



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</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>In-Person</b>		SUBMIT DATE: <b>1/16/2024 11:59 PM</b>

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

**This is Common-Sense Legislation and provides choices to Missourians and will save over \$2.1-Million Annually to Insurance Companies and the Health Plans. See my House Committee Video Archived Testimony**



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>EMILY BOYER</b>		PHONE NUMBER: <b>417-434-1859</b>	
REPRESENTING: <b>THE ASSOCIATED STUDENTS OF THE UNIVERSITY OF MISSOURI (ASUM)</b>		TITLE:	
ADDRESS: <b>515 S 5TH STREET</b>			
CITY: <b>COLUMBIA</b>		STATE: <b>MO</b>	ZIP: <b>65201</b>
EMAIL: <b>eabtf9@umsystem.edu</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 2:51 PM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

Dear Mister Chair, My name is Emily Boyer, and I am a legislative intern for the Associated Students of the University of Missouri (ASUM), and I am writing to express our support for HB2190. Access to contraceptives is a top priority for many students across all four UM System campuses and this bill provides the potential to remove significant barriers and greatly increase access to contraceptives for students across the state. The current state laws do not specify the length of supply for contraceptive prescriptions that insurance plans must cover; because of this, most prescriptions are written for either a one-month or three-month supply. These limited supplies can pose great barriers for students and lead to gaps in medication usage. Many students, myself included, attend a university that is a significant distance from their hometowns, and thus, from their typical healthcare providers. When their medications are prescribed for only a few months at a time, it can be incredibly difficult for students to obtain refills. It is not uncommon for providers to require patients to have an appointment to get a refill of their medication, and if you are now living several hours away from your provider to attend college, that poses a significant challenge. However, if providers were able to prescribe a year's supply of medications knowing that their patient's insurance would be required to cover it, this barrier could be entirely removed. When considering the broad scope of usage of hormonal contraceptives outside of preventing pregnancy (such as cancer prevention and managing menstrual symptoms), removing barriers to continued usage of these medications is paramount. Additionally, the studies conducted on increased supplies of contraceptives have had incredibly positive results. A 2011 study conducted at the University of California, San Francisco found significant positive results associated with receiving a one-year supply of contraceptive pills, rather than a one-month or three-month supply. Women who received a one-year supply were more likely to continue to take the medication. Dispensing a one-year supply was found to reduce the odds of conceiving a pregnancy by 30% for women in the study, as well as reducing the odds of an abortion by 46%. When the above factors are taken into consideration, HB2190 has the potential for tremendous positive impact on the lives of many students across the University of Missouri System. Coverage for a one-year supply of contraceptives removes the need for students to try and arrange travel home to have their prescriptions refilled, along with being associated with reductions in the odds for both pregnancy and abortion. In light of this information, I urge the committee to support HB2190. Thank you for considering the views of students across the state on this matter.



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<b>WITNESS NAME</b>		
<b>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>HEIDI LUCAS</b>		PHONE NUMBER: <b>573-616-2740</b>
BUSINESS/ORGANIZATION NAME: <b>MISSOURI RURAL HEALTH ASSOCIATION</b>		TITLE: <b>EXECUTIVE DIRECTOR</b>
ADDRESS: <b>PO BOX 232</b>		
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>
		ZIP: <b>65102</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>
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<b>WITNESS NAME</b>		
<b>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>JEN BERNSTEIN</b>		PHONE NUMBER: <b>314-993-5181</b>
BUSINESS/ORGANIZATION NAME: <b>NATIONAL COUNCIL OF JEWISH WOMEN ST. LOUIS</b>		TITLE: <b>ADVOCACY MANAGER</b>
ADDRESS: <b>295 NORTH LINDBERGH BOULEVARD</b>		
CITY: <b>ST. LOUIS</b>		STATE: <b>MO</b>
		ZIP: <b>63141</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>
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<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>KATE KASPER</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:      ZIP:
EMAIL: <b>kkasper@stlrhc.org</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 4:17 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>		

