

1 ENGROSSED SENATE AMENDMENT
TO
2 ENGROSSED HOUSE
BILL NO. 2013

By: Pae, Harris, Fugate, and
Gise of the House

and

Stanley of the Senate

[sudden unexpected death in epilepsy (SUDEP) -
Dylan's Law - Service Oklahoma - driver licenses -
people diagnosed with epilepsy - unique symbol -
State Commissioner of Health - powers and duties -
Division of Health Care Information - duties -
autopsy - investigation - determination - notations
- death certificates - reporting - noncodification
- codification - effective date]

AUTHOR: Add the following Senate Coauthor: Hicks

AMENDMENT NO. 1. Page 1, restore the title

1 Passed the Senate the 8th day of May, 2025.

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3 _____
4 Presiding Officer of the Senate

5 Passed the House of Representatives the ____ day of _____,
6 2025.

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8 _____
9 Presiding Officer of the House
10 of Representatives

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18 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

19 SECTION 1. NEW LAW A new section of law not to be
20 codified in the Oklahoma Statutes reads as follows:

21 This act shall be known and may be cited as "Dylan's Law".

22 SECTION 2. NEW LAW A new section of law to be codified
23 in the Oklahoma Statutes as Section 6-130 of Title 47, unless there
24 is created a duplication in numbering, reads as follows:

1 A. Effective June 1, 2026, Service Oklahoma shall permit a
2 driver license or state identification cardholder to voluntarily
3 designate with the placement of a unique symbol that the person has
4 been diagnosed with epilepsy by a licensed physician. The
5 designation shall be used by a law enforcement officer or an
6 emergency medical professional to identify and effectively
7 communicate with a person who has been diagnosed with epilepsy and
8 shall not be used for any other purpose by any other person.

9 B. The cardholder may choose whether the voluntary designation
10 indicating that a person has been diagnosed with epilepsy, pursuant
11 to paragraph 1 of this section, shall be displayed on the driver
12 license or identification card or in the Oklahoma Law Enforcement
13 Telecommunications System (OLETS) in accordance with procedures
14 prescribed by Service Oklahoma. A holder of a driver license or
15 identification card who makes a voluntary designation pursuant to
16 this section shall have the opportunity to remove the designation at
17 any time.

18 SECTION 3. AMENDATORY 63 O.S. 2021, Section 1-106, as
19 amended by Section 1, Chapter 85, O.S.L. 2022 (63 O.S. Supp. 2024,
20 Section 1-106), is amended to read as follows:

21 Section 1-106. A. The State Commissioner of Health shall serve
22 at the pleasure of the Governor, and shall have skill and experience
23 in public health duties and sanitary sciences and shall meet at
24 least one of the following qualifications:

1 1. Possession of a Doctor of Medicine Degree and a license to
2 practice medicine in this state;

3 2. Possession of an Osteopathic Medicine Degree and a license
4 to practice medicine in this state;

5 3. Possession of a Doctoral degree in Public Health or Public
6 Health Administration; or

7 4. Possession of a Master of Science Degree and a minimum of
8 five (5) years of supervisory experience in the administration of
9 health services.

10 B. The Commissioner shall be exempt from all qualifications
11 enumerated in subsection A of this section if the Commissioner
12 possesses at least a master's degree and has experience in
13 management of state agencies or large projects.

14 C. The Commissioner shall have the following powers and duties,
15 unless otherwise directed by the Governor:

16 1. Have general supervision of the health of the citizens of
17 the state; make investigations, inquiries and studies concerning the
18 causes of disease and injury, and especially of epidemics, and the
19 causes of mortality, and the effects of localities, employment,
20 conditions and circumstances on the public health; investigate
21 conditions as to health, sanitation and safety of schools, prisons,
22 public institutions, mines, public conveyances, camps, places of
23 group abode, and all buildings and places of public resort, and
24 recommend, prescribe and enforce such measures of health, sanitation

1 and safety for them as the Commissioner deems advisable; take such
2 measures as deemed necessary by the Commissioner to control or
3 suppress, or to prevent the occurrence or spread of, any
4 communicable, contagious or infectious disease, and provide for the
5 segregation and isolation of persons having or suspected of having
6 any such disease; designate places of quarantine or isolation;
7 advise state and local governments on matters pertaining to health,
8 sanitation and safety; and abate any nuisance affecting injuriously
9 the health of the public or any community. Any health information
10 or data acquired by the Commissioner from any public agency, which
11 information or data is otherwise confidential by state or federal
12 law, shall remain confidential notwithstanding the acquisition of
13 this information by the Commissioner.

