



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026
COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BRENDA ARP		PHONE NUMBER: 660-833-8419
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 301 W COLLEGE AVE,		
CITY: SHELBINA		STATE: MO
		ZIP: 63468
EMAIL: moarps@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:24 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I oppose budget cuts to self-directed services. This will have a detrimental effect on my family and thousands of families in Missouri. If my daughter loses her self-directed step because of the budget cut, she's at risk of being placed in a more restrictive environment that will cost six times the amount of what her budget is.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: BRENT COCHRAN		PHONE NUMBER: 417-691-5539	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 3734 NORTH CROSWELL AVENUE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65803
EMAIL: brent.sheri@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 8:39 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Subject: Opposition to Proposed Cuts to Self-Directed Services

I am writing in opposition to the proposed cuts to self-directed services for individuals with disabilities.

As a fiscal conservative, I strongly believe this program is not only compassionate but also far more cost-effective than institutional care. In 2009, it cost over \$160,000 annually to house one individual in a state facility. Today, that cost is estimated to exceed \$600,000. In contrast, the average cost of self-directed care in 2025 is less than \$50,000 per individual.

Families already face significant challenges in finding and retaining caregivers, especially since many positions offer no vacation time, benefits, or health insurance. Reducing pay rates will only make this process more difficult and place additional strain on families who are doing their best to care for their loved ones at home.

However, this issue is not just about finances—it is about quality of care. Parents deserve the ability to guide and control the care their children receive.

My son has Down syndrome. For much of the 20th century, individuals with Down syndrome had a life expectancy of less than ten years. As care improved—particularly with the move away from institutionalization—that life expectancy has increased to nearly sixty years today. This progress reflects the importance of family-centered, individualized care.

Please do not force families into choices that could negatively affect the health, dignity, and well-being of their loved ones. I respectfully ask you to consider both the human and financial impact of these proposed cuts.

Thank you for your time and thoughtful consideration.

Sincerely,
Brent Cochran



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ADDRESS: 3734 NORTH CROSWELL AVENUE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65803
EMAIL: brent.sheri@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 8:41 PM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BRIAN WRIGHT		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 39792 MYERS ST		
CITY: MALDEN		STATE: MO
		ZIP: 63863
EMAIL: brianwright42@yahoo.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 1:42 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Subject: Continued Concerns Regarding Proposed Budget Cuts

Dear Representatives and senators,

I hope this message finds you well. Following up on my previous correspondence, I want to reiterate the urgent need to retain and fairly compensate the personal assistants who are vital to our special needs community. These pay cuts threaten not only the quality of care but also the stability and retention of these dedicated caregivers.

It's also important to note that these budget cuts are directly linked to the so-called "Big Beautiful Bill." At the time of its passage, both President Trump and Secretary of Health and Human Services Robert F. Kennedy assured us that the special needs community would not be adversely affected. Unfortunately, we are now witnessing that these cuts are indeed having a direct and harmful impact on our community.

As a Republican and as part of a community that includes many Republican constituents with special needs children, we want to emphasize that our voices and concerns matter. We are your constituents, and as we approach this election year, it's crucial to remember that our support and votes depend on how these issues are addressed.

Thank you once again for your attention to these important matters.

Sincerely,

Brian Wright



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CAITLIN NEELY		PHONE NUMBER: 417-689-3511	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 3332 S MEADOWLARK AVE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65807
EMAIL: caitlin.neely937@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 11:17 PM	
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Perspective: SDS Direct Support Worker

I am a Self-Directed Services (SDS) Medical Personal Assistant. I am not a family member or guardian of a person receiving services. I submit this testimony as a professional caregiver, with over ten years of experience in the professional caregiving profession, and have worked across multiple disability service models in Missouri, including institutional organizations, public schools, behavior support clinics, and Self Directed Services.

I am speaking today because SDS is the only system I have experienced that consistently allows people to be cared for as individuals — and allows workers to act responsibly when real-world situations arise.

In traditional provider organizations, rules are designed to protect systems. In practice, those rules often fail the people they are meant to protect. Staff are regularly placed in situations where strict policy compliance conflicts with safety and basic care.

Medication access:

As part of an institutional care organization, who utilized Individual Supported Living homes with 2-3 roommates, I supported a client who became acutely ill when her prescribed medications had expired and replacements had not yet arrived. Due to rigid medication rules, I was legally prohibited from providing even basic over-the-counter treatment. The process in place by the organization required all medications, including basic things such as sunscreen and ibuprofen, to be prescribed by a doctor and delivered by the pharmacy. Due to a severe winter storm incoming at the start of a weekend, it was not expected to receive medication for at least four days. Only immediate guardian intervention prevented hospitalization. Without that, the choice would have been to allow harm or violate regulations.

Staffing failures:

As part of the care organization, no-call/no-shows and sudden resignations routinely left me alone with clients for extended periods, sometimes exceeding 24 hours. These situations are unsafe, unlawful, and exhausting, yet occurred regularly.

Violence and safety:

In one placement with the care organization, escalating violent behavior from an individual receiving

services resulted in staff injury and later an assault on a roommate requiring medical treatment. Requests for additional staffing or temporary reassignment were denied, and the incident was not disclosed to the affected guardian. Meaningful intervention occurred only after escalation outside normal reporting channels, including reporting to the Hotline for abuse and neglect of at risk individuals.

Medical and hospice delays:

I observed medical and hospice care delayed by layered approval processes that prioritized paperwork over urgency. In some cases, timely care occurred only because staff bypassed internal systems to prevent neglect.

