GDUFA REAUTHORIZATION PERFORMANCE GOALS AND PROGRAM ENHANCEMENTS FISCAL YEARS 2018-2022

I. SUBMISSION REVIEW PERFORMANCE GOALS
   A. Original ANDAs and ANDA Amendments
   B. PASs and PAS Amendments
   C. Unsolicited ANDA and PAS Amendments
   D. DMFs
   E. Controlled Correspondence
   F. GDUFA I Bridging

II. ORIGINAL ANDA REVIEW PROGRAM ENHANCEMENTS
   A. ANDA Receipt
   B. ANDA Review Transparency and Communications Enhancements
   C. Review Classification Changes During the Review Cycle
   D. ANDA Approval and Tentative Approval
   E. Dispute Resolution
   F. Other ANDA Review Program Aspirations

III. PRE-ANDA PROGRAM AND SUBSEQUENT MID-REVIEW-CYCLE MEETINGS FOR COMPLEX PRODUCTS
   A. Rationale for Pre-ANDA Program, Guidance on Enhanced Pathway for Complex Products
   B. Controlled Correspondence
   C. Product-Specific Guidance
   D. Product Development Meetings
   E. Pre-Submission Meetings
   F. Inactive Ingredient Database Enhancements
G. Regulatory Science Enhancements
H. Safety Determination Letters
I. Other Pre-ANDA Program Aspirations

IV. DMF REVIEW PROGRAM ENHANCEMENTS
   A. Communication of DMF Review Comments
   B. Teleconferences to Clarify DMF First Cycle Review Deficiencies
   C. DMF First Adequate Letters
   D. DMF No Further Comment Letters
   E. Guidance on Post-Approval Changes to Type II API DMFs

V. FACILITIES
   A. Guidance on Risk-Based Site Selection Model
   B. Outreach to Foreign Regulators on Risk-Based Site Selection Model
   C. Export Support and Education of Other Health Authorities
   D. Communications to Foreign Regulators
   E. Communication Regarding Inspections
   F. GDUFA II Facility Compliance Status Database

VI. ENHANCED ACCOUNTABILITY AND REPORTING
   A. Resource Management Planning and Modernized Time Reporting
   B. Financial Transparency and Efficiency
   C. Performance Reporting

VII. DEFINITIONS
GDUFA REAUTHORIZATION PERFORMANCE GOALS AND PROGRAM ENHANCEMENTS FISCAL YEARS 2018-2022

This document contains the performance goals and program enhancements for the Generic Drug User Fee Act (GDUFA) reauthorization for Fiscal Years (FYs) 2018-2022, known as GDUFA II. It is commonly referred to as the “goals letter” or “commitment letter”. The goals letter represents the product of FDA’s discussions with the regulated industry and public stakeholders, as mandated by Congress. The performance goals and program enhancements specified in this letter apply to aspects of the generic drug review program that are important for facilitating timely access to quality, affordable generic medicines. FDA is committed to meeting the performance goals specified in this letter and to continuous improvement of its performance.

Unless otherwise stated, goals apply to cohorts of each fiscal year (FY).
GDUFA REAUTHORIZATION PERFORMANCE GOALS AND PROCEDURES  
FISCAL YEARS 2018-2022

The performance goals and procedures of the FDA, as agreed to under the first reauthorization of the generic drug user fee program, are summarized below.

I. SUBMISSION REVIEW PERFORMANCE GOALS

A. Original ANDAs and ANDA Amendments

1. Review and act on 90 percent of standard original ANDAs within 10 months of the date of ANDA submission.

2. Review and act on 90 percent of priority original ANDAs within the applicable review goal.
   a. Review and act on priority original ANDAs within 8 months of the date of ANDA submission, if the applicant submits a Pre-Submission Facility Correspondence 2 months prior to the date of ANDA submission and the Pre-Submission Facility Correspondence is found to be complete and accurate and remains unchanged.
   b. Review and act on priority original ANDAs within 10 months of the date of ANDA submission if the applicant does not submit a Pre-Submission Facility Correspondence 2 months prior to the date of ANDA submission or facility information Changes or is found to be incomplete or inaccurate.

3. Review and act on 90 percent of standard major ANDA amendments within the applicable review goal.
   a. Review and act on standard major ANDA amendments within 8 months of the date of amendment submission if preapproval inspection is not required.
   b. Review and act on standard major ANDA amendments within 10 months of the date of amendment submission if preapproval inspection is required.

4. Review and act on 90 percent of priority major ANDA amendment submissions within the applicable review goal.
   a. Review and act on priority major ANDA amendments within 6 months of the date of amendment submission if preapproval inspection is not required.
   b. Review and act on priority major ANDA amendments within 8 months of amendment submission if (i) preapproval inspection is required and (ii) applicant
submits a Pre-Submission Facility Correspondence 2 months prior to the date of amendment submission and the Pre-Submission Facility Correspondence is found to be complete and accurate and remains unchanged.

c. Review and act on priority major ANDA amendments within 10 months of amendment submission if (i) preapproval inspection is required and (ii) the applicant does not submit a Pre-Submission Facility Correspondence 2 months prior to amendment submission, or facility information changes or is found to be incomplete or inaccurate.

5. Review and act on 90 percent of standard and priority minor ANDA amendments within 3 months of the date of amendment submission.

