



Request for Technical Assistance Proposals: State-Level Food is Medicine

With support from The Rockefeller Foundation, Builders Vision Philanthropy, and the Walmart Foundation, CHLPI is providing technical assistance state-based partners to help increase access to Food Is Medicine (FIM) services at the state level and to promote FIM practices that support positive upstream impacts on the food system and communities. **As part of this effort, CHLPI is seeking proposals from partners who would like to receive in-depth technical assistance to advance FIM policies in their respective states (e.g., Medicaid Section 1115 demonstration waivers, state-funded pilot programs, FIM practices that support local food systems, etc.).**

A [growing body of research](#) suggests that nutrition interventions can help to prevent and treat costly chronic health conditions, improve household food security, and address health disparities. Policymakers and leaders in the U.S. health care and food systems are increasingly working to expand the reach of nutrition interventions through [systems-level change](#). States and institutional partners are eager to leverage these new policies and programs to expand access to nutrition interventions in their communities, in ways that benefit the local economy and food systems. However, current policy pathways to sustainably fund nutrition interventions and bring successful programs to scale can be complex and difficult to navigate.

CHLPI is offering pro bono technical assistance (TA) to community organizations, nonprofits, coalitions, and local, state, and tribal government entities across the United States interested in **implementing and scaling state-level FIM policy**. This request for proposals (RFP) application will remain open until August 3, 2026, at 5pm ET. CHLPI anticipates making **four TA awards** from this RFP to begin December 1, 2026.

Overview of the Project

CHLPI will provide one year of in-depth capacity-building engagement that includes:

- early-stage coalition building,
- nonpartisan research and legal consultation on a variety of FIM policies tailored to the interests of the TA grantee,
- presentations, training, written policy resources, and/or communications materials for a range of audiences, and
- training and assistance from technical experts (e.g., research and evaluation, community consultation).

CHLPI will help the TA grantee build a solid, community-based foundation for concrete policy change. CHLPI will assist the grantee in a research and discovery process to identify the grantee's and community stakeholders' key state-level Food is Medicine policy goals, opportunities, and barriers. Based on the information gathered and the latest evidence, CHLPI will then identify and research policies and implementation strategies that will best enable the TA

grantee to scale FIM and address related issues of health inequity and local food system policy in the state.

Technical Assistance Provided by CHLPI

CHLPI is committed to engaging with TA sites in order to empower and support community-led policy change. CHLPI will offer robust TA engagement that can feature the following activities based on the FIM policy goals, opportunities, and barriers identified by the CHLPI-assisted grantee research and discovery process:

Building Local Capacity

- Build coalitions or enhance the capacity for action of an existing coalition.
- Establish or deepen relationships with key decision-makers and influencers, including state agencies, private employers, health insurers, social service providers, food producers and retailers, and public health coalitions.
- Help facilitate virtual convenings or small gatherings of key stakeholders.
- Provide broad-based training of TA grantees and their community partners to deepen knowledge and understanding of policy options to scale Food is Medicine services and promote FIM policies that strengthen food systems within the location's legal authority.

Soliciting and Researching Local/State Policy Priorities

- Facilitate prioritization among policy options with coalition members, ensuring selected policies have grassroots support and coalition buy-in.
- Research and provide additional support on selected priorities.
- Present strategies for pursuing policy options, based on legal feasibility, and offer available evidence to support TA grantees' potential policy ideas.

Supporting the Design and Implementation of Policy Action

- Research and write memoranda for partner organizations on the relevant legal and policy issues associated with desired policy action.
- Develop outreach materials such as template communications directed to community stakeholders, including private citizens, health plan leaders, and agency officials (e.g., public comment, fact sheets, and leave-behinds).
- Coordinate training and assistance from consultants with topic-specific expertise, such as experts in research and evaluation, and community engagement.

Eligibility to Apply for Technical Assistance

Any community-based organization, nonprofit, coalition, or local, state, or tribal government entity interested in state-level FIM policy is welcome to apply. CHLPI will select TA sites based on readiness for policy engagement and change regarding FIM policies, feasibility of policy success, potential to impact underserved populations, diversity of potential policy solutions of interest, and diversity in location/geography (CHLPI accepts applications from all states, and particularly encourages applicants from parts of the country where gaps in statewide Food is Medicine policy currently exist, including the Southeast, Midwest, and Mountain regions).

