

COMMITTEE AMENDMENT
HOUSE OF REPRESENTATIVES
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB2013 _____
Of the printed Bill
Page _____ Section _____ Lines _____
Of the Engrossed Bill

By deleting the content of the entire measure, and by inserting in lieu thereof the following language:

AMEND TITLE TO CONFORM TO AMENDMENTS

Adopted: _____

Amendment submitted by: Daniel Pae

Reading Clerk

1 STATE OF OKLAHOMA

2 1st Session of the 60th Legislature (2025)

3 PROPOSED COMMITTEE
4 SUBSTITUTE
5 FOR
6 HOUSE BILL NO. 2013

By: Pae

7
8 PROPOSED COMMITTEE SUBSTITUTE

9 An Act relating to sudden unexpected death in
10 epilepsy (SUDEP); creating Dylan's Law; providing
11 insurance coverage for individuals diagnosed with
12 epilepsy; prohibiting refusal of coverage or renewal
13 based on epilepsy diagnoses; mandating coverage for
14 seizure protection; defining terms; authorizing
15 Service Oklahoma to create certain driver licenses
16 for people diagnosed with epilepsy; prescribing the
17 use of a unique symbol; making the use of the symbol
18 voluntary; amending 63 O.S. 2021, Section 1-106, as
19 amended by Section 1, Chapter 85, O.S.L. 2022 (63
20 O.S. Supp. 2024, Section 1-106), which relates to
21 State Commissioner of Health, qualifications, and
22 powers and duties; adding a power and duty to the
23 Commissioner of Health; amending 63 O.S. 2021,
24 Section 1-118, which relates to the creation of
Division of Health Care Information, duties, rules,
contracts, grants, and contributions; adding a duty
to the Division of Health Care Information; amending
63 O.S. 2021, Section 934, which relates to
appointment and qualifications of examiner; directing
the Chief Medical Examiner to provide information
about sudden unexpected death in epilepsy; amending
63 O.S. 2021, Section 945, which relates to person to
perform autopsy, extent, report of findings, and
records request; requiring an investigation and
determination of sudden unexpected death in epilepsy
of an individual with a history of seizures;
requiring certain notations on death certificates;
requiring certain reporting; providing for

1 noncodification; providing for codification; and
2 providing an effective date.

3
4
5 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

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

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

9 SECTION 2. NEW LAW A new section of law to be codified
10 in the Oklahoma Statutes as Section 6060.31 of Title 36, unless
11 there is created a duplication in numbering, reads as follows:

12 A. All individual and group health insurance policies, issued
13 pursuant to provisions of the Patient Protection and Affordable Care
14 Act, 42 U.S. Code Chapter 157, that provide medical and surgical
15 benefits shall provide the same coverage and benefits to any
16 individual who has been diagnosed with epilepsy as it would provide
17 coverage and benefits to an individual who has not been diagnosed
18 with epilepsy.

19 B. No insurer, subject to the Affordable Care Act, shall
20 terminate coverage or refuse to renew an individual's health
21 insurance coverage solely based upon the individual's diagnosis of
22 epilepsy.

23 C. To reduce the risk of death from sudden unexpected death in
24 epilepsy (SUDEP), all individual and group health insurance policies

1 that provide medical and surgical benefits, pursuant to the
2 Affordable Care Act, shall provide coverage for seizure protection
3 devices if prescribed by a physician who is a specialist in the
4 treatment of epilepsy and it is determined by such physician that
5 such devices are medically necessary.

6 D. For the purposes of this act, the term "seizure protection
7 devices" refers to any medical device, system, or technology
8 designed, manufactured, or intended to assist in the management,
9 treatment, monitoring, or mitigation of epilepsy or seizure-related
10 disorders. This includes, but is not limited to:

11 1. Implantable Neurostimulation Devices - Devices that deliver
12 electrical stimulation to neural structures, including but not
13 limited to vagus nerve stimulators (VNS), deep brain stimulators
14 (DBS), and responsive neurostimulation (RNS) systems, intended to
15 reduce seizure frequency or severity;

16 2. Wearable or External Monitoring Devices - Devices designed
17 to detect, record, or predict seizures through biometric,
18 electrodermal, accelerometric, or other physiological indicators,
19 including but not limited to seizure detection watches, biosensors,
20 and mobile or cloud-based seizure monitoring systems; and

21 3. Seizure Alert and Response Systems - Technologies that
22 provide real-time alerts, emergency notifications, or automated
23 interventions in response to detected seizure activity, including
24

1 connected wearable systems and automated emergency response
2 integration.

