

Health Care Appropriations Subcommittee

**Tuesday, March 28, 2017
8:00 AM – 11:00 AM
Sumner Hall (404 HOB)**

Action Packet

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
3/28/2017 8:00AM

Location: Sumner Hall (404 HOB)

Summary:

Health Care Appropriations Subcommittee

Tuesday March 28, 2017 08:00 am

HB 883	Favorable	Yeas: 13	Nays: 0
HB 1041	Favorable	Yeas: 14	Nays: 0
CS/HB 1121	Favorable	Yeas: 13	Nays: 0
HB 1195	Favorable	Yeas: 13	Nays: 0
HB 7075	Favorable	Yeas: 13	Nays: 0
PCB HCA 17-01	Favorable	Yeas: 13	Nays: 0
PCB HCA 17-02	Favorable	Yeas: 13	Nays: 0
PCB HCA 17-03	Favorable	Yeas: 15	Nays: 0

Committee meeting was reported out: Tuesday, March 28, 2017 1:02PM

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee

3/28/2017 8:00AM

Location: Sumner Hall (404 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Jason Brodeur (Chair)	X		
Daisy Baez	X		
Daniel Burgess, Jr.	X		
Colleen Burton	X		
Nicholas Duran	X		
Erin Grall	X		
Gayle Harrell	X		
Shevrin Jones	X		
MaryLynn Magar	X		
Amy Mercado	X		
Cary Pigman	X		
David Richardson	X		
Bob Rommel	X		
Cyndi Stevenson	X		
Frank White	X		
Totals:	15	0	0

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COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
3/28/2017 8:00AM

Location: Sumner Hall (404 HOB)

HB 883 : Memory Disorder Clinics

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Daisy Baez	X				
Daniel Burgess, Jr.			X		
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson			X		
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

Appearances:

Christian, David (Lobbyist) - Waive In Support
 Florida Hospital
 Executive Director
 900 Hope Way
 Orlando FL 32804-4638
 Phone: (407) 303-5552

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COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee

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Location: Sumner Hall (404 HOB)

HB 1041 : Laboratory Screening

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X				
Daniel Burgess, Jr.	X				
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson			X		
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 14		Total Nays: 0			

Appearances:

Winn, Stephen (Lobbyist) - Waive In Support
 Florida Osteopathic Medical Association
 2007 Apalachee Pky
 Tallahassee FL 32301
 Phone: (850)878-7463

Diaz Lyon, Aimee (Lobbyist) - Waive In Support
 The Aids Institute
 119 South Monroe Street, Suite 200
 Tallahassee FL 32301
 Phone: 850-205-9000

Joos, Thomas (Lobbyist) - Waive In Support
 Department of Health
 4052 Bald Cypress Way
 Tallahassee FL 32311
 Phone: (850) 245-4006

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COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee

3/28/2017 8:00AM

Location: Sumner Hall (404 HOB)

CS/HB 1121 : Child Welfare

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X				
Daniel Burgess, Jr.			X		
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson			X		
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

Appearances:

Ragbeer, Diana (Lobbyist) - Waive In Support
 Children's Trust, The
 The Children's Trust 3150 SW 3rd Ave 8th Floor
 Miami FL 33129
 Phone: (305) 571-5718

Michael Wilkershein (Lobbyist) - Information Only
 Department of Children & Families
 Legislative Affairs Director
 Winewood Complex
 Tallahassee FL 32305
 Phone: 850-488-9410

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COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee

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Location: Sumner Hall (404 HOB)

HB 1195 : Health Care Facility Regulation

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X				
Daniel Burgess, Jr.			X		
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson			X		
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

Appearances:

Barker, Dorene (Lobbyist) - Waive In Support
 AARP
 200 W College Ave Suite 304
 Tallahassee FL 32301
 Phone: (850) 510-3145

Anderson, Susan (Lobbyist) - Waive In Support
 Florida Argentum
 2292 Wednesday Street Ste 1
 Tallahassee FL 32308
 Phone: (850) 708-4971

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Health Care Appropriations Subcommittee

