

Five-Year Financial Plan

Fiscal Years

2023-2024-2025-2026-2027

FY 2023 Version

FOR THE

Biosimilar User Fee Act Program

FOOD AND DRUG ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES



U.S. FOOD & DRUG
ADMINISTRATION

Table of Contents

FIVE-YEAR PLAN OVERVIEW	3
A. Scope	3
B. Five-Year Plan Commitments	3
C. Updates to the Five-Year Plan	3
MANAGEMENT DISCUSSION	4
D. Organization Background	4
<i>Program Organization</i>	4
<i>User Fee Governance</i>	4
<i>Working Capital Fund/Cost Allocation</i>	5
<i>Internal Controls</i>	5
E. User Fee Background and Structure	6
F. Forward View	8
<i>Highlights of New Enhancements in BsUFA III</i>	8
<i>Changes to Fee-Setting Mechanisms in BsUFA III</i>	8
<i>Continued Efforts to Enhance Financial Management in BsUFA III</i>	9
<i>Other Financial Impacts</i>	11
FINANCIAL INFORMATION	12
G. User Fee Program Financial Summary	12
H. Budgetary Resources	13
I. User Fee Obligations	17
J. User Fee Carryover	19
K. Non-User Fee Appropriations	22
L. Planned Hiring	23
CHALLENGES, RISK AND MITIGATION	24
APPENDICES	26
A. Allowable and Excluded Costs for the BsUFA Program	26
B. Financial Notes	28

Five-Year Plan Overview

A. Scope

The purpose of the Five-Year Financial Plan is to communicate the anticipated financial position of the Biosimilar User Fee Act (BsUFA) program over the current five-year authorization period (BsUFA III). This document addresses the plan for implementation and use of BsUFA user fees by the Food and Drug Administration (FDA or the Agency) during the period of October 1, 2022, through September 30, 2027.

B. Five-Year Plan Commitments

In accordance with Biosimilar Biological Product Reauthorization Performance Goals and Procedures Fiscal Years 2023 through 2027 (BsUFA III Commitment Letter), Title III, Section B, FDA will publish a BsUFA five-year financial plan no later than the second quarter of fiscal year (FY) 2023. FDA will publish updates to the five-year plan no later than the second quarter of each subsequent fiscal year. The purpose of this document is to meet these commitments.

C. Updates to the Five-Year Plan

All estimates in the plan are subject to review and reassessment each fiscal year as the actual amounts for appropriations, obligations, and collections for the previous year become available. The five-year financial plan provides the baseline from which future changes will be made. Updates to the five-year financial plan will occur on an annual basis and cover the 5 years in the current reauthorization period.

Management Discussion

D. Organization Background

FDA is responsible for protecting the public's health by helping to ensure the safety, efficacy, and security of human and veterinary drugs, biological products, and medical devices and by ensuring the safety of our nation's food supply, cosmetics, and products that emit radiation. FDA also has responsibility for regulating the manufacturing, marketing, and distribution of tobacco products. FDA helps to speed innovations that make medical products more effective, safe, and affordable; and helps the public get the accurate, science-based information needed to use medical products and consume foods to maintain and improve their health. FDA similarly plays a significant role in the nation's counterterrorism capability. FDA fulfills this responsibility by ensuring the security of the food supply and by fostering the development of medical products to respond to deliberate and naturally emerging public health threats.

Program Organization

There are four major FDA components that support the BsUFA program: the Center for Drug Evaluation and Research (CDER), the Center for Biologics Evaluation and Research (CBER), the Office of Regulatory Affairs (ORA), and Headquarters (HQ).

Exhibit 1 provides an overview of the mission for each of these components.

Exhibit 1: User Fee Program Components

Component	Mission
CDER	Protects and promotes public health by helping to ensure that human drugs are safe and effective, meet established quality standards, and are available to patients.
CBER	Protects and advances the public health by helping to ensure that biological products are safe and effective and are available to patients.
ORA	Protects consumers and enhances public health by maximizing compliance of FDA-regulated products and minimizing the risk associated with those products. ORA inspects regulated products and manufacturers, conducts sample analyses of regulated products and reviews imported products offered for entry into the United States.
HQ	Provides FDA-wide program direction and administrative services to ensure FDA's consumer and patient safety programs are effectively and efficiently managed.

User Fee Governance

The Agency's expanding level of user fees, the reporting of the Agency's performance commitments associated with these fees, and the need for FDA to convey how these fees are executed calls for strong financial governance. This governance includes an

understanding of the design of the user fee programs, clear financial plans, data-driven decisions on resource allocation, consistency and transparency about assumptions, reliable financial forecasting, and accountability for resources spent.

FDA leverages the User Fee Financial Management Committee (UFFMC) for user fee governance. The UFFMC consists of senior financial, business operations, and program experts across the Agency that evaluate user fee resource needs, develop financial allocation plans, and forecast resource requirements – both programmatic and administrative – to support user fee financial decisions. The UFFMC is responsible for providing oversight and support of appropriate standards and policies to ensure FDA’s compliance with sound financial management practices as well as ensuring FDA’s compliance with statutory provisions that authorize FDA to collect and spend user fees. The UFFMC receives policy guidance and strategic direction directly from FDA’s Executive Committee relative to how the Agency will forecast and react to industry trends, plan and manage its research agenda in support of the user fee programs, and forecast its user fee workload. The UFFMC advises the Executive Committee and other Center and Office-level bodies on a variety of financial and performance-related topics.

Working Capital Fund/Cost Allocation

FDA utilizes a Cost Allocation and Recovery framework as part of the financial management of user fee resources. Congress authorized FDA to establish a Working Capital Fund (WCF) to finance centralized services (see section 722 of Division A of P.L. 115-141). The WCF benefits the financial management of Agency funds by:

- Increasing transparency through defining administrative activities performed for Centers and Offices and allocating costs based on Agency usage.
- Strengthening accountability by improving the tracking and management of administrative costs, including costs charged to user fees for administrative services.
- Promoting efficiency by optimizing customer usage and improving the management of user fee administrative costs over time.
- Leveraging the WCF governance structure to ensure FDA leadership engagement in decision making relative to administrative costs, efficiency opportunities, recapitalization, and burden on all funding sources – including user fees.

Internal Controls

The Department of Health and Human Services (HHS) provides guidance to its operating divisions (OpDivs) to implement The Federal Managers’ Financial Integrity Act of 1982 (FMFIA) through its FMFIA Guidelines, which is intended to strengthen internal controls and accounting systems. OpDivs, including FDA, are responsible for developing and maintaining internal control and compliance programs that include

programmatic and operational controls, as well as reporting controls to support sound financial management. Additionally, FDA established an Enterprise Risk Management (ERM) Program, with an ERM Council as the governance body responsible for providing overall oversight and accountability. For further information regarding the Internal Controls and Enterprise Risk Management, please refer to the User Fee Program's Financial Report.¹

E. User Fee Background and Structure

Under BsUFA, FDA assesses and collects fees from biosimilar biological product manufacturers to fund the biosimilar biological product review process. The Federal Food, Drug, and Cosmetic Act (FD&C Act), as amended by BsUFA, authorizes FDA to collect fees from industry to supplement non-user fee appropriations that the Agency spends on the process for the review of biosimilar biological product applications.

Originally authorized in 2012, BsUFA was reauthorized in 2017 (BsUFA II), and most recently in 2022 (BsUFA III). The FDA User Fee Reauthorization Act of 2022 included the Biosimilar User Fee Amendments of 2022, also known as BsUFA III, which extended the program from October 1, 2022, through September 30, 2027. The 5-year reauthorization authorizes continued funding for FDA from FY 2023 through FY 2027 to support the efficiency and effectiveness of the biosimilar biological product review program. BsUFA III enhances FDA's capacity to facilitate timely access to safe and effective biosimilar medicines for patients.

FDA spends BsUFA user fee collections and non-user fee appropriations to hire, support, and maintain personnel for the review of biosimilar biological product applications to help ensure that safe and effective biosimilar biological products are available to the American public.

The fee structure remains unchanged from BsUFA II. BsUFA III continues to maintain an efficient user fee structure comprised of initial and annual biosimilar biological product development (BPD) fees, BPD reactivation fees, biosimilar biological product application fees, and biosimilar biological product program fees.

Exhibit 2 outlines the BsUFA III user fee structure.

