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# **New and Revised Draft Q&As on Biosimilar Development and the BPCI Act (Revision 3)**

## **Guidance for Industry**

### ***DRAFT GUIDANCE***

**This guidance document is being distributed for comment purposes only.**

Comments and suggestions regarding this draft document should be submitted as electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number FDA-2011-D-0611.

For questions regarding this draft document, contact (CDER) Sandra Benton, 301-796-1042, or (CBER) Office of Communication, Outreach and Development, 800-835-4709 or 240-402-8010.

**U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Drug Evaluation and Research (CDER)  
Center for Biologics Evaluation and Research (CBER)**

**September 2021  
Biosimilars**

**Revision 3**

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## Guidance for Industry

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1 **New and Revised Draft Q&As on Biosimilar Development and the**  
2 **BPCI Act (Revision 3)**  
3 **Guidance for Industry<sup>1</sup>**  
4

5  
6 This draft guidance, when finalized, will represent the current thinking of the Food and Drug  
7 Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not  
8 binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the  
9 applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff responsible  
10 for this guidance as listed on the title page.  
11

12  
13  
14 **INTRODUCTION**  
15

16 This guidance document provides answers to common questions from prospective applicants and  
17 other interested parties regarding the Biologics Price Competition and Innovation Act of 2009  
18 (BPCI Act). The question and answer (Q&A) format is intended to inform prospective  
19 applicants and facilitate the development of *proposed biosimilar products* and *proposed*  
20 *interchangeable products*,<sup>2</sup> as well as describe FDA's interpretation of certain statutory  
21 requirements added by the BPCI Act.  
22

23 The BPCI Act created an abbreviated licensure pathway in section 351(k) of the Public Health  
24 Service Act (PHS Act) (42 U.S.C. 262(k)) for biological products shown to be biosimilar to, or  
25 interchangeable with, an FDA-licensed biological reference product (see sections 7001 through  
26 7003 of the Patient Protection and Affordable Care Act (Public Law 111-148) (ACA)). FDA  
27 believes that guidance for industry that provides answers to commonly asked questions regarding  
28 FDA's interpretation of the BPCI Act will enhance transparency and facilitate the development  
29 and approval of biosimilar and interchangeable products. In addition, these Q&As respond to  
30 questions the Agency has received from prospective applicants regarding the submission of

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<sup>1</sup> This draft guidance has been prepared by the Center for Drug Evaluation and Research (CDER) and the Center for Biologics Evaluation and Research (CBER) at the Food and Drug Administration (FDA or the Agency). We update guidances periodically. For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>. You may submit comments on this guidance at any time. Submit comments to Docket No. FDA-2011-D-0611 (available at <https://www.regulations.gov/docket/FDA-2011-D-0611>). See the instructions in that docket for submitting comments.

<sup>2</sup> In this draft guidance, the following terms are used to describe biological products licensed under section 351(k) of the Public Health Service Act (PHS Act): (1) *biosimilar* or *biosimilar product* refers to a product that FDA has determined to be biosimilar to the reference product (see section 351(i)(2) and (k)(2) of the PHS Act) and (2) *interchangeable biosimilar* or *interchangeable product* refers to a biosimilar product that FDA has also determined to be interchangeable with the reference product (see section 351(i)(3) and (k)(4) of the PHS Act). The terms *proposed biosimilar product* and *proposed interchangeable product* are used to describe a product that is under development or is the subject of a pending 351(k) biologics license application. Biosimilarity, interchangeability, and related issues are discussed in more detail in the BACKGROUND section of this guidance.

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31 biologics license applications (BLAs) for biosimilar and interchangeable products. FDA may  
32 provide additional Q&As through draft guidance as appropriate.

33  
34 This draft guidance document revises the draft guidance for industry *New and Revised Draft*  
35 *Q&As on Biosimilar Development and the BPCI Act (Revision 2)* (December 2018) and retains  
36 Q.I.12. This draft guidance does not include new Q&As or make changes to currently issued  
37 draft or final Q&As. Additional information about the Q&A format for this draft guidance  
38 document is provided in the Background section.

39  
40 After FDA has considered any comments on a draft Q&A, the Q&A will be finalized by adding  
41 the Q&A, as a revision, to the final guidance document *Questions and Answers on Biosimilar*  
42 *Development and the BPCI Act* (September 2021), as appropriate. This final guidance document  
43 is part of a series of guidance documents that FDA has developed to facilitate development of  
44 biosimilar and interchangeable products.