Table for Section I(A)(1) and (2): Original ANDAs

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard Original ANDAs</td>
<td>90% within 10 months of submission date.</td>
</tr>
<tr>
<td>Priority Original ANDAs</td>
<td>90% within 8 months of submission date if applicant meets requirements under I(A)(2)(a).</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if applicant does not meet requirements as described under I(A)(2)(b).</td>
</tr>
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Table for Section I(A)(3) – (5): ANDA Amendments

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
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<tbody>
<tr>
<td>Standard Major ANDA Amendments</td>
<td>90% within 8 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required.</td>
</tr>
<tr>
<td>Priority Major ANDA Amendments</td>
<td>90% within 6 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 8 months of submission date if preapproval inspection required and applicant meets requirements under I(A)(4)(b).</td>
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<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required and applicant does not meet requirements as described under I(A)(4)(c).</td>
</tr>
<tr>
<td>Standard and Priority Minor ANDA Amendments</td>
<td>90% within 3 months of submission date.</td>
</tr>
</tbody>
</table>
B. PASs and PAS Amendments

1. Review and act on 90 percent of standard PASs within the applicable review goal.
   a. Review and act on standard PASs within 6 months of the date of PAS submission if preapproval inspection is not required.
   b. Review and act on standard PASs within 10 months of the date of PAS submission if preapproval inspection is required.

2. Review and act on 90 percent of priority PASs within the applicable review goal.
   a. Review and act on priority PASs within 4 months of the date of PAS submission if preapproval inspection is not required.
   b. Review and act on priority PASs within 8 months of the date of PAS submission if (i) preapproval inspection is required and (ii) the applicant submits a Pre-Submission Facility Correspondence 2 months prior to the date of PAS submission and the Pre-Submission Facility Correspondence is found to be complete and accurate and remains unchanged.
   c. Review and act on priority PASs within 10 months of PAS submission if (i) preapproval inspection is required and (ii) the applicant does not submit a Pre-Submission Facility Correspondence 2 months prior to the date of PAS submission, or facility information Changes or is found to be incomplete or inaccurate.

3. Review and act on 90 percent of major amendments to standard PASs within the applicable review goal.
   a. Review and act on major amendments to standard PASs within 6 months of the date of amendment submission if preapproval inspection is not required.
   b. Review and act on major amendments to standard PASs within 10 months of the date of amendment submission if preapproval inspection is required.

4. Review and act on 90 percent of major amendments to priority PASs within the applicable review goal.
   a. Review and act on major amendments to priority PASs within 4 months of the date of amendment submission if preapproval inspection is not required.
b. Review and act on major amendments to priority PASs within 8 months of the date of amendment submission if (i) preapproval inspection is required and (ii) the applicant submits a Pre-Submission Facility Correspondence 2 months prior to the date of amendment submission and the Pre-Submission Facility Correspondence is found to be complete and accurate and remains unchanged.

c. Review and act on major amendments to priority PASs within 10 months of amendment submission if (i) preapproval inspection is required and (ii) the applicant does not submit a Pre-Submission Facility Correspondence 2 months prior to the date of amendment submission, or facility information changes or is found to be incomplete or inaccurate.

5. Review and act on 90 percent of minor amendments to standard and priority PASs within 3 months of the date of amendment submission.

### Table for Section I(B)(1) and (2): PASs

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
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<tbody>
<tr>
<td><strong>Standard PASs</strong></td>
<td>90% within 6 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required.</td>
</tr>
<tr>
<td><strong>Priority PASs</strong></td>
<td>90% within 4 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 8 months of submission date if preapproval inspection required and applicant meets requirements under I(B)(2)(b).</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required and applicant does not meet requirements as described under I(B)(2)(c).</td>
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</table>
Table for Section I(B)(3) – (5): PAS Amendments

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
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<tbody>
<tr>
<td><strong>Standard PAS Major Amendments</strong></td>
<td>90% within 6 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required.</td>
</tr>
<tr>
<td><strong>Priority PAS Amendments</strong></td>
<td>90% within 4 months of submission date if preapproval inspection not required.</td>
</tr>
<tr>
<td></td>
<td>90% within 8 months of submission date if preapproval inspection required and applicant meets requirements under I(B)(4)(b).</td>
</tr>
<tr>
<td></td>
<td>90% within 10 months of submission date if preapproval inspection required and applicant does not meet requirements as described under I(B)(4)(c).</td>
</tr>
<tr>
<td><strong>Standard and Priority Minor PAS Amendments</strong></td>
<td>90% within 3 months of submission date.</td>
</tr>
</tbody>
</table>

C. Unsolicited ANDA Amendments and PAS Amendments

1. Review and act on unsolicited ANDA amendments and PAS amendments submitted during the review cycle by the later of the goal date for the original submission/solicited amendment or the goal date assigned in accordance with Sections (I)(A)(3), (4) and (5) and (I)(B)(3), (4) and (5), respectively, for the unsolicited amendment.

2. Review and act on unsolicited ANDA amendments and PAS amendments submitted between review cycles by the later of the goal date for the subsequent solicited amendment or the goal date assigned in accordance with Sections (I)(A)(3), (4) and (5) and (I)(B)(3), (4) and (5), respectively, for the unsolicited amendment.

D. DMFs

1. Complete the initial completeness assessment review for 90 percent of Type II API DMFs within 60 days of the later of the date of DMF submission or DMF fee payment.
Table for Section I(D): DMFs

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type II API DMF</td>
<td>90% of initial completeness assessments within 60 days of the later of the date of DMF submission or DMF fee payment.</td>
</tr>
</tbody>
</table>

E. Controlled Correspondence

1. Review and respond to 90 percent of controlled correspondences within the applicable review goal.
   
   a. Review and respond to Standard controlled correspondence within 60 days of the date of submission.
   
   b. Review and respond to Complex controlled correspondence within 120 days of the date of submission.

