

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	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
AL		X		167	172	172	172	170	175	170	168	169	168	161	160	163
AK				-	-	-	-	-	-	-	-	-	-	-	-	-
AR		X		528	534	537	543	548	547	554	553	563	557	564	566	568
AZ			X	-	-	-	-	-	-	-	12,286	12,362	12,338	12,414	12,395	12,389
CA		X	X	340,561	342,289	344,167	347,396	349,927	352,333	351,510	373,381	377,429	384,211	388,814	391,820	397,723
CO		X		4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577	4,603	4,620	4,631	4,667
CT				-	-	-	-	-	-	-	-	-	-	-	-	-
DC		X	X	9,446	9,425	9,383	9,093	9,075	9,178	9,232	9,580	9,595	9,654	9,605	9,276	9,509
DE		X		339	340	349	353	355	357	359	356	362	363	362	364	365
FL		X	X	19,949	19,798	19,725	19,743	20,330	20,842	20,249	72,376	80,650	87,551	92,311	95,828	99,559
GA				-	-	-	-	-	-	-	-	-	-	-	-	-
HI			X	6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735	25,358	25,541	25,783	25,780
IA		X		649	654	666	669	674	676	675	655	669	685	687	685	692
ID			X	13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815	13,625	13,485	13,470	9,744
IL	X	X		82,501	80,690	79,890	79,046	78,593	78,065	77,992	74,945	76,151	75,190	76,554	77,350	76,851
IN		X		568	568	607	630	663	698	723	729	754	762	774	790	801
KS		X		830	826	832	821	836	839	860	854	865	865	874	882	893
KY		X		143	159	182	224	261	270	284	299	331	382	416	458	521
LA		X		395	397	403	425	424	430	438	430	432	437	442	450	466
MA	X	X	X	119,867	119,807	119,670	119,770	119,974	120,094	119,908	119,950	120,023	119,897	119,772	119,701	120,044
MD		X		134	133	132	139	143	141	144	143	142	135	147	151	167
ME				-	-	-	-	-	-	-	-	-	-	-	-	-
MI	X	X		42,462	41,088	40,392	40,082	39,428	39,052	39,125	39,969	39,988	38,809	40,407	40,153	39,044
MN			X	58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804	58,653	59,089	59,595	60,070
MO		X		46	46	50	50	55	56	74	73	80	90	107	118	131
MS				-	-	-	-	-	-	-	-	-	-	-	-	-

State	MMP	PACE	AIP ¹	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
MT				-	-	-	-	-	-	-	-	-	-	-	-	-
NC		X		1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940	1,952	1,960	1,968	2,004
ND		X		175	177	177	173	169	173	172	178	180	183	183	186	190
NE		X		196	192	191	190	190	191	187	188	189	182	182	183	181
NH				-	-	-	-	-	-	-	-	-	-	-	-	-
NJ		X	X	97,537	97,031	96,849	95,440	95,527	95,921	95,370	96,721	96,655	96,458	96,632	96,355	96,743
NM		X	X	452	448	440	442	442	447	448	1,752	1,789	1,818	1,550	1,348	1,181
NV				-	-	-	-	-	-	-	-	-	-	-	-	-
NY	X	X	X	54,887	55,827	56,779	58,023	59,058	60,041	60,518	63,758	64,753	66,674	68,619	70,607	73,563
OH	X	X		60,763	60,593	60,138	59,537	59,292	59,022	57,405	41,797	56,775	57,313	56,263	55,964	55,568
OK		X		683	689	690	698	691	692	703	699	697	699	714	716	710
OR		X		1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860	1,863	1,862	1,863	1,865
PA		X		7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631	7,610	7,583	7,565	7,519
PR			X	305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804	303,551	303,527	303,860	304,298
RI	X	X		12,792	12,537	12,231	12,124	12,039	11,977	11,939	11,693	11,652	11,614	11,559	11,486	12,573
SC	X	X		10,165	10,008	9,963	9,771	9,661	9,567	9,532	9,094	9,266	9,011	8,861	8,790	8,669
SD				-	-	-	-	-	-	-	-	-	-	-	-	-
TN		X	X	2,511	2,443	2,452	2,458	2,450	2,457	2,423	2,532	2,522	2,534	2,560	2,572	2,583
TX	X	X		23,762	23,357	23,025	22,509	21,901	21,704	21,320	18,646	18,033	16,883	17,357	16,906	16,461
UT				-	-	-	-	-	-	-	-	-	-	-	-	-
VA		X	X	21,646	21,407	21,397	21,274	21,101	21,121	21,036	88,752	89,716	88,247	88,135	86,823	87,236
VT				-	-	-	-	-	-	-	-	-	-	-	-	-
WA		X		1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548	1,555	1,548	1,560	1,572
WI		X	X	2,938	2,942	2,932	2,895	2,902	2,884	2,891	2,824	2,833	2,784	2,771	2,756	2,776
WV				-	-	-	-	-	-	-	-	-	-	-	-	-
WY				-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	8	34	15	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	1,526,134	1,535,839
PERCENT CHANGE SINCE PREVIOUS MONTH				0%	0%	0%	0%	0%	0%	0%	12%	2%	1%	1%	0%	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, June 2024 to June 2025^{2,3,4}

