

Health & Human Services Committee

Thursday, March 16, 2017
12:00 PM – 3:00 PM
Morris Hall (17 HOB)

Action Packet

COMMITTEE MEETING REPORT
Health & Human Services Committee
3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

Summary:

Health & Human Services Committee

Thursday March 16, 2017 12:00 pm

HB 59	Favorable With Committee Substitute	Yeas: 17	Nays: 0
	Amendment 381969 Adopted Without Objection		
	Amendment 839413 Adopted Without Objection		
CS/HB 129	Favorable With Committee Substitute	Yeas: 17	Nays: 0
	Amendment 576193 Adopted Without Objection		
HB 145	Favorable	Yeas: 13	Nays: 4
CS/HB 161	Favorable	Yeas: 18	Nays: 0
CS/HB 209	Favorable With Committee Substitute	Yeas: 17	Nays: 0
	Amendment 200947 Adopted Without Objection		
	Amendment 625697 Adopted Without Objection		
	Amendment 632617 Adopted Without Objection		
CS/HB 217	Favorable	Yeas: 18	Nays: 0
CS/HB 375	Favorable	Yeas: 14	Nays: 4
HB 589	Favorable	Yeas: 18	Nays: 0
CS/HB 593	Not Considered		
HB 7009	Favorable	Yeas: 18	Nays: 0
HB 7041	Favorable	Yeas: 16	Nays: 0

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
W. Travis Cummings (Chair)	X		
Thad Altman	X		
Daisy Baez	X		
Lori Berman	X		
Jason Brodeur	X		
Bobby DuBose	X		
Michael Grant	X		
Roy Hardemon	X		
Gayle Harrell	X		
MaryLynn Magar	X		
Ralph Massullo, MD	X		
Alexandra Miller	X		
Cary Pigman	X		
Paul Renner	X		
David Santiago	X		
David Silvers	X		
Frank White	X		
Patricia Williams	X		
Totals:	18	0	0

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 59 : Adult Cardiovascular Services

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White				X	
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 17		Total Nays: 0			

HB 59 Amendments

Amendment 381969

Adopted Without Objection

Amendment 839413

Adopted Without Objection

Appearances:

Amendment #839413 and HB 59
 George, Marnie (Lobbyist) - Waive In Support
 Florida Chapter of/American Academy of Pediatrics and College of Cardiology
 Sr. Advisor, Buchanan, Ingersoll & Rooney
 101 N Monroe St Suite 1090
 Tallahassee FL 32301
 Phone: (850) 510-8866

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 59 : Adult Cardiovascular Services (continued)

Appearances: (continued)

Amendment #839413

Boxer, Ashley (Lobbyist) - Waive In Support

Joe DiMaggio Children's Hospital

Director, Government Relations

3111 Stirling Rd

Hollywood FL 33312

Phone: (305) 794-4801

Amendment # 381969

Anderson, Ellen (Lobbyist) - Waive In Support

Community Health Systems

106 E College Ave Suite 650

Tallahassee FL 32301

Phone: (850) 228-7959

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM



Amendment No. 2

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee

3 Representative Pigman offered the following:

4
 5 **Amendment (with title amendment)**

6 Remove lines 16-35 and insert:

7 (b) 1. For a hospital seeking a Level I program,
 8 demonstration that, for the most recent 12-month period as
 9 reported to the agency, it has provided a minimum of 300 adult
 10 inpatient and outpatient diagnostic cardiac catheterizations or,
 11 for the most recent 12-month period, has discharged or
 12 transferred at least 300 inpatients with the principal diagnosis
 13 of ischemic heart disease and that it has a formalized, written
 14 transfer agreement with a hospital that has a Level II program,
 15 including written transport protocols to ensure safe and
 16 efficient transfer of a patient within 60 minutes. ~~However, a~~



Amendment No. 2

17 2. A hospital located more than 100 road miles from the
18 closest Level II adult cardiovascular services program does not
19 need to meet the 60-minute transfer time protocol requirement in
20 subparagraph 1. if the hospital demonstrates that:

21 a. For the most recent 12-month period as reported to the
22 agency, it has provided a minimum of 100 adult inpatient and
23 outpatient diagnostic cardiac catheterizations, and that, for
24 the most recent 12-month period, it has discharged or
25 transferred at least 300 patients with the principal diagnosis
26 of ischemic heart disease; or

27 b. It~~it~~ has a formalized, written transfer agreement with
28 a hospital that has a Level II program. The agreement must
29 include written transport protocols to ensure the safe and
30 efficient transfer of a patient, taking into consideration the
31 patient's clinical and physical characteristics, road and
32 weather conditions, and viability of ground and air ambulance
33 service to transfer the patient.

