



# Legislative Update

**April 10, 2026**

The Senate concluded a light legislative week and adjourned early on Thursday morning. To date, the Missouri Senate has passed 57 bills to the House. By comparison, at this same point during the previous session, the chamber had passed 66 bills - a figure that was considered a very slow pace even then. We'll see what happens between now and May 15. That's just 5 weeks away...

While the House has moved away from the breakneck speed maintained prior to the legislative spring break, members continued to make progress this week by working through several less controversial bills.

## **In Brief...**

- Missouri's largest supplier of unregulated slot machines announced it will suspend all operations this week following a joint criminal investigation by the U.S. Department of Justice and the state Attorney General. The decision comes after years of legal disputes and a recent federal court ruling that classified the company's devices as illegal gambling machines rather than legal games of skill.

## **State Budget Update**

The Senate Appropriations Committee is slated to meet next week to put their refining touches on the FY 2027 state operation budget. It's expected to see some significant changes to the higher education funding model the House adopted among others when the Committee Substitutes are brought forward.

## **Committee Activity**

[House Joint Resolution 154](#), relating to Medicaid Work Requirements, was heard in the Senate Families, Seniors and Health Committee this week. This joint resolution proposes a constitutional amendment to implement mandatory work requirements for Missouri's Medicaid program. If approved by voters, the measure would require able-bodied adults between the ages of 19 and 65 to participate in at least 80 hours per month of employment, community service, or educational programs to maintain health coverage. During the hearing, proponents argued that the resolution aligns with upcoming federal mandates and would ensure that finite state funds are prioritized for the most vulnerable populations, such as children with special needs. A significant point of discussion involved the funding of the Medicaid expansion population; the sponsor noted that when expansion was originally passed by voters, it failed to identify a specific funding source as required by the constitution. This resolution seeks to provide the state with greater budgetary flexibility by ensuring that those who are capable of working do not "drain" finite resources intended for the most vulnerable. Supporters emphasized that by implementing these requirements, the state could realize substantial savings, estimated at \$300 million in the first year, which could then be redirected to high-priority programs.

Opponents expressed significant concerns regarding the rigid nature of placing these requirements within the state constitution. Testimony from various advocacy groups suggested that the resolution is more restrictive than federal law, specifically by prohibiting the Department of Social Services from offering optional short-term hardship exemptions for individuals facing sudden medical crises, chronic conditions, or natural disasters. Critics also warned that such a "one-size-fits-all" approach could lead to administrative hurdles that cause eligible Missourians to lose their coverage due to paperwork errors rather than a lack of effort to work.



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[Senate Bill 1499](#), designated as the "Food as Medicine Act," seeks to integrate nutritional support directly into Missouri's healthcare delivery system. The legislation directs the Department of Social Services to apply for a federal waiver to provide "food prescriptions" and medically tailored meals to MO HealthNet participants suffering from chronic, diet-related illnesses such as heart disease, diabetes, and obesity. During the committee hearing, the sponsor and various health experts testified that medical treatment alone is often insufficient if a patient returns to a "food desert" where they cannot access the healthy options necessary to manage their condition. The program is designed to treat nutrition as a core component of medical care to improve long-term health outcomes and reduce the overall need for expensive medical interventions.

Testimony in favor of the bill emphasized the long-term cost-effectiveness of preventative nutrition. Representatives from local medical facilities provided data showing that current pilot programs have already led to a dramatic decrease in hospital readmission rates, with some seeing revisits drop to as low as five percent. Witnesses from national health organizations and local food banks also noted that similar initiatives in other states have successfully reduced emergency room visits and overall healthcare spending.

### **Urgent Workforce Issue: Visa Delays Threaten Patient Access**

*Dear MAFP Members,*

*We want to share a recent federal advocacy effort that, while outside the scope of state policy, has meaningful implications for Missouri's physician workforce and patient access to care.*

*A coalition of leading physician organizations recently sent a joint letter to the U.S. Departments of State and Homeland Security highlighting significant delays in visa processing for international medical graduates (IMGs). These delays are preventing some physicians from entering or remaining in the United States, with immediate downstream effects on residency programs, hospitals, and patient care.*

*This issue is particularly important for states like Missouri, where IMGs play a critical role in staffing residency programs and providing care in rural and underserved communities. Delays in onboarding or retaining these physicians can strain an already limited primary care workforce and disrupt continuity of care for patients.*

*[The letter](#) urges federal agencies to expedite visa processing for physicians, establish a national interest exemption for medical trainees and practicing physicians, reduce administrative delays, and improve transparency in immigration decisions. If you feel inclined to engage, we encourage you to participate in the AAFP Speak Out campaign or other federal advocacy opportunities to help elevate the importance of a stable physician workforce and timely access to care.*

*While this is a federal issue, we will continue to monitor developments given the potential impact on access to care across our state.*

*As always, MAFP and AAFP remain committed to advocating for policies that strengthen the family physician workforce and improve access for all Missourians. [You can view the letter here.](#)*



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## 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.

## 2026 Dates of Interest

- 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

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