

Health Quality Subcommittee

Wednesday, January 10, 2018 4:00 PM - 5:30 PM Mashburn Hall (306 HOB)

Action Packet

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

Summary:

Health Quality Subcommittee

Wednesday January 10, 2018 04:00 pm

HB 21	Favorable With Committee Substitute	Yeas: 15	Nays: 0
Ar	mendment 858463 Adopted Without Objection		
HB 513	Favorable	Yeas: 12	Nays: 0
HB 573	Favorable	Yeas: 13	Nays: 0
HB 673	Favorable	Yeas: 13	Nays: 0
HB 855	Favorable	Yeas: 13	Nays: 0
HB 973	Favorable	Yeas: 15	Nays: 0
нв 6049	Pavorable Favorable	Yeas: 15	Nays: 0

Committee passed multiple motions to extend the meeting. Passed

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

Attendance:

	Present	Absent	Excused
James Grant (Chair)	Х		
Robert Asencio	X		
Colleen Burton	X		
Cord Byrd	X		
Byron Donalds	X		
Shevrin Jones	×		
Amber Mariano	X		
Ralph Massulio, MD	X		
Amy Mercado	X		
Wengay Newton	X		
Daniel Perez	X		
Cary Pigman	Х		
Rene Plasencia	X		
David Silvers	X	<u> </u>	
Cyndi Stevenson	X		
Totals:	15	0	O

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB) **HB 21:** Controlled Substances

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				,
Colleen Burton	X				
Cord Byrd	X				
Byron Donalds	X				
Shevrin Jones	X				
Amber Mariano	X				
Ralph Massullo, MD	X				
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez	X				
Cary Pigman	X				
Rene Plasencia	X				
David Silvers	X				
Cyndi Stevenson	X				
James Grant (Chair)	X				
	Total Yeas: 15	Total Nays: 0)		

HB 21 Amendments

Amendment 858463

X Adopted Without Objection

Appearances:

Controlled Substances
Katz, Mitch (General Public) - Waive In Support
City of Delray Beach
Commissioner
100 NW 1st Ave
Delray Beach Fl 33448
Phone: (954) 873-5370

Controlled Substances

Bunkley, Bill (Lobbyist) - Waive In Support Florida Ethics and Religious Liberty Commission President

P.O. Box 341644 Tampa FL 33694 Phone: (813) 264-2977

Print Date: 1/11/2018 10:19 am Leagis ® Page 3 of 16

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 21 : Controlled Substances (continued)

Appearances: (continued)

Controlled Substances

Glicksteen, Mayor Cary - Proponent

City of Delray Beach

Mayor

101 NW 1st Ave

Delray Beach FI 33483

Phone: (561) 243-7010

Controlled Substances

Luskin MD, Brandon (General Public) - Information Only

Self, Palm Beach County Medical Society, Florida Medical Association

2828 S Seacrest Blvd

Boynton Beach Fl 33435

Phone: (561) 734-5080

Controlled Substances

Bishop, Mark (State Employee) - Proponent

Florida Physical Therapy Association

Associate Professor

101 S Newell Dr #1154

Gainesville Fl 32609

Phone: (352) 273-6112

Controlled Substances

Nuland, Christopher (Lobbyist) - Opponent

Florida Neurosurgical Society / Florida Society of Theracic and Cardiovascular Surgeons

1000 Riverside Ave #240

Jacksonville FL 32204

Phone: (904) 233-3051

Controlled Substances

Bevis, Brewster (Lobbyist) - Waive In Support

Associated Industries of Florida

Senior VP

516 N Adams St

Tallahassee FL 32301

Phone: (850) 224-7173

Controlled Substances

Hart, Joe Anne (Lobbyist) - Information Only

Florida Dental Association

Chief Legislative Officer

118 E Jefferson St

Tallahassee FL 32301

Phone: (850) 224-1089

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 21 : Controlled Substances (continued)

Appearances: (continued)

Controlled Substances
Ramba, Melissa (Lobbyist) - Proponent
Florida Retail Federation
VP of Government Affairs
227 S Adams St
Tallahassee FL 32301

Phone: (850) 222-4082

Controlled Substances

Campbell, Bryan (General Public) - Proponent Duval, Nassau and Clay County Medical Societies CEO 1301 Riverplace Blvd Ste 1638 Jacksonville Fl 32207 Phone: (904) 353-7536

Controlled Substances

Jackson, Michael (Lobbyist) - Proponent Florida Pharmacy Association 610 N. Adams St. Tallahassee FL 32309 Phone: (850) 222-2400

Controlled Substances

Mabry, Janet (Lobbyist) - Information Only American Massage Therapy Association 2866 Bay Heather Cir Gulf Breeze FL 32563 Phone: (850) 501-2502

Controlled Substances

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

Controlled Substances

Phone: (850) 245-0155

Fay, Andrew (Lobbyist) (State Employee) - Waive In Support
Department of Legal Affairs
Special Counsel
Pl-01 The Capitol
Tallahassee FL 32399

Print Date: 1/11/2018 10:19 am **Leagis ®** Page 5 of 16

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 21: Controlled Substances (continued)

Appearances: (continued)

Controlled Substances
Miller, Dr. Alan (General Public) - Proponent
Nassau County Medical Society & Duval County Opioid Task Force
Physician
1865 Line St Ste 101
Fernandina Beach FL 32034
Phone: (904) 321-2422

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

	M	bcommittee: Heal Ieeting Date: \(\frac{1}{1}\)C Place: \(\frac{306}{4:06} \)	1/18 HOB		Date Re Date Re	ported:		olled S	ubstar	nces
	Favorab Favorab	ole w/ an ole w/Committee/Su		Substitu	ite [☐ Re ☐ Te	consider	ly Postpo		n
1	l Vote Bill	MEMBERS	Amendm #8584	unt (1. 0. 1		
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
1/2		Asencio	11,	•						
		Burton	Adapted CX, C.							
		Byrd	al te	-						
		Donalds	79.	r,						
1		Jones	, c×	10						
1		Mariano	70,							
/		Massullo		1						
/		Mercado								
		Newton								
		Perez								
3		Pigman								
		Plasencia								
/		Silvers								
		Stevenson								
		Grant, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 513: Distributing Pharmaceutical Drugs and Devices

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X				
Cord Byrd			X		
Byron Donalds	X				
Shevrin Jones	X				
Amber Mariano	X				
Ralph Massullo, MD	X				
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez			X		
Cary Pigman	X				
Rene Plasencia			X		
David Silvers	X				
Cyndi Stevenson	X		······································	i.	
James Grant (Chair)	X				
	Total Yeas: 12	Total Nays: 0)		