34 3. At a

35

36

37

T I T L E A M E N D M E N T

38

Remove line 3 and insert:

39

amending s. 408.0361, F.S.; granting an exception from transfer

40

time protocol; expanding rulemaking

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 129 : Health Care Practitioner Regulation

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur				X	
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 17		Total Nays: 0			

CS/HB 129 Amendments

Amendment 576193

Adopted Without Objection

Appearances:

Floyd, Chris (Lobbyist) - Waive In Support
 Florida Association of Nurse Practitioners
 Consultant
 101 E College Ave, Ste 302
 Tallahassee FL 32301
 Phone: (813) 624-5117

Whittaker, Stan (General Public) - Waive In Support
 Florida Association of Nurse Practitioners
 Chairman
 6294 NW Torreya Park Road
 Bristol Florida 32321
 Phone: (850) 545-8301

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 129 : Health Care Practitioner Regulation (continued)

Appearances: (continued)

Lyon, Chris (Lobbyist) - Waive In Support

Fl Association of Nurse Anesthetists

Attorney

315 S. Calhoun St., Suite 830

Tallahassee Fl 32301

Phone: (850) 222-5702

Hosek, Andrew (Lobbyist) - Waive In Support

Americans for Prosperity

Policy Analyst

200 W College Ave

Tallahassee FL 32301

Phone: (850) 378-6291

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: **Health & Human Services**

Bill Number: CS/HB 129

Meeting Date: 3/16/19

Date Received: _____

Place: House Hall

Date Reported: _____

Time: 12:00 pm

Subject: Health Care Practitioner Regulation

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS	<i>amend</i> 596193							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Altman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Baez								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brodeur								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	DuBose								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grant								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hardemon								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Massullo								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Miller								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Santiago								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Silvers								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	White								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Williams								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
17	0									

Rep B under yes after roll call

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 145 : Recovery Care Services

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez		X			
Lori Berman		X			
Jason Brodeur	X				
Bobby DuBose		X			
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White				X	
Patricia Williams		X			
W. Travis Cummings (Chair)	X				
Total Yeas: 13		Total Nays: 4			

Appearances:

Madewell, Michael (General Public) - Proponent
 Florida Society of Ambulatory Surgery Centers
 Board Member
 1400 Village Square Blvd
 Tallahassee FL 32312
 Phone: (850) 890-1407

Oeters, Phillis (Lobbyist) - Waive In Opposition
 Baptist Hospital
 VP Government & Community Relations
 6855 Red Road
 Coral Gables FL 33146
 Phone: (305) 205-2457

Large, Toni (Lobbyist) - Waive In Support
 Florida Orthopaedic Society
 519 E Park Ave
 Tallahassee FL 32301
 Phone: (850) 556-1461

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 145 : Recovery Care Services (continued)

Appearances: (continued)

Hosek, Andrew (Lobbyist) - Waive In Support

Americans for Prosperity

Policy Analyst

200 W College Ave

Tallahassee FL 32301

Phone: (850) 378-6291

Nuzzo, Sal (General Public) - Waive In Support

The James Madison Institute

VP Policy

100 N Duval

Tallahassee FL 32301

Phone: (850) 322-9941

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: Health & Human Services

Bill Number: HB 145

Meeting Date: 3/16/17

Date Received: _____

Place: More Help

Date Reported: _____

Time: 12:30 p.m.

Subject: Recovery Care Services

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>		Altman								
	<input checked="" type="checkbox"/>	Baez								
	<input checked="" type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>		Brodeur								
	<input checked="" type="checkbox"/>	DuBose								
<input checked="" type="checkbox"/>		Grant								
<input checked="" type="checkbox"/>		Hardemon								
<input checked="" type="checkbox"/>		Harrell								
<input checked="" type="checkbox"/>		Magar								
<input checked="" type="checkbox"/>		Massullo								
<input checked="" type="checkbox"/>		Miller								
<input checked="" type="checkbox"/>		Pigman								
<input checked="" type="checkbox"/>		Renner								
<input checked="" type="checkbox"/>		Santiago								
<input checked="" type="checkbox"/>		Silvers								
		White								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Williams								
<input checked="" type="checkbox"/>		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
13	4									

Rep White . Yes after roll call

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 161 : Direct Primary Care Agreements

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 18		Total Nays: 0			

Appearances:

Thomas, Mary (Lobbyist) - Proponent
 Florida Medical Association
 Assistan General Counsel
 1430 Piedmont Dr E
 Tallahassee FL 32308
 Phone: (850) 244-6496

Nuzzo, Sal (General Public) - Proponent
 The James Madison Institute
 VP Policy
 100 N Duval
 Tallahassee FL 32301
 Phone: (850) 322-9941

Winn, Stephen (Lobbyist) - Waive In Support
 Florida Osteopathic Medical Association
 Executive Director
 2544 Blairstone Pines Drive
 Tallahassee FL 32301
 Phone: (850) 878-7364

