I

119TH CONGRESS
1ST SESSION

H. R. _____

To extend the Gabriella Miller Kids First Pediatric Research Program at the National Institutes of Health, to require government co-ownership of any resulting intellectual property, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

January 20, 2025

Mr./Ms._____ introduced the following bill; what was referred to the Committee on Health, Education, Labor, and Pensions.

A BILL

To extend the Gabriella Miller Kids First Pediatric Research Program at the National Institutes of Health, to require government co-ownership of any resulting intellectual property, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Give Kids a Fighting Chance: Taxpayer Funded Research & Co-Ownership Act".

SEC. 2. PURPOSE.

The purpose of this Act is to fund research to uncover insights into the biology of childhood cancer, including the discovery of shared genetic pathways between these disorders, while ensuring the government retains part ownership of the resulting intellectual property and patents to keep medical costs down for Medicaid recipients and low-income families.

SEC. 3. FUNDING FOR THE PEDIATRIC RESEARCH INITIATIVE.

The Public Health Service Act (42 U.S.C. 201 et seq.) is amended—

(1) in section 402A(a)(2) (42 U.S.C. 282a(a)(2))—

(A) in the heading—

(i) by striking "10-year"; and

(ii) by striking "through Common Fund";

(B) by striking "to the Common Fund" and inserting "to the Division of Program Coordination, Planning, and Strategic Initiatives";

(C) by striking "10-Year";

(D) by striking "and reserved under subsection (c)(1)(B)(i) of this section"; and

(E) by striking "2014 through 2023" and inserting "2025 through 2029";

(2) in each of paragraphs (1)(A) and (2)(C) of section 402A(c) (42 U.S.C. 282a(c)), by striking "section 402(b)(7)(B)" and inserting "section 402(b)(7)(B)(i)"; and

(3) in section 402(b)(7)(B)(ii) (42 U.S.C. 282(b)(7)(B)(ii)), by striking "the Common Fund" and inserting "the Division of Program Coordination, Planning, and Strategic Initiatives".

(4) by amending 42 U.S.C. 282(a) adding the following section:

(e) NIH Co-Ownership of Intellectual Property

(i) Grants awarded through the Pediatric Research Initiative Fund will retain 50% ownership of any resulting intellectual property and/or patents that may arise upon the development of a novel drug,

biologic, or novel indicated use of an existing drug or biologic.

(ii) Revenue generated from any resulting intellectual property shall be used to subsidize the cost of the drug or biologic to Medicaid and qualified low-income patients.

SEC. 4. RESEARCH INTO PEDIATRIC CANCER DRUGS; ADDITIONAL AUTHORITIES OF FOOD AND DRUG ADMINISTRATION REGARDING MOLECULARLY TARGETED CANCER DRUGS.

(a) In General.

(1) ADDITIONAL ACTIVE INGREDIENT FOR APPLICATION DRUG; LIMITATION REGARDING NOVEL COMBINATION APPLICATION DRUG.—Section 505B(a)(3) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(a)(3)) is amended—

(A) by redesignating subparagraphs (B) and (C) as subparagraphs (C) and (D), respectively; and

(B) by striking subparagraph (A) and inserting the following:

"(A) IN GENERAL.—For purposes of paragraph (1)(B), the investigation described in this paragraph is a molecularly targeted pediatric cancer investigation of—

"(i) the drug or biological product for which the application referred to in such paragraph is submitted; or

"(ii) such drug or biological product used in combination with—

"(I) an active ingredient of a drug or biological product—

"(aa) for which an approved application under section 505(j) under this Act or under section 351(k) of the Public Health Service Act is in effect; and

‘‘(bb) that is determined by the Secretary, after consultation with the applicant, to be part of the standard of care for treating a pediatric cancer; or

“(II) an active ingredient of a drug or biological product—

“(aa) for which an approved application under section 505(b) of this Act or section 351(a) of the Public Health Service Act to treat an adult cancer is in effect and is held by the same person submitting the application under paragraph (1)(B); and

‘‘(bb) that is directed at a molecular target that the Secretary determines to be substantially relevant to the growth or progression of a pediatric cancer.

