

RFP 2025-07 Media Spend Analysis (Marketing)

Questions and Answers

#	Proposer Questions:	Covered California's Responses:
1	What is the #1 brand health metric you want to move the needle on? And, are there differences by segment or DMA?	<p>#1 brand health metric: At a high level, we are focused on strengthening upper funnel brand health—particularly awareness and familiarity—because they power lower funnel outcomes like consideration and future use of Covered California. Within that, our #1 outcome is growing consideration/future use among non-users and uninsured Californians. We track a set of “drivers of fandom,” including whether Covered California is a brand people trust, whether they see themselves in us and feel represented, whether we show up as caring about their communities, and whether our coverage feels relevant and attainable in their day today lives.</p> <p>Preliminary Brand Health Tracker results call out differences by segment and DMA: Brand health and funnel metrics (awareness, familiarity, usage, consideration, trust, affinity) vary meaningfully by audience. Younger adults (24–34) and those at 0–138% FPL are more likely to be uninsured and least familiar/engaged, often citing lack of knowledge. Spanish dominant Californians are less insured but more likely to be current users, with lower familiarity and more concerns about cost, ease of use, and data privacy, yet they respond strongly to in language support and media. Asian language dominant consumers are more aware but not more likely to use us, in part because many are already insured elsewhere and face language/UX/privacy barriers. By race/ethnicity and LGBTQIA status, we see distinct patterns in awareness, usage, and perceptions, with LGBTQIA respondents generally more familiar and positive on access and equality but still facing cost and information gaps. Regionally, the Los Angeles DMA lags on awareness and usage and shows more confusion between Covered California and health insurers/providers, while San Diego and Fresno</p>

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		are more negative overall and more likely to cite lack of knowledge. NorCal tends to be more familiar and more likely to be users, whereas SoCal often holds slightly more favorable perceptions but more role confusion. Our Brand Health Tracker and Advertising Measurement Framework are built to read these differences by segment and DMA and tie them directly to media strategy.
2	What is the hierarchy of priority among your strategic objectives: Drive Enrollment, Increase Retention, or Improve Brand Health	<p>The RFP asks proposers to evaluate and recommend media investments across acquisition, brand, and retention, so all three must be addressed, with enrollment and retention outcomes anchored in strong brand health.</p> <p>Priority 1: Decrease the uninsured rate in California by driving enrollment (acquisition / plan selections) – aligned with the organization's mission to increase the number of insured Californians and support enrollment through Open Enrollment (OE) and Special Enrollment (SE).</p> <p>Priority 2: Increase retention (renewals, continued coverage) – retention campaigns and the updated Marketing Mix Modeling (MMM) explicitly separate acquisition vs. retention and seek to understand and optimize media's role in keeping members covered. Retention has become a key imperative for Covered California, especially given the federal policy changes making it harder for members to renew. Marketing is especially focused on the retention journey and how our efforts can enhance the welcome experience, increase member utilization, and drive renewals.</p> <p>Foundational enabler: Improve brand health (awareness, understanding, trust, consideration) – brand building is now an explicit, ongoing objective, not just a halo effect; it underpins both acquisition and retention,</p>

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		especially given current trust and affordability headwinds.
3	Were there significant changes in media strategy from '24-'25, and are there any significant changes planned for '26 or looking ahead to '27	<p>Yes, Covered California shifted from a lower funnel-only focus (account creations, plan selections, cost per enrollment) toward a full funnel strategy that deliberately includes brand building and retention, with KPIs across awareness, understanding, and trust as well as conversions. Marketing has evolved its campaign approach to move from transactional (with emphasis on acquisition) to also longer-term trust-building (e.g., brand building, promoting utilization, customer satisfaction, and driving retention.)</p> <p>For the 2026 coverage year, Covered California plans to spend ~46% of paid media budget on multicultural audiences, with explicit investments in Spanish language, Asian language, Black/African American, and LGBTQ+ media and creative.</p> <p>Looking ahead to '26 and '27, Covered California will face significant headwinds, including a shortened six-week Open Enrollment (OE) period, the removal of auto-renewals, the loss of enhanced subsidies, and rising premiums that force consumers into difficult financial decisions. In this environment, our media buying and measurement stack will be more critical than ever to quickly identify which messages and channels best move people into a proactive mindset—prompting them to shop, compare, and enroll with confidence in a compressed window. Our focus must be on clearly communicating the value of coverage—protecting families from unexpected medical bills, supporting ongoing care, and reinforcing the importance of staying insured despite cost pressures.</p>
4	What media channels does Covered California currently use, and what is the budget percent allocation per	<p>Covered California's paid media channels include:</p> <ul style="list-style-type: none"> • Offline / linear: TV, Radio, Print, Out of Home (OOH)