Previous recipients of CHLPI’s twelve-month in-depth TA are not eligible for this opportunity but are encouraged to apply for short-term (2-month) targeted assistance as needed. To learn more about this opportunity and access the application form, visit our website:

<https://bit.ly/stateFIMTA>

Expectations of Selected Technical Assistance Applicants

CHLPI views its role as an advisor and TA provider, supplementing and supporting the work of stakeholders on the project. CHLPI will work with each selected site to determine how best to assist its individual project; however, the TA grantees will lead the initiative, directing the course of policy action. TA grantees will have control over the policies pursued and resources prepared by CHLPI. The specific services provided, to whom, and for how long they will be provided will be based on the information in the applicant’s RFP response, conversations between CHLPI and the TA grantee, and the project plan jointly developed by CHLPI and the TA grantee during an initial needs-assessment period. If appropriate, TA grantees will work with CHLPI to tailor work plans to respond to evolving site needs.

CHLPI will look to partner agencies to provide on-the-ground expertise about the proposed policy interventions and relevant cultural, political, and socio-economic factors that may influence a policy’s success. CHLPI will also expect TA grantees to have a demonstrated history or willingness of working with community members to address health inequity and other socio-economic disparities through grassroots engagement. For the partnership to be successful, CHLPI will also ask partner agencies to identify a point of contact who will be in regular contact with CHLPI, help schedule conference calls; review draft materials and provide feedback; and connect CHLPI to other key stakeholders on the project.

TA grantees shall not reference or otherwise cite direct funding from Builders Vision Philanthropy, The Rockefeller Foundation, or the Walmart Foundation; use the Builders Vision Philanthropy, The Rockefeller Foundation, or the Walmart Foundation’s logo; or otherwise suggest affiliation with Builders Vision Philanthropy, The Rockefeller Foundation, or the Walmart Foundation.

Timeline

Applications are due by August 3, 2026, at 5pm ET. CHLPI anticipates making four TA awards from this RFP to begin December 1, 2026. CHLPI may contact finalists for a virtual interview and will announce all final decisions by October 12, 2026.

RFP for Technical Assistance Application

Please send a copy of the application in PDF format to FIMPolicy@law.harvard.edu with the subject line “State-Level FIM RFP Application.” Applications should be typed, single-spaced, and answer all relevant questions. **Complete applications should not exceed 3 pages.**

Part A: Applicant Information

Provide bullet points with the following information:

- agency or organization name
- agency or organization location (city, county, and state)
- type of applicant (e.g., non-profit, local government, state government)
- applicant primary point of contact, including name, title, agency or organization (must be same as applicant), phone number, and e-mail address
- whether you would be interested in receiving two-month, targeted TA (additional information provided below) if not selected for one-year TA

Part B: Applicant Mission and Goals

In 2,000 characters or less, provide a summary of your agency’s or organization’s mission, goals, scope of work, and geographic reach. Please also include 1-2 examples of your organization’s previous or current policy initiatives.

Part C: Readiness for Policy Change

In 2,000 characters or less, describe your current level of engagement on FIM issues and related policy change. As part of your response, please identify at least 3 partners with whom you have built a relationship to pursue this change and who will help to champion FIM policies in your community.

Part D: Community Impact

In 2,000 characters or less, describe the organization’s history of working with communities that have been disproportionately impacted by health inequities and barriers to healthy food access and how your organization plans to include affected community members in the development and implementation of the project.

Part E: Policy Areas of Interest and Desired Services

In 3,500 characters or less, describe the services or kinds of support you would like to receive from CHLPI, using the categories and bullet points on page 2 of this document as a starting point. Describe how these services could address existing needs and barriers. If any specific FIM policies are of interest to the organization and/or there are existing opportunities in the state or community, please let us know. As part of your response, please describe any of your existing FIM or related initiatives and/or policy priorities that consider food systems policy, e.g., food procurement, building resilience, and economic multiplier effects of food purchases. Please include any desired deadlines or dates of which CHLPI should be aware (e.g., Medicaid Section 1115 demonstration waiver up for extension in January 2027; goal of launching a Food is Medicine pilot with local health plans by fall 2027; etc.).

Additional Information

CHLPI offers a variety of other resources to assist stakeholders in leveraging health and food law and policy to advance FIM policies at the state level. With support from Builders Vision Philanthropy, The Rockefeller Foundation, and the Walmart Foundation, CHLPI offers two-month, targeted TA engagements to a broad range of stakeholders seeking support with understanding, developing, and implementing FIM policy. Through this opportunity, CHLPI provides each client with expert consultation and one targeted, time-sensitive deliverable to advance FIM policy. Deliverables may include legal research and policy analysis, training,

facilitation of meetings, or other supports designed to build local capacity. To learn more about this opportunity and other resources, visit our website: <https://bit.ly/stateFIMTA>

About CHLPI

For more than 10 years, CHLPI has advocated for legal, regulatory, and policy reforms in health and food systems, with a focus on the needs of systemically marginalized individuals. CHLPI's broad range of initiatives aim to expand access to high-quality health care and nutritious, affordable food; to reduce health- and food-related disparities; to develop community advocacy capacity; and, to promote more equitable, sustainable, and effective health care and food systems.