

Health Innovation Subcommittee

Wednesday, February 22, 2017 3:30 PM - 6:00 PM Mashburn Hall

Action Packet

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

Summary:

Health Innovation Subcommittee

Wednesday February 22, 2017 03:30 pm

HB 95 Favorable With Committee Substitute Amendment 858783 Adopted Without Objection	Yeas: 13	Nays: 0
HB 449 Favorable With Committee Substitute Amendment 686687 Adopted Without Objection	Yeas: 12	Nays: 2
HB 543 Favorable With Committee Substitute Amendment 315165 Adopted Without Objection	Yeas: 11	Nays: 0
HB 589 Favorable	Yeas: 11	Nays: 0
PCB HIS 17-01 Favorable	Yeas: 8	Nays: 5

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

Attendance:

	Present	Absent	Excused
MaryLynn Magar (Chair)	X		
Daisy Baez	X		
John Cortes	X		
Manny Diaz, Jr.			Х
Brad Drake	X		
Nicholas Duran	X		
Roy Hardemon	X		
Shawn Harrison	X		
Patrick Henry	X	-	
Sam Killebrew	X		
Paul Renner	X		
Bob Rommel	X		
Jackie Toledo	X		
Jay Trumbull	X		
Frank White	X		
Totals:	14	0	1

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 95: Consumer Protection from Nonmedical Changes to Prescription Drug Formularies

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Abseпtee Nay
Daisy Baez	X				
John Cortes	X				
Manny Diaz, Jr.			X		
Brad Drake	X				
Nicholas Duran	X				
Roy Hardemon	X				
Shawn Harrison	X		-		
Patrick Henry	X				
Sam Killebrew	X				
Paul Renner	X				
Bob Rommel	X				*
Jackie Toledo	X				
Jay Trumbull			X		
Frank White	X				
MaryLynn Magar (Chair)	X				
	Total Yeas: 13	Total Nays: 0)		

HB 95 Amendments

Amendment 858783

X Adopted Without Objection

Appearances:

Dr. Robert Levin - Proponent Florida Society of Rheumatology M.D.; President 1831 North Belcher Rd. Suite D2 Clearwater FL 33765 Phone: (727) 734-6631

Nuland, Christopher (Lobbyist) - Proponent Florida Gastroenterologic Society 1000 Riverside Ave Ste 240 Jacksonville FL 32204 Phone: (904) 355-1555

Velma Stevens - Proponent Sickle Cell Foundation, Inc. Executive Director 1336 Vickers Rd Tallahassee FL 32303 Phone: (850) 222-2355

Print Date: 2/22/2017 7:33 pm **Leagis ®** Page 3 of 11

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 95 : Consumer Protection from Nonmedical Changes to Prescription Drug Formularies

(continued)

Appearances: (continued)

Bo Tucker, MD - Proponent Florida Chapter, American College of Physicians 1000 Riverside Ave #220 Jacksonville FL 32204 Phone: (904) 355-0800

Twilley, Benjamin (Lobbyist) - Opponent Express Scripts Senior Manager State Government Affaris 2412 Lincoln St Columbia SC 29201

Phone: (803) 394-7001

Rachelle Csapo - Proponent Self Clinical Nurse Educator, RN 1948 Legacy Cove Dr. Maitland FL 32751 Phone: (786) 342-9214

Francoeur, Jeri (General Public) - Proponent Florida Breast Cancer Foundation Board Member 1 Sharon Terrace Ormond Beach FL 32174 Phone: (386) 295-1554

Bevis, Brewster (Lobbyist) - Opponent Associated Industries of Florida 516 N. Adams St. Tallahassee FL 32301 Phone: (850) 224-7173

Chuck Carmen - Proponent
Floridians for Reliable Health Coverage
Exec. Director, Epilepsy Assoc. of Central Florida
109 N Kirkman Rd.
Orlando FL 32811
Phone: (407) 414-9876

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

Print Date: 2/22/2017 7:33 pm **Leagis ®** Page 4 of 11

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 95: Consumer Protection from Nonmedical Changes to Prescription Drug Formularies

(continued)

Appearances: (continued)

Stoddard, Abigail (Lobbyist) - Opponent Prime Therapeutics, LLC Government Affairs Principal 4434 Pillsbury Ave S Minneapolis MN 55419

Phone: (612) 616-1431

Winn, Stephen (Lobbyist) - Waive In Support Florida Osteopathic Medical Association Executive Director 2544 Blairstone Pines Rd Tallahassee FL 32301

Phone: (850) 878-7364

Labasky, Beth (Lobbyist) - Waive In Support Alpha One Foundation 1400 Village Square Blvd Tallahassee FL 32312 Phone: (850) 322-7335

Paul Sanford (Lobbyist) - Opponent Florida Blue and Florida Insurance Council 106 S Monroe St. Tallahassee FL 32301 Phone: (850) 222-7200

Valencia Robinson - Proponent Florida Breast Cancer Foundation Advocate 1628 Piccadilly Dr. Daytona Beach FL 32117 Phone: (386) 405-7997

Ryan, Joy (Lobbyist) - Opponent AHIP - America's Health Insurance Plans 325 W College Ave Tallahassee FL 32301 Phone: (850) 339-8083

Barker, Dorene (Lobbyist) - Proponent AARP Associate State Director 200 W College Ave Tallahassee FL 32301 Phone: (850) 228-6357

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 95: Consumer Protection from Nonmedical Changes to Prescription Drug Formularies

(continued)

Appearances: (continued)

