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# Health Innovation Subcommittee

**Wednesday, January 10, 2018  
12:30 PM – 1:30 PM  
Mashburn Hall (306 HOB)**

## **Action Packet**

# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

### Summary:

#### Health Innovation Subcommittee

*Wednesday January 10, 2018 12:30 pm*

HB 289	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 426471 Adopted Without Objection		
HB 293	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 673363 Adopted Without Objection		
CS/HB 551	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 940391 Adopted Without Objection		

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM

# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

**Attendance:**

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
MaryLynn Magar (Chair)	X		
John Cortes	X		
Manny Diaz, Jr.	X		
Nicholas Duran	X		
Jason Fischer	X		
Roy Hardemon	X		
Shawn Harrison	X		
Patrick Henry	X		
Bobby Payne	X		
Bob Rommel	X		
Jackie Toledo	X		
Jay Trumbull	X		
Frank White	X		
Clay Yarborough	X		
<b>Totals:</b>	<b>14</b>	<b>0</b>	<b>0</b>

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM

# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

### HB 289 : Provision of Pharmaceutical Services

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes	X				
Manny Diaz, Jr.	X				
Nicholas Duran	X				
Jason Fischer	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Bobby Payne	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull	X				
Frank White	X				
Clay Yarborough	X				
MaryLynn Magar (Chair)	X				
	<b>Total Yeas: 14</b>	<b>Total Nays: 0</b>			

### HB 289 Amendments

#### Amendment 426471

Adopted Without Objection

### Appearances:

Provision of Pharmaceutical Services

Fraser, Towson (Lobbyist) - Waive In Support

AIDS HealthCare Foundation

115 E Park Ave Suite 1

Tallahassee FL 32301

Phone: (850) 443-1444

Provision of Pharmaceutical Services

Sanford, Paul (Lobbyist) - Opponent

Florida Blue, Florida Insurance Council

106 South Monroe Street

Tallahassee FL 32301

Phone: (850) 222-7200

Provision of Pharmaceutical Services

Ryan, Joy (Lobbyist) - Opponent

AHIP - America's Health Insurance Plans/Prime Therapeutics

300 S. Duval St., Suite 410

Tallahassee FL 32312

Phone: (850) 425-4000

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM



# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

**HB 293 : Florida Kidcare Program**

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes	X				
Manny Diaz, Jr.	X				
Nicholas Duran	X				
Jason Fischer	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Bobby Payne	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull	X				
Frank White	X				
Clay Yarborough	X				
MaryLynn Magar (Chair)	X				
<b>Total Yeas: 14</b>		<b>Total Nays: 0</b>			

### HB 293 Amendments

#### Amendment 673363

Adopted Without Objection

### Appearances:

Florida KidCare Program

Liem, Amy (Lobbyist) - Waive In Support

Florida Legal Services

Director of Policy & Advocacy

603 N Martin Luther King Jr. Blvd

Tallahassee FL 32301

Phone: (407) 801-4339

Florida KidCare Program

Woodall, Karen (Lobbyist) - Waive In Support

Florida Center for Fiscal & Economic Policy

Executive Director

579 E Call St

Tallahassee FL 32301

Phone: (850) 321-9386

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM

# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

**HB 293 : Florida Kidcare Program (continued)**

**Appearances: (continued)**

Florida KidCare Program

Reid, Tara (Lobbyist) - Waive In Support

The Children's Movement of Florida

Senior Associate

200 W College Ave

Tallahassee FL 32302

Phone: (386) 530-0426

Florida KidCare Program

Scher, Jessica (Lobbyist) - Waive In Support

United Way of Miami-Dade

Public Policy Director

3250 S.W. 3rd Avenue

Miami FL 33129

Phone: (305) 322-6143

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM





# COMMITTEE MEETING REPORT

## Health Innovation Subcommittee

1/10/2018 12:30PM

**Location:** Mashburn Hall (306 HOB)

**CS/HB 551 : Pub. Rec./Health Care Facilities**

*Favorable With Committee Substitute*

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes	X				
Manny Diaz, Jr.	X				
Nicholas Duran	X				
Jason Fischer	X				
Roy Hardemon	X				
Shawn Harrison	X				
Patrick Henry	X				
Bobby Payne	X				
Bob Rommel	X				
Jackie Toledo	X				
Jay Trumbull	X				
Frank White	X				
Clay Yarborough	X				
MaryLynn Magar (Chair)	X				
<b>Total Yeas: 14</b>		<b>Total Nays: 0</b>			

### CS/HB 551 Amendments

#### Amendment 940391

*Adopted Without Objection*

Committee meeting was reported out: Wednesday, January 10, 2018 1:45PM

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

Committee/Subcommittee: Health Innovation  
 Meeting Date: 1.10.17  
 Place: 306 HOB  
 Time: 12:30 pm

Bill Number: CS/HB 551  
 Date Received: \_\_\_\_\_  
 Date Reported: \_\_\_\_\_  
 Subject: Pub. Rec./Health Care Facilities

**Committee/Subcommittee Action:**

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

Final Vote On Bill		MEMBERS	amend 1 940391								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cortes	Adopted w/o								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Diaz									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Duran									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fischer									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hardemon									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrison									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Henry									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Payne									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Rommel									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toledo									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trumbull									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	White									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Yarborough									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar, Chair									
<b>Yeas</b>	<b>Nays</b>	<b>TOTALS</b>	<b>Yeas</b>	<b>Nays</b>	<b>Yeas</b>	<b>Nays</b>	<b>Yeas</b>	<b>Nays</b>	<b>Yeas</b>	<b>Nays</b>	
14	0										



