

To Chair Schmidt, Vice Chair Deeter, and Members of the House Health Committee:

The pandemic tested fundamental principles of medical ethics in ways we never imagined, and HB 12, the “Dave and Angie Patient and Health Provider Protection Act” seeks to safeguard for the people of Ohio certain inherent rights to access lifesaving drugs in both outpatient pharmacies and in hospital settings while protecting their doctor’s ability to prescribe that medicine without fear of retribution.

Hospitalized patients are the most vulnerable and often do not know, or are not capable of, defending, their rights. Have you ever been hospitalized? If so, you understand how difficult it is to make treatment decisions when severely ill. Even with family members present and participating, hospitalized patients put most of their faith in their physician to use his or her clinical judgment on how to best treat them. This is a sacred relationship and requires a tremendous amount of trust from the patient. During the pandemic, this relationship between patient and physician was severely disrupted, and in the past four years, I have witnessed a disturbing violation of patient rights brought on by third parties. Government doctors with no first-hand experience in treating COVID dictated who would get treated and how, all from the safety of their homes over Zoom calls. In an unprecedented manner, the FDA issued an edict against using a very safe, time-tested medication to treat a novel disease where “standard of care” had yet to be established.

Because of their actions, patients, physicians, hospitals and even judges were misled into believing false information about ivermectin and its use in treating COVID. I sued the FDA for this interference in the doctor-patient relationship and won, but despite this win, we still desperately need laws in place to protect patients from third-party interference in their care.

The spirit of HB12 is to restore and strengthen the doctor-patient relationship, empower patients to have choices in their medical care in the hospital setting, and empower physicians to use their best clinical judgement without fear of unlawful repercussions. A patient does not look to the FDA, a hospital administrator or a pharmacist to dictate their care; a patient looks to his or her physician. Hospital care is a team effort, but ultimately the physician acts as the head coach, directing care with informed consent from the patient. Physicians are uniquely trained to take on this responsibility and can still be held liable for gross negligence under this legislation. We should not be punished for using off-label medications we feel are in the best interest of our patients or for expressing a medical opinion that differs from government agencies or hospital boards who are dictating a one-size fits all “standard of care.”

Prior to the pandemic, I treated my patients without considering whether or not a medication was ‘off-label.’ In my four years of medical school and five years of residency, the fact that a medication was being used ‘off-label’ was never discussed; if a drug was approved by the FDA, we were free to use it. The pandemic suddenly changed that, and for the first time ever, I had to

defend my right to prescribe a generic, widely-available medication used by over four billion people around the world. Despite successfully treating over 6000 COVID patients, I have paid dearly for doing so, losing hospital privileges and spending the last two and a half years engaged in a battle with the Texas Medical Board to keep my license.

The repercussions I've experienced as a result of fighting for my patients are not unique to me - physicians across the country in similar circumstances have been subjected to unjustified retaliation from government agencies and licensing boards, with the ultimate goal of silencing other physicians who challenge the government narrative. HB12 is vital to protecting Ohio physicians from the frivolous disciplinary actions that I have experienced and have nothing to do with the patient. The passage of this bill could pave the way for other states to introduce legislation to protect their doctors as well.

Many mistakes were made during the pandemic. We cannot allow this to happen in the future. HB12 carefully considers both the rights of hospitals and pharmacists and restores the power to those who need it most – consenting patients and the physicians they trust. It's time for doctors to be allowed to skillfully practice the art of medicine again. I urge the Senate Health Committee members to stand with the people of Ohio and vote YES on HB12.

Thank you,

Mary Talley Bowden MD