Request For Proposal

Individual Placement and Support-Supported Employment

November 5, 2025

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.

Trillium
HEALTH RESOURCES
Transforming Lives. Building Community Well-Being.

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EXECUTIVE SUMMARY

Trillium Health Resources is a Tailored Plan and Managed Care Organization (MCO) that oversees publicly funded behavioral health, substance use, and intellectual/developmental disability services for 46 counties in North Carolina. The mission of Trillium Health Resources is "Transforming lives and building community well-being through partnership and proven solutions."

The purpose of this Request for Proposal (RFP) is to invite service providers to increase access to Individual Placement and Support-Supported Employment (IPS-SE) in Bertie, Camden, Chowan, Currituck, Dare, Gates, Hertford, Hyde, Martin, Northampton, Pasquotank, Perquimans, Tyrell and Washington counties. Trillium is seeking applicants who are culturally sensitive, linguistically appropriate, and reflect the needs and cultural preferences of the various cultural groups within our region in both urban and rural settings.

GENERAL/BACKGROUND INFORMATION

Trillium has identified a need for an IPS-SE Provider for Bertie, Camden, Chowan, Currituck, Dare, Gates, Hertford, Hyde, Martin, Northampton, Pasquotank, Perquimans, Tyrell and Washington counties.

IPS-SE is a person-centered, evidenced based service that supports beneficiaries 16 years and older who have severe and persistent mental illness, serious mental illness, serious emotional disturbance and/or severe substance use disorder in securing competitive integrated employment. This service is provided by Employment Support Professionals (ESPs) and Employment Peer Mentors (EPMs) who are trained in national research standards that support the vocational needs of individuals and promote community connections and employment success.

The IPS-SE model requires behavioral health integration. The ideal provider would already be established and offer a continuum of adult behavioral health services such as Assertive Community Treatment, Community Support Team, Psychosocial Rehabilitation and Outpatient services. Per the IPS-SE fidelity model the behavioral health team and IPS-SE team will have a shared caseload and participate in weekly integrated team meetings.

IPS-SE is funded by the NC Core Milestone payment model. In a Milestone payment model, the provider is paid when the beneficiary completes defined Milestones towards gaining and maintaining competitive integrated employment. This is different than the traditional fee-for-service model that is billed based on duration of service.

The NC Core model includes braided reimbursement from Trillium Health Resources and the Division of Employment and Independence for People with Disabilities (EIPD), each funding specific Milestones. IPS-SE providers are required to contract with EIPD prior to providing and billing IPS-SE services. Each individual served by the IPS-SE team must be referred to EIPD as a shared case. The IPS-SE team and the local EIPD office(s) will participate in monthly meetings to coordinate services.

It is essential that IPS-SE providers practice a zero-exclusion philosophy, meaning "readiness factors" to employment are NOT applicable and should not prevent an individual from seeking employment. "Readiness factors" include but are not limited to: active substance use, transportation barriers, personal appearance/hygiene, mental health symptoms, physical health, treatment/medication adherence, and legal history/criminal activity.

IPS-SE is a focus of the Department of Justice Settlement Transition to Community Living (TCL) Initiative. The State of North Carolina must ensure individuals with disabilities are giving choices on where they live and to participate in activities that are meaningful to them. NC DHHS, Tailored Plans and Providers work in conjunction to ensure access to community-based services that support individual autonomy and promote opportunities for community inclusion such as employment. There is oversight at the Federal, State and Tailored Plan levels to ensure adherence to the Settlement and to accomplish defined outcomes. Oversight activities include (but are not limited to) monthly and quarterly data reporting, participation in monthly meetings with all stakeholders and increased monitoring of services.

Individual Placement and Support – Supported Employment (IPS-SE) is available under the 1915(i) Medicaid Benefit Plan. To access IPS-SE, individuals must meet specific eligibility criteria and follow a structured process:

1. **Eligibility Assessment**

   A Care Manager conducts a 1915(i) assessment to determine the individual's eligibility for 1915(i) services. This assessment is submitted to Carelon, the North Carolina Medicaid contractor, for review and determination.

