



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: SB 45		DATE: 4/4/2023	
COMMITTEE: General Laws			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
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: In-Person	SUBMIT DATE: 4/4/2023 11:57 PM

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I am Support of this Bill and extending Medical Care to the Child and Mother for 365-Days.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: BILL ANDERSON		PHONE NUMBER:	
REPRESENTING: MISSOURI HOSPITAL ASSOCIATION		TITLE:	
ADDRESS: 4712 COUNTRY CLUB DRIVE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: BRENT HEMPHILL		PHONE NUMBER:	
REPRESENTING: MOSAIC LIFE CARE		TITLE:	
ADDRESS: PO BOX 156			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: CARA ALEXANDER STARK		PHONE NUMBER: 573-645-9481	
REPRESENTING: AMERICAN CANCER SOCIETY CANCER ACTION NETWORK		TITLE:	
ADDRESS: 630 BOLIVAR ST., SUITE 201			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DAVID WINTON		PHONE NUMBER:	
REPRESENTING: MISSOURI KIDSFIRST, KIDS WIN MISSOURI, NATIONAL ASSN. OF SOCIAL WORKERS MO CHAPTER, BJC HEALTHCARE, COXHEALTH, ST. LOUIS COUNTY, CHILDREN'S TRUST FUND, MISSOURI ASSOCIATION OF RURAL HEALTH CLINICS		TITLE:	
ADDRESS: PO BOX 1805			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DEANNA HEMPHILL		PHONE NUMBER: 573-636-5151	
REPRESENTING: MISSOURI STATE MEDICAL ASSOCIATION		TITLE:	
ADDRESS: 113 MADISON ST., PO 1028			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: GARRETT WEBB		PHONE NUMBER: 219-229-1104	
REPRESENTING: MISSOURI CHAPTER, AMERICAN ACADEMY OF PEDIATRICS		TITLE: REGISTERED LOBBYIST	
ADDRESS:			
CITY: SAINT LOUIS		STATE: MO	ZIP: 63104
EMAIL: webb@coestrategies.com	ATTENDANCE: In-Person		SUBMIT DATE: 4/4/2023 9:12 AM
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The Missouri Chapter, American Academy of Pediatrics and our more than 1,100 physicians, trainees, and pediatric-provider members strongly support this legislation.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JAMIE MORRIS		PHONE NUMBER: 573-635-7239	
REPRESENTING: MISSOURI CATHOLIC CONFERENCE		TITLE:	
ADDRESS: 600 CLARK AVE.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL: morrisj@mocatholic.org	ATTENDANCE: In-Person	SUBMIT DATE: 4/4/2023 10:26 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MISTIE MILLS, MD		PHONE NUMBER: 573-777-0759	
BUSINESS/ORGANIZATION NAME: AMERICAN COLLEGE OF OBSTETRICIANS & GYNECOLOGISTS		TITLE: MEDICAL DOCTOR	
ADDRESS: 4901 FALL BROOK			
CITY: COLUMBIA		STATE: MO	ZIP: 65203
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SAMUEL H. LEE		PHONE NUMBER: 314-368-4242	
REPRESENTING: CAMPAIGN LIFE MISSOURI		TITLE:	
ADDRESS: P.O. BOX 142585			
CITY: SAINT LOUIS		STATE: MO	ZIP: 63114
EMAIL: samuelhlee@mindspring.com	ATTENDANCE: In-Person		SUBMIT DATE: 4/4/2023 12:14 PM
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Testimony in Favor of Extending MO HealthNet/Show-Me Healthy Babies Coverage for Postpartum Women to One Year After Birth House General Laws Committee – April 4, 2023, 4:30 PM Samuel Lee, Director of Campaign Life Missouri We encourage the House General Laws Committee to vote in favor of SS SCS SB's 45 & 90 to provide postpartum coverage for one year after birth for those enrolled in MO HealthNet for Pregnant Women or in Show-Me Healthy Babies (CHIP) coverage for unborn babies and mothers. For most low-income pregnant women currently receiving state medical assistance, their postpartum coverage extends through the last day of the month that includes the 60th day after the birth of their child or the pregnancy ended. (See, MO HealthNet Manual 1850.040.20 and 1855.030.15.) But over the last few years, there has been bipartisan consensus among Missouri lawmakers to extend coverage to one year postpartum for women with substance use disorders (SUD), as well as for women with postpartum depression and related mental health conditions. (See, section 208.151.(20).) Thankfully, provisions in the American Rescue Plan Act of 2021 (ARPA) now make it easier for states to extend coverage to all eligible postpartum moms needing health care coverage for one year after birth. States now have the option (it is permissive, not mandatory) to provide all pregnant women covered under Medicaid or CHIP, continued coverage during the 12-months after birth. The one-year postpartum extension option went into effect on April 1, 2022, and under the recently-enacted Consolidated Appropriations Act, 2023, federal funding will now be available permanently. As of March 23, 29 states and the District of Columbia have extended postpartum coverage to 12 months, and eight more states plan to do so. (See, "Medicaid Postpartum Coverage Extension Tracker," KFF.) The Missouri Pregnancy Associated Mortality Review Board last year found that: "The greatest proportion of pregnancy-related deaths occurred between 43 days and one year after pregnancy" and that "[s]eventy-five percent of pregnancy-related deaths were determined to be preventable". (See, "Missouri Pregnancy Associated Mortality