

Letter of Interest

Note: Refer to current FQHC Guidance at www.bphc.hrsa.gov.

The submission of a **Letter of Interest** (LOI) is recommended but not required in order to submit an application for **FQHC** designation. It is recommended that an applicant submit a LOI to the BPHC as soon as it begins considering applying for **FQHC** designation. A copy of the LOI should be sent to the Primary Care Association (PCA). The BPHC uses the LOI process to provide feedback to the organization to improve the quality of its application and its opportunity for designation as a **FQHC**. The BPHC will provide feedback within 30 days of receipt of the LOI and the applicant should incorporate the BPHC response prior to the application.

The LOIs should be no longer than 7 pages and address the level of need in the community for additional primary care services, provide a description of the organization that will be seeking the designation and a brief description of the proposed project.

Each LOI should include a BRIEF DESCRIPTION of each of the following:

- the name and address of the organization and sites to be designated;
- the proposed target population and service area including whether (1) it is defined as urban or rural and (2) identification of any federally-designated MUA/MUP designations to be served;
- issues creating a high need for primary health services including any significant or unique barriers to care;
- a justification of the need for **FQHC** designation by documenting the lack of sufficient health care resources in the service area to meet the primary care needs of the target population. A map of the service area with the organization and sites noted, as well as all other resources in the service area, should be included;
- the level of need in the community for additional primary care services;
- the history and mission of the organization that will be seeking the designation;
- current operational capacity of the organization, providers and services; and the signed compliance checklist and relevant documents. (See Form 4).