

WITNESS APPEARANCE FORM

BILL NUMBER: SB 157				DATE: 4/18/2023
COMMITTEE: Professional Regi	stration and Licensing			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: AMANDA WINFRE	Υ		PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: akwinfrey@hotma	il.com	ATTENDANCE: Written	SUBMIT DATE: 4/18/2023 11:12 AM	
THE INFORMA	TION ON THIS EOD	MIS DUBLIC DECOR	D HINDED CHA	DTED 610 DSMo

As a NP for 13 years I still have to spend 30 days with a new physician, when I find one, when my collaborating physician, of 13 years, leaves our organization later this year. The minimum I will be able to travel in order to do this is 25 miles each way. Or I could stay in our office and collaborate with a physician that has only been such for 2 years. This doesn't make sense.



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: BILL ANDERSON			PHONE NUME 573-893-3	
REPRESENTING: MISSOURI HOSPIT	TAL ASSOCIATION		TITLE:	
ADDRESS: 4712 COUNTRY CLUB DRIVE				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 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		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: BRENT HEMPHILL	-		PHONE NUME	BER:
REPRESENTING: MOSAIC, BJC HEA	ALTH SYSTEM		TITLE:	
ADDRESS: 229 MADISON STREET				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65102
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 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		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	BBYIST:			
WITNESS NAME: CHRIS ROEPE			PHONE NUME (573) 634-	
REPRESENTING: MISSOURI ASSOCI.	ATION OF NURSE ANI	ESTHETISTS	TITLE:	
ADDRESS: 205 EAST CAPITOL AVENUE, SUITE 100				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 23 12:00 AM
THE INFORMAT	ION ON THIS FORM	M IS PUBLIC RECOR	D UNDER CHA	PTER 610, RSMo.



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: CHRISTINA PETERS	S		PHONE NUME	BER:
BUSINESS/ORGANIZATION	NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: christypeters1@out	tlook.com	ATTENDANCE: Written	SUBMIT D 4/17/20	DATE: 123 6:51 PM
THE INCODMAT	ION ON THIS EOD	LIC BUBLIC BECOR	D LINDED OLLA	DTED CAO DOM-

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Allowing a nurse practitioners to prescribe schedule 2 for hospice patients is a great idea to assist in improving patient care. Waving the proximity requirements and using telehealth will assist in nurse practitioners having collaborators more available however I do not believe this will solve the healthcare crises as TTP would be a better option. It is very Difficult to find a physician to collaborate with and often times they already are maxed on the nurse practitioner collaboration numbers.



BILL NUMBER: SB 157				DA1 4/1	TE: 8/2023
COMMITTEE: Professional Regis	stration and Licensing			·	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	FOR	INFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: DEBORAH BLINZL	.ER		Ph	HONE NUMBER:	
BUSINESS/ORGANIZATIO	N NAME:		TI	TLE:	
ADDRESS:					
CITY:			ST	TATE:	ZIP:
EMAIL: Blinzlerdj@centur	ytel.net	ATTENDANCE: Written	·	SUBMIT DATE: 4/18/2023 1	2:06 PM

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Please support this bill APRN Licensure. And transition to practice for the good of our state, improving healthcare outcomes. I would be happy to speak. If there any questions I can answer. No current states with full practice, or transition to practice have worse, healthcare outcomes.



BILL NUMBER: SB 157				DA1 4/1	TE: 8/2023
COMMITTEE: Professional Regi	stration and Licensing				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFOR	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: DENISE STUIT			PHONE N	JMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL: d_stuit@hotmail.c	com	ATTENDANCE: Written		IT DATE: /2023 1	2:21 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFOR	MATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: DEREK LEFFERT			PHONE NU 573-280 -	
REPRESENTING: ASSOCIATION OF MISSOURI NURSE PRACTITIONERS TITLE: CEO				
ADDRESS: PO BOX 104853				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65110
EMAIL: derek@the109grou	up.com	ATTENDANCE: Written		T DATE: 2023 3:50 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				

The Association of Missouri Nurse Practitioners supports any and all efforts to remove unnecessary barriers to access to health care. We believe that the provisions contained within SB 157 are a step in the right direction but would like to see additional measures taken to ensure that patients in Missouri are served by well-qualified APRNs.