Review 2019 Annual Report," Missouri Department of Health and Senior Services, June 2022.) But beyond preventing – or at least reducing – maternal mortality, studies have found that extended postpartum coverage for lower income women can help with ongoing medical needs, because: • "[C]hronic conditions that predated the pregnancy or arose because of it may require ongoing medical care, both to improve the woman's health and to reduce the chances of complications during subsequent pregnancies;" and • "[I]t is not uncommon for both dental and medical professionals to suggest delaying treatment until after delivery," and many women might not receive the care needed within 60 days after childbirth. (See, "Advancing Maternal and Infant Health by Extending the Postpartum Coverage Period," Medicaid and CHIP Payment and Access Commission, March 2021.) A woman with a difficult pregnancy who continues full term, might end up with ongoing health problems. She should be supported for choosing life and a future for her baby and herself. Passage of SS SCS SB's 45 & 90 is a top pro-life priority for the 2023 legislative session.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SARAH SCHLEMEIER		PHONE NUMBER: 573-634-4876	
REPRESENTING: MO COLLEGE OF EMERGENCY PHYSICIANS, MO COALITION FOR CHILDREN, HEALTH FORWARD FOUNDATION, MISSOURI CENTER FOR PUBLIC HEALTH EXCELLENCE, SIGNATURE MEDICAL GROUP, MO DENTAL ASSOCIATION		TITLE:	
ADDRESS: 213 EAST CAPITOL AVENUE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SUSAN D. KLEIN		PHONE NUMBER: 573-230-4193	
REPRESENTING: MISSOURI RIGHT TO LIFE		TITLE:	
ADDRESS: PO BOX 651			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 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: 4/1/2023 2:59 PM
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: TOM DEMPSEY		PHONE NUMBER: 636-288-7461	
REPRESENTING: CATHOLIC CHARITIES ARCHDIOCESE OF ST. LOUIS		TITLE:	
ADDRESS: 3103 BUCKSKIN PATH			
CITY: ST. CHARLES		STATE: MO	ZIP: 63301
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MAGGIE EDMONDSON		PHONE NUMBER: 314-368-1137	
REPRESENTING: PRO CHOICE MISSOURI		TITLE:	
ADDRESS: 1210 S VANDEVENTER AVE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63110
EMAIL: maggie@prochoicemissouri.org	ATTENDANCE: Written		SUBMIT DATE: 4/4/2023 9:59 PM
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Chair, Vice-Chair, members of the committee; thank you for the opportunity to testify today for informational purposes on SB 45– which COULD dramatically improve the health outcomes of Missouri babies and parents if passed clean. Pro-Choice Missouri works to protect and expand every Missourians’ right to bodily autonomy, to access essential reproductive healthcare, to access accurate information in order to make the best decisions for ourselves and our families, and to parent our children in safety and dignity. With this bill, you have an opportunity to improve the livelihood and well-being of more than 4,000 Missourians and Missouri families who would benefit from the crucial coverage of critical care that would be accessible to them–IF legislators can put politics aside and pass a clean version of postpartum Medicaid extension that Centers for Medicare & Medicaid Services (CMS) will approve. CMS will REJECT Missouri’s application for postpartum coverage extension if it contains exclusionary language like that amended onto SS SCS SBs 45 & 90. This would mean not a single Missourian would receive extended postpartum care coverage even if this version passes into law. Texas added similar exclusionary language targeting people who have abortions in their Postpartum Extension Coverage application in 2021. The application is still sitting, unapproved, at CMS. CMS Guidance RE: Improving Maternal Health and Extending Postpartum Coverage in Medicaid and the Children’s Health Insurance Program Bans on abortion and restrictions on all forms of sexual and reproductive health care are directly correlated to high rates of maternal and infant mortality; so it is no surprise that Missouri, with some of the highest numbers of medically unnecessary restrictions on access to abortion care (even prior to our total abortion ban) also has some of the highest rates of maternal and birthing parent mortality, nationwide. In 2020, maternal/ birthing parent death rates in states with the most restrictions on access to abortion were 62% higher than states with access to abortion care. In short; restrictions on reproductive health care access lead to poor reproductive health outcomes. For individuals who want to start or grow their families in Missouri, our state remains one of the most dangerous to give birth; Missouri ranks 44th in the country for maternal mortality and Black birthing parents are 3-4 times more likely to die within a year of pregnancy than their white counterparts. For many reasons, including structural racism and implicit bias in medicine, the closure of seven rural hospitals in MO since 2014, a growing number of people falling in the insurance gap, and continued attacks on abortion and reproductive healthcare access, the maternal and infant mortality rates in MO continue to rival that of both peer and less-resourced nations. The Missouri Pregnancy-Associated Mortality Review 2018 Report, published in 2021, found that the pregnancy-related mortality ratio (PRMR) in Missouri is four times greater for Black women than white women at 87.6 per 100,000 live births. The same review board found that 82% of pregnancy-related deaths in Missouri were “determined to be preventable.” Recommendations for addressing racial and economic disparities in maternal health in Missouri named in the report include increased access to mental health resources

