MINNESOTA
RARE DISEASE ADVISORY COUNCIL

March 23, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express support for HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access and would identify strategies to support innovations in rare disease, cell and gene therapy research, development, delivery, and access, all of which are essential to moving this field from the research lab to the clinic.

As a PhD scientist involved in the development of gene therapies for incurable diseases, I am familiar with the process through which laboratory research is translated into clinical trials as a prelude to generating approved new drugs. This process is multifactorial and complex; it requires sophisticated infrastructure and a trained workforce. In this regard, Minnesota already possesses outstanding expertise in several of these components and, with additional support from the state legislature, could become a leading center of excellence in this field both nationally and internationally.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of gene and cell therapy for the treatment of rare diseases.

Please note that I am expressing my personal opinions, not those of my employer or other institution.

Sincerely,

C. H. Evans

Christopher H. Evans PhD, DSc, FLSW
John and Posy Krehbiel Professor of Orthopedics
Director, Rehabilitation Medicine Research Center
Director, Musculoskeletal Gene Therapy Laboratory
E-mail: evans.christopher@mayo.edu
Mayo Clinic

MINNESOTA
RARE DISEASE ADVISORY COUNCIL

March 23, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express support for HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access and would identify strategies to support innovation across the full pipeline of cell and gene therapy research, development, delivery, and patient access all of which are essential to moving this field from the research lab to the clinic.

I am an Assistant Professor at The Hormel Institute, University of Minnesota, where my laboratory studies the biological mechanisms that drive disease progression across cancer, regenerative biology, and rare genetic disorders, including NALCN channelopathies. Our work spans basic discovery, advanced model systems, and translational research, with a focus on identifying how fundamental biological insights can be developed into new therapeutic strategies. Through these efforts, we gain direct insight into both the promise of emerging approaches, such as cell and gene therapies, and the practical challenges of translating these innovations from the laboratory into safe, effective, and accessible treatments for patients. In practice, we often see promising discoveries slowed not by scientific limitations, but by gaps in infrastructure, manufacturing capacity, and clinical translation pathways.

From this perspective, this legislation is both timely and essential. Cell and gene therapies represent a transformative shift in medicine, with the potential to deliver durable or curative treatments for patients with rare and currently untreatable diseases. However, realizing this promise requires coordinated investment across multiple domains, including research infrastructure, clinical trial capacity, biomanufacturing, workforce development, and equitable delivery systems.

HF4064 appropriately recognizes that innovation does not occur in isolation. The bill's focus on assessing Minnesota's current capabilities in clinical research, biomanufacturing, health system readiness, workforce capacity, and regulatory and reimbursement frameworks reflect the complexity of translating these therapies into real-world patient benefit. Equally important is its emphasis on health equity, ensuring that patients in rural and underserved communities can access these advanced therapies.

Minnesota is uniquely positioned to lead in this space. With world-class academic institutions, healthcare systems, and a growing biotechnology ecosystem, the state already has a strong foundation. This study will provide a critical roadmap to align these strengths, identify gaps, and position Minnesota as a national leader in cell and gene therapy innovation, clinical delivery, and economic development.

Importantly, this effort will help ensure that patients with rare diseases, many of whom currently have limited or no treatment options, can benefit from these advances. By proactively addressing barriers to development, access, and implementation, this legislation will accelerate the translation of scientific breakthroughs into meaningful improvements in patient care.

I strongly urge you to support HF4064 / SF4189 as a forward-looking investment in both the health of Minnesotans and the state's leadership in biomedical innovation.

Thank you for your consideration.

Sincerely,

Eric Rahrmann, PhD
Assistant Professor
Scientific Advisor Microscopy & Histology
Chair of the Minnesota Metastasis Research Network
The Hormel Institute, University of Minnesota

[1] https://www.biospace.com/article/fda-braces-for-looming-boom-in-cell-and-gene-therapy-submissions/
[2] https://www.cell.com/molecular-therapy-family/methods/fulltext/S2329-0501(23)00077-3

The Hormel Institute

Robert Clarke, PhD
Executive Director
The Hormel Institute, University of Minnesota

March 20, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and Members of the Committee:

I am writing to express my strong support for the bill HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in emerging treatments such as gene and cell therapy to treat rare diseases. This study would assess the State's current capacity for rare disease gene and cell therapies research, development, production capabilities and access to novel treatments for patients. This bill would also identify strategies and bottlenecks to support innovations and remove obstacles for moving emerging treatments from the research lab to the clinic.