‘‘(B) ADDITIONAL REQUIREMENTS.—

‘‘(i) DESIGN OF INVESTIGATION.—A molecularly targeted pediatric cancer investigation referred to in subparagraph (A) shall be designed to yield clinically meaningful pediatric study data that is gathered using appropriate formulations for each age group for which the study is required, regarding dosing, safety, and preliminary efficacy to inform potential pediatric labeling.

‘‘(ii) LIMITATION.—An investigation described in subparagraph (A)(ii) may be required only if the drug or biological product for which the application referred to in paragraph (1)(B) contains either—

‘‘(I) a single new active ingredient; or

‘‘(II) more than one active ingredient, if an application for the combination of active ingredients

has not previously been approved but each active ingredient is in a drug product that has been previously approved to treat an adult cancer.

''(iii) RESULTS OF ALREADY COMPLETED PRECLINICAL STUDIES OF APPLICATION DRUG.—With respect to an investigation required pursuant to paragraph (1)(B), the Secretary may require the results of any completed preclinical studies relevant to the initial pediatric study plan be submitted to the Secretary at the same time that the initial pediatric study plan required under subsection (e)(1) is submitted.

''(iv) RULE OF CONSTRUCTION REGARDING INACTIVE INGREDIENTS.—With respect to a combination of active ingredients referred to in subparagraph (A)(ii), such subparagraph shall not be construed as addressing the use of inactive ingredients with such combination.''.

(2) DETERMINATION OF APPLICABLE REQUIREMENTS.—Section 505B(e)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(e)(1)) is amended by adding at the end the following: ''The Secretary shall determine whether subparagraph (A) or (B) of subsection (a)(1) applies with respect to an application before the date on which the applicant is required to submit the initial pediatric study plan under paragraph (2)(A).''.

(3) CLARIFYING APPLICABILITY.—Section 505B(a)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(a)(1)) is amended by adding at the end the following:

''(C) RULE OF CONSTRUCTION.—No application that is subject to the requirements of subparagraph (B) shall be subject to the requirements of subparagraph (A), and no

application (or supplement to an application) that is subject to the requirements of subparagraph (A) shall be subject to the requirements of subparagraph (B).''.

(4) CONFORMING AMENDMENTS.—Section 505B(a) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(a)) is amended—

(A) in paragraph (3)(C), as redesignated by paragraph (1)(A) of this subsection, by striking ''investigations described in this paragraph'' and inserting "investigations referred to in subparagraph (A)''; and

(B) in paragraph (3)(D), as redesignated by paragraph (1)(A) of this subsection, by striking ''the assessments under paragraph (2)(B)'' and inserting ''the assessments required under paragraph (1)(A)''.

(b) GUIDANCE.—The Secretary of Health and Human Services, acting through the Commissioner of Food and Drugs, shall—

(1) not later than 12 months after the date of enactment of this Act, issue draft guidance on the implementation of the amendments made by subsection (a); and

(2) not later than 12 months after closing the comment period on such draft guidance, finalize such guidance.

(c) APPLICABILITY.—The amendments made by this section apply with respect to any application under section 505(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(b)) and any application under section 351(a) of the Public Health Service Act (42 U.S.C. 262(a)), that is submitted on or after the date that is 3 years after the date of enactment of this Act.

(d) REPORTS TO CONGRESS.—

(1) SECRETARY OF HEALTH AND HUMAN SERVICES.—Not later than 6 years after the date of enactment of this Act, the Secretary of Health and Human Services shall submit to the Committee on Energy and Commerce of the House of Representatives and the

Committee on Health, Education, Labor, and Pensions of the Senate a report on the Secretary's efforts, in coordination with industry, to ensure implementation of the amendments made by subsection (a).

(2) GAO STUDY AND REPORT.—

(A) STUDY.—Not later than 8 years after the date of enactment of this Act, the Comptroller General of the United States shall conduct a study of the effectiveness of requiring assessments and investigations described in section 505B of the Federal Food, Drug, and Cosmetic Act (21 U.S.C.355c), as amended by subsection (a), in the development of drugs and biological products for pediatric cancer indications, including consideration of any benefits to, or burdens on, pediatric cancer drug development.