Bell, Douglas (Lobbyist) - Proponent
Epilepsy Association of Central Florida & FL Chapter Pediatricians
101 N Monroe St
Tallahassee FL 32301
Phone: (850) 510-7146

Brown, Audrey (Lobbyist) - Opponent Florida Association of Health Plans, Inc President & CEO 200 W College Ave Tallahassee FL 32301 Phone: (850) 386-2904

Jordan, Matt (Lobbyist) - Proponent American Cancer Society GRD 1922 Dellwood Dr Tallahassee FL 32308 Phone: (850) 519-2801

LaPolt, Alisa (Lobbyist) - Waive In Support NAMI Florida Executive Director Tallahassee FL 32302-13 Phone: (850) 671-4445

Committee meeting was reported out: Wednesday, February 22, 2017 7:32:57PM

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 449: Health Insurance

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez		X			<u> </u>
John Cortes		X			
Manny Diaz, Jr.			X		<u>-</u> .
Brad Drake	X				
Nicholas Duran	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Sam Killebrew	X				
Paul Renner	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull	X				
Frank White	X				
MaryLynn Magar (Chair)	X				
	Total Yeas: 12	Total Nays:	2		

HB 449 Amendments

Amendment 686687

X Adopted Without Objection

Appearances:

Bevis, Brewster (Lobbyist) - Opponent Associated Industries of Florida 516 N. Adams St Tallahassee FL Phone: (850) 224-7173

Marni Jameson Carey (General Public) - Proponent Association of Independent Doctors **Executive Director** 400 N New York Ave Ste 213 Winter Park FL 32789 Phone: (407) 865-4110

Jeol Allumbaugh - Proponent Foundation for Government Accountabilty Senior Fellow 6 E Chestnut St. Augusta ME

Phone: (207) 242-5007

Committee meeting was reported out: Wednesday, February 22, 2017 7:32:57PM

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 449: Health Insurance (continued)

Appearances: (continued)

Zander, Skylar (Lobbyist) - Proponent Americans for Prosperity Deputy State Director 200 W College Ave Tallahassee Fl 32301 Phone: (850) 728-4522

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

Sanford, Paul (Lobbyist) - Opponent Florida Blue and Florida Insurance Council 106 S Monroe St Tallahassee FL Phone: (850) 222-7200

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB) **HB 543 : Regulation of Nursing**

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X	·- · · · · · · · · · · · · · · · · · ·			
John Cortes	X			-	
Manny Diaz, Jr.			X		
Brad Drake			X		
Nicholas Duran	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Sam Killebrew	X				
Paul Renner	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull			X		
Frank White			X		
MaryLynn Magar (Chair)	X				
	Total Yeas: 11	Total Nays: ()		

HB 543 Amendments

Amendment 315165

X Adopted Without Objection

Appearances:

LaPolt, Alisa (Lobbyist) - Waive In Support Florida Nurses Association Tallahassee FL 32302-13 Phone: (850) 443-1319

DeCastro, Martha (Lobbyist) - Proponent Florida Hospital Association VP Nursing & Clinical Care Policy 306 E College Ave Tallahassee FL 32301 Phone: (850) 222-9800

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)

HB 589: Prescription Drug Price Transparency

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez	X				
John Cortes	X				
Manny Diaz, Jr.			X		
Brad Drake			X		
Nicholas Duran	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Sam Killebrew	X				
Paul Renner	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull		-	X		
Frank White			X		
MaryLynn Magar (Chair)	X				
	Total Yeas: 11	Total Nays: 0	l		

Appearances:

Bevis, Brewster (Lobbyist) - Proponent Associated Industries of Florida Po Box 784 Tallahassee FL 32302-07

Phone: (850) 224-7173

Barker, Dorene (Lobbyist) - Proponent AARP

Associate State Director 200 W College Ave Suite 304

Tallahassee FL 32301 Phone: (850) 228-6357

Health Innovation Subcommittee

2/22/2017 3:30:00PM

Location: Mashburn Hall (306 HOB)
PCB HIS 17-01: Medicaid Block Grants

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Daisy Baez		X			•
John Cortes		X			
Manny Diaz, Jr.			Х		
Brad Drake	X				
Nicholas Duran		X			
Roy Hardemon		X			
Shawn Harrison			X	•	
Patrick Henry		X			
Sam Killebrew	X				
Paul Renner	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull	X				
Frank White	X				
MaryLynn Magar (Chair)	X				
	Total Yeas: 8	Total Nays: 5	5		

Appearances:

Congressman Matt Gaetz - Proponent Congressional District #1 FL

Nuzzo, Salvatore (General Public) - Proponent The James Madison Institute 100 N Duval Street Tallahassee Florida 32301 Phone: 8503229941

Daniels, Michael (Lobbyist) - Information Only Florida Alliance for Assistive Services & Technology, Inc Executive Director 3333 W Pensacola St Bldg. 100, Suite 140 Tallahassee FL 32304 Phone: (850) 487-3278

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



HOUSE OF REPRESENTATIVES COMMITTEE/SUBCOMMITTEE ATTENDANCE ROLL CALL

The Committee/Subcommittee on	Health Innovation	
met at 3:30 pm o'clock on	2-22-17	with the following attendance:

<u>Member</u>	<u>Present</u>	Absent*	Excused
Magar, Chair	V		
Baez	✓		
Cortes	1		
Diaz			✓
Drake	✓		
Duran	V		
Hardemon	-		
Harrison	√ V		
Henry	√		
Killebrew	/		
Renner			
Rommel	√		
Toledo	✓		
Trumbull	√		
White	✓		

Chair

^{*}A member must be excused by Chair or Speaker. A member answering roll call is presumed "present" thereafter.

