**FDA Extended Hours at High Volume Commercial Land Border Ports**

**Background:** The Food and Drug Administration (FDA) maintains a port presence at selected commercial land border ports of entry on the Northern and Southern borders. The FDA works with Customs and Border Patrol (CBP) to review, inspect and clear shipments subject to FDA regulation. FDA plays a critical role in safeguarding the U.S. food supply and ensuring the safety of medical device and pharmaceutical imports. To fulfill this mission, FDA must be capable of reviewing and inspecting shipments timely and efficiently.

The trade is increasingly concerned about FDA staffing challenges at these commercial land border ports of entry, particularly the limited hours of operations at some of the busiest land border ports. The northern and southern borders are unique in that commercial trade moves at a rapid pace 24/7. CBP hours of operation reflect this reality at most commercial land border ports. Yet, FDA hours of operation at most border ports remain 8 am to 4 or 4:30 pm.

The *automated review* of the shipments by FDA generally takes place efficiently. A customs broker typically files entry documents electronically prior to a truck reaching the border, and FDA (from a remote location) conducts a timely review of the entry. The problem occurs for those shipments flagged in an automated review for a *physical inspection*. When the truck arrives outside of the limited 8 to 4 o’clock time frame, no officer is present to do the inspection, delaying the inspection until the following days – or even a week later. Delays of this magnitude at the border locations wreak havoc for supply chains. This situation not only delays the flow of trade (of particular concern for perishable products) but also impairs FDA’s ability to inspect regulated products in a timely manner.

The cost for the trade is up to $250+ per trailer per day for storage costs when onsite FDA staff at the port are not available, since inspections must occur at various warehouses in the field by appointment in the following days or weeks. This does not include the costs associated with the loss of shelf life for delicate food products. The current situation is also more costly for the FDA as limited staff in the ports must travel to off-site locations to conduct inspections.

**Details**

**Laredo**: The port in Laredo, Texas ranks as the #1 commercial port *in the nation*, with more than 3 million incoming trucks per year. FDA instructs truckers to arrive at least 2 hours before its 4:30 pm closing time. While the trade makes every effort to do so, congestion at the border often leads to bottlenecks for commercial traffic. Trucks routinely wait in line for 2+ hours. As a result, trucks arriving mid-day wait in line, only to reach the gate after 4:30 when all officers have left. For shipments that need a physical inspection, they must wait until the next day or later for FDA to do their work. The need for extended hours for FDA is nowhere greater than at the two bridges (World Trade Bridge and Columbia) in Laredo.

**Otay Mesa:** The port at Otay Mesa is the second busiest port along the Southern border and the highest volume for perishable produce. The FDA does not have extended weekend or weekday hours even though CBP operates at the port 7 days a week to handle perishables products. The limited FDA presence creates unacceptable delays for perishable products.

**Detroit**: On the Northern border, Buffalo is a location where FDA has extended hours of operation, enabling the agency to fulfill its role at this busy northern border port. By contrast, FDA in Detroit – the highest volume commercial crossing on the northern border -- only has regular 8 – 4:30 hours during the week, with some limited weekend hours. Canadian shipments are consolidated in Toronto each day and travel by truck to the Detroit port of entry throughout the evening and night. For truck load shipments, if the carrier crosses and FDA needs an exam, the carrier has to layover. The driver does not know that an FDA exam is required until they arrive at the port of entry. The impact from inadequate FDA staffing will get worse with the opening of the Gordie Howe International Bridge in late 2025.

**Solutions:** FDA should:

* Strive to align its staffing hours with CBP operations, with emphasis on the most heavily traveled commercial ports identified above. The goal is to have FDA operational from at least 8 am to 8 pm during weekdays, along with reasonable weekend hours.
* In some locations, such as the Gordie Howe International Bridge in Detroit, additional staff will be required. However, at other locations, FDA could cost-effectively implement a split-shift schedule to achieve the extended hours without increasing staff. For example, at the World Trade Bridge Port in Laredo, at current staffing levels, six officers could be assigned to an 8 am to 4 pm shift, while seven officers could be assigned to 12 pm to 8 pm. A similar split shift could be employed at the Columbia Bridge in Laredo or other locations. This could effectively extend operational hours using existing resources.

**Specific Request to Congress**: The National Customs Brokers and Forwarders Association of America (NCBFAA) requests that Congress direct FDA to do a pilot project at Laredo using the split shift concept to provide extended hours staffing for FDA officers from 8 am to 8 pm M-F;

and evaluate and report back to the Committee on the feasibility and effectiveness of employing the split-shift model on a long-term basis at commercial land border crossings, with particular emphasis on Laredo, TX; Otay Mesa, CA; and Detroit, MI. We also suggest that Congress request from FDA a plan for more closely aligning the FDA’s staff hours with CBP hours of operation at all commercial land border ports where FDA has a presence. The plan should include additional staffing needs for weekend operations, as required at the busiest land border ports.

The proposed FDA pilot program would provide the opportunity to test the proof of concept that extending hours through a split-shift arrangement (using existing resources) would reduce costs to American businesses, American consumers and the FDA government agency.