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# Assessing User Fees Under the Generic Drug User Fee Amendments of 2017

## Guidance for Industry

### ***DRAFT GUIDANCE***

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For questions regarding this draft document, contact (CDER) Office of Management, Division of User Fee Management and Budget Formulation, Phone: 301-786-7900.

**U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Drug Evaluation and Research (CDER)**

**October 2019  
User Fees**

**Revision 1**

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# Assessing User Fees Under the Generic Drug User Fee Amendments of 2017

## Guidance for Industry

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**U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Drug Evaluation and Research (CDER)**

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User Fees**

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*Contains Nonbinding Recommendations*

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**Assessing User Fees Under the Generic Drug User Fee  
Amendments of 2017  
Guidance for Industry<sup>1</sup>**

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations. To discuss an alternative approach, contact the FDA office responsible for this guidance as listed on the title page.

**I. INTRODUCTION**

This guidance provides stakeholders information regarding FDA’s implementation of the Generic Drug User Fee Amendments of 2017 (GDUFA II) under Title III of the FDA Reauthorization Act of 2017.<sup>2</sup> Because GDUFA II created changes to the user fee program, this guidance serves to provide an explanation about the new fee structure and types of fees for which entities are responsible.

This guidance describes the types of user fees authorized by GDUFA II, the process for submitting payments to FDA, the consequences for failing to pay generic drug user fees, and the process for requesting a reconsideration of a user fee assessment. This guidance also describes how FDA determines affiliation for purposes of assessing generic drug user fees. FDA will issue separate guidance documents regarding GDUFA II non-user fee requirements and processes. This guidance does not address how FDA determines and adjusts fees each fiscal year, nor does it address FDA’s implementation of other user fee programs (e.g., Prescription Drug User Fee Amendments, Biosimilar Biological User Fee Amendments).<sup>3</sup> Throughout this guidance, references to *user fees* or the *user-fee program* indicate generic drug user fees collected under section 744B of the Federal Food, Drug, and Cosmetic Act (FD&C Act). This guidance revises and replaces FDA’s draft guidance for industry *Assessing User Fees Under the Generic Drug User Fee Amendments of 2017*, published in October 2017.

<sup>1</sup> This guidance has been prepared by the Division of User Fee Management and Budget Formulation, Office of Management, in the Center for Drug Evaluation and Research at the Food and Drug Administration.

<sup>2</sup> FDA Reauthorization Act of 2017 (Public Law 115-52).

<sup>3</sup> FDA will publish in the *Federal Register* the fee revenue and fee amounts for each fiscal year not more than 60 days before the start of each fiscal year (section 744B(d)(1) of the FD&C Act (21 U.S.C 379j-42)). On August 29, 2017, FDA published FY 2018 rates for GDUFA fees (82 FR 41026 (Aug. 29, 2017)). On July 27, 2018, FDA published FY 2019 rates for GDUFA fees (83 FR 35649 (July 27, 2018)).

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36  
37 In general, FDA’s guidance documents do not establish legally enforceable responsibilities.  
38 Instead, guidances describe the Agency’s current thinking on a topic and should be viewed only  
39 as recommendations, unless specific regulatory or statutory requirements are cited. The use of  
40 the word *should* in Agency guidances means that something is suggested or recommended, but  
41 not required.

42  
43 Changes to statutory provisions described in this guidance are effective with respect to fees  
44 assessed beginning on the first day of fiscal year (FY) 2018.<sup>4</sup>

### **II. BACKGROUND**

47  
48 The Generic Drug User Fee Amendments of 2012 (GDUFA I) added sections 744A and 744B to  
49 the FD&C Act, authorizing FDA to collect user fees for a five-year period from persons that  
50 submit certain abbreviated new drug applications (ANDAs) for review or that are referenced in  
51 certain ANDAs. Fees authorized by this legislation help fund the process for the review of  
52 generic drug applications and have played an important role in expediting the drug review and  
53 approval process. Under the FDA Reauthorization Act of 2017, enacted on August 18, 2017,  
54 GDUFA I was reauthorized for a five-year period (GDUFA II) beginning on October 1, 2017.

55  
56 GDUFA II extends FDA’s authority to collect user fees for FY 2018 through FY 2022 and  
57 revises the fees that the Agency collects and how it collects some fees. Discussions about the  
58 further reauthorization of GDUFA are expected to begin before or during FY 2022, the final  
59 fiscal year of GDUFA II.

### **III. DEFINITIONS**

60  
61  
62 For purposes of this guidance:

- 63  
64  
65 • The term ***abbreviated new drug application*** means an application submitted under  
66 section 505(j) of the FD&C Act (21 U.S.C. 355(j)), under former section 507 of the  
67 FD&C Act (now repealed), or pursuant to regulations in effect prior to the  
68 implementation of the Drug Price Competition and Patent Term Restoration Act of 1984.  
69 The term does not include an application for a positron emission tomography drug and  
70 does not include an application submitted by a State or Federal Government entity for a  
71 drug that is not distributed commercially.<sup>5</sup>
- 72  
73 • The term ***active pharmaceutical ingredient*** means a substance, or a mixture when the  
74 substance is unstable or cannot be transported on its own, intended (A) to be used as a  
75 component of a drug; and (B) to furnish pharmacological activity or other direct effect in  
76 the diagnosis, cure, mitigation, treatment, or prevention of disease, or to affect the  
77 structure or any function of the human body; or a substance intended for final

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<sup>4</sup> FDA’s fiscal year begins on October 1 and ends on September 30.

<sup>5</sup> See section 744A(1) of the FD&C Act.

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- 78 crystallization, purification, or salt formation, or any combination of those activities, to  
79 become a substance or mixture as described above.<sup>6</sup>  
80
- 81 • The term **affiliate** means a business entity that has a relationship with a second business  
82 entity if, directly or indirectly (A) one business entity controls, or has the power to  
83 control, the other business entity; or (B) a third-party controls, or has power to control,  
84 both of the business entities.<sup>7</sup>  
85
  - 86 • The term **contract manufacturing organization facility** means a manufacturing facility  
87 of a finished dosage form of a drug approved pursuant to an ANDA which is not  
88 identified in an ANDA held by the owner of that facility or its affiliates.<sup>8</sup>  
89
  - 90 • The term **facility** means a business or other entity under one management, either direct or  
91 indirect, and at one geographic location or address engaged in manufacturing or  
92 processing an active pharmaceutical ingredient or a finished dosage form. The term  
93 facility does not include a business or other entity whose only manufacturing or  
94 processing activities are one or more of the following: repackaging, relabeling, or  
95 testing.<sup>9</sup>  
96
  - 97 • The term **finished dosage form** means (A) a drug product in the form in which it will be  
98 administered to a patient, such as a tablet, capsule, solution, or topical application; (B) a  
99 drug product in a form in which reconstitution is necessary prior to administration to a  
100 patient, such as oral suspensions or lyophilized powders; or (C) any combination of an  
101 active pharmaceutical ingredient with another component of a drug product for purposes  
102 of production of a drug product described in subparagraph (A) or (B).<sup>10</sup>  
103
  - 104 • The term **generic drug submission** means an ANDA, an amendment to an ANDA, or a  
105 prior approval supplement to an ANDA.<sup>11</sup>  
106
  - 107 • The term **positron emission tomography drug** means a drug that exhibits spontaneous  
108 disintegration of unstable nuclei by the emission of positrons and is used for the purpose  
109 of providing dual photon positron emission tomographic diagnostic images, and includes  
110 any nonradioactive reagent, reagent kit, ingredient, nuclide generator, accelerator, target  
111 material, electronic synthesizer, or other apparatus or computer program to be used in the

---

<sup>6</sup> See section 744A(2) of the FD&C Act.

<sup>7</sup> See section 744A(4) of the FD&C Act.

<sup>8</sup> See section 744A(5) of the FD&C Act; see Section IV (Changes to the Structure of the GDUFA User Fee Program) and Section VII (Facility Fees) for more information.

<sup>9</sup> See section 744A(6) of the FD&C Act. The FDA Establishment Identifier (FEI) is used to identify unique facilities.