2. In the case of controlled correspondence that raises an issue that relates to one or more pending citizen petitions, the 60- or 120-day time period starts on the date FDA responds to the petition (if there is only one petition) or last pending petition.

3. FDA will review and respond to 90% of submitter requests to clarify ambiguities in the controlled correspondence response within 14 days of receipt of the request. The response to the submitter’s request will provide clarification or advice concerning the ambiguity in the controlled correspondence response.

Table for Section I(E): Controlled Correspondence

<table>
<thead>
<tr>
<th>Submission Type</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard Controlled Correspondence</td>
<td>90% within 60 days of submission date.</td>
</tr>
<tr>
<td>Complex Controlled Correspondence</td>
<td>90% within 120 days of submission date.</td>
</tr>
</tbody>
</table>

FDA will review and respond to 90% of submitter requests to clarify ambiguities in the controlled correspondence request within 14 days of request receipt.

F. GDUFA I Bridging

1. Continue to review and act on ANDAs and ANDA amendments, PASs and PAS amendments and controlled correspondence submitted prior to October 1, 2017 that
have been assigned GDUFA I goal dates pursuant to the GDUFA I review metrics applicable to those submissions.

2. Review and act on 90% of ANDAs and ANDA amendments with TADs by the goal date. The TAD for an ANDA or ANDA amendment becomes its GDUFA II goal date. (Attachment A shows how FDA, until September 30, 2017, assigned TADs to ANDA amendments not subject to GDUFA I review goals.)

3. Review and act on 90% of ANDAs and ANDA amendments pending FDA as of October 1, 2017 that were not subject to GDUFA I goal dates and either (a) were not previously assigned TADs or (b) were previously assigned TADs that came due prior to October 1, 2017 but remain pending in the same review cycle as of October 1, 2017, by GDUFA II ANDA and ANDA amendment goal dates that FDA will assign on October 1, 2017. No such goal date shall be later than July 31, 2018.

4. Review and act on amendments received on or after October 1, 2017, to any ANDAs submitted prior to October 1, 2017, pursuant to the amendment review goals set forth in (A)(3)-(5) of this section.

II. ORIGINAL ANDA REVIEW PROGRAM ENHANCEMENTS

A. ANDA Receipt

1. FDA will strive to determine whether to receive ANDAs within 60 days of the date of ANDA submission.

2. To enable FDA to rapidly determine whether to receive an ANDA pursuant to 21 CFR 314.101, and with consideration of final agency guidances that address ANDA receipt determinations, FDA will issue a MAPP by October 1, 2017 setting forth procedures for filing reviewers on communication of minor technical deficiencies (e.g., document legibility); and on deficiencies potentially resolved with information in the ANDA at original submission, in order to provide applicants with an opportunity for resolution within 7 calendar days. If such a deficiency is resolved within 7 calendar days, that deficiency will not be a basis for a refuse-to-receive decision.

3. At the time of receipt, FDA will notify the applicant in the acceptance letter whether the ANDA or PAS is subject to priority or standard review.
B. ANDA Review Transparency and Communications Enhancements

To promote transparency and communication between FDA and ANDA applicants, FDA will apply the review program enhancements below to the review of all ANDAs. The goal of these program enhancements is to improve predictability and transparency, promote the efficiency and effectiveness of the review process, minimize the number of review cycles necessary for approval, increase the overall rate of approval, and facilitate greater access to generic drug products.

1. FDA will issue the appropriate IR(s) and/or DRL(s) from each review discipline as soon as the discipline has completed its review, with the first IR(s) and/or DRL(s) at about the mid-point of the review.

2. Following the IR and/or DRL at about the mid-point of the review, IRs and/or DRLs will, as appropriate, continue from each review discipline on a rolling basis.

3. Neither IRs nor DRLs stop the review clock or add to a GDUFA goal.

4. If an applicant is unable to completely respond within the time frame requested by FDA, including any extensions that may be granted by FDA, then FDA will generally issue a CRL.

5. FDA will continue to issue IRs and/or DRLs late in the review cycle, until it is no longer feasible, within the current review cycle, for applicant to develop and FDA to review a complete response to the IR and/or DRL.

6. FDA should continue to work through the goal date if in FDA’s judgment continued work would likely result in an imminent tentative approval that could prevent forfeiture of 180-day exclusivity or in an imminent approval.

7. FDA will strive to act prior to a goal date when the review is done and there are no outstanding issues.

8. If in the ordinary course an RPM learns that a major deficiency is likely forthcoming, the RPM will notify the Authorized Representative that a major deficiency is likely forthcoming. If the Authorized Representative raises concerns or seeks additional information regarding the forthcoming major deficiency, the RPM will encourage the Authorized Representative to review the forthcoming deficiency upon receiving it.

9. If in the ordinary course an RPM learns that FDA is likely to miss the goal date for the submission, the RPM will notify the Authorized Representative of the outstanding
discipline(s), the general nature of the delay (when possible), and the estimated timeframe for receiving the response.

10. The Authorized Representative may periodically request a Review Status Update. In response to the Authorized Representative’s request, the RPM will timely provide a Review Status Update.

