



Week Two Legislative Update

2026 Florida Legislative Session (January 19–23)

As of the close of Week two, a significant number of health care–related bills have moved for the 2026 Legislative Session. These measures span scope of practice, professional licensure, medical liability, insurance regulation, patient rights, and vaccine-related policy. Health care policy discussions began to sharpen, with several physician-relevant issues appearing on committee agendas. Early hearings are setting the tone for how complex and often controversial health care legislation—particularly scope of practice, public health policy, and insurance regulation—will be debated as the session progresses.

At the leadership level, Governor Ron DeSantis continues to emphasize regulatory oversight and agency accountability, shaping the broader environment in which professional regulation and public health legislation are evaluated. While the Governor is not directly involved in committee deliberations, executive priorities remain an important backdrop for health care policy discussions.

In the House, Speaker Danny Perez has reinforced a deliberate committee process, encouraging early discussion of complex regulatory proposals. Consistent with this approach, several health-related measures are scheduled for consideration that directly affect physicians and clinical practice. Of particular note, committees are expected to hear legislation addressing surgical smoke, an issue tied to workplace safety and operating room standards. These discussions may have implications for hospitals, ambulatory surgical centers, and physicians practicing in surgical settings.

On the Senate side, under the leadership of Senate President Ben Albritton, committees continue to take a measured approach to health care policy. Tomorrow’s agenda also includes discussions related to prescription drug prices and insurance coverage, including proposals aimed at affordability, access, and payer requirements. While these measures are often framed around

consumer cost relief, they may carry downstream effects for physician prescribing, coverage determinations, and patient access to necessary treatments.

Bills related to the advertising of vaccines also passed their first Senate committee stop, raising important questions about public health messaging, regulatory authority, and the role of licensed physicians in patient education. FOMA continues to support policies that preserve the integrity of the patient-physician relationship and ensure that vaccine-related communications remain accurate, evidence-based, and appropriately regulated.

In addition, nurse scope of practice legislation is scheduled for committee consideration. As in prior sessions, these proposals may seek to expand non-physician clinical authority. Legislative leadership has signaled caution toward broad scope expansions, particularly where patient safety, physician-led care, and clinical accountability are concerned. These early hearings are critical, as amendments and stakeholder positions are often shaped well before bills reach the floor. The scope of practice expansion of APRN & CRNA bills passed out of committee, but not without comment and testimony by the FOMA, FMA and other specialty society physician groups. The bills are a sign that the Speaker of the House has these as his priorities, along with several other impactful health care related bills.

Bills on the House Special Order Calendar (January 22)

The following bills were on the House Special Order Calendar for floor consideration on **Thursday, January 22:**

- SB 100 GB by Sen. Passidomo
- SB 102 GRB by Sen. Passidomo
- SB 104 GRB by Sen. Passidomo
- SB 320 GB by Sen. Simon
 - (Identical H 00963, Compare H 01321)
 - Administrative Efficiency in Public Schools
- SB 7010 GB by Governmental Oversight and Accountability
 - Roth Contribution Plans in Deferred Compensation Programs

Committee Activity – Week Two

- Health and Human Services Committee met on Wednesday to discuss HB375, HB327, HB301, and HB237, see details of the bills below. Notably, Autonomous Practice by a CRNA (HB 375) and Advanced Practice Registered Nurse Autonomous Practice (HB 301) both passed their second House committee stop.
- Regulated Industries discussed SB408, Advertisement of a Harmful Vaccine and passed its first committee.

- Health Care Facilities & Systems Subcommittee – on Wednesday heard HB697 Drug Prices and Coverage. This bill passed its first committee stop.

