

Health Innovation Subcommittee

Tuesday, January 19, 2016 1:30 PM - 3:30 PM 306 HOB

Action Packet

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Yeas: 9

Yeas: 12

Nays: 4

Nays: 0

Location: 306 HOB

Summary:

Health Innovation Subcommittee

Tuesday January 19, 2016 01:30 pm

HB 233 Favorable With Committee Substitute

Amendment 753183 Adopted Without Objection

HB 885 Favorable With Committee Substitute

Amendment 598321 Adopted Without Objection

Committee meeting was reported out: Tuesday, January 19, 2016 3:50:31PM

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Location: 306 HOB

Attendance:

=======================================	Present	Absent	Excused
Kenneth Roberson (Chair)	X		
John Cortes	X		
Fred Costello	X		
Manny Diaz, Jr.	X		
Walter Hill	Х		
Mia Jones	X		
Scott Plakon	Х		
Paul Renner	X		
Hazelle Rogers	X		
Chris Sprowls	X	*	
Richard Stark	Х	<u>-</u>	
W. Gregory Steube	Х		
Jay Trumbull	X		
Totals:	13	0	0

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Location: 306 HOB

HB 233: Abortion Clinics

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes		X			
Fred Costello	X				
Manny Diaz, Jr.	X				
Walter Hill	X				
Mia Jones		X			
Scott Plakon	X				
Paul Renner	X	•			
Hazelle Rogers		X			
Chris Sprowls	X				
Richard Stark		X			
W. Gregory Steube	X				
Jay Trumbull	X				
Kenneth Roberson (Chair)	X				
	Total Yeas: 9	Total Nays: 4	ļ.		

HB 233 Amendments

Amendment 753183

X Adopted Without Objection

Appearances:

Ward, Teresa (Lobbyist) - Proponent Florida Right to Life Attorney 4489 Ashville Hwy Monticello FL 32344 Phone: (850) 544-5171

Richardson, Michelle (Lobbyist) - Opponent ACLU of Florida Director of Public Policy

4500 Biscayne Blvd Miami FL 33140

Phone: (786) 363-2700

Bunkley, Bill (Lobbyist) - Proponent

Florida Ethics & Religious Liberty Commission, Inc.

President P.O Box 341644 Tampa FL 33694

Phone: (813) 264-2977

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Location: 306 HOB

HB 233 : Abortion Clinics (continued)

Appearances: (continued)

Kelly, Amber (Lobbyist) - Proponent Florida Family Action Legislative Assistant 4853 S Orange Ave, Ste C Orlando FL

Phone: (407) 418-0250

Pound, Greg (General Public) - Information Only 9166 Sunrise Dr Largo FL 33773

Delgado, Ingrid (Lobbyist) - Proponent Florida Conference of Catholic Bishops Associate for Social Concerns & Respect Life 201 W Park Ave Tallahassee FL 32301

Lazaro, Aurora (General Public) - Information Only 17791 NE 9th Ct N Miami Beach FL 33162 Phone: (305) 505-8080

Swain, Anthony (General Public) - Proponent CFC-Christain Family Coalition Minister 1914 NW 43 St

Miami FL

Phone: (786) 975-7470

Phone: (786) 859-1635

Graham, Gerald (General Public) - Information Only Christian Family Coalition Minister 20167 NW 38th Pl Miami Fl 33055

Wilcox, Nathaniel J. (General Public) - Proponent Christian Family Coalition Minister 3111 NW 135th St Opa-Locka FL

Swain, Cornelia (General Public) - Proponent Christian Family Coalition 1914 NW 43rd St Miami Fl 33142

Phone: (786) 281-9100

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Location: 306 HOB

HB 233: Abortion Clinics (continued)

Appearances: (continued)

