

February 2025

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	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
AL		X		169	169	169	170	167	172	172	172	170	175	170	168	169
AK				-	-	-	-	-	-	-	-	-	-	-	-	-
AR		X		518	511	504	513	528	534	537	543	548	547	554	553	563
AZ			X	-	-	-	-	-	-	-	-	-	-	-	12,286	12,362
CA		X	X	329,460	331,809	335,185	338,006	340,561	342,289	344,167	347,396	349,927	352,333	351,510	373,381	377,429
CO		X		4,280	4,294	4,330	4,360	4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577
CT				-	-	-	-	-	-	-	-	-	-	-	-	-
DC		X	X	9,621	9,651	9,642	9,401	9,446	9,425	9,383	9,093	9,075	9,178	9,232	9,580	9,595
DE		X		343	342	347	340	339	340	349	353	355	357	359	356	362
FL		X	X	20,231	20,042	20,072	19,868	19,949	19,798	19,725	19,743	20,330	20,842	20,249	72,376	80,650
GA				-	-	-	-	-	-	-	-	-	-	-	-	-
HI			X	6,217	6,241	6,197	6,200	6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735
IA		X		624	635	637	651	649	654	666	669	674	676	675	655	669
ID			X	13,115	13,219	13,215	13,257	13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815
IL	X	X		92,797	90,975	88,527	85,150	82,501	80,690	79,890	79,046	78,593	78,065	77,992	74,945	76,151
IN		X		532	547	550	551	568	568	607	630	663	698	723	729	754
KS		X		799	796	804	814	830	826	832	821	836	839	860	854	865
KY		X		111	116	132	134	143	159	182	224	261	270	284	299	331
LA		X		392	380	386	391	395	397	403	425	424	430	438	430	432
MA	X	X	X	123,003	122,548	121,336	121,173	119,867	119,807	119,670	119,770	119,974	120,094	119,908	119,950	120,023
MD		X		135	136	136	136	134	133	132	139	143	141	144	143	142

State	MMP	PACE	AIP ¹	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
ME				-	-	-	-	-	-	-	-	-	-	-	-	-
MI	X	X		43,814	42,428	46,052	45,237	42,462	41,088	40,392	40,082	39,428	39,052	39,125	39,969	39,988
MN			X	58,535	59,028	59,086	59,082	58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804
MO		X		43	42	40	42	46	46	50	50	55	56	74	73	80
MS				-	-	-	-	-	-	-	-	-	-	-	-	-
MT				-	-	-	-	-	-	-	-	-	-	-	-	-
NC		X		1,898	1,893	1,882	1,874	1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940
ND		X		177	179	181	175	175	177	177	173	169	173	172	178	180
NE		X		199	198	199	199	196	192	191	190	190	191	187	188	189
NH				-	-	-	-	-	-	-	-	-	-	-	-	-
NJ		X	X	97,285	97,448	97,449	97,559	97,537	97,031	96,849	95,440	95,527	95,921	95,370	96,721	96,655
NM		X	X	463	459	457	452	452	448	440	442	442	447	448	1,752	1,789
NV				-	-	-	-	-	-	-	-	-	-	-	-	-
NY	X	X	X	49,869	51,292	52,479	53,456	54,887	55,827	56,779	58,023	59,058	60,041	60,518	63,758	64,753
OH	X	X		63,396	64,635	62,887	62,129	60,763	60,593	60,138	59,537	59,292	59,022	57,405	41,797	56,775
OK		X		680	675	681	682	683	689	690	698	691	692	703	699	697
OR		X		1,835	1,839	1,836	1,851	1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860
PA		X		7,599	7,598	7,592	7,562	7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631
PR			X	302,031	303,346	304,333	305,003	305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804
RI	X	X		13,465	13,344	13,237	13,005	12,792	12,537	12,231	12,124	12,039	11,977	11,939	11,693	11,652
SC	X	X		11,104	10,887	10,501	10,392	10,165	10,008	9,963	9,771	9,661	9,567	9,532	9,094	9,266
SD				-	-	-	-	-	-	-	-	-	-	-	-	-
TN		X	X	2,623	2,610	2,601	2,552	2,511	2,443	2,452	2,458	2,450	2,457	2,423	2,532	2,522
TX	X	X		25,579	24,816	25,091	24,493	23,762	23,357	23,025	22,509	21,901	21,704	21,320	18,646	18,033
UT				-	-	-	-	-	-	-	-	-	-	-	-	-
VA		X	X	20,077	20,271	20,522	20,535	20,705	20,421	20,392	20,304	20,107	20,061	19,958	88,752	89,716
VT				-	-	-	-	-	-	-	-	-	-	-	-	-

State	MMP	PACE	AIP ¹	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
WA		X		1,343	1,353	1,364	1,383	1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548
WI		X	X	3,018	3,006	2,983	2,956	2,938	2,942	2,932	2,895	2,902	2,884	2,891	2,824	2,833
WV				-	-	-	-	-	-	-	-	-	-	-	-	-
WY				-	-	-	-	-	-	-	-	-	-	-	-	-
GRAND TOTAL				1,307,380	1,309,758	1,313,622	1,311,734	1,307,309	1,304,734	1,303,514	1,303,389	1,305,902	1,308,358	1,304,411	1,460,388	1,494,339
PERCENT CHANGE SINCE PREVIOUS MONTH				0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	12%	2%

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, February 2024 to February 2025^{2,3,4}

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
IL	H0336	HUMANA HEALTH PLAN, INC.	17,808	17,369	16,709	15,867	15,148	14,735	14,713	14,621	14,586	14,336	14,327	13,451	13,751
IL	H0927	HEALTH CARE SERVICE CORPORATION	22,821	22,624	22,170	21,603	21,141	20,771	20,635	20,444	20,379	20,287	20,279	19,948	20,129
IL	H2506	AETNA BETTER HEALTH PREMIER PLAN MMAI INC.	17,728	17,331	16,627	15,806	15,200	14,885	14,763	14,649	14,631	14,442	14,417	13,685	13,947
IL	H6080	MERIDIAN HEALTH PLAN OF ILLINOIS, INC.	16,244	15,831	15,859	15,532	15,324	15,074	14,743	14,421	14,214	14,437	14,425	13,816	14,102
IL	H8046	MOLINA HEALTHCARE OF ILLINOIS, INC.	18,196	17,820	17,162	16,342	15,688	15,225	15,036	14,911	14,783	14,563	14,533	14,005	14,178
		IL TOTAL	92,797	90,975	88,527	85,150	82,501	80,690	79,890	79,046	78,593	78,065	77,981	74,905	76,107
MA	H0137	COMMONWEALTH CARE ALLIANCE, INC.	32,505	32,246	31,445	31,205	30,468	30,360	30,197	30,077	29,954	29,771	29,736	29,367	29,227
MA	H7419	TUFTS HEALTH PUBLIC PLANS, INC.	8,879	8,633	8,191	8,065	7,750	7,644	7,567	7,469	7,381	7,328	7,286	7,234	7,189
MA	H9239	UNITEDHEALTHCARE INSURANCE COMPANY	6,251	6,042	5,555	5,394	5,093	5,034	4,968	4,919	4,854	4,729	4,685	4,634	4,650
		MA TOTAL	47,635	46,921	45,191	44,664	43,311	43,038	42,732	42,465	42,189	41,828	41,707	41,235	41,066
MI	H0192	AMERIHEALTH MICHIGAN, INC.	3,135	2,957	3,478	3,294	2,957	2,811	2,782	2,767	2,695	2,654	2,687	3,120	3,133
MI	H0480	MERIDIAN HEALTH PLAN OF MICHIGAN, INC.	6,394	6,217	7,153	7,132	6,450	6,225	5,931	5,779	5,609	5,543	5,505	5,209	5,173
MI	H1977	UPPER PENINSULA HEALTH PLAN, LLC	4,595	4,528	4,668	4,560	4,428	4,315	4,235	4,237	4,153	4,117	4,084	4,286	4,274
MI	H7844	MOLINA HEALTHCARE OF MICHIGAN, INC.	10,964	10,665	11,273	10,995	10,445	10,073	9,926	9,848	9,683	9,582	9,572	9,630	9,609
MI	H8026	AETNA BETTER HEALTH OF MICHIGAN INC.	9,529	8,993	10,025	9,918	9,075	8,671	8,546	8,453	8,291	8,144	8,230	8,563	8,545

