



Bennet—S. 934—Amendment #2

AMENDMENT NO. _____ Calendar No. _____

Purpose: To increase the development of new drugs to treat pediatric cancers.

IN THE SENATE OF THE UNITED STATES—115th Cong., 1st Sess.

S. 934

To amend the Federal Food, Drug, and Cosmetic Act to revise and extend the user-fee programs for prescription drugs, medical devices, generic drugs, and biosimilar biological products, and for other purposes.

Referred to the Committee on _____ and
ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Mr. BENNET

Viz:

1 At the end of title V, insert the following:

2 **SEC. 505. DEVELOPMENT OF DRUGS AND BIOLOGICAL**
3 **PRODUCTS FOR PEDIATRIC CANCERS.**

4 (a) MOLECULAR TARGETS REGARDING CANCER
5 DRUGS.—Section 505B of the Federal Food, Drug, and
6 Cosmetic Act (21 U.S.C. 355c) is amended—

7 (1) in subsection (a)—

8 (A) in paragraph (2)(A)(i) by striking

9 “product for the claimed indications in all rel-

10 evant pediatric subpopulations; and” and in-

serting “product in all relevant pediatric sub-
populations—

“(I) for the claimed indications;
or”.

“(II) for one pediatric cancer in-
dication, if the drug or biological
product is—

“(aa) the subject of an origi-
nal application that is submitted
not less than 2 years after the
date of enactment of the FDA
Reauthorization Act of 2017;

“(bb) intended for the treat-
ment of an adult cancer;

“(cc) determined by sci-
entific evidence to be directed at
a molecular target, on the basis
of data the Secretary determines
to be adequate, to be germane to
the development or growth of
such pediatric cancer; and

“(dd) on the list under sub-
section (m) at the time of sub-
mission of such original applica-
tion; and”; and

1 (B) by adding at the end the following:

2 “(5) RULE OF CONSTRUCTION.—Paragraphs
3 (3) and (4) (regarding deferrals and waivers) apply
4 to the same extent and in the same manner to as-
5 sessments described in each of subclauses (I) and
6 (II) of paragraph (2)(A)(i).”;

7 (2) in subsection (b)—

8 (A) in paragraph (1)—

9 (i) by amending subparagraph (A)(i)
10 to read as follows:

11 “(A)(i) the drug or biological product is
12 used for a substantial number of pediatric pa-
13 tients—

14 “(I) for the labeled indications; or

15 “(II) for one pediatric cancer indica-
16 tion, if the drug or biological product is—

17 “(aa) the subject of an original
18 application that is submitted not less
19 than 2 years after the date of enact-
20 ment of the FDA Reauthorization Act
21 of 2017;

22 “(bb) intended for the treatment
23 of an adult cancer; and

24 “(cc) determined by scientific evi-
25 dence to be directed at a molecular

target, on the basis of data the Secretary determines to be adequate, to be germane to the development or growth of such pediatric cancer; and

“(dd) on the list under subsection (m) at the time of submission of such original application; and”; and (ii) by amending subparagraph (B) to

read as follows:

“(B) there is reason to believe that the drug or biological product would represent a meaningful therapeutic benefit over existing therapies for pediatric patients—

“(i) for 1 or more of the claimed indications; or

“(ii) for one pediatric cancer indication, if the drug or biological product is—

“(I) the subject of an original application that is submitted not less than 2 years after the date of enactment of the FDA Reauthorization Act of 2017;

“(II) intended for the treatment of an adult cancer;

1 “(III) determined by scientific
2 evidence to be directed at a molecular
3 target, on the basis of data the Sec-
4 retary determines to be adequate, to
5 be germane to the development or
6 growth of such pediatric cancer; and

7 “(IV) on the list under sub-
8 section (m) at the time of submission
9 of such original application; or”; and

10 (B) by adding at the end the following:

