

### WITNESS APPEARANCE FORM

BILL NUMBER: SB 63				DAT <b>4/2</b>	E: <b>0/2021</b>
COMMITTEE: Veterans				·	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR IN	IFORMATIO	NAL PURPOSES
		WITNESS NAME			
BUSINESS/ORG	ANIZATION:				
WITNESS NAME: AMANDA HARRIS				NE NUMBER: 1-446-6454	
BUSINESS/ORGANIZATIO ST. LOUIS REGION	N NAME: NAL HEALTH COMMISS	SION			REGIONAL
ADDRESS: 1113 MISSISSIPPI	AVE				
CITY: ST LOUIS			STA'		ZIP: <b>63104</b>
EMAIL: aharris@stlrhc.org	J	ATTENDANCE: Written		SUBMIT DATE: 4/20/2021 1:	:08 PM

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

Dear Chairman Griffith and Members of the Veterans Committee, My name is Angela Brown, and on behalf of the St. Louis Regional Health Commission (RHC), I am writing in strong support of SB 63. The RHC is a non-profit organization representing hospital systems, community health centers, non-profits, providers, and patients. Our mission is to improve health care access and health outcomes in the St. Louis region. We ask you to support SB 63 to enhance our state's public health infrastructure and improve the health of Missourians. As you are aware, we are facing an opioid epidemic in Missouri. In 2018, one out of 56 deaths was attributed to opioid-involved overdoes. One strategy to help prevent substance use disorder and overdose is the implementation of a statewide prescription drug monitoring program (PDMP). A PDMP is an important tool for providers to review patients' prescription history and assess the risk of substance use disorder before prescribing new medication. Research demonstrates the effectiveness of PDMPs at improving providers' confidence in prescribing, preventing opioid diversion, and decreasing overall opioid prescriptions. One study of PDMPs in 24 states showed a reduction of more than 30% in the rate of opioid and pain medication prescriptions. In some cases, comprehensive PDMPs have also been associated with reductions in opioid-related deaths. Missouri is the only state in the country without a statewide PDMP. We have a piecemealed system, and many opioid prescriptions remain unmonitored. This disjointed approach weakens local and statewide efforts to improve public health. SB 63 would create a coordinated monitoring program and could save lives. The RHC supports that SB 63 outlines the PDMP as a tool for public health, rather than a tool managed and utilized by law enforcement. We share the goal of putting patient health and safety first. We encourage you to support SB 63 to improve our state's ability to prevent and treat substance use disorder. Thank you for your time and consideration. Angela Brown, CEOSt. Louis **Regional Health Commission** 



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES	
		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: BJ TANKSLEY			PHONE NUME <b>573-893-1</b> 4		
REPRESENTING: MISSOURI FARM I	BUREAU		TITLE:		
ADDRESS: 701 SOUTH COUNTRY CLUB DRIVE					
CITY: JEFFERSON CITY			STATE: MO	ZIP: <b>65102</b>	
EMAIL:		ATTENDANCE:	SUBMIT 0 4/20/20	DATE: 121 12:00 AM	
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BILL NUMBER: SB 63		DA' <b>4/2</b>	TE: 2 <b>0/2021</b>
COMMITTEE: Veterans		·	
<b>TESTIFYING</b> : <b>☑</b> IN SUPPORT OF	☐ IN OPPOSITION TO ☐ FO	OR INFORMATIO	NAL PURPOSES
	WITNESS NAME		
REGISTERED LOBBYIST:			
WITNESS NAME: DAVID JACKSON		PHONE NUMBER: <b>314-406-2933</b>	
REPRESENTING: MISSOURI SOCIETY OF ANETHESILOGISMISSOURI AMBULATORY SURGERY CENTRESELOGIS, SIGNATURE MEDICAMISSOURI DERMATOLOGICAL SOCIETY	TER ASSOCIATES,	TITLE:	
ADDRESS: P.O. BOX 1865	•		
CITY: JEFFERSON CITY		STATE: <b>MO</b>	ZIP: <b>65102</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/20/2021 1	2:00 AM
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TESTIFYING:	<b>☑</b> IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: EMMA SHANKLAN	ND		PHONE NUME <b>816-377-8</b> 9	
BUSINESS/ORGANIZATIO KCMO HEALTH CO				IONER, HEALTH ND ADVOCACY CO-
ADDRESS: 2400 TROOST AVE	Ē		·	
CITY: KANSAS CITY			STATE: MO	ZIP: <b>64106</b>
EMAIL: elshankland@gma	ail.com	ATTENDANCE: Written	SUBMIT D 4/20/20	DATE: 1 <b>21 6:38 PM</b>
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The Kansas City Missouri Health Commission supports implementation of a statewide PDMP.



