NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES

Children and Families Specialty Plan Care Management Overview For Local Health Departments

Sept. 10, 2025

Agenda

- Children and Families Specialty Plan Program Overview
- Transition of Care
- Questions and Answers

Children and Families Specialty Plan Program Overview

Children and Families Specialty Plan Overview

Children and Families Specialty Plan (CFSP)

CFSP is a new North Carolina (NC) Medicaid Managed Care health plan. It is a single, statewide health plan that will be managed by Blue Cross and Blue Shield of North Carolina under the name **Healthy Blue Care Together.**

NC Medicaid beneficiaries in foster care, receiving adoption assistance and enrolled in the former foster care eligibility will be eligible for the Children and Families Specialty Plan.

CFSP will launch Dec. 1, 2025. Until then, potential beneficiaries will continue to get health care services the same way they do today – through NC Medicaid Direct.

The plan will cover a full range of physical health, behavioral health, pharmacy, Non-Emergency Medical Transportation (NEMT), care management, long term services and supports (LTSS), Intellectual/Developmental Disability (I/DD) services and unmet health-related resource needs.

Unique components of CFSP

- Single statewide contract to lessen disruptions in continuity of care and maintain treatment plans when a members' geographic location changes.
- Significant coordination between NC Medicaid, NC Department of Social Services, local Departments of Social Services (DSS) and the Easten Band of Cherokee Indians Family Safety Program will be required to successfully administer the program.
- A family-focused approach to care delivery to strengthen and preserve families, prevent entry and reentry into foster care and support reunification and other permanency plan options.
- Benefits include all NC Medicaid State Plan benefits covered by Standard Plans and most Tailored Plan benefits including 1915(i) services.
- Care Management model connecting local DSS with CFSP, Medicaid and significant Care Coordination requirements (including co-location).

Eligibility

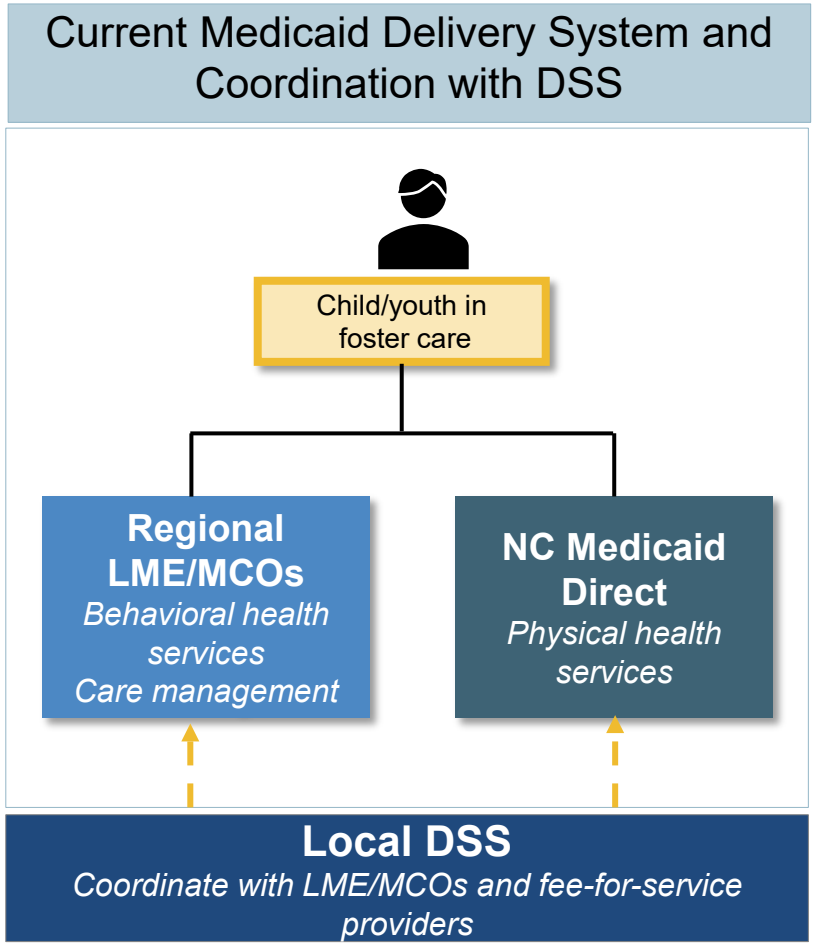
NC Medicaid beneficiaries in foster care, receiving adoption assistance and enrolled in the former foster care eligibility will be eligible for the Children and Families Specialty Plan.

