



Health & Human Services Committee

**Tuesday, February 9, 2016
11:30 AM – 2:30 PM
Morris Hall**

Action Packet

**Steve Crisafulli
Speaker**

**Jason Brodeur
Chair**

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

Summary:

Health & Human Services Committee

Tuesday February 09, 2016 11:30 am

CS/HB 563	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 852595 Adopted Without Objection		
HB 819	Favorable	Yeas: 11	Nays: 2
HB 823	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 919609 Adopted Without Objection		
HB 1083	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 184233 Adopted Without Objection		
HB 1245	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 587963 Adopted Without Objection		
HB 1313	Temporarily Postponed		
HB 1335	Favorable With Committee Substitute	Yeas: 13	Nays: 0
	Amendment 710071 Adopted Without Objection		
CS/HB 1411	Favorable With Committee Substitute	Yeas: 11	Nays: 2
	Amendment 831241 Adopted Without Objection		
	Amendment 258563 Failed to Adopt		
PCS for HB 819	Temporarily Postponed		

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Jason Brodeur (Chair)	X		
Bryan Avila	X		
Lori Berman			X
Colleen Burton	X		
Gwyndolen Clarke-Reed	X		
Fred Costello	X		
Janet Cruz			X
W. Travis Cummings	X		
Katie Edwards	X		
Gayle Harrell	X		
Mia Jones			X
Shevrin Jones			X
MaryLynn Magar	X		
Cary Pigman	X		
Paul Renner	X		
Kenneth Roberson	X		
Chris Sprowls	X		
Jay Trumbull	X		
Totals:	14	0	4

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 563 : Temporary Cash Assistance Program

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards	X				
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Spowls	X				
Jay Trumbull	X				
Jason Brodeur (Chair)	X				
Total Yeas: 14		Total Nays: 0			

CS/HB 563 Amendments

Amendment 852595

Adopted Without Objection

Appearances:

Garcia-Vera, Gabriel (General Public) - Waive In Opposition
 National Latina Institute for Reproductive Health
 Florida Field Coordinator
 8330 Biscayne Blvd
 Miami FL 33138
 Phone: (786) 664-8310

Menes, Francesca (Lobbyist) - Waive In Opposition
 Florida Immigrant Coalition
 Policy Director
 8330 Biscayne Blvd
 Miami FL 33138
 Phone: (305) 571-7254

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 563 : Temporary Cash Assistance Program (continued)

Appearances: (continued)

Bill & Amendment #852595

Woodall, Karen (Lobbyist) - Opponent

Florida Center for Fiscal & Economic Policy

579 E Call St

Tallahassee FL 32301

Phone: (850) 321-9386

House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: Health & Human Services
Meeting Date: 2/19/16
Place: Morris Hall
Time: 11:30 AM

Bill Number: CS/HB 563
Date Received: _____
Date Reported: _____
Subject: Temporary Cash Assistance Program

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	<i>Demanded</i>							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brodeur, Chair								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Avila								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Burton								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Clarke-Reed								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Costello								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cruz								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cummings								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Edwards								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, M.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, S.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Roberson								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sprowls								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 819 : Sunset Review of Medicaid Dental Services

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards		X			
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprowls			X		
Jay Trumbull	X				
Jason Brodeur (Chair)		X			
Total Yeas: 11		Total Nays: 2			

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

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

Committee/Subcommittee: **Health & Human Services**

Bill Number: HB 819

Meeting Date: 2/9/16
Place: Morris Hall
Time: 11:30 AM

Date Received: _____
Date Reported: _____
Subject: Sunset Review of Medicaid Dental Services

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	✓	Brodeur, Chair								
✓		Avila								
✓		Berman								
✓		Burton								
✓		Clarke-Reed								
✓		Costello								
✓		Cruz								
✓		Cummings								
✓		Edwards								
✓		Harrell								
✓		Jones, M.								
✓		Jones, S.								
✓		Magar								
✓		Pigman								
✓		Renner								
✓		Roberson								
✓		Sprowls								
✓		Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
11	2									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 823 : Ethical Marketing Practices for Substance Abuse Services

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards	X				
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprowls	X				
Jay Trumbull	X				
Jason Brodeur (Chair)	X				
Total Yeas: 14		Total Nays: 0			

HB 823 Amendments

Amendment 919609

Adopted Without Objection

Appearances:

Fontaine, Mark (Lobbyist) - Proponent
 Florida Alcohol & Drug Abuse Association
 Executive Director
 2868 Mahan Dr
 Tallahassee FL 32308
 Phone: (850) 878-2196

Pitts, Brian (General Public) - Opponent
 Justice-2-Jesus
 Trustee
 1119 Newton Ave. S.
 St. Petersburg FL 33705
 Phone: (727) 897-9291

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

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

Committee/Subcommittee: Health & Human Services
Meeting Date: 2/9/16
Place: Marble Hall
Time: 11:30 AM

Bill Number: HB 823
Date Received: _____
Date Reported: _____
Subject: Ethical Marketing Practices for Substance Abuse Services

Committee/Subcommittee Action:
 Favorable
 Favorable w/ _____ amendments
 Favorable w/Committee/Subcommittee Substitute
 Other Action: _____

Retained for Reconsideration
 Reconsidered
 Temporarily Postponed
 Unfavorable

Final Vote On Bill		MEMBERS	<i>Strike all</i>							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brodeur, Chair	<i>h</i>	<i>go</i>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Avila								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Burton								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Clarke-Reed								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Costello								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cruz								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cummings								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Edwards								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, M.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, S.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Roberson								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sprowls								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 1083 : Action for Persons with Disabilities

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards	X				
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprows	X				
Jay Trumbull	X				
Jason Brodeur (Chair)	X				
Total Yeas: 14		Total Nays: 0			

HB 1083 Amendments

Amendment 184233

Adopted Without Objection

Appearances:

Sewell, Suzanne (Lobbyist) - Waive In Support
 Florida Association of Rehabilitation Facilities
 President & CEO
 2475 Apalachee Pky
 Tallahassee FL 32301
 Phone: (850) 942-3500

Hooper, Margaret (Lobbyist) - Waive In Support
 FI Development Disabilities Council
 Public Policy Coordinator
 4279 Four Oaks Blvd
 Tallahassee FL 32311
 Phone: (850) 921-7263

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 1083 : Agency for Persons with Disabilities (continued)

Appearances: (continued)

Bill & Amendment

Phillips, Janice (General Public) - Waive In Support

Association of Support Coordination Agencies

1831 Fiddler Court

Tallahassee FL 32308

Phone: (850) 877-4393

Brown, Robert (Lobbyist) - Waive In Support

Agency for Person With Disabilities

Legislative Affairs Director

4030 Esplanade Way

Tallahassee FL 32399

Phone: (850) 414-5853

Pound, Greg (General Public) - Information Only

Pinellas County Florida Government Corruption

9166 Sunrise Dr

Largo FL 33773

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

Committee/Subcommittee: Health & Human Services
Meeting Date: 2/9/16
Place: Morris Hall
Time: 11:30 AM

Bill Number: HB 1083
Date Received: _____
Date Reported: _____
Subject: Agency for Persons with Disabilities

Committee/Subcommittee Action:

- | | |
|--|---|
| <input type="checkbox"/> Favorable | <input type="checkbox"/> Retained for Reconsideration |
| <input type="checkbox"/> Favorable w/ _____ amendments | <input type="checkbox"/> Reconsidered |
| <input 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	<i>Strike all</i>							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Brodeur, Chair								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Avila								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Berman								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Burton								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Clarke-Reed								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Costello								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Cruz								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Cummings								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Edwards								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Jones, M.								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Jones, S.								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Roberson								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Sprowls								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 1245 : Medicaid Provider Overpayments

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards	X				
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprows	X				
Jay Trumbull	X				
Jason Brodeur (Chair)	X				
Total Yeas: 14		Total Nays: 0			

HB 1245 Amendments

Amendment 587963

Adopted Without Objection

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

Committee/Subcommittee: Health & Human Services
 Meeting Date: 2/9/16
 Place: Moore Hall
 Time: 11:30 AM

Bill Number: HB 1245
 Date Received: _____
 Date Reported: _____
 Subject: Medicaid Provider Overpayments

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	<i>Amend</i>							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brodeur, Chair								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Avila	<i>W</i>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Berman	<i>20</i>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Burton	<i>27</i>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Clarke-Reed								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Costello								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cruz								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cummings								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Edwards								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrell								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, M.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Jones, S.								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pigman								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Renner								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Roberson								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sproles								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 1313 : Low-THC Cannabis for Medical Use

Temporarily Postponed

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

HB 1335 : Long-term Care Prioritization

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed	X				
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards	X				
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprowls	X				
Jay Trumbull			X		
Jason Brodeur (Chair)	X				
Total Yeas: 13		Total Nays: 0			

