

# Request for Proposal

CARE MANAGEMENT PLATFORM

AUGUST 13, 2019

This solicitation should not be interpreted as a contract (implicit, explicit, or implied), nor does it imply any form of agreement to any potential candidate. In addition, no inference should be made that Trillium will purchase and/or implement in the future any of the programs or services proposed by the respondents.

Transforming Lives



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**ACCREDITED**  
Health Network  
Expires 03/01/2022



**ACCREDITED**  
Health  
Utilization  
Management  
Expires 03/01/2022



**ACCREDITED**  
Health Call Center  
Expires 03/01/2022

## 1. INTRODUCTION

### 1.1. COMPANY MISSION AND BACKGROUND

Trillium Health Resources (“Trillium”), headquartered in Greenville, NC, is a Managed Care Organization (MCO) responsible for publicly funded behavioral health (mental health and substance use) and intellectual/developmental disability (I/DD) services in a 26 county area in eastern North Carolina. Trillium’s primary responsibilities include connecting individuals and families to the help they need when they need it and managing state and federally funded services for people who receive Medicaid, are uninsured or cannot afford services.

Trillium does not provide direct care but partners with agencies and licensed therapists in their provider network to offer services. Trillium works collaboratively with local non-profits, other governmental agencies, medical providers, and hospitals to create a holistic system of integrated patient care that recognizes all needs of an individual.

Trillium’s services include coordination of care and assisting with mental health, substance use or I/DD and Crisis Care & Service Enrollment, where trained experts help determine the type of services needed and connect our members to a nearby Provider. Trillium also contracts with Mobile Crisis Teams where, in an emergency, specially trained team members will be dispatched for assistance, where needed.

For more information, please visit: <http://www.trilliumhealthresources.org/>.

### 1.2. PURPOSE OF RFP

Today, North Carolina’s Medicaid Program is undergoing its largest reform in the State’s history. Trillium Health Resources is redesigning its care coordination and care management program to meet the current and future demands of North Carolina’s Medicaid Program. Trillium has initiated a care management system selection process to seek a new partner for its care management platform. Trillium wants to invest in development of a future state platform that meets a wide range of business, technical, and implementation success criteria. To further enable this development, Trillium is seeking a strategic partnership with a new vendor to support its current and future business needs.

The purpose of this RFP is to solicit pricing and system information from care management platform solution vendors to allow Trillium to make a decision as part of its care management system selection process.

Responses to this RFP should focus on the vendor’s offerings, capabilities, and experience within development of care management platforms for mental health, I/DD, and substance use services.

In addition, responses should include some discussion of how the vendor can serve as a “one-stop shop” for many of Trillium’s operational and customer service needs should Trillium decide to move in that strategic direction. A more specific list of the functions and technologies that are in-scope for this evaluation are listed within this document.

Trillium aims to complete selection of a new vendor within the next 60 days. Trillium aims to complete first phase implementation activities with a new vendor by June 1, 2020.

### **1.3. DISCLAIMERS**

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This document is the proprietary and exclusive property of Trillium, except as otherwise indicated. No part of this document in whole or in part may be reproduced, stored, transmitted, or used for design purposes without prior written permission from Trillium.

The information contained in this document is subject to change without notice. Trillium, at its discretion and without explanation to the prospective vendor, can at any time choose to discontinue this bid without obligation to such prospective vendor.

Trillium is not responsible for any expenses incurred by the vendor in preparing and submitting a response. The vendor’s response or any contract discussions or negotiations will be at the sole cost of the vendor. No statement by Trillium may be considered a request or justification to increase or change inventory, staff, facilities, business relationships, or internal business processes. All actions by the vendor in response to this RFP, or subsequent discussions or negotiations, should be taken with the clear understanding that neither this RFP nor subsequent actions or omissions by Trillium shall in any way obligate Trillium to pay or reimburse the vendor for any costs or expenses the vendor incurs in conjunction with the RFP process.

All responses, inquiries and correspondence related to this RFP, including all reports, charts, displays, schedules, exhibits, and other documentation produced and submitted by the vendor as part of the response, shall become the property of Trillium once submitted.

Based on an evaluation of the responses received, vendors may be asked to participate in interviews and/or site visits to support and clarify or present additional information. Trillium will make every reasonable attempt to schedule each presentation at a time and location that is agreeable to the vendor.

## 2. GUIDELINES FOR RFP PARTICIPATION

### 2.1. RFP SUBMISSION

The contract award resulting from this RFP will be based upon the most responsive vendor whose offer will be the most advantageous to Trillium in terms of overall current and future functionality needs, quality, cost/price, service, and factors as specified by the requesting business unit. Trillium reserves the right to accept or reject a bid and to thereafter enter negotiations with the selected vendor that is in the best interests of Trillium, in its sole discretion and without recourse to any bidder.