11 “(4) RULE OF CONSTRUCTION.—Paragraph (2)
12 (regarding waivers) applies to the same extent and
13 in the same manner to assessments required under
14 each of subclauses (I) and (II) of paragraph
15 (1)(A)(i) and assessments required under each of
16 clauses (i) and (ii) of paragraph (1)(B), respec-
17 tively.”;

18 (3) by amending paragraph (2) of subsection
19 (e) to read as follows:

20 “(2) the drug or biological product is in a class
21 of products, is for an indication, or is directed at a
22 specific molecular target in an adult cancer and such
23 molecular target is germane to the growth or pro-
24 gression of cancer in a pediatric cancer, for which
25 there is need for additional options.”; and

1 (4) by adding at the end the following:

2 “(m) LIST OF PRIMARY MOLECULAR TARGETS.—

3 “(1) IN GENERAL.—Within one year of the date
4 of enactment of the FDA Reauthorization Act of
5 2017, the Secretary shall establish and update regu-
6 larly a list of molecular targets considered, on the
7 basis of data the Secretary determines to be ade-
8 quate, to be germane to the growth and progression
9 of a pediatric cancer, and shall publish such list in
10 the Federal Register.

11 “(2) CONSULTATION.—In establishing the list
12 described in paragraph (1), the Secretary shall—

13 “(A) consult members of the internal com-
14 mittee under section 505C and the Pediatric
15 Oncology Subcommittee of the Oncologic Drugs
16 Advisory Committee; and

17 “(B) convene a public meeting not later
18 than 1 year after the date of enactment of the
19 FDA Reauthorization Act of 2017 to solicit
20 stakeholder comment on the appropriate con-
21 tents of such list and the data necessary to de-
22 termine that there is scientific evidence that a
23 drug or biological product is directed at a mo-
24 lecular target that is considered, on the basis of
25 data the Secretary determines to be adequate,

1 to be germane to the growth or progression of
2 a pediatric cancer.”.

3 (b) ORPHAN DRUGS.—Section 505B(k) of the Fed-
4 eral Food, Drug, and Cosmetic Act (21 U.S.C. 355c(k))
5 is amended to read as follows:

6 “(k) RELATION TO ORPHAN DRUGS.—

7 “(1) IN GENERAL; EXEMPTION FOR ORPHAN IN-
8 DICATIONS.—Unless the Secretary requires other-
9 wise by regulation, except as provided under para-
10 graph (2), this section does not apply to any drug
11 for an indication for which orphan designation has
12 been granted under section 526.

13 “(2) APPLICABILITY DESPITE ORPHAN DES-
14 IGNATION OF CERTAIN CANCER INDICATIONS.—This
15 section shall apply to a drug or biological product
16 has been designated under section 526 for an indica-
17 tion for a pediatric or adult cancer if such drug or
18 biological product is intended for the treatment of
19 an adult cancer and is determined by scientific evi-
20 dence to be directed at a molecular target that is
21 considered, on the basis of data the Secretary deter-
22 mines to be adequate, to be germane to the growth
23 or progression of a pediatric cancer.”.

24 (c) GUIDANCE.—Not later than 1 year after the date
25 of enactment of this Act, the Secretary of Health and

1 Human Services (referred to in this subsection as the
2 “Secretary”), acting through the Commissioner of Food
3 and Drugs and in consultation with the Pediatric Oncol-
4 ogy Advisory Committee of the Food and Drug Adminis-
5 tration, the Director of the National Cancer Institute, and
6 other appropriately identified pediatric oncology experts
7 from both the public and private sectors (including indus-
8 try and academia), shall hold a public meeting, obtain
9 public comment, and issue guidance on the implementa-
10 tion of the amendments to section 505B of the Federal
11 Food, Drug, and Cosmetic Act (21 U.S.C. 355e) made by
12 this section, including—

13 (1) the scientific criteria and regulatory consid-
14 erations for determining by scientific evidence
15 whether a drug or biological product indicated for
16 the treatment of an adult cancer is directed at a mo-
17 lecular target germane to the growth or progression
18 of a pediatric cancer;

