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**TITLE: Mandatory and Voluntary Populations**

**PURPOSE:** The following populations represent broad categories that contain multiple eligibility groups. Certain exceptions may apply within the broad categories and will be determined by the Agency.

**PROCEDURE:**

*Mandatory Populations*

- A. The categories of eligible recipients authorized to be enrolled in the plan are:
  - 1. Low Income Families and Children
  - 2. Sixth Omnibus Budget Reconciliation Act (SOBRA) Children
  - 3. Supplemental Security Income (SSI) Medicaid Only
  - 4. Refugees
  - 5. Title XXI MediKids, in accordance with s. 409.8132, F.S.
  - 6. Medicaid Eligibility Designated by SOBRA/Aged and Disabled population (Meds AD) unless they otherwise meet a requirement of a voluntary or excluded population.
- B. Except as otherwise specified in this contract, Title XXI MediKids-eligible participants are entitled to the same conditions and services as currently eligible Title XIX Medicaid recipients.
- C. The Agency or its agent will use an established algorithm to assign mandatory potential members who do not select a health plan during their 30-day choice period.
- D. Conditioned on continued eligibility, mandatory members have a lock-in period of 12 consecutive months. After an initial 90-day change period, mandatory members may disenroll from First Coast Advantage (FCA) only for cause. The Agency or its agent will notify members at least once every 12 months, and at least 60 calendar days before the lock-in period ends that an open enrollment period exists giving them an opportunity to change health plans. Mandatory members who do not make a change during open enrollment will be deemed to have chosen to remain with the current health plan, unless that plan no longer participates. In that case, the member will be assigned to a new health plan.

*Voluntary Populations*

- A. The following categories describe recipients who may enroll in a health plan but are not required to do so:
  - 1. Foster care children/adolescents, including children/adolescents receiving medical foster care services or receiving adoption assistance
  - 2. Individuals diagnosed with developmental disabilities, as defined by the Agency, including those in the Developmental Disabilities Waiver

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3. Children with chronic conditions who are eligible to participate in the Children's Medical Services Program or a specialty plan for children with chronic conditions but not enrolled in the program
  4. Individuals with Medicare coverage (dual eligible individuals with either Medicare Part B coverage or Medicare Parts A and B coverage) who are not enrolled in a Medicare Advantage Plan, except those enrolled in a Medicare Advantage Special Needs Plan and not otherwise ineligible under the terms of this contract; (Was in Eligible Populations Non-Reform Contract)
  5. Children and adolescents who have an open case for services in the Department of Children and Families' Florida Safe Families Network (FSFN) database system (formerly HomeSafenet) unless they otherwise meet a requirement of a mandatory population or an excluded population
  6. Women enrolled in the plan who change eligibility categories to the SOBRA category due to their pregnancy will remain eligible for enrollment in the plan or may disenroll
  7. Individuals who are residents in ALFs and are not enrolled in an Assisted Living for the Elderly (ALE) waiver program and are not otherwise in a mandatory population
  8. For Reform populations, individuals enrolled in Project AIDS Care (PAC) waiver unless they otherwise meet a requirement of a mandatory or excluded population
  9. Individuals enrolled in the Channeling Waiver, Aged and Disabled Adult Waiver, Adult Cystic Fibrosis Waiver, Adult Day Health Care Waiver, Alzheimer's Disease Waiver, Traumatic Brain and Spinal Cord Injury Waiver, Familial Dysautonomia Waiver, Family and Supported Living Waiver, or Model Waiver.