		COMMITTEE/SI	UBCOMMI	ITTÉE I	BILL AC	CTION V	VORKSI	HEET		
Comn	aittee/Sul M	becommittee: Health 2-7 eeting Date: 2-7 Place: 30 Time: 3:3	22-17	\mathbf{D}	ate Reco ate Repo	mber: _ eived: _ orted: _ bject: _				
	Favorab Favorab	le w/ amen le w/Committee/Subco	idments ommittee S	ubstitute		Reco Tem	nsidered	Reconsid I Postpon		
	l Vote Bill	MEMBERS	8587	83						
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nay
1/		Baez						•	-	
$\overline{\ \ }$		Cortes		7						
		Diaz	\ \ \	OCX						
\/		Drake	110							
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		Hardemon	, , ,	V						
\		Harrison		المن						
		Henry		ر ۲۸						
/_		Killebrew	and a				<u></u>			
		Renner	007							
<u> </u>		Rommel								
		Toledo								
		Trumbull								
		White								
		Magar, Chair								

Yeas

Nays

Yeas

Nays

Yeas

13

Nays

TOTALS

Yeas

Nays

Yeas

Nays

Committee/Subcommittee: Health Innovation			Bill Nu	mber: _	tb 4	49				
	M	eeting Date:		D	ate Rec	eived:				
		Place:		D	ate Repo	orted:				
		Time:			Su	bject:				
	Favorab Favorab	bcommittee Action: le le w/ amo le w/Committee/Sub	endments	ubstitute		Reco Tem	nsidered	Reconsid I Postpone		
	Vote Bill	MEMBERS	6866	,87						
Yea	Nay	WIEWIDERS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	1/4/	Baez	1005	11435	1003	11435	1045	11495	1005	114,5
	1	Cortes								
		Diaz		1			<u></u>			
		Drake	->	00						
J		Duran	LAND,							
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1		Harrison	19,	Xo						
1		Henry		0/						
1		Killebrew	00							
<u> </u>		Renner	1-07	1						
<u> </u>		Rommel								
V		Toledo								
./		Trumbull								
V		White							-	
- J		Magar, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

12

2

		COMMITTE	EE/SUBCOMMI	ITTEE I	BILL AC	CTION V	VORKSI	HEET		
Comm	ittee/Sul M	eeting Date:	alth Innovation 22-17 306 HoB 3:30 pm	Г	ate Rec	orted: _		43		
	Favorab Favorab Favorab	le w/a le w/Committee/S	amendments			Reco Tem	nsidered	Reconsid I Postpon		
	Vote Bill	MEMBERS	31514	5						
Yea	Nay	WENTER	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
./		Baez				<u> </u>		.		
		Cortes								
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\checkmark		Hardemon	٠, ٧	1 7/8						
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		Toledo								
		Trumbull								
		White								
√		Magar, Chair								

Nays

Yeas

Yeas

Nays

Yeas

Nays

Yeas

Nays

Yeas

Nays

TOTALS

Comr	nittee/Subcommittee:	Health Innovation	Bill Number:	HB 589
	Meeting Date:	2-22-17	Date Received:	
	Place:	306 Hors	Date Reported:	
	Time:	3:30 PM	Subject:	
Comn	nittee/Subcommittee A	Action:		
\square	Favorable		\square R	etained for Reconsideration
	Favorable w/	amendments		econsidered
	Favorable w/Commit	tee/Subcommittee Substi	tute 🗌 T	emporarily Postponed
	Other Action:		U	nfavorable
			-	
Fina	al Vote			

Final	Vote									
On	Bill	MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
_		Baez								
\checkmark		Cortes								
		Diaz	_							
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1		Rommel								
		Toledo								
		Trumbull								
		White								
		Magar, Chair								
			·							
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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	ocommittee: eeting Date: Place:	Health Innovation 2-22-17 306 HoB	D	Bill Nui ate Rece ate Repo	eived: _	CB 1	HIS I	7-01	
Committee/Sul	Time:	3:30 pm		Su	bject: _		· · · · · · · · · · · · · · · · · · ·		
Favorable Favorable	le le w/ le w/Committ	amendments ee/Subcommittee S	ubstitute		Reco Tem	nsidered	Reconsid I Postpon		
Final Vote On Bill	MEMBI	ERS Vers	Nove	Voss	Nave	Vage	Nave	Vege	

	l Vote Bill	MEMBERS	·							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	\/	Baez								
		Cortes								
		Diaz								
		Drake								
	J	Duran								
	V	Hardemon								
	,	Harrison								
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V.		Toledo								
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-		Magar, Chair								
-										
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
8	5									



	Bill Amendment CB Number: 143 95
Amendme	nt Number:
Name: Dr Robert Levin	
Representing: Florida Society of Rheuma	tology
Title: MD., President FI Society of	Rheumatdagy
Address: 1831 North Beldier R	d Site De Suite De
city: Clewright Sta	ate/Zip: FL 33765
$O_2O_2O_3$	eeting Date: 2 23/17
Committee/Subcommittee: Health Innovation	· · · · · · · · · · · · · · · · · · ·
Presentation/Workshop Topic: Non-medical Swit	
Registered Lobbyist: YES NO	thing & changes to drug formularies
State Employee: YES NO	<u> </u>
I wish to speak	
Appearing in response to an inquiry for information made by memb	per, 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 prop	ponent or opponent on the bill as a whole.)
Bill: Proponent Opponent Inf	o only
Amendment: Proponent Opponent Inf	o only



