port facility in its first year, the deduction will be $50 per TEU. Taxpayers are limited to $250,000 in
deductions per year. No more than $3.5 million deductions shall be allowed in a calendar year. The
$250,000 taxpayer limit may be exceeded if the $3.5 million calendar year cap is not met by March 15th
in a given year. No deductions may be claimed for tax years beginning after December 31, 2022.
Beginning January 1, 2017, taxpayers operating an international trade facility may qualify for a
deduction based on the amount of cargo transported by airplane, rail, truck, or barge. The deduction will
be equal to $25 per TEU or 16 tons of noncontainerized cargo. No more than $2 million in deductions
may be claimed in a fiscal year. No deductions may be claimed for tax years beginning after December 31, 2022.
Beginning January 1, 2017, taxpayers operating an international trade facility and increasing
the volume of cargo by 10% over the prior year may qualify for a deduction. The deduction shall be in an
amount equal to $3,500 per new full-time employee or 2% of the capital investment made in the facility.
The new employees or capital investments must be related to an increase in trade activities through
international shipping to qualify for the deduction. No more than $500,000 in deductions may be claimed
in any fiscal year. No deductions shall be claimed for tax years beginning after December 31, 2022. The
tax deduction amount cannot exceed 50% of a taxpayer’s Missouri adjusted gross income in a tax year.
The deduction may be recaptured if the number of full-time employees falls below the average number
of full-time employees during the tax year.

PUBLIC-PRIVATE PARTNERSHIP TRANSPORTATION ACT (Section 227.600) This bill adds any port facility,
water facility, waterway, fuel supply facility or pipeline, water supply facility or pipeline, public work,
wastewater or wastewater treatment facility, public building, vehicle parking building, vehicle parking
facility, mass transit facility, or similar facility to the definition of “project” under the Missouri Public-
Private Partnerships Transportation Act.

REDEVELOPMENT PROJECTS TAX CREDITS (Section 447.708) This bill authorizes all demolition costs
associated with the redevelopment of a former automobile manufacturing plant in St. Louis County that
consists of at least 100 acres and was used primarily for the manufacture of automobiles until 2007 to be
eligible for the Brownfield Redevelopment Program tax credit, provided that the Department of
Economic Development determines that the redevelopment project will create at least 250 new jobs or at
least 300 retained jobs, or a combination thereof. The amount of allowable costs eligible for tax credits
shall be limited to the least amount necessary to cause the project to occur.
SB 865 - Modifies various provisions regarding palliative care, the Board of Pharmacy, pharmacists, health insurance, and pharmacy benefit managers
Primary Sponsor: Senator David Sater (R)

TAFP SUMMARY: CCS HCS SS SCS SBs 865 & 866 -- HEALTH CARE

This bill modifies various provisions regarding palliative care, the Board of Pharmacy, pharmacists, health insurance, and pharmacy benefit managers.

PALLIATIVE CARE (Sections 191.1075, 191.1080, and 191.1085, RSMo) This bill establishes the Missouri Palliative Care and Quality of Life Interdisciplinary Council within the Department of Health and Senior Services to be a palliative care consumer and professional information and education program to improve quality and delivery of patient-centered and family-focused care in Missouri. Members shall be appointed to the council on or before December 1, 2016.

The members include two members of the Senate appointed by the President Pro Tem, two members of the House of Representatives appointed by the Speaker of the House, and other specified members. The council members must serve a three-year term without compensation, but, subject to appropriations, must be reimbursed for their actual and necessary expenses incurred as a member of the council. The council must consult with and advise the department on matters related to the establishment, maintenance, operation, and outcomes evaluation of palliative care initiatives in Missouri and submit an annual report to the General Assembly that includes an assessment of the availability of palliative care in Missouri as specified.

The bill establishes the Palliative Care Consumer and Professional Information and Education Program within the department, with the purpose of maximizing the effectiveness of palliative care in Missouri by ensuring that comprehensive and accurate information and education about palliative care is available to the public, health care providers, and health care facilities. The department must publish on its website information and resources, including links to external resources, about palliative care, including specified information.

