

Monthly Integrated Care Exclusively Aligned Enrollment Report: Dually Eligible Individuals Enrolled in Medicare-Medicaid Plans (MMPs), Programs of All-Inclusive Care for the Elderly (PACE), and Applicable Integrated Plans (AIPs)

Table 1. Total Monthly Enrollment in Integrated Care Plans With Exclusively Aligned Enrollment: MMPs, PACE, and/or Applicable Integrated Plans AIPs

State	MMP	PACE	AIP ¹	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
AL		X		169	170	167	172	172	172	170	175	170	168	169	168	161
AK				-	-	-	-	-	-	-	-	-	-	-	-	-
AR		X		504	513	528	534	537	543	548	547	554	553	563	557	564
AZ			X	-	-	-	-	-	-	-	-	-	12,286	12,362	12,338	12,414
CA		X	X	335,185	338,006	340,561	342,289	344,167	347,396	349,927	352,333	351,510	373,381	377,429	384,211	388,814
CO		X		4,330	4,360	4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577	4,603	4,620
CT				-	-	-	-	-	-	-	-	-	-	-	-	-
DC		X	X	9,642	9,401	9,446	9,425	9,383	9,093	9,075	9,178	9,232	9,580	9,595	9,654	9,605
DE		X		347	340	339	340	349	353	355	357	359	356	362	363	362
FL		X	X	20,072	19,868	19,949	19,798	19,725	19,743	20,330	20,842	20,249	72,376	80,650	87,551	92,311
GA				-	-	-	-	-	-	-	-	-	-	-	-	-
HI			X	6,197	6,200	6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735	25,358	25,541
IA		X		637	651	649	654	666	669	674	676	675	655	669	685	687
ID			X	13,215	13,257	13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815	13,625	13,485
IL	X	X		88,527	85,150	82,501	80,690	79,890	79,046	78,593	78,065	77,992	74,945	76,151	75,190	76,554
IN		X		550	551	568	568	607	630	663	698	723	729	754	762	774
KS		X		804	814	830	826	832	821	836	839	860	854	865	865	874
KY		X		132	134	143	159	182	224	261	270	284	299	331	382	416
LA		X		386	391	395	397	403	425	424	430	438	430	432	437	442
MA	X	X	X	121,336	121,173	119,867	119,807	119,670	119,770	119,974	120,094	119,908	119,950	120,023	119,897	119,772
MD		X		136	136	134	133	132	139	143	141	144	143	142	135	147

State	MMP	PACE	AIP ¹	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
ME				-	-	-	-	-	-	-	-	-	-	-	-	-
MI	X	X		46,052	45,237	42,462	41,088	40,392	40,082	39,428	39,052	39,125	39,969	39,988	38,809	40,407
MN			X	59,086	59,082	58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804	58,653	59,089
MO		X		40	42	46	46	50	50	55	56	74	73	80	90	107
MS				-	-	-	-	-	-	-	-	-	-	-	-	-
MT				-	-	-	-	-	-	-	-	-	-	-	-	-
NC		X		1,882	1,874	1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940	1,952	1,960
ND		X		181	175	175	177	177	173	169	173	172	178	180	183	183
NE		X		199	199	196	192	191	190	190	191	187	188	189	182	182
NH				-	-	-	-	-	-	-	-	-	-	-	-	-
NJ		X	X	97,449	97,559	97,537	97,031	96,849	95,440	95,527	95,921	95,370	96,721	96,655	96,458	96,632
NM		X	X	457	452	452	448	440	442	442	447	448	1,752	1,789	1,818	1,550
NV				-	-	-	-	-	-	-	-	-	-	-	-	-
NY	X	X	X	52,479	53,456	54,887	55,827	56,779	58,023	59,058	60,041	60,518	63,758	64,753	66,674	68,619
OH	X	X		62,887	62,129	60,763	60,593	60,138	59,537	59,292	59,022	57,405	41,797	56,775	57,313	56,263
OK		X		681	682	683	689	690	698	691	692	703	699	697	699	714
OR		X		1,836	1,851	1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860	1,863	1,862
PA		X		7,592	7,562	7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631	7,610	7,583
PR			X	304,333	305,003	305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804	303,551	303,527
RI	X	X		13,237	13,005	12,792	12,537	12,231	12,124	12,039	11,977	11,939	11,693	11,652	11,614	11,559
SC	X	X		10,501	10,392	10,165	10,008	9,963	9,771	9,661	9,567	9,532	9,094	9,266	9,011	8,861
SD				-	-	-	-	-	-	-	-	-	-	-	-	-
TN		X	X	2,601	2,552	2,511	2,443	2,452	2,458	2,450	2,457	2,423	2,532	2,522	2,534	2,560
TX	X	X		25,091	24,493	23,762	23,357	23,025	22,509	21,901	21,704	21,320	18,646	18,033	16,883	17,357
UT				-	-	-	-	-	-	-	-	-	-	-	-	-
VA		X	X	21,375	21,406	21,646	21,407	21,397	21,274	21,101	21,121	21,036	88,752	89,716	88,247	88,135
VT				-	-	-	-	-	-	-	-	-	-	-	-	-
WA		X		1,364	1,383	1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548	1,555	1,548

State	MMP	PACE	AIP ¹	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
WI		X	X	2,983	2,956	2,938	2,942	2,932	2,895	2,902	2,884	2,891	2,824	2,833	2,784	2,771
WV				-	-	-	-	-	-	-	-	-	-	-	-	-
WY				-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	8	34	15	1,314,475	1,312,605	1,308,250	1,305,720	1,304,519	1,304,359	1,306,896	1,309,418	1,305,489	1,460,388	1,494,339	1,505,264	1,519,012
PERCENT CHANGE SINCE PREVIOUS MONTH				0%	0%	0%	0%	0%	0%	0%	0%	0%	12%	2%	1%	1%

¹ AIP enrollment includes enrollees in fully integrated dual eligible special needs plans (FIDE SNPs), highly integrated dual eligible special needs plans (HIDE SNPs) and/or coordination-only dual eligible special needs plan (CO D-SNPs) that meet the requirements at 42 CFR 422.561 to qualify as AIPs.

Table 2. Monthly Enrollment in Medicare-Medicaid Plans by Plan and State, April 2024 to April 2025^{2, 3, 4}

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
IL	H0336	HUMANA HEALTH PLAN, INC.	16,709	15,867	15,148	14,735	14,713	14,621	14,586	14,336	14,327	13,451	13,751	13,473	13,834
IL	H0927	HEALTH CARE SERVICE CORPORATION	22,170	21,603	21,141	20,771	20,635	20,444	20,379	20,287	20,279	19,948	20,129	19,983	19,928
IL	H2506	AETNA BETTER HEALTH PREMIER PLAN MMAI INC.	16,627	15,806	15,200	14,885	14,763	14,649	14,631	14,442	14,417	13,685	13,947	13,727	14,150
IL	H6080	MERIDIAN HEALTH PLAN OF ILLINOIS, INC.	15,859	15,532	15,324	15,074	14,743	14,421	14,214	14,437	14,425	13,816	14,102	13,994	14,265
IL	H8046	MOLINA HEALTHCARE OF ILLINOIS, INC.	17,162	16,342	15,688	15,225	15,036	14,911	14,783	14,563	14,533	14,005	14,178	13,963	14,325
		IL TOTAL	88,527	85,150	82,501	80,690	79,890	79,046	78,593	78,065	77,981	74,905	76,107	75,140	76,502
MA	H0137	COMMONWEALTH CARE ALLIANCE, INC.	31,445	31,205	30,468	30,360	30,197	30,077	29,954	29,771	29,736	29,367	29,227	28,939	28,733
MA	H7419	TUFTS HEALTH PUBLIC PLANS, INC.	8,191	8,065	7,750	7,644	7,567	7,469	7,381	7,328	7,286	7,234	7,189	7,124	7,114
MA	H9239	UNITEDHEALTHCARE INSURANCE COMPANY	5,555	5,394	5,093	5,034	4,968	4,919	4,854	4,729	4,685	4,634	4,650	4,607	4,577
		MA TOTAL	45,191	44,664	43,311	43,038	42,732	42,465	42,189	41,828	41,707	41,235	41,066	40,670	40,424
MI	H0192	AMERIHEALTH MICHIGAN, INC.	3,478	3,294	2,957	2,811	2,782	2,767	2,695	2,654	2,687	3,120	3,133	2,957	3,063
MI	H0480	MERIDIAN HEALTH PLAN OF MICHIGAN, INC.	7,153	7,132	6,450	6,225	5,931	5,779	5,609	5,543	5,505	5,209	5,173	5,076	5,153
MI	H1977	UPPER PENINSULA HEALTH PLAN, LLC	4,668	4,560	4,428	4,315	4,235	4,237	4,153	4,117	4,084	4,286	4,274	4,176	4,294
MI	H7844	MOLINA HEALTHCARE OF MICHIGAN, INC.	11,273	10,995	10,445	10,073	9,926	9,848	9,683	9,582	9,572	9,630	9,609	9,313	9,553

