

**District of Columbia Department of Health Care Finance**  
**Monthly Enrollment Report - July 2020, Reflecting Period of June 2019-June 2020**



**By Program**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Program											(preliminary)	(preliminary)	(preliminary)
Total	285,531	287,081	287,129	283,171	284,944	285,007	284,308	283,878	272,202	273,571	276,206	277,764	279,667
Medicaid	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
ICP	3,733	3,852	3,909	3,973	4,042	4,074	4,073	4,100	4,199	4,115	4,125	4,142	4,137
Alliance	15,821	15,923	15,997	15,827	15,803	15,680	15,564	15,527	15,639	15,371	15,575	15,828	16,131

**Medicaid By Service Delivery Type**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Service delivery type											(preliminary)	(preliminary)	(preliminary)
Total	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
FFS	73,449	73,163	71,639	72,350	72,597	72,451	71,664	71,760	71,447	71,511	71,778	70,126	68,691
MCO	192,528	194,143	195,584	191,021	192,502	192,802	193,007	192,491	180,917	182,574	184,728	187,668	190,708

**Medicaid By Plan**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Plan.											(preliminary)	(preliminary)	(preliminary)
Total	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
Amerigroup	42,050	42,429	42,880	41,584	42,063	42,037	41,937	41,818	38,738	39,042	39,568	40,537	41,547
AmeriHealth	115,516	116,576	117,040	114,873	115,630	115,743	116,210	115,869	109,494	110,616	111,817	112,975	114,167
FFS	73,449	73,163	71,639	72,350	72,597	72,451	71,664	71,760	71,447	71,511	71,779	70,127	68,691
HSCSN	5,051	5,056	5,065	5,048	5,040	5,054	5,003	4,987	4,964	4,982	5,029	5,022	5,041
Trusted	29,911	30,082	30,599	29,516	29,769	29,968	29,857	29,817	27,721	27,934	28,313	29,133	29,953

**Medicaid By Age**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Age group											(preliminary)	(preliminary)	(preliminary)
Total	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
Child (0-20 years)	94,438	94,931	95,049	93,063	93,698	93,724	93,772	93,725	90,033	90,604	91,155	91,487	91,863
Adult (21-64 years)	147,188	147,952	147,605	145,652	146,539	146,592	146,131	145,594	137,411	138,581	140,231	141,163	142,275
Senior (65+ years)	24,351	24,423	24,569	24,656	24,862	24,937	24,768	24,932	24,920	24,900	25,120	25,144	25,261

**Medicaid By Medicare Dual Status**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Medicare dual status											(preliminary)	(preliminary)	(preliminary)
Total	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
Non-dual	230,472	231,772	231,551	227,648	229,272	229,408	229,151	228,684	217,063	218,821	221,038	222,361	223,919
Dual	35,505	35,534	35,672	35,723	35,827	35,845	35,520	35,567	35,301	35,264	35,468	35,433	35,480

**Medicaid By Eligibility Category**

Fiscal Year YTD	FY 2019				FY 2020 to date								
Year Month Number YYYY MM	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06
Eligibility category											(preliminary)	(preliminary)	(preliminary)
Total	265,977	267,306	267,223	263,371	265,099	265,253	264,671	264,251	252,364	254,085	256,506	257,794	259,399
Medicaid ABD other	10,940	11,019	11,121	11,138	11,216	11,220	11,205	11,187	11,236	11,141	11,224	11,263	11,328
Medicaid ABD SSI	26,399	26,471	26,586	26,560	26,587	26,659	25,080	25,110	25,061	24,994	25,046	24,995	24,998
Medicaid child, CHIP	16,996	17,144	17,239	17,151	17,514	17,473	17,519	17,558	16,798	17,290	17,419	17,255	17,220
Medicaid child, non-CHIP	72,801	73,112	73,023	70,927	70,601	70,608	70,974	70,888	67,351	67,413	67,789	68,299	68,709
Medicaid childless adult 0%-133% FPL	65,978	66,276	65,993	65,188	65,799	66,509	66,916	66,501	62,656	62,978	63,818	64,560	65,283
Medicaid childless adult 134%-210% FPL	15,034	15,261	15,242	14,898	15,357	15,418	15,575	15,635	14,405	14,813	15,132	15,231	15,410
Medicaid incarcerated	1,359	1,357	1,313	1,338	1,370	735	731	722	712	699	655	695	729
Medicaid LTSS DD waiver	1,836	1,838	1,829	1,820	1,826	1,829	1,825	1,813	1,821	1,825	1,828	1,831	1,834
Medicaid LTSS EPD waiver	3,822	3,836	3,872	3,921	4,008	4,013	4,027	4,069	4,131	4,181	4,258	4,340	4,429
Medicaid LTSS non-waiver	3,138	3,160	3,180	3,150	3,158	3,134	3,121	3,138	3,149	3,176	3,173	3,046	2,954
Medicaid other	104	102	101	93	90	88	88	92	86	86	89	83	84
Medicaid parent/caretaker	36,001	36,161	36,071	35,511	35,833	35,803	35,844	35,721	33,137	33,690	34,177	34,296	34,520
Medicaid pregnant woman	381	377	372	335	344	337	327	321	291	288	298	292	273
Medicaid QMB only	11,188	11,192	11,281	11,341	11,396	11,427	11,439	11,496	11,530	11,511	11,600	11,608	11,628

This report provides data on enrollment in DHCF programs that include Medicaid, the DC Healthcare Alliance, and the Immigrant Children's Program. It is based on DHCF Medicaid Management Information System data as of July 20, 2020. Medicaid counts include CHIP-funded beneficiaries, who can be identified by their eligibility category. Information provided here may differ from other reports for a variety of reasons, including the populations analyzed, the definitions used to categorize beneficiaries, and the point in time at which data was extracted from DHCF systems. The most recent months are labeled as "preliminary" and users should be aware that enrollment will be undercounted until at least three full months have elapsed.

Recent notable issues with regard to enrollment include:

- Due to a continuous coverage requirement for Medicaid as of March 18, 2020, which applies under the federal CARES Act as a condition of receiving a 6.2 percentage point increase in federal matching funds during the federal public health emergency, beneficiaries can only lose Medicaid coverage due to non-residency in the District, death, or a request to disenroll. Under District policies, continuous coverage extends similarly to Alliance and ICP beneficiaries. In addition, for the duration of the District's public health emergency, modified eligibility and enrollment policies are in place (e.g., expanded self-attestation for all DHCF coverage and removal of the face-to-face interview requirement for Alliance coverage).
- To reconcile information across DHCF systems, routine periodic "sync" operations are undertaken that may lead to changes in enrollment. Most recently, decreases in enrollment noted for September 2019 and February 2020 were due in part to a system sync that identified ineligible individuals who were ultimately disenrolled after being notified of the need for documentation to support a continuation of their coverage.