

# FLORIDA HOUSE OF REPRESENTATIVES BILL ANALYSIS

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**BILL #:** [CS/CS/HB 1505](#)

**TITLE:** Parental Rights

**SPONSOR(S):** Plakon, Kendall

**COMPANION BILL:** [CS/SB 1288](#) (Grall)

**LINKED BILLS:** None

**RELATED BILLS:** None

## Committee References

[Education & Employment](#)

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## SUMMARY

### **Effect of the Bill:**

CS/HB 1505 expands the rights of parents with respect to their minor children. The bill grants additional rights to parents relating to surveys and questionnaires intended for their children.

The bill eliminates certain exceptions to a parent's rights relating to health care decisions, medical record access, and certain DNA collection for a minor child. The bill prohibits a physician from providing medical treatment for a sexually transmitted infection (STI) to a minor without written consent from the minor's parent or guardian.

The bill provides an exception for DNA collection and storage without parental consent in certain situations involving required collection and storage of DNA by law enforcement pursuant to [s. 943.325, F.S.](#), and [s. 943.326, F.S.](#) The bill allows a health care practitioner to provide a minor with medical health care without first obtaining written consent by a parent or guardian if he or she is providing emergency medical care under [s. 743.064, F.S.](#), or [s. 1014.04\(1\)\(e\), F.S.](#), or when authorized by a court order. The bill further modifies parental consent requirements for health care services and the use of biofeedback devices on minors. The bill restricts medical procedures on minors in health care facilities, requiring written parental consent unless emergency care is needed or a court order is obtained.

### **Fiscal or Economic Impact:**

None

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## ANALYSIS

### **EFFECT OF THE BILL:**

#### **Parental Rights**

The "[Parents' Bill of Rights](#)," (PBR) [Chapter 1014, F.S.](#), enumerates parental rights with respect to a minor child for education, health care, and criminal justice purposes. The PBR outlines specific parental rights as well as guarantees that a parent of a minor child has inalienable rights that are more comprehensive than those specified in law. The state, its political subdivisions, and any other governmental entities or institutions, are prohibited from infringing upon the fundamental right of a parent to direct the upbringing, education, health care, and mental health of his or her minor child without demonstrating a compelling state interest for such actions.

CS/HB 1505 expands the rights of parents with respect to their minor children. The bill establishes new parental rights relating to a minor child's completion of surveys and questionnaires administered to minor children by the state, any of its political subdivisions, and any other governmental entity or institution. The bill grants parents the right to:

- Review and consent to any survey or questionnaire given to their child; and

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- Approve the sharing or distribution of survey or questionnaire responses or results, after receiving notice of the recipient, purpose, and specific information to be shared.

The bill amends [s. 384.30, F.S.](#), prohibiting the Department of Children and Families (DCF) or a physician from providing treatment for sexually transmitted infections (STIs) to a minor without written consent from the minor’s parent or guardian, but maintains current law which authorizes a minor to be examined for such STIs. (Section [2](#)).

The bill amends [s. 1001.42, F.S.](#), requiring parental notification, and the right to opt-out, prior to the administration of a student well-being, mental health, or health screening questionnaire to any K-12 student, except when a parent does not have the right to make health care decisions for the student pursuant to [s. 1014.04\(1\)\(e\), F.S.](#) (Section [9](#)).

### [Parental Rights Relating to Health Care](#)

Under current law, the PBR recognizes that in certain circumstances a parent’s authority to exercise a particular right may be prohibited or otherwise limited by existing law and establishes exceptions to the parental right for those instances. HB 1505 removes these exceptions, such that parental authority exists notwithstanding any other law to the contrary.

The bill makes changes to statutory provisions throughout the Florida statutes authorizing certain rights for minors, to conform to the parental rights granted by the bill.

Current law allows a health care practitioner to provide certain health care services to a minor [without parental consent](#) where expressly authorized by law. The bill removes this exception, thus prohibiting a health care practitioner, or an individual employed by such a practitioner, from providing, soliciting, or arranging to provide health care services, including involuntary services, or prescribing medicinal drugs to a minor child without first obtaining written parental consent, unless the practitioner is providing health care services under an exception provided in [s. 1014.04\(1\)\(e\), F.S.](#), or by court order. (Section [11](#)).

The bill further removes an exception that previously allowed a medical procedure to be performed on a minor child by a health care provider<sup>1</sup> without parental consent if otherwise authorized by law. Under the bill, a health care provider may not allow a medical procedure to be performed on a minor child in its facility without first obtaining written parental consent, unless an exception under [s. 1014.04\(1\)\(e\), F.S.](#), applies or when authorized by a court order. (Section [10](#)).

