

Fact Sheet

Enrollment Timelines, Flexibilities and Contacts

The Children and Families Specialty Plan Launches December 1, 2025

NC Medicaid will transition NC Medicaid-enrolled children, youth and young adults currently and formerly served by Child Welfare to the Children and Families Specialty Plan on December 1, 2025. Until then, potential Children and Families Specialty Plan members will receive health care services the same way they do today, through NC Medicaid Direct.

This fact sheet provides information about the Children and Families Specialty Plan, including which members qualify and how and when this transition will occur.

WHAT IS THE CHILDREN AND FAMILIES SPECIALTY PLAN?

The Children and Families Specialty Plan is designed to provide members with seamless, integrated, coordinated health care. As a statewide plan, members have access to the health care they need and can continue to receive care from their providers if their foster care placement causes them to move to another location in the state.

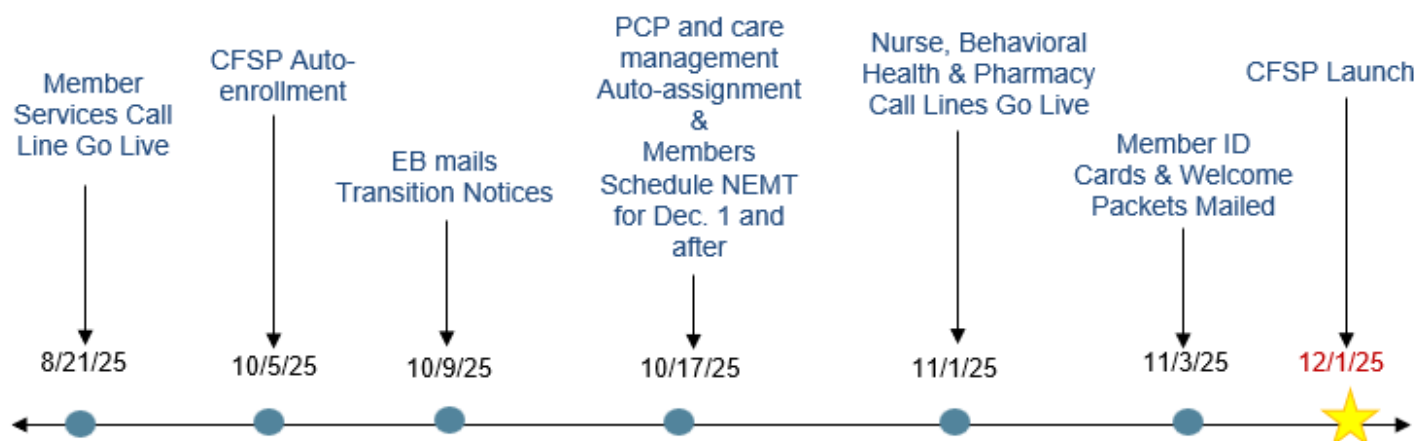
The health plan is part of North Carolina's commitment to improve the long-term health and well-being of children who receive Child Welfare services.

For more information on who qualifies for the Children and Families Specialty Plan, see the [Managed Care Populations and Enrollment Notices Fact Sheet](#).

View the [Introduction to the Children and Families Specialty Plan Fact Sheet](#) for more information on services covered.

CHILDREN AND FAMILIES SPECIALTY PLAN LAUNCH TIMELINE

Children and Families Specialty Plan Milestones



| Milestone | Importance | Timeline | For More Information |
|--|---|------------------------|---|
| Member Services Call Line Go Live | Members* can call the Member Services line. | 8/21/2025 | Members* can call Member Services toll free at 1-833-777-3611. |
| Auto-enrollment | Members* who qualify for the Children and Families Specialty Plan will be auto enrolled based on managed care status. Tribal Option and IHS eligible members will not be auto-enrolled but will have the option to choose the Children and Families Specialty Plan, if eligible. | Beginning 10/5/2025 | Members* should contact the Enrollment Broker for help at 1-833-870-8550. |
| EB mails Transition Notices | The Enrollment Broker begins mailing notices to members* informing them of their new health plan, the Children and Families Specialty Plan, or their new choices. | Beginning 10/9/2025** | Members* should contact the Enrollment Broker for help at 1-833-870-8550. |
| PCP and Care Management Auto-assignment | Members* will be assigned a primary care provider (PCP) and a Children and Families Specialty Plan Care Manager. | Beginning 10/17/2025** | Members* should contact Member Services to choose or change their PCP or |



