

Fees for Human Research

The Human Subjects Protection Program (HSPP) charges fees for the review of human subject research that is **industry sponsored or projects federally funded that have a single IRB requirement for multi-site research where the University of Arizona is the IRB of record.** Fees are **NOT** charged for projects where there is no funding at all, not industry sponsored, or are not a federally funded multi-site study. All IRB fees are due with submission to the HSPP. Review will begin when the fee is submitted. Fees are based on the review, regardless of whether the project is initiated.

Fees for Industry Sponsored Projects

This fee structure applies to the IRB review of **industry sponsored projects**. Projects where the industry sponsor is not providing monetary support but is only providing drug(s), device(s), or other equipment are not charged a fee. Investigators and/or departments are responsible for the payment of this fee regardless of whether the sponsor ultimately reimburses them for this fee. Projects approved between 3/1/19 to 6/30/24 will fall under the old fee schedule (v2022-09) which does **not** include fees for modifications, exempt research, or study closures and carries a fee of \$1,000 for continuing review.

IRB Fee Schedule for Industry Sponsored Projects:

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Initial, Full Board – \$2,800
Initial, Expedited – \$2,000
Initial, Exempt – \$1,000
Continuing Review – \$1,600 (applies to industry sponsored projects approved on or after
7/1/24)
Deferral to External IRB – \$2,000
UA is the IRB of Record for Additional Sites – \$2,000 per site
Study Closure – \$200 (applies to industry sponsored projects approved on or after
7/1/24)
Modifications on Exempt and Expedited Studies – \$500
Modifications on Full Committee Studies – \$650

Please note, the IRB will only charge for modifications that are specified by the sponsor. Minor changes such as textual modifications, personnel changes, submissions of RNIs, etc. will not incur any fees. Fees will only be applicable to modifications indicated by the sponsor, which may entail revisions to the sponsor protocol, investigational brochure, or the introduction of a new study arm, among others.

Fees for Federally Funded Single IRB Research Proposals

This fee structure applies to projects that are **federally funded**. When the UA serves as the coordinating center for a multi-site study, there is no charge for review of the initial protocol. A fee will be charged for the addition of each site for which the UA IRB will be the IRB of Record. The fee should be included as a direct cost line item in the budget.

Addition of a Site – \$2,000 per site



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Submitting Payment

To submit a payment using UAccess, log on to http://uaccess.arizona.edu. Click "Financials", then "Accounting". Fees are processed via the Internal Billing (IB) form, which can be found under "ACTIVITIES".

In the *Explanation Field* please include the IRB Project Title and Pl's first and last name. In the *Accounting Lines* section the following information must be provided:

"Income" chart code: UA
Account number: 2436800
Sub-account code: UAIRB

• Object code: 0616 (Services - Internal)

Documenting the eDoc Number

For new studies and deferrals: the eDoc number associated with the payment must be included in the appropriate IRB Protocol document upon submission to the IRB.

For modifications where a fee applies, log a comment in eIRB with the eDoc number.

For Continuing Reviews where a fee applies, log a comment in eIRB with the eDoc number and or provide the eDoc number in the *Renewal Supplemental Document* in eIRB along with the Continuing Review submission.

Projects submitted with an invalid or unfinalized eDoc number will not be reviewed until the payment is final.

Questions

If you have questions on where to submit payment, please reach out to: Christina Rocha
Manager, RIIBC Transaction Team
520-626-0180
crocha@arizona.edu

Please direct any questions regarding the policy to Mariette Marsh at marshm@arizona.edu.

Resources

Frequently Asked Questions (FAQs) related to the NIH costs.