# Fact Sheet Children and Families Specialty Plan

# Auto-enrollment begins October 3, 2025

The Children and Families Specialty Plan (CFSP) is a new NC Medicaid Managed Care Plan that will provide services to members beginning Dec.1, 2025.

NC Medicaid members in foster care, receiving adoption assistance and enrolled with former foster care eligibility will be eligible for the Children and Families Specialty Plan. Many members eligible for the Children and Families Specialty Plan will be automatically enrolled in the health plan. To learn more about who is eligible for the Children and Families Specialty Plan, view this <u>Fact Sheet</u>.

On Oct. 3, 2025, members will be automatically enrolled in the Children and Families Specialty Plan. Some members will not be automatically enrolled and may choose to enroll in the Children and Families Specialty Plan.

## **CFSP POPULATIONS – MANAGED CARE STATUS**

Most members eligible for the Children and Families Specialty Plan will be auto-enrolled Oct. 3, 2025, see Figure 1 below. The below managed care statuses (MCS) codes displayed in NC FAST will show enrolled in the Children and Families Specialty Plan.

Figure 1

MCS011	Foster Care/Adoption
MCS012	Foster Care/Adoption – Tailored Plan
MCS062	Minor Children of CFSP Eligible Members
MCS063	Minor Children of CFSP Eligible Members – Tailored Plan
MCS068	Extended Foster Care
MCS071	Extended Foster Care – Tailored Plan

Some members will not be auto-enrolled in the Children and Families Specialty Plan and can choose to enroll, see Figure 2 below. Members with the MCS below can choose to enroll in the Children and Families Specialty Plan beginning Oct. 3, 2025 with effective date of enrollment Dec. 1, 2025.

#### Figure 2

MCS030	Tribal – Foster Care/Adoption
MCS031	Tribal – Foster Care/Adoption – Tailored Plan
MCS064	Tribal – Minor Children of CFSP Eligible Members
MCS065	Tribal – Minor Children of CFSP Eligible Members – Tailored Plan
MCS066	IHS – Minor Children of CFSP Eligible Members
MCS067	IHS – Minor Children of CFSP Eligible Members – Tailored Plan
MCS038	IHS – Foster Care/Adoption
MCS039	IHS – Foster Care/Adoption – Tailored Plan
MCS069	Tribal – Extended Foster Care
MCS070	IHS – Extended Foster Care
MCS072	Tribal – Extended Foster Care – Tailored Plan
MCS073	IHS – Extended Foster Care – Tailored Plan

#### ELIGIBILITY AND ENROLLMENT

DSS caseworkers must enter the appropriate foster care, adoption and former foster care evidence into NC FAST timely to ensure members who are eligible for the Children and Families Specialty Plan are flagged appropriately and given the option to enroll. Members who do not have evidence updated in NC FAST will not be able to enroll in the Children and Families Specialty Plan.

DSS caseworkers must ensure traditional and MAGI cases are updated with the appropriate evidence to support eligibility and enrollment for the Children and Families Specialty Plan.

**Note:** Appropriate evidence must be updated in NC FAST for a member to become eligible for the Children and Families Specialty Plan.

#### CHOICE PERIOD AND MEMBER NOTICES

The NC Medicaid Enrollment Broker will send Enrollment Notices on **Oct. 8, 2025.** The choice period ends Dec. 1, 2025, when the Children and Families Specialty Plan begins. For children and youth in DSS custody, only the Authorized Representatives (ARs) and the director or their designee (social worker), will get the Enrollment Notice for the member.

Children receiving adoption assistance and former foster youth will receive the Enrollment Notice and their AR(s) will also receive copies of the letters.

Enrollment Notices will explain:

- The member is now enrolled in the Children and Families Specialty Plan with an effective date of Dec.1, 2025. Until then, they will continue to receive health care services the way they do today.\*
- Basic plan benefits, like physical health care, pharmacy and behavioral health services.
- Care Management services are available in all 100 counties and statewide coordination with the local DSS and Child Welfare team.
- How to choose or change their Primary Care Provider (PCP) by contacting the health plan.
- How to change their health plan.\*
- \* **Note:** See EBCI Tribal Option Members section below for more information.

