

COMMITTEE MEETING EXPANDED AGENDA**BUDGET SUBCOMMITTEE ON HEALTH AND HUMAN
SERVICES APPROPRIATIONS****Senator Negron, Chair****Senator Rich, Vice Chair****MEETING DATE:** Thursday, February 2, 2012**TIME:** 8:00 —9:45 a.m.**PLACE:** *Toni Jennings Committee Room*, 110 Senate Office Building**MEMBERS:** Senator Negron, Chair; Senator Rich, Vice Chair; Senators Gaetz, Garcia, Oelrich, Richter, and Sobel

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Review and Discussion of Fiscal Year 2012-2013 Budget Issues Relating to: Agency for Health Care Administration Agency for Persons with Disabilities Department of Children and Family Services Department of Elder Affairs Department of Health Department of Veterans' Affairs	Discussed	
	Public Testimony		Discussed
	Other Related Meeting Documents		

No material available

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

2-2-12

Meeting Date

Topic Senate Budget Recommendation

Bill Number 5
(if applicable)

Name Judy Griffin

Amendment Barcode _____
(if applicable)

Job Title ARNP

Address 1300 Milcomake Rd

Phone 850-431-4470

Street

Tallahassee FL 32308

City

State

Zip

E-mail judy.griffin@tark.org

Speaking: ☒ For ☐ Against ☐ Information

Representing Tallahassee Memorial Hospital

Appearing at request of Chair: ☐ Yes ☐ No

Lobbyist registered with Legislature: ☐ Yes ☐ No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Feb 2

Meeting Date

Topic medicaid cuts in a Burn Unit

Bill Number _____
(if applicable)

Name ASHlee Allen

Amendment Barcode _____
(if applicable)

Job Title RN

Address 4030 NW 20th Drive
Street

Phone 801-473-3345

Gainesville FL 32605
City State Zip

E-mail ashallen24@yahoo.com

Speaking: ☐ For ☒ Against ☐ Information

Representing University of Florida Shand Burn LLC

Appearing at request of Chair: ☐ Yes ☐ No

Lobbyist registered with Legislature: ☐ Yes ☐ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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Meeting Date _____

Topic Senate Budget

Bill Number _____
(if applicable)

Name Annmarie J. FARRO RN

Amendment Barcode _____
(if applicable)

Job Title Florida Nurses Assoc. Director @ Large

Address 16250 SE 27 Ave

Phone 352-816-4117

Street

Summerfield Fla 34491

City

State

Zip

E-mail Memabeaches@aol.com

Speaking: ☐ For ☐ Against ☐ Information

Representing F.N.A. / FNA

Appearing at request of Chair: ☐ Yes ☐ No

Lobbyist registered with Legislature: ☐ Yes ☐ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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2/2/12

Meeting Date

Topic Medicaid funding

Name Kathy Powell

Job Title Nurse Manager

Address 1515 SW Archer Rd

Street

Gacherville, FL 32610

City

State

Zip

Bill Number _____
(if applicable)

Amendment Barcode _____
(if applicable)

Phone 265-0111 x 29446

E-mail powelka@shandsfl.edu

Speaking: ☐ For ☐ Against ☐ Information

Representing Shands Hospital - Gacherville

Appearing at request of Chair: ☐ Yes ☐ No

Lobbyist registered with Legislature: ☐ Yes ☐ No

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S-001 (10/20/11)

THE FLORIDA SENATE
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2/2/12

Meeting Date

Topic Medicaid funding

Bill Number _____
(if applicable)

Name Jennifer Rackley

Amendment Barcode _____
(if applicable)

Job Title PH - Shands

Address 1600 SW Archer Rd

Phone 352-265-1004

Street

Gainesville

FL

32608

City

State

Zip

E-mail rackj@shands.vfl.edu

Speaking: ☐ For ☐ Against ☐ Information

Representing _____

Appearing at request of Chair: ☐ Yes ☐ No

Lobbyist registered with Legislature: ☐ Yes ☐ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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2/2/2010