The bill repeals provisions in current law which authorize minors to obtain certain health care services without parental consent. This includes current law related to:

- [Family planning services](#)<sup>2</sup>
- Treatment for sexually transmissible diseases;<sup>3</sup>
- Voluntary mental health services;<sup>4</sup> and
- Voluntary substance abuse services.<sup>5</sup> (Section [1, 3, 4, 6, 7, and 8](#))

The bill’s provisions related to family planning services funded by a federal Title X grant may be preempted by federal law.<sup>6</sup> Florida’s comprehensive family planning program is funded by both state funds and Federal Title X

<sup>1</sup> The term “provider” under Florida law refers to any facility, agency, or service that is regulated by the Agency for Health Care Administration and requires licensure to provide services. Licensed providers include, but are not limited to, hospitals, nursing homes, home medical equipment providers, and health care clinics. See, ss. [408.802, F.S.](#), and [408.803, F.S.](#)

<sup>2</sup> S. [381.0051\(4\)\(a\)5, F.S.](#)

<sup>3</sup> S. [384.30, F.S.](#)

<sup>4</sup> S. [394.4784, F.S.](#)

<sup>5</sup> S. [397.431, F.S.](#), [s. 397.501\(7\)\(e\), F.S.](#), and [s. 397.601\(4\), F.S.](#)

<sup>6</sup> The U.S. 5<sup>th</sup> District Court of Appeals recently held that a Texas law granting parents the right to consent to their minor children’s medical care was not preempted by Title X. See *Deanda v. Becerra* 96 F.4<sup>th</sup> 750 (5<sup>th</sup> DCA 2024).

funds, so it is subject to Title X regulations, including the prohibition on informing parents of a minor’s use of program services. The exact impact of the Title X preemption on the program and the bill’s provisions is uncertain.

The bill additionally amends [s. 1014.04\(1\), F.S.](#), to provide a parent the right to review, inspect, and consent to any survey or questionnaire before such survey or questionnaire is given to his or her minor child, that reveals information concerning any of the following:

- Political affiliations or beliefs of the child or the child’s family;
- Mental or psychological problems of the child or the child’s family;
- Sexual behavior or attitudes;
- Illegal, anti-social, self-incriminating, or demeaning behavior;
- Critical appraisals of other individuals with whom respondents have close family relationships;
- Legally recognized privileged or analogous relationships, such as those of lawyers, physicians, and ministers;
- Religious practices, affiliations, or beliefs of the child or child’s parent; or
- Income, other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program.

This right includes the right to know, at the time consent is provided, the purpose of the survey or questionnaire, how the data will be used, the extent to which data will be shared and redisclosed, and to whom. However, these requirements do not apply when the parent does not have the right to make health care decisions for his or her minor child. (Section [10](#)).

#### *Exceptions to Parental Rights Relating to Health Care*

The bill expressly retains certain exceptions to parental rights. Under the bill, parents have the right to make health care decisions their minor children, unless:

- The parent is the subject of an investigation of a crime committed against the minor child;
- The child has been maintained in an out of home placement by the Department of Children and Families (DCF), and DCF has a child examined for injury, illness, and communicable diseases and to determine the need for immunization;
- The child is authorized by law to make the specific health care decisions for himself or herself as provided under ss. [743.017](#), [743.015<sup>8</sup>](#), [743.069](#), [743.065<sup>10</sup>](#), [743.066<sup>11</sup>](#), and [743.067<sup>12</sup>, F.S.](#);
- A parent cannot be located and another person is authorized by law to make the health care decisions as provided in [s. 743.0645, F.S.](#);
- The minor is receiving emergency medical care under [s. 743.064, F.S.](#) or involuntary services under [s. 394.463, F.S.](#) or [s. 397.675, F.S.](#), or immediate, onsite behavioral health crisis services provided by a [mobile response team](#) (MRT);
- Circumstances exist which satisfy the requirement of law for a parent’s implied consent to medical care and treatment of the child as provided in [s. 383.50, F.S.](#); or
- A court order provides otherwise. (Section [10](#)).

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<sup>7</sup> Removes the disability for nonage for a minor who is married or has been married.

<sup>8</sup> Authorizes a circuit court to remove the disability of nonage of a minor age 16 or older residing in this state upon a petition filed by the minor’s natural or legal guardian.

<sup>9</sup> Removes the disability of nonage for a minor who is 17 years old to donate blood.

<sup>10</sup> Removes the disability of nonage for an unwed pregnant minor to obtain medical care and services related to her pregnancy or for her child.

<sup>11</sup> Removes the disability of nonage of a minor who has been adjudicated as an adult and is in the custody or under the supervision of the Department of Corrections.

<sup>12</sup> Authorizes a certified unaccompanied homeless youth to petition a circuit court to have the disabilities of nonage removed pursuant to [s. 743.015, F.S.](#) An “unaccompanied homeless youth” is an individual who is 16 years of age or older and is not in the physical custody of a parent or guardian.

Similarly, under the bill a parent has the right to access and review all medical records of his or her minor child, unless the parent is the subject of an investigation of a crime committed against the minor child and a law enforcement agency or official requests that the information not be released. A parent also has the right to consent in writing before any record of his or her minor child's blood or deoxyribonucleic acid (DNA) is created, stored, or shared, except as authorized pursuant to a court order or as required under [s. 943.325, F.S.](#), and [s. 943.326, F.S.](#), which relate to [Florida's DNA database](#) and [sexual offense evidence kits](#). (Section [10](#)).

While the bill includes a parental consent exception for immediate, onsite behavioral health services provided by a MRT, the bill also expressly requires parental consent for any MRT services beyond that immediate, onsite, care. (Section [5](#)).

### *Biofeedback Devices*

The bill classifies the use of a [biofeedback device](#) as a health care service and requires express written permission from a parent or guardian before such a device may be used on a minor child. The bill defines a "biofeedback device" as an instrument or sensor used to measure bodily functions, such as heart rate variability, brain waves, or breathing rate for the purpose of improving performance. The bill requires all results from a biofeedback device be shared with the child's parent or guardian and otherwise held as a confidential medical record. (Section [10](#)).

