



CPCA Policy on Letters of Support
UPDATED 7/15/16

Since 2013, CPCA has provided a standard letter of support to its members for federal funding applications. The standard template and policy of providing letters only to CPCA members in good standing was approved by the CPCA Board of Directors.

On July 14, 2016, a proposal to revise the narrative of the letter was brought before the 330 Committee, which made a recommendation to the Board to adopt the revised letter. The Board unanimously approved this motion on July 15, 2016. This updated policy and revised template letter were then posted to the CPCA web page that provides guidance around the letter of support process, background, and timeline.

If there are questions related to the policy or process for letters of support, please contact Jodi Samuels, Deputy Director of Development & Training, jsamuels@cpc.org. For reference and historical information, below is the original explanation of CPCA's policy.

This explanation is intended to provide background information on the California Primary Care Association (CPCA) letter of support policy for 330 applications from California.

CPCA fully supports President Bush's Initiative to double the total number of health center users by creating new and expanded health center access points to impact 1200 communities over 5 years. Prior to the Bush Initiative, for the years 1997-2000, California received substantially less 330 funding than any other state when analyzed in terms of the numbers of uninsured persons residing in the state. CPCA has and continues to advocate for the allocation of more federal dollars to California.

CPCA has adopted the policy of limiting letters of support to members of the association. CPCA verifies the history and structure of member organizations as part of our application process and maintains strong relationships with existing members.

In the letters of support provided by CPCA to our membership we note that CPCA has not conducted an independent analysis of either the clinic's operation or the health care needs of the service area, and therefore we cannot vouch for representations set forth in the grant applications. CPCA does not have the capacity to conduct this type of independent analysis. In

addition, we believe this is the role of the Objective Review Committees. However, with this caveat, our membership process and history provides a sufficient basis for supporting the applications of our membership. Because of our lack of familiarity with non-member organizations, we cannot conscientiously provide a letter of support.

All FQHC, FQHC look-alikes, non-profit rural health clinics and non-federally funded, primary care clinics licensed under California's Health and Safety Code section 1204(a) are eligible for CPCA membership. In addition, CPCA conducts extensive 330 technical assistance to all interested applicants regardless of their membership. This assistance includes a regular 330 Conferences, tele-trainings on each 330 Policy Information Notice, resource tools, and individualized support.

If you have any questions regarding this policy, please contact Elia Gallardo at egallardo@cpc.org.