	Bill Amendment Bill/PCS/PCB Number: 95
	Amendment Number:
Name: Chris Nuland	
Representing: Flori da Gastroenterdo	
Title:	
Address: 1000 Riverside Are #	240
city: Jacksonnille	State/Zip: <u>F1 322</u> C <u>Y</u>
Phone Number: 904-233-3051	Meeting Date: $2/22/17$
Committee/Subcommittee: Health In	
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 capacit	v
Lobbyist Appearance form submitted online	,
(If you are testifying on an amendment, please also indicate your	nosition as a proponent or enpenent on the hill as a whale)
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



	Bill Amendment Bill/PCS/PCB Number: H395
	Billy FCS/FCB Nulliber. T(1)
Velma	Amendment Number:
Name: Yelma Stevens	
Representing: Sickle Cell Founds	tion, Inc.
Title: Executive Directo	
Address: 1336 VICKETS Rd.	
city: Tallahassee	State/Zip: <u>FL 32303</u>
Phone Number: <u>850 - 222 - 23</u>	SS Meeting Date: 2/22
Committee/Subcommittee: House Hezi	n Innovation Subcommittee
Presentation/Workshop Topic: Beat & Su	oitch
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 capacit Lobbyist Appearance form submitted online	y
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



	Bill Amendment Bill/PCS/PCB Number: 95 Amendment Number:
Name: Bc Tucker, MD Representing: Planda Chapter, Ameri	can College of Physicians
Title:	
City: Tacksaulk Phone Number: 9CY-35J-C800 Committee/Subcommittee: Health Ta	Meeting Date: $2/22/17$
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 capacit Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicate your Bill: Proponent Opponent	position as a proponent or opponent on the bill as a whole.) Info only
Amendment: Proponent Opponent	Info only



	Bill Amendment
	Bill/PCS/PCB Number: 4.5
	Amendment Number:
Name: Ben Twilley	
Representing: Express Das Scripts	
Title: Senior Manager State Govern	ment Affairs
Address: 2412 Lincoln St	
City: Columbia	State/Zip: SC 29201
Phone Number: 803-394-7001	Meeting Date: 2/22
Committee/Subcommittee: Health Inno	vatian
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	made by member, committee, or stan
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacit	y
Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your	position as a proponent or opponent on the hill as a whole \
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



STARP?	Bill Amendment Bill/PCS/PCB Number: HB 95 Amendment Number:
Representing: Self	
Title: <u>Clinical Nurse Edu</u> Address: <u>1948 Legacy Cove</u>	
city: Martland	State/Zip: 32751, FL
Phone Number: 786-342-9214 Committee/Subcommittee: Heath Inv Presentation/Workshop Topic: Bart and	,
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	oosition as a proponent or opponent on the bill as a whole.) Info only
Amendment: Proponent Opponent	Info only



					<u> </u>
	Fran- C	ove		Bill PCS/PCB Nun	
Statement Administra	Marie and the second	Land State Control	. A	<u></u>	
Name:					
Representing:	LORIOR !	JETHS.		LNER	NOTHBLUMF.
Title:	RU WEN	REE			
Address:	Harcan.	TTER			
	130 CHO	The state of the s		Ct - 1 - /7:	Fanou
				State/Zip	the base 6 months .
Phone Number:	386-25-1			Meeting	Date:
Committee/Subo	committee: Hou	SE HE	ALT	HJNI	BICGO TTAKE
Presentation/Wo	orkshop Topic:	FLEX	het		
	Registered L	obbyist: YES		NO 🏹	
	State Employ	yee: YES		NO 📉	
	.1.				
I wish to spea	iк response to an inquiry fo	or information (made bi	, member cor	nmittee or staff
	response to subpoena		nauc b	, member, cor	minecec, or starr
	the written request of th	ne chair			
Judge or elec	ted officer appearing in c	official capacity			
Lobbyist App	earance form submitted	online			
If you are testifying	an amandment slopes al-	o indicato vava =	acitian -	c a propensit	or opponent on the bill as a whole.)
IT you are testifying on Bill:	Proponent 7	o indicate your p Opponent	osition a	Info only	or opponent on the bill as a whole.)
Amendment	<u></u>	Opponent		Info only	
Amenament	rroponent 📉	Obbougut [iiiio oiiiy	



99629619



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

LORIDA			
er.	·		Bill 🗆 Amendment
			: 95 : Consumer Protection from Changes to Prescription Drug
		PCB/PCS/A	mendment #: N/A
Name:	Brewster Bevis		
Representing:	Associated Industries	of Florida	
Title:			
Address:	516 N. Adams St.		
City:	Tallahassee	State/Zip:	FL 32301
Phone Number:	850-224-7173	Meeting Date:	February 22, 2017 3:30 PM
Committee/Subo	committee: Health	Innovation Subcommittee	
Presentation/Wo		imer Protection from Nonme Formularies	dical Changes to Prescription
☑ Registered Lo	obbyist		Bill
State Employ			Opponent
☑ I Wish To Sp	eak		Amendment
☐ Appearing in	response to subpoena	a	N/A
Appearing in	response to an inquir	y for information made by	member, committee or staff
☐ Appearing at	the written request of	f the chair	
UJudge or elec	ted officer appearing	in official capacity	
🗹 Lobbyist App	earance Form Submi	tted	