<sup>10</sup> See section 744A(7) of the FD&C Act.

<sup>11</sup> See section 744A(8) of the FD&C Act.

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112 preparation of such a drug.<sup>12</sup>

- 113
- 114 • The term **prior approval supplement** means a request to the Secretary to approve a  
115 change in the drug substance, drug product, production process, quality controls,  
116 equipment, or facilities covered by an approved ANDA when that change has a  
117 substantial potential to have an adverse effect on the identity, strength, quality, purity, or  
118 potency of the drug product as these factors may relate to the safety or effectiveness of  
119 the drug product.<sup>13</sup>
  - 120
  - 121 • The term **Type II active pharmaceutical ingredient drug master file** means a submission  
122 of information to the Secretary by a person that intends to authorize FDA to reference the  
123 information to support approval of a generic drug submission without the submitter  
124 having to disclose the information to the generic drug submission applicant.<sup>14</sup>
  - 125

### 126 **IV. CHANGES TO THE STRUCTURE OF THE GDUFA USER FEE PROGRAM**

127

128 GDUFA II authorizes the collection of five types of fees: (1) backlog fees; (2) drug master file  
129 (DMF) fees; (3) ANDA filing fees; (4) active pharmaceutical ingredient (API) and finished  
130 dosage form (FDF) facility fees; and (5) generic drug applicant program fees (GDUFA Program  
131 Fees). The statute directs FDA to set annual fee amounts for each fiscal year so that DMF fees  
132 will account for 5 percent, ANDA fees 33 percent, API facility fees 7 percent, FDF facility fees  
133 20 percent, and GDUFA Program Fees 35 percent of the total revenue amount determined for a  
134 fiscal year.<sup>15</sup> Under GDUFA II, applications submitted by State and/or Federal government  
135 entities for drugs that are not distributed commercially also do not incur fees.

136

137 Previously, section 744B of the FD&C Act authorized FDA to collect backlog fees, DMF fees,  
138 ANDA and prior approval supplement (PAS) fees, and API and FDF facility fees. GDUFA II  
139 establishes a new fee structure that eliminates PAS fees and adds GDUFA Program Fees.

140

141 Additionally, facilities that manufacture both APIs and FDFs will only incur FDF fees instead of  
142 owing both API and FDF facility fees. A facility no longer incurs a fee if it is only referenced in  
143 pending generic drug submissions because the facility fee obligation now applies only to  
144 facilities referenced in approved generic drug submissions. Facilities that qualify as contract  
145 manufacturing organizations (CMOs) pay one-third the amount of the facility fee incurred by  
146 FDF facilities that do not qualify as CMOs.<sup>16</sup>

147

---

<sup>12</sup> See section 744A(10) of the FD&C Act; see section 201(ii) of the FD&C Act (21 U.S.C. 321(ii)).

<sup>13</sup> See section 744A(11) of the FD&C Act.

<sup>14</sup> See section 744A(13) of the FD&C Act.

<sup>15</sup> See section 744B(b) of the FD&C Act. While in almost all cases applicants that owed backlog fees have now paid those fees, this obligation remains part of the statute.

<sup>16</sup> See section 744B(b)(2)(C) of the FD&C Act.

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148 The Agency will continue to establish generic drug user fees for each fiscal year based on  
149 revenue amounts set forth in the statute and will publish the fees and fee revenue amounts for a  
150 fiscal year in the Federal Register not later than 60 days before the start of that year.<sup>17</sup>

151

### **V. BACKLOG FEES**

152

153  
154 Under GDUFA II, each person that owns an ANDA that was pending on October 1, 2012, and  
155 that has not received a tentative approval prior to that date, owes a backlog fee for each such  
156 application.<sup>18</sup>

157

158 The backlog fee was due no later than November 26, 2012. The final backlog fee is \$17,434. See  
159 *Federal Register* notice “Generic Drug User Fee – Backlog Fee Rate for Fiscal Year 2013” for  
160 additional details (77 FR 65199 (October 25, 2012), available at  
161 <https://www.gpo.gov/fdsys/pkg/FR-2012-10-25/pdf/2012-26257.pdf>).

162

163 An original ANDA was considered to be pending and subject to the backlog fee if, as of  
164 September 28, 2012, FDA had not tentatively approved, approved, or refused to receive (RTR)  
165 the application.<sup>19</sup> See *Federal Register*: “Notice of Opportunity to Withdraw Abbreviated New  
166 Drug Applications to Avoid Backlog Fee Obligations” for additional details (77 FR 51816  
167 (August 27, 2012), available at <https://www.gpo.gov/fdsys/pkg/FR-2012-08-27/html/2012-20947.htm>).

168

### **VI. DRUG MASTER FILE FEES**

169

170 Each person that owns a Type II active pharmaceutical ingredient DMF that is referenced on or  
171 after October 1, 2012, in a generic drug submission by any initial letter of authorization is  
172 assessed a one-time DMF fee under GDUFA II.<sup>20</sup>

173

174 The DMF fee is due on the earlier of the following:

175

- 176 • The date on which the first generic drug submission is submitted that references the
- 177 associated Type II API DMF by an initial letter of authorization
- 178 • The date the DMF holder requests the initial completeness assessment<sup>21</sup>

179

180

181

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<sup>17</sup> See section 744B(a) of the FD&C Act.

<sup>18</sup> See section 744B(a)(1)(A) of the FD&C Act. GDUFA II contains a sunset provision of October 1, 2022 for backlog fees (see section 744B(a)(1)(E) of the FD&C Act).

<sup>19</sup> Receipt of an ANDA means that FDA has made a threshold determination that the ANDA is substantially complete (21 CFR § 314.101(b)(1)).

<sup>20</sup> See section 744B(a)(2)(A) of the FD&C Act.

<sup>21</sup> See section 744B(a)(2)(E)(i) of the FD&C Act.

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182 For a DMF referenced in an ANDA prior to GDUFA I implementation, the one-time DMF fee  
183 must be paid if the DMF is newly referenced in a generic drug submission on or after October 1,  
184 2012.

185  
186 Type II API DMF holders do not need to wait for a new ANDA applicant to request a letter of  
187 authorization before the DMF is assessed to be available for reference. DMF holders can pay  
188 the fee before a letter of authorization is requested by ANDA applicants. FDA strongly  
189 encourages the DMF holder to submit a complete DMF and pay the DMF fee at least 6 months  
190 prior to the submission of an ANDA or PAS that will rely on the DMF. The DMF will then  
191 undergo an initial completeness assessment using factors articulated in FDA’s guidance for  
192 industry *Completeness Assessments for Type II API DMFs Under GDUFA*.<sup>22</sup> DMFs for which the  
193 fee has been paid and which have not been found incomplete in accordance with the completeness  
194 assessment will be identified on FDA’s Type II Drug Master Files – Available for Reference  
195 List,<sup>23</sup> as available, for reference in support of a generic drug submission.

196

### **VII. ABBREVIATED NEW DRUG APPLICATION FILING FEES**

197

198  
199 GDUFA II levies a user fee on certain human generic drug applications. A fee is assessed for each  
200 ANDA submitted to FDA on or after October 1, 2012. A prior approval supplement filing fee,  
201 which was required under GDUFA I, is no longer required under GDUFA II.<sup>24</sup>

202

203 ANDA fees are due no later than the date of submission of the application.<sup>25</sup>

204

#### **A. Refund for Refusal To Receive and Withdrawals and Inappropriate Receipts**

205

206  
207 If FDA refuses to receive an ANDA for reasons not related to failure to pay fees (i.e., FDA  
208 determines that the ANDA is not substantially complete), then 75 percent of the filing fee paid  
209 will automatically be refunded to the applicant. Under GDUFA II, 75 percent of the application  
210 filing fee paid will also be refunded for an application that has been withdrawn prior to being  
211 received within the meaning of section 505(j)(5)(A) of the FD&C Act.<sup>26</sup>

212

213 If FDA initially receives an ANDA and subsequently determines that a period of exclusivity for  
214 the reference listed drug should have prevented that receipt so that the ANDA is no longer

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<sup>22</sup> For the most recent version of a guidance, check the FDA guidance web page at  
<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

<sup>23</sup> Available at <https://www.fda.gov/drugs/forms-submission-requirements/drug-master-files-dmfs>.