The bill re-enacts portions of [s. 408.813, F.S.](#), and [s. 456.072, F.S.](#), to maintain the validity of cross-references to the PBR. (Sections [12](#) and [13](#)).

The bill provides an effective date of July 1, 2025. (Section [14](#)).

## **RELEVANT INFORMATION**

### **SUBJECT OVERVIEW:**

#### **Parental Rights in Florida**

Florida law protects a broad set of parental rights, ensuring that parents retain authority over education, healthcare, and other key decisions affecting their children.<sup>13</sup>

In 2021,<sup>14</sup> the legislature established the [Parent's Bill of Rights](#) (PBR) which enumerates parental rights with respect to a minor child for education, health care, and criminal justice procedures.<sup>15</sup> The PBR expressly prohibits the state, its political subdivisions, any other governmental entities and any other institutions from infringing upon the fundamental right of a parent to direct the upbringing, education, health care, and mental health of his or her minor child without demonstrating a compelling state interest for such actions.<sup>16</sup>

The PBR enumerates several rights of a parent, including:<sup>17</sup>

- The right to direct the education and care of his or her minor child;
- The right to direct the upbringing and the moral or religious training of the minor child;
- The right to access and review all school records relating to the minor child;
- The right to make health care decisions for his or her minor child, unless otherwise prohibited by law; and
- The right to access and review all medical records of the minor child, unless prohibited by law or if the parent is the subject of an investigation of a crime committed against the minor child and a law enforcement agency or official requests that the information not be released.

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<sup>13</sup> S. [1014.04\(1\), F.S.](#)

<sup>14</sup> Ch. 2021-199, L.O.F.

<sup>15</sup> Ch. 1014, F.S.

<sup>16</sup> S. [1014.03, F.S.](#)

<sup>17</sup> S. [1014.04\(1\), F.S.](#)

The PBR is not exhaustive but, unless required by law, the rights of a parent of a minor child in Florida may not be limited or denied.<sup>18</sup> To this end, any employee of the state, or any of its political subdivisions, or any governmental entity, may be subject to disciplinary action if they encourage or coerce a minor child to withhold information from his or her parent.<sup>19</sup>

However, the PBR specifies that it does not:<sup>20</sup>

- Authorize a parent of a minor child in this state to engage in conduct that is unlawful or to abuse or neglect his or her minor child in violation of general law;
- Condone, authorize, approve, or apply to a parental action or decision that would end life;
- Prohibit a court of competent jurisdiction, law enforcement officer, or employees of a government agency that is responsible for child welfare from acting in his or her official capacity within the reasonable and prudent scope of his or her authority;
- Prohibit a court of competent jurisdiction from issuing an order that is otherwise permitted by law; or
- Apply to abortion, which is governed by chapter 390, F.S.<sup>21</sup>

Florida parents also possess the right to examine and provide consent before a school district may administer a student well-being questionnaire or health screening form to a student in kindergarten through grade 3.<sup>22</sup>

### *Constitutionality of Parental Rights and Privacy*

Pursuant to Article I, section 23 of the Florida Constitution, “every natural person has the right to be let alone and free from governmental intrusion into the person’s private life” except as otherwise provided or limited by the state Constitution. The Florida Supreme Court has interpreted this constitutional provision to protect a parent’s fundamental right to raise his or her children except in cases where the child is threatened with harm.<sup>23</sup>

### [Parental Rights Relating to Health Care](#)

Parents have broad authority to make health care decisions for their minor children including access to medical records and control over medical services and personal health data.<sup>24</sup> The PBR grants parents the right to:

- Make health care decisions for his or her minor child, unless otherwise prohibited by law;
- Access and review all medical records, unless prohibited by law or the parent is under investigation for a crime against the child and law enforcement has requested records not be released;
- Consent in writing before a biometric scan of his or her minor child is made, shared, or stored; and
- Consent in writing before any record of his or her minor child’s blood or deoxyribonucleic acid (DNA) is created, stored, or shared, except as required by general law or authorized pursuant to a court order.<sup>25</sup>

Health care practitioners<sup>26</sup> are prohibited from providing, soliciting, or arranging to provide health care services or prescribe medicinal drugs to a minor child without written parental consent, unless otherwise authorized by law.

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<sup>18</sup> S. [1014.04\(4\), F.S.](#)

<sup>19</sup> S. [1014.04\(3\), F.S.](#)

<sup>20</sup> S. [1014.04\(2\), F.S.](#)

<sup>21</sup> S. [1014.06, F.S.](#)

<sup>22</sup> S. [1001.42\(8\), F.S.](#)

<sup>23</sup> *Beagle v. Beagle*, 678 So. 2d 1271, 1275-1276 (Fla. 1996)(holding that in Florida, an individual’s fundamental liberty interest in parenting . . . is specifically protected by our [state constitutional] privacy policy;” *See also Planned Parenthood of Southwest and Central Fla. v. Florida*, 384 So. 3d 67, 74 (Fla. 2024)(wherein the Court explicitly declined to reconsider its previous rulings with respect to the privacy clause and its application to the right to parent in the state).