These are not isolated incidents. They are predictable outcomes of rigid, centralized systems, under staffing, and funding pressure.

These conditions contrast sharply with my experience under SDS.

Under SDS, care is individualized and responsive. Decisions are made by people who know the individual. Communication is direct. I am trusted to use professional judgment and supported when unexpected situations arise. Individuals receiving services experience continuity, safety, and dignity.

From my professional perspective, reducing or destabilizing SDS funding would not simply reorganize services. It would push individuals back into systems that are more rigid, less responsive, and more likely to place both clients and workers in unsafe situations.

Having worked inside both models, I can state plainly: SDS prevents harm that traditional systems repeatedly fail to prevent.

The impact of reducing the SDS budget and lowering worker pay, would require me to leave my position for a higher paying job or seek out a second job and possibly seek out social support programs, like SNAP and Section 8 housing.

The budget cut would absolutely impact the quality of care that the individual I serve receives as well. I provide care for a nine year old girl who has Rett Syndrome with concerns with epilepsy and other related health issues. She is nonverbal and nonmobile, requiring total support for all of her daily care and activities. Due to the nature of her disability, it is imperative that someone highly skilled and familiar with her is with her at all times. She is unable to vocalize when she needs help, yet has episodes multiple times a day which require prompt action and support to ensure her health and safety. Due to the lack of workers seeking caregiver employment, people showing initial interest but not following through with an interview, and even some getting hired then not showing up for a shift, it took her family months to find someone able to meet their needs. Having been with this family since June 2024, I have been able to participate in the care of their child and play a part in her improved overall health as a valued careteam member. In my opinion, the best care for this child, is in her own home with her family. This cannot happen if the SDS program is hit with the proposed cuts.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DEENA MENENDEZ		PHONE NUMBER: 631-523-5682	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 1220 S HICKORY GROVE SCHOOL RD ROCHEPORT MO 65279			
CITY: ROCHEPORT		STATE: MO	ZIP: 65279
EMAIL: dmenendez226@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 8:17 PM	
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Chairpersons and Members of the Committee,

My name is Deena Menendez and I am the parent of a joyful 25-year-old adult with Down syndrome named Starlette. I am here today because my daughter is one of thousands of Missourians who will be directly and severely harmed by the proposed cuts to the Self-Directed Services (SDS) program in House Bill 10.

Down syndrome is a lifelong genetic condition. In Star's case, it is compounded by unexplained seizures. Between 8–26% of people with Down syndrome experience seizures—far higher than the general population. Because of her cognitive delays and the risk of injury during these episodes, Star requires 24-hour supervision.

Under the SDS program, I serve as her full-time caregiver. Because of the level of care she requires, I cannot hold outside employment. The personal assistant wage provided through SDS is what allows us to pay our mortgage, keep our utilities on, and maintain a stable home for our daughter.

House Bill 10 proposes cuts that would reduce my pay by more than six dollars per hour. That is not a minor adjustment. That is a financial blow that would make it impossible for us to survive, let alone provide Star with the safe, dignified life she deserves.

These cuts are not abstract. They have real, predictable consequences.

What HB10 Would Do

Reduce personal assistant hourly budgets from \$33.00 to \$26.04

Cap maximum pay at \$22.88/hour

Eliminate Community Specialist services

Eliminate Individual Goods and Services

These supports are not luxuries. They are the foundation that allows people with disabilities to live in their homes and communities rather than institutions.

Proof From Other Missouri Families

Missouri families across the state are already sounding the alarm about these cuts. A recent news segment from OzarksFirst shows parents warning that the proposed changes to SDS could force them out of the home and potentially push their children into state institutions. One mother explained that without SDS, she would have to leave home to work, making it impossible to safely care for her autistic son who relies on the program for daily support.

This is not an isolated story. Families statewide are expressing the same fears: loss of independence, loss of safety, and the very real possibility of institutionalization if SDS is dismantled.

Here is the link for your review

News Segment <https://www.ozarksforst.com/news/missouri-news/missouri-families-warn-about-devastating-cuts-to-disability-services/>

The Financial Reality

The numbers tell a story that cannot be ignored:

Self-Directed Services cost: \$48,000 per person per year

Institutional care cost: \$161,096 per person per year in 2009—now estimated at over \$600,000 per year

HB10 would eliminate a \$48,000 program only to push people into placements costing more than half a million dollars annually.

This is not fiscal responsibility.

This is not stewardship of taxpayer dollars.

This is a decision that is both fiscally reckless and morally indefensible.

Missouri will not save money.

Missouri will spend 12.5 times more to institutionalize people who could otherwise live safely at home.

Statewide Petition Efforts

Missourians are mobilizing. A statewide petition titled “Save Our Choice: Protect Self-Directed Supports in Missouri” has already gathered hundreds of signatures from families who depend on SDS to keep their loved ones safe and at home.

This petition reflects a simple truth:

Missourians want SDS protected—not gutted.

A copy of the petition can be found: <http://ipt.io/JHIKA>

What This Means for My Family

If these cuts go into effect, I will no longer be able to provide the care my daughter needs. We will be forced into an impossible situation: either surrender her to an institution or face financial collapse.

No parent should ever be put in that position.

No Missourian with a disability should be treated as a budget line to be reduced.

My Request to You

I urge you to reject the proposed cuts in House Bill 10.

Protect the SDS program.

Protect families like mine.

Protect the right of people with disabilities to live in their homes, their communities, and their lives—not in institutions.