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
IL	H0336	HUMANA HEALTH PLAN, INC.	15,148	14,735	14,713	14,621	14,586	14,336	14,327	13,451	13,751	13,473	13,834	14,101	14,142
IL	H0927	HEALTH CARE SERVICE CORPORATION	21,141	20,771	20,635	20,444	20,379	20,287	20,279	19,948	20,129	19,983	19,928	19,695	19,242
IL	H2506	AETNA BETTER HEALTH PREMIER PLAN MMAI INC.	15,200	14,885	14,763	14,649	14,631	14,442	14,417	13,685	13,947	13,727	14,150	14,358	14,315
IL	H6080	MERIDIAN HEALTH PLAN OF ILLINOIS, INC.	15,324	15,074	14,743	14,421	14,214	14,437	14,425	13,816	14,102	13,994	14,265	14,546	14,542
IL	H8046	MOLINA HEALTHCARE OF ILLINOIS, INC.	15,688	15,225	15,036	14,911	14,783	14,563	14,533	14,005	14,178	13,963	14,325	14,597	14,551
IL TOTAL			82,501	80,690	79,890	79,046	78,593	78,065	77,981	74,905	76,107	75,140	76,502	77,297	76,792
MA	H0137	COMMONWEALTH CARE ALLIANCE, INC.	30,468	30,360	30,197	30,077	29,954	29,771	29,736	29,367	29,227	28,939	28,733	28,512	28,358
MA	H7419	TUFTS HEALTH PUBLIC PLANS, INC.	7,750	7,644	7,567	7,469	7,381	7,328	7,286	7,234	7,189	7,124	7,114	7,084	7,037
MA	H9239	UNITEDHEALTHCARE INSURANCE COMPANY	5,093	5,034	4,968	4,919	4,854	4,729	4,685	4,634	4,650	4,607	4,577	4,535	4,524
MA TOTAL			43,311	43,038	42,732	42,465	42,189	41,828	41,707	41,235	41,066	40,670	40,424	40,131	39,919
MI	H0192	AMERIHEALTH MICHIGAN, INC.	2,957	2,811	2,782	2,767	2,695	2,654	2,687	3,120	3,133	2,957	3,063	3,000	2,905
MI	H0480	MERIDIAN HEALTH PLAN OF MICHIGAN, INC.	6,450	6,225	5,931	5,779	5,609	5,543	5,505	5,209	5,173	5,076	5,153	5,114	4,984
MI	H1977	UPPER PENINSULA HEALTH PLAN, LLC	4,428	4,315	4,235	4,237	4,153	4,117	4,084	4,286	4,274	4,176	4,294	4,288	4,202
MI	H7844	MOLINA HEALTHCARE OF MICHIGAN, INC.	10,445	10,073	9,926	9,848	9,683	9,582	9,572	9,630	9,609	9,313	9,553	9,477	9,223
MI	H8026	AETNA BETTER HEALTH OF MICHIGAN INC.	9,075	8,671	8,546	8,453	8,291	8,144	8,230	8,563	8,545	8,147	9,043	8,899	8,373
MI	H9712	HAP CareSource	4,218	4,029	3,952	3,918	3,850	3,820	3,790	3,875	3,915	3,795	3,891	3,896	3,803
MI TOTAL			37,573	36,124	35,372	35,002	34,281	33,860	33,868	34,683	34,649	33,464	34,997	34,674	33,490
NY	H9869	PARTNERS HEALTH PLAN, INC.	1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647	1,708	1,708	1,717	1,714
NY TOTAL⁴			1,625	1,627	1,630	1,631	1,633	1,667	1,668	1,643	1,647	1,708	1,708	1,717	1,714

