



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2883		DATE: 4/9/2024	
COMMITTEE: Veterans			
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@mail.com	ATTENDANCE: In-Person	SUBMIT DATE: 4/9/2024 11:45 PM	

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I am in Support of this Bill and its intension to assist Veterans with Alternative Treatment Methods.



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BLAKE ARRON RICHARDSON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: blake@helpourheroes.org	ATTENDANCE: Written	SUBMIT DATE: 4/8/2024 9:25 PM

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

Good day, Honorable Members of the Missouri House and Senate, My name is Blake Richardson, a proud veteran of the United States Marine Corps, having served with distinction and honor to the rank of Sergeant. I am a lifetime member of the esteemed Veterans of Foreign Wars (VFW) organization. In my ongoing commitment to support those who serve, I founded and presently preside over 'Help Our Heroes', a 501(c)(3) non-profit organization. Through this platform, I actively advocate for the welfare and rights of Veterans, active service members, first responders, and their families. Today, I stand before you to recount my personal journey navigating the challenges of Traumatic Brain Injury (TBI) and Post-Traumatic Stress Disorder (PTSD). I aim to shed light on the transformative impact of Hyperbaric Oxygen Therapy (HBOT) - a treatment that has not only revolutionized my life, but also the lives of countless other Veterans who had similar symptoms that could not be relieved through medications and or therapies. Moreover, I intend to champion the cause for sustained support and acknowledgment of HBOT as an effective therapy for both PTSD and TBI. During my tenure in the military and a series of deployments overseas, particularly in combat zones, I endured low-level blasts (LLBs) which resulted in multiple brain injuries. Over time, the symptoms of mild Traumatic Brain Injury (mTBI) began to manifest more prominently. Furthermore, my participation in numerous combat training exercises exposed me to additional low-level blasts (LLB), further compounding the challenge. For clarification, the acronym (HLB) refers to high-level blast overpressure, commonly associated with the detonation of an improvised explosive device (IED). On the other hand, LLB signifies low-level blast overpressure, typically generated from the discharge of specific weapons such as artillery, shoulder-mounted devices, .50 caliber firearms, and even indirect fire (IDF). These variations in overpressure are critical to understanding the different sources and impacts of blast-related injuries. In January 2006, while stationed at Al Taqaddum, Iraq, I experienced a life-altering event. An RPG struck the sandbags just outside the general-purpose (GP) tent where I was sleeping. The concussive force of the blast resulted in a mild traumatic brain injury. This incident led to an immediate onset of disorienting symptoms: involuntary urination, sudden ringing and hearing loss, confusion, fragmented recollections of the event, recurring migraines, and short-term memory loss. Prior to embarking on my second tour of duty in Iraq, I underwent rigorous helicopter water crash training which resulted in a near-drowning incident. This, coupled with various other training and Military Occupational Specialty (MOS)-specific events, marked the onset of progressive and increasingly noticeable symptoms of Traumatic Brain Injury (TBI). Over time, these symptoms have become chronic, persistently affecting my daily life. The challenges I continued to grapple with, up February 2024, include difficulty concentrating, unpredictable mood swings, persistent ringing in my ears, hearing loss heightened sensitivity to light, insomnia, debilitating migraines, significant anxiety and depression, as well as short-term memory loss. Currently, the primary therapeutic interventions for PTSD symptoms encompass Selective Serotonin Reuptake Inhibitors (SSRIs) and Serotonin and Norepinephrine