Thank you for your time and for considering the real human impact of this legislation.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DIANA SPARE		PHONE NUMBER: 816-333-4552	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 5310 HOLMES ST			
CITY: KANSAS CITY		STATE: MO	ZIP: 64110
EMAIL: dianaspare@aol.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 11:40 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

**OUR dAUGHTER WHO IS 39 YEARS OLD, HAS SDS AND IT IS CRITICAL TO HER MENTAL HEALTH AND PHYSICAL HEALTH TO RECEIVE THESE SERVICES. WITHOUT THEM HER LIFE WOULD BE DIMINISHED.
PLEASE DON'T TAKE MONEY FROM THOSE MOST VULNERABLE**



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DIANE MATTIONE		PHONE NUMBER: 816-785-1620	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 8013 E 127TH TER			
CITY: GRANDVIEW		STATE: MO	ZIP: 64030
EMAIL: dmattione@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 10:01 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I have been informed that the governor is recommending reducing the SDS budget which serves the special need community by providing personal care to individuals

My son Andrew is about to turn 35. We have been using SDS services for about 14 years. Because of direct Services Andrew is able to work part time, live on his own, be in Special Olympics, go to the gym, go to church activities, go to doctor and therapy appointments. He even volunteers at a children's home once a week. Because of SDS Andrew has lived on his own for the last 14 years and had the same job the last 12.5 years. In the beginning of using SDS we were constantly looking for employees. Turn over rate was very high. Since the rates of pay was raised we have had the same employees. The average employee would leave within the first 6-12 months. Now we have consistent care, employees who have gotten to know his needs. Because Andrew works retail his work schedule varies greatly from week to week. An employee may work an 1 in the morning and 2-3 in the afternoon. On his days off they may work 8 hours, but since Andrew gets his schedule the Saturday before the following week it makes life difficult to plan for everyone. These employees earn their money. They deal with adult autism melt downs. They help him keep his apartment organized and clean. Which makes it safer. They help him go to the grocery store to go shopping. And all of the things I listed above. They receive no mileage, no benefits, no sick or vacation time. They earn the money. Agencies and group homes have a high turnover rate with their employees. Incidences of abuse is much higher with agencies and group homes.. And agencies and group homes cost more money than SDS does. We used all of our budget last year but \$200. And we only didn't use that cause I was afraid we would go over.

Can you imagine telling your staff you're going to reduce their rate of pay \$6.96 an hour? Can you imagine telling them you can't give them a consistent schedule? Can you imagine asking them to drive all over town and not reimbursing them for any mileage. Can you imagine telling that having someone around them who may have a melt down on a regular basis is there new normal. But we are just going to give you a few dollars over minimum wage and there are no benefits. That is what I will be asking our SDS employees to do if the governors propose budget passes.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: EMILY BOWEN-MARLER		PHONE NUMBER: 417-860-5266	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 2342 S LAUREL AVE			
CITY: SPRINGFIELD		STATE: MO	ZIP: 65807
EMAIL: rev.emily.bowen@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/4/2026 2:54 PM	
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I have a friend who is a caregiver for her adult son and this bill robs them of the choice to be able to care for her son in her home and instead forces him into an institution, which costs eleven times more than if the resources were directed to support in-home caregiving! Please, allow parents to give their nonverbal adult children a voice, allow them to advocate for them, allow them to be a part of deciding what gives them the best quality of life.



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JAMIE PIVA		PHONE NUMBER: 573-465-2521
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 4 GANO DR		
CITY: ROLLA	STATE: MO	ZIP: 65401
EMAIL: jamiewatson1369@yahoo.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 10:15 PM
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Please don't make finding quality and safe care for our special needs family members even harder than it already is! Our caretakers already work long hours without insurance, holidays, or sick time. Caretaker burn out is already high in this field and cutting pay is only going to push more of them out of the field. Which leaves families with the heartbreaking choice of put their loved ones in facilities that are already overcrowded and understaffed! This ends up also costing more for the state as Medicaid, most likely, ends up paying for it. These services are crucial for keeping our loved ones in their homes where they can be cared for properly and at less cost for the state. Thank you for your time and please do the right thing.

To view the news report go to:

www.ozarksfirst.com/news/missouri-news/missouri-families-warn-about-devastating-cuts-to-disability-services/

To see the petition go to <http://ipt.io/JHKIA>



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JENNIFER WALKER		PHONE NUMBER: 954-445-2348
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 1107, S BORDEAUX AVE		
CITY: REPUBLIC	STATE: MO	ZIP: 65738
EMAIL: jaw0323@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:21 PM

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Hello, I am here to be a voice to my daughter Emma who is 9 and living with Rett Syndrome. Rett Syndrome is a rare genetic disorder that causes regression in motor function and include other conditions like seizures, GI problems, anxiety, depression, scoliosis and so much more. I always say it's like taking Cerebral Palsy, Epilepsy, Anxiety, and Autism and mixing into one person. She is fully aware of the world around her and able to understand it but is trapped in a body that can't make the pathways needed for her to talk and walk like her peers. She is a normal 9 year old preteen girl who loves all things Kpop and cute clothes but she also deals with drooling, vomiting, and seizures. Her daily life requires someone to be helping her every minute of the day that she is awake.

The budget cuts oh HB 10 will greatly impact her quality of life, her ability to engage with her community and will impact the way of life for our whole family. I am a MO public school teacher who works every day to serve the community we live in through the education of its children. Without SDS I would not be able to work in the capacity that I do because Emma's aide is the one who does the majority of her transportation to and from school, therapies, and even appointments. Or Emm would have to participate in after school and before school programs that are not equipped to handle her medical needs. The budget cuts to this program would make an unlivable wage for our MedPA who works tirelessly to help us provide Emma with the best life possible.