House of Representatives

		COMMIT	TEE/SU	UBCOMN	IITTEE	BILL A	CTION Y	WORKS	HEET		
Comm	nittee/Su	bcommittee:	Health	Quality			umber:	513			
	M	eeting Date:	11101	18			eceived:				
		eeting Date: Place:	306.	HOB		Date Re	ported:				
		Time: 5	4:00 -	5:30		S	Subject:	Distric	ind De	<u>Pha</u> r n vices	naceutic
Commi	ttee/Sub	committee Ac	tion:					7			
	Favorab	le					Re	tained fo	r Recon	sideratio	n
Ħ	Favorab	le w/	ame	ndments		Ī	¬ Re	consider	ed		
		le w/Committ			Substitu	ıte -	= Te	mporari]	ly Postpo	ned	
	Other A					Ī		favorabl			
Fina	l Vote		-			Ţ					
On	Bill	MEMBE	RS								
Yea	Nay			Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
X		Asencio									
y		Burton									
		- Byrd									
		Donalds									
/		Jones									
/		Mariano									
		Massullo									
1		Mercado									
		Newton									
		Perez									
		Pigman									
		-Plasencia									
/		Silvers									
		Stevenson									
		Grant, Chair									
	1	1				1		i			

Yeas &

Nays

TOTALS

Yeas

Nays

Yeas

Nays

Yeas

Nays

Yeas

Nays

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 573: Involuntary Examinations Under the Baker Act

Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X				
Cord Byrd	X				
Byron Donalds	X	<u></u>			
Shevrin Jones	X				
Amber Mariano	X				
Ralph Massullo, MD	X				
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez			X	-	
Cary Pigman	X				
Rene Plasencia			Х		
David Silvers	X				
Cyndi Stevenson	X				
James Grant (Chair)	X				
	Total Yeas: 13	Total Nays: 0)		

Appearances:

Involuntary Examinations Under the Baker Act Carvajal, Allison S. (Lobbyist) - Waive In Support Florida Nurse Practitioner Network Consultant 120 S Monroe St Tallahassee FL 32312 Phone: (850) 727-7087

Involuntary Examinations Under the Baker Act Floyd, Chris (Lobbyist) - Waive In Support Florida Association of Nurse Practitioners 101 E College Ave Ste 302 Tallahassee FL 32301

Phone: (813) 624-5117

Phone: (850) 222-5702

Involuntary Examinations Under the Baker Act Killinger, Lori (Lobbyist) - Proponent Florida Association of Nurse Anesthetists Attorney / Lobbyist 315 S Calhoun St Tallahassee FL 32301

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 573: Involuntary Examinations Under the Baker Act (continued)

Appearances: (continued)

Involuntary Examinations Under the Baker Act Kung, Ying Mai (State Employee) - Waive In Support Self Dr, DNP, ARNP 3712 Longchamp Cir Tallahassee FL 32309 Phone: (850) 510-7500

Involuntary Examinations Under the Baker Act Whitaker, Stan (General Public) - Proponent FL Association of Nurse Practitioners Chairman 6294 NW Torreya Pk Rd Bristol FL 32321 Phone: (850) 545-8301

Print Date: 1/11/2018 10:19 am Leagis ® Page 9 of 16

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Contmit	M ttee/Sub- Favorab Favorab	le w/ ame le w/Committee/Subc	18 HOB PM - 5 : 3 ndments	© PM Substitu	Date Re Date Re	Re Re	Involu Under tained for	Intary the Bi or Reconsed ly Postpo	EXan	minations act
Final		NATION OF THE STATE OF THE STAT								
On Yea	Bill Nay	MEMBERS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
1 ea	Nay	Asencio	1 cas	Nays	1 eas	Mays	1 cas	Mays	1 648	Ivays
		Burton		<u> </u>						
1		Byrd								
/	-	Donalds					****			
		Jones								
/		Mariano								
/		Massullo						-		
/		Mercado								
/		Newton								
		Perez								
1		Pigman								
		Plasencia								
/		Silvers								
/		Stevenson								
/		Grant, Chair								
										-
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
13	0					L				

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 673: Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X				
Cord Byrd	X				
Byron Donalds	X				
Shevrin Jones	X				
Amber Mariano	X				
Ralph Massullo, MD	X				
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez			X		
Cary Pigman	X				
Rene Plasencia			X		
David Silvers	X				
Cyndi Stevenson	X				
James Grant (Chair)	X				
	Total Yeas: 13	Total Nays: ()		

Appearances:

Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births Thomas, Mary (Lobbyist) - Waive In Support Florida Medical Association Assistant General Counsel 1430 Piedmont Dr E

Tallahassee FL 32308 Phone: (850) 224-6496

Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births Watson, Ronald (Lobbyist) - Proponent Midwives Association of Florida

Lobbyist 3738 Mundon Way Tallahassee FL 32309 Phone: (850) 567-1202

Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births

Mixon, Corinne (Lobbyist) - Waive In Support

Florida Academy of Physician Assistants

Government Consultant 119 S. Monroe St #202

Tallahassee FL 32301 Phone: (850) 681-6877

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 673: Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births (continued)

Appearances: (continued)

Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births Friall MD, Andrea K. (General Public) - Waive In Support American College of OB-GYNs 1304 Live Oak Plantation Rd Tallahassee FL 32312 Phone: (850) 906-0371

Reporting Of Adverse Incidents In Planned Out-Of-Hospital Births Young, Amy (Lobbyist) - Waive In Support American College of OB-GYNs Managing Partner, Ballard Partners 3609 Washington Rd. West Palm Beach FL 33401 Phone: (561) 310-8137

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Commit	M itee/Sub Favorab Favorab	le w/ ame le w/Committee/Sub	HOB PM- 5:3	sopm	Date Re Date Re	ported: bubject: Re Re Re	Reportive In Practice of the Consider	or Reconsed by Postpo	v+ − 0 ∓ sideratio	Incidents -Hospital Birt
	Vote									
	Bill	MEMBERS		1 57			T 7		* 7	***
Yea	Nay	A	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
		Asencio								
		Burton								
V	-	Byrd								
		Donalds								
		Jones			-					
/		Mariano	-							
		Massullo								
		Mercado								<u> </u>
		Newton				<u> </u>			<u> </u>	
		Perez								
		Pigman		<u></u>						
		Plasencia								
		Silvers								
		Stevenson								
		Grant, Chair								
				ļ						
				-						
	<u> </u>									
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

13

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 855: Genetic Information Used for Insurance

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X				
Cord Byrd	X				
Byron Donalds	X				
Shevrin Jones	X				
Amber Mariano	X				
Ralph Massullo, MD	X				
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez			X		
Cary Pigman	X				
Rene Plasencia			X		
David Silvers	X	· ·	-		
Cyndi Stevenson	X				
James Grant (Chair)	X				
	Total Yeas: 13	Total Nays:	0		

