by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order of rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*, an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted which has been changed from that contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than thirty (30) days after the date of publication of the revision to the *Code of State Regulations*.

he agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments which are opposed in whole or in part to the proposed rule. The ninety (90)-day period during which an agency shall file its order of rulemaking for publication in the Missouri Register begins either: 1) after the hearing on the proposed rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

Title 10—DEPARTMENT OF NATURAL RESOURCES Division 70—Soil and Water Districts Commission Chapter 5—State Funded Cost-Share Program

ORDER OF RULEMAKING

By the authority vested in the Missouri Soil and Water Districts Commission under section 278.080, RSMo Supp. 2007, the commission amends a rule as follows:

10 CSR 70-5.040 Cost-Share Rates and Reimbursement Procedures is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 15, 2008 (33 MoReg 1334). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Soil and Water Conservation Program received no comments during the public comment period.

Title 10—DEPARTMENT OF NATURAL RESOURCES Division 70—Soil and Water Districts Commission Chapter 8—State Funded Special Area Land Treatment (SALT) Program

ORDER OF RULEMAKING

By the authority vested in the Missouri Soil and Water Districts Commission under section 278.080, RSMo Supp. 2007, the commission amends a rule as follows:

10 CSR 70-8.040 SALT Cost-Share Rates and Reimbursement Procedures **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 15, 2008 (33 MoReg 1335). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Soil and Water Conservation Program received no comments during the public comment period.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 10—Nursing Home Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under section 208.159, RSMo 2000 and sections 208.153 and 208.201, RSMo Supp. 2007, the division amends a rule as follows:

13 CSR 70-10.015 Prospective Reimbursement Plan for Nursing Facility Services **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1425–1429). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 10—Nursing Home Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under section 208.159, RSMo 2000 and sections 208.153 and 208.201, RSMo Supp. 2007, the division adopts a rule as follows:

13 CSR 70-10.016 Global Per Diem Adjustments to Nursing Facility and HIV Nursing Facility Reimbursement Rates is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1429–1432). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 10—Nursing Home Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under section 208.159, RSMo 2000 and sections 208.153 and 208.201, RSMo Supp. 2007, the division amends a rule as follows:

13 CSR 70-10.030 Prospective Reimbursement Plan for Nonstate-Operated Facilities for ICF/MR Services is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1433–1441). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 10—Nursing Home Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under sections 208.153 and 208.201, RSMo Supp. 2007, the director amends a rule as follows:

13 CSR 70-10.080 Prospective Reimbursement Plan for HIV Nursing Facility Services is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1442–1444). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 15—Hospital Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under sections 208.152, 208.153, 208.201, and 208.471, RSMo Supp. 2007, the division amends a rule as follows:

13 CSR 70-15.010 Inpatient Hospital Services Reimbursement Plan; Outpatient Hospital Services Reimbursement Methodology is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1444–1453). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—MO HealthNet Division Chapter 15—Hospital Program

ORDER OF RULEMAKING

By the authority vested in the MO HealthNet Division under sections 208.453 and 208.455, RSMo 2000 and section 208.201, RSMo Supp. 2007, the division amends a rule as follows:

13 CSR 70-15.110 Federal Reimbursement Allowance (FRA) is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1453–1455). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 190.103, RSMo 2000, sections 190.108, 190.120, 190.160, 190.165, and 190.185, RSMo Supp. 2007, and section 190.176, HB 1790, 94th General Assembly, Second Regular Session, 2008, the department amends a rule as follows:

19 CSR 30-40.308 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1238–1242). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received two (2) comments on the proposed amendment.

COMMENT #1: The Missouri Association of Air Medical Services commented that the requirements in subsection (2)(E) should be limited to "the medical crew responding to scenes."

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add the requested language. The added language will change the requirement for air ambulance services that respond to scene flights, not those performing hospital-to-hospital transfers.

COMMENT #2: The Metropolitan Ambulance Services Trust commented in favor of the proposed amendments to 19 CSR 30-40.308 as published.

RESPONSE: No changes have been made to the rule as a result of this comment.

19 CSR 30-40.308 Application and Licensure Requirements Standards for the Licensure and Relicensure of Air Ambulance Services

(2) Air ambulance services shall meet the following operation and maintenance standards:

(E) The aviation crew of an air ambulance shall meet all requirements of the Federal Aviation Administration Title 14 CFR part 135, and the medical crew responding to scenes shall be able to demonstrate successful completion and maintenance of the following:

1. Education—

A. Basic Cardiac Life Support (BCLS) which is incorporated by reference in this rule as published by the American Heart Association in 2005 and is available at the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231. This rule does not incorporate any subsequent amendments or additions;

B. Advanced Cardiac Life Support (ACLS) or national equivalent. ACLS is incorporated by reference in this rule as published by the American Heart Association in 2005 and is available at the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231. This rule does not incorporate any subsequent amendments or additions;

C. Pediatric Advanced Life Support (PALS) or national equivalent. PALS is incorporated by reference in this rule as published by the American Heart Association in 2005 and is available at the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231. This rule does not incorporate any subsequent amendments or additions; and

D. Trauma Nurse Core Course (TNCC) or a trauma course approved by the medical director. TNCC is incorporated by reference in this rule as published by the Emergency Nurses Association in 2007 and is available at the Emergency Nurses Association, 915 Lee Street, Des Plaines, IL 60016-9659. This rule does not incorporate any subsequent amendments or additions. Examples of equivalent courses are, but not limited to: Pediatric Education for Pre-Hospital Professionals (PEPP); Emergency Nurse Pediatric Course (ENPC); International Trauma Life Support (ITLS); Pre-Hospital Trauma Life Support (PHTLS); and Transport Nurse Advanced Trauma Course (TNATC). PEPP is incorporated by reference in this rule as published by the American Academy of Pediatrics in 2006 and is available at the American Academy of Pediatrics, 141 Northwest Point Boulevard, Elk Grove, IL 60007. This rule does not incorporate any subsequent amendments or additions. ENPC is incorporated by reference in this rule as published by the Emergency Nurses Association in 2004 and is available at the Emergency Nurses Association, 915 Lee Street, Des Plaines, IL 60016-9659. This rule does not incorporate any subsequent amendments or additions. ITLS is incorporated by reference in this rule as published by ITLS International in 2007 and is available at ITLS International, 1 S. 280 Summit Ave., Court B-2, Oakbrook Terrace, IL 60181. This rule does not incorporate any subsequent amendments or additions. PHTLS is incorporated by reference in this rule as published by the National Association of Emergency Medical Technicians in 2006 and is available at the National Association of Emergency Medical Technicians, PO Box 1400, Clinton, MS 39060. This rule does not incorporate any subsequent amendments or additions. TNATC is incorporated by reference in this rule as published by the Air and Surface Transport Nurse's Association in 2006 and is available at the Air and Surface Transport Nurse's Association, 7995 East Prentice Avenue, Suite 100, Greenwood Village, CO 80111. This rule does not incorporate any subsequent amendments or additions; and

2. Licensure/certification—

A. Each medical crew member must hold a current and valid Missouri license as required for their level of practice.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 190.103, RSMo 2000 and sections 190.131 and 190.185, RSMo Supp. 2007, the department amends a rule as follows:

19 CSR 30-40.331 Application and Accreditation or Certification Requirements for Training Entities that Conduct Training for First Responders, Emergency Medical Dispatcher, Emergency Medical Technicians-Basic, Emergency Medical Technicians-Intermediate and Emergency Medical Technicians-Paramedic is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1243–1250). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received one (1) comment on the proposed amendment.

COMMENT: The Metropolitan Ambulance Services Trust commented in favor of the proposed amendment as published in the *Missouri Register*.

RESPONSE: No changes were made to the proposed amendment as a result of this comment.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under sections 190.142, 190.160, 190.165, and 190.185, RSMo Supp. 2007, the department withdraws a proposed amendment as follows:

19 CSR 30-40.342 Application and Licensure Requirements for the Initial Licensure and Relicensure of Emergency Medical Technician-Basics, Emergency Medical Technician-Intermediate, and Emergency Medical Technician-Paramedics is withdrawn.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1250-1256). The proposed amendment is withdrawn.

SUMMARY OF COMMENTS: The department received two (2) comments on the proposed amendment.

COMMENT #1: The Missouri Association of Air Medical Services commented that the requirements in this amendment would cause the paramedics in Missouri to have no ability to apply for a variance of practice and would impact patient care as a result.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees that sections 19 CSR 30-40.303 and 19 CSR 30-40.342 should be amended at a future date. As a result, the department is withdrawing the proposed amendment.

COMMENT #2: The Metropolitan Ambulance Services Trust commented that 19 CSR 30-40.342 should be removed from filing at this time and be submitted with 19 CSR 30-40.303 at a later date. RESPONSE AND EXPLANATION OF CHANGE: The department agrees and is withdrawing the proposed amendment.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 190.185, RSMo Supp. 2007 and section 190.241, HB 1790, 94th General Assembly, Second Regular Session, 2008, the department amends a rule as follows:

19 CSR 30-40.410 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1257–1258). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received five (5) comments on the proposed amendment.

COMMENT #1: The Metropolitan Ambulance Services Trust commented in favor of 19 CSR 30-40.410 as published in the *Missouri Register*.

RESPONSE: No changes were made to the proposed amendment as a result of this comment.

COMMENT #2: The Missouri Hospital Association (MHA) commented that subsection (1)(V) should be changed to clarify that promptly available (PA) means arrival at the hospital at the patient's bedside within thirty (30) minutes after notification of a patient's arrival at the hospital under normal driving and weather conditions. RESPONSE AND EXPLANATION OF CHANGE: This is consistent with the language used in subsection (1)(N) in the definitions and will be added to subsection (1)(V).

COMMENT #3: The definition of surgical trauma call "register" in subsection (1)(CC) should be revised to refer to the list of available surgeons, which would supplant the reference to "back-up surgeons when indicated."

RESPONSE: Trauma surgeons, trauma nurses, administrators, and many others involved in trauma care drafted this language. This regulation is intended to assure there is back-up coverage available when indicated. Trauma centers must have a back-up trauma call roster unless they are a Level III center and have a transfer agreement in place. No changes were made to the proposed amendment as a result of this comment.

COMMENT #4: In subsection (1)(DD), the definition of "trauma center" says that Level I centers function "as the resource center within that region." As the metropolitan areas have multiple Level I centers in the region, it may be more appropriate to use "a" resource center.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add the requested language to subsection (1)(DD). By making this change, trauma centers in metropolitan areas could benefit from more than one (1) resource center.

COMMENT #5: In reviewing the text, it was noted that there was no subsection (1)(I). The text went from subsection (1)(H) Continuing nursing education. . .to subsection (1)(J) Core surgeon. . .

RESPONSE AND EXPLANATION OF CHANGE: The division believes the numbering should be changed so that subsection (1)(I) is "Core surgeon is a member of the trauma team listed on the trauma call schedule ten percent (10%) of the time or greater," and the rest

of the subsections following should be renumbered.