Without a MedPA Emma's quality of life would greatly diminish. Currently she is able to meet with her school friends at the library after school, attend community events, go shopping, receive outside therapies and so much more. Having a person dedicated to her wellbeing has made Emm more willing to try new things and explore the world around her.

As a parent our MedPA is invaluable and she is a second set of eyes and ears in my home even when I am there to make sure Emma isn't having seizures, aspirating, or having any other host of things that are associated with her rare genetic disorder.

Without the ability to provide a livable wage it limits the kind of people we can hire. Better applicants come with better pay, just like in ANY other job.

Emma just wants to be a 9 year old girl who can go to the movies, listen to KPop Demon Hunters, have McDonald's, and explore her world. Without a trustworthy person by her side you limit her and thousands of others like her to programs that are not equipped for her needs, have high turnover, and

are not trained to handle the more medically complex situations that can arise.

Please oppose this budget cut and support kids like Emma who just want to live their lives at home, with their families.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JESSICA HAYNES		PHONE NUMBER: 816-529-9354	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 9801 E 82ND TERR			
CITY: RAYTOWN		STATE: MO	ZIP: 64138
EMAIL: jessicasgirls@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:41 AM	
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"Chairman Deaton and Members of the Committee,

My name is Jessica Haynes. I am a mother and an advocate for my son Aj ,we are from Raytown, Missouri. I am writing to strongly urge you to restore the 1.7% Cost of Living Adjustment (COLA) for our caregivers and reject the proposed \$14 million core reduction to community disability services.

This is a 'mask-off' moment for our state's budget priorities. As a parent of a 21-year-old autistic son, AJ, who relies on Self-Directed Supports (SDS), I know firsthand that these programs are not just 'spending'—they are essential infrastructure.

The Financial Reality:

It costs Missouri approximately \$48,534 per year to support AJ in our home with his 'village' of caregivers.

If the state refuses to pay a living wage and these caregivers leave for \$15/hour retail jobs, AJ faces possible institutionalization at a cost of over \$600,000 per year.

Cutting this 1.7% COLA isn't 'fiscally responsible'; it is a 1,100% future tax hike waiting to happen. I recently spoke with Ozarks First Channel 10 to highlight how these cuts threaten the safety and independence of Missouri families. I invite you to watch that segment here: <https://www.ozarksfirst.com/news/missouri-news/missouri-families-warn-about-devastating-cuts-to-disability-services/>

The Voice of the People: I am joined in this fight by hundreds of Missourians. Our petition, 'Save Our Choice,' already has over 620 signatures from voters who demand that you protect our community-based supports. You can view the list of concerned citizens here: <http://ipt.io/JHKIA>.

Please choose the path that protects both our families and the state's bottom line. Restore the funding and protect the 1.7% COLA.

Respectfully,
 Jessica Haynes



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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JESSICA SMITH		PHONE NUMBER: 417-293-2919
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 629 S GARDEN WAY		
CITY: REPUBLIC		STATE: MO
		ZIP: 65738
EMAIL: jessicaleatherman@hotmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:57 PM
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My name is Jessica Smith, and I along with my husband Dennis are the primary caretakers of my brother, Jonathon. You may or may not recall that in October 2011, my brother and mom were involved in a head on collision with a military truck in Ft. Wood, MO. That wreck, unfortunately took the life of our precious mom and further disabled my brother. Since that time, my husband and I have taken on the responsibility of caring for Jonathon. In fact, I am able to support him full time, by utilizing the SDS program. If these cuts go into place this will force us to make some tough decisions about Jonathon's care.

For a state who fought so hard to keep a sports team, but isn't willing to fight the same for the state's most vulnerable, is unspeakable.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026
COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KEARNEY AMANDA		PHONE NUMBER: 636-734-4048
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 624 BANKS DR		
CITY: PEVELY		STATE: MO
		ZIP: 63070
EMAIL: mandakearney1@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/4/2026 4:53 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a caregiver through sds services for a 31 year old non verbal severely autistic man. I've been his caregiver 15 years. I love my job. However it's extremely challenging. His needs are great and he also has abusive meltdowns that are out of his control. I receive no health insurance so I have to buy my own very expensive policy. There's no mileage reimbursement for taking him in the community or his long daily rides that help keep him calm and regulated. I have no retirement plan or 401k. No paid holidays or vacation. No paid sick days. If these budget cuts go through I'll be forced to leave my job to find employment elsewhere that I can support my own family on. This family will not be able to keep him in home. He will have to be institutionalized. Which will cost the state way more than what they pay me. I'm begging you to not make these cuts that will rip families apart. I pray someone will read this and understand how devastating these cuts would be. Sds services are not where to make cuts when it will cost the state more when these individuals are institutionalized.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026	
COMMITTEE: Budget			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KELLY MCLOUD		PHONE NUMBER: 414-342-6990	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 1585 PRESLEY DRIVE			
CITY: CASSVILLE		STATE: MO	ZIP: 65625
EMAIL: suttonkelly09@yahoo.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 8:41 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I'm writing this to express concern about the proposed budget cut affecting my client, SDS services. As an amputee, my client relies heavily on these services for daily living and safety. I think cutting these services would significantly impact their quality of life and maintaining independence. It's crucial to prioritize their well-being and ensure continued support. Cutting these services would compromise their safety and increase risk of falls or injuries, impact their mental health and overall well-being, reduce quality of life and autonomy, potentially lead to more costly medical interventions. Consistent staff support is vital for safety, emotional stability, and independence. Familiar caregivers provide better support, handle emergencies, and ensure medical needs are met. My client is very heavy on dignity, consistent staff works better for her and we cannot keep consistent if we cut budgets out as not everyone stays if they feel unappreciated of the work we put our hearts into every single day. I want to be able to allow our loved ones who we care deeply about stay at home having SDS services. We care about the state and quality of being worthy of honor and respect when it comes to our loved ones. And let's be honest, nobody can do a better job than me!!!

