

# **GPC Pricing for non-profit or government funding requests**





## Budget components to be considered

- Startup (IRB, contracting, etc.)
- PM effort
- Tech effort
  - Query development and testing
  - Bio-statistician
  - Data engineer (data extraction, transmission, merging, etc)
  - Honest broker
- Co-I effort
- Patient engagement
- ICR
- Indirect

➤ **Condition** - For non-profit/government organizations that have signed GPC DSA or EICA only, except De-ID feasibility counts.

# GPC Services – Proposal development

Service #	Services	Description	Charges
1	Initial consultation	One hour consultation with GPC CC about proposal needs	free
2	GPC ROA	<u>Research Opportunity Request (ROA)</u> to identify project alignment with GPC initiatives	free
		Identify potential GPC partner sites and co-investigators	free
3	Prep for research	One feasibility query per proposal development	free
	Budget development	Proposal budget development assistance with regard to GPC resources	
	Patient engagement	one Rapid PACE consultation plus one Rapid PACE full panel with patient stakeholders	
4	LOS	Letter(s) of support	Free if GPC resource budget > \$75,000
			Engagement LOS contingent on patient stakeholder approval

# GPC Services – Funded Projects

Service #	Services	Description	Charges
1	Start up	IRB, contracting, etc.	Lead site: \$6000; \$3000/performing site
2	Coordination	If CC is not the lead site	10 – 15% PM effort
3	Developing data availability query	Develop and test data availability query at <b>lead</b> site (Identify computational phenotype for data extraction); Data availability query distribution to sites	Percent efforts of tech personnel & PM
4	ICR	Infrastructure cost recovery fee	10% of total GPC direct cos
5	Executing data availability query	Execute distributed data availability query from <b>lead</b> site to identify computational phenotypes and return query result to lead site	\$1500/performing site
6	Developing data extraction query	Develop and test/Quality check data extraction query at lead site; Distribute data extraction query to all participating sites	Percent efforts of tech personnel & PM at the lead site/CC
7	Sites Data Extraction and delivery	Execute distributed data extraction query from lead site and return query result to lead site/requestor (No new data element)	Refer to slide 5 – depends on query complexity
8	Query re-run	Cohort identification for enrollment or data refresh as project needs	Refer to slide 5 – depends on query complexity
9	Analytic query with new data elements	Execute distributed data extraction query from lead site and return query result to lead site/requestor (with NEW data element)	Consult GPC
10	GROUSE	10a. De-identified CDM from all GPC sites	\$2500/site + Co-I effort + ICR
		10b. De-identified CDM from all GPC sites + CMS claims	\$5000/site + Co-I effort + ICR
11	Data Re-Use	Re-analysis of previously shared data	40% of original data cost
12	Subject matter expert		Co-I effort

# PCORnet Pricing Model (QPM, Pilot)



## Query Pricing Guide

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This guide estimates only data extraction (query) costs for projects funded by government agencies, non-profits, or foundations. Other study costs (for example: query development and beta testing, data storage, stakeholder engagement, site PI effort, participant recruitment, project management) need to be budgeted in addition to query costs.

	Query Costs <sup>1</sup>	Start-up <sup>2</sup>	Included Query Types
Simple	\$1,250 - \$2,000 per query per site	\$2,500-\$5,000	Cohort ID query, Re-identify study cohort, Aggregate Query
Moderate	\$2,500 - \$5,500 per query per site	\$7,500-\$9,000	Analytic query (Line level query), Study-Specific Data Characterization
Complex	Starting at \$12,000 per query per site; varies depending on complexity	\$7,500-\$9,000	Analytic query (Line level query) with new data elements beyond the current required CDM elements. Cost includes new data elements collected <u>and</u> query run

<sup>1</sup>Query Costs: Price range is *direct* cost per query per site. Initial query runs are more expensive than subsequent runs of the same query.

<sup>2</sup>Start-up: 1-time *direct* costs including fully executed contract and limited PI and project manager activities related to IRB routing, process management, and site query governance. These estimated costs pertain to start-up activities associated with queries but are not comprehensive of start-up activities needed for larger studies.