3 SECTION 3. NEW LAW A new section of law to be codified
4 in the Oklahoma Statutes as Section 6-130 of Title 47, unless there
5 is created a duplication in numbering, reads as follows:

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

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

23
24

1 SECTION 4. AMENDATORY 63 O.S. 2021, Section 1-106, as
2 amended by Section 1, Chapter 85, O.S.L. 2022 (63 O.S. Supp. 2024,
3 Section 1-106), is amended to read as follows:

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

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

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

12 3. Possession of a Doctoral degree in Public Health or Public
13 Health Administration; or

14 4. Possession of a Master of Science Degree and a minimum of
15 five (5) years of supervisory experience in the administration of
16 health services.

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

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

23 1. Have general supervision of the health of the citizens of
24 the state; make investigations, inquiries and studies concerning the

1 causes of disease and injury, and especially of epidemics, and the
2 causes of mortality, and the effects of localities, employment,
3 conditions and circumstances on the public health; investigate
4 conditions as to health, sanitation and safety of schools, prisons,
5 public institutions, mines, public conveyances, camps, places of
6 group abode, and all buildings and places of public resort, and
7 recommend, prescribe and enforce such measures of health, sanitation
8 and safety for them as the Commissioner deems advisable; take such
9 measures as deemed necessary by the Commissioner to control or
10 suppress, or to prevent the occurrence or spread of, any
11 communicable, contagious or infectious disease, and provide for the
12 segregation and isolation of persons having or suspected of having
13 any such disease; designate places of quarantine or isolation;
14 advise state and local governments on matters pertaining to health,
15 sanitation and safety; and abate any nuisance affecting injuriously
16 the health of the public or any community. Any health information
17 or data acquired by the Commissioner from any public agency, which
18 information or data is otherwise confidential by state or federal
19 law, shall remain confidential notwithstanding the acquisition of
20 this information by the Commissioner.

21 2. Be the executive officer and supervise the activities of the
22 State Department of Health, and act for the Department in all
23 matters except as may be otherwise provided in this Code; administer
24 oaths at any hearing or investigation conducted pursuant to this

1 Code; and enforce rules and standards adopted by the Commissioner.
2 All rules adopted by the Commissioner are subject to the terms and
3 conditions of the Administrative Procedures Act.

4 3. Appoint an Assistant State Commissioner of Health and fix
5 the qualifications, duties and compensation of the Assistant State
6 Commissioner of Health; and employ, appoint and contract with, and
7 fix the qualifications, duties and compensation of, such other
8 assistants, doctors, engineers, attorneys, sanitarians, nurses,
9 laboratory personnel, administrative, clerical and technical help,
10 investigators, aides and other personnel and help, either on a full-
11 time, part-time, fee or contractual basis, as shall be deemed by the
12 Commissioner necessary, expedient, convenient or appropriate to the
13 performance or carrying out of any of the purposes, objectives or
14 provisions of this Code, or to assist the Commissioner in the
15 performance of official duties and functions.

16 4. Cause investigations, inquiries and inspections to be made,
17 and hold hearings and issue orders pursuant to the provisions of the
18 Administrative Procedures Act, to enforce and make effective the
19 provisions of this Code, and all rules and standards adopted by the
20 Commissioner pursuant to law and the Commissioner or the
21 representative of the Commissioner shall have the right of access to
22 any premises for such purpose at any reasonable time, upon
23 presentation of identification.

24

1 5. Authorize persons in the State Department of Health to
2 conduct investigations, inquiries and hearings, and to perform other
3 acts that the Commissioner is authorized or required to conduct or
4 perform personally.