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	channel? How does this breakdown across brand, engagement, and conversion? What is the budget breakdown per general versus niche audiences (i.e., Hispanic, Chinese, LGBTQ+, etc.)?	<ul style="list-style-type: none"> • Digital & streaming: <ul style="list-style-type: none"> ◦ CTV/OTT ◦ Digital Video (online video pre-roll, etc.) ◦ Display (Native, Standard, Interactive) ◦ Paid Social ◦ Influencer Marketing ◦ Search (Paid Search) ◦ Streaming Audio ◦ Direct and owned media: SMS, Email, and Direct Mail. <p>Because mix is actively optimized via MMM and tactical planning, channel shares vary by campaign (OE vs SE vs Brand), segment (GM vs HSL vs ASL), and coverage year rather than following one fixed percentage distribution.</p> <p>Approximate Budget Breakdown by Segment:</p> <ul style="list-style-type: none"> ◦ General Market 55% ◦ Hispanic Market: 26.5% ◦ Asian Market: 12% ◦ Black/AA: 5% ◦ LGBTQ+: 1.5%
5	How is CCA currently measuring brand consideration and awareness? Is there an ongoing survey? At what frequency do you run the brand survey studies (e.g. monthly, quarterly)? What demographics and audience targets do you currently track, if any, in your brand studies?	<p>Covered California is currently measuring brand awareness and consideration through an ongoing Brand Health & Ad Tracker, designed to track brand equity and the impact of advertising among California residents ages 24–64 who are responsible for healthcare decisions.</p> <p>Methodology is ~20-minute survey conducted both online and face-to-face interviews in English and in language (Spanish, Korean, Chinese, Vietnamese, Tagalog, and Hindi).</p> <p>Key metrics include awareness, familiarity, affinity, consideration, future use, trust, satisfaction, and likelihood to recommend.</p> <p>These are mapped to the Fandom/brand growth model pillars</p>

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		<p>(Relevance, Trustworthy, Presence) and modeled against consideration, affinity, future use, and advocacy via structural equation models.</p> <p>The program is ongoing rather than a one-off survey: the current plan calls for roughly 10,000 respondents from September 2025 – February 2026 with three reads (October, December, February), effectively providing multiple waves each Open Enrollment (OE) season plus a pre-OE baseline.</p> <p>Results are reported overall and by key segments, including:</p> <ul style="list-style-type: none"> • Age (24–34, 35–44, 45–54, 55–64) and gender • Race/ethnicity (White, Hispanic/Latinx, Black/African American, Asian) • Income/FPL (0–138%, 139–250%, 251–400%, 401%+) • Region and DMA (e.g., NorCal/Central/SoCal; Los Angeles, San Francisco, Sacramento, San Diego, Fresno) • Language dominance (English vs Spanish dominant; Asian language dominant vs nondominant, with sub cuts where base sizes allow) • Insurance status/source (Covered California customers, employer sponsored, MediCal/Medicare, uninsured) • Sexual orientation / LGBTQIA status • Employment status and detailed employment segmentations <p>Brand metrics, including awareness and consideration, are therefore available at both total market and detailed segment/DMA levels, with caution applied where sample sizes are small.</p> <p>Marketing performs various other research efforts throughout the year such as brand lift</p>