**Date:** January 16, 2024  
**To:** Chairman Haden and Members of the House Committee on Healthcare Reform  
**From:** Riisa Rawlins, Regional Health Commission  
**RE:** In Support of HB 2190  
**Dear Chairman Haden and Members of the House Committee on Healthcare Reform,** My name is Riisa Rawlins, and on behalf of the Regional Health Commission (RHC), I am writing in strong support of HB 2190. The RHC is a non-profit organization representing hospital systems, community health centers, non-profits, providers, and patients. The RHC is committed to achieving zero health disparities through a community driven approach that yields health equity in all policy and outcomes. We ask you to support HB 2190 to expand access to contraception by prioritizing and passing annual-supply birth control legislation. HB 2190 would require any health benefit plan in Missouri to reimburse a health care provider or dispensing entity for the dispensing of a supply of self-administered hormonal contraceptives intended to last up to one year. This would increase access to oral contraception to prevent pregnancy. This is crucial because oral contraceptives efficacy depends on medication compliance. Providing an annual supply will decrease missed doses and increase medication compliance, resulting in fewer unintended pregnancies. To achieve our vision of zero health disparities, the RHC prioritizes expanding coverage for the underinsured and uninsured as well as achieving health equity. This legislation would support both these objectives by removing barriers to access to contraception and reinforcing the belief that everyone in our state should have the opportunity to determine if, when, and under what circumstances to get pregnant. A recent survey released in June of 2023 showed that Missourians are worried about future access to birth control and that there is considerable confusion about its legality. This survey of Missouri residents by the Missouri-based The Right Time initiative found that 72% of respondents — including 74% of Republicans, 85% of Democrats, and 87% of Independents — think the Missouri state legislature should pass policies that make birth control more affordable and accessible. Furthermore, 25 states already have already implemented this policy. HB 2190 would increase access to oral contraceptives and promote health equity. Currently, birth control pills are only dispensed for 30 or 90 days. Removing the barrier of having to travel to a pharmacy or clinic every month will result in fewer missed doses, fewer unintended pregnancies and better health outcomes for all. For the reasons outlined above, we encourage the Committee to pass HB 2160. If you have any additional questions or requests for information, please contact Kate Kasper, Manager of Policy and Advocacy at [kkasper@stlrhc.org](mailto:kkasper@stlrhc.org). Thank you for your time and consideration. Riisa Rawlins, Interim CEO Regional Health Commission



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>KORTNIE HUDDLESTON</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>kortniehuddleston@gmail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>1/16/2024 2:22 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

I wholeheartedly endorse the proposed bill in Missouri mandating health benefit plans to reimburse providers for self-administered hormonal contraceptives lasting up to one year. This legislation is pivotal in overcoming barriers to reproductive health access by ensuring coverage without imposing higher deductibles or co-payments. By promoting affordability and stability in family planning, the bill reflects a commitment to reproductive rights and healthcare equity. I urge your support for this measure, emphasizing its positive impact on individuals' well-being and contributing to a society that prioritizes accessible and fair reproductive healthcare.



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>KYNA IMAN</b>		PHONE NUMBER: <b>314-651-1185</b>	
REPRESENTING: <b>MISSOURI NURSES ASSOCIATION</b>		TITLE: <b>GOVERNMENTAL CONSULTANT</b>	
ADDRESS: <b>P.O. BOX 1483</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>63044</b>
EMAIL: <b>kynaiman@earthlink.net</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 4:50 PM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>MAGGIE EDMONDSON</b>		PHONE NUMBER:	
REPRESENTING: <b>ABORTION ACTION MISSOURI (FORMERLY PRO-CHOICE MISSOURI)</b>		TITLE:	
ADDRESS: <b>1210 S VANDEVENTER AVE</b>			
CITY: <b>ST. LOUIS</b>		STATE: <b>MO</b>	ZIP: <b>63110</b>
EMAIL: <b>maggie@abortionactionmissouri.org</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 7:09 PM</b>	