2. **Care Plan**

   Upon confirmation of 1915(i) eligibility, the Care Manager collaborates with the individual to develop a Care Plan. This plan includes the service order for IPS-SE and must be completed prior to the initiation of services.

In accordance with 1915(i) regulations, Care Management must be conflict-free. This means the Care Manager responsible for assessment and care planning must not be affiliated with the IPS-SE provider delivering the service.

New IPS-SE Programs must participate in a baseline fidelity review after a minimum of six consecutive months of continuous operation.

New IPS teams that do not have the required staffing or are serving less than 20 beneficiaries after six months of continuous operation shall meet with DHHS and PIHP staff to review the barriers to completing a baseline fidelity evaluation.

For additional information, please reference the IPS-SE, Clinical Coverage Policy 8H-2 and the Supported Employment Fidelity Review Manual. Also, please reference the NC Core Milestones and Expectations document, which includes rates and is posted with this RFP.

COMPLIANCE

Trillium will work closely with the selected provider(s) to ensure services are being provided in accordance with Medicaid 1915(i) Clinical Coverage Policy 8H-2. The provider will participate in monitoring by Trillium's Network staff and ongoing fidelity reviews to ensure adherence to the model.

Providers will be responsible for adhering to the following requirements:

1. Meet provider qualifications established by the North Carolina Division of Mental Health, Intellectual/Developmental Disabilities and Substance Abuse Services (DMH/IDD/SAS)
2. Fulfill the requirements of 10A NCAC 27G
3. Established as a legally constituted entity capable of meeting all the requirements of the provider certification, communication bulletins, and service implementation standards
4. Comply with all applicable federal and state requirements. This includes the North Carolina Department of Health and Human Services statues, rules, policies, communication bulletins, and other published instructions
5. Comply with the North Carolina Health Information Exchange Authority (NC HIEA) Healthcare provider information exchange guidelines and implementation timelines documented here https://hiea.nc.gov/
6. IPS-SE Clinical Coverage Policy 8H-2, published January 1, 2025
7. APSM 45-2 "Records Management and Documentation Manual"
8. APSM 95-2 "Client Rights Rules in Community Mental Health Developmental Disabilities and Substance Abuse Services"
9. 42 DFR, PART 2
10. HIPAA
11. Accreditation standards
12. Any applicable local, state, and federal regulations
13. The Trillium Health Resources Provider Manual

Selected applicant MUST agree to:

1. Meet with Trillium Health Resources Practice Management team for an overview of IPS-SE services, NC Core Milestones and the Department of Justice Transition to Community Living Settlement Agreement requirements.
2. Attend an interest meeting with all IPS- SE stakeholders, including DMH, DHB, EIPD, and UNC, to gain a comprehensive understanding of each entity's roles and responsibilities.
3. Submit an application to contract with the Division of Employment and Independence for People with Disabilities.
4. Complete steps to demonstrate readiness to provide IPS-SE:
   a. Hire and/or train required staff
   b. Obtain equipment needed and/or a service location (office space) for provision of services.
   c. Develop protocols/procedures in provider agency's standard format to ensure that IPS-SE is provided in compliance with Clinical Coverage Policy.
5. Provide **weekly** updates on progress to the Trillium Project Manager until the project is complete and provision of services has been initiated.

If the selected provider is unable to comply with the award/contract requirements, Trillium Health Resources has the right to terminate the agreement and/or the contract for IPS-SE and recoup funds, if applicable.

