

Tab 1	SB 398 by Burgess (CO-INTRODUCERS) Smith, Berman, Sharief ; Similar to H 01065 Awareness Program for Alzheimer’s Disease and Dementia-related Disorders
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Tab 2	SB 714 by Burton ; Similar to H 01081 Nonopioid Advance Directives
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218790 A S RCS AHS, Burton Delete L.44 - 51: 03/18 12:16 PM

Tab 3	SB 734 by Yarborough (CO-INTRODUCERS) Burgess, Rouson, Martin ; Similar to H 00025 Actions for Recovery of Damages for Wrongful Death
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Tab 4	CS/SB 756 by BI, Burton ; Similar to H 00377 Health Insurance Coverage for Individuals with Developmental Disabilities
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The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA
APPROPRIATIONS COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Trumbull, Chair
Senator Davis, Vice Chair

MEETING DATE: Tuesday, March 18, 2025
TIME: 9:30—11:30 a.m.
PLACE: Pat Thomas Committee Room, 412 Knott Building

MEMBERS: Senator Trumbull, Chair; Senator Davis, Vice Chair; Senators Berman, Brodeur, Burton, Garcia, Gruters, Harrell, Rodriguez, and Rouson

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	SB 398 Burgess (Similar H 1065)	Awareness Program for Alzheimer’s Disease and Dementia-related Disorders; Requiring the Department of Elderly Affairs to contract for the development and implementation of the Alzheimer’s Disease Awareness Program; requiring the Alzheimer’s Disease Advisory Committee to evaluate the program and make certain recommendations, etc. CF 03/04/2025 Favorable AHS 03/18/2025 Favorable FP	Favorable Yeas 10 Nays 0
2	SB 714 Burton (Similar H 1081)	Nonopioid Advance Directives; Requiring the Department of Health to develop a voluntary nonopioid advance directive form for a specified purpose and make the form available on its website; authorizing a patient to revoke the form for any reason, verbally or in writing; providing health care providers with immunity from civil and criminal liability for failing to act in accordance with an advance directive under certain circumstances, etc. HP 03/04/2025 Favorable AHS 03/18/2025 Fav/CS FP	Fav/CS Yeas 9 Nays 0
3	SB 734 Yarborough (Similar H 25, H 6017, S 616)	Actions for Recovery of Damages for Wrongful Death; Deleting a provision prohibiting the recovery of certain damages by specified parties related to the decedent in wrongful death proceedings, etc. JU 03/04/2025 Favorable AHS 03/18/2025 Favorable RC	Favorable Yeas 8 Nays 2
4	CS/SB 756 Banking and Insurance / Burton (Similar H 377)	Health Insurance Coverage for Individuals with Developmental Disabilities; Revising the definitions of the terms “autism spectrum disorder” and “eligible individual”, etc. BI 03/10/2025 Fav/CS AHS 03/18/2025 Favorable FP	Favorable Yeas 10 Nays 0

COMMITTEE MEETING EXPANDED AGENDA

Appropriations Committee on Health and Human Services
Tuesday, March 18, 2025, 9:30—11:30 a.m.

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
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Other Related Meeting Documents

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Appropriations Committee on Health and Human Services

BILL: SB 398

INTRODUCER: Senator Burgess and others

SUBJECT: Awareness Program for Alzheimer’s Disease and Dementia-related Disorders

DATE: March 17, 2025

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Rao</u>	<u>Tuszynski</u>	<u>CF</u>	Favorable
2.	<u>Gerbrandt</u>	<u>McKnight</u>	<u>AHS</u>	Favorable
3.	_____	_____	<u>FP</u>	_____

I. Summary:

SB 398 requires the Department of Elderly Affairs (DOEA) to contract for the development and implementation of the Alzheimer’s Disease Awareness Program. The bill specifies requirements for the program and conditions for the contracted entity.

The bill requires the Alzheimer’s Disease Advisory Committee to annually evaluate the program and determine if future funding is needed.

The bill has a significant negative impact on state expenditures. The bill appropriates \$1.5 million to the DOEA to implement the bill. **See Section V. Fiscal Impact Statement.**

The bill takes effect July 1, 2025.

II. Present Situation:

Alzheimer's Disease and Dementia-Related Disorders

Dementia is a general term for an individuals’ decline in memory, language, and problem-solving capabilities.¹ Common causes of dementia include:²

- Alzheimer’s disease;
- Cerebrovascular disease;
- Frontotemporal degeneration;

¹ Alzheimer’s Association, *2024 Alzheimer’s Disease Facts and Figures*, available at: <https://www.alz.org/getmedia/76e51bb6-c003-4d84-8019-e0779d8c4e8d/alzheimers-facts-and-figures.pdf> (last visited 2/17/25).

² Alzheimer’s Association, *2024 Alzheimer’s Disease Facts and Figures*, available at: <https://www.alz.org/getmedia/76e51bb6-c003-4d84-8019-e0779d8c4e8d/alzheimers-facts-and-figures.pdf> (last visited 2/17/25).

- Hippocampal sclerosis;
- Lewy body disease;
- Mixed pathologies; and
- Parkinson's Disease.

Alzheimer's disease is the most common type of dementia and is considered a progressive disease, which means symptoms worsen with time.³ Alzheimer's disease causes damage to the brain's neurons, which can lead to decreased cognitive functioning and an increased need for assistance in performing daily tasks.⁴ Individuals with Alzheimer's disease may develop changes in their mood or engage in behaviors that could be dangerous, such as wandering from a safe location and being unable to retrace their steps back to safety.⁵ Due to the damage to the brain's neurons, individuals lose the ability to engage in bodily functions such as walking or swallowing and require continual care.⁶ On average, individuals live with Alzheimer's disease four to eight years after a diagnosis.⁷ However, the lifespan of an individual with Alzheimer's disease is contingent on factors such as age and co-occurring health conditions. Some individuals have lived over twenty years after receiving an Alzheimer's disease diagnosis.⁸

It is estimated that there are more than six million Americans that currently live with Alzheimer's disease.⁹ Research predicts that by 2060, there will be an expected 13 million individuals living with Alzheimer's disease nationwide.¹⁰

There are an estimated 580,000 Floridians over the age of 65 that are living with Alzheimer's disease.¹¹ Due to Florida's high population of individuals over the age of 65 (21% of Florida's population), this number is expected to grow in the coming years.¹²

The Department of Elderly Affairs

The Department of Elderly Affairs (DOEA) is charged with administering programs and services for elders across the state of Florida, including services for those affected by Alzheimer's

³ U.S. Department of Health and Human Services National Health Statistics Reports, *Diagnosed Dementia in Adults Age 65 and Older: United States, 2022*, available at: <https://www.cdc.gov/nchs/fastats/alzheimers.htm> (last visited 2/17/25) and Alzheimer's Association, 2024 Alzheimer's Disease Facts and Figures, available at: <https://www.alz.org/getmedia/76e51bb6-c003-4d84-8019-e0779d8c4e8d/alzheimers-facts-and-figures.pdf> (last visited 2/17/25).

⁴ Alzheimer's Association, 2024 *Alzheimer's Disease Facts and Figures*, available at: <https://www.alz.org/getmedia/76e51bb6-c003-4d84-8019-e0779d8c4e8d/alzheimers-facts-and-figures.pdf> (last visited 2/17/25).

⁵ *Id.*

⁶ *Id.*

⁷ *Id.*

⁸ *Id.*

⁹ U.S. Department of Health and Human Services, *National Plan to Address Alzheimer's Disease: 2024 Update*, available at: <https://aspe.hhs.gov/collaborations-committees-advisory-groups/napa/napa-documents/napa-national-plan> (last visited 2/17/25).

¹⁰ *Id.*

¹¹ Florida Department of Elderly Affairs, *Alzheimer's Disease Advisory Committee Annual Report (2023)*, available at: <https://elderaffairs.org/programs-services/bureau-of-elder-rights/alzheimers-disease-initiative/> (last visited 2/17/25).

¹² *Id.*

disease.¹³ The DOEA contracts with Area Agencies on Aging¹⁴ that are required to ensure prevention, early intervention, and long-term care services to the elderly population in Florida.¹⁵ There are currently eleven Area Agencies on Aging across the state, which operate as Aging and Disability Resource Centers (ADRCs).¹⁶ The ADRCs provide residents with information about state, federal, and local programs and benefits.¹⁷

Alzheimer's Disease Initiative

In 1985, the Legislature established the Alzheimer's Disease Initiative (ADI), intended to provide services for individuals and families that have been affected by Alzheimer's disease.¹⁸ The Dementia Director, appointed by the Secretary of Elderly Affairs, is responsible for providing support to memory disorder clinics throughout the state, facilitating coordination for services between a variety of providers, and monitoring data on the impact of Alzheimer's disease in Florida.¹⁹

Services for Individuals and Families affected by Alzheimer's Disease

Memory disorder clinics throughout the state provide diagnostic and therapeutic settings for individuals with Alzheimer's disease. These settings allow for the research of Alzheimer's disease and training of professionals that care for individuals with Alzheimer's disease.²⁰

Respite care provides temporary relief for caregivers and may be provided in conjunction with a memory disorder clinic.²¹ Respite options for caregivers of individuals with Alzheimer's disease may include:²²

- In-home care.
- Facility-based care.
- Specialized adult day care.
- Emergency respite care.
- Extended care for up to 30 days.

Other supportive services for caregivers may include:²³

- Case management.

¹³ Chapter 430, F.S.; Florida Department of Elderly Affairs, *About Us*, available at: <https://elderaffairs.org/> (last visited 2/14/25).

¹⁴ Florida law defines an "area agency on aging" as a public or nonprivate private agency or office designated by the DOEA to coordinate and administer the DOEA's programs and to provide, through contracting agencies, services within a planning and service area. Area Agencies on Aging serve as both the advocate and the visible focal point in its planning and service area to foster the development of comprehensive and coordinated service systems to serve older individuals.

¹⁵ Section 20.41, F.S.

¹⁶ Florida Department of Elderly Affairs, *About Us*, available at: <https://elderaffairs.org/> (last visited 2/14/25).

¹⁷ *Id.*

¹⁸ Florida Department of Elderly Affairs, *Alzheimer's Disease Initiative (ADI)*, available at: <https://elderaffairs.org/programs-services/bureau-of-elder-rights/alzheimers-disease-initiative/> (last visited 2/17/25); Ch. 85-145, L.O.F.

¹⁹ Section 430.5015, F.S.

²⁰ Section 430.502, F.S.

²¹ Section 430.502, F.S.

²² Florida Department of Elderly Affairs, *Alzheimer's Disease Initiative (ADI)*, available at: <https://elderaffairs.org/programs-services/bureau-of-elder-rights/alzheimers-disease-initiative/> (last visited 2/17/25).

²³ *Id.*

- Specialized medical equipment and supplies.
- Caregiver counseling and support groups.
- Caregiver training and relief.

Alzheimer's Disease Advisory Committee

The Alzheimer's Disease Advisory Committee (committee) is composed of stakeholders, including Ph.D. researchers, caregivers of persons with Alzheimer's disease, medical professionals, and legislative representatives.²⁴ Each year, the committee submits a report that details the current state-funded efforts in Alzheimer's disease research and provides recommendations for improving Alzheimer's disease policy.²⁵

The committee makes various recommendations surrounding policy, research, clinical care, institutional care, and home and community-based services for Alzheimer's disease policy.²⁶ In 2023, one of the committee's recommendations identified a need for improving the distribution of information on Alzheimer's disease research findings.²⁷

Alzheimer's Disease and Related Dementias Resource Guide

The DOEA is required to provide public education on Alzheimer's disease and related forms of dementia.²⁸ The DOEA compiles information for the public and publishes the Alzheimer's Disease and Related Dementias Resource Guide.²⁹ Information provided in the resource guide includes information such as:³⁰

- Warning signs of Alzheimer's;
- Protecting and improving brain health;
- Next steps after an Alzheimer's diagnosis; and
- Service providers in each area throughout the state.

This information is published online and is available to the public.³¹

Effect of Proposed Changes:

Section 1 creates s. 430.5016, F.S., to require the Department of Elderly Affairs to contract for the development and implementation of the Alzheimer's Disease Awareness Program. The program will assist Florida residents that are affected by Alzheimer's disease and dementia-related disorders with obtaining reputable national research.

At a minimum, the program is required to:

²⁴ Section 430.501, F.S.

²⁵ *Id.*

²⁶ Florida Department of Elder Affairs, *Alzheimer's Disease Advisory Committee Annual Report (2023)*, available at: <https://elderaffairs.org/programs-services/bureau-of-elder-rights/alzheimers-disease-initiative/> (last visited 2/17/25).

²⁷ *Id.*

²⁸ Section 430.5025, F.S.

²⁹ Department of Elder Affairs State Health Improvement Plan, *Alzheimer's Disease and Related Dementias Resource Guide*, available at: https://www.floridahealth.gov/provider-and-partner-resources/research/florida-health-grand-rounds/SHIPPA9ADRDRResourceGuide_final.pdf (last visited 2/17/25).

³⁰ *Id.*

³¹ *Id.*

- Include a website and other related electronic resources that address:
 - The advantages of early detection and diagnosis;
 - Methods for reducing risk factors;
 - The importance of brain health;
 - Scheduling screenings and assessments for Alzheimer’s disease and dementia-related disorders with a licensed health care provider;
 - Healthy aging;
 - Recent developments in Alzheimer's research and dementia-related disorders and the availability of clinical trials;
 - Community resources available for those affected by Alzheimer's disease and dementia-related disorders; and
 - Any related topics as deemed appropriate by the DOEA.
- Use the DOEA’s Alzheimer's Disease and Related Dementias Resource Guide as part of the program materials.
- Promote health care provider education in partnership with the Department of Health to help improve care for patients with Alzheimer's disease and dementia-related disorders.
- Include print and digital advertising.
- Include a statewide, mobile, in-person outreach program that prioritizes those in underserved communities and provides information on issues relating to Alzheimer's disease and dementia-related disorders.
- Provide referrals to the DOEA.
- Provide information regarding available community resources for Alzheimer's disease or dementia-related disorders.

The bill requires the DOEA to contract for the development and implementation of the program. The contracted entity must be statewide nonprofit organization must have a history of focusing on those affected by Alzheimer's disease and dementia-related disorders and have the organizational capacity to successfully manage a statewide program. The contracted entity is required to collaborate with other relevant state agencies and private organizations to develop and implement the program.

The bill requires the Alzheimer’s Disease Advisory Committee to annually evaluate the program and make recommendations to the DOEA and the Legislature concerning the need for future funding for the program.

Section 2 appropriates \$1.5 million in nonrecurring General Revenue funds to the DOEA to administer the Alzheimer's Disease Awareness Program for the 2025-2026 fiscal year.

Section 3 provides that the bill takes effect July 1, 2025.

III. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The bill does not appear to require cities and counties to expend funds or limit their authority to raise revenue or receive state-shared revenues as specified by Article VII, s. 18, of the State Constitution.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None Identified.