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
MI	H9712	HAP CareSource	4,429	4,282	4,637	4,488	4,218	4,029	3,952	3,918	3,850	3,820	3,790	3,875	3,915
		MI TOTAL	39,046	37,642	41,234	40,387	37,573	36,124	35,372	35,002	34,281	33,860	33,868	34,683	34,649
NY	H9869	PARTNERS HEALTH PLAN, INC.	1,657	1,650	1,632	1,621	1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647
		NY TOTAL⁴	1,657	1,650	1,632	1,621	1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647
OH	H0022	BUCKEYE COMMUNITY HEALTH PLAN, INC.	11,033	10,870	10,543	10,466	10,263	10,271	10,267	10,206	10,215	10,240	9,934	9,591	9,831
OH	H2531	UNITEDHEALTHCARE COMMUNITY PLAN OF OHIO, INC.	8,835	9,252	8,953	8,863	8,629	8,688	8,611	8,559	8,501	8,393	8,089	7,875	8,285
OH	H5280	MOLINA HEALTHCARE OF OHIO, INC.	13,154	13,453	13,057	12,821	12,478	12,357	12,249	12,154	12,077	12,083	11,748	11,482	11,912
OH	H7172	AETNA BETTER HEALTH INC. (OH)	13,649	14,116	13,759	13,595	13,352	13,359	13,257	13,057	13,027	12,974	12,712	12,282	12,605
OH	H8452	CARESOURCE OHIO, INC.	16,189	16,414	16,058	15,871	15,533	15,422	15,243	15,045	14,957	14,813	14,402	53	13,624
		OH TOTAL	62,860	64,105	62,370	61,616	60,255	60,097	59,627	59,021	58,777	58,503	56,885	41,283	56,257
RI	H9576	NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND	13,100	12,985	12,869	12,631	12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260
		RI TOTAL	13,100	12,985	12,869	12,631	12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260
SC	H1723	ABSOLUTE TOTAL CARE, INC.	2,898	2,801	2,708	2,675	2,618	2,571	2,572	2,546	2,519	2,503	2,511	2,386	2,447
SC	H2533	MOLINA HEALTHCARE OF SOUTH CAROLINA, INC.	3,437	3,396	3,257	3,212	3,140	3,092	3,074	3,021	2,984	2,961	2,953	2,846	2,917
SC	H8213	SELECT HEALTH OF SOUTH CAROLINA, INC.	4,276	4,200	4,044	4,008	3,912	3,845	3,815	3,695	3,647	3,595	3,560	3,369	3,409
		SC TOTAL	10,611	10,397	10,009	9,895	9,670	9,508	9,461	9,262	9,150	9,059	9,024	8,601	8,773
TX	H6870	SUPERIOR HEALTHPLAN, INC.	5,587	5,433	5,928	5,671	5,476	5,361	5,252	5,093	4,941	4,905	4,746	3,682	3,536
TX	H7833	UNITEDHEALTHCARE COMMUNITY PLAN OF TEXAS, L.L.C.	2,972	2,852	2,880	2,845	2,753	2,716	2,717	2,666	2,631	2,590	2,560	3,236	3,175
TX	H8197	MOLINA HEALTHCARE OF TEXAS, INC.	9,469	9,172	9,141	9,018	8,870	8,764	8,725	8,619	8,582	8,573	8,563	10,644	10,241

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
TX	H8786	WELLPOINT TEXAS, INC.	6,474	6,284	6,062	5,878	5,578	5,426	5,244	5,053	4,664	4,545	4,362	**	**
		TX TOTAL	24,502	23,741	24,011	23,412	22,677	22,267	21,938	21,431	20,818	20,613	20,231	17,562	16,952
TOTAL MMP ENROLLMENT			292,208	288,416	285,843	279,376	270,026	265,506	262,499	259,597	257,088	255,173	252,901	231,212	246,711
PERCENT CHANGE SINCE PREVIOUS MONTH			-1%	-1%	-1%	-2%	-3%	-2%	-1%	-1%	-1%	-1%	-1%	-9%	7%

² Totals reflect enrollment as of the February 1, 2025 payment. The payment reflects enrollments accepted through January 3, 2025.

³ Enrollment figures presented here are for the most recent 13 months (February 2024 – February 2025) of the demonstration. Previous months of enrollment are not displayed.

⁴ New York ended the FIDA demonstration on 12/31/2019 but is continuing the FIDA-IDD program.

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

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
AL	H4074	MERCY LIFE OF ALABAMA	169	169	169	170	167	172	172	172	170	175	170	168	169
		AL TOTAL	169	169	169	170	167	172	172	172	170	175	170	168	169
AR	H4305	TOTAL LIFE HEALTHCARE	332	324	322	323	333	338	348	345	340	340	344	335	340
AR	H6342	COMPLETE HEALTH WITH PACE	93	97	95	96	96	94	91	95	98	98	98	105	107
AR	H6425	WASHINGTON REGIONAL MEDICORP	93	90	87	94	99	102	98	103	110	109	112	113	116
		AR TOTAL	518	511	504	513	528	534	537	543	548	547	554	553	563
CA	H0542	ALTAMED HEALTH SERVICES CORPORATION	2,927	2,918	2,950	2,979	3,003	3,033	3,053	3,072	3,131	3,167	3,205	3,193	3,203
CA	H0934	PACIFIC PACE, LLC	406	415	433	459	469	500	529	531	554	571	595	609	623
CA	H1228	GOLDEN VALLEY HEALTH CENTERS	173	176	175	181	178	188	198	205	203	220	243	249	252
CA	H1544	LA COAST PACE, LLC	317	326	336	345	354	353	360	362	381	391	396	412	426
CA	H1622	NORTH EAST MEDICAL SERVICES	102	106	107	110	110	114	120	125	131	132	137	135	139
CA	H1693	FAMILY HEALTH CENTERS OF SAN DIEGO, INC	213	215	218	215	223	219	228	229	227	237	246	240	253
CA	H1917	WELBEHEALTH INLAND EMPIRE PACE, LLC	**	*	*	*	*	*	*	35	57	80	112	134	169
CA	H2085	COLLABRIA CARE	25	27	30	34	36	37	41	45	52	55	58	56	55
CA	H2368	INNOVAGE CALIFORNIA PACE-SACRAMENTO, LLC	222	235	242	262	293	319	340	346	361	384	404	407	431
CA	H2384	SEQUOIA PACE, LLC	505	500	507	520	521	535	551	566	582	591	607	608	629
CA	H2541	AGEWELL PACE	28	36	40	48	54	61	67	74	78	82	89	98	98
CA	H3517	HUMBOLDT SENIOR RESOURCE CENTER, INC.	262	267	270	273	271	274	283	290	290	295	301	301	305
CA	H3563	GARY AND MARY WEST SENIOR SERVICES, INC.	312	319	324	337	337	334	337	329	338	346	362	352	352

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
CA	H4185	NEIGHBORHOOD HEALTHCARE	128	136	137	139	143	148	147	152	158	169	181	189	199
CA	H4538	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	**	**	**	**	*	*
CA	H4626	myPlace Greater LA PACE Inc.	*	*	*	*	11	16	20	22	24	23	26	27	34
CA	H5403	ON LOK SENIOR HEALTH SERVICES	1,580	1,586	1,585	1,599	1,597	1,596	1,607	1,610	1,630	1,641	1,646	1,647	1,650
CA	H5405	CENTER FOR ELDER'S INDEPENDENCE	967	962	962	973	976	985	978	990	999	1,015	1,037	1,032	1,041
CA	H5406	SUTTER VALLEY HOSPITALS	404	407	406	406	406	401	406	410	415	427	437	437	433
CA	H5629	COMMUNITY ELDERCARE OF SAN DIEGO	1,120	1,127	1,120	1,116	1,125	1,131	1,137	1,136	1,141	1,148	1,135	1,116	1,126
CA	H6079	TOTAL LONGTERM CARE, INC.	1,152	1,164	1,157	1,157	1,167	1,173	1,181	1,173	1,180	1,192	1,176	1,177	1,189
CA	H6081	HIGH DESERT PACE, INC,	**	**	**	**	**	*	*	*	21	29	37	46	56
CA	H6147	LOMA LINDA UNIVERSITY MEDICAL CENTER	*	*	*	*	*	22	27	31	39	43	50	56	56
CA	H6317	WELBEHEALTH BAY AREA PACE, LLC	*	*	22	29	35	47	60	69	82	93	100	105	114
CA	H6517	Family HealthCare Network (FHCN) PACE	**	**	**	**	**	*	*	*	12	17	24	*	34
CA	H6537	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	**	**	**	**	*	*
CA	H7366	CONCERTOHEALTH PACE OF LOS ANGELES, LLC	16	18	22	23	25	29	31	39	45	50	56	62	70
CA	H7501	ORANGE COUNTY HEALTH AUTHORITY	224	223	231	237	233	233	234	236	231	228	230	231	231
CA	H7656	VALLEY PACE, LLC	**	**	**	**	**	*	*	*	15	24	26	32	33
CA	H7855	BRANDMAN CENTERS FOR SENIOR CARE, INC.	216	219	228	232	239	248	250	256	263	267	270	268	272
CA	H8082	STOCKTON PACE	679	678	686	710	728	746	758	771	772	775	790	811	836
CA	H9360	CHINATOWN SERVICE CENTER	**	**	**	**	**	**	**	**	**	**	**	*	*