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
OH	H0022	BUCKEYE COMMUNITY HEALTH PLAN, INC.	10,263	10,271	10,267	10,206	10,215	10,240	9,934	9,591	9,831	9,788	9,662	9,589	9,617
OH	H2531	UNITEDHEALTHCARE COMMUNITY PLAN OF OHIO, INC.	8,629	8,688	8,611	8,559	8,501	8,393	8,089	7,875	8,285	8,250	8,038	7,983	7,626
OH	H5280	MOLINA HEALTHCARE OF OHIO, INC.	12,478	12,357	12,249	12,154	12,077	12,083	11,748	11,482	11,912	11,913	11,739	11,625	11,818
OH	H7172	AETNA BETTER HEALTH INC. (OH)	13,352	13,359	13,257	13,057	13,027	12,974	12,712	12,282	12,605	12,568	12,423	12,363	11,949
OH	H8452	CARESOURCE OHIO, INC.	15,533	15,422	15,243	15,045	14,957	14,813	14,402	53	13,624	14,266	13,868	13,874	14,020
OH TOTAL			60,255	60,097	59,627	59,021	58,777	58,503	56,885	41,283	56,257	56,785	55,730	55,434	55,030
RI	H9576	NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND	12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260	11,210	11,148	11,076	12,158
RI TOTAL			12,414	12,155	11,849	11,739	11,647	11,578	11,537	11,300	11,260	11,210	11,148	11,076	12,158
SC	H1723	ABSOLUTE TOTAL CARE, INC.	2,618	2,571	2,572	2,546	2,519	2,503	2,511	2,386	2,447	2,376	2,325	2,303	2,269
SC	H2533	MOLINA HEALTHCARE OF SOUTH CAROLINA, INC.	3,140	3,092	3,074	3,021	2,984	2,961	2,953	2,846	2,917	2,825	2,779	2,763	2,725
SC	H8213	SELECT HEALTH OF SOUTH CAROLINA, INC.	3,912	3,845	3,815	3,695	3,647	3,595	3,560	3,369	3,409	3,326	3,259	3,214	3,162
SC TOTAL			9,670	9,508	9,461	9,262	9,150	9,059	9,024	8,601	8,773	8,527	8,363	8,280	8,156
TX	H6870	SUPERIOR HEALTHPLAN, INC.	5,476	5,361	5,252	5,093	4,941	4,905	4,746	3,682	3,536	3,322	3,371	3,279	3,183
TX	H7833	UNITEDHEALTHCARE COMMUNITY PLAN OF TEXAS, L.L.C.	2,753	2,716	2,717	2,666	2,631	2,590	2,560	3,236	3,175	2,860	3,003	2,868	2,758
TX	H8197	MOLINA HEALTHCARE OF TEXAS, INC.	8,870	8,764	8,725	8,619	8,582	8,573	8,563	10,644	10,241	9,616	9,909	9,686	9,445
TX	H8786	WELLPOINT TEXAS, INC.	5,578	5,426	5,244	5,053	4,664	4,545	4,362	**	**	**	**	**	**
TX TOTAL			22,677	22,267	21,938	21,431	20,818	20,613	20,231	17,562	16,952	15,798	16,283	15,833	15,386
TOTAL MMP ENROLLMENT			270,026	265,506	262,499	259,597	257,088	255,173	252,901	231,212	246,711	243,302	245,155	244,442	242,645
PERCENT CHANGE SINCE PREVIOUS MONTH			-3%	-2%	-1%	-1%	-1%	-1%	-1%	-9%	7%	-1%	1%	0%	-1%

² Totals reflect enrollment as of the June 1, 2025 payment. The payment reflects enrollments accepted through May 9, 2025.

³ Enrollment figures presented here are for the most recent 13 months (June 2024 – June 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, June 2024–June 2025^{5,6}

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
AL	H4074	MERCY LIFE OF ALABAMA	167	172	172	172	170	175	170	168	169	168	161	160	163
AL TOTAL			167	172	172	172	170	175	170	168	169	168	161	160	163
AR	H4305	TOTAL LIFE HEALTHCARE	333	338	348	345	340	340	344	335	340	338	342	341	339
AR	H6342	COMPLETE HEALTH WITH PACE	96	94	91	95	98	98	98	105	107	106	112	114	115
AR	H6425	WASHINGTON REGIONAL MEDICORP	99	102	98	103	110	109	112	113	116	113	110	111	114
AR TOTAL			528	534	537	543	548	547	554	553	563	557	564	566	568
CA	H0542	ALTAMED HEALTH SERVICES CORPORATION	3,003	3,033	3,053	3,072	3,131	3,167	3,205	3,193	3,203	3,219	3,248	3,284	3,287
CA	H0934	PACIFIC PACE, LLC	469	500	529	531	554	571	595	609	623	639	639	651	677
CA	H1228	GOLDEN VALLEY HEALTH CENTERS	178	188	198	205	203	220	243	249	252	255	270	288	310
CA	H1544	LA COAST PACE, LLC	354	353	360	362	381	391	396	412	426	437	450	472	491
CA	H1622	NORTH EAST MEDICAL SERVICES	110	114	120	125	131	132	137	135	139	141	142	143	151
CA	H1693	FAMILY HEALTH CENTERS OF SAN DIEGO, INC	223	219	228	229	227	237	246	240	253	263	269	277	282
CA	H1917	WELBEHEALTH INLAND EMPIRE PACE, LLC	*	*	*	35	57	80	112	134	169	199	234	265	303
CA	H2085	COLLABRIA CARE	36	37	41	45	52	55	58	56	55	54	57	58	58
CA	H2368	INNOVAGE CALIFORNIA PACE-SACRAMENTO, LLC	293	319	340	346	361	384	404	407	431	446	456	490	503
CA	H2384	SEQUOIA PACE, LLC	521	535	551	566	582	591	607	608	629	641	666	686	710
CA	H2541	AGEWELL PACE	54	61	67	74	78	82	89	98	98	113	118	123	120
CA	H3517	HUMBOLDT SENIOR RESOURCE CENTER, INC.	271	274	283	290	290	295	301	301	305	307	308	319	322