45  
46 The final guidance documents issued to date address a broad range of issues, including:

- 47 • *Clinical Pharmacology Data to Support a Demonstration of Biosimilarity to a Reference*  
48 *Product* (December 2016)
- 49 • *Considerations in Demonstrating Interchangeability With a Reference Product* (May  
50 2019)
- 51 • *Labeling for Biosimilar Products* (July 2018)
- 52 • *Questions and Answers on Biosimilar Development and the BPCI Act (Revision 2)*  
53 (September 2021)
- 54 • *Scientific Considerations in Demonstrating Biosimilarity to a Reference Product* (April  
55 2015)

56  
57 In addition, FDA has published draft guidance documents related to the BPCI Act, which, when  
58 finalized, will represent FDA's current thinking. These draft guidance documents include:

- 59 • *Biosimilarity and Interchangeability: Additional Draft Q&As on Biosimilar*  
60 *Development and the BPCI Act* (November 2020)
- 61 • *Development of Therapeutic Protein Biosimilars: Comparative Analytical Assessment*  
62 *and Other Quality-Related Considerations* (May 2019)
- 63 • *Formal Meetings Between the FDA and Sponsors or Applicants of BsUFA Products*  
64 (June 2018)
- 65 • *Reference Product Exclusivity for Biological Products Filed Under Section 351(a) of the*  
66 *PHS Act* (August 2014)

67  
68 The contents of this document do not have the force and effect of law and are not meant to bind  
69 the public in any way, unless specifically incorporated into a contract. This document is  
70 intended only to provide clarity to the public regarding existing requirements under the law.  
71 FDA guidance documents, including this guidance, should be viewed only as recommendations,

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72 unless specific regulatory or statutory requirements are cited. The use of the word *should* in  
73 Agency guidances means that something is suggested or recommended, but not required.

74

75

### **BACKGROUND**

77

#### *The BPCI Act*

79

80 The BPCI Act was enacted as part of the ACA on March 23, 2010. The BPCI Act amended the  
81 PHS Act and other statutes to create an abbreviated licensure pathway for biological products  
82 shown to be biosimilar to, or interchangeable with, an FDA-licensed biological reference product  
83 (see sections 7001 through 7003 of the ACA). Section 351(k) of the PHS Act, added by the  
84 BPCI Act, sets forth the requirements for the licensure of a proposed biosimilar or proposed  
85 interchangeable product.

86

87 Section 351(i) defines *biosimilarity* to mean “that the biological product is highly similar to the  
88 reference product notwithstanding minor differences in clinically inactive components” and that  
89 “there are no clinically meaningful differences between the biological product and the reference  
90 product in terms of the safety, purity, and potency of the product” (see section 351(i)(2) of the  
91 PHS Act).

92

93 A BLA submitted under section 351(k) (a *351(k) BLA*) must contain, among other things,  
94 information demonstrating that the biological product is biosimilar to a reference product based  
95 upon data derived from analytical studies, animal studies, and a clinical study or studies (see  
96 section 351(k)(2)(A)(i)(I) of the PHS Act), unless FDA has determined that an element described  
97 in section 351(k)(2)(A)(i)(I) is unnecessary (see section 351(k)(2)(A)(ii) of the PHS Act). To  
98 meet the standard for “interchangeability,” an applicant must provide sufficient information to  
99 demonstrate biosimilarity to the reference product and also to demonstrate that the biological  
100 product can be expected to produce the same clinical result as the reference product in any given  
101 patient, and if the biological product is administered more than once to an individual, the risk in  
102 terms of safety or diminished efficacy of alternating or switching between the use of the  
103 biological product and the reference product is not greater than the risk of using the reference  
104 product without such alternation or switch (see section 351(k)(4) of the PHS Act).

105 Interchangeable products may be substituted for the reference product without the intervention of  
106 the prescribing health care provider (see section 351(i)(3) of the PHS Act).

107

#### *“Question-and-Answer” Guidance Format*

109

110 FDA has been using the format of Q&A guidance to describe the Agency’s thinking on and  
111 update certain information and recommendations relevant to the development of biosimilar and  
112 interchangeable products. This draft guidance includes only Q&As that are in draft form. The  
113 guidance *Questions and Answers on Biosimilar Development and the BPCI Act* contains all  
114 Q&As that are final. As FDA issues individual Q&As, they will first be incorporated into a draft  
115 Q&A guidance document. After FDA has considered any comments on draft Q&As received

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116 during the relevant comment period and, as appropriate, incorporated suggested changes to the  
117 Q&As, individual Q&As will be finalized and moved to the final guidance document.