Scope of Practice and Professional Licensure

Several bills propose changes to scope of practice and autonomous authority for non-physician health care professionals:

- **Big Beautiful Healthcare Frontier Act – [HB 693](#) / [HB 695](#) (Redondo)**
Filed as part of a Speaker-supported legislative package, these bills propose multiple scope-of-practice expansions across health care professions. *(We expect this bill to make the House Health Care Facilities & Systems Subcommittee agenda for Wednesday January 29, 2026.)*
- **Autonomous Practice by Physician Assistants – [SB 668](#) (Truenow)**
Authorizes physician assistants to practice independently.
- **Prescribing for Physician Assistants – [HB 683](#) / [SB 374](#) (Partington / Trumbull)**
Allows physician assistants to practice independently during a declared state of emergency.
- **Autonomous Practice by a CRNA – [HB 375](#) / [SB 462](#) (Giallombardo / Rodriguez)**
Permits certified registered nurse anesthetists to practice independently. *PASSED HOUSE COMMITTEE on JANUARY 21, 2026; FOMA presented testimony against;*
- **Advanced Practice Registered Nurse Autonomous Practice – [HB 301](#) / [SB 138](#) (Shoaf / Truenow)**
Expands autonomous practice authority for psychiatric advanced practice registered nurses. *PASSED HOUSE COMMITTEE on JANUARY 21, 2026; FOMA presented testimony against;*
- **Naturopathic Medicine – [HB 223](#) / [SB 688](#) / [SB 542](#) (Smith / Rodriguez / Garcia)**
Creates a licensure pathway for naturopathic practitioners.
- **Chiropractic Medicine – [HB 439](#) / [SB 1524](#) (Cobb / Simon)**
Authorizes chiropractic physicians to possess, prescribe, and administer specified substances, including vitamins, dietary supplements, and epinephrine.
- **Acupuncture – [HB 169](#) / [SB 672](#) (Alvarez / Calatayud)**
Updates statutory language governing acupuncture practice.
- **Use of Professional Nursing Titles – [HB 237](#) / [SB 36](#) (Salzman / Sharief)**
Authorizes use of doctoral nursing titles while requiring clarification of professional role when using the term “doctor.”
- **Mobile Opportunity by Interstate Licensure Endorsement Act [SB154/HB151](#) (Harrell/Conerly)** Expand ineligibility criteria for licensure by endorsement under the MOBILE Act to include nonaccredited dental program graduates. Revises the list of individuals ineligible for a health care license by endorsement under the MOBILE Act.

Adds a new provision making those who have not graduated from an accredited dental school or dental hygiene program ineligible for licensure by endorsement under chapter 466.

- **Patient-directed Medical Orders [SB 312](#)/[HB369](#) (Rodriguez/Plasencia)** Patient-directed Medical Orders: Revising definitions and defining the term “patient-directed medical order”; authorizing the execution of a patient-directed medical order for a specified purpose; requiring that certain health care services be provided to the principal regardless of the decision to withhold or withdraw life-prolonging procedures; authorizing physicians, physician assistants, and advanced practice registered nurses to withhold or withdraw life-prolonging procedures under certain circumstances without penalty; requiring the Agency for Health Care Administration to create and update a database for the storage of patient-directed medical orders, etc.
- **Ambulatory Surgical Centers [SB1156](#)/[HB1207](#) (Trumbull/Oliver)** Establish new licensure and regulatory requirements for ambulatory surgical centers under a newly created chapter separate from hospital regulations, strengthening standards, reporting, and oversight.

Pharmacy Practice

Multiple bills address pharmacy practice and pharmacist authority:

- **Pharmacy – [SB 1142](#) / [HB 1425](#) (Wright / Booth)**
Expands consultant pharmacy provisions to include clinics.
- **Administration of Medications by Pharmacists – [HB 407](#) / [SB 294](#) (Alvarez / Rodriguez)**
Authorizes pharmacists to administer medications for medication-assisted treatment and opioid addiction.
- **Practice of the Profession of Pharmacy – [HB 1021](#) / [SB 868](#) (Young / Sharief)**
Allows pharmacists to administer medications in Level I and Level II trauma centers.