14 2. Be the executive officer and supervise the activities of the
15 State Department of Health, and act for the Department in all
16 matters except as may be otherwise provided in this Code; administer
17 oaths at any hearing or investigation conducted pursuant to this
18 Code; and enforce rules and standards adopted by the Commissioner.
19 All rules adopted by the Commissioner are subject to the terms and
20 conditions of the Administrative Procedures Act.

21 3. Appoint an Assistant State Commissioner of Health and fix
22 the qualifications, duties and compensation of the Assistant State
23 Commissioner of Health; and employ, appoint and contract with, and
24 fix the qualifications, duties and compensation of, such other

1 assistants, doctors, engineers, attorneys, sanitarians, nurses,
2 laboratory personnel, administrative, clerical and technical help,
3 investigators, aides and other personnel and help, either on a full-
4 time, part-time, fee or contractual basis, as shall be deemed by the
5 Commissioner necessary, expedient, convenient or appropriate to the
6 performance or carrying out of any of the purposes, objectives or
7 provisions of this Code, or to assist the Commissioner in the
8 performance of official duties and functions.

9 4. Cause investigations, inquiries and inspections to be made,
10 and hold hearings and issue orders pursuant to the provisions of the
11 Administrative Procedures Act, to enforce and make effective the
12 provisions of this Code, and all rules and standards adopted by the
13 Commissioner pursuant to law and the Commissioner or the
14 representative of the Commissioner shall have the right of access to
15 any premises for such purpose at any reasonable time, upon
16 presentation of identification.

17 5. Authorize persons in the State Department of Health to
18 conduct investigations, inquiries and hearings, and to perform other
19 acts that the Commissioner is authorized or required to conduct or
20 perform personally.

21 6. Except as otherwise provided by law, all civil and criminal
22 proceedings under this Code shall be initiated and prosecuted by the
23 district attorney where the violation takes place.

24

1 7. Issue subpoenas for the attendance of witnesses and the
2 production of books and records at any hearing to be conducted by
3 the Commissioner; and if a person disobeys any such subpoena, or
4 refuses to give evidence before, or to allow books and records to be
5 examined by, the Commissioner after such person is directed to do
6 so, the Commissioner may file a contempt proceeding in the district
7 court of the county in which the premises involved are situated, or,
8 if no premises are involved, of the county in which such person
9 resides or has a principal place of business, and a judge of such
10 court, after a trial de novo, may punish the offending person for
11 contempt.

12 8. Unless otherwise required by the terms of a federal grant,
13 sell, exchange or otherwise dispose of personal property that has
14 been acquired by the State Department of Health, or any of its
15 components, when such property becomes obsolete or is no longer
16 needed; any money derived therefrom shall be deposited in the Public
17 Health Special Fund.

18 9. Sell films, educational materials, biological products and
19 other items produced by the State Department of Health; and all
20 proceeds therefrom shall be deposited in the Public Health Special
21 Fund.

22 10. Revoke or cancel, or suspend for any period up to one (1)
23 year, any license or permit issued under or pursuant to this Code,
24 or by the Commissioner, when the Commissioner determines that ground

1 therefor as prescribed by this Code exists, or that the holder of
2 such license or permit has violated any law, or any of the
3 provisions of this Code, or any rules or standards of the
4 Commissioner filed with the Secretary of State, but the Commissioner
5 shall first afford the holder an opportunity to show cause why the
6 license or permit should not be revoked, canceled or suspended,
7 notice of such opportunity to be given by certified United States
8 Mail to the holder of the license or permit at the last-known
9 address of such holder.

10 11. Accept, use, disburse and administer grants, allotments,
11 gifts, devises, bequests, appropriations and other monies and
12 property offered or given to the State Department of Health, or any
13 component or agency thereof, by any agency of the federal
14 government, or any corporation or individual.

15 12. Be the official agency of the State of Oklahoma in all
16 matters relating to public health which require or authorize
17 cooperation of the State of Oklahoma with the federal government or
18 any agency thereof; coordinate the activities of the State
19 Department of Health with those of the federal government or any
20 department or agency thereof, and with other states, on matters
21 pertaining to public health, and enter into agreements for such
22 purpose, and may accept, use, disburse and administer, for the
23 office of the Commissioner or for the State Department of Health,
24 for any purpose designated and on the terms and conditions thereof,

1 grants of money, personnel and property from the federal government
2 or any department or agency thereof, or from any state or state
3 agency, or from any other source, to promote and carry on in this
4 state any program relating to the public health or the control of
5 disease, and enter into agreements for such purposes.