IV. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The bill appropriates \$1.5 million in nonrecurring general revenue funds to the Department of Elderly Affairs to administer the Alzheimer's Disease Awareness Program for the 2025-2026 fiscal year.

V. Technical Deficiencies:

None.

VI. Related Issues:

None.

VII. Statutes Affected:

This bill creates section 430.5016 of the Florida Statutes.

VIII. Additional Information:**A. Committee Substitute – Statement of Changes:**

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

By Senator Burgess

23-00520-25

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1 A bill to be entitled
 2 An act relating to an awareness program for
 3 Alzheimer's disease and dementia-related disorders;
 4 creating s. 430.5016, F.S.; requiring the Department
 5 of Elderly Affairs to contract for the development and
 6 implementation of the Alzheimer's Disease Awareness
 7 Program; providing requirements for the program;
 8 providing requirements for the entity with which the
 9 department contracts for the development and
 10 implementation of the program; requiring the
 11 Alzheimer's Disease Advisory Committee to evaluate the
 12 program and make certain recommendations; providing an
 13 appropriation; providing an effective date.

15 Be It Enacted by the Legislature of the State of Florida:

16 Section 1. Section 430.5016, Florida Statutes, is created
 17 to read:

18 430.5016 Alzheimer's Disease Awareness Program.-

19 (1) The Department of Elderly Affairs shall contract for
 20 the development and implementation of the Alzheimer's Disease
 21 Awareness Program. The program shall assist the residents of
 22 this state affected by Alzheimer's disease and dementia-related
 23 disorders in obtaining information that is validated by
 24 reputable national research.

25 (2) The program must, at a minimum:

26 (a) Include a website and other related electronic
 27 resources that address:

28 1. The advantages of early detection and diagnosis;
 29

Page 1 of 3

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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30 2. Methods for reducing risk factors;
 31 3. The importance of brain health;
 32 4. Scheduling screenings and assessments for Alzheimer's
 33 disease and dementia-related disorders with a licensed health
 34 care provider;
 35 5. Healthy aging;
 36 6. Recent developments in Alzheimer's research and
 37 dementia-related disorders and the availability of clinical
 38 trials;
 39 7. Community resources available for those affected by
 40 Alzheimer's disease and dementia-related disorders; and
 41 8. Any related topics as deemed appropriate by the
 42 department.
 43 (b) Use the department's Alzheimer's Disease and Related
 44 Dementias Resource Guide as a part of the program materials.
 45 (c) Promote health care provider education in partnership
 46 with the Department of Health to help improve care and services
 47 for patients with Alzheimer's disease and dementia-related
 48 disorders in accordance with s. 381.825.
 49 (d) Include print and digital advertising.
 50 (e) Include a statewide, mobile, in-person outreach program
 51 that prioritizes those in underserved communities and provides
 52 information on issues relating to Alzheimer's disease and
 53 dementia-related disorders, including, but not limited to, brain
 54 health, risk education, and early detection and diagnosis. The
 55 program may also provide referrals to the Department of Elderly
 56 Affairs and provide information regarding any available
 57 community resources relating to Alzheimer's disease or dementia-
 58 related disorders.

Page 2 of 3

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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59 (3) (a) The entity with which the department contracts for
60 the development and implementation of the program must be a
61 statewide nonprofit organization that meets all of the following
62 requirements:

63 1. Has a history of focusing on those affected by
64 Alzheimer's disease and dementia-related disorders and their
65 care and support, including providing online resources to
66 caregivers and people living with the disease and through
67 community-based events.

68 2. Has the organizational capacity to manage a statewide
69 program and successfully carry out the requirements of this
70 section.

71 (b) The entity shall collaborate with other relevant state
72 agencies and private organizations to develop and implement the
73 program.

74 (4) The Alzheimer's Disease Advisory Committee shall
75 annually evaluate and make recommendations to the Department of
76 Elderly Affairs and the Legislature concerning the need for
77 future funding for the Alzheimer's Disease Awareness Program as
78 a part of its annual report.

79 Section 2. For the 2025-2026 fiscal year, the sum of \$1.5
80 million in nonrecurring funds is appropriated from the General
81 Revenue Fund to the Department of Elderly Affairs for the
82 purpose of administering the Alzheimer's Disease Awareness
83 Program pursuant to s. 430.5016, Florida Statutes.

84 Section 3. This act shall take effect July 1, 2025.



The Florida Senate

Committee Agenda Request

To: Senator Jay Trumbull, Chair
Appropriations Committee on Health and Human Services

Subject: Committee Agenda Request

Date: March 6, 2025

I respectfully request that **Senate Bill #398**, relating to Awareness Program for Alzheimer's Disease and Dementia-related Disorders, be placed on the:

- committee agenda at your earliest possible convenience.
- next committee agenda.

A handwritten signature in blue ink that reads "Danny".

Senator Danny Burgess
Florida Senate, District 23

CC: Brooke McKnight, Staff Director
CC: Robin Jackson, Committee Administrative Assistant

3/18/25

The Florida Senate
APPEARANCE RECORD

SB 398

Meeting Date

HHS Approps

Committee

Deliver both copies of this form to
Senate professional staff conducting the meeting

Bill Number or Topic

Amendment Barcode (if applicable)

Name Alex Anderson

Phone 904 502 2506

Address 2170 W State Rd 434 #300

Email AJAnderson@alz.org

Longwood

FL

32779

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:
Alzheimer's Association

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](https://www.flsenate.gov)

This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3/18/25

Meeting Date

398 - Alzheimer's

Bill Number or Topic

Approp. HHS

Committee

Amendment Barcode (if applicable)

Name AARP - Karen Murillo

Phone 850-567-0414

Address 215 S. Monroe St., Ste. 603

Email kmurillo@aarp.org

Tallahassee FL 32301

City

State

Zip

Speaking: For

Against

Information

OR

Waive Speaking:

In Support

Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

AARP

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

This form is part of the public record for this meeting.

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Appropriations Committee on Health and Human Services

BILL: CS/SB 714

INTRODUCER: Appropriations Committee on Health and Human Services and Senator Burton

SUBJECT: Nonopioid Advance Directives

DATE: March 19, 2025

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Looke</u>	<u>Brown</u>	<u>HP</u>	Favorable
2.	<u>Gerbrandt</u>	<u>McKnight</u>	<u>AHS</u>	Fav/CS
3.	_____	_____	<u>FP</u>	_____

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 714 amends s. 765.1103, F.S., to require the Department of Health (DOH) to develop a nonopioid advance directive form which would allow a person to indicate that he or she does not want to be prescribed or administered an opioid drug for pain management or palliative care should he or she become incapacitated. The bill provides requirements for such a form to be valid and allows a person revoke the form, verbally or in writing, for any reason.

The bill has an insignificant negative fiscal impact on state revenues and expenditures. **See Section V. Fiscal Impact Statement.**

The bill takes effect July 1, 2025.

II. Present Situation:

Opioids

Opioids are a class of natural, semi-synthetic, and synthetic drugs that include both prescription medications and illegal drugs like heroin. Prescription medications such as oxycodone, hydrocodone, morphine, codeine, fentanyl, and others are mainly used for the treatment of pain.

They can also help treat cough or diarrhea. However, like illegal opioids, prescription opioids can be addictive, particularly if they are misused.¹

Health Risks of Opioids

Opioids are addictive. People can quickly lose control over their opioid use and need to keep using them to feel “normal.” High doses can lead to overdose. Opioids can slow breathing to life-threatening levels. As a result, not enough oxygen reaches the brain. This can cause severe brain damage or death.

Opioid use, even as prescribed by a health care provider or only for a short time, can lead to negative health effects.

- Opioid medications may have unpleasant effects, particularly when people take them for a longer time. These include constipation, nausea and vomiting, headache, dizziness, and sleepiness or sleep problems.
- Depending on the dose and how long people use them, opioids can cause cardiovascular changes, such as slower heart rate, low blood pressure, heart failure, and cardiac arrest.
- Opioids can impair the immune system, increasing risk of infection.
- Opioid use, particularly in high doses or for a long period of time, can cause changes in a person’s body that can make them more sensitive to pain.
- Opioid use also has been associated with mental disorders like depression or sexual dysfunction.²

Nonopioid Directives

Several other states and the federal government have either introduced or passed laws that allow for nonopioid directives. See the chart below from 2022 for details:³

¹ National Institute on Drug Abuse, *Opioids*, Nov. 2024, available at <https://nida.nih.gov/research-topics/opioids#health-risks>, (last visited Feb. 27, 2025).

² National Institute on Drug Abuse, *Opioids*, Nov. 2024, available at <https://nida.nih.gov/research-topics/opioids#health-risks>, (last visited Feb. 27, 2025).

³ Bicket MC, Waljee J, Hilliard P. Nonopioid Directives: Unintended Consequences in the Operating Room. *JAMA Health Forum*. 2022;3(6):e221356. doi:10.1001/jamahealthforum.2022.1356 (available at <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2793282>, (last visited Feb. 27, 2025).

Table. US Nonopioid Directive Policies, by Federal or State Legislative Entity, 2022

Legislative entity	Status	Exemption		Year passed	Description	Clinician role
		Intraoperative	Other setting			
US House of Representatives ^a	Proposed	Yes	Emergency care, hospice, SUDT	Pending	Patient must not "be administered (with the exception of intraoperative opioid use) an opioid or offered a prescription for an opioid for pain management."	NS
US Senate ^b	Proposed	Yes	Hospice, SUDT	Pending	Patient must not "be administered (with the exception of intraoperative opioid use) an opioid or offered a prescription for an opioid for pain management."	NS
Alaska ^c	Passed	No	No	2017	Patient certifies refusal of administration of "any opioid medications including in an emergency situation."	Signature for verification
Connecticut ^d	Passed	No	No	2017	Patient certifies refusal of offer or administration of "any opioid medications at any time, including during an emergency situation."	Signature required
Louisiana ^e	Passed	No	No	2018	Patient certifies refusal of offer or administration of "any opioid medications"	Signature permitted
Massachusetts ^f	Passed	No	No	2016	Patient certifies refusal of offer or administration of "any opioid medications at any time, including during an emergency situation."	Signature required
Michigan ^g	Passed	Yes ^h	Emergency care, hospice, SUDT	2017	Patient "must not be administered an opioid or offered a prescription for an opioid."	NS
Pennsylvania ⁱ	Passed	No	Based on professional medical judgment	2016	Patient refuses "offer, supply, prescription or other administration of any controlled substance containing an opioid."	Signature for acknowledgment
West Virginia ^j	Passed	No	No	2018	Patient certifies refusal of offer or administration of "any opioid medications at any time, including during an emergency situation."	Signature required

Abbreviations: NS, none specified; SUDT, substance use disorder treatment.

^a Non-Opioid Directive Act, HR 4098. <https://www.congress.gov/bill/117th-congress/house-bill/4098/text>

^b Non-Opioid Directive Act, S 1292. <https://www.congress.gov/bill/117th-congress/senate-bill/1292>

^c Alaska Department of Health and Social Services. Voluntary Non-opioid Directive. <https://dhs.alaska.gov/dph/Director/Documents/opioids/VoluntaryNonOpioidDirective.pdf>

^d Connecticut Department of Public Health. Voluntary Non-Opioid Directive. https://portal.ct.gov/-/media/DPH/CT-VNOD-Form_FINAL.pdf

^e Louisiana Department of Health. Voluntary Non-Opioid Directive Form. <https://dh.la.gov/assets/docs/BehavioralHealth/Opioids/VoluntaryNonOpioidFormFINAL9618.pdf>

^f Massachusetts Department of Public Health. Voluntary Non-Opioid Directive. <https://www.mass.gov/doc/voluntary-non-opioid-directive/download>

^g Michigan Department of Health and Human Services. Nonopioid Directive. https://www.michigan.gov/documents/opioids/MDHHS-5793_650584_7.dotx

^h Michigan Public Act 41, HB 5261. <http://legislature.mi.gov/doc.aspx?2021-HB-5261>

ⁱ Pennsylvania Department of Health. Pennsylvania Patient Non-Opioid Directive. <https://www.health.pa.gov/topics/Documents/Opioids/Pennsylvania%20Non-Opioid%20Directive.pdf>

^j West Virginia Department of Health and Human Resources. Voluntary Non-Opioid Directive. <https://dhhr.wv.gov/Office-of-Drug-Control-Policy/Documents/WV%20NonOpioid%20Directive.pdf>

III. Effect of Proposed Changes:

The bill amends s. 765.1103, F.S., to require the DOH to develop a voluntary nonopioid advance directive form to allow a person to indicate to a treating health care provider that he or she does not want to be prescribed or administered an opioid drug for pain management or palliative care should he or she become incapacitated. The DOH must make the form available on its website, and the form must indicate that the person may not be prescribed or administered an opioid drug.

The bill specifies that a valid form must be signed by both the patient and a physician licensed under ch. 458 or 459, F.S., and must be filed in the patient’s medical record, either with a health care facility of the patient’s choosing or the patient’s primary care physician, or both, and must be transferable to another facility or provider upon the patient’s request. A person may revoke the form either in verbally or in writing for any reason.

The bill also exempts a health care provider from civil or criminal liability for failing to act in accordance with the nonopioid advance directive if the health care provider who has no actual knowledge of the advance directive prescribes, administers, or orders an opioid to a patient in an emergency situation as long as the prescription was not the result of gross negligence or willful misconduct. The bill defines “medical emergency” to include an emergency medical condition and emergency services and care, as those terms are defined in s. 395.002, F.S.

The bill takes effect July 1, 2025.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The bill has an insignificant negative fiscal impact on the Department of Health (DOH) due to the bill's provisions that require the DOH to develop a voluntary nonopioid advanced directive form and make it available on their website. These costs can be absorbed within existing agency resources.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends section 765.1103 of the Florida Statutes.

IX. Additional Information:

- A. **Committee Substitute – Statement of Substantial Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Appropriations Committee on Health and Human Services on March 18, 2025:

The committee substitute:

- Extends protection from civil and criminal liability to healthcare providers who prescribe, *administer*, and *order* opioids in certain emergency situations to individuals with a nonopioid advance directive.
- Revises the term “medical emergency situation” in the bill to include an emergency medical condition and emergency services and care, as those terms are defined in s. 395.002, F.S.

- B. **Amendments:**

None.



218790

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/18/2025	.	
	.	
	.	
	.	

The Appropriations Committee on Health and Human Services
(Burton) recommended the following:

Senate Amendment

Delete lines 44 - 51
and insert:
patient's nonopioid advance directive form who prescribes,
administers, or orders an opioid for the patient in a medical
emergency situation is not civilly or criminally liable for
failing to act in accordance with the directive unless the act
or omission was the result of a provider's gross negligence or
willful misconduct. For purposes of this paragraph, the term



218790

11 "medical emergency situation" includes an emergency medical
12 condition and emergency services and care, as those terms are
13 defined in s. 395.002.