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		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: HEIDI GEISBUHLE	R SUTHERLAND		PHONE NUMB <b>573-636-5</b> 2		
REPRESENTING: MISSOURI STATE	MEDICAL ASSOCIATION	ON	TITLE:		
ADDRESS: 113 MADISON STREET					
CITY: JEFFERSON CITY			STATE: MO	ZIP: <b>65101</b>	
EMAIL:		ATTENDANCE:	SUBMIT D 4/20/20	OATE: 21 12:00 AM	
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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: HENRIO THELEMA	AQUE		PHONE NUME 678-799-4	
REPRESENTING: MISSOURI PHARM ASSOCIATION	IACY ASSOCIATION; MI	SSOURI RETAILERS	TITLE: LOBBYIS	Т
ADDRESS: 1022 WESTWOOD	DR			
CITY: JEFFERSON CITY			STATE: MO	ZIP: <b>65109</b>
EMAIL: henrio@ttglobby.c	om	ATTENDANCE: In-Person	SUBMIT 0 4/20/20	DATE: 121 6:27 PM
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We support the Senators effort in trying to pass this bill.



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	WITNESS NAME		
REGISTERED LOBBYIST:			
WITNESS NAME: JESSICA PETRIE		PHONE NUMB <b>573-635-6</b> 0	
REPRESENTING: MISSOURI ASSOCIATION OF RURAL HEAL HEALTHCARE; COX HEALTH; NATIONAL A WORKERS		TITLE:	
ADDRESS: PO BOX 1805			
CITY: JEFFERSON CITY		STATE: MO	ZIP: <b>65109</b>
EMAIL: jessica@wintonpolicygroup.com	ATTENDANCE: In-Person	SUBMIT D 4/20/20	OATE: <b>21 6:32 PM</b>
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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: JIM GWINNER			PHONE NUMB 314-791-27	
REPRESENTING: APPRISS HEALTH	ļ		TITLE: REGISTER	RED LOBBYIST
ADDRESS: 400 CHESTERFIEI	_D CENTER			
CITY: CHESTERFIELD			STATE: MO	ZIP: <b>63017</b>
EMAIL: jgwinner@ls2grou	ıp.com	ATTENDANCE: Written	SUBMIT D 4/20/20	ATE: 21 3:00 PM