#### CHANGING HEALTH PLANS FOR CHILDREN AND FAMILIES SPECIALTY PLAN MEMBERS

All Children and Families Specialty Plan members can choose a Standard Plan and some members can also choose the Tailored Plan (if eligible). For members in DSS custody, the director or designee (social worker), as an AR, can choose a Standard Plan or Tailored Plan for members who qualify, on behalf of the member. Medical decisions will be made by providers and shared with the director or their designee.

To change health plans during the Choice Period, the director or their designee (social worker) or member must call the NC Medicaid Enrollment Broker toll free at **1-833-870-5500** (TTY: 711 or <u>RelayNC.com</u>) and get choice counseling and perform informed consent.

The member, or their AR (director or their designee (social worker) for those members in DSS custody), must confirm the choice to move to a different health plan. They must acknowledge the loss of statewide care management and specific services if a Standard Plan is chosen **or** loss of statewide care management if a Tailored Plan is chosen. The Enrollment Broker will explain the member's health care options to help them make the best choice to meet their individual needs. This is called choice counseling.

Population	Who can make the enrollment change?
Child in DSS custody under age 18	Director or designee (social worker), as an Authorized Representative
Adoption Assitance	Casehead (including adoptive parents) or Authorized Representative
Former Foster Youth	Member or Authorized Representative (if applicable)

Refer to the table below for more information on who can make enrollment changes.

**Note:** Members enrolled in the Children and Families Specialty Plan have the ability to change their health plan at any time.

- Health plan changes take effect the first day of the following month from when the change was requested.
- Children and Families Specialty Plan members may change their health plan with or without cause at any time.

Members, or their ARs, can also **mail or fax an enrollment form** to the Enrollment Broker. For members in DSS custody, the director will mail or fax the enrollment form to the Enrollment Broker.

- The Enrollment Broker will call the phone number on the form and explain the member's choices to confirm their decision to leave the Children and Families Specialty Plan.
- If the Enrollment Broker cannot reach the member or their AR (director or designee) to explain their choices, the Enrollment Broker will deny the request to leave the Children and Families Specialty Plan. If members or their AR(s) disagree with the denial, they can appeal the decision by asking for a State Fair Hearing. The denial letter will include a State Fair Hearing Request Form and explain how to file the appeal.

#### EBCI TRIBAL OPTION MEMBERS MAY CHOOSE HEALTH PLANS

Members who belong to a federally recognized tribe or individuals eligible for the Indian Health Service (IHS) will **not** be auto enrolled in the Children and Families Specialty Plan. These members will receive a notice to inform them they can choose the Children and Families Specialty Plan by contacting the Enrollment Broker.

If a member of a federally recognized tribe or an individual eligible for the Indian Health Service (IHS) wants to choose the Children and Families Specialty Plan:

- Go to <u>ncmedicaidplans.gov</u> to chat with an enrollment specialist.
- Use the NC Medicaid Managed Care mobile app. To get the free app, search for NC Medicaid Managed Care on <u>Google Play</u> or the <u>App Store</u>.
- Call the NC Medicaid Enrollment Broker toll free at 1-833-870-5500 (TTY: 711 or <u>RelayNC.com</u>).
- Mail back the enrollment form that came in the notice.

## ONGOING CHILDREN AND FAMILIES SPECIALTY PLAN ENROLLMENT

After the Children and Families Specialty Plan launches Dec. 1, 2025, members will continue to be auto enrolled based on their managed care status. This includes most children and youth in foster care, those receiving adoption assistance, minor children of CFSP-eligible members, and young adults in extended foster care.

Members who belong to a federally recognized tribe or individuals eligible for the Indian Health Service (IHS) will be able to enroll ongoing in the Children and Families Specialty Plan. These members will receive a notice to inform them they can choose the Children and Families Specialty Plan by contacting the Enrollment Broker.

Members who are auto enrolled into the Children and Families Specialty Plan can reenroll into the Standard Plan and Tailored Plan, as eligible. If a member changes health plans, their new health plan starts on the first day of the following month.



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