11. FDA will include in the CRL its basis for classifying a responding amendment Major.

12. Applicants may opt for a post-CRL teleconference to seek clarification concerning deficiencies identified in a CRL. FDA will grant appropriate requests for teleconferences requested by applicants upon receiving first cycle major complete response letters. FDA will also grant appropriate requests for teleconferences requested by applicants upon receiving subsequent major complete response letters or minor complete response letters. FDA will provide a scheduled date for 90 percent of post-CRL teleconferences within 10 days of the request for a teleconference, and conduct 90 percent of such post-CRL teleconferences held on the FDA-proposed date, within 30 days of receipt of the written request.

C. Review Classification Changes During the Review Cycle

1. If during a review cycle of an ANDA or PAS, the review classification of the ANDA or PAS changes from Standard to Priority, FDA will notify the applicant within 14 days of the date of the change.

2. If a previous ANDA or ANDA amendment was subject to priority review, but a subsequent ANDA amendment is subject to standard review, FDA will notify applicant within 14 days of the date of receipt of the solicited amendment.

3. A request for a change may occur at any time during the review.

4. Once an ANDA or PAS submission is classified as being subject to priority review, the application will retain such priority review classification status until FDA takes an action on the submission.

5. FDA will include an explanation of the reasons for any denial of a review status reclassification request.

6. If an applicant requests a teleconference as part of its request to reclassify a major amendment or standard review status, FDA will schedule and conduct the teleconference and decide 90% of such reclassification requests within 30 days of the
date of FDA’s receipt of the request for a teleconference. This goal only applies when applicant accepts the first scheduled teleconference date offered by FDA.

D. ANDA Approval and Tentative Approval

If applicants submit and maintain ANDAs consistent with the statutory requirements for approval under 505(j); respond to IRs and DRLs completely and within the time frames requested by FDA and timely submit all required information under 21 CFR parts 314 and 210, including information concerning notice (21 CFR 314.95), litigation status (21 CFR 314.107), and commercial marketing (21 CFR 314.107); then FDA will strive to approve approvable ANDAs in the first review cycle; to approve potential first generics on the earliest lawful ANDA approval date, if known to FDA; and to tentatively approve first to file Paragraph IV ANDAs so as to avoid forfeiture of 180-day exclusivity.

E. Dispute Resolution

1. An applicant may pursue a request for reconsideration within the review discipline at the Division level or original signatory authority, as needed.

2. The OGD Office of Regulatory Operations Associate Director will track each request for Division level reconsideration through resolution.

3. Following resolution of a request for reconsideration, an applicant may pursue formal dispute resolution above the Division level, pursuant to procedures set forth in the September 2015 Guidance, Formal Dispute Resolution: Appeals Above the Division Level.

4. FDA will respond to appeals above the Division level within 30 calendar days of CDER’s receipt of the written appeal pursuant to the applicable goal.
   a. In FY 2018, the goal is 70 percent.
   b. In FY 2019, the goal is 80 percent.
   c. In FY 2020, 2021, and 2022 the goal is 90 percent.

5. CDER’s Formal Dispute Resolution Project Manager (or designee) will track each formal appeal above the Division level through resolution.

F. Other ANDA Review Program Aspirations

1. FDA aspires to continually improve the efficiency of the ANDA review program.
2. The absence of a GDUFA II commitment for a specific program function does not imply that the program function is not important. For example, other program functions include determinations whether listed drugs were voluntarily withdrawn from sale for reasons of safety or effectiveness and ANDA proprietary name reviews.

III. PRE-ANDA PROGRAM AND SUBSEQUENT MID-REVIEW-CYCLE MEETINGS FOR COMPLEX PRODUCTS

A. Rationale for Pre-ANDA Program, Guidance on Enhanced Pathway for Complex Products

The goal of the pre-ANDA program is to clarify regulatory expectations for prospective applicants early in product development, assist applicants to develop more complete submissions, promote a more efficient and effective ANDA review process, and reduce the number of review cycles required to obtain ANDA approval, particularly for Complex Products.

1. FDA will issue guidance describing an enhanced pathway for Complex Products, including policies and procedures for Product Development Meetings, pre-submission meetings, and mid-review cycle meetings. An ANDA applicant who was granted a Product Development Meeting has the option of a pre-submission meeting with FDA and also the option of a mid-review-cycle meeting with FDA, subject to policies and procedures to be set forth in the guidance.

B. Controlled Correspondence

1. FDA will review and respond to standard controlled correspondence and to complex controlled correspondence with meaningful responses that can more consistently inform drug development and/or regulatory decision making pursuant to the applicable metric goals.

C. Product-Specific Guidance

1. FDA will issue product-specific guidance identifying the methodology for developing drugs and generating evidence needed to support ANDA approval, for 90 percent of new chemical entity New Drug Applications that are approved on or after October 1, 2017, at least 2 years prior to the earliest lawful ANDA filing date.

2. This goal shall not apply to Complex Products. FDA will strive to issue guidance for a Complex Product as soon as scientific recommendations are available.
3. FDA will continue to develop and issue product-specific guidance based on requests from industry and public health priorities as set forth in the CDER Prioritization MAPP.

4. Industry may request that FDA develop product-specific guidance via email to genericdrugs@fda.hhs.gov.

D. Product Development Meetings

1. FDA will grant a prospective applicant a Product Development Meeting if, in FDA’s judgment:
   a. The requested Product Development Meeting concerns:
      i. Development of a Complex Product for which FDA has not issued product-specific guidance or
      ii. An alternative equivalence evaluation (i.e., change in study type, such as in vitro to clinical) for a Complex Product for which FDA has issued product-specific guidance,
   b. The prospective applicant submits a complete meeting package, including a data package and specific proposals,
   c. A controlled correspondence response would not adequately address the prospective applicant’s questions, and
   d. A Product Development Meeting would significantly improve ANDA review efficiency.