HB 1335 Amendments

Amendment 710071

Adopted Without Objection

Appearances:

Bill & Amendment

Beck, Robert (Lobbyist) - Waive In Support
 Florida Association of Area Agencies on Aging
 Partner, Adam St Advocates
 205 S Adams St
 Tallahassee FL 32301
 Phone: (850) 766-1410

Pitts, Brian (General Public) - Waive In Support
 Justice-2-Jesus
 Trustee
 1119 Newton Ave. S.
 St. Petersburg FL 33705
 Phone: (727) 897-9291

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

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

Committee/Subcommittee: Health & Human Services
 Meeting Date: 2/9/16
 Place: Morris Hall
 Time: 11:30 AM

Bill Number: HB1335
 Date Received: _____
 Date Reported: _____
 Subject: Long-Term Care Prioritization

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS	<i>Strike all</i>							
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brodeur, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Avila	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Berman	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Burton	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Clarke-Reed	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Costello	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cruz	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cummings	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Edwards	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Harrell	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Jones, M.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Jones, S.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Magar	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pigman	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Renner	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Roberson	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sprowls	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Trumbull	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
13	0									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 1411 : Termination of Pregnancies

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Bryan Avila	X				
Lori Berman			X		
Colleen Burton	X				
Gwyndolen Clarke-Reed		X			
Fred Costello	X				
Janet Cruz			X		
W. Travis Cummings	X				
Katie Edwards		X			
Gayle Harrell	X				
Mia Jones			X		
Shevrin Jones			X		
MaryLynn Magar	X				
Cary Pigman	X				
Paul Renner	X				
Kenneth Roberson	X				
Chris Sprowls			X		
Jay Trumbull	X				
Jason Brodeur (Chair)	X				
Total Yeas: 11		Total Nays: 2			

CS/HB 1411 Amendments

Amendment 831241

Adopted Without Objection

Amendment 258563

Failed to Adopt

Appearances:

Bill & Amendment #258563
Higgins, Anna (General Public) - Proponent
Self
Attorney
3375 Rommitch Court
Pensacola FL 32504
Phone: (202) 384-6657

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 1411 : Termination of Pregnancies (continued)

Appearances: (continued)

Bill & Amendment #831241

Delgado, Ingrid (Lobbyist) - Waive In Support
Florida Conference of Catholic Bishops
Associate for Social Concerns
201 W Park Ave
Tallahassee FL 32301
Phone: (850) 205-6825

DeVane, Barbara (Lobbyist) - Opponent
FL NOW
625 E Brevard St.
Tallahassee FL 32308
Phone: (850) 222-3969

Garcia-Vera, Gabriel (General Public) - Opponent
National Latina Institute for Reproductive Health
Florida Field Coordinator
8330 Biscayne Blvd
Miami FL 33161
Phone: (786) 664-8310

Bill & Amendment #831241

Kelly, Amber (Lobbyist) - Waive In Support
Florida Family Action
Legislative Assistant
PO Box 10626
Tallahassee FL 32302
Phone: (407) 418-0250

Pound, Greg (General Public) - Proponent
Pinellas County Florida Government Corruption
9166 Sunrise Dr
Largo FL 33773

Smith, Carlos Guillermo (Lobbyist) - Opponent
Equality Florida
Government Affairs Manager
2237 Stonington Ave
Orlando FL 32817
Phone: (404) 934-4944

Bill & Amendment # 831241

Bunkley, Bill (Lobbyist) - Waive In Support
Florida Ethics and Religion Liberty Commission
President
PO Box 341644
Tampa FL 33694
Phone: (813) 264-2977

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 1411 : Termination of Pregnancies (continued)

Appearances: (continued)

Barnes, Zachary (General Public) - Waive In Opposition

Self
3171 Santa Barbara Blvd N
Cape Coral FL 33993
Phone: (239) 707-9983

Kent, Kimberely (General Public) - Proponent

Self
1464 Dr Martin Luther King Jr Memorial Rd
Crawfordville FL 32327
Phone: (850) 766-9633

Smith, David (General Public) - Waive In Opposition

Self
55 W Church St, #2604
Orlando FL 32801
Phone: (407) 800-7315

Jacqueline(representing The Mason Family) (General Public) - Waive In Opposition

Mason Family
1819 Peachtree Blvd
St Cloud FL 34769

Feucht, Liberty (General Public) - Waive In Opposition

Myself
14228 Wellesley Drive
Tampa FL 33624
Phone: (813) 422-0152

Piotrowski, Meghan (General Public) - Waive In Opposition

Self
1205 Bobwhite Court
Punta Gorda FL 33950
Phone: (941) 204-8144

Weslowski, Missy (Lobbyist) - Waive In Opposition

Florida Alliance of Planned Parenthood Affiliates
Director of Governmental Affairs
2300 North Florida Mango Rd
West Palm Beach FL 33404
Phone: (561) 472-9942

Kirby, Martha (General Public) - Waive In Opposition

Self & Daughter
5208 Pico St
Orlando FL 32817
Phone: (407) 808-8795

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 1411 : Termination of Pregnancies (continued)

Appearances: (continued)

Harnit, Martha (General Public) - Waive In Opposition

Self
914 Summit Greens Blvd
Clermont FL 34711
Phone: (352) 242-2437

Pitts, Brian (General Public) - Opponent

Justice-2-Jesus
Trustee
1119 Newton Ave. S.
St Petersburg FL 33705
Phone: (727) 897-9291

Eggart, Elann (General Public) - Waive In Opposition

Tallahassee FL

Wood, Peter (General Public) - Waive In Opposition

Tallahassee FL

Gualtieri, Maria (General Public) - Waive In Opposition

Tallahassee FL

Ovalle Marquez, Alissa (General Public) - Waive In Opposition

Tallahassee FL

Macko, Katryn (General Public) - Waive In Opposition

Tallahassee FL

Mitchell, Katie (General Public) - Waive In Opposition

Tallahassee FL

Steslow, Kevin (General Public) - Waive In Opposition

Tallahassee FL

Sanders, Kristin (General Public) - Waive In Opposition

Tallahassee FL

Richeson, Rosie (General Public) - Waive In Opposition

Tallahassee FL

Osborne, Alicia (General Public) - Waive In Opposition

Tallahassee FL 32301

Gentile, Haley (General Public) - Waive In Opposition

2064 Holmes St
Tallahassee FL 32310
Phone: (239) 210-8923

Yacobellis, Tracy (General Public) - Waive In Opposition

Myself
Tallahassee FL 32301

Committee meeting was reported out: Tuesday, February 09, 2016 5:31:49PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

CS/HB 1411 : Termination of Pregnancies (continued)

Appearances: (continued)

Norton, Ross (General Public) - Waive In Opposition

Myself

3020 Kevin St

Tallahassee FL 32301

Phone: (850) 443-8606

Olsen, Pam (General Public) - Proponent

Self

PO Box 14017

Tallahassee FL 32317

Phone: (850) 906-9170

Willard, Hannah (General Public) - Opponent

Self

630 Hillcrest St, #10

Orlando FL 32803

Phone: (407) 451-5460

Richardson, Michelle (Lobbyist) - Opponent

ACLU of Florida

Director of Public Policy

4500 Biscayne Blvd

Miami FL 33137

Phone: (786) 363-2700

Mason, Ash (General Public) - Waive In Support

Christian Coalition

Phone: (813) 380-7071

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

Committee/Subcommittee: Health & Human Services

Bill Number: CF/AB 1411

Meeting Date: 2/9/16

Date Received: _____

Place: Monroe Hall

Date Reported: _____

Time: 11:30 A.M.