NOTE: Trillium reserves the right to:

- ▲ Discontinue this bid process without obligation or liability to any potential suppliers
- ▲ Reject any or all offers
- ▲ Accept the most responsible bid even if it is not the lowest price offered
- ▲ Award a contract on the basis of initial offers received, without discussions or request for best and final offers

## 3. QUESTIONNAIRE

### 3.1. OVERVIEW

- 3.1.1. Please provide detail on your company size, location, and type of offices (headquarters, regional, etc.). Include location of the office(s) from which services will be provided.
- 3.1.2. Please indicate the number of years your company has been in service providing platform development/execution services.
- 3.1.3. Please describe the ways your product is compliant with:
  - 3.1.3.1. NCQA requirements; list the NCQA accreditations that your platform supports or has been audited for
  - 3.1.3.2. HIPAA requirements

## 3.2. BUSINESS CAPABILITIES

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- 3.2.1. Please estimate the following as it pertains to the current use of your platform to manage Integrated Health and Behavioral Health plans or I/DD populations, programs, or benefits.
- 3.2.1.1. Total number of active customers that use your platform for I/DD and total number for Behavioral Health services
  - 3.2.1.2. Total number of active customers that use your platform for I/DD and total number for Behavioral Health services as a percent of total business
- 3.2.2. What percentage of your customers operate solely in the Behavioral Health plan space or solely in the I/DD space?
- 3.2.3. For the capabilities listed below, provide the following information:
- 3.2.3.1. Identify which capabilities are included in your “out-of-the-box” single platform solution offering, i.e. integrated applications housed on a single/integrated database or data model without the need of special customization and/or bolt-on software.
  - 3.2.3.2. Provide a detailed description of the capabilities included in your “out-of-the-box” single platform solution offering.
  - 3.2.3.3. Explain how evidenced-based practices and other industry standards (i.e. HEDIS measures), as it relates to managing care for members with complex behavioral needs, have been incorporated in your “out-of-the-box” single platform solution offering.
  - 3.2.3.4. Provide a detailed description of your platform’s Health Insurance Portability and Accountability Act (HIPAA) compliance design, implementation, or audit validations including compliance for remote users or web portal access.
- 3.2.4. The design for care management being implemented in North Carolina includes the provision of care management by managed care organizations such as Trillium who will also manage a network of entities providing care management to Trillium’s members.

- 3.2.4.1. In your response, please describe how your platform solution will support Trillium and its network of care management entities to deliver care management to service recipients as well as allowing Trillium to effectively manage its care management provider network members.
- 3.2.5. Provide a detailed description of your platform’s software design architecture and how it supports modular or phased implementation and “buy only what you need” software, services, or configuration.
- 3.2.6. Provide a detailed description of your platform’s internal and external data sharing capabilities including:
- 3.2.6.1. Any software, add-ons, or third party applications required to enable external data sharing.
- 3.2.6.2. The use of RESTful APIs or other secure data sharing methods.
- 3.2.6.3. The level of skill and effort required by Trillium staff to create, maintain, and monitor external data sharing processes.
- 3.2.6.4. External connection requirements such as VPN, IP Whitelist, or any other data exchange prerequisites or limitations.
- 3.2.7. Provide a detailed description of your platform’s hosted or on-premise architecture, offerings, and options along with any special criteria that should be considered when choosing on-premise or cloud implementation.

CAPABILITY	INCLUDED “OUT-OF-THE-BOX”
Risk Stratification	<input type="checkbox"/>
Initial Population Screenings	<input type="checkbox"/>
Assessment of Social Determinants of Health and other Behavioral Health Needs	<input type="checkbox"/>
Health Risk Assessment or Comprehensive Needs Assessment for MH/SU/IDD populations	<input type="checkbox"/>
Care Plan Development for MH/SU/IDD populations	<input type="checkbox"/>
<b>Customer Service</b>	
Contact Center Platform	<input type="checkbox"/>
Member Portal	<input type="checkbox"/>
Provider Portal	<input type="checkbox"/>

CAPABILITY	INCLUDED "OUT-OF-THE-BOX"
<b>Contract Management</b>	
Provider Contract Management	<input type="checkbox"/>
Professional Services Contract Management (e.g. non-provider, 3rd party vendor contracts)	<input type="checkbox"/>
<b>Workflow Management (e.g. automated emails and notifications)</b>	<input type="checkbox"/>
<b>Quality Management</b>	<input type="checkbox"/>
<b>Utilization Management</b>	<input type="checkbox"/>
<b>Reporting &amp; Analytics</b>	
Report Automation	<input type="checkbox"/>
Data Visualization	<input type="checkbox"/>
Platform Data Export (e.g. statistical tools/software)	<input type="checkbox"/>