6 13. The State Commissioner of Health may appoint commissioned
7 peace officers, certified by the Council on Law Enforcement
8 Education and Training, to investigate violations of the Public
9 Health Code and to provide security to Department facilities.

10 14. Pursuant to Section 2 of this act, the State Commissioner
11 of Health shall appoint a Chief Medical Officer who reports directly
12 to the State Commissioner of Health.

13 15. The State Commissioner of Health shall, in consultation
14 with local and national organizations that provide education or
15 services related to epilepsy conditions, provide guidance to medical
16 doctors, osteopathic physicians, nurse practitioners, and physician
17 assistants who have the primary responsibility for treatment of a
18 person with epilepsy to assist in determining whether a patient is
19 at elevated risk for sudden unexpected death in epilepsy (SUDEP),
20 including, but not limited to, whether the patient has had
21 convulsive seizures, the frequency and recency of such seizures, and
22 whether the patient's symptoms have subsided in response to
23 medicinal or surgical treatment. The Chief Medical Examiner shall
24

1 provide to all employees of the Chief Medical Examiner's Office
2 information about sudden unexpected death in epilepsy (SUDEP).

3 SECTION 4. AMENDATORY 63 O.S. 2021, Section 1-118, is
4 amended to read as follows:

5 Section 1-118. A. The Division of Health Care Information is
6 hereby created within the State Department of Health.

7 B. The Division shall:

8 1. Collect from providers health care information for which the
9 Division has established a defined purpose and a demonstrated
10 utility that is consistent with the intent of the provisions of
11 Section 1-117 et seq. of this title;

12 2. Establish and maintain a uniform health care information
13 system;

14 3. Analyze health care data submitted including, but not
15 limited to, geographic mapping of disease entities;

16 4. Provide for dissemination of health care data to users and
17 consumers;

18 5. Provide for the training and education of information
19 providers regarding processing and maintenance and methods of
20 reporting required information;

21 6. Be authorized to access all state agency health-related data
22 sets and shall develop mechanisms for the receipt of health care
23 data to the Division or its agent; provided, however, all provisions
24 for confidentiality shall remain in place;

1 7. Provide for the exchange of information with other agencies
2 or political subdivisions of this state, the federal government or
3 other states, or agencies thereof. The Division shall collaborate
4 with county health departments, including the Oklahoma City-County
5 Health Department and the Tulsa City-County Health Department, in
6 developing city-county based health data sets;

7 8. Contract with other public or private entities for the
8 purpose of collecting, processing or disseminating health care data;
9 ~~and~~

10 9. Build and maintain the data base; and

11 10. In an effort to reduce deaths from sudden unexpected death
12 in epilepsy (SUDEP), develop an information program in the Injury
13 Prevention Service to be disseminated to the public and licensed
14 medical professionals to notify individuals with epilepsy of the
15 danger of SUDEP; and encourage the American Medical Association to
16 add a Current Procedural Terminology (CPT) Code for epilepsy
17 education by a medical service professional.

18 C. 1. The State Board of Health shall adopt rules governing
19 the acquisition, compilation and dissemination of all data collected
20 pursuant to the Oklahoma Health Care Information System Act.

21 2. The rules shall include, but not be limited to:

22 a. adequate measures to provide system security for all
23 data and information acquired pursuant to the Oklahoma
24 Health Care Information System Act,

- b. adequate procedures to ensure confidentiality of patient records,
- c. charges for users for the cost of data preparation for information that is beyond the routine data disseminated by the office, and
- d. time limits for the submission of data by information providers.

D. The Division shall adopt standard nationally recognized coding systems to ensure quality in receiving and processing data.

E. The Division shall implement mechanisms to encrypt all personal identifiers contained in any health care data upon transmission to the State Department of Health, and all such data shall remain encrypted while maintained in the Department's database or while used by a contractor.

F. The Division may contract with an organization for the purpose of data analysis. Any contract or renewal thereof shall be based on the need for, and the feasibility, cost and performance of, services provided by the organization. The Division shall require any data analyzer at a minimum to:

1. Analyze the information;
2. Prepare policy-related and other analytical reports as determined necessary for purposes of this act; and
3. Protect the encryption and confidentiality of the data.

1 G. The Board shall have the authority to set fees and charges
2 with regard to the collection and compilation of data requested for
3 special reports, and for the dissemination of data. These funds
4 shall be deposited in the Oklahoma Health Care Information System
5 Revolving Fund account.