<sup>24</sup> Unpaid fees for prior approval supplements submitted under GDUFA I are not automatically considered to have met under GDUFA II when GDUFA II took effect in FY 2018. The unpaid fees will continue to be a basis for the Agency to refuse to receive those supplements. However, an applicant may submit a new prior approval supplement under GDUFA II which will not incur a prior approval supplement fee.

<sup>25</sup> See section 744B(a)(3)(C) of the FD&C Act.

<sup>26</sup> See section 744B(a)(3)(D)(i) of the FD&C Act.

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215 considered received, the ANDA will be refused for receipt. In this situation, FDA will refund  
216 100% of the fee paid for that ANDA.<sup>27</sup>

217  
218 Although certain GDUFA refunds are automatic, FDA encourages applicants to submit refund  
219 requests as soon as possible to expedite the refund process. To request a refund, applicants  
220 should fill out Form FDA 3913 and email the form to [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov). Form  
221 FDA 3913 is attached as Appendix 1 and is available at  
222 <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM492188.pdf>.

223  
224 Include the Tax ID number (required for all domestic companies) or DUNS number (required for  
225 all foreign companies) and the address where the refund should be sent.<sup>28</sup> This information is  
226 required, and FDA cannot process a refund without it. If an applicant is entitled to a refund and  
227 does not submit a refund request, FDA may initiate a refund during its periodic review of  
228 outstanding refunds.

229  
230 If an applicant resubmits an application that FDA previously refused to receive, the applicant  
231 will be required to pay the full fee at the time of resubmission. Similarly, an applicant who  
232 withdraws an application before it is received for substantive technical review and then submits a  
233 new ANDA for that product must pay the full fee upon submission of the new ANDA. In either  
234 circumstance, if the applicant notifies FDA that it plans to resubmit the application in the near  
235 future, the Agency may hold the refund and initiate a transfer of the funds to the resubmission  
236 upon the applicant's request. To request a transfer, applicants should fill out Form FDA 3914  
237 and email the form to [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov). Form FDA 3914 is attached as Appendix  
238 2 and is available at  
239 <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM492195.pdf>.

### **B. Resubmissions**

240  
241  
242  
243 A resubmission of an ANDA is a formal response to a refuse-to-receive (RTR) determination  
244 and is submitted to the ANDA that was refused for receipt.<sup>29</sup> Accordingly, a full ANDA filing  
245 fee is due upon resubmission of the ANDA that FDA had refused to receive. Submission of a  
246 dispute of an RTR determination without attempting to remedy the deficiencies (i.e., without  
247 resubmitting the ANDA) is not considered a resubmission and is therefore not subject to a new  
248 ANDA filing fee.

### **C. Exemptions to the Application Filing Fee**

249  
250  
251  
252 An applicant will not incur an ANDA filing fee under the following circumstances:

- 253  
254
- The application is for a positron emission tomography (PET) drug

---

<sup>27</sup> See section 744B(a)(3)(D)(ii) of the FD&C Act.

<sup>28</sup> See GDUFA Cover Sheet Clarifications: Facility, available at <https://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/ucm393190.htm>.

<sup>29</sup> See FDA's draft guidance for industry *ANDA Submissions – Refuse-to-Receive Standards: Questions and Answers* (Oct. 2017). When final, this guidance will represent the FDA's current thinking on this topic.

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- 255
- The application is submitted by a State or Federal Government entity for a drug that is not
- 256 distributed commercially
- The submitted application is a serial submission (see subsection E. below)
- 257
- 258

259 Approved applications of the types described in this subsection will also not be considered in

260 determination of GDUFA Program Fees (see section IX below).

261

262 **D. Fee for API Information Not Included by Reference to DMF - (a)(3)(F) Fee**

263

264 An applicant is required to pay an additional fee, also known as the (a)(3)(F) fee (because this

265 fee is referenced in section 744B(a)(3)(F) of the FD&C Act), for a generic drug submission that

266 contains information concerning the manufacture of an API at a facility by means other than

267 reference by a letter of authorization to a Type II API DMF.

268

269 GDUFA II specifies that this (a)(3)(F) fee must be paid for each combination of API and the

270 API's manufacturing facility, provided that a DMF fee or (a)(3)(F) fee has not already been paid

271 for the manufacture of the same API by the same facility. The (a)(3)(F) fee amount for each API

272 and facility combination is equal to the DMF fee and is paid only once.

273

274 **Example:**

275

276 An applicant (XYZ Corp.) submits an ANDA that, rather than referencing a DMF, describes the

277 manufacture of three APIs at one or more facilities. The (a)(3)(F) fee has been paid for the

278 combination of *API Beta manufactured at Facility 2*.

279

Product	API	API Manufacturing Facility
Drug X	Alpha	1, 2, 3
	Beta	1, 2
	Gamma	1

280

281 In this example, the calculation for the (a)(3)(F) fee that XYZ Corp. owes is as follows:

282

283 **(a)(3)(F) Fee API-Facility combinations:**

284

285 (Alpha-Facility 1) + (Alpha-Facility 2) + (Alpha-Facility 3) + (Beta-Facility 1) + (Gamma-

286 Facility 1) = 5 unpaid API-Facility combinations\*

287 \*Note: The Beta-Facility 2 combination has been paid and is, therefore, not included.

288

289 **(a)(3)(F) fee amount** = (5 API-Facility combinations) x DMF fee amount

290

291 = 5 x DMF fee amount

292

293 This information must be listed correctly in the Generic Drug User Fee Cover Sheet (Form FDA

294 3794) for the generic drug submission.

295

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### 296 **E. Serially Submitted ANDAs**

297  
298 In the past, some ANDA applicants chose to serially submit complete ANDAs containing  
299 “paragraph IV certifications” in anticipation of a newly listed patent for a reference listed drug.<sup>30</sup>  
300 ANDA applicants must not submit a paragraph IV certification earlier than the first working day  
301 after the day the patent is listed in FDA’s *Approved Drug Products with Therapeutic*  
302 *Equivalence Evaluations*, commonly known as the Orange Book.<sup>31</sup> The regulation reflects  
303 FDA’s judgment that permitting serial submissions of amendments and multiple notices of  
304 paragraph IV certifications is overly burdensome to FDA and new drug application (NDA)  
305 applicants.<sup>32</sup> In this situation, applicants should remit their application filing fee with their ANDA  
306 on the first working day after the day the relevant patent is listed in the Orange Book or, if the  
307 application is not submitted on that date, on the date the application is submitted.  
308

### 309 **F. Withdrawn ANDAs**

310  
311 Once a fee is incurred, it must be paid notwithstanding what happens to the application.  
312 Accordingly, an ANDA that is withdrawn still owes the fee. However, if an application is  
313 withdrawn before being received, the applicant is eligible for a 75% refund.  
314

## 315 **VIII. FACILITY FEES**

316  
317 Under GDUFA II, the owner of a facility incurs a fee when both of the following conditions are  
318 met on the facility fee due date:

- 319
- 320 • The facility is referenced in an *approved* generic drug submission; and
  - 321 • The facility is engaged in manufacturing or processing an API or FDF.<sup>33</sup>
- 322

323 See subsection J of this section for further discussion of when fees may be incurred.  
324

325 A facility does not incur a fee for being referenced only in *pending* generic drug submissions in  
326 GDUFA II.  
327

---

<sup>30</sup> For a description of ANDA patent certifications, see FDA’s draft guidance for industry *180-day Exclusivity: Questions and Answers* (Jan. 2017). When final, this guidance will represent FDA’s current thinking on this topic.