¹ BsUFA Financial Reports <https://www.fda.gov/about-fda/user-fee-financial-reports/bsufa-financial-reports>

Exhibit 2: BsUFA III Fee Structure

Fee Type	Definition
Biosimilar Biological Product Development: Initial	Initial BPD fee is a one-time fee that is assessed to a sponsor to enter the BPD program.
Biosimilar Biological Product Development: Annual	Beginning in the next fiscal year after a sponsor has paid the initial BPD fee, the sponsor must pay an annual fee for the product in each fiscal year.
Biosimilar Biological Product Development: Reactivation	A sponsor that has discontinued participation in the BPD program for a product, or that has been administratively removed from such program for a product, and wants to resume participation in the BPD program for that product must pay all annual BPD fees previously assessed for such product and still owed and a reactivation fee.
Application: With Clinical Data	A biosimilar biological product application for which clinical data (other than comparative bioavailability studies) with respect to safety or effectiveness are required for approval is assessed a full application fee when the application is submitted.
Application: Without Clinical Data	A biosimilar biological product application for which clinical data (other than comparative bioavailability studies) with respect to safety or effectiveness are not required for approval is assessed one-half of a full application fee.
Program	Biosimilar biological product program fees are assessed annually for eligible products.

The statute specifies how the fees must be calculated each fiscal year, including annual adjustments that must be made for inflation, strategic hiring and retention, capacity planning, operating reserve, and additional dollar amounts specified in the statute. The fee amounts are to be published in the Federal Register each year;² this is typically at the beginning of August.

BsUFA user fees are not a fee-for-service. These user fees are pooled and may be used for allowable activities, as set forth in the FD&C Act. Refer to **Appendix A** for a detailed list of allowable and excluded activities.

² See the BsUFA user fee rates archive at <https://www.fda.gov/industry/biosimilar-user-fee-amendments/bsufa-user-fee-history>.

F. Forward View

FDA developed the enhancements for BsUFA III through a process required by statute. Information on the BsUFA III commitments can be found on FDA's website.³

The BsUFA III Commitment Letter continues many commitments from BsUFA II and introduces new enhancements to the program. BsUFA III also made changes to the fee-setting mechanisms and provides additional user fee funding for the program. Over the next five fiscal years, FDA will focus on implementing the new commitments and changes to the program. Below are some of the key highlights of what FDA will be focusing on over the next five years in the program.

Highlights of New Enhancements in BsUFA III

BsUFA III provides additional funding to FDA to implement new enhancements to the program while sustaining existing commitments. This new funding is provided through the strategic hiring and retention adjustment and additional dollar amounts outlined in statute, which will enable the program to hire 15 new employees and retain staff over the course of BsUFA III.

The funding will support enhancements to:

- Review performance, including the introduction of new BsUFA III supplement categories, review timelines, and performance goals
- Meeting management, including modifying two meeting types, introducing a new meeting type, and allowing for follow-up opportunities after meetings
- Review processes for biosimilar biological-device combination products regulated by CDER and CBER, by introducing new procedures and timelines for use-related risk analysis and human factor validation study protocols
- Regulatory science by introducing a new pilot research program broadly applicable to facilitating biosimilar and interchangeable biological product development

Changes to Fee-Setting Mechanisms in BsUFA III

BsUFA III includes changes to fee-setting mechanisms to provide predictable funding for the program and enhance flexibilities to sustain operations. Some of the changes include:

- Introduction of a new Strategic Hiring and Retention Adjustment to provide FDA with additional funding to cover the costs of retaining and hiring qualified

³ <https://www.fda.gov/media/152279/download>

scientific and technical staff for the process for the review of biosimilar biological product applications under BsUFA. This funding is phased in over the course of BsUFA III to reflect the needs of the program and a reasonable expectation of the timing of retention and new hire costs. The funding will be added to the base revenue each fiscal year.

- Updating of the BsUFA Capacity Planning Adjustment to clarify the workload categories used in the forecasting methodology. These workload categories will include only the activities described in the BsUFA fee setting notice for FY 2021 and, as feasible, additional activities that are also directly related to the direct review of applications and supplements, including additional formal meeting types, the direct review of postmarketing commitments and requirements, the direct review of risk evaluation and mitigation strategies, and the direct review of annual reports for approved biosimilar biological products.
- Modification of the Operating Reserve Adjustment to provide for a defined minimum and maximum required amount of operating reserves of carryover user fees for the process for the review of biosimilar biological product applications to be maintained each fiscal year to mitigate financial risks. This requires FDA to increase the annual revenue amount used to set fees, if needed, to provide for at least 10 weeks of such operating reserves. In addition, this requires FDA to decrease the annual revenue amount used to set fees, if needed, to provide for not more than the annual maximum amount of such operating reserves. The annual maximum amount of such operating reserves will be phased in over the first three years of BsUFA III (33 weeks in FY 2023, 27 weeks in FY 2024, and 21 weeks in FY 2025 and each subsequent fiscal year).

Over the next 5 years, FDA will focus on implementing and managing these changes to the fee-setting mechanisms to help FDA maintain a world-class workforce, manage sustained increases in workload, and mitigate financial risks to the BsUFA program.

Continued Efforts to Enhance Financial Management in BsUFA III

Under BsUFA II, FDA made numerous commitments to enhance the financial management of user fee resources in the program. This included establishing a resource capacity planning function and modernizing time reporting to enable better forecasting of workload in the program and the ability to translate forecasts into more targeted human resource and financial needs. Upon establishing the foundational resource capacity planning capability, FDA implemented the new capacity planning adjustment (CPA) methodology that adjusts the annual target revenue amount to account for the resources required to respond to projected sustained changes in program workload. This helps ensure FDA has the resources it needs to deliver on its performance commitments in BsUFA.

FDA also made commitments in BsUFA II to enhance efficiency and transparency in the administration of BsUFA's financial resources. This included conducting a third-party

evaluation of BsUFA program resource management in FY 2018, efforts to manage the carryover balance, publishing of a five-year plan with annual updates, and holding an annual public meeting to discuss the five-year financial plan, along with the Agency's progress in implementing resource capacity planning, modernized time reporting, and the impact of the user fee structure changes under BsUFA II.

Over the course of BsUFA III, FDA will build on the financial improvements achieved in BsUFA II to enhance financial management in the program. Some of the enhancements include:

- Publishing an implementation plan that will describe how resource capacity planning and time reporting will continue to be implemented during BsUFA III, hiring an independent contractor to evaluate the resource capacity planning capability, and, as appropriate, continuing to improve the resource capacity planning capability and CPA after reviewing the findings and recommendations of the evaluation.
- Publishing a 5-year financial plan with updates each year. The annual updates will include additional topics related to (1) changes in the personnel compensation and benefit costs for the process for the review of biosimilar biological product applications that exceed the amounts provided by the personnel compensation and benefit costs portion of the inflation adjustment, and (2) FDA's plan for managing costs related to strategic hiring and retention after the adjustment required by section 744H(b)(1)(C) of the FD&C Act expires at the end of fiscal year 2027.
- Convening a public meeting each fiscal year to discuss this 5-year financial plan and the Agency's progress in implementing resource capacity planning, including the continual improvement of the CPA and time reporting, and the integration of resource capacity planning in resource and operational decision-making processes.
- In the annual updates to the 5-year financial plan, providing updates on progress towards implementing FDA's plan to reduce the carryover balance as outlined in the FY 2022 BsUFA financial report and five-year financial plan.

FDA is committed to ensuring the sustainability of BsUFA program resources and to enhancing the operational agility of the BsUFA program. The continued maturation of the resource capacity planning function and CPA over BsUFA III will help ensure optimal use of user fee resources and is FDA's primary mechanism to acquire resources if there are sustained increases in workload in the program. Over the next five years, FDA will also continue activities to promote transparency of the use of financial resources in support of the BsUFA program.

Other Financial Impacts

Section 905(b) of the FDA Reauthorization Act of 2017 (FDARA) amended the FD&C Act to provide that the types of fee-coverable costs under the Prescription Drug User Fee Act (PDUFA) program, the Generic Drug User Fee Amendments (GDUFA) program, the Medical Devices User Fee Amendments (MDUFA) program, and the BsUFA program will narrow on October 1, 2023.

Due to a later provision in Food and Drug Omnibus Reform Act (as included in the Consolidated Appropriations Act, 2023), section 744H(f)(2) of the FD&C Act was amended to clarify that while BsUFA fees may no longer be used to pay for certain costs excluded by FDARA section 905(b), non-user fee appropriations spent on the excluded costs will count toward the non-user fee spending trigger. For further information, see **Note 4**.