19 CSR 30-40.410 Definitions and Abbreviations Relating to Trauma Centers

- (1) The following definitions and abbreviations shall be used in the interpretation of the rules in 19 CSR 30-40.400 to 19 CSR 30-40.450:
- (I) Core surgeon is a member of the trauma team listed on the trauma call schedule ten percent (10%) of the time or greater;
- (J) Credentialed or credentialing is a hospital-specific system of documenting and recognizing the qualifications of medical staff and nurses and authorizing the performance of certain procedures and establishing clinical privileges in the hospital setting;
- (K) EMS Bureau means the Missouri Department of Health and Senior Services Emergency Medical Services Bureau;
- (L) Glasgow coma scale is a scoring system for assessing a patient's level of consciousness utilizing a point system which measures eye opening, verbal response, and motor response. The higher the total score, the better the patient's neurological status;
- (M) Immediately available (IA) means being present at bedside at the time of the patient's arrival at the hospital when prior notification is possible and no more than twenty (20) minutes from the hospital under normal driving and weather conditions;
- (N) In-house (IH) means being on the hospital premises twenty-four (24) hours a day;
- (O) Liaison means one (1) physician representative from each of the following areas: Emergency Medicine, Neurosurgery, Orthopedics, and Anesthesia who is selected to attend the Performance Improvement and Patient Safety Committee and to disseminate information to the other physicians within his/her specialty taking trauma call;
- (P) Missouri trauma registry is a statewide data collection system to compile and maintain statistics on mortality and morbidity of trauma victims, using a reporting method provided by the Missouri Department of Health and Senior Services;
- (Q) Multidisciplinary trauma conference means a meeting of members of the trauma team and other appropriate hospital personnel to review the care of trauma patients at the hospital;
- (R) Non-core surgeon is a member of the trauma call team listed on the trauma call schedule less than ten percent (10%) of the time;
- (S) PALS means Pediatric Advanced Life Support, ENPC means Emergency Nurses Pediatric Course, and APLS means Advanced Pediatrics Life Support; when required, certification shall be maintained;
- (T) Physician advisory group is two (2) or more physicians who collectively assume the role of a medical advisor;
- (U) Promptly available (PA) means arrival at the patient's bedside within thirty (30) minutes after notification of a patient's arrival at the hospital under normal driving and weather conditions;
- (V) R is a symbol to indicate that a standard is a requirement for trauma center designation at a particular level;
- (W) Review is the inspection of hospitals to determine compliance with the rules of this chapter. There are four (4) types of reviews: the initial review of hospitals never before designated as trauma centers or hospitals never before reviewed for compliance with the rules of this chapter or hospitals applying for a new level of trauma center designation; the verification review to evaluate the correction of any deficiencies noted in a previous review; and the validation review, which shall occur every five (5) years to assure continued compliance with the rules of this chapter, and a focus review to allow review of substantial deficiencies by a review team;
- (X) Revised trauma score (RTS) is a numerical methodology for categorizing the physiological status of trauma patients;
- (Y) Senior trauma surgery resident is a physician in at least the third post-graduate year of study;
- (Z) Severely injured adult patient is an injured patient with a glasgow coma score (GCS) less than fourteen (14) or a systolic blood

pressure less than ninety (90) millimeters of mercury or respirations less than ten (10) per minute or more than twenty-nine (29) per minute;

- (AA) Severely injured child is defined as a patient fourteen (14) years of age or less having a GCS less than fourteen (14), shock following injury, pediatric trauma score less than eight (8), or with any of the following conditions: unable to establish or maintain an airway; ineffective respiratory effort; penetrating injury to head, neck, chest, abdomen, or extremity proximal to elbow or knee; burns greater than ten percent (10%) of the body surface area or involving inhalation injury; two (2) or more proximal long bone fractures or pelvic fracture; open or depressed skull fracture; suspected spinal cord injury and/or paralysis; amputation proximal to wrist or ankle; facial or tracheal injury with airway compromise; pre-existing medical conditions; or respiratory or cardiopulmonary arrest after injury;
- (BB) Surgical trauma call roster is a hospital-specific list of surgeons assigned to trauma care, including date(s) of coverage and back-up surgeons when indicated;
- (CC) Trauma center is a hospital that has been designated in accordance with the rules in this chapter to provide systematized medical and nursing care to trauma patients. Level I is the highest level of designation and functions as a resource center for the hospitals within that region. Level II is the next highest level of designation dealing with large volumes of serious trauma. Level III is the next level with limited resources;
- (DD) Trauma medical director is a surgeon designated by the hospital who is responsible for the trauma service and performance improvement and patient safety programs related to trauma care;
- (EE) Trauma nurse coordinator/trauma program manager is a registered nurse designated by the hospital with responsibility for monitoring and evaluating the care of trauma patients and the coordination of performance improvement and patient safety programs for the trauma center in conjunction with the trauma medical director;
- (FF) Trauma nursing course is an education program in nursing care of trauma patients:
- (GG) Trauma service is an organizational component of the hospital specializing in the care of injured patients;
- (HH) Trauma team is a team consisting of the emergency physician, physicians on the surgical trauma call roster, appropriate anesthesiology staff, nursing and other support staff as needed;
- (II) Trauma team activation protocol is a hospital document outlining the criteria used to identify severely injured patients and the procedures for notification of trauma team members and indicating surgical and non-surgical specialty response times acceptable for treating major trauma patients; and
- (JJ) Trauma triage is an estimation of injury severity at the scene of an accident.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 190.185, RSMo Supp. 2007 and section 190.241, HB 1790, 94th General Assembly, Second Regular Session, 2008, the department amends a rule as follows:

19 CSR 30-40.420 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1258–1261). Those sections with changes are reprinted

here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received two (2) comments on the proposed amendment.

COMMENT #1: The Metropolitan Ambulance Services Trust commented in favor of 19 CSR 30-40.420 as published in the *Missouri Register*.

RESPONSE: No changes have been made as a result of this comment.

COMMENT #2: The Missouri Hospital Association recommended that the words "but not be limited to" be removed from the description of the information requirements of the trauma center application in subsection (2)(A).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will make the requested changes.

19 CSR 30-40.420 Trauma Center Designation Requirements

- (2) The application required for trauma center designation shall be made upon forms prepared or prescribed by the EMS Bureau and shall contain information the EMS Bureau deems necessary to make a fair determination of eligibility for review and designation in accordance with the rules of this chapter.
- (A) An application shall include the following information: designation level requested; name, address, and telephone number of hospital; name of chief executive officer, chairman/president of board of trustees, surgeon in charge of trauma care, trauma nurse coordinator/program manager, director of emergency medicine, and director of trauma intensive care; number of emergency department trauma caseload, trauma team activations, computerized tomography scan capability, magnetic resonance imaging capability, operating rooms, intensive care unit/critical care unit beds, burn beds, rehabilitation beds, trauma surgeons, neurosurgeons, orthopedists, emergency department physicians, anesthesiologists, certified registered nurse anesthetists, pediatricians, and pediatric surgeons; date of application; and signatures of the chairman/president of board of trustees, hospital chief executive officer, surgeon in charge of trauma, and director of emergency medicine. The trauma center review and designation application form, included herein, is available at the EMS Bureau office or may be obtained by mailing a written request to Missouri Department of Health and Senior Services, EMS Bureau, PO Box 570, Jefferson City, MO 65102-0570.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 190.185, RSMo Supp. 2007 and section 190.241, HB 1790, 94th General Assembly, Second Regular Session, 2008, the department amends a rule as follows:

19 CSR 30-40.430 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1261–1270). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received thirteen (13) comments on the proposed amendment.

COMMENT #1: The Missouri Society of Anesthesiologists commented in support of the proposed amendments regarding regulations that impact anesthesiologists.

RESPONSE: No change has been made as a result of this comment.

COMMENT #2: The Missouri Hospital Association (MHA) recommended that subsection (1)(C) be modified to reflect the appropriate trauma level I, II, and III staffing requirements. With the exception of subsection (1)(C), all the other standards in section (1) cite the level-specific compliance requirements.

RESPONSE: Subsection (1)(C) describes the requirements for attendance in the trauma program performance improvement and patient safety (PIPS) program meetings. Not all levels have the same compliment of surgical staff. For instance, there is a level III trauma center in southeast Missouri that has neurosurgeons on staff. These physicians must be included in the PIPS program meetings. This subsection does not require attendance if there are no physicians on staff, however, by making the requested change, hospitals with these physicians would not be required to assure their attendance in these meetings. The requirement is only fifty percent (50%) of the time, which in many centers would require attendance only twice per year. No change has been made as a result of this comment.

COMMENT #3: MHA recommended subparagraph (2)(C)1.C. be changed as requested in 19 CSR 30-40.410 and that the portion requiring back-up coverage for general trauma surgeons be deleted. RESPONSE: As noted in comment #3 to 19 CSR 30-40.410, simply having a surgical trauma call roster does not identify the surgeon to be called in the event that the original on-call physician is in the operating room or otherwise unable to respond to a trauma call. No change has been made as a result of this comment.

COMMENT #4: MHA recommended the reference to anesthesiologist assistant supervision utilized for level III trauma centers in subparagraph (2)(C)13.B. also be utilized for level I and II trauma centers in subparagraph (2)(C)13.A. By law anesthesiologist assistants cannot practice without direct anesthesiologist supervision. The language added would be "in accordance with sections 334.400 to 334.430, RSMo."

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add the requested language, however, the language will be found in subparagraph (2)(C)24.A. due to restructuring of the regulation numbering in response to comment #8.

COMMENT #5: MHA recommended the phrase "immediately available" be changed to read "adjacent" in paragraph (3)(B)6. The section utilizes the phrase "immediately available" to describe adult trauma centers that are adjacent to the affected pediatric facilities. 19 CSR 30-40.410 defines "immediately available" for individual practitioners as being no more than twenty (20) minutes away during normal driving and weather conditions. The use of the same term for practitioners and facilities is confusing.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add the requested language.

COMMENT #6: MHA commented that paragraph (3)(H)1. sets a one (1)-hour maximum response time for angiography with interventional capability. One (1) of MHA's members suggested further clarification as to when that one (1)-hour period would begin.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add language to paragraph (3)(H)1. to define when the one (1)-hour response time begins.

COMMENT #7: MHA commented that subsection (4)(G) revises

trauma centers' obligations regarding emergency department diversion. The proposed changes would require trauma centers have a diversion protocol "in accordance with state regulations" presumably referencing the diversion standards in hospital licensure regulations. However, it also creates a new standard for trauma centers to be similar but somewhat less detailed than the standards of the hospital licensure regulation on this topic. MHA questions the value of creating regulatory standards on emergency department diversion in both the trauma and hospital licensure regulations, especially if the standards differ.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will remove the language added to subsection (4)(G).

COMMENT #8: The trauma nurses commented that some portions of 19 CSR 30-40.430 are confusing and could be easier to follow if some sections are arranged differently. For instance, subsection (2)(C) should be restructured.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will make changes to the arrangement of the regulation.

COMMENT #9: The trauma nurses commented that in part (3)(A)1.E.(II) "Trauma Nursing Core Curriculum" should read "Trauma Nurse Core Curriculum."

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will make the requested change to the language.

COMMENT #10: The trauma nurses commented that in part (3)(A)1.E.(II) "the requirement for Trauma Nurse Core Curriculum, Advanced Pediatric Life Support, or Emergency Nursing Pediatric Course" should read, "the requirement for Pediatric Advanced Life Support, Advanced Pediatric Life Support, or Emergency Nursing Pediatric Course."

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and makes the requested change to the language.

COMMENT #11: When reviewing part (3)(A)1.E.(II), program staff noticed that the same issue raised in comment #5 was present. RESPONSE AND EXPLANATION OF CHANGE: The words "immediately available" has been changed in part (3)(A)1.E.(II) to "adjacent" for consistency with paragraph (3)(B)6.

COMMENT #12: When reviewing subsection (4)(G), program staff noticed the language "quality improvement process."

RESPONSE AND EXPLANATION OF CHANGE: The words "quality improvement process" have been changed to "Performance Improvement and Patient Safety Program" for consistency with subsection (4)(A).