<sup>31</sup> Available at <https://www.fda.gov/drugs/drug-approvals-and-databases/approved-drug-products-therapeutic-equivalence-evaluations-orange-book>. See 21 CFR 314.94(a)(12)(viii)(C)(1)(ii) (“An applicant must submit an appropriate patent certification or statement under paragraph (a)(12)(i) and/or (iii) of this section if, after submission of the ANDA, a new patent is issued by the U.S. Patent and Trademark Office that, in the opinion of the applicant and to the best of its knowledge, claims the reference listed drug or that claims an approved use for such reference listed drug and for which information is required to be filed under section 505(b) and (c) of the Federal Food, Drug, and Cosmetic Act and § 314.53. For a paragraph IV certification, the certification must not be submitted earlier than the first working day after the day the patent is published in the list.”).

<sup>32</sup> See 81 FR 69580, 69610 (Oct. 6, 2016).

<sup>33</sup> See section 744B(a)(4)(A) of the FD&C Act; see section 744A(5) of the FD&C Act.

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328 Note that an entity meeting the two criteria above will incur a facility fee liability regardless of  
329 whether it is manufacturing or producing generic *or* non-generic human drugs. For example, if a  
330 facility is referenced in an approved ANDA and it is manufacturing only brand-name drugs, it  
331 will be assessed a facility fee under GDUFA II.

332  
333 Facility fees are due on the later of the first business day on or after October 1 of each fiscal year,  
334 or the first business day after the enactment of an appropriations Act providing for the  
335 collection and obligation of fees for such year.<sup>34</sup>

336  
337 If a facility is first identified in an approved generic drug submission after the due date for  
338 payment of the facility fee for a fiscal year, the facility is not required to pay the fee for that  
339 fiscal year.

### **A. API and FDF Facility Fees**

340  
341  
342 Each person that owns a facility will incur an API facility fee when the facility is identified in:

- 343 • At least one generic drug submission that is approved to produce one or more APIs, or
- 344 • A Type II API DMF referenced in at least one such generic drug submission.<sup>35</sup>

345  
346  
347 Each person that owns a facility will incur an FDF facility fee when the facility is identified in at  
348 least one generic drug submission that is approved to produce one or more FDFs.<sup>36</sup>

### **B. Exceptions to Facility Fees**

349  
350  
351 The following entities will not incur facility fees under GDUFA II:

- 352 • Facilities that solely produce PET drugs.
- 353 • Facilities that are only listed in applications submitted by State and/or Federal
- 354 government entities for drugs that are not distributed commercially.
- 355 • Facilities whose only manufacturing or processing activities are one or more of the
- 356 following: repackaging, relabeling, or testing.

### **C. Dual Operation Facilities Only Incur FDF Facility Fees**

357  
358  
359 If a facility is identified in one or more approved generic drug submissions to produce both APIs  
360 and FDFs, the facility will only incur an FDF fee.<sup>37</sup> This differs from the treatment under  
361 GDUFA I, which required that such facilities pay both API and FDF fees.

---

<sup>34</sup> See section 744B(a)(4)(D) of the FD&C Act.

<sup>35</sup> See section 744B(a)(4)(A)(ii) of the FD&C Act.

<sup>36</sup> See section 744B(a)(4)(A)(i) of the FD&C Act.

<sup>37</sup> See section 744B(a)(4)(A)(iii).

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### 367 **D. Contract Manufacturing Organizations**

368  
369 CMOs are independent entities with no ownership stake (either directly or through affiliates) in  
370 the ANDAs for the drug products they manufacture. An FDF manufacturer facility that is not  
371 identified in an approved ANDA held by the owner of that facility or its affiliates is considered a  
372 CMO for GDUFA user fee purposes.<sup>38</sup> In general, CMOs pay a reduced facility fee of one-third  
373 the amount of the FDF facility fee.

374  
375 For example, if the FDF facility is referenced in an ANDA held by the facility's owner, that FDF  
376 facility would not be a CMO. However, if the owner of the FDF facility holds an ANDA, so long  
377 as the facility is not referenced in its owner's or its owner's affiliates' ANDAs, then it qualifies  
378 as a CMO and pays one-third the amount of the FDF facility fee when referenced in another  
379 ANDA.<sup>39</sup> Similarly, if an FDF facility owner is affiliated with Company X and Company X  
380 references that FDF facility in its ANDA, the FDF facility is not a CMO.

381  
382 A facility's qualification as a CMO depends on the FDF manufacturing activities of that facility  
383 and not on its manufacturing activities related to an API. A facility that is referenced in one or  
384 more ANDAs as both an API and FDF manufacturer may qualify as a CMO even if it is  
385 referenced as an API manufacturer in its own or its affiliates' ANDA as long as a dual facility is  
386 not referenced as an FDF manufacturer in its own or its affiliates' ANDAs.

### 387 388 **E. Foreign-Facility Fee Differential**

389  
390 GDUFA II specifies that the amount of the fee for a facility located outside the United States and  
391 its territories and possessions is \$15,000 higher than the amount of the fee for a domestic facility.  
392 The \$15,000 differential applies to all facilities that incur a fee under GDUFA II, including those  
393 facilities defined as CMOs. For example, a foreign CMO facility will pay one-third the FDF  
394 facility fee plus \$15,000.<sup>40</sup> The differential amount is designed to reflect the higher costs of  
395 foreign inspections funded, in part, through GDUFA II.

### 396 397 **F. Withdrawal of Facility From Reference**

398  
399 If an ANDA applicant or holder does not want to retain a manufacturing facility subject to  
400 GDUFA user fees in its application, the ANDA applicant or holder should submit an amendment  
401 (for a pending application) or "post-approval notification" (for an approved application) to  
402 remove the manufacturing facility from the ANDA. A post-approval notification is described in  
403 21 CFR 314.70 and relevant guidance<sup>41</sup> and includes supplements, annual reports, or similar  
404 submissions. The amendment or post-approval notification should provide an explanation for the  
405 removal of the facility. If the amendment or post-approval notification is seeking to replace the

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<sup>38</sup> See section 744A(5) of the FD&C Act.

<sup>39</sup> *Id.*; see section 744B(b)(2)(C) of the FD&C Act.

<sup>40</sup> See section 744B(b)(2)(C) of the FD&C Act.

<sup>41</sup> For a description of post-approval notifications, see FDA's guidance for industry *Changes to an Approved NDA or ANDA* (Apr. 2004, rev. 1).

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406 facility, the request to remove the prior facility and to add the new facility may be included in the  
407 same amendment or post-approval notification.

408  
409 The owner of a facility will incur facility fees if that facility is approved to produce any APIs or  
410 FDFs and is referenced in an approved generic drug submission on the facility fee due date,  
411 regardless of whether the facility is actually performing the manufacturing operations referenced  
412 in the approved application. For example, a facility that currently manufactures only non-generic  
413 APIs or FDFs, or drugs for the non-US market, would have to pay a facility fee if it is referenced  
414 in an approved ANDA. Similarly, a facility that has ceased manufacturing an API previously  
415 used to manufacture a drug product in an approved ANDA and is still named as an API  
416 manufacturer in the ANDA on the facility fee due date will incur an API facility fee. The facility  
417 is ultimately responsible for the assessed fee once incurred. If the fee is not paid, all FDFs or  
418 APIs manufactured in the non-paying facility and all FDFs containing APIs manufactured in  
419 such a facility will be deemed misbranded.<sup>42</sup> Furthermore, any new generic drug submission that  
420 is submitted by or references the facility or its affiliates will not be “received” until the fee is  
421 paid.<sup>43</sup>

422  
423 To prevent a facility that is not manufacturing for an approved ANDA from incurring a facility  
424 fee, the ANDA holder should submit a post-approval notification prior to the fiscal year due date.  
425 If a facility identified in an approved ANDA wants to be removed from that ANDA, the facility  
426 should work with the ANDA holder to remove itself from the application prior to the facility fee  
427 due date. It is the ANDA holder’s responsibility to maintain an accurate and complete  
428 application, including an updated list of manufacturing facilities.

429  
430 For user fee purposes only, FDA will no longer consider the facility to be identified in the  
431 application as of the date FDA receives notice of the withdrawal from the ANDA holder via a  
432 post-approval notification, or if the facility follows the instructions below.

