



\*E000557\*



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
HEALTH RESOURCES ADMINISTRATION  
ROCKVILLE, MARYLAND 20852

BUREAU OF HEALTH RESOURCES DEVELOPMENT

May 5, 1975

Marilyn Doyle  
Program Coordinator  
Arthritis Total Care Project  
Vanderbilt University  
1100 Baker Building,  
210 21st Avenue, South  
Nashville, Tennessee 37203

Dear Ms. Boyle:

This is in response to your letter to Mr. Matthew Spear on April 28, inquiring about the process of RMP transfers to support arthritis patient education planning and development workshops. We believe that the billing process proposed in the letter from the Western Pennsylvania RMP, which you also enclosed, is an appropriate method for these funds transfers. You must assure that suitable funds receipt, holding, disbursement, and accounting practices are followed.

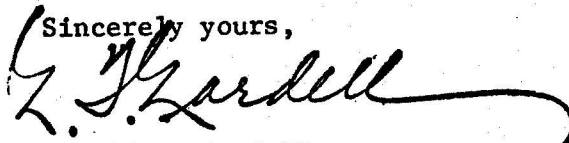
Any transfer process which is acceptable to the contributing RMP can be followed. The problems surrounding voluntary coordinated funding by the 29 RMP's arise from their individual funds accounting processes, and the conditions which were imposed on approved arthritis activities. Strict conditions were placed on substantive activities because of the nature of the authority under which the earmarked funds were provided, the limited amount of funds, and the short support period in which programs could develop. However, the associated responsibilities of arthritis program coordination, assessment, and overall management were only generally addressed. This was because it was recognized that the Division of Regional Medical Programs was not in a position to support a strong lead role in such activities. The performance of such work devolved more fully on the RMP's individually, and collectively than might otherwise be the case.

It was in recognition of these circumstances that the National Advisory Council, in June 1974, agreed that unspecified coordination and followup activities should be pursued in connection with the pilot arthritis program. The Kansas City conference in January 1975 has lent specificity to the activities which should be pursued. It is left to each participating RMP, however, to determine its interest, and financial capability with respect to arthritis grant program coordinative activities. The specific

process of funds transfers to your proposed endeavors will be subject, given an affirmative response to these considerations, to the availability of funds which may have become available from within arthritis projects, from central RMP program management activities, or from other funds accessible to the RMP.

We hope that these comments will be helpful in resolving questions raised by the RMP's with which you are negotiating. Please contact us again if you need further information.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "G. T. Gardell", with a long, sweeping flourish extending to the right.

Gerald T. Gardell  
Acting Director, Division of Regional  
Medical Programs