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
CA	H9411	1818 WESTERN, LLC	**	**	**	**	**	**	**	**	**	**	**	*	*
CA	H9592	INNOVATIVE INTEGRATED HEALTH, INC.	1,103	1,113	1,134	1,170	1,194	1,204	1,228	1,263	1,290	1,307	1,305	1,323	1,341
CA	H9616	CENTRO DE SALUD DE LA COMUNIDAD DE SAN YSIDRO	1,904	1,928	1,957	1,975	1,992	1,989	2,010	2,025	2,075	2,086	2,116	2,119	2,152
		CA TOTAL	14,985	15,101	15,279	15,529	15,720	15,935	16,181	16,392	16,777	17,085	17,397	17,472	17,802
CO	H0613	TOTAL LONGTERM CARE, INC.	2,657	2,663	2,679	2,684	2,679	2,706	2,717	2,727	2,769	2,802	2,810	2,799	2,823
CO	H2815	VOANS SENIOR COMMUNITY CARE OF COLORADO, INC	277	276	277	276	287	289	295	291	294	291	285	282	281
CO	H5167	ROCKY MOUNTAIN HEALTH CARE SERVICES	918	925	937	956	972	985	979	969	980	991	997	994	997
CO	H7262	TRU COMMUNITY CARE	291	289	295	297	296	299	301	305	309	312	308	301	297
CO	H9649	HOPEWEST	137	141	142	147	151	161	165	170	170	171	177	175	179
		CO TOTAL	4,280	4,294	4,330	4,360	4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577
DC	H9564	PACE4DC LLC	40	43	44	45	48	48	55	54	53	52	51	49	50
		DC TOTAL	40	43	44	45	48	48	55	54	53	52	51	49	50
DE	H5493	LIFE AT ST. FRANCIS HEALTHCARE, INC.	297	298	303	297	295	296	301	305	308	311	313	308	311
DE	H8614	MILFORD WELLNESS VILLAGE PACE	46	44	44	43	44	44	48	48	47	46	46	48	51
		DE TOTAL	343	342	347	340	339	340	349	353	355	357	359	356	362
FL	H0112	MORSE LIFE HOME CARE, INC.	810	820	826	840	845	844	849	852	852	854	851	841	850
FL	H0424	INNOVAGE FLORIDA PACE II, LLC	**	**	*	*	*	*	*	13	19	30	44	52	55
FL	H0440	EMPATH LIFE, LLC	*	*	*	*	*	*	11	13	14	18	17	18	18
FL	H1043	FLORIDA PACE CENTERS, INC.	884	888	911	947	961	975	982	973	980	983	1,007	1,002	997
FL	H3430	SUNCOAST PACE, INC.	329	327	326	325	320	317	320	315	317	318	310	301	297
FL	H4919	INNOVAGE FLORIDA PACE, LLC	*	*	*	*	*	*	14	19	29	32	39	43	51
FL	H5538	TRINITY HEALTH PACE OF PENSACOLA	*	*	*	*	*	*	*	*	*	14	17	21	21

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
FL	H5934	HOPE HOSPICE AND COMMUNITY SERVICES, INC.	482	480	486	489	488	492	490	486	477	488	491	484	519
FL	H7059	STRATUM LIFE, LLC	**	**	**	**	**	**	**	**	**	**	**	*	*
FL	H7469	PACE PARTNERS OF NORTHEAST FLORIDA	106	111	113	116	115	111	112	111	108	105	104	99	97
FL	H9252	MOUNT SINAI ELDERCARE, INC	17	21	25	24	36	35	40	47	51	58	62	67	69
		FL TOTAL	2,628	2,647	2,687	2,741	2,765	2,774	2,818	2,829	2,847	2,900	2,942	2,928	2,974
IA	H0216	PACE IOWA	412	418	421	431	426	428	434	436	439	443	442	427	435
IA	H8424	SIOUXLAND PACE, INC.	212	217	216	220	223	226	232	233	235	233	233	228	234
		IA TOTAL	624	635	637	651	649	654	666	669	674	676	675	655	669
IL	H3933	OSF HEALTHCARE SYSTEM	**	**	**	*	*	*	*	*	*	*	*	12	12
IL	H5993	LAWNDALE CHRISTIAN HEALTH CENTER	**	**	**	*	*	*	*	*	*	*	11	14	16
IL	H7027	ESPERANZA HEALTH CENTERS	**	**	**	**	*	*	*	*	*	*	*	14	16
		IL TOTAL	**	**	**	*	*	*	*	*	*	*	11	40	44
IN	H0235	PACE OF NORTHEAST INDIANA, LLC	67	72	75	72	74	73	86	92	96	103	110	109	113
IN	H1742	ASCENSION LIVING ST. VINCENT PACE, INC.	17	19	21	25	25	31	29	37	44	48	52	55	57
IN	H3522	REID HOSPITAL & HEALTH CARE SERVICES, INC.	55	57	58	58	65	64	72	74	85	90	92	92	96
IN	H5080	BOLDAGE PACE INDIANA, LLC	*	*	*	*	*	*	11	13	15	17	23	27	29
IN	H5124	FRANCISCAN ACO, INC.	241	247	246	250	254	255	262	268	275	289	294	296	305
IN	H9842	SAINT JOSEPH PACE	152	152	150	146	150	145	147	146	148	151	152	150	154
		IN TOTAL	532	547	550	551	568	568	607	630	663	698	723	729	754
KS	H1714	VIA CHRISTI HEALTHCARE OUTREACH FOR ELDERS, INC.	234	234	232	235	240	242	240	238	244	244	240	233	239
KS	H5822	MIDLAND CARE CONNECTION	472	471	477	488	498	494	499	490	497	500	522	521	527
KS	H9438	BLUESTEM PACE, INC.	93	91	95	91	92	90	93	93	95	95	98	100	99

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
		KS TOTAL	799	796	804	814	830	826	832	821	836	839	860	854	865
KY	H0016	LIFE COORDINATED COMMONWEALTH PACE INC	**	**	*	*	*	*	*	*	*	*	*	*	*
KY	H1980	HOSPICE OF THE BLUEGRASS, INC	14	16	20	20	23	25	29	31	32	36	36	36	36
KY	H5622	CARE GUIDE PARTNERS, INC.	**	**	*	*	*	*	*	*	*	*	*	12	14
KY	H6541	HORIZON-PACE, LLC	77	77	80	83	85	87	92	98	105	111	118	119	125
KY	H6759	SENIOR COMMUNITY CARE OF KENTUCKY	20	23	32	31	35	35	43	45	54	55	60	58	61
KY	H6868	BOLDAGE PACE KENTUCKY, LLC	*	*	*	*	*	12	18	19	23	24	27	33	36
KY	H7725	VOANS SENIOR COMMUNITY CARE OF JEFFERSON COUNTY	**	**	**	**	**	**	**	**	**	*	*	*	*
KY	H8099	VOANS SENIOR COMMUNITY CARE OF NORTHERN KENTUCKY	**	**	*	*	*	*	*	*	*	*	*	*	*
KY	H9468	ONE SENIOR CARE KENTUCKY, LLC	**	**	**	**	*	*	*	31	47	44	43	41	59
		KY TOTAL	111	116	132	134	143	159	182	224	261	270	284	299	331
LA	H1904	PACE GREATER NEW ORLEANS	134	129	137	142	144	144	149	151	156	155	157	149	143
LA	H1312	TRINITY HEALTH PACE OF ALEXANDRIA	**	**	**	**	*	*	*	20	23	27	39	39	47
LA	H6231	FRANCISCAN PACE, INC.	258	251	249	249	251	253	254	254	245	248	242	242	242
		LA TOTAL	392	380	386	391	395	397	403	425	424	430	438	430	432
MA	H0477	SERENITY CARE, INC.	477	480	482	481	483	481	488	492	503	513	522	530	529
MA	H0809	MERCY LIFE, INC.	207	206	203	203	207	203	208	210	202	202	206	207	204
MA	H2218	HARBOR HEALTH SERVICES, INC.	565	564	559	561	552	546	541	537	538	539	542	536	535
MA	H2219	FALLON COMMUNITY HEALTH PLAN	1,336	1,331	1,332	1,330	1,329	1,338	1,337	1,339	1,346	1,347	1,357	1,359	1,365
MA	H2220	UPHAMS CORNER HEALTH COMMITTEE, INC.	258	258	259	258	261	267	274	278	281	285	283	288	291
MA	H2221	CAMBRIDGE PUBLIC HEALTH COMMISSION	611	608	605	610	612	611	617	631	639	646	650	658	661