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		studies associated with media buys, creative and concept testing, message testing, etc.
6	How many media agencies/media-related data sources do we need to aggregate and ingest data from?	<p>Collaboration is expected with:</p> <ul style="list-style-type: none"> • The current agency of record (AOR) as the main point of contact for all paid media data, AOR will work with various subcontractors to pull in-language and culture-first media data. As a part of our AOR model, Covered California works with 2 multicultural agencies to support Hispanic Market, Black/AA Market, LGBTQ+ Segment, and Asian Market. • Covered California's Media and Analytics team as the primary point of contact to pull all other 1st party data such as plan selections, website traffic, call volume, agent count, earned media, etc. • Brand Health Tracker vendor for brand health tracker data and insights. • This RFP is looking for the succeeding candidate to be able to pull in other model inputs such as competitor data, census data, unemployment data, etc.
7	How is data being aggregated today for current media spend analysis? Is there an existing system ingesting all media today? How frequently is it being ingested, and how frequently is it reported out on?	<p>Today, the primary structured integration of media, enrollment, and contextual data is through Marketing Mix Modeling (MMM). MMM modeling has covered (in the current generation) part of FY21/22 through part of FY23/24 and is being refreshed with insight through FY24/25 (June 2025).</p> <p>Data is ingested into the model at a weekly level granularity across all inputs, with varying cadences of reporting based on the model.</p> <p>Proposers should outline how frequently they would ingest cross-channel media data and how often they would report insights at both operational and strategic levels, with clear rationale for how that cadence will enable timely, actionable media optimization aligned with Covered California's goals.</p>

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8	Will this contract potentially preclude the winning bidder from potentially winning other RFP contracts with Covered California in the future?	No, the RFP explicitly allows for subsequent solicitations and does not designate this contract as exclusive beyond the scope defined in Exhibit A – Scope of Work.
9	How are staff rates used in cost evaluation?	<p>Proposers submit an Exhibit B – Budget Detail and Payment Provisions and Cost Proposal (Attachment 1) with fully loaded hourly rates and totals that are binding for the contract term.</p> <p>In evaluation:</p> <ul style="list-style-type: none"> • Cost accounts for 30% of the total score (300 points out of 1,000). • Covered California uses a lowest cost–normalized formula: $\text{Cost Proposal Score} = (\text{Lowest Cost Proposal} / \text{Proposer's Cost Proposal}) \times \text{Max Cost Points.}$ • Thus, staff rates affect evaluation only through their contribution to total proposed cost; there is no separate qualitative score for individual rates beyond total cost. <p>After award, hourly rates:</p> <ul style="list-style-type: none"> • Must be fully loaded and inclusive of all costs. • Cannot exceed the rates and totals included in the executed contract, though Covered California may negotiate lower rates in future amendments; travel reimbursement is handled separately via Exhibit E.

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10	What has been the main catalyst or driver for this RFP/RFI brief?	<p>Main drivers include:</p> <ul style="list-style-type: none"> • Ensure media investment levels are sufficient, efficient, and effective • Ability to optimize the media mix by channel, segment, and DMA • Align media with a full funnel, multisegmented strategy in a changing environment
11	What are the top 3 things you'd like to achieve through this project?	<p>Diagnostic clarity on spend levels and mix</p> <ul style="list-style-type: none"> • Evaluate historical and current media spend to determine if overall investment levels are sufficient and efficient relative to Covered California's acquisition, brand, and retention goals. <p>Optimized budget recommendations</p> <ul style="list-style-type: none"> • Develop clear, defensible budget recommendations that optimize media spend by channel, audience segment, and DMA, including recommendations on full funnel mix (awareness, engagement, conversion) and culture first investments. <p>Sustainable measurement and decision framework</p> <ul style="list-style-type: none"> • Recommend metrics, data strategies, and ongoing measurement frameworks (including use of MMM, Brand Health Tracker, media analytics, and ROAS/ROI) that support recurring planning cycles and continuous optimization.
12	What are the top 3 things you are looking for in a partner for this project?	<p>Deep expertise in largescale, multichannel media ROI/ROAS analysis</p> <ul style="list-style-type: none"> • Experience tracking and analyzing performance and ROI/ROAS of largescale multichannel paid media campaigns, including offline channels like TV and Radio, and complex multisegmented portfolios. <p>Strong analytics, modeling, and data integration capabilities</p> <ul style="list-style-type: none"> • Ability to integrate disparate media and nonmedia data sources, build or enhance MMM and related models, handle varying levels of granularity by