The bill encourages each hospital in Missouri to have a palliative care presence on its Intranet or Internet website and palliative care patient education information available for distribution to patients. The department must consult with the council in implementing the provisions of the bill. These provisions of this bill expire August 28, 2022.

BOARD OF PHARMACY (Section 338.075) This bill requires all licensees, registrants, and permit holders regulated by the Board of Pharmacy to report to the board any final adverse action taken by another licensing jurisdiction against such person or entity’s license, permit, or authorization to practice or operate as a pharmacist, intern pharmacist, pharmacy technician, pharmacy, drug distributor, drug manufacturer, or drug outsourcing facility. Additionally, all licensees, registrants, and permit holders shall report any surrender of a license or authorization to practice while under disciplinary investigation by another jurisdiction, and any exclusion to participate in any government funded health care program for fraud, abuse, or submission of any false claim, payment, or reimbursement request. This bill provides that the Board of Pharmacy shall not renew a nonresident pharmacy license if the applicant does not hold a current pharmacy license in the state in which the nonresident pharmacy is located. The board shall not renew an out-of-state wholesale drug distributor, out-of-state pharmacy distributor, or drug
distributor license if the applicant does not hold a current license in the state in which the distribution facility is located. If the applicant is a drug distributor registrant then the entity must be authorized and in good standing with the Food and Drug Administration or within the state where the facility is located in order for the board to renew the registration.

MAINTENANCE MEDICATION (Section 338.202) This bill requires a health carrier or managed care plan that provides prescription drug coverage in the state to offer medication synchronization services. A health carrier or managed care plan that provides prescription drug coverage shall not charge any amount in excess of the otherwise applicable co-payment for dispensing a prescription drug in a quantity that is less than the prescribed amount and shall provide a full dispensing fee to the pharmacy that dispenses the prescription drug so long as the terms of the medication synchronization services are met.

NONRESIDENT PHARMACY LICENSE RENEWAL (Sections 338.270 and 338.347) This bill provides that the Board of Pharmacy shall not renew a nonresident pharmacy license if the applicant does not hold a current pharmacy license in the state in which the nonresident pharmacy is located. Additionally, the Board shall not renew an out-of-state wholesale drug distributor, out-of-state pharmacy distributor, or drug distributor license if the applicant does not hold a current license in the state in which the distribution facility is located. If the applicant is a drug distributor registrant then the entity must be authorized and in good standing with the Food and Drug Administration or within the state where the facility is located in order for the Board to renew the registration.

UNIFORMITY IN INSURANCE AND FINANCIAL SERVICES REGULATION (Section 338.185) This bill adds the U.S. Department of Health and Human Services to the list of entities the Director of the Department of Insurance, Financial Institutions, and Professional Registration may cooperate to regulate insurance and financial services.

PRESCRIPTION DRUG COVERAGE (Section 376.379) The bill requires health carriers or managed care plans offering health benefit plans with prescription drug coverage to offer medication synchronization services that aligns prescription refill dates. Charging more than the normal co-payment is prohibited for quantities less than prescribed.