433  
434 An API or FDF facility seeking to be removed from an approved ANDA to avoid an  
435 unwarranted fee should contact the applicant well in advance of the facility fee due date. On rare  
436 occasions, if timely good faith efforts and communications requesting removal from the ANDA  
437 have been made and the facility has reason to believe the holder will not act in time to prevent a  
438 facility fee from being incurred, the facility owner may submit a letter to FDA, copying the  
439 holder, requesting that the facility be removed from the approved ANDA. The letter to the FDA  
440 should contain:

- 441
- 442 • A statement that the facility is not involved in manufacturing activities<sup>44</sup> for any
  - 443 approved ANDA that would incur a fee
  - 444 • Copies of the facility’s communications to the ANDA holder(s) or DMF holder(s)

---

<sup>42</sup> Section 744B(g)(4)(A)(iii) of the FD&C Act. It is a violation of federal law to ship products misbranded into interstate commerce or to import them into the United States. Such violations can result in prosecution of those responsible, injunctions, or seizures of misbranded products.

<sup>43</sup> See section 744B(g)(4) of the FD&C Act.

<sup>44</sup> See 21 C.F.R. 205.3(d): “*Manufacturer* means anyone who is engaged in manufacturing, preparing, propagating, compounding, processing, packaging, repackaging, or labeling of a prescription drug.”

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- 445       • A list of all known, approved generic drug submissions and DMFs that reference the  
446       facility for which the facility has communicated with the holder(s) and DMF holder(s) (as  
447       applicable), but for which there is reason to believe the facility will remain named in the  
448       application on October 1st  
449

450       If the facility owner submits this letter and if FDA agrees that a good faith effort has been made  
451       by the facility to work with the ANDA holder to withdraw itself without response by the holder,  
452       the facility will be considered withdrawn for user fee purposes for the next fiscal year.<sup>45</sup>  
453

454       Letters should be submitted by July 1 or as far in advance of October 1 as possible. Letters  
455       received after July 1 may not be processed before October 1, in which case facilities will incur  
456       the fee if the ANDA holder still has not submitted a post-approval notification before October 1.  
457       The letter should be sent to the following address with a copy to [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov):  
458

459               Office of Generic Drugs (HFD-600)  
460               Center for Drug Evaluation and Research  
461               Food and Drug Administration  
462               Central Document Room  
463               5901B Ammendale Road  
464               Beltsville, MD 20705  
465

466       If a facility is identified in an approved generic drug submission on October 1 and the facility is  
467       subsequently withdrawn, the fee will not be waived or refunded. Accordingly, withdrawal of a  
468       facility from generic drug submissions will not remove the requirement of the facility to pay  
469       previously incurred facility fees.  
470

### **G.     Packagers and Repackagers**

471  
472       Packagers are considered manufacturers, regardless of whether that packaging is done pursuant  
473       to a contract or by the applicant itself. Such facilities are required to pay annual FDF facility  
474       fees. A packaging facility may incur only one-third of the FDF facility fee if it qualifies as a  
475       CMO (see definitions section and subsection D above).  
476  
477

478       A facility is considered a packager for the purposes of GDUFA II if it receives product prior to  
479       the point in the manufacturing process in which the drug is first packaged in a container/closure  
480       system specified in the “How Supplied” section of an approved ANDA and packages that  
481       product into such a container/closure system for the first time. Every ANDA specifies the forms  
482       or configuration in which the approved drug product may be packaged and distributed in the  
483       “How Supplied” section. For example, if a facility receives bulk drugs and packages them into  
484       the containers in which they are marketed, it is a packager.  
485

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<sup>45</sup> The applicant is still expected to report the change to the approved application in a manner consistent with 21 CFR 314.70.

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486 A facility is also considered a manufacturer if it receives product in a container/closure specified  
487 in the “How Supplied” section of an approved ANDA and applies the FDA-approved  
488 prescription package labeling to that product for the first time.

489  
490 Repackagers are not required to pay facility fees under GDUFA II. Repackagers include facilities  
491 that remove a drug from a primary container/closure system and subdivide the contents into a  
492 different primary container/closure system. For example, a facility that takes tablets out of a  
493 plastic bottle and packages the tablets into blister packaging is considered a repackager.<sup>46</sup>

494

### **H. API-Excipient Mixtures**

496

497 Generally, manufacturers of API-excipient mixtures are required to pay the annual FDF facility  
498 fee. However, GDUFA II provides one exception, for fee-paying purposes only, to the definition  
499 of in-process mixtures as FDF. GDUFA II defines an API-excipient mixture as an API when it is  
500 produced because the API is unstable and cannot be transported on its own. Examples include an  
501 API mixed with an antioxidant for chemical stability when the API is prone to oxidative  
502 degradation or an API-excipient mixture for physical stability to maintain its amorphous form.

503

### **I. Atypical APIs**

504

505  
506 Under GDUFA II, facilities that manufacture APIs generally pay annual API facility fees.  
507 However, some ingredients may be intended for use as APIs in certain contexts but are more  
508 commonly used as inactive pharmaceutical ingredients (excipients) or as ingredients in non-drug  
509 products such as foods. Facilities that manufacture these atypical APIs are subject to API facility  
510 fees when the ingredient is intended for use as a component of a drug and furnishes  
511 pharmacological activity or other direct effect in the diagnosis, cure, mitigation, treatment, or  
512 prevention of disease, and the ingredient is referenced in an approved ANDA.

513

### **J. Facilities That Cease Manufacturing**

514

515  
516 A facility incurs annual facility fees as long as it is identified in an approved ANDA, even if the  
517 facility has not started commercial-scale production of the API or FDF covered by that  
518 submission or if the facility has stopped, temporarily or permanently, the production of that API  
519 or FDF. See above for a description of how a facility can ensure that it is no longer identified in  
520 an ANDA.

521

522 The facility will cease to incur additional fees if it is no longer identified in any generic drug  
523 submission or has stopped manufacturing *all* human APIs and FDFs (including both generic and  
524 non-generic APIs and FDFs) and the facility or applicant has followed the procedures outlined in  
525 section F above by the date that the fee is due. In the latter case, the entity no longer qualifies as  
526 a facility under GDUFA II (see the definition of *facility* in the definitions section above). Any  
527 outstanding fee obligations will, however, remain due.

---

<sup>46</sup> See SPL Industry Technical Specification Information: Electronic Self-Identification of Generic Drug Facilities or Sites (August 2017) at 7, available at

<https://www.fda.gov/downloads/ForIndustry/DataStandards/StructuredProductLabeling/UCM329269.pdf>.

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A facility that ceases manufacturing should follow the steps outlined in section F so it will be removed from all ANDA references. If a facility goes out of business, it should contact the applicants, DMF holder (if applicable), and FDA to notify the Agency of its status.

### **K. Fees for Multiple Locations of the Same Entity**

If an entity has multiple sites manufacturing a product approved under a U.S. human generic drug submission and those sites are in different geographic locations, each facility is generally assessed an annual facility fee. However, separate buildings within close proximity are considered to be at one geographic location or address if:

- The activities in them are closely related to the same business enterprise;
- They are under the supervision of the same local management; and
- They are capable of being inspected by FDA during a single inspection.<sup>47</sup>

These are the same criteria used by FDA’s Office of Regulatory Affairs to evaluate whether separate FDA Facility Establishment Identifiers (FEIs) are necessary for multiple facilities.<sup>48</sup>

If an entity believes that multiple FEIs have been assigned in error or that its separate facilities qualify for a single FEI, the entity may request consolidation of the FEIs. Domestic entities should submit the request to the appropriate FDA district office. Contact information is available at <http://www.fda.gov/downloads/ICECI/Inspections/IOM/UCM123522.pdf>. Foreign entities should contact [FDAGDUFAFEIRequest@fda.hhs.gov](mailto:FDAGDUFAFEIRequest@fda.hhs.gov).

Once a facility fee has been incurred, the fee is not waived, reduced, or refunded if FDA subsequently agrees to consolidate FEI numbers.

### **IX. GENERIC DRUG APPLICANT PROGRAM FEE**

Under GDUFA II, a GDUFA Program Fee will be assessed annually based on the number of approved applications that an entity and its affiliates own. Affiliated companies will be grouped together and counted as a single entity for purposes of assessing the GDUFA Program Fee.<sup>49</sup> An ANDA applicant and its affiliates cannot choose to pay multiple smaller fees to avoid paying the fee associated with larger tiers.

