

Health & Human Services Committee

Thursday, March 30, 2017 9:00 AM – 12:00 PM Morris Hall (17 HOB)

Action Packet

Richard Corcoran Speaker W. Travis Cummings Chair

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

Summary:

Health & Human Services Committee

Thursday March 30, 2017 09:00 am

CS/CS/HB 23 Favorable	Yeas:	11	Nays: 6	I
CS/HB 229 Favorable With Committee Substitute	Yeas:	16	Nays: O	i
Amendment 158277 Adopted Without Objection				
Amendment 330523 Adopted as Amended				
CS/HB 619 Favorable	Yeas:	15	Nays: O)
Amendment 381171 Withdrawn				
CS/HB 749 Favorable	Yeas:	14	Nays: O)
CS/HB 763 Favorable	Yeas:	16	Nays: O)
CS/CS/HB 785 Favorable With Committee Substitute	Yeas:	16	Nays: O	,
Amendment 723695 Adopted Without Objection				
CS/HB 807 Favorable With Committee Substitute	Yeas:	16	Nays: 0)
Amendment 294449 Adopted Without Objection				
HB 863 Favorable With Committee Substitute	Yeas:	15	Nays: O)
Amendment 284989 Adopted Without Objection				
CS/HB 899 Favorable	Yeas:	15	Nays: O)
CS/HB 969 Favorable With Committee Substitute	Yeas:	11	Nays: 5	;
Amendment 610047 Adopted Without Objection				
HB 1253 Favorable With Committee Substitute	Yeas:	14	Nays: O)
Amendment 293713 Adopted Without Objection				

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

Attendance:

	Present	Absent	Excused
W. Travis Cummings (Chair)	Х		
Thad Altman	Х		
Daisy Baez	x		
Lori Berman	x		
Jason Brodeur	x		
Bobby DuBose	x		
Michael Grant	x		
Roy Hardemon	X		
Gayle Harrell			Х
MaryLynn Magar	x		
Ralph Massullo, MD	X		
Alexandra Miller	x	<u></u>	
Cary Pigman	x		
Paul Renner	X		
David Santiago	×	· · · · · · · · · · · · · · · · · · ·	
David Silvers	x		
Frank White	x		
Patricia Williams	X		
Totals:	17	0	1

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/CS/HB 23 : Public Assistance

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez		X			
Lori Berman		Х			
Jason Brodeur	X				
Bobby DuBose		Х			
Michael Grant	Х				
Roy Hardemon		X		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Gayle Harrell			X		
MaryLynn Magar	Х				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	Х				
David Santiago	X				
David Silvers		X			
Frank White	X				
Patricia Williams		Х	tile ine en		
W. Travis Cummings (Chair)	X				
	Total Yeas: 11	Total Nays: 6	6		

Appearances:

Woodall, Karen (Lobbyist) - Opponent Florida Center for Fiscal & Economic Policy Executive Director 579 E Call St Tallahassee FL 32301 Phone: (850) 321-9386

Mackin, Colleen (Lobbyist) - Waive In Opposition The Children's Campaign 401 S Magnolia Dr Tallahassee FL Phone: (850) 425-2600

Rosenberg, Arthur (Lobbyist) - Waive In Opposition Florida Legal Services Attorney 3000 Biscayne Blvd Miami FL 33137 Phone: (850) 509-2085

Comm	ittee/Sul	bcommittee:				Bill Nu	mber:	trel	$\partial R \gamma$	$\overline{\mathbf{z}}$	
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Final	Vote										
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Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

CS/HB 229 : Programs for Impaired Health Care Practitioners

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez	x				·····
Lori Berman	Х				
Jason Brodeur	X	- · · · ·			
Bobby DuBose	X				
Michael Grant	Х				
Roy Hardemon			X		
Gayle Harrell			X		
MaryLynn Magar	X				
Raiph 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: ()		

CS/HB 229 Amendments

Amendment 158277

X Adopted Without Objection

Amendment 330523

X Adopted as Amended

Appearances:

Hart, Joe Ann (Lobbyist) - Waive In Support Florida Dental Association Girector of Governmental Affairs 118 E. Jefferson St. Tallahassee FL 32301 Phone: (850) 224-1089

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 229 : Programs for Impaired Health Care Practitioners (continued)

Appearances: (continued)

Brown, Martha (General Public) - Waive In Support Professionals Resource Network PRN Associate Medical Director PO Box 16510 Fernandina Beach FL 32035 Phone: (904) 277-8004

Whitaker, Kathy (General Public) - Waive In Support Intervention Project for Nurses
Director of Clinical Services
PO Box 49130
Jacksonville Beach FL 32240
Phone: (904) 270-1620

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

Prutsman, Eric (Lobbyist) - Waive In Support Florida Fire Chiefs' Association Po Box 10448 Tallahassee FL 32302 Phone: (850) 894-6601

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

LaPolt, Alisa (Lobbyist) - Waive In Support Florida Nurses Association Lobbyist Po Box 1344 Tallahassee FL 32302 Phone: (850) 443-1319

Committee/Subcommittee: Health & Human Services				Bill Nu	mber:	<th>$\gamma \gamma c$</th> <th></th> <th></th>	$\gamma \gamma c$				
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Committee/Sul	bcommittee Action:			U	公长会	and H	l Çev∀h	1. 61.2			
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On Bill	MEMBERS	3305	23	158	2111						
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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. CS/HB 229 (2017)

Amendment No.

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COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	(Y/N)
ADOPTED AS AMENDED	(X/N)
ADOPTED W/O OBJECTION	$\frac{(Y/N)}{(Y/N)}$
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Health & Human Services Committee

Representative Magar offered the following:

Amendment to Amendment (330523) by Representative Byrd Remove line 621 of the amendment and insert:

renewal of licensure, certification, or registration who was

158277 - h0229-line621.docx

Published On: 3/30/2017 8:32:11 AM

Page 1 of 1

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

CS/HB 619 : Consolidation of Medicaid Waiver Programs

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez	Х			······································	
Lori Berman	X				
Jason Brodeur	Х				
Bobby DuBose			X		
Michael Grant	X				
Roy Hardemon			х		
Gayle Harrell			x		
MaryLynn Magar	Х				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	Х				
David Silvers	X				
Frank White	X				
Patricia Williams	X	<u>.</u>			
W. Travis Cummings (Chair)	X				
	Total Yeas: 15	Total Nays: 0	I		

CS/HB 619 Amendments

Amendment 381171

X Withdrawn

Appearances:

Poole, David (Lobbyist) - Opponent AIDS HealthCare Foundation Director Legislative Affairs 1825 Country Club Dr Tallahassee FL 32301 Phone: (850) 766-3323

Harris, Shevaun - Information Only Agency for Health Care Administration Assistant Deputy Secretary 2727 Mahan Dr Tallahassee FL Phone: (850) 412-3612

Committee/Subcommittee: Health & Human Bi					Bill Nur	nber:	-1.	5/1	· .		
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Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 749 : Adoption Benefits

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez	Х				
Lori Berman	Х				
Jason Brodeur	X				
Bobby DuBose	Х			÷	
Michael Grant	Х	· · · · ·			
Roy Hardemon			Х		
Gayle Harrell			Х		
MaryLynn Magar	X				
Ralph Massullo, MD	х				
Alexandra Miller	x				
Cary Pigman	X		· · ·		
Paul Renner			Х		- <u>^</u>
David Santiago			X		
David Silvers	Х				
Frank White	Х				
Patricia Williams	Х				
W. Travis Cummings (Chair)	Х				
	Total Yeas: 14	Total Nays:	0		