PHARMACY BENEFIT MANAGERS (Section 376.388) This bill requires each contract between a pharmacy benefit manager (PBM) and a pharmacy or pharmacy's contracting representative to include sources utilized to determine maximum allowable cost and update such pricing information at least every seven days. A PBM must maintain a procedure to eliminate products from the maximum allowable cost (MAC) list of drugs or modify maximum allowable cost pricing within seven days if the drugs do not meet the standards as provided in the bill. A PBM must reimburse pharmacies for drugs subject to maximum allowable cost pricing based upon pricing information which has been updated within seven days. A drug must not be placed on a MAC list unless there are at least two therapeutically equivalent multi-source generic drugs, or at least one generic drug available from only one manufacturer and is generally available for purchase from national or regional wholesalers. All contracts must include a process to internally appeal, investigate, and resolve disputes regarding MAC pricing as provided in the bill. Appeals must be upheld if the pharmacy being reimbursed for the drug on the MAC list was not reimbursed according to the provisions of the bill or the drug does not meet the requirements for being placed on the MAC list.
MISSOURI HEALTH INSURANCE RATE TRANSPARENCY ACT (Section 376.465) The bill creates the "Missouri Health Insurance Rate Transparency Act" to apply to health benefit plans, excluding large group market, long-term care, and Medicare supplemental plans, delivered, issued for delivery, continued, or renewed on or after January 1, 2018. No health carrier shall deliver, issue for delivery, continue, or renew a health benefit plan until the rates for that plan have been filed with the Director of the Department of Insurance, Financial Institutions, and Professional Registration as specified in the bill. Rates shall be filed for excepted health benefits plans, as defined in the bill, and grandfathered health benefit plans 30 days prior to use for informational purposes only. For all other plans, a health carrier may use rates on the date the director determines such rates are reasonable, the date the health carrier notifies the director of its intent to use rates the director has determined are unreasonable, or 60 days after filing rates with the director. The director shall determine by rule when rates filed by health carriers shall be made publicly available and shall provide a means by which the public can submit written comments concerning proposed rate increases. The director shall review the proposed rate and accompanying documentation and determine whether the rate is reasonable or unreasonable. Within 60 days of rate filing, the director shall provide the health carrier with written notice detailing whether the proposed rate is reasonable or unreasonable. If the director deems the rate is unreasonable, the written notice shall specify the deficiencies and detailed reasons why the rate is excessive, inadequate, unfairly discriminatory, or unjustified. Within 30 days of receiving written notice that the proposed rate is unreasonable, the health carrier may amend its rate, request reconsideration, or implement the proposed rate. The health carrier shall notify the director of its intention within 30 days of receipt of the written notice. If a health carrier implements a rate determined to be unreasonable, the department shall make such determination public. The director shall publish final rates on the department’s website no earlier than 30 days prior to the first day of the annual open enrollment period in the individual market for the applicable calendar year.

PRESCRIPTION EYE DROP REFILLS (Section 376.1237) The bill extends the termination date on provisions relating to the refilling of prescription eye drops to January 1, 2020.

SMALL EMPLOYER HEALTH BENEFIT PLANS (Sections 379.934, 379.936, 379.938, and 379.940) The bill limits current law relating to small employer health benefit plans to only plans purchased on or before March 23, 2010.

SB 867 - Contains provisions relating to fire protection, sheltered workshops, assessments of mining property, consolidation of road districts, and property managers
Primary Sponsor: Senator David Sater (R)

TAFP SUMMARY: CCS HCS SB 867 -- POLITICAL SUBDIVISIONS
This bill changes laws regarding political subdivisions.

ST. LOUIS COUNTY POOLED SALES TAX (Section 66.620, RSMo) Currently, cities in St. Louis County are divided into two groups, Group A and Group B, for the purpose of distributing the county sales tax imposed under Sections 66.600 to 66.630 and the special municipal sales tax imposed by cities in St. Louis County under Section 94.850. Beginning January 1, 2017, this bill changes the distribution formula so that municipalities in Group B must receive at least 50% of the amount of taxes generated within the municipalities based on the location where the sales were deemed consummated. Group A excludes St. Louis County while Group B includes St. Louis County. The Director of the Department of Revenue will make adjustments for each municipality in Group B located wholly or partly within the taxing county that
would receive a distribution that is less than 50% of the amount of taxes generated within the municipality based on the location in which the sales were deemed consummated if no adjustment were made and calculate the difference between the amount that the distribution to each municipality would have been without any adjustment and the amount that equals 50% of the amount of taxes generated within the municipality based on the location in which the sales were deemed consummated. If the county and Group B cities receive more than 50% of the sales tax revenue they generate such that some of the revenue would be given to Group B cities that receive less than 50% of their generated sales tax revenue, in no event will the contributing city or county receive less than the amount they received in 2014. When a municipality is partly in Group A and partly in Group B, the director must calculate 50% of the amount of taxes generated within the municipality based on the location in which the sales were deemed consummated by multiplying 50% by the amount of all county sales taxes collected by the director under Sections 66.600 to 66.630, less 1% for the cost of collection, that are generated within the municipality based on the location in which the sales were deemed consummated, regardless of whether the taxes are deemed consummated in Group A or Group B. St. Louis County is authorized to impose in the unincorporated parts of the county, upon voter approval, a sales tax of up to 0.5% for the purpose of providing law enforcement services. If the voters do not approve the sales tax, the proposal to impose the sales tax must not be resubmitted sooner than 36 months from the date of the last proposal. If the voters fail to approve the sales tax a second time, the county cannot resubmit the issue a third time.