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

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

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

1 9. Sell films, educational materials, biological products and
2 other items produced by the State Department of Health; and all
3 proceeds therefrom shall be deposited in the Public Health Special
4 Fund.

5 10. Revoke or cancel, or suspend for any period up to one (1)
6 year, any license or permit issued under or pursuant to this Code,
7 or by the Commissioner, when the Commissioner determines that ground
8 therefor as prescribed by this Code exists, or that the holder of
9 such license or permit has violated any law, or any of the
10 provisions of this Code, or any rules or standards of the
11 Commissioner filed with the Secretary of State, but the Commissioner
12 shall first afford the holder an opportunity to show cause why the
13 license or permit should not be revoked, canceled or suspended,
14 notice of such opportunity to be given by certified United States
15 Mail to the holder of the license or permit at the last-known
16 address of such holder.

17 11. Accept, use, disburse and administer grants, allotments,
18 gifts, devises, bequests, appropriations and other monies and
19 property offered or given to the State Department of Health, or any
20 component or agency thereof, by any agency of the federal
21 government, or any corporation or individual.

22 12. Be the official agency of the State of Oklahoma in all
23 matters relating to public health which require or authorize
24 cooperation of the State of Oklahoma with the federal government or

1 any agency thereof; coordinate the activities of the State
2 Department of Health with those of the federal government or any
3 department or agency thereof, and with other states, on matters
4 pertaining to public health, and enter into agreements for such
5 purpose, and may accept, use, disburse and administer, for the
6 office of the Commissioner or for the State Department of Health,
7 for any purpose designated and on the terms and conditions thereof,
8 grants of money, personnel and property from the federal government
9 or any department or agency thereof, or from any state or state
10 agency, or from any other source, to promote and carry on in this
11 state any program relating to the public health or the control of
12 disease, and enter into agreements for such purposes.

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

17 14. Pursuant to Section 2 of this act, the State Commissioner
18 of Health shall appoint a Chief Medical Officer who reports directly
19 to the State Commissioner of Health.

20 15. The State Commissioner of Health shall, in consultation
21 with local and national organizations that provide education or
22 services related to epilepsy conditions, provide guidance to medical
23 doctors, osteopathic physicians, nurse practitioners, and physician
24 assistants who have the primary responsibility for treatment of a

1 person with epilepsy to assist in determining whether a patient is
2 at elevated risk for sudden unexpected death in epilepsy (SUDEP),
3 including, but not limited to, whether the patient has had
4 convulsive seizures, the frequency and recency of such seizures, and
5 whether the patient's symptoms have subsided in response to
6 medicinal or surgical treatment.

7 SECTION 5. AMENDATORY 63 O.S. 2021, Section 1-118, is
8 amended to read as follows:

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

11 B. The Division shall:

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

16 2. Establish and maintain a uniform health care information
17 system;

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

20 4. Provide for dissemination of health care data to users and
21 consumers;

22 5. Provide for the training and education of information
23 providers regarding processing and maintenance and methods of
24 reporting required information;

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

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

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

14 9. Build and maintain the data base; and

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

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

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

- 2 a. adequate measures to provide system security for all
- 3 data and information acquired pursuant to the Oklahoma
- 4 Health Care Information System Act,
- 5 b. adequate procedures to ensure confidentiality of
- 6 patient records,
- 7 c. charges for users for the cost of data preparation for
- 8 information that is beyond the routine data
- 9 disseminated by the office, and
- 10 d. time limits for the submission of data by information
- 11 providers.

12 D. The Division shall adopt standard nationally recognized

13 coding systems to ensure quality in receiving and processing data.

14 E. The Division shall implement mechanisms to encrypt all

15 personal identifiers contained in any health care data upon

16 transmission to the State Department of Health, and all such data

17 shall remain encrypted while maintained in the Department's database

18 or while used by a contractor.

19 F. The Division may contract with an organization for the

20 purpose of data analysis. Any contract or renewal thereof shall be

21 based on the need for, and the feasibility, cost and performance of,

22 services provided by the organization. The Division shall require

23 any data analyzer at a minimum to:

- 24 1. Analyze the information;

1 2. Prepare policy-related and other analytical reports as
2 determined necessary for purposes of this act; and

3 3. Protect the encryption and confidentiality of the data.