Subject: Termination of Regressive

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS	<i>Approved P. Burton</i>		<i>Approved L. Hill</i>					
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
<input checked="" type="checkbox"/>		Brodeur, Chair								
<input checked="" type="checkbox"/>		Avila								
<input checked="" type="checkbox"/>		Berman								
<input checked="" type="checkbox"/>		Burton								
<input checked="" type="checkbox"/>		Clarke-Reed								
<input checked="" type="checkbox"/>		Costello								
<input checked="" type="checkbox"/>		Cruz								
<input checked="" type="checkbox"/>		Cummings								
<input checked="" type="checkbox"/>		Edwards								
<input checked="" type="checkbox"/>		Harrell								
<input checked="" type="checkbox"/>		Jones, M.								
<input checked="" type="checkbox"/>		Jones, S.								
<input checked="" type="checkbox"/>		Magar								
<input checked="" type="checkbox"/>		Pigman								
<input checked="" type="checkbox"/>		Renner								
<input checked="" type="checkbox"/>		Roberson								
<input checked="" type="checkbox"/>		Sproles								
<input checked="" type="checkbox"/>		Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
11	2									

COMMITTEE MEETING REPORT
Health & Human Services Committee

2/9/2016 11:30:00AM

Location: Morris Hall (17 HOB)

PCS for HB 819 : Medicaid Dental Services

Temporarily Postponed

Appearances:

Waive in Support of HB 819
Stoutamire, Casey (Lobbyist) - Waive In Support
Florida Dental Association
Lobbyist
118 E. Jefferson St.
Tallahassee FL 32301
Phone: (850) 224-1089

HB 819-Opponent, PCS 819 Proponent
Brown, Audrey (Lobbyist) - Opponent
Florida Association of Health Plans, Inc
President & CEO
200 W College Ave
Tallahassee FL 32301
Phone: (850) 386-2904

Opponent of HB 819
Pitts, Brian (General Public) - Opponent
Justice-2-Jesus
Trustee
1119 Newton Ave. S.
St Petersburg FL 33705
Phone: (727) 897-9291

Waive in Support of PCS 819
Juarez, Lena (Lobbyist) - Waive In Support
Molina Healthcare
PO Box 10390
Tallahassee FL 32302
Phone: (850) 212-8330

Proponent of HB 819, Opponent of PCS for 819
Lacasa, Carlos - Proponent
MCNA Dental Plan
200 W Cypress Creek Rd
Ft Lauderdale FL 33329

House of Representatives
COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: Health & Human Services

Bill Number: PCS for HB 819

Meeting Date: 2/9/16
Place: Moore Hall
Time: 11:30 AM

Date Received: _____
Date Reported: _____
Subject: Medicaid Dental Services

Committee/Subcommittee Action:

- Favorable
- Favorable w/ _____ amendments
- Favorable w/Committee/Subcommittee Substitute
- Other Action: _____

- Retained for Reconsideration
- Reconsidered
- Temporarily Postponed
- Unfavorable

Final Vote On Bill		MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
		Brodeur, Chair								
		Avila								
		Berman								
		Burton								
		Clarke-Reed								
		Costello								
		Cruz								
		Cummings								
		Edwards								
		Harrell								
		Jones, M.								
		Jones, S.								
		Magar								
		Pigman								
		Renner								
		Roberson								
		Sprowls								
		Trumbull								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays



WFO

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: CS / HB 503 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Services

Name: Gabriel Garcia-Vera

Title: FL Field Coordinator

Address: 8330 Biscayne Blvd

City: Miami State/Zip: FL, 33138

Phone Number: _____

Representing: NLI RH

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



420

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: CS/HB 563 Meeting Date: _____

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Francesca Menes

Title: Policy Director

Address: 8330 Biscayne Blvd

City: Miami State/Zip: FL, 33138

Phone Number: _____

Representing: FLIC

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: CS/HB 563 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Temporary Cash Assistance

Committee/Subcommittee: HHS

Name: Karen Woodall

Title: _____

Address: 579 E. Call St.

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-321-9386

Representing: Florida Center for Fiscal & Economic Policy

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: CS/HB 563 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Amendment 852595

Committee/Subcommittee: HHS

Name: Karen Woodall

Title: _____

Address: 579 E. Call St.

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-321-9386

Representing: Florida Center for Fiscal & Economic Policy

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/S on 8/19

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 819 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Sunset Review of Children's Dental Medicaid

Committee/Subcommittee: Health & Human Services

Name: Casey Stoutamine

Title: Lobbyist

Address: 118 E Jefferson St.

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-224-1059

Representing: FL Dental Association

Registered Lobbyist: YES NO

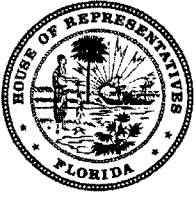
State Employee: YES NO

I Wish To Speak: YES NO

wave in support

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting

Type or Print Clearly

Opponent

PCSHB 819 - Proponent

Bill Number: HB 819 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Sunset Review of Childrens Medicaid Dental services

Committee/Subcommittee: Health + Human Services

Name: Audrey Brown

Title: President + C.E.O

Address: 200 W. College Ave

City: Tallahassee State/Zip: FL / 32301

Phone Number: 950-386-2904

Representing: Florida Association of Health Plans

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

(no comment)

W/S of the PCS

Type or Print Clearly

Bill Number: 819 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: SUNSET REVIEW OF DENTAL SERVICES

Committee/Subcommittee: HEALTH AND HUMAN SERVICES

Name: LENA JUAREZ

Title: _____

Address: P.O. BOX 10390

City: TALLAHASSEE State/Zip: FL 32302

Phone Number: 850 212 8330

Representing: MOLINA HEALTHCARE

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 819 - proponent Meeting Date: 2/9/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: PCS for 819 - opponent

Committee/Subcommittee: _____

Name: Carlos Lacasa

Title: SVP and General Counsel - MCNA

Address: 200 W. Cypress Creek Rd.

City: Ft. Lauderdale State/Zip: FL 33329

Phone Number: _____

Representing: MCNA Dental

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



PLEASE FILL OUT THE ENTIRE FORM AND SUBMIT TWO COPIES TO THE COMMITTEE/SUBCOMMITTEE ADMINISTRATIVE ASSISTANT AT THE MEETING

TYPE OR PRINT CLEARLY

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

opposing 819

Bill Number 819 Date 2 19 2016 Name BRIAN PITTS Title TRUSTEE Address 1119 NEWTON AVENUE SOUTH City SAINT PETERSBURG State/Zip FLORIDA/33705 Phone Number 727/897-9291 Representing JUSTICE-2-JESUS

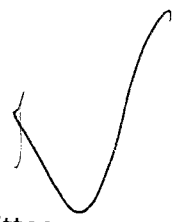
Lobbyist (registered) YES [] NO [x] State Employee YES [] NO [x]

If you are testifying regarding an amendment, please indicate if your position as a proponent or an opponent is the same as on the bill as a whole.

I wish to speak [x] Proponent [] [] I have been requested to speak [] Opponent [] [x] Information [] [x]

Subject matter:

Committee/Subcommittee: HHSC



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 823 Meeting Date: 9 February 2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Ethics/ Substance Abuse

Committee/Subcommittee: Health + Human Services

Name: Mark Fontaine

Title: Executive Director

Address: 28168 Mahan Drive

City: Tallahassee State/Zip: FL 32308

Phone Number: 850 878-2190

Representing: Florida Alcohol + Drug Abuse Association

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



PLEASE FILL OUT THE ENTIRE FORM AND SUBMIT TWO COPIES
TO THE COMMITTEE/SUBCOMMITTEE ADMINISTRATIVE
ASSISTANT AT THE MEETING

TYPE OR PRINT CLEARLY

**COMMITTEE/SUBCOMMITTEE APPEARANCE
RECORD**

Bill Number 823 Date 2 19 2016
 Name BRIAN PITTS
 Title TRUSTEE
 Address 1119 NEWTON AVENUE SOUTH
 City SAINT PETERSBURG State/Zip FLORIDA/33705
 Phone Number 727/897-9291
 Representing JUSTICE-2-JESUS

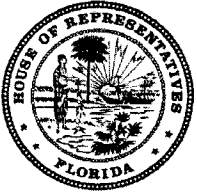
Lobbyist (registered) YES NO
 State Employee YES NO

If you are testifying regarding an amendment, please indicate if your position as a
proponent or an opponent is the same as on the bill as a whole.

			<u>Amendment</u>	<u>Bill</u>
I wish to speak	<input checked="" type="checkbox"/>	Proponent	<input type="checkbox"/>	<input type="checkbox"/>
I have been requested to speak	<input type="checkbox"/>	Opponent	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Subject matter:

Committee/Subcommittee: HHSC



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1083 Meeting Date: 2/9/11

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: APD Bill

Committee/Subcommittee: H & HS

Name: Suzanne Sewell

Title: President & CEO

Address: 2475 Apalachee Parkway

City: Tallahassee State/Zip: FL 32301

Phone Number: 850-942-3500

Representing: FL Association of Rehabilitation Facilities

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

(Waive in support)

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WLS

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1083 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: APD bill

Committee/Subcommittee: Health + Human Services Committee

Name: Margaret J. Hooper

Title: Public Policy Coordinator

Address: 4279 Four Oaks Blvd

City: Tallahassee State/Zip: FL 32311

Phone Number: 850-921-7263

Representing: Florida Developmental Disabilities

Registered Lobbyist: YES NO

State Employee: YES NO Council

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: ~~1083~~ 1083 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: ~~1083~~ Amendment to 1083

Committee/Subcommittee: HHS

Name: Janice Phillips

Title: Support Coordinator

Address: 1831 Fiddler Ct.