NUISANCE ABATEMENT ORDINANCES (Section 67.402) This bill allows St. Francois County and Taney County, to enact nuisance abatement ordinances.

COUNTY SHELTERED WORKSHOPS AND TAX INCENTIVE PROGRAMS (Section 99.845) The bill prohibits the adoption of any tax increment financing project or plan from superseding, altering, or reducing a sheltered workshop property tax levy.

LICENSE OFFICE FEES (Section 136.055) Authorizes Department of Motor Vehicles fee offices to collect fees for fax transmissions, electronic look-ups, and notary fees. TAXATION OF BED AND BREAKFAST INNS (Section 137.016) Changes classification of certain bed and breakfast inns from commercial to residential for property tax purposes.

PROPERTY TAXATION OF RAILS-TO-TRAILS (Section 137.100) Currently, as an alternative to abandoning a railroad easement, an out-of-service rail corridor may be used as a trail until the railroad needs the corridor for rail service. Under this bill, any portion of a landowner's parcel of land on which a trail is operated in this manner is exempt from property taxation.

COUNTY ASSESSMENT OF PROPERTY TAX ON MINES (Section 137.115) The bill specifies that any real property that is available for mining but has not been bonded or permitted for such mining activity shall be assessed according to how the real property is currently being used. Any information provided to a county assessor or other public entity which administers tax policies that is by law declared to be confidential, including individual taxpayer information and a specific taxpayer's mine property, shall not be disclosed.

ROAD DISTRICTS (Sections 137.565, 233.180, and 233.295) This bill changes the qualification to serve as a commissioner on a special road district from a voter in the district to any registered voter in the county in which the district is located who is also a land owner in the district. The bill also authorizes a county commission to combine two or more road districts within the county upon petition request by a majority
of the commissioners in each of the road districts seeking to be combined. The county commission must hold a public hearing after publishing notice for a period of four weeks in a newspaper of general circulation in the county. The county may issue an order to consolidate the districts if it finds, after the public hearing, that the consolidation is in the public good. The bill also designates the procedure for appointing commissioners to the new consolidated district and transferring of assets, liabilities, and tax levies. The provisions for consolidation do not apply to road districts located in two counties.

TAX DEDUCTIONS FOR VOLUNTEER FIREFIGHTERS (Section 143.112) Under this bill, beginning on January 1, 2017, a taxpayer may deduct $500 from the taxpayer's federal adjusted gross income to determine the taxpayer's Missouri adjusted gross income for any year in which the taxpayer completed 12 hours of an approved firefighter training program. Alternatively, if a firefighter completes at least 36 hours of training by completing the basic firefighter program or completing the division's firefighter I or firefighter II program, the firefighter may claim a $1,000 deduction. CEDAR COUNTY LIBRARY TAX (Section 182.802) This bill authorizes Cedar County to impose a local sales tax, if approved by voters, for the purpose of funding public libraries.

MUSEUM DISTRICT PETITION (Section 184.815) A petition to create a museum district may be filed no more than five years after the President declares the area a disaster area as defined in statute. This bill would allow a petition to be filed up to 10 years after such declaration.