Appearances:

Calmet, Lauren (Lobbyist) - Waive In Support Florida Coalition for Children Director of Community Affairs 411 E College Ave Tallahassee FL 32301 Phone: (954) 425-2621

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

Comm		bcommittee: Hea Ser	vices		Bill Nu	mber:	s/HE	94	9	
	Μ	eeting Date: 5 Place: 14 Time: 9	130/M while Hall	D	ate Reco ate Repo Su		1	I	- The part	
	Favorab Favorab	bcommittee Action le le w/ a le w/Committee/S	n: mendments	ubstitute		Reta Reco Tem	ined for onsidered	Reconsid	leration	
	Vote Bill	MEMBERS								
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i		Cummings, Chair	•							
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 763 : Access to Health Care Practitioner Services

X Favorable

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

Committee/Subcommittee:	Health & Human	Bill Numl	ber:
	Services		C3/HB 163
Meeting Date:	3/30/19	Date Receiv	ved: /
Place:	Monda Halp	Date Report	ted: <u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>
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		Lane	Practicitionen Service-
Committee/Subcommittee A	Action:		
Favorable			Retained for Reconsideration
Favorable w/	amendments		Reconsidered
Favorable w/Commit	tee/Subcommittee Sub	stitute 🗌	Temporarily Postponed
Other Action:			Unfavorable
Final Vote			

On	Bill	MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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	/	Williams								
		Cummings, Chair								
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Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/CS/HB 785 : Stroke Centers

X Favorable With Committee Substitute

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

CS/CS/HB 785 Amendments

Amendment 723695

X Adopted Without Objection

Appearances:

Curva, Felicidad (Lobbyist) - Waive In Support Budd Bell Clearinghouse on Human Services Coordinator Curva & Associates LLC 1212 Piedmont Dr Tallahassee FL 32312 Phone: (850) 508-2256

Landreth, Mark (Lobbyist) - Waive In Support American Heart Association Sr Director of Government Relations 2851 Remington Green Circle Ste. C Tallahassee FL 32308 Phone: (850) 544-3376

Comm	ittee/Su	bcommittee: Health Service		CU/CU/HB MBD					5	
	Μ	Time: $\frac{3}{30}$		Date Received: Date Reported: Subject: Stroka Cent				tere		
Committee/Subcommittee Action: Favorable Favorable w/ amendments Favorable w/Committee/Subcommittee Su Other Action: Final Vote On Bill			ıbstitute	è	Reco Tem	ined for onsidered porarily worable	L ····			
		MEMBERS	N236	195						
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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		Silvers								
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6		Williams								
	4	Cummings, Chair								
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
16	Ű									

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

CS/HB 807 : Marketing Practices for Substance Abuse Services

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez			Х		
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X		····		
Roy Hardemon	X				
Gayle Harrell			X		
MaryLynn Magar	Х				
Ralph Massullo, MD	X				
Alexandra Miller	Х				
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)		

CS/HB 807 Amendments

Amendment 294449

X Adopted Without Objection

Appearances:

Johnson, Alan (Lobbyist) - Waive In Support State Attorney's Office 15th Circuit Chief Assistant State Attorney 401 N Dixie Hwy West Palm Beach FL 33401 Phone: (561) 355-7265

Gran, Jill (Lobbyist) - Waive In Support Florida Behavioral Health Association Policy Director 2868 Mahan Dr Tallahassee FL 32308 Phone: (850) 878-2196

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 807 : Marketing Practices for Substance Abuse Services (continued)

Appearances: (continued)

McGarry, Neal (Lobbyist) - Proponent Florida Certification Board CEO 1715 S Gadsden St Tallahassee FL 32301 Phone: (850) 222-6314

Pinsky, Richard (Lobbyist) - Waive In Support City of Lake Worth 106 E College Ave Tallahassee FL 32301 Phone: (850) 224-9634

Comm		bcommittee: Health Services Secting Date: 3/30	D	Bill Nu	\subseteq	.s/HB	807			
		Place: Mov Time: 9:00	Le I-Tal	1.0	ate Repo	orted: bjęct:	arkati		tice.	2
	Committee/Subcommittee Action: Deriver Favorable Retained for Reconsideration Pavorable w/ amendments Favorable w/Committee/Subcommittee Substitute Reconsidered Other Action: Unfavorable Final Vote 294449 On Bill MEMBERS									
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└ <u>─</u>		Cummings, Chair								
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Yeas 16	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) HB 863 : Hospice Services

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez	X				
Lori Berman	Х				
Jason Brodeur	X				
Bobby DuBose	•		Х	· · ·	· · · · · · · · · · · · · · · · · · ·
Michael Grant	X				
Roy Hardemon			Х		
Gayle Harrell			Х		
MaryLynn Magar	Х				
Ralph Massullo, MD	Х				
Alexandra Miller	X				
Cary Pigman	Х				
Paul Renner	X				
David Santiago	Х				
David Silvers	Х				
Frank White	Х				<u> </u>
Patricia Williams	Х				
W. Travis Cummings (Chair)	X				
	Total Yeas: 15	Total Nays: 0			

HB 863 Amendments

Amendment 284989

X Adopted Without Objection

Appearances:

Sadowsky, Alan (General Public) - Waive In Support Morse Life Health System Sr Vice President 9847 Fred Gladstone Dr West Palm Beach Fl 33417 Phone: (561) 687-5745

Merritt, Tracy - Waive In Support Morse Life Senior Consultant 307 W Park Ave Tallahassee FL 32301 Phone: (850) 681-8705

Subscription Subscription Services Meeting Date: 3/30/14 Place: Meeting Date: 3/30/14 Place: Meeting Date: 3/30/14 Place: Meeting Date: 3/30/14 Place: Meeting Date: 3/30/14 Date Received: Date Received: Date Reported: Subject: Subject: Hardenon Favorable w/ amendments Reconsidered Temporarily Postponed Unfavorable Unfavorable Final Vote Weas Nay Yeas Yea Nays Yea Nays Yea Nays Yeas Na	Comm	ittee/Su	bcommittee: Health		n Bill Number: 10.97						
Committee/Subcommittee Action: Favorable amendments Retained for Reconsideration Favorable w/amendments Reconsidered Favorable w/Committee/Subcommittee Substitute Unfavorable Other Action: Unfavorable Final Vote On Bill MEMBERS 28499 Yea Nay Yeas Nays Yeas Nays Yeas Nays Yeas Nays Altman Baez Berman							. 、上	10 86			
Committee/Subcommittee Action: Favorable amendments Retained for Reconsideration Favorable w/amendments Reconsidered Favorable w/Committee/Subcommittee Substitute Unfavorable Other Action: Unfavorable Final Vote On Bill MEMBERS 28499 Yea Nay Yeas Nays Yeas Nays Yeas Nays Yeas Nays Altman Baez Berman		Μ	eeting Date: $3/30$	11 20	D	Date Rec	eived:				
Committee/Subcommittee Action: Favorable amendments Retained for Reconsideration Favorable w/amendments Reconsidered Favorable w/Committee/Subcommittee Substitute Unfavorable Other Action: Unfavorable Final Vote On Bill MEMBERS 28499 Yea Nay Yeas Nays Yeas Nays Yeas Nays Yeas Nays Altman Baez Berman			Place: More	a Hall	_ D	ate Repo	orted:		tool	<u>C.(</u> 0	
Eavorable Retained for Reconsideration Favorable w/amendments Reconsidered Favorable w/Committee/Subcommittee Substitute Temporarily Postponed Other Action: Unfavorable Final Vote Veas On Bill MEMBERS Yea Nay Yea Nay Yea Nay Yea Nays Yea			1 me: <u>1.00</u>	FIN		Su		ope		$\underline{n}(\underline{a})$	
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Cummings, Chair			Cummings, Chair								
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Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