Please consider the long-term effects of reducing essential care.

Sincerely,
 Kelly McCloud



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026
COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KEN SPARE		PHONE NUMBER: 785-288-0217
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 5310 HOLMES ST.		
CITY: KANSAS CITY		STATE: MO
		ZIP: 64110
EMAIL: kspare@aol.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 11:12 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Reducing budget for Self Directed Services, will actually cost the state much more than it saves. The mental and physical benefits to persons with disabilities prevents MUCH more expensive service that would be needed in an institutional setting. Taking servest for those who are disabled harms both the individuals and their Families.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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COMMITTEE: Budget			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MELISSA SUE COLEMAN		PHONE NUMBER: 573-915-3382	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 12340 ARNAULT BRANCH ROAD			
CITY: CADET		STATE: MO	ZIP: 63630
EMAIL: runningferfun@yahoo.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:52 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

My son is 35 years old and severely handicapped. He has 24 hr care under the self directed services. His behaviors, size and mental disability makes it very difficult to keep staff at a lower pay rate. And without staff he could no longer live in his own home. He would not be able to live in an ISL or a group home due to his inability cope in stressful environments. His only other option would be to be placed in an institution. Even there he would have to be over medicated because all he has know has been his own home. His quality of life would decline significantly. The cost of his care would increase from a medical standpoint alone, not to mention the cost of the institution. Please don't just hear the information that we are sharing but understand that self directed services and a pay rate that help to keep quality staff is why our family members are thriving. When my son was diagnosed at 9 months old I had a very difficult time seeing what his adult life would be like. I wasn't even sure that he would live to be 35. But as his mother I have turned over every stone that I could to ensure he would have a happy and healthy life. My goal is to keep him smiling, comfortable and healthy on a daily basis. With self directed services he gets a chance to do what ever other person wants. Live happy and healthy in his own home.



MISSOURI HOUSE OF REPRESENTATIVES
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BILL NUMBER: HB 2002		DATE: 2/3/2026	
COMMITTEE: Budget			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MISTY WHITE		PHONE NUMBER: 417-812-9000	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 2127 E SYCAMORE ST, REPUBLIC MO 65738			
CITY: REPUBLIC		STATE: MO	ZIP: 65738
EMAIL: wmisty8802@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 8:12 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

My name is Misty White. I am here not as a lobbyist, not as an organization, but as a mother and a caregiver whose life—and whose child’s life—will be directly harmed by HB10.

My child, Kaden, lives with disabilities that require consistent, trusted, and informed care. Our life is not theoretical. It is not a budget line. It is daily medication management, medical appointments, safety monitoring, emotional regulation, advocacy with schools and providers, and the constant fear of what happens if the system fails us again.

For years, I have filled the gaps left by an already broken system. I left my job of 23 years to become a caregiver because there was no one else. I became an advocate because silence nearly cost my child their wellbeing. I learned regulations, navigated agencies, and fought through exhaustion because my child does not get to opt out of their disability when policies change.

HB10 threatens to dismantle the fragile stability we have built. It ignores the reality that trusted caregivers—often family—are not a luxury, but a necessity. It assumes replacements exist where they do not. It assumes people like my child can simply adapt to abrupt changes in care, when in reality those changes can cause regression, medical harm, trauma, and loss of independence.

This bill does not just reduce options—it removes safety. It places administrative convenience above human cost. It treats families like mine as risks to manage instead of people to protect.

kaden’s life has already been shaped by circumstances beyond their control. This bill would add another barrier, another instability, another reminder that systems are designed without truly seeing people like them. And my life—already stretched thin by caregiving, advocacy, and survival—would become even more precarious.

I am asking you to understand this clearly: HB10 will not eliminate problems. It will transfer them—onto families, onto disabled individuals, onto children who have no voice in this room.

If this bill passes, the consequences will not be abstract. They will show up as missed care, increased institutionalization, caregiver burnout, and preventable harm. They will show up in my home. In my child’s life.

Please do not pass legislation that solves nothing by sacrificing the most vulnerable. See us. Hear us.

And do not make our lives harder than they already are.



MISSOURI HOUSE OF REPRESENTATIVES
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COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: PATRICIA SIGMAN		PHONE NUMBER: 417-655-2551
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 21067 LAWRENCE 1165		
CITY: VERONA		STATE: MO ZIP: 65769
EMAIL: p.sigman0926@hotmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 10:08 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

My name is Pati Sigman. I am here not as a lobbyist, not as an organization, but as a mother and a caregiver whose life—and whose child’s life—will be directly harmed by HB10.

My child, Taylor, lives with disabilities that require consistent, trusted, and informed care. Our life is not theoretical. It is not a budget line. It is daily medication management, medical appointments, safety monitoring, emotional regulation, advocacy with schools and providers, and the constant fear of what happens if the system fails us again.