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 161 : Direct Primary Care Agreements (continued)

Appearances: (continued)

Nungesser, Timothy (Lobbyist) - Proponent
National Federation of Independent Business
Legislative Director
110 E Jefferson St
Tallahassee FL 32301
Phone: (850) 445-5367

Lyon, Aimee (Lobbyist) - Waive In Support
Florida Academy of Family Physicians
119 South Monroe Street, Suite 200
Tallahassee FL 32301
Phone: (850) 205-9000

Nuland, Chris (Lobbyist) - Proponent
Florida Chapter, American College of Physicians
1000 Riverside Avenue, #240
Jacksonville Florida 32204
Phone: (904) 233-3051

Hosek, Andrew (Lobbyist) - Waive In Support
Americans for Prosperity
Policy Analyst
200 W College Ave
Tallahassee FL 32301
Phone: (850) 378-6291

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: **Health & Human Services**

Bill Number: CS/HB 161

Meeting Date: 3/14/17

Date Received: _____

Place: Moore Hall

Date Reported: _____

Time: 12:00 pm

Subject: Direct Primary Care

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
✓		Altman								
✓		Baez								
✓		Berman								
✓		Brodeur								
✓		DuBose								
✓		Grant								
✓		Hardemon								
✓		Harrell								
✓		Magar								
✓		Massullo								
✓		Miller								
✓		Pigman								
✓		Renner								
✓		Santiago								
✓		Silvers								
✓		White								
✓		Williams								
✓		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
18	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 209 : Medical Faculty Certification

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White				X	
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 17		Total Nays: 0			

CS/HB 209 Amendments

Amendment 200947

Adopted Without Objection

Amendment 625697

Adopted Without Objection

Amendment 632617

Adopted Without Objection

Appearances:

Berry, Anita (Lobbyist) - Waive In Support
 Johns Hopkins All Children's Hospital
 Lobbyist
 21748 State Rd 54
 Lutz FL 33549
 Phone: (301) 524-0172

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 209 : Medical Faculty Certification (continued)

Appearances: (continued)

Amendment #200947 and CS/HB 209

Smith, Layne (Lobbyist) - Waive In Support

Mayo Clinic College of Medicine

Director, State Government Relations

4500 San Pablo Rd

Jacksonville FL 32205

Phone: (904) 953-7334

Amendment # 632617 and CS/HB 209

Henderson, Cynthia (Lobbyist) - Waive In Support

Ascend Learning .

108 E Jefferson St, Ste E

Tallahassee FL 32301

Phone: (850) 559-0855

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: **Health & Human Services**

Bill Number: CS/HB 209

Meeting Date: 3/16/17

Date Received: _____

Place: Marine Hall

Date Reported: _____

Time: 12:20 pm

Subject: Medical Faculty Certification

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS	<i>Amend</i> 625697		<i>Amend</i> 200949		<i>Amend</i> 632619		Yeas	Nays
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Altman								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Baez	w/o		w/o		w/o			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Brodeur								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DuBose								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Grant								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Hardemon								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Massullo								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Miller								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Santiago								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Silvers								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	White								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Williams								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
17	0									

Rep White - yes after roll call



Amendment No. 2

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER		

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Miller, A. offered the following:

Amendment

Remove line 50 and insert:

7 7. The Mayo Clinic College of Medicine and Science in
 8 Jacksonville,

COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. CS/HB 209 (2017)

Amendment No. 3

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER		

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Miller, A. offered the following:
4

5 **Amendment (with title amendment)**

6 Between lines 118 and 119, insert:

7 Section 2. Subsection (3) is added to section 458.3485,
8 Florida Statutes, to read:

9 458.3485 Medical assistant.—

10 (3) CERTIFICATION.—In order to earn a credential as a
11 certified medical assistant, a medical assistant shall obtain
12 certification from a certification program accredited by the
13 National Commission for Certifying Agencies.

14 Section 3. Paragraph (b) of subsection (7) of section
15 483.291, Florida Statutes, is amended to read:

Amendment No.

16 483.291 Powers and duties of the agency; rules.—The agency
17 shall adopt rules to implement this part and part II of chapter
18 408, which rules must include the following:

19 (7) PERSONNEL.—The agency shall prescribe minimum
20 qualifications for center personnel. A center may employ as a
21 medical assistant a person who has at least one of the following
22 qualifications:

23 (b) Certification and registration from a certification
24 program accredited by the National Commission for Certifying
25 Agencies and approved by the agency by the American Medical
26 Technologists Association or other similar professional
27 association approved by the agency.