This includes:

- Children and youth currently in foster care
- Children and youth currently receiving adoption assistance
- Young adults under age 26 formerly in foster care at age 18
- Former foster care children in North Carolina that turned age 18 on or before December 31, 2022
- Former foster care children in any state who turned age 18 on or after January 1, 2023
- Minor children of these populations
- Children and youth currently in the EBCI Family Safety Program, or meet the criteria above, will not be auto-enrolled in the Children and Families Specialty Plan but will have the option to enroll

Designed to Address Current System Challenges

Children and youth served by the child welfare services receive Medicaid services through a split system of care, which has created challenges around coordination and meeting the population's unique needs.



- **Disruptions in continuity of care and providers** due to population's frequent movement between placements.
- **Lack of service coordination, impeding timely access to care,** due to transitions between various regional entities; no one entity is accountable for provision of whole-person care and care coordination.
- **Challenges meeting needs of children and youth in foster care with complex physical and behavioral health or I/DD needs,** resulting in restrictive residential or out-of-state placements.
- **Limited focus on unique needs of populations exposed to Adverse Childhood Experiences and provision of trauma-informed care** as part of health care service delivery and care management.
- **Limited array of available community-based services** across the state to support children remaining in family settings or the least restrictive setting possible.

CFSP Program Objectives

With stakeholder input, the Department identified a set of key objectives to guide CFSP design, operations and oversight as outlined in the CFSP Request for Proposal (RFP).

CFSP Design Objectives

- **Improve members' current and long-term physical and behavioral health outcomes**
- **Increase access** to physical health, behavioral health, pharmacy, care management, LTSS and I/DD services and services to address unmet health-related resource needs
- **Strengthen and preserve families** – prevent entry into foster care and support reunification and other permanency plan options
- **Coordinate care and facilitate seamless transitions** for members who experience changes in treatment settings, child welfare placements, transitions to adulthood and/or loss of Medicaid eligibility
- **Improve coordination and collaboration** with local DSS, EBCI Family Safety Program and more broadly, with Community Collaboratives – a comprehensive network of community-based services and supports leveraging a system of care approach to meet the needs of families who are involved with multiple child service agencies
- Provide services to meet children's behavioral health needs and **prevent children from boarding/ temporary housing in local DSS offices and Emergency Departments**
- **Advance health equity** to address racial and ethnic disparities experienced by children, youth and families served by child welfare services

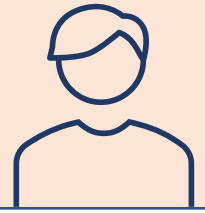
Current Medicaid Enrollment Options

Most children, youth and young adults currently and formerly served by the child welfare services will continue to receive their Medicaid services as they do today, through NC Medicaid Direct.*

Children in Foster Care

Children Receiving Adoption Assistance

Former Foster Care Age 26 and Under



will continue to be enrolled in NC Medicaid Direct

NC Medicaid Direct is the State's health care program for Medicaid beneficiaries not enrolled in a Standard Plan, Tailored Plan or EBCI Tribal Option.

It provides beneficiaries with physical health, pharmacy, long term services and supports, and behavioral health services (including for mental health disorder, substance use disorder (SUD), intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).

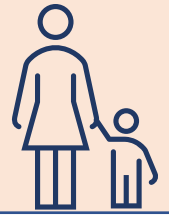
*Children in foster care, receiving adoption assistance and young adults formerly in foster care under age 26 who are enrolled in the Innovations waiver or Traumatic Brain Injury (TBI) waiver will be auto-enrolled in a Tailored Plan.

Current Care Management Options

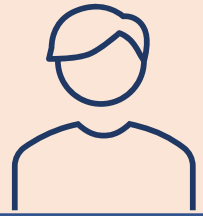
Most children, youth and young adults currently and formerly served that meet criteria previously described will continue to receive care management as they do today.

Children in Foster Care

Children Receiving Adoption Assistance



Former Foster Care Age 26 and Under



Not Tailored Care Management-Eligible

These children and youth will continue to receive care coordination/care management through CCNC, CMARC, or CMHRP.

Tailored Care Management-Eligible

These children and youth will receive Tailored Care Management through an LME/MCO.*

Individuals eligible for Tailored Care Management include those with a serious mental illness (SMI), a serious emotional disturbance (SED), a severe SUD, an I/DD, or those who are receiving services for a TBI

*Some children and youth may receive Tailored Care Management through provider-based care management.