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### COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: <b>0289 : Provision of Pharmaceutical Services</b> Amendment: N/A
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Name: **Towson Fraser**

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Representing: **AIDS HealthCare Foundation**

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Title:

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Address: **115 E Park Ave, Suite 1**

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City: **Tallahassee** State/Zip: **FL**

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Phone Number: **(850) 443-1444** Meeting Date: **January 10, 2018 12:30 PM**

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Committee/Subcommittee: **Health Innovation Subcommittee**

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

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

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

N/S



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### COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: <b>HB 289 : Provision of Pharmaceutical Services</b> Amendment: N/A
--

Name: **Sanford, Paul**

Representing: **Florida Blue, Florida Insurance Council**

Title:

Address: **106 South Monroe Street**

City: **Tallahassee**

State/Zip:

**FL 32301**

Phone Number: **850-222-7200**

Meeting Date:

**January 10, 2018 12:30 PM**

Committee/Subcommittee: **Health Innovation Subcommittee**

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

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

<u>Bill</u>
<b>Opponent</b>
<u>Amendment</u>
N/A



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>289</u>	
Amendment Number: _____	

Name: Joy Ryan

Representing: America's Health Insurance Plans & Prime Therapeutics

Title: \_\_\_\_\_

Address: 300 S. Duval St., Suite 410

City: Tallahassee, FL State/Zip: 32312

Phone Number: 425-4000 Meeting Date: 1-10-2018

Committee/Subcommittee: Health Innovation

Presentation/Workshop Topic: Pharmaceutical Services

Registered Lobbyist: YES  NO

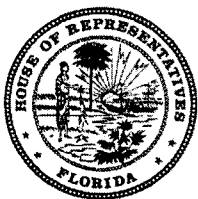
State Employee: YES  NO

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

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent  Opponent  Info only

Amendment: Proponent  Opponent  Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>HB 293</u>	
Amendment Number: _____	

Name: Amy Liem

Representing: Florida Legal Services

Title: Director of Policy & Advocacy

Address: 603 N Martin Luther King Jr Blvd

City: Tallahassee State/Zip: FL 32301

Phone Number: 407-801-4339 Meeting Date: 1/10/18

Committee/Subcommittee: Health Innovation Subcommittee

Presentation/Workshop Topic: HB 293 - Florida Kidcare Program

Registered Lobbyist: YES  NO

State Employee: YES  NO

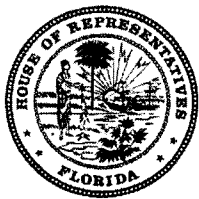
- I wish to speak
- Appearing in response to an inquiry for information made by member, committee, or staff
- Appearing in response to subpoena
- Appearing at the written request of the chair
- Judge or elected officer appearing in official capacity
- Lobbyist Appearance form submitted online

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent  Opponent  Info only

Amendment: Proponent  Opponent  Info only

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill [checked] Amendment [ ]
Bill/PCS/PCB Number: 293
Amendment Number: [ ]

Name: Karen Woodall
Representing: Florida Center for Fiscal and Economic Policy
Title: Executive Director
Address: 519 E. Call St.
City: Tallahassee State/Zip: FL 32301
Phone Number: 850-321-9386 Meeting Date: 1/10/18
Committee/Subcommittee: Health Innovation
Presentation/Workshop Topic: Kidcare

Registered Lobbyist: YES [checked] NO [ ]
State Employee: YES [ ] NO [ ]

- I wish to speak [checked]
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 [checked] Opponent [ ] Info only [ ]
Amendment: Proponent [ ] Opponent [ ] Info only [ ]

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>288 293</u>	
Amendment Number: _____	

Name: Tara Reid (Reed)

Representing: The Children's Movement of Florida

Title: Senior Associate

Address: 200 W. College Ave

City: Tallahassee State/Zip: FL

Phone Number: 386-530-0426 Meeting Date: 1/10/18

Committee/Subcommittee: Health Innovation

Presentation/Workshop Topic: \_\_\_\_\_

Registered Lobbyist: YES  NO

State Employee: YES  NO

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

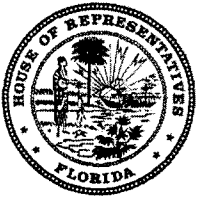
(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent  Opponent  Info only

Amendment: Proponent  Opponent  Info only

W/S





COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill	<input type="checkbox"/> Amendment
Bill/PCS/PCB Number: <u>293</u>	
Amendment Number: _____	

Name: JESSICA SCHER

Representing: United Way of Miami-Dade

Title: Public Policy Director

Address: 3250 SW 3<sup>rd</sup> Ave

City: Miami State/Zip: FL 33129

Phone Number: 305 322-6143 Meeting Date: 1/10/18

Committee/Subcommittee: Health Innovation

Presentation/Workshop Topic: Kid Care

Registered Lobbyist: YES  NO

State Employee: YES  NO

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

(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)

Bill: Proponent  Opponent  Info only

Amendment: Proponent  Opponent  Info only

*W/S*