

District of Columbia Department of Health Care Finance
Monthly Enrollment Report - January 2026, Reflecting Period of December 2024-December 2025



By Program

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Program											(preliminary)	(preliminary)	(preliminary)
Total	310,815	310,305	310,024	311,311	311,236	309,977	308,441	307,766	305,979	304,837	301,229	297,505	294,666
Medicaid	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
ICP	6,060	6,120	5,842	5,862	5,887	5,776	5,675	5,613	5,450	5,278	5,028	4,731	4,443
Alliance	27,071	27,353	26,300	26,437	26,710	26,410	26,138	25,842	25,388	24,797	21,526	19,617	18,244

Medicaid By Service Delivery Type

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Service delivery type											(preliminary)	(preliminary)	(preliminary)
Total	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
FFS	37,657	37,220	36,642	36,562	36,337	34,963	34,294	34,213	34,171	34,112	34,117	33,635	32,939
MCO non D-SNP	226,232	225,101	226,491	227,487	227,380	227,595	226,925	226,610	225,383	224,977	224,812	223,692	223,271
MCO D-SNP	13,795	14,511	14,749	14,963	14,922	15,233	15,409	15,488	15,587	15,673	15,746	15,830	15,769

Medicaid By Plan

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Plan											(preliminary)	(preliminary)	(preliminary)
Total	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
FFS	37,657	37,220	36,642	36,562	36,337	34,963	34,294	34,213	34,171	34,112	34,117	33,635	32,939
AmeriHealth	107,813	107,629	108,254	108,786	108,729	108,602	108,309	108,203	107,672	107,385	107,430	107,097	107,176
Edenbridge PACE	62	63	62	60	58	58	52	47	45	45	40	40	41
HSCSN	4,928	4,913	4,912	4,933	4,958	4,994	4,994	5,001	4,986	5,039	5,046	5,034	5,044
MedStar	56,826	56,349	56,845	57,057	57,037	57,179	56,918	56,865	56,530	56,512	56,595	56,508	56,588
United D-SNP	13,795	14,511	14,749	14,963	14,922	15,233	15,409	15,488	15,587	15,673	15,746	15,830	15,769
Wellpoint	56,603	56,147	56,418	56,651	56,598	56,762	56,652	56,494	56,150	55,996	55,701	55,013	54,422

Medicaid By Age

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Age group											(preliminary)	(preliminary)	(preliminary)
Total	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
Child (0-20 years)	98,353	98,518	98,416	98,606	98,607	98,345	97,993	97,719	97,055	96,663	96,266	95,611	94,864
Adult (21-64 years)	151,382	150,247	151,178	151,897	151,382	150,755	149,842	149,652	149,007	148,787	148,930	147,981	147,618
Senior (65+ years)	27,949	28,067	28,288	28,509	28,650	28,691	28,793	28,940	29,079	29,312	29,479	29,565	29,497

Medicaid By Medicare Dual Status

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Medicare dual status											(preliminary)	(preliminary)	(preliminary)
Total	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
Non-dual	242,021	241,129	241,987	242,874	242,404	241,594	240,366	239,942	238,754	238,241	238,101	236,615	235,617
Dual	35,663	35,703	35,895	36,138	36,235	36,197	36,262	36,369	36,387	36,521	36,574	36,542	36,362

Medicaid By Eligibility Category

Fiscal Year YTD	FY 2025										FY 2026 to date		
Year Month Number YYYY MM	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12
Eligibility category											(preliminary)	(preliminary)	(preliminary)
Total	277,684	276,832	277,882	279,012	278,639	277,791	276,628	276,311	275,141	274,762	274,675	273,157	271,979
Medicaid ABD other	7,322	7,293	7,353	7,451	7,487	7,522	7,535	7,572	7,581	7,614	7,624	7,595	7,554
Medicaid ABD SSI	22,647	22,557	22,385	22,256	22,156	21,826	21,732	21,711	21,697	21,669	21,619	21,585	21,607
Medicaid child, CHIP	17,572	17,500	17,477	17,518	17,542	17,552	17,501	17,409	17,109	16,692	16,555	16,402	16,385
Medicaid child, non-CHIP	75,545	75,785	75,741	75,879	75,875	75,573	75,260	75,047	74,686	74,653	74,400	73,865	73,115
Medicaid childless adult 0%-133% FPL	77,307	76,240	76,959	77,776	78,005	77,716	77,111	77,091	76,843	76,931	77,027	77,062	77,000
Medicaid childless adult 134%-210% FPL	16,483	16,424	16,425	16,437	16,362	16,285	16,232	16,131	15,817	15,667	15,500	15,118	14,936
Medicaid incarcerated	911	895	900	882	852	870	911	977	1,050	1,133	1,221	1,287	1,381
Medicaid LTSS DD waiver	1,903	1,909	1,910	1,915	1,923	1,927	1,925	1,921	1,924	1,922	1,920	1,921	1,910
Medicaid LTSS EPD waiver	5,874	5,912	5,928	5,983	6,024	6,079	6,126	6,221	6,309	6,410	6,538	6,644	6,686
Medicaid LTSS non-waiver	3,388	3,393	3,354	3,346	3,319	3,315	3,291	3,296	3,272	3,240	3,205	3,151	3,082
Medicaid other	215	219	217	210	215	220	218	217	220	227	412	425	439
Medicaid parent/caretaker	36,179	36,239	36,529	36,550	36,017	35,949	35,744	35,687	35,543	35,444	35,454	34,875	34,727
Medicaid pregnant woman	844	862	891	892	844	878	882	865	859	857	857	853	881
Medicaid QMB only	11,494	11,604	11,813	11,917	12,018	12,079	12,160	12,166	12,231	12,303	12,343	12,374	12,276

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 January 26, 2026. 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.
- 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% of the federal poverty level (FPL) and a moratorium on enrollment of new adults over age 26.