- 3.2.8. Do you provide other relevant services, not listed above, that should be noted here? (Please specify.)
- 3.2.9. As a part of the RFP process, Trillium is requesting screenshots of the platform in use to get a preliminary understanding of the user interface design, general usability, and functionality. As such, please provide 1-2 screenshots of the following screens:
- 3.2.9.1. Member information screen(s)
  - 3.2.9.2. Provider information screen(s)
  - 3.2.9.3. Assessment or Screening screen(s)
  - 3.2.9.4. Care Plan screen(s)
- 3.2.10. Has your organization created custom code for the workflow management module of your platform? If so, please estimate the percentage of your customers for which you have created customized code for Behavioral Health and I/DD specific workflows (e.g. crisis management).
- 3.2.11. Trillium has an interest in understanding the flexibility and robustness of your platform's on-demand reporting capabilities. Please provide 2 to 4 screenshots



showing the sample fields that a report/pivot can be based off for the following functions:

- 3.2.11.1. Task List for Care Manager or Care Team members
  - 3.2.11.2. Member Needs / Task list or Dashboard
  - 3.2.11.3. Organizational level dashboard for Health Home care management agencies
- 3.2.12. Trillium has system users that require access to the platform remotely. Please indicate the following:
- 3.2.12.1. Does the application allow for mobile tablet/PC access?
  - 3.2.12.2. Are there any capabilities that work in an offline mode? If so, please list.
- 3.2.13. Does your organization provide Business Process Outsource (BPO) services? If so, does Trillium have the option to use an onshore model? If not, do you partner with a specific 3rd party BPO provider? (Please specify.)

### 3.3. TECHNICAL REQUIREMENTS

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- 3.3.1. Do you offer cloud-based solutions? If so, what percentage of your customers use your cloud-based platform? (Please define "cloud-based" in your organization to include data center-based application moved to hosting provider or natively written applications based on AWS, Azure, or other cloud platforms.)
- 3.3.2. For your cloud hosted clients, do you provide a SSAE 16 or similar reports? If so, please provide additional details, if you are able to share these reports with Trillium in potential future diligence conversations.
- 3.3.3. Do you have experience configuring Electronic Data Interchanges (EDIs) with the North Carolina Department of Health and Human Services (NCDHHS) and its NCTracks, NCHIE, NCCARE360, or other platforms?
- 3.3.4. Does your "out-of-the-box" platform support direct data feeds from other systems? Explain this capacity and capability including any special configuration or additional modules required.
- 3.3.5. Does your "out-of-the-box" platform support the authorization of Durable Medical Equipment, Non-Emergency Medical Transportation and Personal Care Services?

- 3.3.6. Is the administrative platform created on a script-based or rules-based engine? If rules-based, please provide a screenshot of a sample rules set and/or a rule definition screen for the claims adjudication.
- 3.3.7. Trillium has to manage provider contracts that fall under capitated and other types of payment arrangements. Please indicate which of the following payment arrangements your “out-of-the-box” platform supports without the need of custom code.
- 3.3.7.1. Capitated payments
  - 3.3.7.2. Fee-for-Services
  - 3.3.7.3. Case Rates
  - 3.3.7.4. Bundled Payments
  - 3.3.7.5. Please list any other supported payment methodologies not listed above
- 3.3.8. Does your “out-of-the-box” platform allow for single sign-on verification using Microsoft Active Directory services?
- 3.3.9. Does your platform support tiered security access for 3rd party users (e.g. delegated entities, providers, contractors) including Multi Factor Authentication?
- 3.3.10. Does your platform user interface support remote and/or VPN user access?
- 3.3.11. Do you provide other relevant technology solutions tailored for Behavioral Health or I/DD population benefits or products, not listed above, that may differentiate your solution? (Please specify.)
- 3.3.12. What percentage of your application is API accessible or API driven, and are the APIs open to customer’s development resources?
- 3.3.13. Have any of your customers serving less than 100,000 members suffered from scalability and/or system performance challenges? If so, please briefly describe the representative issues that may exist below that member threshold.
- 3.3.14. In the event that Trillium’s business needs to quickly ramp up (e.g. within a two month period) to accommodate a quadrupled membership, please list some of the key planning considerations and/or solution constraints that need to be managed to accommodate for this change.