Cothran, Charlene E. (General Public) - Proponent

Christian Family Coalition

Pastor, Zion Baptist Church of Palm Coast FL

2323 N State St, Ste 62

Bunnell FL 32110 Phone: (386) 585-5484

Diaz, Kimberly (Lobbyist) - Opponent

FL Alliance of Planned Parenthood Affiliates

Legislative Representative

2300 N FL Mango Rd

WPB FL 33409

Phone: (561) 472-9942

Devane, Barbara A. (Lobbyist) - Opponent

FL Now

625 E. Brevard St.

Tallahassee FL 32308

Phone: (850) 222-3969

Guillermo Smith, Carlos (Lobbyist) - Opponent

Equality FL

Government Affairs Manager

2237 Stonington Ave

Orlando Fl 32817

Phone: (404) 934-4944

Coalburn, Rachel (General Public) - Information Only

10899 SW 4th St

Miami Fl 33174

Phone: (407) 319-0115

McKinstry, Molly (Lobbyist) (State Employee) - Information Only

Agency for Health Care Administration

2727 Mahan Dr

Tallahassee FL 32308

Phone: (850)412-3600

Health Innovation Subcommittee

1/19/2016 1:30:00PM

Location: 306 HOB

HB 885 : Residential Facilities

X | Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes	X				
Fred Costello	X				
Manny Diaz, Jr.	X				
Walter Hill	X				
Mia Jones	X				
Scott Plakon	X				
Paul Renner				X	
Hazelle Rogers	X				
Chris Sprowls	X				
Richard Stark	X				
W. Gregory Steube	X				
Jay Trumbull	X				
Kenneth Roberson (Chair)	X				
	Total Yeas: 12	Total Nays: 0	1		

HB 885 Amendments

Amendment 598321

X Adopted Without Objection

Appearances:

Pinsky, Richard (Lobbyist) - Proponent City of Lake Worth 106 E College Ave, #1200 Tallahassee FL 32301

Arteaga, Diana (Lobbyist) - Waive In Support City of Miami 444 SW 2nd Ave., 10th Floor Miami FL 33133

Phone: (786) 469-1644

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: Health Innovation Meeting Date: 1-19-16 Place: 306 Hoß Time: 1:30 pm Committee/Subcommittee Action: Favorable Favorable w/ amendments Favorable w/Committee/Subcommittee Subs				I D 		eived: orted: bject: \{\rightarrow} Reta Reco Tem	ined for onsidered porarily	Reconsid	leration	
	Other A	ction:				Unta	vorable		page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	····
	Vote Bill	MEMBERS	3trik 753183	e 2						
Yea	Nay	WENDERS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	J	Cortes				•		· ·		
$\sqrt{}$		Costello								
		Diaz								
		Hill	X0	<i>ς</i> >			· · · ·			
	✓	Jones	120	<u>[</u>						
\		Plakon	Kont	D ~						
V	,	Renner	1 00/	×01						
	—	Rogers	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\							
V		Sprowls	100	/						
		Stark	V 3				· · · · · ·			
<i>J</i>		Steube Trumbull		-					·····	ļ.
V/		Roberson, Chair							<u></u>	
~		Roberson, Chan								
									· ·	
			<u> </u>							
				-						
			ļ							
			1		1	1			j	

Yeas

Nays

TOTALS

Yeas

Nays

Yeas

Nays

Yeas

Nays

Yeas

Nays

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Commi	ttee/Subcommittee:		Bill Nu	mber:	XX5	_
	Meeting Date:	1-19-16	Date Rec	eived:		_
	Place:	306 HOB	Date Rep			_
	Time:	1:30 pm	Su	ıbject: 💈	<u>Zesidential</u> Facilities	
		V			Facilities	
Commit	ttee/Subcommittee A	ection:				
F:	avorable] Reta	ained for Reconside	ration
F	avorable w/	amendments] Rec	onsidered	
\mathbf{G} \mathbf{F}	avorable w/Commit	tee/Subcommittee Sub	stitute [] Ten	nporarily Postponed	[
□ o	ther Action:	**************************************] Unf	avorable	

Final Vote On Bill		MEMBERS	Strike 598321							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
J		Cortes								
		Costello								
		Diaz	00							
* /		Hill	1,00							
		Jones	100 C							
1		Plakon	No Ol	VO'	1				1	
		Renner	3.							
/		Rogers	10/6							
/		Sprowls	0,7	S						
		Stark								
1/		Steube								
		Trumbull								
		Roberson, Chair								
-										
,								-		
							-			
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
12	Ø]								

Renner-yes after voll call



60777468



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee administrative assistant at the meeting.'

Bill Number:	nd 255 : Abortion Chi	Meeting Date:	Jan 19 2010 1:50FW
PCB/PCS/Amer Presentation/Wo			
Committee/Sub	committee: Health	Innovation Subcommittee	
Name:	Ward, Teresa		
Title:	Attorney		
Address:	4489 Ashville Hwy		,
City:	Monticello	State/Zip:	FL 32344
Phone Number:	850-544-5171		
Representing:	Florida Right to Life		
Regis	tered Lobbyist: Yes	State Employee	: No
I Wish To Speak	k: Yes	Bill	Amendment
I Have Been Re	quested To Speak: No.	Proponent	N/A