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: DR. AMY MANNIN	G, DNP, APRN, FNPC		PHONE NUMB 573-714-8	
BUSINESS/ORGANIZATION MISSOURI HIGHLA	ON NAME: ANDS HEALTH CARE		TITLE: FAMILY N	URSE PRACTIONER
ADDRESS: 405 MAIN STREET				
CITY: VAN BUREN			STATE: MO	ZIP: 63965
EMAIL:		ATTENDANCE:	SUBMIT I 4/18/20	DATE: 123 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 INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ELISA COONROD			PHONE	E NUMBER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE	:	ZIP:
EMAIL: elisacoonrod@AT	T.NET	ATTENDANCE: Written		JBMIT DATE: 18/2023 1	1:37 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					

Please support SB 157. If this bill is passed in Missouri, more Missourians will have more access to health care. When people have more access to health care, the people of the State are healthier. Thank you! Elisa Coonrod BSN RN



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	□FOR	INFORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: FARHIYA ALEW			Ph	HONE NUMBER:	
BUSINESS/ORGANIZATIO	N NAME:		TI	TLE:	
ADDRESS:			•		
CITY:			ST	ΓΑΤΕ:	ZIP:
EMAIL: farhiyaalew9@gma	ail.com	ATTENDANCE: Written		SUBMIT DATE: 4/18/2023 1	1:48 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. I'm a Nurse practitioner serving low income and refugee communities here in Kansas City, I provide walk- in services and I have helped reduce health care cost by keeping people out of th Emergency Room. Passing this bill will help more APRN to provide services to underserved populations and

therefore decrease health disparities facing Missourians. Thank you!



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TESTIFYING: IN SUPPORT	OF IN OPPOSITION TO	O □FOR INFORM	MATIONAL PURPOSES		
	WITNESS NAME				
BUSINESS/ORGANIZATION:					
WITNESS NAME: JAY HARDENBROOK		PHONE NUM 816-810-2			
BUSINESS/ORGANIZATION NAME: AARP		TITLE: ADVOCA	CY DIRECTOR		
ADDRESS: 4031 PARKER AVE					
CITY: SAINT LOUIS		STATE: MO	ZIP: 63116		
EMAIL: jhardenbrook@aarp.org	ATTENDANCE: In-Person	SUBMIT 4/18/2	DATE: 023 2:28 PM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



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TESTIFYING: ✓	N SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	IATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LOBB	YIST:			
WITNESS NAME: JESSICA PETRIE			PHONE NUM 573-635-6	
REPRESENTING: MISSOURI ASSOCIATION	ON OF RURAL HEA	LTH CLINICS	TITLE:	
ADDRESS: 1022 WESTWOOD DR				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL: jessica@wintonpolicyg	roup.com	ATTENDANCE: Written	SUBMIT 4/18/2	DATE: 023 3:24 PM
THE INFORMATION	ON THIS FORM	I 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: JESSICA SEITZ			PHONE NUMB 573-415-6 2	
BUSINESS/ORGANIZATIO MISSOURI KIDS FI			TITLE: EXECUTIV	E DIRECTOR
ADDRESS: 520 DIX ROAD, SU	ITE C			
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT D 4/18/20	ATE: 23 12:00 AM
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: JORGEN SCHLEM	IEIER		PHONE NUME 573-634-4	
REPRESENTING: CENTURION			TITLE:	
ADDRESS: 213 EAST CAPITOL AVENUE				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT I 4/18/20	DATE: 123 12:00 AM
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		WITNESS NAME		
REGISTERED LO	DBBYIST:			
WITNESS NAME: JOSEPH MILLER			PHONE NUME (417) 529-	
REPRESENTING: COMMUNITY HEAI	LTH CENTER STRATE	GIES	TITLE:	
ADDRESS: PO BOX 1871				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65102
EMAIL:		ATTENDANCE:	SUBMIT I 4/18/20	DATE: 123 12:00 AM
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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: KARA CORCHES			PHONE NUME 573-634-3	
REPRESENTING: MISSOURI CHAME	BER OF COMMERCE &	INDUSTRIES	TITLE:	
ADDRESS: 428 EAST CAPITO	L AVENUE			
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 12:00 AM
THE INFORMAT	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



