Good morning, Chairman Huffman, Vice Chair Johnson, Ranking Member Liston, and members of the Senate Health Committee. My name is Hannah Kubbins and I'm the Legislative Director for Americans for Prosperity – Ohio. Thank you for the opportunity to provide written-only proponent testimony on Senate Bill 170, which presents a compassionate, forward-thinking response to the needs of patients facing life-threatening or severely debilitating illnesses.

Senate Bill 170 builds upon the original Right to Try framework by addressing a critical gap in access to cutting-edge, individualized treatments. As medical science advances, we now can design therapies tailored to a patient's unique genetic profile—treatments that hold promise for those with rare or ultra-rare conditions who have exhausted all other options. Unfortunately, the current FDA regulatory structure is not equipped to accommodate these personalized therapies, which are not designed for mass production and often fall outside traditional clinical trial pathways.

This bill provides a clear, ethical, and safe process for patients to access investigational individualized treatments. It requires:

- A diagnosis of a life-threatening or severely debilitating illness;
- Consideration of all FDA-approved treatment options;
- A physician's recommendation for an individualized investigational treatment;
- Informed written consent from the patient;
- Oversight by a facility with a Federalwide Assurance (FWA) and Institutional Review Board (IRB) review to ensure compliance with federal safety standards.

Importantly, Senate Bill 170 does not mandate participation. Manufacturers are not required to provide treatments, and physicians are not obligated to recommend or request them. It also protects healthcare providers from professional or legal repercussions for supporting a patient's access to these treatments in good faith.

This legislation aligns with the principles of our Personal Option framework, which emphasizes patient empowerment, innovation, and access. The Personal Option supports reforms that reduce regulatory barriers, promote individualized care, and expand access to life-saving therapies—goals that are directly advanced by Senate Bill 170.

Moreover, the bill respects the financial realities of investigational treatments. While manufacturers may recover direct costs, they cannot profit from unapproved therapies. Patients are informed of potential costs and risks, and insurers or government programs may—but are not required to—cover expenses.

Senate Bill 170 would provide patients and families a chance when all other avenues have been exhausted. And it is about ensuring that our laws keep pace with the promise of modern medicine.

Thank you for your time and consideration. I look forward to additional conversations.