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

Appriss Health PDMP Experience and InsightsAppriss Health provides the nation's most comprehensive prescription drug monitoring program (PDMP) solutions for opioid stewardship. Through our years of experience with partnerships across 44 unique PDMPs, we fully understand that no two states are alike. We offer unmatched experience and commitment to custom solutions and services that meet each state's unique needs. Appriss Health's advanced analytics, real-time clinical decision support, and critical insights and interventions support more than 1.35 million physicians, pharmacists, and care team members across hundreds of millions of patient encounters each year. Our solutions have demonstrated leadership and continued support of state PDMP innovations designed to maximize the effectiveness of the PDMP for its users. We support the mission of the State of Missouri to establish a state based Prescription Drug Monitoring Program. Appriss has more than 22 years of experience providing scalable, secure, web-based solutions in highly sensitive areas such as public safety, criminal justice, regulatory compliance, and the insurance and healthcare sectors. We were founded on the belief that having timely access to accurate information can help clinicians improve patient care and patient safety. As responsible leaders in this market, we have assembled a team with deep technical and clinical expertise, including physicians, pharmacists, and nurses, to innovate and enhance our solutions to deliver on this mission, ensuring that we get the right information in front of the right clinicians, at the right time, and in the right place. As the opioid epidemic evolves, so too does our focus on expanding our capabilities and continuing to develop new technologies that can adapt and be rapidly deployed. State based Prescription Drug Monitoring Programs are delivering effective and secure solutions to support the needs of authorized healthcare providers and most importantly, patients. Some examples of state innovation includes: • Ability to include clinical tools such as clinical alerts, intuitive data graphs, peer-to-peer messaging and ability to transition patients in need to the appropriate treatment from within the PDMP. The clinical tools enable prescribers and pharmacists to better evaluate PDMP reports and patient substance use disorder risks. Increased usage and access to the PDMP via our secure PDMP integration protocol. Through the protocol and support provided by Appriss, states realize a 6-8 fold increase in PDMP queries while significantly Positive impact toward state public health outcomes, improving user satisfaction. something that no other vendor is able to claim or demonstrate. States that have adopted our solutions have realized significant reductions in narcotic prescribing, reductions in the share of the population filling narcotic prescriptions, increases in patients receiving buprenorphine for opioid use disorder, and reductions in the percent of patients with an Overdose Risk Score in the highest category, based on Appriss predictive modeling. Recognizing the unique needs of each state, Appriss has developed highly configurable system that provides the flexibility to meet those needs and enable states to have a system that supports their program and goals. At the same time, the Software as a

Service (SaaS) platform and its architecture allow every state to benefit from the innovations contributed by all other states in the user community. The number of programs that have provided input to the design of Appriss Health solutions as well as the ability to participate in the Appriss Health PDMP Advisory Committee provide both a platform that is unmatched in its features and power, and a unique and unmatched experience for Appriss Health customers to learn from each other and collaborate on program innovations. Such a model strikes the ideal balance between a lower total cost of ownership while providing the flexibility to evolve the solution to fit the unique public health needs of Missouri. Only Appriss Health provides the years of experience and breadth of customer interaction and participation to deliver it. Designed around needs of PDMP users Appriss Health's turnkey PMP AWARXE solution is a HIPAA-compliant system built from the ground up, with direct design input from current and former PDMP administrators, to deliver the most comprehensive platform for opioid stewardship. Feature Benefits to the State of New Hampshire1 Data collection, processing, and management system High quality and integrity of prescription data2 Sophisticated patient-linking algorithms Best-in-class identity resolution capabilities through the ApprissID patient-matching engine3 Intuitive and adaptive user interface and easy-to-use system for users4 Improved administrator platform Streamlines important workflows and provides clear visibility into key operating metrics5 **Business intelligence** Easy-to-use tools that allow administrators to build ad hoc reports, perform advanced solution analytics, and export data for use in other tools and settings6 Scalable infrastructure scalable infrastructure proven to support tens of millions of transactions each month? Interstate data sharing Out-of-the-box integration with PMP InterConnect with the ability to add connections to other data sharing methods and hubs such as RxCheck 8 Integration capabilities The leader in integrating PDMP data with connections to over 130 health IT platforms (EHRs and pharmacy management systems) and 18 HIEs to foster better utilization of PDMP data at the point of care.St. Louis County PDMP - Program and Security OverviewSince April 2017, the St. Louis County PDMP has adopted PMP AWARXE. The PMP AWARXE platform, chosen by 43 PDMPs, is an industry leading complete PDMP solution. PMP AWARXE is a highly configurable system that can ensure the highest data quality, stringent security and privacy options, out-of-the-box interoperability capabilities, and the lowest total cost of ownership. St. Louis County follows strict guidelines to ensure access to PDMP data is restricted to only authorized recipients as defined within St. Louis County Ordinance No. 26352. Compliant with HIPAA & State Regulatory Requirements The St. Louis County PMP AWARXE platform is HIPAA-compliant and engineered to meet all regulatory data requirements, including data formatting, security, and notification. The technology provider of PMP AWARXE utilizes the standards required by HIPAA and HITECH using the NIST 800-53 framework to create the security model that is used across a broad Healthcare ecosystem. PMP AWARxE undergoes internal and?third-party?security assessments to identify risks to systems and data. By implementing security controls at multiple levels and by having outside experts evaluate controls, the St. Louis County PMP is able to confidently rely on a compliant PMP solution with robust security and operational soundness for managing Health data systems.?St. Louis County PMP Vendor Security Controls • SOC2 and SOC2 Type 2 Compliant • HITRUST Certified• Employs centrally managed malicious code protection mechanisms on servers to detect and eradicate malicious code, including nonsignature-based malicious code· Utilizes web application firewalls (WAF) to control traffic with blocking capabilities based on decrypted traffic analysis. Run scans performed by a certified security professional (CISSP or Certified Ethical Hacker) on operating systems, infrastructure, and web applications for vulnerabilities on both a monthly basis and when new vulnerabilities are identified and reported that can potentially affect the system/applications. **Employs an accredited independent** assessor to scan operating systems, infrastructure, and web applications on an annual basis Application Identification and Authentication Policy? All users of the St. Louis County PMP system are uniquely identified. External users and administrative accounts are provisioned a unique ID when they onboard to the system. Account onboarding processes are established to ensure proper identity proofing and account issuance.? Authorized users login to a web portal using their unique username and password. For More Information Natalie Browning, Senior Director of Client Relationships 502-815-

