

## **Health Innovation Subcommittee**

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

**Action Packet** 

# Health Innovation Subcommittee 1/10/2018 12:30PM

Location: Mashburn Hall (306 HOB)

Summary:

**Health Innovation Subcommittee** 

Wednesday January 10, 2018 12:30 pm

Amendment 940391 Adopted Without Objection

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

# Health Innovation Subcommittee 1/10/2018 12:30PM

Location: Mashburn Hall (306 HOB)

#### Attendance:

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

## Health Innovation Subcommittee 1/10/2018 12:30PM

Location: Mashburn Hall (306 HOB)

**HB 289: Provision of Pharmaceutical Services** 

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
John Cortes	X	<del>-</del>			
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				
	Total Yeas: 14	Total Nays:	0		

#### **HB 289 Amendments**

#### Amendment 426471

X 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

Phone: (850) 425-4000

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

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

# House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

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	Vote Bill	MEMBERS	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. O I						
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		Magar, Chair								
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

### **Health Innovation Subcommittee**

1/10/2018 12:30PM

Location: Mashburn Hall (306 HOB)

HB 293: Florida Kidcare Program

X 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	<del></del>			_
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				
	Total Yeas: 14	Total Nays: 0	)		

#### **HB 293 Amendments**

#### Amendment 673363

X 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

## 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

# House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

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	Vote		and	1				:		
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lumb.		Magar, Chair								
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### **Health Innovation Subcommittee**

1/10/2018 12:30PM

Location: Mashburn Hall (306 HOB)

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

X 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				
	Total Yeas: 14	Total Nays:	0		

#### **CS/HB 551 Amendments**

#### Amendment 940391

X Adopted Without Objection

# House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Comm	M Eavorab Eavorab Eavorab Other A	le w/ amen le w/Committee/Subco	HOB PM	D	oate Reco	eived: orted: bject: {	ined for	Reconsider Postpone	Coltain	
Final		MEMBERG	amas	291						
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1/		Magar, Chair								
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays



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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.

		✓	I Bill □ Amendment
		Bill Number: Pharmaceutics	0289 : Provision of al Services
		Amendment:	N/A
Name:	Towson Fraser		
Representing:	AIDS HealthCare Foundat	ion	
Title:			
Address:	115 E Park Ave, Suite 1		
City:	Tallahassee	State/Zip:	FL
Phone Number:	(850) 443-1444	Meeting Date:	January 10, 2018 12:30 PM
Committee/Subo	committee: Health Inne	ovation Subcommittee	
Presentation/Wo	orkshop Topic: N/A	Marketing and the second se	
		· · · · · · · · · · · · · · · · · · ·	
☑ Registered Lo	obbyist		Bill
☐ State Employ			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 the	chair	
U Judge or elect	ted officer appearing in of	ficial capacity	
☐ Lobbyist App	pearance Form Submitted		

N/S



22625086



## COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

		<b>✓</b>	Bill 🗆 Amendment			
		Bill Number: HB 289: Provision of Pharmaceutical Services				
		Amendment:				
Name:	Sanford, Paul					
Representing:	Florida Blue, Florida Insuran	ce 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/Subo	committee: Health Innov	ation Subcommittee				
Presentation/Wo	orkshop Topic: N/A					
Registered Lo	obbyist		Bill			
State Employ			Opponent			
☑ I Wish To Sp	eak		Amendment			
Appearing in	response to subpoena		N/A			
			member, committee or staff			
_ ^^	the written request of the ch					
	ted officer appearing in offi	cial capacity				
Lobbyist App	pearance Form Submitted					



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: 289
	Amendment Number:
Name: Joy Ryan	
V 1 -	1th Insurance Plans
Title:	therapeutics
Address: 300 5. Duval St	t., Suite 410
City: Tallahassee, FL	
Phone Number: 425-4000	Meeting Date: 1 - 10 - 2018
Committee/Subcommittee: Health	Innovation
Presentation/Workshop Topic:PVarme	acentical Services
Registered Lobbyist: YES	NO 🗌
State Employee: YES	NO NO
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	у
Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your	position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