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<sup>47</sup> See section 744A(6) of the FD&C Act. The statute further states that if a business or other entity would meet the definition of a facility but for being under multiple management, the business or entity is deemed to constitute multiple facilities, one per management entity, for purposes of this paragraph.

<sup>48</sup> See FDA’s guidance for industry *Self-Identification of Generic Drug Facilities, Sites, and Organizations* (Sept. 2016).

<sup>49</sup> See section 744B(b)(2)(E)(i).

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564 GDUFA Program Fees are due on the later of the first business day on or after October 1 of each  
565 fiscal year, or the first business day after the enactment of an appropriations Act providing for  
566 the collection and obligation of fees for such year.<sup>50</sup>

567

### **A. GDUFA Program Fee Structure**

568

569 The GDUFA Program Fee will be allocated among three tiers of ANDA owners:

570

- 571 • Small (companies with 5 or fewer approved ANDAs)
- 572 • Medium (companies with between 6 and 19 approved ANDAs)
- 573 • Large (companies with 20 or more approved ANDAs)
- 574

575

576 If a person and its affiliates own at least one but not more than five ANDAs on the GDUFA  
577 Program Fee due date, the person and its affiliates will be assessed a small-size operation  
578 GDUFA Program Fee equal to one-tenth of the large-size operation GDUFA Program Fee.

579

580 If a person and its affiliates own at least six but not more than 19 ANDAs on the GDUFA  
581 Program Fee due date, the person and its affiliates will be assessed a medium-size operation  
582 GDUFA Program Fee equal to two-fifths of the large-size operation GDUFA Program Fee.

583

584 If a person and its affiliates own at least 20 ANDAs on the GDUFA Program Fee due date, the  
585 person and its affiliates will be assessed a large-size operation GDUFA Program Fee.<sup>51</sup>

586

587 See FDA’s GDUFA website for the current fiscal year’s fee amounts

588 (<https://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/default.htm>).

589

### **B. Single Fee for an ANDA Applicant and Its Affiliates**

590

591 An ANDA applicant and its affiliates together will only incur one GDUFA Program Fee per  
592 year. GDUFA II mandates that a “single program fee shall be assessed” for an ANDA applicant  
593 and its affiliates.<sup>52</sup> The ANDA applicant who is responsible for submitting the affiliate  
594 information on behalf of the company and its affiliates must submit complete information so that  
595 FDA will assess one GDUFA Program Fee for the applicant. If FDA finds an affiliation that was  
596 not reported to the Agency, FDA will reassess the fees for both the affiliate and parent company,  
597 potentially resulting in an invoice if FDA finds that the entity should have paid a higher amount.

598

### **C. Submitting Information to FDA**

599

600 By April 1 of each year, each person that owns an ANDA shall submit to the Secretary a list of  
601 all ANDAs held by such person; except that, if an affiliate of such person also owns ANDAs, the  
602 person or its affiliate must submit, on behalf of the person and its affiliates, one list identifying  
603 all affiliates that own such applications and the ANDAs owned by the person and its affiliates.  
604  
605

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<sup>50</sup> See section 744B(a)(5) of the FD&C Act.

<sup>51</sup> See section 744B(b)(2)(E) of the FD&C Act.

<sup>52</sup> *Id.*

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606 Please see FDA’s GDUFA website section discussing the GDUFA Program Fee  
607 (<https://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/default.htm>) for more  
608 information.

### 609 **D. Timing for Withdrawal of ANDAs**

611  
612 An ANDA shall be deemed not to be approved for purposes of the GDUFA Program Fee if the  
613 applicant has submitted a written request for withdrawal of approval of such ANDA by April 1  
614 of the previous fiscal year.<sup>53</sup> If such a request to withdraw an ANDA is made after April 1, FDA  
615 may not be able to withdraw the approved ANDA by the October 1 due date for that fee and the  
616 applicant should expect that that ANDA will be counted as approved when determining the tier  
617 in which an applicant and its affiliates are placed for purposes of the GDUFA Program Fee.

### 619 **X. DETERMINING AFFILIATION**

620  
621 When determining whether parties are affiliated, the critical factor is whether one party controls  
622 or has the power to control another entity, or if a third party has the power to control both  
623 entities.

624  
625 FDA may contact an ANDA applicant to request additional information and clarification of the  
626 information asserted by the applicant regarding its affiliates. Examples of requested information  
627 include, but are not limited to:

- 628
- 629 • A copy of the applicant’s Articles of Incorporation and Bylaws
- 630 • The applicant’s last annual statement to shareholders
- 631 • A breakdown of entities that maintain ownership of the applicant’s company
- 632 • Identification of persons in leadership and management positions at the applicant’s  
633 company
- 634

635 Occasionally, FDA finds entities affiliated with the applicant that the applicant did not identify  
636 as one of its affiliates. In response to such a finding, FDA recommends that the applicant submit  
637 any agreements between an applicant and the other entities that demonstrate the nature of the  
638 relationship the applicant has with the entity.

639  
640 FDA recognizes that some information provided by companies may be confidential. FDA will  
641 treat confidential commercial or financial information consistent with applicable federal laws  
642 and regulations.

### 644 **XI. FAILURE TO PAY FEES**

645  
646 Failure to remit payment in full for user fees incurred pursuant to GDUFA II will result in certain  
647 penalties on an entity and/or its affiliates based on the type of fee. These penalties apply until the  
648 outstanding user fees are fully paid. Outstanding user fees are an obligation to the U.S.

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<sup>53</sup> Section 744B(b)(2)(E)(ii) of the FD&C Act.

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649 Government and the failure to pay fees may lead to collection activities by the Government  
650 pursuant to applicable laws.

651

### **A. Backlog Fees**

652

653 Any person who owned an original ANDA that failed to pay the backlog fee was placed on a  
654 publicly available arrears list available at  
655 <https://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/default.htm>. FDA will not  
656 receive—within the meaning of section 505(j)(5)(A) of the FD&C Act<sup>54</sup>—a new ANDA or  
657 supplement submitted by that person, or any affiliate of that person, until the outstanding fee is  
658 paid.<sup>55</sup>

659

660

661

### **B. DMF Fees**

662

663 A DMF will be deemed available for reference if both the DMF fee is paid in full and the DMF  
664 has not failed an initial completeness assessment. No generic drug submission referencing the  
665 DMF will be received unless the fee is paid and the DMF is deemed available for reference.

666

667 ANDA applicants that reference a DMF for which a fee is due but has not been paid will be  
668 provided notification of the DMF holder’s failure to satisfy the user fee obligation. If the DMF  
669 fee is not paid within 20 calendar days after notification, any generic drug submission  
670 referencing the DMF will not be received.<sup>56</sup>

671

672

### **C. ANDA Filing Fees**

673

674 If an applicant does not submit payment within 20 calendar days of the due date, its application  
675 or supplement to an application will be deemed incomplete on the date of submission and will  
676 not be received. So long as FDA finds that none of the disqualifications outlined in 21 CFR  
677 314.101(d) and (e) apply (i.e., so long as the ANDA is otherwise substantially complete), the  
678 application will be considered submitted as of the date all obligations are satisfied and the  
679 payments are received in full.<sup>57</sup>

680

681

### **D. Facility Fees**

682

683 There are several consequences for failure to pay a facility fee:

684

- 685 • No new ANDA or supplement submitted by the person responsible for paying the fee or  
686 that person’s affiliates will be received

---

<sup>54</sup> This provision references the “receipt” of ANDAs by FDA. The Agency evaluates an ANDA after it is submitted to determine whether it may be received. Receipt of an ANDA means that FDA has made a threshold determination that the ANDA is substantially complete. 21 CFR 314.101(b)(1).

<sup>55</sup> See section 744B(g)(1) of the FD&C Act.

<sup>56</sup> See section 744B(g)(2) of the FD&C Act.

<sup>57</sup> See section 744B(g)(3) of the FD&C Act.