There is not expected to be an impact on the agency's ability to meet the non-user fee spending trigger. The systems supporting these programs, however, are complex and multi-faceted. As such, FDA will continue to plan for and monitor the impacts of these changes to ensure minimal disruption to its user fee commitment and public health mission.

Financial Information

This section provides an overview of the financial outlook for BsUFA for the FY 2023 through FY 2027 authorization period including budgetary resources, obligations, carryover, non-user fee appropriations requirements, and planned hiring. The forecasts included in this section are driven by the initiatives and goals as outlined in the Forward View section of this plan.

G. User Fee Program Financial Summary

Table 1 represents a summary of the estimated BsUFA financial position, as it relates to user fee budgetary resources. This table also provides an overview of estimated obligations for which the user fee resources would be used. Annual updates to this plan will provide actual amounts for the prior fiscal years. The financial notes referenced in this table can be found in **Appendix B**.

Table 1: Biosimilar Biological Product Collections, Obligations, and Carryover for Fiscal Year 2023 through Fiscal Year 2027

Budgetary Resources	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Target Revenue	Note 1	\$41,600,000	\$48,834,000	\$48,737,000	\$53,235,000	\$54,450,000
Net Collections		\$41,600,000	\$48,834,000	\$48,737,000	\$53,235,000	\$54,450,000
Recoveries	Note 2	\$600,000	\$600,000	\$600,000	\$600,000	\$600,000
Total Carryover, Beginning of Year		\$43,317,275	\$30,567,030	\$26,416,901	\$21,018,020	\$18,925,254
Total Budgetary Resources		\$85,517,275	\$80,001,030	\$75,753,901	\$74,853,020	\$73,975,254

Obligations	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Total Payroll & Operating	Note 3	\$49,425,286	\$49,045,512	\$50,151,877	\$51,297,923	\$52,466,686
Total Rent	Note 4	\$1,372,237	\$272,514	\$275,239	\$277,992	\$280,772
Total Shared Services	Note 5	\$4,152,722	\$4,266,103	\$4,308,764	\$4,351,852	\$4,395,370
Total Obligations		\$54,950,245	\$53,584,129	\$54,735,880	\$55,927,766	\$57,142,828

Carryover	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Total Carryover, End of Year		\$30,567,030	\$26,416,901	\$21,018,020	\$18,925,254	\$16,832,426
Future Year Refunds Allowance, Set Aside		(\$1,000,000)	(\$1,000,000)	(\$1,000,000)	(\$1,000,000)	(\$1,000,000)
Carryover Net of Set Aside, End of Year		\$29,567,030	\$25,416,901	\$20,018,020	\$17,925,254	\$15,832,426

*Target Revenue has been rounded to the nearest thousand dollars
All other numbers have been rounded to the nearest dollar*

Budgetary Resources: The Total Budgetary Resources component of **Table 1** illustrates the sum of total user fee funding estimates for FY 2023 through FY 2027. Budgetary resources include net collections, recoveries, and carryover amounts.

Budgetary resources are discussed in more detail in **Section H**.

Obligations: The “Obligations” component of **Table 1** shows the planned expenditures for FY 2023 through FY 2027 of BsUFA fee funds broken out into major expense categories. BsUFA fees may be expended only for costs to support the “process for the review of biosimilar biological product applications,” as defined in BsUFA III. For more information on the allowable and excluded costs, see **Appendix A**.

Obligations are discussed in more detail in **Section I**.

Carryover: BsUFA fees collected, appropriated, and not obligated at the end of the fiscal year remain available to support the BsUFA program in future fiscal years. In this report, such fee funds are referred to as the “total carryover” or “BsUFA carryover.”

Carryover is discussed in more detail in **Section J**.

H. Budgetary Resources

Budgetary resources include net collections, recoveries, and carryover amounts. Net collections are a function of the annual target revenue amount and the number of fees paid. This section describes the process for the setting of the annual target revenue amount and then describes the estimated total budgetary resources.

Annual updates to this plan will update the actual revenue amount for the current fiscal year and the actual collections amount from the preceding fiscal years.

Table 2 outlines the estimated annual target revenue amount for each fiscal year. The financial notes referenced in this table can be found in **Appendix B**.

Table 2: Biosimilar Biological Product User Fee Target Revenue for FY 2023 through FY 2027

Budgetary Resources	Notes	FY2023 Actual	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Statutory Base		\$43,376,922 [†]	\$48,700,243	\$50,877,025	\$52,044,566	\$53,235,457
Inflation Adjustment	Note 8	\$744,435 [†]	\$1,706,213	\$1,017,541	\$1,040,891	\$1,064,709
Strategic Hiring and Retention Adjustment		\$150,000 [†]	\$150,000	\$150,000	\$150,000	\$150,000
Capacity Planning Adjustment	Note 9	\$0	TBD	TBD	TBD	TBD
Additional Dollar Amount Adjustment	Note 11	\$4,428,886 [†]	\$320,569	\$0	\$0	\$0
Operating Reserve Adjustment	Note 10	(\$7,099,898) [†]	(\$2,043,114)	(\$3,307,918)	\$0	\$0
Target Revenue Total	Note 1	\$41,600,345[†]	\$48,833,911	\$48,736,648	\$53,235,457	\$54,450,166

Numbers have been rounded to the nearest dollar

TBD = To Be Determined

[†]Indicates an actual amount

Target Revenue: The process for setting the annual target revenue is defined in the statute and is described below.

- Statutory Base:** The base revenue for FY 2023 is specified in statute (\$43,376,922) and is adjusted for the factors described below. For FY 2023 through FY 2027, the base revenue is the total revenue amount for the previous fiscal year, not including any operating reserve adjustment for that prior year, and is adjusted for the factors described below. See **Note 1** for a diagram of this process.
- Inflation Adjustment:** The inflation adjustment adjusts the base amount to maintain the purchasing power of fee funds in consideration of inflation. The adjustment is a composite measure that weights operating expenses by changes in the CPI and payroll-related expenses by changes in FDA’s average personnel compensation and benefits amounts.

The actual inflation adjustment utilized in FY 2023 was 1.7162 (rounded) percent. The inflation adjustment estimated for future years is 2 percent, per the Federal Reserve’s inflation targeting policy. For more information, see **Note 8**.

- Strategic Hiring Adjustment:** The strategic hiring and retention adjustment increases the inflation-adjusted base amount to cover the costs of hiring and retaining highly qualified scientific and technical staff for the process for the review of biosimilar biological product applications. For each fiscal year, the amount of this adjustment is \$150,000.

FDA recognizes that the retention of the strategic hiring and retention adjustment is subject to renegotiation under a subsequent reauthorization of BsUFA. FDA will include the following topics in the annual updates to this plan:

- The changes in the personnel compensation and benefits costs for the process for the review of biosimilar biological product applications that exceed the amounts provided by the personnel compensation and benefit portion of the inflation adjustment; and
 - FDA's plan for managing costs related to strategic hiring and retention after the adjustment required by section 744H(b)(1)(C) of the FD&C Act expires at the end of fiscal year 2027
- **Capacity Planning Adjustment:** The capacity planning adjustment adjusts for changes in the resource capacity needs of the BsUFA program.

An adjustment to the fee amounts by the CPA was not made in FY 2023.

- **Additional Dollar Amount:** BsUFA III provides an additional dollar amount for additional full-time equivalents to support enhancements outlined in the BsUFA III commitment letter. These costs are phased in over the first two years of BsUFA III: \$4,428,886 in FY 2023 and \$320,569 in FY 2024.

Operating Reserve Adjustment: BsUFA III establishes a defined increase threshold and a defined decrease threshold for the operating reserve adjustment. The operating reserve adjustment was established to provide a mechanism to support the management of the carryover balance from year to year. FDA is required to increase the fee revenue and fees, if needed, to provide for at least 10 weeks of operating reserves for each fiscal year starting in FY 2023. Additionally, FDA is required to decrease the fee revenue and fees, if needed, to provide for not more than the following week-based levels of operating reserves: 33 weeks of operating reserves in FY 2023; 27 weeks in FY 2024; and 21 weeks in FY 2025 and subsequent years. For more information on how the operating reserve is calculated, see **Note 10**.

FDA applied a downward operating reserve adjustment of \$7,099,898, an amount equivalent to a reduction of approximately 8 weeks of operations.

The current estimated total carryover, end of year amounts for FY 2024 and FY 2025 exceeds the operating reserve defined maximum threshold. FDA has estimated that an operating reserve adjustment of \$2,043,114 will be needed for FY 2024 and \$3,307,918 for FY 2025 to bring the operating reserves of carryover user fees to be not more than the threshold amount. For more information, see **Section L**.