5639 · nbrowning@apprisshealth.com



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TESTIFYING: VIN SUPI	PORT OF IN OPPOSI	TION TO FOR	INFORMATION	NAL PURPOSES
	WITNESS N	AME		
REGISTERED LOBBYIST:				
WITNESS NAME: KARA CORCHES			HONE NUMBER: 73-634-3511	
REPRESENTING: MISSOURI CHAMBER OF COMMERCE AND INDUSTRY DIRECTOR OF LEGISLATIVE AFFAIRS				
ADDRESS: 428 E. CAPITOL AVE.				
CITY: <b>JEFFERSON CITY</b>			TATE:	ZIP: <b>65101</b>
EMAIL: kcorches@mochamber.com	ATTENDANCE: Written		SUBMIT DATE: 4/19/2021 10	:46 AM

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

The Missouri Chamber supports SB 63 (Rehder) that would establish the Joint Oversight Task Force of Prescription Drug Monitoring. We have a longstanding policy position to support a statewide prescription drug monitoring program. A statewide effort, as created in this bill, will help to combat the opioid epidemic and control rising health care costs that are associated with prescription drug abuse. Health care costs are a top concern for Missouri's employers; this bill would be a tool to utilize to help address that concern. We applaud Senator Rehder for her continued leadership on this issue.



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COMMITTEE: Veterans				•	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR IN	NFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: KENDALL MARTIN	NEZ-WRIGHT		PHC	ONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITL	.E:	
ADDRESS:			·		
CITY:			STA	TE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: <b>4/20/2021 1</b>	2:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: KYNA IMAN			PHONE NUME 314-651-1	
REPRESENTING: MISSOURI NURSE	S ASSOCIATION		TITLE:	
ADDRESS: P.O. BOX 1483				
CITY: JEFFERSON CITY			STATE: MO	ZIP: <b>65102</b>
EMAIL:		ATTENDANCE:	SUBMIT D 4/20/20	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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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: MATT MORROW			PHONE NUM <b>417-862-5</b>	
BUSINESS/ORGANIZATION SPRINGFIELD ARE	N NAME: EA CHAMBER OF COM	MERCE	TITLE: PRESIDE	NT AND CEO
ADDRESS: 202 S. JOHN Q. HAMMONS PARKWAY				
CITY: SPRINGFIELD			STATE: <b>MO</b>	ZIP: <b>65806</b>
EMAIL: Imustoe@springfie	eldchamber.com	ATTENDANCE: Written	SUBMIT I 4/20/20	DATE: 021 9:46 AM

