



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1296		DATE: 4/24/2023	
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			
BUSINESS/ORGANIZATION:			
WITNESS NAME: SARAH KLEBOLT		PHONE NUMBER: 636-724-1766	
BUSINESS/ORGANIZATION NAME: ARROW SENIOR LIVING MANAGEMENT		TITLE: GENERAL COUNSEL	
ADDRESS: 3333 RUE ROYALE ST.			
CITY: ST. CHARLES		STATE: MO	ZIP: 63301
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2023 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 4/24/2023 11:49 PM
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I am Opposed to this Bill. The Department NEEDS to be Inspecting All Nursing Homes and Retirement Centers with out announcement. Keep the State Law as it is presently written.



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JAY HARDENBROOK		PHONE NUMBER: 816-810-2066	
BUSINESS/ORGANIZATION NAME: AARP		TITLE: ADVOCACY DIRECTOR	
ADDRESS: 4031 PARKER AVE			
CITY: SAINT LOUIS		STATE: MO	ZIP: 63116
EMAIL: jhardenbrook@aarp.org	ATTENDANCE: In-Person	SUBMIT DATE: 4/24/2023 11:46 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KORTNIE HUDDLESTON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kortniehuddleston@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 4/24/2023 3:25 PM

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I am in opposition to HB 1296. I believe that it poses a significant risk to the health and safety of older individuals who reside in residential care or assisted living facilities. The bill would allow facilities that are accredited and in good standing with the accrediting entity to avoid annual on-site inspections by the Department of Health and Senior Services. However, it is important to note that accreditation does not always equate to compliance with all necessary regulations and standards. By allowing facilities to avoid inspections, the government is relinquishing its responsibility to ensure the safety and wellbeing of vulnerable individuals who reside in these facilities. Without regular inspections, there is a higher likelihood that violations of standards and requirements could go unnoticed, potentially resulting in harm to residents. I urge you to consider the importance of regular inspections in ensuring the health and safety of older individuals in residential care or assisted living facilities. All facilities, regardless of accreditation status, should be subject to annual on-site inspections to ensure compliance with necessary regulations and standards.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RON BERRY		PHONE NUMBER: 660-537-2239	
REPRESENTING: SEIU HEALTHCARE		TITLE:	
ADDRESS: PO BOX 722			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2023 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUSAN GIBSON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Onesuegibson@protonmail.com	ATTENDANCE: Written	SUBMIT DATE: 4/21/2023 8:05 PM

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This policy would invite trouble. Our most vulnerable should be looked after with regular inspections.



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: BEN TERRELL		PHONE NUMBER: 573-508-3623	
BUSINESS/ORGANIZATION NAME: DEPARTMENT OF HEALTH AND SENIOR SERVICES		TITLE:	
ADDRESS: 912 WILDWOOD			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2023 12:00 AM	
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