



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 910</b>		DATE: <b>1/31/2023</b>	
COMMITTEE: <b>Healthcare Reform</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: <b>ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>arniedienoff@yahoo.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>1/31/2023 11:04 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

**I agree with the Intent of this Legislation and Proposed Bill. I agree that any Missouri woman should not have to go to their Primary Doctor and have to ask for a Referral to have a Mammogram. It is great Prevention and should be authorized without a Prescription. Get this Bill to the Governor's Desk for his Signature!**



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 910</b>		DATE: <b>1/31/2023</b>	
COMMITTEE: <b>Healthcare Reform</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: <b>NANCY PRICE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>NPRICE07@GMAIL.COM</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>1/29/2023 2:33 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

**HB 910 I would ask for your whole-hearted support of HB910 as mammograms save many lives. Mammograms should be regular, routine screening that is part of good health care. There is no reason to require a physician referral to get one. Such a requirement is likely to add unnecessary financial, time and stress burdens to the process and provides no benefit. We need to be encouraging broader use of this lifesaving screening and doing everything we can to facilitate its regular occurrence.**



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 910</b>		DATE: <b>1/31/2023</b>	
COMMITTEE: <b>Healthcare Reform</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>SHANNON COOPER</b>		PHONE NUMBER: <b>660-890-1432</b>	
REPRESENTING: <b>AMERICA'S HEALTH INSURANCE PLANS, BLUE CROSS BLUE SHIELD OF KC</b>		TITLE:	
ADDRESS: <b>208 MADISON</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/31/2023 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			