

Title 19 – HEALTH AND SENIOR SERVICES
Division 10 – Office of the Director
Chapter 10 – Vital Records

PROPOSED RULE

19 CSR 10-10.130 Missouri Adoptee Rights

PURPOSE: This rule provides the process for an adoptee to receive a copy of his or her original birth certificate, the process for a birth parent to state his or her preference regarding whether and how the adoptee can contact him or her, and the process for completion of a medical history form by a birth parent.

- (1) For purposes of this rule only, unless the context clearly indicates otherwise, the following terms mean:
 - (A) “Adoptee”, an adopted person who was born in Missouri and is at least eighteen years of age;
 - (B) “Applicant”, the adoptee or the adoptee’s attorney;
 - (C) “Attorney”, a currently-licensed member of the Missouri Bar or bar of another state of the United States;
 - (D) “Birth parent”, the parent(s) identified on the adoptee’s original birth certificate;
 - (E) “Birth Parent Contact Preference Form”, a form used by a birth parent to indicate his or her preference about contact with the adoptee;
 - (F) “Birth Parent Medical History Form”, a form used by a birth parent to provide his or her medical history information to the adoptee;
 - (G) “Department”, the Missouri Department of Health and Senior Services;
 - (H) “Identifying information”, the name, date of birth, age, race, place of birth, occupation/industry/business and address of the birth parent(s); any part of the child’s name or any other name containing surnames of either birth parent; and informant name;
 - (I) “Intermediary”, the person or agency identified by the birth parent to act as a means of contact between the birth parent and adoptee;
 - (J) “Original birth certificate”, the adoptee’s registered birth certificate sealed upon court order at the time of adoption;
 - (K) “Redact”, to obscure or remove identifying information;
- (2) Birth Parent Contact Preference Form. A birth parent may state his or her preference for contact with the adoptee by completing a Cover Sheet for Birth Parent Contact Preference Form and a Birth Parent Contact Preference Form which are incorporated by reference in this rule as published August 2016 and may be obtained at www.health.mo.gov or by calling (573) 751-6387. This rule does not incorporate any

subsequent amendments or additions. Completed forms may be delivered in person to the Department at 930 Wildwood Drive, Jefferson City, Missouri, or by mail to the Department of Health and Senior Services, P.O. Box 570, Jefferson City, MO 65102.

- (A) A birth parent shall provide to the Department adequate information as requested on the Cover Sheet for Birth Parent Contact Preference Form so that the Department can identify the correct sealed file in which to place the form. A birth parent shall also pay a non-refundable fee for processing the form and searching for the original birth record in an amount equal to the fee for a certified copy of a birth certificate. If the Department is unable to identify the correct sealed file based upon the information provided by the birth parent on the Cover Sheet for Birth Parent Contact Preference Form, the Department shall return the Cover Sheet for Birth Parent Contact Preference Form and the Birth Parent Contact Preference Form to the birth parent.
- (B) A birth parent may change his or her contact preference by completing a new Cover Sheet for Birth Parent Contact Preference Form and Birth Parent Contact Preference Form. A birth parent shall also pay a non-refundable fee for processing the form and searching for the original birth record in an amount equal to the fee for a certified copy of a birth certificate. The forms and fee shall be mailed or delivered to the Department at the address listed in section (2) above. If the Department is unable to identify the correct sealed file based upon the information provided by the birth parent on the Cover Sheet for Birth Parent Contact Preference Form, the Department shall return the Cover Sheet for Birth Parent Contact Preference Form and the Birth Parent Contact Preference Form to the birth parent.
- (C) A birth parent may request that an adoptee contact him or her only through an intermediary, rather than be contacted directly by the adoptee, as indicated by the birth parent on the Birth Parent Contact Preference Form. In this case, the birth parent shall write the name and contact information of the intermediary on the Birth Parent Contact Preference Form.
- (D) If a birth parent has filed a Birth Parent Contact Preference Form with the Department, the Department shall provide a copy of the form to the applicant.
- (E) If a birth parent has filed more than one (1) Birth Parent Contact Preference Form, the Department shall issue a copy of only the most recently dated Birth Parent Contact Preference Form to the applicant.
- (F) The Birth Parent Contact Preference Form issued to the adoptee shall not include the Cover Sheet for Birth Parent Contact Preference Form.
- (G) The Department shall not issue a copy of the original birth certificate to the applicant when:
 - 1. the applicant does not meet the requirements of section 193.125, RSMo, and this rule; or
 - 2. both birth parents have filed a Birth Parent Contact Preference Form indicating that they prefer not to be contacted or prefer contact through an intermediary.