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Conmi	M ttee/Sub Favorab Favorab Favorab Other A	le w/ ame le w/Committee/Sub	HOB 5:30		Subject: Genetic Information U Insurance Retained for Reconsideration Reconsidered					
	l Vote				Control of the Contro			'		
	Bill	MEMBERS	X7		¥ 7	7	3 .7	3 7	T 7	.
Yea	Nay	Asencio	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
-/-		Burton								
		Byrd								
		Donalds								
		Jones							<u> </u>	
	1	Mariano								
		Massullo								
1		Mercado								
/		Newton								
		- Perez								
/		Pigman								
		Plasencia								
/		Silvers								
/_		Stevenson								
		Grant, Chair	t							
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 973: Performance of Physician Assistants and Advanced Registered Nurse Practitioners

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X		_		_
Cord Byrd	X				
Byron Donalds	X				-
Shevrin Jones	X				·
Amber Mariano	· X				
Ralph Massullo, MD	X				
Amy Mercado	X				-
Wengay Newton	X				
Daniel Perez	X				
Cary Pigman	X				
Rene Plasencia	X				
David Silvers	X				-
Cyndi Stevenson	X				
James Grant (Chair)	X				
	Total Yeas: 15	Total Nays: (o		

Appearances:

Performance of Physician Assistants and Advanced Registered Nurse Practitioners Thomas, Mary (Lobbyist) - Waive In Opposition

Florida Medical Association Assistant General Counsel 1430 Piedmont Dr E

Tallahassee FL 32308 Phone: (850) 224-6496

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Nuland, Chris (Lobbyist) - Waive In Opposition Florida Chapter, American College of Physicians

1000 Riverside Ave #240 Jacksonville FL 32204

Phone: (904) 233-3051

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Barker, Dorene (Lobbyist) - Waive In Support

AARP Florida

Associate State Director 200 W College Ave

Tallahassee FL 32301 Phone: (850) 228-6387

Health Quality Subcommittee

1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

HB 973: Performance of Physician Assistants and Advanced Registered Nurse Practitioners

(continued)

Appearances: (continued)

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Whitaker, Stan (General Public) - Waive In Support

FL Association of Nurse Practitioners

Chairman

6294 NW Torreva Pk Rd

Bristol FL 32321

Phone: (850) 545-8301

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Floyd, Chris L (Lobbyist) - Waive In Support

Florida Association of Nurse Practitioners

101 E. College Ave Ste. 292

Tallahassee FL 32301

Phone: (813) 624-5117

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Carvajal, Allison (Lobbyist) - Waive In Support

Florida Nurse Practitioner Network

Consultant

120 S Monroe St

Tallahassee FL 32301

Phone: (850) 727-7087

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Mixon, Corinne (Lobbyist) - Waive In Support

Florida Academy of Physician Assistants

Government Consultant

119 S. Monroe St. #202

Tallahassee FL 32301

Phone: (850) 681-6788

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Kung, Ying Mai (State Employee) - Waive In Support

Self

Dr, DNP, ARNP

3712 Longchamp Cir

Tallahassee FL 32309

Phone: (850) 510-7500

Performance of Physician Assistants and Advanced Registered Nurse Practitioners

Killinger, Lori (Lobbyist) - Waive In Support

Florida Association of Nurse Anesthetists

Attorney / Lobbyist

315 S Calhoun St

Tallahassee FL 32301

Phone: (850) 222-5702

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: Health Quality Meeting Date: 11018 Place: 306 H0B Time: 4:80 PM-5:30 PM Committee/Subcommittee Action: Favorable Favorable w/ amendments Favorable w/Committee/Subcommittee Substitute Other Action:				Assistants and Advanted Regist Nurse Practitioners Retained for Reconsideration Reconsidered Temporarily Postponed					sician Led Registeren	
	Vote									
Yea	Bill Nay	MEMBERS	Yeas	Nove	Yeas	Nays	Yeas	Nays	Yeas	Nays
	Ivay	Asencio	1 cas	Nays	1 eas	Ivays	1648	ivays	1 cas	Tays
		Burton								
/		Byrd		1				:		
		Donalds								
/		Jones		1						
/		Mariano								
		Massullo								
1		Mercado								
		Newton								
		Perez								·
V		Pigman								
V		Plasencia								
V		Silvers								
		Stevenson								
		Grant, Chair								
				<u> </u>						
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
1/5	0					ł		1		1

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB) **HB 6049:** Medical Marijuana Growers

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Robert Asencio	X				
Colleen Burton	X				
Cord Byrd	X				
Byron Donalds	. X		_		
Shevrin Jones	X				
Amber Mariano	X			-	
Ralph Massullo, MD	X	<u> </u>			
Amy Mercado	X				
Wengay Newton	X				
Daniel Perez	X		· .		
Cary Pigman	X				
Rene Plasencia	X				
David Silvers	X				
Cyndi Stevenson	X			·····	
James Grant (Chair)	X				
	Total Yeas: 15	Total Nays: (0		

Appearances:

Medical Marijuana Growers
Gunn, Howard Jr (General Public) - Opponent
FL - Black Farmers Association
President
2801 SW 15th St.
Ocala FL 34474
Phone: (352) 572-1063

Medical Marijuana Growers Hightower, John (General Public) - Waive In Support Self PO BOX 4165 Tallahassee FL 32302

Wilson, Latresa (General Public) - Opponent Black Farmers & Agriculture Association Doctor 3330 NW 2nd Ave Ocala FL 34478 Phone: (352) 425-5676

Phone: (850) 519-0363

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

		COMMITTEE/S	ORCOMIN	HTTEE.	BILL A	CHON	WORKS	HEEI		
Comm		bcommittee: Health leeting Date: 1\0\1 Place: 306 Time: 4.00	HOR		Date Re	umber: eceived: ported: Subject: \			<u> </u>	(Momes
Commi	ttee/Sub	committee Action:							· ·	
		le w/ ame le w/Committee/Sub		Substitu	te [Re Te	consider	ly Postpo		n
Final	l Vote									
On	Bill	MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
V		Asencio								
/		Burton								
		Byrd								
		Donalds								
		Jones								
		Mariano								

-		vote						ŀ		į	
	<u>On</u>	Bill	MEMBERS								
Ł	Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
•	V		Asencio								
	/		Burton								
			Byrd								
ſ	/		Donalds								
	/		Jones								
	/		Mariano								
			Massullo								
			Mercado								
			Newton								
T			Perez								
T			Pigman								
			Plasencia								
ſ			Silvers								
			Stevenson								
T	V		Grant, Chair 15+								
r											
r				<u> </u>							
r				 				 		,	
					 						
				1	-						
	Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
1	12		1						1		

Health Quality Subcommittee 1/10/2018 4:00PM

Location: Mashburn Hall (306 HOB)

A	cti	on	ab	le	Ite	ms
---	-----	----	----	----	-----	----

Committee passed multiple motions to extend the meeting.