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		<p>channel, audience segment and geography, and deliver clear, defensible quantitative insights. Ability to translate insights into actionable, full funnel recommendations</p> <ul style="list-style-type: none"> • Demonstrated track record turning analytics into practical budget and mix recommendations, working collaboratively with Marketing, Media, Analytics, and the current AOR, and providing clear work plans and timelines within State procurement parameters.
13	Have you worked with other vendors on marketing measurement or done any work already internally? If so, what types of measurement (MMM, MTA), and what were the successes and frustrations? If not, how is credit currently attributed to the various marketing channels and levers?	<p>Yes, Covered California has already invested in Marketing Mix Modeling (MMM) with an external analytics partner for the last 4 years.</p> <p>Our current MMM:</p> <ul style="list-style-type: none"> • Uses multivariate regression to attribute incremental plan selections and effectuated enrollments to channels and other drivers, including seasonality, economic factors, MediCal transitions, renewals, and active agent counts. • Has delivered tangible improvements (e.g., +5% ROAS and +10% CPPS improvement YoY after initial implementation) and identified efficient channels and spend ceilings across TV, Search, Display, Social, Digital Video, Radio, OOH, etc. • Recent enhancements split acquisition vs retention models and plan a Brand Media Model to quantify brand media's impact on conversions. • Some enhancements we are looking to do in our next round of modeling is to get deeper insights by geography, by Asian Languages (Chinese, Korean, Vietnamese, Hindi, and Tagalog) as well as in-culture reads (Black/African American and LGBTQ+). In addition to deeper insights by geo and segment, we are also seeking a partner that can

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		<p>integrate our Brand Health Tracker program as a part of the insights to better understand the role that brand health plays in the conversion and retention journey.</p>
14	The RFP refers to both ROI and ROAS, can you please provide your definition of each of these metrics?	<p>The RFP expects proposers to work within these standard definitions, but also to clarify and operationalize formulas (e.g., what revenue and cost components are included) as part of the methodology, especially where ROI extends beyond pure media spend.</p> <ul style="list-style-type: none"> • ROAS (Return on Ad Spend): <ul style="list-style-type: none"> ○ A channel level metric describing the return generated per dollar of advertising spend. In practice, MMM uses ROAS to quantify incremental business outcomes (plan selections, effectuated enrollments, revenue) per media dollar for each channel. • ROI (Return on Investment): <ul style="list-style-type: none"> ○ A broader measure of return relative to total investment, not limited to paid media. MMM and the RFP use “ROI” in the context of overall efficiency and impact of media investments (and, in some cases, related outreach) in achieving Covered California’s marketing goals.
15	For the purposes of this analysis, should there be a total enrollment KPI, or do you require a distinct breakdown and analysis for Open Enrollment vs. Special Enrollment periods, and/or re-enrollment?	<p>The current measurement stack already differentiates:</p> <ul style="list-style-type: none"> • Open Enrollment vs Special Enrollment performance, including by segment (GM, HSL, ASL). • Acquisition vs retention/renewals in separate MMM models. <p>The RFP Purpose and SOW emphasize evaluating media’s impact across acquisition</p>

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		<p>and retention, not just a single total enrollment number.</p> <p>For this analysis, you should plan to support both:</p> <ul style="list-style-type: none"> • A total enrollment KPI for overall impact; and • Distinct KPIs and analyses for OE vs SE and for reenrollment/retention, aligned with the existing modeling practice.
16	What other metrics matter most to your organization (leads, quotes, etc.)?	<p>Across MMM, brand tracking, and media analytics, metrics that matter include:</p> <ul style="list-style-type: none"> • Plan selections and effectuated enrollments (acquisition). • Retention / renewals / continued coverage (retention). • CPPS (Cost Per Plan Selection) and cost per effectuated enrollment. • ROAS and overall ROI. • Brand metrics: awareness, understanding, trust, affinity, consideration, future use, advocacy. • Media/engagement metrics: reach, frequency, video completion rate, site traffic, onsite engagement. • Context metrics: unemployment rate, MediCal transitions, active agent counts, direct outreach performance. <p>While account creation and cost per enrollment as legacy lower- funnel metrics, the emphasis is on plan selections, effectuated enrollments, and brand/retention health in a full-funnel framework.</p>
17	How is your media & marketing budget setting currently done? How does this feed into the business planning? Is media planned by geography and/or audience or anything else?	<p>Budget setting and planning context:</p> <ul style="list-style-type: none"> • Overall budgets are approved annually by the Covered California Board, with a portion allocated to Marketing. • Currently paid media accounts for ~58% of Marketing's total budget (including operational costs) • Historically, the paid media budget has been concentrated around OE bursts at ~85% of paid media budget (largest eligibility pool), with always on SE at ~15% of paid media budget and is now