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- 687
- 688
- 689
- 690
- 691
- 692
- No new generic drug submission referencing the facility will be received until the fee is paid
  - The facility will be placed on a publicly available arrears list if the fee is not fully paid within 20 days of the due date
  - FDA will notify the referencing ANDA applicant of the facility's failure to satisfy its user fee obligations

693

694 Further, all FDFs or APIs manufactured in the non-paying facility and all FDFs containing APIs

695 manufactured in such a facility will be deemed misbranded.<sup>58</sup> This means that it will be a

696 violation of federal law to ship these products in interstate commerce or to import them into the

697 United States. Such violations can result in prosecution of those responsible, injunctions, or

698 seizures of misbranded products. Products deemed misbranded are subject to being denied entry

699 into the United States.

700

### **E. GDUFA Program Fees**

701

702

703 Failure to pay the GDUFA Program Fee within 20 calendar days of the GDUFA Program Fee

704 due date will result in the following penalties:

705

- 706
- 707
- 708
- 709
- Applicants that have not paid the GDUFA Program Fee will be placed on a publicly available arrears list
  - Any ANDAs submitted by the applicant or an affiliate of that applicant will not be received

710

711 Further, all drugs marketed pursuant to ANDAs held by such applicant or an affiliate of that

712 applicant will be deemed misbranded.<sup>59</sup> This means that it will be a violation of federal law to

713 ship these products in interstate commerce or to import them into the United States. Such

714 violations can result in prosecution of those responsible, injunctions, or seizures of misbranded

715 products. Products deemed misbranded are subject to being denied entry into the United States.

716

## **XII. PAYMENT INFORMATION AND PROCEDURES**

717

718

719 The payment process for GDUFA II is similar to the previous iteration of the program and other

720 FDA user fees. The FDA website contains instructions for paying the fees.

721

### **A. Payment Procedures for GDUFA Fees**

722

- 723
- 724
- 725
- 726
- 727
- 728
- Those responsible for payment of fees enter required information on FDA's User Fee System to generate a GDUFA cover sheet
  - The cover sheet is designed to provide the minimum necessary information to determine if a person has satisfied all relevant user fee obligations
  - The cover sheet is submitted to FDA electronically generating a user fee payment

---

<sup>58</sup> See section 744B(g)(4) of the FD&C Act.

<sup>59</sup> See section 744B(g)(5) of the FD&C Act.

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729 identification number (PIN) to assist in tracking payment

730

731 Cover sheets should be submitted with generic drug submissions and DMFs. The Generic Drug  
732 User Fee Cover Sheet and additional payment information is available on the GDUFA website  
733 (<https://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/default.htm>).

734

### **B. Acceptable Forms of Payment**

736

737 Payment must be made in U.S. currency drawn on a U.S. bank. Fee payers may pay online by  
738 credit card or Automated Clearing House (ACH) electronic check or send payment by check,  
739 bank draft, U.S. postal money order, or wire transfer.

740

### **C. Timely Payment of Fees**

742

743 FDA's expectation is for full and timely payment of all GDUFA fees. Penalties associated with  
744 non-payment, including but not limited to refusal to receive a generic drug submission, drug  
745 product deemed misbranded, and failure of a DMF to be placed on a publicly available reference  
746 list, will apply until such obligations are satisfied in full.

747

748 One entity may pay GDUFA fees on behalf of another entity. Those paying fees are responsible  
749 for determining all financial institution transaction fees that may be deducted from an entity's  
750 authorized amount for payment to FDA. These include wire transfer and foreign exchange fees.

751

### **D. Refund Requests**

752

753 FDA will only fully refund payments of fees made in error. If a fee was properly incurred, there  
754 will be no refund of the payment.

756

757 To qualify for the return of a fee claimed to have been paid in error, a person shall submit to the  
758 Secretary a written request justifying such return within 180 calendar days after such fee was  
759 paid. The format for submitting refund requests is Form FDA 3913, attached as Appendix 1 and  
760 available at

761 <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM492188.pdf>.

762

763 FDA may not issue a refund if a written request is made past 180 calendar days from the date of  
764 payment.

765

766 A written refund request should be submitted to the Division of User Fee Management and  
767 Budget Formulation at [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov).

768

### **E. Non-Payment of GDUFA Fees**

770

771 Delinquent companies will receive an invoice from FDA detailing information on the user fee  
772 incurred, the due date, and payment instructions.

773

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774 If full payment is not received by the date specified on the invoice, interest will be charged at a  
775 rate set by the U.S. Department of the Treasury. In addition, delinquent invoices will have a \$20  
776 administrative fee assessed for each 30-day period that the invoice remains outstanding. A  
777 penalty of 6 percent per year will be assessed on any invoice delinquent for more than 90 days in  
778 accordance with 45 CFR 30.18.

### **F. Cover Sheet for PET Manufacturers and Non-Commercial Government Entities**

782  
783 PET drug manufacturers and State or Federal Government entities which sponsor or manufacture  
784 drugs but do not distribute them commercially do not incur GDUFA fees. However, FDA  
785 requests that all drug manufacturers, including generic PET manufacturers and non-commercial  
786 government entities, complete a facility user fee coversheet in the user fee system.

### **G. Waivers of and Reductions to GDUFA Fees**

789  
790 Waivers of and reductions to GDUFA fees are generally not available. However, facilities that  
791 qualify as CMOs only incur one-third of the facility FDF fee.

### **H. Arrears Lists**

794  
795 The backlog arrears list, GDUFA Program Fee arrears list, facility arrears list, and outstanding  
796 facility fees—not on arrears list are available on the GDUFA website  
797 (<https://www.fda.gov/industry/generic-drug-user-fee-amendments/user-fee-lists>) and are updated  
798 regularly.

799  
800 FDA cannot receive generic drug submissions from applicants or their affiliates until those  
801 applicants and their affiliates satisfy all outstanding user fee obligations. See the definitions in  
802 section III above regarding affiliates for more information.

803  
804 FDA may not notify applicants before refusing to receive a submission.<sup>60</sup> Companies are in the  
805 best position to monitor their business affiliates for compliance with GDUFA II. It is the  
806 applicant's responsibility to ensure that its user fee obligations, as well as those of its affiliates,  
807 are satisfied before submitting a new generic drug submission.

808  
809 If an entity believes that its appearance on the arrears list is in error, it should contact the  
810 Division of User Fee Management and Budget Formulation at [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov)  
811 and provide a concise rationale for why the facility should not be included on the arrears list.  
812

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<sup>60</sup> See section 744B(g) of the FD&C Act.

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### 813 **I. Submitting Generic Drug Submissions**

814  
815 A generic drug submission or Type II API DMF is deemed submitted to FDA on the calendar  
816 day when the electronic submission arrives at FDA's electronic gateway, except when a  
817 submission is made on a weekend, a Federal holiday, or a day when the FDA office that will  
818 review the submission is not otherwise open for business.<sup>61</sup> In those cases, the submission will be  
819 deemed to be submitted on the next day that office is open for business.

820  
821 When a lapse in appropriations or closing of the relevant FDA office because of inclement  
822 weather occurs, FDA is considered not open for business and will not receive generic drug  
823 submissions until the next day that FDA is open for business.<sup>62</sup>

### 824 825 **XIII. APPEALS PROCESS**

#### 826 827 **A. Reconsideration Request**

828  
829 If FDA fully or partially denies a request for a refund or reduction of user fees, the entity may  
830 request reconsideration of that decision. A request for reconsideration should be made within 30  
831 calendar days of the issuance of FDA's decision to fully or partially deny a request for a refund  
832 or reduction of user fees.

833  
834 FDA recommends that requests for reconsideration state the entity's reasons for believing that  
835 FDA's decision is in error and include any additional information, including updated financial  
836 information, that is relevant to the entity's position. The Agency will issue a response upon  
837 reconsideration setting forth the basis for the decision.