I am the Executive Director of The Hormel Institute and Professor, Biochemistry, Molecular Biology and Biophysics at University of Minnesota. I lead my colleagues and work every day to advance biomedical discoveries so that everyone can enjoy greater health and longer lives. I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of innovative approaches to support these who suffer from devastating and untreatable diseases.

Sincerely,

Robert Clarke, PhD, DSc, FRSBiol, FRSChem, FRSMed (UK)*
Executive Director, The Hormel Institute
I J Holton Chair in Cancer Research
Professor of Biochemistry, Molecular Biology and Biophysics; University of Minnesota
clarker@umn.edu

**FRSMed is not a medical qualification; Dr. Clarke is also an AAAS Fellow*

UNIVERSITY OF MINNESOTA
Twin Cities Campus

Kate Adamala
Associate Professor, McKnight Presidential Fellow
University of Minnesota, Department of Genetics, Cell Biology, and Development
5-128 MCB, 420 Washington Ave SE, Minneapolis, MN
protobiology.org, kadamala@umn.edu

March 20, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express support for HF4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access and would identify strategies to support innovations in rare disease, cell and gene therapy research, development, delivery, and access, all of which are essential to moving this field from the research lab to the clinic.

I am an associate professor at the University of Minnesota. My work focuses on developing technologies that enable safe and effective use of molecular biology for practical applications.

Cutting-edge synthetic biology, especially synthetic cell engineering and AI-assisted research, directly aligns with and can accelerate goals outlined in SF 4189.

Synthetic cell systems can serve as safer, modular platforms for gene delivery and therapeutic function, reducing manufacturing complexity and enabling scalable, standardized biomanufacturing, which is an area explicitly highlighted in the bill. Meanwhile, AI-driven design tools can dramatically shorten the design–build–test cycle for gene circuits, delivery vectors, and cell therapies, improving success rates in clinical translation and lowering costs. This addresses both economic and access barriers noted in the legislation. AI can also optimize clinical trial design, patient stratification (especially critical for rare diseases), and regulatory evidence generation, supporting the bill’s emphasis on clinical capacity and policy alignment.

Together, synthetic biology and machine learning assisted bioengineering form a feedback loop: we design better biological systems, to generate better data, positioning Minnesota to lead in precisely the innovation ecosystem (research, manufacturing, workforce, and equitable deployment) that the bill seeks to cultivate.

For the state of Minnesota, investing in cutting-edge synthetic biology, the technologies that enable innovation and implementation of gene therapies, can translate into tangible economic, healthcare, and workforce advantages.

First, it can position Minnesota as a national hub for next-generation biomanufacturing, attracting startups, pharmaceutical companies, and venture capital, and strengthening existing institutions like the Mayo Clinic and the University of Minnesota. For example, synthetic cell platforms and AI-driven design reduce development timelines and costs, making it more feasible for local companies to bring advanced therapies from concept to clinic within the state.

Second, these technologies can improve healthcare outcomes for Minnesotans, by enabling more precise, personalized treatments, particularly for rare diseases and conditions with limited options. It would also be possible to lower costs over time, through scalable production.

Third, building expertise in AI-biology integration and cutting edge biology innovation creates high-skill jobs (computational biology, bioprocess engineering, regulatory science) and modernizes the workforce pipeline, aligning education with emerging industry needs.

Finally, by leading in this space, Minnesota can shape regulatory frameworks, ethical standards, and equitable access models, ensuring that innovation benefits both urban centers and rural communities across the state. By targeted development of capacities in this fast growing field, we could become a leader and a model for other states.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of innovation that will improve the lives of Minnesotans, and consequently all Americans.

Yours sincerely,

Kate Adamala

MINNESOTA
RARE DISEASE ADVISORY COUNCIL

March 23, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 – Study on advancing cell and gene therapy for rare diseases

Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express my support for HF4064/SF4189, which directs the Commissioner of Health to evaluate how Minnesota can strengthen innovation in cell and gene therapy for rare diseases. This study would assess the state's current capacity across research, development, delivery, and patient access, and identify strategies to accelerate progress from discovery to clinical implementation.