<sup>24</sup> S. [1014.04\(1\), F.S.](#)

<sup>25</sup> S. [1014.04\(1\), F.S.](#)

<sup>26</sup> A health care practitioner is any person licensed to practice a health care profession regulated under the Department of Health. The term includes physicians, nurses, pharmacists, mental health professionals, and other medical providers. *See*, [S. 456.001\(4\), F.S.](#)

Health care providers<sup>27</sup> may not allow a medical procedure to be performed on a minor child without written parental consent, unless otherwise authorized by law or by a court order.<sup>28</sup>

### *Exceptions to Parental Consent in Health Care*

Current law allows for minors to make certain health care decisions independently without requiring prior parental approval. The PBR does not interfere with these exceptions outlined in current law. Exceptions to a parent’s right to make health care decisions for their minor child include:

- Family Planning Services – A physician<sup>29</sup> may render maternal health and contraceptive information and services of a nonsurgical nature to a minor without parental consent in certain circumstances;<sup>30</sup>
- Parental Notice and Consent for Abortion – A minor may petition a circuit court for a judicial waiver of the parental notice and consent requirements for a minor to obtain an abortion;<sup>31</sup>
- Treatment for Sexually Transmissible Diseases (STDs) – A minor may consent to examination and treatment for STDs without parental involvement;<sup>32</sup>
- Emergency Medical Treatment – A minor may receive emergency medical care if parental consent is unavailable;<sup>33</sup>
- 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;<sup>34</sup>
- Blood Donation – A minor at least 17 years old may donate blood, provided there is no written objection from the parent or guardian;<sup>35</sup>
- 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;<sup>36</sup>
- Substance Abuse Treatment – A minor may consent to substance abuse treatment without parental approval;<sup>37</sup> and
- 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.<sup>38</sup>

Current law allows physicians, paramedics, emergency medical technicians, or other emergency medical services personnel to provide emergency medical care or treatment to a minor without parental consent when a child has been injured in an accident or is suffering from an acute illness, disease, or condition and delaying treatment would

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<sup>27</sup> The term “provider” under Florida law refers to any facility, agency, or service that is regulated by the Agency for Health Care Administration and requires licensure to provide services. Licensed providers include, but are not limited to, hospitals, nursing homes, home medical equipment providers, and health care clinics. See, [ss. 408.802, F.S.](#), and [408.803, F.S.](#)

<sup>28</sup> S. [1014.06\(1\), F.S.](#)

<sup>29</sup> This is limited to physicians licensed under chapter 458 or chapter 459, F.S.

<sup>30</sup> S. [381.0051, F.S.](#)

<sup>31</sup> S. [390.01114, F.S.](#) and Fla. Const. Art. X, S. 29.; the rights enumerated in the PBR expressly do not apply to abortion, which is governed by ch. 390, F.S., see, [s. 1014.06\(3\), F.S.](#)

<sup>32</sup> S. [384.30, F.S.](#); see also, Nelson, K. M., Skinner, A., & Underhill, K. (2022). *Minor Consent Laws for Sexually Transmitted Infection and HIV Services*. JAMA, 328(7), 674–676. <https://doi.org/10.1001/jama.2022.10777>; all 50 states and D.C. allow minors to consent to testing and treatment for sexually transmitted infections without parental involvement. Some states impose a minimum age of consent of 12 or 14 for this treatment. See also, Pampati, S., Liddon, N., Dittus, P. J., Adkins, S. H., & Steiner, R. J. (2019). *Confidentiality Matters but How Do We Improve Implementation in Adolescent Sexual and Reproductive Health Care?*. The Journal of adolescent health: official publication of the Society for Adolescent Medicine, 65(3), 315–322. <https://doi.org/10.1016/j.jadohealth.2019.03.021>; research has shown that adolescents are more likely to seek sexual and reproductive health care and provide honest information when confidentiality is protected.

<sup>33</sup> S. [743.064, F.S.](#)

<sup>34</sup> S. [394.4784, F.S.](#)

<sup>35</sup> S. [743.06, F.S.](#)

<sup>36</sup> S. [743.065, F.S.](#)

<sup>37</sup> S. [397.601, F.S.](#)

<sup>38</sup> S. [743.0645, F.S.](#)

endanger the health or physical well-being of the minor. Even in emergency situations, medical treatment can only be provided without parental consent if:<sup>39</sup>

- The child’s condition has rendered him or her unable to reveal the identity of his or her parents, guardian, or legal custodian, and such information is unknown to any person who accompanied the child to the hospital; and
- The parents, guardian, or legal custodian cannot be immediately located by telephone at their place of residence or business.

After emergency medical care or treatment has been administered, the hospital must notify the parent or legal guardian as soon as possible. Hospital records are required to document the reason why parental consent was not initially obtained, the reasonable attempts that were made to contact the parent or guardian, and a statement from the attending physician that immediate emergency medical care or treatment was necessary for the child’s health or physical well-being.<sup>40</sup>

### *Court-Ordered Limits on Parental Rights in Health Care*

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 (DCF) assumes this role;<sup>41</sup>
- Court Orders for Abuse, Neglect, or Domestic Violence – A court may issue a protective order restricting a parent’s ability to make medical decisions;<sup>42</sup>
- 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;<sup>43</sup> and
- Court-Ordered Medical Treatment – A court may override parental consent if a parent refuses life-saving or medically necessary treatment for their child.<sup>44</sup>

These legal provisions ensure that minors receive necessary medical treatment when a parent is legally prohibited from providing consent.