X Passed

Print Date: 1/11/2018 10:19 am Leagis ® Page 16 of 16



Bill Amendment Bill/PCS/PCB Number:	
Amendment Number:	
Name: Mitch Katz	
Representing: Yothelry Black	
Title: Commussione	
Address: LOON.WISAU	
City: Dela Real State/Zip: FC 33478	
Phone Number: 454 \$73.5370 Meeting Date:	
Committee/Subcommittee: House Hell	
Presentation/Workshop Topic: $\mathcal{B} \mathcal{A} \mathcal{I}$	
Registered Lobbyist: YES NO	
State Employee: YES NO 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 Waire in Suppor	pt
Amendment: Proponent Opponent Info only	



BILL BUNKLEY Bill Amendment Bill/PCS/PCB Number: HB 21 Amendment Number:
Representing: FLORIDA ETHICS AND RELIGIOUS LIBERTY COMMISSION
Title: PRESIDENT
Address: Po Box 391644
City: TAMPA State/Zip: R 33694
Phone Number:
Committee/Subcommittee: H HEAVTH QUALITY SUB
Presentation/Workshop Topic: Controlles SUBSTANCES
Registered Lobbyist: YES NO NO
State Employee: YES NO V
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 Info
Amendment: Proponent Opponent Info only Info o



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: Mayor Cary Glick	-Steen
Representing: City of Delra	y Beach
Title: May or	
Address: 101 NW 155 AJ	e
city: Delray Beach	State/Zip: FL 33423
Phone Number: 561 - 243 - 7010	Meeting Date:
Committee/Subcommittee:	d Substances
Presentation/Workshop Topic:	
Registered Lobbyist: YES	□ NO □
State Employee: YES	□ NO □
I wish to speak	AND BITTERS
Appearing in response to an inquiry for information Appearing in response to subpoena	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	1
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
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: H3 2
	Amendment Number:
Name: BRANDON LUSKIN	a de la companya de
Representing: <u>Self, Polm Beach (</u> Title:	County Medical Society medic
Address: 2828 S. Sexuest	Blud
city: Brynton Blach FL	State/Zip: <u>33435</u>
Phone Number: <u>561 734-5080</u>	
Committee/Subcommittee: Health	
Presentation/Workshop Topic:	
Registered Lobbyist: YE	es No No
State Employee: YE	s 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 you	ur 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:
	Amendment Number.
Name: Men & BISHOP	
Representing: Florida Physic	al Therapy Association
Title: Associate Pup	· •
Address: 101 S. Newell Diwe	±1154
city: Ganesville	State/Zip: FL 32609
Phone Number: 352 273 6112	Meeting Date: $1/10/18$
Committee/Subcommittee: Hearth	Qualify
Presentation/Workshop Topic: Opword	s'/ Confro (lod substances
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 at the written request of the shair	
Appearing at the written request of the chair Judge or elected officer appearing in official capacit	M
Lobbyist Appearance form submitted online	y
2000) ist Appearance form sub-initial officers	
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: 2 Amendment Number:
	Chris Aland	
Represei	nting: Florida Neuronigical Societ	JFI Society of Thoracic + Cardonice
Title:		Jorgoon
Addre	ess: 1000 Riverside Are +	1240
Phone	Sacksonulle Number: 907-233-3051	Meeting Date: \(\left\) \(\left\) \(\left\)
	nittee/Subcommittee: <u>Health Qualit</u>	
Presei	ntation/Workshop Topic:	
	Registered Lobbyist: YES	NO NO
	State Employee: YES	□ NO □
A A Ju	wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair audge or elected officer appearing in official capacit obbyist 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.)
В	Bill: Proponent Opponent	Info only
Α	Amendment: Proponent Opponent	Info only



·	Bill Amendment Bill/PCS/PCB Number: 2 /
	Amendment Number:
Name: Browster Bevis	
Representing: V-)SSOC and Indus-	tries Of Florida
Title: Senior VD	
Address: 576 w Ad - 5	
City: TC+	State/Zip: FC 32301
Phone Number: 224-2133	Meeting Date: 1/10
Committee/Subcommittee: Health (2	luality
Presentation/Workshop Topic:	d Substances
Registered Lobbyist: YES	NO 🗌
State Employee: YES	NO U
I wish to speak Appearing in response to an inquiry for information of the 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	
Bill: Proponent Opponent	Info only Waire in support
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: HB 21 Amendment Number:			
Jame: Joe Anne Hart			
epresenting: Florida Deptal Association			
epresenting: Florida Depthal Association Title: Chief Legislature officer			
Address: 118 Rast Jefferson Street			
City: Tallahassee State/Zip: Tr 32301			
Phone Number: (850) 224.1089 Meeting Date: 1/10/18			
Committee/Subcommittee: Health Quality			
Presentation/Workshop Topic: Controlled Substances			
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			
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: Melissa Ramba Representing: Flonda Petail Federa Title: VP Gov't Affairs	Aion
Address: 227 S. Adams St. City: Tallahassee Phone Number: 850-222-4082	State/Zip: FL
Committee/Subcommittee: HPalth Quant Presentation/Workshop Topic: Registered Lobbyist: YES	ty
State Employee: YES	
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



Name: Bryan Campball	Bill/PCS/PCB Number: HB21 Amendment Number:
Name: Bryan Campbell Representing: Duval, Nussau and Cl Title: CED	
Address: 1301 Riverplace Blud	Snite # 1638
city: Jacksonville	State/Zip: FL 32207
Phone Number: 904 - 353 - 7536	Meeting Date:
Committee/Subcommittee: Health Quility	·
Presentation/Workshop Topic:	
Registered Lobbyist:	YES NO 🗹
State Employee:	YES NO V
I wish to speak Appearing in response to an inquiry for inform Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official ca 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 V Oppor	nent Info only
Amendment: Proponent Oppor	nent Info only



77286981



COMMI		
Please fill out		 -

Name:	Michael Jackso			
Representing:	Florida Pharma	1/4 m	-,	
Title:				
Address:	610 N Adams S			
City:	Tallahassee	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Phone Number	: (850) 222-2400			
Committee/Sub	ocommittee:	-		
Presentation/W	orkshop Topic			
Appearing i	oyee			
☐ Judge or ele	ected officer appearance For			