COMMENT #13: When reviewing subsection (2)(C) and subparagraph (2)(C)1.D., staff noticed the reformatting changes as suggested by the trauma nurses and agreed to by the department changed the original intent of the proposed rule about who needs to be board-certified or board-admissible. Staff suggested the word "physicians" be changed to "surgeons" to comply with the original intent of the proposed rule.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will make the necessary changes.

19 CSR 30-40.430 Standards for Trauma Center Designation

(2) Hospital Organization Standards for Trauma Center Designation.
(C) Surgeons who are board-certified or board-admissible or complete an alternate pathway as documented and defined by the trauma medical director using the criteria established by the American College of Surgeons (ACS) in the current Resource for Optimal Care Document in the following specialties and who are credentialed by the hospital for trauma care shall be on the trauma center staff and/or be available to the patient as indicated. The Resource for Optimal

Care Document is incorporated by reference in this rule as published by the American College of Surgeons in 2006 and is available at the American College of Surgeons, 633 N. St. Clair St., Chicago, IL 60611. This rule does not incorporate any subsequent amendments or additions.

- 1. General surgery—I-R, II-I/A, III-P/A.
- A. The general surgery staffing requirement may be fulfilled by a senior surgery resident credentialed in general surgery, including trauma care, and Advanced Trauma Life Support (ATLS) certification and capable of assessing emergency situations in general surgery.
- B. The trauma surgeon shall be immediately available and in attendance with the patient when a trauma surgery resident is fulfilling availability requirements.
- C. In a level I or II center, call rosters providing back-up coverage will be maintained for general trauma surgeons. In a level III center, call rosters providing for back-up coverage for general trauma surgeons will be maintained or a written transfer agreement to a level I or II trauma center provided.
- D. Surgeons who are board-certified or board-admissible and who are credentialed by the hospital for trauma care shall be on the trauma center staff.
 - 2. Neurologic surgery—I-IH, II-IA.
- A. The neurologic surgery staffing requirement may be fulfilled by a surgeon who has been approved by the chief of neurosurgery for care of patients with neural trauma.
- B. The surgeon shall be capable of initiating measures toward stabilizing the patient and performing diagnostic procedures.
 - 3. Cardiac/Thoracic surgery—I-R/PA, II-R/PA.
 - 4. Obstetric-gynecologic surgery—I-R/PA, II-R/PA.
 - 5. Ophthalmic surgery—I-R/PA, II-R/PA.
 - 6. Orthopedic surgery—I-R/PA, II-R/PA.
 - 7. Maxillofacial trauma surgery—I-R/PA, II-R/PA.
 - 8. Otorhinolaryngolic surgery—I-R/PA, II-R/PA.
- 9. Pediatric surgery/trauma surgeon credentialed and privileged in pediatric trauma care—I-R/IA, II-R/PA; this requirement will be waived in centers that provide evaluation and care to adults only.
 - 10. Plastic surgery—I-R/PA, II-R/PA.
 - 11. Urologic surgery—I-R/PA, II-R/PA.
 - 12. Emergency medicine—I-R/IH, II-R/IH, III-R/IH.
 - 13. Cardiology—I-R/PA, II-R/PA.
 - 14. Chest pulmonary medicine—I-R/PA, II-R/PA.
 - 15. Gastroenterology—I-R/PA, II-R/PA.
 - 16. Hematology—I-R/PA, II-R/PA.
 - 17. Infectious diseases—I-R/PA, II-R/PA.
 - 18. Internal medicine—I-R/PA, II-R/PA, III-R/PA.
 - 19. Nephrology—I-R/PA, II-R/PA.
 - 20. Pathology—I-R/PA, II-R/PA.
 - 21. Pediatrics—I-R/PA, II-R/PA.
 - 22. Psychiatry—I-R/PA, II-R/PA.
 - 23. Radiology—I-R/PA, II-R/PA.
 - 24. Anesthesiology—I-R/IH, II-R/IA, III-R/PA.
- A. In a level I or II trauma center, anesthesiology staffing requirements may be fulfilled by anesthesiology residents or certified registered nurse anesthetists (CRNA) capable of assessing emergent situations in trauma patients and of providing any indicated treatment including induction of anesthesia or may be fulfilled by anesthesiologist assistants with anesthesiologist supervision in accordance with sections 334.400 to 334.430, RSMo.
- B. In a level III trauma center, anesthesiology requirements may be fulfilled by a CRNA with physician supervision, or an anesthesiologist assistant with anesthesiology supervision.
- (3) Standards for Special Facilities/Resources/Capabilities for Trauma Center Designation.
- (A) The hospital shall meet emergency department standards for trauma center designation.

- 1. The emergency department staffing shall ensure immediate and appropriate care of the trauma patient. (I-R, II-R, III-R)
- A. The physician director of the emergency department shall be board-certified or board-admissible in emergency medicine. (I-R, II-R)
- B. There shall be a physician trained in the care of the critically injured as evidenced by credentialing in ATLS and current in trauma CME in the emergency department twenty-four (24) hours a day. ATLS is incorporated by reference in this rule as published by the American College of Surgeons in 2003 and is available at American College of Surgeons, 633 N. St. Clair St., Chicago, IL 60611. This rule does not incorporate any subsequent amendments or additions. (I-R, II-R, III-R)
- C. All emergency department physicians shall be certified in ATLS at least once. Physicians who are certified by boards other than emergency medicine who treat trauma patients in the emergency department are required to have current ATLS status. (I-R, II-R, III-R)
- D. There shall be written protocols defining the relationship of the emergency department physicians to other physician members of the trauma team. (I-R, II-R, III-R)
- E. All registered nurses assigned to the emergency department shall be credentialed in trauma nursing by the hospital within one (1) year of assignment. (I-R, II-R, III-R)
- (I) Registered nurses credentialed in trauma nursing shall document a minimum of eight (8) hours of trauma-related continuing nursing education per year. (I-R, II-R, III-R)
- (II) Registered nurses credentialed in trauma care shall maintain current provider status in the Trauma Nurse Core Curriculum or Advanced Trauma Care for Nurses and either Pediatric Advanced Life Support (PALS), Advanced Pediatric Life Support (APLS), or Emergency Nursing Pediatric Course (ENPC) within one (1) year of employment in the emergency department. The requirement for Pediatric Advanced Life Support, Advanced Pediatric Life Support, or Emergency Nursing Pediatric Course may be waived in centers where policy exists diverting injured children to a pediatric trauma center and where a pediatric trauma center is adjacent and a performance improvement filter reviewing any children seen is maintained. The Trauma Nurse Core Curriculum is incorporated by reference in this rule as published in 2007 by the Emergency Nurses Association and is available at the Emergency Nurses Association, 915 Lee Street, Des Plaines, IL 60016-9659. This rule does not incorporate any subsequent amendments or additions. Advanced Trauma Care for Nurses is incorporated by reference in this rule as published in 2003 by the Society of Trauma Nurses and is available at the Society of Trauma Nurses, 1926 Waukegan Road, Suite 100, Glenview, IL 60025. This rule does not incorporate any subsequent amendments or additions. Pediatric Advanced Life Support is incorporated by reference in this rule as published in 2005 by the American Heart Association and is available at the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231. This rule does not incorporate any subsequent amendments or additions. The Emergency Nursing Pediatric Course is incorporated by reference in this rule as published by the Emergency Nurses Association in 2004 and is available at the Emergency Nurses Association, 915 Lee Street, Des Plaines, IL 60016-9659. This rule does not incorporate any subsequent amendments or additions. (I-R, II-R, III-R)
- 2. Equipment for resuscitation and life support with age appropriate sizes for the critically or seriously injured shall include the following:
- A. Airway control and ventilation equipment including laryngoscopes, endotracheal tubes, bag-mask resuscitator, sources of oxygen, and mechanical ventilator—I-R, II-R, III-R;
 - B. Suction devices—I-R, II-R, III-R;
- C. Electrocardiograph, cardiac monitor, and defibrillator—I-R, II-R, III-R;
 - D. Central line insertion equipment—I-R. II-R. III-R:

- E. All standard intravenous fluids and administration devices including intravenous catheters—I-R, II-R, III-R;
- F. Sterile surgical sets for procedures standard for the emergency department—I-R, II-R, III-R;
 - G. Gastric lavage equipment—I-R, II-R, III-R;
- H. Drugs and supplies necessary for emergency care—I-R, II-R, III-R;
- I. Two-way radio linked with emergency medical service (EMS) vehicles—I-R, II-R, III-R;
- J. End-tidal carbon dioxide monitor—I-R, II-R, III-R and mechanical ventilators—I-R, II-R;
- K. Temperature control devices for patient, parenteral fluids, and blood—I-R, II-R, III-R; and
- L. Rapid infusion system for parenteral infusion—I-R, II-R, III-R
- 3. There shall be documentation that all equipment is checked according to the hospital preventive maintenance schedule. (I-R, II-R, III-R)
- 4. There shall be a designated trauma resuscitation area in the emergency department. (I-R, II-R)
- 5. There shall be X-ray capability with twenty-four (24)-hour coverage by technicians. (I-IH, II-IH, III-IA)
- 6. Nursing documentation for the trauma patient shall be on a trauma flow sheet approved by the trauma medical director and trauma nurse coordinator/trauma program manager. (I-R, II-R, III-R)
- (B) The hospital shall meet intensive care unit (ICU) standards for trauma center designation.
- 1. There shall be a designated surgeon medical director for the ICU. (I-R, II-R, III-R)
- 2. A physician who is not the emergency department physician shall be on duty in the ICU or available in-house twenty-four (24) hours a day in a level I trauma center and shall be on call and available within twenty (20) minutes in a level II trauma center.
- 3. The minimum registered nurse/trauma patient ratio used shall be one to two (1:2). (I-R, II-R, III-R)
- 4. Registered nurses shall be credentialed in trauma care within one (1) year of assignment documenting a minimum of eight (8) hours of trauma-related continuing nursing education per year. (I-R, II-R, III-R)
- 5. Nursing care documentation shall be on a patient flow sheet. (I-R, II-R, III-R)
- 6. At the time of the initial review, nurses assigned to ICU shall have successfully completed or be registered for a provider ACLS course. The requirement for ACLS may be waived in pediatric centers where policy exists diverting injured adults to an adult trauma center and where an adult trauma center is adjacent to the affected pediatric facilities, and a performance improvement filter reviewing any adult trauma patients seen is maintained (I-R, II-R, III-R).
- 7. There shall be separate pediatric and adult ICUs or a combined ICU with nurses trained in pediatric intensive care. In ICUs providing care to children, registered nurses shall maintain credentialing in PALS, APLS, or ENPC (I-R, II-R)
- 8. There shall be beds for trauma patients or comparable level of care provided until space is available in ICU. (I-R, II-R, III-R)
- 9. Equipment for resuscitation and to provide life support for the critically or seriously injured shall be available for the intensive care unit. In ICUs providing care for the pediatric patient, equipment with age appropriate sizes shall also be available. This equipment shall include, but not be limited to:
- A. Airway control and ventilation equipment including laryngoscopes, endotracheal tubes, bag-mask resuscitator, and a mechanical ventilator—I-R, II-R, III-R;
- B. Oxygen source with concentration controls—I-R, II-R, III-R
- C. Cardiac emergency cart, including medications—I-R, II-R, III-R;
 - D. Temporary transvenous pacemakers—I-R, II-R, III-R;
- E. Electrocardiograph, cardiac monitor, and defibrillator—I-R, II-R, III-R;