For years, I have filled the gaps left by an already broken system. I became a caregiver because there was no one else. I became an advocate because silence nearly cost my child their wellbeing. I learned regulations, navigated agencies, and fought through exhaustion because my child does not get to opt out of their disability when policies change.

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This bill does not just reduce options—it removes safety. It places administrative convenience above human cost. It treats families like mine as risks to manage instead of people to protect.

Taylor’s life has already been shaped by circumstances beyond their control. This bill would add another barrier, another instability, another reminder that systems are designed without truly seeing people like them. And my life—already stretched thin by caregiving, advocacy, and survival—would become even more precarious.

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And do not make our lives harder than they already are. My name is Pati Sigman. I am here not as a lobbyist, not as an organization, but as a mother and a caregiver whose life—and whose child's life—will be directly harmed by HB10.

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TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ROBBIN BLANKENSHIP		PHONE NUMBER: 816-288-5066
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 209 CONCORD CIR		
CITY: GRAIN VALLEY		STATE: MO
		ZIP: 64029
EMAIL: rkids1088@yahoo.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 10:08 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a parent and caregiver of a young adult needing these services it would greatly harm us and him to not get care all cuts in care and bidgets related to force us into expensive and not good group homes that's not healthy please help us keep our funding



MISSOURI HOUSE OF REPRESENTATIVES
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TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: SARAH BERRY		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: transparentsemoproject@proton.me	ATTENDANCE: submissionOnly	SUBMIT DATE: 1/24/2026 12:30 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I'm writing in opposition to HB 2002 as introduced.

I want to be very clear: I support strong, well-funded public schools. I support feeding children, improving literacy, and investing in teachers.

But a budget bill must not become a backdoor for policy choices that quietly harm the very students our Constitution and our conscience require us to protect. HB 2002 contains several provisions that do exactly that.

A budget should fund education—not smuggle in risky policy

HB 2002 is an appropriations bill. And yet, it includes policy riders that would normally deserve open debate, careful definitions, and public accountability.

When we legislate through the budget, we reduce transparency and increase the chance of sloppy language that leads to lawsuits, federal penalties, or families being harmed while the state argues about what it “meant.”

Student data: protect privacy, but don't sabotage compliance or services

The bill attempts to restrict the sharing of certain student data with the federal government. I understand the instinct: parents are right to worry about data being used for noneducational purposes. But this language is drafted so broadly that it risks conflicting with federal education requirements tied to essential funding streams.

If Missouri creates a state-level prohibition that blocks lawful federal reporting, the predictable result is chaos: schools caught in the middle, funding jeopardized, and vulnerable students paying the price.

And let's be honest about who gets hurt first when federal programs falter: students with disabilities, students in poverty, English learners, homeless students, and migrant students—children who already face barriers and depend on programs designed to ensure equal access and basic stability.

A policy that sounds like protection can become a quiet weapon against the people who need protection most.

“Open enrollment” without transportation isn’t choice—it’s privilege

HB 2002 funds a voluntary open enrollment program while explicitly saying transportation is not required of either district.

In plain language: this is a “choice” plan that works best for families who can drive their child across district lines, rearrange work schedules, and absorb extra costs. Families without those resources are effectively excluded. That is not equal opportunity—it is opportunity sorted by income, geography, and capacity. No matter how it’s branded, it is inequity built into the structure.

Public money must come with public guardrails

HB 2002 directs funds to nonprofit organizations and grant-distributing entities using vague descriptions that do not clearly require competitive selection, transparent performance measures, or strong auditing and conflict-of-interest protections.

Taxpayer dollars must be spent for a true public purpose, and the public must be able to see who gets what, why they got it, and what they produced. When that’s missing, trust erodes—and litigation follows.

If this Committee is committed to strengthening education, I ask you to strengthen this bill by doing the following:

Remove or rewrite the policy riders so they do not conflict with federal compliance obligations or jeopardize services to protected student groups.

Do not implement open enrollment through a budget line—and do not advance “choice” programs that exclude families without transportation.

Add real accountability standards for any money directed to private entities: transparent selection, deliverables, auditing, and conflict-of-interest protections.

Until those changes are made, HB 2002 should not move forward.



MISSOURI HOUSE OF REPRESENTATIVES
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TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: SCOTT HAYNES		PHONE NUMBER: 816-529-9770	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 9801 E 82ND TERR			
CITY: RAYTOWN		STATE: MO	ZIP: 64138
EMAIL: 7268894@gmail.com	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 11:59 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

What follows is not written to accuse, shame, or divide. It is written because silence has consequences, and because many people of good faith would want to know when a system bearing their moral name is causing harm. This document is difficult to read because the subject is difficult, and because responsibility does not always align neatly with intention. The goal here is not to win an argument, but to force clarity — and to invite action consistent with the values many of us already claim. If you believe every human life has dignity, then this is a conversation worth having, however uncomfortable it may be.

This is a call to action not a call to argument and disputation.
 If I have but one wish, it would be that we “stand in the gap together.”
 Let us move a mountain...one pebble at a time

The Pro-Life Covenant: A Reckoning
 How pro-life are you?

To the Missouri General Assembly, Pro-Life Organizations, Church Leaders, and Every Citizen Who Claims the Title "Pro-Life":

We have asked the world a question: "Are you pro-life?"

Today, that question returns to you—not as rhetoric, but as a moral audit. Today I ask, "When does Pro-life end?"