CS/HB 899 : Comprehensive Transitional Education Programs

X Favorable

	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	Х				
Paul Renner	Х				
David Santiago	X				
David Silvers			Х		
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
	Total Yeas: 15	Total Nays: ()		

Appearances:

Brown, Robert (Lobbyist) - Waive In Support Agency for Person With Disabilities Legislative Affairs Director 4030 Esplanade Way Tallahassee Fl 32399 Phone: (850) 414-5853

	M uittee/Su Favorab Favorab Favorab Other A	le w/ amen le w/Committee/Subco	dments	<u> </u>		eived: orted: bject: The re- Reta Reco Tem	ined for onsidered	899 herest cotion Reconsid Postpon	leration	ens
	l Vote	MEMDEDC								
<u> </u>	Bill Nay	MEMBERS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Novo
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		White								
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		Cummings, Chair								
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Yeas 15	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

CS/HB 969 : Pregnancy Support and Wellness Services

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez		Х			
Lori Berman		Х			
Jason Brodeur	X				
Bobby DuBose		Х			
Michael Grant	X				
Roy Hardemon			х		
Gayle Harrell			x		
MaryLynn Magar	X				
Ralph Massulio, MD	X				
Alexandra Miller	Х				
Cary Pigman	Х				
Paul Renner	Х				
David Santiago	X				
David Silvers		Х			
Frank White	Х				
Patricia Williams		Х			
W. Travis Cummings (Chair)	X	· · · · · · · · · · · · · · · · · · ·			
	Total Yeas: 11	Total Nays: 5	5		

CS/HB 969 Amendments

Amendment 610047

X Adopted Without Objection

Appearances:

Callahan, Susan (General Public) - Opponent Health Freedom Florida 3620 Shinnecock Lane Green Cove Springs Florida 32043 Phone: (904) 504-1334

Brown, Afton (General Public) - Opponent Health Fredom Florida 136 SE Saint Johns St Lake City Fl 32025 Phone: (386) 365-7549

Fenn, James (General Public) - Opponent Health Freedom Florida 8019 Blue Smoke Road Tallahassee FL 32312 Phone: (850) 524-7701

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 969 : Pregnancy Support and Wellness Services (continued)

Appearances: (continued)

DeVane, Barbara (Lobbyist) - Waive In Opposition Florida National Organization for Women, Inc 625 E Brevard St Tallahassee FL 32308 Phone: (850) 251-4280

Kelly, Amber (Lobbyist) - Proponent Florida Family Action Director of Policy & Communications 4853 S Orange Avenue Orlando FL 32806 Phone: (407) 418-0250

Delgado, Ingrid (Lobbyist) - Waive In Support Florida Conference of Catholic Bishop Associate for Social Concerns & Respect Life 201 W Park Ave Tallahassee FL 32301 Phone: (850) 222-3803

Whiting, Catherine (General Public) - Waive In Opposition 1233 N Bronough St Tallahassee FL 32301 Phone: (352) 575-4507

Clark, Justin (General Public) - Waive In Opposition 7600 Omni Lane Ft Myers FL 33905 Phone: (813) 389-5427

Paquette, Tamara (General Public) - Waive In Opposition 85 27th St NW Naples FL 34120 Phone: (239) 601-4200

Schmus, Jaye (General Public) - Waive In Opposition 3203 Westgate Court Tallahassee FL 32304 Phone: (850) 264-9300

Schell, Veronica (General Public) - Waive In Opposition 21601 Bellhaven Way Estero Fl 33928 Phone: (239) 272-6457

Wesolowski, Missy (Lobbyist) - Waive In Opposition Fl Alliance of Planned Parenthood Affilates Director of Public Policy & Organizing 2121 West Pensacola St Tallahassee FL 32304 Phone: (561) 472-9942

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) CS/HB 969 : Pregnancy Support and Wellness Services (continued)

Appearances: (continued)

Carreto-Sanchez, Ana (General Public) - Waive In Opposition Planned Parenthood Volunteer 11350 Linda Loma Dr Ft Myers FL 33908 Phone: (239) 634-0365

Filkowski, Annie Joe (General Public) - Opponent 13561 Brown Bear Run Estero FL 33928 Phone: (239) 849-2644

Fraize, Kasey (General Public) - Waive In Opposition 13247 Golf Ridge Place Hudson FL 34669 Phone: (727) 247-2775

Diaz, Kimberly (General Public) - Waive In Opposition

Zang, Andrea Nadine (General Public) - Waive In Opposition 318-A Stadium Dr Tallahassee FI 32304

Davis, Andrew (General Public) - Waive In Opposition 3275 Twilight Lane #5802 Naples FL 34109 Phone: (201) 906-1736

Benjamin, Samantha (General Public) - Waive In Opposition 1233 N. Bronough St.Tallahassee FL 32302Phone: (561) 406-3032

Valero, Maria (Lobbyist) - Waive In Opposition Florida Latina Advocacy Network State Policy Director 8235 NE 2nd Ave. Miami FL 33138 Phone: (786) 442-8199

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

Comm		bcommittee: Health Service: eeting Date: 3/30	s V/1) A		Bill Nur	eived:		3 969		
		Place: $M \otimes M$ Time: 4 ; ∞	Le Hol	<u>т</u> D —	ate Repo Su	bject:Pr Nelln	egrer ed t	ren Di sertra	T AN	†
	Favorab Favorab	le w/ amen le w/Committee/Subce			Reta Reco Tem	ined for nsidered	Reconsid	leration		
Final On	Vote	MEMBERS	6100					<u>- 18</u>		
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1		Cummings, Chair								
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB)

HB 1253 : Rights and Responsibilities of Patients

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	Х				
Daisy Baez	X	·			
Lori Berman	Х		E: 1121E		
Jason Brodeur	Х				
Bobby DuBose	Х				
Michael Grant	X				
Roy Hardemon			Х		
Gayle Harrell			Х		
MaryLynn Magar	Х				
Ralph Massullo, MD	Х				
Alexandra Miller	Х				
Cary Pigman	X				
Paul Renner			Х		
David Santiago			Х		
David Silvers	Х				
Frank White	Х				
Patricia Williams	Х	<u> </u>			· · · · · · · · · · · · · · · · · · ·
W. Travis Cummings (Chair)	X				
	Total Yeas: 14	Total Nays: ()		

HB 1253 Amendments

Amendment 293713

X Adopted Without Objection

Appearances:

Henderson, Cynthia (Lobbyist) - Waive In Support Crowne Consulting Group, Inc 108 E Jefferson St Tallahassee FL 32301 Phone: (850) 559-0855

LaPolt, Alisa (Lobbyist) - Waive In Support Florida Nurses Association Lobbyist Po Box 1344 Tallahassee FL 32302 Phone: (850) 443-1319