Day 1 Priorities for CFSP Launch

Individuals get the care they need

Providers can submit claims for payment to CFSP

Members can access necessary medications

Members are enrolled and have ID cards in hand prior to launch

Members have timely access to information and are directed to the right resources

CFSP has adequate Provider Networks per contract definition

Calls made to call centers are answered promptly

Transitions of Care/Warm Handoffs

Transition of Care Sub-sections

- Key Terminology
- Transition of Care Process
- Timeline for Children and Family Specialty Plan Launch
- Expectations at Children and Family Specialty Plan Launch (Care Management for At-Risk Children/Care Management for High-Risk Pregnancies)
- Warm Handoff Overview
- Transition of Care Forms

Terminology / Definitions

- **Transition of Care (TOC):** The process in which a beneficiary's healthcare coverage moves between service delivery systems, including between health plans where NCDHHS intends to maintain continuity of care for each member and minimize the burden on providers during the transition.
- **NC Medicaid Direct:** North Carolina's health program for Medicaid beneficiaries who are not enrolled in Standard Plans, Eastern Band of Cherokee Indians (EBCI) Tribal Option or Tailored Plans.
- **Children and Families Specialty Plan (CFSP):** A managed care plan specifically designed to provide targeted care for individuals in foster care, receiving adoption assistance and former foster care youth.
- **Healthy Blue Care Together (HBCT):** The health plan that will be administering the CFSP.
- **Community Care of North Carolina (CCNC):** A Primary care case management entity that serves Medicaid beneficiaries who are enrolled in NC Medicaid Direct.

Terminology / Definitions Cont'd.

- **Crossover period:** Timeframe immediately before & after the implementation date of the care delivery system.

- **Transferring Entity:** The entity that is disenrolling the transitioning member and transferring the member's information.

- **Receiving Entity:** The entity that is accepting the member's information and enrolling the member into their system.

- **Warm Handoff:** Member-specific meeting/knowledge transfer session.

- **Transition of Care (TOC) Summary Form:** The form that should be completed with information about care needed for a member with high needs during transitions between delivery systems.

Transition of Care Process

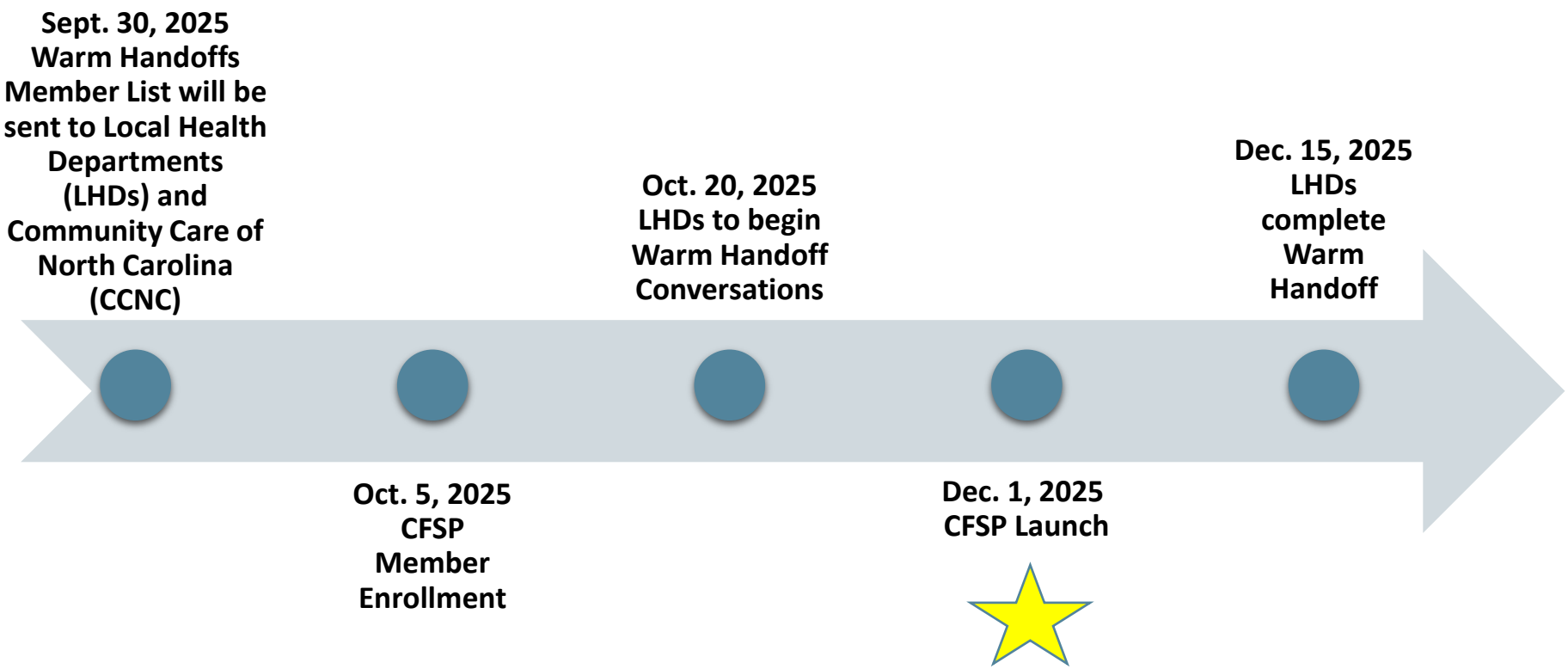
As members move between delivery systems, including between health plans, NCDHHS intends to maintain continuity of care for each member and minimize the burden on providers during the transition.

