AMENDMENT NO	Calendar No
Purpose: In the nature of	of a substitute.
IN THE SENATE OF THE	UNITED STATES—115th Cong., 1st Sess.
	S. 204
	of unapproved medical products by with a terminal illness in accordance for other purposes.
Referred to the Commi	ttee on and ered to be printed
Ordered to lie o	n the table and to be printed
	NATURE OF A SUBSTITUTE intended osed by
Viz:	
1 Strike all after	the enacting clause and insert the fol-
2 lowing:	
3 SECTION 1. SHORT T	ITLE.
4 This Act may	be cited as the "Trickett Wendler,
5 Frank Mongiello, an	nd Jordan McLinn Right to Try Act
6 of 2017".	

1	SEC. 2. USE OF UNAPPROVED INVESTIGATIONAL DRUGS BY
2	PATIENTS DIAGNOSED WITH A TERMINAL
3	ILLNESS.
4	(a) In General.—Chapter V of the Federal Food,
5	Drug, and Cosmetic Act is amended by inserting after sec-
6	tion 561A (21 U.S.C. 360bbb-0) the following:
7	"SEC. 561B. INVESTIGATIONAL DRUGS FOR USE BY ELIGI-
8	BLE PATIENTS.
9	"(a) Definitions.—For purposes of this section—
10	"(1) the term 'eligible patient' means a pa-
11	tient—
12	"(A) who has been diagnosed with a life-
13	threatening disease or condition (as defined in
14	section 312.81 of title 21, Code of Federal Reg-
15	ulations (or any successor regulations));
16	"(B) who has exhausted approved treat-
17	ment options and is unable to participate in a
18	clinical trial involving the eligible investigational
19	drug, as certified by a physician, who—
20	"(i) is in good standing with the phy-
21	sician's licensing organization or board;
22	and
23	"(ii) will not be compensated directly
24	by the manufacturer for so certifying; and
25	"(C) who has provided to the treating phy-
26	sician written informed consent regarding the

1	eligible investigational drug, or, as applicable,
2	on whose behalf a legally authorized representa-
3	tive of the patient has provided such consent;
4	"(2) the term 'eligible investigational drug'
5	means an investigational drug (as such term is used
6	in section 561)—
7	"(A) for which a Phase 1 clinical trial has
8	been completed;
9	"(B) that has not been approved or li-
10	censed for any use under section 505 of this
11	Act or section 351 of the Public Health Service
12	Act;
13	"(C)(i) for which an application has been
14	filed under section 505(b) of this Act or section
15	351(a) of the Public Health Service Act; or
16	"(ii) that is under investigation in a clin-
17	ical trial that—
18	"(I) is intended to form the primary
19	basis of a claim of effectiveness in support
20	of approval or licensure under section 505
21	of this Act or section 351 of the Public
22	Health Service Act; and
23	"(II) is the subject of an active inves-
24	tigational new drug application under sec-
25	tion 505(i) of this Act or section 351(a)(3)

1	of the Public Health Service Act, as appli-
2	cable; and
3	"(D) the active development or production
4	of which is ongoing and has not been discon-
5	tinued by the manufacturer or placed on clinical
6	hold under section 505(i); and
7	"(3) the term 'phase 1 trial' means a phase 1
8	clinical investigation of a drug as described in sec-
9	tion 312.21 of title 21, Code of Federal Regulations
10	(or any successor regulations).
11	"(b) Exemptions.—Eligible investigational drugs
12	provided to eligible patients in compliance with this section
13	are exempt from sections $502(f)$ , $503(b)(4)$ , $505(a)$ , and
14	505(i) of this Act, section 351(a) of the Public Health
15	Service Act, and parts 50, 56, and 312 of title 21, Code
16	of Federal Regulations (or any successor regulations), pro-
17	vided that the sponsor of such eligible investigational drug
18	or any person who manufactures, distributes, prescribes,
19	dispenses, introduces or delivers for introduction into
20	interstate commerce, or provides to an eligible patient an
21	eligible investigational drug pursuant to this section is in
22	compliance with the applicable requirements set forth in
23	sections 312.6, 312.7, and 312.8(d)(1) of title 21, Code
24	of Federal Regulations (or any successor regulations) that
25	apply to investigational drugs.