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

Dear Chairman Griffith and members of the House Committee on Veterans:On behalf of the Springfield Area Chamber of Commerce and our over 1500-member businesses, please accept this letter of support for Senate Bill 63.Currently, Missouri is the only state in the country that does not have a statewide prescription drug monitoring program (PDMP). Establishing a comprehensive PDMP that allows doctors and pharmacists to track prescriptions is essential to improving the health and safety of our citizens.In Springfield, opioid addiction and abuse continues to be an issue for our community, and the implementation of a PDMP could be beneficial to the well-being of our citizens and businesses. Opioid abuse has a direct impact on the region's workforce. We hear from employers about the impact that opioid abuse has had on various industries and how this could be in addressed, in part, by a PDMP. The passage of this bill is an important step in combating the opioid crisis in our state, and helping employers address their number one need – finding qualified workers to fill available jobs. We encourage you to support SB 63. Sincerely,Matt MorrowPresident and CEO,Springfield Area Chamber of Commerce202 S John Q Hammons ParkwaySpringfield, MO 65806



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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: RANDY SCHERR			PHONE NUME <b>573-636-6</b> 2	
,	CADEMY OF FAMILY P	HYSICIANS; MISSOURI ; PHRMA	TITLE:	
ADDRESS: 101 E. HIGH				
CITY: JEFFERSON CITY			STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL: rjscherr@swllc.us	.com	ATTENDANCE: Written	SUBMIT 0 4/20/20	DATE: 121 5:34 PM
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TESTIFYING: ☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORMA	TIONAL PURPOSES	
	WITNESS NAME			
REGISTERED LOBBYIST:				
WITNESS NAME: RAY MCCARTY		PHONE NUMBE 573-634-22		
REPRESENTING: TITLE: ASSOCIATED INDUSTRIES OF MISSOURI PRESID			T/CEO	
ADDRESS: 3234 W TRUMAN BLVD				
CITY: JEFFERSON CITY		STATE: MO	ZIP: <b>65109</b>	
EMAIL: rmccarty@aimo.com	ATTENDANCE: Written	SUBMIT DA 4/19/202	ATE: 21 7:23 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. A statewide prescription drug monitoring program may help reduce accidental and intentional overprescription of drugs that may be abused by employees; therefore, Associated Industries of Missouri

supports the bill.



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		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: SHANNON COOPE	ER		PHONE NUMI	BER:	
		COMMERCE, CITY OF OF ST. LOUIS AND KANS	AS TITLE:		
ADDRESS:					
CITY:			STATE: MO	ZIP:	
EMAIL:		ATTENDANCE:	SUBMIT I <b>4/20/2</b> (	DATE: 121 12:00 AM	
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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: STEPHEN NITTLEI	R		PHONE NUME <b>573-864-3</b> 3	
REPRESENTING: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS (MAOPS).			TITLE: REGISTER	RED LOBBYIST
ADDRESS: 1201 OLD 63 S AP	T 104			
CITY: COLUMBIA			STATE: <b>MO</b>	ZIP: <b>65201</b>
EMAIL: stephen@hahnoda	aniel.com	ATTENDANCE: In-Person	SUBMIT 0 4/20/20	DATE: <b>21 5:35 PM</b>
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MAOPS supports SB 63, as we support a PDMP that is non-punitive to physicians and allows use as a tool for patient care and appropriate care management.



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		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ARNIE C. "HONES	ST-ABE" DIENOFF-STA	TE PUBLIC ADVOCAT	PHONE NUM	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: arniedienoff@yah	oo.com	ATTENDANCE: Written	SUBMIT I 4/20/20	DATE: <b>)21 2:15 PM</b>
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I am Opposed to this Bill. This Violates every Missourians "Health Insurance Portability and Accountability Act "(H.I.P.A.A.)