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: HB 233 Meeting Date: 1 1 1 (e
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: #8 233
Committee/Subcommittee: House Health Innovation
Name: Michelle Richardson
Title: Director of Puldic Policy
Address: Director of Puldic Policy Address: 4500 Biscape Blvd
City: Miami State/Zip: 33140
Phone Number: 786 - 363 - 2700
Representing: ACLU of Floreida
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Opponent Info Only Info Only Info Only



Please fill out the <u>entire</u> form and submit \underline{two} copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: HB 233 Meeting Date: 1/19/16
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Mortion Clinics
Committee/Subcommittee: Health Innovation Subcommittee
Name: Bill Bunkley
Title: President
Address: PO Box 34 1644
City: Tampa State/Zip: FL 33694
Phone Number: 813-264-2977
Representing: Florida Ethics & Religious Liberty Commission, Inc
Registered Lobbyist: YES NO State Employee: YES NO NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Dopponent Doppone



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: <u>HB 233</u> Meeting Date: <u>Jan. 19, 2016</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Aportion Clinics
Committee/Subcommittee: Health Innovation Subcommittee
Name: Amber Kelly
Title: Legislative Assistant
Address: 4853 S. Orange Ave, Ste. C
City: Orlando State/Zip: FL
Phone Number: (407) 418-0250
Representing: Florida Family Action
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Dopponent Doppone



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: 233 Meeting Date: //19/16
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Health inn, SUG
Name: Grey Found
Title:
Address: 9166 Sunner On
City: Largo State/Zip: F/a, 33773
Phone Number:
Representing: Saving Families
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES X NO Bill Amendment
Have Been Requested to Speak: YES NO Info Only Info Only Info Only
into only on the bill



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: 233 Meeting Date: 1/19/16
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Always Chinics
Committee/Subcommittee: Health Innovation
Name: Trapid Delagoo
Title: Associate for Social Concerns + Peopoca Life
Address: 201 W Park Av
City: Tallahassee State/Zip: F1 32301
Phone Number:
Representing: Florida Conference of Catholic Bishops
Registered Lobbyist: YES NO State Employee: YES NO NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Info Only Info On



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: <u>HB 233</u> Meeting Date: 1 19/10
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Health Innovation
Name: Aurora Lazaro
Title:
Address: 17791 NE 9th Ct
City: N Miami Blach State/Zip: 1 Florida / 33162
Phone Number: 305 505 8080
Representing:
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO NO IN Info Only I



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: <u>HB. 233</u> Meeting Date: <u>I-19-16</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Abortion Classes Presentation/Workshop Topic:
Committee/Subcommittee: HeAlth Innovative SUB
Name: Anthony Swain
Title: Minister
Address: 1914 NW 43 5+
City: M: Ami State/Zip: F/A
Phone Number: <u>786-975.74</u> 70
Representing: CFC - Christian Family Coalition
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Opponent Opponent O
I Have Been Requested to Speak: VES NO VI Info Only Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: 432 Meeting Date: 1-19-16	
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Abording China	
Committee/Subcommittee: Health I HAD alive Sub	
Name: Gerald Graham	
Title:	
Address: 20167 NO 38Th Pl	
City: Migni FL State/Zip: F1 33055	
Phone Number: $\frac{986-859-1635}{1}$	
Representing: CFC * Mristian Family Coalitin	
Registered Lobbyist: YES NO State Employee: YES NO	
I Wish To Speak: YES NO Bill Amendment	Ļ
Proponent Opponent Proponent Info Only Info Only Info Only	



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: <u>HB 233</u> Meeting Date: <u>JAN. 19, 2016</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: ABORTION CLINICS
Committee/Subcommittee: HEACTH INDVATIVE SUB
Name: NATHANIEL J. WILCOX
Title: MINISTER
Address: 3111 N.W. 135 ST
City: OPA-LOCKA State/Zip: FC
Phone Number: 786)
Representing: CHRISTIAN FAMILY COAUTION
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Info Only Info On



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: $\frac{HB-233}{Meeting Date}$ Meeting Date: $\frac{1/19/16}{Meeting Date}$
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Abortion Clinics
Committee/Subcommittee: Health Innovations Suhcommittee
Name: (Cornelia Swain)
Name: (<u>Cornelia Swain</u> Title: <u>Concerned Citizen</u>
Address: 1914 NW 43rd St.
City: Miami State/Zip: FL 33/42
Phone Number: 786 181 9100
Representing: Christian Family Logilition
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment Proponent Opponent Opponen
I Have Been Requested to Speak: YES NO Info Only Info Only Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: <u>H6233</u> Meeting Date: <u>//19/16</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Aborton Clinics Continuous C
Committee/Subcommittee: HEACTH JUNITIATIVE Sub. Com
Name: Rev. Charlese E, Cothran
Title: Pastor, ZION Baptist Church of Palm
Address: 2323 N. STATE ST Saite 62 Coast, F.
City: Bunnell, FL State/Zip: 32110
Phone Number: 386.585-5484
Representing: Christian Family Coalition
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Proponent Info Only Info Only