# GPC Pricing Components

- GPC pricing composes two parts:
  - GPC Infrastructure Cost Recovery (ICR)
  - GPC services

# Infrastructure Cost Recovery (ICR)

- Applies only to **non-PCORI funded** projects
- No ICR for query execution requests
- Charges 10% of **direct** costs of study portion using GPC resources or \$1500/GPC site + \$1500/GPC Coordinating Center (CC) (Whichever is higher)
- Non-GROUSE ICR revenue distribution:
  - 5% to lead study site
  - 95% distributed with a 3:1 split between performing sites and CC
- GROUSE ICR revenue distribution:
  - 100% distributed with a 3:1 split between performing sites and CC

# ICR Example

Assuming a one-year duration grant:  
\$500,000 direct costs in GPC resources  
(non-GROUSE)

- Total ICR:  $\$500,000 * 10\% = \$50,000$
- Lead GPC site:  $\$50,000 * 5\% = \$2,500$
- GPC performing sites (5 sites):
  - Total for all performing sites:  
 $\$50,000 * 95\% * 75\% = \$35,625$ ;
  - Per non-lead site:  $\$35,625/5 = \$7,125$
- Lead site (also a performing site):
  - $\$2,500 + \$7,125 = \$9,625$
- GPC CC:  $\$50,000 * 95\% * 25\% = \$11,875$ 
  - 20% for patient engagement:  
 $\$11,875 * 20\% = \$2,375$

# Patient Engagement

- 20% of GPC CC's ICR revenue reserved for patient engagement
- GPC Rapid Community and Engagement (Rapid PACE) session required for proposal leveraging GPC resources



# GPC Data

- Core PCORnet CDM Tables
- Additional CDM and Specialty elements/Tables
- GPC Reusable Observable Unified Study Environment (GROUSE)

# PCORnet Core CDM, Additional CDM, and Specialty Tables

PCORnet Core CDM Tables	Additional CDM and Specialty Tables
Demographic Encounter Vital Diagnosis Condition Enrollment Lab_Result_CM Prescribing Dispensing Med_Admin Procedures Death	PRO_CM OBS_GEN OBS_CLIN Death_Cause Provider Immunization Tumor Registry De-id Notes i2b2

# GROUSE

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A unique de-identified data resource, created by merging CMS claims with CDM data and i2b2 data marts (containing tumor registries) from all 14 GPC sites.

Two options to use GROUSE data:

- Option 1: site CDM data only:
  - CDM data cost is distributed to sites
- Option 2: site CDM data + CMS claim
  - Fees from site CDM distributed to sites as option 1
  - Amount above option 1 fee is for claims data (difference between options 2 and 1) and ResDAC data re-use application and will stay with MU to recover cost for sustaining the claims data infrastructure

**GROUSE Subsidy – Terms, conditions and budget** - <https://github.com/gpcnetwork/grouse-cms/wiki/Subsidy-Request-Process>

# GPC service budget example - CDM only

Services	Budget components	GPC CC	Lead site	Other Performing site	# of sites	Total in GPC
Startup	Startup		\$6,000	\$5,000	5	\$26,000
Developing data extraction query (assuming lead site)	25% tech (Salary \$120,000) + 50% PM (Salary \$100,000) (32.65% Fringe rate)		\$106,120	\$0		\$106,120
Site data extraction without new data elements.	Query execution (using medium complexity as example)		\$6,250		5	\$31,250
	<b>Total GPC Resource Direct</b>	<b>\$0</b>	<b>\$118,370</b>	<b>\$11,250</b>		<b>\$163,370</b>
	ICR (10% of total direct using GPC resources)	\$3,880	\$3,145	\$2,328	5	\$16,337
	<b>Total Direct cost</b>	<b>\$3,880</b>	<b>\$121,515</b>	<b>\$13,578</b>	<b>5</b>	<b>\$179,707</b>

# Data Re-use

- Data is only authorized for specific study use
- Data re-use require review and approval by the GPC Governance Council
- Re-use costs:
  - Currently at 40% of the original data costs for new study.
  - Reuse processing costs is \$1,000 for the lead site and \$500 for each additional site.
  - Data reuse application and fee for CMS claims is covered by requestors
  - GPC Governance Council reserves the right to assess re-use fees on an individual basis.



# GPC Support Mechanism

- GPC will provide a Letter of Support (LOS) for:
  - Studies with > \$20,000 ICR or >\$75,000 total GPC budget
- GPC may also provide:
  - A complementary LOS highlighting GPC Patient Engagement Officers (PEO) and Patient Advisory Council (PAC) reviewing of engagement components in the proposal
  - Narrative in the methods and resource sections of the proposal

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