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
MI	H8026	AETNA BETTER HEALTH OF MICHIGAN INC.	10,025	9,918	9,075	8,671	8,546	8,453	8,291	8,144	8,230	8,563	8,545	8,147	9,043
MI	H9712	HAP CareSource	4,637	4,488	4,218	4,029	3,952	3,918	3,850	3,820	3,790	3,875	3,915	3,795	3,891
		MI TOTAL	41,234	40,387	37,573	36,124	35,372	35,002	34,281	33,860	33,868	34,683	34,649	33,464	34,997
NY	H9869	PARTNERS HEALTH PLAN, INC.	1,632	1,621	1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647	1,708	1,708
		NY TOTAL⁴	1,632	1,621	1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647	1,708	1,708
OH	H0022	BUCKEYE COMMUNITY HEALTH PLAN, INC.	10,543	10,466	10,263	10,271	10,267	10,206	10,215	10,240	9,934	9,591	9,831	9,788	9,662
OH	H2531	UNITEDHEALTHCARE COMMUNITY PLAN OF OHIO, INC.	8,953	8,863	8,629	8,688	8,611	8,559	8,501	8,393	8,089	7,875	8,285	8,250	8,038
OH	H5280	MOLINA HEALTHCARE OF OHIO, INC.	13,057	12,821	12,478	12,357	12,249	12,154	12,077	12,083	11,748	11,482	11,912	11,913	11,739
OH	H7172	AETNA BETTER HEALTH INC. (OH)	13,759	13,595	13,352	13,359	13,257	13,057	13,027	12,974	12,712	12,282	12,605	12,568	12,423
OH	H8452	CARESOURCE OHIO, INC.	16,058	15,871	15,533	15,422	15,243	15,045	14,957	14,813	14,402	53	13,624	14,266	13,868
		OH TOTAL	62,370	61,616	60,255	60,097	59,627	59,021	58,777	58,503	56,885	41,283	56,257	56,785	55,730
RI	H9576	NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND	12,869	12,631	12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260	11,210	11,148
		RI TOTAL	12,869	12,631	12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260	11,210	11,148
SC	H1723	ABSOLUTE TOTAL CARE, INC.	2,708	2,675	2,618	2,571	2,572	2,546	2,519	2,503	2,511	2,386	2,447	2,376	2,325
SC	H2533	MOLINA HEALTHCARE OF SOUTH CAROLINA, INC.	3,257	3,212	3,140	3,092	3,074	3,021	2,984	2,961	2,953	2,846	2,917	2,825	2,779

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
SC	H8213	SELECT HEALTH OF SOUTH CAROLINA, INC.	4,044	4,008	3,912	3,845	3,815	3,695	3,647	3,595	3,560	3,369	3,409	3,326	3,259
		SC TOTAL	10,009	9,895	9,670	9,508	9,461	9,262	9,150	9,059	9,024	8,601	8,773	8,527	8,363
TX	H6870	SUPERIOR HEALTHPLAN, INC.	5,928	5,671	5,476	5,361	5,252	5,093	4,941	4,905	4,746	3,682	3,536	3,322	3,371
TX	H7833	UNITEDHEALTHCARE COMMUNITY PLAN OF TEXAS, L.L.C.	2,880	2,845	2,753	2,716	2,717	2,666	2,631	2,590	2,560	3,236	3,175	2,860	3,003
TX	H8197	MOLINA HEALTHCARE OF TEXAS, INC.	9,141	9,018	8,870	8,764	8,725	8,619	8,582	8,573	8,563	10,644	10,241	9,616	9,909
TX	H8786	WELLPOINT TEXAS, INC.	6,062	5,878	5,578	5,426	5,244	5,053	4,664	4,545	4,362	**	**	**	**
		TX TOTAL	24,011	23,412	22,677	22,267	21,938	21,431	20,818	20,613	20,231	17,562	16,952	15,798	16,283
TOTAL MMP ENROLLMENT			285,843	279,376	270,026	265,506	262,499	259,597	257,088	255,173	252,901	231,212	246,711	243,302	245,155
PERCENT CHANGE SINCE PREVIOUS MONTH			-1%	-2%	-3%	-2%	-1%	-1%	-1%	-1%	-1%	-9%	7%	-1%	1%

² Totals reflect enrollment as of the April 1, 2025 payment. The payment reflects enrollments accepted through March 7, 2025.

³ Enrollment figures presented here are for the most recent 13 months (April 2024 – April 2025) of the demonstration. Previous months of enrollment are not displayed. A double asterisk (**) in the enrollment column indicates a plan was not operating during the enrollment month.

⁴ New York ended the Fully Integrated Duals Advantage (FIDA) demonstration on 12/31/2019 but is continuing the FIDA for Individuals with Developmental Disabilities (FIDA-IDD) program.

Table 3. Monthly Enrollment in Program of All-Inclusive Care for the Elderly (PACE) by Plan and State, April 2024 – April 2025^{5, 6}

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
AL	H4074	MERCY LIFE OF ALABAMA	169	170	167	172	172	172	170	175	170	168	169	168	161
		AL TOTAL	169	170	167	172	172	172	170	175	170	168	169	168	161
AR	H4305	TOTAL LIFE HEALTHCARE	322	323	333	338	348	345	340	340	344	335	340	338	342
AR	H6342	COMPLETE HEALTH WITH PACE	95	96	96	94	91	95	98	98	98	105	107	106	112
AR	H6425	WASHINGTON REGIONAL MEDICORP	87	94	99	102	98	103	110	109	112	113	116	113	110
		AR TOTAL	504	513	528	534	537	543	548	547	554	553	563	557	564
CA	H0542	ALTAMED HEALTH SERVICES CORPORATION	2,950	2,979	3,003	3,033	3,053	3,072	3,131	3,167	3,205	3,193	3,203	3,219	3,248
CA	H0934	PACIFIC PACE, LLC	433	459	469	500	529	531	554	571	595	609	623	639	639
CA	H1228	GOLDEN VALLEY HEALTH CENTERS	175	181	178	188	198	205	203	220	243	249	252	255	270
CA	H1544	LA COAST PACE, LLC	336	345	354	353	360	362	381	391	396	412	426	437	450
CA	H1622	NORTH EAST MEDICAL SERVICES	107	110	110	114	120	125	131	132	137	135	139	141	142
CA	H1693	FAMILY HEALTH CENTERS OF SAN DIEGO, INC	218	215	223	219	228	229	227	237	246	240	253	263	269
CA	H1917	WELBEHEALTH INLAND EMPIRE PACE, LLC	*	*	*	*	*	35	57	80	112	134	169	199	234
CA	H2085	COLLABRIA CARE	30	34	36	37	41	45	52	55	58	56	55	54	57
CA	H2368	INNOVAGE CALIFORNIA PACE-SACRAMENTO, LLC	242	262	293	319	340	346	361	384	404	407	431	446	456
CA	H2384	SEQUOIA PACE, LLC	507	520	521	535	551	566	582	591	607	608	629	641	666
CA	H2541	AGEWELL PACE	40	48	54	61	67	74	78	82	89	98	98	113	118
CA	H3517	HUMBOLDT SENIOR RESOURCE CENTER, INC.	270	273	271	274	283	290	290	295	301	301	305	307	308
CA	H3563	GARY AND MARY WEST SENIOR SERVICES, INC.	324	337	337	334	337	329	338	346	362	352	352	364	363
CA	H4185	NEIGHBORHOOD HEALTHCARE	137	139	143	148	147	152	158	169	181	189	199	208	226

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
CA	H4538	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	**	**	*	*	*	18
CA	H4626	myPlace Greater LA PACE Inc.	*	*	11	16	20	22	24	23	26	27	34	38	42
CA	H5403	ON LOK SENIOR HEALTH SERVICES	1,585	1,599	1,597	1,596	1,607	1,610	1,630	1,641	1,646	1,647	1,650	1,661	1,663
CA	H5405	CENTER FOR ELDERS INDEPENDENCE	962	973	976	985	978	990	999	1,015	1,037	1,032	1,041	1,047	1,055
CA	H5406	SUTTER VALLEY HOSPITALS	406	406	406	401	406	410	415	427	437	437	433	444	441
CA	H5629	COMMUNITY ELDERCARE OF SAN DIEGO	1,120	1,116	1,125	1,131	1,137	1,136	1,141	1,148	1,135	1,116	1,126	1,112	1,116
CA	H6079	TOTAL LONGTERM CARE, INC.	1,157	1,157	1,167	1,173	1,181	1,173	1,180	1,192	1,176	1,177	1,189	1,194	1,177
CA	H6081	HIGH DESERT PACE, INC,	**	**	**	*	*	*	21	29	37	46	56	59	77
CA	H6147	LOMA LINDA UNIVERSITY MEDICAL CENTER	*	*	*	22	27	31	39	43	50	56	56	62	69
CA	H6317	WELBEHEALTH BAY AREA PACE, LLC	22	29	35	47	60	69	82	93	100	105	114	118	125
CA	H6517	Family HealthCare Network (FHCN) PACE	**	**	**	*	*	*	12	17	24	*	34	43	43
CA	H6537	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	**	**	*	*	*	17
CA	H7366	CONCERTOHEALTH PACE OF LOS ANGELES, LLC	22	23	25	29	31	39	45	50	56	62	70	73	72
CA	H7501	ORANGE COUNTY HEALTH AUTHORITY	231	237	233	233	234	236	231	228	230	231	231	228	229
CA	H7656	VALLEY PACE, LLC	**	**	**	*	*	*	15	24	26	32	33	33	36
CA	H7855	BRANDMAN CENTERS FOR SENIOR CARE, INC.	228	232	239	248	250	256	263	267	270	268	272	272	269
CA	H8082	STOCKTON PACE	686	710	728	746	758	771	772	775	790	811	836	854	871
CA	H9360	CHINATOWN SERVICE CENTER	**	**	**	**	**	**	**	**	**	*	*	*	11
CA	H9411	1818 WESTERN, LLC	**	**	**	**	**	**	**	**	**	*	*	*	*
CA	H9592	INNOVATIVE INTEGRATED HEALTH, INC.	1,134	1,170	1,194	1,204	1,228	1,263	1,290	1,307	1,305	1,323	1,341	1,354	1,366
CA	H9616	CENTRO DE SALUD DE LA COMUNIDAD DE SAN YSIDRO	1,957	1,975	1,992	1,989	2,010	2,025	2,075	2,086	2,116	2,119	2,152	2,174	2,194

