## Export Notification and Recordkeeping Requirements

#### OMB Control Number 0910-0482

#### SUPPORTING STATEMENT

**Terms of Clearance:** None.

#### A. Justification

## 1. <u>Circumstances Making the Collection of Information Necessary</u>

FDA is requesting approval from the Office of Management and Budget (OMB) of an information collection requirement in "Exports: Notification and Recordkeeping Requirements"--21 CFR 1.101, which pertains to the exportation of unapproved new drugs, biologics, devices, animal drugs, food, cosmetics, and tobacco products that may not be sold in the United States.

The Tobacco Control Act was enacted on June 22, 2009 and amended the Federal Food, Drug, and Cosmetic Act (the FD&C Act) with the authority to regulate tobacco products (Public Law 11-31; 123 Stat. 1776). The enactment of the Tobacco Control Act by Congress ensured that FDA had the authority to provide effective oversight and to impose appropriate regulatory controls on the tobacco industry.

On March 30, 2012, OMB approved "Further Amendments to General Regulations of the Food and Drug Administration To Incorporate Tobacco Products", OMB Control No. 0910-0690, which amended, among other sections, title 21 of the Code of Federal Regulations, Section 1.101 to incorporate tobacco products. These amendments reflect the Agency's authority over tobacco products under the Tobacco Control Act and added "tobacco products" to the list of products covered under § 1.21(a) and (c) (1) (21 CFR 1.21(a) and 21 CFR 1.21(c) (1)) and § 1.101 (a) and (b) (21 CFR 1.101(a) and 21 CFR 1.101(b)).

The hourly recordkeeping burden realized by the enactment of the collection of information under OMB Control Number 0910-0690 is being added to this collection of information, and the information collection under OMB Control Number 0910-0690 will be discontinued once the renewal of this collection of information is approved by OMB.

This information is needed to reflect the Agency's regulatory authority over exported products under the FD&C Act.

21 CFR 1.101(b) – Recordkeeping Requirements for human drugs, biological products, devices, animal drugs, foods, cosmetics, and tobacco products exported under or subject to section 801(3)(1) of the FD&C Act.

This provision requires persons who export human drugs, biologics, devices, animal drugs, foods, cosmetics, and tobacco products that may not be sold in the United States to maintain records demonstrating their compliance with the requirements in Section 801(e)(1) of the

FD&C Act. In brief, the provision requires exporters to keep records demonstrating that the exported product: (1) Meets with the foreign purchaser's specifications; (2) does not conflict with the laws of the foreign country; (3) is labeled on the outside of the shipping package that it is intended for export; and (4) is not sold or offered for sale in the United States. These are the four criteria in Section 801(e) (1) of the FD&C Act, although the regulation suggests these four criteria could be met by submitting other documentation. For example, to show that an exported product does not conflict with the laws of the foreign country, the regulation allows FDA to accept letters from a foreign government agency or notarized certifications from a responsible company official in the United States stating that the exported product does not conflict with the laws of the foreign country.

# 21 CFR 1.101(c) – Additional recordkeeping requirements for partially processed biological products exported under section 351(h) of the PHS Act.

This provision requires additional records for persons exporting partially processed biologics pursuant to Section 351(h) of the Public Health Service Act (PHS). This would consist of records showing that the product is, in fact, a partially processed biologic and manufactured in accordance with good manufacturing practices, distribution records, and labeling that is to accompany the exported product.

# 21 CFR 1.101(d) – Notification requirements for drugs, biological products, and devices exported under section 802 of the FD&C Act.

This provision requires persons exporting a human drug, biologic, or device under Section 802 of the Federal Food, Drug, and Cosmetic Act (the FD&C Act) to notify FDA (as required by Section 802(g) of the FD&C Act). In general, the regulation requires the notification to identify the product being exported (e.g., name, description, and, in some cases, country of destination) and specifies where the notification should be sent. These notifications are sent only for an initial export; subsequent exports of the same product to the same destination (or, in the case of certain countries identified in Section 802(b) of the FD&C Act, to any of those countries) would not result in a notification to FDA.