STODDARD COUNTY EMERGENCY TELEPHONE SERVICE BOARD (Section 190.335) Currently, in any county in which voters have approved a county sales tax to fund the central dispatch of emergency services, the governing body must appoint an initial board of directors to administer the funds and oversee the provision of emergency services in the county. At the next general election, a new board is elected and the initial board is dissolved. This bill provides that, in Stoddard County, the initial appointed board shall continue to exist.

REGIONAL JAIL DISTRICTS (Section 221.407) Regional jail districts are currently authorized to impose a sales tax of up to 1/2% on sales in the district. The authority to impose this tax expired on September 30, 2015. This bill extends the authority of the districts to collect the tax until September 30, 2028. This bill also allows the Director of the Department of Revenue to make refunds instead of allowing the Director of the Department of Revenue to authorize the State Treasurer to make refunds.

JUDGE VINCENT E. BAKER MEMORIAL HIGHWAY (Section 227.432) This bill designates a portion of I-470 in Jackson County as the "Judge Vincent E. Baker Memorial Highway."

PHYLLIS D. SHELLEY MEMORIAL HIGHWAY (Section 227.446) This bill designates a portion of U.S. Highway 50 within Moniteau County as the "Phyllis D. Shelley Memorial Highway."

KANSAS CITY COMMERCIAL ZONE EXTENSION (Section 304.190) The bill extends a Kansas City commercial zone relating to height and weight restrictions on roadways eastward to include the cities of Lone Jack and Strasburg.

ALCOHOL AT ST. LOUIS LAMBERT INTERNATIONAL AIRPORT (Section 311.179) Currently, the sale of intoxicating liquor by the drink is allowed at retail and the St. Louis International Airport by licensed establishments. Under this bill, people may leave the licensed establishments with an alcoholic beverage and enter other airport designated areas, but the person may not take the beverage on an airplane. In
addition, this bill requires the licensed establishment to serve alcoholic beverages in containers that display the licensee's trade name or logo.

LIMITED LIABILITY COMPANIES IN KANSAS CITY (Section 347.048) Currently, limited liability companies in Kansas City that own or rent real property or own unoccupied property within the city are required to file an affidavit with the city clerk specifying the name and address of a person with management control or responsibility for the real property. This bill clarifies that it must be a street address and must be a natural person. The limited liability company must file a successor affidavit within 30 days of a change in the natural person with management control or responsibility for the real property. The city cannot charge a fee for the filing of the affidavit or successor affidavit. If a limited liability company fails or refuses to file the affidavit, any person adversely affected by the failure or refusal, or the city, may petition the circuit court in the county where the property is located to direct the completion and filing of the affidavit.

SB 875 - Allows a pharmacist to select an interchangeable biological product when filling a biological product prescription
Primary Sponsor: Senator Kurt Schaefer (R)

TAFP SUMMARY: SB 875 -- INTERCHANGEABLE BIOLOGICAL PRODUCTS

This bill allows a pharmacist filling a prescription order for a brand name biological product to select a less expensive interchangeable biological product if the substitute has been approved by the FDA to be an interchangeable biological product, the prescriber has communicated that an interchangeable biological product may be substituted, and the pharmacist informs the patient.

Within five days of dispensing a biological product, the pharmacist must communicate the name and manufacturer of the product to the prescriber, unless there is no FDA approved interchangeable biological product or a refill prescription is not changed from the product dispensed on the prior filling. The Board of Pharmacy must maintain a link on its website to a current list of all biological products determined by the FDA to be interchangeable with a specific biological product

SB 919 - Modifies provisions relating to intoxicating liquor
Primary Sponsor: Senator Eric Schmitt (R)

TAFP SUMMARY: SS SCS SB 919 -- INTOXICATING LIQUOR MALT LIQUOR (Sections 311.090 and 311.200, RSMo)

Current law allows for the issuance of a license to sell malt liquor that has an alcohol level of no more than 5% by weight in cities of less than 19,000 in which voters have not authorized the sale of intoxicating liquor. This bill removes the 5% alcohol limit on the malt liquor and adds a reference to a statutory definition of malt liquor.