- F. Cardiac output monitoring—I-R, II-R;
- G. Electronic pressure monitoring and pulse oximetry—I-R, II-R:
- H. End-tidal carbon dioxide monitor and mechanical ventilators—I-R, II-R, III-R;
 - I. Patient weighing devices—I-R, II-R, III-R;
 - J. Temperature control devices—I-R, II-R, III-R;
- K. Drugs, intravenous fluids, and supplies —I-R, II-R, III-R; and
 - L. Intracranial pressure monitoring devices—I-R, II-R.
- 10. There shall be documentation that all equipment is checked according to the hospital preventive maintenance schedule. (I-R, II-R, III-R)
- (H) Radiological capabilities for trauma center designation including a mechanism for timely interpretation to aid in patient management shall include:
- 1. Angiography with interventional capability available twenty-four (24) hours a day with a one (1)-hour maximum response time from time of notification—I-R, II-R;
- 2. Sonography available twenty-four (24) hours a day with a thirty (30)-minute maximum response time—I-R;
- 3. Resuscitation equipment available to the radiology department—I-R, II-R, III-R;
- 4. Adequate physician and nursing personnel present with monitoring equipment to fully support the trauma patient and provide documentation of care during the time the patient is physically present in the radiology department and during transportation to and from the radiology department. Nurses providing care for the trauma patients that are not accompanied by a trauma nurse while in the radiology department during initial evaluation and resuscitation shall maintain the same credentialing required of emergency department nursing personnel—I-R, II-R, III-R;
 - 5. In-house computerized tomography—I-R, II-R; and
 - 6. Computerized tomography technician—I-IH, II-IA.
- (4) Standards for Programs in Performance Improvement and Improvement Patient Safety Program, Outreach, Public Education, and Training for Trauma Center Designation.
- (G) Hospital diversion information must be maintained to include date, length of time, and reason for diversion. This must be monitored as a part of the Performance Improvement and Patient Safety program, and available when the hospital is site reviewed.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30—Division of Regulation and Licensure Chapter 40—Comprehensive Emergency Medical Services Systems Regulations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under sections 190.528 and 190.537, RSMo Supp. 2007, the department adopts a rule as follows:

19 CSR 30-40.528 Application and Licensure Requirements; Standards for the Licensure and Relicensure of Stretcher Van Services is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on July 1, 2008 (33 MoReg 1271–1275). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received one (1) comment on the proposed rule.

COMMENT: The Metropolitan Ambulance Services Trust commented in favor of the proposed rule.

RESPONSE: The department has made no changes to the proposed rule as a result of this comment.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 100—Insurer Conduct Chapter 8—Market Conduct Examination

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director amends a rule as follows:

20 CSR 100-8.040 Insurer Record Retention is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1456). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed amendment.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 300—Market Conduct Examinations Chapter 1—Sampling and Error Rates

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director rescinds a rule as follows:

20 CSR 300-1.100 Unfair Claims Settlement Rates is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1456). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed rescission.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 300—Market Conduct Examinations Chapter 1—Sampling and Error Rates

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director rescinds a rule as follows:

20 CSR 300-1.200 Fraudulent or Bad Faith Conduct Rules is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1456–1457). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed rescission.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 300—Market Conduct Examinations Chapter 2—Record Retention for Market Conduct Examinations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director rescinds a rule as follows:

20 CSR 300-2.100 File and Record Documentation for Claims is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1457). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed rescission.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 300—Market Conduct Examinations Chapter 2—Record Retention for Market Conduct Examinations

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director rescinds a rule as follows:

20 CSR 300-2.200 Records Required for Purposes of Market Conduct Examinations **is rescinded**.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1457). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed rescission.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 300—Market Conduct Examinations Chapter 3—Policy Contents and Coverages

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, SB 788, 94th General Assembly, Second Regular Session, 2008, the director rescinds a rule as follows:

20 CSR 300-3.100 Primary Coverage for Replacement Vehicle is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 1, 2008 (33 MoReg 1457–1458). No changes have been made in the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Insurance, Financial Institutions and Professional Registration received no comments on this proposed rescission.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 400—Life, Annuities and Health Chapter 7—Health Maintenance Organizations

ORDER OF RULEMAKING

By the authority vested in the director of the Department of Insurance, Financial Institutions and Professional Registration under section 354.442.1(15), RSMo 2000.

20 CSR 400-7.180 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 16, 2008 (33 MoReg 1165–1166). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: A public hearing on this proposed amendment was held July 29, 2008, and the public comment period ended July 29, 2008. At the public hearing, the Insurance Solvency and Company Regulation Division staff explained the proposed amendment and comments were made by the following: Brent Butler and Calvin Call for Missouri Insurance Coalition, Ronald Auer and Shannon Meroney for Aetna Healthcare, Carlene Marra for Humana Healthcare Plans, Linda Pracht for Blue Cross and Blue Shield of Kansas, J. Holmes for Harmony Health Plan of Missouri, Dianne Bricker for America's Health Insurance Plans, Amy Niehaus for Anthem Blue Cross and Blue Shield, Mark Steele for Truman Medical Center, Shelley Bowen and Kathy James for Blue Cross and Blue Shield of Kansas City, Genni Koser for BJC's Credentialing Organization, Daniel Landon for Missouri Hospital Association, and Melissa Garrett for American Specialty Health.

COMMENT #1: Nine (9) parties opposed the statement in section (2) that no future amendments to the Council for Affordable Quality Healthcare (CAQH) form would be acceptable. All commented that problems would be created for them when CAQH publishes any updates to their form, as the version currently published and named in the proposal would then no longer be available from CAQH and the Internet-based service that CAQH provides for the form would no longer support the correct form. (The parties making this comment were America's Health Insurance Plans, Anthem Blue Cross and Blue Shield, Blue Cross and Blue Shield of Kansas City, Blue Cross and Blue Shield of Kansas, Harmony Health Plan of Missouri, Humana Health Plan, the Missouri Hospital Association, the Missouri Insurance Coalition, and Truman Medical Center.)

RESPONSE: State law at section 536.031.4, RSMo, requires state agencies to state that any referenced rules, regulations, standards, or guidelines do not include any later amendments or additions. It is the policy of the state of Missouri to require state agencies to readdress any subsequent amendments or additions to referenced material through the standard rule making process in order to assure the opportunity for public comment on such amendments or additions. The proposed amendment to 20 CSR 400-7.180 retains the procedure for requesting permission to use another credentialing form. It is the intent of the department that this procedure would be utilized if and when CAQH amends or modifies their credentialing form. Permission would be granted to use the CAQH updates. In the mean time, the department could take the steps necessary to formally amend the regulation. No change has been made to the proposal as a result of these comments.

COMMENT #2: Aetna objected to the proposed prohibition that health maintenance organizations (HMOs) may not routinely request information that duplicates information contained on the credentialing form as required by section (3) of this rule. Aetna argued that other critical functions of the plan, such as claims processing and provider contracting, require HMOs to repeatedly gather the same information. The proposed prohibition would catastrophically impair these non-credentialing functions. The proposed prohibition would then mean the HMO could not require the provider's name or address information on claim forms, for example.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees that there is no intent to impact any function of a managed care operation other than credentialing. However, the department is unaware of any other managed care organization that is unable to gather necessary contracting information (such as location of multiple provider offices) from the credentialing form. In addition, the proposed CAQH form contains a specific supplement for gathering multiple practice locations, making it less necessary for HMOs to gather such information in a separate process or through a separate form. The proposal is modified to clarify exemption of the claims process.

COMMENT #3: Truman Medical Center opposed the proposal on the grounds that CAQH as an organization is expensive and does not carry out its on-line support functions very well. As a delegated credentialing agent for several managed care plans, Truman Medical Center anticipates over one hundred thousand dollars (\$100,000) in software costs in the first year should the proposal go into effect. Additional ongoing costs were mentioned at a level of five thousand dollars (\$5,000) or less annually.

RESPONSE: The proposal does not mandate the use of CAQH's online support features. In fact, the proposal requires HMOs to accept any accurate reproduction of the standardized form, unless the HMO is not prepared to handle electronic or on-line versions. Similar to the manner in which various organizations have created alternative electronic versions of the current standard form, the proposal explicitly protects electronic versions of the CAQH form should other vendors make such options available. The department has not modified the proposal as a result of this comment.

COMMENT #4: The department received a copy of an executive order signed by former Governor Bob Holden, dated March 17, 2004, from an anonymous party. The executive order bars state agencies from signing contracts with vendors that utilize foreign labor to meet the requirements of state contracts.

RESPONSE: The department is aware that CAQH has a support center and call center located outside of the United States. However, the proposal does not mandate dealing directly with CAQH in any way. The proposal does not establish any contract between any vendor and any agency of state government. Therefore, the department has not modified the proposal as a result of this submission.

COMMENT #5: American Specialty Health Networks and America's Health Insurance Plans each sent a request to use alternate credentialing forms for non-physician types of professionals (such as therapists or chiropractors) because the CAQH form is not designed to credential these types of professionals.

RESPONSE: The department is aware that the CAQH form poses some problems for credentialing non-physician professionals. The department intends for a single form to serve the needs of all providers and HMOs, but acknowledges the need to gather certain information pertinent to certain areas of practice. The current regulation already contains procedures for approval of other forms. The department intends to utilize this process to open a new discussion on the merits of supplements to the main form, where specialized information is beneficial, non-duplicative and National Committee for Quality Assurance (NCQA) compliant. No change was made to the proposal as a result of this comment.

COMMENT #6: Harmony Health Plan commented that the CAQH on-line system stores any earlier versions of the CAQH form and that providers only attest to that earlier version during the recredentialing process. Therefore, plans must be permitted to continue to accept past versions in the recredentialing process.

RESPONSE: According to representatives of CAQH, a provider that is using the on-line system will be asked to address any updates at the time of re-attestation. A provider would not be asked to re-attest to, or to be recredentialed under, an old version of the form. For accreditation purposes only, the system retains a "vintage" image of any old versions to serve as proof of the date such form was originally completed. The "vintage" image is only accessible through a process separate from normal credentialing, attestation, and recredentialing. If a system glitch is causing Harmony providers to reattest to old versions, this is something that Harmony needs to work out with CAQH, and is not grounds to modify the proposal. Also, the proposal only adopts the paper form, and does not require use of the on-line system. Upon recredentialing using the paper form, it is expected that providers will fill out the new form rather than re-attest to the old one. Since no other party is raising this issue, CAQH disputes the comment, and as the proposal does not require the on-line system, no change is made to the proposal as a result of this comment.

COMMENT #7: Harmony Health Plan commented that hospitals which perform delegated credentialing for HMOs should be excluded from the rule. No explanation for this suggestion was provided. No hospital asked to be excused.

RESPONSE: The department is unaware of any reason why hospitals should be treated differently now than they have been treated in the past with regard to delegated HMO credentialing. The department is unaware of any reason hospitals should be treated differently from other organizations to which HMOs delegate the credentialing function. Therefore, no change is made to the proposal as a result of this comment.

COMMENT #8: BJC's Credentialing Organization commented that they require a Microsoft Word version of the credentialing form with pre-populated information for recredentialing purposes.

RESPONSE: The department has never supplied a Microsoft Word version of the current credentialing form. The department assumes

BJC's Credentialing Organization developed such version themselves, or acquired it from another party. The proposal explicitly protects all accurate reproductions of the proposed form. If any organization elects to create a Microsoft Word version of the proposed form, that version would be protected under the proposal. Therefore, no change is made as a result of this comment.