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Chair, Vice-Chair, members of the committee; thank you for the opportunity to submit testimony today in support of HB 2190. Abortion Action Missouri, formerly Pro Choice Missouri, works to protect and expand every Missourians’ right to bodily autonomy, to access essential reproductive healthcare including abortion care, to access accurate information to make the best decisions for ourselves and our families, and to parent our children in safety and dignity. Access to contraception is critical to not only preventing unintended pregnancy but also to alleviate symptoms and prevent onset of other life-altering reproductive and sexual health conditions. From relief from heavy periods, to management of endometriosis, and so much more— access to affordable and consistent contraception can change your life. Too often, annual supply prescriptions of contraceptives are contested by insurance companies— leaving Missourians who rely on consistent contraception unable to manage their own health and lives. Missourians who have lives to lead, responsibilities to cover, and ends to meet should not be arbitrarily forced to disrupt their livelihoods to access medication that their provider already indicates they should have. Simply put, the less trips you’re forced to take to the pharmacy the less likely you’re to accidentally miss your birth control pill, shot, patch or refill. Insurance companies typically cover a thirty- or ninety-day supply of prescription contraceptives. These coverage requirements act as a barrier to consistent use, especially those who live in rural areas, frequently travel, are unable to schedule regular visits to health care providers, or are unable to readily pick up their prescriptions. Whether or not you use contraception, the type of method(s) of contraception you choose to use, and when/ for how long you use contraception is a personal decision that should be left entirely up to individuals and anyone they choose to include in their sexual and reproductive health care decision making process free from coercion and harassment. Patients and providers should be making informed decisions about their own contraceptive needs— not insurance companies. We urge you to advance HB 2190.





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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MALLORY RUSCH</b>		PHONE NUMBER: <b>314-306-8945</b>	
BUSINESS/ORGANIZATION NAME: <b>EMPOWER MISSOURI</b>		TITLE: <b>EXECUTIVE DIRCTOR</b>	
ADDRESS: <b>PO BOX 104900</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65110</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>	
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<b>WITNESS NAME</b>		
<b>REGISTERED LOBBYIST:</b>		
WITNESS NAME: <b>MANDY HAGSETH</b>		PHONE NUMBER: <b>573-636-4060</b>
REPRESENTING: <b>MISSOURI FAMILY HEALTH COUNCIL</b>		TITLE:
ADDRESS: <b>1909 SOUTHRIDGE DR.</b>		
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>
		ZIP: <b>65110</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MATTHEW HUFFMAN</b>		PHONE NUMBER: <b>573-634-4161</b>	
BUSINESS/ORGANIZATION NAME: <b>MISSOURI COALITION AGAINST DOMESTIC AND SEXUAL VIOLENCE</b>		TITLE: <b>CHIEF PUBLIC AFFAIRS OFFICER</b>	
ADDRESS: <b>217 OSCAR DRIVE, SUITE A</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL: <b>mhuffman@mocadsv.org</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 5:24 PM</b>	

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The Missouri Coaliton Against Domestic and Sexual Violence (MOCADSV) is a membership association comprised of more than 100 domestic and sexual violence service provider organizations. MOCADSV member organizations provide life-saving services to survivors of domestic and sexual violence and ther families. Consistent access to contraception is an important aspect of safety planning for victims of domestic and sexual violence. Pregnancy can increase a person’s vulnerability to intimate partner abuse, and abusive partners often exercise reproductive coercion over their victims. Victims of intimate partner violence (IPV) who experience reproductive coercion are less likely to be able to make decisions about family planning and contraception because of the dynamics of power and control present in abusive relationships. This legislation would allow IPV victims to obtain a yearlong supply of contraception at one time, allowing them to make family planning decisions that are less likely to involve reproductive coercion. MOCADSV supports this legislation.



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<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>MICHAEL DREYER</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:      ZIP:
EMAIL: <b>mdreyer93@gmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 2:21 PM</b>
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I wholeheartedly endorse the proposed bill in Missouri mandating health benefit plans to reimburse providers for self-administered hormonal contraceptives lasting up to one year. This legislation is pivotal in overcoming barriers to reproductive health access by ensuring coverage without imposing higher deductibles or co-payments. By promoting affordability and stability in family planning, the bill reflects a commitment to reproductive rights and healthcare equity. I urge your support for this measure, emphasizing its positive impact on individuals' well-being and contributing to a society that prioritizes accessible and fair reproductive healthcare.