Table 3 connects the target revenue to the net collections while showing the estimated total budgetary resources for each fiscal year. The financial notes referenced in this table can be found in **Appendix B**.

Table 3: Biosimilar Biologic User Fee Budgetary Resources FY 2023 through FY 2027

Budgetary Resources	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Target Revenue	Note 1	\$41,600,000	\$48,834,000	\$48,737,000	\$53,235,000	\$54,450,000
Net Collections		\$41,600,000	\$48,834,000	\$48,737,000	\$53,235,000	\$54,450,000
Recoveries	Note 2	\$600,000	\$600,000	\$600,000	\$600,000	\$600,000
Total Carryover, Beginning of Year		\$43,317,275	\$30,567,030	\$26,416,910	\$21,018,020	\$18,925,254
Total Budgetary Resources		\$85,517,275	\$80,001,030	\$75,753,910	\$74,853,020	\$73,975,254

*Target Revenue has been rounded to the nearest thousand dollars
Other numbers have been rounded to the nearest dollar*

Budgetary Resources: Budgetary resources include net collections, recoveries, and carryover amounts.

- **Net Collections:** FDA assumes, for planning purposes, that net collections will equal the target revenue amount. In practice, net collections may differ from the annual target revenue amount if the actual number of fee-paying units differ from the number of fee-paying units estimated when fees are set each year.
- **Recoveries:** For the purposes of this plan, future year recoveries are estimated to be \$600,000 annually. Additional details on recoveries are included in **Note 2**.
- **Totally Carryover, beginning of year:** Total carryover represents the balance of unspent BsUFA fee funds at the beginning of the fiscal year. The total year carryover at the end of one fiscal year equals the total carryover at the beginning of the subsequent fiscal year. Carryover is discussed in more detail in **Section J**.

Net Collections vs. Cohort Year Collections: User fee collections are reported in two different ways:

- **Net Collections:** Net collections are the actual dollar amounts collected in a fiscal year, regardless of the fiscal year the fee was due.
 - **Table 1** and **Table 3** report net collections
- **Cohort Year Collections:** Cohort year collections represent the fiscal year for which the fee was originally due.
 - **Table 4** reports cohort year collections.

Example: Assume a fee was due in FY 2023 but was paid in FY 2024. This would be reported as a net collection in FY 2024 and a cohort year collection in FY 2023.

Table 4 presents the estimated total annual BsUFA fee collections by fee type and cohort year. Refer to **Section E** for more background and information on the BsUFA III fee structure.

Table 4: BsUFA III Fee Collections by Fee Type and Cohort Year

Fee Type	Cohort Year 2023 Estimate
Application Fees	\$13,973,960
Program Fees	\$21,899,664
BPD Fees	\$5,726,376
Reactivation Fee	N/A
Total Net Collections	\$41,600,000

Numbers have been rounded to the nearest dollar

I. User Fee Obligations

BsUFA fees may be expended only for certain costs to support the “process for the review of biosimilar biological product applications,” as defined in BsUFA III. For more information on the allowable and excluded costs, see **Appendix A**.

Table 5 provides a breakout of planned user fee obligations by expense category for the five years represented in this plan. The annual updates to this plan will provide actual amounts for the preceding fiscal year, as well updated planned amounts for the remaining fiscal years. The financial notes can be found in **Appendix B**.

Table 5: Biosimilar Biological Product User Fee Obligations by Expense Category for FY 2023 through FY 2027

User Fee Obligations	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Payroll & Operating	Note 3					
CBER		\$762,722	\$789,444	\$805,233	\$821,337	\$837,764
CDER		\$45,188,359	\$45,250,050	\$46,286,971	\$47,357,711	\$48,449,865
ORA		\$1,516,326	\$1,569,450	\$1,600,839	\$1,632,856	\$1,665,513
HQ		\$1,957,880	\$1,436,568	\$1,458,834	\$1,486,019	\$1,513,544
Total Rent	Note 4	\$1,372,237	\$272,514	\$275,239	\$277,992	\$280,772
Total Shared Services	Note 5	\$4,152,722	\$4,266,103	\$4,308,764	\$4,351,852	\$4,395,370
Total Obligations		\$54,950,245	\$53,584,129	\$54,735,881	\$55,927,766	\$57,142,828

Numbers have been rounded to the nearest dollar

Total Obligations include payroll and operating, rent, and shared services costs funded by BsUFA fee funds. Non-user fee funds supporting the BsUFA program are not included here. The details of each component of Total Obligations are as follows:

- **Payroll and Operating:** These obligations provide for all payroll and operating costs that support the allowable activities for which BsUFA fees may be expended, as set forth in the statute. Such payroll and operating activities include, for example, core regulatory review functions, pre-approval inspections, guidance and policy development activities, scientific activities, and management and administrative functions that support the BsUFA program.

Payroll and operating are presented by each major organizational component relevant to the BsUFA program.

- **Rent:** This is paid to the General Services Administration for the federal buildings that FDA occupies, as well as to non-federal sources for direct leases and services (see **Note 4**). Rental rates vary based on the type and location of the space provided.

Section 744H(f)(2)(B)(ii) of the FD&C Act provides that “[b]eginning on October 1, 2023, the authorities under section 744G(9)(C) shall include only leasing and necessary scientific equipment.” The impact of the change means that certain costs related to facilities, fixtures, furniture, materials, and supplies will no longer be able to be funded by BsUFA user fee funds.

The rent cost beginning in FY 2024 is adjusted for inflation using the inflation adjustment. The reduction in user-fee funded costs due to the statutory change exceeds the increase from applying the inflation adjustment, resulting in a lower FY 2024 rent cost than FY 2023.

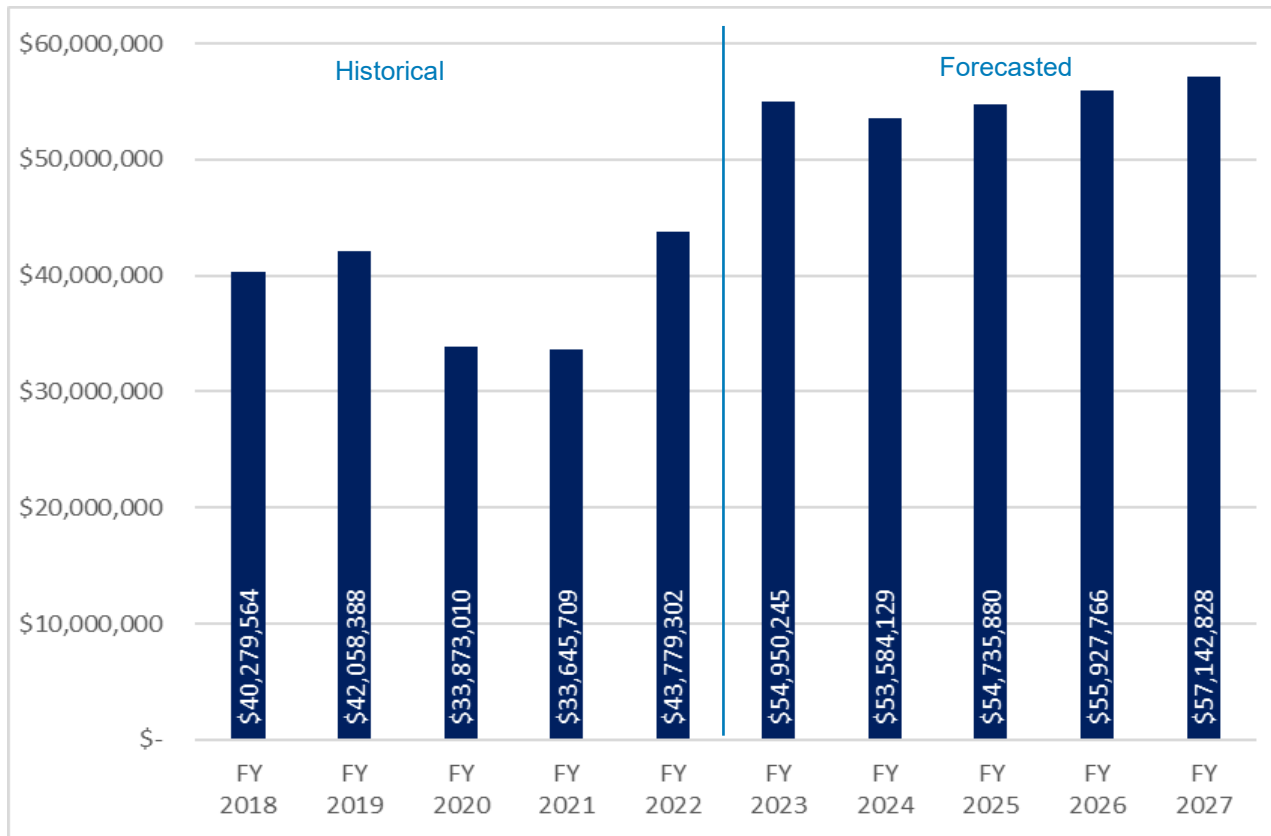
Shared Services: FDA has several shared service organizations that provide support across the user fee programs, such as human resources and information technology (IT). Shared services are located within the Working Capital Fund (WCF). **Note 5** provides a full list of what is contained in the WCF.