(B) FINDINGS.—Not later than 10 years after the date of enactment of this Act, the Comptroller General shall submit to the Committee on Energy and Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate a report containing the findings of the study conducted under subparagraph (A).

SEC. 5. ENSURING COMPLETION OF PEDIATRIC STUDY REQUIREMENTS.

(a) EQUAL ACCOUNTABILITY FOR PEDIATRIC STUDY REQUIREMENTS.—Section 505B(d) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(d)) is amended—

(1) in paragraph (1), by striking ''Beginning 270'' and inserting ''NONCOMPLIANCE LETTER.— Beginning 270'';

(2) in paragraph (2)—

(A) by striking ''The drug or'' and inserting ''EFFECT OF NONCOMPLIANCE.—The drug or''; and

(B) by striking ''(except that the drug or biological product shall not be subject to action under section 303)'' and inserting ''(except that the drug or biological product shall be subject to action under section 303 only if such person

demonstrated a lack of due diligence in satisfying the applicable requirement)''; and

(3) by adding at the end the following:

''(3) LIMITATION.—The Secretary shall not issue enforcement actions under section 303 for failures under this subsection in the case of a drug or biological product that is no longer marketed.''.

(b) DUE DILIGENCE.—Section 505B(d) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355c(d)), as amended by subsection (a), is further amended by adding at the end the following:

''(4) DUE DILIGENCE.—Before the Secretary may conclude that a person failed to submit or otherwise meet a requirement as described in the matter preceding paragraph (1), the Secretary shall—

''(A) issue a noncompliance letter pursuant to paragraph (1);

''(B) provide such person with a 45-day period beginning on the date of receipt of such noncompliance letter to respond in writing as set forth in such paragraph; and

''(C) after reviewing such written response, determine whether the person demonstrated a lack of due diligence in satisfying such requirement.''.

(c) Conforming Amendments.—Section 303(f)(4)(A) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 333(f)(4)(A)) is amended by striking ''or 505– 1'' and inserting ''505–1, or 505B''.

(d) TRANSITION RULE.—The Secretary of Health and Human Services may take enforcement action under section 303 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 333) only for failures described in section 505B(d) of such Act (21 U.S.C. 355c(d)) that occur on or after the date that is 180 days after the date of enactment of this Act.

SEC. 6. FDA REPORT ON PREA ENFORCEMENT.

Section 508(b) of the Food and Drug Administration Safety and Innovation Act (21 U.S.C. 355c–1(b)) is amended—

(1) in paragraph (11), by striking the semicolon at the end and inserting ‘‘, including an evaluation of compliance with deadlines provided for in deferrals and deferral extensions;’’;

(2) in paragraph (15), by striking ‘‘and’’ at the end;

(3) in paragraph (16), by striking the period at the end and inserting ‘‘; and’’; and

(4) by adding at the end the following:

‘‘(17) a listing of penalties, settlements, or payments under section 303 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 353) for failure to comply with requirements under such section 505B, including, for each penalty, settlement, or payment, the name of the drug, the sponsor thereof, and the amount of the penalty, settlement, or payment imposed; and’’.

SEC. 7. EXTENSION OF AUTHORITY TO ISSUE PRIORITY REVIEW VOUCHERS TO ENCOURAGE TREATMENTS FOR RARE PEDIATRIC DISEASES.

(a) EXTENSION.—Paragraph (5) of section 529(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff(b)) is amended by striking ‘‘December 20, 2024, un- less’’ and all that follows through the period at the end and inserting ‘‘September 30, 2029.’’.

(b) USER FEE PAYMENT.—Section 529(c)(4) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff(c)(4)) is amended by striking subparagraph (A) and inserting the following:

‘‘(A) IN GENERAL.—The priority review user fee required by this subsection shall be due upon the submission of a human drug application under section 505(b)(1) or section 351(a) of the Public Health Service Act for which the priority review voucher is used. All other user fees associated with the human drug application shall be due as required by the Secretary or under applicable law.’’.

