Revised Procedures for Invoicing, Receipt of Study Payments, Routing, and Account Number Assignment for School of Medicine Commercially Sponsored Clinical Trial Agreements

In order to more efficiently track and allocate payments that are received under School of Medicine clinical trial accounts, the Center for Clinical Trials (CCT) and the Department of Financial Services (FS) have developed the following plan. The tasks included after each number are the primary responsibility of the office identified in bold letters.

Tasks and Responsibilities:

1. **(FS)** Establish a unique P.O. Box (No. 1773) that will be designated exclusively for School of Medicine commercially sponsored clinical study payments.
2. **(FS)** Identify a list of FAS numbers that will be used for new SOM clinical studies. (CCT now has this list.)
3. **(CCT)** Negotiate and execute the clinical study agreements. CCT will assign one of the FAS numbers to each study and will include this number in the study payment section of the agreement. The sponsor will be asked to include the FAS number and investigator name on the remittance advice section of each study payment.
4. **(CCT)** Return a fully executed agreement to the sponsor, along with an invoice for initial study payment, start-up costs, initial IRB fees ($1,500), and pharmacy fees. CCT will insert an invoice number (e.g., “FAS #, Inv. 1”) on the invoice and will provide a copy of the invoice to FS for follow-up in the event payment is not made within sixty days of the date of the invoice (dunning letter). (Note: CCT will prepare an IDT for transmission of the IRB fee at the time of invoice submission. IRB fees do not carry IDC, so Subcode “1345” will be used for these transfers. CCT will invoice the sponsors of studies for the annual IRB fee payment of $500 at each annual renewal.)
5. **(FS)** On a weekly basis, FS will forward a copy of all checks and correspondence that have been received in the new P.O. Box to the CCT. CCT will assist FS in determining the correct account in which to deposit the checks for which an FAS number has not been included on the remittance advice.
6. **(CCT)** Provide a copy of the check and correspondence to the P.I. and administrator for that study.
7. **(CCT)** Forward the original routing package to ORD.
8. **(CCT)** CCT will approach the sponsors of current studies and ask them to redirect future study payments to the new P.O. Box. In order to accomplish this, CCT will need a list of all current FAS numbers organized by Department/Division. CCT will need these numbers before it can approach each sponsor.

(5/4/04)
University of Maryland Baltimore  
P.O. Box 1773  
Baltimore, MD  21203-1773

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**INVOICE**

**Sponsor/CRO**

Name
(Billing Contact)

City

Phone

**Date**

Protocol No.

Investigator:

CRO/Sponsor:

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**Study Title**

Insert Study Title Here

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<table>
<thead>
<tr>
<th>Sub Code</th>
<th>Description</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0401</td>
<td>Study Activation Fee</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>0900</td>
<td>Pharmacy Initiation Fee</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>0956</td>
<td>Institutional Review Board Fee (1345)</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>0900</td>
<td>Records Retention Fee</td>
<td>$400.00</td>
</tr>
<tr>
<td>0401</td>
<td>Initial Patient Enrollment</td>
<td>-</td>
</tr>
</tbody>
</table>

**TOTAL** $6,900.00

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Make Checks Payable to: **University of Maryland Baltimore**

According to the contract terms of the Clinical Study Agreement for the above reference protocol, payment for the amount reflected above is currently due.

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Questions: 410-706-2328 or cct@som.umaryland.edu

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cc: M. Miller  
S. Dotson