TIMELINE/SCHEDULE REQUIREMENTS

Timeline

****All timelines are tentative and subject to change. It is important for interested applicants to check Trillium's website for updates.*

Question & Answer (Q&A) Submission Deadline Please use the **Questions** link to submit any questions.	November 21, 2025
Q&A Results Posted on Trillium's Website	December 5, 2025
Submission Deadline	December 31, 2025
RFP Award Notification	January 16, 2026

ELIGIBILITY REQUIREMENTS

Applicants must meet the following requirements:

- Applicant must be a current, in network (contracted) provider or an out of network provider that is successfully delivering IPS-SE services within North Carolina.
- Applicant must be directly enrolled with Medicaid and have their own Medicaid National Provider Identifier (NPI) number. This includes enrollment in NC Tracks.
- Experience in operating successful mental health programs.
- Adherence to all program, staffing and training requirements set forth in the IPS-SE Clinical Coverage Policy 8H-2.
- Meet the provider qualification policies, procedures, and standards established by the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS.)
- Fulfill the requirements of 10A NCAC 27G.
- Be capable of meeting all contractual requirements, Communication Bulletins, and service implementation standards.
- Comply with all applicable federal and state requirements. This includes the North Carolina Department of Health and Human Services statutes, rules, policies, and communication bulletins, and other published instructions.
- Without sanction(s), including but not limited to the following:
    1. LME/MCO: Contract termination or suspension, referral freeze, unresolved Plan of Correction, outstanding overpayment, prepayment review, and/or payment suspension.
    2. DHB: Contract termination or suspension, prepayment review, and/or outstanding final overpayment.
    3. DMH/DD/SAS: Revocation and/or unresolved Plan of Correction.
    4. DHSR: Unresolved Type A or B Penalty under Article 3, Active Suspension of Admissions, Active Summary Suspension, Active Notice of Revocation or Revocation in Effect.
    5. US Internal Revenue Service or NC Department of Revenue: Unresolved tax or payroll liabilities.
    6. NC Secretary of State: Administrative Dissolution, Revocation of Authority, Notice of Grounds for other reason, and/or Revenue Suspension. Providers organized as a corporate entity must have a "Current – Active" registration with the NC Secretary of State.

- Adherence to all programming, staffing, and training requirements set forth in 10A NCAC 27G.

Preferred Provider Qualifications include but are not limited to:

- National accreditation with at least one of the designated accrediting agencies. Please note that national accreditation is required within a year of enrollment of the service.
- Established comprehensive service array, providing services such as Assertive Community Treatment, Community Support Team, Psychosocial Rehabilitation and Outpatient services.
- Experience serving the Transition to Community Living population.
- Operate from a Recovery Focused perspective.
- Knowledge and experience with the Division of Employment and Independence for People with Disabilities.

FORMATTING REQUIREMENTS

Trillium's goal is to review all proposals. However, this goal must be balanced against Trillium's obligation to ensure equitable treatment of the proposals received. For this reason, Trillium has established the following formatting requirements. If you do not adhere to these requirements, your proposal may be screened out.

- All proposals must be submitted electronically through this link: Submit Proposal.
- Attached pages should be clearly labeled and numbered consecutively from beginning to end so that information can be located easily.
- Proposal should be typed and clearly legible.

REQUIRED PROPOSAL COMPONENTS

- **Cover Letter (Attachment A)**
  - Summary of proposed project and intent to submit proposal, including the counties in which you intend to deliver services.
  - Summary description of strategy/plan and how it meets project goals and measurable objectives.
  - The Cover Letter must be signed by an **officer** of the company.
  - Sanction disclosure.