throughout pregnancy, increased coverage of postpartum care for low-income mothers and families, and increased uniformity in trauma-informed and culturally competent practices. Medicaid is the largest payer of reproductive healthcare coverage, covering nearly 40% of all births in our state but many Missourians are still without access to the care they need. Research has shown that having health insurance is a core factor in whether a person uses birth control, particularly the most effective methods like the IUD which can cost more than \$1000 out of pocket. Yet only 19% of Missourians of low-income have access to the family planning services they need. Pregnant people who lack insurance coverage often delay or forgo prenatal and postpartum services because they cannot afford it, leaving them at increased risk for otherwise preventable pregnancy complications. According to the American College of Obstetricians and Gynecologists (ACOG), “optimal postpartum care provides an opportunity to promote the overall health and well-being of women, and evidence suggests that current care falls short of that goal.” Terminating insurance coverage and benefits access at sixty days postpartum, as current policy requires, restricts new parents and families from receiving sufficient postpartum treatment and support. Research shows that when new parents have access to care, their newborns have better health outcomes too. Additionally, the postpartum care period is a critical time for comprehensive care intervention and prevention measures like exploring future family planning options and screening for interpersonal and domestic violence (IPV/DV) at home. Missouri has the third highest national rate of IPV/DV and we know that people experiencing violence at home are most likely to report to a trusted care provider, if at all. Pregnancy and the postpartum period are especially dangerous for people in abusive relationships and by increasing the number of opportunities for medical providers to touch base with postpartum patients on Medicaid in Missouri this legislation will save lives. Every Missourian should have the right and the opportunity to access the full range of reproductive health options, including essential postpartum care. By expanding Medicaid coverage to allow low-income pregnant Missourians to access this essential health support for 12 months postpartum, you have an opportunity to increase the health and well-being of all pregnant people and infants in the state. A broad coalition of organizations invested in improving Missourian’s maternal and infant health urge you to pass a clean and implementable version of postpartum coverage extension. Pro-Choice Missouri, representing more than 60,000 Missourians across the state, urges you to remove discriminatory language that would nullify our application for postpartum medicaid extension in order to expand the eligible population and services to improve health outcomes for all Missouri parents and children. Thank you.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RON BERRY		PHONE NUMBER: 660-537-2239	
REPRESENTING: PLANNED PARENTHOOD GREAT PLAINS VOTES		TITLE:	
ADDRESS: PO BOX 722			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: VANESSA WELLBERY		PHONE NUMBER: 314-325-9303	
BUSINESS/ORGANIZATION NAME: ADVOCATES OF PLANNED PARENTHOOD OF THE ST. LOUIS REGION AND SOUTHWEST MISSOURI		TITLE: VICE PRESIDENT OF POLICY AND ADVOCACY	
ADDRESS: 4251 FOREST PARK AVENUE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63108
EMAIL: vanessa.wellbery@ppslr.org	ATTENDANCE: Written	SUBMIT DATE: 4/4/2023 4:35 PM	
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Wednesday, April 5, 2023 To: House General Laws Committee From: Vanessa Wellbery Advocates of Planned Parenthood of the St. Louis Region and Southwest Missouri