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
		CA TOTAL	15,279	15,529	15,720	15,935	16,181	16,392	16,777	17,085	17,397	17,472	17,802	18,052	18,337
CO	H0613	TOTAL LONGTERM CARE, INC.	2,679	2,684	2,679	2,706	2,717	2,727	2,769	2,802	2,810	2,799	2,823	2,833	2,835
CO	H2815	VOANS SENIOR COMMUNITY CARE OF COLORADO, INC	277	276	287	289	295	291	294	291	285	282	281	281	280
CO	H5167	ROCKY MOUNTAIN HEALTH CARE SERVICES	937	956	972	985	979	969	980	991	997	994	997	999	1,006
CO	H7262	TRU COMMUNITY CARE	295	297	296	299	301	305	309	312	308	301	297	310	315
CO	H7296	HOSPICE OF METRO DENVER, INC	**	**	**	**	**	**	**	**	**	**	**	*	*
CO	H9649	HOPEWEST	142	147	151	161	165	170	170	171	177	175	179	180	184
		CO TOTAL	4,330	4,360	4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577	4,603	4,620
DC	H9564	PACE4DC LLC	44	45	48	48	55	54	53	52	51	49	50	50	49
		DC TOTAL	44	45	48	48	55	54	53	52	51	49	50	50	49
DE	H5493	LIFE AT ST. FRANCIS HEALTHCARE, INC.	303	297	295	296	301	305	308	311	313	308	311	308	308
DE	H8614	MILFORD WELLNESS VILLAGE PACE	44	43	44	44	48	48	47	46	46	48	51	55	54
		DE TOTAL	347	340	339	340	349	353	355	357	359	356	362	363	362
FL	H0112	MORSE LIFE HOME CARE, INC.	826	840	845	844	849	852	852	854	851	841	850	858	867
FL	H0424	INNOVAGE FLORIDA PACE II, LLC	*	*	*	*	*	13	19	30	44	52	55	61	60
FL	H0440	EMPATH LIFE, LLC	*	*	*	*	11	13	14	18	17	18	18	18	20
FL	H1043	FLORIDA PACE CENTERS, INC.	911	947	961	975	982	973	980	983	1,007	1,002	997	1,002	1,041
FL	H3430	SUNCOAST PACE, INC.	326	325	320	317	320	315	317	318	310	301	297	287	286
FL	H4919	INNOVAGE FLORIDA PACE, LLC	*	*	*	*	14	19	29	32	39	43	51	52	54
FL	H5538	TRINITY HEALTH PACE OF PENSACOLA	*	*	*	*	*	*	*	14	17	21	21	23	23
FL	H5934	HOPE HOSPICE AND COMMUNITY SERVICES, INC.	486	489	488	492	490	486	477	488	491	484	519	531	524
FL	H7059	STRATUM LIFE, LLC	**	**	**	**	**	**	**	**	**	*	*	*	*
FL	H7469	PACE PARTNERS OF NORTHEAST FLORIDA	113	116	115	111	112	111	108	105	104	99	97	96	92

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
FL	H9252	MOUNT SINAI ELDERCARE, INC	25	24	36	35	40	47	51	58	62	67	69	71	83
		FL TOTAL	2,687	2,741	2,765	2,774	2,818	2,829	2,847	2,900	2,942	2,928	2,974	2,999	3,050
IA	H0216	PACE IOWA	421	431	426	428	434	436	439	443	442	427	435	441	443
IA	H8424	SIOUXLAND PACE, INC.	216	220	223	226	232	233	235	233	233	228	234	244	244
		IA TOTAL	637	651	649	654	666	669	674	676	675	655	669	685	687
IL	H3933	OSF HEALTHCARE SYSTEM	**	*	*	*	*	*	*	*	*	12	12	14	16
IL	H5993	LAWNDALE CHRISTIAN HEALTH CENTER	**	*	*	*	*	*	*	*	11	14	16	17	18
IL	H7027	ESPERANZA HEALTH CENTERS	**	**	*	*	*	*	*	*	*	14	16	19	18
		IL TOTAL	**	*	*	*	*	*	*	*	11	40	44	50	52
IN	H0235	PACE OF NORTHEAST INDIANA, LLC	75	72	74	73	86	92	96	103	110	109	113	113	107
IN	H1742	ASCENSION LIVING ST. VINCENT PACE, INC.	21	25	25	31	29	37	44	48	52	55	57	60	66
IN	H3522	REID HOSPITAL & HEALTH CARE SERVICES, INC.	58	58	65	64	72	74	85	90	92	92	96	96	97
IN	H5080	BOLDAGE PACE INDIANA, LLC	*	*	*	*	11	13	15	17	23	27	29	26	29
IN	H5124	FRANCISCAN ACO, INC.	246	250	254	255	262	268	275	289	294	296	305	309	312
IN	H9842	SAINT JOSEPH PACE	150	146	150	145	147	146	148	151	152	150	154	158	163
		IN TOTAL	550	551	568	568	607	630	663	698	723	729	754	762	774
KS	H1714	VIA CHRISTI HEALTHCARE OUTREACH FOR ELDERS, INC.	232	235	240	242	240	238	244	244	240	233	239	244	244
KS	H5822	MIDLAND CARE CONNECTION	477	488	498	494	499	490	497	500	522	521	527	523	530
KS	H9438	BLUESTEM PACE, INC.	95	91	92	90	93	93	95	95	98	100	99	98	100
		KS TOTAL	804	814	830	826	832	821	836	839	860	854	865	865	874
KY	H0016	LIFE COORDINATED COMMONWEALTH PACE INC	*	*	*	*	*	*	*	*	*	*	*	*	*
KY	H1980	HOSPICE OF THE BLUEGRASS, INC	20	20	23	25	29	31	32	36	36	36	36	43	47
KY	H5622	CARE GUIDE PARTNERS, INC.	*	*	*	*	*	*	*	*	*	12	14	14	17
KY	H6541	HORIZON-PACE, LLC	80	83	85	87	92	98	105	111	118	119	125	132	136

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
KY	H6759	SENIOR COMMUNITY CARE OF KENTUCKY	32	31	35	35	43	45	54	55	60	58	61	58	66
KY	H6868	BOLDAGE PACE KENTUCKY, LLC	*	*	*	12	18	19	23	24	27	33	36	38	39
KY	H7725	VOANS SENIOR COMMUNITY CARE OF JEFFERSON COUNTY	**	**	**	**	**	**	**	*	*	*	*	*	*
KY	H8099	VOANS SENIOR COMMUNITY CARE OF NORTHERN KENTUCKY	*	*	*	*	*	*	*	*	*	*	*	15	21
KY	H9468	ONE SENIOR CARE KENTUCKY, LLC	**	**	*	*	*	31	47	44	43	41	59	82	90
		KY TOTAL	132	134	143	159	182	224	261	270	284	299	331	382	416
LA	H1904	PACE GREATER NEW ORLEANS	137	142	144	144	149	151	156	155	157	149	143	148	146
LA	H1312	TRINITY HEALTH PACE OF ALEXANDRIA	**	**	*	*	*	20	23	27	39	39	47	50	59
LA	H6231	FRANCISCAN PACE, INC.	249	249	251	253	254	254	245	248	242	242	242	239	237
		LA TOTAL	386	391	395	397	403	425	424	430	438	430	432	437	442
MA	H0477	SERENITY CARE, INC.	482	481	483	481	488	492	503	513	522	530	529	532	539
MA	H0809	MERCY LIFE, INC.	203	203	207	203	208	210	202	202	206	207	204	204	213
MA	H2218	HARBOR HEALTH SERVICES, INC.	559	561	552	546	541	537	538	539	542	536	535	539	534
MA	H2219	FALLON COMMUNITY HEALTH PLAN	1,332	1,330	1,329	1,338	1,337	1,339	1,346	1,347	1,357	1,359	1,365	1,366	1,377
MA	H2220	UPHAMS CORNER HEALTH COMMITTEE, INC.	259	258	261	267	274	278	281	285	283	288	291	280	279
MA	H2221	CAMBRIDGE PUBLIC HEALTH COMMISSION	605	610	612	611	617	631	639	646	650	658	661	661	656
MA	H2222	ELEMENT CARE, INC.	960	968	969	980	982	977	988	995	995	993	997	1,004	1,005
MA	H2223	EAST BOSTON NEIGHBORHOOD CENTER CORP.	720	729	739	745	747	754	765	777	790	798	802	817	818
		MA TOTAL	5,120	5,140	5,152	5,171	5,194	5,218	5,262	5,304	5,345	5,369	5,384	5,403	5,421
MD	H2109	THE JOHNS HOPKINS HEALTH SYSTEM CORPORATION	136	136	134	133	132	139	143	141	144	143	142	135	136
MD	H3740	EDENBRIDGE HEALTH, LLC	**	**	**	**	**	**	*	*	*	*	*	*	*