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

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

14 SECTION 6. AMENDATORY 63 O.S. 2021, Section 934, is
15 amended to read as follows:

16 Section 934. The Board of Medicolegal Investigations shall
17 appoint a Chief Medical Examiner who shall be a physician licensed
18 to practice in Oklahoma and a Diplomate of the American Board of
19 Pathology or the American Osteopathic Board of Pathology in forensic
20 pathology. The Chief Medical Examiner shall serve at the pleasure
21 of the Board. The Chief Medical Examiner shall provide to all
22 employees of the Chief Medical Examiner's Office and licensed
23 medical professionals authorized by law to sign death certificates,
24 information about sudden unexpected death in epilepsy (SUDEP). In

1 addition to the duties prescribed by law, the Chief Medical Examiner
2 may teach in any educational capacity.

3 SECTION 7. AMENDATORY 63 O.S. 2021, Section 945, is
4 amended to read as follows:

5 Section 945. A. When properly authorized, an autopsy shall be
6 performed by the Chief Medical Examiner or such person as may be
7 designated by him or her for such purpose. The Chief Medical
8 Examiner or a person designated by him or her may authorize arterial
9 embalming of the body prior to the autopsy when such embalming would
10 in his or her opinion not interfere with the autopsy. The extent of
11 the autopsy shall be made as is deemed necessary by the person
12 performing the autopsy.

13 B. A full and complete report of the facts developed by the
14 autopsy together with the findings of the person making it shall be
15 prepared and filed in the Office of the Chief Medical Examiner
16 without unnecessary delay. Copies of such reports and findings
17 shall be furnished to district attorneys and law enforcement
18 officers making a criminal investigation in connection with the
19 death.

20 C. Upon receiving a written, signed and dated records request,
21 a copy of the full and complete report of the facts developed by the
22 autopsy, together with the findings of the person making the report,
23 shall be released by the Office of the Chief Medical Examiner to the
24 public in the most expedient manner available or as requested by the

1 records requester and, under the following conditions, shall be
2 furnished to:

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

7 2. The spouse of the deceased or any person related within two
8 (2) degrees of consanguinity to the deceased, unless the district
9 attorney or law enforcement agency making a criminal investigation
10 objects to the release of documents to any family member. District
11 attorneys and law enforcement agencies shall be prohibited from
12 objecting to the release of the full and complete autopsy report to
13 the family if the decedent was in state custody, in custody of law
14 enforcement or is deceased due to lethal action of a law enforcement
15 officer; and

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

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

1 E. The Office of the Chief Medical Examiner shall produce a
2 summary report of investigation by the medical examiner at the same
3 time the full and complete report of the facts developed by the
4 autopsy, together with the findings of the person making the report,
5 is released to the parties listed in subsection C of this section.
6 The summary report of investigation shall be made available for
7 public inspection and copying without delay. Any person may obtain
8 a copy of the summary report of investigation in the most expedient
9 manner available or as requested by the records requester.

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

12 1. Decedent name, age, birth date, race, sex, home address,
13 examiner notified by name and title and including date and time,
14 location where decedent was injured or became ill, including name of
15 facility, address, city, county, type of premises, date and time;
16 location of death including name of facility, city, county, type of
17 premises, date and time, and location body was viewed by medical
18 examiner including address, city, county, type of premises and date
19 and time;

20 2. If the death was a motor vehicle accident, whether the
21 decedent was the driver, passenger or pedestrian, and the type of
22 vehicle involved in the accident;

23 3. A description of the body, including but not limited to the
24 external physical examination, rigor, livor, external observations

1 including hair, eye color, body length and weight, and other
2 external observations, as well as the presence and location of
3 blood; and

4 4. The probable cause of death, other significant conditions
5 contributing to the death but not resulting in the underlying cause
6 given, manner of death, case disposition, case number, and name and
7 contact information of the medical examiner performing the autopsy,
8 including a signature and certification statement that the facts
9 contained in the report are true and correct to the best of their
10 knowledge and the date the report was signed and generated.