MICROBREWHERIES (Section 311.195) Currently, microbreweries may receive a license to sell intoxicating liquor by the drink at retail for consumption on the premises. This bill specifies that the license allows the microbrewery to sell all kinds of intoxicating liquor as defined by statute and the consumption may occur on the premises of the microbrewery or in close proximity to it. In addition, this bill repeals a provision of current law specifying that certain statutes regarding the authority of cities and counties to collect liquor license fees and other liquor regulations apply to microbreweries.
COOLERS (Sections 311.198 and B) Beginning January 1, 2017, this bill allows a brewer to lease portable refrigeration units to retail licensees at a value equal to the cost of the unit to the brewer. A brewer may also enter into lease agreements with wholesalers, who may enter into sublease agreements with retail licensees at a value equal to the cost of the unit to the brewer. The brewer or wholesaler may also recover 2% of the total lease value at the execution of the lease. A wholesaler may not directly or indirectly fund the cost or maintenance of the portable refrigeration units. A brewer may only lease one portable refrigeration unit per retail location. No portable refrigeration unit may exceed certain height, width, and depth dimensions as set forth in this bill. The portable refrigeration unit may bear in a conspicuous manner substantial advertising matter about a product or products of the brewer, and no retail location may have more than one unit. A retail licensee may sell any product from such units, but dispensing equipment may not be attached to the unit and liquor may not be dispensed from the unit. Further, if a brewer or wholesaler provides such portable refrigeration units, they shall provide the Division of Alcohol and Tobacco Control certain information within 30 days as set forth in this bill. This section shall expire on January 1, 2020, except any lease executed prior to January 1, 2020 shall remain in effect until the expiration of such lease.

GROWLERS (Section 311.201) This bill allows any person who is licensed to sell intoxicating liquor in the original package at retail to sell 32 to 128 ounces of draft beer for consumption off the premises. This bill specifies that no law or rule of the Supervisor of Alcohol and Tobacco Control shall be interpreted to allow a liquor wholesaler, distributor, or manufacturer to provide dispensing or cooling equipment or growlers to anyone who has a retail license to sell liquor in the original package. This bill provides the manner in which growlers may be filled and refilled and requirements for certain information to be provided on the growler.

CONTROLLED LIQUOR SELF-DISPENSING SYSTEMS (Section 311.205) Currently, licensed liquor retailers may use table tap dispensing systems that allow patrons to self-dispense up to 32 ounces of beer per patron at their tables. This bill expands this statute to allow licensed liquor retailers to use self-dispensing systems that allow patrons to self-dispense up to 32 ounces of beer or 16 ounces of wine. The bill removes references to table taps and instead refers to self-dispensing systems.

LIQUOR LICENSES (Section 311.220) This bill provides that every licensee shall at all times prominently display his or her license at his or her licensed premises where any city or county license to sell intoxicating liquor has been approved. Within ten days from the issuance of said city or county license, the licensee shall also file a copy of the license with the supervisor of Alcohol and Tobacco Control.

PROOF OF AGE TO PURCHASE LIQUOR (Section 311.328) This bill adds nondriver's licenses to the list of types of identification that may be used as proof of age to purchase liquor.

SALES AND USE TAX STATEMENT (Section 311.665) This bill requires liquor licensees to file a copy of their sales and use tax statement with the supervisor of Alcohol and Tobacco Control within ten days from the Department of Revenue's issuance of the statement in order to maintain their liquor license.

FESTIVAL PERMIT FOR OUT-OF-STATE MANUFACTURERS (Section 311.915) An out-of-state beer and malt liquor manufacturer who is not licensed in Missouri may receive a special permit to participate in festivals, bazaars, and other events. The manufacturer does not need to follow label registration requirements for state-licensed manufacturers. The permit only allows up to 200 gallons of beer or malt
liquor to be shipped in the state. The licensed manufacturer holding the retail license for the event must pay the excise taxes on the liquor. The permit is valid for up to 72 hours and costs $25.