				Bill Amendment Bill/PCS/PCB Number: Amendment Number:
Name:	Chu	.ck Cr	leme	2 N
Repres	enting: Figey	dians For	- Ralina	ble Health Coverage
Title	Exec.	Diracto	C Ep	depsy Assoc. at Cordeal A
Addr	ess: 109	N. Ki	oRMAN	e Rd
City:	OElA	ndo		State/Zip: F1 32811
Phor	ne Number: <u>4</u> 0	57-414-98	76	Meeting Date: 2-27-17
Com	mittee/Subcomr	mittee: <u>Hod</u>	4h I	anoralian Subcommitted
Pres	entation/Worksh	nop Topic:	295	·
		Registered L	.obbyist: YES	NO 💢
		State Emplo	yee: YES	NO V
ÎΧ	I wish to speak			
一	Appearing in resp	onse to an inquiry fo	or information	n made by member, committee, or staff
	Appearing in resp	onse to subpoena		
	-	written request of tl		
Judge or elected officer appearing in official capacity				
	Lobbyist Appeara	nce form submitted	online	
(If you ar	e testifying on an a	mendment, please als	o 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



	Bill Amendment Bill/PCS/PCB Number:95			
Felle Curve-uh	Amendment Number:			
Name: Fely Curva Ph. D.				
	house on Human Service			
Title: Coordinator				
Address: 1212 Piedmont Di	r			
City: Tollohossee	State/Zip: FL 32312			
Phone Number: (850)508-2256	Meeting Date: 2/22/17			
Committee/Subcommittee: //	Edth Innovetion Subc			
Presentation/Workshop Topic: Consumer	Protection			
Registered Lobbyist: YE	s No			
State Employee: YE	s No No			
I wish to speak WAIVE IN SUP	PORT			
Appearing in response to an inquiry for information	on 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	ir position as a proponent or opponent on the bill as a whole.)			
Bill: Proponent Opponen	t Info only			
Amendment: Proponent Opponent	t Info only			



Bill Amendment Bill/PCS/PCB Number: #395 Amendment Number:	
Name: Abigai Stod Ward	
Representing: Frime Therafutics	
Address: 4434 Pillshury Ave S	
city: Mirineapolis State/Zip: MN 55919	7
Phone Number: 612 616 1431 Meeting Date: 2/22/17	
Committee/Subcommittee: Health Movation	
Presentation/Workshop Topic:	· .
Registered Lobbyist: YES NO	
State Employee: YES NO	
X 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 w	/hole.)
Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	



Bill/PCS/PCB Number: HS 95	
Amendment Number:	
Name: SEPHEN R. LOINNI	
Representing: PLANTED DETERMENTHIC MEDICAL ASSECTATION	
Title: EXECUTATE DRECTOR	
Address: 2544 BARSINE PINES DR	
City: JALLA HASSET State/Zip: FZ 3230/	
Phone Number: 878-734- Meeting Date: 9-29-25/7	7
Committee/Subcommittee: HEATH INNOVATION SUBLEMENTIEE	
Presentation/Workshop Topic: LAKEANER PROPERTIES THEM NORMEDIAL CHAKES	
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	an and
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	



	Bill/PCS/PCB Number:
Labasky	Amendment Number:
Name: Both LARASKY Representing: Mpha ONE FOUN	nto N
Title: Consultant	
Address: 1900 Vellage Square City: Tall.	State/Zip: 7/a 323/2
Phone Number: 850 3227335 Committee/Subcommittee: Verelto	
Presentation/Workshop Topic:	
Registered Lobbyist: YES State Employee: YES WAUE TIME IN ST	NO X
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 Amendment: Proponent Opponent	Info only Info o



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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.

CORIDA					
		\checkmark	Bill Amendment		
			HB 95 : Consumer Protection cal Changes to Prescription Drug		
		PCB/PCS/Ar	mendment #: N/A		
Name:	Sanford, Paul				
Representing:	Florida Blue and Florid	a Insurance Council			
Title:					
Address:	106 S Monroe St		·		
City:	Tallahassee	State/Zip:	FL 32301		
Phone Number:	(850) 222-7200	Meeting Date:	Feb 22 2017 3:30PM		
Committee/Sub	committee: Health	Innovation Subcommittee			
Presentation/Wo	orkshop Topic: N/A				
☑ Registered L	obbyist		Bill		
☐ State Employ	•		Opponent		
☑ I Wish To Sp	oeak		Amendment		
Appearing in response to subpoena N/A					
	• • •	•	member, committee or staff		
_ **	the written request of				
☐ Judge or elected officer appearing in official capacity ☐ Lobbyist Appearance Form Submitted					
Loodyist Ap	pearance Form Submitt	iea			



			Bill/PCS/PCB Nu Amendment Nu		
Name:	Mic &	doinson		again and a second a second and	
Representing:	Mida	Seast	and	2 roundation	
Title: Aduc	ate				
Address:	an fica	dilly Di	Be/(a ₆ •		
City:	tora Be	ach	State/Zi	p: 7 3210	
Phone Number:	386-405-	- 799	Meetin	g Date:	
Committee/Subco	mmittee:	ouse He	all In	polation Subcomittee	
Presentation/Wor		FairX			
Presentation, wor					
	Registered	Lobbyist: YES] NO		
	State Emplo	oyee: YES] NO 🔯		
I wish to speak					
·	esponse to an inquiry f	for information m	ade by member, co	ommittee, or staff	
/	esponse to subpoena				
Appearing at the written request of the chair					
Judge or electe					
Lobbyist Appea	rance form submitted	donline			
(If you are testifying on a	n amendment, please al:	so indicate your po	sition as a proponent	or opponent on the bill as a whole.)	
Bill:	Proponent	Opponent [Info only	, <u> </u>	
Amendment:	Proponent 🔼	Opponent	Info only	,	