6 H. The Division may accept grants or charitable contributions
7 for use in carrying out the functions set forth in the Oklahoma
8 Health Care Information System Act from any source. These funds
9 shall be deposited in the Oklahoma Health Care Information System
10 Revolving Fund.

11 SECTION 5. AMENDATORY 63 O.S. 2021, Section 945, is
12 amended to read as follows:

13 Section 945. A. When properly authorized, an autopsy shall be
14 performed by the Chief Medical Examiner or such person as may be
15 designated by him or her for such purpose. The Chief Medical
16 Examiner or a person designated by him or her may authorize arterial
17 embalming of the body prior to the autopsy when such embalming would
18 in his or her opinion not interfere with the autopsy. The extent of
19 the autopsy shall be made as is deemed necessary by the person
20 performing the autopsy.

21 B. A full and complete report of the facts developed by the
22 autopsy together with the findings of the person making it shall be
23 prepared and filed in the Office of the Chief Medical Examiner
24 without unnecessary delay. Copies of such reports and findings

1 shall be furnished to district attorneys and law enforcement
2 officers making a criminal investigation in connection with the
3 death.

4 C. Upon receiving a written, signed and dated records request,
5 a copy of the full and complete report of the facts developed by the
6 autopsy, together with the findings of the person making the report,
7 shall be released by the Office of the Chief Medical Examiner to the
8 public in the most expedient manner available or as requested by the
9 records requester and, under the following conditions, shall be
10 furnished to:

11 1. District attorneys and any law enforcement agency with
12 authority to make a criminal investigation in connection with the
13 death; provided, such copies shall not be shared with any other
14 entity unless otherwise provided by law;

15 2. The spouse of the deceased or any person related within two
16 (2) degrees of consanguinity to the deceased, unless the district
17 attorney or law enforcement agency making a criminal investigation
18 objects to the release of documents to any family member. District
19 attorneys and law enforcement agencies shall be prohibited from
20 objecting to the release of the full and complete autopsy report to
21 the family if the decedent was in state custody, in custody of law
22 enforcement or is deceased due to lethal action of a law enforcement
23 officer; and
24

1 3. Any insurance company conducting an insurer's investigation
2 of any insurance claim arising from the death of the individual upon
3 whom the autopsy was performed.

4 D. The full and complete report of the facts developed by the
5 autopsy, together with the findings of the person making the report,
6 shall be withheld from public inspection and copying for ten (10)
7 business days following the date the report is generated by the
8 Office of the Chief Medical Examiner, except as provided for in
9 subsection C of this section.

10 E. The Office of the Chief Medical Examiner shall produce a
11 summary report of investigation by the medical examiner at the same
12 time the full and complete report of the facts developed by the
13 autopsy, together with the findings of the person making the report,
14 is released to the parties listed in subsection C of this section.
15 The summary report of investigation shall be made available for
16 public inspection and copying without delay. Any person may obtain
17 a copy of the summary report of investigation in the most expedient
18 manner available or as requested by the records requester.

19 F. The summary report of investigation shall include, but not
20 be limited to, the following information, if known:

21 1. Decedent name, age, birth date, race, sex, home address,
22 examiner notified by name and title and including date and time,
23 location where decedent was injured or became ill, including name of
24 facility, address, city, county, type of premises, date and time;

1 location of death including name of facility, city, county, type of
2 premises, date and time, and location body was viewed by medical
3 examiner including address, city, county, type of premises and date
4 and time;

5 2. If the death was a motor vehicle accident, whether the
6 decedent was the driver, passenger or pedestrian, and the type of
7 vehicle involved in the accident;

8 3. A description of the body, including but not limited to the
9 external physical examination, rigor, livor, external observations
10 including hair, eye color, body length and weight, and other
11 external observations, as well as the presence and location of
12 blood; and

13 4. The probable cause of death, other significant conditions
14 contributing to the death but not resulting in the underlying cause
15 given, manner of death, case disposition, case number, and name and
16 contact information of the medical examiner performing the autopsy,
17 including a signature and certification statement that the facts
18 contained in the report are true and correct to the best of their
19 knowledge and the date the report was signed and generated.

20 G. At the conclusion of the ten (10) business-day-period, the
21 full and complete report shall be made available as a public record
22 except when a district attorney or law enforcement agency with
23 authority to make a criminal investigation in connection with the
24 death declares that the full and complete report contains

1 information that would materially compromise an ongoing criminal
2 investigation. Such declaration shall be in writing to the Office
3 of the Medical Examiner and be an open record available from the
4 Office of Medical Examiner.