By Senator Burton

12-01086A-25

2025714__

A bill to be entitled

An act relating to nonopioid advance directives; amending s. 765.1103, F.S.; requiring the Department of Health to develop a voluntary nonopioid advance directive form for a specified purpose and make the form available on its website; providing requirements for the form; providing for the valid execution of the form; requiring that the form be filed in the patient's medical record with the facility or provider of the patient's choosing; authorizing a patient to revoke the form for any reason, verbally or in writing; providing health care providers with immunity from civil and criminal liability for failing to act in accordance with an advance directive under certain circumstances; providing exceptions; defining the term "medical emergency situation"; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (3) is added to section 765.1103, Florida Statutes, to read:

765.1103 Pain management and palliative care.—

(3) (a) The Department of Health shall develop a voluntary nonopioid advance directive form that allows a person to indicate to a treating health care provider that he or she does not want to be prescribed or administered an opioid drug for pain management or palliative care in the event that he or she should become incapacitated and is unable to personally direct

Page 1 of 2

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

12-01086A-25

2025714__

his or her health care. The department shall make the form available on its website. The form must indicate to a treating health care provider that the person may not be prescribed or administered an opioid drug.

(b) A valid nonopioid advance directive form must be signed by both the patient and a physician licensed under chapter 458 or chapter 459. The form must be filed in the patient's medical record, either with a health care facility of the patient's choosing or the patient's primary care physician, or both, and is transferable to another facility or provider upon the patient's request.

(c) A person may, verbally or in writing, revoke the voluntary nonopioid advance directive form for any reason.

(d) A health care provider without actual knowledge of a patient's nonopioid advance directive form who prescribes an opioid to the patient in a medical emergency situation is not civilly or criminally liable for failing to act in accordance with the directive unless the act or omission was the result of a provider's gross negligence or willful misconduct. For purposes of this paragraph, the term "medical emergency situation" means an acute injury or illness that poses an immediate risk to a person's life or long-term health.

Section 2. This act shall take effect July 1, 2025.

Page 2 of 2

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THE FLORIDA SENATE

Tallahassee, Florida 32399-1100

COMMITTEES:

Health Policy, *Chair*
Judiciary, *Vice Chair*
Agriculture
Appropriations Committee on Agriculture, Environment,
and General Government
Appropriations Committee on Health and
Human Services
Banking and Insurance
Fiscal Policy
Rules

SENATOR COLLEEN BURTON

12th District

Senator Jay Trumbull
404 South Monroe Street
415 Senate Office Building
Tallahassee, Florida 32399

Dear Senator Trumbull,

I'm requesting that Senate Bill 714 : Nonopioid Advanced Directives be placed on the next available committee agenda for the Appropriations Committee on Health and Human Services. If you have any questions about the bill, please reach out.

Thank you,

A handwritten signature in blue ink that reads "Colleen Burton".

CC: Brooke McKnight, Staff Director
Robin Jackson, Committee Administrative Assistant

REPLY TO:

- 1375 Havendale Boulevard, NW, Winter Haven, Florida 33881 (863) 413-1529
- 408 Senate Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5012

Senate's Website: www.flsenate.gov

BEN ALBRITTON
President of the Senate

JASON BRODEUR
President Pro Tempore

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to
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3-18-2025

Meeting Date

714 ✓

Bill Number or Topic

~~714~~

Amendment Barcode (if applicable)

Appropriations Committee on
Health + Human Services

Name Diane T. Gowski, MD

Phone 727-480-7574

Address 1383 Temple St.

Email DIANETG@aol.com

Street

Clearwater

FL

33756

City

State

Zip

Speaking: For Against Information

OR

Waive Speaking: In Support Against

SB 714

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

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The Florida Senate

APPEARANCE RECORD

3/18/2025

Meeting Date

SB 714

Bill Number or Topic

App. for Health & Human Services

Committee

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Amendment Barcode (if applicable)

Name

Lynda Bell

Phone

786-208-3292

Address

2020 W Pensacola St = #129

Email

LyndaForLife@bellsouth.net

Street

Tallahassee

FL

City

State

Zip

Speaking:

For

Against

Information

OR

Waive Speaking:

In Support

Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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The Florida Senate

APPEARANCE RECORD

3-18-2025

Meeting Date

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714

Bill Number or Topic

218790

Amendment Barcode (if applicable)

Appropriations Committee

on Health & Human Services Committee

Name DIANE T. GOWSKI, MD

Phone 727-480-7574

Address 1383 Temple St

Email DIANE TG@aol.com

Street

Clearwater, FL

33756

City

State

Zip

Speaking: For Against Information OR Waive Speaking: In Support Against on Amendment

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules.pdf (flsenate.gov)

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The Florida Senate

APPEARANCE RECORD

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March 18, 25

Meeting Date

714

Bill Number or Topic

Appro HHS

Committee

218790

Amendment Barcode (if applicable)

Name Toni Large

Phone (850) 556-1461

Address 1100 Brookwood DR

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Email toni@largestrategies.com

Tallahassee, FL 32308

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

Florida College of Emergency Physicians

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

This form is part of the public record for this meeting.

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Appropriations Committee on Health and Human Services

BILL: SB 734

INTRODUCER: Senator Yarborough and others

SUBJECT: Actions for Recovery of Damages for Wrongful Death

DATE: March 17, 2025

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Bond</u>	<u>Cibula</u>	<u>JU</u>	Favorable
2.	<u>Gerbrandt</u>	<u>McKnight</u>	<u>AHS</u>	Favorable
3.	_____	_____	<u>RC</u>	_____

I. Summary:

SB 734 expands the application of the Florida Wrongful Death Act by repealing exceptions that prohibit certain parents and children of a deceased patient who dies due to medical negligence from recovering noneconomic damages.

The bill may have an indeterminate negative fiscal impact on state and local governments. See Section V. Fiscal Impact Statement.

The bill takes effect July 1, 2025.

II. Present Situation:

History of Wrongful Death Actions

Most of the state’s tort law is derived from the common law. At common law, there was no right to recover for the negligent wrongful death of another person.¹ Over time, however, the Legislature authorized recoveries for wrongful death and expanded the types of damages recoverable and the classes of survivors entitled to recover. “Because wrongful death actions did not exist at common law, all claims for wrongful death are created and limited by Florida’s Wrongful Death Act.”²

The early versions of the state’s wrongful death laws limited the right to recover damages to a surviving spouse, to surviving children if there was no surviving spouse, and to those dependent upon the decedent for support if there was no one belonging to the prior two classes, and finally to the executor of the decedent’s estate if there was no one belonging from the prior three

¹ *Louisville & Nashville Railroad Co. v. Jones*, 45 Fla. 407, 416 (Fla. 1903).

² *Chinghina v. Racik*, 647 So. 2d 289, 290 (Fla. 4th DCA 1994).

classes.³ To show dependence on the decedent, a claimant had to show that he or she was a minor, physically or mentally disabled, or elderly.⁴ Adults who were mentally and physically capable of providing for themselves could not recover damages despite having been supported by the decedent.⁵ Any damages recoverable were limited to a form of economic damages.

The wrongful death law was substantially re-written in 1972.⁶ That law created the Florida Wrongful Death Act, which provides the framework for current law. One of the major changes made by this law was to consolidate or merge survival and wrongful death actions.⁷ A survival action is a legal action allowed under the survival statute to continue notwithstanding the plaintiff's death. As merged, the 1972 law allowed the statutory survivors to recover damages for their pain and suffering as a substitute for recoveries for the decedent's pain and suffering under the survival statute.⁸

The type of damages that a survivor is entitled to under the 1972 law depends upon the classification of the survivor. The 1972 law allows all survivors to recover the value of lost support and services, a type of economic damages. A surviving spouse may also recover loss of marital companionship and pain and suffering, types of noneconomic damages. Minor children, then defined as under age 21⁹ and unmarried, may also recover damages for loss of parental companionship and for their pain and suffering. The parents of a deceased minor child may also recover damage for their pain and suffering. Any survivor who pays the decedent's final medical, funeral, and burial expenses may recover those costs. The estate of the decedent may recover lost earnings from date of injury to date of death, plus net accumulations, which is essentially an estimate of the present value of the future estate that would have been available for inheritance.

A 1981 act expanded the definition of "minor children" to include all children of the decedent under age 25, regardless of whether any child is married or dependent.¹⁰ The statutes did not authorize a wrongful death action by a nondependent, adult child for the loss of a parent or an action by a parent for the loss of an adult child.¹¹

In 1990, the Legislature generally expanded the class of survivors entitled to recover damages for pain and suffering for a wrongful death.¹² As expanded, a decedent's adult children may recover damages for pain and suffering if there is no surviving spouse. The parents of an adult

³ *Duval v. Hunt*, 34 Fla. 85 (Fla. 1894) (discussing a wrongful death statute enacted in 1883).

⁴ *Id.* at 101-102.

⁵ The Court interpreted the dependency requirement in the statute as requiring a person to have a genuine inability to support himself or herself based on the view that strong, healthy adults who are capable of earning a livelihood should not be content to "live in idleness upon the fruits of [another's] labor." *Id.* at 101.

⁶ Chapter 72-35, Laws of Fla.

⁷ *Sheffield v. R.J. Reynolds Tobacco Co.*, 329 So. 3d 114, 121 (Fla. 2021).

⁸ *Martin v. United Sec. Services, Inc.*, 314 So. 2d 765, 767 (Fla. 1975).

⁹ Florida changed the age of majority from 21 to 18 in the following year, but that act did not change the reference to age 21 in the wrongful death law. Section 743.07, F.S.; chapter 73-21, Laws of Fla.

¹⁰ Chapter 81-183, Laws of Fla.

¹¹ *Mizrahi v. North Miami Medical Center, Ltd.*, 761 So. 2d 1040, 1042 (Fla. 2000).

¹² Chapter 90-14, Laws of Fla.

decedent may also recover damages for pain and suffering if there is no surviving spouse or surviving minor or adult children.¹³

However, the same law that expanded the class entitled to recover damages for pain and suffering for a wrongful death precluded the additional class members from recovering those damages for a wrongful death based on medical malpractice.¹⁴ Thus, a narrower group of survivors may recover damages for pain and suffering for a wrongful death that is caused by medical malpractice, and a broader group may recover damages for pain and suffering for a death that is caused by all other forms of negligence.

In a 2000 opinion, the Florida Supreme Court found the medical negligence exception constitutional.¹⁵ The Court found that the exception was rationally related to the need to control the costs of health care and medical malpractice insurance due to a medical malpractice insurance crisis. However, Justice Pariente, in her dissenting opinion, argued that the exception should be found to be unconstitutional because of her belief that the medical malpractice insurance crisis, which initially justified the exception, no longer existed.¹⁶ The Florida Supreme Court later found that the malpractice crisis was over,¹⁷ but that finding did not overrule the ruling that the medical negligence exceptions are constitutional.¹⁸

Current Effect of the Medical Negligence Exceptions to the Wrongful Death Law

Currently, neither an adult child (25+) of an unmarried person who dies due to medical negligence, nor the parents of an adult child (25+) who dies due to medical negligence, may recover noneconomic damages (commonly referred to as “pain and suffering damages”). They may, however, recover through the estate economic damages such as net accumulations, final medical bills, and funeral and burial expenses. Plaintiff’s attorneys report that these other damages are often insufficient to warrant the cost and time required to prosecute a medical negligence case.¹⁹

Medical Negligence Actions

Procedures for a Medical Negligence Action

Medical negligence claims are subject to statutory presuit screening and investigation requirements.²⁰ A claimant may, and typically does, request the relevant medical records, which must be furnished by the medical providers at a reasonable charge.²¹ The claimant must then

¹³ Chapter 90-14, Laws of Fla. (amending s. 768.18(3) and (4), F.S.). The adult children were also authorized by the 1990 law to recover noneconomic damages for lost parental companionship, instruction, and guidance.

¹⁴ *Id.* (amending s. 768.18(8), F.S.).

¹⁵ *Mizrahi v. North Miami Medical Center, Ltd.*, 761 So. 2d 1040, 1042 (Fla. 2000).

¹⁶ *Id.*

¹⁷ *Estate of McCall v. United States*, 134 So. 3d 894 (Fla. 2014). *North Broward Hospital District v. Kalitan*, 219 So. 3d 49 (Fla. 2017).

¹⁸ *Santiago v. Rodriguez*, 281 So. 3d 603 (Fla. 2nd DCA 2019), *rev. dismissed*, 2020 WL 927717 (Fla. 2020).

¹⁹ Fasig Brooks Law Offices, *Unfair and Illogical: Florida’s Wrongful Death Medical Malpractice Law*, <https://www.fasigbrooks.com/2019/02/unfair-and-illogical-floridas-wrongful-death-med/>, last visited Feb. 27, 2025, (stating that “such limited recovery would not make a malpractice lawsuit financially feasible”).

²⁰ Sections 766.104, 766.106 and 766.203, F.S.

²¹ Sections 766.104(3) and 766.204, F.S.

conduct a reasonable investigation of the claim and obtain a written opinion from a medical expert that malpractice occurred.²² The claimant may then serve a notice of intent to initiate litigation on every prospective defendant. The suit may not be filed until at least 90 days after service of the notice.²³ During the 90 days, the parties must engage in pretrial discovery²⁴ and the prospective defendant must conduct an investigation.²⁵ If not resolved in the 90 days, the claimant may file suit. When filing the suit, the attorney must file a certificate that he or she has reviewed the evidence and has a good faith belief that a medical negligence case is warranted.²⁶ Failure of the claimant to pursue the pretrial process constitutes grounds for a dismissal of the claim. A failure of any party to the action to cooperate with the presuit process may be grounds to strike any claim or defense raised by the non-cooperative party.²⁷ After the presuit requirements are met, a claim of medical negligence generally proceeds through the court system like any other tort action.

III. Effect of Proposed Changes:

The bill expands the application of the Florida Wrongful Death Act by repealing exceptions that prohibit certain parents and children of a deceased patient who dies due to medical negligence from recovering noneconomic damages. The bill provides that, where a wrongful death occurs as a result of medical negligence, a decedent's adult children may recover noneconomic damages if there is no surviving spouse and provides that the parents of an adult decedent may recover noneconomic damages if there is no surviving spouse or surviving minor or adult children.

The bill takes effect July 1, 2025.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The bill does not require counties or municipalities to spend funds or limit their authority to raise revenue or receive state-shared revenues as specified in Article VII, s. 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

²² Sections 766.104(1) and 766.203(2), F.S.

²³ Section 766.106(4), F.S.

²⁴ Section 766.106(6) and 766.205, F.S.

²⁵ Section 766.203(3), F.S.

²⁶ Section 766.104(1), F.S.

²⁷ Section 766.106(7), F.S.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

The bill may provide for wrongful death recoveries by parties who are barred by current law and thus may correspondingly increase medical malpractice insurance premiums or medical malpractice self-insurance costs of medical providers. Similarly, the availability of damages for mental pain and suffering may provide a sufficient incentive for plaintiff attorneys who work on a contingency-fee-basis to pursue more medical negligence lawsuits.