19 (2) the scientific data, including clinical and
20 preclinical evidence, needed to determine whether a
21 molecular target is germane to the growth or pro-
22 gression of a pediatric cancer;

23 (3) the process the Secretary will use to make
24 a determination described in paragraph (2);

1 (4) how the Secretary will collaborate with pedi-
2 atric networks, academic centers, and experts in pe-
3 diatric oncology to conduct pediatric cancer studies;

4 (5) processes to ensure requirements and
5 timelines are aligned for assessments under sections
6 505A and 505B of the Federal Food, Drug, and
7 Cosmetic Act (21 U.S.C. 355a, 355c);

8 (6) scientific and regulatory considerations for
9 study designs, including the applicability of innova-
10 tive regulatory science techniques for pediatric drug
11 developments under such sections 505A and 505B;
12 and

13 (7) considerations for implementation of such
14 section 505B, as so amended, and waivers of the re-
15 quirements of such section 505B with regard to mo-
16 lecular targets for which several drugs or biological
17 products may be under investigation.

18 (d) REPORT TO CONGRESS.—Section 508(b) of the
19 Food and Drug Administration Safety and Innovation Act
20 (21 U.S.C. 355c–1(b)) is amended—

21 (1) in paragraph (10), by striking “; and” and
22 inserting “;”; and

23 (2) by striking paragraph (11) and inserting
24 the following:

1 “(11) an assessment of the impact of the
2 amendments to such section 505B made by the on
3 pediatric labeling of drugs and biological products
4 and pediatric labeling of molecularly targeted drugs
5 for the treatment of cancer;

6 “(12) an assessment of the efforts of the Sec-
7 retary to implement the plan developed under sec-
8 tion 505C-1 of the Federal Food, Drug, and Cos-
9 metic Act, regarding earlier submission of pediatric
10 studies under sections 505A and 505B of such Act
11 and section 351(m) of the Public Health Service
12 Act, including—

13 “(A) the average length of time after the
14 approval of an application under section
15 505(b)(1) of the Federal Food, Drug, and Cos-
16 metic Act (21 U.S.C. 355(b)(1)) or section
17 351(a) of the Public Health Service Act (42
18 U.S.C. 262(a)) before studies conducted pursu-
19 ant to such section 505A, 505B, or section
20 351(m) are completed, submitted, and incor-
21 porated into labeling;

22 “(B) the average length of time after the
23 receipt of a proposed pediatric study request be-
24 fore the Secretary responds to such request;

1 “(C) the average length of time after the
2 submission of a proposed pediatric study re-
3 quest before the Secretary issues a written re-
4 quest for such studies;

5 “(D) the number of written requests issued
6 for each investigational new drug or biological
7 product prior to the submission of an applica-
8 tion under section 505(b)(1) of the Federal
9 Food, Drug, and Cosmetic Act or section
10 351(a) of the Public Health Service Act; and

11 “(E) the average number, and range of
12 numbers, of amendments to written requests
13 issued;

14 “(13) a list of sponsors of applications or hold-
15 ers of approved applications who received exclusivity
16 under such section 505A or such section 351(m)
17 after receiving a letter issued under such section
18 505B(d)(1) and before the studies referred to in
19 such letter were completed and submitted;

20 “(14) a list of assessments required under sub-
21 section (a)(2)(A)(i)(II), (b)(1)(A)(i)(II), and
22 (b)(1)(B)(ii) of such section 505B; and

23 “(15) the Secretary’s assessment of the overall
24 impact of the amendments made by section 505 of
25 the FDA Reauthorization Act of 2017 on the con-

1 duct and effectiveness of pediatric cancer research
2 and the Secretary's subsequent recommendations,
3 taking into account the report described in section
4 505(g) of the FDA Reauthorization Act of 2017.”.