(c) GAO REPORT ON EFFECTIVENESS OF RARE PEDIATRIC DISEASE PRIORITY VOUCHER AWARDS IN INCENTIVIZING RARE PEDIATRIC DISEASE DRUG DEVELOPMENT.—

(1) GAO STUDY.—

(A) STUDY.—The Comptroller General of the United States shall conduct a study of the effectiveness of awarding rare pediatric disease priority vouchers under section 529 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff), as amended by subsection (a), in the development of human drug products that treat or prevent rare pediatric diseases (as defined in such section 529).

(B) CONTENTS OF STUDY.—In conducting the study under subparagraph (A), the Comptroller General shall examine the following:

(i) The indications for each drug or biological product that—

(I) is the subject of a rare pediatric disease product application (as defined in section 529 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff)) for which a priority review voucher was awarded; and

(II) was approved under section 505 of the Federal Food, Drug, and Cosmetic Act (42 U.S.C. 355) or licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).

(ii) Whether, and to what extent, an unmet need related to the treatment or prevention of a rare pediatric disease was met through the approval or licensure of such a drug or biological product.

(iii) The size of the company to which a priority review voucher was awarded under section 529 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff) for such a drug or biological product.

(iv) The value of such priority review voucher if transferred.

(v) Identification of each drug for which a priority review voucher awarded under such section 529 was used.

(vi) The size of the company using each priority review voucher awarded under such section 529.

(vii) The length of the period of time between the date on which a priority review voucher was awarded under such section 529 and the date on which it was used.

(viii) Whether, and to what extent, an unmet need related to the treatment or prevention of a rare pediatric disease was met through the approval under section 505 of the Federal Food, Drug, and Cosmetic Act (42 U.S.C. 355) or licensure under section 351 of the Public Health Service Act (42 U.S.C. 262) of a drug for which a priority review voucher was used.

(ix) Whether, and to what extent, companies were motivated by the availability of priority review vouchers under section 529 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360ff) to attempt to develop a drug for a rare pediatric disease.

(x) Whether, and to what extent, pediatric review vouchers awarded under such section were successful in stimulating development and expedited patient access to drug products for treatment or prevention of a rare pediatric disease that wouldn't otherwise take place without the incentive provided by such vouchers.

(xi) The impact of such priority review vouchers on the workload, review process, and public health prioritization efforts of the Food and Drug Administration.

(xii) Any other incentives in Federal law that exist for companies developing drugs or biological products described in clause (i).

(2) REPORT ON FINDINGS.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General of the United

States shall submit to the Committee on Energy and Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate a report containing the findings of the study conducted under paragraph (1).

SEC. 8. LIMITATIONS ON EXCLUSIVE APPROVAL OR LICENSURE OF ORPHAN DRUGS.

(a) IN GENERAL.—Section 527 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360cc) is amended—

(1) in subsection (a), in the matter following paragraph (2), by striking ''same disease or condition'' and inserting ''same approved use or indication within such rare disease or condition'';

(2) in subsection (b)—

(A) in the matter preceding paragraph (1), by striking ''same rare disease or condition'' and inserting ''same approved use or indication for which such 5-year period applies to such already approved or licensed drug''; and

(B) in paragraph (1), by inserting '', relating to the approved use or indication,'' after "the needs";

(3) in subsection (c)(1), by striking ''same rare disease or condition as the already approved drug'' and inserting ''same use or indication for which the already approved or licensed drug was approved or licensed''; and

(4) by adding at the end the following:

''(f) APPROVED USE OR INDICATION DEFINED.—In this section, the term 'approved use or indication' means the use or indication approved under section 505 of this Act or licensed under section 351 of the Public Health Service Act for a drug designated under section 526 for a rare disease or condition.''.

(b) APPLICATION OF AMENDMENTS.—The amendments made by subsection (a) shall apply with respect to any drug designated under section 526 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bb), regardless of the date on which the drug was so designated, and regardless of

the date on which the drug was approved under section 505 of such Act (21 U.S.C. 355) or licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).