[Date]

Mr. John Czajkowski

Executive Steering Committee Chair

CMS Alliance to Modernize Healthcare (Health)

Federally Funded Research and Development Center (FFRDC) Program Office

U.S. Department of Health & Human Services

Centers for Medicare & Medicaid Services

7500 Security Boulevard

Baltimore, MD 21244-1850

Subject: [Title of Work to be Performed]

Reference: Health FFRDC / MITRE Sponsoring Agreement and Contract No. 75FCMC23D0004

Dear Mr. Czajkowski:

[Agency name] respectfully requests your consent for the CMS Alliance to Modernize Healthcare (Health) Federally Funded Research and Development Center (FFRDC), operated by The MITRE Corporation, to provide support to [agency name] in executing a project to [brief overview of project and purpose.].

**Resource Requirement**: The expected resource requirement is listed in the Independent Government Cost Estimate (IGCE). The attached Contract Use Request Form (CURF) package should assist CMS in determining that no adverse impact on the Health FFRDC’s ability to support the Sponsor will occur because of using Health FFRDC resources on this effort.

**Other FAR Requirements:** The expected requirement is in compliance with FAR 35.017-3, FAR 17.503(e) and FAR 6.302. As such, [agency name] shall post a Justification and Approval (J&A) in accordance with FAR 6.302 upon approval of this Health FFRDC non-sponsor request. Additionally, attached is the necessary documentation that the requested work would not place the FFRDC in direct competition with domestic private industry.

**Cost:** The attached IGCE should assist CMS in determining that this work will not increase the cost to the Sponsor.

**CMS/HHS Benefit**: The proposed effort will benefit CMS/HHS by [specifically explain how this project benefits CMS/HHS—e.g., contributing to patient safety].

We have submitted a CURF package, which will aid CMS in determining that this work is:

* In the best interest of the Federal Government
* Consistent with the Health FFRDC mission, purpose, and scope
* Not otherwise available or cannot be performed as effectively by in-house or private sector resources
* Consistent with the goals of the Sponsor

Thank you for your consideration of this request. Should you require any additional information or clarification, please do not hesitate to contact me at [email address] and/or [telephone number].

Sincerely,

[Name]

[Title]

[Agency]

Enclosures:

* CURF
* IGCE
* Statement of Work
* J&A