2. Dependent on available resources, FDA may grant a prospective applicant a Product Development Meeting concerning Complex Product development issues other than those described in Section III(D)(1)(a) above if, in FDA’s judgment:
   a. The prospective applicant submits a complete meeting package, including a data package and specific proposals,
   b. A controlled correspondence response would not adequately address the prospective applicant’s questions, and
   c. A Product Development Meeting would significantly improve ANDA review efficiency.
3. FDA will grant or deny 90% of Product Development Meeting requests within the applicable goal.
   a. In FYs 2018 and 2019, the goal is 30 days from receipt of the request.
   b. In FYs 2020, 2021 and 2022, the goal is 14 days from receipt of the request.

4. FDA will conduct Product Development Meetings granted pursuant to the applicable goal.
   a. In FY 2018, FDA will conduct 60 percent of such meetings within 120 days of granting them.
   b. In FY2019, FDA will conduct 70 percent of such meetings within 120 days of granting them.
   c. In FY2020, FDA will conduct 80 percent of such meetings within 120 days of granting them.
   d. In FYs 2021 and 2022, FDA will conduct 90 percent of such meetings within 120 days of granting them.

5. FDA can meet the Product Development Meeting Goal by either conducting a meeting or providing a meaningful written response that will inform drug development and/or regulatory decision making to the prospective applicant, within the applicable goal date.

6. Unless FDA is providing a written response to satisfy the Product Development Meeting goal, FDA will provide preliminary written comments before each Product Development Meeting (and aspire to provide the written comments 5 calendar days before the meeting), and will provide meeting minutes within 30 calendar days following the meeting.

E. Pre-Submission Meetings

1. Prospective applicants may request and FDA will conduct pre-submission meetings, subject to Section III(A)(1). An applicant’s decision not to request a pre-submission meeting will not prejudice the receipt or review of an ANDA.

2. FDA will grant or deny 90% of pre-submission meeting requests within the applicable goal.
   a. In FYs 2018 and 2019, the goal is 30 days.
b. In FYs 2020, 2021, and 2022, the goal is 14 days.

3. If an applicant did not have a Product Development Meeting, FDA may grant a pre-submission meeting if in FDA’s judgment the pre-submission meeting would improve review efficiency.

4. FDA will conduct pre-submission meetings granted pursuant to the applicable goal.
   a. In FY 2018, FDA will conduct 60 percent of such meetings within 120 days of granting them.
   b. In FY 2019, FDA will conduct 70 percent of such meetings within 120 days of granting them.
   c. In FY 2020, FDA will conduct 80 percent of such meetings within 120 days of granting them.
   d. In FYs 2021 and 2022, FDA will conduct 90 percent of such meetings within 120 days of granting them.

5. If appropriate to the purpose of the meeting, FDA will provide preliminary written comments 5 calendar days before each meeting, and meeting minutes within 30 calendar days of the meeting.

F. Mid-Review-Cycle Meetings for Complex Products

As set forth in guidance issued pursuant to Section III(A)(1), the Project Manager and other appropriate members of the FDA review team will call the applicant to provide the applicant with an update on the status of the review of their application. An agenda will be sent to the applicant prior to the mid-review-cycle meeting. The Project Manager will coordinate the specific date and time of the telephone call with the applicant.

G. Inactive Ingredient Database Enhancements

1. By October 1, 2020, FDA will complete enhancements to the Inactive Ingredient Database so users can perform electronic queries to obtain accurate Maximum Daily Intake and Maximum Daily Exposure information for each route of administration for which data is available.

2. FDA will update the Inactive Ingredient Database on an ongoing basis, and post quarterly notice of updates made. Such notices will include each change made and, for each change, the information replaced.
H. Regulatory Science Enhancements

FDA will conduct internal and external research to support fulfilment of submission review and pre-ANDA commitments set forth in Sections I and III, respectively.

1. Annually, FDA will conduct a public workshop to solicit input from industry and stakeholders for inclusion in an annual list of GDUFA II Regulatory Science initiatives. Interested parties may propose regulatory science initiatives via email to genericdrugs@fda.hhs.gov. After considering Industry and stakeholder input, FDA will post the list on FDA’s website.

2. If Industry forms a GDUFA II regulatory science working group, then upon request of the working group to the Director of the Office of Research and Standards in the Office of Generic Drugs, FDA will meet with the working group twice yearly to discuss current and emerging challenges and concerns. FDA will post minutes of these meetings on its website.

3. Annually, FDA will report on its website the extent to which GDUFA regulatory science-funded projects support the development of generic drug products, the generation of evidence needed to support efficient review and timely approval of ANDAs, and the evaluation of generic drug equivalence.

I. Safety Determination Letters

1. FDA will issue 90% of safety determination letters within 60 days of the date of submission of disclosure authorization.

J. Other Pre-ANDA Program Aspirations

1. FDA aspires to continually improve the effectiveness of its pre-ANDA activity.

2. The absence of a GDUFA II commitment for a specific program function does not imply that the program function is not important. For example, notwithstanding the absence of a GDUFA II commitment, FDA aspires to respond to Suitability Petitions in a more timely and predictable manner.

IV. DMF REVIEW PROGRAM ENHANCEMENTS

A. Communication of DMF Review Comments

1. FDA will ensure that DMF review comments submitted to the DMF holder are issued at least in parallel with the issuance of review comments relating to the DMF for the
ANDA. This commitment applies to comments to the applicant issued in any ANDA CRL and comments issued in the first IR letter by the drug product review discipline.