COMMENT #9: The Missouri Insurance Coalition commented that the proposal should incorporate a transition period or grace period for purposes of migrating from the old form to the new form.

RESPONSE: The department is aware that other organizations were also concerned about a transition period or grace period, even though they did not supply formal comments on this issue. However, since the fall of 2007, HMOs have been directed to accept the CAQH form if that is what a non-Missouri provider supplies—in effect, a de facto grace period. Also, the proposal does not require immediate recredentialing of all providers. It only stipulates that upon recredentialing (whenever that normally occurs), the proposed new form would be required. It is assumed that HMOs will transition providers to the new form on the normal recredentialing cycle. In fact, the department is more concerned that HMOs will interpret the proposal as requiring immediate transition to the new form, and that would cause unnecessary upheaval for medical providers, credentialing agents, and health plan enrollees. Therefore, the department will issue a bulletin defining "reasonable compliance" as evidence that an HMO and its credentialing agents are moving to the new form on their normal recredentialing cycle, and directing HMOs away from imposing any unreasonably immediate change. No change is made to the proposal as a result of this comment.

COMMENT #10: Molly White from the department commented that in section (2), Missouri Standardized Credentialing Form should instead refer to Form UCDS.

RESPONSE AND EXPLANATION OF CHANGE: This change was made to make all references to the credentialing form consistent.

20 CSR 400-7.180 Standard Form To Establish Credentials

(2) The Universal Credentialing DataSource form (Form UCDS), incorporated by reference and published on October 31, 2006, by the Council for Affordable Quality Healthcare, 601 Pennsylvania Avenue NW, South Building, Suite 500, Washington, DC 20004, has been adopted and shall be used by all health carriers and their agents when credentialing or recredentialing health care professionals in a managed care plan. The director on request will supply in printed format the form specified in this rule. The form referenced herein is available at http://www.insurance.mo.gov. This rule does not incorporate any subsequent amendments or additions. Use of another standardized credentialing form is permissible so long as the director determines prior to its use that it is substantially similar to Form UCDS. Carriers shall accept any form approved by the director for credentialing purposes, and shall not require a Missouri health care professional to use any particular approved form to the exclusion of any other approved form, so long as the form submitted by the Missouri health care professional is Form UCDS or any other form approved pursuant to this rule. Requests for the director's approval of the use of another standardized credentialing form should be submitted to the following address: Missouri Department of Insurance, Managed Care Section, PO Box 690, Jefferson City, MO 65102-0690. A request must include a complete copy of the form to be approved and the name, address, and telephone number of the person requesting approval. The director will provide written notice to all Missouri licensed health maintenance organizations of the approval of the use of another standardized credentialing form. The director also will provide on the department's Internet home page a copy of Form UCDS with a list of other standardized credentialing forms that have been approved.

(3) Health carriers may request additional information to explain or provide details regarding responses obtained on the standard form.

Health carriers and their agents are prohibited from routinely requiring additional information, or information that duplicates information on Form UCDS, from health care professionals. This prohibition shall not apply to gathering information on standard claim forms for purposes of routine claims submission and payment processes.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2197—Board of Therapeutic Massage Chapter 2—Massage Therapist Licensure Requirements

ORDER OF RULEMAKING

By the authority vested in the Board of Therapeutic Massage under sections 324.240, 324.243, and 324.265, SB 788 and HB 1419, 94th General Assembly, Second Regular Session, 2008, section 324.267, RSMo 2000, and sections 324.245 and 324.270, RSMo Supp. 2007, the board amends a rule as follows:

20 CSR 2197-2.010 Application for Licensure is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1575–1578). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2205—Missouri Board of Occupational Therapy Chapter 1—General Rules

ORDER OF RULEMAKING

By the authority vested in the Missouri Board of Occupational Therapy under sections 324.065, 324.068, and 324.074, RSMo 2000, the board amends a rule as follows:

20 CSR 2205-1.050 Fees is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1579–1581). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2205—Missouri Board of Occupational Therapy Chapter 5—Continuing Competency Requirements

ORDER OF RULEMAKING

By the authority vested in the Missouri Board of Occupational Therapy under sections 324.065 and 324.080, RSMo 2000 and section 324.086, RSMo Supp. 2007, the board amends a rule as follows:

20 CSR 2205-5.010 Continuing Competency Requirements is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1582–1584). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2230—State Board of Podiatric Medicine Chapter 1—Organization and Description of Board

ORDER OF RULEMAKING

By the authority vested in the State Board of Podiatric Medicine under sections 330.010, 330.040, 330.050, and 330.070, RSMo Supp. 2007 and section 330.140, RSMo 2000, the board amends a rule as follows:

20 CSR 2230-1.030 Definitions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1585). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 1—General Rules

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 337.020 and 337.050.9, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-1.025 Application for Provisional Licensure is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1585). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 1—General Rules

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 337.020 and 337.050.9, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-1.026 Application for Temporary Licensure is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1585–1586). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 2—Licensure Requirements

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 337.025, 337.033, and 337.050.9, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-2.005 Educational Requirements, Section 337.025, RSMo is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1586). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 2—Licensure Requirements

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 334.125, 337.045.5, and 337.050.5, RSMo 2000, the board rescinds a rule as follows:

20 CSR 2235-2.030 Post Master's Degree Supervised Professional Experience, Section 337.021, RSMo **is rescinded**.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1586). No changes have been made to the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 2—Licensure Requirements

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 337.025 and 337.050.9, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-2.050 Supervised Professional Experience, Section 337.025, RSMo, for the Delivery of Nonhealth Psychological Services is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1586–1587). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 3—Health Service Provider Certification

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under sections 337.033 and 337.050.9, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-3.020 Health Service Provider Certification is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1587–1588). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 7—Continuing Education

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under section 337.050.12, RSMo 2000, the board amends a rule as follows:

ed.

20 CSR 2235-7.005 Definitions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1588). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 7—Continuing Education

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under section 337.050.12, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-7.010 Continuing Education is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1588). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 7—Continuing Education

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under section 337.030, RSMo Supp. 2007 and section 337.050.12, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-7.020 Continuing Education Reports is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1589). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2235—State Committee of Psychologists Chapter 7—Continuing Education

ORDER OF RULEMAKING

By the authority vested in the State Committee of Psychologists under section 337.030, RSMo Supp. 2007 and section 337.050.12, RSMo 2000, the board amends a rule as follows:

20 CSR 2235-7.030 Categories of Continuing Education Programs and Credits **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1589). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2270—Missouri Veterinary Medical Board Chapter 2—Licensure Requirements for Veterinarians

ORDER OF RULEMAKING

By the authority vested in the Missouri Veterinary Medical Board under section 340.210, RSMo 2000 and sections 340.200 and 340.246, RSMo Supp. 2007, the board amends a rule as follows:

20 CSR 2270-2.021 Internship or Veterinary Candidacy Program is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1589–1590). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2270—Missouri Veterinary Medical Board Chapter 4—Minimum Standards

ORDER OF RULEMAKING

By the authority vested in the Missouri Veterinary Medical Board under sections 41.946, 340.210, 340.258, and 340.324, RSMo 2000, the board amends a rule as follows:

20 CSR 2270-4.050 Minimum Standards for Continuing Education for Veterinary Technicians is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on August 15, 2008 (33 MoReg 1590). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

his section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs and other items required to be published in the Missouri Register by law.

Title 7—DEPARTMENT OF TRANSPORTATION Division 10-Missouri Highways and **Transportation Commission Chapter 25—Motor Carrier Operations**

IN ADDITION

7 CSR 10-25.010 Skill Performance Evaluation Certificates for **Commercial Drivers**

PUBLIC NOTICE

Public Notice and Request for Comments on Applications for Issuance of Skill Performance Evaluation Certificates to Intrastate Commercial Drivers with Diabetes Mellitus or Impaired Vision

SUMMARY: This notice publishes MoDOT's receipt of applications for the issuance of Skill Performance Evaluation (SPE) Certificates from individuals who do not meet the physical qualification requirements in the Federal Motor Carrier Safety Regulations for drivers of commercial motor vehicles in Missouri intrastate commerce because of impaired vision or an established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control. If granted, the SPE Certificates will authorize these individuals to qualify as drivers of commercial motor vehicles (CMVs), in intrastate commerce only, without meeting the vision standard prescribed in 49 CFR 391.41(b)(10), if applicable, or the diabetes standard prescribed in 49 CFR 391.41(b)(3).

DATES: Comments must be received at the address stated below on or before December 31, 2008.

ADDRESSES: You may submit comments concerning an applicant, identified by the application number stated below, by any of the following methods:

- Email: Kathy.Hatfield@modot.mo.gov
- Mail: PO Box 893, Jefferson City, MO 65102-0893
- Hand Delivery: 1320 Creek Trail Drive, Jefferson City, MO 65109
- Instructions: All comments submitted must include the agency name and application number for this public notice. For detailed instructions on submitting comments, see the Public Participation heading of the Supplementary Information section of this notice. All comments received will be open and available for public inspection, and MoDOT may publish those comments by any available means.

COMMENTS RECEIVED BECOME MoDOT PUBLIC RECORD

- By submitting any comments to MoDOT, the person authorizes MoDOT to publish those comments by any available means.
- Docket: For access to the department's file, to read background documents or comments received, 1320 Creek Trail Drive, Jefferson City, MO 65109, between 7:30 a.m. and 4:00 p.m., Monday through Friday, except state holidays.

FOR FURTHER INFORMATION CONTACT: Ms. Kathy Hatfield, Motor Carrier Specialist, (573) 522-9001, MoDOT Motor Carrier Services Division, PO Box 893, Jefferson City, MO 651020893. Office hours are from 7:30 a.m. to 4:00 p.m., CT, Monday through Friday, except state holidays.

SUPPLEMENTARY INFORMATION:

Public Participation

If you want us to notify you that we received your comments, please include a self-addressed, stamped envelope or postcard.

Background

The individuals listed in this notice have recently filed applications requesting MoDOT to issue SPE Certificates to exempt them from the physical qualification requirements relating to vision in 49 CFR 391.41(b)(10), or to diabetes in 49 CFR 391.41(b)(3), which otherwise apply to drivers of CMVs in Missouri intrastate commerce.

Under section 622.555, RSMo Supp. 2007, MoDOT may issue a Skill Performance Evaluation Certificate, for not more than a two (2)-year period, if it finds that the applicant has the ability, while operating CMVs, to maintain a level of safety that is equivalent to or greater than the driver qualification standards of 49 CFR 391.41. Upon application, MoDOT may renew an exemption upon expira-

Accordingly, the agency will evaluate the qualifications of each applicant to determine whether issuing a SPE Certificate will comply with the statutory requirements and will achieve the required level of safety. If granted, the SPE Certificate is only applicable to intrastate transportation wholly within Missouri.

Qualifications of Applicants

Application # MP081024045

Applicant's Name & Age: Kevin Eugene Tate, 44

Relevant Physical Condition: Mr. Tate's best-corrected visual acuity in his left eye is 20/20 Snellen and his right eye is 20/400 with or without correction. He has central visual reduction due to a retinal scar that occurred in early childhood.

Relevant Driving Experience: Mr. Tate has driven approximately twenty-six (26) years and has been employed at a solid waste company in the Springfield, Missouri, area the entire time. Drives personal vehicle(s) daily.

Doctor's Opinion & Date: Following an examination in September 2008, his optometrist certified, "In my medical opinion, Mr. Tate's visual deficiency is stable and has sufficient vision to perform the driving tasks required to operate a commercial motor vehicle and that the applicant's condition will not adversely affect his ability to operate a commercial motor vehicle safely."