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
MA	H2222	ELEMENT CARE, INC.	970	963	960	968	969	980	982	977	988	995	995	993	997
MA	H2223	EAST BOSTON NEIGHBORHOOD CENTER CORP.	717	707	720	729	739	745	747	754	765	777	790	798	802
		MA TOTAL	5,141	5,117	5,120	5,140	5,152	5,171	5,194	5,218	5,262	5,304	5,345	5,369	5,384
MD	H2109	THE JOHNS HOPKINS HEALTH SYSTEM CORPORATION	135	136	136	136	134	133	132	139	143	141	144	143	142
MD	H3740	EDENBRIDGE HEALTH, LLC	**	**	**	**	**	**	**	**	*	*	*	*	*
MD	H6251	TRINITY HEALTH PACE OF MONTGOMERY COUNTY	**	**	**	**	**	**	**	**	**	*	*	*	*
		MD TOTAL	135	136	136	136	134	133	132	139	143	141	144	143	142
MI	H0390	PACE OF SOUTHWEST MICHIGAN, INC.	229	229	230	231	232	229	234	235	235	238	238	239	237
MI	H1310	COMPREHENSIVE SENIOR CARE CORPORATION	596	602	604	608	601	611	610	621	611	622	620	612	610
MI	H2318	PACE SOUTHEAST MICHIGAN	1,644	1,639	1,640	1,646	1,676	1,714	1,742	1,770	1,810	1,820	1,857	1,886	1,913
MI	H2835	THE CASCADE PACE, INC.	208	205	208	216	215	218	222	224	230	230	230	234	235
MI	H2882	PACE CENTRAL MICHIGAN, INC.	197	196	194	194	195	194	194	201	206	204	210	214	219
MI	H2936	LIFECIRCLES	386	389	387	394	393	401	408	407	412	416	420	418	425
MI	H4118	THE WASHTENAW PACE	271	271	273	269	272	274	276	277	275	270	274	280	285
MI	H4256	PACE NORTH, INC.	179	181	185	185	192	198	197	202	205	214	217	215	217
MI	H5085	COMMUNITY PACE AT HOME, INC.	96	97	98	96	95	92	92	89	98	100	99	100	103
MI	H5610	CARE RESOURCES	328	330	335	334	341	343	347	348	351	358	359	359	365
MI	H6787	VOANS SENIOR COMMUNITY CARE OF MICHIGAN, INC.	192	199	208	206	206	202	209	211	211	215	219	218	221
MI	H8769	CENTER FOR GERONTOLOGY	226	227	233	236	233	241	239	242	243	242	243	240	237
MI	H9052	REGION VII AREA AGENCY ON AGING	47	45	42	45	49	54	57	61	68	72	78	79	83
MI	H9185	A&D CHARITABLE FOUNDATION, INC.	169	176	181	190	189	193	193	192	192	191	193	192	189

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
		MI TOTAL	4,768	4,786	4,818	4,850	4,889	4,964	5,020	5,080	5,147	5,192	5,257	5,286	5,339
MO	H2918	ADVOCATES FOR A HEALTHY COMMUNITY, INC. DBA JORDAN	**	**	**	**	**	*	*	*	*	*	13	12	14
MO	H7831	PRIME ACQUISITIONS, LLC	43	42	40	42	46	46	50	50	55	56	61	61	66
MO	H8992	PACE KC, LLC	*	*	*	*	*	*	*	*	*	*	*	*	*
		MO TOTAL	43	42	40	42	46	46	50	50	55	56	74	73	80
NC	H0839	VOANS SENIOR COMMUNITY CARE OF NORTH CAROLINA, INC	147	145	148	145	146	149	153	156	157	155	157	147	143
NC	H1357	CAROLINA SENIORCARE	121	119	118	116	114	114	110	109	110	110	112	110	111
NC	H1500	LIFE ST. JOSEPH OF THE PINES, INC.	188	185	181	178	177	172	164	162	164	162	169	158	159
NC	H1533	STAYWELL SENIOR CARE, INC.	79	82	79	78	78	78	76	76	78	78	78	74	77
NC	H3942	ELDERHAUS INC.	106	108	108	111	112	110	111	109	114	113	115	110	111
NC	H4235	SENIOR TOTAL LIFE CARE, INC.	239	250	244	248	252	262	264	262	270	271	282	283	294
NC	H4326	PACE @ HOME, INC.	144	145	147	145	148	146	145	147	149	150	150	149	155
NC	H4714	PACE OF THE SOUTHERN PIEDMONT, INC.	191	188	187	191	194	215	219	212	214	221	221	224	228
NC	H6059	PACE OF GUILFORD AND ROCKINGHAM COUNTIES, INC.	218	215	217	215	215	210	218	218	211	211	209	202	206
NC	H6846	CAREPARTNERS REHABILITATION HOSPITAL, LLLP	198	195	192	188	183	186	191	188	187	187	185	194	193
NC	H9266	PIEDMONT HEALTH SERVICES, INC.	267	261	261	259	265	265	268	270	269	269	266	269	263
		NC TOTAL	1,898	1,893	1,882	1,874	1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940
ND	H7195	NORTHLAND PACE PROGRAM	177	179	181	175	175	177	177	173	169	173	172	178	180
		ND TOTAL	177	179	181	175	175	177	177	173	169	173	172	178	180
NE	H7003	PACE NEBRASKA	199	198	199	199	196	192	191	190	190	191	187	188	189
		NE TOTAL	199	198	199	199	196	192	191	190	190	191	187	188	189
NJ	H1234	CAPITAL HEALTH LIFE	215	212	210	207	205	202	201	198	195	192	196	198	196

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
NJ	H3493	LIFE AT LOURDES, INC.	152	153	153	162	162	162	162	158	158	157	158	159	159
NJ	H6371	LUTHERAN SENIOR HEALTHCARE, INC.	88	93	92	90	88	86	83	84	84	85	84	82	84
NJ	H6887	INSPIRA HEALTH NETWORK LIFE, INC.	239	244	244	240	238	240	242	241	237	238	236	243	243
NJ	H7619	ATLANTICARE HEALTH SERVICES, INC.	143	143	144	136	137	139	138	142	143	144	148	145	147
NJ	H9323	ACUTE CARE HEALTH SYSTEM, LLC	317	316	327	334	345	346	367	366	370	372	372	376	376
		NJ TOTAL	1,154	1,161	1,170	1,169	1,175	1,175	1,193	1,189	1,187	1,188	1,194	1,203	1,205
NM	H5213	TOTAL COMMUNITY CARE, L.L.C.	463	459	457	452	452	448	440	442	442	447	448	439	443
		NM TOTAL	463	459	457	452	452	448	440	442	442	447	448	439	443
NY	H1518	CATHOLIC HEALTH SYSTEM BUFFALO PACE	227	229	226	228	229	234	236	236	240	240	237	240	246
NY	H2397	PACE AT HUDSON HEADWATERS, INC.	**	**	**	**	**	**	**	**	**	*	*	*	*
NY	H3321	LORETTO INDEPENDENT LIVING SERVICES, INC.	531	531	537	548	551	551	567	569	576	580	582	585	598
NY	H3322	SENIOR CARE CONNECTION, INC.	350	369	381	391	399	401	407	403	408	415	411	410	422
NY	H3329	CENTERLIGHT HEALTHCARE, INC.	2,158	2,173	2,160	2,172	2,174	2,179	2,230	2,318	2,325	2,336	2,384	2,378	2,404
NY	H3331	INDEPENDENT LIVING FOR SENIORS, INC.	694	707	708	708	707	719	719	724	719	732	731	723	735
NY	H4393	CATHOLIC MANAGED LONG TERM CARE, INC.	688	704	714	721	729	735	737	728	738	747	754	747	725
NY	H6596	FALLON HEALTH WEINBERG, INC.	140	135	134	132	135	138	142	145	150	158	162	169	182
NY	H8777	COMPLETE SENIOR CARE, INC.	132	133	130	132	132	132	134	135	135	133	133	136	137
NY	H8800	TOTAL SENIOR CARE, INC.	123	123	123	121	124	121	123	123	126	125	122	115	116
		NY TOTAL	5,043	5,104	5,113	5,153	5,180	5,210	5,295	5,381	5,417	5,466	5,516	5,503	5,565
OH	H3613	MCGREGOR PACE	536	530	517	513	508	496	511	516	515	519	520	514	518
		OH TOTAL	536	530	517	513	508	496	511	516	515	519	520	514	518

