

An Introduction to the Medical Device User Fee Program: MDUFA V

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MDUFA Program History

Authorized FDA to collect user fees for the review of premarket submissions. Enacted to provide additional resources to an under resourced medical device program.

MDUFA I - MDUFMA (FY2003-FY2007)

Reauthorized user fee collections and increased resources for medical device programs. Created more aggressive performance goals and introduced interim performance milestones (RTA, SI).

> MDUFA III - FDASIA (FY2013-FY2017)

Reauthorizes user fee collections, increases resources, improves goals for PMA and 510(k) Total Time to Decision, Pre-Sub and De Novo, introduces new goal structure with "add-on" payments, support global harmonization, creates TAP Pilot.

MDUFA V - FDASLA (FY2023-FY2027)

MDUFA II - FDA Ammendments Act (FY2008-FY2012)

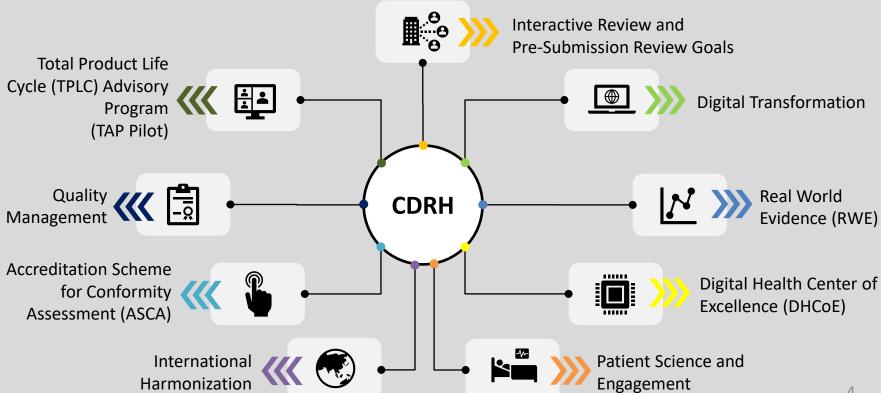
Reauthorized user fee collections and established tiered performance goals for 510(k) and PMA.

MDUFA IV - FDARA (FY2018-FY2022)

Reauthorized user fee collections, increased resources, created more aggressive performance goals for 510(k) and PMA, introduced new performance goals for De Novo and Pre-Sub. Support for NEST, digital health, ASCA Pilot, and patient engagement.



MDUFA V Supported Programs



Enhanced Use of Consensus Standards:



Accreditation Scheme for Conformity Assessment (ASCA)

MDUFA V Commitments

- MDUFA IV pilot program intended to streamline conformity assessment aspects of device review and improve quality of testing
- Will transition from a pilot to a permanent program during MDUFA V
- Work with stakeholders to identify program enhancements and expansion criteria
- Provide training to FDA staff, industry, accreditation bodies and testing labs
- Track and report performance measures



International Harmonization MDUFA V Commitments





- Expand engagement in international harmonization and convergence efforts
- Create a mechanism for working with regulatory partners with whom we have confidentiality commitments
- Assess extent of CDRH implementation of IMDRF technical documents
- Support creation of a forum to identify opportunities for regulators to leverage one another's approaches to decision making
- Participate in outreach activities to other regulators that encourage harmonization
- Issue a draft strategic plan in FY23, begin annual assessments in FY24



Patient Science and Engagement Program in CDRH

Voice of Patients





Patient Preference Initiative (2012) Patient Science and Engagement (PSE) Program MDUFA IV (FY18-22)









Partner with Patients Strategic Priority

(2016-17)

PSE Expansion and Integration

MDUFA V (FY23-27)

Patient Science and Engagement MDUFA V Commitments







- Facilitate patient engagement through patient-friendly educational content
- Explore ways to advance health equity by incorporating data and perspectives from diverse patients
- Expand patient science review expertise and capacity
- Improve regulatory predictability and impact of patient science, including new research case examples
- Hold public meeting on patient-generated health data (PGHD) for collecting clinical outcome assessment (COA) data and for remote clinical trials
- Issue guidance on incorporating COAs into premarket studies and update patient preference information (PPI) guidance