Reuptake Inhibitors (SNRIs). While these treatments are generally effective, they may be associated with mild to moderate side effects. These can range from gastrointestinal discomfort and increased perspiration to headaches and bouts of dizziness². In the management of Traumatic Brain Injuries (TBIs), medications such as Carbamazepine and Valproate are employed to control behavioral disorders. However, it's important to note that the full spectrum of their long-term effects remains under investigation and is not yet fully understood³. Since 2009, my journey with mental health has led me down a complex path of numerous prescriptions - over ten different types of SSRIs and SNRIs, as well as other medications. These treatments often felt like mere band-aids, offering temporary relief without addressing the root causes of my symptoms. In addition, I spent a decade participating in various forms of behavioral therapy, both group and individualized. Despite these experiences, a sense of true healing remained elusive, leading me to question if a long-term solution truly existed. The turning point arrived in 2020, when a combat-wounded, amputee Army Ranger reached out to our organization, Help Our Heroes. He was seeking assistance with room and board expenses, as well as meals, while undergoing Hyperbaric Oxygen Therapy (HBOT) at the Hyperbaric Health and Wellness Foundation in Hailey, Idaho. This treatment was aimed at improving his gait and alleviating symptoms of Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI). At first glance, I considered his condition to be far more severe than mine. However, this prompted me to delve deeper into the potential benefits of HBOT. To my surprise, my research led me to realize that I, too, could be a suitable candidate for this innovative therapy. In 2021, I discovered a local facility, Restore Hyper Wellness, offering HBOT. This unexpected encounter enabled me to procure a prescription specifically catered to address my PTSD and TBI symptoms using their "soft-shelled" hyperbaric chamber. Understanding the potential benefits of this "soft-shelled" chamber in effectively treating my symptoms, I made a personal investment and completed a series of 30 dives. As I progressively underwent more HBOT sessions, I began to witness and experience tangible improvements. My mental clarity improved, leading to a notable decrease in brain fog. Anxiety and depression levels were significantly reduced. My comprehension abilities enhanced, migraines became manageable, mood swings less frequent, and overall, I experienced a surge in energy. Each dive brought me closer to wellness, proving that this investment was indeed a rewarding journey toward healing. However, after approximately 2 years, my wife and I began to observe a resurgence of the PTSD and TBI symptoms. This led me to delve deeper into research and engage in insightful discussions with leaders at TreatNow.org in July 2023. Through these interactions, I learned that "soft-shelled" hyperbaric chambers may not be as effective in fully healing damaged brain tissues as their "hard-shelled" counterparts. Moreover, it was brought to my attention that typically, individuals using HBOT for PTSD or TBI require between one to three treatment series before experiencing complete healing. Each series consist of 40 treatments or dives. About 2 months ago, I had the privilege of meeting the proprietor of the Hyperbaric Healing Institute, where I was offered therapy in a "hard-shelled" chamber. Upon commencing this new treatment regimen, I noticed a significant decline in my symptoms. My wife also observed further positive transformations, which were not as apparent with the "soft-shelled" chamber treatment, including improvements in my speech, sleep, a noticeable increase in motivation. I chronicled my HBOT journey on LinkedIn, providing others with a transparent view of the results and offering hope to veterans who may feel that there are limited options available for addressing their PTSD and TBI symptoms. This narrative serves not only as my personal testament but also as an inspirational beacon for others navigating similar health challenges. My symptoms post 17th HBOT treatment in a "hard shell" chamber: Following the initiation of Hyperbaric Oxygen Therapy (HBOT) within a robust "hard-shell" chamber, utilizing 100% oxygen at pressures of 1.5 to 2.0 ata for an uninterrupted duration of 60 minutes, there has been a remarkable transformation in my symptoms related to PTSD and TBI. From as early as the second session, the therapeutic benefits became evident. I found myself able to enjoy a full night's sleep without the aid of any medication. I feel more motivated in the morning to get out of bed and start my day. I have minimal to no anxiety or depression. I have found that if I have anxiety or depression, I can more easily management it through breathing exercises and meditation. My conversational skills have evolved noticeably. No longer do I find myself pausing mid-conversation, grappling to recall my train of thought. Social situations, once a source of anxiety and stress, have now become more manageable, allowing me to navigate public spaces with ease and confidence. Emotional stability has been another significant milestone. The frequency of mood swings has diminished considerably, and when they do occur, I find them far easier to manage. This newfound emotional equilibrium has fostered a deeper connection with my family, encouraging me to spend quality time with my children and wife rather than withdrawing into solitude. Physical activity has become a welcome part of my daily routine, replacing the inertia that once held me captive. And by the eleventh session, another unexpected benefit surfaced - the joy of reading returned. For the first time in what feels like forever, I can not only read but also comprehend and enjoy literature once again. Moreover, I've noticed a substantial improvement in my organizational skills, enabling me to structure my life more effectively. This journey through HBOT therapy has been transformative, breathing new vitality into every aspect of my life thus far. I

have provided you with 2 RightEye exams and a personal testimonial from one of the Veterans that reached out to Help Our Heroes asking for help in his journey to receiving HBOT. I respectfully urge this esteemed committee to lend its full endorsement to House Bill (HB) 2883. I further implore the distinguished representatives of the great state of Missouri to affirm this crucial legislation. HB2883 represents not just a piece of legislation, but a lifeline for our brave brothers and sisters in the armed forces. They have selflessly served our nation, and it is our collective responsibility to ensure they have expansive resources to address their mental health challenges. Thank you for your time and for taking my testimonial into account. Very respectfully, Blake Richardson, MHA,
USMCblake@helpourheroes.org 913-605-2747 109 Nelson Cir. Olathe, KS 66061 Sources: 1.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8700773/#2>.
https://www.ptsd.va.gov/understand_tx/meds_for_ptsd.asp3.
<https://www.sciencedirect.com/science/article/pii/S1877065715005540?via%3Dihub>



