

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Health Care Finance



New! Upcoming Changes to the Health Care Alliance (“Alliance”) Program.

Health Care Alliance Frequently Asked Questions (FAQ)

Purpose: The purpose of this document is to share changes in the Health Care Alliance and Immigrant Children’s Program (ICP) and provide answers to frequently asked questions.

***New!* Effective October 1, 2025**, The Health Care Alliance and the Immigrant Children’s Program (ICP) will merge into one program called the **Health Care Alliance Program for Adults and Children**.

Upcoming Changes

1. What changes on October 1, 2025?

- No new enrollees 26 and older
- Income limit decreases from 215% of the federal poverty level to 138%
- Benefit/ Service Changes
- No more Managed Care for Alliance. Program is moving from Managed Care Plans (MCP) to Fee for Service (providers must bill DHCF directly for services provided to beneficiaries)

2. What is not changing?

- Income limit changes for children (ages 0-20).
- Face-to-face requirements.
- Certifications spans remain every 12-months.
- No changes to the ninety (90) day grace period for eligibility renewals.

3. Who is eligible to receive health care benefits through Health Care Alliance?

Starting October 1, 2025, the Health Care Alliance program will **no longer** enroll new applicants (those not currently enrolled in the program or in a renewal period) aged 26 or older into the program. A new applicant is someone who is not currently receiving Health Care Alliance but would like to apply for the program. Children (aged 0-20),

Adults 21 to 25 years old, and pregnant women can still apply and be evaluated for benefits through the Health Care Alliance program or other health coverage.

To receive health care services through the Health Care Alliance Program:

- You must be a resident of the District of Columbia.
- You must not be eligible for any other health insurance including Medicaid.
- Your income must not exceed the income limit based on your household size.

4. Will I receive a notice or letter about these changes?

Yes. An informational notice/letter was sent the last week of July from the Department of Health Care Finance (DHCF). If you have a District Direct account, you can view your notice there.

5. What are the current and new income limits for the Health Care Alliance program?

Effective October 1, 2025, the income limits for the Health Care Alliance program will **decrease from 215%** of the federal poverty level to **138%** (includes a 5% disregard) of the federal poverty level. Please see the current and future income limits below. *For additional limits based on family size please visit the [Health Care Alliance Program](#) webpage.

Current Income Limits through *September 30, 2025*

Category	Individuals 0-18	Individuals 19 &20	Individuals 21 and over
Threshold in FPL	319% + 5% disregard	216% +5% disregard	210% +5% disregard
1 person household, monthly	\$4228	\$2884	\$2806
2-person household, monthly	\$5712	\$3896	\$3790
3-person household, monthly	\$7196	\$4908	\$4775

New Income Limits effective *October 1, 2025*

Category	Individuals 0-18 <i>(No Change)</i>	Individuals 19 &20 <i>(No Change)</i>	Individuals 21 and over <i>(*New*)</i>
Threshold in FPL	319% + 5% disregard	216% +5% disregard	133% +5% disregard

1 person household, monthly	\$4228	\$2884	\$1800
2-person household, monthly	\$5712	\$3896	\$2432
3-person household, monthly	\$7196	\$4908	\$3065

Note these figures will change again 1/1/2026 to align with federal requirements

6. What happens if my income is over the new income limits (138% of federal poverty limit) as of 10/1/2025?

Your Health Care Alliance benefits will terminate 9/30/2025. You will receive a termination letter in September from the Department of Health Care Finance (DHCF).

7. What are my health care options if I lose Health Care Alliance 9/30/2025?

Here are the options available for additional health care coverage outside of Health Care Alliance if your income exceeds 138% of the federal poverty level.

Immigration Status	Additional Coverage Options
<ul style="list-style-type: none"> Undocumented <i>(not lawfully present in the US)</i> 	<ul style="list-style-type: none"> Emergency Medicaid CHIP if Pregnant under 324% FPL
<ul style="list-style-type: none"> Lawfully Present <i>(**have not met the 5-year bar**)</i> 	<ul style="list-style-type: none"> Medicaid Programs: <ul style="list-style-type: none"> Medicaid if Pregnant under 21
<ul style="list-style-type: none"> Lawfully Present <i>(have met the 5-year bar)</i> 	<ul style="list-style-type: none"> Medicaid under another category if eligible.