### 3.4. IMPLEMENTATION AND SUPPORT SERVICES

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- 3.4.1. Using the assumptions/guidelines listed below, is a six month time frame for implementation realistic for your company? If not, please specify your concerns with this time frame.
- 🌱 Single system implementation (i.e. multiple source systems are not being consolidated onto this future platform)
  - 🌱 One line of business (I/DD and possibly Behavioral Health)
- 3.4.2. For other clients of yours at a similar size and complexity as ours, have you successfully completed implementations in less than a 12 month period? If yes, please state the number in the most recent 12 months.
- 3.4.3. Does your company serve as the primary implementer for the solution platform? If not, do you partner with a specific 3rd party provider? (Please specify.)
- 3.4.4. Do you provide ongoing in-house support in the following areas? If not, do you partner with a specific 3rd party provider? (Please specify.)
- 3.4.4.1. Application development
  - 3.4.4.2. Benefit and Plan configuration
  - 3.4.4.3. Member Assessment customization
  - 3.4.4.4. Adding Standardized Assessments to the platform
- 3.4.5. Trillium is interested in understanding how autonomously we will be able to manage the platform on an ongoing basis. Please indicate the approximate percentage of your current customers that independently perform “basic” modifications and/or configurations (e.g. business workflow rule setting) to the platform without engaging you, the platform vendor, and/or a 3rd party service provider.
- 3.4.6. Please indicate the approximate percentage of customers that independently perform “**advanced**” modifications and/or configurations (e.g. creation of a new D-SNP benefit plan) to the platform without engaging you, the platform vendor, and/or a 3rd party service provider.

3.4.7. Please describe the provided platform training materials and provide screenshots where possible:

3.4.7.1. End-user training materials (e.g. Trillium “train-the trainer”, provider communication and training materials, etc.)

3.4.7.2. Hands-on demo training environment/modules

3.4.7.3. Provided after major system upgrades

### 3.5. GOVERNANCE AND COST

3.5.1. To help Trillium better evaluate the platform solution in offering for 18,000 members plus or minus 10%, please provide directional costs in the Pricing Grid (below) according to the following pricing assumptions and the business/technical capabilities outlined previously.

3.5.2. In addition, define and describe any issues, costs, system constraints, external requirements or other factors that may impede the system or your organization supporting a 10X membership growth to care manage 180,000 members.

3.5.3. Please describe the pricing impacts of growing the care managed population to 180,000. Alternatively, if you have standard pricing information that you would prefer to send, please feel free to do so.

Fill out the pricing matrix below for the technologies and services you are proposing and restate any assumptions about the solution you are proposing. Please indicate any additional pricing options that may exist. If you’re including any other services, please list here and provide associated costs.

Pricing Grid		
Cost Description	Cost	Assumptions / Additional Info
Implementation (Break out phases if applicable.)		
Ongoing PMPM Cost Approximation (Membership minimums and/or pricing tiers)		
License Purchase Cost Approximation (If the option is available)		
Upgrades/Ongoing Maintenance (Annual fee or percentage)		

Pricing Grid		
Cost Description	Cost	Assumptions / Additional Info
4 X Growth impacts on pricing		
10 X Growth impacts on pricing		
Other Pricing Factors		
Alternative Pricing Arrangements		

#### 4. ADMINISTRATIVE

Vendor must submit the response in writing using the provided [Microsoft Excel \(.xlsx\) workbook](#). Response should be sent via email to [Procurements@TrilliumNC.org](mailto:Procurements@TrilliumNC.org).

Responses to his RFP, dated August 13, 2019, will be evaluated immediately upon return or by August 31, 2019. All vendors will be notified, in advance, of a possible meeting with our evaluation team at our office, if required.

##### 4.1. TIMELINE OF EVENTS

Event	Date
Request For Proposal Distribution	August 13, 2019
Question Period Deadline	August 20, 2019
RFP Response Deadline	September 4, 2019
Vendor Selection On Or Before	September 16, 2019
Pre-Implementation Activities	Immediately Following Selection
Contract Executed	October 2019
Target Implementation	Q2 2020

Responses to the RFP are to be delivered to the Trillium contact no later than 5 PM ET September 4, 2019. Responding companies will be asked to continue or exit the process based on the assessment of information received in the RFP.

Based on an evaluation of the proposal responses received, vendors may be asked to participate in interviews and/or site visits to support and clarify their proposals.

Upon invitation and acceptance to participate in demonstrations, vendor(s) will receive detailed demonstration scripts and supplemental questions. Vendor(s) must be prepared to demonstrate how their proposed solution will meet Trillium's requirements using the provided demonstration scripts. In addition, responses to all supplemental questions must be prepared by the demonstration date.

Vendors should not attempt to contact any of Trillium's personnel unless specifically requested by Trillium. Failure to comply may result in disqualification from the selection process.

## 4.2. CONTACT INFORMATION

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Please direct questions, comments and responses concerning this RFP to:  
[Procurements@TrilliumNC.org](mailto:Procurements@TrilliumNC.org) .