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
CA	H3563	GARY AND MARY WEST SENIOR SERVICES, INC.	337	334	337	329	338	346	362	352	352	364	363	354	366
CA	H4185	NEIGHBORHOOD HEALTHCARE	143	148	147	152	158	169	181	189	199	208	226	235	245
CA	H4538	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	*	*	*	18	22	34
CA	H4626	myPlace Greater LA PACE Inc.	11	16	20	22	24	23	26	27	34	38	42	43	61
CA	H5403	ON LOK SENIOR HEALTH SERVICES	1,597	1,596	1,607	1,610	1,630	1,641	1,646	1,647	1,650	1,661	1,663	1,667	1,678
CA	H5405	CENTER FOR ELDERS INDEPENDENCE	976	985	978	990	999	1,015	1,037	1,032	1,041	1,047	1,055	1,081	1,113
CA	H5406	SUTTER VALLEY HOSPITALS	406	401	406	410	415	427	437	437	433	444	441	455	455
CA	H5629	COMMUNITY ELDERCARE OF SAN DIEGO	1,125	1,131	1,137	1,136	1,141	1,148	1,135	1,116	1,126	1,112	1,116	1,109	1,121
CA	H6079	TOTAL LONGTERM CARE, INC.	1,167	1,173	1,181	1,173	1,180	1,192	1,176	1,177	1,189	1,194	1,177	1,189	1,224
CA	H6081	HIGH DESERT PACE, INC.	**	*	*	*	21	29	37	46	56	59	77	92	111
CA	H6147	LOMA LINDA UNIVERSITY MEDICAL CENTER	*	22	27	31	39	43	50	56	56	62	69	77	91
CA	H6317	WELBEHEALTH BAY AREA PACE, LLC	35	47	60	69	82	93	100	105	114	118	125	137	152
CA	H6517	Family HealthCare Network (FHCN) PACE	**	*	*	*	12	17	24	*	34	43	43	54	58
CA	H6537	SEEN HEALTH SAN GABRIEL VALLEY, LLC	**	**	**	**	**	**	**	*	*	*	17	30	52
CA	H7366	CONCERTOHEALTH PACE OF LOS ANGELES, LLC	25	29	31	39	45	50	56	62	70	73	72	78	77
CA	H7501	ORANGE COUNTY HEALTH AUTHORITY	233	233	234	236	231	228	230	231	231	228	229	229	234
CA	H7656	VALLEY PACE, LLC	**	*	*	*	15	24	26	32	33	33	36	35	44

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
CA	H7855	BRANDMAN CENTERS FOR SENIOR CARE, INC.	239	248	250	256	263	267	270	268	272	272	269	280	280
CA	H8082	STOCKTON PACE	728	746	758	771	772	775	790	811	836	854	871	892	915
CA	H9360	CHINATOWN SERVICE CENTER	**	**	**	**	**	**	**	*	*	*	11	17	23
CA	H9411	1818 WESTERN, LLC	**	**	**	**	**	**	**	*	*	*	*	11	15
CA	H9592	INNOVATIVE INTEGRATED HEALTH, INC.	1,194	1,204	1,228	1,263	1,290	1,307	1,305	1,323	1,341	1,354	1,366	1,394	1,401
CA	H9616	CENTRO DE SALUD DE LA COMUNIDAD DE SAN YSIDRO	1,992	1,989	2,010	2,025	2,075	2,086	2,116	2,119	2,152	2,174	2,194	2,216	2,267
CA TOTAL			15,720	15,935	16,181	16,392	16,777	17,085	17,397	17,472	17,802	18,052	18,337	18,753	19,231
CO	H0613	TOTAL LONGTERM CARE, INC.	2,679	2,706	2,717	2,727	2,769	2,802	2,810	2,799	2,823	2,833	2,835	2,856	2,870
CO	H2815	VOANS SENIOR COMMUNITY CARE OF COLORADO, INC	287	289	295	291	294	291	285	282	281	281	280	282	287
CO	H5167	ROCKY MOUNTAIN HEALTH CARE SERVICES	972	985	979	969	980	991	997	994	997	999	1,006	997	1,008
CO	H7262	TRU COMMUNITY CARE	296	299	301	305	309	312	308	301	297	310	315	317	321
CO	H7296	HOSPICE OF METRO DENVER, INC	**	**	**	**	**	**	**	**	**	*	*	*	*
CO	H9649	HOPEWEST	151	161	165	170	170	171	177	175	179	180	184	179	181
CO TOTAL			4,385	4,440	4,457	4,462	4,522	4,567	4,577	4,551	4,577	4,603	4,620	4,631	4,667
DC	H9564	PACE4DC LLC	48	48	55	54	53	52	51	49	50	50	49	47	48
DC TOTAL			48	48	55	54	53	52	51	49	50	50	49	47	48
DE	H5493	LIFE AT ST. FRANCIS HEALTHCARE, INC.	295	296	301	305	308	311	313	308	311	308	308	308	308
DE	H8614	MILFORD WELLNESS VILLAGE PACE	44	44	48	48	47	46	46	48	51	55	54	56	57
DE TOTAL			339	340	349	353	355	357	359	356	362	363	362	364	365