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		WITNESS NAME			
REGISTERED LO	DBBYIST:				
WITNESS NAME: KATHI HARNESS			PHONE NUMB 573-353-41		
REPRESENTING: NATIONAL COUNC	CIL OF STATE BOARD	S OF NURSING	TITLE:		
ADDRESS: PO BOX 2302					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65102	
EMAIL:		ATTENDANCE:	SUBMIT D 4/18/20	ATE: 23 12:00 AM	
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	ATIONAL PURPOSES	
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: KATRINA ZLATAR	RIC PMHNP-BC		PHONE NUME	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:	ZIP:	
EMAIL: kmz63126@yahoo	o.com	ATTENDANCE: Written	SUBMIT I 4/17/20	DATE: 123 9:27 PM	

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

SB157: I have been a psychiatric nurse practitioner for the past 20 years. I have deep knowledge and experience along with passion for my patience. Waving the geographic proximity would be beneficial to patients. As a nurse practitioner can be practicing in a rule area, where it then the doctor can be practicing in more of the suburb area modern technology these days allows us to be in communication in an instance, such as FaceTime,text, phone, and/or telemedicine for any emergencies or questions that we nurse practitioners have for the collaborating psychiatrist/physician. Nurse practitioners who have been in practice for many years. Understand the patient as a whole not just the disease. TTP would be a wonderful step for us Experienced nurse practitioners please grant us at least the limiting of the geographic proximity. Katrina



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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: KYNA IMAN			PHONE NUME (314) 651-	
REPRESENTING: MISSOURI NURSE	S ASSOCIATION		TITLE:	
ADDRESS: PO BOX 1483				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



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COMMITTEE: Professional Regis	stration and Licensing				
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES	
		WITNESS NAME			
REGISTERED LO	DBBYIST:				
WITNESS NAME: MANDY HAGSETH	ļ		PHONE NUME 573-636-4		
REPRESENTING: MISSOURI FAMILY	HEALTH COUNCIL		TITLE:		
ADDRESS: 1909 SOUTHRIDGI	E DRIVE				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65110	
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 12:00 AM	_
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: MARILYN RANTZ			PHONE	E NUMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:		
ADDRESS:					
CITY:			STATE	:	ZIP:
EMAIL: rantzm@missouri	.edu	ATTENDANCE: Written		JBMIT DATE: 17/2023 1	1:30 AM

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

The changes that will be implemented in SB 157 are essential to the care of all Missourians, but particularly those in limited access areas who struggle to receive routine care, primary care, urgent care, and mental health services. Missouri has one of the country's poorest health outcomes--and a key reason is the lack of access to APRN care. The restrictions applied to APRN services in our state are also some of the worst in the country--and SB 157 corrects many of those unnecessary and harmful to the public restrictions to APRN services. With today's technology, there is no reason to maintain inappropriate mileage restrictions on practice. These restrictions and the others listed in SB 157 were lifted during COVID pandemic and more people had access to APRN care--then they were put back into place!! There were NO NEGATIVE OUTCOMES to lifting those restrictions during the pandemic and we need to have these restrictions and over regulations lifted permanently from APRNs. Some few physicians will claim lifting these restrictions and regulations will be a safety risk to patients --that is a FALSE claim and many studies have been conducted that refute all the claims of safety-remember all the over regulation of APRNs were already lifted during the pandemic and NO NEGATIVE OUTCOMES happened!! The opposite is true--people will have more access to care and we can start improving the health status of our Missouri citizens. Do the right thing, this year fully support nurses and patients and lift the onerous restrictions and excessive regulation of APRNs NOW, support and pass the legislation contained in SB 157.



