Instructions for Evidence of Funding

This document: Please use this funding letter template when 1) the request is internally funded by the requesting organization OR 2) the requesting organization has no award letter or similar documentation from the external funding organization OR...

3) If federal funds have been awarded to the requesting organization but they are for general use at the organization’s discretion (i.e. the award is not specific to the PI and study title for your data use request, no Federal Project Officer assigned to your study), then the request is considered internally funded.

Please submit an unsigned draft as a Word file. ResDAC will notify you when it is time to format the final document to letterhead and obtain a handwritten signature.

Requesting Organization Letterhead (applies to final, signed document only)

[Enter Date]

Director, Division of Data & Information Dissemination
Data Development & Services Group, OEDA
Centers for Medicare and Medicaid Services (CMS)

RE: EVIDENCE OF FUNDING

Dear Division Director:

This is a letter to provide evidence of funding for [Insert requesting organization]’s request to purchase CMS data files on behalf of [Insert PI's name] for a research study entitled “[Insert study title].” I attest that sufficient funds are available to pay for these data from [Insert start date] to [Insert end date] for $[Insert funding amount].

Thank you in advance for your attention to this data request. If you have any questions I can be reached by e-mail at [Insert e-mail address] or by phone at [Insert phone number].

Sincerely,

[SUBMIT DRAFT ONLY – DO NOT SIGN UNTIL ADVISED BY RESDAC]
Typed name of organization representative
Formal title and Department name

*The signatory of this letter must be someone who can verify there are sufficient funds available to cover the cost of the data requested. For example, a college dean, a department chair, a financial administrator, etc. The signatory cannot be the Principal Investigator, DUA User, or DUA Custodian.
Instructions for No Cost Evidence of Funding

This document: Please use this template if a “No Fee Cost Invoice” is prepared by ResDAC for your data use request. The purpose of this letter is to verify for CMS that the requesting organization has sufficient funding available for the research project as a whole though there are no applicable fees specific to the use of CMS data.

Please submit an unsigned draft as a Word file. ResDAC will notify you when it is time to format the final document to letterhead and obtain a handwritten signature.

Requesting Organization Letterhead (applies to final, signed document only)

[Enter Date]

Director, Division of Data & Information Dissemination
Data Development & Services Group, OEDA
Centers for Medicare and Medicaid Services (CMS)

RE: NO COST EVIDENCE OF FUNDING

Dear Division Director:

This is a letter to provide evidence of support for our request to purchase CMS data files on behalf of [Insert PI's name] for a research study entitled “[Insert study title].” Although there is no charge for the data, I attest that there are sufficient internal funds available to support this research study in its entirety.

Thank you in advance for your attention to this data request. If you have any questions I can be reached by e-mail at [Insert e-mail address] or by phone at [Insert phone number].

Sincerely,

Typed name of organization representative

Formal title and Department name

※The signatory of this letter must be someone who can verify there are sufficient funds available to cover the cost of the data requested. For example, a college dean, a department chair, a financial administrator, etc. The signatory cannot be the Principal Investigator, DUA User, or DUA Custodian.
Instructions for Evidence of Dissertation

This document: Please use this template if you are a graduate student requesting reuse data for your dissertation project or other graduate research. The reuse fee is waived for dissertation reuse. In addition to the “No Fee Cost Invoice” prepared by ResDAC, this letter will be submitted to CMS in lieu of the “Evidence of Funding” documentation required for standard RIF requests. If you are requesting new data or new and reuse data, then regular charges for new data apply and this letter is required in addition to evidence of funding documentation and the final Cost Invoice.

The purpose of this “Evidence of Dissertation” letter is to verify your standing as a graduate student at the requesting academic institution as well as your faculty advisor’s support of the project.

As a graduate student you can serve as Principal Investigator and/or DUA Custodian, however you are not eligible to serve as DUA Requestor/User.

Please submit an unsigned draft letter as a Word file. ResDAC will notify you when it is time to format the final document to letterhead and obtain a handwritten signature.

______________________________________________________________________________

Requesting Organization Letterhead (applies to final, signed document only)

[Enter Date]

Director, Division of Data & Information Dissemination
Data Development & Services Group, OEDA
Centers for Medicare and Medicaid Services (CMS)

RE: EVIDENCE OF DISSERTATION SUPPORT

Dear Division Director:

This is a letter to provide evidence of dissertation support for our request to obtain CMS data files on behalf of [Insert student’s name] for a research study entitled “[Insert study title].” I attest that [Insert student’s name] is a graduate student at [Insert name of academic institution] and I am [his/her] Faculty Advisor.

Thank you in advance for your attention to this data request. If you have any questions I can be reached by e-mail at [Insert e-mail address] or by phone at [Insert phone number].

Sincerely,

[SUBMIT DRAFT ONLY – DO NOT SIGN UNTIL ADVISED BY RESDAC]
Typed name of Faculty Advisor
Formal title and
Department name