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
FL	H0112	MORSE LIFE HOME CARE, INC.	845	844	849	852	852	854	851	841	850	858	867	897	910
FL	H0424	INNOVAGE FLORIDA PACE II, LLC	*	*	*	13	19	30	44	52	55	61	60	68	72
FL	H0440	EMPATH LIFE, LLC	*	*	11	13	14	18	17	18	18	18	20	21	24
FL	H1043	FLORIDA PACE CENTERS, INC.	961	975	982	973	980	983	1,007	1,002	997	1,002	1,041	1,065	1,080
FL	H3430	SUNCOAST PACE, INC.	320	317	320	315	317	318	310	301	297	287	286	285	294
FL	H4919	INNOVAGE FLORIDA PACE, LLC	*	*	14	19	29	32	39	43	51	52	54	59	68
FL	H5538	TRINITY HEALTH PACE OF PENSACOLA	*	*	*	*	*	14	17	21	21	23	23	22	26
FL	H5934	HOPE HOSPICE AND COMMUNITY SERVICES, INC.	488	492	490	486	477	488	491	484	519	531	524	533	541
FL	H7059	STRATUM LIFE, LLC	**	**	**	**	**	**	**	*	*	*	*	*	*
FL	H7469	PACE PARTNERS OF NORTHEAST FLORIDA	115	111	112	111	108	105	104	99	97	96	92	92	92
FL	H8982	BROWARD PACE PROGRAM LLC	**	**	**	**	**	**	**	**	**	**	**	*	*
FL	H9252	MOUNT SINAI ELDERCARE, INC	36	35	40	47	51	58	62	67	69	71	83	88	87
FL TOTAL			2,765	2,774	2,818	2,829	2,847	2,900	2,942	2,928	2,974	2,999	3,050	3,130	3,194
IA	H0216	PACE IOWA	426	428	434	436	439	443	442	427	435	441	443	437	442
IA	H8424	SIOUXLAND PACE, INC.	223	226	232	233	235	233	233	228	234	244	244	248	250
IA TOTAL			649	654	666	669	674	676	675	655	669	685	687	685	692
IL	H3933	OSF HEALTHCARE SYSTEM	*	*	*	*	*	*	*	12	12	14	16	16	19
IL	H5993	LAWNDALE CHRISTIAN HEALTH CENTER	*	*	*	*	*	*	11	14	16	17	18	18	19
IL	H7027	ESPERANZA HEALTH CENTERS	*	*	*	*	*	*	*	14	16	19	18	19	21
IL TOTAL			*	*	*	*	*	*	11	40	44	50	52	53	59

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
IN	H0235	PACE OF NORTHEAST INDIANA, LLC	74	73	86	92	96	103	110	109	113	113	107	103	109
IN	H1742	ASCENSION LIVING ST. VINCENT PACE, INC.	25	31	29	37	44	48	52	55	57	60	66	68	71
IN	H3522	REID HOSPITAL & HEALTH CARE SERVICES, INC.	65	64	72	74	85	90	92	92	96	96	97	98	99
IN	H5080	BOLDAGE PACE INDIANA, LLC	*	*	11	13	15	17	23	27	29	26	29	32	37
IN	H5124	FRANCISCAN ACO, INC.	254	255	262	268	275	289	294	296	305	309	312	320	317
IN	H9842	SAINT JOSEPH PACE	150	145	147	146	148	151	152	150	154	158	163	169	168
IN TOTAL			568	568	607	630	663	698	723	729	754	762	774	790	801
KS	H1714	VIA CHRISTI HEALTHCARE OUTREACH FOR ELDER, INC.	240	242	240	238	244	244	240	233	239	244	244	245	248
KS	H5822	MIDLAND CARE CONNECTION	498	494	499	490	497	500	522	521	527	523	530	536	544
KS	H9438	BLUESTEM PACE, INC.	92	90	93	93	95	95	98	100	99	98	100	101	101
KS TOTAL			830	826	832	821	836	839	860	854	865	865	874	882	893
KY	H0016	LIFE COORDINATED COMMONWEALTH PACE INC	*	*	*	*	*	*	*	*	*	*	*	*	*
KY	H1980	HOSPICE OF THE BLUEGRASS, INC	23	25	29	31	32	36	36	36	36	43	47	49	53
KY	H5622	CARE GUIDE PARTNERS, INC.	*	*	*	*	*	*	*	12	14	14	17	22	25
KY	H6541	HORIZON-PACE, LLC	85	87	92	98	105	111	118	119	125	132	136	142	148
KY	H6759	SENIOR COMMUNITY CARE OF KENTUCKY	35	35	43	45	54	55	60	58	61	58	66	64	69
KY	H6868	BOLDAGE PACE KENTUCKY, LLC	*	12	18	19	23	24	27	33	36	38	39	43	53
KY	H7725	VOANS SENIOR COMMUNITY CARE OF JEFFERSON COUNTY	**	**	**	**	**	*	*	*	*	*	*	*	13

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
KY	H8099	VOANS SENIOR COMMUNITY CARE OF NORTHERN KENTUCKY	*	*	*	*	*	*	*	*	*	15	21	23	27
KY	H9468	ONE SENIOR CARE KENTUCKY, LLC	*	*	*	31	47	44	43	41	59	82	90	115	133
KY TOTAL			143	159	182	224	261	270	284	299	331	382	416	458	521
LA	H1904	PACE GREATER NEW ORLEANS	144	144	149	151	156	155	157	149	143	148	146	153	157
LA	H1312	TRINITY HEALTH PACE OF ALEXANDRIA	*	*	*	20	23	27	39	39	47	50	59	58	67
LA	H6231	FRANCISCAN PACE, INC.	251	253	254	254	245	248	242	242	242	239	237	239	242
LA TOTAL			395	397	403	425	424	430	438	430	432	437	442	450	466
MA	H0477	SERENITY CARE, INC.	483	481	488	492	503	513	522	530	529	532	539	555	560
MA	H0809	MERCY LIFE, INC.	207	203	208	210	202	202	206	207	204	204	213	211	214
MA	H2218	HARBOR HEALTH SERVICES, INC.	552	546	541	537	538	539	542	536	535	539	534	544	539
MA	H2219	FALLON COMMUNITY HEALTH PLAN	1,329	1,338	1,337	1,339	1,346	1,347	1,357	1,359	1,365	1,366	1,377	1,377	1,381
MA	H2220	UPHAMS CORNER HEALTH COMMITTEE, INC.	261	267	274	278	281	285	283	288	291	280	279	280	283
MA	H2221	CAMBRIDGE PUBLIC HEALTH COMMISSION	612	611	617	631	639	646	650	658	661	661	656	661	664
MA	H2222	ELEMENT CARE, INC.	969	980	982	977	988	995	995	993	997	1,004	1,005	1,007	1,037
MA	H2223	EAST BOSTON NEIGHBORHOOD CENTER CORP.	739	745	747	754	765	777	790	798	802	817	818	825	824
MA TOTAL			5,152	5,171	5,194	5,218	5,262	5,304	5,345	5,369	5,384	5,403	5,421	5,460	5,502
MD	H2109	THE JOHNS HOPKINS HEALTH SYSTEM CORPORATION	134	133	132	139	143	141	144	143	142	135	136	137	135
MD	H3740	EDENBRIDGE HEALTH, LLC	**	**	**	**	*	*	*	*	*	*	*	*	13

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
MD	H6251	TRINITY HEALTH PACE OF MONTGOMERY COUNTY	**	**	**	**	**	*	*	*	*	*	11	14	19
MD	H7233	VOANS SENIOR COMMUNITY CARE OF MARYLAND	**	**	**	**	**	**	**	**	**	*	*	*	*
MD TOTAL			134	133	132	139	143	141	144	143	142	135	147	151	167
MI	H0390	PACE OF SOUTHWEST MICHIGAN, INC.	232	229	234	235	235	238	238	239	237	234	233	238	238
MI	H1310	COMPREHENSIVE SENIOR CARE CORPORATION	601	611	610	621	611	622	620	612	610	611	617	623	632
MI	H2318	PACE SOUTHEAST MICHIGAN	1,676	1,714	1,742	1,770	1,810	1,820	1,857	1,886	1,913	1,931	1,974	2,007	2,044
MI	H2835	THE CASCADE PACE, INC.	215	218	222	224	230	230	230	234	235	231	236	236	234
MI	H2882	PACE CENTRAL MICHIGAN, INC.	195	194	194	201	206	204	210	214	219	226	228	234	240
MI	H2936	LIFECIRCLES	393	401	408	407	412	416	420	418	425	422	424	436	443
MI	H4118	THE WASHTENAW PACE	272	274	276	277	275	270	274	280	285	281	281	279	281
MI	H4256	PACE NORTH, INC.	192	198	197	202	205	214	217	215	217	222	223	223	226
MI	H5085	COMMUNITY PACE AT HOME, INC.	95	92	92	89	98	100	99	100	103	104	108	112	108
MI	H5610	CARE RESOURCES	341	343	347	348	351	358	359	359	365	358	367	364	375
MI	H6787	VOANS SENIOR COMMUNITY CARE OF MICHIGAN, INC.	206	202	209	211	211	215	219	218	221	213	203	207	209
MI	H8769	CENTER FOR GERONTOLOGY	233	241	239	242	243	242	243	240	237	236	242	239	241
MI	H9052	REGION VII AREA AGENCY ON AGING	49	54	57	61	68	72	78	79	83	85	85	91	92
MI	H9185	A&D CHARITABLE FOUNDATION, INC.	189	193	193	192	192	191	193	192	189	191	189	190	191
MI TOTAL			4,889	4,964	5,020	5,080	5,147	5,192	5,257	5,286	5,339	5,345	5,410	5,479	5,554

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
MO	H2918	ADVOCATES FOR A HEALTHY COMMUNITY, INC. DBA JORDAN	**	*	*	*	*	*	13	12	14	22	26	33	40
MO	H7831	PRIME ACQUISITIONS, LLC	46	46	50	50	55	56	61	61	66	68	68	72	75
MO	H8992	PACE KC, LLC	*	*	*	*	*	*	*	*	*	*	13	13	16
MO TOTAL			46	46	50	50	55	56	74	73	80	90	107	118	131
NC	H0839	VOANS SENIOR COMMUNITY CARE OF NORTH CAROLINA, INC	146	149	153	156	157	155	157	147	143	153	147	146	153
NC	H1357	CAROLINA SENIORCARE	114	114	110	109	110	110	112	110	111	112	113	111	114
NC	H1500	LIFE ST. JOSEPH OF THE PINES, INC.	177	172	164	162	164	162	169	158	159	163	161	158	157
NC	H1533	STAYWELL SENIOR CARE, INC.	78	78	76	76	78	78	78	74	77	74	72	75	77
NC	H3942	ELDERHAUS INC.	112	110	111	109	114	113	115	110	111	110	109	110	114
NC	H4235	SENIOR TOTAL LIFE CARE, INC.	252	262	264	262	270	271	282	283	294	293	301	309	315
NC	H4326	PACE @ HOME, INC.	148	146	145	147	149	150	150	149	155	157	161	168	169
NC	H4714	PACE OF THE SOUTHERN PIEDMONT, INC.	194	215	219	212	214	221	221	224	228	228	236	235	240
NC	H6059	PACE OF GUILFORD AND ROCKINGHAM COUNTIES, INC.	215	210	218	218	211	211	209	202	206	205	204	198	202
NC	H6846	CAREPARTNERS REHABILITATION HOSPITAL, LLLP	183	186	191	188	187	187	185	194	193	196	197	198	199
NC	H9266	PIEDMONT HEALTH SERVICES, INC.	265	265	268	270	269	269	266	269	263	261	259	260	264
NC TOTAL			1,884	1,907	1,919	1,909	1,923	1,927	1,944	1,920	1,940	1,952	1,960	1,968	2,004
ND	H7195	NORTHLAND PACE PROGRAM	175	177	177	173	169	173	172	178	180	183	183	186	190
ND TOTAL			175	177	177	173	169	173	172	178	180	183	183	186	190