			D:II /	Bill PCS/PCB Number	Amendment \mathcal{A}	
			DIII/	PCS/PCB Number		İ
_			Ame	ndment Number	:	•
Name: JON	Ryan	_				
	nercicals	Hea	14/1	Insura	ince Planse	MAHI
Title:	ng gyahar mang ng gyang di ng					
Address: <u>325</u>	TW.(0)	lege	Av	θ,		
City: Tall	ahorss	ee_		State/Zip:]	=1 32301	
Phone Number: 3	39-808	33_		Meeting Date	e: 2-22-17	
Committee/Subcomm	nittee:	alth-	In	novation	M Subcomm	1400
Presentation/Worksh	пор Торіс:					
	Registered L	obbyist: YES		NO 🔲		
	State Emplo	yee: YES		NO.X		
I wish to speak						
	onse to an inquiry fo	or information	made by	member, commit	tee, or staff	
	Appearing in response to subpoena					
Appearing at the written request of the chair Judge or elected officer appearing in official capacity						
	nce form submitted		,			
_						
If you are testifying on an ar	nendment, please als	•		s a proponent or op	ponent on the bill as a whole.)	
Bill:	Proponent	Opponent ,	X	Info only		
Amendment:	Proponent	Opponent		Info only		



	Bill Amendment					
	<u> </u>					
	Bill/PCS/PCB Number: <u>4.8 95</u>					
	Amendment Number:					
Name: Down Oaks						
Representing:						
Title: ASSOCIATE STATE DIVER	Had a second sec					
Address: Jot W. Callege						
City: Fall	State/Zip:F					
Phone Number: 228 - (357)	Meeting Date: Feb 2017					
Committee/Subcommittee:	Tonoviku					
Presentation/Workshop Topic:	- Am Non Medical Change					
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 capacit	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					



	Bill Amendment Bill/PCS/PCB Number:					
	Amendment Number:					
Name: Doug Bell						
epresenting: Epilepsy Assec. of Central FL/ FC Chapter-Pediati						
Title:						
Address: 101 N. Montee 34.						
City: TLH	State/Zip: FC					
Phone Number: 510 7146	Meeting Date:					
Committee/Subcommittee: Health Inko	vation					
Presentation/Workshop Topic:						
Registered Lobbyist: YES	S NO					
State Employee: YES	NO NO					
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					



	Bill Amendment Bill/PCS/PCB Number: HB 95 Amendment Number:			
Name: <u>Audrey Brown</u> Representing: <u>Florida Association of</u>	- Health Plans			
Title: <u>President and CEO</u> Address: <u>Job W. College Ava.</u>				
City: Tallahassee Phone Number: 386-2904 Committee/Subcommittee: Health Innova	Meeting Date: 2-22-17			
Presentation/Workshop Topic: HB 95 Registered Lobbyist: YES 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 Bill: Proponent Opponent	position as a proponent or opponent on the bill as a whole.) Info only			
Amendment: Proponent Opponent	Info only			



4 4		Bill Amendment Bill/PCS/PCB Number: Amendment Number:
City: Ta	RD 1922 Dellwood	State/Zip:
Committee/Su	bcommittee: Health Vorkshop Topic: Registered Lobbyist State Employee:	Innovation : YES NO
Appearing Appearing Judge or el Lobbyist A	in response to an inquiry for inform in response to subpoena at the written request of the chair ected officer appearing in official copearance form submitted online	nation made by member, committee, or staff apacity e your position as a proponent or opponent on the bill as a whole.)
Bill: Amendme	Proponent V Oppo	onent Info only



A-lee-sa	Bill Amendment Bill/PCS/PCB Number:
Name: Alisa Lafolt Representing: NAMI Flori	
Title: Executive Direct Address:	78
Phone Number: 850-671-449	State/Zip: Meeting Date:
Presentation/Workshop Topic:	
I wish to speak Appearing in response to an inquiry for info Appearing in response to subpoena Appearing at the written request of the character of the char	ormation made by member, committee, or staff air
<u> </u>	ponent Info only
Amendment: Proponent Op	ponent Info only





COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

		☑ Bill ☐ Amendment					
		Bill Number:	449 : Health Insurance				
		PCB/PCS/Ar	mendment #: N/A				
Name:	Brewster Bevis						
Representing:	Associated Industries of	f Florida					
Title:							
Address:	516 N. Adams St						
City:	Tallahassee	State/Zip:	FL				
Phone Number:	ne Number: (850) 224-7173 Meeting Date: Februa						
Committee/Subo	committee: Health	Innovation Subcommittee					
Presentation/Wo	orkshop Topic: Health	Insurance					
Dogistand L	ahlassi at		D:II				
✓ Registered Lo State Employ			Opponent Bill				
✓ State Employ ✓ I Wish To Sp							
			N/A Amendment				
	response to subpoena	- C ! C 4! 1 - 1					
		•	member, committee or staff				
	the written request of						
_	ted officer appearing in	-					
Lobbyist App	earance Form Submitt	ted					