# 21 CFR 1.101(e) – Recordkeeping requirements for products subject to section 802(g) of the FD&C Act.

This regulation requires persons exporting any product under Section 802 of the FD&C Act to maintain records regarding the exported products and the countries to which they were exported. This provision implements Section 802(g) of the FD&C Act. Records would be kept for the same time period as good manufacturing practice records.

# 2. <u>Purpose and Use of the Information Collection</u>

FDA will use the information to determine whether an exporter has complied with the export requirements in the FD&C Act and the PHS Act and, in situations where FDA is required by law to notify an appropriate health official in a foreign country, to determine where a product was exported (so that the Agency can provide notice to the foreign country). For example, records identifying the foreign countries receiving the exported product and notifications to

FDA identifying importing countries will enable FDA to carry out its statutory obligations to consult with the appropriate foreign government officials in the event of an imminent hazard or other violations specified in the FD&C Act.

Respondents to this collection of information include manufacturers, distributors, and other persons from the private sector in business and other for-profit institutions who export currently regulated FDA products not intended for sale in the United States.

# 3. <u>Use of Improved Information Technology and Burden Reduction</u>

The collection of information neither requires nor prohibits the use of automated, electronic, mechanical, or other technological collection techniques. Respondents may submit their notifications electronically or on paper. While FDA does not mandate the use of technology to create or maintain records, it does encourage the use of technology such as office suite computer software to create and maintain these records. FDA estimates that 90% of the respondents and recordkeepers for this collection of information will use current technology to submit reports and create and maintain their records.

## 4. Efforts to Identify Duplication and Use of Similar Information

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Under the FDA Export Reform and Enhancement Act, FDA is the only Agency responsible for the export of unapproved or otherwise violative drugs, devices, food and color additives, cosmetics, dietary supplements, blood and blood products, tissues and tobacco products. In particular, the maintenance of records relating to the export of tobacco products pertains only to documents developed after June 22, 2009. Records created for this collection of information which relate to tobacco products will not be duplicate documents. Therefore, no duplication of data for this collection of information exists.

# 5. <u>Impact on Small Businesses or Other Small Entities</u>

Respondents to this collection of information include manufacturers, distributors, and other persons who export products currently regulated by FDA which are not intended for sale in the United States, a portion of whom may be small businesses. All exporters are expected to create reports and maintain records demonstrating that the exported products meets with the foreign purchaser's specifications, does not conflict with the laws of the foreign country, is labeled on the outside of the shipping package that is intended for export, and is not sold or offered for sale in the United States. FDA believes this collection of information does not fall disproportionately upon small businesses. However, for tobacco products, 148 out of 158 entities are estimated to be small businesses or small entities who may be affected by this collection of information.

### 6. <u>Consequences of Collecting the Information Less Frequently</u>

Respondents to this collection of information will respond by submitting reports or creating and maintaining records on an occasional basis. Failure to maintain records would impair a

firm's ability to show, and FDA's ability to determine, that exportation of a particular drug product complied with all statutory requirements. For exports under Section 802 of the FD&C Act, failure to maintain records would also be contrary to law.

Failure to provide the notifications would be contrary to law and would impair FDA's ability to carry out its statutory obligations to notify foreign countries if an exported product presents an imminent hazard, has been refused approval by FDA, or otherwise violates the conditions for export.

# 7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

There are no special circumstances for this collection of information.

The recordkeeping and reporting requirements are consistent with the guidelines in 5 CFR 1320.5. The records required under the regulation would be retained, in accordance with good manufacturing practice requirements for the product, (which results in a record retention period of three years or less, depending on the product).

The regulation does not require notifications to occur more frequently than the quarterly basis described in 1320.5(d) (2) (i) nor does it require multiple copies of the notification.

# 8. <u>Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency</u>

In accordance with 5 CFR 1320.8(d), FDA published a 60 day notice for public comment in the FEDERAL REGISTER of July 3, 2014 (79 FR 38038). No comments were received.

### 9. Explanation of Any Payment or Gift to Respondents

FDA will not provide any payment or gifts to respondents.