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
OK	H4142	CHEROKEE NATION COMPREHENSIVE CARE AGENCY	184	180	185	185	185	186	187	185	184	182	185	184	182
OK	H6941	LIFE PACE	220	222	225	226	230	237	238	241	241	247	249	253	249
OK	H7114	VALIR PACE	276	273	271	271	268	266	265	272	266	263	269	262	266
		OK TOTAL	680	675	681	682	683	689	690	698	691	692	703	699	697
OR	H0247	ALLCARE PACE, LLC	71	72	72	74	73	71	71	71	69	66	56	**	**
OR	H3809	PROVIDENCE HEALTH & SERVICES - OREGON	1,764	1,767	1,764	1,777	1,783	1,793	1,799	1,818	1,852	1,847	1,848	1,851	1,860
		OR TOTAL	1,835	1,839	1,836	1,851	1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860
PA	H0819	SENIOR LIFE YORK, INC.	386	391	390	387	395	392	391	393	398	397	392	378	384
PA	H2064	GEISINGER COMMUNITY HEALTH SERVICES	397	400	402	398	406	399	392	394	389	388	380	385	380
PA	H2537	ALBRIGHT CARE SERVICES	81	83	79	74	73	74	76	74	75	73	73	**	**
PA	H2937	SENIOR LIFE GREENSBURG, INC.	198	197	195	197	201	200	202	200	193	187	189	185	185
PA	H2992	SENIORLIFE WASHINGTON, INC.	523	527	522	519	514	522	517	511	520	521	521	528	537
PA	H3060	VIECARE BUTLER, LLC	157	158	161	161	157	160	159	163	163	162	162	157	158
PA	H3908	TRINITY HEALTH LIFE PENNSYLVANIA, INC.	308	306	309	305	305	300	301	299	295	290	288	286	282
PA	H3917	PITTSBURGH CARE PARTNERSHIP, INC.	776	780	775	776	774	784	799	806	795	810	821	822	805
PA	H3918	LIVING INDEPENDENCE FOR THE ELDERLY	503	500	504	498	501	505	512	514	521	518	523	524	532
PA	H3919	MERCY LIFE	797	793	794	795	793	798	797	794	794	788	777	765	769
PA	H3925	PENNSYLVANIA PACE, INC.	224	220	219	220	222	227	232	232	230	233	227	224	225
PA	H4999	LIFE NORTHWESTERN PENNSYLVANIA, LLC	651	656	663	662	669	680	690	693	686	711	712	691	694
PA	H5902	SENIOR LIFE ALTOONA, INC.	531	536	533	539	545	552	551	542	538	529	531	516	524
PA	H5978	SENIOR LIFE LEHIGH VALLEY, INC.	536	541	544	550	558	552	562	573	581	594	604	593	605
PA	H6188	VIECARE ARMSTRONG, LLC	88	87	85	84	82	84	85	86	88	86	85	88	89

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
PA	H6551	LIFE ST. MARY	247	246	245	247	246	244	247	245	247	250	251	257	258
PA	H7660	VIECARE BEAVER, LLC	402	398	397	394	392	390	390	391	395	397	401	401	405
PA	H9068	ALBRIGHT CARE SERVICES	166	166	164	156	153	152	153	145	143	141	142	208	210
PA	H9830	INNOVAGE PENNSYLVANIA LIFE, LLC	628	613	611	600	602	603	599	588	587	588	591	583	589
		PA TOTAL	7,599	7,598	7,592	7,562	7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631
RI	H4105	PACE ORGANIZATION OF RHODE ISLAND	365	359	368	374	378	382	382	385	392	399	402	393	392
		RI TOTAL	365	359	368	374	378	382	382	385	392	399	402	393	392
SC	H0105	ORANGEBURG SENIOR HELPING CENTER, LLC	84	84	86	87	88	85	86	86	89	92	92	90	92
SC	H4053	PRISMA HEALTH-UPSTATE	120	119	119	122	124	130	133	143	145	147	153	148	149
SC	H4203	PRISMA HEALTH-MIDLANDS	289	287	287	288	283	285	283	280	277	269	263	255	252
SC	H9317	BEACON OF LIFE SC, LLC	**	**	**	**	**	**	**	*	*	92	*	*	*
		SC TOTAL	493	490	492	497	495	500	502	509	511	508	508	493	493
TN	H4402	ALEXIAN BROTHERS COMMUNITY SERVICES	263	259	260	255	251	249	260	264	266	267	260	259	261
		TN TOTAL	263	259	260	255	251	249	260	264	266	267	260	259	261
TX	H4517	AMARILLO MULTISVC CTR FR THE AGING INC	128	124	124	126	128	127	125	121	121	124	123	124	126
TX	H4518	BIENVIVIR SENIOR HEALTH SERVICES	802	805	811	809	812	813	814	811	816	819	817	813	808
TX	H9998	LUBBOCK REGIONAL MENTAL HEALTH MENTAL RETARDATION	147	146	145	146	145	150	148	146	146	148	149	147	147
		TX TOTAL	1,077	1,075	1,080	1,081	1,085	1,090	1,087	1,078	1,083	1,091	1,089	1,084	1,081
VA	H0870	BLUE RIDGE INDEPENDENCE AT HOME, INC.	**	**	**	**	**	**	*	*	*	*	*	*	18
VA	H1239	INNOVAGE VIRGINIA PACE - ROANOKE VALLEY, LLC	242	232	233	232	233	234	238	240	241	241	247	247	253

State	Contract Number	Plan Name	Feb 2024	Mar 2024	Apr 2023	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
VA	H2386	APPALACHIAN AGENCY FOR SENIOR CITIZENS, INC.	122	124	124	131	135	135	136	133	134	135	138	138	146
VA	H2941	SENTARA LIFE CARE CORPORATION, INC.	216	217	219	222	222	227	227	226	227	225	226	231	233
VA	H3473	INNOVAGE VIRGINIA PACE – CHARLOTTESVILLE, LLC	215	215	219	227	227	230	234	232	236	242	243	245	252
VA	H3991	CONCERTOHEALTH OF NORTHERN VIRGINIA, LLC	27	29	32	35	35	33	35	35	36	36	38	38	35
VA	H5037	MOUNTAIN EMPIRE OLDER CITIZENS, INC.	83	83	83	85	84	87	92	92	91	92	93	90	90
VA	H8096	CENTRA HEALTH, INC.	283	290	292	289	295	297	303	314	315	325	328	329	329
VA	H8655	INNOVAGE VIRGINIA PACE II, LLC	535	536	543	540	543	545	549	542	550	559	559	550	551
		VA TOTAL	1,723	1,726	1,745	1,761	1,774	1,788	1,814	1,814	1,830	1,855	1,872	1,868	1,907
WA	H3084	INTERNATIONAL COMMUNITY HEALTH SERVICES	93	93	91	91	93	93	97	95	98	99	98	98	97
WA	H3284	PNW PACE PARTNERS, LLC	116	120	127	134	137	141	147	153	157	159	167	171	177
WA	H5007	PROVIDENCE HEALTH SYSTEM	1,134	1,140	1,146	1,158	1,164	1,182	1,193	1,203	1,229	1,235	1,246	1,254	1,274
		WA TOTAL	1,343	1,353	1,364	1,383	1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548
WI	H5212	COMMUNITY CARE, INC.	490	490	487	479	472	477	481	474	481	475	478	467	465
		WI TOTAL	490	490	487	479	472	477	481	474	481	475	478	467	465
TOTAL PACE ENROLLMENT			60,846	61,050	61,407	61,867	62,304	62,839	63,559	64,066	64,877	65,556	66,239	66,128	66,912
PERCENT CHANGE FROM PREVIOUS MONTH			1%	0%	1%	1%	1%	1%	1%	1%	1%	1%	1%	0%	1%

⁵ Totals reflect enrollment as of the February 1, 2025 payment. The payment reflects enrollments accepted through January 3, 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 less. Enrollment counts that are 10 or less 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 (February 2024 – February 2025). Previous months of enrollment are not displayed.

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

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
AZ	H0321	004	FIDE	ARIZONA PHYSICIANS IPA, INC.	**	**	**	**	**	**	**	**	**	**	**	5,810	5,861
AZ	H4931	015	FIDE	BANNER - UNIVERSITY CARE ADVANTAGE	**	**	**	**	**	**	**	**	**	**	**	3,087	3,084
AZ	H5580	004	FIDE	MERCY CARE	**	**	**	**	**	**	**	**	**	**	**	3,389	3,417
AZ	H5590	010	FIDE	BRIDGEWAY HEALTH SOLUTIONS OF ARIZONA, INC.	**	**	**	**	**	**	**	**	**	**	**	*	*
AZ TOTAL					**	**	**	**	**	**	**	**	**	**	**	12,286	12,362
CA	H0976	001	FIDE	SCAN HEALTH PLAN	18,632	18,479	18,128	17,986	17,906	17,708	17,512	17,391	17,268	17,206	17,162	17,894	18,129
CA	H0976	002	FIDE	SCAN HEALTH PLAN	1,972	2,013	2,105	2,142	2,204	2,280	2,325	2,320	2,307	2,329	2,405	2,386	2,390
CA	H1224	001	CO	LOCAL INITIATIVE HEALTH AUTHORITY FOR LA COUNTY	19,298	19,430	19,479	19,530	19,647	19,731	19,795	20,035	20,235	20,341	20,369	22,780	24,015
CA	H2819	001	CO	CALIFORNIA PHYSICIANS' SERVICE	16,595	16,447	16,161	15,972	15,738	15,587	15,465	15,226	15,092	15,032	14,846	14,940	14,902
CA	H3038	003	CO	MOLINA HEALTHCARE OF CALIFORNIA	15,939	16,269	16,676	17,153	17,504	17,695	17,967	18,432	18,707	18,914	18,900	19,444	19,713
CA	H3561	007	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	5,242	5,328	5,399	5,396	5,363	5,413	5,419	5,476	5,473	5,481	5,431	5,246	5,154
CA	H3561	008	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	34,860	34,084	33,666	33,252	32,848	32,628	32,629	32,522	32,351	32,228	32,078	31,337	30,960
CA	H4045	001	CO	SANTA CLARA COUNTY HEALTH AUTHORITY	10,657	10,703	10,729	10,711	10,756	10,719	10,675	10,742	10,729	10,721	10,691	10,863	10,909