| Milestone | Importance | Timeline | For More Information |
|--|---|--------------|---|
| | If members* would like to change their PCP or Care Manager assignment, they may do so during the PCP Choice Period. | | Care Manager at 1-833-777-3611. |
| Members Schedule NEMT | Members* can begin calling to schedule NEMT trips for December 1, 2025, and after. | 10/17/2025** | Members* can call Member Services toll free at 1-833-777-3611 or Modivcare directly at 1-855-397-3615. |
| 24/7 Nurse, 24/7 Behavioral Health and Pharmacy Lines Go Live | Members* can call the specific phone numbers to get help. | 11/1/2025** | Members* can call Member Services toll free at 1-833-777-3611 to be directed to the correct service line. 24/7 Nurse: 1-833-879-4900 24/7 Behavioral health: 1-833-597-3985 Pharmacy: 1-833-777-3703 |
| Member ID Cards & Welcome Packets Mailed | Members* begin receiving their Member ID Card and health plan welcome packets. | 11/3/2025** | Members* can call Member Services toll free at 1-833-777-3611. |
| Day 1 – Children and Families Specialty Plan Start Date | Members* begin receiving health care services from the Children and Families Specialty Plan. | 12/1/2025 | Members* should contact the Children and Families Specialty Plan and/or the Enrollment Broker for help. |

* Members includes themselves and their legally responsible person(s,) such as the head of household, authorized representative, or legal guardian.

**Dates are approximate and subject to change.



AUTO-ENROLLMENT

On October 5, 2025, potential Children and Families Specialty Plan members will be auto enrolled. If a member wants to move out of the Children and Families Specialty Plan, the member or their authorized representative will need to confirm their choice before they disenroll. This is called informed consent.

Members, or their authorized representative, must call the Enrollment Broker before they can leave the Children and Families Specialty Plan. The Enrollment Broker will explain all health care options so members or their authorized representative can make the best choice for individual needs.

After auto-enrollment, there will be a member choice period between October 23, 2025, and December 1, 2025. During this time, members or their authorized representative can:

- Choose or change their PCP with the Children and Families Specialty Plan
 - Complete the **informed consent** process to choose a different health care option (if applicable) through the NC Medicaid Enrollment Broker
- Call toll free at **1-833-870-5500** (TTY: 711 or RelayNC.com)
 - Online at ncmedicaidplans.gov

Auto-enrollment for the Children and Families Specialty Plan is based on:

- If a member meets the Children and Families Specialty Plan enrollment criteria. NC Medicaid-enrolled children, youth and young adults currently and formerly served by child welfare may be eligible for the Children and Families Specialty Plan.
- Special population considerations (e.g., EBCI/IHS eligible).

WHAT IF A MEMBER WANTS TO KEEP THEIR PRIMARY CARE PROVIDER?

- If a member is currently getting ongoing treatment or if they have an ongoing condition, the Children and Families Specialty Plan will work with the provider to make sure the member can continue their treatment plan. **Until June 30, 2026, members can continue seeing their current provider (even if they are out-of-network) for their current treatment.**
- If a member did not change their PCP during the PCP Choice Period, they will keep the PCP assigned to them October 17, 2025. If the member has a record of an active relationship with a PCP, the Children and Families Specialty Plan will assign the member to that PCP, provided they participate in the Children and Families Specialty Plan's network.
- Members can change their PCP as often as they want from October 23, 2025, to June 30, 2026. **After June 30, 2026, members have 30 calendar days from the date they receive their new PCP assignment to change their PCP without cause.** After that, members can change their PCP twice a year without cause. They can change their PCP with cause at any



time. EBCI Tribal Option and IHS eligible members may change their PCP at any time without cause.

- Examples of “with cause” reasons to change a PCP include if a PCP moves to a different location that is no longer convenient or if a PCP no longer provides the services needed. To change their PCP, members or their authorized representative should call the Children and Families Specialty Plan.

WHAT IF MEMBERS HAVE QUESTIONS?