FY 2024 Shared Service amounts use the inflation adjustment and is offset by some one-time adjustments that occurred in FY 2023. All years also include small, proportionate increases to support the growth of the program.

Rent and Shared Services projections are informed by prior year actuals. For FY 2025 through FY 2027, for the purposes of this plan, Rent and Shared Services amounts are assumed to have an increase of one percent yearly. Yearly costs are determined by the Cost Allocation and Recovery framework discussed previously. As stated in **Section H**, Payroll and Operating projections for future year amounts is assumed to have an increase of 2 percent yearly.

Exhibit 3 below provides an illustration of historical BsUFA II obligations and projected BsUFA III needs.

Exhibit 3: Historical and Forecasted User Fee Obligations by Fiscal Year



As demonstrated by this graph, annual BsUFA III obligations are expected to exceed the annual amounts during the BsUFA II authorization period. This is a result of the addition of new personnel in BsUFA III, the expected continued increase in program workload, and inflationary pressures. This increase is expected primarily in CDER as a reflection of the BsUFA workload growth, as demonstrated in **Table 5** above.

J. User Fee Carryover

BsUFA fees collected, appropriated, and not obligated at the end of the fiscal year remain available to FDA to support the BsUFA program in future fiscal years.

Maintaining an appropriate level of carryover enables FDA to mitigate financial risks to the BsUFA program, including, for example, the risk of under collecting fees and the risk of a lapse in appropriations, so that FDA can continue performing activities related to the process for the review of biosimilar biological product applications under such financial constraints. Numbers have been FDA may set aside available user fee funds in the carryover for certain purposes, including, for example, for processing future year refunds.

The net change in the carryover each year is equal to net collections minus net obligations. This value is demonstrated best in **Table 1** above.

In the annual updates to this five-year financial plan, FDA will provide updates on its progress towards implementing FDA’s plan to reduce the carryover balance as outlined in the FY 2022 BsUFA financial report and five-year financial plan.

Based on current estimates, FDA expects to use the operating reserve adjustment in FY 2024 to reduce the target revenue amount by \$2,043,114. Additionally, based on current estimates, FDA also expects to use the operating reserve adjustment for FY 2025 to reduce the target revenue amount by \$3,307,918.

Table 6 provides estimates of BsUFA carryover balances at the end of each fiscal year. Estimates will be updated with actual amounts in future Five-Year Financial Plan annual updates. The financial notes can be found in **Appendix B**.

Table 6: BsUFA Carryover by Fiscal Year

Carryover	Notes	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
Total Carryover, End of Year		\$30,567,030	\$26,416,901	\$21,018,020	\$18,925,254	\$16,832,426
Future Year Refunds Allowance, Set Aside	Note 6	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Carryover Net of Set Aside, End of Year		\$29,567,030	\$25,416,901	\$20,018,020	\$17,925,254	\$15,832,426

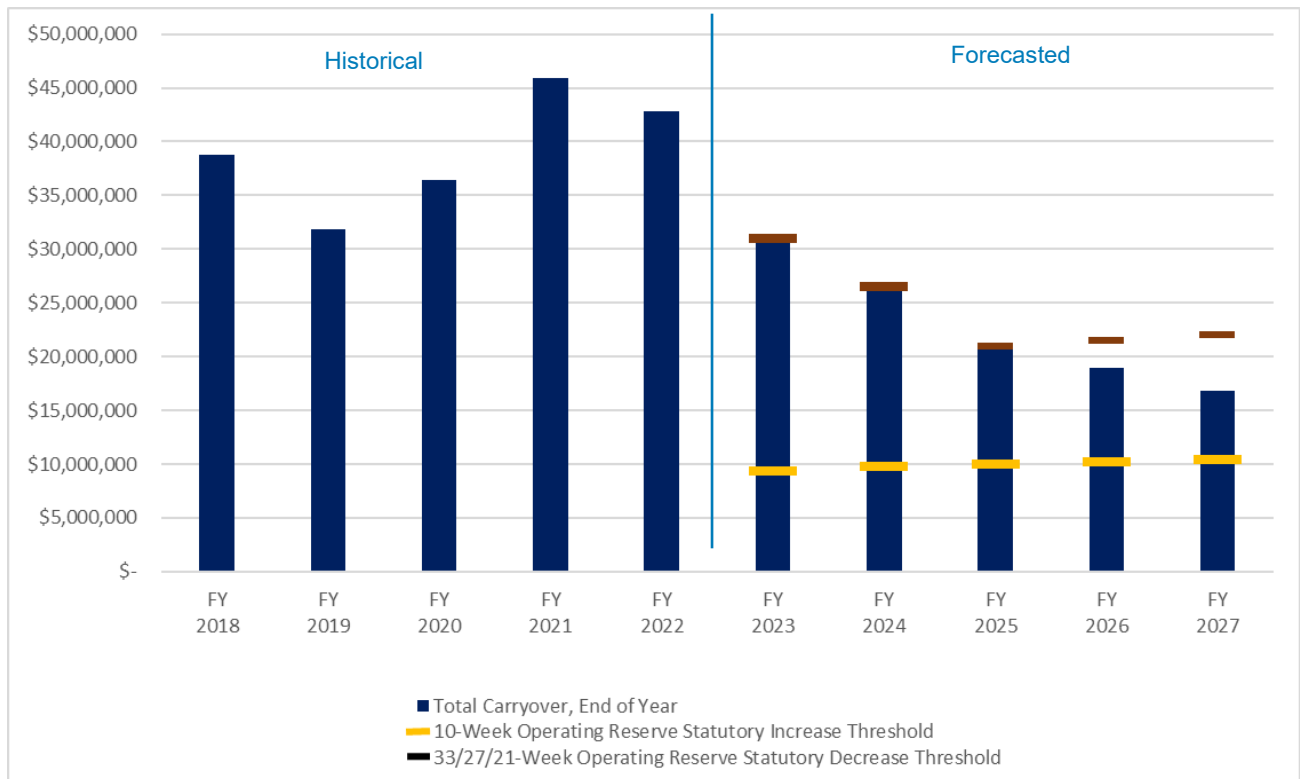
Numbers are rounded to the nearest dollar

These terms are defined as follows:

- **Total Carryover, End of Year:** This is the total amount of unobligated fee funds at the end of the fiscal year.
- **Future Year Refunds Allowance, Set Aside:** FDA maintains a small amount to provide for any refunds, as a matter of prudent operations. For that purpose, a total of \$1,000,000 in fee funds available for obligation is being set aside annually. See **Note 6** for additional details.
- **Carryover Net of Set Aside, End of Year:** This is the total carryover less any carryover funds subject to set asides.

Exhibit 4 below shows the historical trend of carryover in BsUFA II and the forecasted carryover in BsUFA III. The forecasted values reflect the use of the operating reserve adjustment for FY 2023, FY 2024, and FY 2025.

Exhibit 4: Historical and Forecasted Carryover by Fiscal Year



The carryover amounts reflect the actual and estimated operating reserve adjustments being made in FY 2023, FY 2024, and FY 2025. Looking forward into BsUFA III, the operating reserve adjustment will be used, as needed, to ensure carryover remains between the minimum 10-week and the specified maximum levels. Current estimates indicate the total carryover at the end of FY 2024 and FY 2025 will exceed the operating reserve decrease threshold. FDA will monitor the operating reserve levels and will apply the operating reserve adjustment, as needed, when setting BsUFA fees.

See **Table 7** below for the operating reserve threshold amounts. For the methodology and calculation of the threshold amounts, see **Note 10**.