I am a biomedical scientist focused on the translational application of patient-specific models for rare genetic diseases. My work integrates functional assays, computational approaches, and therapeutic testing, including gene therapy, CRISPR-based genome editing, and drug repurposing, to understand disease mechanisms and evaluate treatment strategies.

Through this work, I have seen firsthand the growing gap between rapid scientific advances and the ability to deliver these therapies at scale. While the tools to develop transformative treatments exist, infrastructure, workforce, regulatory alignment, and coordination across sectors often limit their impact. A comprehensive, state-level assessment is critical to identifying these gaps and creating a more cohesive pathway from research to patient care.

Minnesota is well positioned to lead in this space, given its strong academic medical centers, biotechnology ecosystem, and history of innovation. This study represents an important step toward aligning these strengths and ensuring that patients with rare diseases can benefit from emerging therapies in a timely and equitable way.

I urge you to support HF4064/SF4189 as a key step in advancing cell and gene therapy innovation and improving outcomes for patients and families affected by rare diseases.

Sincerely,

Laura J. Lambert, PhD
Director, Mayo Clinic Functional Omics Resource
Associate Consultant
Assistant Professor
Physiology and Biomedical Engineering
Biochemistry and Molecular Biology
Clinical Genomics
Pediatrics

[1] https://www.biospace.com/article/fda-braces-for-looming-boom-in-cell-and-gene-therapy-submissions/
[2] https://www.cell.com/molecular-therapy-family/methods/fulltext/S2329-0501(23)00077-3

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Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express support for HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. I am writing this on behalf of myself and do not necessarily represent my institution.

This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access and would identify strategies to support innovations in rare disease, cell and gene therapy research, development, delivery, and access, all of which are essential to moving this field from the research lab to the clinic.

As a nutrition researcher and registered dietitian, I see firsthand how rare diseases often impose extreme metabolic demands and restrictive dietary burdens on patients. While medical nutrition therapy is currently our primary tool for managing many of these conditions, it is often a lifelong maintenance strategy rather than a cure. Supporting HF 4064 is vital because it addresses the systemic infrastructure needed to move beyond management toward correction. This study will help clinicians understand the link between bench research and clinical application and ensure that Minnesota's healthcare system is prepared to handle the complex monitoring required to make cell and gene therapies safe, accessible, and effective for the rare disease community.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of

Sincerely,

Annie Lin, PhD RD
Assistant Professor | The Hormel Institute
University of Minnesota

[1] https://www.biospace.com/article/fda-braces-for-looming-boom-in-cell-and-gene-therapy-submissions/
[2] https://www.cell.com/molecular-therapy-family/methods/fulltext/S2329-0501(23)00077-3

UNIVERSITY OF MINNESOTA

Research and Innovation Office

The Hormel Institute
801-16th Avenue N.E.
Austin, MN 55912
Office: 507-433-8804
Fax: 507-437-9606

March 20, 2026
To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in gene and cell therapy for rare diseases, report required, and money appropriated.

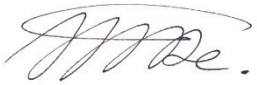
Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express my strongest and unequivocal support for the bill HF 4064 which would direct the Commissioner of Health to identify ways in which the State of Minnesota can support innovations in emerging treatments such as gene and cell therapy for the treatment of rare diseases. This study will assess the State-wide capacity for gene and cell therapies research, bio-production capabilities and accessibility of novel treatments for patients. This bill will also identify approaches and holdups for moving emerging treatments from the research labs to bedside.

I am a Professor at the Hormel Institute University of Minnesota. I have worked in the field of gene therapy for 25 years and I witnessed progress in the field that saved many lives and reduced burden on patients and their families.

I urge you to support HF4064 as a crucial step in ensuring that the State of Minnesota stays at the forefront of innovative approaches and help researchers and medical professionals to give patients with rare diseases a fighting chance against these currently uncurable diseases. Do not hesitate to reach out with any additional information required.

Sincerely,



George Aslanidi, Ph.D.
Professor of Molecular Bioengineering
gaslanid@umn.edu| office: 507-437-9622 | lab: 507-355-5222
Administrative Assistant Jess Hader: hader020@umn.edu

March 20, 2026

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I am a Professor in the Department of Genetics, Cell Biology and Development and the Center for Genome Engineering at the University of Minnesota. I've worked on the development of cell and gene therapies for rare diseases for over 40 years.

