



Health Care Appropriations Subcommittee

Wednesday, October 23, 2019
12:30 pm – 2:30 pm
Sumner Hall (404 HOB)

ACTION PACKET

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
10/23/2019 12:30PM

Location: Sumner Hall (404 HOB)

Summary: No Bills Considered

Committee meeting was reported out: Wednesday, October 23, 2019 5:16PM

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
10/23/2019 12:30PM

Location: Sumner Hall (404 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
MaryLynn Magar (Chair)	X		
Loranne Ausley	X		
Colleen Burton	X		
Nicholas Duran	X		
James Grant	X		
Michael Grieco	X		
Shevrin Jones	X		
Cary Pigman	X		
Spencer Roach	X		
Ana Maria Rodriguez	X		
Bob Rommel	X		
Cyndi Stevenson	X		
Totals:	12	0	0

Committee meeting was reported out: Wednesday, October 23, 2019 5:16PM

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
10/23/2019 12:30PM

Location: Sumner Hall (404 HOB)

Presentation/Workshop/Other Business Appearances:

CBC Funding Model Presentation

Lloyd, Tony (State Employee) (At Request of Member, Committee or Staff) - Information Only
Department of Children and Families
Assistant Secretary for Administration
1317 Winewood Blvd.
Tallahassee FL 32399
Phone: 850488-9410

CBC Funding Model Presentation

Poppell, Chad (State Employee) (At Request of Member, Committee or Staff) - Information Only
Department of Children and Families
Secretary
1317 Winewood Blvd.
Tallahassee FL 32399
Phone: 850488-9410

CBC Funding Model Presentation

Zepp, Victoria (Lobbyist) - Information Only
Florida Coalition for Children
Chief Policy & Research Officer
411 E College Ave 9007
Tallahassee FL 32301
Phone: (850) 561-1102

CBC Funding Model Presentation

Jaacks, Melissa (General Public) (At Request of Member, Committee or Staff) - Information Only
Department of Children and Families
Governor Consultant
1317 Winewood Blvd.
Tallahassee FL 32399
Phone: 850488-9410

Community Based Care Funding Model

Levine, Jack - Information Only
4 Generations Institute
4TN Generation. Distute
P. O. Box 10875
Tallahassee FL 32302
Phone: (850) 222-7140

Title IV-E Waiver/FFPSA

Medlock, Patricia (State Employee) (At Request of Member, Committee or Staff) - Information Only
Department of Children and Families
Assistant Secretary for Child Welfare
1317 Winewood Blvd.
Tallahassee FL 32399
Phone: 850488-9410

Committee meeting was reported out: Wednesday, October 23, 2019 5:16PM

COMMITTEE MEETING REPORT
Health Care Appropriations Subcommittee
10/23/2019 12:30PM

Location: Sumner Hall (404 HOB)

Presentation/Workshop/Other Business Appearances: (continued)

Title IV-E Waiver/FFPSA

Lloyd, Tony (State Employee) (At Request of Member, Committee or Staff) - Information Only
Department of Children and Families
Assistant Secretary for Administration
1317 Winewood Blvd.
Tallahassee FL 32399
Phone: 850488-9410

Title IV-E Waiver/FFPSA

Zepp, Victoria Vangalis (Lobbyist) - Information Only
Exec. Dir. Gov't Community Affairs/FI Coalition for Children
Chief Policy & Research Officer
411 E. College Ave
Tallahassee FL 32301
Phone: 850-241-6309

Committee meeting was reported out: Wednesday, October 23, 2019 5:16PM



40246703



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: N/A Amendment Barcode Number: N/A

Name: **Lloyd, Tony**

Representing: **Department of Children and Families**

Title: **Assistant Secretary for Administration**

Address: **1317 Winewood Blvd.**

City: **Tallahassee** State/Zip: **FL 32399**

Phone Number: **850488-9410** Meeting Date: **October 23, 2019 12:30 PM**

Committee/Subcommittee: **Health Care Appropriations Subcommittee**

Presentation/Workshop Topic: **Other Business : CBC Funding Model Presentation**

<input type="checkbox"/> Registered Lobbyist <input checked="" type="checkbox"/> State Employee <input type="checkbox"/> I Wish To Speak <input type="checkbox"/> Appearing in response to subpoena <input checked="" type="checkbox"/> Appearing in response to an inquiry for information made by member, committee or staff <input type="checkbox"/> Appearing at the written request of the chair <input type="checkbox"/> Judge or elected officer appearing in official capacity <input type="checkbox"/> Lobbyist Appearance Form Submitted	<table border="1"> <tr> <td style="text-align: center;"><u>Bill</u></td> </tr> <tr> <td>Info Only</td> </tr> <tr> <td style="text-align: center;"><u>Amendment</u></td> </tr> <tr> <td>N/A</td> </tr> </table>	<u>Bill</u>	Info Only	<u>Amendment</u>	N/A
<u>Bill</u>					
Info Only					
<u>Amendment</u>					
N/A					



