



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1295		DATE: 3/22/2021	
COMMITTEE: Health and Mental Health Policy			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written		SUBMIT DATE: 3/22/2021 2:01 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
I am in Support of this Bill. I look forward to the Recommendations of the Committee			



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHRISTINE M. HOAG-APEL RN, TNS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: cmhoag-apel@freemanhealth.com	ATTENDANCE: Written		SUBMIT DATE: 3/18/2021 7:52 AM
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This document has taken many hours/days, time and effort to complete. Members of hospital trauma centers have been involved working very diligently to complete for presentation.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHRISTY S WARREN		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: cswarren@freemanhealth.com	ATTENDANCE: Written		SUBMIT DATE: 3/18/2021 7:07 AM

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A lot of work as been done updating the language for Time Critical Diagnosis. I fully support Time Critical Diagnosis language presented at this hearing.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: GERARD J. GRIMALDI		PHONE NUMBER: 816-404-5300	
REPRESENTING: TRUMAN MEDICAL CENTERS		TITLE: CHIEF, HEALTH POLICY	
ADDRESS: 2301 HOLMES			
CITY: KANSAS CITY		STATE: MO	ZIP: 64108
EMAIL: gerard.grimaldi@tmcmed.org	ATTENDANCE: Written	SUBMIT DATE: 3/20/2021 1:46 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
Truman Medical Centers supports HB 1295. Thank you for your consideration.			



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JASON WHITE		PHONE NUMBER: 816-215-8524	
BUSINESS/ORGANIZATION NAME: MID-AMERICA REGIONAL COUNCIL		TITLE:	
ADDRESS: 600 BROADWAY			
CITY: KANSAS CITY		STATE: MO	ZIP: 64050
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JESSICA PABST		PHONE NUMBER: 573-690-4553	
REPRESENTING: UNIVERSITY OF MISSOURI HEALTH CARE		TITLE:	
ADDRESS: 217 EAST CAPITOL			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	

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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: KATHI HARNESS		PHONE NUMBER: 573-634-5800	
REPRESENTING: SAINT LUKE's HEALTH SYSTEM		TITLE:	
ADDRESS: PO BOX 2302			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: REESA VANHOOSER		PHONE NUMBER: 573-754-5531	
BUSINESS/ORGANIZATION NAME: PIKE COUNTY MEMORIAL HOSPITAL		TITLE: EMERGENCY DEPARTMENT/EMS DIRECTOR	
ADDRESS: 2305 GEORGIA			
CITY: LOUISIANA		STATE: MO	ZIP: 63353
EMAIL: rvanhooser@pcmhmo.org	ATTENDANCE: Written	SUBMIT DATE: 3/18/2021 10:45 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. Pike County Memorial Hospital is in support of the Time-Critical Diagnosis initiative.			



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SARAH WILLSON		PHONE NUMBER: 573-893-3700	
REPRESENTING: MISSOURI HOSPITAL ASSOCIATION		TITLE:	
ADDRESS: 4712 COUNTRY CLUB DRIVE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JEFFREY COUGHENOUR MD		PHONE NUMBER: 573-239-6803	
BUSINESS/ORGANIZATION NAME: MISSOURI CHAPTER, AMERICAN COLLEGE OF SURGEONS' COMMITTEE ON TRAUMA		TITLE: TRAUMA MEDICAL DIRECTOR, MU HEALTH	
ADDRESS: 4402 CANYATA COURT			
CITY: COLUMBIA		STATE: MO	ZIP: 65203
EMAIL: coughenourj@health.missouri.edu	ATTENDANCE: Written		SUBMIT DATE: 3/22/2021 10:59 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

The current language of HB1295, specifically the sections changing portions of the Time Critical Diagnosis system, fail to further the goal of an inclusive emergency care system. The language put forth is largely the product of the Missouri Hospital Association, and as a result serves hospital-related interests. As a member of the DHSS Director's advisory committee for TCD system development for over two years, we have well-crafted, consensus language that considers hospital issues while keeping THE PATIENT at the center of the system. It also uses recommendations from the 2020 Havron report; a consultant report funded by MHA (current 1295 language uses none of their findings). A group of committee members have communicated with Rep. Andrews directly and would be eager to share this alternative language. In summary, the Missouri Committee on Trauma **STRONGLY OPPOSES** the current language of HB1295 concerning the TCD program, especially 190.257, and recommends incorporation of DHSS advisory committee language specific to 190.100, 190.101, 190.240, 190.241, and 190.242. The PATIENT must remain the focus in on-going efforts to craft a comprehensive, mature emergency care system for the citizens of Missouri. Respectfully submitted, Jeffrey Coughenour MD
FACS



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: KATHERINE PROBST		PHONE NUMBER: 314-591-5192	
BUSINESS/ORGANIZATION NAME: MISSOURI AMBULANCE ASSOCIATION		TITLE: PRESIDENT	
ADDRESS: PO BOX 522			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 64502
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MATTHEW BRANDT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: Brandtmd@sbcglobal.net	ATTENDANCE: Written		SUBMIT DATE: 3/21/2021 10:18 PM
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This bill does nothing to solve the problems identified in the Havron report of 2020, the American College of Surgeons' report of 2009, or the National Highway Transportation Safety Administration's report of 2010 and adds an additional layer of bureaucratic cacophony that will create an obstacle to solutions instead of solving them. As an EMS medical director I long for support from an organized state system that has not been realized and will not be any more likely with this bill. Please do not support this. Help us work for real solutions.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: SABINA BRAITHWAITE, MD, MPH		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: sabina@wustl.edu	ATTENDANCE: In-Person		SUBMIT DATE: 3/17/2021 11:16 PM
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