The University of Minnesota is a world-leading center for the treatment of rare diseases. Patients with lysosomal diseases, Fanconi anemia and adrenoleukodystrophy come specifically to the University of Minnesota for treatment at our transplant center here. However, more and more there are improved treatments elsewhere arising that use genetically engineered cells. Due to lack of resources we are falling behind other locations such as California, Pennsylvania and Ohio, and as time goes on our patients will choose to go elsewhere for the most effective therapy that they can find. It is essential that we find the resources to promote the clinical application of genetically engineered cells so our patients will continue to come to Minnesota for their treatment.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of therapies for rare diseases and provide the best that modern medicine can deliver for the citizens of the State of Minnesota.

Sincerely,

R. Scott McIvor, Ph.D.
Professor of Genetics, Cell Biology and Medicine
Center for Genome Engineering
University of Minnesota Medical School

March 23, 2026

Re: Request for support for HF4064/SF4189 Commissioner of Health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required and money appropriated.

Dear Chairs Bierman and Backer and Members of the Committee,

I am writing on behalf of The Hormel Institute to express our support for HF4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery and access, all of which are essential to moving this field from the research lab to the clinic.

The Hormel Institute is a biomedical and cancer research institute located in Austin, Minnesota. Founded in 1942 by Jay C. Hormel and The Hormel Foundation, The Hormel Institute, University of Minnesota, makes scientific advancements that enhance wellbeing and extend human life. For more than 80 years, we have pursued our mission to conduct research and provide education in the biological sciences with applications in medicine and agriculture. A part of the University of Minnesota's Research and Innovation Office, The Hormel Institute partners with the region's leading biomedical research facilities, including Mayo Clinic.

We urge you to support HF4064 as a crucial step in ensuring the State of Minnesota stays at the forefront of scientific research and discovery, for the benefit of people dealing with the traumatic impact of rare diseases within our state and beyond.

On behalf of our Executive Director Dr. Robert Clarke and researchers/teams, thank you for your important service and support.

Sincerely,

Gail Dennison

Gail Dennison, MA, CFRE
Director of Development and External Relations
The Hormel Institute, University of Minnesota
gaildenn@umn.edu – 507-351-0957

UNIVERSITY OF MINNESOTA

Twin Cities Campus ***Department of Pediatrics*** ***Cancer Cardio Research Bldg***
Minneapolis, MN 55455
E-mail: mori0164@umn.edu

March 20th, 2026

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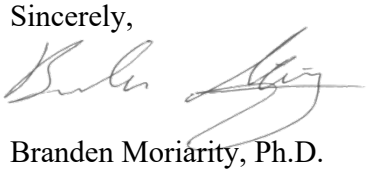
My name is Branden Moriarity, and I am currently a Tenured Associate Professor in the Department of Pediatrics at the University of Minnesota (UMN). The focus of my laboratory is to develop and translate novel therapies cell and gene therapies for cancer and rare genetic diseases. The research environment in my laboratory is rather rigorous, with the goal of pushing projects forward at 'warp speed'. In fact, our work has led to the initiation of 6 clinical trials (*NCT03320330, NCT05312801, NCT05546723 NCT05566223, NCT04426669, and NCT06340750*) in just 10 years, with many more nearing the clinic imminently. Related to this rare disease therapies, we have been developing platform technologies for the treatment of enzymopathies (Mucopolysaccharidosis, Batten, and others), Fanconi anemia, and severe combined immunodeficiencies. Although each rare disease afflicts few Minnesotans, in total they are highly prevalent, and many do not have approved or efficacious therapies. As many of our highly promising projects are laser focused on development with clinical translation, there is an urgent need for state funding to support novel and innovative cell and gene therapies to treat rare diseases. Federal funding is very limited in its support of this type of research and translation funding for this type of work is near non-existent.

As a born, raised (Faribault, MN), and educated (St. Olaf College-BA/UMN-PhD) Minnesotan now developing and translating cell and gene therapies to treat Minnesotans, I strongly urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of innovations in cell and gene therapy to treat rare diseases.