C. Government Sector Impact:

The bill may create an indeterminate negative fiscal impact on state and local governments to the extent that a state or a local government operates or controls a medical care facility. Any such claims, however, would be limited by the state's sovereign immunity limits.²⁸

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 768.21, 400.023, 400.0235, and 429.295.

This bill reenacts the following sections of the Florida Statutes: 95.11 and 429.29.

²⁸ Section 768.28, F.S.

IX. Additional Information:

- A. **Committee Substitute – Statement of Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

- B. **Amendments:**

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

By Senator Yarborough

4-00329-25

2025734__

A bill to be entitled

An act relating to actions for recovery of damages for wrongful death; amending s. 768.21, F.S.; deleting a provision prohibiting the recovery of certain damages by specified parties related to the decedent in wrongful death proceedings; amending ss. 400.023, 400.0235, and 429.295, F.S.; conforming provisions to changes made by the act; reenacting ss. 95.11(11) and 429.29(1), F.S., relating to limitations other than for recovery of real property and civil actions to enforce rights, respectively, to incorporate the amendment made to s. 768.21, F.S., in references thereto; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (8) of section 768.21, Florida Statutes, is amended to read:

768.21 Damages.—All potential beneficiaries of a recovery for wrongful death, including the decedent's estate, shall be identified in the complaint, and their relationships to the decedent shall be alleged. Damages may be awarded as follows:

~~(8) The damages specified in subsection (3) shall not be recoverable by adult children and the damages specified in subsection (4) shall not be recoverable by parents of an adult child with respect to claims for medical negligence as defined by s. 766.106(1).~~

Section 2. Subsection (9) of section 400.023, Florida Statutes, is amended, and paragraph (b) of subsection (1) of

Page 1 of 5

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4-00329-25

2025734__

that section is republished, to read:

400.023 Civil enforcement.—

(1) An exclusive cause of action for negligence or a violation of residents' rights as specified under this part which alleges direct or vicarious liability for the personal injury or death of a nursing home resident arising from such negligence or violation of rights and which seeks damages for such injury or death may be brought only against the licensee, the licensee's management or consulting company, the licensee's managing employees, and any direct caregivers, whether employees or contractors. A passive investor is not liable under this section. An action against any other individual or entity may be brought only pursuant to subsection (3).

(b) If the action alleges a claim for the resident's rights or for negligence that caused the death of the resident, the claimant shall, after the verdict, but before the judgment is entered, elect survival damages pursuant to s. 46.021 or wrongful death damages pursuant to s. 768.21. If the action alleges a claim for the resident's rights or for negligence that did not cause the death of the resident, the personal representative of the estate may recover damages for the negligence that caused injury to the resident.

(9) An action under this part for a violation of rights or negligence recognized herein is not a claim for medical malpractice, and s. 768.21(8) does not apply to a claim alleging death of the resident.

Section 3. Section 400.0235, Florida Statutes, is amended to read:

400.0235 Certain provisions not applicable to actions under

Page 2 of 5

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4-00329-25 2025734

59 this part.—An action under this part for a violation of rights
60 or negligence recognized under this part is not a claim for
61 medical malpractice, ~~and the provisions of s. 768.21(8) do not~~
62 ~~apply to a claim alleging death of the resident.~~

63 Section 4. Section 429.295, Florida Statutes, is amended to
64 read:

65 429.295 Certain provisions not applicable to actions under
66 this part.—An action under this part for a violation of rights
67 or negligence recognized herein is not a claim for medical
68 malpractice, ~~and the provisions of s. 768.21(8) do not apply to~~
69 ~~a claim alleging death of the resident.~~

70 Section 5. For the purpose of incorporating the amendment
71 made by this act to section 768.21, Florida Statutes, in a
72 reference thereto, subsection (11) of section 95.11, Florida
73 Statutes, is reenacted to read:

74 95.11 Limitations other than for the recovery of real
75 property.—Actions other than for recovery of real property shall
76 be commenced as follows:

77 (11) FOR INTENTIONAL TORTS RESULTING IN DEATH FROM ACTS
78 DESCRIBED IN S. 782.04 OR S. 782.07.—Notwithstanding paragraph
79 (5) (e), an action for wrongful death seeking damages authorized
80 under s. 768.21 brought against a natural person for an
81 intentional tort resulting in death from acts described in s.
82 782.04 or s. 782.07 may be commenced at any time. This
83 subsection shall not be construed to require an arrest, the
84 filing of formal criminal charges, or a conviction for a
85 violation of s. 782.04 or s. 782.07 as a condition for filing a
86 civil action.

87 Section 6. For the purpose of incorporating the amendment

4-00329-25 2025734

88 made by this act to section 768.21, Florida Statutes, in a
89 reference thereto, subsection (1) of section 429.29, Florida
90 Statutes, is reenacted to read:

91 429.29 Civil actions to enforce rights.—

92 (1) Any person or resident whose rights as specified in
93 this part are violated shall have a cause of action. The action
94 may be brought by the resident or his or her guardian, or by a
95 person or organization acting on behalf of a resident with the
96 consent of the resident or his or her guardian, or by the
97 personal representative of the estate of a deceased resident
98 regardless of the cause of death. If the action alleges a claim
99 for the resident's rights or for negligence that caused the
100 death of the resident, the claimant shall be required to elect
101 either survival damages pursuant to s. 46.021 or wrongful death
102 damages pursuant to s. 768.21. If the action alleges a claim for
103 the resident's rights or for negligence that did not cause the
104 death of the resident, the personal representative of the estate
105 may recover damages for the negligence that caused injury to the
106 resident. The action may be brought in any court of competent
107 jurisdiction to enforce such rights and to recover actual
108 damages, and punitive damages for violation of the rights of a
109 resident or negligence. Any resident who prevails in seeking
110 injunctive relief or a claim for an administrative remedy is
111 entitled to recover the costs of the action and a reasonable
112 attorney's fee assessed against the defendant not to exceed
113 \$25,000. Fees shall be awarded solely for the injunctive or
114 administrative relief and not for any claim or action for
115 damages whether such claim or action is brought together with a
116 request for an injunction or administrative relief or as a

4-00329-25

2025734__

117 separate action, except as provided under s. 768.79 or the
118 Florida Rules of Civil Procedure. Sections 429.29-429.298
119 provide the exclusive remedy for a cause of action for recovery
120 of damages for the personal injury or death of a resident
121 arising out of negligence or a violation of rights specified in
122 s. 429.28. This section does not preclude theories of recovery
123 not arising out of negligence or s. 429.28 which are available
124 to a resident or to the agency. The provisions of chapter 766 do
125 not apply to any cause of action brought under ss. 429.29-
126 429.298.

127 Section 7. This act shall take effect July 1, 2025.

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3.18.25

Meeting Date

SB 734

Bill Number or Topic

AMIS

Committee

Amendment Barcode (if applicable)

Name

Theresa Mahaffey MD

Phone

850 490 3693

Address

8348 Tidwell Rd

Email

gcp5e@bellsouth.net

Street

Pace

City

FL

State

32571

Zip

Speaking:



For



Against



Information

OR

Waive Speaking:



In Support



Against

PLEASE CHECK ONE OF THE FOLLOWING:



I am appearing without compensation or sponsorship.



I am a registered lobbyist, representing:



I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules. df.flsenate.gov

This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3-18-25

Meeting Date

Senate HHS

Committee

134

Bill Number or Topic

Amendment Barcode (if applicable)

Name Cindy Jenkins

Phone 904-662-2273

Address 46 Samantha Ct.

Street

Email cindy@cindyjenkinsgroup.com

St. Augustine, FL

City

State

32043

Zip

Speaking: For Against Information OR Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flisenate.gov\)](https://www.flisenate.gov)

This form is part of the public record for this meeting.

THE FLORIDA SENATE
APPEARANCE RECORD

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

3/18/25

Meeting Date

734

Bill Number (if applicable)

Topic Wrongful Death

Amendment Barcode (if applicable)

Name Carter Scott

Job Title Attorney

Address 218 S. Monroe
Street

Phone _____

Tallahassee FL 32301
City State Zip

Email _____

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Justice Association

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.

This form is part of the public record for this meeting.

3/18/25

The Florida Senate
APPEARANCE RECORD

734

Meeting Date

Deliver both copies of this form to
Senate professional staff conducting the meeting

Bill Number or Topic

HHS Appropriations

Committee

Amendment Barcode (if applicable)

Name Taylor Hill

Phone 305 444 0060

Address 131 Madeira Avenue

Email thill@kk7plaw.com

Street

Coral Gables FL

33193

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

Practitioner

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf](#) [flsenate.gov](#)

This form is part of the public record for this meeting.

3/18/25

Meeting Date
Approps Committee on Health and Human Services

The Florida Senate APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

734

Bill Number or Topic

Amendment Barcode (if applicable)

Committee
Name **Tom Wheeler**

Phone _____

Address **305 Deer Run Rd**

Email _____

Street

Monticello

FL

32344

City

State

Zip

Reset Form

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. § 11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3/18/25

Meeting Date

734

Bill Number or Topic

Approp. Comm HHS

Committee

Amendment Barcode (if applicable)

Name Jim Kallinger

Phone 850-322-6396

Address 1408 Pullen Rd.

Street

Email jim.kallinger@gmail.com

Tallahassee

City

FL

State

32303

Zip

Speaking: For Against Information OR Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules](https://www.flsenate.gov/2020-2022/JointRules) [df flsenate.gov](https://www.flsenate.gov)

This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

3/18/25

Meeting Date

SB 734

Bill Number or Topic

HHS APPROPS

Committee

Amendment Barcode (if applicable)

Name Carolyn Johnson

Phone 521-1200

Address 130 S Bronough St
Street

Email cjohnson@flchamber.com

Tallahassee FL 32301
City State Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

FL Chamber of Commerce

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022JointRules.pdf \(flsenate.gov\)](#)

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The Florida Senate
APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

3/18/25

Meeting Date

734

Bill Number or Topic

HHS Approps

Committee

Amendment Barcode (if applicable)

Name Adam Basford

Phone 352 538 4299

Address 516 N Adams

Email abasford@airif.com

Street

Tallahassee FL 32301

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

Associated Industries of FL

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules](https://www.flsenate.gov/2020-2022/JointRules). [df.flsenate.gov](https://www.flsenate.gov)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

04/18/21

Meeting Date

734

Bill Number or Topic

House of Human Services

Committee

Deliver both copies of this form to Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name

Daryl Perrott

Phone

904

Address

5495 2nd Street

Email

smokinnd BBQ@yahoo.com

City

St. Augustine, Fl. 32080

State

Zip

Speaking:

For

Against

Information

OR

Waive Speaking:

In Support

Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022JointRules.pdf \(flsenate.gov\)](#)

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The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3/18/25

Meeting Date

SB734

Bill Number or Topic

Appropriations

Committee

Amendment Barcode (if applicable)

Name Karen Aguilar

Phone 813-748-0821

Address 7553 Granitville Dr.

Email Cutepe5510@aol.com

Street

Wesley Chapel

City

FL

State

33545

Zip

Speaking: For Against Information OR Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

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S-001 (08/10/2021)

THE FLORIDA SENATE
APPEARANCE RECORD

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

3/18/25

Meeting Date

734

Bill Number (if applicable)

Topic Wrongful Death

Amendment Barcode (if applicable)

Name Megan Sowell

Job Title attorney

Address 233 East Bay St.

Phone (904) 632-2424

Jacksonville FL 32202

City

State

Zip

Email msowell@terrellhogan.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing attorney

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.

This form is part of the public record for this meeting.

3/18/25

Meeting Date

HHS Appropriations

Committee

The Florida Senate APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

SB 734

Bill Number or Topic

Amendment Barcode (if applicable)

Name DAVID MICA, Jr. Phone _____

Address _____ Email _____
Street

City _____ State _____ Zip _____

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

FL Hospital Association

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf](#) [flsenate.gov](#)

This form is part of the public record for this meeting.

3/18/25

The Florida Senate
APPEARANCE RECORD

SB 734

Meeting Date

Appropriations Committee on Health and Human Services

Deliver both copies of this form to
Senate professional staff conducting the meeting

Bill Number or Topic

Committee

Amendment Barcode (if applicable)

Name **Michael Tompkins, MD**

Phone **850-224-6496**

Address **1430 Piedmont Drive E**

Email **maiku83@gmail.com**

Street

Tallahassee

FL

32309

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

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S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

march 18, 2025

Meeting Date

734

Bill Number or Topic

Appropriations Health Services

Committee

Deliver both copies of this form to Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name ALYSSA FJERAN

Phone (904) 793-3538

Address 2016 Chaucer Ln.

Email ALYSSAFJERAN@gmail.com

Street

Ponte Vedra

FL

32081

City

State

Zip

Speaking: [X] For [] Against [] Information OR Waive Speaking: [] In Support [] Against

PLEASE CHECK ONE OF THE FOLLOWING:

[X] I am appearing without compensation or sponsorship.

[] I am a registered lobbyist, representing:

[] I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022JointRules.pdf flsenate.gov

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The Florida Senate
APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

3/18/25

Meeting Date

AHS

Committee

SB 734

Bill Number or Topic

Amendment Barcode (if applicable)

Name Darcy McGuill

Phone 321.759.9665

Address 2978 Pangea Circle
Street

Email darcymcguill@aol.com

Melbourne

City

FL

State

32940

Zip

Speaking:



For



Against



Information

OR

Waive Speaking:



In Support



Against

PLEASE CHECK ONE OF THE FOLLOWING:



I am appearing without
compensation or sponsorship.



I am a registered lobbyist,
representing:



I am not a lobbyist, but received
something of value for my appearance
(travel, meals, lodging, etc.),
sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022JointRules.pdf flsenate.gov](#)

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S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3/18/2025

Meeting Date

SB 734

Bill Number or Topic

Senate Approp HHS

Committee

Amendment Barcode (if applicable)

Name Lauren Korniyenko

Phone 321-501-6804

Address 7615 Millbrook Ave

Email

Street

Melbourne

FL

32940

City

State

Zip

Speaking: [X] For [] Against [] Information OR Waive Speaking: [] In Support [] Against

PLEASE CHECK ONE OF THE FOLLOWING:

[X] I am appearing without compensation or sponsorship.