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DALE LUTZEN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dlutzen@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 4/5/2024 10:11 AM
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I support HB 2883 Veterans Traumatic Brain Injury Act. A recent study published in the Journal of American Medical Association (JAMA) Network4 found that veterans with a history of TBI are at an increased risk compared to veterans without a history of TBI and at a far greater risk compared to the general U.S. population. Over the 15-year period from 2006-2020, veterans with TBIs had suicide rates three times higher than the U.S. adult population. The state of Missouri experiences this problem even more acutely. The Missouri Governor's Challenge to Prevent Suicide Among Service Members & Veterans5 website states that the Missouri veteran suicide rate of 45.2 (out of 100,000) is almost two and a half times greater than the national average of 18 (out of 100,000) veteran suicides. Anything we can do to reduce veterans suicides must be considered in Missouri. Thank you Dale Lutzen



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INDIVIDUAL:		
WITNESS NAME: DALE LUTZEN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dlutzen@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 4/8/2024 6:56 PM
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Good morning, esteemed members of the Missouri State Veterans Committee and thank you for allowing me time to provide information on a very critical veterans issue. My name is Dale Lutzen, retired Senior Master Sergeant USAF, and current member of the Air Force Sergeant's Association and the Disabled American Veterans, both recognized Veteran Service Organizations. I'm here today to speak in support of House Bill 2883 "Veterans Traumatic Brain Injury Treatment and Recovery Act" put forth by Representative Chris Robert Sauls (District 21). Having served in the Vietnam war and Operations Desert Storm and Desert Shield and regularly engaging with active-duty soldiers and veterans, I can personally attest to the conditions and effects combat soldiers experience both during and after the battle on the field has been fought. The increased use of Improvised Explosive Devices (IED's) by enemy troops in conflicts such as Operation Enduring Freedom in Afghanistan and Operation Iraqi Freedom in Iraq – collectively referred to as the Gulf Wars – has resulted in increased blunt force trauma type injuries to our service members¹. Based on a study published by the RAND Center for Military Health Policy Research²: - Approximately 18.5% of U.S. servicemembers who have returned from Afghanistan and Iraq currently have post-traumatic stress disorder or depression, and- 19.5% report experiencing a traumatic brain injury or (TBI) during deployment. The National Center for Veterans Analysis and Statistics³ reports that 156,198 veterans of the Gulf Wars reside in the state of Missouri. Applying the RAND TBI statistic of 19.5%, that translates to approximately 30,458 Missouri Veterans who are likely to be suffering from some form of traumatic brain injury. Examples of symptoms commonly experienced with brain injury include post-traumatic stress disorder (PTSD), speech difficulties, fatigue, headaches, migraines, insomnia, cognitive impairments, light sensitivity, having trouble with short- and long-term memory, and a higher rate of suicide. A recent study published in the Journal of American Medical Association (JAMA) Network⁴ found that veterans with a history of TBI are at an increased risk compared to veterans without a history of TBI and at a far greater risk compared to the general U.S. population. Over the 15-year period from 2006-2020, veterans with TBIs had suicide rates three times higher than the U.S. adult population. The state of Missouri experiences this problem even more acutely. The Missouri Governor's Challenge to Prevent Suicide Among Service Members & Veterans⁵ website states that the Missouri veteran suicide rate of 45.2 (out of 100,000) is almost two and a half times greater than the national average of 18 (out of 100,000) veteran suicides. Based on a 2022 RAND report⁶, around half of those who need treatment for TBI seek it. Of those who seek treatment, slightly more than half receive minimally adequate care. The study concludes that access to care, cost of care, and effective treatment options result in major gaps for those who need care. Currently, service members with TBI are typically prescribed drug treatment plans requiring long-term drug costs and usage which may treat the symptoms but do NOT cure the injury. Drug treatment plans may also unintentionally contribute to the TBI Veteran suicide and opioid epidemic⁷. As an alternative to drugs, Hyperbaric Oxygen Therapy