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		<p>being rebalanced to better support brand building and retention.</p> <ul style="list-style-type: none"> • Current FY objective paid media breakdowns are: <ul style="list-style-type: none"> ◦ Open Enrollment 55% ◦ Special Enrollment: 20% ◦ Brand Engagement and Retention: 25%
18	When are your key business planning windows? To ensure our recommendations are delivered at the most opportune time, could you share the key windows for your annual and quarterly business planning and budget-setting processes?	<p>Brand/Retention Planning Kick Off: February</p> <p>Open Enrollment Planning Kick Off: March</p> <p>Special Enrollment Planning Kick Off: May</p> <p>Ongoing quarterly planning check-ins with a Fiscal Year that starts July 1; September, December, March, June.</p>
19	The brief talks about 2 read outs / model waves per year – is that our correct interpretation? Are there any details we should be aware of in terms of cadence of reporting?	<p>Two read outs/model waves per year refers to two major MMM reporting cycles per year.</p> <p>The exact cadence (dates, alignment to OE/SE and board cycles, and format of each readout) is intended to be finalized in the Work Plan with the selected contractor, within the high-level expectation of at least two substantial MMM/model reporting waves annually, plus regular brand and media analytics reporting.</p>
20	On what cadence does your organization use insights to drive decisions; daily, weekly, monthly, quarterly and annual basis?	<p>These insights are a core input into our annual marketing budget setting by campaign and by audience, and they also guide the media strategy planning for each campaign throughout the year.</p>
21	How integrated is data and analytics in your organization's day-to-day decision making?	See answer to question 20.
22	How is your data currently organized and are you able to share any further details on data availability and quality?	<p>Media data: TV, radio, OOH (spend, TRPs, impressions, post buy logs); digital (spend, impressions, site traffic, engagement, conversion data) are all housed with our AOR via Ad Server.</p> <ul style="list-style-type: none"> • Offline, post buy data is available 3 months post campaign.

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		<ul style="list-style-type: none"> • Offline, planned buy data is readily available • Online, planned and purchased buy data is readily available <p>Nonmedia data: plan selections/enrollment data, site behavior, call volume, direct outreach (email, direct mail, text), and contextual variables such as unemployment and MediCal transitions are housed within various data warehouses internally, of which Covered California is responsible for pulling and providing. Non-Media data is often available within a week's lag time.</p>
23	The SOW requires analysis for specific audience segments (e.g., Hispanic, Chinese, Vietnamese language media). Is historical data for media delivery, brand health, and enrollment KPIs consistently available at this granular audience level? Are there any known gaps or quality issues with the past three years of data we should account for?	<p>Yes, the request made via the SOW for language breakdowns is how the media is purchased and how our enrollment data is tracked.</p> <p>From an MMM standpoint, there have been limitations in getting model outputs by language for the Asian Languages despite media and enrollments being supplied by language.</p>
24	What files (e.g., web analytics, call center data, paid media data) will be included in the historical data?	<p>Historical data available:</p> <ul style="list-style-type: none"> • Enrollments • Media Buys • Web traffic • Organic Search • Call Volume • Active Agent Count <p>Covered California would work with successful bidder to identify any other meaningful 1st party data to enhance insights.</p>
25	Can you share more about the data granularity? Will it be row-level (e.g., impressions by DMA) or aggregated?	Data can be supplied at the weekly level by zip code, by language for Enrollments, Media Buys, Call Volume, and Active Agent Count. Search and Web traffic are web browser specific.
26	How does Covered California differentiate between website	Website engagement is used as a mid-funnel metric focused on traffic and onsite

