

GDUFA III commitment letter as part of its goal date assignments.

Under the commitment letter related to the GDUFA authorization for fiscal years 2018 through 2022 (under the Generic Drug User Fee Amendments of 2017), a goal date was assigned without regard to facility readiness for inspection. In contrast, under the GDUFA III commitment letter, FDA agreed to assign a longer goal date if a facility is not ready for an inspection at the time of application submission. An application containing a facility not ready for inspection is more likely to require multiple assessment cycles, extending the time required for possible approval and potentially delaying patient access to quality generic drugs. This change in goal date assignment will help FDA to focus resources on applications with facilities ready for inspection.

This draft guidance is being issued consistent with FDA's good guidance practices regulation (21 CFR 10.115). The draft guidance, when finalized, will represent the current thinking of FDA on "Facility Readiness: Goal Date Decisions Under GDUFA." It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations.

## II. Paperwork Reduction Act of 1995

While this guidance contains no collection of information, it does refer to previously approved FDA collections of information. Therefore, clearance by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3521) is not required for this guidance. The previously approved collections of information are subject to review by OMB under the PRA. The collections of information in 21 CFR part 314 have been approved under OMB control number 0910–0001. Currently, manufacturing establishment information is submitted as part of the existing application form, Form FDA 356h, and is approved by OMB under control number 0910–0338. The collections of information in 21 CFR parts 210 and 211 (current good manufacturing practice) and part 11 (electronic records and signatures) have been approved under OMB control numbers 0910–0139 and 0910–0303, respectively.

## III. Electronic Access

Persons with access to the internet may obtain the draft guidance at <https://www.fda.gov/drugs/guidance-compliance-regulatory-information/guidances-drugs>, <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>, or <https://www.regulations.gov>.

Dated: October 3, 2022.

**Lauren K. Roth,**

*Associate Commissioner for Policy.*

[FR Doc. 2022–21811 Filed 10–6–22; 8:45 am]

**BILLING CODE 4164–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA–2011–N–0902]

#### Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Medication Guides for Prescription Drug Products

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

**DATES:** Submit written comments (including recommendations) on the collection of information by November 7, 2022.

**ADDRESSES:** To ensure that comments on the information collection are received, OMB recommends that written comments be submitted to <https://www.reginfo.gov/public/do/PRAMain>. Find this particular information collection by selecting "Currently under Review—Open for Public Comments" or by using the search function. The OMB control number for this information collection is 0910–0393. Also include the FDA docket number found in brackets in the heading of this document.

**FOR FURTHER INFORMATION CONTACT:** Domini Bean, Office of Operations, Food and Drug Administration, Three White Flint North, 10A–12M, 11601 Landsdown St., North Bethesda, MD 20852, 301–796–5733, [PRAStaff@fda.hhs.gov](mailto:PRAStaff@fda.hhs.gov).

**SUPPLEMENTARY INFORMATION:** In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

#### Medication Guide Requirements for Prescription Drug Product Labeling

OMB Control Number 0910–0393—Extension

This information collection supports FDA regulations pertaining to the distribution of patient labeling, called Medication Guides, for human prescription drug and biological products used primarily on an outpatient basis, and required for products that pose a serious and significant public health concern. Applicable regulations are codified at part 208 (21 CFR part 208): Medication Guides for Prescription Drug Products, and set forth general content and format requirements, as well as provide for exemptions and deferrals. Medication Guides provide patients with important written information about drug products, including the drug's approved uses, contraindications, adverse drug reactions, and cautions for specific populations, and are required in accordance with Agency regulations.

To assist consumers and industry with understanding applicable regulatory requirements in part 208 pertaining to developing, distributing, and submitting certain Medication Guides, we have developed the guidance document entitled "Medication Guides—Distribution Requirements and Inclusion in Risk Evaluation and Mitigation Strategies (REMS)" (available at <https://www.fda.gov/media/79776/download>). The guidance document includes: (1) a discussion of the applicable regulations; (2) FDA enforcement policy with regard to Medication Guides associated with products dispensed to healthcare professionals, or patient caregivers, instead of being dispensed directly to the patient for self-administration; and (3) Medication Guides required as part of a risk evaluation and mitigation strategy.

In the **Federal Register** of March 22, 2022 (87 FR 16199), we published a 60-day notice requesting public comment on the proposed collection of information. No comments were received.

