

NC Department of Health and Human Services

Division of Mental Health, Developmental Disabilities, and Substance Use Services

Strengthening Care for Kids: An Overview of the Children and Families Specialty Plan

Kelly Crosbie, MSW, LCSW

Director

Division of Mental Health, Developmental Disabilities, and Substance Use Services

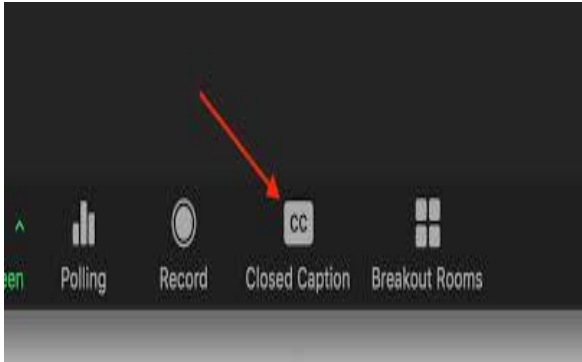
October 29, 2025

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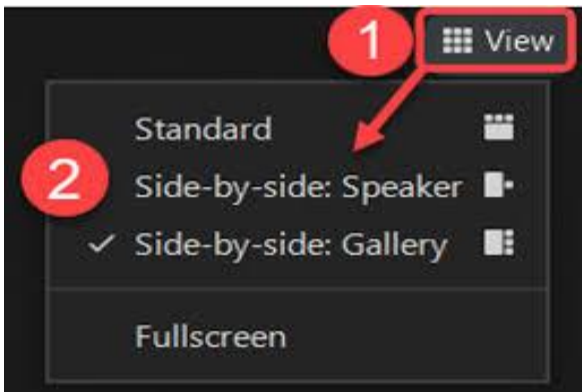
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Housekeeping



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Agenda

1. Introductions
2. Focus: Children and Families Specialty Plan
3. Panel Discussion
4. Q&A Session

Kelly Crosbie, MSW, LCSW DMH/DD/SUS Director



- 30 years in MH/SU/IDD Field
- 13 years in NCDHHS
- DMH/DD/SUS since Dec 2022
- Licensed Clinical Social Worker (LCSW)
- Person with lived experience

Chameka Jackson, MSSA, LCSW

Associate Director, CFSP, NC Medicaid



- 18 years of combined experience in the child welfare and MH/SU/IDD field
- 14 years with NCDHHS
- NC Medicaid since 2019
- Licensed Clinical Social Worker (LCSW)

Keith McCoy, MD, FAPA
Chief Medical Officer, DMH/DD/SUS
Associate Medical Director for Behavioral Health, NC Medicaid



- 19 years in the field of Psychiatry
- 7 years with NCDHHS
- DMH/DD/SUS since August 2018
- Medical/Psychiatric Training at UNC School of Medicine and UNC Department of Psychiatry
- Has worked within NC's public MH/SUD system since 2010

Jeylan Close, MD

Associate Medical Director for DMH/DD/SUS

Assistant Medical Director for Child Behavioral Health, NC Medicaid



- 6 years in the Field of Psychiatry, 9 in Pediatrics
- 3 years in NCDHHS
- DMH/DD/SUS since July 2024
- Pediatrics training at the University of Michigan, general and child and adolescent psychiatry training at the Children's Hospital of Philadelphia/University of Pennsylvania, and National Clinician Scholars Program at Duke University

Sandy Danner

Associate Director of Member Operations

NC Medicaid



- Former member of the Operational Support Team, specializing in County DSS training for Medicaid eligibility policy and managed care
- Over 13 years of service with the State of North Carolina, beginning as a Medicaid Program Representative (MPR)
- Joined the Operational Support Team (OST) at its inception in 2014
- 15 years of experience with Brunswick County DSS, serving as an Adult Medicaid caseworker and later as supervisor for all Economic Service programs
- Began public service career with Pickens County DSS in South Carolina as an administrative assistant
- Brings 31 years of combined experience in Medicaid and public service
- Passionate about serving North Carolinians through her work at the Division of Health Benefits – NC Medicaid

John Thacker, LCMHC, LCAS, CRC

Provider Network Director

Children and Families Specialty Plan



- 25+ years in the Clinical Mental Health Field
- 4 years at Healthy Blue Care Together
- John has an extensive background serving children and families within non-profit agencies, judicial courts, clinical settings, local county government, and health care organizations. He has served in multiple roles to improve outcomes for vulnerable populations in North Carolina.
- He has served as a Regional Foster Care Director, Clinical Services Manager, Guardian ad Litem District Administrator, and Division Director for Family & Children Services in Forsyth County.
- He is a Licensed Clinical Mental Health Counselor (LCMHC), a Licensed Clinical Addiction Specialist (LCAS), a Certified Rehabilitation Counselor (CRC) and certified in Trauma Focused Cognitive Behavioral Therapy (TF-CBT).