Committee/Subcommittee: Health & Human Bill Number: HB1253 Meeting Date: 3/30/10 Date Received: HB1253 Place: Motive Hall Date Reported: Subject: HB1253 Time: 1:00 Alm Subject: HB1253 Committee/Subcommittee Action: Subject: HB1253 Favorable amendments Retained for Reconsideration Favorable w/ amendments Reconsidered Favorable w/ amendments Temporarily Postponed Other Action: Unfavorable Unfavorable						to			
Final Vot		Turn	17						
On Bill	MEMBERS	2930	13						
Yea Na	*	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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	Cummings, Chair					<u> </u>			
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14 0									

Health & Human Services Committee

3/30/2017 9:00AM

Location: Morris Hall (17 HOB) HB 6021 : Home Health Agency Licensure

X Favorable

	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			Х		
MaryLynn Magar	X				
Ralph Massullo, MD			Х		
Alexandra Miller			X		
Cary Pigman	x				
Paul Renner	Х				
David Santiago	Х				
David Silvers	X				
Frank White	X		<u> </u>		
Patricia Williams	X			_	
W. Travis Cummings (Chair)	X		·····		
	Total Yeas: 14	Total Nays: ()		

Appearances:

Simon, Kyle (Lobbyist) - Waive In Support Home Care Association of Florida Director of Government Affairs 2238 Capital Circle NE Tallahassee FL 32308 Phone: (850) 222-8967

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Committee/Subcommittee:	Health & Human Services	Bill Number: HB 6021
Meeting Date: 7 Place: 1	3/30/11 Morris Hall	Date Received:
Time:	gioonm	Subject: Flore Health
Committee/Subcommittee A	ction:	Retained for Reconsideration
Favorable w/ Favorable w/Committ	amendments ee/Subcommittee Subst	
Other Action: Final Vote		Unfavorable

Bill Nay	MEMBERS								
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Tay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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	Cummings, Chair								
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Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.

Bill Amendment Bill/PCS/PCB Number: 23				
Amendment Number:				
Name: Karen Woodall				
Representing: FI Center for Fixal & Economic Policy				
Title: <u>Exec. Director</u>				
Address: 579 E. Call St.				
City: Tallahmen State/Zip: F1 3230/				
Phone Number: <u>850-321-9386</u> Meeting Date: <u>93/30/17</u>				
Committee/Subcommittee: <u>HHS</u>				
Presentation/Workshop Topic: Public RSS13 taken				
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				



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

Bill/PCS/PCB Number:
Amendment Number:
Malloop Markin
Name: <u>COLLEENT AUGUN</u>
Representing: DR. Childrens Campaign
Title:
Address: 401 S. Magnolica DR.
City: <u>Citle City</u> State/Zip: <u>K</u>
Phone Number: 857435-2600 Meeting Date:
Llogodd orld on and and
Committee/Subcommittee:
Presentation/Workshop Topic: PUBLIC AGSISTANCE
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



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

	Bill Amendment Bill/PCS/PCB Number: 23
	Amendment Number:
Name: Arthur Rosenber	<u> </u>
Representing: FLORIDA LEGAL	SERVICES
Title: Attorney	
Address: 3000 BISCOUNE BL	VD, #106
city: Miami,	
Phone Number: 850-509-2085	
Committee/Subcommittee: <u>Health + Hu</u>	manServices
Presentation/Workshop Topic:	
Registered Lobbyist: YES	
State Employee: YES	NO U
I wish to speak	
Appearing in response to an inquiry for information	n 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	ty
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

Opponent

Proponent

info only

Amendment:



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

	Bill Amendment
	Bill/PCS/PCB Number:
	Amendment Number:
Name: Joe Atte Hart	
Representing: Floride Dental A	ssociation
Title: Director of Govern	mental Alteris
Address: 118 E. Jelferson St.	· · · · · · · · · · · · · · · · · · ·
City: Jall	State/Zip: FZ 3230/
Phone Number: $(\mathcal{B}\mathcal{P})$ $\mathcal{D}\mathcal{P}$ $\mathcal{D}\mathcal{P}$	Meeting Date: 3/30/17
Committee/Subcommittee:	Human Services
Presentation/Workshop Topic:	a Cupaired Practitiones
Registered Lobbyist: YES	· /
State Employee: YES	
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 X	Opponent	Info only
Amendment:	Proponent	Opponent	Info only



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

	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
Name: <u>Pr. Martha Brown</u> Representing: Professionals Resou	Alating (PRAL)
Title: PRN Associate Medical	
Address: <u>P.O. Box</u> 16510	· · · · · · · · · · · · · · · · · · ·
city: Fernandina Beach	State/Zip: F1 32035
Phone Number: <u>904 - 277 - 8004</u>	Meeting Date: 3-30-17
Committee/Subcommittee: Heilth am	il Human Services
Presentation/Workshop Topic:	Practitioner
Registered Lobbyist: YES	
State Employee: YES	

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-	5	

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



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

		Bill Bill/PCS/PCB Num	Amendment Amendment
		Amendment Num	nber: <u>330523</u>
Name: Kath	y whitaker		
Representing: (I	DN) Interventi	on Project	for Nurses
Title: Direc	tor of Clinical Se	nices	
Address: <u>P.D.</u>	Boy 49130		
City: JAUCSC	nville Beach	State/Zip	Florida 32240
Phone Number:	904-270-1620	Meeting	Date: 3/30/17
Committee/Subcor	nmittee: <u>Hewith and</u>	Human Se	evvices
Presentation/Work	shop Topic:MPAirea	! Practitu	ner
	Registered Lobbyist: YES		
	State Employee: YES		
I wish to speak	sponse to an inquiry for information	made by member, con	amittee or staff
	sponse to subpoena	made by member, con	
	e written request of the chair		
	d officer appearing in official capacity	/	
	rance 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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Please fill out the <u>entire</u> form and submit <u>both</u> copies to the Committee Administrative Assistant at the meeting.

Bill Amendment Bill/PCS/PCB Number: Amendment Number:
Name: Stephen Winn
Representing: Florida Osteopathic Medical Association
Title: <u>Executive</u> Director
Address: 2544 Blairstone Pines Dr
City: Tallahassee State/Zip: FL 32301
Phone Number: <u>878-7364</u> Meeting Date:
Committee/Subcommittee: <u>Health and</u> 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

Opponent [

Info only

Proponent

Amendment:



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

		Bill Amendment
		Bill/PCS/PCB Number: 229
		Amendment Number:
Name		
Repre	senting: Florida Fire Chiefs	Association
Title	e:	
Add	tress: P.U. Bux 10448	
City	: Tallabassee	State/Zip:
Pho	one Number: 850 - 894 660!	Meeting Date:3/30/17
Con	nmittee/Subcommittee:	
	sentation/Workshop Topic: Imphrci	Herth Care Practitionen
	Registered Lobbyist: YES	
	Z State Employee: YES	
	Lwich to speak	
R	I wish to speak Appearing in response to an inquiry for information	made by member, committee, or staff
	Appearing in response to subpoena	made by member, committee, or start
	Appearing at the written request of the chair	
	Judge or elected officer appearing in official capacit	
	Lobbyist Appearance form submitted online	Y
L		
(If you a	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

Opponent

Info only

Amendment:

Proponent



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

	Bill Amendment Bill/PCS/PCB Number:A29 Amendment Number:
Name: A Mary Thomas	
Representing: Florida Mtala	SSOCicition
Title: Assistant General C	ounsel
Address: 1430 Predmont Dr	
City: TCH	State/Zip: <i>FL</i> /32-306
Phone Number: 8507346496	
Committee/Subcommittee:	, , ,
Presentation/Workshop Topic:	
Registered Lobbyist: YES	
State Employee: YES	
 I wish to speak Appearing in response to an inquiry for information 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 p	position as a proponent or opponent on the bill as a whole.)
Bill: Proponent 🗹 Opponent	Info only

Opponent

Info only

Amendment:

Proponent



	Λí				Bill PCS/PCB Number: ndment Number:	
Name:	Ali	sa Lafol	<i>f</i>			
Repres	enting:	FL NW	ses A	-55E	Diciation	
Title	1 -1	` ^				
	ress: PO	BOX 1344				
		hasse			State/Zip:	FL
Pho	ne Number:	350-443-	1319	<u> </u>	Meeting Date:_	3/30/17
		mittee:f	1:115			
		nop Topic:		(Pro	actitiones	5
			obbyist: YES		NO 🗌	
		State Emplo	yee: YES		NO 🕅	
	Appearing in resp Appearing at the Judge or elected of	onse to an inquiry fo onse to subpoena written request of th officer appearing in o nce form submitted	ne chair official capacit	·	member, committee	e, or staff
(If you a	ire testifying on an a	mendment, please als	o indicate your	position as	s a proponent or oppor	nent on the bill as a whole.)
	Bill:	Proponent 📈	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



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

	Bill Amendment Bill/PCS/PCB Number: C.S.N.B.Le) 9
	Amendment Number:
Name: David Puble	
Representing: <u>ADS Wealthave</u>	Foundation
Title: Dir Legislative	Affans
Address: 1825 COUNTRY Clu	b Dr.
city: Tallabasse	
Phone Number: 850-766-332	
Committee/Subcommittee: Health &	Human Services
Presentation/Workshop Topic: Medicai	d Consolidation
Registered Lobbyist: YES	
State Employee: YES	

-	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

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

Bill Amendment				
Bill/PCS/PCB Number:				
Amendment Number:				
Name: Shevaun Harris				
Representing: Aquicy for Health Care Antimi stration				
Title: HSSISTEUT DODN Secretary				
Address: 2727 Mahan Drive				
City: <u>Allahassel</u> State/Zip: <u>F</u>				
Phone Number: <u>850-74412-3412</u> Meeting Date: <u>03/30/17</u>				
Committee/Subcommittee: Herutter Human ServiceSADIOPS.				
Presentation/Workshop Topic: <u>+\BU19</u>				
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				

Opponent

Info only

Proponent



	Greg					:
			с			
Repre	senting: <u>XU</u>	ing Amil	(05			
Add	Iress: <u>9/1/1/</u>	o Sunvise	PRE			
					State/Zip: /=	7. 33773
	\mathcal{O}				Meeting Date	: 3/30/17
		nittee:				
rie:		nop Topic:		<u></u>		
		Registered L	obbyist: YES		NO X	
		State Employ	yee: YES		NO 🔀	
571						
Щ Ц	I wish to speak		· •			
		onse to an inquiry fo onse to subpoena	or information	made by	member, commit	tee, or staff
		written request of th	e chair	,		
		•		v		
	Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online					
(If you a	are testifying on an a	mendment, please also	o indicate your	position as	a proponent or op	ponent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only 🔀	
	Amendment:	Proponent	Opponent		Info only	





	$\frac{1}{100}$ Bill Amendment Bill/PCS/PCB Number: $\frac{1}{100}$ $\frac{1}{100}$ $\frac{1}{100}$ $\frac{1}{100}$
Name: LAWEN Calmer	Amendment Number:
Representing: $Flong a$ Coal Title: $Flong a$ Coal Address: $4/1 F$ Callegu City: TLH Phone Number: 954425262 Committee/Subcommittee: HHS Presentation/Workshop Topic: HB Registered Lobbyist: YES	749
State Employee: YES Yes	ý
Bill: Proponent Opponent Amendment: Proponent Opponent	Info only



	Bill Amendment
	Bill/PCS/PCB Number: <u>785</u>
	Amendment Number:
Name: Fely Curve, Ph.D	
Representing: Budd Bell Clearing	house on Human Services
Title: Coordinator	· · · · · · · · · · · · · · · · · · ·
Address: 1212 Piedmont Dr.	
city: Tallahassee	State/Zip: 32312
Phone Number: (850) 508-2256	Meeting Date: 3/30/17
Committee/Subcommittee: //ea/th { //	uman Services Committee
Presentation/Workshop Topic: <u>Stroke</u>	Centers
Registered Lobbyist: YES	
State Employee: YES	
 I wish to speak WAIVE IN SUPPE Appearing in response to an inquiry for information 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 	made by member, committee, or staff
(If you are testifying on an amendment, please also indicate your p	
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



	Please fill out the <u>entire</u> form and subn Assistant at the meeting.	nit <u>both</u> copies to the Committee Administrative
CORIDA		Y
		Bill Amendment
		Bill/PCS/PCB Number: 785
		Amendment Number: 723695
Name:	Mark Landreth	
	B: Annican Heart	Association
Title:	Sr. D.V. GOVFR	lation
Address: _	2851 Runington	Gren Cir. Ste C
City:	1	State/Zip: 3230 8
Phone Nu	mber: 850.544,3376	Meeting Date: 3/30/17
Committe	e/Subcommittee: 1+culth + 1	Human Services
Presentati	ion/Workshop Topic:Struku	
	Registered Lobbyist: YES	Y NO
	State Employee: YES	NO P
Appea	i to s peak Waine in Support m aring in response to an inquiry for information aring in response to subpoena	made by member, committee, or staff
Appea	aring at the written request of the chair	
Judge	or elected officer appearing in official capacit	y
Lobby	vist Appearance form submitted online	
(If you are testi	ifying on an amendment, please also indicate your	position as a proponent or opponent on the bill as a whole.)
Bill:	Proponent Opponent	Info only



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

Bill Amendment Bill/PCS/PCB Number: <u>HB807</u> Amendment Number:					
Name: Alan Johnson					
Representing: Office of State Attome 15th Circu,					
Title: Chief Assistant State Altorny					
Address: YOI N. DIXIE HW					
City: Corest Palm Beach State/Zip: F2 33401					
Phone Number: 561 355 72.65 Meeting Date: 03/30/2017					
Committee/Subcommittee: <u>HHS</u>					
Presentation/Workshop Topic:					
Registered Lobbyist: YES NO					
State Employee: YES					
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



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

Bill Amendment Bill/PCS/PCB Number: Amendment Number:
Name: JIII Gran
Representing:FIORIda Betravioral Health Association
Title: PULICY Director
Address: OBLEB Mahan Dr
City: Talkuhassee State/Zip: FE 32308
Phone Number: <u>850-878-2196</u> Meeting Date <u>x</u> 30 March 2017
committee/Subcommittee: Hath + Human Services Committee
Presentation/Workshop Topic: Marketing Practices for Substance House SULS
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

Bill:

Amendment:

Opponent [Proponent

Opponent

Info only

H-116 (Revised 1-4-2016)