Traffic Accidents and Violations: No violations and one accident and the driver was not issued a citation within the past three (3) years.

Application # MP080502021

Renewal Applicant's Name & Age: Brandon L. Ferling, 22 Relevant Physical Condition: Mr. Ferling's best uncorrected visual acuity in his left eye is 20/15 Snellen and corrected in his right eye is 20/50 Snellen due to a cataract extraction at the age of 2.

Relevant Driving Experience: He has been employed with a lawn care service based in Columbia, Missouri, just over a year. He has not driven a commercial motor vehicle to date. He has obtained a Class E license and intends to drive pickup trucks for the lawn service and, as experience grows, the company will test him while pulling small trailers. Drives personal vehicle(s) daily.

Doctor's Opinion & Date: Following an examination in March 2008, his opthalmologist certified, "In my medical opinion, Mr. Ferling's visual deficiency is stable and has sufficient vision to perform the driving tasks required to operate a commercial motor vehicle, and that his condition will not adversely affect his ability to operate a commercial motor vehicle safely."

Traffic Accidents and Violations: No accidents or violations within the past three (3) years.

Request for Comments

The Missouri Department of Transportation, Motor Carrier Services Division, pursuant to section 622.555, RSMo, and rule 7 CSR 10-25.010, requests public comment from all interested persons on the applications for issuance of Skill Performance Evaluation Certificates described in this notice. We will consider all comments received before the close of business on the closing date indicated earlier in this notice.

Issued on: November 1, 2008

Jan Skouby, Motor Carrier Services Director, Missouri Department of Transportation.

Title 7—DEPARTMENT OF TRANSPORTATION Division 10—Missouri Highways and Transportation Commission Chapter 25—Motor Carrier Operations

IN ADDITION

7 CSR 10-25.010 Skill Performance Evaluation Certificates for Commercial Drivers

PUBLIC NOTICE

Public Notice and Request for Comments on Applications for Issuance of Skill Performance Evaluation Certificates to Intrastate Commercial Drivers with Diabetes Mellitus or Impaired Vision

SUMMARY: This notice publishes MoDOT's receipt of applications for the issuance of Skill Performance Evaluation (SPE) Certificates from individuals who do not meet the physical qualification requirements in the Federal Motor Carrier Safety Regulations for drivers of commercial motor vehicles in Missouri intrastate commerce because of impaired vision or an established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control. If granted, the SPE Certificates will authorize these individuals to qualify as drivers of commercial motor vehicles (CMVs), in intrastate commerce only, without meeting the vision standard prescribed in 49 CFR 391.41(b)(10), if applicable, or the diabetes standard prescribed in 49 CFR 391.41(b)(3).

DATES: Comments must be received at the address stated below on or before December 31, 2008.

ADDRESSES: You may submit comments concerning an applicant, identified by the application number stated below, by any of the following methods:

- Email: Kathy. Hatfield@modot.mo.gov
- Mail: PO Box 893, Jefferson City, MO 65102-0893
- Hand Delivery: 1320 Creek Trail Drive, Jefferson City, MO 65109

• Instructions: All comments submitted must include the agency name and application number for this public notice. For detailed instructions on submitting comments, see the Public Participation heading of the Supplementary Information section of this notice. All comments received will be open and available for public inspection, and MoDOT may publish those comments by any available means.

COMMENTS RECEIVED BECOME MoDOT PUBLIC RECORD

- By submitting any comments to MoDOT, the person authorizes MoDOT to publish those comments by any available means.
- *Docket*: For access to the department's file, to read background documents or comments received, 1320 Creek Trail Drive, Jefferson City, MO 65109, between 7:30 a.m. and 4:00 p.m., Monday through Friday, except state holidays.

FOR FURTHER INFORMATION CONTACT: Ms. Kathy Hatfield, Motor Carrier Specialist, (573) 522-9001, MoDOT Motor Carrier Services Division, PO Box 893, Jefferson City, MO 65102-0893. Office hours are from 7:30 a.m. to 4:00 p.m., CT, Monday through Friday, except state holidays.

SUPPLEMENTARY INFORMATION:

Public Participation

If you want us to notify you that we received your comments, please include a self-addressed, stamped envelope or postcard.

Background

The individuals listed in this notice have recently filed applications requesting MoDOT to issue SPE Certificates to exempt them from the physical qualification requirements relating to vision in 49 CFR 391.41(b)(10), or to diabetes in 49 CFR 391.41(b)(3), which otherwise apply to drivers of CMVs in Missouri intrastate commerce.

Under section 622.555, RSMo Supp. 2007, MoDOT may issue a Skill Performance Evaluation Certificate, for not more than a two (2)-year period, if it finds that the applicant has the ability, while operating CMVs, to maintain a level of safety that is equivalent to or greater than the driver qualification standards of 49 CFR 391.41. Upon application, MoDOT may renew an exemption upon expiration.

Accordingly, the agency will evaluate the qualifications of each applicant to determine whether issuing a SPE Certificate will comply with the statutory requirements and will achieve the required level of safety. If granted, the SPE Certificate is only applicable to intrastate transportation wholly within Missouri.

Qualifications of Applicants

Application # MP060814035

Applicant's Name & Age: Daniel A. Trejo, 36

Relevant Physical Condition: Mr. Trejo's best-corrected visual acuity in his left eye is 20/20 Snellen and in his right eye is 20/200 Snellen. He has been diagnosed with amblyopia in his right eye. This impairment occurred at infancy.

Relevant Driving Experience: Mr. Trejo has been driving a commercial motor vehicle for the past two (2) years. He has been employed with Enterprise Medical Equipment, St. Louis, Missouri, since 1998. Previous employment has not been related to driving a commercial motor vehicle. He currently has a Class E license. Drives personal vehicle(s) daily.

Doctor's Opinion & Date: Following an examination in October 2008, his optometrist certified, "In my medical opinion, Mr. Trejo's visual deficiency is stable and he is capable of performing the driving tasks required to operate a commercial motor vehicle, and that his condition will not adversely affect his ability to operate a commercial motor vehicle safely."

Traffic Accidents and Violations: No traffic accidents or violations in the past three (3) years.

Request for Comments

The Missouri Department of Transportation, Motor Carrier Services Division, pursuant to section 622.555, RSMo, and rule 7 CSR 10-25.010, requests public comment from all interested persons on the applications for issuance of Skill Performance Evaluation Certificates described in this notice. We will consider all comments received before the close of business on the closing date indicated earlier in this notice.

Issued on: November 1, 2008

Jan Skouby, Motor Carrier Services Director, Missouri Department of Transportation.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES
Division 60—Missouri Health Facilities Review Committee
Chapter 50—Certificate of Need Program

EXPEDITED APPLICATION REVIEW SCHEDULE

The Missouri Health Facilities Review Committee has initiated review of the expedited application listed below. A decision is tentatively scheduled for December 22, 2008. This application is available for public inspection at the address shown below:

Date Filed

Project Number: Project Name City (County) Cost, Description

11/07/08

#4291 RS: Chestnut Glenn Assisted Living St. Peters (St. Charles County) \$1,475,800, Renovate/modernize long-term care facility

11/10/08

#4295 HS: St. John's Mercy Medical Center St. Louis (St. Louis County) \$3,228,700, Replace linear accelerator

Any person wishing to request a public hearing for the purpose of commenting on this application must submit a written request to this effect, which must be received by December 12, 2008. All written requests and comments should be sent to:

Chairman

Missouri Health Facilities Review Committee c/o Certificate of Need Program Post Office Box 570 Jefferson City, MO 65102

For additional information contact Donna Schuessler, (573) 751-6403.

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

December 1, 2008

Vol. 33, No. 23

Division 2245—Real Estate Appraisers Chapter 3—Applications for Certification and Licensure

IN ADDITION

20 CSR 2245-3.005 Trainee Real Estate Appraiser Registration

A proposed rule, 20 CSR 2245-3.005, was published in the *Missouri Register* on January 2, 2007 (32 MoReg 65-68), and a final order of rulemaking was published in the *Missouri Register* on June 1, 2007 (32 MoReg 928). Paragraph (5)(B)1. ended as follows—"This rule does not incorporate any subsequent amendments or additions to the USPAP;" However, when the rule was published in the June 30, 2007, update to the *Code of State Regulations*, this sentence was omitted from the rule. This has been corrected, and the rule with this sentence added appeared correctly in the November 30, 2008, update to the *Code of State Regulations*.

The Secretary of State is required by sections 347.141 and 359.481, RSMo 2000 to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript by email to dissolutions@sos.mo.gov.

NOTICE

Notice is hereby given that DOUBLE TREE MORTGAGE, L.L.C. a Missouri limited liability company, duly organized by the Missouri Secretary of State on March 28, 2003 (the "Company"), has filed with the Missouri Secretary of State Notice of Winding Up for Limited Liability Company effective as of the 8th day of October, 2008. Any person, persons, corporations or other business entities having claims against the Corporation must file the same by stating: a) name; b) address; c) current phone number; d) basis of the claim and e) documentation of the claim within three (3) years from the date of this Notice. The information must be mailed to Mr. Scott H. Malin, Esq., Lathrop & Gage L.C., 7701 Forsyth Blvd., Suite 400, St. Louis, Missouri 63105.

Any claim against the Corporation will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this Notice.

DOUBLE TREE MORTGAGE, L.L.C.

NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND CLAIMANTS AGAINST ACTION RESIDENTIAL ROOFING, LLC

On October 17, 2008, ACTION RESIDENTIAL ROOFING, LLC, a Missouri limited liability company ("Company"), filed its Notice of Winding Up with the Missouri Secretary of State, effective on the filing date.

All persons and organizations must submit to Company, c/o Julie T. Brown, Carnahan, Evans, Cantwell & Brown, P.C., 2805 S. Ingram Mill, Springfield, Missouri 65804, a written summary of any claims against Company, including: 1) claimant's name, address and telephone number; 2) amount of claim; 3) date(s) claim accrued (or will accrue); 4) brief description of the nature of the debt or the basis for the claim; and 5) if the claim is secured, and if so, the collateral used as security.

Because of the dissolution, any claims against Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the last of filing or publication of this Notice.

NOTICE OF DISSOLUTION OF LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND CLAIMANTS AGAINST GENTRY & RIZZO, LLC

On October 28, 2008, Gentry & Rizzo, LLC, a Missouri limited liability company, filed its Notice of Winding Up for limited liability company with the Missouri Secretary of State, effect on the filing date. Dissolution was effective October 28, 2008.

Said company requests that all persons and organizations who have claims against it present them immediately by letter to the company at: Gentry & Rizzo, LLC c/o Michael Rizzo, Esq., 500 NW 44th Ter., Kansas City, Missouri 64116. All claims must include the name, address and telephone number of the claimant; the amount of the claim; the basis for the claim; the date on which the claim arose; and documentation for the claim.

All claims against Gentry & Rizzo, LLC will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

December 1, 2008 Vol. 33, No. 23

Rule Changes Since Update to Code of State Regulations

MISSOURI REGISTER

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*, citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year—30 (2005) and 31 (2006). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable, RUC indicates a rule under consideration, and F indicates future effective date.

