

September 15, 2025

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U.S. National Institutes of Health

Re: Response to RFI (NOT-OD-25-138): Maximizing Research Funds by Limiting Allowable Publishing Costs

The Journal of Nuclear Medicine (JNM) is the flagship publication of the Society of Nuclear Medicine and Molecular Imaging (SNMMI), a global not-for-profit professional organization advancing nuclear medicine, molecular imaging, and theranostics through education and research. Self-published by SNMMI, JNM plays a central role in the field by providing independent, expert review and publishing state-of-the-art research, continuing education articles, reviews, and timely updates on emerging issues in practice and research.

JNM is a green open access journal. Immediate open access (IOA) is offered for a charge of \$3,500. All other original research articles become publicly available 6 months after publication, with a standard publication fee of \$450. JNM complies with NIH requirements by depositing accepted manuscripts to PubMed Central (PMC) upon publication, with no embargo period for either standard or IOA submissions.

With an impact factor of 9.1 and nearly 30,000 citations in 2024, JNM is the leading journal in its field. In 2024, NIH-funded investigators accounted for roughly 16% of submissions from the U.S.

Most high-impact journals charge publication fees, and open access charges are often much higher than those charged by SNMMI, an independent society publisher. If NIH were to prohibit the use of grant funds for publication costs (Option 1), NIH investigators would face serious barriers to publishing their research findings. Many would be forced to publish in a shrinking pool of no-fee journals, which tend to be lower impact and are less widely disseminated. Such a policy would create inequities between investigators with access to alternative or institutional funding to pay publication fees and those without, and it would also likely reduce the number of publications per grant. This would, in turn, diminish the perceived productivity of investigators, jeopardize grant renewals and academic advancement, and ultimately slow the dissemination of scientific discoveries.

After reviewing the 5 proposed cost options offered for comment, SNMMI supports those that allow U.S. authors with NIH support to cover publication fees:

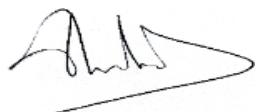
- Option 2 (\$2,000 per publication with no cap on number of publications)
- Option 4 (0.8% of total grant funds, up to \$20,000, for publication costs)
- Option 5 (Option 4 plus \$6,000 cap per publication)

Option 2 provides some support, but its \$2,000 cap falls below the APCs of many high-impact journals, leaving investigators to either subsidize costs or restrict their publishing choices. It also likely would lead to \$2,000 becoming a de facto minimum APC. Options 4 and 5 offer more flexibility, but their percentage-based allocation could disproportionately affect smaller grants, forcing investigators to choose between funding research and funding publications.

Restrictive policies risk penalizing independent and society-owned journals like JNM, which operate on modest publication fees, while leaving large commercial publishers with little incentive to reduce costs. Any policy intended to maximize research funds should avoid creating inequities among investigators and harming smaller, high-quality, independent journals that are essential for the dissemination of cutting-edge science.

In conclusion, SNMMI urges NIH to adopt a policy that preserves equitable publishing opportunities for researchers while supporting high-quality, independent journals such as *The Journal of Nuclear Medicine*. Limiting the use of grant funds for publication costs would be a disadvantage for NIH-funded researchers and would stifle cutting-edge science. A policy that balances cost control with broad access would best promote research and help ensure that patients quickly see the benefit from new advances in healthcare.

Sincerely,



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President
Society of Nuclear Medicine and Molecular Imaging