Sincerely,



Branden Moriarity, Ph.D.
Associate Professor
Department of Pediatrics
McKnight Land-Grant Professor
Weist Family Chair in Pediatric Cancer Research
Co-director, Center for Genome Engineering
Co-director, Genome Engineering Shared Resource
Member, Masonic Cancer Center
Member, Center for Genome Engineering
Member, Stem Cell Institute
University of Minnesota

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RARE DISEASE ADVISORY COUNCIL

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I am Mark Schneider, Grandfather of Helen Born, who was diagnosed with CLN2 Batten's Disease on March 10, 2025. This is a very cruel degenerative disease with no cure. We have formed a foundation, Helen's Pink Sky Foundation, to fast-track research to find better treatments and a cure. One of the research teams we are funding is the "Center for Genome Engineering", Moriarity Labs, University of Minnesota. www.hope4helen.org

Gene editing / therapy is one possible way of curing this cruel disease. We are also funding Latus Bio, a research company studying gene editing for CLN2 Battens Disease and Children's Hospital of Philadelphia (CHOP) to research ocular issues associated with CLN2 Batten's.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of gene therapy in hopes of giving my Granddaughter and all rare disease children and chance at a better quality of life.

Sincerely,

Mark Schneider
President, Helen's Pink Sky Foundation

[1] https://www.biospace.com/article/fda-braces-for-looming-boom-in-cell-and-gene-therapy-submissions/
[2] https://www.cell.com/molecular-therapy-family/methods/fulltext/S2329-0501(23)00077-3

UNIVERSITY OF MINNESOTA
Driven to Discover®

To: House Health Finance and Policy Committee March 20, 2026

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and members of the Committee:

Joseph Skeate here. I am writing to express my *deepest* support for HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare and ultra-rare diseases. I am writing this to express my personal support as I do not represent the University of Minnesota as an institution.

As of now, there is a critical gap in the support to bring next generation therapies into the clinic that can directly cure or greatly improve the life expectancy and outlook of individuals that have historically been underserved by advances in medical science. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access, and would identify strategies to support innovations in rare disease, ultra-rare disease, cell and gene therapy research, development, delivery, and access, all of which are essential to moving this field from the research lab to the clinic. Furthermore, by leading the charge in this area of support, Minnesota can again demonstrate its leadership in the scientific community and medicine to the rest of the country.

I am a recently appointed assistant professor in the Department of Pediatrics at the University of Minnesota Medical School that is dedicating my research career in developing novel treatments for rare pediatric diseases including cancers (osteosarcoma, rhabdomyosarcoma, and neurofibromatosis-associated malignancies), inborn errors of immunity, and devastating lysosomal storage disorders that lead to terminal neurodegenerative conditions in children before they reach the age of 10. These approaches include both autologous and off-the-shelf therapies for cancer and lysosomal storage disorders as well as next generation genome editing strategies to correct mutations that lead to immune system development. I specifically am dedicated to using non-viral approaches that are scalable to rare-disease populations and can easily lead to rapid translation and significantly reduced costs over currently approved methods. My ultimate goal is to democratize future cell and gene therapies so that families of all socioeconomic statuses can receive next generation treatments to cure and extend lives.

As an example of this, a single year of enzyme replacement therapy for CLN2 Batten disease (Brinurea/Cerliponase Alfa) costs over $800,000 for the drug alone and needs to be delivered directly to the central nervous system (CNS) every two weeks for the life of a patient (https://www.ncbi.nlm.nih.gov/books/NBK544831/). This administration has significant risks as the patient is required to be sedated and has an open reservoir to the CNS, significantly reducing the overall quality of life for a developing child. Furthermore, given the kinetics of purified drug clearance, this approved therapy is non-curative and only slows neurodegeneration and disease progression. My group is working to develop a cellular therapy that can use the patients' cells as natural and long-lived producers of this ERT that would run just over $200,000 to manufacture multiple doses per patient. This would not only provide a low-cost personalized medicine that can be cryopreserved and re-dosed, but provide sustained ERT for possibly decades as engineered human T cells have shown decades long survival in seminal studies (https://pubmed.ncbi.nlm.nih.gov/35110735/). These *significant* reductions in cost are directly related to moving towards non-viral methods of genome engineering, which is a field Minnesota is proudly seen as both a pioneer and leader in. For more detailed information, please see my previous paper outlining the creation of a non-viral engineering pipeline for primary immune cells (https://pubmed.ncbi.nlm.nih.gov/38627969/). To make trials for this type of therapy possible, however, we will need support for the space between proof of concept and clinical trial initiation.

