

# **UC Office of the President**

## **U.S. Department of Health and Human Services (HHS)**

### **Title**

University of California Response to NIH Request for Information on Maximizing Research Funds by Limiting Allowable Publishing Costs (NOT-OD-25-138)

### **Permalink**

<https://escholarship.org/uc/item/19t30344>

### **Journal**

N/A

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### **Publication Date**

2025-09-15



OFFICE OF THE VICE PRESIDENT – RESEARCH AND INNOVATION

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Submitted through: <https://osp.od.nih.gov/comment-form-maximizing-research-funds-by-limiting-allowable-publishing-costs/>

September 15, 2025

NIH Office of Science Policy  
6705 Rockledge Drive, Suite 630  
Bethesda, MD 20892

**RE: University of California Response to NIH Request for Information on Maximizing Research Funds by Limiting Allowable Publishing Costs ([NOT-OD-25-138](#))**

To Whom It May Concern,

On behalf of the University of California (UC) system, we thank the National Institutes of Health (NIH) for the opportunity to provide feedback on the [Request for Information on Maximizing Research Funds by Limiting Allowable Publishing Costs](#) issued on July 30, 2025.

The UC system is comprised of ten campuses, six academic health centers, an Agriculture and Natural Resources division, and three affiliated U.S. Department of Energy national laboratories. UC is committed to advancing open science and ensuring that the results of publicly funded research are widely accessible to the public, policymakers, practitioners, and the broader research community. This commitment is evident in several key initiatives, such as the [Academic Senate and Presidential open access policies](#), the [Faculty Declaration of Rights and Principles to Transform Scholarly Communication](#), and [efforts](#) to shift from subscription-based models to sustainable open access publishing.

UC appreciates NIH's recognition that dissemination and publication of research findings are essential, however, journals with large publishing fees can require awardees to use funds from their NIH awards to pay for those fees. This strains limited research funds and creates burdens for researchers with fewer resources. For example, early-career investigators may be unable to publish in high-impact journals that charge steep fees. This limits their visibility, career advancement, and ability to compete for future funding, thereby reinforcing incongruity in the research community. At the same time, we are concerned that an NIH ban or federal funding caps on publishing costs could inadvertently limit our researchers' ability to publish in venues that best ensure visibility and impact for their work. UC strongly recommends that NIH refrain from blanket bans or caps on allowable publication costs and instead preserve publication flexibility by driving publishing costs down through transparent, data-driven negotiations with publishers.

## **1. Proposed Policy Options**

UC appreciates NIH's effort to lay out multiple approaches to curbing high publication costs. However, we are concerned that caps on publication costs will unintentionally narrow author choice in where to publish and shift unreimbursed costs onto researchers without meaningfully exerting downward pressure on prices.

Rather than imposing caps on or prohibiting publication costs, NIH could negotiate with publishers to curb prices while preserving author choice. Recognizing that individual authors lack leverage to negotiate publication costs manuscript-by-manuscript, NIH, working with other federal funders, could negotiate and publicly post Article Processing Charge (APC) price lists with caps on annual increases for federally funded authors. With these schedules in place, NIH could either (a) pay the pre-negotiated APCs directly to publishers or (b) instruct grantees to budget those amounts as allowable direct costs. Both pathways simplify payments, reduce administrative burden, and create predictable, transparent pricing that is likely to yield savings and prevent cost-shifting to researchers. This approach also avoids the pitfall of setting an APC cap without negotiation, which could inadvertently raise the floor of APCs by incentivizing publishers who currently charge below the cap to increase their fees up to the maximum allowed by NIH.

## **2. Available Evidence Related to Publication Costs and Proposed Options**

As a system, UC has worked extensively through publisher negotiations to both control costs and expand open access. In 2024, UC's open access agreements with publishers generated a cost avoidance of \$6.6 million for the university and its authors, compared to what we would have paid under traditional subscription-based agreements. Our experience shows that transparency in pricing and clear financial guardrails that protect authors and publishers can help bend the publishing cost curve while ensuring broad and open dissemination of research outputs. We encourage NIH to consider federal-level negotiations and cross-agency coordination as essential tools in this effort.

## **3. Peer Review Compensation**

UC shares NIH's interest in improving the quality, transparency, and timeliness of peer review. However, linking higher allowable costs to direct reviewer compensation (Option 3) presents risks that merit careful consideration of strategies to mitigate those risks. Paying reviewers, while appealing in principle, could distort incentives by encouraging acceptance of out-of-scope assignments, add administrative complexity, and divert limited research funds without clear evidence of quality gains. If NIH wishes to pilot this approach, we recommend doing so narrowly with strong safeguards, including transparent review policies; conflict-of-interest and expertise matching requirements; and rigorous evaluation of outcomes, before considering broader adoption or embedding compensation as a general justification for higher allowable charges.

## **4. Publishing Best Practices**

N/A

## **5. Conclusion**

UC strongly supports maintaining the current NIH policy framework on publication costs while implementing targeted reforms that reduce excessive APCs and preserve researchers' ability to disseminate their work through wide variety of high-quality venues. By balancing fiscal responsibility with the imperative of broad and impartial dissemination, NIH can strengthen both the trust in and impact of federally funded research.

We appreciate NIH's leadership on this important issue and welcome further engagement to help craft policies that maximize the value of taxpayer investments in research to achieve the most meritorious science, address urgent health needs, and sustain a robust biomedical research workforce.

If you have any questions concerning these comments, please contact Agnes Balla, Director, Research Policy Analysis and Coordination at [Agnes.Balla@ucop.edu](mailto:Agnes.Balla@ucop.edu).

Sincerely,

A handwritten signature in black ink, appearing to read 'DM', followed by a long, horizontal, wavy line that extends to the right.

Deborah Motton, Ph.D.  
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