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
CA	H4471	001	CO	BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN LLC	60,001	60,803	62,486	63,761	65,016	65,916	66,789	68,202	69,359	70,373	69,648	75,645	77,044
CA	H4733	001	CO	COMMUNITY HEALTH GROUP	6,772	6,836	6,916	6,935	7,016	7,064	7,243	7,360	7,425	7,551	7,589	7,816	7,855
CA	H5433	001	CO	ORANGE COUNTY HEALTH AUTHORITY	17,431	17,386	17,314	17,289	17,327	17,327	17,363	17,337	17,289	17,281	17,190	17,164	17,112
CA	H5433	003	CO	ORANGE COUNTY HEALTH AUTHORITY	**	**	**	**	**	**	**	**	**	**	**	103	189
CA	H5649	002	CO	CENTRAL HEALTH PLAN OF CALIFORNIA, INC.	**	**	**	**	**	**	**	**	**	**	**	10,236	10,251
CA	H6019	001	CO	SAN MATEO HEALTH COMMISSION	8,595	8,587	8,501	8,468	8,440	8,428	8,394	8,361	8,339	8,296	8,229	8,279	8,241
CA	H8794	001	CO	KAISER FOUNDATION HP, INC.	42,474	43,908	45,609	46,721	47,373	47,820	48,266	49,102	49,832	50,422	50,479	52,077	52,820
CA	H8794	002	CO	KAISER FOUNDATION HP, INC.	21,629	21,790	21,867	22,115	22,340	22,506	22,566	22,762	22,926	23,058	23,050	23,473	23,747
CA	H8894	001	CO	INLAND EMPIRE HEALTH PLAN	34,378	34,645	34,870	35,046	35,363	35,532	35,578	35,736	35,818	36,015	36,046	36,226	36,196
CA TOTAL					314,475	316,708	319,906	322,477	324,841	326,354	327,986	331,004	333,150	335,248	334,113	355,909	359,627
DC	H2406	053	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	9,030	9,032	9,006	8,766	8,790	8,757	8,698	8,395	8,365	8,444	8,495	8,714	8,720
DC	H7464	010	HIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	551	576	592	590	608	620	630	644	657	682	686	817	825
DC TOTAL					9,581	9,608	9,598	9,356	9,398	9,377	9,328	9,039	9,022	9,126	9,181	9,531	9,545
FL	H1032	175	HIDE	SUNSHINE STATE HEALTH PLAN, INC.	13,823	13,706	13,604	13,399	13,274	13,076	12,905	12,735	12,496	12,319	11,222	10,869	10,736
FL	H1032	176	FIDE	SUNSHINE STATE HEALTH PLAN, INC.	492	482	481	474	476	469	486	529	550	585	455	**	**

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
FL	H1036	280	FIDE	HUMANA MEDICAL PLAN, INC.	28	21	18	19	18	18	17	14	14	13	12	11	11
FL	H1045	063	HIDE	PREFERRED CARE PARTNERS, INC.	**	**	**	**	**	**	**	**	**	**	**	14,428	16,891
FL	H1045	065	HIDE	PREFERRED CARE PARTNERS, INC.	**	**	**	**	**	**	**	**	**	**	**	1,095	1,238
FL	H1889	026	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	**	**	13,489	15,752
FL	H2509	001	FIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	1,029	1,051	1,220	1,255	1,373	1,396	1,390	1,363	1,359	1,356	1,360	1,360	1,361
FL	H2509	003	HIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	**	**	20,638	23,359
FL	H2962	035	HIDE	ULTIMATE HEALTH PLANS, INC.	222	226	224	223	218	215	207	201	192	180	180	159	152
FL	H5410	025	HIDE	HEALTHSPRING OF FLORIDA, INC.	228	233	226	222	220	210	198	188	182	182	175	166	156
FL	H5410	031	HIDE	HEALTHSPRING OF FLORIDA, INC.	97	106	105	106	104	100	94	92	90	83	80	77	79
FL	H5410	032	HIDE	HEALTHSPRING OF FLORIDA, INC.	147	143	143	146	139	131	129	174	171	167	198	193	205
FL	H5410	042	HIDE	HEALTHSPRING OF FLORIDA, INC.	389	389	374	365	356	346	342	340	330	320	311	280	276
FL	H5410	047	HIDE	HEALTHSPRING OF FLORIDA, INC.	41	37	40	34	36	37	36	33	34	32	30	26	26
FL	H5410	049	HIDE	HEALTHSPRING OF FLORIDA, INC.	395	363	355	314	414	501	589	789	1,631	2,288	2,876	3,330	3,674
FL	H5420	016	HIDE	PREFERRED CARE NETWORK, INC.	**	**	**	**	**	**	**	**	**	**	**	2,872	3,328

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
FL	H7284	003	HIDE	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	699	625	572	548	536	510	500	444	415	401	394	282	265
FL	H9986	003	FIDE	HPMP OF FLORIDA, INC.	13	13	23	22	20	15	14	12	19	16	14	**	**
FL	H9986	004	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	**	**	122	124
FL	H9986	004	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	**	**	51	43
FL	H9986	004	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	**	**	**	**	*	*
FL TOTAL					17,603	17,395	17,385	17,127	17,184	17,024	16,907	16,914	17,483	17,942	17,307	69,448	77,676
HI	H1230	008	FIDE	KAISER FOUNDATION HP, INC.	1,567	1,581	1,570	1,585	1,586	1,585	1,600	1,613	1,601	1,607	1,594	1,594	1,607
HI	H2406	132	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	**	**	14,575	15,702
HI	H2491	004	FIDE	WELLCARE HEALTH INSURANCE OF ARIZONA, INC.	2,489	2,484	2,463	2,439	2,446	2,449	2,422	2,422	2,418	2,407	2,404	2,386	2,383
HI	H3832	011	FIDE	HAWAII MEDICAL SERVICE ASSOCIATION	**	**	**	**	**	**	**	**	**	**	**	2,864	3,019
HI	H5969	002	FIDE	ALOHACARE	2,161	2,176	2,164	2,176	2,156	2,186	2,193	2,198	2,192	2,088	2,047	2,045	2,024
HI TOTAL					6,217	6,241	6,197	6,200	6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735
ID	H5628	008	FIDE	MOLINA HEALTHCARE OF UTAH, INC.	5,386	5,397	5,429	5,468	5,539	5,587	5,470	5,543	5,520	5,571	5,487	5,537	5,569
ID	H9656	001	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	6,277	6,357	6,328	6,327	6,375	6,362	6,316	6,410	6,449	6,473	6,430	6,693	6,722
ID	H9656	002	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	1,452	1,465	1,458	1,462	1,473	1,471	1,458	1,459	1,462	1,471	1,467	1,521	1,524
ID TOTAL					13,115	13,219	13,215	13,257	13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815
MA	H2224	001	FIDE	SENIOR WHOLE HEALTH, LLC	6,719	6,647	6,626	6,576	6,536	6,507	6,370	6,329	6,322	6,307	6,265	5,301	5,199