28
29 -----

30 T I T L E A M E N D M E N T

31 Remove everything before the enacting clause and insert:

32 A bill to be entitled

33 An act relating to medical faculty and medical
34 assistant certification; amending s. 458.3145, F.S.;
35 revising the list of schools at which certain faculty
36 members are eligible to receive a medical faculty
37 certificate; authorizing a certificateholder to
38 practice at certain specialty-licensed children's
39 hospitals; revising provisions to allow the medical
40 director of certain specialty-licensed children's

COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. CS/HB 209 (2017)

Amendment No.

41 hospitals to request the provision of medical care and
42 treatment in connection with education; amending s.
43 458.3485, F.S.; providing a requirement to earn a
44 certified medical assistant credential; amending s.
45 483.291, F.S.; revising qualifications for employment
46 as a medical assistant in a multiphasic health testing
47 center; providing an effective date.

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 217 : Children Obtaining Driver Licenses

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 18		Total Nays: 0			

Appearances:

Abramowitz, Alan (Lobbyist) (State Employee) - Waive In Support
Guardian Ad Litem Program
Executive Director
600 S Calhoun St, Ste 274
Tallahassee FL 32301
Phone: (850) 241-3232

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: **Health & Human Services**

Bill Number: CS/HB 217

Meeting Date: 3/16/11

Date Received: _____

Place: Moore Hall

Date Reported: _____

Time: 12:00 pm

Subject: Children Obtaining Driver Licenses

Committee/Subcommittee Action:

- | | |
|--|--|
| <input type="checkbox"/> Favorable
<input type="checkbox"/> Favorable w/ _____ amendments
<input type="checkbox"/> Favorable w/Committee/Subcommittee Substitute
<input type="checkbox"/> Other Action: _____ | <input type="checkbox"/> Retained for Reconsideration
<input type="checkbox"/> Reconsidered
<input type="checkbox"/> Temporarily Postponed
<input type="checkbox"/> Unfavorable |
|--|--|

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
✓		Altman								
✓		Baez								
✓		Berman								
✓		Brodeur								
✓		DuBose								
✓		Grant								
✓		Hardemon								
✓		Harrell								
✓		Magar								
✓		Massullo								
✓		Miller								
✓		Pigman								
✓		Renner								
✓		Santiago								
✓		Silvers								
✓		White								
✓		Williams								
✓		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
18	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 375 : Patient Safety Culture Surveys

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez		X			
Lori Berman		X			
Jason Brodeur	X				
Bobby DuBose		X			
Michael Grant	X				
Roy Hardemon		X			
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 14		Total Nays: 4			

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: Health & Human Services

Bill Number: CS/HB 395

Meeting Date: 3/16/17

Date Received: _____

Place: More Hall

Date Reported: _____

Time: 12:00 pm

Subject: Patient Safety
Culture Surveys

Committee/Subcommittee Action:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Favorable
<input type="checkbox"/> Favorable w/ _____ amendments
<input type="checkbox"/> Favorable w/Committee/Subcommittee Substitute
<input type="checkbox"/> Other Action: _____ | <input type="checkbox"/> Retained for Reconsideration
<input type="checkbox"/> Reconsidered
<input type="checkbox"/> Temporarily Postponed
<input type="checkbox"/> Unfavorable |
|---|--|

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
✓		Altman								
	✓	Baez								
	✓	Berman								
✓		Brodeur								
	✓	DuBose								
✓		Grant								
	✓	Hardemon								
✓		Harrell								
✓		Magar								
✓		Massullo								
✓		Miller								
✓		Pigman								
✓		Renner								
✓		Santiago								
✓		Silvers								
✓		White								
✓		Williams								
✓		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	4									

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 589 : Prescription Drug Price Transparency

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 18		Total Nays: 0			

Appearances:

Nuzzo, Sal (General Public) - Waive In Support
 The James Madison Institute
 VP Policy
 100 N Duval
 Tallahassee FL 32301
 Phone: (850) 322-9941

Barker, Dorene (Lobbyist) - Waive In Support
 AARP
 Associate State Director
 200 W College Ave, 304
 Tallahassee FL 32301
 Phone: (850) 228-6387

Bevis, Brewster (Lobbyist) - Waive In Support
 Associated Industries of Florida
 Senior Vice President
 510 W Adams St
 Tallahassee FL 32301
 Phone: (850) 224-7173

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 589 : Prescription Drug Price Transparency (continued)

Appearances: (continued)

Winn, Stephen (Lobbyist) - Waive In Support
Florida Osteopathic Medical Association
Executive Director
2544 Blairstone Pines Drive
Tallahassee FL 32301
Phone: (850) 878-7364

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

CS/HB 593 : Restrictions on Use of Public Assistance Benefits

Not Considered

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 7009 : Ratification of Rules of the Board of Medicine

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 18		Total Nays: 0			

Appearances:

Thomas, Mary (Lobbyist) - Waive In Support
 Florida Medical Association
 Ass. General Counsel
 1430 Piedmont Dr E
 Tallahassee FL 32308
 Phone: (850) 224-6496

Nuland, Christopher (Lobbyist) - Waive In Support
 Florida Chapter, American College of Surgeons
 1000 Riverside Ave, Suite 240
 Jacksonville FL 32204
 Phone: (904) 355-1555

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: **Health & Human Services**

Bill Number: HB 7009

Meeting Date: 3/16/17

Date Received: _____

Place: Mark Hall

Date Reported: _____

Time: 12:00 PM

Subject: Ratification of Rules of the Bd of Medicine

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
✓		Altman								
✓		Baez								
✓		Berman								
✓		Brodeur								
✓		DuBose								
✓		Grant								
✓		Hardemon								
✓		Harrell								
✓		Magar								
✓		Massullo								
✓		Miller								
✓		Pigman								
✓		Renner								
✓		Santiago								
✓		Silvers								
✓		White								
✓		Williams								
✓		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
18	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

3/16/2017 12:00PM

Location: Morris Hall (17 HOB)

HB 7041 : Pub. Rec. and Meetings/Peer Review Panel/James & Esther King Biomedical Research Program & William G. "Bill" Bankhead, Jr., & David Coley Cancer Research Program

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Thad Altman	X				
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant			X		
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White				X	
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
Total Yeas: 16		Total Nays: 0			

Committee meeting was reported out: Thursday, March 16, 2017 3:44PM

**House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET**

Committee/Subcommittee: **Health & Human Services**

Bill Number: HB 7041

Meeting Date: 3/14/17

Date Received: _____

Place: Mark Hale

Date Reported: _____

Time: 12:00 pm

Subject: Pub. Rec. and Meetings

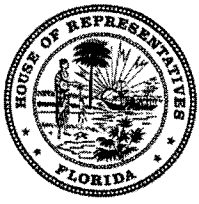
Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
✓		Altman								
✓		Baez								
✓		Berman								
✓		Brodeur								
✓		DuBose								
✓		Grant								
✓		Hardemon								
✓		Harrell								
✓		Magar								
✓		Massullo								
✓		Miller								
✓		Pigman								
✓		Renner								
✓		Santiago								
✓		Silvers								
✓		White								
✓		Williams								
✓		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
16	0									

Rep. White - Yes after roll call



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

W/S

<input type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>59</u>	
Amendment Number: <u>839413</u>	

Name: Marnie George

Representing: FL Chapter, American Academy of Pediatrics

Title: Sr. Advisor, Buchanan Ingersoll & Rooney

Address: 101 N. Monroe St. Suite 1090

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-510-8866 Meeting Date: 3/16/17

Committee/Subcommittee: Health & Human Services

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

WLS

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>59</u>	
Amendment Number: _____	

Name: Marnie George
 Representing: FL Chapter, American Academy of Pediatrics AND FL Chapter, American College of Cardiology
 Title: Sr. Advisor, Buchanan Ingersoll & Rooney
 Address: 101 N. Monroe St, Suite 1090
 City: Tallahassee State/Zip: FL 32303
 Phone Number: 850 510-8866 Meeting Date: 3/14/19
 Committee/Subcommittee: Health & Human Services
 Presentation/Workshop Topic: _____

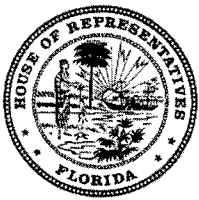
Registered Lobbyist: YES NO

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 type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>59</u>	
Amendment Number: <u>839413</u>	

Name: Ashley Boxer

Representing: Joe DiMaggio Children's Hospital

Title: Director, Government Relations

Address: 3111 Stirling Road

City: Hollywood State/Zip: 33312

Phone Number: (305) 794 4801 Meeting Date: 3/16/17

Committee/Subcommittee: Health and Human Services

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

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

WFS

<input type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>HB 59</u>	
Amendment Number: <u>381969</u>	

Name: Ellen N. Anderson

Representing: Community Health Systems

Title: Director of Government Relations

Address: 106 E. College Ave Suite 650

City: Tallahassee State/Zip: FL 32301

Phone Number: 850.228.7959 Meeting Date: 3/16/2017

Committee/Subcommittee: Health & Human Services

Presentation/Workshop Topic: Cardiology Services

Registered Lobbyist: YES NO

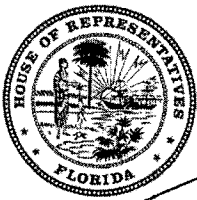
State Employee: YES NO

- 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

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

Waive IN support

<input checked="" type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>129</u>	
Amendment Number: <u>576193</u>	