[] I am a registered lobbyist, representing:

[] I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules.pdf flsenate.gov

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S-001 (08/10/2021)

March 18, 2025

Meeting Date

The Florida Senate
APPEARANCE RECORD

SB 734

Bill Number or Topic

Deliver both copies of this form to
Senate professional staff conducting the meeting

AHS

Committee

Amendment Barcode (if applicable)

Name Jana Sutoova

Phone (321) 310-9423

Address 351 Zac Rd

Email vtatry@yahoo.com

Street

Sunbright TN

37872

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

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S-001 (08/10/2021)

March 18, 2025

Meeting Date

The Florida Senate
APPEARANCE RECORD

SB 734

Bill Number or Topic

AHS

Committee

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name Ethan Lopez

Phone (321) 310-9423

Address 351 Zac Rd

Email Vtetry@yahoo.com

Street

Sunbright TN

37872

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

3/18/25

Meeting Date

The Florida Senate APPEARANCE RECORD

SB734

Bill Number or Topic

AHS

Committee

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name Marcia "Marcy" Scheppler

Phone 561 401 7350

Address 101 SE Balboa Ave
Street

Email marciaFL2@icloud.com

Stuart
City

FL
State

34994
Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

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S-001 (08/10/2021)

3-18-25

Meeting Date

The Florida Senate APPEARANCE RECORD

734

Bill Number or Topic

AHS

Committee

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name

Sabrina Davis

Phone

813.300.5014

Address

Email

Street

Gainesville, FL 32608

City

State

Zip

Speaking:



For



Against



Information

OR

Waive Speaking:



In Support



Against

PLEASE CHECK ONE OF THE FOLLOWING:



I am appearing without
compensation or sponsorship.



I am a registered lobbyist,
representing:



I am not a lobbyist, but received
something of value for my appearance
(travel, meals, lodging, etc.),
sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf](#) [flsenate.gov](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

3/18/25 - 9:30 AM

Meeting Date

The Florida Senate
APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

SB 734 - Wrongful Death

Bill Number or Topic

Approp. HHS

Committee

Amendment Barcode (if applicable)

Name **AARP - Karen Murillo**

Phone **850-567-0414**

Address **215 S. Monroe St., Ste. 603**

Email **kmurillo@aarp.org**

Street

Tallahassee

FL

32301

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without
compensation or sponsorship.

I am a registered lobbyist,
representing:

AARP

I am not a lobbyist, but received
something of value for my appearance
(travel, meals, lodging, etc.),
sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

03.18.25

Meeting Date

Appropriations Committee on Health and Human Services

Committee

Name **Andrew Bolin**

Phone **(813) 848-0600**

Address **1905 E. 7th Ave.**

Email **asb@bolin-law.com**

Street

Tampa

City

State

Zip

The Florida Senate

APPEARANCE RECORD

734

Bill Number or Topic

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

Florida Justice Reform Institute

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

03.18.25

Meeting Date

Appropriations Committee on Health and Human Services

Committee

Name **Judy Davis**

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to
Senate professional staff conducting the meeting

734

Bill Number or Topic

Amendment Barcode (if applicable)

Phone **850-431-5364**

Address **1300 Miccosukee Road**

Email **Judy.Davis@tmh.org**

Street

Tallahassee

FL

32308

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

3-18-25

Meeting Date

734

Bill Number or Topic

AHS

Committee

Amendment Barcode (if applicable)

Name

Beth Young

Phone

850-591-6979

Address

Street

Email

Tallahassee

City

FL

State

Zip

Speaking:

For

Against

Information

OR

Waive Speaking:

In Support

Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf flsenate.gov](#)

This form is part of the public record for this meeting.

03.18.25

Meeting Date

Appropriations Committee on Health and Human Services

Committee

Name **Alfred C. Gronovius**

Phone **917.488.1244**

Address **3031 N Rocky Point Drive West**

Email **alfred.gronovius@marsh.com**

Street

Tampa

City

FL

State

33607

Zip

The Florida Senate

APPEARANCE RECORD

734

Bill Number or Topic

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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This form is part of the public record for this meeting.

S-001 (08/10/2021)

03.18.25

Meeting Date

Appropriations Committee on Health and Human Services

Committee

Name **Bob Johnson**

Phone **(651) 303-8902**

Address **5146 Tweedle Terrace**

Email **rdjadvocacy@gmail.com**

Street

The Villages

FL

32163

City

State

Zip

The Florida Senate

APPEARANCE RECORD

734

Bill Number or Topic

Deliver both copies of this form to
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Amendment Barcode (if applicable)

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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The Florida Senate
APPEARANCE RECORD

SB 734

Meeting Date

Deliver both copies of this form to
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Bill Number or Topic

A45

Committee

Amendment Barcode (if applicable)

Name Peter Finnell

Phone 727-992-3894

Address 2546 Baywood dr
Street

Email endfreekillow@
gmail.com

Holaday
City

FL
State

34690
Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without
compensation or sponsorship.

I am a registered lobbyist,
representing:

I am not a lobbyist, but received
something of value for my appearance
(travel, meals, lodging, etc.),
sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

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S-001 (08/10/2021)

THE FLORIDA SENATE
APPEARANCE RECORD

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

3/18/25

Meeting Date

734

Bill Number (if applicable)

Topic Actions for Recovery of Damages for Wrongful Death

Amendment Barcode (if applicable)

Name George Feijoo

Job Title Consultant

Address 108 S. Monroe Street

Phone 3057207099

Street

Tallahassee

FL

32312

Email grfeijoo@flapartners.com

City

State

Zip

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing The Florida Insurance Council

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 (10/14/14)

The Florida Senate

APPEARANCE RECORD

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3/18/2025

Meeting Date

SB 734

Bill Number or Topic

HHS Appropriations

Committee

Amendment Barcode (if applicable)

Name Mark Delegal

Phone

Address 201 East Dark Ave #200B

Email

mark@dacfl.com

Street

TLH

City

FL

State

32301

Zip

Speaking: For Against Information

OR

Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

ProAssurance Corporation

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf](#) [flsenate.gov](#)

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March 18, 2025

Meeting Date

Appropriations Comm. HHS

Committee

The Florida Senate

APPEARANCE RECORD

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SB734

Bill Number or Topic

Amendment Barcode (if applicable)

Name **Jason D. Winn**

Phone **850/222-5702**

Address **106 E College Ave, Suite 1500**

Email **jwinn@llw-law.com**

Street

Tallahassee

FL

32301

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

Florida Osteopathic Medical Association

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022JointRules.pdf \(flsenate.gov\)](#)

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S-001 (08/10/2021)

The Florida Senate

APPEARANCE RECORD

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18 Mar 2025 Meeting Date

734 Bill Number or Topic

Approp. Human Serv. Committee

Amendment Barcode (if applicable)

Name Sandra Mortham Phone 950-251-2283

Address 6675 Weeping Willow Way Street Email smorham@aol.com

Tall FL 32311 City State Zip

Speaking: [] For [] Against [] Information OR Waive Speaking: [] In Support [x] Against

PLEASE CHECK ONE OF THE FOLLOWING:

[] I am appearing without compensation or sponsorship.

[x] I am a registered lobbyist, representing: The Doctors Co.

[] I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules. df.flsenate.gov

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The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Appropriations Committee on Health and Human Services

BILL: CS/SB 756

INTRODUCER: Banking and Insurance Committee and Senator Burton

SUBJECT: Health Insurance Coverage for Individuals with Developmental Disabilities

DATE: March 17, 2025 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Johnson</u>	<u>Knudson</u>	<u>BI</u>	Fav/CS
2.	<u>Barr</u>	<u>McKnight</u>	<u>AHS</u>	Favorable
3.	_____	_____	<u>FP</u>	_____

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 756 revises eligibility provisions relating to coverage of autism spectrum disorder (ASD), thereby expanding coverage and access to coverage in the large group market (coverage through an employer with more than 50 employees).

The bill revises the definition of the term, “autism spectrum disorder,” to conform with the definition provided in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders.¹

The bill also eliminates the age eligibility limitations on providing large group insurance coverage for ASD, thereby expanding eligibility for coverage to all individuals with ASD.

The bill may have an indeterminate impact on the state group health insurance program. **See Section V. Fiscal Impact Statement.**

The bill takes effect January 1, 2026.

¹ American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders DSM-5-TR (Mar. 2022). The DSM is standard classification of mental disorders used by mental health professionals in the United States to diagnose mental disorders.

II. Present Situation:

Autism spectrum disorder (ASD) is a neurological and developmental disorder that affects how individuals interact with others, communicate, learn, and behave. Although ASD can be diagnosed at any age, it is described as a “developmental disorder” because symptoms generally appear in the first two years of life.² About 1 in 36 children have been identified with ASD.³ ASD is nearly 4 times more common among boys than among girls.⁴

Diagnosis of Autism Spectrum Disorder

Diagnosing ASD usually relies on parents’ or caregivers’ descriptions of their child’s development and a licensed professional’s observation of the child’s behavior. The American Psychiatric Association’s Diagnostic and Statistical Manual (DSM-5-TR), provides standardized criteria to help diagnose ASD.⁵

The term, “autism spectrum disorder”, reflects a scientific consensus that four previously separate disorders are a single condition with different levels of symptom severity in two core domains.⁶ ASD now encompasses the previous DSM-IV autistic disorder (autism), Asperger’s disorder, childhood disintegrative disorder, and pervasive developmental disorder not otherwise specified.⁷ ASD is characterized by (1) deficits in social communication and social interaction and (2) restricted repetitive behaviors, interests, and activities (RRBs). Because both components are required for diagnosis of ASD, social communication disorder is diagnosed if no RRBs are present.

To meet diagnostic criteria for ASD pursuant to DSM-5-TR, a child must have persistent deficits in each of three areas of social communication and interaction (see A.1. through A.3. below) plus at least two of four types of restricted, repetitive behaviors (see B.1. through B.4. below):

- A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by all the following, currently or by history (examples are illustrative, not exhaustive):
 1. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.

² National Institute of Health, Autism Spectrum Disorder (Dec. 2024), <https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd> (last visited Mar. 1, 2025).

³ Centers for Disease Control, [Prevalence and Characteristics of Autism Spectrum Disorder Among Children Aged 8 Years — Autism and Developmental Disabilities Monitoring Network, 11 Sites, United States, 2020 | MMWR](#) (Mar. 24, 2023), (last visited Feb. 28, 2025).

⁴ *Id.*

⁵ American Psychiatric Association, Frequently Asked Questions, <https://www.psychiatry.org/psychiatrists/practice/dsm/frequently-asked-questions#:~:text=What%20is%20DSM%20and%20why,the%20diagnosis%20of%20mental%20disorders> (last visited Feb. 28, 2025).

⁶ American Psychiatric Association, Highlights of Changes from DSM-IV-TR to DSM-5 (2022) [APA DSM Changes from DSM-IV-TR -to DSM-5.pdf](#). (last visited Mar. 1, 2025).

⁷ *Id.*

2. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.
 3. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers.
- B. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following, currently or by history (examples are illustrative, not exhaustive; see text):
1. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypes, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
 2. Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day). Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
 3. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
 4. Hyperreactivity or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).⁸

Treatment and Intervention for ASD⁹

Current treatments for ASD seek to reduce symptoms that interfere with daily functioning and quality of life. Treatments can be given in education, health, community, or home settings, or a combination of settings. As individuals with ASD leave high school and grow into adulthood, additional services can help improve health and daily functioning and facilitate social and community engagement.

There are many types of treatments available. These treatments generally can be broken down into the following categories, although some treatments involve more than one approach:

- Behavioral
- Educational.
- Social-relational.
- Pharmacological.
- Psychological.

⁸ See Centers for Disease Control, Autism Spectrum Disorder, Clinical Testing and Diagnosis for Autism Spectrum Disorder, [Clinical Testing and Diagnosis for Autism Spectrum Disorder | Autism Spectrum Disorder \(ASD\) | CDC](#) (last visited Feb. 28, 2025). Additional diagnostic criteria for ASD is described.

⁹ Centers for Disease Control, Treatment and Intervention for Autism Spectrum Disorder (May 16, 2024), [Treatment and Intervention for Autism Spectrum Disorder | Autism Spectrum Disorder \(ASD\) | CDC](#) (last visited Mar. 1, 2025).

- Complementary and alternative.

Requirements Related to the Federal Mental Health Parity and Addiction Equity Act¹⁰

On December 23, 2024, final rules for amending regulations implementing the Paul Wellstone and Pete Domenici Mental Parity and Addiction Equity Act of 2008 (MHPAEA) were released.¹¹ These final rules aim to further MHPAEA's fundamental purpose to ensure that individuals with group health plans or group or individual health insurance coverage who seek treatment for covered mental health (MH) conditions or substance use disorders (SUDs) do not face greater burdens on access to benefits for those conditions or disorders than they would face when seeking coverage for the treatment of a medical condition or a surgical procedure. Specifically, these final rules amend the existing non-quantitative treatment limitations (NQTL) standard to prohibit group health plans and health insurance issuers offering group or individual health insurance coverage from using NQTLs that place greater restrictions on access to mental health and substance use disorder benefits as compared to medical/surgical benefits.

The Employee Benefits Security Administration and the Centers for Medicare and Medicaid are responsible for enforcing MHPAEA, together with states that have the authority to enforce MHPAEA.¹² Florida has not enacted legislation that authorizes the Office of Insurance Regulation to enforce the provisions of MHPAEA. Although the law requires a general equivalence in the way MH/SUD and medical/surgical benefits are treated with respect to annual and lifetime dollar limits, financial requirements and treatment limitations, MHPAEA does not require group health plans or health insurers to cover MH/SUD benefits. However, the Patient Protection and Affordable Care Act¹³ builds on MHPAEA and requires coverage of mental health and substance use disorder services as one of ten essential health benefits categories in non-grandfathered individual and small group plans.

Regulation of Insurance in Florida

The Office of Insurance Regulation (OIR),¹⁴ is responsible for all activities concerning health maintenance organizations (HMOs), health insurers and other risk-bearing entities, including licensing, rates, policy forms, market conduct, claims, issuance of certificates of authority, solvency, viatical settlements, premium financing, and administrative supervision, as provided under the Florida Insurance Code.¹⁵ To transact business in Florida, a health insurer or HMO must obtain a certificate of authority from the OIR.¹⁶ The Agency for Health Administration

¹⁰ Centers for Medicare and Medicaid Services, <https://www.cms.gov/marketplace/private-health-insurance/mental-health-parity-addiction-equity> (last visited Mar. 7, 2025).

¹¹ See Public Law 116-260 and 45 C.F.R. Parts 146 and 147.

¹² U.S. Department of Labor, FY 2022 MHPAEA Enforcement Fact Sheet, <https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/mental-health-parity/mhpaea-enforcement-2022#:~:text=These%20protections%20are%20vital%20for,MHPAEA%2C%20together%20with%20the%20states>. (last visited Mar. 7, 2025).

¹³ P.L. 111-148, 124 Stat. 119-1945 (2010). PPACA was amended by P.L. 111-152, the Health Care and Education Reconciliation Act of 2010.

¹⁴ The OIR is a unit under the Financial Services Commission, which is composed of the Governor, the Attorney General, the Chief Financial Officer, and the Commissioner of Agriculture. Commission members serve as the agency head for purposes of rulemaking under ch. 120, F.S. See s. 20.121(3), F.S.

¹⁵ Section 20.121(3)(a), F.S.

¹⁶ Sections 624.401 and 641.49, F.S.