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
MD	H6251	TRINITY HEALTH PACE OF MONTGOMERY COUNTY	**	**	**	**	**	**	**	*	*	*	*	*	11
MD	H7233	VOANS SENIOR COMMUNITY CARE OF MARYLAND	**	**	**	**	**	**	**	**	**	**	**	*	*
		MD TOTAL	136	136	134	133	132	139	143	141	144	143	142	135	147
MI	H0390	PACE OF SOUTHWEST MICHIGAN, INC.	230	231	232	229	234	235	235	238	238	239	237	234	233
MI	H1310	COMPREHENSIVE SENIOR CARE CORPORATION	604	608	601	611	610	621	611	622	620	612	610	611	617
MI	H2318	PACE SOUTHEAST MICHIGAN	1,640	1,646	1,676	1,714	1,742	1,770	1,810	1,820	1,857	1,886	1,913	1,931	1,974
MI	H2835	THE CASCADE PACE, INC.	208	216	215	218	222	224	230	230	230	234	235	231	236
MI	H2882	PACE CENTRAL MICHIGAN, INC.	194	194	195	194	194	201	206	204	210	214	219	226	228
MI	H2936	LIFECIRCLES	387	394	393	401	408	407	412	416	420	418	425	422	424
MI	H4118	THE WASHTENAW PACE	273	269	272	274	276	277	275	270	274	280	285	281	281
MI	H4256	PACE NORTH, INC.	185	185	192	198	197	202	205	214	217	215	217	222	223
MI	H5085	COMMUNITY PACE AT HOME, INC.	98	96	95	92	92	89	98	100	99	100	103	104	108
MI	H5610	CARE RESOURCES	335	334	341	343	347	348	351	358	359	359	365	358	367
MI	H6787	VOANS SENIOR COMMUNITY CARE OF MICHIGAN, INC.	208	206	206	202	209	211	211	215	219	218	221	213	203
MI	H8769	CENTER FOR GERONTOLOGY	233	236	233	241	239	242	243	242	243	240	237	236	242
MI	H9052	REGION VII AREA AGENCY ON AGING	42	45	49	54	57	61	68	72	78	79	83	85	85
MI	H9185	A&D CHARITABLE FOUNDATION, INC.	181	190	189	193	193	192	192	191	193	192	189	191	189
		MI TOTAL	4,818	4,850	4,889	4,964	5,020	5,080	5,147	5,192	5,257	5,286	5,339	5,345	5,410
MO	H2918	ADVOCATES FOR A HEALTHY COMMUNITY, INC. DBA JORDAN	**	**	**	*	*	*	*	*	13	12	14	22	26
MO	H7831	PRIME ACQUISITIONS, LLC	40	42	46	46	50	50	55	56	61	61	66	68	68
MO	H8992	PACE KC, LLC	*	*	*	*	*	*	*	*	*	*	*	*	13
		MO TOTAL	40	42	46	46	50	50	55	56	74	73	80	90	107

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
NC	H0839	VOANS SENIOR COMMUNITY CARE OF NORTH CAROLINA, INC.	148	145	146	149	153	156	157	155	157	147	143	153	147
NC	H1357	CAROLINA SENIORCARE	118	116	114	114	110	109	110	110	112	110	111	112	113
NC	H1500	LIFE ST. JOSEPH OF THE PINES, INC.	181	178	177	172	164	162	164	162	169	158	159	163	161
NC	H1533	STAYWELL SENIOR CARE, INC.	79	78	78	78	76	76	78	78	78	74	77	74	72
NC	H3942	ELDERHAUS INC.	108	111	112	110	111	109	114	113	115	110	111	110	109
NC	H4235	SENIOR TOTAL LIFE CARE, INC.	244	248	252	262	264	262	270	271	282	283	294	293	301
NC	H4326	PACE @ HOME, INC.	147	145	148	146	145	147	149	150	150	149	155	157	161
NC	H4714	PACE OF THE SOUTHERN PIEDMONT, INC.	187	191	194	215	219	212	214	221	221	224	228	228	236
NC	H6059	PACE OF GUILFORD AND ROCKINGHAM COUNTIES, INC.	217	215	215	210	218	218	211	211	209	202	206	205	204
NC	H6846	CAREPARTNERS REHABILITATION HOSPITAL, LLLP	192	188	183	186	191	188	187	187	185	194	193	196	197
NC	H9266	PIEDMONT HEALTH SERVICES, INC.	261	259	265	265	268	270	269	269	266	269	263	261	259
		NC TOTAL	1,882	1,874	1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940	1,952	1,960
ND	H7195	NORTHLAND PACE PROGRAM	181	175	175	177	177	173	169	173	172	178	180	183	183
		ND TOTAL	181	175	175	177	177	173	169	173	172	178	180	183	183
NE	H7003	PACE NEBRASKA	199	199	196	192	191	190	190	191	187	188	189	182	182
		NE TOTAL	199	199	196	192	191	190	190	191	187	188	189	182	182
NJ	H1234	CAPITAL HEALTH LIFE	210	207	205	202	201	198	195	192	196	198	196	196	194
NJ	H3493	LIFE AT LOURDES, INC.	153	162	162	162	162	158	158	157	158	159	159	161	160
NJ	H6371	LUTHERAN SENIOR HEALTHCARE, INC.	92	90	88	86	83	84	84	85	84	82	84	85	92
NJ	H6887	INSPIRA HEALTH NETWORK LIFE, INC.	244	240	238	240	242	241	237	238	236	243	243	246	252
NJ	H7619	ATLANTICARE HEALTH SERVICES, INC.	144	136	137	139	138	142	143	144	148	145	147	141	142

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
NJ	H9323	ACUTE CARE HEALTH SYSTEM, LLC	327	334	345	346	367	366	370	372	372	376	376	372	372
		NJ TOTAL	1,170	1,169	1,175	1,175	1,193	1,189	1,187	1,188	1,194	1,203	1,205	1,201	1,212
NM	H5213	TOTAL COMMUNITY CARE, L.L.C.	457	452	452	448	440	442	442	447	448	439	443	434	418
		NM TOTAL	457	452	452	448	440	442	442	447	448	439	443	434	418
NY	H1518	CATHOLIC HEALTH SYSTEM BUFFALO PACE	226	228	229	234	236	236	240	240	237	240	246	244	243
NY	H2397	PACE AT HUDSON HEADWATERS, INC.	**	**	**	**	**	**	**	*	*	*	*	*	*
NY	H3321	LORETTO INDEPENDENT LIVING SERVICES, INC.	537	548	551	551	567	569	576	580	582	585	598	596	595
NY	H3322	SENIOR CARE CONNECTION, INC.	381	391	399	401	407	403	408	415	411	410	422	429	419
NY	H3329	CENTERLIGHT HEALTHCARE, INC.	2,160	2,172	2,174	2,179	2,230	2,318	2,325	2,336	2,384	2,378	2,404	2,426	2,411
NY	H3331	INDEPENDENT LIVING FOR SENIORS, INC.	708	708	707	719	719	724	719	732	731	723	735	728	729
NY	H4393	CATHOLIC MANAGED LONG TERM CARE, INC.	714	721	729	735	737	728	738	747	754	747	725	732	732
NY	H6596	FALLON HEALTH WEINBERG, INC.	134	132	135	138	142	145	150	158	162	169	182	187	191
NY	H8777	COMPLETE SENIOR CARE, INC.	130	132	132	132	134	135	135	133	133	136	137	133	136
NY	H8800	TOTAL SENIOR CARE, INC.	123	121	124	121	123	123	126	125	122	115	116	113	110
		NY TOTAL	5,113	5,153	5,180	5,210	5,295	5,381	5,417	5,466	5,516	5,503	5,565	5,588	5,566
OH	H3613	MCGREGOR PACE	517	513	508	496	511	516	515	519	520	514	518	528	533
		OH TOTAL	517	513	508	496	511	516	515	519	520	514	518	528	533
OK	H4142	CHEROKEE NATION COMPREHENSIVE CARE AGENCY	185	185	185	186	187	185	184	182	185	184	182	182	181
OK	H6941	LIFE PACE	225	226	230	237	238	241	241	247	249	253	249	256	265
OK	H7114	VALIR PACE	271	271	268	266	265	272	266	263	269	262	266	261	268
		OK TOTAL	681	682	683	689	690	698	691	692	703	699	697	699	714

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
OR	H0247	ALLCARE PACE, LLC	72	74	73	71	71	71	69	66	56	**	**	**	**
OR	H3809	PROVIDENCE HEALTH & SERVICES - OREGON	1,764	1,777	1,783	1,793	1,799	1,818	1,852	1,847	1,848	1,851	1,860	1,863	1,862
		OR TOTAL	1,836	1,851	1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860	1,863	1,862
PA	H0819	SENIOR LIFE YORK, INC.	390	387	395	392	391	393	398	397	392	378	384	388	384
PA	H2064	GEISINGER COMMUNITY HEALTH SERVICES	402	398	406	399	392	394	389	388	380	385	380	380	379
PA	H2537	ALBRIGHT CARE SERVICES	79	74	73	74	76	74	75	73	73	**	**	**	**
PA	H2937	SENIOR LIFE GREENSBURG, INC.	195	197	201	200	202	200	193	187	189	185	185	186	182
PA	H2992	SENIORLIFE WASHINGTON, INC.	522	519	514	522	517	511	520	521	521	528	537	527	527
PA	H3060	VIECARE BUTLER, LLC	161	161	157	160	159	163	163	162	162	157	158	158	158
PA	H3908	TRINITY HEALTH LIFE PENNSYLVANIA, INC.	309	305	305	300	301	299	295	290	288	286	282	280	275
PA	H3917	PITTSBURGH CARE PARTNERSHIP, INC.	775	776	774	784	799	806	795	810	821	822	805	810	808
PA	H3918	LIVING INDEPENDENCE FOR THE ELDERLY	504	498	501	505	512	514	521	518	523	524	532	526	518
PA	H3919	MERCY LIFE	794	795	793	798	797	794	794	788	777	765	769	771	769
PA	H3925	PENNSYLVANIA PACE, INC.	219	220	222	227	232	232	230	233	227	224	225	220	220
PA	H4999	LIFE NORTHWESTERN PENNSYLVANIA, LLC	663	662	669	680	690	693	686	711	712	691	694	696	698
PA	H5902	SENIOR LIFE ALTOONA, INC.	533	539	545	552	551	542	538	529	531	516	524	520	526
PA	H5978	SENIOR LIFE LEHIGH VALLEY, INC.	544	550	558	552	562	573	581	594	604	593	605	603	606
PA	H6188	VIECARE ARMSTRONG, LLC	85	84	82	84	85	86	88	86	85	88	89	92	91
PA	H6551	LIFE ST. MARY	245	247	246	244	247	245	247	250	251	257	258	256	256
PA	H7660	VIECARE BEAVER, LLC	397	394	392	390	390	391	395	397	401	401	405	404	399
PA	H9068	ALBRIGHT CARE SERVICES	164	156	153	152	153	145	143	141	142	208	210	206	201
PA	H9830	INNOVAGE PENNSYLVANIA LIFE, LLC	611	600	602	603	599	588	587	588	591	583	589	587	586
		PA TOTAL	7,592	7,562	7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631	7,610	7,583

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
RI	H4105	PACE ORGANIZATION OF RHODE ISLAND	368	374	378	382	382	385	392	399	402	393	392	404	411
		RI TOTAL	368	374	378	382	382	385	392	399	402	393	392	404	411
SC	H0105	ORANGEBURG SENIOR HELPING CENTER, LLC	86	87	88	85	86	86	89	92	92	90	92	90	90
SC	H4053	PRISMA HEALTH-UPSTATE	119	122	124	130	133	143	145	147	153	148	149	144	146
SC	H4203	PRISMA HEALTH-MIDLANDS	287	288	283	285	283	280	277	269	263	255	252	250	250
SC	H9317	BEACON OF LIFE SC, LLC	**	**	**	**	**	*	*	*	*	*	*	*	12
		SC TOTAL	492	497	495	500	502	509	511	508	508	493	493	484	498
TN	H4402	ALEXIAN BROTHERS COMMUNITY SERVICES	260	255	251	249	260	264	266	267	260	259	261	257	256
		TN TOTAL	260	255	251	249	260	264	266	267	260	259	261	257	256
TX	H4517	AMARILLO MULTISVC CTR FR THE AGING INC	124	126	128	127	125	121	121	124	123	124	126	127	123
TX	H4518	BIENVIVIR SENIOR HEALTH SERVICES	811	809	812	813	814	811	816	819	817	813	808	811	806
TX	H9998	LUBBOCK REGIONAL MENTAL HEALTH MENTAL RETARDATION	145	146	145	150	148	146	146	148	149	147	147	147	145
		TX TOTAL	1,080	1,081	1,085	1,090	1,087	1,078	1,083	1,091	1,089	1,084	1,081	1,085	1,074
VA	H0870	BLUE RIDGE INDEPENDENCE AT HOME, INC.	**	**	**	**	*	*	*	*	*	*	18	26	30
VA	H1239	INNOVAGE VIRGINIA PACE - ROANOKE VALLEY, LLC	233	232	233	234	238	240	241	241	247	247	253	245	247
VA	H2386	APPALACHIAN AGENCY FOR SENIOR CITIZENS, INC.	124	131	135	135	136	133	134	135	138	138	146	151	148
VA	H2941	SENTARA LIFE CARE CORPORATION, INC.	219	222	222	227	227	226	227	225	226	231	233	228	228
VA	H3473	INNOVAGE VIRGINIA PACE – CHARLOTTESVILLE, LLC	219	227	227	230	234	232	236	242	243	245	252	253	256
VA	H3991	CONCERTOHEALTH OF NORTHERN VIRGINIA, LLC	32	35	35	33	35	35	36	36	38	38	35	33	34
VA	H5037	MOUNTAIN EMPIRE OLDER CITIZENS, INC.	83	85	84	87	92	92	91	92	93	90	90	93	92

State	Contract Number	Plan Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
VA	H8096	CENTRA HEALTH, INC.	292	289	295	297	303	314	315	325	328	329	329	335	344
VA	H8655	INNOVAGE VIRGINIA PACE II, LLC	543	540	543	545	549	542	550	559	559	550	551	544	544
		VA TOTAL	1,745	1,761	1,774	1,788	1,814	1,814	1,830	1,855	1,872	1,868	1,907	1,908	1,923
WA	H3084	INTERNATIONAL COMMUNITY HEALTH SERVICES	91	91	93	93	97	95	98	99	98	98	97	98	97
WA	H3284	PNW PACE PARTNERS, LLC	127	134	137	141	147	153	157	159	167	171	177	186	191
WA	H5007	PROVIDENCE HEALTH SYSTEM	1,146	1,158	1,164	1,182	1,193	1,203	1,229	1,235	1,246	1,254	1,274	1,271	1,260
		WA TOTAL	1,364	1,383	1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548	1,555	1,548
WI	H5212	COMMUNITY CARE, INC.	487	479	472	477	481	474	481	475	478	467	465	450	455
		WI TOTAL	487	479	472	477	481	474	481	475	478	467	465	450	455
TOTAL PACE ENROLLMENT			61,407	61,867	62,304	62,839	63,559	64,066	64,877	65,556	66,239	66,128	66,912	67,329	67,851
PERCENT CHANGE FROM PREVIOUS MONTH			1%	1%	1%	1%	1%	1%	1%	1%	1%	0%	1%	1%	1%

⁵ Totals reflect enrollment as of the April 1, 2025 payment. The payment reflects enrollments accepted through March 7, 2025. All plan names are written as they appear in the Monthly Enrollment by Contract Report. An asterisk (*) in the enrollment column indicates that the count is 10 or fewer. Enrollment counts that are 10 or fewer are not included in the overall state enrollment total. A double asterisk (**) in the enrollment column indicates a plan was not operating during the enrollment month. These enrollment numbers include Medicare enrollees only, and do not include Medicaid-only PACE enrollees, who represented about 20 percent of all PACE enrollees in July 2022, as shown in Tables 2 and 3 of the 2022 Medicaid Managed Care Enrollment Report, available at:

<https://www.medicaid.gov/medicaid/managed-care/downloads/2022-medicaid-managed-care-enrollment-report.pdf>

⁶ Enrollment figures presented here are for the most recent 13 months (April 2024 – April 2025). Previous months of enrollment are not displayed.

Table 4. Monthly Enrollment in Applicable Integrated Plans (AIPs)^{7, 8} by Plan and State, April 2024 – April 2025^{9, 10, 11}

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
AZ	H0321	4	FIDE	ARIZONA PHYSICIANS IPA, INC.	**	**	**	**	**	**	**	**	**	5,810	5,861	5,865	5,958
AZ	H4931	15	FIDE	BANNER - UNIVERSITY CARE ADVANTAGE	**	**	**	**	**	**	**	**	**	3,087	3,084	3,109	3,120
AZ	H5580	4	FIDE	MERCY CARE	**	**	**	**	**	**	**	**	**	3,389	3,417	3,364	3,336
AZ	H5590	10	FIDE	BRIDGEWAY HEALTH SOLUTIONS OF ARIZONA, INC.	**	**	**	**	**	**	**	**	**	*	*	*	*
AZ TOTAL					**	**	**	**	**	**	**	**	**	12,286	12,362	12,338	12,414
CA	H0976	1	FIDE	SCAN HEALTH PLAN	18,128	17,986	17,906	17,708	17,512	17,391	17,268	17,206	17,162	17,894	18,129	18,340	18,377
CA	H0976	2	FIDE	SCAN HEALTH PLAN	2,105	2,142	2,204	2,280	2,325	2,320	2,307	2,329	2,405	2,386	2,390	2,355	2,365
CA	H1224	1	CO	LOCAL INITIATIVE HEALTH AUTHORITY FOR LA COUNTY	19,479	19,530	19,647	19,731	19,795	20,035	20,235	20,341	20,369	22,780	24,015	25,144	25,771
CA	H2819	1	CO	CALIFORNIA PHYSICIANS' SERVICE	16,161	15,972	15,738	15,587	15,465	15,226	15,092	15,032	14,846	14,940	14,902	15,149	15,181
CA	H3038	3	CO	MOLINA HEALTHCARE OF CALIFORNIA	16,676	17,153	17,504	17,695	17,967	18,432	18,707	18,914	18,900	19,444	19,713	19,992	20,468
CA	H3561	7	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	5,399	5,396	5,363	5,413	5,419	5,476	5,473	5,481	5,431	5,246	5,154	5,068	4,972
CA	H3561	8	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	33,666	33,252	32,848	32,628	32,629	32,522	32,351	32,228	32,078	31,337	30,960	30,460	30,488
CA	H4045	1	CO	SANTA CLARA COUNTY HEALTH AUTHORITY	10,729	10,711	10,756	10,719	10,675	10,742	10,729	10,721	10,691	10,863	10,909	11,119	11,181
CA	H4471	1	CO	BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN LLC	62,486	63,761	65,016	65,916	66,789	68,202	69,359	70,373	69,648	75,645	77,044	80,230	82,062
CA	H4733	1	CO	COMMUNITY HEALTH GROUP	6,916	6,935	7,016	7,064	7,243	7,360	7,425	7,551	7,589	7,816	7,855	8,053	8,189
CA	H5433	1	CO	ORANGE COUNTY HEALTH AUTHORITY	17,314	17,289	17,327	17,327	17,363	17,337	17,289	17,281	17,190	17,164	17,112	17,123	17,097

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
CA	H5433	3	CO	ORANGE COUNTY HEALTH AUTHORITY	**	**	**	**	**	**	**	**	**	103	189	253	277
CA	H5649	2	CO	CENTRAL HEALTH PLAN OF CALIFORNIA, INC.	**	**	**	**	**	**	**	**	**	10,236	10,251	10,043	9,974
CA	H6019	1	CO	SAN MATEO HEALTH COMMISSION	8,501	8,468	8,440	8,428	8,394	8,361	8,339	8,296	8,229	8,279	8,241	8,315	8,334
CA	H8794	1	CO	KAISER FOUNDATION HP, INC.	45,609	46,721	47,373	47,820	48,266	49,102	49,832	50,422	50,479	52,077	52,820	53,768	54,566
CA	H8794	2	CO	KAISER FOUNDATION HP, INC.	21,867	22,115	22,340	22,506	22,566	22,762	22,926	23,058	23,050	23,473	23,747	24,035	24,306
CA	H8894	1	CO	INLAND EMPIRE HEALTH PLAN	34,870	35,046	35,363	35,532	35,578	35,736	35,818	36,015	36,046	36,226	36,196	36,712	36,869
CA TOTAL					319,906	322,477	324,841	326,354	327,986	331,004	333,150	335,248	334,113	355,909	359,627	366,159	370,477
DC	H2406	53	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	9,006	8,766	8,790	8,757	8,698	8,395	8,365	8,444	8,495	8,714	8,720	8,743	8,644
DC	H7464	10	HIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	592	590	608	620	630	644	657	682	686	817	825	861	912
DC TOTAL					9,598	9,356	9,398	9,377	9,328	9,039	9,022	9,126	9,181	9,531	9,545	9,604	9,556
FL	H1032	175	HIDE	SUNSHINE STATE HEALTH PLAN, INC.	13,604	13,399	13,274	13,076	12,905	12,735	12,496	12,319	11,222	10,869	10,736	10,166	10,299
FL	H1032	176	FIDE	SUNSHINE STATE HEALTH PLAN, INC.	481	474	476	469	486	529	550	585	455	**	**	**	**
FL	H1036	280	FIDE	HUMANA MEDICAL PLAN, INC.	18	19	18	18	17	14	14	13	12	11	11	*	*
FL	H1045	63	HIDE	PREFERRED CARE PARTNERS, INC.	**	**	**	**	**	**	**	**	**	14,428	16,891	18,878	20,227
FL	H1045	65	HIDE	PREFERRED CARE PARTNERS, INC.	**	**	**	**	**	**	**	**	**	1,095	1,238	1,368	1,479
FL	H1889	26	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	13,489	15,752	17,881	19,220
FL	H2509	1	FIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	1,220	1,255	1,373	1,396	1,390	1,363	1,359	1,356	1,360	1,360	1,361	1,346	1,301

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
FL	H2509	3	HIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	20,638	23,359	26,368	28,472
FL	H2962	35	HIDE	ULTIMATE HEALTH PLANS, INC.	224	223	218	215	207	201	192	180	180	159	152	147	143
FL	H5410	25	HIDE	HEALTHSPRING OF FLORIDA, INC.	226	222	220	210	198	188	182	182	175	166	156	145	142
FL	H5410	31	HIDE	HEALTHSPRING OF FLORIDA, INC.	105	106	104	100	94	92	90	83	80	77	79	74	73
FL	H5410	32	HIDE	HEALTHSPRING OF FLORIDA, INC.	143	146	139	131	129	174	171	167	198	193	205	142	152
FL	H5410	42	HIDE	HEALTHSPRING OF FLORIDA, INC.	374	365	356	346	342	340	330	320	311	280	276	248	235
FL	H5410	47	HIDE	HEALTHSPRING OF FLORIDA, INC.	40	34	36	37	36	33	34	32	30	26	26	26	28
FL	H5410	49	HIDE	HEALTHSPRING OF FLORIDA, INC.	355	314	414	501	589	789	1,631	2,288	2,876	3,330	3,674	3,711	3,231
FL	H5420	16	HIDE	PREFERRED CARE NETWORK, INC.	**	**	**	**	**	**	**	**	**	2,872	3,328	3,767	4,008
FL	H7284	3	HIDE	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	572	548	536	510	500	444	415	401	394	282	265	131	113
FL	H9986	3	FIDE	HPMP OF FLORIDA, INC.	23	22	20	15	14	12	19	16	14	**	**	**	**
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	122	124	117	105
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	51	43	37	33
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	*	*	*	*
FL TOTAL					17,385	17,127	17,184	17,024	16,907	16,914	17,483	17,942	17,307	69,448	77,676	84,552	89,261
HI	H1230	8	FIDE	KAISER FOUNDATION HP, INC.	1,570	1,585	1,586	1,585	1,600	1,613	1,601	1,607	1,594	1,594	1,607	1,612	1,595
HI	H2406	132	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	14,575	15,702	16,385	16,641
HI	H2491	4	FIDE	WELLCARE HEALTH INSURANCE OF ARIZONA, INC.	2,463	2,439	2,446	2,449	2,422	2,422	2,418	2,407	2,404	2,386	2,383	2,342	2,289

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
HI	H3832	11	FIDE	HAWAII MEDICAL SERVICE ASSOCIATION	**	**	**	**	**	**	**	**	**	2,864	3,019	3,006	3,033
HI	H5969	2	FIDE	ALOHACARE	2,164	2,176	2,156	2,186	2,193	2,198	2,192	2,088	2,047	2,045	2,024	2,013	1,983
HI TOTAL					6,197	6,200	6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735	25,358	25,541
ID	H5628	8	FIDE	MOLINA HEALTHCARE OF UTAH, INC.	5,429	5,468	5,539	5,587	5,470	5,543	5,520	5,571	5,487	5,537	5,569	5,724	6,148
ID	H9656	1	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	6,328	6,327	6,375	6,362	6,316	6,410	6,449	6,473	6,430	6,693	6,722	6,453	6,015
ID	H9656	2	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	1,458	1,462	1,473	1,471	1,458	1,459	1,462	1,471	1,467	1,521	1,524	1,448	1,322
ID TOTAL					13,215	13,257	13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815	13,625	13,485
MA	H2224	1	FIDE	SENIOR WHOLE HEALTH, LLC	6,626	6,576	6,536	6,507	6,370	6,329	6,322	6,307	6,265	5,301	5,199	4,939	4,885
MA	H2224	3	FIDE	SENIOR WHOLE HEALTH, LLC	5,342	5,345	5,424	5,468	5,390	5,397	5,477	5,520	5,497	5,275	5,291	5,186	5,175
MA	H2225	1	FIDE	COMMONWEALTH CARE ALLIANCE, INC.	15,486	15,682	15,645	15,873	16,067	16,418	16,612	16,879	16,907	16,651	16,510	16,318	16,094
MA	H2226	1	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	14,833	14,893	14,913	14,763	14,807	14,760	14,782	14,790	14,774	15,407	15,534	15,680	15,792
MA	H2226	3	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	7,748	7,718	7,694	7,622	7,612	7,633	7,668	7,661	7,631	7,968	8,012	8,034	8,044
MA	H8330	1	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	6,702	6,799	6,864	6,986	7,088	7,219	7,288	7,396	7,419	7,908	7,995	8,320	8,904
MA	H8330	2	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	2,840	2,902	2,920	2,990	3,053	3,088	3,169	3,254	3,274	3,733	3,825	4,067	3,734
MA	H8928	1	FIDE	FALLON COMMUNITY HEALTH PLAN	9,609	9,590	9,531	9,523	9,504	9,386	9,315	9,280	9,227	9,277	9,351	9,431	9,470
MA	H9585	1	FIDE	BOSTON MEDICAL CENTER HEALTH PLAN, INC.	1,839	1,864	1,877	1,866	1,853	1,857	1,890	1,875	1,862	1,826	1,856	1,849	1,829
MA TOTAL					71,025	71,369	71,404	71,598	71,744	72,087	72,523	72,962	72,856	73,346	73,573	73,824	73,927
MN	H0845	1	FIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	45	46	48	46	42	39	37	37	34	**	**	**	**