- The Department developed policies and procedures for Transition of Care to support members who transition between care delivery systems, such as from NC Medicaid Direct to NC Medicaid Managed Care.
- Transition of Care is designed to maintain continuity of care for each transitioning member during crossover and transitions that occur beyond crossover.
- During the CFSP launch, members eligible for CFSP will be transitioned from NC Medicaid Direct to NC Medicaid Managed care administered by HBCT.

Transition of Care

- To ensure continuity of care during crossover, NCDHHS identifies members who may be vulnerable to service disruptions.
- Members vulnerable to service disruption are identified as “High Needs”.
- High-needs members require time sensitive follow-up by the receiving entity during crossover.
- A subset of the high-needs member require time-sensitive, member-specific meeting/knowledge transfer sessions between the transferring and receiving entities during crossover. This process is referred to as a warm handoff.
- CFSP crossover period: Oct. 20, 2025, through Dec. 15, 2025.

Timeline and Major Milestones



Transition from LHDs' Care Management for At-Risk Children (CMARC)/ Care Management for High-Risk Pregnancies (CMHRP)

Expectations at Children and Family Specialty Plan Launch

At-risk children and high-risk pregnant members eligible for the Children and Family Plan will no longer receive Care Management through LHDs' CMARC and CMHRP programs.

CMARC

- Children participating in CMARC who are eligible for CFSP will transition to HBCT and will receive CFSP care management.

CMHRP

- Individuals participating in CMHRP who are eligible for CFSP will transition to Healthy Blue Care Together and receive CFSP care management.

Care Management Payments to LHDs

- After CFSP launch, CCNC will no longer provide payment to LHDs for the members that transition to HBCT.

Warm Hand Offs

“Warm Handoff” Overview

“Warm Handoff” members are a subset of the High Need member group who have complex treatment circumstances or multiple service interventions and thus require a verbal briefing between the LHD and the Children and Family Specialty Plan.

- A Warm Handoff is a Member-specific meeting/knowledge transfer session. The transitioning entity creates a “warm handoff summary sheet.”
- Members requiring a Warm Handoff at Crossover will be identified by the Department.
- ***The Warm Handoff transfer sessions will start occurring six weeks prior to the Children and Family Specialty Plan launch and must be completed no later than two week after launch.***

Safeguarding Member Services Through Crossover

Crossover Activities Customized Based on Service History and Vulnerability

All Transitioning Members are "High Need" Members:

Data Transfer:

- Claims
- Prior Authorization
- Pharmacy Lock In Data
- Care Plans or Assessments, if relevant

- High Need Members are transitioning Members whose service history indicates vulnerability to service disruption
- **DHB will provide LHDs with the list of members identified as high need.**

"Warm Handoff" Members:

- Members that require "warm handoff" are a subset of High Need Members who have been identified as warranting a verbal briefing between the transition and the receiving entities.
- **DHB will provide LHDs with the list of members who require a warm handoff.**

Note: The transferring entity and the receiving entity will receive the Warm Handoff beneficiary list in late September 2025.

