

**Over-the-Counter Monograph User Fees – FDA and Industry Meeting**  
**October 4, 2016, 12:00 PM – 4:00 PM**  
**FDA White Oak Campus, Silver Spring, MD**  
**Building 22, Room 1311**

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**Purpose:**

- To discuss total program size of a potential user-fee program
- To discuss FDA’s proposed plans for growth to desired steady state

**Participants:**

FDA:

Michelle Adams	OC (observer)
Amy Bertha	CDER
Patrick Frey	CDER
Karen Mahoney	CDER
Donal Parks	CDER
Chris Shreeve	CDER
Sherry Stewart	CDER (note-taker)
Eva Temkin	OC

Industry:

Linda Bowen	CHPA (Sanofi)
Greg Collier	CHPA (P&GC)
Jethro Ekuta	CHPA (J&J)
Barbara Kochanowski	CHPA
Alison Maloney	CHPA (Bayer)
David Spangler	CHPA
Richard Stec	CHPA (Perrigo)

**Total Program Size and FDA’s Proposed Growth Concept Scenarios**

Based on FDA and Industry discussions in recent meetings, FDA developed and presented a proposed plan for a total program size. The proposed plan included an estimate of the total FTE needed to achieve steady state for future monograph activities and the number of activity units estimated to occur during a 5-year cycle. FDA’s plan included two possible scenarios that would grow its monograph review capacity to desired steady state over the five-year period. One plan outlined a scenario in which FDA would hire 50% of the additional employees through funding from user-fees in year 1 and 50% in year 2. The second plan outlined a scenario in which FDA would hire employees over years 1, 2, 3, and 4. Using these FTE cost estimates and some non-FTE cost estimates (primarily from information technology system implementation), FDA proposed two scenarios for total user-fee resources needed each fiscal year over the 5-year period. FDA and Industry were not in agreement on the total user fee resources. After discussion, it was agreed FDA would prepare a new scenario in which FDA would hire 75% of additional user-fee funded resources in year 1 and 25% in year 2, as a more accelerated growth rate. Industry also asked FDA to explore spreading out the IT implementation costs over the 5-year period. Industry agreed to consider alternate scenarios and present them at the next meeting.

**Timing of Implementation of Commitments**

FDA and Industry began discussions on the timing of implementation of commitments for each of the two growth plans. FDA asked Industry to state which activities it would want to see implemented earliest, considering the projected FTE capacity under different proposed growth scenarios.

**Plan for Future Meeting**

The goals for the next meeting on October 12, 2016, will be to discuss alternative plans for growth to steady state and associated alternative total program costs.

There were no other substantive proposals, significant controversies, or differences of opinion discussed at this meeting.