### *Enforcement of Parental Consent Requirements*

Health care practitioners<sup>45</sup> are subject to disciplinary action for violations of professional standards or statutory requirements, including the failure to comply with parental consent requirements.<sup>46</sup> The Department of Health (DOH) investigates complaints against practitioners, facilitates the legal response when necessary, and then recommends a course of action to the appropriate professional regulatory board. The professional regulatory board ultimately determines the disciplinary action to be taken against practitioners.<sup>47</sup> For professions that have

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<sup>39</sup> S. [743.064, F.S.](#)

<sup>40</sup> S. [743.064\(3\), F.S.](#)

<sup>41</sup> S. [39.806, F.S.](#)

<sup>42</sup> S. [741.30, F.S.](#)

<sup>43</sup> S. [744.3215, F.S.](#)

<sup>44</sup> S. [39.407\(2\), F.S.](#)

<sup>45</sup> A health care practitioner is any person licensed to practice a health care profession regulated under the Department of Health. The term includes physicians, nurses, pharmacists, mental health professionals, and other medical providers. *See, s. [456.001\(4\), F.S.](#)*

<sup>46</sup> S. [456.072\(1\), F.S.](#)

<sup>47</sup> S. [456.072, F.S.](#); *See also*, Department of Health, *A Quick Guide to the MQA Disciplinary Process: Probable Cause Panels*.

Available at <https://www.floridahealth.gov/licensing-and-regulation/enforcement/admin-complaint-process/documents/a-quick-guide-to-the-mqa-disciplinary-process.pdf> (last visited Apr. 21, 2025)

no board, DOH determines the action and discipline to take against a practitioner and issues the final orders.<sup>48</sup> DOH is responsible for ensuring that licensees comply with the terms and penalties imposed by the boards.<sup>49</sup> If a case is appealed, DOH defends the board's (or DOH's) final actions before the appropriate appellate court.<sup>50</sup>

A health care practitioner who has violated parental consent requirements may be subject to disciplinary action, including the following penalties:<sup>51</sup>

- Suspension or permanent revocation of a license;
- Administrative fines up to \$10,000 per violation;
- Practice restrictions, including limitations on work settings or the type of services the practitioner may provide;
- Probationary conditions, such as mandated supervision, continuing education, or corrective actions;
- Issuance of a reprimand or letter of concern; or
- Requirement to refund fees billed to a patient or third-party payer.

Additionally, the Agency for Health Care Administration may penalize providers<sup>52</sup> that fail to comply with parental consent requirements, up to \$500 per offense.<sup>53</sup>

### **Behavioral Health Mobile Response Teams**

The DCF administers a statewide system of safety-net services for substance abuse and mental health prevention, treatment and recovery for children and adults who are otherwise unable to obtain these services. As part of its larger crisis response system, DCF also provides mobile crisis response team services to address these issues.<sup>54</sup>

Mobile Response Teams (MRTs), established by DCF under [s. 394.495, F.S.](#), can be used in when individuals experience a mental health crisis and families, caregivers, and schools want an alternative to calling law enforcement or an ambulance.<sup>55</sup>

MRTs travel to the acute situation to provide assistance and meet the level of need of individuals in crisis, wherever the crisis occurs. They provide triage, de-escalation, screening, assessment and referral services, including care coordination, to connect people to ongoing help for their behavioral health needs. The goal is to stabilize individuals in the least restrictive setting to avoid the need for jail or hospital emergency department utilization.<sup>56</sup>

Current law requires DCF to establish MRTs throughout the state to provide immediate, onsite behavioral health crisis services to children, adolescents, and young adults ages 18-25.<sup>57</sup> Historically, MRTs generally focused on youth and young adults under 25 years old; however, most teams have now increased their capacity to serve individuals of all ages.<sup>58</sup>

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<sup>48</sup> *Id.* Professions which do not have a board include naturopathy, nursing assistants, midwifery, respiratory therapy, dietetics and nutrition, electrolysis, medical physicists, and school psychologists.

<sup>49</sup> *Id.*

<sup>50</sup> *Id.*

<sup>51</sup> S. [456.072\(2\), F.S.](#)

<sup>52</sup> The term "provider" under Florida law refers to any facility, agency, or service that is regulated by the Agency for Health Care Administration and requires licensure to provide services. Licensed providers include, but are not limited to, hospitals, nursing homes, home medical equipment providers, and health care clinics. *See, ss.* [408.802, F.S.](#), and [408.803, F.S.](#)

<sup>53</sup> S. [408.813\(3\), F.S.](#)

<sup>54</sup> Substance Abuse and Mental Health Services (SAMHSA), *National Guidelines for Behavioral Health Coordinated System of Crisis Care*, (January 15, 2025) available at <https://library.samhsa.gov/sites/default/files/national-guidelines-crisis-care-pep24-01-037.pdf>, and SAMHSA, *National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit*, available at <https://www.dbhds.virginia.gov/wp-content/uploads/2024/05/SAMHSA.pdf>, (last visited April 22, 2025).

<sup>55</sup> *Id.*

<sup>56</sup> *Id.* at 2.

<sup>57</sup> S. [394.495\(7\)\(a\), F.S.](#)

<sup>58</sup> DCF, *Triennial Master Plan Annual Update Delivery of Substance Abuse and Mental Health Services*, p. 6 <https://www.myflfamilies.com/sites/default/files/2024-12/FY23-24%20SAMH%20Services%20Plan%20Triennial%20State%20and%20Region.pdf> (last visited April 22, 2025).