- **Project Narrative, including all 5 sections listed below and supporting documentation, as needed.**
  - Section B (Attachment B): Company/Organizational Information
    - Description of the company and its professional history as it relates to the services sought under this RFP, including the provision of IPS-SE and/or behavioral health services and service location(s).
    - Complete copies of the organization's last fiscal year's financials including the audit opinion, the balance sheet, statements of income, retained earnings, cash flows, management letters, and the notes to the financial statements OR;
    - If independently audited financial statements do not exist, the provider/vendor should state the reason and submit sufficient information to be evaluated.
  - Section C (Attachment C): Project Plan
    - Description of what is being proposed and how it will be accomplished, as related to the intent of the RFP and proposed performance measures.
    - Schedule/timeline for the service or project, which will serve as the basis for monitoring progress and adjusting activities as necessary, including:
      - All activities required to accomplish the key objectives of the project
      - Target dates for the proposed activities, where appropriate.
      - Information on the proposed start and completion dates of the key objectives and activities.
    - Describe your agency's understanding of conflict free care management and the process for 1915i eligibility determination
    - Describe your agency's plan for behavioral health integration.
    - Share your strategy for referrals to IPS-SE given the 1915i eligibility requirements and the requirements to build a caseload of at least 20 individuals within the first six months of program launch.
    - Share any experience your agency has with implementing evidence-based models and participating in fidelity reviews.
    - Share your agency's beliefs about recovery and employment.
  - Section D (Attachment D): Personnel
    - Provide comprehensive chart of personnel positions for the project/service, including the CEO any other executive/leadership positions, to reflect the role of each position, their level of effort and qualifications.

- Please include job descriptions for the following required staff members: IPS Team Lead, Employment Support Professional, Employment Peer Mentor, Benefits Counselor and Program Assistant.

Section E (Attachment E): Budget

- Line-Item Budget
  - The budget should be complete and include all the costs of any personnel, supplies, and activities required by the service or project.
  - Ensure that the service or project is feasible within the budget created.
  - Make sure the budget is reasonable and is based on actual costs.
  - Budget should include anticipated revenue.

- Detailed Budget Narrative
  - The budget narrative must describe each budget item and relate it to the appropriate service/project activity.
  - The narrative must closely follow the content of the line-item budget and provide justification for all proposed costs listed in the budget (particularly, supplies, travel, and equipment) and demonstrate that they are reasonable.
  - The narrative must explain how any fringe benefits were calculated, how any travel costs were estimated, why particular items of equipment or supplies must be purchased, and how overhead or indirect costs, if applicable, were calculated.

- The Budget Summary Form, posted along with this RFP, may be used as the Line-Item Budget, and may be used to summarize all costs and expenses. However, providers are not required to use the Budget Summary Form.

PROPOSAL EVALUATION INFORMATION

- All proposals will be reviewed for compliance with the mandatory requirements stated within the RFP. Proposals deemed incomplete may be eliminated from further review.
- The (Network Development Coordinator or appointed person) may contact the Provider/Vendor for clarification of any response.

- Complete proposals will be evaluated on the factors that have been assigned a point value. The proposal will be reviewed and scored according to the quality of response to the requirements in Sections A-E.

  The responsible Provider(s) with the highest score(s) will be selected as a finalist or the finalist based upon the proposals submitted.
- It is Trillium's intent to award this service to the most qualified applicant, though Trillium reserves the unlimited right to not make an award based on this RFP
- Finalist Providers may be asked to submit revised proposals or make a presentation for the purpose of obtaining best and final offers. If so, points will be recalculated accordingly, and points awarded will be added to the previously assigned points to attain final scores.
- The responsible Provider whose proposal is most advantageous to Trillium, taking into consideration the evaluation factors, will be recommended for contract award. Please note, however, that a serious deficiency in the response to any one factor may be grounds for rejection regardless of overall score.
- Recommendations are made to Executive Management who have the final decision-making authority.

ADMINISTRATIVE INFORMATION

- **Award Notices**

  Selected providers will be notified in writing, and the award notification will be posted on Trillium's website.

- **Administrative Requirements**

  The organization awarded the RFP must comply with all terms and conditions of the awarded contract.

The awardee will be held accountable for the information provided in the proposal relating to performance targets. Trillium will consider the organization's progress in meeting goals, objectives and schedules based on the contracted criteria. Failure to meet stated goals, objectives and schedules may result in suspension or termination of the contract, or in reduction, withholding and/or repayment of funding.

TRILLIUM CONTACT INFORMATION

Please send any questions about this RFP through the Questions link prior to the Q & A Submission deadline.