77286981



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 Amendment	
		Bill Number	mber: N/A	
		Amendment:	N/A	
Name:	Michael Jackson			
Representing:	Florida Pharmacy Asso	ociation		
Title:				
Address:	610 N Adams St, 610 N	Adams St		
City:	Tallahassee	State/Zip:	FL	
Phone Number:	(850) 222-2400	Meeting Date:	January 10, 2018 4:00 PM	
Committee/Sub	committee: Health	Quality Subcommittee		
Presentation/Wo	orkshop Topic: HB21	1.97.03 August and Barrier values (1.9)		
	·			
Registered Lobbyist		<u>Bill</u>		
State Employee		Proponent		
☑ I Wish To Speak		Amendment		
Appearing in response to subpoena		N/A		
		• • • • • • • • • • • • • • • • • • •	member, committee or staff	
	the written request of			
	ted officer appearing i	<u> </u>		
☐ Lobbyist App	pearance Form Submit	ted		



					Bill Amendment S/PCB Number:
Title	senting:	erican Y	Massa	0	theapy Assoc
City Pho Con	one Number: $ extstyle rac{ extstyle exts$	B~129 50-501- mittee: <u>Ha</u>	J502		State/Zip: 32563 Meeting Date: 110 8 Sobrani Hel-
110.	scittation, works		obbyist: YES yee: YES		0
	Appearing in resp Appearing at the Judge or elected	ponse to an inquiry for ponse to subpoena written request of the officer appearing in cance form submitted	ne chair official capacity	·	nember, committee, or staff
If you a	are testifying on an a	Proponent Proponent	o indicate your p	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:	
Name: JIII Gran	
Representing: Florida Behavioral Health Association	
Title: Sr Policy Adviso-	
Address: 2818 Mahan Dr	
City: Tallahassu State/Zip: 62/30365	
Phone Number: \$789190 Meeting Date: 1018 Committee/Subcommittee: Halk Calaby 5 who	
Presentation/Workshop Topic:	
Registered Lobbyist: YES NO NO	
State Employee: YES NO	
I wish to speak Wall 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 Waives in SUPP	F.
Amendment: Proponent Opponent Info only	



	Bill Amendment Bill/PCS/PCB Number: 21
	Amendment Number:
Name: Andrew Fav	
Representing: Department of	Legal Af Fairs
Title: <u>Special Counsel</u>	<u></u>
Address: PL 01	
City: Tallahousee	State/Zip:
Phone Number: 850-245-01-55	Meeting Date:
Committee/Subcommittee: Hallh C	
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 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 bill as a whole.)
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only Watle in Support



	Bill Amendment Bill/PCS/PCB Number: 2/
$\sim 11 M_{\odot}$	Amendment Number:
Name: St. Hlan M	1/lee
Representing: Nossav Ovi	to Medica Societa
Physician + Du Var	Canty Opioid Tosh Force
Address: 1865 Line So	f ste 101
city: Fernandina	Beach State/Zip: FL 320 EY
Phone Number: 90432	2412 Meeting Date: 1/10/18
Committee/Subcommittee: <u>Hea</u>	1th Quality
Presentation/Workshop Topic:	pioid Bill
Registered	Lobbyist: YES NO 1
State Emplo	oyee: YES NO NO
I wish to speak	
	or information made by member, committee, or staff
Appearing in response to subpoena	
Appearing at the written request of t	
Judge or elected officer appearing in	
Lobbyist Appearance form submitted	online
(If you are testifying on an amendment, please al	so 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: 573
111:501 6 (101/1	Amendment Number:
Name: HILLAY	PC , .
Name: AllisuH S. (ARVA), Representing: Mirida Hunse Phace	etitioner Hetwork
Title: <u>CMSulfant</u>	
Address: 120 S. Monro E ST.	
city: TAllahassel M.	State/Zip: 32312
Phone Number: 121- 70 87	Meeting Date: 1-10-18
Committee/Subcommittee: Health Or	nality
Presentation/Workshop Topic:	
Registered Lobbyist: YES	NO [
State Employee: YES	
State Employee.	
I wish to speak Waive IN Supering 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	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 Waive in support
Amendment: Proponent Opponent	Info only



		Bill Amendment Bill/PCS/PCB Number: 5 3 3
Name: Chris Flo	, y d	Amendment Number:
Representing: Fland		
Title:		
Address: 10/ & Cd	Ilege AV.	e ste 301
City: Tallahassee		ĵ
Phone Number: 8/3-6	14-5117	Meeting Date: 1/10/2018
Committee/Subcommittee:	,	ľ
Presentation/Workshop Topic:		
	e Employee: YES	
I wish to speak Appearing in response to an Appearing in response to sub Appearing at the written req Judge or elected officer appear	inquiry for information opoena uest of the chair	n made by member, committee, or staff
Lobbyist Appearance form su	_	•
	•	Info only Waive in Support
Bill: Proponen		
Amendment: Proponen	t Opponent	Info only



				Amendment ber: [-] 5 7 3 ber:
Name: Workilling Representing: Representing: Representing: Representing: Representing: Representing Assistance (15)	s of Norse			
Address: 315 S. Call City: Tallahasses Phone Number: 8002 Committee/Subcommittee	120576V		State/Zip: Meeting D	Fi 32308 Date: 1/10/18
Presentation/Workshop		byist: YES	NO NO	
Appearing in response Appearing in response Appearing at the writt Judge or elected office Lobbyist Appearance f	e to subpoena en request of the o er appearing in offi	chair cial capacity	e by member, com	mittee, or staff
		odicate your position	on as a proponent or Info only	opponent on the bill as a whole.)
Amendment: Pro	ponent	Opponent	Info only	



	Bill Amendment Bill/PCS/PCB Number: 573
	Amendment Number:
Name: Yng Ma K	11.2
Representing:	
Address: 37/2 Longih	man Cir
, J	
City: Tallahassee	State/Zip:
Phone Number: 850-5/0-750	Meeting Date: 1/10/2011
Committee/Subcommittee:	Questife
Presentation/Workshop Topic: Bake	Act
Registered Lobbyist: YES	5 NO NO
State Employee: YES	NO 🗌
I wish to speak	
Appearing in response to an inquiry for information Appearing in response to subpoena	n made by member, committee, or staff
Appearing in response to subpoen a Appearing at the written request of the chair	
Judge or elected officer appearing in official capaci	tv
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



			Г				•
				Bill/PC	Bill S/PCB Num	Amendment ber: <u>573</u>	
				Amend	ment Num	ber:	
Name	StAN	whit	Laken	<u> </u>			
Repres	senting: $P/$	ANP					
Title	e: Chair	MAN					
Add	Iress: 12294	NW TON	reyA.	ok d	21	_	
	Bristol	1	l li			F1 32321	
	,	50-545-8	3301			oate:	
Con	nmittee/Subcom	mittee:					
Pre	sentation/Works	nop Topic:					
		Registered Lo	obbyist: YES	N	o 🔀		
		State Employ	yee: YES	N	0. 2		
	I wish to speak						
7	•	onse to an inquiry fo	or information	made by m	ember, com	nmittee, or staff	
\Box	Appearing in resp	onse to subpoena		·	·		
	Appearing at the	written request of th	e chair				
Ħ	Judge or elected	officer appearing in c	official capacity	/			
	Lobbyist Appeara	nce form submitted	online				
(If you a	are testifying on an a	mendment, please also	o indicate your p	oosition as a	proponent o	r opponent on the bill as a whole.)	
	Bill:	Proponent 🔀	Opponent		Info only		
	Amendment:	Proponent	Opponent		Info only		