Name: Stan Whittaker

Representing: Florida Association of Nurse Practitioners

Title: Chairman

Address: 6294 NW Turrell A PK Rd

City: Bristol State/Zip: FL 32321

Phone Number: 850-545-8301 Meeting Date: 3/16/2017

Committee/Subcommittee: Health/Human Service

Presentation/Workshop Topic: FS/ HB 129

Registered Lobbyist: YES NO

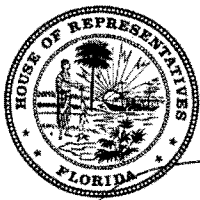
State Employee: YES NO

- 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

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

Waive in support

<input checked="" type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>129</u>	
Amendment Number: <u>576193</u>	

Name: Chris Floyd

Representing: FL Assoc of Nurse Practitioners

Title: Consultant

Address: 101 E. College Ave. Ste. 302,

City: Tallahassee State/Zip: FL 33606

Phone Number: 813-624-5117 Meeting Date: 3/16/17

Committee/Subcommittee: HHS

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>129</u>	
Amendment Number: _____	

Name: Andrew Hosek

Representing: Americans for Prosperity

Title: Policy Analyst

Address: 200 W College Ave

City: Tallahassee State/Zip: FL

Phone Number: _____ Meeting Date: _____

Committee/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

WIS

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>129</u>	
Amendment Number: _____	

Name: Chris Lyon

Representing: Florida Association of Nurse Anesthetists

Title: Attorney

Address: 315 S. Calhoun St., Ste. ~~8~~ 830

City: Tallahassee State/Zip: FL 32301

Phone Number: 222-5702 Meeting Date: 3/16/17

Committee/Subcommittee: Health & Human Services

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

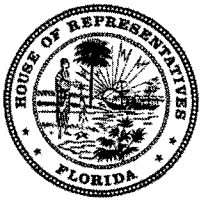
State Employee: YES NO

- 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>145</u>	
Amendment Number: _____	

Name: Andrew Hosek

Representing: Americans for Prosperity

Title: Policy Analyst

Address: 200 W College Ave

City: Tallahassee State/Zip: FL

Phone Number: _____ Meeting Date: 3-16-17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

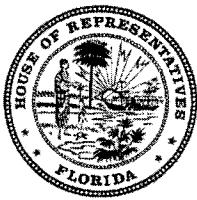
State Employee: YES NO

- 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

WLS

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>145</u>	
Amendment Number: _____	

Name: Toni Large

Representing: Florida Orthopedic Society

Title: _____

Address: 519 E Park Ave

City: Tallahassee State/Zip: FL 32301

Phone Number: (850) 556-1464 Meeting Date: _____

Committee/Subcommittee: Health & Human Services

Presentation/Workshop Topic: Recovery Care Centers / Am Surg

Registered Lobbyist: YES NO

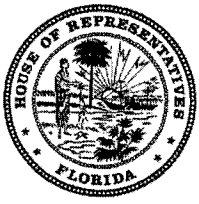
State Employee: YES NO

- 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

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

WFO

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>HB 145</u>	
Amendment Number: _____	

Name: Phillis Oeters

Representing: Baptist Hca Hh

Title: VP Govt + Community Relations

Address: 6855 Red Road

City: Coral Gables, FL State/Zip: 33146

Phone Number: 305-205-2457 Meeting Date: 3/16/17

Committee/Subcommittee: _____

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

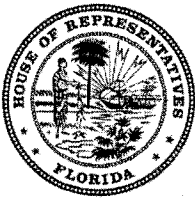
State Employee: YES NO

- 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

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>145</u>	
Amendment Number: _____	

Name: Michael Madewell

Representing: Florida Society of Ambulatory Surgery Centers

Title: Board Member and Panama City Surgery Center

Address: 1400 Village Sq. Blvd

City: Tallahassee State/Zip: FL 32312

Phone Number: 8508501407 Meeting Date: 3/16/17

Committee/Subcommittee: Health + Human Services

Presentation/Workshop Topic: Recovery Care Services

Registered Lobbyist: YES NO

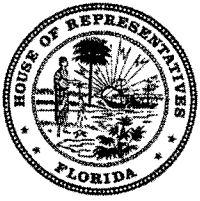
State Employee: YES NO

- 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

WIS

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>140</u>	
Amendment Number: _____	

Name: SAR WAZZO

Representing: SMI

Title: VP Policy

Address: 100 N DUAR

City: TALL. State/Zip: FL 32301

Phone Number: 850-322-9941 Meeting Date: 3/16

Committee/Subcommittee: HHK

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



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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: 161 : Direct Primary Care Agreements PCB/PCS/Amendment #: N/A
--

Name: **Sal Nuzzo**

Representing: **The James Madison Institute**

Title:

Address: **100 N Duval Street**

City: **Tallahassee** State/Zip: **Florida 32301**

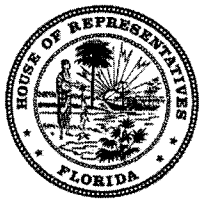
Phone Number: **8503229941** Meeting Date: **March 16, 2017 12:00 PM**

Committee/Subcommittee: **Health & Human Services Committee**

Presentation/Workshop Topic: **N/A**

- Registered Lobbyist
- State Employee
- I Wish To Speak
- Appearing in response to subpoena
- Appearing in response to an inquiry for information made by member, committee or staff
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance Form Submitted

<u>Bill</u>
Proponent
<u>Amendment</u>
N/A



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

12100
17-H (MOORE'S HALL)

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>HB 161</u>	
Amendment Number: _____	

W/S

Name: STEPHEN R. WINN

Representing: FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION

Title: EXECUTIVE DIRECTOR

Address: 2544 BLAIRSTONE PINES DRIVE

City: TALLAHASSEE State/Zip: FL 32301

Phone Number: 878-7364 Meeting Date: 3-16-2017

Committee/Subcommittee: HEALTH AND HUMAN SERVICES

Presentation/Workshop Topic: DIRECT PRIMARY CARE AGREEMENTS

Registered Lobbyist: YES NO

State Employee: YES NO

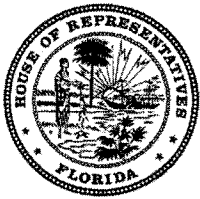
- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

WAIVE TIME IN SUPPORT

(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 type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>161</u>	
Amendment Number: _____	

Name: Mary Thomas

Representing: Florida Medical Association

Title: Assistant General Counsel

Address: 1430 Piedmont Dr E

City: Tallahassee State/Zip: FL 32308

Phone Number: 850 224 6496 Meeting Date: 3/16/17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

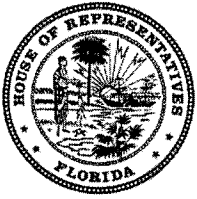
State Employee: YES NO

- 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



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

<input type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>161</u>	
Amendment Number: _____	

Name: Chris Noland

Representing: Florida Chapter, American College of Physicians

Title: _____

Address: 1000 Riverside Ave #240

City: Tax State/Zip: FL 32204

Phone Number: 904 233-3051 Meeting Date: 3/16/17

Committee/Subcommittee: HMSC

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

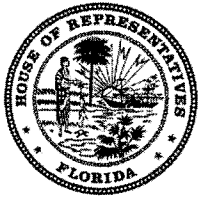
State Employee: YES NO

- 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

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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>161</u>	
Amendment Number: _____	

Name: Andrew Hosek

Representing: Americans for Prosperity

Title: Policy Analyst

Address: 200 W College Ave

City: Tallahassee State/Zip: FL

Phone Number: _____ Meeting Date: 3-16-17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

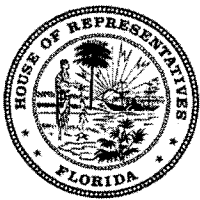
State Employee: YES NO

- 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>161</u>	
Amendment Number: _____	

Name: Aimee Diaz Lyon

Representing: Florida Academy of Family Physicians

Title: _____

Address: 119 South Monroe Street, Suite 200

City: Tallahassee State/Zip: 32301

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

Committee/Subcommittee: Health + Human Services Committee

Presentation/Workshop Topic: Direct Primary Care

Registered Lobbyist: YES NO

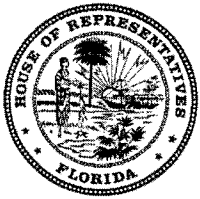
State Employee: YES NO

- 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

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>161</u>	
Amendment Number: _____	

Name: Tim Nungesser

Representing: National Federation of Independent Business

Title: Legislation Director

Address: 110 E. Jefferson St.

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-445-5367 Meeting Date: 3/16/17

Committee/Subcommittee: Health + Human Services

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

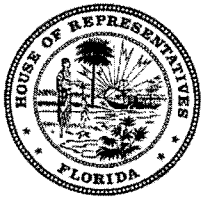
State Employee: YES NO

- 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

Handwritten initials

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

<input type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>209</u>	
Amendment Number: <u>200947</u>	

Name: Layne Smith

Representing: Mayo Clinic College of Medicine

Title: Director, State Government Relations

Address: 4500 San Pablo Rd.

