



Request for Letters of Interest (RLOI)

NC ROOTS Region 2 – NC Care360 Community Partner Engagement and Implementation Support

Issued By Trillium Health Resources
NC ROOTS Regional Hub Lead – Region 2
North Carolina Rural Health Transformation Program (RHTP)

Letters are Due- June 30,2026 by 5:00p.m

Submit Letters to Region2NCROOTSHub@Trilliumnc.org Subject Line: NCCARE 360 LOI (Your Agency Name)

Purpose Trillium Health Resources, as the designated NC ROOTS Regional Hub Lead for Region 2 under North Carolina's Rural Health Transformation Program (RHTP), is seeking **Letters of Interest (LOIs)** from qualified organizations interested in partnering with the NC ROOTS Hub to support the implementation, adoption, training, and operational use of NC Care360 throughout the Region 2 service area.

The selected partner(s) will play a critical role in helping community organizations, healthcare providers, social service agencies, local governments, Tribal organizations, faith-based organizations, and other community-based partners effectively utilize NC Care360 to support closed-loop referrals and coordinated care across the region.

This effort is intended to strengthen the region's community resource infrastructure and ensure organizations participating in NC ROOTS initiatives can effectively connect individuals to needed services and document outcomes through NC Care360.

Background NC ROOTS (Rural Opportunities for Orchestrating Transformation and Sustainability) is North Carolina's regional implementation strategy under the Rural Health Transformation Program.

A core objective of NC ROOTS is to build sustainable regional infrastructure that supports:

- Community-based care coordination
- Cross-sector collaboration
- Closed-loop referral systems
- Social determinants of health interventions
- Food Is Medicine initiatives
- Chronic Disease Management programs
- Perinatal and Maternal Health initiatives
- Community resource navigation
- Data collection and outcome measurement



Stevens Amendment Disclosure: This letter is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$213,008,356.47 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.



NORTH CAROLINA

RURAL HEALTH TRANSFORMATION

NC Care360 serves as North Carolina's statewide coordinated care network and closed-loop referral platform and is expected to be a key operational component supporting NC ROOTS implementation.

Scope of Interest Trillium seeks organizations with demonstrated experience in the following areas:

NC Care360 Implementation Support

- Assisting organizations with NC Care360 onboarding
- Supporting account creation and user setup
- Facilitating organizational enrollment
- Supporting workflow development and integration

Training and Education

- Conducting in-person and virtual NC Care360 training sessions
- Developing training materials and user guides
- Hosting webinars and educational forums
- Providing role-based training for various user groups

Community Outreach and Engagement

- Recruiting community organizations to participate in NC Care360
- Building relationships with healthcare and social service providers
- Conducting informational meetings and presentations
- Supporting regional adoption strategies

Technical Assistance

- Providing individualized coaching and troubleshooting
- Assisting organizations with referral workflow design
- Supporting referral management processes
- Helping organizations achieve meaningful utilization of the platform

Boots-on-the-Ground Support

- Providing onsite technical assistance throughout Region 2
- Conducting field visits and community engagement activities
- Supporting organizations that require hands-on implementation assistance
- Assisting rural and underserved communities with platform adoption

Data and Performance Support

- Tracking participation and adoption metrics
- Monitoring referral activity and utilization trends
- Identifying barriers to implementation



Stevens Amendment Disclosure: This letter is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$213,008,356.47 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.



NORTH CAROLINA

RURAL HEALTH TRANSFORMATION

- Supporting continuous quality improvement efforts

Desired Qualifications

Organizations submitting an LOI should describe experience in:

- NC Care360 implementation and utilization
- Community resource navigation systems
- Healthcare and human services coordination
- Training and adult education
- Community engagement and outreach
- Rural health initiatives
- Social determinants of health programs
- Cross-sector partnership development
- Must be located within the region

Preference may be given to organizations with demonstrated experience working in rural North Carolina communities teaching and onboarding community based organizations to use NC CARE 360.

Region 2 Service Area

Organizations must have the ability to support activities across the NC ROOTS Region 2 service area, which includes:

- Alleghany County
- Ashe County
- Davidson County
- Davie County
- Forsyth County
- Guilford County
- Randolph County
- Rockingham County
- Stokes County
- Surry County
- Watauga County
- Wilkes County
- Yadkin County

Letter of Interest Requirements

Interested organizations should submit a Letter of Interest that includes:



Stevens Amendment Disclosure: This letter is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$213,008,356.47 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.



NORTH CAROLINA

RURAL HEALTH TRANSFORMATION

Organizational Information

- Organization name
- Contact person
- Mailing address
- Phone number
- Email address
- Website (if applicable)

Organizational Capacity

Please describe:

1. Your organization's experience with NC Care360.
2. Your experience providing training, technical assistance, or implementation support.
3. Your experience working with healthcare providers, community-based organizations, local governments, Tribal organizations, or other community partners.
4. Your capacity to provide both virtual and in-person support across region 2.
5. The geographic areas within region 2 your organization can effectively serve.

Proposed Approach

Please describe:

1. How your organization would support NC Care360 adoption and utilization throughout region 2.
2. Strategies you would use to engage organizations that are not currently active users of NC Care360.
3. Your approach to providing ongoing technical assistance and coaching.
4. Any innovative approaches you would recommend increasing NC Care360 utilization and referral activity.

Funding Notice

Submission of a Letter of Interest does not guarantee funding or contract award.

Organizations selected through this process may be invited to participate in a subsequent procurement, contracting, or subaward process consistent with applicable federal, state, and NC ROOTS program requirements.

Any future funding opportunity will be subject to:

- Federal Rural Health Transformation Program requirements



Stevens Amendment Disclosure: This letter is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$213,008,356.47 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.



NORTH CAROLINA

RURAL HEALTH TRANSFORMATION

- North Carolina Department of Health and Human Services requirements
- Applicable federal flow-down provisions
- Reporting and performance measurement requirements
- Data-sharing and confidentiality requirements
- Compliance with applicable state and federal laws and regulations

Submission Instructions

Letters of Interest should not exceed five (5) pages.

Evaluation Considerations

Trillium will review Letters of Interest based on:

- Relevant experience and expertise
- Demonstrated NC Care360 knowledge
- Regional capacity and coverage
- Experience and Ability to provide training and technical assistance
- Experience serving rural communities
- Community engagement capabilities
- Organizational readiness to support NC ROOTS objectives

Disclaimer

This Request for Letters of Interest is for planning and partner identification purposes only and does not constitute a solicitation, contract award, or commitment of funds.

Trillium Health Resources reserves the right to determine future procurement methods and partnership opportunities consistent with NC ROOTS program requirements.

About NC ROOTS

NC ROOTS (Rural Opportunities for Orchestrating Transformation and Sustainability) is North Carolina's regional strategy for strengthening rural health infrastructure, improving access to care, and building sustainable community-based systems that address health-related social needs and improve health outcomes across rural communities.

Through NC ROOTS, regional partners work together to improve care coordination, strengthen referral systems, expand community capacity, and create sustainable models that improve health and well-being for North Carolina residents.



Stevens Amendment Disclosure: This letter is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$213,008,356.47 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.