79214419



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: N/A Amendment Barcode Number: N/A

Name: **Poppell, Chad**

Representing: **Department of Children and Families**

Title: **Secretary**

Address: **1317 Winewood Blvd.**

City: **Tallahassee** State/Zip: **FL 32399**

Phone Number: **850488-9410** Meeting Date: **October 23, 2019 12:30 PM**

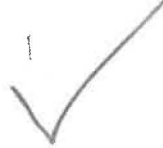
Committee/Subcommittee: **Health Care Appropriations Subcommittee**

Presentation/Workshop Topic: **Other Business : CBC Funding Model Presentation**

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<u>Bill</u>					
Info Only					
<u>Amendment</u>					
N/A					



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD



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

Bill Amendment

Bill/PCS/PCB Number: _____

Amendment Barcode Number: _____

Name: Victoria Zapp

Representing: FL COALITION for CHILDREN

Title: Chief Policy + Research Ofcr

Address: 411 E. College Ave

City: TLH State/Zip: 32301

Phone Number: 850-561-1102 Meeting Date: 10/23/19

Committee/Subcommittee: HHS Approps

Presentation/Workshop Topic: Community Based Care Model

Registered Lobbyist: YES NO

State Employee: YES NO

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

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

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

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



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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: N/A Amendment Barcode Number: N/A

Name: **Jaacks, Melissa**

Representing: **Department of Children and Families**

Title: **Government Consultant**

Address: **1317 Winewood Blvd.**

City: **Tallahassee** State/Zip: **FL 32399**

Phone Number: **850488-9410** Meeting Date: **October 23, 2019 12:30 PM**

Committee/Subcommittee: **Health Care Appropriations Subcommittee**

Presentation/Workshop Topic: **Other Business : CBC Funding Model Presentation**

- Registered Lobbyist
- State Employee
- I Wish To Speak
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<u>Bill</u>
Info Only
<u>Amendment</u>
N/A



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD



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

Bill Amendment

Bill/PCS/PCB Number: _____

Amendment Barcode Number: _____

Name: JACK LEVINE - Rhymes w/ Green

Representing: Self

Title: 4 Generations Institute

Address: Box 203

City: Dallah State/Zip: 3230

Phone Number: 850 567 5252 Meeting Date: 10/23/19

Committee/Subcommittee: HHS Appropriations

Presentation/Workshop Topic: Information only

Registered Lobbyist: YES NO

State Employee: YES NO

- I wish to speak
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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: N/A Amendment: N/A

Name: **Patricia Medlock**

Representing: **Department of Children and Families**

Title: *Asst. Sec. for Child Welfare*

Address: **1317 Winewood Blvd.**

City: **Tallahassee** State/Zip: **FL 32399**

Phone Number: **850488-9410** Meeting Date: **October 23, 2019 12:30 PM**

Committee/Subcommittee: **Health Care Appropriations Subcommittee**

Presentation/Workshop Topic: **Title IV-E Waiver/FFPSA**

- Registered Lobbyist
- State Employee
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<u>Bill</u>
Info Only
<u>Amendment</u>
N/A



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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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

<input checked="" type="checkbox"/> Bill <input type="checkbox"/> Amendment Bill Number: N/A Amendment: N/A

Name: **Tony Lloyd**

Representing: **Department of Children and Families**

Title: **Asst. Secretary for Administration**
~~Child Welfare~~

Address: **1317 Winewood Blvd.**

City: **Tallahassee** State/Zip: **FL 32399**

Phone Number: **850488-9410** Meeting Date: **October 23, 2019 12:30 PM**

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Presentation/Workshop Topic: **Title IV-E Waiver/FFPSA**

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Info Only
<u>Amendment</u>
N/A



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Bill/PCS/PCB Number: _____

Amendment Barcode Number: _____

Name: Victoria Zepp

Representing: FL COALITION for CHILDREN

Title: Chief Policy + Research Officer

Address: 411 E. College Ave.

City: T4H State/Zip: 32301

Phone Number: 850/561-1102 Meeting Date: 10/23/19

Committee/Subcommittee: HHS. Approps

Presentation/Workshop Topic: Title IV E + FFPSA

Registered Lobbyist: YES NO

State Employee: YES NO

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