B. Teleconferences to Clarify DMF First Cycle Review Deficiencies

1. FDA will grant and conduct teleconferences when requested to clarify deficiencies in first cycle DMF deficiency letters.

2. DMF holders must request such teleconferences in writing within 20 business days of issuance of the first cycle DMF deficiency letter, identifying specific issues to be addressed. FDA may initially provide a written response to the request for clarification, but if the DMF holder indicates that a teleconference is still desired, FDA will schedule the teleconference.

3. FDA will strive to grant such teleconferences within 30 days, giving priority to DMFs based on the priority of the referencing ANDA.

4. In lieu of a teleconference, the DMF holder may submit a request for an email exchange between FDA and the DMF holder. The request must identify specific issues to be addressed. After FDA responds to the request, the DMF holder may submit, and FDA will respond to, one follow up email to obtain additional clarification.

C. DMF First Adequate Letters

1. Once a DMF has undergone a full scientific review and has no open issues related to the review of the referencing ANDA, FDA will issue a First Adequate Letter.

D. DMF No Further Comment Letters

1. Once a DMF has undergone a complete review and the ANDA referencing the DMF has been approved or tentatively approved, FDA will issue a no further comment letter.

E. Guidance on Post-Approval Changes to Type II API DMFs.

1. By October 1, 2018, FDA will issue a guidance regarding post-approval changes to a Type II API DMF and submission mechanisms for ANDA applicants who reference the Type II API DMF.
V. FACILITIES

A. Guidance on Risk-Based Site Selection Model - Issue a guidance explaining the Agency’s risk-based site surveillance model for human pharmaceutical manufacturing establishments, including a discussion of the risk factors incorporated in the model and how the model is used to help determine which establishments are scheduled to receive a surveillance inspection each year.

B. Outreach to Foreign Regulators on Risk-Based Site Selection Model - Undertake outreach activities to better inform other pharmaceutical regulators of FDA’s risk-based surveillance model.

C. Export Support and Education of Other Health Authorities - Support the export of safe and effective pharmaceutical products by the U.S.-based pharmaceutical industry, including but not limited to timely updates to FDA’s Facility Compliance Status Database as described below, and educating other health authorities regarding FDA’s surveillance inspection program and the meaning of inspection classifications.

D. Communications to Foreign Regulators - Upon receipt of a written or email request by an establishment physically located in the U.S. that has been included as part of a marketing application submitted to a foreign regulator, issue within 30 days of the date of receipt of the request a written communication to that foreign regulator conveying the current compliance status for the establishment.

E. Communication Regarding Inspections –

1. By May 31, 2018, when FDA conducts an application-related inspection of a facility or site named in the ANDA, PAS, or associated Type II DMF and identifies outstanding issues that could prevent approval of an ANDA or PAS, the applicant will be notified that issues exist through an IR, DRL or CRL pursuant to Section II(B)) above.

2. By October 1, 2018, FDA agrees to communicate to the facility owner final inspection classifications that do not negatively impact approvability of any pending application within 90 days of the end of the inspection. FDA agrees to ongoing periodic engagement with industry stakeholders to provide updates on agency activities and seek stakeholder feedback.

F. GDUFA II Facility Compliance Status Database – By January 1, 2019, FDA will update its existing, publicly available database that describes the compliance status of GDUFA self-ID facilities and sites. Compliance status is based on the most recent
inspection or related FDA action for facilities involved in any manufacturing activities subject to CGMP inspection and for sites involved in the conduct or analysis of bioanalytical or clinical bioequivalence/bioavailability studies conducted to support an ANDA. The database will be updated every 30 days and will reflect FDA’s final assessment of the facility or site following an FDA inspection and review of the inspected entity’s timely response to any documented observations. The public website containing the database will also include an explanation of terms used to describe the compliance status of facilities and sites.

VI. ENHANCED ACCOUNTABILITY AND REPORTING

FDA will build internal capacity to enable improved productivity and performance through regular assessment of progress towards GDUFA goals, consistent methodologies for and timely reporting of GDUFA metrics, and transparent and efficient administration; allocation and reporting of user fee resources.

A. Resource Management Planning and Modernized Time Reporting

FDA is committed to enhancing management of the GDUFA program in GDUFA II.

1. FDA will conduct activities to develop a resource management planning function and modernized time reporting approach in GDUFA II. FDA will staff a planning team responsible for these activities and for publishing a GDUFA program resource management planning and modernized time reporting implementation plan no later than fourth quarter FY 2018.

2. FDA will obtain through a contract with an independent third party an evaluation of options and recommendations for a new methodology to accurately assess changes in the resource needs of the human generic drug review program and how to monitor and report on those needs moving forward. The report will be published no later than the end of FY 2020 for public comment. Upon review of the report and comments, FDA will implement robust methodologies for assessing resource needs of the program and tracking resource utilization across the program elements.

B. Financial Transparency and Efficiency

FDA is committed to ensuring GDUFA user fee resources are administered, allocated, and reported in an efficient and transparent manner. FDA will conduct activities to evaluate the financial administration of the GDUFA program to help identify areas to enhance operational and fiscal efficiency. FDA will also conduct activities to enhance transparency of how GDUFA program resources are used.
1. FDA will contract with an independent third party to evaluate and report on how the GDUFA program is resourced and how those resources are utilized, and recommend improvements to the process.

2. FDA will use the results of that evaluation to create an ongoing financial reporting mechanism to enhance the transparency of GDUFA program resource utilization.