The Covenant Made

When we stood outside clinics, when we counseled a pregnant woman facing a diagnosis of Down syndrome, autism, or cerebral palsy, when we told her that her child's life has value—we made a promise. We didn't just promise birth. We promised life. We told her she wouldn't be alone. We told her that this society, this state, this faith community would stand with her.

That promise did not expire at delivery—or did it?

The Bill Comes Due: Missouri HB10

Missouri House Bill 10 proposes devastating cuts to the Self-Directed Services (SDS) program, effective July 1, 2026. This is not an abstraction. These cuts will:

- Slash personal assistant hourly budgets from \$33.00 to \$26.04—a \$6.96/hour reduction
- Cap maximum pay rates at \$22.88/hour, making it nearly impossible to retain caregivers
- Eliminate Community Specialist services entirely
- Eliminate Individual Goods and Services, removing critical support for daily living

The predictable result: families will be forced to surrender their loved ones to state-funded institutions.

The Math That Exposes the Lie

Let's be precise about what you are choosing:

- Self-Directed Services cost: \$48,000 per year per person
- Institutional care cost: \$161,096 per year (2009 data)—now estimated at over \$600,000 per year

Eliminating a program that costs \$48,000 to force people into institutions that cost \$600,000. This is not fiscal conservatism. This is fiscal and moral negligence.

Missouri isn't saving. On the contrary, it will spend 12.5 times more to warehouse human beings you claim are sacred.

The Children You Saved Are Dying

Between 2017 and 2023, 2,680 people with developmental disabilities died under Missouri state care—an average of one person every single day. Among them:

- 74 died in "accidents"
- Nearly 400 died of "undetermined causes"
- Many were neglected to the point of death while multiple oversight agencies ignored

reports

These are not statistics. These are the children whose mothers you convinced to choose life.

Carl DeBrodie: A Case Study in Betrayal

Carl DeBrodie was born in 1985 with autism. He was non-verbal. He loved dogs, fire trucks, and Walker, Texas Ranger. His mother kept him, likely influenced by the same pro-life voices that fill Missouri's churches and crisis pregnancy centers.

In 2016, Carl was in state-contracted care at Second Chance Homes in Fulton, Missouri. There, caregivers forced him to fight other residents for their amusement. When he had a seizure from his injuries, they placed him in a bathtub and turned on the shower instead of calling 911. Carl died in that bathtub.

His body was then placed in a trash can, encased in concrete, and hidden in a storage unit. For seven months, a state-contracted nurse signed false medical reports claiming she had examined Carl—using a stethoscope on a corpse. The care provider submitted \$106,795 in fraudulent Medicaid claims during this period.

Carl's body was found in April 2017. The state of Missouri paid his family over \$1 million to settle the lawsuit.

How many Carl DeBrodies are you willing to fund?

Federal Findings: Missouri Violates the Law

In June 2024, the U.S. Department of Justice concluded that Missouri violates the Americans with Disabilities Act by unnecessarily institutionalizing adults with disabilities in nursing facilities. One provider described Missouri's guardianship system as "a sentence to be locked in a nursing facility." This is not alleged. This is a federal finding. Your state is operating an illegal, abusive system—and you are now proposing to expand it by eliminating the only viable alternative.

The Oversight That Does Not Exist

Required monthly face-to-face visits with vulnerable residents? Not conducted.

Complaints filed with the Department of Mental Health, county agencies, contracted providers, and Missouri Medicaid? Ignored without follow-up.

The Division of Developmental Disabilities has no accountability enforcement mechanism. Private agencies continue patterns of abuse and neglect with impunity because the state does not hold them accountable.

We are not protecting life. We are funding a system of negligent homicide.

The Hypocrisy on Full Display

In May 2025, the Missouri Senate invoked a rare procedural rule to shut down debate and pass a referendum overturning Amendment 3—just six months after voters approved abortion rights.

Senators stood in press conferences declaring:

"It is our job and our duty as legislators to ensure that this wrong is right... We are committed to making sure that Missourians have protections for their daughters, for their wives."

You invoked duty. You invoked protection. You invoked the sanctity of life.

Where is that duty now?

Where is the emergency session to protect the disabled adults who are dying at a rate of one per day?

Where is the rare procedural rule to stop a budget that will force the very children you "saved" into institutions where they will be 12.5 times more expensive to the state and exponentially more likely to suffer abuse and death?

The Pro-Life Organizations: Complicit by Silence

The Archdiocese of St. Louis Respect Life Apostolate—the first diocesan pro-life office in the United States, founded in 1973—operates a Spiritual Adoption Program where participants pray for nine months for an unborn child at risk of abortion.

This isn't an incrimination. It's just a question: When those nine months end, where are you? When that child is 10, 20, 30 years old and living with the disabilities you told their mother were a gift from God—where is your advocacy? Where are the rallies? Where is the Annual Celebration of Life Mass for the adults with developmental disabilities who are dying under state care? Missouri Right to Life. Alliance for Life Missouri. Care Net Pregnancy Resource Centers. Catholic Charities. Bethany Christian Services. Grace Church STL.

The aforementioned organizations have the infrastructure, the donor base and the political access. So if this is not lack of moral consistency, then what is it?

The Elected Officials: Accountable by Name

The Missouri Senate holds a 24-10 Republican supermajority. The Missouri House holds a 111-51 Republican majority. Every one of these legislators claims to be pro-life.

To our elected officials, if you vote for HB10, you are voting to:

- Eliminate the supports that keep disabled Missourians in their homes and communities
- Force them into institutions that cost 12.5 times more
- Expose them to a system with a documented history of federal ADA violations, systemic abuse, and one death per day

How can anyone claim the title "Pro-Life" proponent while signing the death warrant for Carl DeBrodie's peers.