118  
119 A Q&A that was previously in the final guidance document may be withdrawn and moved to a  
120 draft guidance document if FDA determines that the Q&A should be revised in some respect and  
121 reissued in a revised draft Q&A for comment. A Q&A also may be withdrawn and removed  
122 from the Q&A guidance documents if, for instance, the issue addressed in the Q&A is addressed  
123 in another FDA guidance document.

124  
125 FDA will provide the publication date of the current version of each Q&A, and information  
126 about whether the Q&A has been added to or modified in the relevant draft guidance document.  
127 FDA has maintained the original numbering of the guidance Q&As used in the December 2018  
128 final guidance document (*Questions and Answers on Biosimilar Development and the BPCI Act*),  
129 December 2018 draft guidance document (*New and Revised Draft Q&As on Biosimilar*  
130 *Development and the BPCI Act (Revision 2)*), and the November 2020 draft guidance document  
131 (*Biosimilarity and Interchangeability: Additional Draft Q&As on Biosimilar Development and*  
132 *the BPCI Act*). For ease of reference, a Q&A retains the same number when it moves from a  
133 draft guidance document to the final guidance document and, where appropriate, when a Q&A is  
134 withdrawn from the final guidance document and moved to a draft guidance document.

135  
136 In this draft guidance document, several asterisks appear where Q&As have already been  
137 withdrawn or moved to the final guidance document.

138  
139

### **QUESTIONS AND ANSWERS**

140

#### **I. BIOSIMILARITY OR INTERCHANGEABILITY**

141

\* \* \* \* \*

142  
143  
144  
145 ***Q.I.12. How can an applicant demonstrate that its proposed injectable biosimilar***  
146 ***product or proposed injectable interchangeable product has the same***  
147 ***“strength” as the reference product?***  
148 ***[Draft December 2018]***

149

150 A.I.12. Under section 351(k)(2)(A)(i)(IV) of the PHS Act, an applicant must demonstrate  
151 that the “strength” of the proposed biosimilar product or proposed interchangeable  
152 product is the same as that of the reference product. Data and information  
153 generated as part of the analytical similarity assessment may inform the  
154 determination that a proposed biosimilar product or proposed interchangeable  
155 product has the same strength as its reference product. As a scientific matter,  
156 there may be a need to take into account different factors and approaches in  
157 determining the *strength* of different biological products. Sponsors should  
158 discuss their proposed approach with FDA and provide an adequate scientific  
159 basis for their approach to demonstrating same strength.

160

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161 In general, a sponsor of a proposed biosimilar product or proposed  
162 interchangeable product with an *injection* dosage form (e.g., a solution) can  
163 demonstrate that its product has the same strength as the reference product by  
164 demonstrating that both products have the same total content of drug substance (in  
165 mass or units of activity) and the same concentration of drug substance (in mass  
166 or units of activity per unit volume). In general, for a proposed biosimilar product  
167 or proposed interchangeable product that is a dry solid (e.g., a lyophilized  
168 powder) from which a constituted or reconstituted solution is prepared, a sponsor  
169 can demonstrate that the product has the same strength as the reference product by  
170 demonstrating that both products have the same total content of drug substance (in  
171 mass or units of activity).  
172

173 Although not a part of demonstrating same *strength*, if the proposed biosimilar  
174 product or proposed interchangeable product is a dry solid (e.g., a lyophilized  
175 powder) from which a constituted or reconstituted solution is prepared, the 351(k)  
176 application generally should contain information that the concentration of the  
177 proposed biosimilar product or proposed interchangeable product, when  
178 constituted or reconstituted, is the same as that of the reference product, when  
179 constituted or reconstituted.  
180

181 A sponsor should determine the content of drug substance for both the reference  
182 product and the proposed biosimilar product or proposed interchangeable product  
183 using the same method. The strength of the proposed product generally should be  
184 expressed using the same units of measure as the reference product.  
185

186 \* \* \* \* \*

### 187 188 189 **II. PROVISIONS RELATED TO REQUIREMENTS TO SUBMIT A BLA FOR A** 190 ***BIOLOGICAL PRODUCT***

191  
192 There are no draft Q&As for this section.  
193

### 194 195 **III. EXCLUSIVITY**

196  
197 There are no draft Q&As for this section.