	Bill Amendment Bill/PCS/PCB Number: <u>HB 807</u> Amendment Number:			
Name: Neal McGarry Representing: Florida Certification Board Title: CEO Address: 1715 South Gadsden Street City: Jalluhassed State/Zip: FC 32301				
Phone Number: $850 - 222 - 6314$ <u>Committee</u> /Subcommittee: <u>HHS</u> Presentation/Workshop Topic: Registered Lobbyist: YES				
State Employee: YES	n made by member, committee, or staff			
(If you are testifying on an amendment, please also indicate your Bill: Proponent Opponent Amendment: Proponent Opponent	Info only			





Bill Amendment Bill/PCS/PCB Number:				
Name: Richard Pinsky	- 			
Representing: <u>City</u> of Lake Worth				
Address: 106 12 Collye Avc. #1200	_			
City: Tallaharre State/Zip:	-			
Phone Number: Meeting Date:	_			
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 whol	e.)			
Bill: Proponent Opponent Info only				
Amendment: Proponent Opponent Info only				



	Bill Amendment Bill/PCS/PCB Number: <u>NB 863</u> Amendment Number:			
Name: Alan Sadowsky	·			
Representing: Marselife Islatthe Sys	:tem			
Title: Sr. Vice President.				
Address: 9847 Front Gladstone 1	1 ₅			
city: Upst Palm head FT	State/Zip: 33417			
Phone Number: <u>56/ 687 5745</u>	Meeting Date:3/ <i>50/17</i>			
Committee/Subcommittee:/_/_/	· /			
Presentation/Workshop Topic: <u>NB 863</u>	· · · · · · · · · · · · · · · · · · · ·			
Registered Lobbyist: Y				
State Employee: YE				
I wish to speak	on made hy member, committee, or staff			
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 capac	Judge or elected officer appearing in official capacity			
Lobbyist Appearance form submitted online				
(If you are testifying on an amendment, please also indicate you	ur position as a proponent or opponent on the bill as a whole.)			
Bill: Proponent Dpponen	t Info only			
Amendment: Proponent Opponen	t 🗍 Info only 🗍			



].		Amendment er: <u>478 863</u> er:
Name:	Trac	5 Mprrit	- The	GNV	m Arous	Inc.
		irsel; Ge				
Title	: Sinior	- Consalt	int			
Add	ress: 307	W. Park	Are S	4.2	-1)	
	: Tallaha					FL 32301
		350-681-8				te: <u>3/30/17</u>
		mittee: <u> </u>				
		hop Topic:				
110.						
			obbyist: YES			
		State Employ	yee: YES		NO	
	Appearing in resp Appearing at the Judge or elected	oonse to an inquiry fo oonse to subpoena written request of th officer appearing in o	ne chair official capacit		y member, comm	ittee, or staff
	Lobbyist Appeara	nce form submitted	online			
(If you a	ire testifying on an a	mendment, please als	o indicate your	position	as a proponent or o	pponent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only]
	Amendment:	Proponent	Opponent		Info only]



	Bill Amendment Bill/PCS/PCB Number: 899 Amendment Number:
Name: <u>Fobert Brown</u> Representing: <u>Agency for Person</u> Title: <u>Legislative Affairs [</u> Address: <u>4030 Esplanate War</u> City: <u>Tallahossee</u>	State/Zip:
Phone Number 9944 - 5853 Committee/Subcommittee: <u>House HHS</u> Presentation/Workshop Topic: Registered Lobbyist: YE State Employee: YE	
 I wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capace Lobbyist Appearance form submitted online 	
(If you are testifying on an amendment, please also indicate you Bill: Proponent Opponen Amendment: Proponent Opponen	t



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

Bill Amendment

Bill Number: CS/HB 969 : Pregnancy Support and Wellness Services

PCB/PCS/Amendment #: N/A

Name: Callahan, Susan

Representing:Health Freedom FloridaTitle:Address:3620 Shinnecock LaneCity:Green Cove SpringsState/Zip:Florida 32043Phone Number:904-504-1334Meeting Date:Mar 30 2017 9:00AMCommittee/Subcommittee:Health & Human Services CommitteePresentation/Workshop Topic:N/A

Registered Lobbyist	Bill
State Employee	Opponent
I Wish To Speak	Amendment
Appearing in response to subpoena	N/A

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



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

Bill Amendment

Bill Number: CS/HB 969 : Pregnancy Support and Wellness Services

PCB/PCS/Amendment #: N/A

Name: Brown, Afton

Representing:	Health Freedom	n Florida	
Title:		· · · · · · · · · · · · · · · · · · ·	
Address:	136 SE Saint Jo	hns St.	
City:	Lake City	State/Zip:	FL 32025
Phone Number:	386-365-7549	Meeting Date:	Mar 30 2017 9:00AM
Committee/Subcommittee: Health & Human Services Committee			
Presentation/Wo	orkshop Topic:	N/A	

Registered Lobbyist	Bill
State Employee	Opponent
I Wish To Speak	Amendment
Appearing in response to subpoena	N/A

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



47984482





COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill Amendment

Bill Number: 969 : Pregnancy Support and Wellness Services

PCB/PCS/Amendment #: N/A

Name:	James Fenn	•		
Representing:	Health Freedo	m Florida		
Title:		<u></u>	·	
Address:	8019 Blue Smo	ke Road		
City:	Tallahassee		State/Zip:	FL 32312
Phone Number	: 850-524-7701]	Meeting Date:	March 30, 2017 9:00 AM
Committee/Subcommittee:		Health & Human	Services Commit	tee
Presentation/W	orkshop Topic	N/A		

Registered Lobbyist	Bill
State Employee	Opponent
☑ I Wish To Speak	Amendment
Appearing in response to subpoena	N/A

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



Bill Amendment Bill/PCS/PCB Number: 969
Amendment Number:
Name: Barbia Delare
Representing: <u>FC_NOW</u>
Title:
Address: 625 E. Grevard ST
City: Jallahassee State/Zip: <u>F132308</u>
Phone Number: $350-257-9280$ Meeting Date: $3-30-17$
Committee/Subcommittee: Health & Human Senace
Presentation/Workshop Topic: Tregnancy Center
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



			-			
						Amendment ber: <u>969</u>
			l			
Name:	Amber	Kelly				
Repres	enting: <u>Fl_</u>	Family A	ction			
		of Polic	_	mm	unicatio	ons
		S. Orano	· .			
	: Drlando				State/Zip:	FL 32806
Pho	ne Number: _ [/	407) 418-02	150		Meeting D	Date: 3/30/17
Com	nmittee/Subcom	mittee: <u>Health</u>	n & Hur	nan	Service	5
		hop Topic:				
		Registered Lo	obbyist: YES	Г		
		State Employ			NO 🖌	
	Appearing in resp Appearing at the Judge or elected	oonse to an inquiry fo oonse to subpoena written request of th officer appearing in c nce form submitted	e chair fficial capacity		/ member, com	mittee, or staff
(If you a	re testifying on an a	mendment, please also	o indicate your p	position a	s a proponent or	opponent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



