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## The Medicines for the People Act

This bill creates a [public option](#) for biomedical and pharmaceutical research and development, ensuring a real alternative to Big Pharma. The National Institute for Biomedical Research and Development, as part of the National Institutes of Health, will engage in the full-cycle development of drugs, devices, and biological products to reduce drug prices, promote access to medicines, foster scientific innovation, and address public health priorities and unmet needs.

**Problem: Big Pharma relies on massive public investments while charging outrageous prices and neglecting public health priorities deemed insufficiently profitable.**

**Background:** Prescription drugs in the U.S. cost [278 percent](#) more than in other countries. Brand-name drugs cost 422 percent more. Why? The pharmaceutical industry is a Wall Street dream. Enjoying monopoly patents and concentrated markets, pharmaceutical firms are significantly more profitable than other large, public companies. But instead of investing those profits in new treatments, the industry spends more money on [stock buy-backs, dividends, and executive compensation](#) than on research and development (R&D). In fact, there is [no correlation](#) between drug companies' R&D costs and the prices they charge.

Instead of developing new, life-saving innovations, the pharmaceutical industry often tweaks existing drugs to game the patent system, perpetuating its monopoly power. [Most](#) newly approved drugs fail to provide previously unavailable medical benefits.

Meanwhile, public health priorities and unmet medical needs—like [antimicrobial resistance](#), [neurologic diseases](#), and cardiovascular disease—are neglected as companies prioritize maximizing profits. The pharma company GSK, for example, stalled progress for years on a [groundbreaking tuberculosis vaccine](#), developed with government funding, so it could focus on a much more lucrative shingles vaccine that has brought in billions of dollars. Roughly [9 million](#) people have died waiting for the tuberculosis vaccine to complete clinical trials.

To add insult to injury, [virtually all](#) new prescription drugs in the United States are produced with public support. From 2010 to 2016, the National Institutes of Health (NIH) funded research that went into [all 210 new drugs](#) approved by the Food and Drug Administration. Since 1938, the U.S. government has invested more than [\\$1 trillion dollars](#) in biomedical research. Public investments should support public health first and foremost, not private profits.

**Solution: A [public option](#) for biomedical and pharmaceutical development. Instead of maximizing pharmaceutical industry profits, the Medicines for the People Act maximizes the public health returns on public investments.**

**The National Institute for Biomedical Research and Development will:**

- Carry out a program for the research and development of drugs, devices, and biological products to promote long-term access to medicines, foster innovation, and prioritize public health needs—while ensuring its treatments are available to the public at equitable and accessible prices.
- Adhere to the highest standards of transparency by ensuring that the scientific data generated by its research is made publicly available.
- Monitor research supported by the NIH and acquire the rights to inventions produced by such research.
- Manage the patents derived from its research and development programs in the public interest.
- Be governed by a multi-stakeholder board—including public health officials, representatives from independent patient-advocate organizations, and those with a background in access to medicines.
- Prioritize those interventions that address unmet needs, offer the potential for scientific breakthrough, and/or offer the largest public health impact—instead of maximizing private profits.

**The Medicines for the People Act will:**

- Ensure access to new drugs, devices, and biological products that address unmet needs and public health priorities.
- Reduce drug prices, through innovation and increased competition—and because, as a public body, the Institute doesn't have to spend money on dividends, stock buybacks, or marketing.
- Lower healthcare costs, through increased access to medicines and investments in interventions with the greatest public health benefits.
- Advance scientific collaboration and transparency, while managing patents and trade secrets in the public interest.

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