(Agency) regulates the quality of care provided by HMOs under part III of ch. 641, F.S. Prior to receiving a certificate of authority from the OIR, an HMO must receive a Health Care Provider Certificate from the Agency.¹⁷ As part of the certification process used by the Agency, an HMO must provide information to demonstrate that the HMO has the ability to provide quality of care consistent with the prevailing standards of care.¹⁸

Coverage for Autism Spectrum Disorder in Florida

The Florida Insurance Code provides coverage for autism spectrum disorder for the insureds or members in the large group market,¹⁹ including the state group insurance plan,²⁰ for eligible individuals.²¹ Under current statute, “autism spectrum disorder”²² is any of the following disorders as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association:

- Autistic disorder;
- Asperger’s syndrome; and
- Pervasive developmental disorder not otherwise specified.

“An eligible individual” means an individual under 18 years of age or an individual 18 years of age or older who is in high school who has been diagnosed as having a developmental disability at 8 years of age or younger.²³

Such coverage must include, at a minimum, the following benefits:²⁴

- Well-baby and well-child screening for diagnosing the presence of autism spectrum disorder.
- Treatment of autism spectrum disorder and Down syndrome through speech therapy, occupational therapy, physical therapy, and applied behavior analysis. Applied behavior analysis services shall be provided by an individual certified pursuant to s. 393.17,²⁵ F.S., or an individual licensed under ch. 490²⁶ or ch. 491.²⁷

The coverage mandated under this section is subject to the following requirements:²⁸

- Coverage shall be limited to treatment that is prescribed by the insured’s treating physician in accordance with a treatment plan.
- Such coverage is limited to \$36,000 annually and may not exceed \$200,000 in total lifetime benefits. The maximum benefits must be adjusted annually on January 1 of each calendar year to reflect any change from the previous year in the medical component of the then

¹⁷ Section 641.495, F.S.

¹⁸ *Id.*

¹⁹ A large group plan provides coverage for an employer with more than 50 employees.

²⁰ Section 110.123, F.S.

²¹ Section 627.6686, F.S. applies to insurers and s. 641.31098, F.S., applies to health maintenance organizations.

²² Sections 627.6686(2)(b), F.S., and 641.31098(2)(b), F.S.

²³ Sections 627.6686(2)(c), and 641.31098(2)(c), F.S.

²⁴ Sections 627.6686(3) and 641.31098(3), F.S.

²⁵ Behavior analysts.

²⁶ Practice of psychology.

²⁷ The scope of this chapter includes the practice of clinical social work, practice of marriage and family therapy, practice of mental health counseling.

²⁸ Sections 627.6686(4) and 641.31098(4), F.S.

current Consumer Price Index for All Urban Consumers, published by the Bureau of Labor Statistics of the United States Department of Labor

- Coverage may not be denied on the basis that provided services are habilitative in nature.
- Coverage may be subject to other general exclusions and limitations of the insurer's policy or plan, including, but not limited to, coordination of benefits, participating provider requirements, restrictions on services provided by family or household members, and utilization review of health care services, including the review of medical necessity, case management, and other managed care provisions.

Coverage for Mental and Nervous Disorders

Section 627.668, F.S., requires insurers and health maintenance organization group health plans to make available to the policyholder (i.e. employer) as part of the application, for an appropriate additional premium, under a hospital and medical expense-incurred insurance policy, under a prepaid health care contract, and under a hospital and medical service plan contract, coverage for mental and nervous disorders. Under group policies or contracts, inpatient hospital benefits, partial hospitalization benefits, and outpatient benefits consisting of durational limits, dollar amounts, deductibles, and coinsurance factors shall not be less favorable than for physical illness generally, except that:

- Inpatient benefits may be limited to not less than 30 days per benefit year as defined in the policy or contract. If inpatient hospital benefits are provided beyond 30 days per benefit year, the durational limits, dollar amounts, and coinsurance factors thereto need not be the same as applicable to physical illness generally.
- Outpatient benefits may be limited to \$1,000 for consultations with a licensed physician, a psychologist licensed pursuant to ch. 490, F.S., a mental health counselor licensed pursuant to ch. 491, F.S., a marriage and family therapist licensed pursuant to ch 491, F.S., and a clinical social worker licensed pursuant to ch 491, F.S. If benefits are provided beyond the \$1,000 per benefit year, the durational limits, dollar amounts, and coinsurance factors thereof need not be the same as applicable to physical illness generally.
- Partial hospitalization benefits shall be provided under the direction of a licensed physician. For purposes of this part, the term "partial hospitalization services" is defined as those services offered by a program that is accredited by an accrediting organization whose standards incorporate comparable regulations required by this state. Alcohol rehabilitation programs accredited by an accrediting organization whose standards incorporate comparable regulations required by this state or approved by the state and licensed drug abuse rehabilitation programs shall also be qualified providers under this section. In a given benefit year, if partial hospitalization services or a combination of inpatient and partial hospitalization are used, the total benefits paid for all such services may not exceed the cost of 30 days after inpatient hospitalization for psychiatric services, including physician fees, which prevail in the community in which the partial hospitalization services are rendered. If partial hospitalization services benefits are provided beyond the limits set forth in this paragraph, the durational limits, dollar amounts, and coinsurance factors thereof need not be the same as those applicable to physical illness generally.

III. Effect of Proposed Changes:

Sections 1 and 2 amend ss. 627.6696 and 641.31098, F.S., relating to health insurance and health maintenance organization coverage of autism spectrum disorders (ASD) in the large group market, respectively.

The sections revise the definition of ASD to mean as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) of the American Psychiatric Association and removes from statute the enumerate disorders that have been incorporated into the new DSM definition.

The term “eligible individual,” as it applies to ASD coverage, is revised to eliminate the general age cap of age 18 for coverage and the associated age cap for diagnosis.

Section 3 reenacts s. 409.906(26), F.S., relating to optional Medicaid Services, to incorporate the new definition of ASD in s. 627.6686, F.S., into the Florida Medicaid waiver for home and community-based services for ASD and other developmental disabilities.

Section 4 reenacts s. 943.1727, F.S., relating to continued employment training, to incorporate the new definition of ASD in s. 627.6686, F.S., into the law enforcement continued employment training relating to recognizing the symptoms and characteristics of ASD and responding appropriately to such individuals.

Section 5 provides the bill takes effect July 1, 2026.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

Since the bill removes the current age limit and diagnosis restriction by age 8 for coverage of an individual in the large group market who has been diagnosed with a developmental disorder, additional individuals diagnosed with autism spectrum disorder will be eligible for coverage, and existing insureds or members can continue coverage beyond age 18.

C. Government Sector Impact:

Both the Office of Insurance Regulation and the Agency for Health Care Administration report no immediate impacts to state revenues or expenditures.^{29,30} However, increased utilization of services due to changes in eligibility criteria for autism spectrum disorder could have an indeterminate impact on future capitation rates under the Florida Medicaid Program. The Department of Management Services estimates that the fiscal impact of the bill as it relates to the State Group Insurance Program is less than \$650,000 across all plans.³¹

VI. Technical Deficiencies:

None.

VII. Related Issues:

The heading or catchline for s. 627.6696, F.S., is “Coverage for individuals with autism spectrum disorder required; exceptions.” However, the section relates to coverage for a broader group of individuals. Therefore, the catchline could be amended to “Coverage for individuals with developmental disorders; exceptions.”

VIII. Statutes Affected

This bill substantially amends the following sections of statute: 627.6686 and 641.31098.

This bill reenacts the following sections of statute: 409.906 and 943.1727.

²⁹ Office of Insurance Regulation, *Senate Bill 756 Analysis* (Feb. 24, 2025) (on file with the Senate Appropriations Committee on Health and Human Services).

³⁰ Agency for Health Care Administration, *Senate Bill 756 Analysis* (Feb. 25, 2025) (on file with the Senate Appropriations Committee on Health and Human Services).

³¹ Department of Management Services, *Senate Bill 756 Agency Analysis* (Mar. 10, 2025) (on file with the Senate Appropriations Committee on Health and Human Services).

IX. Additional Information:

- A. **Committee Substitute – Statement of Substantial Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Banking and Insurance on March 7, 2026:

The CS changes the effective date of the bill from July 1, 2025, to January 1, 2026.

- B. **Amendments:**

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

By the Committee on Banking and Insurance; and Senator Burton

597-02251-25

2025756c1

1 A bill to be entitled
 2 An act relating to health insurance coverage for
 3 individuals with developmental disabilities; amending
 4 ss. 627.6686 and 641.31098, F.S.; revising the
 5 definitions of the terms "autism spectrum disorder"
 6 and "eligible individual"; reenacting ss. 409.906(26)
 7 and 943.1727, F.S., relating to optional Medicaid
 8 services and continued employment training relating to
 9 autism spectrum disorder, respectively, to incorporate
 10 the amendment made to s. 627.6686, F.S., in references
 11 thereto; providing an effective date.

12

13 Be It Enacted by the Legislature of the State of Florida:

14

15 Section 1. Paragraphs (b) and (c) of subsection (2) of
 16 section 627.6686, Florida Statutes, are amended to read:

17 627.6686 Coverage for individuals with autism spectrum
 18 disorder required; exception.—

19 (2) As used in this section, the term:

20 (b) "Autism spectrum disorder" has the same meaning as
 21 ~~means any of the following disorders as~~ defined in the most
 22 recent edition of the Diagnostic and Statistical Manual of
 23 Mental Disorders of the American Psychiatric Association+
 24 ~~1. Autistic disorder.~~
 25 ~~2. Asperger's syndrome.~~
 26 ~~3. Pervasive developmental disorder not otherwise~~
 27 ~~specified.~~

28 (c) "Eligible individual" means an individual ~~under 18~~
 29 ~~years of age or an individual 18 years of age or older who is in~~

Page 1 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

597-02251-25

2025756c1

30 ~~high school~~ who has been diagnosed as having a developmental
 31 ~~disability at 8 years of age or younger.~~

32 Section 2. Paragraphs (b) and (c) of subsection (2) of
 33 section 641.31098, Florida Statutes, are amended to read:

34 641.31098 Coverage for individuals with developmental
 35 disabilities.—

36 (2) As used in this section, the term:

37 (b) "Autism spectrum disorder" has the same meaning as
 38 ~~means any of the following disorders as~~ defined in the most
 39 recent edition of the Diagnostic and Statistical Manual of
 40 Mental Disorders of the American Psychiatric Association+
 41 ~~1. Autistic disorder.~~
 42 ~~2. Asperger's syndrome.~~
 43 ~~3. Pervasive developmental disorder not otherwise~~
 44 ~~specified.~~

45 (c) "Eligible individual" means an individual ~~under 18~~
 46 ~~years of age or an individual 18 years of age or older who is in~~
 47 ~~high school~~ who has been diagnosed as having a developmental
 48 ~~disability at 8 years of age or younger.~~

49 Section 3. For the purpose of incorporating the amendment
 50 made by this act to section 627.6686, Florida Statutes, in a
 51 reference thereto, subsection (26) of section 409.906, Florida
 52 Statutes, is reenacted to read:

53 409.906 Optional Medicaid services.—Subject to specific
 54 appropriations, the agency may make payments for services which
 55 are optional to the state under Title XIX of the Social Security
 56 Act and are furnished by Medicaid providers to recipients who
 57 are determined to be eligible on the dates on which the services
 58 were provided. Any optional service that is provided shall be

Page 2 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

597-02251-25

2025756c1

59 provided only when medically necessary and in accordance with
 60 state and federal law. Optional services rendered by providers
 61 in mobile units to Medicaid recipients may be restricted or
 62 prohibited by the agency. Nothing in this section shall be
 63 construed to prevent or limit the agency from adjusting fees,
 64 reimbursement rates, lengths of stay, number of visits, or
 65 number of services, or making any other adjustments necessary to
 66 comply with the availability of moneys and any limitations or
 67 directions provided for in the General Appropriations Act or
 68 chapter 216. If necessary to safeguard the state's systems of
 69 providing services to elderly and disabled persons and subject
 70 to the notice and review provisions of s. 216.177, the Governor
 71 may direct the Agency for Health Care Administration to amend
 72 the Medicaid state plan to delete the optional Medicaid service
 73 known as "Intermediate Care Facilities for the Developmentally
 74 Disabled." Optional services may include:

75 (26) HOME AND COMMUNITY-BASED SERVICES FOR AUTISM SPECTRUM
 76 DISORDER AND OTHER DEVELOPMENTAL DISABILITIES.—The agency is
 77 authorized to seek federal approval through a Medicaid waiver or
 78 a state plan amendment for the provision of occupational
 79 therapy, speech therapy, physical therapy, behavior analysis,
 80 and behavior assistant services to individuals who are 5 years
 81 of age and under and have a diagnosed developmental disability
 82 as defined in s. 393.063, autism spectrum disorder as defined in
 83 s. 627.6686, or Down syndrome, a genetic disorder caused by the
 84 presence of extra chromosomal material on chromosome 21. Causes
 85 of the syndrome may include Trisomy 21, Mosaicism, Robertsonian
 86 Translocation, and other duplications of a portion of chromosome
 87 21. Coverage for such services shall be limited to \$36,000

Page 3 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

597-02251-25

2025756c1

88 annually and may not exceed \$108,000 in total lifetime benefits.
 89 The agency shall submit an annual report on January 1 to the
 90 President of the Senate, the Speaker of the House of
 91 Representatives, and the relevant committees of the Senate and
 92 the House of Representatives regarding progress on obtaining
 93 federal approval and recommendations for the implementation of
 94 these home and community-based services. The agency may not
 95 implement this subsection without prior legislative approval.

96 Section 4. For the purpose of incorporating the amendment
 97 made by this act to section 627.6686, Florida Statutes, in a
 98 reference thereto, section 943.1727, Florida Statutes, is
 99 reenacted to read:

100 943.1727 Continued employment training relating to autism
 101 spectrum disorder.—The department shall establish a continued
 102 employment training component relating to autism spectrum
 103 disorder as defined in s. 627.6686. The training component shall
 104 include, but need not be limited to, instruction on the
 105 recognition of the symptoms and characteristics of an individual
 106 on the autism disorder spectrum and appropriate responses to an
 107 individual exhibiting such symptoms and characteristics.
 108 Completion of the training component may count toward the 40
 109 hours of instruction for continued employment or appointment as
 110 a law enforcement officer required under s. 943.135.

111 Section 5. This act shall take effect January 1, 2026.

Page 4 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.



2025 AGENCY LEGISLATIVE BILL ANALYSIS

Office of Insurance Regulation

BILL INFORMATION

BILL NUMBER:	SB 756
BILL TITLE:	Health Insurance Coverage for Individuals with Developmental Disabilities
BILL SPONSOR:	Sen. Burton
EFFECTIVE DATE:	7/1/2025

COMMITTEES OF REFERENCE

- 1) Banking and Insurance
- 2) Appropriations Committee on Health and Human Services
- 3) Fiscal Policy
- 4)
- 5)

PREVIOUS LEGISLATION

BILL NUMBER:	
SPONSOR:	
YEAR:	
LAST ACTION:	

CURRENT COMMITTEE

--

SIMILAR BILLS

BILL NUMBER:	
SPONSOR:	

IDENTICAL BILLS

BILL NUMBER:	
SPONSOR:	

Is this bill part of an agency package?