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	engagement and conversion? Does website engagement include just page views or does it also include key conversions like account creation and health plan selection?	<p>behavior (e.g., sessions, page views, time on site, navigation depth, use of tools). In the RFP and Proposers' Conference materials, digital data is described as including "site traffic, site engagement, conversion data," which treats engagement and conversion as separate concepts.</p> <p>Conversion is reserved for business-critical actions tied to enrollment, Account creation and Plan selections and effectuated enrollments</p>
27	Does the website currently have materials in other languages of interest (e.g., Chinese, Korean, Hispanic)?	Yes, the website, digital materials, and media buys are in Spanish, Chinese, Korean, Hindi, and Tagalog.
28	What analytics platforms are currently used, and would we have access to data from those platforms?	<p>Successful bidder will have access to the following platforms:</p> <ul style="list-style-type: none"> • Brand Health Tracker Dashboard • Media Analytics Dashboard <p>Dashboard that Covered California will export data from, but bidder will not have direct access to:</p> <ul style="list-style-type: none"> • Enrollment Dashboard • Google Analytics • Salesforce Marketing Cloud
29	Are there priority DMAs or underserved areas we should focus on?	<p>We prioritize geographies where coverage gaps, health disparities, and barriers to awareness and understanding are greatest, using enrollment, uninsured rates, language dominance, and brand health data at the DMA, county, ZIP-code, and rural–urban levels.</p> <p>Today, this consistently surfaces the Los Angeles DMA, parts of the Central Valley and Inland Empire (e.g., Fresno, Kern, Riverside, San Bernardino), and select Bay Area and Sacramento-region counties with higher concentrations of uninsured and priority populations, including Black/African American, Latinx, Asian-language-dominant, rural, low-income, and LGBTQ+ communities.</p>

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		<p>We pay particular attention to rural communities, where provider access, transportation, broadband, and media reach can be more limited, as well as to underserved pockets within urban DMAs, where awareness may be high overall but specific neighborhoods still face language, trust, or information barriers.</p> <p>For this project, we expect the selected vendor to build on this framework, refine DMA and sub-DMA (including rural vs. urban) prioritization, and surface additional underserved geographies where optimized media investment can most effectively close coverage gaps.</p>
30	How are you currently measuring outcomes such as brand awareness (e.g., survey)?	See answer to question 5.
31	If a DVBE subcontractor is also an SB or MB, will proposers be eligible to receive scoring incentives in both categories, contingent on meeting incentive criteria for each category?	Yes, a vendor can receive both scoring incentives if a subcontractor meets the requirements stated in RFP Document 6.4.1. and 6.4.2.
32	Is there a current contractor measuring these outcomes and producing recommendations?	<p>For marketing measurement and brand outcomes, Covered California currently works with specialized vendors:</p> <ul style="list-style-type: none"> • MMM vendor: Stella Rising over the last several years is used to optimize cross channel media spend and quantify contributions to plan selections and effectuated enrollments. • Brand Health vendor: MarketCast is identified as the Brand Health Tracking partner responsible for the 2025 benchmark and ongoing tracking. <p>These vendors measure outcomes and provide recommendations that inform current media and brand strategy. RFP 2025-07 seeks a contractor focused specifically on media spend</p>

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		analysis and budget optimization, which will complement and build on this existing measurement ecosystem.
33	Are any UTMs currently implemented by the paid media team? If so, at what level of granularity are they provided (e.g., by channel, by creative)?	<p>Media Tags and Pixels are not active at this time.</p> <p>For this RFP, proposers should assume:</p> <ul style="list-style-type: none"> • Standard cross channel tagging is used across digital media (to at least the creative, audience, channel and campaign level, and often more granular) • Full tagging documentation and mappings (by channel, campaign, and where applicable by creative or placement) will be provided to the selected contractor during onboarding.
34	Are benchmarks based on industry standards or on historical data?	<p>Covered California uses both:</p> <ul style="list-style-type: none"> • Historical performance benchmarks ◦ MMM and past campaigns provide internal baselines for ROAS, CPPS, channel efficiency, and response curves by channel/segment. • Industry and portfolio benchmarks ◦ Media analytics track metrics like video completion rate (VCR) against both prior Covered California campaigns and agency portfolio/industry standards <p>The expectation for this RFP is that the selected vendor will anchor recommendations primarily in Covered California's own historical data, while using external benchmarks where internal data is sparse or where context is needed (e.g., new channels or emerging formats).</p>
35	Over what length of time will historical data be available to help with model building and creating recommendations with current data?	<p>In practice, proposers should plan around ~3 years of detailed historical data (with the exact start date varying by channel and data source) for robust model building and scenario analysis.</p> <p>With data available at the weekly level as far back as July 2021.</p>