Wrongful Death and Medical Liability

- **Medical Negligence/Wrongful Death – [HB 6003](#) / [SB 1700](#) (Trabulsy / Grall)**
Removes the prohibition on recovery of noneconomic damages in certain medical negligence wrongful death cases involving adult children and parents.
- **Civil Liability for the Wrongful Death of an Unborn Child – [HB 289](#) / [SB 164](#) (Greco / Grall)**
Expands Florida’s Wrongful Death Act to allow parents of an unborn child to recover damages. *[HB289 passed the house floor and is not in Senate Messages and has been referred to Senate Rules Committee. The Senate version is at its second committee stop.](#)*

Vaccines, Parental Rights, and Medical Conscience

- **Parental Rights – [HB 173](#) / [SB 166](#) (Kendall / Grall)**
Requires parental consent in various health care situations, including contraceptive information and treatment of sexually transmitted diseases.
- **Vaccines – [HB 917](#) / [SB 1756](#) (Holcomb / Yarborough)**
Addresses vaccination discrimination, parental consent and disclosures, alternative vaccination schedules, pharmacist authority to dispense ivermectin, exemptions from immunization requirements, and related liability provisions.
- **Medical Conscience – [HB 551](#) / [SB 670](#) (Black / Yarborough)**
Authorizes health care providers to bring a civil cause of action based on medical conscience protections.
- **Advertisement of a Harmful Vaccine – [SB408](#) / [HB339](#) (Grall/Miller)** – defines advertisement for vaccine promotions and imposes liability on manufacturers for harm caused by advertised vaccines. *SB408 passed its first committee stop on January 20 and moves to Health Policy committee.*
- **Prohibited Sex-reassignment Prescriptions and Procedures [SB1010](#) / [HB743](#) (Yarborough/Melo)** Prohibit health care practitioners from aiding or abetting in prohibited sex-reassignment prescriptions or procedures for minors and authorize the state to pursue civil actions and penalties. *SB1010 and HB743 both passed their first committee stops on January 20 and move to committee stop two of three total stops.*

Patient Access to Records

- **Patient Access to Records – [HB 1309](#) / [SB 1140](#) (Booth / Grall)**
Requires medical records to be furnished within 14 days of request.

Health Insurance and Managed Care

Several bills propose reforms to insurance practices, managed care, and patient protections:

- **Managed Care Plans – [HB 531](#) / [SB 568](#) (Barnaby, Basabe / Harrell)**
Revises Medicaid managed care contract requirements, including limits on prior authorization reviews.
- **Insurance Claims Payments to Health Care Providers – [HB 1015](#) / [SB 1130](#) (Cassel / Massullo)**
Prohibits certain insurance payment practices, including downloading requirements.
- **Insurance Claims Payments to Health Care Providers – [HB 1023](#) / [SB 1198](#) (Black / Massullo)**
Addresses claim disputes, fees, and related insurance reforms.

- **Health Insurer Accountability – [HB 1097](#) (Berfield)**
Requires insurer credentialing within 30 days and includes prompt payment and retroactive denial provisions.
- **Step Therapy – [SB 70](#) (Harrell)**
Requires AHCA approval of certain drug products for Medicaid recipients with serious mental illness without step-therapy prior authorization.
- **Continuity of Care in Health Insurance Contracts – [HB 577](#) / [SB 114](#) (Woodson / Jones)**
Requires 60 days' notice to policyholders before termination of provider contracts.
- **Medicaid Providers [SB40/HB163](#) (Shareif/Robinson)** Medicaid Providers; Requiring the Agency for Health Care Administration to include specified requirements in its contracts with Medicaid managed care plans; defining the term “outside of regular business hours”.

