

District of Columbia Department of Health Care Finance
Monthly Enrollment Report - August 2025, Reflecting Period of July 2024-July 2025



By Program

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Program											(preliminary)	(preliminary)	(preliminary)
Total	308,214	307,007	307,256	308,478	308,655	309,772	309,141	308,734	309,877	309,522	307,849	305,640	303,589
Medicaid	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
ICP	5,642	5,772	5,831	5,932	5,982	6,051	6,112	5,829	5,845	5,867	5,753	5,645	5,543
Alliance	24,915	25,379	25,937	26,384	26,715	27,043	27,327	26,268	26,397	26,662	26,341	26,033	25,553

Medicaid By Service Delivery Type

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Service delivery type											(preliminary)	(preliminary)	(preliminary)
Total	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
FFS	38,242	38,497	39,683	39,118	39,320	37,239	36,725	36,075	35,897	35,498	33,861	32,796	32,122
MCO non D-SNP	226,499	224,337	222,576	223,506	222,891	225,631	224,452	225,796	226,758	226,555	226,648	225,743	224,874
MCO D-SNP	12,916	13,022	13,229	13,538	13,747	13,808	14,525	14,766	14,980	14,940	15,246	15,423	15,497

Medicaid By Plan

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Plan											(preliminary)	(preliminary)	(preliminary)
Total	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
FFS	38,242	38,497	39,683	39,118	39,320	37,239	36,725	36,075	35,897	35,498	33,861	32,796	32,122
Amerigroup	56,987	56,492	55,893	56,053	55,887	56,436	55,964	56,231	56,452	56,365	56,502	56,328	56,036
AmeriHealth	107,405	106,192	105,500	106,051	105,893	107,519	107,313	107,912	108,430	108,333	108,148	107,742	107,356
Edenbridge PACE	62	65	64	64	62	63	64	63	61	60	60	54	49
HSCSN	4,889	4,924	4,925	4,919	4,905	4,932	4,916	4,916	4,939	4,965	4,998	4,993	4,989
MedStar	57,156	56,664	56,194	56,419	56,144	56,681	56,195	56,674	56,876	56,832	56,940	56,626	56,444
United D-SNP	12,916	13,022	13,229	13,538	13,747	13,808	14,525	14,766	14,980	14,940	15,246	15,423	15,497

Medicaid By Age

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Age group											(preliminary)	(preliminary)	(preliminary)
Total	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
Child (0-20 years)	97,776	97,878	97,870	97,928	97,928	97,941	98,069	97,937	98,083	98,022	97,629	97,074	96,340
Adult (21-64 years)	152,811	150,684	150,182	150,611	150,232	150,763	149,553	150,397	151,031	150,318	149,467	148,178	147,349
Senior (65+ years)	27,070	27,294	27,436	27,623	27,798	27,974	28,080	28,303	28,521	28,653	28,659	28,710	28,804

Medicaid By Medicare Dual Status

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Medicare dual status											(preliminary)	(preliminary)	(preliminary)
Total	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
Non-dual	242,667	240,737	240,270	240,834	240,539	241,093	240,117	240,886	241,677	240,976	239,848	238,079	236,616
Dual	34,990	35,119	35,218	35,328	35,419	35,585	35,585	35,751	35,958	36,017	35,907	35,883	35,877

Medicaid By Eligibility Category

Fiscal Year YTD	FY 2024			FY 2025 to date									
Year Month Number YYYY MM	2024-07	2024-08	2024-09	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07
Eligibility category											(preliminary)	(preliminary)	(preliminary)
Total	277,657	275,856	275,488	276,162	275,958	276,678	275,702	276,637	277,635	276,993	275,755	273,962	272,493
Medicaid ABD other	7,214	7,306	7,330	7,323	7,315	7,323	7,283	7,333	7,400	7,421	7,443	7,438	7,436
Medicaid ABD SSI	23,334	23,346	23,148	23,033	22,762	22,654	22,570	22,400	22,268	22,167	21,849	21,746	21,721
Medicaid child, CHIP	17,703	17,726	17,618	17,605	17,629	17,579	17,502	17,477	17,527	17,545	17,544	17,484	17,365
Medicaid child, non-CHIP	74,902	74,926	74,981	75,048	75,077	75,120	75,331	75,256	75,348	75,294	74,882	74,383	73,748
Medicaid childless adult 0%-133% FPL	76,300	75,334	75,255	75,846	76,320	76,975	75,854	76,549	77,272	77,398	76,967	76,120	75,666
Medicaid childless adult 134%-210% FPL	17,822	17,518	17,240	17,076	16,463	16,401	16,331	16,321	16,378	16,298	16,201	16,131	15,977
Medicaid incarcerated	887	919	954	976	969	942	938	952	939	921	953	999	1,074
Medicaid LTSS DD waiver	1,906	1,906	1,903	1,908	1,905	1,905	1,909	1,909	1,915	1,921	1,924	1,920	1,917
Medicaid LTSS EPD waiver	5,599	5,647	5,726	5,827	5,860	5,891	5,927	5,944	6,004	6,056	6,120	6,185	6,263
Medicaid LTSS non-waiver	3,426	3,434	3,433	3,417	3,402	3,380	3,374	3,325	3,295	3,233	3,174	3,107	3,035
Medicaid other	221	224	223	217	210	210	216	214	205	215	219	217	218
Medicaid parent/caretaker	36,732	35,834	35,821	35,911	35,891	35,994	36,050	36,315	36,319	35,712	35,603	35,317	35,170
Medicaid pregnant woman	864	882	874	854	857	842	853	872	866	816	842	838	816
Medicaid QMB only	10,747	10,854	10,982	11,121	11,298	11,462	11,564	11,770	11,899	11,996	12,034	12,077	12,087

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 August 25, 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.
 - Decreases in Alliance and ICP enrollment beginning in September 2022 are due to a restart of eligibility redeterminations for those programs.