Table 7: BsUFA Operating Reserve Amounts for FY 2023 through FY 2027

Operating Reserve Amounts	FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
1-Week Operating Amount	\$936,543	\$978,404	\$1,000,857	\$1,023,759	\$1,047,119
Operating Reserve Statutory Increase Threshold (weeks)	10	10	10	10	10
Operating Reserve Statutory Increase Threshold (\$)	\$9,365,431	\$9,784,043	\$10,008,570	\$10,237,588	\$10,471,186
Operating Reserve Statutory Decrease Threshold (weeks)	33	27	21	21	21
Operating Reserve Statutory Decrease Threshold (\$)	\$30,905,923	\$26,416,917	\$21,017,998	\$21,498,935	\$21,989,490
Total Carryover Available for Use, End of Year (Without Operating Reserve Adjustment)	\$37,666,928	\$28,460,015	\$24,325,939	\$18,925,254	\$16,832,426
Operating Reserve Adjustment	(\$7,099,898)	(\$2,043,114)	(\$3,307,918)	\$0	\$0
Total Carryover Available for Use, End of Year	\$30,567,030	\$26,416,901	\$21,018,020	\$18,925,254	\$16,832,426

K. Non-User Fee Appropriations

For FDA to obligate user fees collected under BsUFA, a certain amount of non-user fee appropriations must be spent on the process for the review of biosimilar biological product applications during a fiscal year. This is often referred to as a “non-user fee spending trigger.”⁴ **Table 8** presents the forecasted non-user fee spending triggers for FY 2023 through FY 2027.

Table 8: Minimum Allocation of BsUFA Non-User Fee Appropriations by Fiscal Year

FY2023 Estimate	FY2024 Estimate	FY2025 Estimate	FY2026 Estimate	FY2027 Estimate
\$24,026,420	\$24,506,948	\$24,997,087	\$25,497,029	\$26,006,970

Numbers have been rounded to the nearest dollar

The non-user fee spending trigger amount is determined by multiplying the base amount of non-user fee appropriations spent on the biosimilar biological product review

⁴ The statute provides that this requirement is met if an amount that is not more than 15 percent below the minimum level is spent (see sections 744H(f)(2)(B)(i) and 744H(f)(2)(C) of the FD&C Act).

process (\$20 million), multiplied by the adjustment factor applicable to that fiscal year. See **Note 7** for more details on the adjustment factor.

As a result of section 905(b) of FDARA, starting in FY 2024, certain costs associated with the process for the review of biosimilar biological product applications will be shifted from user fee spending to non-user fee appropriations spending. Due to amendments to section 744H(f)(2) of the FD&C Act made by Food and Drug Omnibus Reform Act of 2022, non-user fee appropriations spending on the shifted costs will be counted towards the spending trigger. FDA plans to spend at least the required minimum from non-user fee appropriations each year. In years when FDA programs do not receive appropriations to cover costs of inflation and mandatory pay increases, FDA activities other than biosimilar biological product review may be reduced to assure that the allocation of non-user fee appropriations to the process for the review of biosimilar biological product applications meets the requirements of this trigger.

L. Planned Hiring

BsUFA III provides FDA additional user fee funding to hire additional 15 new positions to support the biosimilar biological product review program. **Table 9** presents the hiring targets for these new positions for each fiscal year of BsUFA III.⁵

Table 9: Target New Hires by Organization for BsUFA III

Organization	FY 2023 Target	FY 2024 Target	FY 2025 Target	FY 2026 Target	FY 2027 Target
CDER	14	1	0	0	0
Total New Hires	14	1	0	0	0

⁵ BsUFA III Commitment Letter Sect IV.A Program Hiring: <https://www.fda.gov/media/152279/download>

Challenges, Risk and Mitigation

As is the case with all financial programs, there are certain financial risks and challenges that exist with FDA's user fee programs. These risks and challenges can vary from program to program, with some being in FDA's control and some out of FDA's control. An example of a shared financial risk across all user fee programs is that FDA cannot obligate funds in advance of receiving the funds, either through appropriated user fee collections or non-user fee appropriations. FDA can only estimate what the Agency's total appropriation will be in any given year. As a result, FDA has some risk of missing important performance goals or failing to meet the non-user fee spending trigger for the fiscal year if the total appropriation comes in considerably lower than anticipated. Below is a list of foreseeable risks associated with the collections and obligations of funds for which FDA has identified contingency plans; these contingency plans help ensure FDA is able to move forward in the best interests of the program.

- **Under-Executing Planned Spend:** Historically, BsUFA budgetary resources have been under-spent because of the uncertainty around the timing of revenue (user fee and non-user fee) availability, non-user fee spending trigger requirements, and difficulties with hiring. To minimize this risk, FDA continues to enhance its planning and execution around the hiring of new staff and contract actions to the extent possible while adhering to non-user fee spending trigger requirements.
- **Uncertainty of User Fees and Non-User Fee Appropriations Levels:** It is difficult to predict the amount of non-user fee appropriations that will be approved by Congress, which creates financial planning challenges for the program since non-user fee fund levels are often uncertain for a good portion of the fiscal year. With Continuing Resolutions (CRs) becoming more prevalent, FDA has been spending at or slightly below levels from the prior authorized fiscal year during the CR period, thus limiting its ability to spend the non-user fee appropriations from the onset.
- **Lapse in Non-User Fee Appropriations:** FDA cannot control this risk; however, FDA is required to increase the fee revenue and fees, if needed, to provide for at least 10 weeks of operating reserves, which can be used to continue program operations in the event of a lapse of appropriations. FDA is also required to decrease the fee revenue and fees, if needed, to provide for not more than the maximum levels of operating reserves specified in the statute.
- **Undercollecting and Overcollecting Fees:** Because the BsUFA program experiences variations in workload, it is difficult to forecast the required revenue and to therefore set fees at appropriate levels. If FDA does not receive the estimated number of industry submissions, there may be an excess or deficit in collections relative to the targeted revenue. When FDA undercollects user fees, it leverages its carryover to maintain continuity in operations. When FDA overcollects, the carryover may increase without additional planned expenditures

being identified to obligate those funds. The operating reserve adjustment mitigates these risks in BsUFA III. Resource capacity planning helps improve fee setting and allows FDA to adjust for sustained increases in workload. In addition, FDA monitors collections throughout the fiscal year, and the UFFMC and other FDA senior leaders determine how to mitigate any instances when the user fee revenues deviate from the forecasted estimate.

- **Section 744H(f)(2)(B)(ii) (amended by section 905(b) of FDARA):** FDA cannot use user fees on certain previously allowable expenses. Section 744H(f)(2)(B)(ii) of the FD&C Act provides that “[b]eginning on October 1, 2023, the authorities under section 744G(9)(C) shall include only leasing and necessary scientific equipment.” The impact of the change means that certain costs related to facilities, fixtures, furniture, materials, and supplies will no longer be able to be funded by BsUFA user fee funds. This change will have an impact on the finances of the program. FDA is monitoring the impacts to the program's funding.

Appendices

A. Allowable and Excluded Costs for the BsUFA Program

Section 744G(13) of the FD&C Act defines the phrase “process for the review of biosimilar biological product applications” to mean the following activities of FDA with respect to the review of submissions in connection with biosimilar biological product development, biosimilar biological product applications, and supplements:

Included	Activities
<ol style="list-style-type: none"> 1. The activities necessary for the review of submissions in connection with biosimilar biological product development, biosimilar biological product applications, and supplements. 2. Actions related to submissions in connection with biosimilar biological product development, the issuance of action letters which approve biosimilar biological product applications or which set forth in detail the specific deficiencies in such applications, and when appropriate, the actions necessary to place such applications in condition for approval. 3. The inspection of biosimilar biological product establishments and other facilities undertaken as part of FDA’s review of pending biosimilar biological product applications and supplements. 4. Activities necessary for the release of lots of biosimilar biological products under section 351(k) of the Public Health Service Act. 5. The monitoring of research conducted in connection with the review of biosimilar biological product applications. 	<ol style="list-style-type: none"> 6. Post-market safety activities with respect to biologics approved under biosimilar biological product applications or supplements, including the following activities: <ol style="list-style-type: none"> a. Collecting, developing, and reviewing safety information on biosimilar biological products, including adverse-event reports. b. Developing and using improved adverse-event data-collection systems, including IT systems. c. Developing and using improved analytical tools to assess potential safety problems, including access to external databases. d. Implementing and enforcing section 505(o) of the FD&C Act (relating to post-approval studies and clinical trials and labeling changes) and section 505(p) of the FD&C Act (relating to risk evaluation and mitigation strategies). e. Carrying out section 505(k)(5) of the FD&C Act (relating to adverse-event reports and post-market safety activities).

