

District of Columbia Department of Health Care Finance
Monthly Enrollment Report - February 2026, Reflecting Period of January 2025-January 2026



By Program

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Program	(preliminary) (preliminary) (preliminary)												
Total	310,456	310,192	311,493	311,443	310,218	308,727	308,100	306,372	305,321	301,893	298,396	295,845	273,722
Medicaid	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
ICP	6,120	5,843	5,863	5,887	5,776	5,677	5,615	5,454	5,288	5,046	4,759	4,487	4,063
Alliance	27,355	26,305	26,442	26,717	26,420	26,152	25,860	25,412	24,838	21,584	19,704	18,378	16,511

Medicaid By Service Delivery Type

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Service delivery type	(preliminary) (preliminary) (preliminary)												
Total	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
FFS	37,305	36,726	36,651	36,446	35,089	34,441	34,394	34,375	34,349	34,494	34,084	33,437	32,557
MCO non D-SNP	225,165	226,569	227,574	227,471	227,700	227,047	226,742	225,543	225,171	225,023	224,020	223,772	204,279
MCO D-SNP	14,511	14,749	14,963	14,922	15,233	15,410	15,489	15,588	15,675	15,746	15,829	15,771	16,312

Medicaid By Plan

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Plan	(preliminary) (preliminary) (preliminary)												
Total	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
FFS	37,305	36,726	36,651	36,446	35,089	34,441	34,394	34,375	34,349	34,494	34,084	33,437	32,557
AmeriHealth	107,647	108,279	108,816	108,760	108,638	108,353	108,250	107,730	107,457	107,516	107,235	107,398	98,281
Edenbridge PACE	63	62	60	58	58	52	47	45	45	40	40	41	40
HSCSN	4,914	4,913	4,933	4,958	4,995	4,994	5,002	4,989	5,042	5,049	5,040	5,053	4,999
MedStar	56,367	56,865	57,082	57,066	57,213	56,962	56,911	56,582	56,570	56,655	56,593	56,726	51,605
United D-SNP	14,511	14,749	14,963	14,922	15,233	15,410	15,489	15,588	15,675	15,746	15,829	15,771	16,312
Wellpoint	56,174	56,450	56,683	56,629	56,796	56,686	56,532	56,197	56,057	55,763	55,112	54,554	49,354

Medicaid By Age

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Age group	(preliminary) (preliminary) (preliminary)												
Total	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
Child (0-20 years)	98,590	98,491	98,686	98,697	98,444	98,102	97,843	97,208	96,848	96,498	95,931	95,290	93,955
Adult (21-64 years)	150,315	151,255	151,982	151,482	150,872	149,981	149,817	149,192	149,005	149,247	148,390	148,133	129,634
Senior (65+ years)	28,076	28,298	28,520	28,660	28,706	28,815	28,965	29,106	29,342	29,518	29,612	29,557	29,559

Medicaid By Medicare Dual Status

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Medicare dual status	(preliminary) (preliminary) (preliminary)												
Total	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
Non-dual	241,255	242,125	243,026	242,580	241,791	240,594	240,207	239,067	238,617	238,617	237,306	236,506	216,905
Dual	35,726	35,919	36,162	36,259	36,231	36,304	36,418	36,439	36,578	36,646	36,627	36,474	36,243

Medicaid By Eligibility Category

Fiscal Year YTD	FY 2025									FY 2026 to date			
Year Month Number YYYY MM	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01
Eligibility category	(preliminary) (preliminary) (preliminary)												
Total	276,981	278,044	279,188	278,839	278,022	276,898	276,625	275,506	275,195	275,263	273,933	272,980	253,148
Medicaid ABD other	7,294	7,355	7,452	7,488	7,519	7,539	7,578	7,589	7,626	7,644	7,613	7,579	7,473
Medicaid ABD SSI	22,556	22,386	22,257	22,154	21,823	21,730	21,709	21,696	21,668	21,618	21,581	21,588	21,701
Medicaid child, CHIP	17,580	17,558	17,593	17,620	17,631	17,587	17,497	17,200	16,788	16,652	16,508	16,492	16,276
Medicaid child, non-CHIP	75,774	75,731	75,879	75,884	75,591	75,282	75,083	74,744	74,736	74,529	74,070	73,421	72,301
Medicaid childless adult 0%-133% FPL	76,278	76,997	77,825	78,058	77,778	77,185	77,183	76,945	77,063	77,238	77,313	77,307	78,322
Medicaid childless adult 134%-210% FPL	16,417	16,423	16,423	16,353	16,277	16,218	16,116	15,806	15,650	15,481	15,105	14,926	1
Medicaid incarcerated	897	899	881	850	867	908	973	1,043	1,126	1,210	1,271	1,358	1,405
Medicaid LTSS DD waiver	1,909	1,910	1,915	1,922	1,926	1,924	1,920	1,922	1,921	1,919	1,920	1,909	1,888
Medicaid LTSS EPD waiver	5,912	5,929	5,982	6,023	6,079	6,127	6,220	6,304	6,407	6,531	6,648	6,751	6,746
Medicaid LTSS non-waiver	3,389	3,350	3,346	3,320	3,315	3,293	3,303	3,280	3,253	3,229	3,179	3,108	3,015
Medicaid other	220	217	210	216	219	220	218	221	222	409	423	443	467
Medicaid parent/caretaker	36,270	36,568	36,596	36,070	36,010	35,812	35,758	35,621	35,533	35,559	35,021	34,902	29,669
Medicaid pregnant woman	863	892	894	845	880	884	869	865	863	863	865	896	1,004
Medicaid QMB only	11,622	11,829	11,935	12,036	12,107	12,189	12,198	12,270	12,339	12,381	12,416	12,300	12,880

This report provides data on enrollment in DHCF programs that include Medicaid, the DC Healthcare Alliance, and the Immigrant Children's Program (ICP). It is based on DHCF Medicaid Management Information System data as of February 17, 2025. 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. For example, individuals losing coverage at their renewal date have a 90-day grace period for re-enrollment; as a result, beneficiary counts for the same months in future reports will be higher.

Recent notable issues with regard to enrollment include:

- Due to a Medicaid continuous coverage requirement that applied in the District from March 2020 through May 2023 due to the federal public health emergency (PHE), beneficiaries could only lose Medicaid coverage due to non-residency in the District, death, or a request to disenroll. Under District policies, continuous coverage extended similarly to Alliance and ICP beneficiaries through August 2022.
- Decreases in Medicaid enrollment that began in June 2023 are due to a restart of eligibility redeterminations following the end of the federal PHE, also referred to as the unwinding period. Medicaid decreases beginning in January 2026 reflect a reduction in eligibility for childless adults and parent/caretaker relatives age 21 and older to 138% of the federal poverty level (FPL).
- Decreases in Alliance and ICP enrollment beginning in September 2022 are due to a restart of eligibility redeterminations for those programs. Alliance decreases beginning in October 2025 reflect a reduction in eligibility for adults age 21 and older to 138% FPL and a moratorium on enrollment of new adults over age 26.