



Abortion Uncompensated Care Grant Request for Proposals

Thank you for your interest in the Uncompensated Care Grant Program! We are looking forward to learning more about your organization's work to support and expand abortion services in California.

Please submit the requested application information and documentation by **May 17, 2024 at 11:59pm** Pacific Time. All questions are mandatory except the optional submission of supplemental materials.

Application information will be saved automatically and registered users may return to complete the application in multiple stages. Support with using the Apply platform may be found in this [FAQ](#) document.

Questions about the grant program may be sent to: CAReproHealthEquity@essentialaccess.org

Organization and Contact Information

- What is the name of the applicant organization?
- What is the website of the applicant organization?
- What is the physical address of the applicant organization?
- What is your name and job title?
- What is your email address?
- What is your phone number?
- What is the name, title, and email contact of the programmatic/project lead? (If different from your own)
- Who in your organization is authorized to sign contracts? (If someone other than yourself)
Please include name and title
- What is your organization's grants and/or contracts manager email address? (If different from your own)
- What is the name of the organization as it should appear on a legal contract?
- Please share your organization's social media accounts

Organizational Background



- Please tell us about your organization’s history, mission and structure (5000 character limit)
- What is your organization’s current annual budget?
- Please describe your organization’s experience providing high quality abortion and contraceptive services (5000 character limit)
- Please describe your organization’s commitment to and experience advancing health equity and reducing health disparities (5000 character limit)
- Please describe your organization’s demonstrated experience delivering high quality sexual and reproductive health and its commitment to abortion and reproductive health access, rights, and justice (500 character limit)
- Please describe your organization’s demonstrated commitment to cultural, racial, and SOGI (sexual orientation and gender identity) inclusivity (5000 character limit)
- Please describe your organization’s patient population and communities served (500 character limit)
- Please describe your organization’s capacity to collect and report service and demographic data (500 character limit)
Please specify your current data collection practices and describe your capacity to collect and track additional service-level data, specifically your ability to track grant-funded services.
- Please describe your organization’s capacity to make rapid and efficient use of funds.

Grant Program Budget – Projected Uncompensated Care Funding

Funding Period: Estimates of anticipated costs of uncompensated abortion and contraceptive services the applicant expects to provide to eligible patients for the period of July 1, 2024 – June 30, 2025.

Budget Calculations: Applicants should indicate the number and types of services it expects to provide during the funding period based on prior average monthly uncompensated costs and the Medi-Cal rate(s) for each specific service for which reimbursement is being requested.

Grantees may include indirect costs (up to 10% of total budget request) in their budget request. This is incorporated into the Budget Template worksheet, on the ‘contraception’ tab.

Payments: Payments for projected expenses will be split into two disbursements, with 50% of payment distributed on June 30, 2024. The second payment will be released in mid-January 2025. The amount of the second payment may be adjusted based on spend-down activity and



financial reports submitted.

Please submit your budget request information below.

Proposals may not be funded to the maximum amount requested. Additional requests for proposals will be released on an annual basis until allocated funding is depleted.

How much Projected Uncompensated Care funding are you requesting?

Please submit requested budget information and calculations for Projected Uncompensated Care Funds.

Please download, complete and upload the budget worksheet below. (Right click to download and save to your computer.)

[Projected Uncompensated Care Budget Worksheet](#)

Please refer to the [Uncompensated Care Grant Budget Worksheet Guide](#) for guidance on cost calculations.

Estimate the expected costs of uncompensated abortion and contraceptive services the applicant expects to provide to eligible patients from July 1, 2024-June 30, 2025 based on the amount the provider would expect to receive for providing these services to a patient enrolled in the Medi-Cal program. Budget projections should be based on actual uncompensated care provided in 2022-2023 and 2023-2024, along with anticipated shifts that may occur over the coming year.

Additional Information and Timelines

Supplemental Materials (Optional)

Please share any reports, media placements, videos, client stories, testimonials or other materials that will help us get to know your organization and the work you do.

Funding Decisions

Funding decisions and resources will be prioritized based on the following criteria:

Ability to advance health equity and reduce disparities.	Demonstrated experience in delivering abortion and contraceptive services.
Commitment to abortion and reproductive health access, rights and justice.	Populations and communities served.
Commitment to cultural, racial and SOGI (sexual orientation and gender identity) inclusivity.	Quality of grant narrative.
The extent to which abortion and	Capacity to collect and report



contraceptive services are needed locally.	demographic and service data.
Current or projected increase in demand for abortion and contraceptive services.	Capacity to make rapid and efficient use of funds.
The relative need of the applicant.	Total amount of funds requested in response to current RFP.

Reporting Requirements

Essential Access is obligated by statute to submit annual reports to the California Department of Health Care Access and Information (HCAI) that reflect the scope and impact of the funding, and funding expenditures. HCAI is required to submit a report to the legislature that will be published and become part of the public record.

Organizations that receive grant awards will be required to submit biannual program and financial reports. Essential Access will provide templates for financial and project reporting, along with opportunities to share stories describing project impact through videos and/or written testimonials. Technical assistance may also be provided as needed to support data collection and reporting capacity.

In addition to financial reporting, all grantees must be prepared to make 10 hours of staff time available per 12-month project period to participate in Essential Access-led grantee meetings, interviews, program evaluation efforts and other fact-finding activities to share information and gather qualitative data about successes and challenges encountered throughout the project period.

All grantees must be prepared to submit reports according to the schedule below.

First Disbursement	June 30, 2024
Interim Report Due	November 30, 2024
Second disbursement	January 2025
Final Report Due	July 31, 2025

Program Timeline

4/08/2024	RFP release
4/17/2024	Informational webinar 11am Pacific Time REGISTER HERE
4/24/2024	5pm Pacific deadline to submit RFP questions to CAReproHealthEquity@essentialaccess.org



4/29/2024	Application FAQs posted to Essential Access website
5/17/2024	Applications close - 11:59pm Pacific
6/17/2024	Award notifications released
6/30/2024	Funding released
7/01/2024	Project start date

Questions about the RFP may be submitted to:

CAReproHealthEquity@essentialaccess.org by 5pm Pacific Time on April 24, 2024. We will respond to questions by email as they are submitted. An application FAQ will be posted on the [Essential Access Health](#) website on April 29, 2024.

This application automatically and continuously saves information that has been entered. When clicking "Save and Continue Editing" below, you may see an error message indicating that questions remain unanswered. This may also appear if all questions have been answered, but you have not uploaded the required budget worksheet(s).

The next time you log in to your application, you will be able to continue adding answers and/or editing answers you have already entered.

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