Current law requires MRTs to have protocols for obtaining informed consent, but does not expressly address parental consent for the care of minors.<sup>59</sup>

## [Family Planning Services](#)

### Federal Law

[Title X of the Public Health Service Act](#) establishes a grant program for family planning services.<sup>60</sup> Family planning services are a broad range of medically approved services, including Food and Drug Administration-approved contraceptive products and natural family planning methods, for clients who want to prevent pregnancy and space births, pregnancy testing and counseling, assistance to achieve pregnancy, basic infertility services, sexually transmitted infection services, and other preconception health services.<sup>61</sup> Recipients of Title X grants are required to maintain the confidentiality of the individuals receiving services through the family planning services project.

Federal law expressly states that Title X projects may not require consent of parents or guardians for the provision of services to minors and project staff is prohibited from notifying a parent or guardian before or after a minor has requested and/or received Title X family planning services.<sup>62</sup>

### Florida Law

Current law requires DOH to establish a comprehensive family planning program which must include, at a minimum:<sup>63</sup>

- Comprehensive family planning education and counseling programs;
- Prescription for and provision of all medically recognized methods of contraception;
- Medical evaluation, including cytological examination and other appropriate laboratory studies;
- Treatment of physical complications other than pregnancy resulting from the use of contraceptive methods;
- Provision of services at locations and times readily available to the population served; and
- Emphasis and stress on services for postpartum mothers.

A physician<sup>64</sup> under this program may render maternal health and contraceptive information and services of a nonsurgical nature to a minor without the consent of a parent or legal guardian if the minor:

- Is married;
- Is a parent;
- Is pregnant; or
- May, in the opinion of the physician, suffer probable health hazards if such services are not provided.

## [Biofeedback Devices](#)

Biofeedback is a technique that enables individuals to gain control over physiological processes by providing real-time feedback on bodily functions such as heart rate, muscle tension, and brainwave activity.<sup>65</sup>

### Biofeedback Applications

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<sup>59</sup> *Id.*

<sup>60</sup> [42 U.S.C. s. 300.](#)

<sup>61</sup> [42 C.F.R. 59.2.](#)

<sup>62</sup> [2 U.S.C. s. 300.](#)

<sup>63</sup> [S. 381.0051, F.S.](#)

<sup>64</sup> This is limited to physicians licensed under [chapter 458](#) or chapter [459, F.S.](#)

<sup>65</sup> Mayo Clinic, *Biofeedback Basics*. Available at <https://www.mayoclinic.org/tests-procedures/biofeedback/about/pac-20384664> (last visited Apr. 21, 2025).

In educational settings, biofeedback has been explored as a tool to enhance student performance, manage stress, and address behavioral and learning challenges.<sup>66</sup> Studies have investigated its effectiveness in treating childhood behavioral and learning disorders, including anxiety and attention-related conditions.<sup>67</sup> Some studies suggest that biofeedback can be comparable to cognitive-behavioral therapy (CBT) for anxiety-related disorders, with no significant differences in treatment outcomes.<sup>68</sup> Other studies indicate that biofeedback, when combined with behavior modification training, has shown improvements in attention regulation and behavioral outcomes for children with ADHD.<sup>69</sup>

Biofeedback devices are also marketed for non-clinical educational applications. Some products, such as wearable biofeedback tools and neurofeedback headsets, claim to help students improve focus and emotional regulation.<sup>70</sup> Educational programs have incorporated biofeedback training in stress management programs and learning interventions.<sup>71</sup>

### Regulation of Biofeedback Devices in Florida

Florida law regulates certain biofeedback applications under the practice of psychology and the practice of school psychology, as defined in the Psychological Services Act.<sup>72</sup> The law includes biofeedback as one of the scientific and applied psychological principles, methods, and procedures used for modifying human behavior and treating mental, nervous, psychological, and emotional disorders.<sup>73</sup> The use of biofeedback for psychological purposes is restricted to psychologists appropriately trained in its use.<sup>74</sup>

Additionally, school psychologists are authorized to provide psychoeducational, developmental, and behavioral interventions in school settings.<sup>75</sup> The practice of school psychology includes counseling, behavior techniques, environmental management, and group processes—services that may overlap with certain biofeedback applications.<sup>76</sup>

Neurofeedback, a subset of biofeedback that specifically targets brainwave activity, is regulated by the Board of Occupational Therapy Practice.<sup>77</sup> Practitioners using neurofeedback for clinical purposes must complete at least 16 hours of didactic instruction and five supervised treatments in a clinical setting.<sup>78</sup>

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<sup>66</sup> ResearchGate, *Reducing Anxiety and Improving Academic Performance Through a Biofeedback Relaxation Training Program*. Available at

[https://www.researchgate.net/publication/317660383\\_Reducing\\_Anxiety\\_and\\_Improving\\_Academic\\_Performance\\_Through\\_a\\_Biofeedback\\_Relaxation\\_Training\\_Program](https://www.researchgate.net/publication/317660383_Reducing_Anxiety_and_Improving_Academic_Performance_Through_a_Biofeedback_Relaxation_Training_Program) (last visited Apr. 21, 2025).

<sup>67</sup> ResearchGate, *The Use of Biofeedback on Students: A Systematic Review*. Available at [https://www.researchgate.net/publication/355655679\\_The\\_Use\\_of\\_Biofeedback\\_on\\_Students\\_a\\_Systematic\\_Review](https://www.researchgate.net/publication/355655679_The_Use_of_Biofeedback_on_Students_a_Systematic_Review) (last visited Apr. 21, 2025).