	Bill Amendment Bill/PCS/PCB Number: Amendment Number:			
,				
Name: Ingrid Delgadu				
	c of Catholic Bishops			
Representing: <u>Flopide Conferen</u> Title: <u>Associate fix Social</u>	Concens & Respect Life			
Address: 201 W Pask Av				
City: Tallahassee	State/Zip:3236			
Phone Number:	Meeting Date:			
Committee/Subcommittee: <u>HHS</u>				
Presentation/Workshop Topic: <u>Pregnanc</u>	y Support Services			
Registered Lobbyist: YE				
State Employee: YES				
I wish to speak				
Appearing in response to an inquiry for informatio	n 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 capaci	ty			
Lobbyist Appearance form submitted online				
(If you are testifying on an amendment, please also indicate you	r position as a proponent or opponent on the bill as a whole.)			
Bill: Proponent 🔀 Opponent	Info only			
Amendment: Proponent Opponent	Info only			





	Bill Amendment Bill/PCS/PCB Number: 02		
	Amendment Number:		
Name: Catherin, Whiting			
Representing: <u>Start</u>			
Title: The Store Age Store Age Store			
Address: 1233 N Bronnugh S	i ki l		
City: Tallahossee	State/Zip:ろうなる		
Phone Number: 352-575-4537	Meeting Date: 3/30/17		
Committee/Subcommittee: Health and H	Uman Services		
Presentation/Workshop Topic:	·		
Registered Lobbyist: YE	s NO 🕅		
State Employee: YE			
 I wish to speak Appearing in response to an inquiry for informatio Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capac 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		



900

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

	Bill Amendment Bill/PCS/PCB Number: <u>69</u>
	Amendment Number:
Name: Justin Clark	
Representing: MXSeff	
Title: <u>Self</u>	
Address: 7600 Omni Lane H30.	\mathcal{A}
City: Fort Myers	
Phone Number: (813)389-5427	Meeting Date: 3/30/2017
Committee/Subcommittee: Healthand Hum	an Services
Presentation/Workshop Topic: HB 969	
Registered Lobbyist: YES	
State Employee: YES	
I wish to speak	
Appearing in response to an inquiry for information	n 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 capacit	γ.
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 <u>entire</u> form and submit <u>both</u> copies to the Committee Administrative Assistant at the meeting.				
			Amendment Number:	
Name:	-IA	MARA AQUETE		
Repres	senting:	Self		
Title	2:			
Add	ress: <u>8</u> =	5 27th St Nh)	
	: NAP			
Pho	ne Number	(239)601-4200) Meeting Date:	
Con	nmittee/Su	bcommittee: Healthe	Meeting Date:	
Pres	sentation/V	Vorkshop Topic:		
		Registered Lobbyist	t: YES NO	
		State Employee:		
	l wish to sp	eak		
	Appearing	in response to an inquiry for inforn	mation made by member, committee, or staff	
	Appearing	in response to subpoena		
	Appearing	at the written request of the chair		
	Judge or el	ected officer appearing in official c	capacity	
	Lobbyist Ar	ppearance form submitted online		
(If you a	are testifying	on an amendment, please also indicate	te your position as a proponent or opponent on the bill as a whole.)	
	Bill:	Proponent Oppo	onent Info only	
	Amendme	nt: Proponent Oppo	onent Info only	



	Bill Amendment CS/PCB Number: <u></u> dment Number:			
Name: June Schmis				
Name: June SchMus Representing: Myself				
Title:				
Address: 3203 Westgate (+				
city: Tallyhassee	State/Zip: FL 32304			
Phone Number: 850 264 9300	Meeting Date: 3.30,17			
Committee/Subcommittee: Health & Human &	_			
Presentation/Workshop Topic:	7			
	vo 🕅			
I wish to speak				
Appearing in response to an inquiry for information made by n	nember, 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	a proponent or opponent on the bill as a whole.)			
Bill: Proponent Opponent 🔀	Info only			
Amendment: Proponent Opponent	Info only			



					Bill A CS/PCB Number: <u>HS</u>	
	Ne.	C				
Name:	VOVDING	a Schull				
Repres	senting: <u>Vav</u>	onica Sch	011/50	1 Ĵ		
Title	2:					
		3 Bellhave	١	1		
City	: Estero				State/Zip: FL	33928
Pho	ne Number: <u>23</u>	9.272.1.4	51		Meeting Date:	
Con	nmittee/Subcom	mittee: 1- Cart	th Hun	naun_	Samiles	
110						
		Registered Lol	obyist: YES		№ 🕅	
		State Employe	ee: YES		NO 🔀	·
	I wish to speak					
	Appearing in resp	onse to an inquiry for	information m	nade by	member, committee, or s	staff
	Appearing in resp	onse to subpoena				
	Appearing at the	written request of the	chair			
Π	Judge or elected	officer appearing in off	ficial capacity			
\Box	Lobbyist Appearance form submitted online					
lifuan	ro toctifuing on on on	mondmont places also	ndicato vour	cition	a proponent or assessed	n tha hill as a whala \
(ii you a	Bill:	·			a proponent or opponent o	in the bill as a whole.)
	Dill.	Proponent	Opponent	, Д	Info only	
	Amendment:	Proponent	Opponent		Info only	



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

Bill Amendment
Bill/PCS/PCB Number: <u> </u>
Amendment Number:
sti
ance of Planned Parenthand Affiliates
Policy & organizing
isacola st. suite B-2
EL 203051

Name: Missy Wesolowski
Representing: Florida Alliance of Planned Parenthood Affiliate
Title: Director of Public Policy & Organizing
Address: 2121 west Pensacola St. Suite B-2
City: Tallahassee State/Zip: FL, 32304
Phone Number: <u>561-472-9942</u> Meeting Date: <u>3/30/17</u>
Committee/Subcommittee: <u>Health & Human Services</u>
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



						ber:9	endment
		A	L				
Name:	Ana	Carreto -;	Danchez	·			
Repres	enting: <u>Ar</u>	la carre	to -Jana	nez			
Title	:Plann.	ed Parent	mood V	olunta	ler	<u></u>	<u>.</u>
Addı	ress: <u>11351</u>	o unda 1	oma p	ſ			
City:	FOCH	Myers			State/Zip:_	FL	339 08
Phor	ne Number:	139-634-03	65		Meeting D	ate: <u>03</u>	130/2017
Com	mittee/Subcomr	nittee: <u>Mta</u>	Ith com.	and	Muma	n scr	villes
Pres	entation/Worksh	10p Topic:		_			
		Registered Lo	obbyist: YES				
		State Employ	vee: YES] NC			
	I wish to speak						
		onse to an inquiry fo	r information m	ade by me	mber, comi	mittee, or sta	ff .
	Appearing in resp		o choir				
		written request of th					
	Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online						
L]	Lopping upped a						
(If you a	re testifying on an ai	mendment, please also	indicate your po	sition as a p	roponent or	opponent on 1	the bill as a whole.)
	Bill:	Proponent	Opponent 🍾	र	Info only		
	Amendment:	Proponent	Opponent	ר	info only		



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

			-				
						Amendment ber:969	
Name	Annie	lar filkow	1		<u></u>		
		yself					
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		$\frac{1}{2}$ (rate P					
							<u> </u>
City	: <u>Esteve</u>		<u> </u>	S [.]	tate/Zip:_	FL /3392	<u>}</u>
Pho	ne Number: <u> </u>	39-849-2644	1	N	1eeting D	Date:	
Con	nmittee/Subcom	mittee: <u>Healt</u>	h and	human	SErv	168	
Pres	sentation/Worksl	hop Topic:		·			
		Registered L	obbyist: YES	NO NO	\square		
		State Employ	yee: YES		D		
.г.	I wish to speak						
		onse to an inquiry fo	r information	made by merr	her com	mittee or staff	
		onse to subpoena		made by men			
		written request of th	e chair				
	Judge or elected	officer appearing in c	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	l Ir	nfo only		
	Amendment:	Proponent	Opponent	l Ir	nfo only		