***5-year bar is the waiting period for lawful permanent residents (LPR) or green card holders before they can receive Medicaid coverage.*

8. How do I qualify for Emergency Medicaid?

In order to qualify for Emergency Medicaid, the applicant must:

- Be a resident of DC
- Have an emergency condition
- Can not be a US Citizen or have an eligible immigration status for Medicaid
- Meet income standards for the specific category. See examples below:
 - Childless Adult income limit is 215% of FPL (\$2806 for one person).
 - Parent or Caretaker Relative income limit is 221% of FPL (\$3896 for two people). *These income standards will change on January 1, 2026.*

- If aged (65 years or older), blind or disabled, the applicant must have resources that do not exceed \$4,000 for an individual or \$6,000 for a couple. Income limit for this group is 100% of the FPL (\$1305 for one person).

Learn more at <https://dhcf.dc.gov/service/emergency-medicaid>

9. If I am currently receiving Health Care Alliance for Children (formerly Immigrant Children’s Program/ICP) will I lose coverage once I turn 21?

No. However, Alliance for Adults has a lower income threshold than Alliance for Children.

Additional eligibility changes may impact coverage beginning 10/1/26.

10. Will pregnant immigrants qualify for Alliance even if they are 26 years of age or older?

There are more coverage options for residents who are pregnant. If you are pregnant, you may be able to get coverage if your income is below 324% of the Federal Poverty Level, regardless of immigration status.

You can apply for coverage or report a change of circumstance (like pregnancy, change in income, change in household) to us online at districtdirect.dc.gov. You can also report a change by calling the Public Benefits Call Center at (202) 727-5355.

11. Can children (0-20) still apply and enroll for Health Care Alliance benefits?

Yes. There are no eligibility changes to Health Care Alliance for Children (*formerly Immigrant Children’s Program*).

Application Process

12. How do I apply for the Health Care Alliance Program and what is required?

You can apply for the Health Care Alliance program by:

- Online through District Direct: districtdirect.dc.gov
- District Direct Mobile App: Android (Google Store) and iPhone (Apple Store) friendly.
- Via Fax: 202-671-4400
- Via mail: Department of Human Services/Economic Security Administration (ESA)Centers

Service Center	Address	Phone	Fax
Anacostia	2100 Martin Luther King Avenue, SE	(202) 645-4614	(202) 727-3527
Congress Heights	4049 South Capitol Street, SW	(202) 645-4525	(202) 654-4524
Fort Davis	3851 Alabama Avenue, SE	(202) 645-4500	(202) 645-6205
H Street	645 H Street, NE	(202) 698-4350	(202) 724-8964
Taylor Street	1207 Taylor Street, NW	(202) 576-8000	(202) 576-8740

Applications will not be complete until residency and income verifications have been received.

- You must provide proof that you live in DC.
- If you are a US Citizen, you must provide your Social Security Card.
- If you have a green card, you must provide your Alien Number or your Social Security Card.

13. How long will it take to find out if I am eligible?

It takes 45 business days for eligibility to be determined. If you meet all requirements for the program your eligibility starts the first day of the month in which you applied. If you applied on April 28th and were approved for health coverage, your eligibility starts April 1st.

14. Is there extra support to help with the application process?

- District Direct Contact Center at (202) 727-5355.
- Tutorials on how to use DCAS, see link <https://dhcf.dc.gov/page/training-videos>.
- Service Centers (see question #21 for contact information).

15. How long does eligibility last?

Eligibility is active for 12 months. At the end of 12-months you must complete a renewal form and bring in all updated income and residency documents.

16. Will a Legal Permanent Resident (LPR/green card holder) have to meet the 5-year bar to be eligible for Medicaid?

Yes, in addition to other eligibility factors.

Renewal Process

17. Are face-to-face interviews required?

No, face-to-face interviews are not required.

18. How often do I have to renew my coverage?

Once every 12 months.

19. How will I know that it is time to renew my coverage?

A letter informing you of your upcoming renewal period will be sent **60 days** prior to the end of your certification period. If you are aged (65 years of age or older), blind or disabled your renewal form will be sent out **90 days** prior to the end of your certification period.

Things to keep in mind for renewal:

- At the time of renewal, recipients must verify their residence and income.
- Applicants/Recipients who are US citizens must provide a valid, verifiable Social Security Card;
- Applicants/Recipients who are immigrants (non-citizens who may be eligible for Medicaid) must provide a nine (9) digit Permanent Resident Card Number or valid and verifiable Social Security Number if available.