Please fill out the <u>entire</u> form and submit \underline{two} copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number:	233	Meet	ing Date:	1/19/16	
Fill in appropriate PCB/PCS/Amend Presentation/Wor	lment # or	<u>233</u>	l		
Committee/Subco	ommittee:	teath I	nnovatro	<u> </u>	
Name: <u>Kiyy</u>	1berly D	iaz			
Title: Lea	islative f	lepresent	ative		
Title: Legi	2300 N.	FL. Mal	ngo Ro	ad.	
City: West					
Phone Number:					
Representing:	Florida V	Hunel of	Planned	Parenthood	Artiliates
Registered Lobb	yist: YES NO	Sta	ate Employee:	YES NO V	
	•				
I Wish To Speak:	YES NO NO		Bill		ndment
I Have Reen Reques	ted to Speak· VFS	/1	onent Opp	ponent Proponent Info Only	Opponent



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: A 3 3 Meeting Date: 19-16
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Mutual Clinical Control
Committee/Subcommittee: <u>Health Carration</u>
Name: Sorbara DeVane
Title: $M5$.
Address: 625 E. Bresard ST
City: Tallahasse State/Zip: (32308
Phone Number: <u>850-222-3969</u>
Representing: Florida NOW
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
Proponent Opponent Proponent Opponent O
I Have Been Requested to Speak: YES NO Info Only Info Only Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: 233 Meeting Date: 119/16	···
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:	
Committee/Subcommittee: Heath Innovation	
Name: Carlos Guillermo Smith	
Title: GOVERNMENT AFFAIRS MANAGER	
Address: 2237 Stonington Ave	
City: Orlando State/Zip: FL 32817	
Phone Number: 404.934. 1941/	
Representing: Equality Florida	
Registered Lobbyist: YES NO State Employee: YES NO	
I Wish To Speak: YES NO Bill Amendment	
I Have Been Requested to Speak: YES NO Info Only Info On	onent 🗌



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: HB 233 Me	eeting Date: $\frac{1}{19}/16$	
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:		
Committee/Subcommittee: Health	Innovation	
Name: Rachel Coalburn		
Title:		
Address: 10899 Sw 4th St		
City: Miam Sta	nte/Zip: FC 33174	
Phone Number: (407) 319 - 5115		
Representing:		·
Registered Lobbyist: YES NO	State Employee: YES NO	
I Wish To Speak: YES NO	Bill Amendment	\Box
	Proponent Opponent Info Only Info Only	ent 🗌



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: _	HB 233	Meeting Date: \\\(\frac{1}{16}\)	
Fill in appropried PCB/PCS/Amer Presentation/Wo	ndment # or		
Committee/Subo	committee: <u>Healt</u>	h Innovidian Subcommittee	· · ·
Name: Mo	ily mckinstry		
Title: Dep.	Sec. HOR		
Address: 2	727 Mahan Dri	1e	
City: Tall	hassee	State/Zip:	
Phone Number:	850-412-	3600	•
Representing:	Agency for	Health Care Administration	
Registered Lob	byist: YES 🛛 NO	State Employee: YES	
I Wish To Speak:	YES NO NO	Bill	Amendment
I Have Been Reque	ested to Speak: YES 😿	Proponent Opponent Info Only	Proponent Opponent Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: _	885	Meeting Date: 1-19-16
Fill in approprice PCB/PCS/Amer Presentation/Wo	ndment # or	Health Innovation Subcommittee
Committee/Sub		nsky
Title:		
Address: 10 City: Talla	6 E. Co Jassee	State/Zip: #L.
Phone Number: Representing:		
	obyist: YES NO	State Employee: YES NO
I Wish To Speak:	YES 🕅 NO	Bill / Amendment
	ested to Speak: YES	Proponent Opponent Opponent Info Only Info Only Info Only



H-16 REVISED 2/17/14

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee

Administrative Assistant at the meeting.

Bill Number: #B 885 Meeting Date: 1/19/16
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Health Thnoration
Name: Diana Arteaga
Title: Director Gort Relations
Address: 4445W 2nd Ave, 10th Floor
City: Miami State/Zip: FC
Phone Number: 786-469-1644
Representing: City of Miami
Registered Lobbyist: YES NO State Employee: YES NO NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO NO NO Info Only Proponent Info Only Opponent Info Only In
•
Waire support
8097