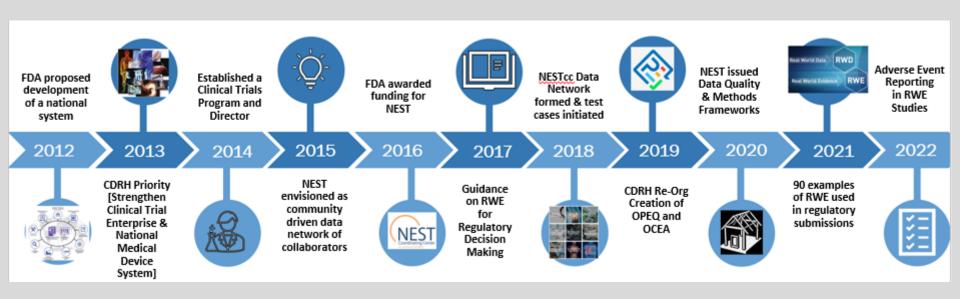


Real-World Evidence (RWE) Program in CDRH

Assess Technology When Used in Clinical Practice



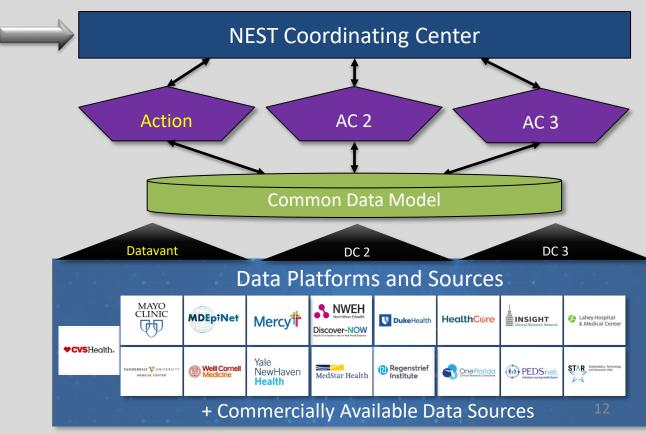
RWE: 2012 to Current State



FDA

NEST - Infrastructure





Real World Evidence MDUFA V Commitments





- Expand or develop RWE methods and policies for premarket submissions
- Update 2017 RWE Guidance
- Continue RWE training of review staff
- Transparent program updates, user-fee accounting
- Option for continued support for the National Evaluation System for Health Technology (NEST)



Digital Health Program in CDRH

Advance Innovation



CDRH's Digital Health Journey

In early days of digital health, CDRH developed changes to its approach to and policy for digital health, and we built on that over time.

Mobile Medical Applications

The Mobile Medical
Applications guidance
clarified that FDA did
not intend to regulate
every health-related
app, and take a
platform-independent
approach.

2013

21st Century Cures Act

The 21st Century Cures
Act took our approach
to digital health and
built much of it into

2016

MDUFA IV

MDUFA IV helped us expand our Digital Health capabilities and supported the creation of CDRH's Digital Health Center of Excellence.

2017-2022

Digital Health Precertification Pilot

Through the "Pre-Cert"
Pilot Program, we
explored innovative
tailored total product
lifecycle approaches to
medical device
software.

2017-2022

Final Guidance Implementing "Cures"

Several guidance documents were updated or newly published as final to further implement the Cures Act, including the function based approach.

2019-2022

AI/ML Initiatives

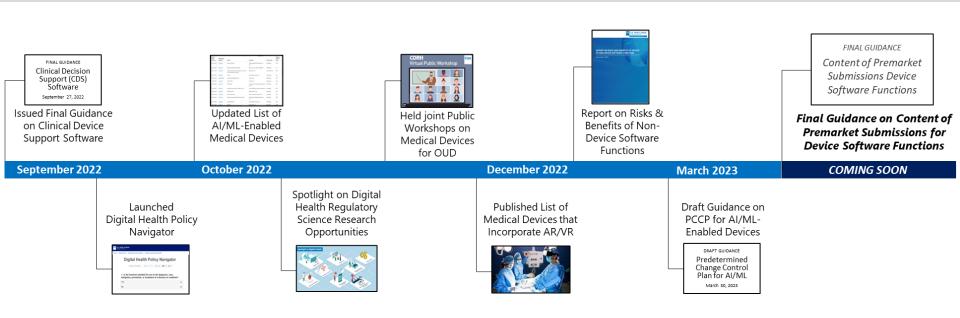
We led stakeholder engagement, shared a discussion paper, and an AI/ML action plan to further a total product lifecycle regulatory framework.

2019+

CDRH's Digital Health Center of Excellence



continues momentum in digital health to support FDA's public health mission.



Digital Health MDUFA V Commitments



- Build software and digital health technical expertise
- Streamline and align review with software lifecycles
- Participate in international harmonization and convergence
- Finalize guidance for device software functions
- Publish draft guidance on evaluating change control plans





Total Product Lifecycle Advisory Program (TAP)

Engagement with Device Developers

Limits of Current Developer Engagement Opportunities



Idea

Planning, Testing, Clinical Study FDA Marketing Decision Limited
Adoption;
Generating
Data → Payors

Coding and Coverage Decisions

Reimbursement and Widespread Adoption

- → No single stakeholder has ownership of total process
- → It's not laying blame; it's just the way the system evolved









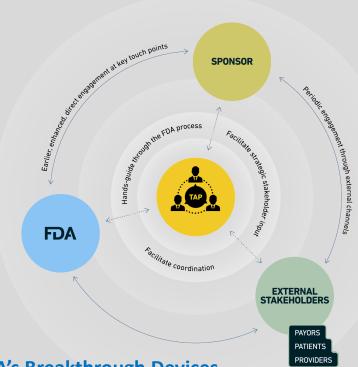
TAP Pilot



Long-term Vision | Help spur more rapid development and more rapid and widespread patient access to safe, effective, high-quality medical devices of public health importance.