<sup>68</sup> ScienceDirect, *Comparing Cognitive-Behavioral Therapy and Biofeedback for Anxiety Disorders*. Available at <https://www.sciencedirect.com/science/article/abs/pii/S000579679500008L> (last visited Apr. 21, 2025).

<sup>69</sup> Frontiers in Psychiatry, *Behavior Modification and EEG Biofeedback Therapy for ADHD*. Available at <https://www.frontiersin.org/journals/child-and-adolescent-psychiatry/articles/10.3389/frcha.2023.1235310/full> (last visited Apr. 21, 2025).

<sup>70</sup> Biofeedback & Neurofeedback Therapy, *Biofeedback for Academic Success*. Available at <https://biofeedback-neurofeedback-therapy.com/biofeedback-for-academic-success/> (last visited Apr. 21, 2025).

<sup>71</sup> Biofeedback & Neurofeedback Therapy, *Biofeedback for Academic Success*. Available at <https://biofeedback-neurofeedback-therapy.com/biofeedback-for-academic-success/> (last visited Apr. 21, 2025).

<sup>72</sup> Ss. [490.001, F.S.](#), and [490.003, F.S.](#)

<sup>73</sup> S. [490.003\(4\), F.S.](#)

<sup>74</sup> S. [490.003\(4\)\(b\), F.S.](#)

<sup>75</sup> S. [490.003\(5\), F.S.](#)

<sup>76</sup> S. [490.003\(5\), F.S.](#)

<sup>77</sup> Florida Board of Occupational Therapy, *Regulations on Neurofeedback Devices*. Available at <https://floridasoccupationaltherapy.gov/prescription-devices-modalities-certification-faqs/> (last visited Apr. 21, 2025).

<sup>78</sup> [Rule 64B11-4.001\(3\), F.A.C.](#)

Biofeedback devices marketed for educational or non-clinical applications are not specifically addressed under Florida law. While some biofeedback tools are designed for licensed professionals, others are sold directly to consumers, including educators and students.<sup>79</sup>

## [Statewide DNA Database](#)

Deoxyribonucleic acid (DNA) is hereditary material existing in the cells of all living organisms. A DNA profile may be created by testing the DNA in a person's cells. Similar to fingerprints, a person's DNA profile is a unique identifier, except for identical twins, who have the exact same DNA profile. DNA evidence may be collected from any biological material, such as hair, teeth, bones, skin cells, blood, semen, saliva, urine, feces, and other bodily substances.<sup>80</sup>

Florida's statewide DNA database was established in 1989<sup>81</sup> to assist law enforcement agencies in the identification and detection of individuals in criminal investigations and the identification and location of missing and unidentified persons. The Florida Department of Law Enforcement (FDLE) administers the statewide DNA database, which is capable of classifying, matching, and storing analyses of DNA and other biological molecules and related data.<sup>82</sup>

### *DNA Sample Collection and Analysis*

Multiple agencies share the responsibility of collecting DNA samples<sup>83</sup> from qualifying offenders, including the Florida Department of Corrections (DOC), the Florida Department of Juvenile Justice (DJJ), sheriffs' offices, and county correctional facilities.<sup>84</sup>

Under [s. 943.325, F.S.](#), qualifying offenders include both juveniles and adults who are:

- Committed to a county jail;
- Committed to or under the supervision of DOC or DJJ;
- Convicted of specified misdemeanor offenses; or
- Convicted of or arrested for any felony offense or attempted felony offense.<sup>85</sup>

A qualifying offender is required to submit a DNA sample for inclusion in the statewide database if he or she is:

- Arrested or incarcerated in Florida; or
- On probation, community control, parole, conditional release, control release, or any other type of court-ordered supervision.<sup>86</sup>

An arrested offender must submit a DNA sample at the time he or she is booked into a jail, correctional facility, or juvenile facility.<sup>87</sup> When an offender is received into DOC's custody, reception center staff reviews the statewide database to determine if a DNA sample is already on file for that offender. If no sample is currently on file, a DNA

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<sup>79</sup> Mayo Clinic, *Biofeedback: What is it and how does it work?* Available at <https://www.mayoclinic.org/tests-procedures/biofeedback/about/pac-20384664> (last visited Apr. 21, 2025); MindBody Devices, *Biofeedback Devices*. Available at <https://mindbodydevices.com/biofeedback-devices/> (last visited Apr. 21, 2025); Biofeedback & Neurofeedback Therapy, *Biofeedback for Academic Success*. Available at <https://biofeedback-neurofeedback-therapy.com/biofeedback-for-academic-success/> (last visited Apr. 21, 2025).

<sup>80</sup> FindLaw, *How DNA Evidence Works*, <https://criminal.findlaw.com/criminal-procedure/how-dna-evidence-works.html> (last visited Apr. 21, 2025).

<sup>81</sup> Ch. 89-335, Laws of Fla.

<sup>82</sup> S. [943.325\(4\), F.S.](#)

<sup>83</sup> "DNA sample" means a buccal or other approved biological specimen capable of undergoing DNA analysis. [S. 943.325\(2\)\(f\), F.S.](#)

<sup>84</sup> FDLE, *DNA Database*, <https://www.fdle.state.fl.us/Forensics/Disciplines/DNA-Database> (last visited Apr. 21, 2025).

