Draft MCW Response
NIH Request for Information on Maximizing Research Funds by Limiting Allowable Publishing Costs (September 15 deadline)

Notice Number: NOT-OD-25-138 (July 30)
https://grants.nih.gov/grants/guide/notice-files/NOT-OD-25-138.html

NIH to Establish New Policies for Allowable Publication Costs (July 8)
https://www.nih.gov/about-nih/nih-director/statements/nih-establish-new-policies-allowable-publication-costs

NIH explores capping APCs: Let's look at the evidence
https://www.scholcommlab.ca/2025/09/03/nih-apc-caps/

Draft Response

The Medical College of Wisconsin makes significant contributions to biomedical research and scholarly communication with over 2,100 biomedical journal articles published each year. The NIH Public Access Policy and PubMed Central (PMC) enhance biomedical research communication by providing a freely accessible repository of high-quality research journal articles. Requiring authors and funders to pay both article publication charges and deposit manuscripts in PMC creates an unnecessary duplication of effort and cost.

1. **The option, or other option not considered here, that best achieves the goal of balancing flexibility in providing research results with maximizing the use of taxpayer funds to support research: MCW recommends Option 2:** Set a limit on allowable costs per publication with a proposed limit of $2,000 per article.
2. **Any evidence (either from your own work or other publicly available sources) that can be publicly shared that addresses the considerations of one or more of the options:** Most article publication charges fall below this level at the Medical College of Wisconsin.
3. **Factors that NIH should consider in determining whether peer reviewers are appropriately compensated:**
4. **In addition to compensating peer reviewers, other kinds of publishing best practices that NIH should consider as factors in determining the potential allowability of a higher per publication cost, such as use of automated fraud detection capabilities:** NIH should require that researchers request grant funding support only for articles published in journals already approved by the NIH Literature Selection Technical Review Committee, ensuring that funds support high-quality, PubMed-indexed publications.(https://www.nlm.nih.gov/medline/medline_about_lstrc.html). NIH

should periodically study the impact of changes on scholarly communication quality and impact signals (article retractions, citations, etc.).

5. **Other evidence or information not considered here that NIH should consider in its policy on limiting allowable publication costs:** This important study of 1,117 journals across 29 medical specialties found that hybrid journals charge significantly higher APCs than fully open-access journals, with hematology/oncology having the highest median costs. APCs showed only weak correlations with journal prestige metrics, indicating that factors like impact factor and citation counts do not explain the cost variation.
   Tocco EG, Mayhew MM, Mercante MG, et al. Variability in article processing charges of open-access publishing across medical specialties. *PLoS One*. 2025;20(7):e0320684. Published 2025 Jul 30. doi:10.1371/journal.pone.0320684
   https://pmc.ncbi.nlm.nih.gov/articles/PMC12309987/