- (H) The Department shall issue a non-certified, unredacted copy of the original birth certificate stamped “For genealogical purposes only—not to be used for establishing identity” upon request to a qualified applicant when:
1. the original birth certificate lists two (2) parents and neither birth parent has filed a Birth Parent Contact Preference Form;
 2. the original birth certificate lists two (2) parents and both birth parents have filed a Birth Parent Contact Preference Form indicating that he/she prefers to be contacted;
 3. the original birth certificate lists two (2) parents and one (1) parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers to be contacted and the other parent has not filed a Birth Parent Contact Preference Form;
 4. the original birth certificate only lists one (1) parent and that parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers to be contacted; or
 5. the original birth certificate only lists one (1) parent and that parent has not filed a Birth Parent Contact Preference Form.
- (I) The Department shall issue a non-certified copy of the original birth certificate stamped “For genealogical purposes only—not to be used for establishing identity” to the applicant with the identifying information redacted for the birth parent who indicated they preferred not to be contacted or preferred to be contacted by an intermediary when:
1. the original birth certificate only lists one (1) parent and that parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers not to be contacted or prefers contact by an intermediary;
 2. the original birth certificate lists two (2) parents and one (1) parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers not to be contacted or prefers contact through an intermediary and the other parent has not filed a Birth Parent Contact Preference Form; or
 3. the original birth certificate lists two (2) parents and one (1) parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers not to be contacted or prefers contact through an intermediary and the other parent has filed a Birth Parent Contact Preference Form indicating that he/she prefers to be contacted.
- (3) Birth Parent Medical History Form. A birth parent may provide or update his or her medical history by completing a Cover Sheet for Birth Parent Medical History Form and a Birth Parent Medical History Form which are incorporated by reference in this rule as published August 2016 and may be obtained at www.health.mo.gov or by calling (573) 751-6387. This rule does not incorporate any subsequent amendments or additions. Completed forms may be delivered in person to the Department at 930

Wildwood Drive, Jefferson City, Missouri, or by mail to the Department of Health and Senior Services, P.O. Box 570, Jefferson City, MO 65102.

- (A) A birth parent shall furnish to the Department adequate information as requested on the Cover Sheet for Birth Parent Medical History Form so that the Department can identify the correct sealed file in which to place the Birth Parent Medical History Form. If the Department is unable to identify the correct sealed file based upon the information provided on the Cover Sheet for Birth Parent Medical History Form, the Department shall return the Cover Sheet for Birth Parent Medical History Form and the Birth Parent Medical History Form to the birth parent.
 - (B) A birth parent may change or update the Birth Parent Medical History Form by completing a new Cover Sheet for Birth Parent Medical History Form and Birth Parent Medical History Form and delivering or mailing the forms to the Department at the address listed in section (3) above.
 - (C) A birth parent shall provide information regarding only him or herself, and his or her blood relatives, such as mother, father, sisters, brothers, grandparents and other biological children on the Birth Parent Medical History Form.
 - (D) If a birth parent has filed more than one (1) Birth Parent Medical History Form, the Department shall release to the applicant a copy of only the most recently dated form.
 - (E) The Department shall not use the information on the Cover Sheet for Birth Parent Medical History Form or Birth Parent Medical History Form for statistical or any other purposes and shall not disclose the information to anyone other than the adoptee or the adoptee's attorney.
 - (F) The copy of the Birth Parent Medical History Form issued to the adoptee shall not include the Cover Sheet for Birth Parent Medical History Form.
- (4) Adoptees born before 1941. An adoptee born before 1941, or the adoptee's attorney, may request a copy of the adoptee's original birth certificate beginning August 28, 2016, by completing an Application for Non-Certified Copy of an Original Birth Certificate form which is incorporated by reference in this rule as published August 2016 and may be obtained at www.health.mo.gov or by calling (573) 751-6387. This rule does not incorporate any subsequent amendments or additions. The application shall include a non-refundable fee in an amount equal to the fee for a certified copy of a birth certificate. Completed forms and fees may be delivered in person to the Department at 930 Wildwood Drive, Jefferson City, Missouri, or by mail to the Department of Health and Senior Services, P.O. Box 570, Jefferson City, MO 65102.
- (A) If the adoptee's attorney submits the Application for Non-Certified Copy of an Original Birth Certificate form, the attorney shall provide the Department with a statement signed by the adoptee or other documentation establishing the attorney's authority to act on behalf of the adoptee.