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
MN	H2416	1	FIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	1,897	1,895	1,910	1,941	1,980	1,973	1,983	1,985	1,985	1,944	1,974	1,972	1,979
MN	H2417	1	FIDE	ITASCA MEDICAL CARE	349	345	342	331	327	327	323	330	328	322	340	334	330
MN	H2419	1	FIDE	SOUTH COUNTRY HEALTH ALLIANCE	1,248	1,245	1,216	1,194	1,183	1,161	1,138	1,132	1,115	1,014	1,012	1,009	993
MN	H2422	2	FIDE	HEALTHPARTNERS, INC.	5,903	5,855	5,769	5,693	5,695	5,688	5,666	5,655	5,604	5,456	5,435	5,462	5,456
MN	H2425	1	FIDE	HMO Minnesota	10,030	10,024	9,928	9,897	9,947	9,947	9,972	9,960	9,870	9,764	10,073	9,978	10,029
MN	H2456	2	FIDE	UCARE MINNESOTA	17,377	17,356	17,203	17,140	17,120	17,091	17,126	17,097	16,917	16,675	17,233	17,165	17,284
MN	H2458	2	FIDE	MEDICA HEALTH PLANS	10,064	10,110	10,222	10,244	10,264	10,300	10,310	10,309	10,217	10,032	10,243	10,130	10,112
MN	H2926	1	HIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	351	360	362	366	410	445	453	459	456	448	484	488	500
MN	H5703	1	HIDE	SOUTH COUNTRY HEALTH ALLIANCE	466	462	460	460	459	456	453	451	447	416	425	445	453
MN	H5937	1	HIDE	UCARE MINNESOTA	9,303	9,344	9,382	9,327	9,378	9,461	9,537	9,546	9,451	9,242	9,734	9,829	10,079
MN	H7778	1	HIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	89	91	94	97	96	99	100	95	95	**	**	**	**
MN	H9952	1	HIDE	MEDICA HEALTH PLANS	1,964	1,949	1,944	1,918	1,911	1,906	1,911	1,906	1,887	1,840	1,851	1,841	1,874
MN TOTAL					59,086	59,082	58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804	58,653	59,089
NJ	H0913	13	FIDE	WELLCARE HEALTH PLANS OF NEW JERSEY, INC.	7,498	7,565	7,683	7,699	7,719	7,773	7,827	7,816	7,767	7,752	7,789	7,177	7,207
NJ	H3113	5	HIDE	OXFORD HEALTH PLANS (NJ), INC.	46,454	46,426	46,189	45,882	45,677	44,065	43,930	43,998	44,117	45,661	45,631	45,981	46,035
NJ	H3240	13	FIDE	WELLPOINT NEW JERSEY, INC.	13,675	13,629	13,517	13,414	13,313	13,169	13,080	13,069	12,323	12,741	12,602	12,620	12,718
NJ	H3240	24	FIDE	WELLPOINT NEW JERSEY, INC.	929	947	975	997	1,048	1,116	1,145	1,160	1,165	1,180	1,205	1,272	1,325
NJ	H6399	1	FIDE	AETNA BETTER HEALTH INC. (NJ)	6,913	7,049	7,276	7,242	7,304	7,555	7,719	7,851	7,744	6,647	6,457	6,255	6,123
NJ	H8298	1	FIDE	HORIZON HEALTHCARE OF NEW JERSEY, INC.	20,810	20,774	20,722	20,622	20,595	20,573	20,639	20,839	21,060	21,537	21,766	21,952	22,012
NJ TOTAL					96,279	96,390	96,362	95,856	95,656	94,251	94,340	94,733	94,176	95,518	95,450	95,257	95,420

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
NM	H0294	49	HIDE	UNITEDHEALTHCARE INSURANCE COMPANY	**	**	**	**	**	**	**	**	**	1,313	1,346	1,384	1,132
NM TOTAL					**	**	**	**	**	**	**	**	**	1,313	1,346	1,384	1,132
NY	H0034	2	FIDE	HAMASPIK, INC.	884	899	911	934	951	954	956	955	972	982	1,001	1,043	1,086
NY	H0423	7	FIDE	METROPLUS HEALTH PLAN, INC.	169	176	181	181	187	190	192	199	208	216	246	274	295
NY	H1732	1	FIDE	HEALTHPLUS HP, LLC	127	134	145	163	195	209	210	207	207	**	**	**	**
NY	H2168	2	FIDE	VILLAGE SENIOR SERVICES CORPORATION	2,936	3,027	3,106	3,176	3,256	3,461	3,601	3,723	3,749	4,226	4,370	4,581	4,780
NY	H3305	34	HIDE	MVP HEALTH PLAN, INC.	**	**	**	**	**	**	**	**	**	1,046	972	989	1,039
NY	H3347	7	FIDE	ELDERPLAN, INC.	3,998	4,141	4,265	4,360	4,413	4,550	4,634	4,720	4,902	5,014	5,099	5,342	5,527
NY	H3359	34	FIDE	HEALTHFIRST HEALTH PLAN, INC.	29,115	29,546	30,380	30,947	31,440	32,012	32,482	32,934	33,121	33,612	34,219	34,845	35,335
NY	H3359	38	HIDE	HEALTHFIRST HEALTH PLAN, INC.	471	518	589	565	597	607	712	740	779	**	**	**	**
NY	H3387	13	FIDE	UNITEDHEALTHCARE OF NEW YORK, INC.	**	**	**	**	**	**	**	**	**	11	*	*	*
NY	H5549	3	FIDE	VNS CHOICE	4,359	4,435	4,557	4,621	4,679	4,782	4,856	4,934	4,936	5,461	5,403	5,656	5,875
NY	H5599	3	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	862	920	995	1,037	1,090	1,130	1,170	1,234	1,241	1,930	2,005	2,305	2,800
NY	H5599	8	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	471	501	522	542	571	606	656	717	709	**	**	**	**
NY	H5991	13	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	**	**	216	214	205	227
NY	H5991	13	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	**	**	288	295	292	310
NY	H5992	7	FIDE	SENIOR WHOLE HEALTH OF NEW YORK, INC.	279	299	300	296	291	279	278	275	279	277	276	259	259
NY	H6776	2	FIDE	ELDERSERVE HEALTH, INC.	290	294	311	321	329	345	364	369	375	378	394	432	480
NY	H6988	4	FIDE	CENTERS PLAN FOR HEALTHY LIVING, LLC	1,773	1,792	1,820	1,847	1,855	1,886	1,897	1,901	1,856	1,952	1,947	2,002	2,038

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
NY	H7524	1	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	**	**	52	55	55	57
NY	H7524	3	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	**	**	735	828	863	941
NY	H8432	41	FIDE	ANTHEM HEALTHCHOICE HMO, INC.	**	**	**	**	**	**	**	**	**	216	217	235	296
NY TOTAL					45,734	46,682	48,082	48,990	49,854	51,011	52,008	52,908	53,334	56,612	57,541	59,378	61,345
TN	H0251	4	FIDE	UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.	1,181	1,150	1,120	1,060	1,070	1,085	1,084	1,101	1,101	1,131	1,097	1,097	1,096
TN	H3259	2	FIDE	VOLUNTEER STATE HEALTH PLAN	536	531	536	542	540	538	532	533	537	549	566	567	580
TN	H5828	1	FIDE	WELLPOINT TENNESSEE, INC.	624	616	604	592	582	571	568	556	525	593	598	613	628
TN TOTAL					2,341	2,297	2,260	2,194	2,192	2,194	2,184	2,190	2,163	2,273	2,261	2,277	2,304
VA	H0421	1	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	9,752	9,574	8,811	8,529
VA	H1610	1	FIDE	COVENTRY HEALTH CARE OF VIRGINIA, INC.	9,592	9,789	9,967	9,707	9,790	9,983	9,812	9,695	9,549	13,685	13,770	13,828	13,710
VA	H2445	1	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	1,618	1,717	1,819	2,145
VA	H2445	3	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	12,701	13,210	13,982	14,308
VA	H2445	5	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	15,071	14,465	12,148	11,275
VA	H4499	1	FIDE	SENTARA HEALTH PLANS	**	**	**	**	**	**	**	**	**	8,534	8,572	8,338	8,296
VA	H4694	1	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	8,577	8,463	8,268	8,072
VA	H4694	3	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	5,865	6,294	6,789	6,937
VA	H4694	4	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	9,817	10,484	11,136	11,731
VA	H7559	1	FIDE	Molina Healthcare of Virginia, LLC	**	**	**	**	**	**	**	**	**	1,264	1,260	1,220	1,209
VA	H7464	5	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	853	871	941	986	1,005	970	994	1,060	1,078	**	**	**	**

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
VA	H7464	7	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	9,185	8,985	8,964	8,926	8,788	8,507	8,465	8,511	8,537	**	**	**	**
VA TOTAL					19,630	19,645	19,872	19,619	19,583	19,460	19,271	19,266	19,164	86,884	87,809	86,339	86,212
WI	H2034	1	FIDE	COMMUNITY CARE HEALTH PLAN, INC.	521	509	502	501	496	485	483	472	477	472	479	474	471
WI	H2237	7	FIDE	INDEPENDENT CARE HEALTH PLAN, INC.	912	905	908	916	921	913	921	929	940	907	914	893	890
WI	H5209	2	FIDE	MOLINA HEALTHCARE OF WISCONSIN, INC.	1,063	1,063	1,056	1,048	1,034	1,023	1,017	1,008	996	978	975	967	955
WI TOTAL					2,496	2,477	2,466	2,465	2,451	2,421	2,421	2,409	2,413	2,357	2,368	2,334	2,316
TOTAL AIP ENROLLMENT					662,892	666,359	670,324	671,771	673,972	676,919	681,053	685,363	682,542	859,845	876,912	891,082	902,479
PERCENT CHANGE FROM PREVIOUS MONTH					1%	1%	1%	0%	0%	0%	1%	1%	0%	26%	2%	2%	1%

⁷ Totals reflect enrollment data from April 1, 2025. The payment reflects enrollments accepted through March 7, 2025. Centers for Medicare & Medicaid Services (CMS) Special Needs Plan (SNP) Comprehensive Monthly Enrollment Report, available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Special-Needs-Plan-SNP-Data>.

