



Healthy Communities, Healthy America Instructions for Letter of Inquiry

Introduction

One out of seven Americans is uninsured. This isn't just a statistic; it's a tragedy. It is estimated that 45 million Americans lack health coverage of any kind for an entire year. Eighty percent come from working families. Twenty percent are children. Other research shows that tens of millions more Americans go without coverage for shorter periods of time, thereby placing them at risk. Rising health care costs continue to undermine the ability of individuals, businesses, and state governments to purchase health care coverage.

The effects of having no insurance often include delayed treatment and poorer outcomes. According to an Institute of Medicine report, Americans without insurance are more likely to have poorer health and die prematurely than those with insurance. For example, men who lack health insurance are almost 50 percent more likely to be diagnosed with colon cancer at a later and more dangerous stage than men with health insurance.

In response to the growing problem of the uninsured, hundreds of communities across the country have taken it upon themselves to seek a solution—developing and supporting free clinics that bring together volunteer health care professionals and other community volunteers to offer free or low cost health care to low-income, underinsured, and uninsured people. In its 2005 report to Congress “A Review of the Free Clinics Network,” the US Department of Health and Human Services’ Health Resources and Services Administration identified over 1,718 free clinics with an estimated 8.4 million patient visits in one year.

Free clinics are private, nonprofit, community based organizations. Each is unique in that its development and services are based on the particular needs and resources of the community. They receive little, if any, government funding or support. Their operations are made possible through the donation of goods and services, local gifts, and most importantly, volunteers. Physician leadership can be crucial for success. As respected voices, physicians are able to persuade their colleagues and other professionals to consider volunteering, thereby drawing more attention to the policy debate over access and how to better cover the uninsured.

Background

As the philanthropic arm of the American Medical Association (AMA), the AMA Foundation works to advance the health care of America and the medical profession. Since 1950, the Foundation has funded medical education scholarships, research programs, and public health initiatives. With the Healthy Communities, Healthy America program, the AMA Foundation seeks to support physician-led clinics that provide free or low-cost care to the underinsured and uninsured.

While the AMA focus for the uninsured is on large-scale health policy change, the Foundation is concentrating its efforts to improve access to health care through support of free clinics that demonstrate excellence in providing direct medical services, physician volunteerism, resourcefulness, and leveraging abilities. Objectives of the Healthy Communities, Healthy America program are to:

- Increase access to care by providing quality, affordable healthcare to the uninsured
- Place doctors at the forefront of the uninsured health care crisis in their communities;
- Impact the level of service and care provided at free clinics;
- Spread physician altruism; and



- Create successful models that can be emulated around the country.

Free clinics are a valuable safety net for the uninsured. The Foundation recognizes that free clinics may not solve the national problem of health care coverage, but can make an important and immediate impact in the short term.

Grant amounts and timelines

A Letter of Inquiry is the first step in the grant process. Its purpose is to help us determine which organizations will have the greatest opportunity for successful implementation. Submission of a Letter of Inquiry also saves potential grantees the time and effort required to complete a full proposal until they are encouraged to do so.

In 2008, the Foundation plans to award up to 20 grants of \$10,000-\$25,000. The deadline for receipt of Letters of Inquiry is **January 14, 2008**. In mid-March, applicants will either be invited or declined to submit a full proposal for review. Those invited will have the opportunity to more fully develop their proposed workplan, timeline, budget, and evaluation. Instructions for the full proposal and required attachments will be provided. The deadline for receipt of full proposals is April 21, 2008. Grant recipients will be announced in early-July 2008. The grant period and project duration is up to one year from the date of the grant check.

Eligibility criteria

Grants will be awarded to free clinics that:

- are requesting funds for specific projects, not for activities such as routine operations, maintenance, or facility repairs;
- have regular and considerable operating hours (e.g. clinics that are open for more than just one day/week);
- have significant physician involvement (e.g. clinic was established by a physician, a physician serves as medical director or head administrator, or there are a substantial number of physician volunteers); and
- provide medical services. (Note: clinics that provide both medical and dental services, but are requesting funds for a project that is dental care-specific will not be considered.)

Preference will be given to applicants who demonstrate how grant dollars will be leveraged to provide the greatest amount of care.

Federally qualified health centers, and referral networks that coordinate care but do not provide direct care themselves (e.g. Project Access programs), are ineligible to apply. Past Healthy Communities, Healthy America grant recipients are ineligible to apply for this 2008 program. No grants to individuals; fundraising activities of any sort including endowment or other campaigns and grant preparation; debt reduction, deficits, or previous obligations; political projects or lobbying; or religious activities.

Instructions

The Letter of Inquiry should not exceed **four** pages. It should include all of the following information:

Introduction – Organization name, contact information*, and the grant amount that you are requesting.

Organization Description – History, mission, hours of operation, target population, and geographic focus.

Statement of Need – Include appropriate statistical data and concrete examples if necessary.



Project Description & Methodology – Describe the specific project for which you are requesting funds, why it is of interest, and how physicians will be involved. Detail the project’s goals, timeline with workplan, key project staff, and an evaluation plan outlining how progress and outcomes will be tracked and reported.

Capacity – Brief statement of reasoning and the organization’s capacity to take on this new project.

Budget – List proposed expenses for the project (should equal the grant amount that you are requesting).

Other Funding Sources – List any other current or prospective funding sources for the project.

Letters of Inquiry are due in the Foundation office on January 14, 2008. We will accept letters submitted via mail or e-mail. Please choose only one of these methods and do not submit multiple copies.

1) *Via mail:* We recommend you use a courier service such as FedEx, UPS, or DHL, rather than USPS First Class, to better ensure a timely arrival. Mail an unstapled copy to: AMA Foundation, Attn: Healthy Communities, Healthy America, 515 North State Street, Chicago, Illinois 60610

2) *Via e-mail:* Attach the letter as a Word document or PDF in an e-mail to jessica.kewin@ama-assn.org

* If you would like a notification of receipt of your Letter of Inquiry, please also provide an e-mail address.

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