

**Children's Health Initiative  
Request For Proposals:  
Community Based Outreach, Enrollment and Retention**

**I. BACKGROUND**

Nearly *[insert number]* percent of the children in *[insert county name]* County, about *[insert number]* kids between the ages of 0-18, lack access to continuous health insurance. The *[insert county name]* County Children's Health Initiative (CHI) Coalition is committed to changing this situation by providing health insurance to all *[insert county name]* County children living in families with incomes below *[insert percent of poverty level]* % of the Federal Poverty Level. Starting *[insert date]*, CHI will implement a program that links approximately *[insert number]* previously uninsured children to the existing Medi-Cal and Healthy Families programs and covers approximately *[insert number]* children through the new Healthy Kids, a new health insurance program to cover children in families who earn below *[insert percent of poverty level]* percent of the federal poverty level and are not eligible for the Medi-Cal and Healthy Families. Healthy Kids will offer a comprehensive benefits package, which mirrors the Healthy Families program.

An integral component of the Children's Health Initiative will be outreach, enrollment and retention activities that increase access, assistance and the one-on-one trust needed to reach parents of uninsured children.

**II. SCOPE OF SERVICE**

Health Services Agency seeks to fund Community Based Organizations through a competitive RFP process. It will give \$*[insert amount]* for one year to *[insert number]* CBOs targeting outreach, enrollment and retention activities to reach children and families who are eligible but not enrolled in health coverage and reside in targeted areas for *[insert county name]* County. The awards will be for a maximum of \$*[insert amount]*. Qualified applicants interested in submitting an application are to develop an application specific to outreach activities outlined in Section III of this RFP.

The organization must dedicate staff time to enroll eligible families in Medi-Cal, Healthy Families and Healthy Kids.

**Community Base Organization Background and Requirements.**

As part of the Children's Health Initiative grant, the funded community-based collaborator will play a lead role in mobilizing support and raising community awareness on the need for health care, working with community agencies, community institutions (e.g., schools and churches), businesses, and civic organizations. The CBOs will partner with Health Services Agency and Human Services Agency eligibility staff to distribute general health and MC/HF/HK information at community sites throughout the County and enroll eligible families in Medi-Cal, Healthy Families and Healthy Kids. The CBO will also assist in planning and organizing mass health enrollment events throughout the County.

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**III. CRITERIA FOR EVALUATION OF PROPOSALS**

The organizations will be selected on a competitive basis. Applications will be evaluated based on all of the following:

1. Capacity to reach target populations within specified geographic areas.
2. Organizational capacity and experience, including, but not limited to, any of the following:
  - a) Organizational experience in serving low-income families.
  - b) Ability to identify and work effectively with populations that have low enrollment rates.
  - c) Organizational experiences in helping families learn about, and enroll in health security programs, such as Medi-Cal and Healthy Families.
  - d) Organization's ability to integrate with other initiatives that target employment and supportive services for targeted population
3. Functionality of the outreach plan, including, but not limited to, all of the following:
  - a) Culturally and linguistically appropriate outreach and education strategies.
  - b) Strategies to identify and address barriers to enrollment, such as transportation limitations and community perceptions regarding government sponsored health insurance programs.
  - c) Coordination with other outreach efforts in the community.
  - d) Collaboration with other local organizations that serve families of eligible children.
  - e) Cost effectiveness and efficiency of the proposed plan.
4. Strategies to ensure that children and families retain coverage and are informed of available options for health coverage and services when they lose eligibility for a particular program, including but not limited to the following:
  - a) Confirmation that enrollment into the appropriate program occurred.
  - b) Educating families about the availability of medical, dental, and vision coverage thorough HF/MC/HK.
  - c) Providing assistance during the annual eligibility review for retention of eligibility.
5. Strength of efforts to identify and enroll the hardest to reach families such as families who:
  - a) Have not received health insurance information;
  - b) Do not apply for government-sponsored healthcare coverage because of:
    - a. Stigma associated with receiving public aid; and/or

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- b. Fear that immigration status will be jeopardized if they enroll in government-sponsored coverage.

**IV. PROPOSAL INFORMATION REQUESTED**

Please complete the attached application form and questions including a scope of work, line item budget and budget narrative.

**V. SPECIAL INSTRUCTIONS**

1. Proposal must be signed by an authorized representative.
2. Proposal must be received no later than [*insert time*] p.m., on or before [*insert date*]. Submit proposals to:

Name:

Address:

3. Late proposals will not be accepted. The county may choose not to award a contract based on proposals received. Submitted proposals will be evaluated on the basis of the program features, functionality of the proposed program, vendor ability, and program costs.
4. The County's standard agreement form will be used in the event a contract is awarded. Evidence of current insurance and worker's compensation certificates and other County requirements will be required. Awarding of contracts is contingent upon available funding.

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**RFP Application**

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code \_\_\_\_\_

Organization's Executive Director/President: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Ext: \_\_\_\_\_ Fax ( ) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name and Title: \_\_\_\_\_

**QUESTIONS:**

Please attach typed answers to the following questions. The narrative portion of your application may not exceed 6 double spaced pages (this does not include the budget, or charts).

- Please briefly describe your organization, including its purpose, history, size, strengths, customers and geographic area(s) served. Also, include how health insurance outreach and enrollment fits into your mission and the activities you have performed in this area to date.
- Describe in detail your strategy for providing outreach and re-enrollment to Healthy Families and Medi-Cal and Healthy Kids eligible children and families. Please include how you will accomplish the tasks and activities, including who will implement the activities and expected outcomes.
- Summarize the main outcomes expected of the proposed interventions, especially the estimated number of uninsured children and adults who would become enrolled in Healthy Families, Medi-Cal and Healthy Kids due to these interventions.
- Please attach a proposed line item budget with accompanying budget narrative.

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**Scope of Work Chart**

**Lead Agency Name:** \_\_\_\_\_

**Goal:**  
To ensure that all eligible children in [insert county name] County have healthcare coverage through the Medi-Cal, Healthy Families and Healthy Kids Program.

**Measurable Objective:** \_\_\_\_\_

<b>Strategies</b>	<b>Key Activities</b>	<b>Timeline</b>	<b>Responsible Staff</b>	<b>Success Measure</b>