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Location: Sumner Hall (404 HOB)

HB 7075 : Child Welfare

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X				
Daniel Burgess, Jr.			X		
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson			X		
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

Appearances:

Ragbeer, Diana (Lobbyist) - Waive In Support

Children's Trust, The
 The Children's Trust 3150 SW 3rd Ave 8th Floor
 Miami FL 33129
 Phone: (305) 571-5718

Schiyler Siefker (General Public) - Waive In Support

St. Augustine Youth Services
 CEO
 704 Alden Way
 St. Augustine FL 32086
 Phone: 904-829-1770

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COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee

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Location: Sumner Hall (404 HOB)

PCB HCA 17-01 : Medicaid Services

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez			X		
Daniel Burgess, Jr.	X				
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones			X		
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson	X				
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

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Location: Sumner Hall (404 HOB)

PCB HCA 17-02 : Prescription Drug Monitoring Program

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez			X		
Daniel Burgess, Jr.	X				
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones			X		
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson	X				
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

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Location: Sumner Hall (404 HOB)

PCB HCA 17-03 : Department of Veterans' Affairs

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Daisy Baez	X				
Daniel Burgess, Jr.	X				
Colleen Burton	X				
Nicholas Duran	X				
Erin Grall	X				
Gayle Harrell	X				
Shevrin Jones	X				
MaryLynn Magar	X				
Amy Mercado	X				
Cary Pigman	X				
David Richardson	X				
Bob Rommel	X				
Cyndi Stevenson	X				
Frank White	X				
Jason Brodeur (Chair)	X				
Total Yeas: 15		Total Nays: 0			

Committee meeting was reported out: Tuesday, March 28, 2017 1:02PM



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

W/S

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>883</u>	
Amendment Number: _____	

Name: David Christian

Representing: Florida Hospital

Title: Executive Director

Address: 900 Hope Way

City: Altamonte Springs State/Zip: 32714

Phone Number: 407/357-2493 Meeting Date: _____

Committee/Subcommittee: HL Approps

Presentation/Workshop Topic: Alzheimer's / Memory Disorders Clinic

Registered Lobbyist: YES NO

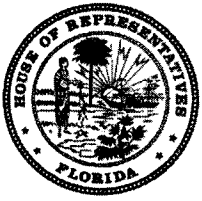
State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

w/s

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>1041</u>	
Amendment Number: _____	

Name: Stephen Winn

Representing: Florida Osteopathic Medical Association

Title: Executive Director

Address: 2544 Blairstone Pines Dr

City: Tallahassee State/Zip: FL 32301

Phone Number: 878-7364 Meeting Date: 3/28/17

Committee/Subcommittee: Health Care Approp. Subcommittee

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

State Employee: YES NO

- I wish to speak Waive in Support
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

w/s

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>1041</u>	
Amendment Number: _____	

Name: Aimee Diaz Lyon

Representing: The AIDS Institute

Title: _____

Address: 119 South Monroe Street, Suite 200

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-205-9000 Meeting Date: _____

Committee/Subcommittee: Health Care Appropriations

Presentation/Workshop Topic: Laboratory Screening

Registered Lobbyist: YES NO

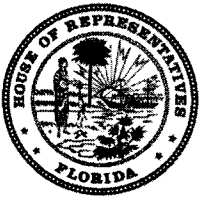
State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

w/s

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/>	Bill	<input type="checkbox"/>	Amendment
Bill/PCS/PCB Number: <u>1041</u>		Amendment Number: _____	

Name: Tom Joos

Representing: Department of Health

Title: _____

Address: 2585 merchants Row Blvd.