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		WITNESS NAME		
REGISTERED L	OBBYIST:			
WITNESS NAME: BEV EHLEN			PHONE NUME 314-608-0	
REPRESENTING: CONCERNED WO COMMITTEE	MEN FOR AMERICA LE	GISLATIVE ACTION	TITLE:	
ADDRESS: P.O. BOX 1352				
CITY: ST. PETERS			STATE: MO	ZIP: <b>63376</b>
EMAIL:		ATTENDANCE:	SUBMIT 0 4/20/20	DATE: 121 12:00 AM
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		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: JOHN D. LILLY			PHONE NU	IMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:		T DATE: 2021 12	2:00 AM
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	WITNESS NAME			
INDIVIDUAL:				
WITNESS NAME: KAREN COOKSEY		PHONE NUMBER	₹:	
BUSINESS/ORGANIZATION NAME: TITLE:				
ADDRESS:				
CITY:		STATE:	ZIP:	
EMAIL: kacresume13@yahoo.com	ATTENDANCE: Written	SUBMIT DA 4/19/202	TE: 1 3:36 PM	

### THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. Dear Representative. Can Missouri Chronic Pain Patients trust you with our lives? Please see attached

my journey in pain and the Missouri PDMP. Here is a bullet list on what needs to happen to ensure we Flag TRUE Chronic Pain Patients. Note: I heard are given a safe path to adequate care. discussion on the Senate floor March 29th but they were discussing palliative or hospice care. Without a doubt that should be in the approved bucket but there are tens of thousands of us in Missouri who are in maintenance mode with care. How long do we have to stay in specialty care as in Pain Management? There comes a time we only need medications to maintain our pain in life. • Notification Have swift recourse on of flags so we can take actions to have the error removed immediately. false flags. False flags are in place for 6 months and it can lead to very grave health issues such as strokes and/or heart attacks from untreated pain. It prevents us from critical & timely care being denied by pain management doctors. New patients, current patients who experience a change in care and urgent evaluation and pain management from the offset such as after care for intrusive surgery. These are serious issues for pain patient's state wide. We are denied when flagged. find a good pain management doctor without being flagged as POSSIBLE DOCTOR SHOPPER or change harmful pharmacies blocking us from our medications without being flagged POSSIBLE PHARMACY SHOPPER. If we experience bias towards our treatment, we should have the constitutional right to seek better care. That was taken from us. Between Executive Order 17-18 and the PDMP, our conduit to sustainable, ongoing chronic pain treatment is very stressful, frightening and highly compromising. The monster created is a smaller pool of pain management doctors who "review" your file for "acceptance" vs. a referral from your Primary Care Doctor and straight in. Now, we have to gather ALL our records, bring them in and wait, sometimes weeks just to figure out you were denied. No one follows up & makes a call saying you were denied and why; we have to start all over with no sense of urgency. The doctor's office calls you 2 to 3 weeks from the initial call to state "The doctor has reviewed your file and he is accepting you as a patient". They have enough patients and are full now. They deny for being flagged but also for maintenance mode because the injections and procedures is where the money is at. It IS that simple. I was denied by a false flag and it cost me dearly. I called 7 doctors trying to get in within a 50 mile radius. I am insistent ALL my Republican Party representatives across the state uphold our State Constitution for their Missouri constituents who are Chronic Pain Patients. I demand that this PDMP Bill be killed at the Veteran Committee and stopped due to false flags causing irreversible and deadly damage to Chronic Pain Patients. Thank you for your time and consideration. Please see attached. Karen Cooksey 314-681-4351



BILL NUMBER: SB 63				DATE: 4/20/2021
COMMITTEE: Veterans				
TESTIFYING:	☐IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	MATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MARY CREMER			PHONE NUM	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 4/20/2	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	D UNDER CHA	APTER 610, RSMo.



### WITNESS APPEARANCE FORM

BILL NUMBER: SB 63			ATE: <b>/20/2021</b>	
COMMITTEE: Veterans		•		
<b>TESTIFYING:</b> □IN SUPPORT OF	✓ IN OPPOSITION TO	FOR INFORMATI	ONAL PURPOSES	
	WITNESS NAME			
INDIVIDUAL:				
WITNESS NAME: PHONE NUMBER: MARY R. BYRNE, ED.D.				
BUSINESS/ORGANIZATION NAME:		TITLE:		
ADDRESS:		•		
CITY:		STATE:	ZIP:	
EMAIL: mary.byrne53@att.net	ATTENDANCE: In-Person	SUBMIT DATE 4/20/2021	7:08 AM	