- (B) The applicant shall furnish to the Department adequate information as requested on the Application for Non-Certified Copy of an Original Birth Certificate form so that the Department can identify the correct sealed file containing the original birth certificate.
 - (C) The Department shall issue copies of the birth certificate as provided in subsections (2)(G)-(I) of this rule. If the Department cannot locate the original birth certificate, the Department shall issue to the applicant a written statement that no record was found.
 - (D) The copy of the original birth certificate issued to the applicant shall be stamped “For genealogical purposes only—not to be used for establishing identity”.
 - (E) If the adoptee’s parent(s) have provided a Birth Parent Contact Preference Form or Birth Parent Medical History Form to the Department, the Department shall provide a copy to the applicant.
- (5) Adoptees born in or after 1941. An adoptee born in or after 1941, or the adoptee’s attorney, may request a copy of the adoptee’s original birth certificate beginning January 1, 2018. To make a request, an applicant shall complete the Application for Non-Certified Copy of an Original Birth Certificate form which is incorporated by reference in this rule as published August 2016 and may be obtained at www.health.mo.gov or by calling (573) 751-6387. This rule does not incorporate any subsequent amendments or additions. The application shall include a non-refundable fee in an amount equal to the fee for a certified copy of a birth certificate. Completed forms and fees may be delivered in person to the Department at 930 Wildwood Drive, Jefferson City, Missouri, or by mail to the Department of Health and Senior Services, P.O. Box 570, Jefferson City, MO 65102.
- (A) If the adoptee’s attorney submits the Application for Non-Certified Copy of an Original Birth Certificate form, the attorney shall provide the Department with a statement signed by the adoptee or other documentation establishing the attorney’s authority to act on behalf of the adoptee.
 - (B) The applicant shall furnish to the Department adequate information as requested on the Application for Non-Certified Copy of an Original Birth Certificate form so that the Department can identify the correct sealed file containing the original birth certificate.
 - (C) The Department shall issue copies of the birth certificate as provided in subsections (2)(G)-(I) of this rule. If the Department cannot locate the original birth certificate, the Department shall issue to the applicant a written statement that no record was found.
 - (D) The copy of the original birth certificate issued to the applicant shall be stamped “For genealogical purposes only—not to be used for establishing identity”.

- (E) If the adoptee's parent(s) have provided a Birth Parent Contact Preference Form or Birth Parent Medical History Form to the Department, the Department shall provide a copy to the applicant.
- (6) Applicants, birth parents, or others shall not send to the Department items other than the forms prescribed by this regulation (e.g., letters, papers, photos, mementos, etc). Any such items sent to the Department shall be discarded.
- (7) The Department shall not issue copies of vital records, including birth, death, marriage or divorce records, for the birth parents to an adoptee.
- (8) The Department shall not amend the adoptee's original birth certificate as defined in this rule.

AUTHORITY: Sections 193.035 and 193.045, RSMo 2000, and section 193.128, RSMo (SCS for HCS for HB1599, 98th General Assembly, Second Regular Session (2016))
Emergency amendment filed August 29, 2016, effective September 8, 2016, expires March 6, 2017.

PUBLIC COST: *state the cost to any state agency or political subdivision (Example: This proposed rule will cost state agencies or political subdivisions three thousand six hundred seventy-eight dollars (\$3,678) in the aggregate.)*

PRIVATE COST: *state the cost to any private entity (Example: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.)*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support or in opposition to this proposed rule with the Missouri Department of Health and Senior Services, Division of Community and Public Health, Harold Kirbey, Division Director, PO Box 570, Jefferson City, MO 65102-0570. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*