	Bill Amendment
	Bill/PCS/PCB Number: 449
	Amendment Number:
Name: Marni Jameson	- Carey
Representing: <u>OSSOCIATOR OF</u>	Independent Doctors
Title: Executive Direc	to
Address: 400 N. New Yor	ic ave Ste 213
	State/Zip: FL 32789
Phone Number: 407 865 4110	Meeting Date: Feb. 22, 2017
Committee/Subcommittee: Health	Innovations Subcommitte
Presentation/Workshop Topic:	
Registered Lobbyist: YE	s 🔲 по 🔀
State Employee: YES	s No No
IX Luciali en annalo	
I wish to speak	
Appearing in response to an inquiry for information	n made by member, committee, or starr
Appearing in response to subpoena Appearing at the written request of the chair	
Judge or elected officer appearing in official capaci	ity
Lobbyist Appearance form submitted online	ity
· · · · · · · · · · · · · · · · · · ·	
(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:			
Alli	nm baugh	Amendment Number:			
Name: Joel Allu-	nbaugh				
	•	ment Accountability			
Title: <u>Senive</u> Fe	llow				
Address: 6 East C	hestmut St.				
City: Augusta		State/Zip:			
Phone Number: 307-3	42-5007	Meeting Date: 2/22/17			
Committee/Subcommittee:	Health Inno	vation Subcommittee			
Presentation/Workshop Top	ic:				
Re	egistered Lobbyist: YE	S NO NO			
St	ate Employee: YE	s No No			
I wish to speak Appearing in response to a Appearing in response to a	•	on made by member, committee, or staff			
Appearing at the written r	·	situ.			
	Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online				
		r position as a proponent or opponent on the bill as a whole.)			
Bill: Propon	ent Opponen	t Info only			
Amendment: Propon	ent Opponent	t Info only			



					Bill PCS/PCB Numb endment Numb	Amendme Der: 449 Der:	
Name	_≤Kyla	r Zande					
Repre	senting:	mericans f	a P	os pe	sty		
Title	e: <u></u>	y Steele]	irecto	<u>~</u>			
		· U College					
	: Tallahu	•			State/Zip:_	FL 3230	
Pho	one Number:	850-728-	4522		Meeting D	ate: <u> </u>	17
Con	nmittee/Subcomi	mittee:	·				
		.					
	sentation, works	nop Topic:	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
		Registered Lo	obbyist: YES	$ ot \sum_{i} f_i = f_i f_i $	NO 🗌		
		State Employ	vee: YES		NO 💹		
rA	I wish to speak						
	Appearing in resp	onse to an inquiry fo	r information	made b	y member, com	mittee, or staff	
	Appearing in resp	onse to subpoena					
	Appearing at the	written request of th	e chair				
	Judge or elected of	officer appearing in o	official capacit	У			
	Lobbyist Appeara	nce form submitted	online				
(If you a	are testifying on an a	mendment, please also	indicate your	position a	as a proponent or	opponent on the bill a	s a whole.)
	Bill:	Proponent 📝	Opponent		Info only		
	Amendment:	Proponent	Opponent		Info only		



		-		The same of the sa
				Bill Amendment PCS/PCB Number: 449 endment Number:
Name: SAC	NUZZO			
Representing:	THE IN	mes N	1AD)	son Inst
Title:				
,				
Address:	(State/Zip: FZ 3230/
Phone Number:	830 - 32	2-994		Meeting Date: 2/23
Committee/Subcom			(√0√	,
Presentation/Works	shop Topic:		· · · · · · · · · · · · · · · · · · ·	
	Registered L	obbyist: YES		NO
	State Employ	yee: YES		NO
	·			
I wish to speak				
Appearing in res	ponse to an inquiry fo	or information	made by	member, committee, or staff
Appearing in res	ponse to subpoena			
Appearing at the	e written request of th	ne chair		
Judge or elected	l officer appearing in o	official capacity	/	
Lobbyist Appear	ance form submitted	online		
(If you are testifying on an	amendment, please also	o indicate your p	oosition a	es 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 two copies to the committee/subcommittee <u>administrative assistant</u> at the meeting.

		JUL MAN		Bill Amendment
		The state of the s	i	: 449 : Health Insurance
Name:	Paul Sanford	199	PCB/PCS/Ai	mendment #: N/A
Representing:	Florida Blue an	d Florida Insurai	nce Council	
Title:	 			
Address:	106 S Monroe S	t		
City:	Tallahassee		State/Zip:	FL
Phone Number:	(850) 222-7200		Meeting Date:	February 22, 2017 3:30 PM
Committee/Sub	committee:	Health Innovation	on Subcommittee	
Presentation/Wo	orkshop Topic:	N/A		
✓ Registered L	obbvist			Bill
☐ State Employ	-			Opponent /
☑ I Wish To Sp				Amendment
☐ Appearing in	response to sul	opoena		N/A
☐ Appearing in	response to an	inquiry for info	rmation made by	member, committee or staff
☐ Appearing at	the written requ	uest of the chair		
☐ Judge or elec	ted officer appe	earing in official	capacity	
☐ Lobbyist App	pearance Form	Submitted		



		^			Bill CS/PCB Number:	Amendment 543
Name:	Alisa	- Latoff	1 666	4	sociation	<u></u>
	enting:	obbyist	1WSCS	//>	30010	
Addr City:		lahas D			State/Zip:	
Phor		850-413-1			Meeting Date	2/2/
		hop Topic:/	Nursiv	og f	rograms	
			obbyist: YES yee: YES	\equiv	no <u>↓</u>	
	Appearing in resp Appearing at the Judge or elected o	onse to an inquiry for conse to subpoena written request of the officer appearing in conce	ne chair official capacity	made by		ee, or staff
	e testifying on an a	mendment, please also	o indicate your p Opponent	oosition as	a proponent or opp	onent on the bill as a whole.)
	Amendment:	Proponent	Opponent		Info only	