3. FDA will publish a GDUFA 5-year financial plan no later than the 2nd quarter of FY 2018. FDA will publish updates to the 5-year plan no later than the 2nd quarter of each subsequent fiscal year.

4. FDA will convene a public meeting no later than the third quarter of each fiscal year starting in FY 2019 to discuss the GDUFA 5-year financial plan, along with the Agency’s progress in implementing modernized time reporting and resource management planning.

C. Performance Reporting

1. FDA will publish the following monthly metrics on its website, using a consistent, publicly disclosed reporting methodology:
   a. Number of ANDAs and ANDA amendments, DMFs, CBEs and PASs submitted in the reporting month delineated by type of submission,
   b. Number each of ANDAs and PASs FDA refused for receipt in the reporting month,
   c. Number of actions taken in the reporting month delineated by the type of action. For purposes of the metrics, actions shall include final approvals, tentative approvals, complete response letters, information requests, and discipline review letters (or other such nomenclature as FDA determines to reflect the concepts of an information request or complete response letter), and
   d. Number of first cycle approvals and tentative approvals in the reporting month.

2. FDA will publish the following quarterly metrics on its website, using a consistent, publicly disclosed reporting methodology:
   a. Number of ANDAs and PASs withdrawn in each reporting month,
   b. Number of ANDAs awaiting applicant action, and
   c. Number of ANDAs awaiting FDA action.
d. Mean and median approval and tentative approval times for the quarterly action cohort.

3. FDA will publish the following metrics annually as part of the GDUFA Performance Report:
   
a. Mean and median approval and tentative approval times by FY receipt cohort,
   
b. Mean and median ANDA approval times, including separate reporting of mean and median times for first cycle approvals,
   
c. Mean and median number of ANDA review cycles to approval and tentative approval by FY receipt cohort,
   
d. Number of GDUFA related teleconferences requested, granted, denied and conducted, broken down by type of teleconference,
   
e. Number of applications received, refused to receive, and average time to receipt decision,
   
f. Number of product development, pre-submission and mid-review cycle meetings requested, granted, denied and conducted, by face to face or in writing,
   
g. Number of inspections conducted by domestic or foreign establishment location and inspection type (PAI, GMP, BE clinical and BE analytical) and facility type (FDF, API, etc.),
   
h. Median time from beginning of inspection to 483 issuance,
   
i. Median time from 483 issuance to Warning Letter, Import Alert and Regulatory Meeting for inspections with final classification of OAI (or equivalent),
   
j. Median time from date of Warning Letter, Import Alert and Regulatory Meeting to resolution of the OAI status (or equivalent),
   
k. Number of ANDAs accepted for standard review and priority review,
   
l. Number of suitability petitions pending a substantive response for more than 270 days from the date of receipt,
   
m. Number of petitions to determine whether a listed drug has been voluntarily withdrawn from sale for reasons of safety or effectiveness pending a substantive response for more than 270 days from the date of receipt,
n. Percentage of ANDA proprietary name requests reviewed within 180 days of receipt,

o. Number of DMF First Adequate Letters issued, and

p. Number of email exchanges requested and conducted in lieu of teleconferences to clarify deficiencies in first cycle DMF deficiency letters.

VII. DEFINITIONS

A. Act on an application – means FDA will either issue a complete response letter, an approval, a tentative approval, or a refuse-to-receive action.

B. Ambiguity in the controlled correspondence response – means the controlled correspondence response or a critical portion of it, in FDA’s judgment, merits further clarification.

C. Appropriate, with respect to a request for a post-CRL teleconference – means a complete and clear request for a teleconference where the applicant’s goal is to gain an understanding of specific deficiencies and expectations for resolution.

D. Authorized Representative – means the authorized point of contact identified in applicant’s letter of authorization or Form 356h. An Authorized Representative may designate an alternate to serve in the Authorized Representative’s absence.

E. Change, with respect to facility information – means a change to information in the Pre-Submission Facilities Correspondence that causes FDA to re-evaluate its facility assessment (i.e., assess the impact of the change on its previous recommendation), such as a change in facility (as described by address, FEI number, or DUNS number), change in operation(s) performed by a facility, addition of a new facility, withdrawal of a facility used to generate data to meet application requirements or intended for commercial production, or a change in inspection readiness (i.e., a facility is no longer ready for inspection).

F. Complete response letter (CRL) – refers to a written communication to an applicant or DMF holder from FDA usually describing all of the deficiencies that the agency has identified in an abbreviated application (including pending amendments) or a DMF that must be satisfactorily addressed before the ANDA can be approved. Complete response letters will reflect a complete review which includes an application-related facilities assessment and will require a complete response from industry to restart the clock. Refer to 21 CFR 314.110 for additional details. When a citizen petition may impact the approvability of the ANDA, FDA will strive to address, where possible, valid issues
raised in a relevant citizen petition in the complete response letter. If a citizen petition raises an issue that would delay only part of a complete response, a response that addresses all other issues will be considered a complete response.

G. Complete review – refers to a full division—level review from all relevant review disciplines, including inspections, and includes other matters relating to the ANDAs and associated DMFs as well as consults with other agency components.

H. Complex controlled correspondence – means:
   1. Controlled correspondence involving evaluation of clinical content,
   2. Bioequivalence protocols for Reference Listed Drugs with REMS ETASU, or
   3. Requested evaluations of alternative bioequivalence approaches within the same study type (e.g., pharmacokinetic, in vitro, clinical).