	Bill Amendment Bill/PCS/PCB Number: <u>969</u> Amendment Number:
Name: Kasey Fraize	
Representing: Self	
Title: <u>Self</u>	· · · · · · · · · · · · · · · · · · ·
Address: 13247 Golf Ridge P	iace
City: Hvoson	State/Zip: FL 34669
Phone Number: 727 - 247 - 2775	Meeting Date: 3 30 17
Committee/Subcommittee: Health & -	toman Services
Presentation/Workshop Topic:	969
Registered Lobbyist: YE	
State Employee: YE	s 🗌 NO 🕅
 I wish to speak Appearing in response to an inquiry for informatio Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capac Lobbyist Appearance form submitted online 	
(If you are testifying on an amendment, please also indicate you	r position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent	t 🗹 Info only 🗌
Amendment: Proponent Opponent	t Info only



	Bill/PCS/PCB Number:
	Amendment Number:
Name: Kimberly	Diaz
Representing: MUSEIF	
Title:	
Address: <u>ttome</u>	Halduzo S
City:	State/Zip:
Phone Number:	Meeting Date:
Committee/Subcommittee:	Health and Hman Services
Presentation/Workshop Topic:	
Regi	stered Lobbyist: YES NO
State	e Employee: YES NO
I wish to speak	
Appearing in response to an i	nquiry for information made by member, committee, or staff
Appearing in response to sub	
Appearing at the written requ	
Judge or elected officer appe	
Lobbyist Appearance form su	bmitted online
(If you are testifying on an amendment, p	please also indicate your position as a proponent or opponent on the bill as a whole.)
Bill: Proponent	Opponent Info only
Amendment: Proponent	Dpponent Info only



	Bill Amendment Bill/PCS/PCB Number: <u>969</u> Amendment Number:
Name: <u>Andrea Nadine Zang</u> Representing: <u>Myself</u> .	
Title: Address: 318-A Stadium Dr	
City: <u>Tallahassee</u> , FL Phone Number: Committee/Subcommittee: <u>Health</u> and Hu	Meeting Date:
Presentation/Workshop Topic: Registered Lobbyist: YES	
 I wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capaci Lobbyist Appearance form submitted online 	
(If you are testifying on an amendment, please also indicate your Bill: Proponent Opponent	Info only □
Amendment: Proponent Opponent	Info only



Bill Amendment Bill/PCS/PCB Number: HB 969 Amendment Number:	
Andres Davis	
epresenting: $S_e(f)$	
Title:	
Address: 3275 Twilight Ln # 5902	
Address: 3275 Twilight Ln # 5902 City: Naples State/Zip: F1 34109	
Phone Number: 201 906 1736 Meeting Date: 30 MAr 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	
	,
f 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	



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

					Bill CS/PCB Number: _ odment Number: _	Amendment 959
Name:	Sarring	the Bergis. 217	adra			<u> </u>
Repres	senting:	=] /-				
Title	2:					······································
Add	ress: <u>123</u>	3 No Bren	neriz h	56	Aport 1	
			f		0	FL, 32303
Pho	ne Number:	64 406 30	3 <u>2</u>		Meeting Date:_	3-30-17
Con	nmittee/Subcom	mittee: <u> </u>	1th and	Alin	m Stallers	
Pres	sentation/Works	hop Topic:	13969			
			obbyist: YES			
		State Emplo	yee: YES			
	Appearing in resp Appearing at the Judge or elected	oonse to an inquiry fo oonse to subpoena written request of th officer appearing in o nce form submitted	ne chair official capacit		member, committe	e, or staff
(If you a	re testifying on an a	mendment, please als	o indicate your	position as	a proponent or oppo	nent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



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

	Bill Amendment Bill/PCS/PCB Number: <u> </u>
	Amendment Number:
Name: MARIA VALERO	
Representing: FURIDA LATINA AD	WCACY NETWORK
Title: STATE Porton DIREO	7-12
Address: 8235 NE 2ND Are	
City: ~.	State/Zip: FL 33138
Phone Number: <u>786 44 2 8199</u>	Meeting Date: 3 3 - 17
Committee/Subcommittee:	Human Suis Committee
Presentation/Workshop Topic:	W Support & Warness Sucs
Registered Lobbyist: YE	
State Employee: YES	
 I wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacit 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

			_			
						Amendment ber:
	$\sim $		L	<u> </u>		
Name:	Free R	und				
Representi	ng: <u>Fa</u>	milies of	Floric	la		
Title:						
Address:	<u>- 4166</u>	Sunrice .	DR.			
City:/	hacro	Fla.				Fl. 33773
					Meeting I	Date: 3/30/17
Committ	tee/Subcomr	nittee:				
Presenta	ation/Worksł	nop Topic:				
		Registered Lo	obbyist: YES	NO	Ŋ	
		State Employ	vee: YES	NO	Y	
🗹 I wis	sh 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	X
Ame	endment:	Proponent	Opponent		Info only	



Please fill out the <u>entire</u> form and submit	t <u>both</u> copies to the Committee Administrative
Assistant at the meeting.	Sign 22
	Bill Amendment
	Bill/PCS/PCB Number:
	Amendment Number: 293712
Name: Cipitlua denderson	
Representing: Crowne Consul	frag
Title:	(
Address: 108 E lefferson	154
City: Tallahassep	
Phone Number: <u>\$50 559 6855</u>	Meeting Date: 330
Committee/Subcommittee:	
Presentation/Workshop Topic: <u>Patten</u>	+ Billy Rights
Registered Lobbyist: YES	
State Employee: YES	
I wish to speak	$11\sqrt{2}$
Appearing in response to an inquiry for information n	nade by member, committee, or staff $WalVeIM$ Suppor-
Appearing in response to subpoena	Support

- 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



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

			_				
				Bill/PCS/F	_ Bill PCB Num	ber:	Amendment ねすろ
		0		Amendm	ent Numi	ber:	
Name	A)	lisa Latel	F	<u> </u>			
Repre	senting:	FL Nurses	s Ass	ociati	87		
-		bbyist					
	Iress: PC) BOX 134	Ч				
	r:TCel	lahasse	<u></u>	S	tate/Zip:	 	37307
		443-1319	N	 N	/leeting [Date:	3/30
		mittee: Pæf		Rights	Ū		
			HHS				
	· · ·	Registered Lo	bbvist: YES				
		State Employ					
		State Employ					
	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	II	nfo only		
	Amendment:	Proponent	Opponent	u	nfo only		

3



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

	Bill Amendment Bill/PCS/PCB Number: Amendment Number:			
Name: KYLE SIMON				
Representing: HOME CARE ASSOCIAT	YOU OF FLORIDA			
Title: DIRECTOR OF GOVERNMENT	AFFAIRS			
Address: 2238 CAPITAL CIRCLE NE				
City: TAUAHASSES	State/Zip: FL 32308			
Phone Number: 850. 222.8967	Meeting Date:			
Committee/Subcommittee:	3			
Presentation/Workshop Topic:				
Registered Lobbyist: YE				
State Employee: YE				
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 you Bill: Proponent Opponent				

Opponent

Proponent

Info only

Amendment: