

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 Committee on Children, Families, and Elder Affairs

BILL: CS/SB 1010

INTRODUCER: Children, Families, and Elder Affairs Committee and Senator Yarborough

SUBJECT: Enforcement of Protections for Minors

DATE: January 20, 2026

REVISED: _____

ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1. Fiore	Tuszynski	CF	Fav/Cs
2.		HP	
3.		RC	

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 1010 strengthens enforcement mechanisms pertaining to statutory prohibitions on sex-reassignment prescriptions and procedures for minors under Florida law, and parental rights in health care decision-making. The bill amends s. 456.52, Florida Statutes (F.S.), to add criminal penalties for health care practitioners who willfully or actively aid or abet a minor in obtaining sex-reassignment prescriptions or procedures. It also amends s. 766.318, F.S., to provide an individual the ability to recover both economic and non-economic damages for injuries he or she sustained before or after age 18 as a result receiving sex-reassignment prescriptions and procedures as a minor. The Attorney General is authorized to investigate alleged violations relating to sex-reassignment for minors and commence a civil action for damages, injunctive relief, and civil penalties of up to \$100,000 per violation for the benefit of the injured individual.

The bill creates s. 1014.07, F.S., to provide a cause of action within 2 years of the occurrence to recover damages against certain public employees and health care practitioners for violations of any parental rights under s. 1014.04, F.S. and provisions of health services or drugs to minors without parental consent under s. 1014.06, F.S., respectively. It provides that an individual may recover for the benefit of the affected minor both economic and non-economic damages that result from a violation of those sections of statute. The bill authorizes the Attorney General to investigate alleged violations and commence a civil action for damages, injunctive relief, and civil penalties of up to \$100,000 per violation for the benefit of the affected minor.

The bill has no anticipated fiscal impact.

The bill has an effective date of July 1, 2026.

II. Present Situation:

Sex-Reassignment Prescriptions and Procedures for Minors

In 2023, the Legislature passed SB 254, which was signed into law and took effect on May 17, 2023.¹ Under this law, sex-reassignment prescriptions and procedures for patients under 18 years of age were prohibited, subject to a grandfather provision allowing minors who were already receiving this care to continue do so.² “Sex-reassignment prescriptions and procedures” are defined as puberty blockers, hormones, or medical or surgical procedures used to affirm a person’s perceived sex when it differs from their biological sex, but exclude good-faith treatment of medically verifiable disorders of sexual development, care for conditions caused by such procedures, and medically necessary treatment to prevent imminent death or serious bodily impairment.³ Rules adopted by the Boards of Medicine and Osteopathic Medicine further implement standards and consent requirements.⁴

Health Care Practitioners

Florida law defines a health care practitioner as any person licensed under a broad range of health-related professional regulations. The definition covers practitioners licensed under statutes regulating physicians, nurses, pharmacists, mental health professionals, and other medical providers.⁵

Health care practitioners include, but are not limited to:

- Medical doctors and osteopathic physicians (Chapters 458 and 459, F.S.).
- Chiropractic physicians and podiatrists (Chapters 460 and 461, F.S.).
- Optometrists and pharmacists (Chapters 463 and 465, F.S.).
- Nurses, including advanced practice registered nurses (Chapter 464, F.S.).
- Dentists and midwives (Chapters 466 and 467, F.S.).
- Physical therapists, occupational therapists, and speech-language pathologists (Chapters 468 and 486, F.S.).
- Psychologists, clinical social workers, marriage and family therapists, and mental health counselors (Chapters 490 and 491, F.S.).

Health care practitioners who “willfully or actively participate” in violating prohibitions on sex-reassignment prescriptions and procedures for minors are to be charged with a third-degree

¹ Ch. 2023-90, Laws of Florida; *See also*, CS/SB 254: Treatments for Sex Reassignment at <https://www.flsenate.gov/Session/Bill/2023/254>.

² Section 456.52(1), F.S.

³ Section 456.001(9), F.S.

⁴ 64B8-9.019, F.A.C.; 64B15-14.014, F.A.C.; 64B8-ER23-7, F.A.C.; and 64B15-ER2-9, F.A.C.; *see also* Patient Information and Informed Parental Consent and Assent for Minor Form at <https://flboardofmedicine.gov/forms/Puberty-Suppression-Treatment-for-Patients-with-Gender-Dysphoria-Patient-Information-and-Parental-Consent-and-Assent-for-Minors.pdf>.

⁵ Section 456.001(4), F.S.

felony; carrying potential penalties under Florida law of up to five years' imprisonment, a fine of up to \$5,000, and, if applicable, enhanced sentencing for habitual felony offenders as provided in ss. 775.082, 775.083, and 775.084, F.S.⁶ In addition, violation of this provision is grounds for terminating a healthcare practitioner's license.⁷

There is also a civil cause of action for personal injury or death resulting from providing prohibited sex-reassignment prescriptions or procedures to minors; punitive damage limits do not apply.⁸ Such actions may be commenced no later than 20 years after the cessation or completion of the prescription or procedure; however, the cause of action shall not apply to prescriptions or procedures that ceased or completed on or before May 17, 2023, nor to treatments with puberty blockers, hormones, or hormone antagonists if the treatments were commenced before, and were still active on, May 17, 2023.⁹

Legal Challenge

Florida was one of a handful of states, alongside Tennessee, Arkansas, Alabama, Kentucky, and Idaho, that saw challenges to the constitutionality of laws passed by state legislatures seeking to restrict sex-reassignment prescriptions or procedures (also referred to as "gender-affirming care") for minors.¹⁰ The federal district courts in these states adopted the plaintiffs' equal-protection position, nearly unanimously holding the bans unconstitutional. Some federal district courts determined that the interests asserted by the states were pretextual, with certain courts further concluding that the bans were driven by animus toward transgender individuals.¹¹ States defended their bans by contending that the effectiveness of gender-affirming care is unproven,¹² that such treatment involves risks,¹³ that gender dysphoria may naturally resolve over time,¹⁴ that minors could later regret irreversible interventions,¹⁵ and that patients may receive care without adequate informed consent.¹⁶ The Florida district court rejected these arguments, finding that gender-affirming care is supported by substantial research and endorsed by leading medical organizations, and observing that its risks are comparable to those of other medical treatments excluded from the scope of the ban.¹⁷

⁶ Section 456.52(5)(b), F.S.

⁷ Section 456.52(5)(a), F.S.

⁸ Section 766.318(1)-(2), F.S.

⁹ Section 766.318(3)-(4), F.S.

¹⁰ Doe v. Ladapo, 737 F. Supp. 3d 1240 (N.D. Fla. 2024); *see also L.W. ex rel. Williams v. Skrmetti*, 679 F. Supp. 3d 677 (M.D. Tenn. 2023); Brandt v. Rutledge, 677 F. Supp. 3d 877 (E.D. Ark. 2023); Eknes-Tucker v. Marshall, 603 F. Supp. 3d 1131 (M.D. Ala. 2022); Doe 1 v. Thornbury, 679 F. Supp. 3d 576 (W.D. Ky. 2023); and Poe by & through Poe v. Labrador, 709 F. Supp. 3d 1169 (D. Idaho 2023).

¹¹ Doe v. Ladapo, 737 F. Supp. 3d 1240, 1273-75 (N.D. Fla. 2024).

¹² Poe, 709 F. Supp. 3d at 1193.

¹³ *Id.* at 1193-94.

¹⁴ Eknes-Tucker, 603 F. Supp. 3d at 1142-43.

¹⁵ Doe, 737 F. Supp. 3d at 1291-92.

¹⁶ *Id.* at 1287.

¹⁷ *Id.* at 1258-59.

On appeal, the Sixth and Eleventh Circuits issued opinions lifting the preliminary injunctions against the bans in Tennessee, Kentucky, Alabama, and Florida.¹⁸ These courts rejected claims that the bans merit heightened scrutiny, instead subjecting them only to rational-basis review and dismissed the plaintiffs' equal-protection challenges to the bans. In reviewing the Florida district court specifically, the Eleventh Circuit concluded that the district court likely erred by finding Florida's law was motivated by discriminatory animus, holding instead that binding circuit precedent requires a presumption of legislative good faith. The court found the State showed a strong likelihood of success on the merits and that the remaining stay factors—irreparable harm to the State, limited harm to plaintiffs, and the public interest in protecting children and enforcing duly enacted laws—favored Florida. Accordingly, the court stayed the district court's injunction.¹⁹

Moreover, the United States Supreme Court upheld Tennessee's statewide ban on prescribing puberty blockers and hormone therapy for the treatment of gender dysphoria, concluding under rational basis review that the law does not violate the Equal Protection Clause of the Fourteenth Amendment.²⁰

Parental Rights in Florida

Chapter 1014, F.S., known as the "Parents' Bill of Rights," affirms that parents have a fundamental right to direct the upbringing, education, and health care of their minor children.²¹ Parents have the right to direct the education and care of their minor child.²² Parents may choose the type of schooling for their child, including public, private, religious, or home education programs;²³ and access and review all school records related to their minor child.²⁴ Parents also have the right to direct the moral or religious upbringing of their child.²⁵

