Request for Proposals:
Medi-Cal Facts and Figures

Opportunity announced	August 5, 2022
Proposals due	September 2, 2022
Grant recipient announced	September/October 2022
Project begins	October 2022
Project ends	September 2023
Award amount	TBD

Summary

The California Health Care Foundation (CHCF) is an independent philanthropy dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those who needs are not well served by the status quo. We work to ensure that people have access to the care they need, when they need it, at a price they can afford. For more information, visit www.chcf.org.

The California Health Care Foundation is seeking to identify a grantee or grantees to update our *Medi-Cal Facts and Figures* report, which provides an overview of the Medi-Cal program, including enrollment, benefits, spending, access, and quality.

Background

The California Health Care Almanac was created to support thoughtful planning and effective decisionmaking. The Almanac is a comprehensive online clearinghouse for data and analysis examining the state's health care system. It provides objective information on health care costs, quality, coverage, and the delivery system. (https://www.chcf.org/resource/california-health-care-almanac/)

Medi-Cal is the largest Medicaid program in the country, providing health insurance for Californians with low incomes. In December 2021, 14 million Californians — about one in three — were enrolled in Medi-Cal. A majority (66%) were people of color, and 36% reported a language other than English as their primary language. Medi-Cal pays for essential primary, specialty, acute, and behavioral health, and long-term care services.

The Medi-Cal program is undergoing significant changes and faces numerous challenges. Medi-Cal must address the needs and costs of an aging population and implement strategies to address disparities in access, quality, and outcomes for enrollees of color.

Project Description

Medi-Cal Facts and Figures will present findings about the Medi-Cal program and should include the following topics. Grantee should anticipate using publicly available data and leverage existing processes and relationships with the California Department of Health Care Services (DHCS) to request additional data.

- **Overview.** Analysis of the Medi-Cal program, including historical milestones, governance, and funding.

- **Eligibility and enrollment.** Analysis of eligibility requirements, groups, and enrollment.

- **Benefits and cost sharing.** Provide information on benefits offered, premiums and cost sharing, and waivers.

- **Delivery systems.** Review and analysis of Medi-Cal's managed care and fee for-service systems, including a comparison of the two systems, enrollment, and detail on services offered.

- **Spending.** Analysis of spending by service category and per enrollee.

- **Access and utilization.** Review and analysis of access to care measures compared to other types of insurance.

- **Quality.** Provide quality measures data for the program.

- **Major initiatives.** Provide an overview of key Medi-Cal initiatives underway and planned, including CalAIM (California Advancing and Innovating Medi-Cal), incorporating goals and progress to date, managed care procurement, and major initiatives to reduce disparities in access, quality, and outcomes.

- **Challenges.** Identify and briefly discuss the biggest challenges facing the program over the next 5–10 years.

Where data allow, a comparison of California data to national averages, and regional and demographic differences within California, should be explored. In addition, the publication should include a review of major developments affecting the Medi-Cal program.

The contractor selected under this RFP will be required to research and develop an Almanac report. The report is intended to be data intensive and should be weighted toward charts, tables, and graphics. (Please see the appendix for a sample template of the CHCF Almanac format.) The

final report shall be completely and correctly annotated. All fact-checking of data shall be the responsibility of the contractor. CHCF will oversee the production and dissemination of final research and any resulting publicity. The contractor should anticipate several rounds of feedback from the project officer and CHCF's editor and designer; this feedback will depend on the completeness, accuracy, and quality of the work product submitted to CHCF. Please see CHCF's *Almanac Style Sheet* for more information on the foundation's publication guidelines. A copy of the template used to prepare the previous report will be provided.

The intended audience for the report includes California policymakers, leaders of health care provider organizations, and the media.

Proposed Timeline

Activity	Timeline
Grantee selected and contract signed	October 2022
First draft of report in Excel submitted	March 2023
Second draft of report submitted	June 2023
Final report published	August/September 2023

*Respondents may propose alternative deadlines to enable use of difficult-to-access data sources.

Proposal Packet

Applicants should email an electronic proposal of *no more than six pages*, double-spaced, in a 12-point font. Proposals should include the following:

1. Project cover sheet, available at www.chcf.org/grantinfo/solicited. This does not count toward the six-page limit.

2. Proposal narrative. The proposal narrative should be *no more than six pages*, double-spaced, in a 12-point font and should include a brief description of the Medi-Cal program and significant challenges and opportunities faced by the program, providers, and enrollees.

3. Description of potential topics to be included in the report, and an outline of how the topics will be organized.

4. Description of the data sources to be used for the report, including prior experience with these data sources and whether they are publicly available or will need to be requested from DHCS.

5. Preliminary list of analyses to be completed for this project, including where national, regional, and other comparisons will be made.

6. A project work plan and timeline, including a list of anticipated project deliverables and milestones with planned completion dates or date ranges. Please explain any deviations from the proposed deadlines for draft and final reports.

7. Qualifications of the organization and project staff, including prior experience conducting health care–related research projects and data analysis and success in obtaining custom data from DHCS.

8. A detailed budget for the project. The budget form, which is not included in the six-page limit, is available at www.chcf.org/grantinfo/solicited.

All proposals should be emailed in one PDF file to Robbin Gaines (AlmanacRFP@chcf.org) by **5 PM (PT) on September 2, 2022**. Proposals will be acknowledged by a return email within 24 hours of receipt.

For More Information

Questions may be emailed to Robbin Gaines at AlmanacRFP@chcf.org by August 25, 2022 at 5 PM (PT). Questions received after this time cannot be guaranteed a response.

Please share this RFP with others who might be interested.

Appendix: Sample Template of Almanac Report

The selected grantee will prepare the draft and final reports using the template provided by the California Health Care Foundation.