11 G. At the conclusion of the ten (10) business-day-period, the
12 full and complete report shall be made available as a public record
13 except when a district attorney or law enforcement agency with
14 authority to make a criminal investigation in connection with the
15 death declares that the full and complete report contains
16 information that would materially compromise an ongoing criminal
17 investigation. Such declaration shall be in writing to the Office
18 of the Medical Examiner and be an open record available from the
19 Office of Medical Examiner.

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

1 2. When a request for an extension of time has been filed with
2 the court, the full and complete autopsy report in question may be
3 withheld until the court has issued a ruling on the requested
4 extension of time to release the autopsy report. Such requests for
5 an extension of time during which the autopsy may be withheld shall
6 be made on the grounds that release of the full and complete autopsy
7 report will materially compromise an ongoing criminal investigation.

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

11 4. If an extension of time is granted by the court, the initial
12 extension shall be ordered by the court for a period of six (6)
13 months. Subsequent extensions shall only be ordered after a hearing
14 by the court for an additional one year and cumulative time
15 extensions shall not exceed more than four (4) years and six (6)
16 months; provided, under no circumstance shall an extension of time
17 be granted by the court if the deceased person was in state custody,
18 in custody of law enforcement or was deceased due to lethal action
19 of a law enforcement officer.

20 5. In the event that six (6) months have expired from the date
21 of the initial release of the autopsy report without any person
22 being criminally charged in the case in question and release of the
23 autopsy or portions of the autopsy have been denied on the grounds
24 of materially compromising a criminal investigation, an appeal of

1 such denial may be made to the appropriate district court. Courts
2 considering appeals for temporarily withholding an autopsy report
3 shall conduct a hearing and consider whether the interests of the
4 public outweigh the interests asserted by the district attorney or
5 law enforcement agency. In response to such appeals, the district
6 court shall order that the autopsy report be made available for
7 public inspection and copying with no redaction, or shall order an
8 extension of time during which the autopsy report may be withheld
9 under the provisions of this section.

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

13 H. An order granting an extension of time shall be applicable
14 to the autopsy report for the duration of the extension; provided,
15 each subsequent time extension shall only be ordered by the district
16 court for an additional twelve-month period of time or less and
17 cumulative time extensions shall not exceed four (4) years and six
18 (6) months; provided, charges being filed against a person in the
19 case in question or an autopsy report being entered into evidence as
20 part of a criminal prosecution nullifies any granted extension of
21 time.

22 I. The opportunities to withhold an autopsy report or portions
23 of an autopsy report provided in this section shall expire in
24 totality four (4) years and six (6) months after the date the

1 autopsy report was generated, at which time the autopsy report
2 previously withheld on the grounds provided for in this section
3 shall be made available for public inspection and copying.

4 J. Nothing in this section shall prohibit a district attorney
5 or law enforcement agency with authority to make a criminal
6 investigation in connection with the death from immediately
7 releasing portions of information contained in the full and complete
8 autopsy report for the purposes of assisting with the criminal
9 investigation or apprehension of any person involved in a criminal
10 act that resulted in the death of another person.

11 K. After ten (10) business days from the release of the full
12 and complete report, nothing in this section shall prohibit the
13 spouse of the deceased or any person related within two (2) degrees
14 of consanguinity to the deceased who has received a copy of the full
15 and complete autopsy report from the Office of the Chief Medical
16 Examiner from authorizing the Office of the Chief Medical Examiner's
17 office to release the full and complete autopsy report to any other
18 person subject to approval by the court.

19 L. When an autopsy of the body is conducted of a deceased human
20 who has epilepsy or a history of seizures, the report shall include
21 an investigation and determination as to whether the deceased
22 suffered a sudden unexpected death in epilepsy (SUDEP). In the
23 event the deceased did suffer a sudden unexpected death in epilepsy,
24

1 such information shall be noted on the death certificate and be
2 reported to the North American SUDEP Registry (NASR).

3 SECTION 8. This act shall become effective November 1, 2025.

4

5 60-1-12693 TJ 02/14/25

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24