City: Tall. State/Zip: FL 32308

Phone Number: 877-4393

Representing: Association of Support + Coordination Agencies

Registered Lobbyist: YES NO

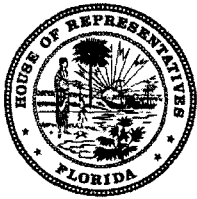
State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S
W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

W/S

Type or Print Clearly

Bill Number: 1083 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: Robert Brown

Title: Legislative Affairs Director

Address: 4030 Esplanade Way

City: Tallahassee State/Zip: FL 32399

Phone Number: 850 414 5853

Representing: Agency for Persons with Disabilities

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO
Waive in support

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: ~~567~~ 1083 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Dis.

Committee/Subcommittee: Health & Human Serv.

Name: Greg Pound

Title: _____

Address: 9166 Sunrise Dr.

City: Largo State/Zip: Fla. 33773

Phone Number: _____

Representing: Pinellas County Florida Government Construction

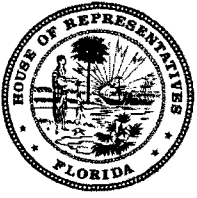
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input checked="" type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1335 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Medicaid Managed Long Term CARE wait list

Committee/Subcommittee: Health + Human Services

Name: Robert Beck

Title: Partner, Adams St. Advocates

Address: 205 S. Adams St

City: Tallahassee State/Zip: FL 32301

Phone Number: 850 766 1410

Representing: Florida Association of Area Agencies on Aging

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S (circled around the Bill section)

W/S (circled around the Amendment section)



PLEASE FILL OUT THE ENTIRE FORM AND SUBMIT TWO COPIES TO THE COMMITTEE/SUBCOMMITTEE ADMINISTRATIVE ASSISTANT AT THE MEETING

TYPE OR PRINT CLEARLY

WIS

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Bill Number 1335 Date 2/19/2016
Name BRIAN PITTS
Title TRUSTEE
Address 1119 NEWTON AVENUE SOUTH
City SAINT PETERSBURG State/Zip FLORIDA/33705
Phone Number 727/897-9291
Representing JUSTICE-2-JESUS

Lobbyist (registered) YES [] NO [x]
State Employee YES [] NO [x]

If you are testifying regarding an amendment, please indicate if your position as a proponent or an opponent is the same as on the bill as a whole.

I wish to speak [x] Proponent [] Amendment [] Bill [x]
I have been requested to speak [] Opponent [] Amendment [] Bill []
Information [] Amendment [] Bill [x]

Subject matter:

Committee/Subcommittee: H H S C



06249785



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill Number: **1411 : Termination of Pregnancies** Meeting Date: **February 09, 2016 11:30 AM**

PCB/PCS/Amendment # or Presentation/Workshop Topic: **N/A**

Committee/Subcommittee: **Health & Human Services Committee**

Name: **Anna Higgins**

Title:

Address: **3375 Rommitch Court**

City: **Pensacola** State/Zip: **FL 32504**

Phone Number: **202-384-6657**

Representing: **testifying in a personal capacity as a Florida resident and attorney**

Registered Lobbyist: **No**

State Employee: **No**

I Wish To Speak: ^{Yes}~~No~~

I Have Been Requested To Speak: ~~Yes~~

	Bill	Amendment
Proponent		N/A

See enacted testimony



06249785



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Bill Number: **1411 : Termination of Pregnancies** Meeting Date: **February 09, 2016 11:30 AM**

PCB/PCS/Amendment # or Presentation/Workshop Topic: **N/A**

Committee/Subcommittee: **Health & Human Services Committee**

Name: **Anna Higgins**

Title:

Address: **3375 Rommitch Court**

City: **Pensacola** State/Zip: **FL 32504**

Phone Number: **202-384-6657**

Representing: **testifying in a personal capacity as a Florida resident and attorney**

Registered Lobbyist: **No**

State Employee: **No**

I Wish To Speak: **No**

I Have Been Requested To Speak: **Yes**

	Bill	Amendment
Proponent		N/A



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Termination of Pregnancies

Committee/Subcommittee: Health & Human Services

Name: Ingrid Delgado

Title: Associate for Social Concerns & Respect Life

Address: 201 W Park Av

City: Tallahassee State/Zip: FL/32301

Phone Number: _____

Representing: Florida Conference of Catholic Bishops

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: 831241

Committee/Subcommittee: Health & Human Services

Name: Ingrid Delgado

Title: Associate for Social Concerns & Respect Life

Address: 201 W Park Av

City: Tallahassee State/Zip: FL 32301

Phone Number: _____

Representing: Florida Conference of Catholic Bishops

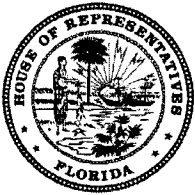
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

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Bill Number: 1411 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Termination of Pregnancy

Committee/Subcommittee: HHS

Name: Burton A. DeVane

Title: NS

Address: 625 E. Grand St

City: Tallahassee State/Zip: FL 32308

Phone Number: 850-222-3969

Representing: FL NOW

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Services

Name: Gabriel Garcia-Vera

Title: FL Field Coordinator

Address: 8330 Biscayne Blvd

City: ~~FL~~ Miami State/Zip: FL, 33138

Phone Number: _____

Representing: Nat. Latina Inst. Repro. Health

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WLS

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: ~~14~~ 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Termination of Pregnancies

Committee/Subcommittee: Health & Human Services

Name: Amber Kelly

Title: Legislative Affairs

Address: 4853 S. Orange Ave.

City: Orlando State/Zip: FL 32806

Phone Number: (407) 418-0250

Representing: FL Family Action

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

Burton Amendment only - 831241



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Serv.

Name: Greg Bond

Title: _____

Address: 9166 Sunrise Dr.

City: Largo State/Zip: Fla. 33773

Phone Number: _____

Representing: Pinellas County Florida Government Corruption

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input checked="" type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/15

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Services

Name: Carlos Guillermo Smith

Title: GOVERNMENT AFFAIRS MANAGER

Address: 2237 STONINGTON AVE

City: B Orlando State/Zip: 32817

Phone Number: 404-934-4944

Representing: EQUALITY FLORIDA

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WLS

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Termination of Pregnancies

Committee/Subcommittee: Health & Human Services

Name: Bill Bunkley

Title: President

Address: PO Box 341644

City: Tampa State/Zip: FL 33694

Phone Number: (813) 264-2977

Representing: FL Ethics & Religious Liberty Commission

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

831241 - Amendment by Burton only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2/9/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: Zachary Burnes

Title: _____

Address: 3171 Santa Barbara blvd N

City: Cape Coral State/Zip: FL 33993

Phone Number: 239-707-9983

Representing: self

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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



Type or Print Clearly

Bill Number: 1411 Meeting Date: 2/9/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Termination Pregnancies

Committee/Subcommittee: Health & Human Services

Name: Kimberely Kent

Title: _____

Address: 1464 Dr. Martin Luther King Jr Mem. Rd

City: Crawfordville State/Zip: FL 32327

Phone Number: (850) 766-9633

Representing: Self

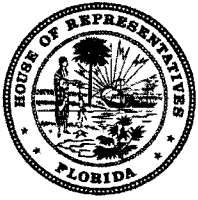
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: David Smith

Title: _____

Address: 55 W Church St #2604 Orlando, FL 32801

City: Orlando State/Zip: 32801

Phone Number: 407 800 7215

Representing: Self

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/O

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2-09-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: Jacqueline (MASON FAMILY)

Title: (citizen)

Address: 1819 Peachtree Blvd

City: St Cloud State/Zip: FL 34769

Phone Number: _____

Representing: mason family

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: Feb. 9, 2016

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Liberty Feucht

Title: _____

Address: 14228 Wellesley Drive

City: Tampa State/Zip: FL 33624

Phone Number: 813-422-0152

Representing: myself

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

WFO

Bill Number: HB 1411 Meeting Date: 2/9/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Meghan Pietrowski

Title: _____

Address: 1205 Bobwhite Court

City: Punta Gorda State/Zip: FL, 33950

Phone Number: 941-204-8144

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WFO

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: 177 Meeting Date: 1/22/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: William J. ...

Title: ...

Address: ...

City: ... State/Zip: ...

Phone Number: ...

Representing: ...

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

WFO

Bill Number: HB 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: Maetha Kirby

Title: _____

Address: 5208 Pico St

City: ORLANDO State/Zip: FL 32817

Phone Number: 407 808 8995

Representing: Self & daughter

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: #- 2-9-2014

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: HHS

Name: Martha Harnit

Title: _____

Address: 914 Summit Greens Blvd ~~Clermont~~

City: Clermont State/Zip: FL 34711

Phone Number: 352-242-2437

Representing: self

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



PLEASE FILL OUT THE ENTIRE FORM AND SUBMIT TWO COPIES TO THE COMMITTEE/SUBCOMMITTEE ADMINISTRATIVE ASSISTANT AT THE MEETING

TYPE OR PRINT CLEARLY



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Bill Number 1411 Date 2 19 /2016
Name BRIAN PITTS
Title TRUSTEE
Address 1119 NEWTON AVENUE SOUTH
City SAINT PETERSBURG State/Zip FLORIDA/33705
Phone Number 727/897-9291
Representing JUSTICE-2-JESUS

Lobbyist (registered) YES [] NO [x]
State Employee YES [] NO [x]

If you are testifying regarding an amendment, please indicate if your position as a proponent or an opponent is the same as on the bill as a whole.