For FY 2023, section 744G(9) of the FD&C Act defines the phrase “costs of resources allocated for the process for the review of biosimilar biological product applications” as the expenses in connection with this process for the following:

Included Expenses

1. Officers and employees of FDA, contractors of FDA, advisory committees, and the costs related to such officers, employees, and committees, and to contracts with such contractors;
2. Management of information and the acquisition, maintenance, and repair of computer resources;
3. Leasing, maintenance, renovation, and repair of facilities and acquisition, maintenance, and repair of fixtures, furniture, scientific equipment, and other necessary materials and supplies; and
4. Collecting fees under section 744H of the FD&C Act and accounting for resources allocated for the review of submissions in connection with biosimilar biological product development, biosimilar biological product applications, and supplements.

The BsUFA program excludes costs related to the following:

Excluded Applications	Excluded Activities
<ol style="list-style-type: none"> 1. An application that cites as the reference product a product approved before September 1, 1992, that is either a bovine blood product for topical application or a large-volume parenteral drug product; 2. An application with respect to the following: <ul style="list-style-type: none"> ○ Whole blood or a blood component for transfusion; ○ An in vitro diagnostic biological product; or ○ A biological product for further manufacturing use only. 	<ol style="list-style-type: none"> 1. Enforcement policy development not related to section 505(o) and (p) of the FD&C Act; 2. Post-approval compliance activities not related to the enforcement of section 505(o) and (p) of the FD&C Act; 3. Advertising review activities once marketing of the product has begun; 4. Inspections unrelated to the review of covered applications, unless undertaken for the enforcement of section 505(o) and (p) of the FD&C Act; and 5. Research unrelated to the BsUFA program.

Section 744H(f)(2)(B)(ii) of the FD&C Act was added by section 905 of FDARA to limit the scope of expenses described of in section 744G(9)(C) to include only expenditures for leasing and necessary scientific equipment starting in FY 2024. Therefore, beginning in FY 2024, the “costs of resources allocated for the process for the review of biosimilar biological product applications” means the expenses in connection with this process for the following:

Included Expenses

1. Officers and employees of FDA, contractors of FDA, advisory committees, and the costs related to such officers, employees, and committees, and to contracts with such contractors;
2. Management of information and the acquisition, maintenance, and repair of computer resources;
3. Leasing and necessary scientific equipment; and
4. Collecting fees under section 744H of the FD&C Act and accounting for resources allocated for the review of submissions in connection with biosimilar biological product development, biosimilar biological product applications, and supplements.

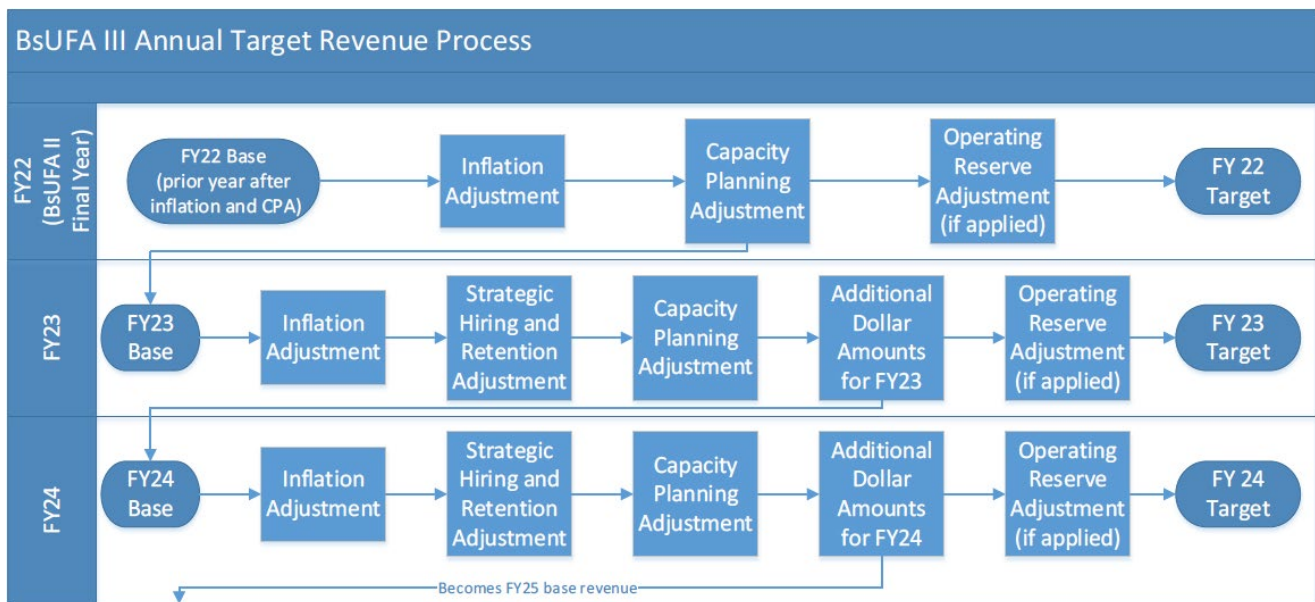
Beginning in FY 2024, in addition to the costs excluded under the FDARA section 905 amendments, the BsUFA program will continue to exclude costs as outlined above.

B. Financial Notes

Note 1. Annual Target Revenue Methodology

Exhibit 5 is a flowchart that outlines the BsUFA III Annual Target Revenue Methodology.

Exhibit 5: BsUFA III Annualized Base and Target Revenue Methodology



Note 2. Recoveries

Recoveries account for funds returned to the Agency in the form of deobligations of prior year obligations. For example, recoveries could include funding from a contract that ended in a prior year and was not expended.

Note 3. Payroll and Operating Costs

Payroll and operating costs associated with the BsUFA program are based on obligations attributed to CBER, CDER, ORA, and HQ.

For payroll, employees are required to report their time in an activity-based reporting system, which allows FDA to identify activities that user fees can be used to support. See **Appendix A** for a listing of those activities. For operating activities (e.g., contracting services), funds are allocated based on the proportion to which those activities support the BsUFA program. If an operating activity solely supports BsUFA, it will be fully funded by the program. If the operating activity is shared, BsUFA will fund the activity in proportion to how it is used by the program as compared to other programs.

Note 4. Rent Costs

The General Services Administration charges rent to FDA for the federal buildings that FDA occupies. This rent is charged at different rates depending on the type and location of the space provided. Because rent is an essential support cost for the process for the review of biosimilar biological product applications, a portion of those charges is paid from non-user fee appropriations and a portion is paid from BsUFA fees.

Also included in this account are recurring costs that FDA pays directly to non-federal sources under the delegation of direct lease and service authority. These services include rental of space and all recurring services for building operations such as overtime utilities, janitorial services, guards, and ground maintenance. The amount of rent and rent-related costs each Center pays is directly related to the square footage occupied by that Center.

Section 905(b) of the FDA Reauthorization Act of 2017 (FDARA) amended the FD&C Act to provide that the types of fee-coverable costs under the Prescription Drug User Fee Act (PDUFA) program, the Generic Drug User Fee Amendments (GDUFA) program, the Medical Devices User Fee Amendments (MDUFA) program, and the BsUFA program will narrow on October 1, 2023.

Specifically, section 744H(f)(2)(B)(ii) of the FD&C Act was added by FDARA to limit the scope of expenses described in section 744G(9)(C) to include only expenditures for leasing and necessary scientific equipment. The impact of the change means that certain costs related to facilities, fixtures, furniture, materials, and supplies will no longer be able to be funded by BsUFA user fee funds.