The Test

Here is the test of your conviction:

If being Pro-Life means protecting the vulnerable, then the SDS budget is a pro-life issue.

If being Pro-Life means stewardship of the lives you help bring into the world, then institutional abuse is a pro-life issue.

If being Pro-Life means moral consistency, then this budget is your moral reckoning.

The Demand

1. Do not reduce SDS funding in HB10, in fact expand it, not as charity. As fiscally responsible obligation.
2. Establish independent oversight with enforcement power for all state-contracted disability care providers.
3. Publicly account for the 2,680 deaths. Release the Division of Developmental Disabilities report on systemic failures. Prosecute criminal neglect.
4. Pro-life organizations: redirect resources. If you can fund billboards about the unborn, you can fund advocacy for the living disabled.

The Consequence

if we do nothing, our silence will be documented. Every name that votes for these cuts. Every organization that remains silent. Every church that prays for the unborn on Sunday and ignores the disabled on Monday.

We will be held publicly accountable—not by political opponents or public indignation, but by the logical conclusion of your own stated beliefs.

If you claim to be Pro-Life, then prove it. Protect the living.

If you cannot, then stop using the title. You have not earned it.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026
COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: YVONNE CLARK		PHONE NUMBER: 417-379-6353
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: 1132 N OAK PARK DR		
CITY: SPRINGFIELD		STATE: MO
		ZIP: 65802
EMAIL: bowlinmom@netzero.net	ATTENDANCE: submissionOnly	SUBMIT DATE: 2/3/2026 9:08 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a single mom worth a 28 year old daughter that uses Ana benefits from SDS. She was hit by a drunk driver when 18 and became totally and permanently disabled. She is 24/7 care, wheelchair bound.

I have 3 staff that take care of and assist my daughter daily with all her ADLs including toileting and showering daily, taking her to therapies, feeding her, giving meds etc, all so I can work.

Staff do not get overtime, vacation, holiday pay or any benefits. Please leave their wages alone! That's all they have. If wages get cut as drastically as you're saying, my staff will quit because they can't afford to work for us anymore. Their mortgages, vehicle payments etc are based off their wages.

Then what will I do? I have to work to provide for my daughter. I have to keep picking up the slack in her budget because things happen like her SS got cut this year due to hitting the cap. No cost of living increase for her. Enough if enough.

If you wouldn't take the 30% rate cut you're expecting us to take, then don't do it to us.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2002		DATE: 2/3/2026
COMMITTEE: Budget		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE C. DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER: 314-440-9000
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS: P.O. BOX #1535		
CITY: O' FALLON		STATE: MO
		ZIP: 63366
EMAIL: arniedienoff@mail.com	ATTENDANCE: physical	SUBMIT DATE: 2/3/2026 1:24 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Cut all unnecessary Expenditures, Programs and Services that are currently NOT working for Missouri Students or School Districts.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: SUSAN MEANS		PHONE NUMBER: 417-658-5068	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 18505 NORWAY RD			
CITY: NEOSHO		STATE: MO	ZIP: 64850
EMAIL: susanmeansbusiness@yahoo.com	ATTENDANCE: submissionOnly		SUBMIT DATE: 2/3/2026 11:07 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am proud to be a generational true Missourian. I come to my legislatures today to ask you to think of my family when considering making these drastic cuts in funding to the programs for DMH. Making cuts to these programs directly affects my family. In 1986, my parents adopted, Curtis. They didn't know what his diagnosis would be but they knew he was special needs. It didn't matter to my family. We love him anyway. Over the years, things have changed a lot concerning his care. Six years ago, Curtis began falling and having other physical issues. He had developed spinal cord injuries from years of self abuse. We were blessed with an amazing surgeon at Barnes Jewish Hospital who stopped the progression and kept Curtis alive. But the damage was done. He has been completely wheelchair bound, he has a feeding tube, he can no longer walk to the bathroom so he has to have his briefs changed. I became his guardian during all of this because my parents have aged and did not have the health or strength to care for him. He has been receiving self directed services for 20 years now but his level of care has increased greatly. And he isn't the only family member this program is benefitting. My precious grandson, Easton. He was born at 23 weeks. My daughter had to make a decision to give him a chance to live or let him go. We all made the decision to let him fight. And he took the challenge very seriously. He was in the NICU for 4 months. He is a miracle and he is so loved but he is special needs. He is eight years old now. He is non verbal, has a feeding tube, unable to walk. But he is a happy and ornery little guy too. These are my loved ones who receive services. Now, my husband is a Respiratory Therapist who only works about one shift a month just to keep his skills. He left his career to be able to help me care for my brother, Curtis. Once our grandson was approved for the program, he became his caregiver also. So, .my husband depends very much on his pay not being reduced. If that does he, will have to leave us without help and go back to working in respiratory care. My son is also a caregiver. He cares for my brother even when he isn't getting paid. It's not just a job. People with special needs aren't asking for you to pay their friends and family to care for them. Parenting a person with special needs is an endless job. When your child depends on you for everything, they don't grow up and move away. Finding people to help with the journey is almost impossible. It is a difficult job. Not everyone is capable of changing a grown man's dirty brief. Not everyone has the compassion needed. Please remember Curtis and Easton when you consider this bill. My family supports Missouri and needs this program to stay in place. Thank you, Susan Means Advocate, Sister, and Memaw