



Select Committee on Health Innovation

**Monday, December 4, 2023
3:30 PM
Morris Hall (17 HOB)**

Action Packet

**Paul Renner
Speaker**

**Kaylee Tuck
Chair**

Committee Meeting Notice

HOUSE OF REPRESENTATIVES

Select Committee on Health Innovation

Start Date and Time: Monday, December 04, 2023 03:30 pm
End Date and Time: Monday, December 04, 2023 05:30 pm
Location: Morris Hall (17 HOB)
Duration: 2.00 hrs

OPPAGA report: Graduate Medical Education in Florida

Implementation briefing on HB 391 (2023)-Home Health Aides for Medically Fragile Children

To submit an electronic appearance form, and for information about attending or testifying at a committee meeting, please see the "Visiting the House" tab at www.myfloridahouse.gov.

NOTICE FINALIZED on 11/27/2023 4:00PM by Clenord.Judeline

COMMITTEE MEETING REPORT
Select Committee on Health Innovation

12/4/2023 3:30PM

Location: Morris Hall (17 HOB)

Summary: No Bills Considered

Committee meeting was reported out: Monday, December 04, 2023 5:08PM

COMMITTEE MEETING REPORT
Select Committee on Health Innovation

12/4/2023 3:30PM

Location: Morris Hall (17 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Kaylee Tuck (Chair)	X		
Daniel Alvarez	X		
Robert Andrade			X
David Borrero	X		
Joe Casello	X		
Ryan Chamberlin	X		
Karen Gonzalez Pittman	X		
Johanna López	X		
Vicki Lopez	X		
Michele Rayner	X		
Alex Rizo	X		
David Silvers	X		
Kevin Steele	X		
Chase Tramont	X		
Patricia Williams	X		
Totals:	14	0	1

Committee meeting was reported out: Monday, December 04, 2023 5:08PM

COMMITTEE MEETING REPORT
Select Committee on Health Innovation

12/4/2023 3:30PM

Location: Morris Hall (17 HOB)

Presentation/Workshop/Other Business Appearances:

Smoak, Kim (State Employee) (At Request of Member, Committee or Staff) - Information Only
AHCA
Deputy Sec. of Health Care Policy & Oversight
2727 Mahan Drive
Tallahassee FL
Phone: 904-955-0331

Noll, Austin (State Employee) (At Request of Member, Committee or Staff) - Information Only
AHCA
ADS of Medicaid Operations
2727 Mahan Drive
Tallahassee FL
Phone: 904-955-0331

Scott, Wendy (State Employee) (At Request of Member, Committee or Staff) - Information Only
OPPAGA
Staff Director, Health and Human Services
111 W. Madison Street
Tallahassee FL 32312
Phone: 850-717-0500

Graham, Justin (State Employee) (At Request of Member, Committee or Staff) - Information Only
OPPAGA
Staff Director
111 W. Madison St.
Tallahassee FL 32312
Phone: 850-717-0508

Committee meeting was reported out: Monday, December 04, 2023 5:08PM



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill Amendment
Bill/PCS/PCB Number: _____
Amendment Barcode Number: _____

Name: Kim Smoak

Representing: AHCA

Title: Deputy Sec. of Health Care Policy + Oversight

Address: 7727 Mahan Drive

City: Tallahassee State/Zip: _____

Phone Number: (904) 955-6331 Meeting Date: _____

Committee/Subcommittee: Select Committee on Health Innovation

Presentation/Workshop Topic: H13 391

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 Waive in Support Waive in Opposition Info only

Amendment: Proponent Opponent Waive in Support Waive in Opposition Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill [] Amendment []
Bill/PCS/PCB Number: _____
Amendment Barcode Number: _____

Name: Austin Noll

Representing: AHCA

Title: ADS of Medicaid Operations

Address: 2727 Mahan Drive

City: Tallahassee State/Zip: FL

Phone Number: (904) 955-0331 Meeting Date: _____

Committee/Subcommittee: Select Committee Innovation

Presentation/Workshop Topic: HB 391

Registered Lobbyist: YES [] NO [X]

State Employee: YES [X] NO []

- I wish to speak
[X] 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 [] Waive in Support [] Waive in Opposition [] Info only []

Amendment: Proponent [] Opponent [] Waive in Support [] Waive in Opposition [] Info only []



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill [] Amendment []
Bill/PCS/PCB Number: _____
Amendment Barcode Number: _____

Name: Wendy Scott

Representing: DPPAGA

Title: Staff Director, Health and Human Services

Address: 111 W. Madison Street.

City: Tallahassee State/Zip: FL 32312

Phone Number: 850 717-0500 Meeting Date: 12/4/23

Committee/Subcommittee: House Select Committee on Health Innovation

Presentation/Workshop Topic: Graduate Medical Education

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

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

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

Bill: Proponent [] Opponent [] Waive in Support [] Waive in Opposition [] Info only []
Amendment: Proponent [] Opponent [] Waive in Support [] Waive in Opposition [] Info only []



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Committee/Subcommittee: House Select Committee on Health Care Innovation

Meeting Date: 12/4/23

<input type="checkbox"/> Bill/PCS/PCB Number:	_____
<input type="checkbox"/> Amendment Barcode Number:	_____
<input checked="" type="checkbox"/> Presentation/Workshop Topic:	<u>Graduate Medical Education</u>

Name: Justin Graham

Representing: OPPGA

Title: Staff Director

Address: 111 W. Madison St. Suite 312

City: Tallahassee State/Zip: FL 32399

Phone Number: 850-717-0508

- Registered Lobbyist
- State Employee
- I wish to Appear in Person
- 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

(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 Waive in Support Waive in Opposition Info only

Amendment: Proponent Opponent Waive in Support Waive in Opposition Info only