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
MA	H2224	003	FIDE	SENIOR WHOLE HEALTH, LLC	5,285	5,301	5,342	5,345	5,424	5,468	5,390	5,397	5,477	5,520	5,497	5,275	5,291
MA	H2225	001	FIDE	COMMONWEALTH CARE ALLIANCE, INC.	15,123	15,185	15,486	15,682	15,645	15,873	16,067	16,418	16,612	16,879	16,907	16,651	16,510
MA	H2226	001	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	14,728	14,778	14,833	14,893	14,913	14,763	14,807	14,760	14,782	14,790	14,774	15,407	15,534
MA	H2226	003	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	7,738	7,752	7,748	7,718	7,694	7,622	7,612	7,633	7,668	7,661	7,631	7,968	8,012
MA	H8330	001	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	6,437	6,610	6,702	6,799	6,864	6,986	7,088	7,219	7,288	7,396	7,419	7,908	7,995
MA	H8330	002	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	2,787	2,807	2,840	2,902	2,920	2,990	3,053	3,088	3,169	3,254	3,274	3,733	3,825
MA	H8928	001	FIDE	FALLON COMMUNITY HEALTH PLAN	9,608	9,610	9,609	9,590	9,531	9,523	9,504	9,386	9,315	9,280	9,227	9,277	9,351
MA	H9585	001	FIDE	BOSTON MEDICAL CENTER HEALTH PLAN, INC.	1,802	1,820	1,839	1,864	1,877	1,866	1,853	1,857	1,890	1,875	1,862	1,826	1,856
MA TOTAL					70,227	70,510	71,025	71,369	71,404	71,598	71,744	72,087	72,523	72,962	72,856	73,346	73,573
MN	H0845	001	FIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	38	41	45	46	48	46	42	39	37	37	34	**	**
MN	H2416	001	FIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	1,859	1,884	1,897	1,895	1,910	1,941	1,980	1,973	1,983	1,985	1,985	1,944	1,974
MN	H2417	001	FIDE	ITASCA MEDICAL CARE	349	349	349	345	342	331	327	327	323	330	328	322	340
MN	H2419	001	FIDE	SOUTH COUNTRY HEALTH ALLIANCE	1,240	1,246	1,248	1,245	1,216	1,194	1,183	1,161	1,138	1,132	1,115	1,014	1,012
MN	H2422	002	FIDE	HEALTHPARTNERS, INC.	5,912	5,929	5,903	5,855	5,769	5,693	5,695	5,688	5,666	5,655	5,604	5,456	5,435
MN	H2425	001	FIDE	HMO Minnesota	10,084	10,081	10,030	10,024	9,928	9,897	9,947	9,947	9,972	9,960	9,870	9,764	10,073
MN	H2456	002	FIDE	UCARE MINNESOTA	17,250	17,370	17,377	17,356	17,203	17,140	17,120	17,091	17,126	17,097	16,917	16,675	17,233

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
MN	H2458	002	FIDE	MEDICA HEALTH PLANS	10,012	10,079	10,064	10,110	10,222	10,244	10,264	10,300	10,310	10,309	10,217	10,032	10,243
MN	H2926	001	HIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	328	342	351	360	362	366	410	445	453	459	456	448	484
MN	H5703	001	HIDE	SOUTH COUNTRY HEALTH ALLIANCE	471	470	466	462	460	460	459	456	453	451	447	416	425
MN	H5937	001	HIDE	UCARE MINNESOTA	8,975	9,194	9,303	9,344	9,382	9,327	9,378	9,461	9,537	9,546	9,451	9,242	9,734
MN	H7778	001	HIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	75	81	89	91	94	97	96	99	100	95	95	**	**
MN	H9952	001	HIDE	MEDICA HEALTH PLANS	1,942	1,962	1,964	1,949	1,944	1,918	1,911	1,906	1,911	1,906	1,887	1,840	1,851
MN TOTAL					58,535	59,028	59,086	59,082	58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804
NJ	H0913	013	FIDE	WELLCARE HEALTH PLANS OF NEW JERSEY, INC.	7,306	7,382	7,498	7,565	7,683	7,699	7,719	7,773	7,827	7,816	7,767	7,752	7,789
NJ	H3113	005	HIDE	OXFORD HEALTH PLANS (NJ), INC.	46,516	46,625	46,454	46,426	46,189	45,882	45,677	44,065	43,930	43,998	44,117	45,661	45,631
NJ	H3240	013	FIDE	AMERIGROUP NEW JERSEY, INC.	14,297	14,053	13,675	13,629	13,517	13,414	13,313	13,169	13,080	13,069	12,323	12,741	12,602
NJ	H3240	024	FIDE	AMERIGROUP NEW JERSEY, INC.	927	935	929	947	975	997	1,048	1,116	1,145	1,160	1,165	1,180	1,205
NJ	H6399	001	FIDE	AETNA BETTER HEALTH INC. (NJ)	6,443	6,606	6,913	7,049	7,276	7,242	7,304	7,555	7,719	7,851	7,744	6,647	6,457
NJ	H8298	001	FIDE	HORIZON HEALTHCARE OF NEW JERSEY, INC.	20,642	20,686	20,810	20,774	20,722	20,622	20,595	20,573	20,639	20,839	21,060	21,537	21,766
NJ TOTAL					96,131	96,287	96,279	96,390	96,362	95,856	95,656	94,251	94,340	94,733	94,176	95,518	95,450
NM	H0294	049	HIDE	UNITEDHEALTHCARE INSURANCE COMPANY	**	**	**	**	**	**	**	**	**	**	**	1,313	1,346
NM TOTAL					**	**	**	**	**	**	**	**	**	**	**	1,313	1,346
NY	H0034	002	FIDE	HAMASPIK, INC.	812	865	884	899	911	934	951	954	956	955	972	982	1,001

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
NY	H0423	007	FIDE	METROPLUS HEALTH PLAN, INC.	166	166	169	176	181	181	187	190	192	199	208	216	246
NY	H1732	001	FIDE	HEALTHPLUS HP, LLC	117	125	127	134	145	163	195	209	210	207	207	**	**
NY	H2168	002	FIDE	VILLAGE SENIOR SERVICES CORPORATION	2,759	2,848	2,936	3,027	3,106	3,176	3,256	3,461	3,601	3,723	3,749	4,226	4,370
NY	H3305	034	HIDE	MVP HEALTH PLAN, INC.	**	**	**	**	**	**	**	**	**	**	**	1,046	972
NY	H3347	007	FIDE	ELDERPLAN, INC.	3,724	3,863	3,998	4,141	4,265	4,360	4,413	4,550	4,634	4,720	4,902	5,014	5,099
NY	H3359	034	FIDE	HEALTHFIRST HEALTH PLAN, INC.	27,877	28,530	29,115	29,546	30,380	30,947	31,440	32,012	32,482	32,934	33,121	33,612	34,219
NY	H3359	038	HIDE	HEALTHFIRST HEALTH PLAN, INC.	213	441	471	518	589	565	597	607	712	740	779	**	**
NY	H3387	013	FIDE	UNITEDHEALTHCARE OF NEW YORK, INC.	**	**	**	**	**	**	**	**	**	**	**	11	*
NY	H5549	003	FIDE	VNS CHOICE	4,123	4,223	4,359	4,435	4,557	4,621	4,679	4,782	4,856	4,934	4,936	5,461	5,403
NY	H5599	003	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	783	814	862	920	995	1,037	1,090	1,130	1,170	1,234	1,241	1,930	2,005
NY	H5599	008	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	387	390	471	501	522	542	571	606	656	717	709	**	**
NY	H5991	013	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	**	**	**	**	216	214
NY	H5991	013	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	**	**	**	**	288	295
NY	H5992	007	FIDE	SENIOR WHOLE HEALTH OF NEW YORK, INC.	246	262	279	299	300	296	291	279	278	275	279	277	276
NY	H6776	002	FIDE	ELDERSERVE HEALTH, INC.	270	273	290	294	311	321	329	345	364	369	375	378	394
NY	H6988	004	FIDE	CENTERS PLAN FOR HEALTHY LIVING, LLC	1,692	1,738	1,773	1,792	1,820	1,847	1,855	1,886	1,897	1,901	1,856	1,952	1,947

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
NY	H7524	001	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	**	**	**	**	52	55
NY	H7524	003	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	**	**	**	**	735	828
NY	H8432	041	FIDE	ANTHEM HEALTHCHOICE HMO, INC.	**	**	**	**	**	**	**	**	**	**	**	216	217
NY TOTAL					43,169	44,538	45,734	46,682	48,082	48,990	49,854	51,011	52,008	52,908	53,334	56,612	57,541
TN	H0251	004	FIDE	UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.	1,153	1,179	1,181	1,150	1,120	1,060	1,070	1,085	1,084	1,101	1,101	1,131	1,097
TN	H3259	002	FIDE	VOLUNTEER STATE HEALTH PLAN	531	530	536	531	536	542	540	538	532	533	537	549	566
TN	H5828	001	FIDE	AMERIGROUP TENNESSEE, INC.	676	642	624	616	604	592	582	571	568	556	525	593	598
TN TOTAL					2,360	2,351	2,341	2,297	2,260	2,194	2,192	2,194	2,184	2,190	2,163	2,273	2,261
VA	H0421	001	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	**	**	**	**	9,752	9,574
VA	H1610	001	FIDE	COVENTRY HEALTH CARE OF VIRGINIA, INC.	9,216	9,372	9,592	9,789	9,967	9,707	9,790	9,983	9,812	9,695	9,549	13,685	13,770
VA	H2445	001	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	**	**	1,618	1,717
VA	H2445	003	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	**	**	12,701	13,210
VA	H2445	005	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	**	**	**	**	15,071	14,465
VA	H4499	001	FIDE	SENTARA HEALTH PLANS	**	**	**	**	**	**	**	**	**	**	**	8,534	8,572
VA	H4694	001	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	**	**	8,577	8,463
VA	H4694	003	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	**	**	5,865	6,294
VA	H4694	004	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	**	**	**	**	9,817	10,484