Transition of Care Forms

TOC at Crossover

The transferring LHD is expected to complete a TOC Summary Form for each member disenrolling from CMARC/ CMHRP. This summary should include, at least, the following details:

- List of current providers
- List of current authorized services
- List of current medications (if applicable)
- Active diagnoses
- Known allergies
- Existing or prescheduled appointments, including Non-Emergency Medical Transportation (NEMT), as known
- Any urgent or special considerations about a member's living situation, caregiving supports, communication preferences or other member specific dynamics that impact the member's care and may not be readily identified in other transferred documents
- Additional information as needed to ensure continuity of care

Note: HBCT has created a TOC Warm Handoff Summary Form to be completed by LHDs for each of the transitioning members.

TOC Warm Handoff Summary Form

BlueCross BlueShield of North Carolina | Healthy Blue Care Together

Transition of Care Warm Handoff Summary

Form completed by: Click to enter text. Phone number: Click to enter text.
Date Completed: Click to enter text.

Member Information

Member Name: Click to enter text. Assigned Plan: Please Select
Member Medicaid ID: Click or to enter text. Current DSS Office: Click or to enter text.
Member's Contact Information: Click or to enter text. Current DSS Status: Click or to enter text.
Member's DOB: Click or to enter text. Member's Guardianship status: Click or to enter text.
Member's Gender: Click or to enter text.

Caregiver Information

Caregiver Name: Click to enter text. Additional Caregiver Name: Click to enter text.
Caregiver Phone number: Click to enter text. Additional Caregiver Phone number: Click to enter text.
Alternate Phone number: Click to enter text. Additional Alternate Phone number: Click to enter text.

System of Care Contacts

DSS County Child Welfare Worker: Click to enter text. DSS CCWW Supervisor: Click to enter text.
CCWW Office Phone number: Click to enter text. Supervisor Phone number: Click to enter text.
CCWW Alternate Phone number: Click to enter text. DSS County Director Phone number: Click to enter text.

Court Counselor (if applicable): Click to enter text. Other contact name: Click to enter text.
Court Counselor Phone number: Click to enter text. Other contact phone number: Click to enter text.

Note: for SUD-related data, please adhere to rules and regulations for sharing this information and if consent has not been obtained, do not provide that information on this document.

1. **Check all that apply to the member:**

- ☐ Currently Inpatient at Transition
- ☐ Currently boarding in an Emergency Dept or Hospital
- ☐ Currently boarding in a DSS office
- ☐ High Risk/Multiple or complex diagnoses and/or treatment interventions
- ☐ Currently/recently in Care Management/Care Coordination
- ☐ Currently/recently in Care Management for At-Risk Children (CMARC)
- ☐ Currently/recently in Care Management for High-Risk Pregnancies (CMARC)
- ☐ Currently/recently in CCNC active Care Management
- ☐ Currently/recently in Integrated Care for Kids (InCk) Care Management
- ☐ Currently/recently in LINKS program
- ☐ Currently/recently in Healthy Opportunities Pilot (HOP)
- ☐ Currently/recently in In-Reach program
- ☐ Currently/recently on Registry of Unmet Needs/Innovations Waiver Waitlist
- ☐ Currently/recently in Other Care Management: Click or tap here to enter text.
- ☐ Other: Click or tap here to enter text.

Warm HandOff Summary Form

BlueCross BlueShield of North Carolina | Healthy Blue Care Together

2. **List of current prior authorization services:** Click or tap here to enter text.

3. **Active Diagnoses/Conditions (Behavioral/Physical Health):**
   Diagnosis/condition: Click or tap here to enter text.
   Diagnosis/condition: Click or tap here to enter text.

   Duplicate fields for each diagnosis.

4. **Active Medications:**
   Medication name: Click or tap here to enter text.
   Dose/route/frequency: Click or tap here to enter text.
   Prescription or over the counter?: Click or tap here to enter text.

   Medication name: Click or tap here to enter text.
   Dose/route/frequency: Click or tap here to enter text.
   Prescription or over the counter?: Click or tap here to enter text.

   Duplicate additional fields for each medication.

   - **Known drug allergies:** Click or tap here to enter text.
   - **Known medication Issues/Concerns** (ex: member recently changed pharmacy, has not filled Rx's, adherence, etc.):Click or tap here to enter text.

5. **Member's immediate physical and/or behavioral health needs.**
   - Immediate treatment needs: Click or tap here to enter text.
   - Immediate placement needs: Click or tap here to enter text.
   - Immediate assessment needs: Click or tap here to enter text.
   - Additional notes to transitioning entity: Click or tap here to enter text.

6. **Foster Care Information (additional notes on living situation, caregiver, etc):** Click or tap here to enter text.

