



*Strengthening access to affordable  
community-based healthcare through  
advocacy, education and technical assistance.*

### **Letter of Support Protocol For 330 CHC Grant Applicants**

The Oklahoma Primary Care Association (OKPCA) is funded by Health Resources and Services Administration's (HRSA) Bureau of Primary Health Care (BPHC) to serve as the state liaison for communities wishing to pursue Section 330 CHC funding. To fulfill HRSA directives, OKPCA must review grant information before writing letters of support to reasonably ascertain if a project exhibits 330 compliance (as outlined in HRSA PIN 98-23) and to determine if OKPCA has resources to lend support to the project. While OKPCA prefers to provide preliminary objective review for the entire application, the following is requested by OKPCA before a letter of support can be considered for 330 CHC New Access Point, Expanded Medical Capacity, Service Expansion or other related grant applications:

\_\_\_\_\_ Is this project included in the statewide strategic growth activities? (*It is the applicant's responsibility to notify OKPCA of growth plans.*)

\_\_\_\_\_ Is community development documented and adequately demonstrated (evidence of coalition/town hall meetings provided)?

\_\_\_\_\_ Target Population (Defined clearly)

\_\_\_\_\_ Service Area (Defined by Counties, Census Tracts and Zip Codes; *see "OK Service Area" map*)  
Service Area Overlap or Contiguous to an Existing Grantee Service Area \_\_\_No \_\_\_Yes  
(*Follow up required for "Yes" responses*)

\_\_\_\_\_ Scope of Project – Form 5 (Parts A,B & C)

\_\_\_\_\_ Need for Assistance Worksheet – Form 9

\_\_\_\_\_ Project Description is attached and specifies the following:  
Projected Patient Numbers (at Full Operational Capacity) \_\_\_\_\_  
Projected Uninsured/Underinsured to Benefit from Proposed Service \_\_\_\_\_  
Projected Encounters (at Full Operational Capacity) \_\_\_\_\_  
Proposed Facility Floor Plans \_\_\_\_\_ Outreach Plan \_\_\_\_\_

#### **Additional Requirements for New Start Applicants:**

\_\_\_\_\_ Summary of organizational structure; primary business activity/product; brief history of existence; IRS tax status (e.g. for profit/not for profit structure, date of incorporation).

\_\_\_\_\_ Current Board Member Characteristics – Form 6

\_\_\_\_\_ Management Team (Include job descriptions/recruitment plans):  
CEO/Executive Director \_\_\_\_\_  
CFO \_\_\_\_\_  
Medical Director \_\_\_\_\_

Once the above information has been submitted to OKPCA in accordance with established policy (**ten (10) business days before letter is due**), staff will review the project to see if it meets basic 330 CHC Program Expectations in the areas listed above and increases access for a population currently without CHC services. If service area conflict is identified, the requesting applicant must refer to OKPCA *Expansion Principles* policy and follow procedures for resolution as outlined, which may take **an additional twenty (20) business days**. Recommendation to the OKPCA Executive Director to write a letter of support will be based on whether or not the applicant has met above requirements and adhered to policy. OKPCA bases its support on the information provided by the applicant and has relied in good faith that it is accurate and without fraud. The support letter process does not constitute a HRSA compliance review. Note: OKPCA has no authority to prevent any application from submitting a grant proposal. However, **OKPCA does reserve the right to withhold letters of support**. If you have questions, please call Judy Grant at (405) 424-2282, Ext. 104. Thank you.

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