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36	Is the historical and current media data provided in actual delivered media dose, at least for digital impressions and TV TRPs, or only planned KPIs?	Media data is provided in actualized delivered impressions and CPMs.
37	The Key Action Dates table lists a virtual Proposers' Conference on January 6, 2025, which appears to be a past date relative to the RFP release (Dec 4, 2025). Please confirm the correct year and time, and whether late registration is permitted if the date shifts.	The correct date for the Proposers Conference will be January 6, 2026. Addendum 1 has been released to correct this date.
38	Section 5.3 - Key Action Dates: For Proposers selected for Phase Three, please confirm presentation format, duration, required participants, and whether materials may be submitted in advance (and if they count toward page limits).	Proposers who advance to Phase Three will be provided with the specifics about the presentation and any requirements.
39	Please confirm whether Work Plan timelines/visuals included in Understanding & Approach (15 pages) must be within the page limit, and whether cover pages or section dividers count.	Yes, Work Plan content—including timelines and visuals—must fit within the 15page limit for the Understanding & Approach section. There is no separate page allowance for timelines or Gantt charts; they are part of the 15 pages.
40	In the Scope of Work, page 4, item D.1.a.v.1, there are 3 subitems: a) Dedicated media buy for the Black/African, b) American audience, c) Dedicated media buy for the LGBTQ+ audience. Is this supposed to be 2 subitems: a) Dedicated media buy for the	Yes. These are 2 subitems as Covered California does dedicated buys for both the Black/African American audience and the LGBTQ+ audience.

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	Black/African American audience, and b) Dedicated media buy for the LGBTQ+ audience?	
41	Is there currently an incumbent working on this Scope of Work?	Yes.
42	Will you be sharing these slides after the session?	Yes, they will be posted along with the responses to the questions on 1/12/2026 to the solicitation's website, same site proposers accessed the RFP.
43	Does geo require cultural/language breakdown at the geo level as well?	Yes, we buy all our in-language media and in-culture media at the geo level.
44	What type of tactics are you leveraging for Brand Building?	<p>Linear video & audio: TV, radio</p> <p>Streaming & digital video: CTV/OTT, online video pre-roll, social video</p> <p>Display & programmatic: Standard, high-impact, native, contextual display; app/display inventory</p> <p>Paid social: Static, carousel, reels/short-form, stories across major platforms</p> <p>Influencer marketing: Ambassador/creator partnerships and custom social content</p> <p>Media partnerships & native content: Editorial integrations, sponsored content, newsletters, custom content packages</p> <p>Out-of-home (OOH): Billboards, transit, street level/neighborhood units, place based/grocery TV, barbershops, etc.</p> <p>Print: Community and in language publications, magazines, newspapers</p>

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		<p>Audio streaming & podcasts: Streaming audio units, host read or produced spots</p> <p>Search & lower funnel support: Paid search to capture demand and support Brand/OE</p> <p>Owned/direct channels that ladder into Brand: Email, SMS, and direct mail used in coordination with paid media to reinforce brand and key messages</p>
45	How often is plan selection and enrollment data updated and available and does it include agents?	Daily.
46	What exactly are you looking for from us to submit. Explanation of just our capabilities as they relate? Or a mocked-up media plan?	A written explanation of your media analysis capabilities and recommended approach as it relates to Covered California's objective.
47	I think I heard that your MMM model contract expired? Is that true? Can you elaborate?	Yes, our previous Media Spend Analysis contract expired January 02, 2026.
48	How often is the brand tracker pulled?	Data is available monthly.
49	Do you require results at a daily level for optimizations?	No, we are looking for the successful bidder to provide us with a recommendation.
50	How often is the brand tracker data pulsed?	Data is available monthly.
51	Suppose a DVBE is also a SB. If 25% of the proposed budget is allocated to them, would that fulfill both the 5% DVBE maximum and the 25% SB minimum? Or would a partner need to have 30% of the proposed budget to capture both?	Yes, if 25% of the proposed budget is allocated that would fulfill both the SB and DVBE.

#	Proposer Questions:	Covered California's Responses:
52	<p>The RFP states "It is expected that the approved funding for the contract will not exceed approximately \$500,000.00 per year for the term of the contract, including any extensions of the term."</p> <p>Should we interpret this to mean that the budget for each contract year has an annual cap of \$500,000?</p>	Yes. Funding for the contract will not exceed approximately \$500,000.00 per year
53	Do you have the ability to obtain daily-level media data (e.g. impressions and cost)?	Yes.
54	Based on that, are you looking for a new MMM model partner with this new RFP?	Yes, we are looking for a new contract to conduct our Media Spend Analysis.