Note 5. Shared Service Costs

FDA has several shared service organizations, located within the WCF, that provide support across the user fee programs. The shared service organizations in FY 2023 include:

- **FDA Central:** Provides for Center-wide and Agency-wide services such as telecommunications, training, printing, mail and document management, IT systems, employee health units, and other support and miscellaneous services.
- **Office of Digital Transformation:** Provides the vision and leadership in IT, data, and cybersecurity needed to advance FDA's mission and strategic priorities.
- **Office of Acquisitions and Grants Services:** Manages contracts, grants, and other agreements.
- **Office of Equal Employment Opportunity:** Promotes an inclusive work environment that ensures equal employment opportunity and fosters a culture that values diversity and empowers individuals.
- **Office of Facilities, Engineering, and Mission Support Services:** Provides FDA employees with office and laboratory facilities.
- **Office of Financial Management:** Provides financial managerial services and policy guidance.
- **Division of Budget Execution and Control:** Initiates, monitors, and analyzes FDA's budget resources.
- **Office of Finance, Budget, Acquisitions, and Planning:** Leads FDA's budget, acquisitions, and financial management functions while ensuring the financial integrity of FDA's resources.
- **Office of Security Operations:** Develops and implements the Agency-wide security policies and programs by providing leadership and guidance to managers and staff on all aspects of security. Administers vital security functions that contribute to the Agency's mission of protecting public health by enhancing the safety and security of all personnel, facilities, and information.
- **Office of Laboratory Safety:** Reinforces FDA's expectations for safety and laboratory security, enhances communications among FDA safety staff, and provides program support.
- **Office of Ethics and Integrity:** Protects the integrity of FDA's programs and operations by promoting an ethical culture and ensuring compliance with applicable federal ethics laws.

- **Office of Enterprise Management Services:** Provides strategic and tactical enterprise-wide services through development and implementation of administrative policies, programs, and initiatives.
- **Office of Human Capital Management:** Provides human resource services that promote collaboration and a work environment that is characterized by diversity, fairness, open communication, personal accountability, trust, and mutual respect.
- **Office of Talent Solutions:** Provides high quality and efficient human resource solutions that enable the FDA to hire a talented and qualified workforce.
- **Office of Planning, Evaluation, and Risk Management:** Partners with FDA leaders to achieve organizational excellence by improving program performance, governance, operational efficiency, and risk management.

Note 6. Future Year Refunds Allowance, Set Aside

If an applicant submits a marketing application for a biosimilar biological product before October 1 of the fiscal year and that application is subsequently accepted for filing, the applicant may request a refund of the annual BPD fee paid by the applicant for the product for such fiscal year. If an application is refused for filing or is withdrawn without a waiver before filing, FDA will refund 75 percent of the application fee paid.

Refunds impact net fee collections for each fiscal year. Net collections reflect the amount of fees collected net any refunds or adjustments that occurred during that fiscal year.

Note 7. Adjustment Factors

FDA must calculate and incorporate adjustment factors in establishing fees.

For the purposes of calculating the “non-user fee spending trigger” amount for FY 2023 and subsequent years, an “adjustment factor” is utilized, which is defined in section 744G(1) of the FD&C Act as follows: “The term ‘adjustment factor’ applicable to a fiscal year is the Consumer Price Index for urban consumers (Washington-Arlington-Alexandria, DC–VA–MD–WV; Not Seasonally Adjusted; All items) for September of the preceding fiscal year divided by such Index for September 2011.”

Note 8. Inflation Adjustment

For purposes of calculating BsUFA fees for FY 2023 and subsequent fiscal years, section 744H(c)(1)(B)(ii) of the FD&C Act utilizes an inflation adjustment that includes the following: “the average annual percent change that occurred in the Consumer Price Index for urban consumers (Washington-Arlington-Alexandria, DC–VA–MD–WV; Not Seasonally Adjusted; All items; Annual Index) for the first 3 years of the preceding 4 years of available data”.

The inflation adjustment adjusts the base revenue amount to maintain the purchasing power of fee funds in consideration of inflation. The adjustment is a composite measure that weights operating expenses by changes in the CPI and payroll-related expenses by changes in FDA's average personnel compensation and benefits amounts.

The inflation adjustment utilized in FY 2023 was 1.7162 percent.

Note 9. Capacity Planning Adjustment

The statute specifies a process to establish and implement a capacity planning adjustment to adjust the BsUFA target revenue amount to reflect changes in the resource capacity needs for the process for the review of biosimilar biological product applications.

Following a process required in the statute, FDA established a new CPA methodology and first applied it in the setting of FY 2021 fees. The establishment of this methodology is described in the *Federal Register* at 85 FR 47220 (August 4, 2020). This methodology includes a continuous, iterative improvement approach, under which the Agency intends to refine its data and estimates for the core review activities to improve their accuracy over time.

Beginning in FY 2023, updates were made to refine the time reporting categories included within the CPA. As such, time reporting data and baseline capacity have been revised to match the refinements; in the coming fiscal years, additional updates are anticipated to be made to account for additional activities that are also directly related to the direct review of biosimilar biological product applications and supplements, including additional formal meeting types and the direct review of postmarketing commitments and requirements, the direct review of risk evaluation and mitigation strategies, and the direct review of annual reports for approved biosimilar biological products.

FDA did not use the CPA to adjust the fee amounts in FY 2023.

Note 10. Operating Reserve Adjustment

The operating reserve adjustment was established in the statute to provide a mechanism to support the management of a reasonable amount of fee funds carried over from year to year.

In BsUFA III, the operating reserve adjustment provides for a defined increase threshold and defined decrease threshold required amounts of operating reserves of carryover user fees for the process for the review of biosimilar biological product applications to be maintained each fiscal year. This requires FDA to increase the annual revenue amount used to set fees, if needed, to provide for at least 10 weeks of such operating reserves. In addition, this requires FDA to decrease the annual revenue amount used to set fees, if needed, to provide for not more than the annual threshold amount of such operating reserves.

The annual decrease threshold amount of such operating reserves will be phased in over the first three years of BsUFA III as follows: 33 weeks in FY 2023, 27 weeks in FY 2024, and 21 weeks in FY 2025 and each subsequent fiscal year.

To calculate the dollar amounts of the defined increase and decrease threshold amounts of such operating reserves for a fiscal year, applicable adjustments (inflation, strategic hiring and retention, capacity planning, and additional dollar amount) are applied to the base revenue. This estimated adjusted revenue amount is then divided by 52 to generate the one-week operating amount. The one-week operating amount is multiplied by 10 weeks to determine the 10-week operating reserve threshold amount (the minimum amount) and is multiplied by the applicable number of weeks (33 weeks for FY 2023, 27 weeks for FY 2024, and 21 weeks for FY 2025) to determine the threshold amount.

- The FY 2023 operating reserve adjustment was calculated in FY 2022 as part of BsUFA's annual fee setting. To calculate the 10-week and 33-week threshold amounts for the FY 2023 operating reserve adjustment, the estimated adjusted revenue amount was divided by 52, resulting in a \$936,543 cost of operation for 1 week. The unrounded 1-week value was then multiplied by 10 weeks to generate the 10-week operating reserve threshold amount for FY 2023 of \$9,365,431. The unrounded 1-week value is multiplied by 33 to generate the 33-week operating reserve threshold amount for FY 2023 of \$30,905,923.

To calculate the estimated operating reserve of carryover user fees at the end of FY 2022, FDA estimated the operating reserves of carryover fees at the end of July 2022. The balance of operating reserves of carryover fees at the end of July 2022 was combined with the forecasted collections and obligations for the remainder of FY 2022 to generate a full year estimate for FY 2022. The estimated operating reserve of carryover user fees at the end of FY 2022 was \$38,005,821, which exceeded the 33-week threshold allowable operating reserve of carryover user fees for FY 2023 of \$30,905,923.

As such, FDA applied a downward operating reserve adjustment of \$7,099,898 (rounded to the nearest dollar), an amount equivalent to a reduction of approximately 8 weeks of operations, to bring the operating reserve of carryover user fees to 33 weeks of operations at the start of FY 2023.

- For FY 2024, the estimated operating reserve adjustment is estimated to be a \$2,043,114 reduction to the target revenue amount. The resulting target revenue amount of \$48,834,000. These values are subject to change by the time of the FY 2024 BsUFA annual fee setting.
- For FY 2025, the estimated operating reserve adjustment is estimated to be a \$3,307,918 reduction to the target revenue amount. The resulting target revenue amount of \$48,737,000. These values will change by the time of the FY 2025 BsUFA annual fee setting.

- For FY 2026 and FY 2027, FDA does not estimate the need to use the operating reserve adjustment.

Note 11. Additional Dollar Amounts Adjustment

BsUFA III provides additional dollar amounts for costs associated with new personnel as a result of negotiated enhancements. These costs are phased in over the first two years of BsUFA III: \$4,428,886 in FY 2023 and \$320,569 in FY 2024.

This report was prepared by FDA's Office of Financial Management.
For information on obtaining additional copies, please contact:

U.S. Food and Drug Administration
10903 New Hampshire Ave.
Silver Spring, MD 20993-0002

This report is available on FDA's home page at <https://www.fda.gov/>.

