



Legislative Update

March 26, 2026

The General Assembly returned from spring break this week to a legislative climate as whipsaw as the weather. The House hit the ground running, tackling policy bills before diving into the state budget on Tuesday and Thursday. Meanwhile, the Senate maintained a quieter pace, though it did make steady progress on non-controversial bills, signaling a more productive start than the pre-break session.

In Brief...

- This week, the Missouri Supreme Court ruled 4-3 that the General Assembly holds the constitutional discretion to redraw Congressional districts mid-census. Simultaneously, the Secretary of State issued a preliminary determination that enough signatures were gathered to trigger a referendum on these new maps. This creates a volatile environment for U.S. House candidates, who must now file and campaign in districts that voters may ultimately reject on the August or November ballot.
- The Office of Administration reported that February 2026 net general revenue collections decreased by 2.5% compared to the previous year, though fiscal year-to-date collections remain up by 1.0%.

State Budget Update

The Missouri House has advanced a \$50.3 billion state operating budget for fiscal year 2027, which is approximately \$1.7 billion less than the initial proposal by Governor Mike Kehoe with \$422 million less General Revenue.

While the state expects to collect roughly \$13.7 billion in taxes for the year beginning July 1, the House plan calls for \$15.4 billion in general revenue spending. This creates a \$1.8 billion gap that must be filled by dwindling one-time reserves.

The budget includes significant shifts in funding, such as a \$51.5 million cut to childcare subsidies compared to the governor's request, affecting a program that serves over 27,000 children. Despite these cuts, the House rejected Democratic amendments to restore the funding, with leaders arguing the state must rightsize its spending as pandemic-era federal aid expires. Additionally, the plan allocates \$60 million to the MOScholars voucher program and overhauls higher education funding, all while navigating the long-term impact of tax cuts that have reduced state revenue by an estimated \$3.8 billion annually since 2014.

Floor Activity

[HB 2372](#) was brought to the House floor Wednesday for debate. This 60-page proposal is a comprehensive healthcare omnibus bill containing a wide array of legislative changes. The following summary highlights the key provisions most relevant to clinical practice, patient management, and healthcare operations.

- **Alternative Opioid Options:** The bill mandates insurance coverage for alternatives to opioid drugs to aid in pain management and addiction prevention.
- **Epinephrine Delivery:** It expands the types of authorized delivery devices for epinephrine products, addressing issues like needle phobia to ensure timely administration during emergencies.
- **Ivermectin and Hydroxychloroquine:** New provisions allow pharmacists to dispense ivermectin and hydroxychloroquine over the counter, provided that an established FDA warning label is present.



Legislative Update

- **OTC Drug Sales:** The legislation places new limits on the sale of certain over-the-counter drugs and requires a database to monitor the distribution of pseudoephedrine products.
- **Telehealth and Medicaid:** The bill expands telehealth services and includes a temporary waiver to allow Medicaid coverage for doula services.
- **Vaccine Administration:** It broadens the authority for the administration of certain vaccines and allows the Board of Pharmacy and the Board of Healing Arts to jointly determine which future vaccines pharmacists may administer without a prescription.
- **Individualized Treatments:** Through the "Hope for Missouri Patients Act" amendment, patients with cancer or rare diseases can access cutting-edge, individualized treatments that have not yet received full FDA approval, provided they are administered in approved facilities.
- **Anesthesia Services:** The bill clarifies insurance coverage for anesthetic services while specifying that these rules do not apply to dentists performing anesthesia in-office.
- **Alpha Gal Syndrome Reporting:** Alpha gal syndrome is added to Missouri's reportable condition framework. Labs must report positive tests to the Department of Health and Senior Services within seven days.
- **Long-Term Care Inspections:** New protocols are established for the inspection of long-term care facilities to enhance the protection of the senior population.
- **Clinical Pathology Billing:** The bill ensures that hospital pathologists receive payment for clinical pathology services provided to Medicaid patients, aligning with standard payment practices for other patient types.
- **Mental Health Documentation:** It simplifies the "96-hour hold" process by removing the requirement for a notary on civil detention paperwork.
- **Workplace Violence:** The bill includes measures targeted at reducing workplace violence within hospitals to improve safety for medical staff.

Committee Activity

[HB 3401](#), sponsored by [Representative Brandon Phelps of District 54](#), was presented to the [House Committee on Health and Mental Health](#) on Thursday, to address the escalating issues of violence against healthcare workers. The legislation establishes a proactive framework requiring hospitals to develop and implement comprehensive workplace violence prevention plans, shifting the focus from reaction to active prevention.

Representative Phelps emphasized that the bill is designed with flexibility, allowing individual facilities to tailor their safety approaches based on their specific size, setting, and patient populations while ensuring meaningful safeguards remain in place across the board.



Legislative Update

The necessity for such legislation was underscored by staggering statistics provided during the hearing, noting that healthcare workers are four times more likely to experience serious workplace violence than those in other industries.

The bill received broad support from various medical organizations, including MAFP, as a critical first step toward protecting the safety of those who care for Missourians.

Hearings Next Week

There are no hearings of interest scheduled at this time.

MAFP Bill Report

MAFP is currently tracking several bills on behalf of our members, which are included in the priority legislation report.

Apply to Attend the 2026 AAFP Family Medicine Advocacy Summit – March 31 Deadline

MAFP members are encouraged to apply for the opportunity to attend the AAFP Family Medicine Advocacy Summit in Washington, D.C., June 14-16, 2026. This premier advocacy event brings family physicians together from across the country to strengthen their skills, learn about federal policy issues impacting primary care, and meet with members of Congress to advocate for patients and the specialty of family medicine.

MAFP is committed to supporting physician advocacy and plans to provide financial assistance for selected members to attend, subject to available budget resources. This support helps ensure Missouri family physicians have a strong voice in national policy discussions.

Members who are interested in participating are encouraged to apply by completing the short application form by March 31.

[Apply here: Family Medicine Advocacy Summit Interest – Fill out form](#)

If you've ever considered getting more involved in advocacy, this is an excellent opportunity to learn, connect with colleagues and represent family medicine on Capitol Hill in DC.

2026 Dates of Interest

- April 6 - Easter Holiday
- April 15 - Last Day to Place House Consent Bills on the Senate Calendar
- May 8 - Last Day for Floor Action on Appropriation Bills
- May 15 - Last Day of Session
- September 16 – Veto Session

Questions/Feedback

Contact the MAFP office at (573) 635-0830, office@mo-afp.org, or our governmental consultants:

Randy Scherr | (573) 619-7711 | rjscherr@swllc.us.com
Brian Bernskoetter | (573) 619-6040 | brianb@swllc.us.com