

### **Health Innovation Subcommittee**

Thursday, October 12, 2017 8:00 AM – 10:00 AM Mashburn Hall (306 HOB)

**Action Packet** 

#### **COMMITTEE MEETING REPORT**

# Health Innovation Subcommittee 10/12/2017 8:00AM

Location: Mashburn Hall (306 HOB)

Summary: No Bills Considered

#### **COMMITTEE MEETING REPORT**

### Health Innovation Subcommittee 10/12/2017 8:00AM

Location: Mashburn Hall (306 HOB)

#### Attendance:

	Present	Absent	Excused
MaryLynn Magar (Chair)	X	<del></del>	
Daisy Baez	x	···	
John Cortes	Х		
Manny Diaz, Jr.			Х
Nicholas Duran	x		_
Jason Fischer	X		
Roy Hardemon			X
Shawn Harrison			Х
Patrick Henry	X		
Bobby Payne	x		
Bob Rommel	x		
Jackie Toledo			Х
Jay Trumbull			Х
Frank White	x		
Clay Yarborough	X		
Totals:	10	0	5

#### **COMMITTEE MEETING REPORT**

## Health Innovation Subcommittee 10/12/2017 8:00AM

Location: Mashburn Hall (306 HOB)

#### **Presentation/Workshop/Other Business Appearances:**

Managed Care System
Kidder, Beth (Lobbyist) (State Employee) (At Request Of Chair) - Information Only
Agency for Health Care Administration
Medicaid Director
2727 Mahan Dr Bldg. 3, MS 2
Tallahassee FL 32308
Phone: (850) 412-3612



### COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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:			
	Amendment Number:			
Name: Beth kidder				
Representing: Agency for Hea'	12h Cae 12dministration			
Title: Medicaid Directo	r			
Address: 2727 Mahan D				
City: Tallahassee	State/Zip:_PL 132308			
Phone Number: 650-412-36	Meeting Date: 10/1入りつ			
Committee/Subcommittee: Health Innovation				
Presentation/Workshop Topic: Managed Care System				
Registered Lobb	pyist: YES NO			
	:: 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 in	dicate your position as a proponent or opponent on the bill as a whole.)			
	Opponent Info only			
Amendment: Proponent 0	Opponent Info only			