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

My name is Dr. Mary Byrne and I am here to speak in opposition to SB 63. SB 63 is designed to establish a prescription drug monitoring program that will collect patient dispensation information for prescribed Schedule II, III, or IV controlled substances. In addition to pain medication that might be prescribed to minors for acute pain. Schedule II drugs include Ritalin and Adderall, which are commonly prescribed for children with attention deficit disorder. The concern is that children may be penalized later in life by the merging of this personally identifiable medical information in a permanent record with education and labor data as described in Missouri's 2010 Race to the Top grant application. The primary reason for opposing the establishment of a state-funded PDMP is that the "official story" given by the federal government for funding state-managed PDMPs is that it will reduce deaths associated with abuse of, and addition to, prescription opioids. That rationale, however, is not supported by available data about opioid-related deaths in Missouri; but, an August 2020 article published in the Journal of the Missouri State Medical Association written by three Missouri researchers at the University of Missouri-Columbia Health Sciences Center, Missouri University of Science and Technology, and the St. Louis University School of Medicine concluded that, "synthetic opioids arriving from China are primarily responsible for fatal narcotic overdoses in Missouri.... The majority of these overdoses occurred in black males, with 90% of these deaths associated with fentanyl." They described how China smuggles illicit fentanyl into the U.S. through the postal service by diverting it through another country. Nor is narrative about prescription drugs causing the current opioid epidemic consistent with information from a St. Louis County executive, the American Medical Association, and a practicing Missouri physician. For example, St. Louis County Executive Steve Stenger wrote in a press release, "Data consistently shows that the overwhelming majority of prescribers are not in violation of the law in their prescribing, and enforcement efforts will have limited impact. Some statewide programs in the 1990's attempted to focus on providers as the source of opiate addiction and all have failed to produce reductions in the opioid crisis [emphasis added]. These systems were replaced with PDMPs that provide information at the point of care. American Medical Association released a statement to the CDC on June 16, 2020, stating, "The nation no longer has a prescription opioid-driven epidemic." Currently, there are two PDMPs in Missouri, the St. Louis County PDMP and the Greitens-authorized DHSS PDMP, that have been operational since 2017. Despite the existence of two PDMPs, the incidence of opioid-related deaths increased by 33% the following year. China's plan to target the U.S. by pumping illicit drugs into the country as a method of non-military warfare is described in a 1999 book entitled, Unrestricted Warfare. Continuing the false narrative that monitoring prescriptions of American doctors will mitigate the opioid crisis diverts attention and resources away from the true source of the problem - dealers, not doctors. The unpublicized propose of the PDMP is to expand government run health care, that is, socialized medicine. The St. Louis Co. PDMP is 100% funded by the DOJ and CDC. The purpose is to, "Monitor

