



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2745		DATE: 3/5/2026	
COMMITTEE: Health and Mental Health			
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 ADVOCAT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: In-Person		SUBMIT DATE: 3/5/2026 11:53 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am in Support of this Bill.



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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: JESSICA PETRIE		PHONE NUMBER: 573-635-6044
REPRESENTING: KIDS WIN MISSOURI		TITLE:
ADDRESS: PO BOX 1805		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL: jessica@wintonpolicygroup.com	ATTENDANCE: In-Person	SUBMIT DATE: 3/5/2026 9:06 AM
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KRISTIN O'BRIEN		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: Written	SUBMIT DATE: 3/4/2026 1:51 PM	

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Chairperson and members of the committee,
 Thank you for the opportunity to testify today in support of House Bill 2745.
 My name is Kristin Ross O'Brien. I am a Missouri foster and adoptive parent and the mother of a child with an ultra-rare genetic condition. I am writing today because when my son entered foster care and came into my home, I did not receive the most basic medical information about him. When he arrived in my care, as a 6 month old, I had no access to his medical records. I didn't know what tests he had received, what conditions doctors had suspected, or what care he needed. I did not know what specialists he should be seeing, whether he had undergone prior tests or procedures, or what medical concerns had already been identified.
 At multiple medical appointments, I was asked to provide his medical history and I simply couldn't. I had no information to give; I didn't even have a full list of what surgeries he had previously had. As a caregiver trying to advocate for a vulnerable medically complex child, that was incredibly frustrating and it limited the care he was able to receive.
 Multiple case workers, his pediatrician and I attempted to obtain his medical records for months. Each time, the requests were denied by hospital medical records departments, hospital social workers and administration. My son has been on Missouri Medicaid since the beginning of his life. His medical records were already in the hands of state systems and providers, yet the caregivers responsible for his day-to-day health could not access them. There is a huge disconnect.
 It took more than six months for me to finally obtain his records, and only after I contacted the hospital's government liaison and legal department after exhausting every other avenue. When I was fighting to get his records, I discovered something that shocked me. A letter came in the mail and I found out that my son had failed his newborn hearing screening. My son was almost a year old when I got that letter. That information had never been shared with me when he entered my home. Because I didn't know, critical early follow-up care was delayed. Anyone who works with children knows that early intervention is incredibly important, especially in infancy and early childhood. Every month matters when it comes to development, hearing, speech, and learning.
 Foster parents are asked to step in immediately and provide care for children who have often experienced trauma, neglect, or medical challenges. But we cannot properly care for these children if we do not have swift access to their medical histories.
 House Bill 2745 helps address this gap. By strengthening requirements for health screenings and ensuring that critical medical information follows the child into care, this bill helps ensure that the adults caring for them have the information they need to protect their health and development. Children entering foster care are among the most vulnerable in our state. Ensuring that their caregivers receive timely medical information is not just an administrative improvement, it is a matter of their health and future.

My son deserved better. And the children entering care today deserve better as well. I urge you to support House Bill 2745 so that no caregiver must spend months searching for critical medical information while a child's needs go unmet. Thank you for your time and for your commitment to Missouri's children.



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MEGAN STEEN		PHONE NUMBER: 573-777-8300	
BUSINESS/ORGANIZATION NAME: BURRELL BEHAVIORAL HEALTH		TITLE: CHIEF OPERATING OFFICER	
ADDRESS: 3401 BERRYWOOD DRIVE			
CITY: COLUMBIA		STATE: MO	ZIP: 65201
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/5/2026 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RYAN DEBOEF		PHONE NUMBER: 573-635-6944	
REPRESENTING: JORDAN VALLEY HEALTH		TITLE:	
ADDRESS: 100 E. HIGH ST.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/5/2026 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SARAH BERRY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL:	ATTENDANCE: Written	SUBMIT DATE: 3/5/2026 7:10 AM
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HB 2745 requires extensive medical and behavioral screenings within seventy-two hours of a child entering state custody and directs medical providers to release prior medical records while granting foster families access to those records.

Ensuring prompt medical care for children in custody is important. However, this bill raises serious privacy and legal concerns regarding the disclosure and handling of sensitive medical records belonging to vulnerable children.

The legislation requires medical providers to produce records within thirty days while broadly expanding who may access them, yet it contains no clear statutory safeguards governing confidentiality, redistribution, or protection of highly sensitive information, including trauma history, mental health records, and other protected medical data.

Children entering state custody often have deeply personal medical and psychological histories. Expanding access to those records without explicit confidentiality protections risks exposing sensitive information far beyond what is necessary for treatment or placement decisions.

Before expanding mandatory disclosure of medical records involving minors, the legislature should ensure the statute clearly protects medical privacy, confidentiality, and compliance with federal health-information law.