"(c	) Use of	CLINICAL	OUTCOMES.—
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"(1) IN GENERAL.—Notwithstanding any other provision of this Act, the Public Health Service Act, or any other provision of Federal law, the Secretary may not use a clinical outcome associated with the use of an eligible investigational drug pursuant to this section to delay or adversely affect the review or approval of such drug under section 505 of this Act or section 351 of the Public Health Service Act unless— "(A) the Secretary makes a determination, in accordance with paragraph (2), that use of such clinical outcome is critical to determining the safety of the eligible investigational drug; or "(B) the sponsor requests use of such outcomes. "(2) LIMITATION.—If the Secretary makes a determination under paragraph (1)(A), the Secretary shall provide written notice of such determination to the sponsor, including a public health justification for such determination, and such notice

shall be made part of the administrative record.

Such determination shall not be delegated below the

director of the agency center that is charged with

the premarket review of the eligible investigationaldrug.

## "(d) Reporting.—

"(1) In general.—The manufacturer or sponsor of an eligible investigational drug shall submit to the Secretary an annual summary of any use of such drug under this section. The summary shall include the number of doses supplied, the number of patients treated, the uses for which the drug was made available, and any known serious adverse events. The Secretary shall specify by regulation the deadline of submission of such annual summary and may amend section 312.33 of title 21, Code of Federal Regulations (or any successor regulations) to require the submission of such annual summary in conjunction with the annual report for an applicable investigational new drug application for such drug.

"(2) Posting of information.—The Secretary shall post an annual summary report of the use of this section on the internet website of the Food and Drug Administration, including the number of drugs for which clinical outcomes associated with the use of an eligible investigational drug pursuant to this section was—

1	"(A) used in accordance with subsection
2	(c)(1)(A);
3	"(B) used accordance with subsection
4	(e)(1)(B); and
5	"(C) not used in the review of an applica-
6	tion under section 505 of this Act or section
7	351 of the Public Health Service Act.".
8	(b) No Liability.—
9	(1) Alleged acts or omissions.—With re-
10	spect to any alleged act or omission with respect to
11	an eligible investigational drug provided to an eligi-
12	ble patient pursuant to section 561B of the Federal
13	Food, Drug, and Cosmetic Act and in compliance
14	with such section, no liability in a cause of action
15	shall lie against—
16	(A) a sponsor or manufacturer; or
17	(B) a prescriber, dispenser, or other indi-
18	vidual entity (other than a sponsor or manufac-
19	turer), unless the relevant conduct constitutes
20	reckless or willful misconduct, gross negligence,
21	or an intentional tort under any applicable
22	State law.
23	(2) Determination not to provide drug.—
24	No liability shall lie against a sponsor manufacturer,
25	prescriber, dispenser or other individual entity for its

1	determination not to provide access to an eligible in-
2	vestigational drug under section 561B of the Fed-
3	eral Food, Drug, and Cosmetic Act.
4	(3) Limitation.—Except as set forth in para-
5	graphs (1) and (2), nothing in this section shall be
6	construed to modify or otherwise affect the right of
7	any person to bring a private action under any State
8	or Federal product liability, tort, consumer protec-
9	tion, or warranty law.
10	SEC. 3. SENSE OF THE SENATE.
11	It is the sense of the Senate that section 561B of
12	the Federal Food, Drug, and Cosmetic Act, as added by
13	section 2—
14	(1) does not establish a new entitlement or
15	modify an existing entitlement, or otherwise estab-
16	lish a positive right to any party or individual;
17	(2) does not establish any new mandates, direc-
18	tives, or additional regulations;
19	(3) only expands the scope of individual liberty
20	and agency among patients, in limited cir-
21	cumstances;
22	(4) is consistent with, and will act as an alter-
23	native pathway alongside, existing expanded access
24	policies of the Food and Drug Administration;

1	(5) will not, and cannot, create a cure or effec-
2	tive therapy where none exists;
3	(6) recognizes that the eligible terminally ill pa-
4	tient population often consists of those patients with
5	the highest risk of mortality, and use of experi-
6	mental treatments under the criteria and procedure
7	described in such section 561A involves an informed
8	assumption of risk; and
9	(7) establishes national standards and rules by
10	which investigational drugs may be provided to ter-
11	minally ill patients.