7. **Educational History (IEP, specialty evaluations, attendance concerns/disciplinary action, etc.):**
   - **Check all that apply:**
     - ☐ IEP/504 plans: Click or tap here to enter text.
     - ☐ Specialty evaluations: Click or tap here to enter text.
     - ☐ Attendance/enrollment concerns: Click or tap here to enter text.
     - ☐ Disciplinary action (e.g. suspensions, etc.): Click or tap here to enter text.
     - ☐ Learning/focus concerns: Click or tap here to enter text.

TOC Warm Handoff Summary Form (Cont'd)

BlueCross BlueShield of North Carolina | Healthy Blue Care Together

8. **Out-of-Home Placement History within past 18 months (please include number):**
   - Non-Therapeutic (kinship/foster care): Click or tap here to enter text.
   - Congregate care: Click or tap here to enter text.
   - Therapeutic (residential treatment/therapeutic foster care): Click or tap here to enter text.
   - Emergency Department admissions/visits: Click or tap here to enter text.
   - PRTF/Psychiatric Hospitalization(s): Click or tap here to enter text.
   - Medical Hospitalization(s): Click or tap here to enter text.

9. **Member's current clinical, educational, & SDOH services:**
   List of current providers: Click or tap here to enter text.

   Service: Click or tap here to enter text.
   Start Date: Click or tap to enter a date.
   End Date (or most recent): Click or tap here to enter text.
   Provider: Click or tap here to enter text.

   Duplicate fields if multiple services.

10. **Known barriers or immediate risks:**
    - ☐ SDOH needs (housing, childcare, employment, transportation, food): Click or tap here to enter text.
    - ☐ Medically Complex/Fragility: Click or tap here to enter text.
    - ☐ Transportation Needs (NEMT): Click or tap here to enter text.
    - ☐ Recent behavioral crisis: Click or tap here to enter text.
    - ☐ Recent suicidal or homicidal thoughts or attempts: Click or tap here to enter text.
    - ☐ Recent boarding due to lack of appropriate placement (DSS office, hotel, ED): Click or tap here to enter text.
    - ☐ Recent juvenile justice system engagement: Click or tap here to enter text.
    - ☐ Recent school suspension or expulsion: Click or tap here to enter text.
    - ☐ Language/communication: Click or tap here to enter text.
    - ☐ Ongoing traumatic exposure/exposure to perpetrator: Click or tap here to enter text.
    - ☐ Other: Click or tap here to enter text.

11. **Upcoming appointments:** Click or tap here to enter text.
    - ☐ CFSP Care Management Team meeting: Click or tap here to enter text.
    - ☐ Child/Family Team (CFT) meeting: Click or tap here to enter text.
    - ☐ School-based Team meeting: Click or tap here to enter text.
    - ☐ Juvenile Justice: Click or tap here to enter text.
    - ☐ Court hearings: Click or tap here to enter text.
    - ☐ Medical appts: Click or tap here to enter text.
    - ☐ Behavioral health appts: Click or tap here to enter text.

Warm HandOff Summary Form

BlueCross BlueShield of North Carolina | Healthy Blue Care Together

12. **If currently in care management, current Care Manager Information:**
    - CM Name: Click or tap here to enter text.
    - CM Organization Click or tap here to enter text.
    - CM Phone Number: Click or tap here to enter text.

    Duplicate fields if multiple CMs.

13. **Communication:**
    - Language
      i. Member Language: Click or tap here to enter text.
      ii. Caregiver Language: Click or tap here to enter text.
    - Interpreter needed?: Click or tap here to enter text.
    - Preferred day/time for CM contact: Click or tap here to enter text.

14. (Optional) **Additional information that may impact member's health needs/care: (unable to contact, unable to read/write, scheduling conflicts etc.):** Click or tap here to enter text.

Questions?

For questions following this meeting, please reach out to Medicaid.PopHealth.CFSP@dhhs.nc.gov

Additional Resources

Please Email Questions to:
Medicaid.CFSPQuestions@dhhs.nc.gov

- NC Medicaid Website: https://www.ncdhhs.gov/
- Children and Family Specialty Plan Website: https://medicaid.ncdhhs.gov/beneficiaries/children-and-families-specialty-plan
- Transition of Care Website: https://medicaid.ncdhhs.gov/care-management/transition-care
- Transition of Care Policy: https://medicaid.ncdhhs.gov/media/8498/download?attachment
- Medicaid Help Center: https://ncgov.servicenowservices.com/
- Provider Support: https://www.ncdhhs.gov/providers
- Reports Dashboard: https://medicaid.ncdhhs.gov/reports/dashboards