



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

|  |                               |                           |   |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER:<br><b>HB 1157</b>   |                               | DATE:<br><b>3/24/2021</b> |   |
| COMMITTEE:<br><b>Pensions</b>  |                               |                           |   |
| <b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES |                               |                           |   |
| <b>WITNESS NAME</b>  |                               |                           |   |
| <b>INDIVIDUAL:</b>   |                               |                           |   |
| WITNESS NAME:<br><b>ARNIE "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>   |                               | PHONE NUMBER:             |   |
| BUSINESS/ORGANIZATION NAME:  |                               | TITLE:                    |   |
| ADDRESS:   |                               |                           |   |
| CITY:  |                               | STATE:                    | ZIP:                                      |
| EMAIL:<br><b>arniedienoff@yahoo.com</b>  | ATTENDANCE:<br><b>Written</b> |                           | SUBMIT DATE:<br><b>3/24/2021 12:35 AM</b> |

**THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.**

**I am in Support of this Bill. I would like to see an Amendment to Offer this Designation to ALL Missouri Counties for fairness.**



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

|  |             |   |                      |
|--|-------------|---|----------------------|
| BILL NUMBER:<br><b>HB 1157</b>   |             | DATE:<br><b>3/24/2021</b>                 |                      |
| COMMITTEE:<br><b>Pensions</b>  |             |   |                      |
| <b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES |             |   |                      |
| <b>WITNESS NAME</b>  |             |   |                      |
| <b>REGISTERED LOBBYIST:</b>  |             |   |                      |
| WITNESS NAME:<br><b>BRENT HEMPHILL</b>   |             | PHONE NUMBER:                             |                      |
| REPRESENTING:<br><b>MISSOURI AMBULANCE ASSOCIATION</b>   |             | TITLE:                                    |                      |
| ADDRESS:<br><b>P.O. BOX 156</b>  |             |   |                      |
| CITY:<br><b>JEFFERSON CITY</b>   |             | STATE:<br><b>MO</b>                       | ZIP:<br><b>65101</b> |
| EMAIL:   | ATTENDANCE: | SUBMIT DATE:<br><b>3/24/2021 12:00 AM</b> |                      |

**THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.**



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

|  |                               |   |                      |
|--|-------------------------------|---|----------------------|
| BILL NUMBER:<br><b>HB 1157</b>   |                               | DATE:<br><b>3/24/2021</b>                 |                      |
| COMMITTEE:<br><b>Pensions</b>  |                               |   |                      |
| <b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES |                               |   |                      |
| <b>WITNESS NAME</b>  |                               |   |                      |
| <b>BUSINESS/ORGANIZATION:</b>  |                               |   |                      |
| WITNESS NAME:<br><b>CHARLES ANDERSON</b>   |                               | PHONE NUMBER:<br><b>573-642-7260</b>      |                      |
| BUSINESS/ORGANIZATION NAME:<br><b>CALLAWAY COUNTY AMBULANCE DISTRICT</b>   |                               | TITLE:<br><b>DIRECTOR</b>                 |                      |
| ADDRESS:<br><b>2614 FAIRWAY DR</b>   |                               |   |                      |
| CITY:<br><b>FULTON</b>   |                               | STATE:<br><b>MO</b>                       | ZIP:<br><b>65251</b> |
| EMAIL:<br><b>info@callawayambulance.org</b>  | ATTENDANCE:<br><b>Written</b> | SUBMIT DATE:<br><b>3/23/2021 10:49 AM</b> |                      |
| <b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>  |                               |   |                      |

My name is Charles Anderson. I am the Director of the Callaway County Ambulance District. The District serves all of Callaway County. Our headquarters located in Fulton. I am submitting this testimony in favor of HB 1157, which modifies provisions relating to the Missouri Local Government Employees' Retirement System to provide for coverage of certain employee classes. Two years ago, the law was changed to allow political subdivisions located in third class counties, by a majority vote of their respective governing body, to cover emergency medical service personnel, emergency telecommunicators, and jailors as public safety personnel members of the LAGERS system, allowing them to retire at age 55 like firefighters and police covered under the LAGERS system. Emergency medical services personnel have a physically demanding job, lifting and moving patients who often weigh in excess of 300 pounds. Injury data from 2017 the most recent year available from NIOSH (<https://www.cdc.gov/niosh/topics/ems/data.html>), showed that emergency medical services personnel suffered 21,200 work-related injuries. Sprains and strains made up 5,700 or 27% of the diagnoses. The upper, including the neck and shoulders, and lower trunk make up 36% of the body parts affected. Over-exertion and bodily reaction are 27% of the contributing events. These injuries often make it difficult for emergency medical employees to be able to work until age 60, but unlike their fire and law enforcement counterparts, they do not have an option to retire at 55. If passed, this bill will only create, in the LAGERS program, an option for the local political subdivision to consider. The law passed two years ago only added this option to third-class counties. Our board would like to consider this option for our employees, but we cannot, as we are in a second-class county. Emergency medical service workers in third-class counties are no different than those in second-class counties, so it seems logical to expand the option to second-class counties. Thank you for your time and consideration of HB 1157. I would appreciate your support.



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

|  |             |   |                      |
|--|-------------|---|----------------------|
| BILL NUMBER:<br><b>HB 1157</b>   |             | DATE:<br><b>3/24/2021</b>                 |                      |
| COMMITTEE:<br><b>Pensions</b>  |             |   |                      |
| <b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES |             |   |                      |
| <b>WITNESS NAME</b>  |             |   |                      |
| <b>BUSINESS/ORGANIZATION:</b>  |             |   |                      |
| WITNESS NAME:<br><b>ELIZABETH ALTHOFF</b>  |             | PHONE NUMBER:<br><b>573-632-6377</b>      |                      |
| BUSINESS/ORGANIZATION NAME:<br><b>MISSOURI LOCAL GOVERNMENT EMPLOYEES RETIREMENT SYSTEM</b>  |             | TITLE:                                    |                      |
| ADDRESS:<br><b>701 WEST MAIN</b>   |             |   |                      |
| CITY:<br><b>JEFFERSON CITY</b>   |             | STATE:<br><b>MO</b>                       | ZIP:<br><b>65102</b> |
| EMAIL:   | ATTENDANCE: | SUBMIT DATE:<br><b>3/24/2021 12:00 AM</b> |                      |
| <b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>  |             |   |                      |