Meeting Date

Topic Health care / Medicaid funding Bill Number _____ (if applicable)
Name Suzanne Conrad Amendment Barcode _____ (if applicable)
Job Title Nurse Practitioner
Address 5401 SW 86th Dr. Phone 352-494-9967
Gainesville FL 32608 E-mail Conrad@shands.
City State Zip Ufl. edu
Speaking: ☐ For ☒ Against ☐ Information
Representing low income families / Shands
Appearing at request of Chair: ☐ Yes ☒ No Lobbyist registered with Legislature: ☐ Yes ☒ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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2-2-2012

Meeting Date

Topic Medicaid Funding of County Health Department

Dental Clinics
Bill Number _____

(if applicable)

Name Dr. Laban Bontrager

Amendment Barcode _____

(if applicable)

Job Title Private Dentist

Address 12799 NW Pea Ridge Rd

Street

Bristol

FL

32321

City

State

Zip

Phone 850-643-5417

E-mail drb@gtcom.net

Speaking: ☐ For ☐ Against ☒ Information

Representing Self

Appearing at request of Chair: ☐ Yes ☒ No

Lobbyist registered with Legislature: ☐ Yes ☒ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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2/2/12
Meeting Date

Topic Adult Community Mental Health

Bill Number _____
(if applicable)

Name Chiquita Ivory

Amendment Barcode _____
(if applicable)

Job Title Member-Vincent

Address 4200 62nd Ave N. Apt 295
Street
Pinellas Park FL 33781
City State Zip

Phone 727-623-7776

E-mail _____

Speaking: ☒ For ☐ Against ☐ Information

Representing Vincent House

Appearing at request of Chair: ☐ Yes ☒ No

Lobbyist registered with Legislature: ☐ Yes ☒ No

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S-001 (10/20/11)

THE FLORIDA SENATE
APPEARANCE RECORD

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2/2/12

Meeting Date

Topic Adult Community Mental Health

Bill Number _____
(if applicable)

Name Dianne Steele

Amendment Barcode _____
(if applicable)

Job Title Assistant Director

Address 4801 78th Avenue

Phone 727-543-5022

Street

Pinellas Park

FL

33781

City

State

Zip

E-mail Vincenthouse-dianne@
Verizon.net

Speaking: ☒ For ☐ Against ☐ Information

Representing Vincent House

Appearing at request of Chair: ☐ Yes ☒ No

Lobbyist registered with Legislature: ☐ Yes ☒ No

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S-001 (10/20/11)

CourtSmart Tag Report

Room: EL 110

Case:

Caption: Senate Budget Subcommittee on Health and Human Services Appropriations

Type:

Judge:

Started: 2/2/2012 8:04:02 AM

Ends: 2/2/2012 9:04:35 AM **Length:** 01:00:34

8:04:07 AM Meeting called to order
8:04:08 AM Roll call
8:04:29 AM Opening remarks - Chairman
8:07:23 AM Tab 1 - Review and Discussion of Fiscal Year 2012-2013 Budget Issues Relating to:
8:10:36 AM Public Testimony:
8:10:45 AM Judy Griffin, ARNP, Tallahassee Memorial Hospital
8:13:33 AM Ashlee Allen, RN, UF Shand Burn Unit
8:17:24 AM AnnMarie Farro, RN
8:23:13 AM Kathy Powell, Nurse Manager, Shands Hospital
8:25:48 AM Jennifer Rackley, RN, Shands
8:29:15 AM Suzanne Conrad, Nurse Practitioner, Shands
8:32:26 AM Dr. Laban Bontrager, Dentist, Liberty County
8:52:38 AM Chiquita Ivory, Vincent House
8:54:28 AM Dianne Steele, Assistant Director, Vincent House
9:03:32 AM Closing Remarks
9:03:39 AM Adjourned