Children & Families Specialty Plan Overview

Children and Families Specialty Plan Overview

Children and Families Specialty Plan (CFSP)

CFSP is a new 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, 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 Eastern 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

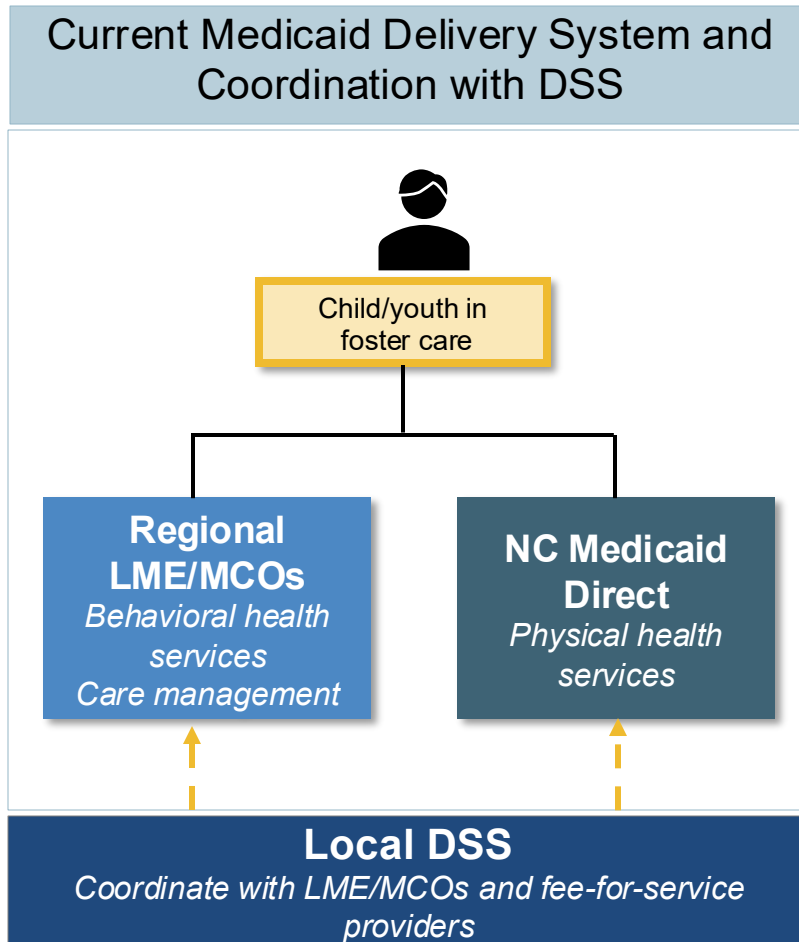
NC Medicaid beneficiaries in foster care, receiving adoption assistance and enrolled in the former foster care eligibility will be eligible for the Children and Families Specialty Plan.

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 Dec. 31, 2022
 - Former foster care children in any state who turned age 18 on or after Jan. 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

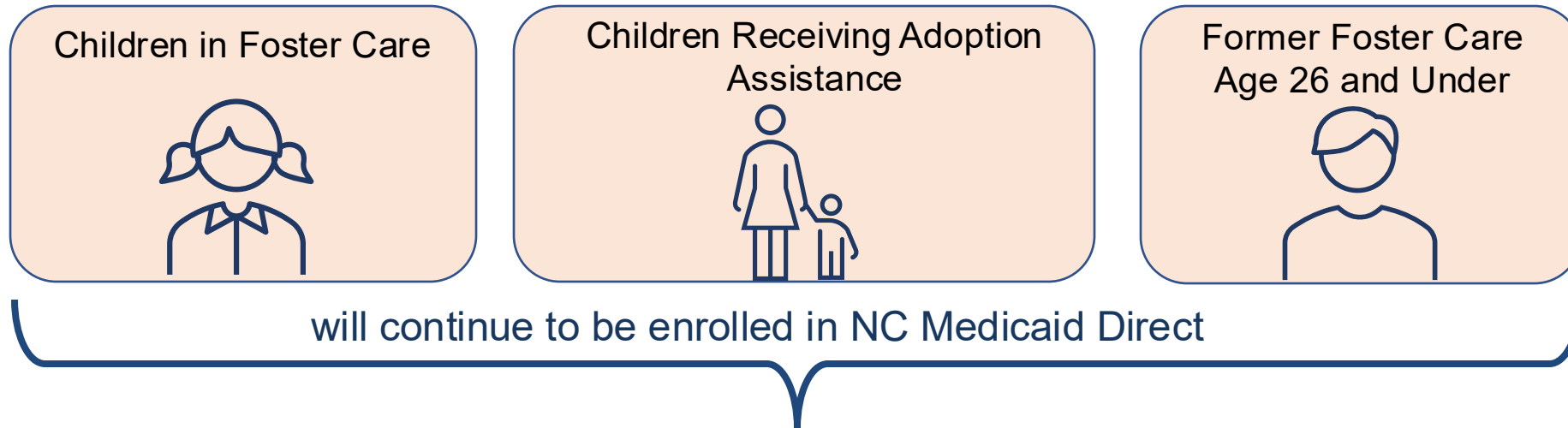
With stakeholder input, the Department identified a set of key objectives to guide CFSP design, operations and oversight as outlined in the CFSP RFP.