I. Complex Product – generally includes:
   1. Products with complex active ingredients (e.g., peptides, polymeric compounds, complex mixtures of APIs, naturally sourced ingredients); complex formulations (e.g., liposomes, colloids); complex routes of delivery (e.g., locally acting drugs such as dermatological products and complex ophthalmological products and otic dosage forms that are formulated as suspensions, emulsions or gels) or complex dosage forms (e.g., transdermals, metered dose inhalers, extended release injectables)
   2. Complex drug-device combination products (e.g., auto injectors, metered dose inhalers); and
   3. Other products where complexity or uncertainty concerning the approval pathway or possible alternative approach would benefit from early scientific engagement.

J. Days – unless otherwise specified, means calendar days.

K. Discipline review letter (DRL) – means a letter used to convey preliminary thoughts on possible deficiencies found by a discipline reviewer and/or review team for its portion of the pending application at the conclusion of the discipline review.

L. Earliest lawful ANDA approval date – the first date on which no patent or exclusivity prevents full approval of an ANDA

M. First adequate letter – a communication from FDA to DMF holder indicating that the DMF has no open issues related to the review of the referencing ANDA. Issued only at
the conclusion of the first DMF review cycle that determines the DMF does not have any open issues.

N. First generic – any received ANDA (1) that is a first-to-file ANDA eligible for 180-day exclusivity or for which there are no blocking patents or exclusivities and (2) for which there is no previously approved ANDA for the drug product.

O. Information Request (IR) – means a letter that is sent to an applicant during a review to request further information or clarification that is needed or would be helpful to allow completion of the discipline review.

P. Major amendment – means a major amendment as described in CDER’s December 2001 Guidance for Industry: Major, Minor and Telephone Amendments to Abbreviated New Drug Applications.

Q. Mid-review-cycle meeting –after the last key discipline has issued its IR and/or DRL, for ANDAs that were the subject of prior Product Development Meetings or pre-submission meetings, CDER will schedule a teleconference meeting with the applicant to discuss current concerns with the application and next steps.

R. Minor amendment – means a minor amendment as described in CDER’s December 2001 Guidance for Industry: Major, Minor and Telephone Amendments to Abbreviated New Drug Applications.

S. Complete and accurate Pre-Submission Facility Correspondence – lists all of the following:

   1. All facilities involved in manufacturing processes and testing for the ANDA and corresponding Type II API DMF as required by 21 CFR 314.50(d)(1)(i) and (iii). For each manufacturing or testing facility, the correspondence includes facility name, operation(s) performed, facility contact name, address, FEI number (if a required registrant or one has been assigned), DUNS number, registration information (for required registrants), a confirmation that the facility is ready for inspection, a description of the manufacturing process, and a certification by the applicant that any Type II DMF has similarly complete and accurate facility information as required by 21 CFR 314.50(d)(1)(i), including complete facility information (i.e., facility name, operation, facility contact name, address, FEI number and DUNS number). Facility information that is included in a corresponding Type II DMF is not required to be duplicated in the Pre-Submission Facility Correspondence for the ANDA.
2. All sites or organizations involved in bioequivalence and clinical studies used to support the ANDA submission as described in 21 CFR 314.94(a)(7). This information is provided using a standardized electronic format and includes unique identifiers that are current and accurate, including site or organization name, address and website; and study information including a listing of study names, dates of conduct and main investigators.

T. Pre-submission meeting – means a meeting in which an applicant has an opportunity to discuss and explain the format and content of an ANDA to be submitted. Although the proposed content of the ANDA will be discussed, pre-submission meetings will not include substantive review of summary data or full study reports.

U. Priority – means submissions affirmatively identified as eligible for expedited review pursuant to CDER’s Manual of Policy and Procedures (MAPP) 5240.3, Prioritization of the Review of Original ANDAs, Amendments and Supplements, as revised (the CDER Prioritization MAPP).

V. Product Development Meeting – means a meeting involving a scientific exchange to discuss specific issues (e.g., a proposed study design, alternative approach or additional study expectations) or questions, in which FDA will provide targeted advice regarding an ongoing ANDA development program.

W. Review Status Update – means a response from the RPM to the Authorized Representative to update the Authorized Representative concerning, at a minimum, the categorical status of relevant review disciplines with respect to the submission at that time. The RPM will advise the Authorized Representative that the update is preliminary only, based on the RPM’s interpretation of the submission, and subject to change at any time.

X. Safety determination letter – a letter from FDA stating that a bioequivalence study protocol contains safety protections comparable to applicable REMS for the Reference Listed Drug.

Y. Standard – means submissions not affirmatively identified as eligible for expedited review pursuant to the CDER Prioritization MAPP.

Z. Standard controlled correspondence – means controlled correspondence

1. as described in CDER’s September 2015 Guidance for Industry, Controlled Correspondence Related to Generic Drug Development, or
2. concerning post-approval submission requirements that are not covered by CDER post-approval changes guidance and are not specific to an ANDA.

AA. Target Action Date (TAD) – Under GDUFA I, FDA’s aspirational deadline for action on a pre-GDUFA I Year 3 original ANDA and/or a complete response amendment or equivalent IR to an original ANDA. GDUFA I TADs become GDUFA II goal dates on enactment of GDUFA II.

BB. Teleconference – means a verbal communication by telephone, and not a written response, unless otherwise agreed to by the applicant.

CC. Unsolicited amendment – an amendment with information not requested by FDA except for those unsolicited amendments considered routine or administrative in nature that do not require scientific review (e.g., requests for final ANDA approval, patent amendments, and general correspondence).
### GDUFA II Commitment Letter, Attachment A

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<th>Category</th>
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