<sup>85</sup> S. [943.325\(2\)\(g\), F.S.](#)

<sup>86</sup> S. [943.325\(7\), F.S.](#)

<sup>87</sup> S. [943.325\(7\)\(b\), F.S.](#)

sample is taken and forwarded to FDLE. If FDLE notifies DOC that a submitted DNA sample was rejected, a new DNA sample is taken and re-submitted to FDLE.<sup>88</sup>

The statewide database may contain DNA data obtained from the following types of biological samples:

- Crime scene samples.
- Samples required by law to be obtained from qualifying offenders.
- Samples lawfully obtained during the course of a criminal investigation, including those from deceased victims or deceased suspects.
- Samples from unidentified human remains.
- Samples from persons reported missing.
- Samples voluntarily contributed by relatives of missing persons.
- Other samples approved by FDLE.<sup>89</sup>

## [Sexual Offense Evidence](#)

In Florida, a victim of certain sexual offenses may have a forensic physical examination conducted by a healthcare provider without cost to the victim, or the victim's parent or guardian if the victim is a minor, regardless of whether the victim participates in the criminal justice system or cooperates with law enforcement.<sup>90</sup> A sexual assault kit (SAK), sometimes referred to as a "rape kit," is a medical kit used to collect evidence from a sexual assault victim's body and clothing during a forensic physical examination. A SAK typically contains standardized items including swabs, tubes, glass slides, containers, and plastic bags used to collect and preserve bodily fluids, hair, and fibers that may contain the perpetrator's DNA or other forensic evidence.<sup>91</sup> SAKs collected from reporting victims are submitted by law enforcement agencies to crime laboratories for DNA analysis and resulting DNA profiles are uploaded to local, state, and federal DNA databases to determine whether a match identifying the perpetrator can be made.

According to protocols developed by the Florida Department of Legal Affairs (DLA), healthcare providers conducting a forensic physical examination should complete a Sexual Assault Kit Form for Healthcare Providers (SAK form).<sup>92</sup> The SAK form includes an exam consent form, applicable to both reporting and non-reporting victims, that requires the victim to indicate that he or she consents to a forensic physical examination for the preservation of evidence of a sexual offense. If a victim chooses to make a report to law enforcement, a separate form authorizing the release of collected evidence and report to law enforcement must be signed by the victim. All consent forms must be retained by the rape crisis center<sup>93</sup> or medical facility conducting the examination.

Under [s. 943.326, F.S.](#), DNA evidence collected from a non-reporting victim must be retained for a minimum of 50 years.<sup>94</sup> Further, DNA evidence not contained in a SAK and collected from a reporting victim must be retained until the prosecuting agency authorizes its destruction.<sup>95</sup>

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<sup>88</sup> DOC, Agency Analysis of 2024 Senate Bill 524, p. 2 (Jan. 19, 2023)(on file with the House Judiciary Committee).

<sup>89</sup> S. [943.325\(6\), F.S.](#)

<sup>90</sup> S. [960.28, F.S.](#) (The Crime Victims' Services Office of the Department of Legal Affairs pays for medical expenses connected with an initial forensic physical examination of a victim of sexual battery or a lewd or lascivious offense).

<sup>91</sup> The White House, Office of the Press Secretary, *Fact Sheet: Investments to Reduce The National Rape Kit Backlog And Combat Violence Against Women*, (Mar. 16, 2015) <https://obamawhitehouse.archives.gov/the-press-office/2015/03/16/fact-sheet-investments-reduce-national-rape-kit-backlog-and-combat-viole> (last visited Apr. 21, 2025).

<sup>92</sup> Florida Department of Legal Affairs (DLA), Division of Victim Services and Criminal Justice Programs, *Adult and Child Sexual Assault Protocols: Initial Forensic Physical Examination*, (Apr. 2015), pp. 12-13, [https://myfloridalegal.com/webfiles.nsf/WF/JFAO-77TKCT/\\$file/ACSP.pdf](https://myfloridalegal.com/webfiles.nsf/WF/JFAO-77TKCT/$file/ACSP.pdf) (last visited Apr. 21, 2025).

<sup>93</sup> A "rape crisis center" is any public or private agency that offers assistance to victims of sexual assault or sexual battery and their families. S. [90.5035\(1\)\(a\), F.S.](#)

<sup>94</sup> S. [943.326\(3\)\(b\), F.S.](#)

<sup>95</sup> S. [943.326\(3\)\(a\), F.S.](#)

## BILL HISTORY

COMMITTEE REFERENCE	ACTION	DATE	STAFF DIRECTOR/ POLICY CHIEF	ANALYSIS PREPARED BY
<a href="#">Education &amp; Employment Committee</a>	16 Y, 5 N, As CS	4/22/2025	Hassell	Wolff

THE CHANGES ADOPTED BY THE COMMITTEE:

- Removed authorization for minors to receive medical services without parental consent in specified circumstances.
- Clarified exemptions from parental consent requirements, including crisis intervention services from MRTs.
- Clarified that student well-being, mental health, or health screening questionnaires provided to K-12 students must be provided to parents and schools must provide parents the ability to opt their student out of participation.
- Clarified that any survey or questionnaire addressing specified topics can only be provided with parental consent.
- Provided that parental consent requirements for surveys and questionnaires do not apply when a parent does not have the right to make health care decision for his or her minor child.

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**THIS BILL ANALYSIS HAS BEEN UPDATED TO INCORPORATE ALL OF THE CHANGES DESCRIBED ABOVE.**  
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