Voluntary Pilot in MDUFA V

- Provide earlier and more frequent interactions with FDA, as well as facilitate coordination of earlier and more strategic stakeholder input, with a focus on Breakthrough and STeP devices.
- Begin with "soft launch" of up to 15 products in one CDRH OHT in FY 2023, and expand to enroll up to 325 products across multiple OHTs by end of MDUFA V.
- FDA will conduct an assessment of the TAP Pilot using an independent third party and include a participant survey and quantitative and qualitative success metrics.



Build upon lessons learned from FDA's Breakthrough Devices
Program and COVID-19 pandemic response

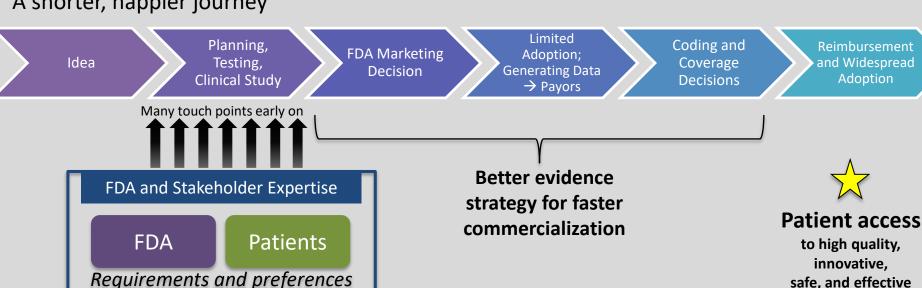


TAP Pilot: Intended Impact

A shorter, happier journey

Payors

Providers



medical devices

TAP Pilot



Implementation

- Starting w/OHT-2 (Cardiovascular)
- 15 companies with new Breakthrough Designation
- Teleconference within 14 days (90%)
- Biocompatibility/Sterility written feedback within 21 days (90%)
- Written feedback for other requests within 40 days (90%)

Assessment

- Independent third party
- Quantitative metrics
 - Time from BDD/STeP to Marketing Submission
 - Time from Submission to Marketing Authorization
 - Requests for additional info during review
- Company satisfaction of interactions w/FDA and non-FDA Stakeholders

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FY23 – Soft Launch	FY24	FY25	FY26	FY27	
≤15 devices One OHT (OHT2)	≤45 additional devices (60 total) ≥2 OHTs	≤65 additional devices (125 total) ≥4 OHTs	≤100 additional devices (225 total) option to expand to more OHTs*	≤100 additional devices (325 total) option to expand to more OHTs*	

Acronym Glossary



AI/ML	Artificial Intelligence/Machine Learning		Office of Clinical Evidence and Analysis	
ASCA	Accreditation Scheme for Conformity Assessment		Office of Health Technology	
BDD	Breakthrough Device Designation		Office of Product Evaluation and Quality	
COA	OA Clinical Outcome Assessment		Opioid Use Disorder	
DHCoE	CoE Digital Health Center of Excellence		Predetermined Change Control Plan	
FDARA	Food and Drug Administration Reauthorization Act		Patient-Generated Health Data	
FDASIA	Food and Drug Administration Safety and Innovation Act		Premarket Approval	
FDASLA	Food and Drug Administration Safety and Landmark Advancements Act		Patient Preference Information	
FY	Fiscal Year	PSE	Patient Science and Engagement	
IMDRF	International Medical Device Regulators Forum	RTA	Refuse to Accept	
MDUFA	Medical Device User Fee Amendment	RWE	Real-World Evidence	
MDUFMA	Medical Device User Fee and Modernization Act	SI	Substantive Interaction	
NEST	National Evaluation System for health Technology	STeP	Safer Technologies Program	
NESTcc	National Evaluation System for health Technology Coordinating Center	ТАР	Total Product Lifecycle Advisory Program	



Summary from CDRH



Lessons learned from previous cycles have informed the size and scope of today's MDUFA program



User fees collected as part of the MDUFA V legislation will allow us to meet the needs of our customers while driving innovation

Industry Education



1. CDRH Learn – Multi-Media Industry Education

- over 200 modules videos, webinars, presentations, software-based "how to" modules
- accessible on your portable devices: www.fda.gov/CDRHLearn

2. Device Advice – Text-Based Education

comprehensive regulatory information across the device total product life cycle:
 www.fda.gov/DeviceAdvice

3. Division of Industry and Consumer Education (DICE)

Email: <u>DICE@fda.hhs.gov</u>

Phone: 1-800-638-2041 or (301) 796-7100 (Live Agents 9 am − 12:30 pm; 1 − 4: 30 pm ET)