prescribing rates over time, will be monitoring changes in prescribing behavior with prescribing summaries (report cards)." Interstate data sharing is conducted among MO, AR, AZ, CO, DE, IL, IA, KS, KY, NC, OH, OK, SC, and TN, As the PDMP administrator, St, Louis County has signed the memorandum of understanding to participate in PMP InterConnect on behalf of all participating jurisdictions. As members of the Veterans Committee, you'll be interested to know that the Veterans Administration is a required transmitter. There's something contradictory about mandating that patient information belonging to a Missouri veteran who took an oath "to support and defend the Constitution of the United States against all enemies, foreign and domestic," including the right to privacy implied in the 14th Amendment, be accessible to others without the knowledge or consent of the veteran. The St. Louis Co. PDMP is not designed to address the real cause of the current opioid crisis - illicit drugs coming from foreign countries into St. Louis -- but to surveil doctor behaviors for alignment with federal prescribing standards so as to standardize medical practice. Currently, the DHSS PDMP is funded by a \$5 million dollar grant that stipulates the categories of patient data collected and shared with the CDC. It too, is a surveillance tool, but for research purposes.SB 63 authorizes the joint oversight task force it creates to apply for and accept "any available federal money or other grants to develop and maintain the program." Federal funding means the data collected and the methods of managing it will be dictated by the conditions of the grant award - not necessarily the care of the individual patient. Furthermore, an agenda to merge PDMP data with electronic health records has already begun in the federally funded Medicare and Medicaid programs. Again, not for optimizing patient care, but for optimizing administrative reporting needs. It's safe to assume that the Missouri State Medical Association's support of the PDMP is consistent with its support of Medicaid expansion. On November 13, 2020 Senator Marco Rubio sent a letter to McKinsey & Company about the possibility of that company sharing the data gathered from clients in one country with other clients in another country. Specifically, Rubio asked, Do any of your current of past clients in China work in the areas of critical national interest to the United States, including health care, pharmaceuticals, health care equipment and supplies, telecommunications, and military or civil defense? If so, please provide the following information: a. Name of the company b. Nature of the company's work c. Nature of company's relationship with the PRC and CCP d. Duration of McKinsey & Company's relationship with the company e. Nature of McKinsey & Company's work on behalf of the company. No answer was provided. The immediate concern to the people of Missouri is that in 2018, Missouri's Office of Administration awarded McKinsey & Company a contract to study the state's Medicaid program – a program that by federal law shall have access to a statewide PDMP. The reality is, PDMP created in SB 63 does not address St. Louis's opioid crisis; nor does it improve the quality of care for patients. Rather, it serves Big Government, Big Pharma, Big Tech, and Big Brother. Because the personal risks to veterans and other citizens of Missouri who would be forced to surrender personal data without knowledge or consent of how it is used or who uses it, and therefore, persons, especially minors are made vulnerable by the establishment of a state-managed PDMP, I urge you to vote NO on SB 63.



BILL NUMBER: SB 63				DATE: 4/20/2021
COMMITTEE: Veterans				
TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	MATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: RON CALZONE			PHONE NUM	IBER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: ron@mofirst.org		ATTENDANCE: In-Person	SUBMIT <b>4/20/2</b>	DATE: 021 6:42 PM

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

On page 7 the bill reads in subsection 12: "12. No dispensation information submitted under this section shall be used by any local, state, or federal authority to prevent an individual from owning or obtaining a firearm."-While this attempt to defend the 2nd Amendment rights of the people, it falls short of that goal, because a Missouri statute CAN NOT limit or obligate a federal agency.-That means federal agencies WILL, under this bill, be able to use PDMP data to undermine the people's gun rights.-This should be of particular concern to anyone looking out after the interests of veterans, since the gun rights of veterans have already been under attack. The right to bear arms have been stripped from veterans because of treatments they have sought from the VA. We don't want that same problem extended to all the people.-\*\* An additional concern relates to the company acting as the vendor.--Currently, the bill includes no requirement that the vendor be an American company -- certainly we don't want Americans' personal data in the hands of a foreign company.-NOTE: Missouri's drivers' license system is currently administered by a French owned company, so we know that there is no general law that requires the PDMP vendor to be an American company.



BILL NUMBER: SB 63				DAT <b>4/2</b>	TE: <b>20/2021</b>
COMMITTEE: Veterans				·	
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		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: RON STAGGS			PHONE N	NUMBER:	
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ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:		MIT DATE: 0/2021 1	2:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



government, please vote NO on this bill.

## MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: SB 63				DATE: 4/20/2021	
COMMITTEE: Veterans			•		
TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES	
WITNESS NAME					
INDIVIDUAL:					
WITNESS NAME: SHERRY KUTTENKULER ARTHAUD			PHONE NUMB	PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:			TITLE:		
ADDRESS:					
CITY:			STATE:	ZIP:	
EMAIL: sherry.kuttenkuler@senate.mo.gov		ATTENDANCE: Written	SUBMIT DATE: 4/20/2021 5:25 PM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					

The pdmp does great harm to chronic pain patients as well as being a violation of privacy of all Missouri citizens. Missouri ranks in the middle of all states in opioid deaths, thus proving we do not need a pdmp. If you will look at the people in St. Louis who are living under their surveillance system of a pdmp, the opioid deaths actually went up after implementation, not down. We do not want bigger