	Bill Amendment Bill/PCS/PCB Number: 543 Amendment Number:			
Name: MAHLA DECASTRO Representing: Fr Hosp Association Title: VP NUISing & Chinicac Care Porpy Address: 306 & Culled And				
City:	State/Zip: PC Meeting Date: 1 NOVATIVE			
Registered Lobbyist: YES State Employee: YES	NO NO			
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 plants) Bill: Proponent Opponent	Info only			
Amendment: Proponent Opponent	Info only			





COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

		$\overline{\mathbf{v}}$	Bill Amendment
		Bill Number Transparency	: 589 : Prescription Drug Price
		-	mendment #: N/A
Name:	Brewster Bevis		
Representing:	Associated Industries	s of Florida	
Title:			
Address:	Po Box 784		
City:	Tallahassee	State/Zip:	FL 32302-07
Phone Number:	(850) 224-7173	Meeting Date:	February 22, 2017 3:30 PM
Committee/Subo	committee: Heal	th Innovation Subcommittee	
Presentation/Wo	orkshop Topic: Preso	cription Drug Price Transpare	ncy
			*
☑ Registered Le	obbyjet		Bill
State Employ			Proponent Din
☑ I Wish To Sp		Amendment	
	response to subpoer	N/A	
^^	• •		member, committee or staff
	the written request of		
☐ Judge or elec	ted officer appearing	g in official capacity	
Lobbyist App	earance Form Subm	nitted	



				Bill/P	Bill [Amendment : 584
		y way		Amer	ndment Number	:
Name:		ne buck	M			
Repres	senting:	HRP				
Title	e: <u>0</u> 0000	unter Sta	6 Duc	etiv		
Add	ress: <u>20</u>	10 Gell				
City	:_Jill				State/Zip:	3230/
Pho	ne Number:	208-43			Meeting Date	e: 2-22-h
Con	nmittee/Subcom	nmittee: <u>Hu</u>	EL I	MAZI	M	
Pres	sentation/Works	shop Topic:	My TV	Nop	wery_	
		Registered l	obbyist: YES		NO 🗌	
		State Emplo	yee: YES		NO 🗌	
	I wish to speak Appearing in response to an inquiry for information made by member, committee, or staff					
П	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 a	re testifying on an	amendment, please als	so indicate your	position as	a proponent or op	ponent on the bill as a whole.)
	Bill:	Proponent V	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



Name:	Ma-	H Gar	1	Ame	Bill Amendment PCS/PCB Number: 170 Indiment Number:	
	enting:	Orgress, s.	1 Di	3hi	1#1	
Title	:					
			•			
					State/Zip:	
Phor	ne Number:				Meeting Date:	
Com	ımittee/Subcomı	mittee:				
. ,	onderen works					
		Registered Lo			NO _	
		State Employ	ree: 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 ar	re testifying on an a	mendment, please also	indicate your	position a	s 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 two copies to the committee/subcommittee administrative assistant at the meeting.

	☑ Bill ☐ Amendment				
		Bill Number:	Bill Number: 1701		
		PCB/PCS/Ar	nendment #: HIS17-01		
Name:	nuzzo, salvatore				
Representing:	The James Madison Ins	titute			
Title:					
Address:	100 N Duval Street				
City:	Tallahassee	State/Zip:	Florida 32301		
Phone Number:	8503229941	Meeting Date:	Feb 22 2017 3:30PM		
Committee/Subo	committee: Health	Innovation Subcommittee			
Presentation/Wo	orkshop Topic: Medicai	d Block Grant			
Registered Lo	obbyist		Bill		
☐ State Employ	ree		Proponent		
☑ I Wish To Sp	eak		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 t	he chair			
☐ Judge or elec	ted officer appearing in	official capacity			
☐ Lobbyist App	earance Form Submitt	ed			



			Amendment Der: HIS 17-0	
		Amendment Numb	oer:	
Name: Michael	Daniels	•		
Representing: FAAS				
Title: Executive	Directo	51	·	
Address: 3333 W	Penso	(co) g 5	and	
city: Tallaha SSE		-	32304	
Phone Number: 850 - 4			ate: 3:30	
Committee/Subcommittee:	Health		tion	
Presentation/Workshop Topic:				
Registo	ered Lobbyist: YES 1	NO 🗌		
State E	mployee: YES	NO 🗌		
I wish to speak				
Appearing in response to an inquiry for information made by member, committee, or staff				
Appearing in response to subpo				
Appearing at the written reque				
Judge or elected officer appear				
Lobbyist Appearance form subr				
(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 [



	Bill Amendment Bill/PCS/PCB Number: 17-01 Amendment Number:			
Name: Karen Woodell	· · · · · · · · · · · · · · · · · · ·			
Representing: FCFEP Title: Divector				
Address: 579 E. Call St. City: Tallahree	State/Zip: F (3 z 3 o)			
Phone Number: 850 - 321 - 9386 Committee/Subcommittee: 1000000	Meeting Date: 2/22/17			
Presentation/Workshop Topic:	'			
State Employee:				
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				
	our position as a proponent or opponent on the bill as a whole.)			
Amendment: Proponent Oppone Oppone				