LETTER OF INTEREST

[Agency Letterhead]

[Date]

Mario J. Pérez, Director

County of Los Angeles

Department of Public Health

Division of HIV and STD Programs

600 South Commonwealth, 10th Floor

Los Angeles, CA 90005

**RE: INTEREST IN PROVIDING TEMPORARY MEDICAL CARE COORDINATION SERVICES IN COLLABORATION WITH THE COUNTY OF LOS ANGELES**

Dear Mr. Pérez:

This letter serves as [Agency Name] interest/intent to explore a temporary agreement with the County of Los Angeles Department of Public Health, Division of HIV and STD Programs (DHSP) for the provision of Medical Care Coordination (MCC) Services. We understand that MCC is a multi-disciplinary team approach that integrates medical and non-medical case management services by coordinating behavioral interventions and support services with medical care to promote improved health outcomes.

We recognize that this Letter of Interest is not a final endorsement or verification of temporary contracted services between my organization and the County. This letter serves as our interest and intent to further explore opportunities with DHSP.

I am an authorized officer of [Agency Name] and have the authority to act on behalf of my organization to enter into service agreements.

Sincerely,

[Name]

[Title]

c: [Name(s)]