SB 988 - Modifies several provisions relating to health care providers
Primary Sponsor: Senator Will Kraus (R)

TAFP SUMMARY: SB 988 -- HEALTH CARE PROVIDERS MUNICIPAL HOSPITALS (Section 96.192, RSMo)

This bill allows the board of trustees of any authorized municipal hospital to invest up to 25% of the hospital's funds not required for immediate disbursement in any U.S. investment grade fixed income funds or diversified stock funds, or both. The provisions of the bill must only apply if the hospital: (1) Receives less than 1% of its annual revenue from municipal, county, or state taxes; and (2) Receives less than 1% of its annual revenue from appropriated funds from the municipality in which such hospital is located.

AMBULANCE DISTRICTS (Section 190.060) The bill allows ambulance districts to adopt procedures for conducting fingerprint background checks on current and prospective employees, contractors, and volunteers.

STROKE CENTER DESIGNATIONS (Section 190.241) The bill provides for an alternative stroke center designation for a hospital. The Department of Health and Senior Services must designate a hospital, upon receipt of an application, as follows: (1) A level I stroke center if the hospital has been certified as a comprehensive stroke center by the Joint Commission or another certifying organization; (2) A level II stroke center if the hospital has been certified as primary stroke center by the Joint Commission or other certifying organization; or (3) A level III stroke center if the hospital has been certified as an acute stroke-ready hospital by the Joint Commission or other certifying organization. The department must not require compliance with any additional standards for establishing or renewing stroke designations and the designation must continue as long as the hospital remains certified. The department may remove a hospital's designation if the hospital so requests or if the department determines the certification has been suspended or revoked. Any hospital receiving this alternative designation must submit annual proof of certification and other contact information, as well as the certification survey results and other specified documents. Hospitals designated as STEMI or stroke centers must submit data to the department for use in the evaluation and improvement of hospital and emergency medical services' trauma, stroke, and STEMI care. The hospitals must submit data to the department as described in the bill.

MEDICAL HELICOPTERS (Section 190.265) Under the bill, any rules and regulations promulgated by the Department of Health and Senior Services, or any interpretation of such rules, must not require hospitals to have a fence or other barriers around a hospital helipad. Additionally, the department is prohibited from promulgating any rules and regulations with respect to the operation or construction of a helipad located at a hospital. The bill requires hospitals to ensure that helipads are free of obstruction and safe for use by a helicopter while on the ground, during approach, and takeoff. This provision of the bill has an emergency clause.

CERTIFICATE OF NEED (Section 197.315) Currently, facilities operated by the state are not required to obtain a certificate of need, appropriation of funds to such facilities by the General Assembly are deemed in compliance with certificate of need provisions, and such facilities are deemed to have received an
appropriate certificate of need without payment of any fee or charge. The bill requires hospitals operated by the state and licensed under Chapter 197 to obtain a certificate of need and comply with the other provisions of certificate of need except for Department of Mental Health state-operated psychiatric hospitals. Certain types of equipment can still be purchased without a certificate of need. This provision of the bill has an emergency clause.

COUNTY HOSPITAL INVESTMENTS (Section 205.165) The bill allows the board of trustees of any county hospital to invest up to 15% of the hospital's funds not required for immediate disbursement in obligations or for the operations of the hospital into any mutual fund. These provisions must only apply if the hospital is located in Boone County and receives less than 1% of its annual revenues from county or state taxes.

SB 1025 - Exempts instructional classes from sales tax
Primary Sponsor: Senator Will Kraus (R)

TAFP SUMMARY: SB 1025 -- SALES TAX ON INSTRUCTIONAL CLASSES

Currently, there is a state and local sales and use tax on the sales of admission tickets, and fees to or in places of amusement, entertainment, recreation, games, and athletic events. This bill authorizes an exemption from the tax for the amount paid for instructional classes and defines instructional class to include any class, lesson, or instruction intended or used for teaching.

SCR 58 - Urges the National Geospatial-Intelligence Agency to build a new facility in St. Louis City
Primary Sponsor: Senator Joseph Keaveny (D)