Schools must promptly notify parents if a school employee suspects a criminal offense has been committed against their child, unless notification interferes with a law enforcement or child protective investigation.²⁶

Parents have the right to make health care decisions for their minor children, including access to medical records and control over medical services and personal health data.²⁷ Except where otherwise authorized by law, health care practitioners must obtain parental consent before providing medical services to a minor.²⁸

¹⁸ L.W. ex rel. Williams v. Skrmetti, 73 F.4th 408, 413 (6th Cir. 2023); Doe v. Thornbury, 75 F.4th 655, 657 (6th Cir. 2023); Eknes-Tucker v. Governor of Ala., 80 F.4th 1205, 1231 (11th Cir. 2023); and Doe v. Surgeon Gen., No. 24-11996, 2024 WL 4132455 (11th Cir. Aug. 26, 2024).

¹⁹ Doe v. Surgeon Gen., No. 24-11996, 2024 WL 4132455, at *3-4 (11th Cir. Aug. 26, 2024).

²⁰ United States v. Skrmetti, 605 U.S. 495 (2025).

²¹ Section 1014.04(1), F.S.

²² Section 1014.04(1)(a), F.S.

²³ Section 1014.04(1)(c), F.S.

²⁴ Section 1014.04(1)(d), F.S.

²⁵ Section 1014.04(1)(b), F.S.

²⁶ Section 1014.04(1)(j), F.S.

²⁷ Section 1014.04(1)(e)-(f), F.S.

²⁸ Section 1014.06(1), F.S.

Parents also retain the right to access and review all medical records, unless the parent is under investigation for a crime against the child and law enforcement has requested records not be released;²⁹ and provide written consent before any biometric scan or DNA sample is taken, stored, or shared.³⁰

Additionally, written parental consent is required before video or voice recording of a minor child is created by a government entity, except for purposes such as classroom instruction, security monitoring, or forensic investigations.³¹

Examples of exceptions to the written parental consent requirement include circumstances involving criminal or juvenile justice processing, such as DNA collection upon arrest or during a sexual offense investigation.³²

Exceptions to Parental Consent

Under current law, minors may independently consent to certain health care services without parental approval. These exceptions include:

- Treatment for Sexually Transmissible Diseases (STDs) – A minor may consent to examination and treatment for STDs without parental involvement.³³
- Emergency Medical Treatment – A minor may receive emergency medical care if parental consent is unavailable.³⁴
- Emergency Behavioral Health Care – A minor may be taken into custody and receive emergency mental health or substance abuse evaluation and treatment under the Baker Act³⁵ or Marchman Act³⁶ without parental consent.
- Mental Health Services – A minor aged 13 or older may consent to diagnostic and evaluative mental health services. However, parental consent is required for therapeutic services beyond two visits within a one-week period.³⁷
- Blood Donation – A minor who is at least 17 years old may donate blood, provided there is no written objection from the parent or guardian.³⁸
- Pregnancy-Related Care – An unwed, pregnant minor may consent to medical or surgical care related to her pregnancy. However, this does not include medical care unrelated to pregnancy.³⁹
- Substance Abuse Treatment – A minor may consent to substance abuse treatment without parental approval.⁴⁰

²⁹ Section 1014.04(1)(f), F.S.

³⁰ Section 1014.04(1)(g)-(h), F.S.

³¹ Section 1014.04(1)(i), F.S.

³² Sections 943.325 and 943.326, F.S.

³³ Section 384.30, F.S.

³⁴ Section 743.064, F.S.

³⁵ Section 394.463, F.S.

³⁶ Section 397.675, F.S.

³⁷ Section 394.4784, F.S.

³⁸ Section 743.06, F.S.

³⁹ Section 743.065, F.S.

⁴⁰ Section 397.601, F.S.

- When the disability of nonage has been removed pursuant to specific statutes in chapter 743, F.S.
- Substitute Consent – If a parent or legal guardian is unavailable and cannot be contacted after reasonable attempts, certain relatives—including stepparents, grandparents, adult siblings, or adult aunts and uncles—may provide consent for the minor’s medical treatment.⁴¹

When a Parent is Prohibited by Law from Making Health Care Decisions

In certain circumstances, a parent may be legally prohibited from making health care decisions for their minor child, including:

- Termination or Restriction of Parental Rights – A parent loses medical decision-making authority if a court terminates their rights due to abuse, neglect, or abandonment. In such cases, a legal guardian, foster parent, or the Department of Children and Families assumes this role.⁴²
- Court Orders for Abuse, Neglect, or Domestic Violence – A court may issue a protective order restricting a parent’s ability to make medical decisions.⁴³
- Incapacity or Unfitness of the Parent – A parent deemed legally incapacitated, such as due to severe mental illness or substance abuse, may lose decision-making authority, which transfers to a court-appointed guardian.⁴⁴
- Court-Ordered Medical Treatment – A court may override parental consent if a parent refuses life-saving or medically necessary treatment for their child.⁴⁵