vanessa.wellbery@ppslr.org Advocates of Planned Parenthood of the St. Louis Region and Southwest Missouri is committed to building a future where Missourians can access comprehensive sexual and reproductive health care, including pregnancy-related care, without barriers. Extending pregnancy-related Medicaid coverage from 60 days to the full-year postpartum is a lifesaving policy intervention to address the maternal health crisis. As such, we urge this committee to reject SB 45 in its current form, which contains poison pill language that would render the policy ineligible for federal Medicaid approval necessary to implement. Instead, we strongly urge this committee to adopt a substitute amendment with full-coverage, 12-month extension and without language in SB 45 that restricts access, defies the goals of the Medicaid program, and invites policing and surveillance of low-income Missourians' pregnancy outcomes. We implore this committee to set aside politics, put patients first, and consider the estimated 4,600 Missourians currently at risk of unsafe gaps in coverage during the at-risk postpartum period if the legislature does not pass a bill eligible for federal approval. We hope this committee will consider what is at stake: - Maternal mortality is rising, and many of these deaths from preventable causes such as overdose and suicide, occur after Medicaid coverage ends. - Pregnancy-related complications may not surface until weeks after the end of pregnancy — one in three maternal deaths occur between one week and one year postpartum. - Missouri's maternal mortality rate is substantially worse than the national average, and it is especially dire for Black women, who are three to four times more likely than white women to die within a year of pregnancy. - The lack of continuous coverage in the postpartum period is widely recognized as one, among many, drivers of the maternal health crisis. - Extending postpartum Medicaid ensures continuous coverage for the full postpartum period, prevents gaps in access to care, and is aligned with a growing body of evidence and recommendations from state maternal mortality review committees. - Extending postpartum Medicaid would provide lifesaving coverage to an estimated 4,600 Missourians currently at risk of coverage interruptions during the at-risk postpartum period. Extending Medicaid coverage to the full postpartum period — one year — is evidence-based, long overdue, and will protect and improve the health of thousands of Missouri families. More than half the states, including Missouri neighbors Oklahoma, Kansas, Indiana, and Kentucky, have extended coverage using the full-coverage, expedited SPA pathway. A clean, full-coverage extension bill has had leadership and support from both sides of the aisle and a broad range of stakeholders in maternal and child health, patient advocacy, and the medical community in multiple committee hearings. This committee has an opportunity to pass a clean postpartum extension bill that will protect thousands of Missourians from unsafe coverage gaps,

reduce preventable deaths, and address serious maternal health conditions. In its current form, SB 45 jeopardizes this vital, long-overdue policy with poison pill amendments that will unconscionably put Missourians' health at risk. We look forward to working with Committee members toward a future where equitable, accessible sexual and reproductive health care is available to all Missourians, including meaningful and uninterrupted coverage, robust networks of providers, and access to the full spectrum of care for those who participate in the Medicaid program. Please oppose SB 45 unless it is amended with language that will secure CMS approval for a lifesaving policy. Thank you. Planned Parenthood of the St. Louis Region and Southwest Missouri has been the leading provider, educator and protector of reproductive health care in St. Louis and Southwest Missouri for over 85 years. Patients can make appointments online or by phone at 1-800-230-PLAN(7526)



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MANDY HAGSETH		PHONE NUMBER: 573-636-4060	
REPRESENTING: MISSOURI FAMILY HEALTH COUNCIL		TITLE:	
ADDRESS: 1909 SOUTHRIDGE DR			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65110
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MAURA GRAY		PHONE NUMBER: 314-596-1418	
REPRESENTING: AMERICAN HEART ASSOCIATION		TITLE: MISSOURI GOVERNMENT RELATIONS DIRECTOR	
ADDRESS: 11628 OLD BALLAS RD			
CITY: CREVE COEUR		STATE: MO	ZIP: 63141
EMAIL: maura.gray@heart.org	ATTENDANCE: Written		SUBMIT DATE: 4/4/2023 2:25 PM
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The American Heart Association supports increased access to care – including the extension of postpartum health coverage as filed in SBs 45 & 90 (in their original form). Heart disease and stroke account for one in three pregnancy-related deaths in the United States. Our nation's rate of maternal mortality is rising, and more evidence shows some of the most dangerous pregnancy-related complications – preeclampsia, blood clots, and cardiomyopathy – may not surface until weeks or months after delivery. One of the ways to address maternal health is to expand postpartum coverage from 60 days to 12 months for all individuals who are eligible for Medicaid coverage by virtue of their pregnancy. Longer follow-up care is critical to screen for cardiovascular disease risk factors and provide CVD prevention counseling. For these reasons, our organization implores the committee to remove language that creates barriers and limits access to healthcare for Missourians, while still allowing moms to access the care they need.