## **Committee on Energy and Commerce**

## Opening Statement as Prepared for Delivery of Chairman Frank Pallone, Jr.

## Hearing on "The Future of Biomedicine: Translating Biomedical Research into Personalized Health Care"

## **December 8, 2021**

Today, the Energy and Commerce Committee is continuing its tradition of staying on the cutting edge of biomedical research. As we celebrate the 20th anniversary of the mapping of the human genome this year, this is an opportunity to examine how far we've come and how scientists are charting a path forward to lead to new discoveries to improve public health.

The purpose of today's hearing is to examine the current state of biomedical research in the United States and explore the opportunities for the future of innovation, investment, and equity in health care.

Our nation is fortunate to have the greatest biomedical researchers in the world, working every day in clinics and laboratories to advance our basic understanding of disease in living organisms and apply that foundational knowledge to the development of treatments and cures.

Historically, our health system has focused on treating or preventing diseases broadly in the average patient. This has resulted in treatments and drugs that work well for some but have little to no effect in others.

In the last decade, however, we have seen transformative changes in the field of biomedical research. One such example is the advancement of precision medicine, which seeks to individualize treatment and care by accounting for patient-specific genes, environment, and lifestyle. For example, research and development in precision medicine has helped advance immunotherapy treatments for oncology.

If we are to continue to build on this work, we will need to leverage new technological tools and methods of study, such as genetic phenotyping, quantum computing, novel clinical trial design, as well as traditional basic and translational research.

As we examine the current state of biomedical research, we must keep equity at the forefront of our efforts. The ongoing COVID-19 pandemic has demonstrated what many have known all along, our health system disadvantages minority communities and inadequately addresses their needs. We must examine and account for diverse populations in data collection, as well as recognition of potential biases in artificial intelligence, biomedical research, and the development of drugs, devices, and treatments.

It's also important that we ensure Americans can access these drugs and treatments, and that's a critical component of the Build Back Better Act that the House passed last month. Today, far too many Americans are being forced to ration their medications, go without needed treatments, or exhaust their life savings because prescription drug costs are too high. It is simply not fair that Americans pay three, four, or ten times as much for the exact same drug as people in other countries pay.

The Build Back Better Act will make prescription drugs more affordable by finally giving Medicare the ability to negotiate lower drugs prices with the pharmaceutical companies. Seniors will also pay no more than \$2,000 a year in out-of-pocket costs for their drugs, and the legislation penalizes pharmaceutical companies that unfairly raise prices. The bill also allows the federal government to negotiate insulin prices and lowers those prices to no more than \$35 a month for Americans with diabetes. This legislation finally begins to provide relief to Americans at the pharmacy counter without threatening innovation.

I look forward to hearing from our panel of experts who have significant experience in academic, clinical, regulatory, and commercial settings. The future of biomedical research depends on the synergy between these fields, and the fruits of their labor will transform our health system to promote wellness for all Americans.

I thank Chairwoman Eshoo for convening this hearing as we continue our work of moving the ball forward on such an important topic.