838  
839 All requests for reconsideration should be submitted via email to [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov)  
840 and should be addressed to the following:

841  
842 Division of User Fee Management and Budget Formulation  
843 Attention: Division Director  
844 Center for Drug Evaluation and Research

845  
846 Alternatively, the entity can mail the request to FDA via the carrier of its choice. For the most  
847 updated mailing address, visit the following FDA website at  
848 <http://www.fda.gov/forindustry/userfees/genericdruguserfees/default.htm>.

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<sup>61</sup> See guidance for industry *Providing Regulatory Submissions in Electronic Format – Receipt Dates* (Feb. 2014). All ANDAs are required to be submitted electronically as of May 5, 2017, and all DMFs must be submitted electronically by May 5, 2018. See FDA's guidance for industry *Providing Regulatory Submissions in Electronic Format – Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications* (Jan. 2019, rev. 6).

<sup>62</sup> See FDA's guidance for industry *Providing Regulatory Submissions in Electronic Format – Receipt Dates* (Feb. 2014), at 4, note 9. Note that, in situations in which work on generic applications during a lapse in appropriations is financed by carry-over GDUFA funding, FDA will be able to accept submissions for which payment was made before the lapse in appropriations occurs, but will be considered not open for business to receive fees during the lapse and thus will not receive applications for which applicable fees were not paid before the lapse.

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### **B. Appeal Request**

If a request is denied upon reconsideration, the entity may choose to appeal the denial. A request for an appeal should be made within 30 calendar days of the issuance of FDA’s decision to affirm its denial of a request for a refund or reduction of user fees. The following information should be included in the appeal:

- The original request
- The denial of the request
- The reconsideration request
- The denial of the reconsideration request
- A statement of the entity’s reasons for believing that the prior conclusions were in error

**No new information or analyses should be presented in the appeal request.** If new information or analyses are presented in the appeal request, the appeal will not be accepted, and the matter will be referred back to the original deciding authority to consider the new information or analyses.

All requests for appeals should be submitted to the Director of the Center for Drug Research and Evaluation’s (CDER) Office of Management via [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov), and a copy should be submitted to the CDER Formal Dispute Resolution Project Manager. The contact information can be found on the CDER Formal Dispute Resolution Web page.<sup>63</sup> Alternatively, the entity can mail the request to FDA via the carrier of its choice. For the most updated mailing address, visit <https://www.fda.gov/forindustry/userfees/genericdruguserfees/default.htm>.

After FDA reviews the information submitted in the appeal request, the Director of CDER’s Office of Management will issue a written decision on the entity’s request.

If the entity’s appeal is denied at one management level, the entity can appeal the same matter to the next higher management level in the CDER chain of command. A new request should be submitted for each appeal to the next management level and should follow the process provided in this guidance. If the entity has exhausted CDER’s management levels and remains unsatisfied with the decision, the entity may request review of the matter by the Commissioner of Food and Drugs (Commissioner) under 21 CFR 10.75(c). Requests for review by the Commissioner should be submitted to FDA’s Ombudsman, with copies provided to CDER. Review of such matters by the Commissioner is discretionary.<sup>64</sup>

### **XIV. OTHER RESOURCES**

The following guidance documents may be helpful:

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<sup>63</sup> Available at <https://www.fda.gov/AboutFDA/CentersOffices/OfficeofMedicalProductsandTobacco/CDER/ContactCDER/ucm444092.htm>.

<sup>64</sup> See 40 FR 40682 at 40693 (September 3, 1975); see 21 CFR 10.75.

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- *Completeness Assessments for Type II API DMFs Under GDUFA* (Oct. 2017, rev. 1)
- *Self-Identification of Generic Drug Facilities, Sites, and Organizations* (Sept. 2016)
- *Formal Dispute Resolution: Appeals Above the Division Level*, (November 2017, rev. 1)

Additional information is also available on the FDA User Fees web page. For any questions, please email the GDUFA User Fee staff at [CDERCollections@fda.hhs.gov](mailto:CDERCollections@fda.hhs.gov) or call 301-796-7900.

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### Appendix 1: Form FDA 3913

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Form Approved: OMB No. 0910-0805

Expiration Date: November 30, 2018

#### Section A: Organization Information

1. Date of Request (mm/dd/yyyy)

2. Organization Name

3. Organization Address

Address 1 (Street address. No P.O. Boxes allowed)

Address 2 (Apartment, suite, unit, building, floor, etc.)

City

State/Province/Region

Country

ZIP or Postal Code

4. Type of Vendor (Select applicable)

U.S. vendor

Foreign vendor

5. TIN/EIN (Nine-digit number required for **all** U.S. vendors.) Without this entry, refund cannot be processed.

6. DUNS (Nine-digit number required for **all** foreign vendors. See instructions for additional information.) Without this entry, refund cannot be processed.

**Information for U.S. vendors:** To facilitate your request, visit <https://www.sam.gov/portal/public/SAM/> and register with Central Contractor Registration (CCR). CCR electronically validates registrant information and shares the encrypted data securely with the FDA. For questions about CCR, call (334) 206-7828.

#### Section B: Contact Information

7. Contact Name

8. Contact Title/Position

9. Contact Phone Number (Include area code)

10. Contact Email Address

#### Section C: Payment Information

11. Payment Amount

12. Payment Reference Number

13. PIN or Invoice Number

14. Refund Amount

15. Is this a FURLS refund request? (See instructions for more information.)

Yes

No (Proceed to field 16)

(a) FURLS Request Type <input type="checkbox"/> Used PIN <input type="checkbox"/> Unused PIN ( <i>Proceed to field 16</i> )	(b) Registration or Owner/Operator Number
(c) Why did your facility originally pay the fee?	
(d) Why do you believe your facility is not required to pay the fee?	
(e) List all activities performed at your facility	

**Section C: Payment Information** (*Continued*)

15. Is this a FURLS refund request? (*Continued*)

(f) List all products manufactured at your facility
---

16. Reason for Request (*Please explain*)

**17. ACKNOWLEDGEMENT: By signing this document I acknowledge that I am the official listed on this form, authorized to execute this request on behalf of my organization. Any questions regarding this request can be directed to me via the contact information provided.**

18. Signature To enable the signature field, please fill out all prior required fields. For a list of required fields which have not yet been filled out, please click here.	Date of Signature (mm/dd/yyyy)
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**Section D: FDA Acknowledgement**

19. FDA Received Date (mm/dd/yyyy)	20. Center Decision <input type="checkbox"/> Approved <input type="checkbox"/> Denied
21. If Denied, State Reason	
22. Decision Date (mm/dd/yyyy)	23. Center Contact Name

**OFM Use Only**

24. Request Executed? <input type="checkbox"/> Yes <input type="checkbox"/> No	25. If No, State Reason
26. Final Action <input type="checkbox"/> Completed – Refunded <input type="checkbox"/> Completed – Not Refunded	27. Date of Final Action (mm/dd/yyyy)
28. OFM Contact Name	

**Appendix 2: Form FDA 3914**

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration	Form Approved: OMB No. 0910-0801 Expiration Date: November 30, 2018
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**Section A: Payment Information**

1. Date of Request (*mm/dd/yyyy*)

2. Payment Amount	3. Payment Reference Number
4. Transfer Funds From	5. Transfer Funds To
6. Transfer Amount	
7. Transfer Reason ( <i>Please explain</i> )	

**Section B: Contact Information**

8. Organization Name

9. Organization Address		
Address 1 ( <i>Street address. No P.O. Boxes allowed</i> )		
Address 2 ( <i>Apartment, suite, unit, building, floor, etc.</i> )		
City	State/Province/Region	
Country	ZIP or Postal Code	

10. Contact Name	11. Contact Title/Position
12. Contact Phone Number <i>(Include area code)</i>	13. Contact Email Address

14. **ACKNOWLEDGEMENT: By signing this document I acknowledge that I am the official listed on this form, authorized to execute this request on behalf of my organization. Any questions regarding this request can be directed to me via the contact information provided.**

15. <a href="#">To enable the signature field, please fill out all prior required fields. For a list of required fields</a>	Date of Signature
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**Section C: FDA**

<b>Acknowledgement</b>	17. Center <input type="checkbox"/> Approv <input type="checkbox"/> Denie
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18. If Denied, State	
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19. Decision Date	20. Center Contact
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