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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	DBBYIST:			
WITNESS NAME: NIKKI STRONG			PHONE NUME 573-893-2	
REPRESENTING: MISSOURI HEALTI	H CARE ASSOCIATION	I	TITLE:	
ADDRESS: 236 METRO DRIVE				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT 0 4/18/20	DATE: 123 12:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES	
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: SUZANNE OPPER	MAN, APRN PMHNP C	ADC	PHONE NUME	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:	ZIP:	
EMAIL: Sokelley53@gmai	l.com	ATTENDANCE: Written	SUBMIT D 4/18/20	OATE: 23 2:54 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					

I am in support of SB157 by Sen Black. I am an APRN in Mental Health. I was certified to provide Addiction Medicated Assisted Treatment. I could not find a Collaborative Practice Physician within 75 of me to work with or one that I could afford. This is an area of desperate need in Missouri that I could not help improve.



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WITNESS NAME					
INDIVIDUAL:					
WITNESS NAME: SUZANNE OPPERMAN, APRN PMHNP CD	AC	PHONE NUME	BER:		
BUSINESS/ORGANIZATION NAME:		TITLE:			
ADDRESS:					
CITY:		STATE:	ZIP:		
EMAIL: SuzannesMentalHealthWellness@gmail. com	ATTENDANCE: Written	SUBMIT 0 4/17/20	DATE: 123 1:14 PM		

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

It has been stated by the Center for Disease Control (CDC) that the practical implications of state law amendments granting Advanced Practice Registered Nurses (APRNs) Full Practice Authority by state statutes and regulations often restrict APRN's ability to provide care to the full extent of their education and training. It was shown that in Nevada and Minnesota ARPNs are developing and implementing innovative approaches to health care delivery, including using mobile clinics, home-based care, and seeing patients outside of normal business hours. These findings corroborate the results of recent studies that have found that states with laws that limit APRN practice authority to a greater degree have fewer practicing APRNs and slower growth in new employment of APRNs whereas states that authorize APRNs to practice independently have larger annual percentage increases in patients seen by APRNs. Due to the significant need for additional providers across Missouri in inner city and rural areas alike, the answer has been found by 44 other states with APRNs who have been granted Full Practice Authority. If Physician are concerned about the preparedness of APRN's it is reasonable to establish a "Transition to Practice" TTP, requirement and program for a designated period of time. This has also been implemented successfully in many states.



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TESTIFYING:	SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
REGISTERED LOBBY	IST:				
WITNESS NAME: WILL MARRS				E NUMBER: 848-8561	
REPRESENTING: MERCY			TITLE:	:	
ADDRESS:					
CITY: SPRINGFIELD			STATE MO	Ξ:	ZIP: 65804
EMAIL: govservicesjcmo@gmail	.com	ATTENDANCE: In-Person		UBMIT DATE: /18/2023 12	2:17 PM

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

These changes would greatly expand patient care in our healthcare footprint and we appreciate the bills sponsor for putting this bill forward.



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		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE			PHONE NUM	PHONE NUMBER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:	ZIP:	
EMAIL: arniedienoff@yah	oo.com	ATTENDANCE: Written		SUBMIT DATE: 4/18/2023 11:51 PM	
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I am Opposed to this Bill and its Intension.



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TESTIFYING : □IN SUPPORT OF	☑ IN OPPOSITION TO	FOR INFORM	IATIONAL PURPOSES		
WITNESS NAME					
REGISTERED LOBBYIST:					
WITNESS NAME: BRIAN BERNSKOETTER		PHONE NUMI	BER:		
REPRESENTING: MISSOURI ACADEMY OF FAMILY PHYSICIANS TITLE:					
ADDRESS:					
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101		
EMAIL: brianb@swllc.us.com	ATTENDANCE: Written	SUBMIT 4/18/20	DATE:)23 11:47 AM		

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We don't support blanket exemption in the 30 day familiarity clause. We do support allowing the physicians ability to waive it if they feel comfortable collaborating but it should be up to the physician because the responsibility ultimately lies with the physician.