- Most questions members have about NC Medicaid Managed Care can be answered by the NC Medicaid Enrollment Broker. Members can call the Enrollment Broker at **1-833-870-5500 (TTY: 711)** toll free Monday through Saturday, 7 a.m. to 5 p.m.

WHO CAN MEMBERS CONTACT FOR ADDITIONAL INFORMATION ABOUT THE CHILDREN AND FAMILIES SPECIALTY PLAN?

Most questions members have about NC Medicaid Managed Care can be answered by the NC Medicaid Enrollment Broker.

| Who do I contact if... | Contact information |
|--|--|
| <ul style="list-style-type: none">• I don't know if I qualify for NC Medicaid Managed Care• I don't know which health plan I am enrolled in• I want to change my health plan | NC Medicaid Enrollment Broker 1-833-870-5500 (TTY: 711 or RelayNC.com) |
| Who do I contact if... | Contact information |
| <ul style="list-style-type: none">• I have questions about my new health plan• I need to know who my primary care provider is• I need to know who my Children and Families Specialty Plan Care Manager is• I need to get a replacement Medicaid ID card | Healthy Blue Care Together Member Services: 1-833-777-3611 Website: healthybluenc.com/caretogether |
| Who do I contact if... | Contact information |
| <ul style="list-style-type: none">• I need to know which providers my health plan works with | Healthy Blue Care Together |



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|--|--|
| <ul style="list-style-type: none"> • I need to know what benefits my new health plan provides • I can't get my services (e.g., medical supplies are not received, provider won't take the new health plan) • I need to know if my approved services will continue • I want to check on my appeal currently under review <p>Reminder: This contact information is also on your new health plan ID card you received from your health plan.</p> | <p>Member Services: 1-833-777-3611</p> <p>Website: healthybluenc.com/caretogether</p> |
| Who do I contact if... | Contact Information |
| I need a ride to an appointment. Non-Emergency Medical Transportation (NEMT) will be provided for Children and Families | Members can call to reserve a ride for appointments scheduled on or after December 1, 2025, by calling 1-855-397-3615 (TTY: 711) |
| Who do I contact if... | Contact Information |
| I am having a crisis related to mental health, substance use disorder or intellectual or developmental disabilities | <p>If this is a life-threatening emergency, call 911.</p> <p>If your crisis is urgent but is not life-threatening, contact the behavioral health crisis line at 1-833-597-3985</p> |
| Who do I contact if... | Contact Information |
| I need medical advice/support | <p>If this is a life-threatening emergency, call 911.</p> <p>If this is not life-threatening, call the nurse line at 1-833-879-4900</p> <p>Note: The hours of operation for this phone number is 24 hours a day, 7 days a week.</p> |

WHO CAN COUNTY WORKERS CONTACT FOR ADDITIONAL INFORMATION ABOUT THE CHILDREN AND FAMILIES SPECIALTY PLAN?

Most questions County Workers have about NC Medicaid Managed Care can be answered by the [Medicaid Operational Support Team \(OST\) Representative](#) or by the County Director.



| Who do I contact if... | Contact information |
|---|---|
| <ul style="list-style-type: none"> I have a question about an NC Medicaid Communication | Medicaid OST Representative |
| <ul style="list-style-type: none"> I have concerns with the CFSP Care Manager | Contact your County Director for assistance |
| <ul style="list-style-type: none"> I have a question about a Child Welfare Communication | Regional Director or Manager/Supervisor |

WHERE CAN COUNTIES LOCATE COMMUNICATIONS ON CFSP?

Counties can access resources that provide important updates, guidance and tools to support the implementation of CFSP. The following channels offer timely information on policy changes, operational procedures and system updates to assist county staff in effectively supporting members:

- [Dear County Director Letters](#)
 - Formal correspondence issued by NC Medicaid Leadership to provide high-level updates, policy direction and important implementation details.
- DSS Weekly Comms
 - Weekly email correspondence issued by NC Medicaid staff to provide pertinent updates and information that impacts daily County DSS work.
- [DHB Administrative Letters](#)
 - Formal correspondence issued by NC Medicaid Leadership to provide updates to NCDHHS Policies and Manuals
- [NCDHHS Policies and Manuals](#)
- BluePrint
- [NC FAST Help](#)
- [Learning Gateway](#)