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BILL ANALYSIS INFORMATION

DATE OF ANALYSIS:	2/24/25
LEAD AGENCY ANALYST:	Bryan Peters
ADDITIONAL ANALYST(S):	
LEGAL ANALYST:	Stephanie Roman Caban
FISCAL ANALYST:	

POLICY ANALYSIS

1. EXECUTIVE SUMMARY

SB 756 modifies the definitions of the terms "autism spectrum disorder" and "eligible individual" in sections 627.6686(2)(b)-(c) & 641.31098(2)(b)-(c), F.S. It also reenacts sections 409.906(26) & 943.1727, F.S. for the sole purpose of incorporating the amended definitions. The bill goes into effect on July 1, 2025.

2. SUBSTANTIVE BILL ANALYSIS

At this time, SB 756 has no impact on the Florida Office of Insurance Regulation (“OIR”).

1. PRESENT SITUATION:

Sections 627.6686(2)(b)-(c) & 641.31098(2)(b)-(c), F.S., define “autism spectrum disorder” and “eligible individual” as follows:

- “Autism spectrum disorder” includes any of the following disorders, as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association, (1) autistic disorder, (2) asperger’s syndrome, and (3) pervasive developmental disorder not otherwise specified.
- “Eligible individual” includes someone under the age of 18 diagnosed with a developmental disability, or someone older than 18 who was diagnosed by 8 years of age.

2. EFFECT OF THE BILL:

The bill, which goes into effect on July 1, 2025, does the following:

- Amends the definition of "autism spectrum disorder" in sections 627.6686(2)(b) & 641.31098(2)(b), F.S. by striking the specific references to Autistic disorder, Asperger’s syndrome and non-specified pervasive developmental disorder while maintaining the alignment of the definition with the most current edition of the Diagnostic and Statistical Manual of Mental Disorders.
- Amends the definition of "eligible individual" contained in sections 627.6686(2)(c) & 641.31098(2)(c), F.S. by removing age limitations while maintaining the applicable meaning to include an individual diagnosed with a developmental disability. This amendment may expand the number of eligible individuals due to the lack of age restrictions.
- Reenacts sections 409.906(26) and 943.1727, F.S. to incorporate the updated definitions across applicable statutes.

3. DOES THE LEGISLATION DIRECT OR ALLOW THE AGENCY/BOARD/COMMISSION/DEPARTMENT TO DEVELOP, ADOPT, OR ELIMINATE RULES, REGULATIONS, POLICIES, OR PROCEDURES?

If yes, explain:	N/A
What is the expected impact to the agency’s core mission?	N/A
Rule(s) impacted (provide references to F.A.C., etc.):	N/A

4. WHAT IS THE POSITION OF AFFECTED CITIZENS OR STAKEHOLDER GROUPS?

List any known proponents and opponents:	There are no current known proponents or opponents. However, it is possible that insurers may oppose the amended definition for “eligible individual,” while certain individuals, including those diagnosed with developmental disabilities who may not have qualified under the
--	--

	previous definition, may support it. Others who may support this bill include parents or caretakers of individuals with a diagnosed developmental disability, and disability rights advocates.
Provide a summary of the proponents' and opponents' positions:	Insurers may oppose this new definition because it expands eligibility by removing age restrictions. Anyone who was not considered an "eligible individual" due to the age restrictions will likely support the new definition that now allows them to be eligible for certain coverage.

5. ARE THERE ANY REPORTS OR STUDIES REQUIRED BY THIS BILL?

If yes, provide a description:	No
Date Due:	N/A
Bill Section Number(s):	N/A

6. ARE THERE ANY GUBERNATORIAL APPOINTMENTS OR CHANGES TO EXISTING BOARDS, TASK FORCES, COUNCILS, COMMISSION, ETC. REQUIRED BY THIS BILL?

Board:	No
Board Purpose:	N/A
Who Appointments:	N/A
Appointee Term:	N/A
Changes:	N/A
Bill Section Number(s):	N/A

FISCAL ANALYSIS

1. WHAT IS THE FISCAL IMPACT TO LOCAL GOVERNMENT?

Revenues:	None
Expenditures:	None
Does the legislation increase local taxes or fees?	No
If yes, does the legislation provide for a local referendum or local governing body public vote prior to implementation of the tax or fee increase?	N/A

2. WHAT IS THE FISCAL IMPACT TO STATE GOVERNMENT?

Revenues:	None
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Expenditures:	
Does the legislation contain a State Government appropriation?	No
If yes, was this appropriated last year?	

3. WHAT IS THE FISCAL IMPACT TO THE PRIVATE SECTOR?

Revenues:	
Expenditures:	
Other:	N/A

4. DOES THE BILL INCREASE OR DECREASE TAXES, FEES, OR FINES?

Does the bill increase taxes, fees or fines?	No
Does the bill decrease taxes, fees or fines?	No
What is the impact of the increase or decrease?	N/A
Bill Section Number:	N/A

TECHNOLOGY IMPACT

Does the legislation impact the agency's technology systems (i.e., IT support, licensing software, data storage, etc.)?	No
If yes, describe the anticipated impact to the agency including any fiscal impact.	N/A

FEDERAL IMPACT

Does the legislation have a federal impact (i.e. federal compliance, federal funding, federal agency involvement, etc.)?	No
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If yes, describe the anticipated impact including any fiscal impact.	N/A
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ADDITIONAL COMMENTS

LEGAL - GENERAL COUNSEL'S OFFICE REVIEW

Issues/concerns/comments and recommended action:	Title XIX of the Social Security Act is a federal program that funds Medicaid State Plans and the Children's Health Insurance Program ("CHIP"), which provides coverage to eligible children whose families have incomes that are too high to qualify for Medicaid but too low to afford private coverage. The proposed changes to the definitions of the terms "autism spectrum disorder" and "eligible individual," including the potential eligibility changes, do not appear to create a conflict with the Act.
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February 25, 2025

Analysis of SB 756 – An act relating to health insurance coverage for individuals with developmental disabilities

To Whom it May Concern:

A request was made to the Florida Agency for Health Care Administration (Agency) to complete an analysis of Senate Bill (SB) 756 – An act relating to health insurance coverage for individuals with developmental disabilities. SB 756 has an effective date of July 1, 2025. SB 756 has no fiscal or operational impact on the Florida Medicaid program. The bill amends section (s.) 627.6686 and 641.31098, Florida Statutes (F.S.), and reenacts s. 409.906(26) and 943.1727, F.S. No revisions are indicated to s. 409.906(26) and 943.1727, F.S.

This bill amends s. 627.6686, F.S. to:

- Revise the definition of “autism spectrum disorder” to align with the current professional standard indicated in the Diagnostic and Statistical Manual, 5th edition (DSM-V).
- Revise the definition of “eligible individual” by striking the age restriction of under 18 years old or being in high school and striking the age requirement for receiving the qualified diagnosis.

This bill amends s. 641.31098(2)(b), F.S. with the same changes. The bill:

- Revises the definition of “autism spectrum disorder” to align with the current professional standard indicated in the Diagnostic and Statistical Manual, 5th edition (DSM-V).
- Revises the definition of “eligible individual” by striking the age restriction of under 18 years old or being in high school and striking the age requirement for receiving the qualified diagnosis.

This bill reenacts s. 409.906(26), F.S.

- No revisions are indicated to this section for Medicaid optional services for Home and Community-Based Services for Autism Spectrum Disorder and Other Developmental Disabilities.

This bill reenacts s. 943.1727, F.S.

- No revisions are indicated to this section, which is a Department of Law enforcement statute regarding continued employment training relating to autism spectrum disorder.

SB 756, as it is currently written, does not have a fiscal or operational impact on the Florida Medicaid program. Florida Medicaid is not subject to the coverage requirements indicated in the commercial insurance statutes 627, F.S. or 641, F.S. Although the bill reenacts s. 409.906, F.S., it does not amend Medicaid statute or affect Medicaid coverage.





2025 AGENCY LEGISLATIVE BILL ANALYSIS

AGENCY: Department of Management Services

BILL INFORMATION	
BILL NUMBER:	CS/SB 756
BILL TITLE:	Health Insurance Coverage for Individuals with Developmental Disabilities
BILL SPONSOR:	Sen. Burton
EFFECTIVE DATE:	January 1, 2026

COMMITTEES OF REFERENCE
1) Banking and Insurance
2) Appropriations Committee on Health and Human Services
3) Fiscal Policy
4) Health & Human Services Committee
5) Click or tap here to enter text.

PREVIOUS LEGISLATION	
BILL NUMBER:	Click or tap here to enter text.
SPONSOR:	Click or tap here to enter text.
YEAR:	Click or tap here to enter text.
LAST ACTION:	Click or tap here to enter text.

CURRENT COMMITTEE
Appropriations Committee on Health and Human Services

SIMILAR BILLS	
BILL NUMBER:	HB 377
SPONSOR:	Rep. Tant

IDENTICAL BILLS	
BILL NUMBER:	N/A
SPONSOR:	N/A

Is this bill part of an agency package?
No

BILL ANALYSIS INFORMATION	
DATE OF ANALYSIS:	March 10, 2025
LEAD AGENCY ANALYST:	Chad Corcoran, DMS Director of Legislative Affairs
ADDITIONAL ANALYST(S):	Teela Sanders, DSGI Director Greg Mauldin, DSGI Deputy Director Ashlee Tising, DSGI Policy Administrator
LEGAL ANALYST:	Stuart Williams, Managing Attorney Healthcare Practice Group
FISCAL ANALYST:	Donna Carmack, Deputy Budget Director

POLICY ANALYSIS

1. EXECUTIVE SUMMARY

The bill revises definitions for “autism spectrum disorder” and “eligible individual” as the terms pertain to health insurance coverage for individuals with developmental disabilities; removes age restrictions for coverage; updates optional Medicaid services and law enforcement training statutes in relation to autism spectrum disorder to align with the revised definitions; maintains legislative-approval requirement for Medicaid expansion, providing that adjustments in services are subject to budgetary provisions; and, provides an effective date of January 1, 2026.

2. SUBSTANTIVE BILL ANALYSIS

1. PRESENT SITUATION:

Under the authority of section 110.123, F.S., the Department of Management Services (DMS), through the Division of State Group Insurance (DSGI), administers the State Group Insurance Program (Program) under a cafeteria plan consistent with section 125, Internal Revenue Code.

To administer the Program, DSGI contracts with third party administrators for self-insured health plans, a fully-insured HMO, and a pharmacy benefit manager (PBM) for the state employees’ Self-Insured Prescription Drug Program (PDP) pursuant to section 110.12315, Florida Statutes (F.S.).

Currently, the DSGI Program covers treatment for Autism Spectrum Disorder in accordance with sections 627.6686 and 641.31098, F.S., and any of the following disorders as defined in the diagnostic categories of the International Classification of Diseases, Ninth Edition, Clinical Modification (ICD-9 CM), or their equivalents in the most recently published version of the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders:

- Autistic disorder;
- Asperger’s Syndrome;
- Pervasive developmental disorder not otherwise specified.

Coverage for these diagnoses is provided for individuals diagnosed at eight years of age or younger and are either:

- Under 18 years of age, or
- Eighteen years of age or older and in high school.

Coverage includes well-baby and well-child screening for diagnosing the presence of these disorders, speech therapy, occupational therapy, and physical therapy. Applied behavior analysis is also covered when provided by Applied Behavioral Analysts, psychologists, clinical social workers, and others within the scope of their license. Coverage is limited to treatment prescribed by the treating physician in accordance with a treatment plan.

Coverage can be subject to general exclusions and limitations, including but not limited to, coordination of benefits, contracting provider requirements, and utilization review of health care services, including medical necessity, case management, and other managed care provisions, and prior authorization requirements. A formal diagnostic evaluation and written treatment plan can be requested to confirm coverage eligibility.

2. EFFECT OF THE BILL:

Section 1: Amends section 627.6686 (2), F.S.; applies to the Florida Insurance Code. **Impacts DSGI.**

- Revises the definition for “Autism spectrum disorder” in accordance with the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association.
 - Removes the terms “Autistic disorder”, “Asperger’s syndrome,” and “Pervasive developmental disorder not otherwise specified” from the definition.
- Revises the definition of “Eligible individual” to mean “an individual who has been diagnosed as having a developmental disability.”
 - Removes age restrictions for diagnosis from the definition.
- **Estimated Fiscal Impact:** The estimated fiscal impacts to the Program are broken out by Self-Insured PPO and Self-Insured and Fully-Insured HMOs.

- The Self-Insured PPO plan estimates an annual fiscal impact of \$460,000 based on:
 - The removal of age limits for diagnosis and coverage;
 - New benefits for coverage assumed by revised definitions; and,
 - No provisions for age limit, maximum benefit, frequency limits, or cost-sharing guidelines.
- The Self-Insured and Fully-Insured HMOs opinions differ regarding fiscal impact. One Self-Insured HMO estimates an annual fiscal impact of approximately \$156,000 based on the plan's current State of Florida membership with no age restrictions. The other Self-Insured HMO and the Fully-Insured HMO estimate no additional fiscal impact.
 - **Fiscal impact is provided by the health plans' actuarial team after review of the bill at the request of DSGI, utilizing generally accepted fiscal practices.**
- **Estimated Operational Impact:** The Program HMOs do not see any operational impact as current policy guidelines align with the proposed bill language. The PPO plan will require system coding.

Section 2: Amends section 641.31098 (2), F.S.; applies to the Florida Insurance Code. **Impacts DSGI.**

- Revises the definition for "Autism spectrum disorder" in accordance with the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association.
 - Removes the terms "Autistic disorder", "Asperger's syndrome," and "Pervasive developmental disorder not otherwise specified" from the definition.
- Revises the definition of "Eligible individual" to mean "an individual who has been diagnosed as having a developmental disability."
 - Removes age restrictions for diagnosis from the definition.
- **Estimated Fiscal Impact:** Same as Section 1 of analysis.
- **Operation Impact:** Same as Section 1 of analysis.

Sections 3 & 4: Do not impact DSGI.

Section 5: Provides an effective date of January 1, 2026.

3. DOES THE LEGISLATION DIRECT OR ALLOW THE AGENCY/BOARD/COMMISSION/DEPARTMENT TO DEVELOP, ADOPT, OR ELIMINATE RULES, REGULATIONS, POLICIES, OR PROCEDURES?

Y N

If yes, explain:	Click or tap here to enter text.
What is the expected impact to the agency's core mission?	Click or tap here to enter text.
Rule(s) impacted (provide references to F.A.C., etc.):	Click or tap here to enter text.

4. WHAT IS THE POSITION OF AFFECTED CITIZENS OR STAKEHOLDER GROUPS?

List any known proponents and opponents:	Unknown
Provide a summary of the proponents' and opponents' positions:	Unknown

5. ARE THERE ANY REPORTS OR STUDIES REQUIRED BY THIS LEGISLATION?

Y N

If yes, provide a description:	Click or tap here to enter text.
Date Due:	Click or tap here to enter text.

Bill Section Number(s):	Click or tap here to enter text.
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6. ARE THERE ANY NEW GUBERNATORIAL APPOINTMENTS OR CHANGES TO EXISTING BOARDS, TASK FORCES, COUNCILS, COMMISSIONS, ETC. REQUIRED BY THIS LEGISLATION? Y N

Board:	Click or tap here to enter text.
Board Purpose:	Click or tap here to enter text.
Who Appoints:	Click or tap here to enter text.
Appointee Team:	Click or tap here to enter text.
Changes:	Click or tap here to enter text.
Bill Section Number(s):	Click or tap here to enter text.

FISCAL ANALYSIS

1. DOES THE LEGISLATION HAVE A FISCAL IMPACT TO LOCAL GOVERNMENT? Y N

Revenues:	Click or tap here to enter text.
Expenditures:	Click or tap here to enter text.
Does the legislation increase local taxes or fees?	Click or tap here to enter text.
If yes, does the legislation provide for a local referendum or local governing body public vote prior to implementation of the tax or fee increase?	Click or tap here to enter text.

2. DOES THE LEGISLATION HAVE A FISCAL IMPACT TO STATE GOVERNMENT? Y N

Revenues:	No
Expenditures:	Please see Sections 1 and 2 under Effect of the Bill.
Does the legislation contain a State Government appropriation?	No
If yes, was this appropriated last year?	N/A

3. DOES THE LEGISLATION HAVE A FISCAL IMPACT TO THE PRIVATE SECTOR? Y N

Revenues:	Click or tap here to enter text.
Expenditures:	Click or tap here to enter text.
Other:	Click or tap here to enter text.

4. DOES THE LEGISLATION INCREASE OR DECREASE TAXES, FEES, OR FINES? Y N

Does the bill increase taxes, fees or fines?	Click or tap here to enter text.
Does the bill decrease taxes, fees or fines?	Click or tap here to enter text.
What is the impact of the increase or decrease?	Click or tap here to enter text.
Bill Section Number:	Click or tap here to enter text.

5. ACTUARIAL STATEMENT OF FISCAL SOUNDNESS (RETIREMENT ONLY) FRS OR LOCAL

Does the bill comply with the requirements of Article X, Section 14 of the Constitution?	Y <input type="checkbox"/> N <input type="checkbox"/>
Does the bill satisfy the actuarial cost impact provisions of Chapter 112, Part VII, Florida Statutes pending completion of actuarial impact statements?	Y <input type="checkbox"/> N <input type="checkbox"/>
Explanation:	Click or tap here to enter text.
Fiscal Note:	Click or tap here to enter text.
Signature: Company or Organization: Date:	Click or tap here to enter text.

TECHNOLOGY IMPACT

1. DOES THE LEGISLATION IMPACT THE AGENCY'S TECHNOLOGY SYSTEMS (I.E. IT SUPPORT, LICENSING SOFTWARE, DATA STORAGE, ETC.)? Y N

If yes, describe the anticipated impact to the agency including any fiscal impact.	Click or tap here to enter text.	
--	----------------------------------	--

FEDERAL IMPACT

1. DOES THE LEGISLATION HAVE A FEDERAL IMPACT (I.E. FEDERAL COMPLIANCE, FEDERAL FUNDING, FEDERAL AGENCY INVOLVEMENT, ETC.)? Y N

If yes, describe the anticipated impact including any fiscal impact.	Click or tap here to enter text.
--	----------------------------------

ADDITIONAL COMMENTS

Click or tap here to enter text.

LEGAL - GENERAL COUNSEL'S OFFICE REVIEW

Does the proposed legislation conflict with existing federal law, or regulations? If so, what laws and/or regulations?	The proposed legislation does not conflict with existing federal law, or regulations.
Does the proposed legislation raise significant constitutional concerns under the U.S. or Florida Constitutions (e.g. separation of powers, access to the courts, equal protection, free speech, establishment clause, impairment of contracts)?	The proposed legislation does not raise significant constitutional concerns under the U.S. or Florida Constitutions.
Is the proposed legislation likely to generate litigation and, if so, from what interest groups or parties?	The proposed legislation is not likely to generate litigation.



THE FLORIDA SENATE

Tallahassee, Florida 32399-1100

COMMITTEES:

Health Policy, *Chair*
Judiciary, *Vice Chair*
Agriculture
Appropriations Committee on Agriculture, Environment,
and General Government
Appropriations Committee on Health and
Human Services
Banking and Insurance
Fiscal Policy
Rules

SENATOR COLLEEN BURTON

12th District

March 10, 2025

The Honorable Jay Trumbull
415 Senate Building
404 South Monroe Street
Tallahassee, FL 32399-1100

Chair Trumbull,

I respectfully request SB 756 Health Insurance Coverage for Individuals with Developmental Disabilities be placed on the Appropriations Committee on Health and Human Services agenda at your earliest convenience.

Thank you for your consideration.

Regards,

A handwritten signature in blue ink that reads "Colleen Burton".

Colleen Burton

CC: Brooke McKnight, Staff Director
Robin Jackson, Committee Administrative Assistant

REPLY TO:

- 1375 Havendale Boulevard, NW, Winter Haven, Florida 33881 (863) 413-1529
- 408 Senate Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5012

Senate's Website: www.flsenate.gov

BEN ALBRITTON
President of the Senate

JASON BRODEUR
President Pro Tempore

03/18/2025

Meeting Date

The Florida Senate APPEARANCE RECORD

SB756

Bill Number or Topic

Appropriation Health
Committee Human services

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name Kai Guthertz

Phone

Address

Street

Sarasota

City

FL

State

34236

Zip

Email

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf](#) [flsenate.gov](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

3/18/2025

Meeting Date

HHS

Committee

Name

Dina Justice/The Arc of Florida

Phone

850-485-2155

Address

2898 Mahan Drive STe 1

Email

dina@arcflorida.org

Street

TLH 32308

City

State

Zip

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

SB 756

Bill Number or Topic

Amendment Barcode (if applicable)

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

The Arc of Florida

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022 Joint Rules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

March 18, 2025

Meeting Date

Appropriations Cmtte HHS

Committee

Name James McFaddin

The Florida Senate

APPEARANCE RECORD

Deliver both copies of this form to Senate professional staff conducting the meeting

CS/SB 756

Bill Number or Topic

Amendment Barcode (if applicable)

Phone 850-671-4401

Address 123 S. Adams St

Street

Email mcfaddin@thesoutherngroup.com

Tallahassee

City

FL

State

32301

Zip

Speaking: For Against Information OR Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

Autism Speaks

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. [2020-2022JointRules.pdf \(flsenate.gov\)](#)

This form is part of the public record for this meeting.

S-001 (08/10/2021)

08/18/2025

Meeting Date

The Florida Senate

APPEARANCE RECORD

SB 750

Bill Number or Topic

Deliver both copies of this form to Senate professional staff conducting the meeting

appropriation of health & human services

Committee

Amendment Barcode (if applicable)

Name

Amin Johnson

Phone

863386 0729

Address

☺

Email

Street

City

State

Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1, 2020-2022 Joint Rules. df.flstate.gov

This form is part of the public record for this meeting.

03-18-25

The Florida Senate

APPEARANCE RECORD

SB 756

Meeting Date

Bill Number or Topic

Deliver both copies of this form to Senate professional staff conducting the meeting

Appropriation Health & Human Services
Committee

Amendment Barcode (if applicable)

Name Rebecca Guther Phone

Address Street Email

Sarasota FL 34234
City State Zip

Speaking: For Against Information OR Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

- I am appearing without compensation or sponsorship.
- I am a registered lobbyist, representing:
- I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

03.18.25

Meeting Date

SB756

Bill Number or Topic

Appropriation Health + Human Services
Committee

Deliver both copies of this form to
Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

Name Kai Robinson

Phone

Address

Street

Email

Daineto
City

FL
State

34221
Zip

Speaking: For Against Information **OR** Waive Speaking: In Support Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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S-001 (08/10/2021)

CourtSmart Tag Report

Room: KB 412

Case No.: -

Type:

Caption: Senate Appropriations Committee on Health and Human Services

Judge:

Started: 3/18/2025 9:32:39 AM

Ends: 3/18/2025 11:27:21 AM

Length: 01:54:43

9:32:42 AM Sen. Trumbull (Chair)
9:33:32 AM S 398
9:33:39 AM Sen. Burgess
9:34:08 AM Sen. Trumbull
9:34:19 AM Karen Murillo, American Association of Retired Persons (waives in support)
9:34:24 AM Alex Anderson, Lobbyist, Alzheimer's Association (waives in support)
9:34:32 AM Sen. Trumbull
9:34:42 AM Sen. Davis
9:35:05 AM Sen. Trumbull
9:35:11 AM Sen. Harrell
9:35:37 AM Sen. Trumbull
9:35:41 AM Sen. Burgess
9:36:26 AM Sen. Trumbull
9:36:59 AM S 714
9:37:03 AM Sen. Burton
9:37:24 AM Sen. Trumbull
9:37:34 AM Am. 218790
9:37:39 AM Sen Burton
9:38:11 AM Sen. Trumbull
9:38:29 AM Dr. Diane Gowski
9:41:05 AM Sen. Trumbull
9:41:09 AM Toni Large, Florida College of Emergency Physicians (waives in support)
9:41:17 AM Sen. Trumbull
9:41:25 AM S 714 (cont.)
9:41:41 AM Lynda Bell, President, Florida Right to Life
9:44:37 AM Sen. Trumbull
9:44:45 AM Sen. Rouson
9:45:12 AM L. Bell
9:46:32 AM Sen. Rouson
9:47:04 AM L. Bell
9:48:20 AM Sen. Rouson
9:48:22 AM Sen. Trumbull
9:48:25 AM Sen. Davis
9:48:35 AM L. Bell
9:48:50 AM Sen. Trumbull
9:49:03 AM Dr. Diane Gowski
9:54:40 AM Sen. Trumbull
9:54:50 AM Sen. Brodeur
9:55:28 AM Sen. Trumbull
9:55:32 AM Sen. Rouson
9:55:38 AM Sen. Trumbull
9:55:39 AM Sen. Harrell
9:56:49 AM Sen. Trumbull
9:56:55 AM Sen. Burton
9:58:52 AM Sen. Trumbull
9:59:27 AM S 756
9:59:30 AM Sen. Burton
10:00:44 AM Sen. Trumbull
10:00:50 AM Sen. Berman
10:01:39 AM Sen. Burton
10:01:56 AM Sen. Trumbull
10:02:03 AM Kai Robinson

10:02:16 AM Rebecca Gutherz (waives in support)
10:02:25 AM Rain Johnson (waives in support)
10:02:31 AM James McFaddin, Autism Speaks (waives in support)
10:02:34 AM Dina Justice, The Arc of Florida (waives in support)
10:02:42 AM Kai Gutherz (waives in support)
10:02:46 AM Sen. Trumbull
10:02:51 AM Sen. Burton
10:02:53 AM Sen. Trumbull
10:03:27 AM S 734
10:03:33 AM Sen. Yarborough
10:05:52 AM Sen. Trumbull
10:05:57 AM Sen. Davis
10:06:37 AM Sen. Yarborough
10:08:19 AM Sen. Davis
10:08:51 AM Sen. Yarborough
10:09:42 AM Sen. Trumbull
10:09:45 AM Sen. Harrell
10:10:12 AM Sen. Yarborough
10:10:35 AM Sen. Harrell
10:11:17 AM Sen. Yarborough
10:11:59 AM Sen. Harrell
10:12:16 AM Sen. Yarborough
10:13:07 AM Sen. Harrell
10:13:22 AM Sen. Yarborough
10:13:26 AM Sen. Harrell
10:13:36 AM Sen. Yarborough
10:13:39 AM Sen. Harrell
10:13:44 AM Sen. Yarborough
10:14:21 AM Sen. Harrell
10:14:30 AM Sen. Yarborough
10:15:26 AM Sen. Trumbull
10:15:28 AM Sen. Burton
10:16:42 AM Sen. Yarborough
10:17:40 AM Sen. Burton
10:17:54 AM Sen. Yarborough
10:17:58 AM Sen. Trumbull
10:18:32 AM Peter Finnell
10:22:27 AM Bob Johnson
10:25:04 AM Alfred Gronovius, Insurance Broker
10:27:59 AM Beth Young
10:30:36 AM Judy Davis, Risk Manager, Tallahassee Memorial Hospital
10:33:42 AM Andrew Bolin, Florida Justice Reform Institute
10:35:52 AM Karen Murillo, American Association of Retired Persons
10:38:10 AM Sabrina Davis
10:40:20 AM Marcia Scheppler
10:43:40 AM Ethan Lepez
10:47:00 AM Jana Sutoova
10:48:17 AM Lauren Korniyenko
10:51:10 AM Darcy McGuill
10:54:17 AM Alyssa Fjeran
10:57:40 AM Dr. Michael Tompkins, Florida Medical Association
11:01:50 AM David Mica Jr., Florida Hospital Association
11:03:44 AM Megan Sowell, Attorney
11:05:33 AM Sen. Rouson
11:06:18 AM M. Sowell
11:06:46 AM Karen Aguilar
11:10:04 AM Daryl Perritt
11:12:42 AM Sen. Trumbull
11:13:01 AM Adam Basford, Associated Industries of Florida
11:14:03 AM Jim Kallinger (waives in opposition)
11:14:27 AM Carolyn Johnson, Florida Chamber of Commerce
11:15:39 AM Tom Wheeler

11:17:20 AM Taylor Hill, Practitioner
11:18:28 AM Carter Scott, Florida Justice Association
11:19:21 AM Cindy Jenkins
11:21:11 AM Dr. Teresa Mahoffey
11:22:33 AM George Feijoo (waives in opposition)
11:22:39 AM Mark Deledal, ProAssurance Corporation (waives in opposition)
11:22:45 AM Jason Winn, Florida Osteopathic Medical Association (waives in opposition)
11:22:49 AM Sandra Mortham, The Doctors Company (waives in opposition)
11:22:56 AM Sen. Trumbull
11:22:56 AM Sen. Rouson
11:23:33 AM Sen. Trumbull
11:23:35 AM Sen. Harrell
11:25:05 AM Sen. Trumbull
11:25:07 AM Sen. Brodeur
11:25:45 AM Sen. Trumbull
11:25:49 AM Sen. Yarborough
11:26:23 AM Sen. Trumbull
11:26:54 AM Sen. Rodriquez
11:27:01 AM Sen. Garcia
11:27:06 AM Sen. Grueters
11:27:08 AM Sen Trumbull