BILL NUMBER: DATE: **SB 157** 4/18/2023 COMMITTEE: **Professional Registration and Licensing** ☐ IN SUPPORT OF **✓** IN OPPOSITION TO FOR INFORMATIONAL PURPOSES **TESTIFYING: WITNESS NAME** INDIVIDUAL: WITNESS NAME: PHONE NUMBER: **FARID SADAKA BUSINESS/ORGANIZATION NAME:** TITLE: ADDRESS: CITY: STATE: 7IP· SUBMIT DATE: 4/17/2023 11:41 AM EMAIL: ATTENDANCE: fsadaka@sbcglobal.net Written

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• We oppose legislation that licenses APRNs and CRNAs under the Board ofNursing and authorizes APRN and CRNA independent practice.o APRNs and CRNAs are trained healthcare professionals that we respect. o However, having a residency-trained physician working alongside theAPRN / CRNA results in better patient outcomes and lower costs.o Independent practice by APRNs / CRNAs will not address rural healthcareshortages because, similar to physicians, APRNs / CRNAs tend to locatein urban areas, and authorizing independent practice will not change that. o To ensure quality and consistency of healthcare, all providers thatindependently practice medicine should be governed and held accountable by the same licensing body—the Board of Healing Arts. If nurses are to be licensed to independently practice, they should be licensed under the Board of Healing Arts.



WITNESS APPEARANCE FORM

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COMMITTEE: Professional Regis	stration and Licensing		•		
TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES	
		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: RYAN DEBOEF			PHONE NUMB (573) 634-		
REPRESENTING: MISSOURI ASSOC SURGEONS	IATION OF OSTEOPAT	HIC PHYSICIANS AND	TITLE:		
ADDRESS: 1423 RANDY LANE	=				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 4/18/2023 12:00 AM	
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COMMITTEE: Professional Registration and Licensing					
TESTIFYING : □IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	MATIONAL PURPOSES		
WITNESS NAME					
INDIVIDUAL:					
WITNESS NAME: DR. JOANN FRANKLIN DNP GNP FNP PMHNP FAANP PHONE NUMBER:					
BUSINESS/ORGANIZATION NAME:		TITLE:			
ADDRESS:					
CITY:		STATE:	ZIP:		
EMAIL: franklindnp@gmail.com	ATTENDANCE: Written	SUBMIT 4/17/2	DATE: 023 7:50 PM		

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The same rationale for Physical Therapists applied to APRNs! Please recognize the main issue preventing access is the collaborative practice agreement. Missouri is ranked at the bottom of states nationally in healthcare. Every county but one (Platte County) is a primary care health professional shortage area and all 114 counties are mental health professional shortage area. There are 15000 Advanced Practice Registered Nurses (APRNs) in Missouri who could provide healthcare at no cost to patients or Missouri if they were not mandated by law to have a forced Collaborative Practice Agreement with physicians. The physician shortage is growing nationally and to obstruct APRNs from providing care is shameful. Missouri has the most restrictive APRN laws in the country including geographic proximity of 75 miles to a physician collaborator. These antiquated laws with today's technology are insane. If I have a medical emergency I'm not calling a collaborator 75 miles away I'm calling a helicopter. APRNs are trained and willing to fill the physician shortage throughout the state however physicians are obstructing this because they are paid to collaborate with APRNs by APRNs or healthcare systems. It's reported that one physician chooses to collaborate with 5 APRNs in Missouri and 11 APRNs in Illinois and is paid \$389,000 for this so elects not to work except as needed to keep his license and hospital privileges. This is extortion! This is a restraint of trade and physicians are financially benefiting keeping this law in place since 1993. Forty four states allow APRNs to practice under nursing boards to the full extent of their training and education. We have a grassroots organization attempting to lobby to change the laws however due to "term limits" lobbyists have more influence than legislators and are paid more by physicians than nurses are able to pay to keep APRNs in their control. The medical cartel has kept APRNs from working by forced enslavement of paying physicians so APRNs can work. No profession should have to pay another profession to be allowed to do their job or bookkeepers would need to pay CPAs to work for example. This has to stop and I propose the remedy is eliminate CPAs. Barrier reduction of mileage and chart reviews do not help patient access only reduce work for paid physicians. JoAnn Franklin DNP GNP FNP PMHNP FAANP Franklindnp@gmail.com573-701-2092