(HBOT) stimulates brain wound healing and can reverse soft tissue and neurocognitive damage. This treatment allows most patients to experience rapid recovery of cognitive and neurological functioning without surgery or drugs. Numerous studies⁸ have been published scientifically proving HBOT as a safe and effective treatment option for brain wounds. So why aren't veterans receiving HBOT as a reasonable and viable treatment option? Why do treatment facilities turn veterans away – even if the veteran's doctor prescribed HBOT and the veteran has their own personal funds to pay for their share of the cost? The primary reason - HBOT for TBI is not listed on the Medicare 'approved' list⁹. Medicare does allow HBOT for treatment of conditions such as 'crush injuries and suturing of severed limbs', 'soft tissue radionecrosis', and 'diabetic wounds'. Yet HBOT is considered 'off label' for treatment of TBI despite the expansive scientific evidence of HBOT's effectiveness for treatment of Traumatic Brain Injuries. This is a policy issue that needs to change based on fact. Through the efforts of several national veteran coalition groups and with the support of AFSA and other VSOs, progress is being made to raise awareness and make changes. To date, ten states – (Oklahoma, Texas, Indiana, Arizona, Kentucky, Florida, North Carolina, Maryland, Virginia, and Wyoming) have enacted HBOT legislation. Six of those states included partial or full funding of treatment in their original legislation while others are introducing additional legislation for funding or seeking reimbursement from the federal government based on the United States Veteran's Bureau War Risk Insurance Act of 1923. So, I'm here today to talk to you about how you can help. How you can change things right here in Missouri to help our Missouri veterans. HBOT is proven to be safe and effective at healing brain wounds. Missouri veterans with TBI simply need access to HBOT care. At its most basic level, HB2215 gives veterans, who have been diagnosed with TBI, the right to receive HBOT treatment as prescribed by a doctor. The men and women who have been injured while serving our country deserve to have effective treatment options available to them so they can fully return to their country, their families, and their lives. It's the least we can do for those who have given us so much. I would ask this committee to fully support House Bill (HB) 2215 and recommend the representatives of the great state of Missouri approve this bill. Thank you again for your time today. Dale Lutzen, SMSgt (ret) USAFdlutzen@gmail.com 402-312-7895 8700 NE 91st Street Kansas City, MO 64157
https://pubmed.ncbi.nlm.nih.gov/19404818/2https://www.rand.org/pubs/research_briefs/RB9336.html3 National Center for Veterans Analysis and Statistics. (2020)
https://www.va.gov/vetdata/veteran_population.asp#:~:text=MS-,MO,-Missouri4 TBI Triples Suicide Rate Among Veterans vs. General US Population (October 11, 2023)
<https://www.usmedicine.com/clinical-topics/mental-health/tbi-triples-suicide-rate-among-veterans-vs-general-us-population/#:~:text=From%202019%2D2020%2C%20suicide%20rates,population%2C%20according%20to%20the%20report5> Missouri Governors Challenge Suicide Prevention <https://mogovchallenge.com/about-suicide/#facts6>
https://www.rand.org/pubs/research_reports/RRA1205-1.html7
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9262363/8https://doi.org/10.1371/journal.pone.0079995https://www.lsuhs.edu/newsroom/Veterans%20Study%20Reports%20Reduction%20in%20Suicide%20Ideation%20after%20HBOT.htmlhttps://www.brainline.org/story/time-right-alternative-therapieshttps://www.frontiersin.org/journals/neurology/articles/10.3389/fneur.2022.815056/full?utm_source=Email_to_authors_&utm_medium=Email&utm_content=T1_11.5e1_author&utm_campaign=Email_publication&field&journalName=Frontiers_in_Neurology&id=8150569https://www.medicare.gov/coverage/hyperbaric-oxygen-therapy <https://www.oxygenunderpressure.com/general-8-2>



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUSAN GIBSON		PHONE NUMBER:
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOHN BOYER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
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veterans would not need alternative treatments if you would hold public servants accountable to their responsibilities. I along with Three other service connected disabled veterans worked at Fulton State Hospital each one of us was treated like animals I was placed in empty ward for 4 months the other veteran was locked in sally port surrounded like a caged animal we were hot lunged at by our supervisors. The third veteran committed suicide by cop. We have reported to Human rights commission the EEOC nothing is done in fact the AHC says Mo is Right to work so the employers can do that type of behaviors driving around Mo I see a lot of trash camping trailers everywhere. Welcome to right to work state. Our state once beautiful everyone wanted to visit. It is no longer a state of visions