Other Legislation of Interest

- **Health Care Patient Protection – [SB 68](#) (Harrell (R-Stuart)) and [HB 355](#) by Rep. (Oliver (R-Punta Gorda))** require AHCA, in consultation with the Florida Emergency Medical Services for Children State Partnership Program, to adopt rules that establish minimum standards for pediatric patient care in hospital emergency departments (ED). The bills require all hospitals with EDs to develop and implement policies and procedures for pediatric patient care in the ED, and to designate a physician, physician assistant, nurse, or paramedic to serve as the pediatric emergency care coordinator in the ED. Finally, the bills require all hospital EDs to conduct the National Pediatric Readiness Assessment in accordance with timelines established by the National Pediatric Readiness Project. *This bill passed the House and is now in Senate Messages and referred to Fiscal Policy.*
- **Employment Eligibility – [HB 197](#) by Rep. Berny Jacques (R-Clearwater) [SB1542](#) Sen. Pizzo (D-Miami) and [SB 1278](#) Sen. Martin (R-Lee)** requires all private employers, rather than only those employing more than specified number of employees, use E-Verify system to verify new employee's employment. *HB197 has passed the House and is currently in Senate Messages. Neither Senate bills have had their first hearing.*
- **Florida Health Choices Program – [SB 440](#) (Leek (R-St. Augustine)) and [HB 141](#) (Yarkosky (R-Clermont)) and [SB1460](#) (Martin (R-Lee))** rename the "Florida Health Choices Program" as "Florida Employee Health Choices Program" and revise purposes and components of the program. The bills revise eligibility and participation requirements for vendors under the program, the types of health insurance products that are available for purchase through program, removes certain pricing transparency requirements, revise the structure of the insurance marketplace process under the

program, remove the option for risk pooling under the program, and remove exemptions from certain requirements of Florida Insurance Code under the program.

- **Rural Communities – [SB 250](#)** (Simon (R-Tallahassee)) and **[HB723](#)** (Abbott (R-Washington)) is a comprehensive package of legislative proposals to create opportunities for rural communities to expand education offerings, increase health care services, and modernize commerce. The bill invests in farm-to-market roads, requires the state land planning agency to give preference for technical assistance funding to local governments located in a rural area of opportunity, revises the conditions required for a county to be considered a fiscally constrained county, creates the Office of Rural Prosperity within the Department of Commerce, requires the Office of Rural Prosperity to administer the Renaissance Grants Program to provide block grants to eligible communities, creates the Public Infrastructure Smart Technology Grant Program within the Office of Rural Prosperity, expands the existing FRAME program to include medical doctors or osteopathic doctors who are board certified or board eligible in emergency medicine, establishes the Stroke, Cardiac, and Obstetric Response and Education (SCORE) Grant Program, appropriates additional funding to enhance Medicaid payments to reimburse rural hospitals similar to Medicare reimbursement, and creates the Florida Arterial Road Modernization Program within the Department of Transportation. *SB250 is now in House Messages and waiting on action by the Florida House.*
- **Sale and Purchase of Ivermectin – [HB 29](#)** (Holcomb (R-Springhill)) authorizes the sale and purchase of ivermectin suitable for human use as over-the-counter medication without prescription or consultation with a health care provider. *(Still no companion in the House).*
- **Protection from Surgical Smoke – [SB162/HB93](#)** (Davis/Woodson) Requires hospitals & ambulatory surgical centers to adopt & implement policies requiring use of smoke evacuation systems during certain surgical procedures.
- **Temporary Certificates for Practice in Areas of Critical Need [SB1480](#)** (Burton) Allow continued practice by certain health care practitioners under temporary certificates in areas of critical need even if those areas lose their designation, provided specific conditions are met.
- **Statewide Provider and Health Plan Claim Dispute Resolution [SB1082/HB1449](#)** (Grall/Busatta) Specifies additional circumstances excluding disputed claims from the statewide provider and health plan claim dispute resolution program. Adds claims involving services initiated under s. 395.1041 or 42 U.S.C. s. 1395dd that have been submitted for resolution through the federal independent dispute resolution process to the list of exclusions. Excludes claims for services rendered by out-of-network providers that have been submitted for resolution through the federal independent dispute resolution process.

Looking Ahead

As the Legislature moves into the third week of session, committee activity is expected to accelerate, with a broader range of bills receiving their first hearings. On Monday January 26, the Senate Health Policy Committee will hear several House of Medicine bills – including SB1082 Statewide Provider and Health Plan Claim Dispute Resolution; SB1756 Medical Freedom; SB1156 Ambulatory Surgical Centers; and, SB1480 Temporary Certificates for Practice in Areas of Critical Need. Expect these bills to pass out of committee largely along party lines. End-of-week agendas have not yet been posted, as committee deadlines fall early next week. At this stage, the Legislature remains in a wait-and-see period