I wish to speak [x] Proponent [] Amendment [] Bill [x]
I have been requested to speak [] Opponent [] Amendment [] Bill []
Information [] Amendment [] Bill [x]

Subject matter:

Committee/Subcommittee: HHSC



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

WFO

Bill Number: HB 1411 Meeting Date: 9 Feb 2016

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Elann Eggart

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WJ

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 9 Feb 2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Peter Wood

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB1711 Meeting Date: 9 Feb 2016

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Health and Human Services

Committee/Subcommittee: Human and Health Services

Name: María Guatteri

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/O

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB1411 Meeting Date: 02/09/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Ovalle Marquez, Alissa

Title: _____

Address: _____

City: Tallahassee State/Zip: FL 32304

Phone Number: _____

Representing: _____

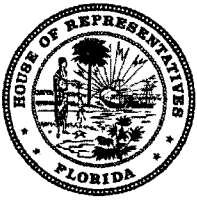
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WJ

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Services

Name: Katryn Macko

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

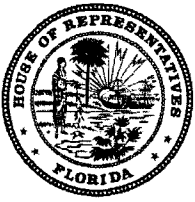
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFO

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 9 Feb 2016

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Katie Mitchell

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



WFO

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Kevin Steslow

Title: _____

Address: _____

City: Lalobassee State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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09/16

Type or Print Clearly

Bill Number: HB1411 Meeting Date: 2/19/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Kristin Sanders

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

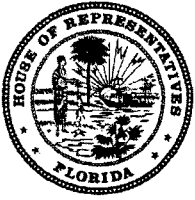
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
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WFO

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

Type or Print Clearly

Bill Number: HB 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Rosie Richeson

Title: _____

Address: _____

City: Tallahassee State/Zip: FL

Phone Number: _____

Representing: _____

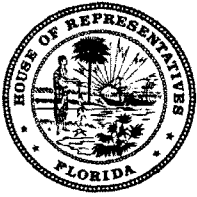
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
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Bill Number: HB1411 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Health and Human Services

Name: Alicia Osborne

Title: _____

Address: _____

City: Tallahassee State/Zip: FL 32301

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
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Bill Number: HB1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: H3HS

Name: Haley Gentle

Title: _____

Address: 2064 Holmes St.

City: Tallahassee State/Zip: FL 32310

Phone Number: 239-210-8923

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



2/9

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: HB1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: 12

Committee/Subcommittee: Health + human Services

Name: Tracy Yacobellis

Title: _____

Address: _____

City: Tallahassee State/Zip: FL 32301

Phone Number: _____

Representing: myself

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: 1411 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: 1411

Committee/Subcommittee: HHS

Name: Ross Norton

Title: _____

Address: 3020 Kevin St.

City: Tallahassee State/Zip: FL / 32301

Phone Number: 850-443-8606

Representing: myself

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Bill Number: HB1411 Meeting Date: 2-9-16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Health & Human Services

Name: Pam Olsen

Title: _____

Address: PO Box 14017

City: Tallahassee State/Zip: FL 32317

Phone Number: 850-906-9170

Representing: self

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
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Bill Number: 1411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: Hannah Willard

Title: _____

Address: 630 Hillcrest St #10

City: Orlando State/Zip: FL 32803

Phone Number: 407 451 5460

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



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Bill Number: 1411 Meeting Date: _____

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: House H + HS

Name: Michelle Richardson

Title: Dir. of Public Policy

Address: 4500 Biscayne Blvd #340

City: Miami State/Zip: FL 33137

Phone Number: 786-343-2700

Representing: ACLU of Florida

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

WFS

Type or Print Clearly

Bill Number: 411 Meeting Date: 2/9/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: Ash Mason

Title: Chairman

Address: _____

City: _____ State/Zip: _____

Phone Number: 813.380.7071

Representing: Christian Coalition

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

Written Testimony of Anna Higgins, J.D.
Attorney, Member of the State Bar of Florida
to the
Florida House Health and Human Services Committee
February 9, 2016

To the Distinguished Chair and Honored Members of the Health and Human Services Committee. Thank you for the opportunity to testify IN SUPPORT of HB 1411. I am an attorney and legal researcher, currently working as an Associate Scholar for the Charlotte Lozier Institute in Washington, D.C.

Previously, I served as the Director of the Center for Human Dignity at the Family Research Council, where I wrote extensive research, model legislation, and opinion pieces on sanctity of life issues – ranging from conception to end of life care. I am testifying in a personal capacity as an attorney and citizen of the State of Florida.

It is my intent to testify that HB 1411:

- 1) Fully complies with the State Constitution because it in no way places a substantial burden on the right of a woman to choose an abortion, thus, the right fundamental right to privacy analysis is not applicable
- 2) That the State has a strong and legitimate interest in the health and safety of its citizens – an interest that is furthered by the provisions in HB 1411, and
- 3) That the removal of public funding from abortion providers will have a positive impact on women’s health and be a much more efficient and wise use of taxpayer dollars.

I. HB 1411 Does Not Require Fundamental Right to Privacy Analysis

Florida courts have applied strict scrutiny analysis only in cases where the law in question significantly burden a woman’s right to choose an abortion (see *In re T.W., A Minor*, 551 So. 2d 1186 (Fla 1989)). Florida courts look to the fundamental right to privacy language enshrined in the Constitution of the State of Florida (Article 1, section 23) when laws place direct restrictions on the woman’s choice. An application of strict scrutiny analysis requires that the statute be

presumed unconstitutional and thus, the burden is shifted to the state to show that it has used the least restrictive means possible in achieving its compelling interest. Statutes dealing with public health and safety, however, do not require that the state carry such a burden because the state has a long-standing interest in and practice of instituting common-sense regulations on practices that affect the health and safety of citizens.

Every law interferes with a person's privacy in some manner. Whereas state and federal law recognizes a woman's right to choose an abortion, they also recognize that the state has two relevant and legitimate interests when it comes to regulating abortion: 1) protecting the health of the woman (the citizens of the state) *Simopolous v. Virginia*, 462 U.S. 506, 519 (1983) (quoting *Roe v. Wade*, 410 U.S. at 150); *Gonzales v. Carhart*, 550 U.S. 124, 145 (2007) (quoting *Casey*, 505 U.S. at 846 (opinion of the Court)) and 2) regulating the medical profession *Gonzales*, 550 U.S. at 157; *Simopoulos*, 462 U.S. at 516.

When addressing laws regulating the practice of abortion, the question with which Florida courts are concerned is whether or not the restriction significantly burdens a woman's right to choose an abortion. If the statute does not place a significant burden on that right, the standard of strict scrutiny need not apply. The Florida Supreme Court made this distinction clear in *State v. Presidential Women's Center* 937 So. 2d 114, 116-20 (Fla. 2006) when it upheld informed consent requirements, including a performance of an ultrasound, prior to an abortion.

The Court upheld the Women's Right to Know Act without applying or even mentioning strict scrutiny because informed consent statute in question is comparable to common law and other Florida informed consent statutes. Any additional burden imposed by such requirements rests on the provider, and does not significantly burden the right of a woman to choose abortion.

There is no need for a constitutional privacy analysis in cases where a statute, such as HB 1411, involves only state regulation on abortion providers. HB 1411 places no direct restriction on a woman's choice. It only places restrictions on providers and facilities, none of which have fundamental constitutional rights implicated by the state's legitimate regulation of medical practice.

The State of Florida's interests in regulating medical practice within the state and protecting the health and safety of its citizens are furthered by the restrictions proposed by HB 1411. The

Supreme Court of the United States has confirmed in *Simopolous v. Virginia*, 462 U.S. 506, 511 (1983) that “[t]he State has a legitimate interest in seeing to it that abortion, like any other medical procedure, is performed under circumstances that insure maximum safety for the patient,” and “In view of its interest in protecting the health of its citizens, the State necessarily has considerable discretion in determining standards for the licensing of medical facilities” (at 516).

The state of Florida has already put in place common-sense regulation on the abortion industry that have not been found to significantly burden a woman’s right to choose an abortion. For example, Florida law requires physicians to perform ultrasound prior to an abortion and give woman opportunity to view and hear explanation (390.0111(3)(a)(1) Fla. Stat. and absent emergency, abortion only to be performed in a validly licensed hospital or abortion clinic or physician’s office (797.03(1), Fla. Stat.