State Employee: YES NO				-				
Representing: Florida Medical Association Title: Assistant General Carsel Address: 1430 Pedmont Cr E City: TH State/Zip: Fc/37338 Phone Number: 850 204 6496 Meeting Date: 1/10/18 Committee/Subcommittee: Heath Quality Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: YES NO STATE THE YES TO STATE THE YES					Bill/PC			nt
Title: ASSISTANT GENEVAL (QUASS) Address: 1430					Amend	dment Number:		
Title: ASSISTANT GENEVAL (QUASS) Address: 1430	Name: _	Mary	Tromas	la la companya di santa di sa				
Address: 1430 Piedroot Or E City: TH State/Zip: FC /37338 Phone Number: 850 234 6496 Meeting Date: 1/10/18 Committee/Subcommittee: HCGHh QUQIT G Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: YES State E		J	•	ical de	socia	tion		
Address: 1430 Prediction Of E City: THE State/Zip: FC / 37308 Phone Number: 850 234 646 Meeting Date: 1/10/18 Committee/Subcommittee: HCGHh Qualt G Presentation/Workshop Topic: NO State Employee: YES NO State Employee: YES NO Modern No Meeting Date: 1/10/18 I wish to speak NO Meeting Date: 1/10/18 Registered Lobbyist: YES NO Meeting Date: 1/10/18 I wish to speak NO Meeting Date: 1/10/18 I wish to								
City:								
Committee/Subcommittee: Health Quality Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: No State Employee: YES NO State Employee: No State Employee: YES NO State Employee: YES NO State Employee: No State			112411111			State/Zip:	<u>(/37308</u>	
Committee/Subcommittee:	Phon	e Number:	50 227 649	6		Meeting Date	: 1/10/18	
Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: NO State Employee: YES NO State Employee: NO State	Comr	mittee/Subcom	mittee: <u>HCG</u> F	th Que	ilit ca	-		
Registered Lobbyist: YES NO State Employee: YES NO NO State Employee: YES NO					0		· ·	
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 Waive in Supple				hhvist: YFS	M N			
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 Maive in Suppire					_	□		
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 Maive in Supplies	ı	wish to speak						
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 Waive in Supple		Appearing in resp	oonse to an inquiry for	· information	made by n	nember, committe	ee, or staff	
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 Waive in Supple	=							
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 Waive In Suppire			·					
(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 Maive In Suppression		_		·	/			
Bill: Proponent Opponent Info only Waive in Suppir	<u>(v)</u>	zobbyłot Appeara	mice form submitted o	,,,,,,,,				
	(If you are	e testifying on an a	mendment, please also	indicate your p	position as a	proponent or opp	onent on the bill as	a whole.)
	E	Bill:	Proponent 🔽	Opponent		Info only	Waire	in Supp"
		Amendment:	Proponent	Opponent		Info only	. • •	•



~~			_					
				Bill/PCS/PCB		Amendmei	nt 	
	\sim		ľ	Amendment N	Jumber:			ı
	()	1	L	Amendment	variber			
Name:	Kon V	Calan						
Represe	enting:	duife As	seciation	n of F	lorida			-
Title:	tivedial:							
		Mundan	Way					-
City:	Tallahra	jel	/	State,	/Zip:FC	. 323	<u>scq</u>	-
Phon	e Number: 8	50 567	1702	Meet	ing Date:	1/10/13	<	-
Com	mittee/Subcomr	nittee:						
		nop Topic: 4λ	Inter Tax	11.10	. 1.	7.	- 1	14.
Prese	entation/Worksh	op Topic: /10	MIR JULI	Ment Ne	120 MN	to to	1/4/	1100
		Registered L	obbyist: YES	NO 🗌			17. Y	17
		State Employ	/ee: YES	□ NO X				
M	I wish to speak							
	Appearing in resp	onse to an inquiry fo	r information	made by member,	committee,	or staff		
	Appearing in resp	onse to subpoena						
	Appearing at the v	written request of th	e chair					
ر 🗍	Judge or elected o	officer appearing in c	official capacity	•				
	Lobbyist Appeara	nce form submitted	online					
(If you are	e testifying on an ar	mendment, please also	o indicate your p	osition as a propone	ent or oppone	nt on the bill as	a whole	·.)
E	Bill:	Proponent	Opponent	Info or	nly 🔲	Walve	in :	support
Į.	Amendment:	Proponent	Opponent	Info o	nly 🔲			



				Bill/PC	Bill S/PCB Number:	Amendment 673	
				Amen	dment Number:		_
Name	Corin	ine Mix	(0/1				_
Repre	esenting: Flo	rida A	cader	ny c	+ phy	sician as	Sistance
		nment (Lant	ں ·		
Ado	dress: 10	S Monro	e Str	ret	#200	<u> </u>	_
City	y: Tallaha	isse			State/Zip:F	1, 32301	
	· • • • • • • • • • • • • • • • • • • •	50-481-0	e877		Meeting Date	1/10/18	
Cor	mmittee/Subcom	mittee: Heal-	th Q	valita	Sube	onittee	
	esentation/Works						
		Registered L	obbyist: YES		ю 🗌		
		State Emplo	yee: YES		10 🔽		
	/						
\mathbb{R}	I wish to speak	ponse to an inquiry fo	or information	mada hu m	ambar cammitt	oo or staff	
		ponse to an inquiry it ponse to subpoena	or imormation	made by n	iember, commitu	ee, or stan	
		written request of th	ne chair				
	Judge or elected	officer appearing in o	official capacit	У			
	Lobbyist Appeara	ance form submitted	online				
If you a	are testifying on an a	amendment, please also	o indicate your	position as a	proponent or opp	onent on the bill as a who	le.)
	Bill:	Proponent \	Opponent		Info only	waive in	Support
	Amendment:	Proponent	Opponent		Info only		* *