I urge you to support HF4064 as a crucial step in ensuring that the state of Minnesota stays at the forefront of medicine and healthcare policies.

Sincerely,

Joseph J Skeate

Joseph Skeate, PhD
Assistant Professor
Department of Pediatrics
University of Minnesota – Twin Cities

MINNESOTA
RARE DISEASE ADVISORY COUNCIL

March 23, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 Commissioner of health directed to study and report on activities to support innovations in cell and gene therapy to treat rare diseases, report required, and money appropriated.

Dear Chairs Bierman and Backer and members of the Committee:

I am writing to express my deepest support for HF 4064 which would direct the Commissioner of Health to study ways in which the State of Minnesota can support innovations in cell and gene therapy to treat rare diseases. This study would assess the state's current capacity for rare disease cell and gene therapy research, development, delivery, and access and would identify strategies to support innovations in rare disease, cell and gene therapy research, development, delivery, and access, all of which are essential to moving this field from the research lab to the clinic.

I am the Principal Scientist at Imanis Life Sciences Rochester, MN, the company which develops advanced immune therapies to treat oncology diseases. We as scientists aware that each rare disease affects a small population, but all together they affect around 30 million people in the United States, which equates to roughly 1 in 10 Americans. That is why it is so important to support this initiative which can potentially advance the accessibility of these emerging treatments to the broader public. I am very proud that I am a resident of the first state which recognizes that these emerging therapies are of utmost importance. Please help me to make it reality by supporting this HF4064.

Sincerely,

Karina Krotova, Ph. D.
Principal Scientist

Imanis Life Sciences
2900 37th Street NW, Building 110
Rochester, MN 55901
507.218.2559
krotova.karina@imanislife.com

March 23, 2026

To: House Health Finance and Policy Committee

Re: Support for HF4064/SF4189 — Commissioner of Health Directed to Study and Report on Activities to Support Innovations in Cell and Gene Therapy to Treat Rare Diseases

Dear Chairs Bierman and Backer and members of the Committee:

I am writing on behalf of Kommodo Therapeutics — a Minnesota-based biotechnology startup developing cutting-edge gene therapies for rare pediatric diseases — to express strong support for HF4064/SF4189. This bill hits close to home for us. Kommodo was founded at the University of Minnesota and is currently advancing a first-in-class T-cell gene therapy toward clinical trials for MPS-I (mucopolysaccharidosis type I), a devastating rare disease that destroys organs and takes the lives of children. Minnesota is where this therapy was conceived, developed, and will be first tested in patients. HF4064 is exactly the kind of forward-looking policy that will determine whether it — and therapies like it — stay here.

The study directed by this bill would assess Minnesota's current capacity for rare disease cell and gene therapy research, development, delivery, and access, and identify concrete strategies to strengthen each link in that chain. This scope matters because the problem isn't any single gap — it's the entire journey from lab to patient. Minnesota has extraordinary scientific assets: the University of Minnesota MPS Clinic is one of the premier centers in the world for MPS diagnosis and treatment, attracting families from across the country and internationally. UMN pioneered bone marrow transplantation as a treatment for MPS — work that established Minnesota's international reputation in rare disease medicine and directly seeded the next generation of therapies being developed by companies like Kommodo today. HF4064 would ensure that reputation translates into a durable competitive advantage, not just a legacy.

The timing is urgent. The FDA recently launched a new accelerated framework for individualized gene therapies for ultra-rare diseases — and the federal Cell and Gene Therapy Access Model is already reshaping how states pay for these treatments. Minnesota needs a strategic plan to position itself now: to attract investment, support homegrown startups, develop the manufacturing and regulatory infrastructure these therapies require, and ensure that Minnesota patients have access to therapies developed in their own state. The feasibility study this bill funds is the essential first step in building that plan.

Cell and gene therapy is one of the fastest-growing sectors in biopharmaceuticals. Minnesota's combination of world-class university research, a strong clinical infrastructure, and an emerging startup ecosystem — anchored by UMN's rare disease expertise — positions this state to lead nationally. But leadership has to be chosen and supported. HF4064 makes that choice. We urge you to pass it.

Sincerely,

Jeff Liter

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Note: This letter is submitted on behalf of Kommodo Therapeutics. The views expressed are those of Kommodo Therapeutics and do not necessarily represent the views of the University of Minnesota or any affiliated institution.