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<b>WITNESS NAME</b>		
<b>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>NANCY COPENHAVER</b>		PHONE NUMBER: <b>660-263-5725</b>
BUSINESS/ORGANIZATION NAME: <b>LEAGUE OF WOMEN VOTERS OF MISSOURI</b>		TITLE: <b>VICE PRESIDENT, LEAGUE OF WOMEN VOTERS OF MISSOURI</b>
ADDRESS: <b>1512 RIDGELINE DRIVE</b>		
CITY: <b>MOBERLY</b>		STATE: <b>MO</b>
		ZIP: <b>65270</b>
EMAIL: <b>copenhaver22@sbcglobal.net</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 10:18 AM</b>
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The League of Women Voters of Missouri supports HB 2190 to require health benefit plans to cover the cost of hormonal contraceptives intended to last up to one year, without greater deductible or co-payment than other services.



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>SARAH SCHLEMEIER</b>		PHONE NUMBER: <b>573-826-1274</b>	
REPRESENTING: <b>AMERICAN COLLEGE OF OBSTETRICIANS &amp; GYNECOLOGISTS</b>		TITLE:	
ADDRESS: <b>213 EAST CAPITOL AVENUE</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>SUSAN GIBSON</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>Onesuegibson@protonmail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>1/12/2024 7:14 PM</b>
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<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>SUSAN GIBSON</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:                  ZIP:
EMAIL: <b>Onesuegibson@protonmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/13/2024 2:27 PM</b>
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**I support this bill. It will result in fewer missed doses.**





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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>BONNIE LEE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>faith_to_hope@centurytel.net</b>		ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/15/2024 10:30 PM</b>

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

I oppose HB2190 Many insurances already pay for birth control without being strong armed by the government. A private insurance should be able to determine what they will cover. This bill is government overreach. Pregnancy is a natural occurrence of sexual intercourse between women and men. If you choose to have sex you choose the risk of being pregnant. Even if pregnancy occurs from, rape, the innocent newly created human does not deserve the death penalty and insurances should be able to choose whether to pay for a drug that can cause termination of that life. In essence, hormone birth control can be an abortifacient. A woman can ovulate (an egg released from the ovary) even when on the hormone birth control. Several factors might come into play that allows ovulation such as irregular periods, the woman does not take the birth control regularly; i.e., same time every day or miss a day; high stress or illness might disrupt her menses cycle. If the egg is released, a sperm can fertilize the egg, and a new life is promptly conceived. The secondary action of hormone birth control is to make the lining of the uterus less likely to accommodate the fertilized egg to implant. Thus, estrogen/progesterone types of birth control can be abortifacient. Missouri Medicaid programs already provide free birth control and the emergency morning after pill through The Missouri Health Council and Title X funding. HB2190 is not needed for women to obtain birth control methods. Because of the loose language of the bill, I have strong concerns that this bill provides loopholes for tax dollars, in the form of Medicaid, to pay for abortifacients given specifically to end a pregnancy. Abortion is done to specifically end the life of an innocent human. Say "no" to this bill.



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</b>
COMMITTEE: <b>Healthcare Reform</b>		
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>KATHLEEN FORCK</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:      ZIP:
EMAIL: <b>kathythebo@hotmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>

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

Many insurance already pay for birth control without interference from the government. A private insurance should be able to determine what they will cover. This bill is government overreach. Pregnancy is a natural occurrence of sexual intercourse between women and men. If you choose to have sex, you choose the risk of being pregnant. Even if pregnancy occurs from rape, the innocent newly created human does not deserve the death penalty, and insurance should be able to choose whether to pay for a drug that can cause the termination of that life. In essence, hormone birth control can be an abortifacient. A woman can ovulate (an egg released from the ovary) even when on the hormone birth control. Several factors might come into play that allow ovulation, such as irregular periods, the woman does not take birth control regularly, i.e., same time every day or miss a day; high stress or illness might disrupt her menses cycle. If the egg is released, a sperm can fertilize the egg, and a new life is promptly conceived. The secondary action of hormone birth control is to make the lining of the uterus less likely to accommodate the fertilized egg to implant. Thus, estrogen/progesterone types of birth control can be abortifacient. Missouri Medicaid programs already provide free birth control and the emergency morning-after pill through The Missouri Health Council and Title X funding. HB2190 is not needed for women to obtain birth control methods. Because of the loose language of the bill, I have strong concerns that this bill provides loopholes for tax dollars, in the form of Medicaid, to pay for abortifacients given specifically to end a pregnancy. Abortion is done to end the life of an innocent human specifically. I say "no" to this bill.