II. HB 1411 Furthers Florida’s Interest in the Health and Safety of its Citizens

Likewise, HB 1411, in imposing hospital admitting requirements, patient transfer agreements, facility inspection, and proper disposal of fetal remains is simply a continuation of the long-standing practice of regulating medical providers in common law and Florida statute.

a. Admitting Requirements:

Imposing local hospital admitting requirements and/or hospital transfer agreements on abortion providers is a necessary and common-sense step in protecting the health and safety of women. The medical community is not opposed to such regulation. Abortionist Dr. Thorp acknowledges that “[a]ll competent physicians endure the ‘burdensome’ nature of applying for hospital privileges for the safety and well-being of their patients.”

Dr. James Anderson, a board-certified emergency medicine physician who serves as clinical professor at the Medical College of Virginia, opines regarding requiring physicians associated with abortion clinics to have hospital privileges, “consistent with the time-honored practice of requiring training and credentialing of physicians who are making decisions and doing procedures that have life-impacting consequences. If a physician cannot obtain privileges for the specific requested procedures at his or her local hospital, then in my expert opinion, the

physician is not qualified to do the surgical procedures that have life-changing or life-threatening impact.”

b. Potential Health Risks of Abortion

We know that abortion, like any other surgical or medically invasive procedure, carries potential physical and psychological risks to a woman. It is for this reason that the State has instituted previous regulations of abortion procedures, and why it should also ensure further protection for women by passing more comprehensive regulation of providers and facilities.

Physical

By 2008, at least 59 studies have demonstrated a statistically significant increase in premature birth or low birth weight risk in women with prior induced abortions.¹

“According to Gaufberg, Professor of Medicine at Harvard University, post-abortion physical complications at various gestational points are primarily the result of incomplete evacuation of the uterus, uterine atony, infection, and instrumental injury. At 12-13 weeks, the complication rate is 3-6%, and by well into the second trimester, the complication rate increases to 50%, and possibly higher according to Gaufberg.²

Medical abortion can be even more dangerous than surgical abortion, often due to the fact that women are not necessarily under the care of a doctor when the abortion is performed.

Complications from medical abortions range from undiagnosed ectopic pregnancy to significant blood loss and infection, often as a result of incomplete abortion.³

¹ American Association of Pro-Life Obstetricians and Gynecologists, (<http://www.aaplog.org/complications-of-induced-abortion/induced-abortion-and-pre-term-birth/general-comments-on-the-increased-risk/>

² [wecareexperts.org](http://www.wecareexperts.org), “Late-term Abortion: Antecedent Conditions and Consequences to Women’s Health,” <http://www.wecareexperts.org/sites/default/files/articles/Late-term%20abortion%20health%20consequences.pdf> : at 2, also noting, “The U.S. mortality rates per 100,000 abortions as reported by Gaufberg are 14.0 for 16-20 weeks and 18.0 for after 21 weeks. Even more dramatic results for second and third trimester abortions were reported by Bartlett et al. using national U.S. data spanning the years from 1988 and 1997. Specifically, per 100,000 abortions, the relative risk of abortion-related mortality was 14.7 at 13–15 weeks of gestation, 29.5 at 16-20 weeks, and 76.6 at or after 21 weeks. Causes of death during the 2nd trimester as reported by Bartlett included hemorrhage, infection, embolism, anesthesia complications, and cardiac and cerebrovascular events.”

³ See Chris Gacek, RU-486 (Mifepristone) Side-Effects 2000-2012, Family Research Council, May 2012 Issue Analysis.

Psychological

Previous abortions put a woman at an increased risk for a variety of mental health problems such as panic attacks, panic disorder, agoraphobia, PTSD, bipolar disorder, major depression with and without hierarchy, and substance abuse disorders.⁴

Dr. Priscilla Coleman, author of one of the most comprehensive studies of the mental health risks after abortion notes that,

Overall, women with an abortion history experience an 81% increased risk for mental health problems. The results showed that the level of increased risk associated with abortion varies from 34% to 230% depending on the nature of the outcome. Separate effects were calculated based on the type of mental health outcome with the results revealing the following: the increased risk for anxiety disorders was 34%; for depression it was 37%; for alcohol use/abuse it was 110%, for marijuana use/abuse it was 220%, and for suicide behaviors it was 155%. When compared to unintended pregnancy delivered women had a 55% increased risk of experiencing any mental health problem. Finally, nearly 10% of the incidence of all mental health problems was shown to be directly attributable to abortion.⁵

c. The Need for Abortion Facility and Provider Regulation in Florida

Without admitting privileges, an abortion provider must try to deal with a woman's medical complication on his own in a clinic not equipped for the task, or send her off in ambulance to be dumped at the hospital ER without medical history or provider follow-up.

Does Planned Parenthood really want to take the stance that it is a bad idea to staff their clinics with good doctors who have relationships with legitimate, local hospitals? The fact is, aborting a baby is not an insignificant endeavor, and sometimes things go wrong.

⁴ Coleman, P.K., Coyle, C.T., Shuping, M., & Rue, V. (2009), *Induced Abortion and Anxiety, Mood, and Substance Abuse Disorders: Isolating the Effects of Abortion in the National Comorbidity Survey*, *Journal of Psychiatric Research*, 43, 770–776.

⁵ Coleman, P.K. (Sept. 2011) "Abortion and Mental Health: A Quantitative Synthesis and Analysis of Research Published from 1995-2009, *British Journal of Psychiatry*."

Women who seek a serious, invasive procedure deserve a doctor who has a relationship with a local hospital if something goes wrong.

HB 1411 will work to further ensure the safety and health of women who do choose abortion by requiring those providers to be accountable to a local hospital. In an emergency, when seconds count, it is imperative that a hospital have access to the physician or at the very least, the medical history of the patient. Florida has already enacted similar rules for outpatient surgical facilities.⁶

There are numerous documented incidents of clinic violations and injuries sustained by women at Florida abortion clinics to justify the need for stricter regulation.

In 2006, a hospital in Orlando was required to care for a patient following a botched abortion. Because Florida required no transfer agreement nor physician admitting privileges at local hospitals, the hospital was not able to provide the best emergency care possible.⁷ Specifically, when doctors at the hospital attempted to remove the deceased child's remains, a lower limb was missing. They went to great efforts to try to locate the limb in the abdominal cavity of the patient without success. Had they had the patient's chart, they would have immediately known that the limb was removed at the abortion clinic prior to the emergency transport. That clinic was shut down and the abortionist in question, Dr. James Pendergraft, lost his license temporarily. He has

⁶ AHCA Rules 64B8-9.009 Standard of Care for Office Surgery
(b) Standards for Level II Office Surgery.

1. Transfer Agreement Required. The physician must have a transfer agreement with a licensed hospital within reasonable proximity if the physician does not have staff privileges to perform the same procedure as that being performed in the out-patient setting at a licensed hospital within reasonable proximity.

⁷ <http://www.lifenews.com/2013/07/22/orlando-florida-house-of-horrors-abortion-clinic-reopens-after-police-raid/>
"Patient S.B went to Pendergraft for the second trimester abortion on Feb. 3, 2006. He prescribed doses of Cytotec, a drug that is known to cause severe and unpredictable uterine contractions and sent her home for three days to take the medication on her own. Pendergraft did not have a valid DEA number at the time.

When S.B. returned to the clinic, he further illegally administered doses of Cytotec, Demerol, and Phenergan. He attempted the abortion before the patient was adequately dilated, lacerating her cervix and sending her to the hospital where she underwent an emergency hysterectomy.

At the hospital, staff delivered the remains of S.B.'s baby and found that it was missing a lower limb. Efforts were made to locate the limb in the abdominal cavity to no avail. There were no indications on the patient's chart. Later, it was discovered that the limb had been removed at the clinic. This lack of documentation caused issues in providing the patient with proper emergency care.

Pendergraft was suspended and ordered to pay fines in excess of \$122,000. Pendergraft failed to pay, resulting in another disciplinary case attempting to seek payment. Finally, Friday's action suspended his license until further notice."

lost his license five times previously for failure to pay fines and performing an illegal third trimester abortion. That clinic, Orlando Women's Center, has reopened and Dr. Pendergraft continues to practice at that location.

In May 2010 there was an injury at a Planned Parenthood clinic in Naples that required an ambulance. In 2008, four clinics were cited with violations, including three clinics that were illegally performing second-trimester abortions and ordered to temporarily stop.⁸ Planned Parenthood has been cited for deficiencies in Fort Myers, 08/2015, Naples, 08/2015, Pembroke Pines, 07/2015 (failure to properly dispose of bodies), and St. Petersburg, 08/2015.