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
NE	H7003	PACE NEBRASKA	196	192	191	190	190	191	187	188	189	182	182	183	181
NE TOTAL			196	192	191	190	190	191	187	188	189	182	182	183	181
NJ	H1234	CAPITAL HEALTH LIFE	205	202	201	198	195	192	196	198	196	196	194	194	196
NJ	H3493	LIFE AT LOURDES, INC.	162	162	162	158	158	157	158	159	159	161	160	160	164
NJ	H6371	LUTHERAN SENIOR HEALTHCARE, INC.	88	86	83	84	84	85	84	82	84	85	92	88	89
NJ	H6887	INSPIRA HEALTH NETWORK LIFE, INC.	238	240	242	241	237	238	236	243	243	246	252	263	260
NJ	H7619	ATLANTICARE HEALTH SERVICES, INC.	137	139	138	142	143	144	148	145	147	141	142	146	148
NJ	H9323	ACUTE CARE HEALTH SYSTEM, LLC	345	346	367	366	370	372	372	376	376	372	372	377	381
NJ TOTAL			1,175	1,175	1,193	1,189	1,187	1,188	1,194	1,203	1,205	1,201	1,212	1,228	1,238
NM	H5213	TOTAL COMMUNITY CARE, L.L.C.	452	448	440	442	442	447	448	439	443	434	418	411	415
NM TOTAL			452	448	440	442	442	447	448	439	443	434	418	411	415
NY	H1518	CATHOLIC HEALTH SYSTEM BUFFALO PACE	229	234	236	236	240	240	237	240	246	244	243	245	246
NY	H2397	PACE AT HUDSON HEADWATERS, INC.	**	**	**	**	**	*	*	*	*	*	*	*	12
NY	H3321	LORETTO INDEPENDENT LIVING SERVICES, INC.	551	551	567	569	576	580	582	585	598	596	595	600	606
NY	H3322	SENIOR CARE CONNECTION, INC.	399	401	407	403	408	415	411	410	422	429	419	420	418
NY	H3329	CENTERLIGHT HEALTHCARE, INC.	2,174	2,179	2,230	2,318	2,325	2,336	2,384	2,378	2,404	2,426	2,411	2,396	2,427
NY	H3331	INDEPENDENT LIVING FOR SENIORS, INC.	707	719	719	724	719	732	731	723	735	728	729	728	735
NY	H4393	CATHOLIC MANAGED LONG TERM CARE, INC.	729	735	737	728	738	747	754	747	725	732	732	741	735
NY	H6596	FALLON HEALTH WEINBERG, INC.	135	138	142	145	150	158	162	169	182	187	191	190	196

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
NY	H8777	COMPLETE SENIOR CARE, INC.	132	132	134	135	135	133	133	136	137	133	136	139	139
NY	H8800	TOTAL SENIOR CARE, INC.	124	121	123	123	126	125	122	115	116	113	110	111	111
NY TOTAL			5,180	5,210	5,295	5,381	5,417	5,466	5,516	5,503	5,565	5,588	5,566	5,570	5,625
OH	H3613	MCGREGOR PACE	508	496	511	516	515	519	520	514	518	528	533	530	538
OH TOTAL			508	496	511	516	515	519	520	514	518	528	533	530	538
OK	H4142	CHEROKEE NATION COMPREHENSIVE CARE AGENCY	185	186	187	185	184	182	185	184	182	182	181	184	184
OK	H6941	LIFE PACE	230	237	238	241	241	247	249	253	249	256	265	264	259
OK	H7114	VALIR PACE	268	266	265	272	266	263	269	262	266	261	268	268	267
OK TOTAL			683	689	690	698	691	692	703	699	697	699	714	716	710
OR	H0247	ALLCARE PACE, LLC	73	71	71	71	69	66	56	**	**	**	**	**	**
OR	H3809	PROVIDENCE HEALTH & SERVICES - OREGON	1,783	1,793	1,799	1,818	1,852	1,847	1,848	1,851	1,860	1,863	1,862	1,863	1,865
OR TOTAL			1,856	1,864	1,870	1,889	1,921	1,913	1,904	1,851	1,860	1,863	1,862	1,863	1,865
PA	H0819	SENIOR LIFE YORK, INC.	395	392	391	393	398	397	392	378	384	388	384	383	371
PA	H2064	GEISINGER COMMUNITY HEALTH SERVICES	406	399	392	394	389	388	380	385	380	380	379	375	378
PA	H2537	ALBRIGHT CARE SERVICES	73	74	76	74	75	73	73	**	**	**	**	**	**
PA	H2937	SENIOR LIFE GREENSBURG, INC.	201	200	202	200	193	187	189	185	185	186	182	173	172
PA	H2992	SENIORLIFE WASHINGTON, INC.	514	522	517	511	520	521	521	528	537	527	527	535	525
PA	H3060	VIECARE BUTLER, LLC	157	160	159	163	163	162	162	157	158	158	158	159	157
PA	H3908	TRINITY HEALTH LIFE PENNSYLVANIA, INC.	305	300	301	299	295	290	288	286	282	280	275	265	263
PA	H3917	PITTSBURGH CARE PARTNERSHIP, INC.	774	784	799	806	795	810	821	822	805	810	808	809	809
PA	H3918	LIVING INDEPENDENCE FOR THE ELDERLY	501	505	512	514	521	518	523	524	532	526	518	518	513