### 10. Assurance of Confidentiality Provided to Respondents

The information that would be collected under this regulation would be subject to the safeguards under 21 CFR Part 20 of the Freedom of Information Act.

### 11. Justification for Sensitive Questions

No questions of a sensitive nature are asked.

# 12. Estimates of Annualized Burden Hours and Costs

12a. Annualized Hour Burden Estimate

The Estimated Annual Reporting Burden total hours for Non-Tobacco are 150,825 hours.

The Agency estimated the number of respondents and burden hours associated with the reporting and recordkeeping requirements in § 1.101 by reviewing past Agency records, using Agency expert resources, conferring with another Federal agency who has experience and information regarding tobacco product exports, and by consulting with industry sources. For example, the estimated number of respondents and total annual responses in §§ 1.101(b) and 1.101(e) were derived from the number of export certificates manufacturers have requested from FDA, and the estimated hours per response reflect revised estimates derived from actual data received from exporters who must report or maintain records for this collection of information.

Table 1 - Estimated Annual Reporting Burden

21 CFR, Section 801	Number of Respondents	Number of Responses per Respondent	Total Annual Responses	Average Burden per Response	Total hours
1.101(d) (Non- Tobacco) (CBER)	5	193	965	15	14,475
1,101(d) (Non- Tobacco) (CDER)	5	180	900	15	13,500
1.101(d) (Non- Tobacco) (CDDRH)	63	130	8,190	15	122,850
Total	73		10,055		150,825

The total estimated reporting burden is comprised of non-tobacco reporting to three of FDA's Centers (the Center for Biologics Evaluation and Research [CBER], the Center for Drug Evaluation and Research [CDER], and the Center for Devices and Radiological Health [CDRH].) The total estimated burden is 150,825 hours, which is 14,475 hours (CBER) plus 13,500 hours (CBER) plus 122,850 hours (CDRH). These estimates were calculated based on FDA's actual experience and submissions submitted by respondents previously. Based on the same experience, FDA now estimates that the total number of reporting respondents will be 73.

Table 2 – Estimated Annual Recordkeeping Burden

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21 CFR	No. of Record-	No. Records per	Total Annual	Average Burden	Total Hours			
Section	keepers	Recordkeeper	Records	per				
				Recordkeeping				

1.101 (b), (c), (e) (Non- Tobacco) (CBER, CDER, and CDRH)	320	3	960	22	21,120
1.101(b) Office of International Programs Only (Non- Tobacco)	1	189	189	22	4,158
1.101(b) (Tobacco Products)	158	3	474	22	10,428
Total					35,706

In Table 2, FDA estimates the annual recordkeeping hourly burden to CBER, CDER, and CDRH recordkeepers of non-tobacco products to be 21,120 hours (300 recordkeepers times 3 average annual responses times 22 hours). FDA estimates the annual hourly recordkeeping burden to OIP recordkeepers to be 4,158 hours (1 recordkeeper times 189 responses times 22 hours). FDA also estimates the annual hourly recordkeeping burden to CTP recordkeepers to be 10,428 hours (158 recordkeepers times 3 responses times 22 hours). Total recordkeeping burden, therefore, is 35,706 hours (21,120 plus 4,258 plus 10,428 hours). This estimate is based on the average number of hours expected to create and maintain a single record, and was determined by the Agency's current estimates of respondent recordkeeping burden needed to respond to this collection of information.

The hours include 1) Non-tobacco, 2) Office of International Programs (OIP) and 3) Tobacco collections. The addition of OIP and CTP to FDA's recordkeeping estimates has increased the recordkeeping estimates due to capturing OIP and CTP recordkeeping information and tracking the data collection of information for export notifications

With regard to tobacco product recordkeeping, FDA estimated that between 30 and 158 establishments could be involved in the exporting of tobacco products under §1.101(b), and each establishment may have to maintain records up to 3 times per year, at a total of 22 hours per record-keeper. The agency therefore estimates that between 1,980 and 10,428 burden hours will be needed for tobacco product exporters to create and maintain records demonstrating compliance with section 801(e)(1) of the FD&C Act. To be conservative, FDA has estimated that 158 tobacco product manufacturers will take approximately 10,428 hours to comply with the requirements of section 801(e)(1) of the FD&C Act.