We estimate the burden of this collection of information as follows:



TABLE 1—ESTIMATED ANNUAL REPORTING BURDEN <sup>1</sup>

Activity; 21 CFR section	Number of respondents	Number of responses per respondent	Total annual responses	Average burden per response	Total hours
Content and format of a Medication Guide; § 208.20 .....	41	1	41	320	13,120
Exemptions and deferrals; § 208.26(a) .....	1	1	1	4	4
Total .....	.....	.....	42	.....	13,124

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

Upon evaluation of the information collection, we have removed burden we attributed to reporting associated with supplements and other changes to approved abbreviated new drug

applications, new drug applications, and biologics license applications (21 CFR 314.70(b)(3)(ii) and 601.12(f)). We now account for burden associated with these regulatory provisions in OMB

control numbers 0910–0001 and 0910–0338 and have decreased the burden associated with this collection accordingly.

TABLE 2—ESTIMATED ANNUAL THIRD-PARTY DISCLOSURE BURDEN <sup>1</sup>

Activity; 21 CFR section	Number of respondents	Number of disclosures per respondent	Total annual disclosures	Average burden per disclosure <sup>2</sup>	Total hours
Distribute Medication Guides to authorized dispensers; § 208.24(c) .....	191	9,000	1,719,000	1.25	2,148,750
Distribute and Dispense Medication Guides to Patients; § 208.24(e) .....	88,000	5,705	502,040,000	0.05 (3 minutes)	25,102,000
Total .....	.....	.....	503,759,000	.....	27,250,750

<sup>1</sup> There are no capital costs or operating and maintenance costs associated with this collection of information.

<sup>2</sup> Numbers may not sum due to rounding.

We have decreased our estimated burden associated with disclosures to reflect a decrease in related submissions over the past 3 years.

Dated: September 30, 2022.

**Lauren K. Roth,**

*Associate Commissioner for Policy.*

[FR Doc. 2022–21840 Filed 10–6–22; 8:45 am]

**BILLING CODE 4164–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA–2022–N–2353]

### Medical Device User Fee Rates for Fiscal Year 2023

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the fee rates and payment procedures for medical device user fees for fiscal year (FY) 2023. The Federal Food, Drug, and Cosmetic Act (FD&C Act), as amended by the Medical Device User Fee Amendments of 2022 (MDUFA V), authorizes FDA to collect user fees for certain medical device submissions and

annual fees both for certain periodic reports and for establishments subject to registration. This notice establishes the fee rates for FY 2023, which apply from October 1, 2022, through September 30, 2023, and provides information on how the fees for FY 2023 were determined, the payment procedures you should follow, and how you may qualify for reduced small business fees.

**FOR FURTHER INFORMATION CONTACT:** *For information on Medical Device User Fees:* <https://www.fda.gov/industry/fda-user-fee-programs/medical-device-user-fee-amendments-mdufa>.

*For questions related to the MDUFA Small Business Program, please visit the Center for Devices and Radiological Health's website:* <https://www.fda.gov/medical-devices/premarket-submissions/reduced-medical-device-user-fees-small-business-determination-sbd-program>.

*For questions related to this notice:* Robert Marcarelli, Office of Financial Management, Food and Drug Administration, 4041 Powder Mill Rd, Rm. 61075, Beltsville, MD 20705–4304, 301–796–7223, and the User Fees Support Staff at [OO-OFBAP-OFM-UFSS-Government@fda.hhs.gov](mailto:OO-OFBAP-OFM-UFSS-Government@fda.hhs.gov).

**SUPPLEMENTARY INFORMATION:**

## I. Background

The FD&C Act, as amended by MDUFA V, authorizes FDA to collect user fees for certain medical device submissions and annual fees both for certain periodic reports and for establishments subject to registration. Section 738 of the FD&C Act (21 U.S.C. 379j) establishes fees for certain medical device applications, submissions, supplements, notices, and requests (for simplicity, this document refers to these collectively as “submissions” or “applications”); for periodic reporting on class III devices; and for the registration of certain establishments.

Under the FD&C Act, the fee rate for each type of submission is set at a specified percentage of the standard fee for a premarket application (a premarket application is a premarket approval application (PMA), a product development protocol (PDP), or a biologics license application (BLA)). The FD&C Act specifies the base fee for a premarket application for each year from FY 2023 through FY 2027; the base fee for a premarket application received by FDA during FY 2023 is \$425,000. From this starting point, this document establishes FY 2023 fee rates for certain types of submissions, and for periodic reporting, by applying criteria specified