City: Tallahassee State/Zip: FL / 32399

Phone Number: 850-274-5058 Meeting Date: 3-28-17

Committee/Subcommittee: _____

Presentation/Workshop Topic: _____

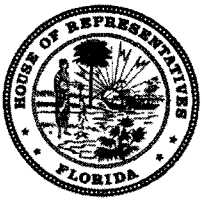
Registered Lobbyist: YES NO
 State Employee: YES NO

W/S

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only
Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

W/S

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>1121</u>	
Amendment Number: _____	

Name: Michael Wickersheim

Representing: Department of Children & Families

Title: Legislative Affairs Director

Address: WINEWOOD COMPLEX

City: Tallahassee State/Zip: 32305

Phone Number: 850-488-9410 Meeting Date: _____

Committee/Subcommittee: HMS Appropriation Sub

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

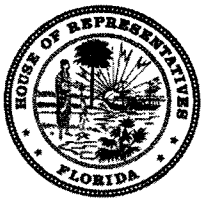
State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

W/S

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>1121</u>	
Amendment Number: _____	

Name: DIANA RAGBEER

Representing: THE CHILDREN'S TRUST

Title: DIRECTOR, PUBLIC POLICY

Address: 3150 SW 3RD AVE, 8TH FLOOR

City: MIAMI State/Zip: 33129

Phone Number: 305 571 5718 Meeting Date: 3/28/17

Committee/Subcommittee: HEALTH & CARE
HUMAN SERVICES
APPROPRIATIONS SUBCOMMITTEE

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

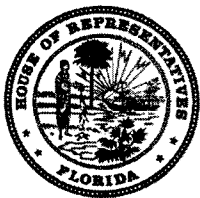
State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

w/s

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<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: _____	
Amendment Number: _____	

Name: Dorene Barker

Representing: AARP

Title: Associate State Director

Address: 200 W. College Ave, Ste. 304

City: Tall State/Zip: FL 32301

Phone Number: 850 228-6387 Meeting Date: 3/28/17

Committee/Subcommittee: Health Care Appropriations Subcommittee

Presentation/Workshop Topic: Health Care Facility Regulation

Registered Lobbyist: YES NO

State Employee: YES NO

I wish to speak

Waive time in support

Appearing in response to an inquiry for information made by member, committee, or staff

Appearing in response to subpoena

Appearing at the written request of the chair

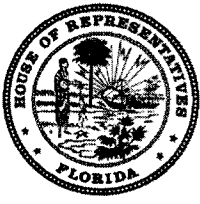
Judge or elected officer appearing in official capacity

Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

w/s

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/>	Bill	<input type="checkbox"/>	Amendment
Bill/PCS/PCB Number: <u>1195</u>			
Amendment Number: _____			

Name: Susan Anderson

Representing: Florida Argentum

Title: V.P of Public Policy

Address: 2292 Wednesday St., Ste. 1

City: Tallahassee State/Zip: FL 32308

Phone Number: 850-708-4971 Meeting Date: 3-28-17

Committee/Subcommittee: Health Care Appropriations Subcommittee

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

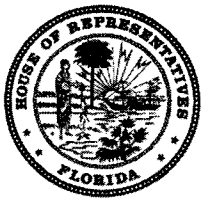
State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
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Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

W/S

Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>7075</u>	
Amendment Number: _____	

Name: DIANA DRAGBEER

Representing: THE CHILDREN'S TRUST

Title: DIRECTOR PUBLIC POLICY & COMMUNITY ENGAGEMENT

Address: 3150 SW 3RD AVE, 8TH FLOOR

City: MIAMI State/Zip: 33129

Phone Number: 305 571 5718 Meeting Date: 3/28/17

Committee/Subcommittee: CARE HEALTH & HUMAN SERVICES APPROPRIATIONS SUBCOMMITTEE

Presentation/Workshop Topic: CHILD WELFARE

Registered Lobbyist: YES NO

State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent Opponent Info only

Amendment: Proponent Opponent Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD



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<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>7075</u>	
Amendment Number: _____	

Name: Schuyler Siefker

Representing: St. Augustine Youth Services

Title: CEO

Address: 704 Alden way

City: St. Augustine State/Zip: FL/32086

Phone Number: 904 829-1770 Meeting Date: 3/28/17

Committee/Subcommittee: Health & Human Services Appropriation

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

State Employee: YES NO

- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
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- Judge or elected officer appearing in official capacity
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Amendment: Proponent Opponent Info only