City: Jacksonville State/Zip: FL 32205

Phone Number: 904-953-7334 Meeting Date: 3/16/17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: Medical faculty certificates

Registered Lobbyist: YES NO

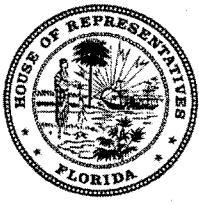
State Employee: YES NO

- 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 type="checkbox"/> Bill	<input checked="" type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>209</u>	
Amendment Number: <u>432417</u>	

Name: Cynthia Henderson

Representing: Ascend Learning

Title: _____

Address: 108 E. Jefferson St. suite E

City: Tallahassee State/Zip: FL 32301

Phone Number: 850 959 0855 Meeting Date: 3/16/17

Committee/Subcommittee: Health & Human Services Committee

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

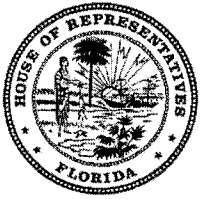
State Employee: YES NO

- 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

WLS

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>209</u>		Amendment Number: _____	

Name: Anita Berry

Representing: Johns Hopkins All Children's Hospital

Title: lobbyist

Address: 21748 SR 54

City: WFL State/Zip: FL

Phone Number: 301 524 0172 Meeting Date: 3/16/17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: _____

Registered Lobbyist: YES NO

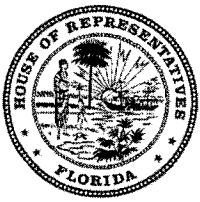
State Employee: YES NO

- 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

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

W/S

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>217</u>	
Amendment Number: _____	

Alan Abramowitz

Name: ALAN ABRAMOWITZ

Representing: GUARDIAN ACTION Program

Title: Executive Director

Address: 600 S. Collier Street

City: Tallahassee State/Zip: 32310

Phone Number: 850-241-5232 Meeting Date: 3-16-17

Committee/Subcommittee: HHS

Presentation/Workshop Topic: HS 217 - Keys to Independence Bill

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>HB 589</u>	
Amendment Number: _____	

Name: Brewster Bevis

Representing: Associated Industries of Florida

Title: Senior Vice President

Address: 516 W Adams St

City: TLH State/Zip: FL 32301

Phone Number: 224-7173 Meeting Date: 3/16

Committee/Subcommittee: HHS sub

Presentation/Workshop Topic: Prescription Drug Price Transparency

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

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

W/S

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>HB 589</u>	
Amendment Number: _____	

Name: STEPHEN R. WINN

Representing: FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION

Title: EXECUTIVE DIRECTOR

Address: 2544 BLAIRSTONE PINES DRIVE

City: TALLAHASSEE State/Zip: FL 32301

Phone Number: 878-7364 Meeting Date: 3-16-2017

Committee/Subcommittee: HEALTH AND HUMAN SERVICES

Presentation/Workshop Topic: PRESCRIPTION DRUG PRICE TRANSPARENCY

Registered Lobbyist: YES NO

State Employee: YES NO

I wish to speak

WANT 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

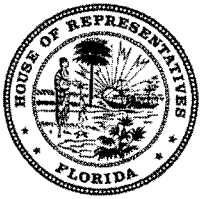
Judge or elected officer appearing in official capacity

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

WFS

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>HB 589</u>	
Amendment Number: _____	

Name: Dorene Barker

Representing: AARP

Title: Associate State Director

Address: 200 W College Ave, Suite 304

City: Jal State/Zip: FL 32301

Phone Number: 850-228-6387 Meeting Date: 3-16-17

Committee/Subcommittee: Health + Human Services Committee

Presentation/Workshop Topic: Prescription Drug Price Transparency

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



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W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: 589 : Prescription Drug Price Transparency PCB/PCS/Amendment #: N/A
--

Name: **sal nuzzo**

Representing: **The James Madison Institute**

Title:

Address: **100 N Duval Street**

City: **Tallahassee**

State/Zip: **fl 32301**

Phone Number: **8503229941**

Meeting Date: **March 16, 2017 12:00 PM**

Committee/Subcommittee: **Health & Human Services Committee**

Presentation/Workshop Topic: **N/A**

- Registered Lobbyist
- State Employee
- I Wish To Speak
- Appearing in response to subpoena
- Appearing in response to an inquiry for information made by member, committee or staff
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance Form Submitted

<u>Bill</u>
Proponent
<u>Amendment</u>
N/A



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 type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>7009</u>	
Amendment Number: _____	

Name: Mary Thomas

Representing: Florida Medical Association

Title: Assistant General Counsel

Address: 1430 Piedmont Dr E

City: TLH State/Zip: FL/32308

Phone Number: 850 224 1049 Meeting Date: 3/10/17

Committee/Subcommittee: HHS

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>7009</u>	
Amendment Number: _____	

Name: Chris Nuland

Representing: Florida Chapter, American College of Surgeons

Title: _____

Address: 1000 Riverside Ave #240

City: Jax State/Zip: FL 32204

Phone Number: 904 351-1555 Meeting Date: 3/16/17

Committee/Subcommittee: HHSC

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