		Bill Amendment Bill/PCS/PCB Number: HB 673
		Amendment Number:
Name: 🗡	Andrea K. Friall	M
Represent	ing: America College o	DOBLGYN (AEOG)
Title:		
Address	: 1304 Live Oak Plant	ation Road
City:	allahassee	State/Zip: FL 32312
Phone N	lumber: 800-900-0371	Meeting Date: 1/10/2015
Commit	tee/Subcommittee:	
Presenta	ation/Workshop Topic:	cere, adverse insident reporting
	Registered Lobbyist: YE	s No No
	State Employee: YE	s No
I wis	sh to speak	
П Арр	earing in response to an inquiry for informatio	n made by member, committee, or staff
Арр	earing in response to subpoena	
Арр	earing at the written request of the chair	
	ge or elected officer appearing in official capac	ity
Lob	byist Appearance form submitted online	
(If you are te	stifying 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 Walve in Juppart
Ame	endment: Proponent Opponent	Info only



			_		
				Bill/PCS/PCB Number:	·
	ì			Amendment Number:	
Name:	Th	4 Mouns			
			[]	loca of MR	/ (M)/,
Repres	enting:	1 Plane	tur (0)	par of Or	04113
Title	: <u>Má</u>	nague stra	my 1	Pallan farther	<u>></u>
Addı	ress: 360G	Washington	Road	•	
	Not			State/Zip:	L
Phor	ne Number: <u>56</u>	01-310-813-	7	Meeting Date:	1-10-17
			0.11		
Com	mittee/Subcom	mittee:	Muni		
Pres	entation/Works	hop Topic:			
		Registered Lob	bbyist: YES	NO 🗌	
		State Employe	ee: YES [NO 🗌	
	I wish to speak				
\equiv	•	oonse to an inquiry for	information r	nade by member, committe	ee, or staff
		oonse to subpoena			
$\overline{\Box}$	Appearing at the	written request of the	chair	waid in S	
	Judge or elected	officer appearing in off	ficial capacity	Walle	
	Lobbyist Appeara	ance form submitted or	nline		
(If you ar	re testifying on an a	ımendment, please/also i	indicate your p	osition as a proponent or oppo	·
	Bill:	Proponent	Opponent [Info only	wave in suppl
	Amendment:	Proponent	Opponent [Info only	



				Bill/PCS/PCB Num Amendment Num	ber: <u>973</u>	ndment	
	Mary J						_
Repres	enting: Flor	ida Medica	I Assoc	iation			
Title	: Assistay	nt Grenor	al Coun	sel			
Addı	ress: 1430 4	Predmont [) C				
	TLH			State/Zip	: FC 30	236	
Phor	ne Number:	502246	496	Meeting I	Date: <u>//し</u>	(1 8	
		mittee: Ha	_				
Pres	entation/Works	hop Topic:					
		Registered L	obbyist: YES	✓ NO ☐			
		State Employ	yee: YES	□ NO ☑			
	Appearing in resp Appearing at the Judge or elected of	oonse to an inquiry fo oonse to subpoena written request of th officer appearing in c nce form submitted	ne chair official capacity	made by member, com	nmittee, or staff		
(If you ar	re testifying on an a	mendment, please also	o indicate your p	position as a proponent o	r opponent on the	•	
	Bill:	Proponent	Opponent	Info only		Warve	MD
	Amendment:	Proponent	Opponent	Info only			oppositio



Ві	Bill Amendment II/PCS/PCB Number: 973
A	mendment Number:
Name: Chris Mand	
Representing: Marida Chapter, American	· College of Phyricians
Title:	
Address: 1000 Riverside Ave #24	'O
city: Jacksonville	State/Zip: (2 322 C 4
Phone Number: 907-233-3051	State/Zip: 12 32209 Meeting Date: 1/10/19
Committee/Subcommittee: <u>Health</u> Qual	
Presentation/Workshop Topic:	
Registered Lobbyist: YES	NO 🗍
State Employee: YES	
I wish to speak Appearing in response to an inquiry for information made 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	by member, committee, or staff
(If you are testifying on an amendment, please also indicate your position of the base of	n as a proponent or opponent on the bill as a whole.)
Amendment: Proponent Opponent Opponent	Info only



	Bill Amendment Bill/PCS/PCB Number: HB 973 Amendment Number:
Name: Dorene Barker Representing: AARP Florida Title: Associati State Direct	
Address: Joh W. Cillege Ave	State/Zip: Flaida 3230
Phone Number: 850-228-6387 Committee/Subcommittee: Health Quence Presentation/Workshop Topic: Peformance	Meeting Date: Jan 10, 2018 Lotily - of Physician Asst + ARNP's
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 Amendment: Proponent Opponent	Info only Waive in Support



Name: Stan Whittaken	Bill Amendment Bill/PCS/PCB Number: 973 Amendment Number:
Representing: ANP Title: Chair MAN Address: 6394 NW 125000	A DK RC
City: Brisks / Phone Number: 850-545-836 / Committee/Subcommittee:	State/Zip: 132324 Meeting Date:
Presentation/Workshop Topic: Registered Lobbyist: YES State Employee: YES	NO 🔀
I wish to speak Appearing in response to an inquiry for information ma 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	de by member, committee, or staff
(If you are testifying on an amendment, please also indicate your posi Bill: Proponent Opponent Opponent Opponent	Info only Info o



	í	is 1. f	Am	nendment Nun	mber:	Amendment		
Name	::	15 1. 1-	-104C					
Repre	esenting:	AMP			i sa constant			
		V						
				~				
Add	dress: <u>/ <i>U</i> </u>	E Callege	- NVC 374	- 302				
City	y: Tallal	4256ee 313-624		State/Zip): <u> </u>	32301		
Pho	one Number:	313-624	5117	Meeting	Date: /	118/2018	,	
Cor	mmittee/Subcon	nmittee:					<u></u>	
Pre	esentation/Work	shop Topic:						
		Registered L	obbyist: YES	NO 🗌				
		State Emplo	yee: YES	ио 🔀	·			
	Appearing in res Appearing at the Judge or elected	ponse to an inquiry for ponse to subpoena e written request of the officer appearing in connection of the officer appearing in connecti	ne chair official capacity	ογ member, con	nmittee, o	r staff		
(If you	are testifying on an	amendment, please als	o indicate your position	as a proponent c	or opponent	on the bill as a w	hole.)	
	Bill:	Proponent 🔀	Opponent	Info only		Waire		Suppor
	Amendment:	Proponent	Opponent	Info only				



	Bill Amendment Bill/PCS/PCB Number: Amendment Number:
Name: Allison CARVAJAL Representing: Florida Hurse Pract Title: Consultant Address: 120 S Monroe ST.	Honer Network
City: TALVA# AGSEE, FL Phone Number: 850-727-7087 Committee/Subcommittee: Halfn Qualif Presentation/Workshop Topic: HB MM 9	
Registered Lobbyist: YES State Employee: YES	NO NO
I wish to speak WAIVG IN SW 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 plant) Bill: Proponent Opponent Amendment: Proponent Opponent	position as a proponent or opponent on the bill as a whole.) Info only Info