⁸ Applicable integrated plans (AIPs) are fully integrated dual eligible special needs plans (FIDE SNPs) or highly integrated dual eligible special needs plans (HIDE SNPs) with exclusively aligned enrollment or coordination-only dual eligible special needs plans (CO D-SNPs) with exclusively aligned enrollment that cover at least certain Medicaid benefits. For a full definition of AIP, see ICRC's tip sheet on Definitions of Different Medicare Advantage Dual Eligible Special Needs Plan (D-SNP) Types in 2023 and 2025, available at <https://www.integratedcareresourcecenter.com/resource/definitions-different-medicare-advantage-dual-eligible-special-needs-plan-d-snp-types-2023>

⁹ An asterisk (*) in the enrollment column indicates that the count is 10 or fewer. A double asterisk (**) in the enrollment column indicates a plan that was not operating or the plan was operating but not designated as an AIP during enrollment month.

¹⁰ Enrollment figures presented here are for the most recent 13 months (April 2024 – April 2025). Previous months of enrollment are not displayed.

¹¹ This table does not include plans in Puerto Rico, that information is available in table 5.

Table 5. Monthly Enrollment in Applicable Integrated Plans (AIPs)^{12, 13} by Plan in Puerto Rico, April 2024 – April 2025^{14, 15, 16, 17}

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
PR	H4003	17	HIDE	MMM HEALTHCARE, LLC	48,415	47,530	46,569	45,745	44,808	44,018	43,394	42,812	42,406	45,274	44,285	42,018	41,325
PR	H4003	49	HIDE	MMM HEALTHCARE, LLC	8,403	8,104	7,799	7,559	7,303	7,096	6,949	6,832	6,704	**	**	**	**
PR	H4003	58	HIDE	MMM HEALTHCARE, LLC	3,564	3,700	3,786	3,869	3,924	4,032	4,094	4,121	4,034	4,380	4,372	4,417	4,486
PR	H4004	48	HIDE	MMM HEALTHCARE, LLC	7,323	7,255	7,182	7,121	7,010	6,896	6,811	6,766	6,673	6,705	6,718	6,574	6,573
PR	H4004	62	HIDE	MMM HEALTHCARE, LLC	39,424	39,387	39,083	38,887	38,688	38,888	38,867	38,912	38,873	42,902	43,067	43,552	44,121
PR	H4004	67	HIDE	MMM HEALTHCARE, LLC	1,688	1,796	1,857	1,839	1,849	1,880	1,913	1,925	1,866	**	**	**	**
PR	H4004	68	HIDE	MMM HEALTHCARE, LLC	**	**	**	**	**	**	**	**	**	**	2,878	3,392	4,360
PR	H4004	69	HIDE	MMM HEALTHCARE, LLC	**	**	**	**	**	**	**	**	**	**	473	507	556
PR	H4007	16	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	1,993	1,947	1,864	1,794	1,721	1,655	1,621	1,587	1,546	1,370	1,263	1,012	915
PR	H4007	18	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,619	2,528	2,426	2,364	2,260	2,172	2,128	2,096	2,069	2,416	2,166	1,786	1,642
PR	H4007	19	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	899	890	864	844	811	789	771	751	742	**	**	**	**
PR	H4007	26	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	6,118	6,229	6,229	6,206	6,116	6,038	6,067	6,014	6,025	5,051	4,662	4,097	3,942
PR	H4007	27	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,586	2,657	2,718	2,746	2,762	2,783	2,817	2,812	2,824	2,458	2,415	2,484	2,499
PR	H4007	30	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	4,957	5,361	5,654	5,809	5,868	6,099	6,317	6,508	6,629	4,367	3,284	2,499	2,273

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	
PR	H4007	31	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	**	**	**	**	**	**	**	**	**	2,337	3,941	5,386	5,913	
PR	H5577	2	HIDE	MCS ADVANTAGE, INC.	32,025	32,058	32,337	32,415	32,409	32,328	32,363	32,076	32,056	31,522	31,340	31,282	30,963	
PR	H5577	17	HIDE	MCS ADVANTAGE, INC.	26,267	26,171	26,073	25,962	25,707	25,346	25,192	24,879	24,783	24,723	24,602	24,474	24,241	
PR	H5577	29	HIDE	MCS ADVANTAGE, INC.	35,230	35,949	36,861	37,523	38,001	38,425	38,893	39,072	39,419	37,384	37,140	36,541	35,888	
PR	H5577	46	HIDE	MCS ADVANTAGE, INC.	24,003	24,474	25,033	25,368	25,682	25,934	26,139	26,307	26,613	27,268	27,433	27,491	27,339	
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	6,751	7,022	7,205	7,309	7,442	7,624	7,697	7,890	8,739	11,797	13,056	14,460	15,298	
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	4,006	4,098	4,143	4,182	4,206	4,271	4,299	4,352	4,806	6,283	6,944	7,704	7,961	
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	6,853	6,876	6,914	6,932	6,955	6,925	6,884	6,869	7,196	9,288	9,532	9,979	10,069	
PR	H5577	55	HIDE	MCS ADVANTAGE, INC.	1,901	1,958	1,989	2,011	2,043	2,089	2,105	2,125	2,156	**	**	**	**	
PR	H5774	24	HIDE	TRIPLE S ADVANTAGE, INC.	16,532	16,315	16,411	16,460	16,378	16,247	16,262	16,286	16,078	**	**	**	**	
PR	H5774	26	HIDE	TRIPLE S ADVANTAGE, INC.	2,273	2,235	2,197	2,231	2,209	2,159	2,167	2,179	2,082	**	**	**	**	
PR	H5774	28	HIDE	TRIPLE S ADVANTAGE, INC.	8,764	8,753	8,724	8,770	8,788	8,611	8,668	8,621	8,224	3,862	2,950	1,922	1,546	
PR	H5774	35	HIDE	TRIPLE S ADVANTAGE, INC.	1,517	1,538	1,584	1,597	1,560	1,544	1,588	1,591	1,515	1,152	1,025	957	923	
PR	H5774	36	HIDE	TRIPLE S ADVANTAGE, INC.	6,517	6,313	6,060	5,915	5,735	5,535	5,454	5,416	5,256	**	**	**	**	
PR	H5774	40	HIDE	TRIPLE S ADVANTAGE, INC.	3,705	3,859	4,034	4,146	4,254	4,393	4,418	4,527	4,493	**	**	**	**	
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	170	233	329	351
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	16	33	46	49
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	44	68	77	74
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	*	22	27	23	

State	Contract Number	Plan ID	Integration Status	Contract Name	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	89	107	174	187
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	150	174	237	270
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	11	13	16	17
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	21	33	42	39
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	*	*	*	*
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	16	29	33	34
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	13,487	13,977	14,515	14,829
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	2,919	2,995	3,098	3,140
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	2,581	2,519	2,302	2,227
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	4,298	4,118	3,862	3,753
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	5,511	5,389	5,242	5,191
PR TOTAL					304,333	305,003	305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804	303,551	303,527
PERCENT CHANGE FROM PREVIOUS MONTH					0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

¹² Totals reflect enrollment data from April 1, 2025. The payment reflects enrollments accepted through March 7, 2025. Centers for Medicare & Medicaid Services (CMS) Special Needs Plan (SNP) Comprehensive Monthly Enrollment Report, available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDenrolData/Special-Needs-Plan-SNP-Data>.

¹³ Applicable integrated plans (AIPs) are fully integrated dual eligible special needs plans (FIDE SNPs) or highly integrated dual eligible special needs plans (HIDE SNPs) with exclusively aligned enrollment or coordination-only dual eligible special needs plans (CO D-SNP) with exclusively aligned enrollment that cover at least certain Medicaid benefits. For a full definition of AIP, see ICRC's tip sheet on Definitions of Different Medicare Advantage Dual Eligible Special Needs Plan (D-SNP) Types in 2023 and 2025, available at: <https://www.integratedcareresourcecenter.com/resource/definitions-different-medicare-advantage-dual-eligible-special-needs-plan-d-snp-types-2023>.

¹⁴ An asterisk (*) in the enrollment column indicates that the count is 10 or fewer. A double asterisk (**) in the enrollment column indicates a plan that was not operating during enrollment month.

¹⁵ Enrollment figures presented here are for the most recent 13 months (April 2024 – April 2025). Previous months of enrollment are not displayed.

¹⁶ This table only includes AIP plans in Puerto Rico, all other AIP plans are listed in table 4.

¹⁷ H5577-054 has three plan segments, which are shown in three separate rows in this table.

About ICRC

ABOUT THE INTEGRATED CARE RESOURCE CENTER

The **Integrated Care Resource Center** is a national initiative of the Centers for Medicare & Medicaid Services Medicare-Medicaid Coordination Office to help states improve the quality and cost-effectiveness of care for Medicare-Medicaid enrollees. The state technical assistance activities provided by the Integrated Care Resource Center are coordinated by Mathematica and the Center for Health Care Strategies. For more information, visit www.integratedcareresourcecenter.com.

Data Sources and Notes

Monthly MMP and PACE data source: CMS Monthly Enrollment by Contract Report, available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAAdvPartDEnrolData/Monthly-Enrollment-by-Contract>

Monthly AIP data source: CMS SNP Comprehensive Report, available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAAdvPartDEnrolData/Special-Needs-Plan-SNP-Data>