Planned Parenthood has repeatedly been ordered to stop performing abortions. On May 22, 2015, Planned Parenthood in Kissimmee was ordered to stop performing surgical abortions; the clinic filed an emergency motion to stay this mandate but was denied. The Agency for Health Care Administration sent a letter on Wednesday, August 19, 2015, to Planned Parenthood attorney Julie Gallagher stating, "Your client, Planned Parenthood, continues to misrepresent to the media that AHCA has changed its position, and Planned Parenthood clinics in Florida may now provide unauthorized second trimester abortions. This is false." The investigation continues.⁹

It is up to the Legislature of the State of Florida to ensure that these incidents which seriously jeopardize the health and safety of women are not allowed continue. Even one unnecessarily injured woman, or one clinic with unsanitary conditions is one too many. Based on its interest in protecting its citizens and the documentation of serious health and safety violations, the State should make passing HB 1411 a priority.

III. Ending Public Funding of Abortion Better Serves the Health of Women and Interest of Taxpayers

In *Harris v. McRae*, 448 U.S. 297(1980) the Supreme Court upheld the constitutionality of the Hyde Amendment, which prohibits federal monies from being used to fund abortions. The Court held that the government may distinguish between abortion and other medical procedures when considering public funding because "no other procedure involves the purposeful termination of a potential life," noting that the government's decision to prevent taxpayer funds from being used

⁸ (See Planned Parenthood Cuts Ties with 5 Clinics, MIAMI HERALD (July 2, 2008)).

⁹ Alliance Defending Freedom. Florida Report

for elective abortion served “the legitimate governmental objective of protecting potential life.”¹⁰ Additionally, the Court held that there are no requirements that states participating in Medicaid be obliged to fund medically necessary abortions nor that the lack of state funding had any bearing on constitutional rights of due process or privacy. Thus, the state of Florida has no constitutional obligation to fund any abortions with state monies, but does have an interest in protecting potential life.

a. The Truth About Planned Parenthood and Women’s Healthcare in Florida

The state of Florida should remove funding for abortion in this state and redistribute those dollars to federally qualified health centers (a.k.a. “community health centers” or CHCs), which are much more prolific than Planned Parenthood clinics and provide much more comprehensive care.¹¹

Florida is home to 636 Federally Qualified Health Clinics a Rural Health Clinics.¹² This number does not include the numerous healthcare providers that accept Medicaid for women’s health needs. Planned Parenthood has only 22 locations, none of which are in areas that do not have Federally Qualified Health Clinics. Additionally, Federally Qualified Health Clinics offer far more comprehensive services that cannot be found at Planned Parenthood such as mammograms, diabetes screenings, and immunizations (among others). It is a waste of taxpayer dollars and a disservice to women’s health to continue to fund locations that offer less comprehensive care to women at the expense of funding locations that provide more care.

Citizens of Florida, or any state can now easily find alternatives to Planned Parenthood through GetYourCare.org, which provides interactive maps that allowing people to look up where the closest comprehensive care clinic is located.

¹⁰ Harris v. McRae 448 U.S. 297 (1980) at 396. Holding, “Where, as here, Congress has neither invaded a substantive constitutional right or freedom nor enacted legislation that purposefully operates to the detriment of a suspect class, the only requirement of equal protection is that congressional action be rationally related to a legitimate governmental interest. The Hyde Amendment satisfies that standard, since, by encouraging childbirth except in the most urgent circumstances, it is rationally related to the legitimate governmental objective of protecting potential life.”

¹¹ Alliance Defending Freedom, <http://www.adflegal.org/issues/sanctity-of-life/beginning-of-life/planned-parenthood/the-whole-story>

¹² See Alliance Defending Freedom and Getyourcare.org

b. The State has an Interest in seeing that Taxpayer Money is Spent Ethically and Responsibly

A policy that redirects taxpayer funds away from abortion further serves the interests of ensuring tax money is not wasted and protecting taxpayers from funding a practice against which they hold sincere moral and ethical objections.

i. Hyde and Title X are not sufficient protections

The Hyde Amendment and Title X restrictions have proved insufficient in preventing taxpayer money from being used to fund abortion, directly or indirectly.

Although state and federal monies may be given to entities that perform abortion for “family planning” purposes, abortion facilities are no longer required to maintain complete separation of abortion and non-abortion services. They are only required to see that taxpayer money does not support abortion services. As Alliance Defending Freedom notes, “the separate revenue streams are often combined prior to being apportioned to various services. Additionally, there is no enforcement mechanism for the separation of funds. Abortion clinics are left to police themselves. Title X funds that go to Planned Parenthood arguably support and promote abortion, because the money doesn’t swim in separate streams as it flows out to different services.”¹³ They then quote Abby Johnson, former director of a Planned Parenthood in Texas who admitted that, “As clinic director, I saw how money received by Planned Parenthood affiliate clinics all went into one pot at the end of the day – it isn’t divvied up and directed to specific services.” It is simply an unconvincing accounting gimmick to claim that tax payer money does not go to funding abortion services, particularly when facilities combine their funding sources to pay expenses.

Since the state cannot be assured that its money is not being spent to fund abortions, it has an interest in removing funding altogether from entities that perform elective abortions.

ii. Abortion is big business

¹³ Investigate Their Plan, Discover the Difference Between What Planned Parenthood Says and What Planned Parenthood Does. Alliance Defending Freedom. at 6. https://adflegal.blob.core.windows.net/web-content-dev/documents/investigatetheirplan_booklet_textpages2.pdf?sfvrsn=4

The American public was sold a bill of goods when we were told that abortion must be legalized so that it can be safe legal, and rare. Abortion is big business.

Planned Parenthood, which has 22 locations in Florida, is by far the nation's largest abortion provider, performing approximately one out of every 4 abortions done in the United States.¹⁴ Planned Parenthood performed 327, 653 abortions in 2013¹⁵, and received \$528 million in taxpayer funding, accounting for 41% of its overall revenue.¹⁶

The Charlotte Lozier Institute fact sheet on world abortion numbers shows that “The United States is second in the world in number of abortions each year. If Planned Parenthood were included for comparison, it would rank sixth in the world in number of abortions carried out annually; and the International Planned Parenthood Federation would be fourth in the number of abortions carried out per year.”¹⁷

Far from being a rare practice, as Planned Parenthood claims, in 2013, abortions made up 94% of Planned Parenthood's pregnancy services, while prenatal care and adoption referrals accounted for only 5% (18,684) and 0.5% (1,880), respectively.¹⁸ More than half of Planned Parenthood's clinic revenue comes from abortions.¹⁹

As the recent undercover videos from The Center for Medical Progress make it abundantly clear, PP is known in the fetal tissue research industry as a “volume institution.”²⁰ Recently, Diane

¹⁴ Susan B. Anthony List, Top 12 Reasons to Defund Planned Parenthood Now. <http://www.sba-list.org/suzy-b-blog/top-12-reasons-defund-planned-parenthood-now>

¹⁵ PP 2013-2014 Annual Report, p. 18 PP 2013-2014 http://issuu.com/actionfund/docs/annual_report_final_proof_12.16.14_/0

¹⁶ PP 2013-2014 Annual Report, p. 20.

¹⁷ China leads the world in abortions with 9,173,000, followed by the US at 1,213,000; the Russian Federation at 1,208,700; International Planned Parenthood Federation at 977,189, India at 641,800; Vietnam at 332,200; and Planned Parenthood USA at 327,653. <https://www.lozierinstitute.org/wp-content/uploads/2015/07/Abortion-World-Leaders.pdf>

¹⁸ Susan B. Anthony List Fact Sheet, Planned Parenthood Annual Report (2013-2014) http://www.sba-list.org/sites/default/files/content/shared/12.31.14fact_sheet_pp_2013_2014_annual_report.pdf; PP 2013-2014 Annual Report, p. 18. http://issuu.com/actionfund/docs/annual_report_final_proof_12.16.14_/0

¹⁹ Alliance Defending Freedom chart based on Planned Parenthood's Annual Reports. <http://adfflegal.org/issues/sanctity-of-life/beginning-of-life/investigate-their-plan/key-issues/abortion-quotas>

²⁰ CMP video# 8 features the CEO of StemExpress, LLC stating that “PP has volume. You know, because they're a volume institution.” <https://youtu.be/cz1gRNPgMvE> It is important to note that an independent forensic analysis report on the CMP video content has been completed. Digital Forensic Analysis Report, Delivered to Alliance Defending Freedom, September 28, 2015., Prepared by Coalfire Systems, Inc., “Coalfire's analysis of the recorded media files contained on the flash drive indicates that the video recordings are authentic and show no evidence of manipulation or editing. This conclusion is supported by the consistency of the video file date and time stamps, the video timecode, as well as the folder and file naming scheme. The uniformity between the footage from

Derzis, owner of the last abortion clinic in Mississippi appeared on the Alan Colmes radio show supporting the defunding of Planned Parenthood. She notes, "I agree that Planned Parenthood should be defunded. Absolutely. They actually do more abortions than anyone in the country, even though they talk about doing only 3%, that's not quite accurate – they do more than anyone in the country. And they are the Wal-Mart of abortion."²¹

Planned Parenthood has issued a directive instructing that all affiliates must have at least one clinic that performs abortion by 2013, and has required that its affiliates fulfill abortion "quotas."²² Former Planned Parenthood clinic director Abby Johnson has written that she was given an abortion quota, and was even told by her superiors to "double the number of abortions" in order to bring in more revenue.²³

Redirecting state funding to entities that offer more comprehensive healthcare services furthers the state's interest in maternal health and the health of its citizens, in general.

iii. Women's healthcare will not be negatively affected

Healthcare services for women, low-income women in particular, will only improve when state money is redirected away from abortion services and into more comprehensive health care clinics.

