

Missouri Department of Health and Senior Services

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Randall W. Williams, MD, FACOG Director

Michael L. Parson Governor

March 20, 2020

As Director of the Missouri Department of Health and Senior Services ("Department"), pursuant to Executive Orders 20-02 and 20-04, I am vested with the authority to temporarily waive or suspend the operation of any statutory requirement or administrative rule, upon approval of the Office of the Governor. After consultation with and receiving approval from the Office of the Governor, I am hereby waiving the following laws in order to assist the state, and its citizens prepare and respond to COVID-19 until May 15, 2020, unless otherwise modified by the Department.

Hospital Licensure Regulations

19 CSR 30-20.015(5), shall be waived, to the extent necessary, for licensed hospitals to submit timely application for relicensure to the Department. The department shall grant an automatic six-month extension of any hospital license scheduled to expire during the declared emergency period.

19 CSR 30-20.015(2), shall be waived, to the extent necessary, for hospitals to establish alternative screening sites and sites of care away from the licensed premises and place inpatients in non-licensed patient care areas, as deemed necessary, so long as the applicable standard of care is met. Such remote sites shall be considered part of the hospital's licensed premises for treatment and billing purposes. The Department shall provide the means by which hospitals will be asked to document the existence and location of alternate screening or treatment sites.

19 CSR 30-20.015(5), shall be waived to the extent necessary for hospitals to exceed their licensed bed capacity. This waiver permits the use of medical or surgical beds for intensive care to be staffed and equipped accordingly.

19 CSR 30-20.030, shall be waived to the extent necessary, related to the applicable construction standards to all alternative screening and treatment sites identified by the hospital. The Department shall provide the means by which hospitals will be asked to document the existence and location of alternate screening or treatment sites.

19 CSR 30-20.050, shall be waived to the extent necessary, to create capacity to treat patients with higher acuities relating to the operation of long-term care units within a hospital: including the use of those beds for care of acute inpatients; the staffing ratio requirements in a designated long-term care unit and resident notification, transfer/discharge requirements.

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Director

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