CFSP Design Objectives

- **Improve members' near 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 in local DSS offices and Emergency Departments**
- **Advance health disparity** to address racial and ethnic disparities experienced by children, youth and families served by child welfare services.

Until CFSP Launch... 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.*



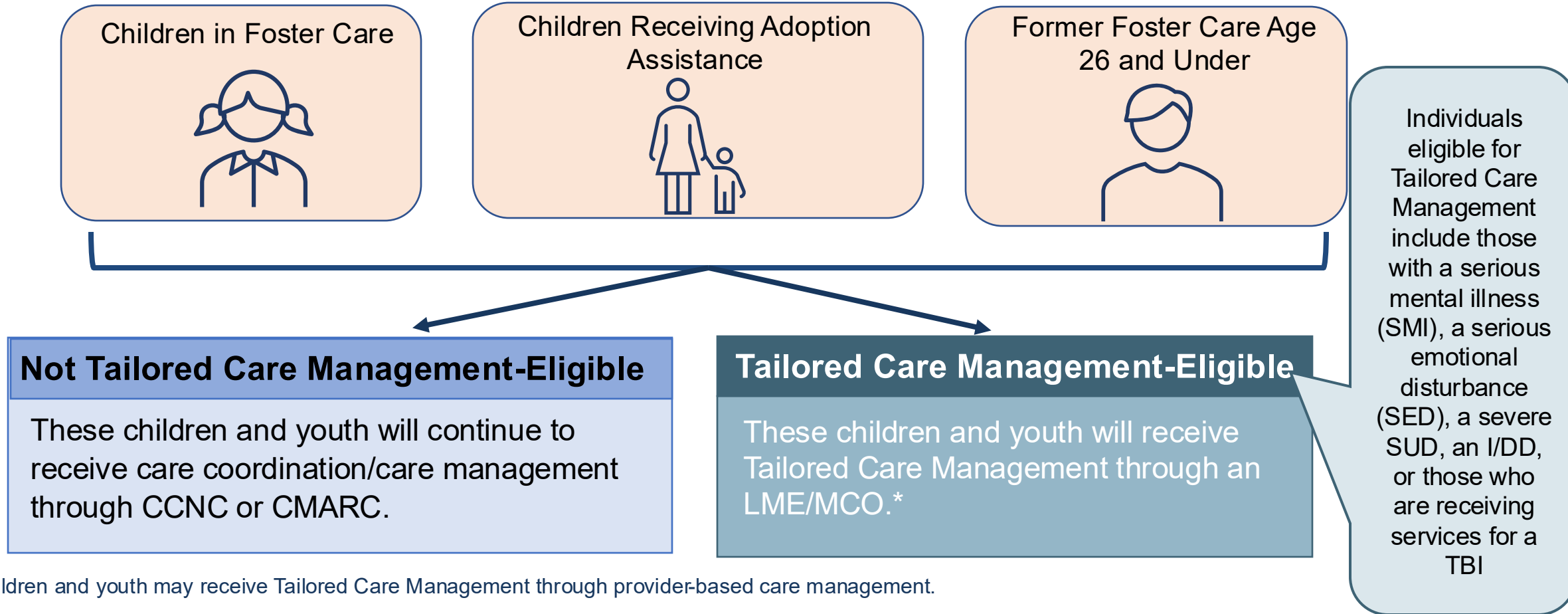
NC Medicaid Direct is the State's health care program for Medicaid beneficiaries not enrolled in a Standard Plan, Tailored Plan or EBCI Tribal Option.