Planned Parenthood's healthcare "services" for women are far from adequate. Their most recent report reveals that while abortions rose slightly last year, adoption referrals by Planned Parenthood dropped 14%, prenatal care services dropped 4%.⁸, cancer prevention services are

the cameras from the two Investigators also support the evidence that the video recordings are authentic." p2 http://www.adflegal.org/content/docs/ADF_Forensic_Analysis_Report-09282015.pdf

²¹ Diane Derzis, <http://liveactionnews.org/abortion-clinic-owner-planned-parenthood-should-be-defunded/>

²² Susan B. Anthony List, Top 12 Reasons to Defund Planned Parenthood Now. <http://www.sba-list.org/suzy-b-blog/top-12-reasons-defund-planned-parenthood-now>, citing Chiaroscuro Foundation Report, "Does Planned Parenthood Need or Deserve Federal Funds?," March, 2011.

²³ Susan B. Anthony List, Top 12 Reasons to Defund Planned Parenthood Now. <http://www.sba-list.org/suzy-b-blog/top-12-reasons-defund-planned-parenthood-now> citing Abby Johnson Op-Ed in The Hill, "Exposing the Planned Parenthood business model," April 4, 2011.

down 17% over one year, and contraceptive services dropped by 4% despite reporting more than \$127 million in excess revenue, and more than \$1.4 billion in net assets.²⁴

As Chuck Donovan notes in his analysis of Planned Parenthood and public funds, if every penny of taxpayer dollars currently received by Planned Parenthood, was reallocated to community health centers (CHC), it would support 1.56 million new CHC patients.²⁵

Additionally, “CHC patients would receive a much fuller range of women’s primary care services they are either presently receiving at a third site – neither Planned Parenthood nor a CHC – or not receiving at all,”²⁶ such as mammograms, which Planned Parenthood does not perform at any of its facilities.

Donovan then highlights the extensive network of better qualified health centers already available to women. There are already over 13,000 federally qualified health centers, and rural health centers nationwide that provide primary care services and preventative health services including prenatal, primary, and preventative care as well as contraceptive services mammograms.²⁷ “If Planned Parenthood could no longer ‘afford’ to care for 1 million women, the net change in patient population per FQHC service site is approximately 110 women – that is, two additional women per week for basic well woman care, STD checks, family planning if desired, Pap smears and so forth.”²⁸

As one of the world’s largest and most lucrative non-profits, Planned Parenthood would be able to access multiple sources of funding to keep itself afloat in the absence of government money. Without any state or federal funding, Planned Parenthood “would retain 59% of its current baseline income.” “One could grant a slight loss in client load due just to lower economies of scale, but even so, an estimated 1.6 million of Planned Parenthood’s current clients would

²⁴ Susan B. Anthony List Fact Sheet, Planned Parenthood Annual Report (2013-2014) http://www.sba-list.org/sites/default/files/content/shared/12.31.14fact_sheet_pp_2013_2014_annual_report.pdf; PP 2013-2014 Annual Report, p. 18. http://issuu.com/actionfund/docs/annual_report_final_proof_12.16.14_/0

²⁵ Charles Donovan, Planned Parenthood and the Public Purse. September 29, 2015. Charlotte Lozier Institute. <https://www.lozierinstitute.org/planned-parenthood-and-the-public-purse/>

²⁶ <https://www.lozierinstitute.org/planned-parenthood-and-the-public-purse/>

²⁷ <https://www.lozierinstitute.org/planned-parenthood-and-the-public-purse/>

²⁸ <https://www.lozierinstitute.org/planned-parenthood-and-the-public-purse/>

remain covered by the group's budget – without taking into account any internal reallocation of funds to low-income women, lower-cost centers, or lower-cost services.”²⁹

The state of Texas stopped funding abortion providers after Planned Parenthood agreed to pay \$4.3 million to settle a claim against it for Medicaid billing fraud. Texas now funds a network of providers serving low-income women called the Women's Health Program. This program offers family planning services, contraception and health screenings. The result has been an 81% increase in health care services for women at community clinics, 26% decrease in Medicaid claims, as well as a decrease in abortions – from from 65,547 in 2012 compared to 61,513 in 2013. Casey Mattox, of Alliance Defending Freedom noted that, “The data belies the claim that Planned Parenthood was necessary to women's health care in Texas,”³⁰

iv. Medicaid Fraud/Waste

The state has an interest in seeing that taxpayer money is not misused. Unfortunately, Planned Parenthood has a long history of improper billing practices. “A large and growing number of federal and state audits have documented that improper practices by Planned Parenthood and state family planning agencies have already resulted in losses to the American taxpayer of more than \$115 million, as a minimum, in Title XIX-Medicaid and other healthcare funding programs.”³¹ Almost all of the forty-four known external audits or reviews of Planned Parenthood affiliates have shown overbilling – including “over \$8 million to Planned Parenthood affiliates for family planning and reproductive health services claims. In combination with the

²⁹ <https://www.lozierinstitute.org/planned-parenthood-and-the-public-purse/> noting, In short, another way to look at Congressional reprogramming of Planned Parenthood funding would be to see it as a move from a high-profit, high-cost boutique supplier to a true-nonprofit, low-cost approach. Moreover, the actual changes in service involve improvements in access to primary care and other services from which women will benefit. The cost to the individual patient (and therefore to the government or private insurance) of family planning services will not change and the availability of other primary care services not currently accessed (the real crisis for these women) will be solved.

³⁰ Kelsey Harkness, If Planned Parenthood Loses Government Funding, Here's a Map of Health Clinics That Could Take Its Place. August 17, 2015. The Daily Signal. Noting, Casey Mattox of Alliance Defnding Freedom, “<http://dailysignal.com/2015/08/17/planned-parenthood-loses-government-funding-heres-map-health-clinics-take-place/>

³¹ Profit. No Matter What. Alliance Defending Freedom's Annual Report on Publicly Available Audits of Planned Parenthood Affiliates and State Family Planning Programs July 23, 2014. at ii. <https://adflegal.blob.core.windows.net/web-content-dev/documents/life---planned-parenthood-overview---adf-report-to-congress-on-planned-parenthood-fraud.pdf?sfvrsn=18>

\$4.3 million settlement in the Reynolds False Claims Act lawsuit, auditors and investigators have specifically identified Planned Parenthood affiliates as the source of at least \$12.6 million in waste, abuse, and potentially fraudulent overbilling of taxpayers.”³²

v. Taxpayer Dollars are Funding Political Campaigns

The expenditure of state monies by a non-profit on political campaigning represents a misuse of taxpayer dollars. Planned Parenthood has given multiple millions of dollars to candidates who will push their agenda. In 2012, Planned Parenthood spent \$12 million on the campaign to reelect President Obama. As of 2013, Planned Parenthood has spent over \$30 million on campaign contributions and \$11 million on lobbying efforts.³³ Such extensive political contributions serve to demonstrate that Planned Parenthood is not in need of taxpayer money and is misusing federal and state funds to buy political support.

IV. Conclusion

Concerns over the evidence of fraud, misuse of funds, and extensive donations to political campaigns warrant the proposed legislation to defund entities that perform elective abortions. Furthermore, the health of the citizens of Florida will be better served by diverting those funds to comprehensive health care clinics.

HB 1411 will also allow the state to better ensure the health and safety of its citizens by requiring common-sense regulations on abortion procedures, providers, and clinics. None of these regulations implicates a burden on the fundamental right of privacy of a woman to choose an abortion as they simply mirror existing state regulation of medical providers and do not directly restrict a woman’s choice.

³² <https://adflegal.blob.core.windows.net/web-content-dev/documents/life---planned-parenthood-overview---adf-report-to-congress-on-planned-parenthood-fraud.pdf?sfvrsn=18> at 2.

³³ Profit. No Matter What. Alliance Defending Freedom’s Annual Report on Publicly Available Audits of Planned Parenthood Affiliates and State Family Planning Programs July 23, 2014. at ii.
<https://adflegal.blob.core.windows.net/web-content-dev/documents/life---planned-parenthood-overview---adf-report-to-congress-on-planned-parenthood-fraud.pdf?sfvrsn=18>

On behalf of the taxpayers and concerned citizens of the State of Florida, I urge you to pass HB 1411.