20. What verifications are needed for renewal?

Health Care Alliance beneficiaries will need to provide District residency and income verification. If you have a child on the Health Care Alliance program, the parent’s income will need to be provided along with the renewal form.

Verification Type	Acceptable Verifications
Income	<ul style="list-style-type: none"> • Recent paystubs (last 30 days) • Self-employment: most recent tax return • Retirement income statement • Disability income statement • Worker’s Compensation • Pension or annuity statement • Unemployment benefit statement
Residency	<ul style="list-style-type: none"> • Non-expired DC driver’s license or identification card • Active lease, rental agreement, or rent receipt • Utility or telephone bill • Pay stub or earning statement

	<p>issued in last 30 days that includes individuals name and DC address</p> <ul style="list-style-type: none"> • Property tax bill issues within the last 60 days of property located in DC • Completed residency form
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Beneficiaries are required to verify residency and income for every renewal period.

21. When do I need to submit my renewal?

Your renewal is due on the last day of your certification period. For example, if your renewal is due in May, you must return your renewal by May 31st.

22. What if I do not turn in my renewal by the end of my certification period?

If you have not submitted your renewal form by the end of your certification period, you still will have up to 90 days after the end of your certification end date to submit your renewal form. This 90-day period is known as the grace period. If you return your renewal form within the grace period and are determined still eligible for medical coverage, your coverage will retroactively go back to the certification end date. If you do not submit your renewal form by the 90th day, you will be required to submit a new application for medical healthcare coverage.

23. Will Health Care Alliance for Children (*formerly Immigrant Children’s Program*) still be allowed to renew yearly?

Yes.

24. Current Health Care Alliance beneficiaries who are 26 years of age or older and in their renewal, period still have the 90-day grace period?

Yes.

25. I recently renewed my Health Care Alliance coverage this year (2025) but I am over the 138% FPL limit, will my coverage end 9/30/2025?

Yes.

General Questions

26. Who is a qualified immigrant?

In 1996, when the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) was passed, Congress created a new way of deciding which non-citizens were eligible for federally funded programs, such as Medicaid. They created a new category called “qualified immigrants”. It simply means any non-citizen who currently has one of the following immigration statuses:

- Five (5) years or more as a Legal Permanent Resident (LPR)
- Refugee
- Asylee
- Parolee for over One (1) Year
- Withholding of Removal
- Victim of Domestic Violence and their children and
- Cuban/Haitian Entrant
- Special Iraqi/Afghan Immigrant

A new federal law changes who is a qualified immigrant. These changes will happen on October 1, 2026; updated guidance will be provided before then.

If “qualified immigrants” refers to Medicaid, what does it have to do with the Alliance?

Under Alliance rules, people may not be in the Alliance program if they are eligible for Medicaid. ESA asks non-citizens specifically if they fall into any of the categories that could make them eligible for Medicaid. If they do not, they just check “other” (which includes many legal-but-not-qualified alien statuses).

27. Can organizations still submit applications/renewal documents? Or should organizations contact participants to inform them of the changes and have them turn in the applications?

Yes, advocates and other organizations can still submit applications/renewals that were recently completed; however, there will be no new enrollment in the Health Care Alliance for applications after September 30, 2025, for adults 26 years and older. It will be helpful if advocates assist in educating the community about these new changes.

Advocates who use District Direct or the Mobile App must use the applicant's login credentials and email address if applicable and not the advocates personal email or contact information.

28. If participants need to report a change, do they have to go in person to ESA? Or can organizations still send the updated information to the Contact Center?

Participants needing to report a change are not required to visit an ESA service site. Reported changes for participants can still be forwarded to the District Direct Contact Center by calling (202) 727-5355.

29. Where can I learn more about the Health Care Alliance changes?

The Department of Health Care Finance (DHCF) hosts bi-weekly stakeholder meetings twice monthly on Wednesdays at 2:30 p.m. To add your name to the list to join the virtual meetings, please email us at Medicaid.renewal@dc.gov.

To view materials and recordings from these meetings please visit: <https://dhcf.dc.gov/page/meeting-recordings-and-slides>.

Questions? Contact us via email at Medicaid.renewal@dc.gov