	Bill Amendment Bill/PCS/PCB Number: 973 Amendment Number:
Covinne Miran	
Name: Corinne Mikon	
Representing: Flovida Acade	my of physician assistance
Title: Government Con	Sultant
Address: 119 5 Monare	street # 202
City: Tallahassee	State/Zip: FC 3030
Phone Number: 850-65/1-67	Meeting Date: 4/0//8
Committee/Subcommittee: Health	quality Subcorningtee
Presentation/Workshop Topic:	J
Registered Lobbyis	t: YES NO
State Employee:	YES NO V
I wish to speak	
Appearing in response to an inquiry for infor	mation 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 of the Lobbyist Appearance form submitted online	capacity
Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicat	te your position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Oppo	onent Info only I Walle in Support
Amendment: Proponent Oppo	onent Info only



	Bill Amendment Bill/PCS/PCB Number: 973
	Amendment Number:
Name: Young Mai Ka	ing
Representing:	
Title: Dr. ARNP	
Address: 3712 Longeh	emp Cer
City:	State/Zip:
Phone Number: 550 - 5/0 - 7500	Meeting Date: 1110 7017
Committee/Subcommittee:	real. for
Presentation/Workshop Topic:	re Audhortes
() Registered Lobbyist: YES	2 NO
State Employee: YES	NO D
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	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 Waives in support
Amendment: Proponent Opponent	Info only



	Bill Amendment Bill/PCS/PCB Number: 973
	Amendment Number:
Name: LOI Killinger	
Representing: FL ASSOC of Norse Anest	hets/s
Title: altray/lobbyist	
Address: 315 S. Calhoun St.	
City: Tayakesse	State/Zip: [2] 32306
Phone Number: <u>850 200 5702</u>	Meeting Date:
•	
Committee/Subcommittee:	·
Presentation/Workshop Topic:	
Registered Lobbyist: YES	NO 🗌
State Employee: YES	NO NO
I wish to speak Appearing in response to an inquiry for information	made by member committee or staff
Appearing in response to subpoena	Thade 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 bill as a whole.)
Bill: Proponent Opponent	Info only Waite in support
Amendment: Proponent Opponent	Info only



				Bill/PCS/F	Bill PCB Numb	Amendment err.
				Amendm	ent Numb	er:
Name:	Hov	WARD GI	INN J			
Represen	nting:	L-Blac	KTA	mer	Asso	
	7					
		015.14.	15th	SI		
		(, FC			tate/Zip:_	TC
Phone	Number:	352-572	-1063	N	Meeting Da	ate:
		nittee:				
		op Topic:				
	•	Registered Lo				
		State Employ	-			
mark of the second	ar T		· · · · · · · · · · · · · · · · · · ·		<u></u>	
✓ Iv	wish to speak					
Ap	ppearing in respo	onse to an inquiry for	r information r	nade by men	nber, comn	nittee, or staff
Ap	ppearing in respo	onse to subpoena				
Ap	ppearing at the v	written request of the	e chair			
Ju	idge or elected o	officer appearing in o	fficial capacity			
Lo	obbyist Appearar	nce form submitted c	online			
If you are t	testifying on an ar	nendment, please also	indicate your p	osition as a pro	oponent or o	opponent on the bill as a whole.)
Bi	ill:	Proponent	Opponent [√ ir	nfo only	
Ar	mendment:	Proponent	Opponent [lr	nfo only	



Bill Amendment Bill/PCS/PCB Number: WOM9 Amendment Number: Amendment Number: Amendment Number: Amendment Number: Self State/Zip: Title: Address: PO BOX UIVS State/Zip: Title: Address: PO BOX UIVS State/Zip: Toulta State/Zip: Toulta State/Zip: Toulta State/Zip: Toulta State/Zip: Toulta State/Zip: Toulta State/Zip: Phone Number: Session State Session State State State/Zip: Toulta								
Title:		Bill/PCS/PCB Number: 6049						
Title:	Name: John Hightower							
Address: PO BOX UIVS City: TCM IC	Representing: Self							
Phone Number: 65051903(03 Meeting Date: 1/10/18 Committee/Subcommittee: House Hearth Quality Sub Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: YES NO I wish to speak Appearing in response to an inquiry for information made by member, committee, or staff Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online (If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.) Bill: Proponent Opponent Info only Walke In Supplementary Walke In Supplementary Note In Supplementar	Title:							
City: TCU IC Phone Number: 65051903(03	Address: Po Box 41US							
Phone Number: 65051903(03 Meeting Date: 1/10/18 Committee/Subcommittee: House House Sub Presentation/Workshop Topic: Registered Lobbyist: YES NO State Employee: YES NO I wish to speak Appearing in response to an inquiry for information made by member, committee, or staff Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.) Bill: Proponent Opponent Info only Walke In Supplementary Info only Walke In Supplementar		State/Zip:						
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 Note In Supplementary	Phone Number: 85051903(03							
Presentation/Workshop Topic: Registered Lobbyist: YES NO NO State Employee: YES NO NO NO NO NO NO NO NO NO N		•						
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 Walle In Supple								
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 Walle In Supplementary								
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 Walle In Supple	Registered Lobbyist: YES	,						
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 Make In Supple	State Employee: YES	, NO						
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 Make In Supple	Lwish to speak							
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 Walle In Supple		n made by member, committee, or staff						
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 Walle in Supple								
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 I	Appearing at the written request of the chair							
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 Malle in Supple	Judge or elected officer appearing in official capacit							
Bill: Proponent Opponent Info only Info only In Supple	Lobbyist Appearance form submitted online							
Bill: Proponent Opponent Info only Info only In Supple								
	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 I walle in Supple						
Amendment: Proponent Opponent Info only	Amendment: Proponent Opponent							



					Bill Amendment		
				Bill/	/PCS/PCB Number: 6279		
				Ame	endment Number:		
Name:	Latre	12 -12	500				
Repre	senting:	Jack F	cone		i a go columbiate to		
Title	e: <u>\$ & C</u>	<u>\</u> 05					
Add	Iress: 333	50 100 Z	rus de				
City	:_022	.5		<u>_</u>	State/Zip: The Jymp > 5		
Pho	ne Number: <u>S</u>	52-425-5	547~		Meeting Date: Y / Is\		
Con	nmittee/Subcom	mittee:	· chi	<u>ې_</u>	<u></u>		
Pre	sentation/Works	hop Topic:			•		
		Registered Lo	obbyist: YES		NO 🔀		
		State Employ	/ee: 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 Appeara	ance form submitted	online				
If you a	re testifying on an a	amendment, please also	o indicate your p	osition a	as a proponent or opponent on the bill as a whole.)		
	Bill:	Proponent	Opponent		Info only		
	Amendment:	Proponent	Opponent [Info only		