Disciplinary Actions for Violations of Parental Consent Requirements

Florida law subjects health care practitioners to disciplinary action for violations of professional standards or statutory requirements.⁴⁶ Failure to comply with parental consent requirements is a disciplinary violation, and practitioners may face penalties for providing services to a minor without obtaining required parental consent.⁴⁷

Enforcement and Legal Actions

Florida law establishes enforcement mechanisms to ensure compliance with health care regulations. These include:

- Assessment of investigative and prosecution costs against the practitioner if disciplinary action is taken.⁴⁸
- An injunction or writ of mandamus to prohibit continued violations of the regulations.⁴⁹

⁴¹ Section 743.0645, F.S.

⁴² Section 39.806, F.S.

⁴³ Section 741.30, F.S.

⁴⁴ Section 744.3215, F.S.

⁴⁵ Section 39.407(2), F.S.

⁴⁶ Section 456.072(1), F.S.

⁴⁷ Section 456.072(1)(rr), F.S.

⁴⁸ Section 456.072(4), F.S.

⁴⁹ Section 456.072(5), F.S.

- Permanent revocation of a license for severe violations, with limited options for reapplication.⁵⁰

III. Effect of Proposed Changes:

Section 1 amends s. 456.52(5)(b), F.S., to establish that a health care practitioner who aids or abets another in violating prohibitions on sex-reassignment prescriptions or procedures for minors commits a third-degree felony. This explicitly extends criminal liability to accomplices, not only direct actors.

Section 2 amends s. 766.318, F.S., to clarify that a private cause of action exists for personal injury or death resulting from a violation of the prohibition on sex-reassignment prescriptions and procedures for minors pursuant to s. 456.52(1), F.S. It also provides that an individual may recover both economic and non-economic damages for injuries he or she sustained before or after age 18 that result from such violation.

The section authorizes the Attorney General to investigate alleged violations of s. 456.52(1), F.S., and commence civil actions for damages, injunctive relief, and civil penalties up to \$100,000 per violation. It requires that damages recovered pursuant to such action accrue to benefit the injured individual. The section maintains existing provisions related to limitations periods, exceptions for certain ongoing treatments, and punitive damages considerations.

Section 3 creates s. 1014.07, F.S., to establish a civil cause of action against: a state or local government employee who violates parental rights under s. 1014.04, F.S.; or health care practitioner who provides, solicits or arranges to provide, or aids or abets another to provide, health care services or prescriptions of medicinal drugs to a minor without parental consent in violation of s. 1014.06, F.S. It also provides that an individual may recover both economic and non-economic damages that result from a violation of those sections of statute. It requires that damages recovered pursuant to such action accrue to benefit the affected minor.

The section authorizes the Attorney General to investigate alleged violations of ss. 1014.04 or 1014.06, F.S., and commence civil actions for damages, injunctive relief, and civil penalties up to \$100,000 per violation. It requires that damages recovered pursuant to such action accrue to benefit the affected minor. It also specifies that punitive damages caps do not apply and establishes a two-year statute of limitations.

Section 4 reenacts s. 456.074(5)(c), F.S., to incorporate the substantive changes in the bill relating to emergency licensure suspension authority for practitioners upon arrest for relevant violations.

Section 5 provides an effective date of July 1, 2026.

⁵⁰ Section 456.072(6), F.S.

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 identified.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 456.52, 766.318, 456.074.

This bill creates the following section of the Florida Statutes: 1014.07.

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 Children, Families, and Elder Affairs on January 20, 2026:

In s. 456.52, F.S., related to the prohibition against sex-reassignment prescriptions and procedures for minors, the CS:

- Clarifies that a private cause of action exists for personal injury or death resulting from a violation of the prohibition; and
- Provides that an individual may recover both economic and non-economic damages for injuries he or she sustained before or after age 18 that result from such violation.

In s. 1014.07, F.S., relating to the parental rights and consent requirements contained within sections 1014.04 and 1014.06, the CS:

- Clarifies that a private cause of action exists for violation of rights and consent requirements arising from those sections of statute;
- Expands the cause of action against health care practitioners to those who aid or abet another to provide health care services or prescriptions to minors without parental consent; and
- Provides that an individual may recover both economic and non-economic damages that result from a violation of those sections of statute.

B. Amendments:

None.