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

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				Sill/PC	Bill S/PCB Number		dment
				Amend	dment Number	:	
Name:	Amy	Liem					
Repres	senting:	orida L	-egal	Ser	v165		
		for 64	5. /				
Add	ress: 603	N Mark	n Luther	- Kin	( Jr.	Bluck	
	: Tallah				/ State/Zip:		301
Pho	ne Number:	107 - 801	-4330	<u> </u>	Meeting Date	e: 1 10	18
Con	nmittee/Subcom	mittee: Hea	1th =	Innov	ation	Subc	ommittee
Pres	sentation/Works	hop Topic: H	13293	, - FI	orda K	dead	Program
		Registered L	obbyist: YES	<b>X</b>	10 🗌		
		State Emplo	yee: YES	N	10 🗌		
	I wish to speak Appearing in resp	oonse to an inquiry fo	or information	made by n	nember, commit	tee, or staff	
		oonse to subpoena					
		written request of the				r	
		officer appearing in ince form submitted		.y			
(If you a	re testifying on an a	mendment, please als  Proponent	o indicate your Opponent	position as a	proponent or op	ponent on the	bill as a whole.)
	Amendment:	Proponent	Opponent		Info only	/	



Please fill out the  $\underline{\text{entire}}$  form and submit  $\underline{\text{both}}$  copies to the Committee Administrative Assistant at the meeting.

	Bill Amendment				
	Bill/PCS/PCB Number: 293				
	Amendment Number:				
Name: Karen Woodall					
Representing: Florida Couter for	fiscal of Economic Policy				
Title: Executive Director					
Address: 519 E. Call St.					
City: Jallahone	State/Zip: <u>F1 3230/</u>				
Phone Number: 850 - 321 - 9386	Meeting Date: 1/10/18				
Committee/Subcommittee: Health Inn	•				
Presentation/Workshop Topic: <u>Kidcave</u>					
Registered Lobbyist: YES	NO NO				
State Employee: YES	NO NO				
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	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 W				
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: 293					
Amendment Number:					
Name: Tara Reid (Reed)					
Representing: The Children's Movement of Florida					
Title: <u>Senior</u> Associate					
Address: 200 W. College Ave					
City: Tallahassee State/Zip: FL					
Phone Number: 386-530-0426 Meeting Date: \ \10/18					
Committee/Subcommittee: <u>Health Innovation</u>					
Presentation/Workshop Topic:					
Registered Lobbyist: YES MO					
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 W					
Amendment: Proponent Opponent Info only					



Please fill out the  $\underline{\text{entire}}$  form and submit  $\underline{\text{both}}$  copies to the Committee Administrative Assistant at the meeting.

					-	
				Bill Amendment  Bill/PCS/PCB Number: 293		
				Amendment Number:		
Name	:	JESSICA	SCH	ter		
Repre	senting:	United u	Jay of	Many-Dade		
Title	e:	Public Pa	Olicy I	Durcter		
Ado	dress:	3250 Si	0/3/	Ave		
City	/:N	11901		State/Zip: <u>F</u>		
		/ i		Meeting Date://0//X		
Con	nmittee/Subcom	nmittee: <u></u>	elt 1	mounton		
Pre	sentation/Works	shop Topic:	Kid	Carl		
		Registered L	obbyist: YES	NO 🗌		
		State Emplo	yee: YES	NO		
	Luciale de encelo					
	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 o	official capacit	су		
区	Lobbyist Appears	ance form submitted	online			
(If you a	are testifying on an	amendment, please also	o indicate your	position as a proponent or opponent on the/bill as a whole.)		
	Bill:	Proponent 🔀	Opponent	☐ Info only ☐ W/S		
	Amendment:	Proponent	Opponent	Info only		