### 12b. Annualized Cost Burden Estimate

FDA estimates the annual reporting burden cost to exporters of Non-Tobacco product to be \$1,005,500 (i.e, Total Annual Reporting Responses of 10,055 multiplied by \$100) . FDA estimates the annual recordkeeping burden cost to exporters of non-tobacco products to be \$114,900, which is the estimated total annual number of records (960 records for CBER, CDER, and CDRH plus 189 records for OIP, or 1,149 records) multiplied by \$100 per record. This cost is based on the average cost expected to create and maintain a single a single record,

and was determined by the Agency's current estimates of respondent costs to respond to this collection of information.

FDA estimates the recordkeeping cost to exporters of tobacco products to be \$47,400, which is the number of records estimated (474) for each respondent multiplied by \$100 per record. This cost is based on the average cost expected to create and maintain a single record, and was determined by the Agency's current estimates of respondent costs to respond to this collection of information.

The total burden cost is expected to be \$1,167,800, which is \$1,005,500 plus \$114,900 plus \$47,400.

Type of Respondent Total Annual Respondent Total Number of Cost Per Report or Reports and/or Record Costs Records Non-Tobacco - Exporters 10,055 \$100 \$1,005,500 Filing/ Reporting 1.101 (d) Non-Tobacco - Exporters \$100 \$114,900 1,149 Recordkeeping and 1.101 (b) (c) (e) **Exporters of Tobacco Products** 474 \$100 \$47,400 Maintaining Records/Recordkeeping 1.101(b) Total \$1,167,800

Table 3 – Estimated Annual Burden Cost

### 13. Estimates of Other Total Annual Costs to Respondents and/or Recordkeepers/Capital Costs

There are no total capital or start-up, operating or maintenance costs associated with this information collection.

# 14. Annualized Cost to the Federal Government

The total number of reports and records are 11,678. FDA estimates that an average federal employee full time equivalent hourly wage to review these reports and records is \$ 43.00 per hour and the program will require one hour to review each record or report by one GS-13 employee in the Washington metropolitan area. Therefore, the total annualized government cost for this collection of information is expected to be \$502,154, which is \$43.00 hourly FTE wage rate multiplied by 11,678 records and reports.

### 15. Explanation for Program Changes or Adjustments

The estimated total annual hourly burden for this collection of information is expected to be 186,531 hours, which is an increase of 147,411 hours from the currently OMB approved burden (from 39,120 hours to 186,531).

There are several reasons for this increase in hours:

- a. Reporting Burden: The number of respondents is expected to decrease from 400 to 73 based on the actual number of export notification reports received over the past three years. However, although number of entities reporting is expected to decrease, the average number of responses for each of the three respective Centers is expected to increase significantly (from 3 to 193 for CBER, 3 to 180 for CDER, and 3 to 130 for CDRH), resulting in an increase of 132,825 hours (from 18,000 OMB currently approved burden hours to 150,825 projected burden hours). The expected increase in the number of responses per respondent is also based on the actual number of export notification reports received over the past three years.
- b. Recordkeeping Burden. Recordkeeping burden is expected to increase by 14,586 hours, from 21,120 to 35,706 hours due to the addition of reporting requirements in section 1.101(b) for the Office of International Programs (4,158 hour increase) and the Center for Tobacco Products (10,428 hour increase.)

CTP's tobacco product recordkeeping requirements under § 1.101(b) from OMB Information collection 0910-0690 resulted in CTP's hourly burden increase of 10,428 recordkeeping hours. Once the renewal of this collection of information has been approved by OMB, the information collection under OMB No. 0910-0690 will be discontinued.

### 16. for Tabulation and Publication and Project Time Schedule

Information collected under this requirement will not be published.

# 17. Reason(s) Display of OMB Expiration Date is Inappropriate

The Agency does not seek an exemption from displaying the expiration date.

18. Exceptions to Certification for Paperwork Reduction Act Submissions There ae no exceptions to the certification.