5 (e) RULE OF CONSTRUCTION.—Nothing in this sec-
6 tion, including the amendments made by this section, shall
7 limit the authority of the Secretary of Health and Human
8 Services to issue written requests under section 505A of
9 the Federal Food, Drug, and Cosmetic Act (21 U.S.C.
10 355a) or section 351(m) of the Public Health Service Act
11 (42 U.S.C. 262(m)).

12 (f) PROVIDING CERTAINTY REGARDING PEDIATRIC
13 STUDY PLANS.—Section 505B(e) of the Federal Food,
14 Drug, and Cosmetic Act (21 U.S.C. 355e(e)) is amend-
15 ed—

16 (1) in paragraph (3)—

17 (A) by striking “Not later” and inserting
18 the following:

19 “(A) IN GENERAL.—Not later”; and

20 (B) by adding at the end the following:

21 “(B) CHANGES TO AGREEMENT.—An
22 agreement documented and confirmed as de-
23 scribed in subparagraph (A) shall not be
24 changed with respect to a specific agreed study
25 after such study begins, except—

1 “(i) with the written agreement of the
2 applicant; or

3 “(ii) pursuant to a written decision by
4 the director of the reviewing division, that
5 a substantial scientific issue essential to
6 determining the adequacy of the pediatric
7 assessments has been identified after such
8 specific agreed study has begun, provided
9 that the Secretary provides the applicant
10 an opportunity for a meeting at which the
11 director and the applicant will be present
12 and at which the director will document
13 the scientific issue involved.”; and

14 (2) in paragraph (5), by striking the first sen-
15 tence and inserting “Subject to paragraph (3), at
16 the initiative of the Secretary or the applicant, the
17 agreed initial pediatric study plan may be amend-
18 ed.”; and

19 (3) in paragraph (6), by inserting “under para-
20 graph (5)” before the period at the end.

21 (g) GAO REPORT.—

22 (1) IN GENERAL.—Beginning on the date that
23 is 5 years after the date of enactment of this Act,
24 the Comptroller General of the United States shall
25 conduct a study of the effectiveness of requiring pe-

1 diatric assessments described in subsections
2 (a)(2)(A)(i)(II), (b)(1)(A)(i)(II) and (b)(1)(B)(ii) of
3 section 505B of the Federal Food, Drug, and Cos-
4 metic Act (21 U.S.C. 355c), as amended by this sec-
5 tion, in the development of drugs and biological
6 products for pediatric cancer indications. The Comp-
7 troller General shall examine—

8 (A) the indications studied in pediatric as-
9 sessments required for drugs or biological prod-
10 ucts intended for the treatment of an adult can-
11 cer;

12 (B) the number of pediatric cancer indica-
13 tions for which assessments have been required
14 under subsections (a)(2)(A)(i)(II),
15 (b)(1)(A)(i)(II), and (b)(1)(B)(ii) of such sec-
16 tion 505B;

17 (C) the number of requests for deferral
18 and waiver of pediatric assessments required
19 under such subsections and the number of such
20 deferral and waiver requests granted and de-
21 nied;

22 (D) the number of orphan-designated indi-
23 cations for drugs and biological products for
24 which assessments were required under such
25 subsections;

1 (E) the number of drugs and biological
2 products approved for the treatment of cancer
3 in the pediatric population for which the sup-
4 portive studies were required to be conducted
5 under such subsections; and

6 (F) any additional considerations by the
7 Secretary regarding the effectiveness of requir-
8 ing pediatric assessments described in sub-
9 sections (a)(2)(A)(i)(II), (b)(1)(A)(i)(II) and
10 (b)(1)(B)(ii) of such section 505B of the in the
11 development of drugs and biological products
12 for pediatric cancer indications.

13 (2) REPORT.—Not later than the date that is
14 6 years after the date of enactment of this Act, the
15 Comptroller General of the United States shall sub-
16 mit a report containing the results of the study
17 under paragraph (1) to the Secretary of Health and
18 Human Services, the Committee on Health, Edu-
19 cation, Labor, and Pensions of the Senate, and the
20 Committee on Energy and Commerce of the House
21 of Representatives.