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</b>	
COMMITTEE: <b>Healthcare Reform</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>MICHAEL HENDERSON</b>		PHONE NUMBER: <b>573-893-4241</b>	
REPRESENTING: <b>MISSOURI INSURANCE COALITION</b>		TITLE: <b>GENERAL COUNSEL AND GOVERNMENT AFFAIRS DIRECTOR</b>	
ADDRESS: <b>220B E HIGH ST</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65109</b>
EMAIL: <b>mike@moinsurancecoalition.com</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>1/16/2024 12:30 PM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. The Missouri Insurance Coalition opposes HB 2190.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</b>	
COMMITTEE: <b>Healthcare Reform</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>SEAN STEPHENSON</b>		PHONE NUMBER: <b>240-909-1544</b>	
REPRESENTING: <b>PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION</b>		TITLE:	
ADDRESS: <b>325 7TH STREET NW</b>			
CITY: <b>WASHINGTON</b>		STATE: <b>DC</b>	ZIP: <b>20004</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/16/2024 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</b>	
COMMITTEE: <b>Healthcare Reform</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input 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 KANSAS CITY</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>1/16/2024 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</b>
COMMITTEE: <b>Healthcare Reform</b>		
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>TIMOTHY FABER</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:      ZIP:
EMAIL: <b>tfaber@mobaptist.org</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>1/15/2024 4:45 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>		

This bill attempts to do what the Federal HHS did 12 or so years ago and led to a lawsuit by Hobby Lobby, which Hobby Lobby won and the HHS lost - see SCOTUS: Burwell v. Hobby Lobby. See also SCOTUS: Little Sister of the poor case. Links to both are below. Thus passing this bill would be contrary to Supreme Court Precedent and lead to <https://www.law.cornell.edu/supct/pdf/13-354.pdf> [https://www.supremecourt.gov/opinions/19pdf/19-431\\_5i36.pdf](https://www.supremecourt.gov/opinions/19pdf/19-431_5i36.pdf) <https://www.findlaw.com/family/reproductive-rights/the-hobby-lobby-case-contraception-and-religious-freedom.html>



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</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>INDIVIDUAL:</b>			
WITNESS NAME: <b>CHAKSHU GUPTA</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>chakgupta@gmail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>1/15/2024 10:13 AM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2190</b>		DATE: <b>1/16/2024</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>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>SARAH ANDERSON</b>		PHONE NUMBER: <b>573-340-9112</b>
BUSINESS/ORGANIZATION NAME: <b>MOST POLICY INITIATIVE</b>		TITLE: <b>POLICY FELLOW</b>
ADDRESS: <b>238 E HIGH ST</b>		
CITY: <b>JEFFERSON CITY, MO</b>		STATE: <b>MO</b>
		ZIP: <b>65101</b>
EMAIL: <b>sarah@mostpolicyinitiative.org</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>1/16/2024 3:38 PM</b>

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

My name is Dr. Sarah Anderson; I am a fellow with MOST Policy Initiative. We provide non-partisan research for the Missouri state legislature. I am talking about our Science Note Prescription Contraceptive Supply. Prescription contraceptives are more effective compared to over the counter contraceptives. However, these contraceptives can be difficult to obtain. In MO, many counties, especially rural counties, have areas that lack access to primary medical care. In 2015, 7% of women who had an unintended pregnancy reported problems acquiring birth control. 1 in 5 women in Missouri do not have health insurance. Black and Hispanic Missourians are less likely to have health insurance compared to White Missourians. Uninsured women are less likely to use prescription contraceptives. A 1 year supply of contraception increases plan adherence and continuation, decreases the likelihood of an unintended pregnancy and abortion, and decreases provider spending. Twenty-five states require insurance to cover a 1 year supply of contraception, including Texas, Illinois, Louisiana, and West Virginia. However, research suggests that healthcare professionals do not prescribe more 1-year prescriptions, even if their state has expanded coverage. This is due to lack of awareness of policy and confusion about insurance. Changing the standardized prescription order default from one month to 12 months is a potential solution.