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1 CSR 10-15.010	Commissioner of Administration	33 MoReg 1531	33 MoReg 1548	33 MoReg 2243	33 MoReg 1676
1 CSR 15-1.201	Administrative Hearing Commission		33 MoReg 1391	33 MoReg 2243	
1 CSR 15-1.207 1 CSR 15-3.320	Administrative Hearing Commission Administrative Hearing Commission		33 MoReg 1391 33 MoReg 1392	33 MoReg 2243 33 MoReg 2244	
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1 CSR 15-3.380	Administrative Hearing Commission Administrative Hearing Commission		33 MoReg 1392	33 MoReg 2244	
1 CSR 15-3.390	Administrative Hearing Commission		33 MoReg 1394	33 MoReg 2244	
1 CSR 15-3.431	Administrative Hearing Commission		33 MoReg 1394	33 MoReg 2245	
1 CSR 15-3.436	Administrative Hearing Commission		33 MoReg 1395	33 MoReg 2245	
1 CSR 15-3.440	Administrative Hearing Commission		33 MoReg 1395R	33 MoReg 2245R	
1 CSR 15-3.446	Administrative Hearing Commission		33 MoReg 1396	33 MoReg 2245	
1 CSR 15-3.490	Administrative Hearing Commission		33 MoReg 1396	33 MoReg 2245	
1 CSR 20-3.070	Personnel Advisory Board and Division of Personnel		33 MoReg 1703		
1 CSR 20-4.010	Personnel Advisory Board and Division of Personnel		33 MoReg 1704		
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2 CSR 30-1.020	Animal Health		33 MoReg 1221	33 MoReg 2246	
2 CSR 30-10.010	Animal Health		33 MoReg 1397	33 MoReg 2246	
2 CSR 30-11.010	Animal Health	33 MoReg 1534	33 MoReg 1706		
2 CSR 70-11.050	Plant Industries	33 MoReg 1795			
2 CSR 70-40.005	Plant Industries		33 MoReg 1803		22 M D 1102
2 CSR 90-10	Weights and Measures		33 MoReg 2089		33 MoReg 1193
2 CSR 90-10.001 2 CSR 90-10.011	Weights and Measures Weights and Measures	33 MoReg 2081	33 MoReg 2089 33 MoReg 2089		
2 CSR 90-10.012	Weights and Measures	33 MoReg 2082	33 MoReg 2090		
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2 CSR 90-10.014	Weights and Measures		33 MoReg 2091		
2 CSR 90-10.016	Weights and Measures		33 MoReg 2092		
2 CSR 90-10.017	Weights and Measures		33 MoReg 2092R		
2 CSR 90-10.020	Weights and Measures		33 MoReg 2093		
2 CSR 90-10.040	Weights and Measures		33 MoReg 2093		
2 CSR 90-10.100	Weights and Measures		33 MoReg 2094R	22 M.D. 2044	
2 CSR 110-2.010	Office of the Director		33 MoReg 1333	33 MoReg 2044	
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3 CSR 10-4.111	Conservation Commission		33 MoReg 2094		
3 CSR 10-4.113	Conservation Commission		33 MoReg 2094		
3 CSR 10-4.117	Conservation Commission		33 MoReg 2095		
3 CSR 10-5.205	Conservation Commission		33 MoReg 2095		
3 CSR 10-5.215	Conservation Commission		33 MoReg 2097		
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3 CSR 10-5.222	Conservation Commission		33 MoReg 2097		
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3 CSR 10-5.340	Conservation Commission		33 MoReg 2104		
3 CSR 10-5.345	Conservation Commission		33 MoReg 2106		
3 CSR 10-5.351	Conservation Commission		33 MoReg 2108		
3 CSR 10-5.352	Conservation Commission		33 MoReg 2110		
3 CSR 10-5.359	Conservation Commission		33 MoReg 2112		
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3 CSR 10-5.365 3 CSR 10-5.370	Conservation Commission Conservation Commission		33 MoReg 2118		
3 CSR 10-5.375	Conservation Commission		33 MoReg 2120		
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3 CSR 10-5.435	Conservation Commission		33 MoReg 2126		
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3 CSR 10-5.554	Conservation Commission		33 MoReg 2142		
3 CSR 10-5.559	Conservation Commission		33 MoReg 2144		
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3 CSR 10-5.567	Conservation Commission		33 MoReg 2150		
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3 CSR 10-9.110	Conservation Commission		33 MoReg 2166		
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3 CSR 10-11.205	Conservation Commission		33 MoReg 2185		
3 CSR 10-11.210	Conservation Commission		33 MoReg 2186		
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3 CSR 10-11.215			22 MaDag 2107		
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3 CSR 10-12.145	Conservation Commission		33 MoReg 2190		
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4 CSR 85-5.030	Division of Business and Community Service		33 MoReg 1556		
4 CSR 240-18.010	Public Service Commission		33 MoReg 1133	33 MoReg 1907	
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4 CSR 240-31.010	Public Service Commission	33 MoReg 1651	33 MoReg 1660		
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5 CSR 30-261.025	Division of Administrative and Financial Serv		33 MoReg 1946		
5 CSR 80-631.010	Teacher Quality and Urban Education		33 MoReg 1076R	33 MoReg 1907R	
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7 CSR 10-25.010	DEPARTMENT OF TRANSPORTATION Missouri Highways and Transportation Comn	nission			33 MoReg 2051 This Issue
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8 CSR 10-2.020	DEPARTMENT OF LABOR AND INDUS ' Division of Employment Security	TRIAL RELATIONS	33 MoReg 1865		
8 CSR 10-3.010	Division of Employment Security Division of Employment Security		33 MoReg 1710		-
8 CSR 10-4.200	Division of Employment Security		33 MoReg 1660		
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10 CSR 25-3.260	Hazardous Waste Management Commission		33 MoReg 2207		
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12 CSR 10-43.030	Director of Revenue		33 MoReg 2019		
12 CSR 10-103.380	Director of Revenue		33 MoReg 2020R		
12 CSR 30-3.010	State Tax Commission		33 MoReg 2235		
	DEPARTMENT OF SOCIAL SERVICES				
13 CSR 30-4.010	Child Support Enforcement		33 MoReg 1078R	33 MoReg 1754R	
13 CSR 35-71.010	Children's Division (Changed from 13 CSR 40-71.010)	33 MoReg 1651	33 MoReg 1664		
13 CSR 35-71.020	Children's Division	33 MoReg 1653	33 MoReg 1665		
	(Changed from 13 CSR 40-71.020)	· ·	_		
13 CSR 35-71.030	Children's Division	33 MoReg 1654	33 MoReg 1668		
13 CSR 35-71.040	(Changed from 13 CSR 40-71.030) Children's Division	33 MoReg 1655	33 MoReg 1668		
13 CSK 33-71.040	(Changed from 13 CSR 40-71.040)	33 Workeg 1033	33 Moreg 1008		
13 CSR 35-71.045	Children's Division	33 MoReg 1655	33 MoReg 1669		
12 CCD 40 2 200	(Changed from 13 CSR 40-71.045)	22 M.D. 1041	22 M.D 2021		
13 CSR 40-2.390 13 CSR 40-71.010	Family Support Division Family Support Division	33 MoReg 1941 33 MoReg 1651	33 MoReg 2021 33 MoReg 1664		
15 CSR 40 71.010	(Changed to 13 CSR 35-71.010)	33 Workey 1031	33 Workey 1004		
13 CSR 40-71.020	Family Support Division	33 MoReg 1653	33 MoReg 1665		
13 CSR 40-71.030	(Changed to 13 CSR 35-71.020) Family Support Division	33 MoReg 1654	33 MoReg 1668		
13 CSK 40-71.030	(Changed to 13 CSR 35-71.030)	33 Mokeg 1034	33 Mokeg 1008		
13 CSR 40-71.040	Family Support Division	33 MoReg 1655	33 MoReg 1668		
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13 CSR 40-71.045	Family Support Division (Changed to 13 CSR 35-71.045)	33 MoReg 1655	33 MoReg 1669		
13 CSR 70-3.100	MO HealthNet Division		33 MoReg 1671		
13 CSR 70-3.105	MO HealthNet Division		33 MoReg 1671		
13 CSR 70-3.170	MO HealthNet Division	33 MoReg 1380	33 MoReg 785	33 MoReg 1503	
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13 CSR 70-4.120 13 CSR 70-6.010	MO HealthNet Division		33 MoReg 1672		
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13 CSR 70-20.320	MO HealthNet Division	33 MoReg 1856	33 MoReg 1871		
13 CSR 70-25.110 13 CSR 70-26.010	MO HealthNet Division MO HealthNet Division		33 MoReg 1722 33 MoReg 1234	33 MoReg 2046	
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2 CSR 30-11.010 Plant Industries 2 CSR 70-11.050	Large Animal Veterinary Student Loan Program	_	-	
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2 CSR 90-10.012	Registration—Training	.33 MoReg 2082 .	Oct. 25, 2008 .	April 22, 2009
Public Service Cor	Economic Development nmission Definitions	.33 MoReg 1651 .	Aug. 1, 2008 .	Jan. 29, 2009
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	and Transportation Commission Overdimension and Overweight Permits	.33 MoReg 1535 .	Sept. 2, 2008 .	Feb. 28, 2009
•	ent of Mental Health			
9 CSR 10-31.030	Intermediate Care Facility for the Mentally Retarded Federal Reimbursement Allowance	.33 MoReg 1379 .	July 11, 2008	Dec. 28, 2008
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10 CSR 20-7.031 10 CSR 20-7.050	Water Quality Standards			
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11 CSR 40-7.010	Blasting—Licensing, Registration, Notification, Requirements, and Penalties	.33 MoReg 967 .	July 1, 2008 .	Jan. 1, 2009
Missouri Gaming (11 CSR 45-1.090 11 CSR 45-5.053	Commission Definitions Policies			
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11 CSR 45-9.030 11 CSR 45-9.040	Minimum Internal Control Standards Commission Approval of Internal Control System	.This Issue	Nov. 15, 2008 .	May 13, 2009
11 CSR 45-11.020 11 CSR 45-11.050	Deposit Account—Taxes and Fees	.This Issue	Nov. 15, 2008 .	May 13, 2009
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	Annual Adjusted Rate of Interest	.This Issue	Jan. 1, 2009 .	June 29, 2009
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13 CSR 35-71.010 13 CSR 35-71.020	Definitions	-	-	
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13 CSR 35-71.045	Personnel	.33 Mokeg 1633 .	Aug. 4, 2008 .	Jan. 30, 2009

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Family Support Div 13 CSR 40-2.390	Transitional Employment Benefit	33 MoReg 1941	Oct. 3, 2008	March 31, 2009
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13 CSR 70-3.170	Medicaid Managed Care Organization Reimbursement Allowance	33 MoDeg 1380	July 1 2008	Dec 28 2008
13 CSR 70-10.016	Global Per Diem Adjustments to Nursing Facilities and HI Nursing Facility Reimbursement Rates	V	-	
13 CSR 70-10.030	Prospective Reimbursement Plan for Nonstate-Operated			•
13 CSR 70-15.010	Facilities for ICF/MR Services		July 1, 2008	Dec. 28, 2008
	Hospital Services Reimbursement Methodology	33 MoReg 1383		
13 CSR 70-15.110 13 CSR 70-20.320	Federal Reimbursement Allowance (FRA)			
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20 CSR 300-1.100	Unfair Claims Settlement Rates			
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Property and Casu	Examinations	33 MoReg 1388	July 30, 2008	Feb. 26, 2009
20 CSR 500-7.030 20 CSR 500-7.080	•			
Board of Pharmacy 20 CSR 2220-6.040	Administration by Medical Prescription Order	33 MoReg 1069	May 11, 2008	Feb. 18, 2009