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.

Until CFSP Launch... Care Management Options

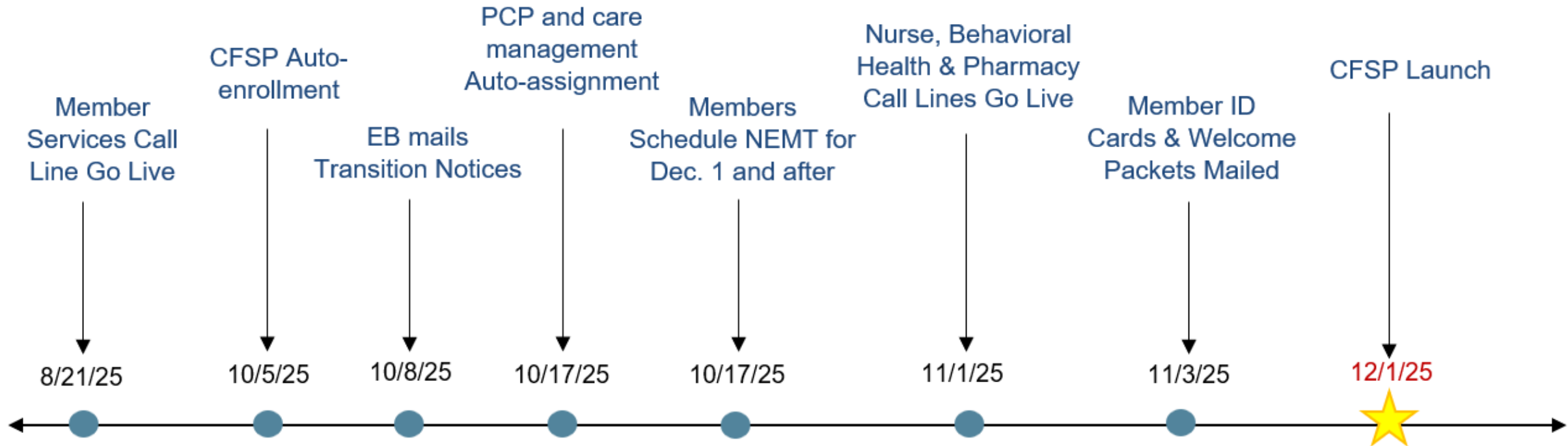
Most children, youth and young adults currently and formerly served by the child welfare services will continue to receive care management as they do today.



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

CFSP Member Milestones

Children and Families Specialty Plan Milestones



Transition of Care

Designed to maintain continuity of care for beneficiaries and minimize the burden on providers during transition.

Policy	Duration	Time Frame
Relax Medical PA Requirements	211 days	Dec. 1, 2025 – June 30, 2026
Relax Pharmacy PA Requirements	211 days	Dec. 1, 2025 – June 30, 2026
Non-Par Providers Paid at Par Rates	211 days	Dec. 1, 2025 – June 30, 2026
Non-Par Providers Follow In-Network PA Rules	122 additional days	July 1 – Oct. 31, 2026
Ability to Switch PCP	211 days	Dec. 1, 2025 – June 30, 2026
Continuity of Care for Ongoing Course of Treatment	7 months	Dec. 1, 2025 – June 30, 2026

Note: The Department may opt to extend any of these flexibilities after the designated timeframe above, based on CFSP operations to ensure the stability of Medicaid operations for CFSP members.



Day 1 Priorities for CFSP Launch



Individuals get the care they need

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



Providers can submit claims for payment to CFSP

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

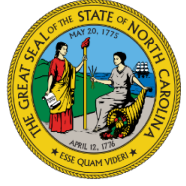
Calls made to call centers are answered promptly

Members can access necessary medications

CFSP has adequate Provider Networks per contract definition

Panel Discussion

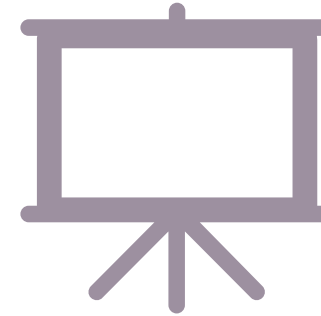
Question & Answer Session



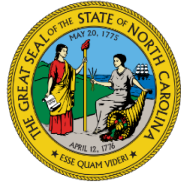
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**HEALTH AND
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Division of Mental Health,
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