5 1. Upon such declaration, the district attorney or law
6 enforcement agency shall request from the appropriate district court
7 a hearing for an extension of time during which the full and
8 complete autopsy report, not including information in the summary
9 report, may be withheld.

10 2. When a request for an extension of time has been filed with
11 the court, the full and complete autopsy report in question may be
12 withheld until the court has issued a ruling on the requested
13 extension of time to release the autopsy report. Such requests for
14 an extension of time during which the autopsy may be withheld shall
15 be made on the grounds that release of the full and complete autopsy
16 report will materially compromise an ongoing criminal investigation.

17 3. Courts considering such requests shall conduct a hearing and
18 consider whether the interests of the public outweigh the interests
19 asserted by the district attorney or law enforcement agency.

20 4. If an extension of time is granted by the court, the initial
21 extension shall be ordered by the court for a period of six (6)
22 months. Subsequent extensions shall only be ordered after a hearing
23 by the court for an additional one year and cumulative time
24 extensions shall not exceed more than four (4) years and six (6)

1 months; provided, under no circumstance shall an extension of time
2 be granted by the court if the deceased person was in state custody,
3 in custody of law enforcement or was deceased due to lethal action
4 of a law enforcement officer.

5 5. In the event that six (6) months have expired from the date
6 of the initial release of the autopsy report without any person
7 being criminally charged in the case in question and release of the
8 autopsy or portions of the autopsy have been denied on the grounds
9 of materially compromising a criminal investigation, an appeal of
10 such denial may be made to the appropriate district court. Courts
11 considering appeals for temporarily withholding an autopsy report
12 shall conduct a hearing and consider whether the interests of the
13 public outweigh the interests asserted by the district attorney or
14 law enforcement agency. In response to such appeals, the district
15 court shall order that the autopsy report be made available for
16 public inspection and copying with no redaction, or shall order an
17 extension of time during which the autopsy report may be withheld
18 under the provisions of this section.

19 6. Any court order obtained pursuant to this subsection shall
20 be served upon the Office of the Chief Medical Examiner by the party
21 requesting or granted the extension by the court.

22 H. An order granting an extension of time shall be applicable
23 to the autopsy report for the duration of the extension; provided,
24 each subsequent time extension shall only be ordered by the district

1 court for an additional twelve-month period of time or less and
2 cumulative time extensions shall not exceed four (4) years and six
3 (6) months; provided, charges being filed against a person in the
4 case in question or an autopsy report being entered into evidence as
5 part of a criminal prosecution nullifies any granted extension of
6 time.

7 I. The opportunities to withhold an autopsy report or portions
8 of an autopsy report provided in this section shall expire in
9 totality four (4) years and six (6) months after the date the
10 autopsy report was generated, at which time the autopsy report
11 previously withheld on the grounds provided for in this section
12 shall be made available for public inspection and copying.

13 J. Nothing in this section shall prohibit a district attorney
14 or law enforcement agency with authority to make a criminal
15 investigation in connection with the death from immediately
16 releasing portions of information contained in the full and complete
17 autopsy report for the purposes of assisting with the criminal
18 investigation or apprehension of any person involved in a criminal
19 act that resulted in the death of another person.

20 K. After ten (10) business days from the release of the full
21 and complete report, nothing in this section shall prohibit the
22 spouse of the deceased or any person related within two (2) degrees
23 of consanguinity to the deceased who has received a copy of the full
24 and complete autopsy report from the Office of the Chief Medical

1 Examiner from authorizing the Office of the Chief Medical Examiner's
2 office to release the full and complete autopsy report to any other
3 person subject to approval by the court.

4 L. When an autopsy of the body is conducted of a deceased human
5 who has epilepsy or a history of seizures, the report shall include
6 an investigation and determination as to whether the deceased
7 suffered a sudden unexpected death in epilepsy (SUDEP). In the
8 event the deceased did suffer a sudden unexpected death in epilepsy,
9 such information shall be noted on the death certificate and be
10 reported to the North American SUDEP Registry (NASR).

11 SECTION 6. This act shall become effective November 1, 2025.

12 Passed the House of Representatives the 24th day of March, 2025.

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14 _____
15 Presiding Officer of the House
16 of Representatives

17 Passed the Senate the _____ day of _____, 2025.

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19 _____
20 Presiding Officer of the Senate
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