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Executive	Subject Matter	Ellad Data	Dublication
Orders	Subject Matter	Filed Date	Publication
	<u>2008</u>		
08-01	Establishes the post of Missouri Poet Laureate	January 8, 2008	33 MoReg 401
08-02	Activates the Missouri State Emergency Operations Plan in the aftermath of	<i>sundary</i> 0, 2000	23 Morag 101
	severe weather that began on January 7, 2008	January 11, 2008	33 MoReg 403
08-03	Activates the state militia in response to the aftermath of severe storms		
	that began on January 7, 2008	January 11, 2008	33 MoReg 405
08-04	Transfers authority of the sexual assault evidentiary kit and exam payment		
	program from the Department of Health and Senior Services to Department	E1 (2000	22 M D (10
00.05	of Public Safety by Type 1 transfer Extends Executive Orders 07.24, 07.26 and 07.20 through March 15, 2008	February 6, 2008	33 MoReg 619
08-05	Extends Executive Orders, 07-34, 07-36 and 07-39 through March 15, 2008 for the purpose of continuing the cleanup efforts in affected communities	Echenomy 11 2009	22 MoDog 621
08-06	Orders and directs the Adjutant General of the state of Missouri, or his	February 11, 2008	33 MoReg 621
00-00	designee, to call and order forthwith into active service such portions of the		
	organized militia as he deems necessary to aid the executive officials of		
	Missouri to protect life and property	February 12, 2008	33 MoReg 623
08-07	Declares that a state of emergency exists in the state of Missouri.	February 12, 2008	33 MoReg 625
08-08	Gives Department of Natural Resources authority to suspend regulations in	<u>*</u>	
	the aftermath of severe weather that began on February 10, 2008	February 20, 2008	33 MoReg 715
08-09	Establishes the Missouri Civil War Sesquicentennial Commission	March 6, 2008	33 MoReg 783
08-10	Declares a state of emergency exists and directs the Missouri State Emergency		
	Operations Plan be activated	March 18, 2008	33 MoReg 895
08-11	Calls organized militia into active service	March 18, 2008	33 MoReg 897
08-12	Authorizes the Department of Natural Resources to temporarily waive or	1 21 2000	22 M P 000
00.12	suspend rules during the period of the emergency	March 21, 2008	33 MoReg 899
08-13	Expands the number of state employees allowed to participate in the Missouri Mentor Initiative	March 27, 2009	22 MaDag 001
08-14	Declares a state of emergency exists and directs the Missouri State Emergency	March 27, 2008	33 MoReg 901
00-14	Operations Plan be activated	April 1, 2008	33 MoReg 903
08-15	Calls organized militia into active service	April 1, 2008	33 MoReg 905
08-17	Extends the declaration of emergency contained in Executive Order 08-14		
	and the terms of Executive Order 08-15	April 29, 2008	33 MoReg 1071
08-18	Authorizes the Department of Natural Resources to temporarily waive or		
	suspend rules during the period of the emergency	May 13, 2008	33 MoReg 1131
08-19	Orders and directs the Adjutant General of the state of Missouri, or his		
	designee, to call and order forthwith into active service such portions of the		
	organized militia as he deems necessary to aid the executive officials of	I 11 2000	22 M D 1220
00.20	Missouri to protect life and property	June 11, 2008	33 MoReg 1329
08-20	Declares a state of emergency exists and directs the Missouri State Emergency Operations Plan be activated	June 11, 2008	33 MoReg 1331
08-21	Authorizes the Department of Natural Resources to temporarily waive or	Julic 11, 2006	33 Mokeg 1331
00 21	suspend rules during the period of the emergency	June 20, 2008	33 MoReg 1389
08-22	Designates members of staff with supervisory authority over selected state	20, 2000	22 110100 1207
	agencies	July 3, 2008	33 MoReg 1543
08-23	Extends the declaration of emergency contained in Executive Order 08-21	July 11, 2008	33 MoReg 1545
08-24	Extends the declaration of emergency contained in Executive Order 08-20		
	and the terms of Executive Order 08-19	July 11, 2008	33 MoReg 1546
08-25	Extends the order contained in Executive Orders 08-21 and 08-23	July 28, 2008	33 MoReg 1658
08-26	Extends the order contained in Executive Orders 08-21, 08-23, and 08-25	August 29, 2008	33 MoReg 1797
08-27	Declares that Missouri will implement the Emergency Management		
	Assistance Compact with Louisiana in evacuating disaster victims	A	22 MaD - 1700
06.36	associated with Hurricane Gustav from that state to the state of Missouri	August 30, 2008	33 MoReg 1799
08-28	Orders and directs the Adjutant General of the state of Missouri, or his		
	designee, to call and order forthwith into active service such portions of the organized militia as he deems necessary to aid the executive officials of		
	Missouri to protect life and property	August 30, 2008	33 MoReg 1801
	Allocate to protect the and property	1105000 50, 2000	33 110100 1001

Transfers the Breath Alcohol Program back to the Department of Health and Senior Services from the Department of Transportation by Type I transfer With the Comparison of the organized militin as he deems necessary to aid the executive officials of the organized militin as he deems necessary to aid the executive officials of Missouri, to protect life and property, and to support civilian authorities that the Missouri State Emergency, exists in the state of Missouri and directs that the Missouri State Emergency Operations Plan he activated September 15, 2008 33 MoReg 1863 24 Advises that state offices will be closed on Friday, November 28, 2008 October 2, 2008 33 MoReg 1863 34 Advises that state offices will be closed on Friday, November 28, 2008 October 2, 2008 33 MoReg 1863 408-33 Advises that state offices will be closed on Friday, December 26, 2008 October 2, 2008 This Issue October 21, 2008 of Missouri citizans during the 2010 Census October 21, 2008 October 2, 2008 Octob	Executive Orders	Subject Matter	Filed Date	Publication
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		schools up to 40 nours annually	April 11, 2007	32 MoReg /5/

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07-15	Gov. Matt Blunt increases the membership of the Mental Health Transformation Working Group from eighteen to twenty-four members	April 23, 2007	32 MoReg 839
07-16	Creates and establishes the Governor's "Crime Laboratory Review Commission" within the Department of Public Safety	June 7, 2007	32 MoReg 1090
07-17	Gov. Matt Blunt activates portions of the Missouri National Guard in response to severe storms and potential flooding	May 7, 2007	32 MoReg 963
07-18	Gov. Matt Blunt declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated in response to severe storms that		
07-19	began May 5 Gov. Matt Blunt authorizes the departments and agencies of the Executive Branch of Missouri state government to adopt a program by which employees may donate a portion of their annual leave benefits to other employees who have experienced personal loss due to the 2007 flood or who have volunteered		32 MoReg 965
	in a flood relief	May 7, 2007	32 MoReg 967
07-20	Gov. Matt Blunt gives the director of the Department of Natural Resources the authority to suspend regulations in the aftermath of a flood emergency	May 7, 2007	32 MoReg 969
07-21	Orders agencies to evaluate the performance of all employees pursuant to the procedures of the Division of Personnel within the Office of Administration and that those evaluations be recorded in the Productivity, Excellence and	•	
07-22	Results for Missouri (PERforM) State Employee Online Appraisal System Declares a State of Emergency and directs the Missouri State Emergency Operations Plan to be activated due to severe weather that began on	July 11, 2007	32 MoReg 1389
	June 4, 2007	July 3, 2007	32 MoReg 1391
07-23	Activates the state militia in response to the aftermath of severe storms that began on June 4, 2007	July 3, 2007	32 MoReg 1393
07-24	Orders the Commissioner of Administration to establish the Missouri Accountability Portal as a free Internet-based tool allowing citizens to view the financial transactions related to the purchase of goods and services and		
07-25	the distribution of funds for state programs Declares that a State of Emergency exists in the State of Missouri and directs	July 11, 2007	32 MoReg 1394
07-26	that the Missouri State Emergency Operations Plan be activated Creates a Director/Administrator level multi-agency task force to address the	August 24, 2007	32 MoReg 1902
07-27	concerns associated with feral hogs Declares a drought alert for the counties of Bolinger, Butler, Cape Girardeau, Carter, Dunklin, Franklin, Iron, Jefferson, Madison, Mississippi, New Madrid, Pemiscot, Perry, Reynolds, Ripley, St. Charles, St. Francois, St. Louis, Ste. Genevieve, Scott, Stoddard, Washington, and Wayne	August 30, 2007 September 7, 2007	32 MoReg 1904 32 MoReg 2035
07-28	The Executive Order denoted 05-16 is hereby rescinded	September 10, 2007	32 MoReg 2037
07-29	Amends the membership and the duties of the Governor's Advisory Council on Aging	September 17, 2007	32 MoReg 2038
07-30	Lists members of staff having supervisory authority over departments,		
07-31	divisions or agencies Creates the Rural High-Speed Internet Access Task Force to deal with the	September 13, 2007	32 MoReg 2041
07-32	lack of high-speed Internet access in rural Missouri communities Declares that state offices will be closed on Friday, November 23, 2007	October 10, 2007 October 23, 2007	32 MoReg 2217 32 MoReg 2339
07 33	Declares that state offices will be closed on Monday December 24, 2007	December 4, 2007	33 MoReg 185
07-34	Declares a state of emergency and directs the Missouri State Emergency Operations Plan to be activated due to severe weather that began on	1, 2007	33 Moreg 103
07-35	December 8, 2007 Activates the state militia in response to the aftermath of severe storms	December 9, 2007	33 MoReg 186
07.26	that began on December 8, 2007	December 9, 2007	33 MoReg 188
07-36	Gives the director of the Department of Natural Resources the authority to suspend regulations in the aftermath of severe weather that began on December 8, 2007	December 10, 2007	33 MoReg 190
Emergency Declaration	Declares an emergency concerning damage to and danger of the Jefferson Street Overpass, also known as State Bridge No. A1308, in Jefferson City and directs the Emergency Declaration to continue	D 1 10 2005	22 M P 102
07-37	until the overpass has been removed and replaced Designates members of staff with supervisory authority over selected state agencies	December 10, 2007	33 MoReg 192
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07-38	Extends Executive Order 07-01 through January 1, 2009	December 29, 2007	33 MoReg 319

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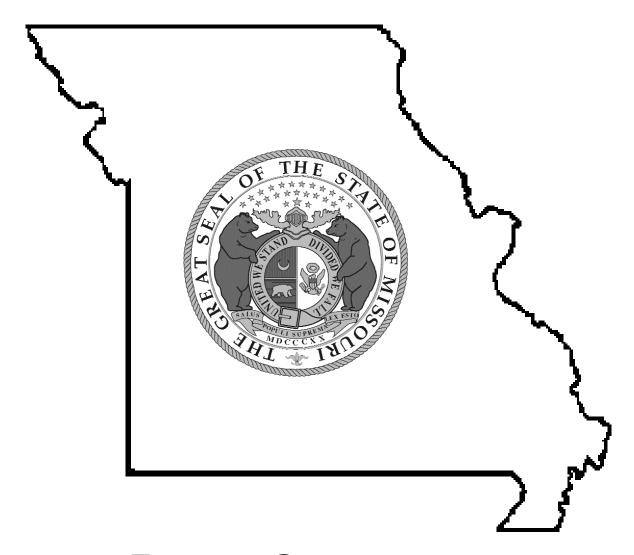
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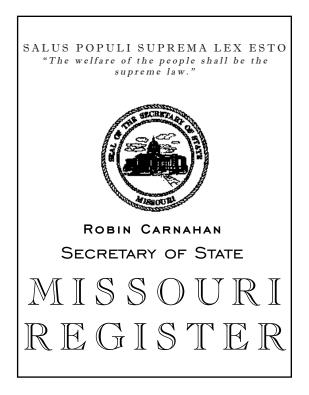


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