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
VA	H7559	001	FIDE	Molina Healthcare of Virginia, LLC	**	**	**	**	**	**	**	**	**	**	**	1,264	1,260
VA	H7464	007	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	9,138	9,173	9,185	8,985	8,964	8,926	8,788	8,507	8,465	8,511	8,537	**	**
VA	H9877	001	FIDE	VIRGINIA PREMIER HEALTH PLAN, INC.	**	**	**	**	**	**	**	**	**	**	**	**	**
VA TOTAL					18,354	18,545	18,777	18,774	18,931	18,633	18,578	18,490	18,277	18,206	18,086	86,884	87,809
WI	H2034	001	FIDE	COMMUNITY CARE HEALTH PLAN, INC.	536	535	521	509	502	501	496	485	483	472	477	472	479
WI	H2237	007	FIDE	INDEPENDENT CARE HEALTH PLAN, INC.	918	914	912	905	908	916	921	913	921	929	940	907	914
WI	H5209	002	FIDE	MOLINA HEALTHCARE OF WISCONSIN, INC.	1,074	1,067	1,063	1,063	1,056	1,048	1,034	1,023	1,017	1,008	996	978	975
WI TOTAL					2,528	2,516	2,496	2,477	2,466	2,465	2,451	2,421	2,421	2,409	2,413	2,357	2,368
TOTAL AIP ENROLLMENT					652,295	656,946	662,039	665,488	669,383	670,785	672,967	675,949	680,059	684,303	681,464	859,845	876,912
PERCENT CHANGE FROM PREVIOUS MONTH					0%	1%	1%	1%	1%	0%	0%	0%	1%	1%	0%	26%	2%

⁷ Totals reflect enrollment data from February 1, 2025. The payment reflects enrollments accepted through January 3, 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/MCRAdvPartEnrolData/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-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](#).

⁹ An asterisk (*) in the enrollment column indicates that the count is 10 or less. 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 (February 2024 – February 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, February 2024 – February 2025^{14,15,16,17}

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
PR	H4003	017	HIDE	MMM HEALTHCARE, LLC	52,385	50,078	48,415	47,530	46,569	45,745	44,808	44,018	43,394	42,812	42,406	45,274	44,285
PR	H4003	049	HIDE	MMM HEALTHCARE, LLC	9,996	8,955	8,403	8,104	7,799	7,559	7,303	7,096	6,949	6,832	6,704	**	**
PR	H4003	058	HIDE	MMM HEALTHCARE, LLC	2,933	3,379	3,564	3,700	3,786	3,869	3,924	4,032	4,094	4,121	4,034	4,380	4,372
PR	H4004	048	HIDE	MMM HEALTHCARE, LLC	7,417	7,374	7,323	7,255	7,182	7,121	7,010	6,896	6,811	6,766	6,673	6,705	6,718
PR	H4004	062	HIDE	MMM HEALTHCARE, LLC	39,784	39,752	39,424	39,387	39,083	38,887	38,688	38,888	38,867	38,912	38,873	42,902	43,067
PR	H4004	067	HIDE	MMM HEALTHCARE, LLC	1,144	1,539	1,688	1,796	1,857	1,839	1,849	1,880	1,913	1,925	1,866	**	**
PR	H4004	068	HIDE	MMM HEALTHCARE, LLC	**	**	**	**	**	**	**	**	**	**	**	2,878	3,392
PR	H4004	069	HIDE	MMM HEALTHCARE, LLC	**	**	**	**	**	**	**	**	**	**	**	473	507
PR	H4007	016	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,153	2,049	1,993	1,947	1,864	1,794	1,721	1,655	1,621	1,587	1,546	1,370	1,263
PR	H4007	018	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	3,049	2,795	2,619	2,528	2,426	2,364	2,260	2,172	2,128	2,096	2,069	2,416	2,166
PR	H4007	019	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	1,046	948	899	890	864	844	811	789	771	751	742	**	**
PR	H4007	026	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	6,024	6,041	6,118	6,229	6,229	6,206	6,116	6,038	6,067	6,014	6,025	5,051	4,662

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
PR	H4007	027	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,397	2,508	2,586	2,657	2,718	2,746	2,762	2,783	2,817	2,812	2,824	2,458	2,415
PR	H4007	030	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	3,731	4,428	4,957	5,361	5,654	5,809	5,868	6,099	6,317	6,508	6,629	4,367	3,284
PR	H4007	031	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	**	**	**	**	**	**	**	**	**	**	**	2,337	3,941
PR	H5577	002	HIDE	MCS ADVANTAGE, INC.	31,988	31,972	32,025	32,058	32,337	32,415	32,409	32,328	32,363	32,076	32,056	31,522	31,340
PR	H5577	017	HIDE	MCS ADVANTAGE, INC.	26,439	26,304	26,267	26,171	26,073	25,962	25,707	25,346	25,192	24,879	24,783	24,723	24,602
PR	H5577	029	HIDE	MCS ADVANTAGE, INC.	33,216	34,386	35,230	35,949	36,861	37,523	38,001	38,425	38,893	39,072	39,419	37,384	37,140
PR	H5577	046	HIDE	MCS ADVANTAGE, INC..	22,794	23,367	24,003	24,474	25,033	25,368	25,682	25,934	26,139	26,307	26,613	27,268	27,433
PR	H5577	054	HIDE	MCS ADVANTAGE, INC.	5,475	6,221	6,751	7,022	7,205	7,309	7,442	7,624	7,697	7,890	8,739	11,797	13,056
PR	H5577	054	HIDE	MCS ADVANTAGE, INC.	3,256	3,706	4,006	4,098	4,143	4,182	4,206	4,271	4,299	4,352	4,806	6,283	6,944
PR	H5577	054	HIDE	MCS ADVANTAGE, INC.	5,430	6,262	6,853	6,876	6,914	6,932	6,955	6,925	6,884	6,869	7,196	9,288	9,532
PR	H5577	055	HIDE	MCS ADVANTAGE, INC.	1,610	1,763	1,901	1,958	1,989	2,011	2,043	2,089	2,105	2,125	2,156	**	**
PR	H5774	024	HIDE	TRIPLE S ADVANTAGE, INC.	16,399	16,554	16,532	16,315	16,411	16,460	16,378	16,247	16,262	16,286	16,078	**	**
PR	H5774	026	HIDE	TRIPLE S ADVANTAGE, INC.	2,547	2,371	2,273	2,235	2,197	2,231	2,209	2,159	2,167	2,179	2,082	**	**
PR	H5774	028	HIDE	TRIPLE S ADVANTAGE, INC.	8,095	8,620	8,764	8,753	8,724	8,770	8,788	8,611	8,668	8,621	8,224	3,862	2,950

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
PR	H5774	035	HIDE	TRIPLE S ADVANTAGE, INC.	1,428	1,496	1,517	1,538	1,584	1,597	1,560	1,544	1,588	1,591	1,515	1,152	1,025
PR	H5774	036	HIDE	TRIPLE S ADVANTAGE, INC.	8,333	7,037	6,517	6,313	6,060	5,915	5,735	5,535	5,454	5,416	5,256	**	**
PR	H5774	040	HIDE	TRIPLE S ADVANTAGE, INC.	2,962	3,441	3,705	3,859	4,034	4,146	4,254	4,393	4,418	4,527	4,493	**	**
PR	H5774	041	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	170	233
PR	H5774	041	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	16	33
PR	H5774	041	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	44	68
PR	H5774	041	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	*	22
PR	H5774	041	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	89	107
PR	H5774	042	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	150	174
PR	H5774	042	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	11	13
PR	H5774	042	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	21	33
PR	H5774	042	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	*	*
PR	H5774	042	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	16	29
PR	H5774	043	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	13,487	13,977

State	Contract Number	Plan ID	Integration Status	Contract Name	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025
PR	H5774	043	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	2,919	2,995
PR	H5774	043	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	2,581	2,519
PR	H5774	043	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	4,298	4,118
PR	H5774	043	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	**	**	**	**	5,511	5,389
PR TOTAL					302,031	303,346	304,333	305,003	305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804
PERCENT CHANGE FROM PREVIOUS MONTH					0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

¹² Totals reflect enrollment data from February 1, 2025. The payment reflects enrollments accepted through January 3, 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](#).

¹⁴ An asterisk (*) in the enrollment column indicates that the count is 10 or less. 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 (February 2024 – February 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 H5777-054 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>