

BILL NUMBER: HB 398				DATE: <b>3/8/2021</b>
COMMITTEE: Health and Mental	Health Policy			
TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO				
BUSINESS/ORGANIZATION NAME: TITLE:				
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: arniedienoff@yahoo.comATTENDANCE: WrittenSUBMIT DATE: 3/8/2021 12:07 PM				
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				
I am in Spport of this Bill. It is Needed as I thoughty that this was already in place.				



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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: HEIDI N. LUCAS			PHONE NUME 814-883-6	
REPRESENTING: MISSOURI NURSE	S ASSOCIATION		TITLE:	
ADDRESS: 3340 AMERICAN A	VENUE, SUITE F			
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT [ 3/8/202	DATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610, RSMo.



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		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: RON BERRY			PHONE NUME 660-537-2		
REPRESENTING: SERVICE EMPLOY WORKERS	EES INTERNATIONAL	UNION HEALTHCARE	TITLE:		
ADDRESS: PO BOX 722			·		
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65102	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 3/8/2021 12:00 AM	
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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: SHANTEL DOOLIN	IG		PHONE NUME 573-353-3	
REPRESENTING: TITLE: TITLE:				
ADDRESS: 113 MADISON ST				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:ATTENDANCE:SUBMITshantel@msma.orgIn-Person3/8/20			DATE: 21 9:29 AM	
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Missouri State Medical Association believes that Missouri physicians should be able to treat patients in				

Missouri State Medical Association believes that Missouri physicians should be able to treat patients in emergency departments without fear of their own safety. We feel that HB 398 is a step forward in creating a safer work environment for emergency department physicians and staff.



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		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: PHONE NUMBER: 573-634-3415					
REPRESENTING: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS & SURGEONS (MAOPS).					
ADDRESS: 1423 RANDY LANE					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101	
EMAIL: stephen@hahnoda	aniel.com	ATTENDANCE: Written	SUBMIT I 3/8/202	DATE: 2 <b>1 7:42 PM</b>	
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MAOPS is in Support of HB 398 as we believe it would lead to enhanced safety of the physician workplace and would help improve healthcare worker safety.					



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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: BILL ANDERSON			PHONE NUME 573-893-3	
REPRESENTING: TITLE: TITLE:				
ADDRESS: 4712 COUNTRY CI	LUB DRIVE			
CITY: JEFFERSON CITY			STATE: <b>MO</b>	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT [ 3/8/202	DATE: 21 12:00 AM
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	WITNESS NAME			
BUSINESS/ORGANIZATION:				
WITNESS NAME: SUSAN FLANIGAN		PHONE NUMB 573-301-48		
BUSINESS/ORGANIZATION NAME: MISSOURI DEPARTMENT OF MENTAL HEALTH			TITLE: LEGISLATIVE LIAISON	
ADDRESS: 1706 EAST ELM STREET				
CITY: JEFFERSON CITY		STATE: MO	ZIP:	
EMAIL:	ATTENDANCE:	SUBMIT D 3/8/202	DATE: 1 12:00 AM	
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