

## Questions & Answers

- 1. Has there been an established rate per unit or is that part of the RFP budget?-**

*DMH has not published a rate per unit.*

- 2. Will there be any flexibilities for disclosures like with Tailored Care Management? For example, Case Manager is trying to get up with client and is unable due to no working number. Would they be able outreach a current provider or primary care provider without a release of information?**

*Providers must follow the published service definition once approved.*

- 3. Can you clarify how the caseload will be managed with a team caseload of ratio of 1:50 and the licensed clinician with 1:10 and other staff at 1:20 ratios. Is the caseload more managed as a team caseload approach with team members outreaching and assisting with all clients being served?**

*Providers must follow the published service definition once approved.*

- 4. How many members do you anticipate will be in need of this service?**

*Trillium has not identified an exact number of members needing this service. CCM is episodic in nature and recipients eligible for CCM will be identified and referred to the provider to begin services.*

- 5. PORT Health is also a contracted Care management Agency for Tailored plan members. Would a provider if awarded the state funded case management services be able to combine these two services within the organization in order to maximize internal infrastructure, leadership and resources or is the MCO expectation to operate as a separate unit?**

*Providers must comply with the Tailored Care Management Standards, Terms and Conditions and Provider Manual as well as the service definition. Providers must remain in compliance with all staffing ratios.*

- 6. What is the expected amount of patients that you think will qualify for the service?**

*Trillium has not identified an exact number of members needing this service. CCM is episodic in nature and recipients eligible for CCM will be identified and referred to the provider to begin services.*

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**7. Is there a breakdown by county of patients receiving state funded services?**

*The total number of SF recipients enrolled with Trillium changes daily. Membership count as of June 2023 is around 13,300 Adult recipients with BH diagnosis. The top 5 counties are: New Hanover, Pitt, Onslow, Brunswick & Craven.*

**8. Since this service is being funded by non ucr if money runs out prior to the end of the fiscal year is the selected provider expected to continue the provision of services without pay?**

No

**9. The Case Management plan isn't past due until 30 days. Can you submit a TAR with the CCA within the 14 day due date without the plan?**

*Upon service launch, providers will need to follow the published Trillium Benefit Plan with UM guidelines.*

**10. What are the requirements to be considered a possible provider for these services?**

*Providers must follow the published service definition once approved*