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
PA	H3919	MERCY LIFE	793	798	797	794	794	788	777	765	769	771	769	774	779
PA	H3925	PENNSYLVANIA PACE, INC.	222	227	232	232	230	233	227	224	225	220	220	224	222
PA	H4999	LIFE NORTHWESTERN PENNSYLVANIA, LLC	669	680	690	693	686	711	712	691	694	696	698	702	692
PA	H5902	SENIOR LIFE ALTOONA, INC.	545	552	551	542	538	529	531	516	524	520	526	532	523
PA	H5978	SENIOR LIFE LEHIGH VALLEY, INC.	558	552	562	573	581	594	604	593	605	603	606	608	618
PA	H6188	VIECARE ARMSTRONG, LLC	82	84	85	86	88	86	85	88	89	92	91	90	89
PA	H6551	LIFE ST. MARY	246	244	247	245	247	250	251	257	258	256	256	254	256
PA	H7660	VIECARE BEAVER, LLC	392	390	390	391	395	397	401	401	405	404	399	401	394
PA	H9068	ALBRIGHT CARE SERVICES	153	152	153	145	143	141	142	208	210	206	201	206	210
PA	H9830	INNOVAGE PENNSYLVANIA LIFE, LLC	602	603	599	588	587	588	591	583	589	587	586	557	548
PA TOTAL			7,588	7,618	7,655	7,643	7,638	7,663	7,670	7,591	7,631	7,610	7,583	7,565	7,519
RI	H4105	PACE ORGANIZATION OF RHODE ISLAND	378	382	382	385	392	399	402	393	392	404	411	410	415
RI TOTAL			378	382	382	385	392	399	402	393	392	404	411	410	415
SC	H0105	ORANGEBURG SENIOR HELPING CENTER, LLC	88	85	86	86	89	92	92	90	92	90	90	95	96
SC	H4053	PRISMA HEALTH-UPSTATE	124	130	133	143	145	147	153	148	149	144	146	150	148
SC	H4203	PRISMA HEALTH-MIDLANDS	283	285	283	280	277	269	263	255	252	250	250	249	251
SC	H8421	ACUTECARE PACE FRANKLIN, LLC	**	**	**	**	**	**	**	**	**	**	**	**	*
SC	H9317	BEACON OF LIFE SC, LLC	**	**	**	*	*	*	*	*	*	*	12	16	18
SC TOTAL			495	500	502	509	511	508	508	493	493	484	498	510	513
TN	H4402	ALEXIAN BROTHERS COMMUNITY SERVICES	251	249	260	264	266	267	260	259	261	257	256	254	255
TN TOTAL			251	249	260	264	266	267	260	259	261	257	256	254	255

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
TX	H4517	AMARILLO MULTISVC CTR FR THE AGING INC	128	127	125	121	121	124	123	124	126	127	123	122	124
TX	H4518	BIENVIVIR SENIOR HEALTH SERVICES	812	813	814	811	816	819	817	813	808	811	806	804	802
TX	H9998	LUBBOCK REGIONAL MENTAL HEALTH RETARDATION	145	150	148	146	146	148	149	147	147	147	145	147	149
TX TOTAL			1,085	1,090	1,087	1,078	1,083	1,091	1,089	1,084	1,081	1,085	1,074	1,073	1,075
VA	H0870	BLUE RIDGE INDEPENDENCE AT HOME, INC.	**	**	*	*	*	*	*	*	18	26	30	32	39
VA	H1239	INNOVAGE VIRGINIA PACE - ROANOKE VALLEY, LLC	233	234	238	240	241	241	247	247	253	245	247	253	261
VA	H2386	APPALACHIAN AGENCY FOR SENIOR CITIZENS, INC.	135	135	136	133	134	135	138	138	146	151	148	147	157
VA	H2941	SENTARA LIFE CARE CORPORATION, INC.	222	227	227	226	227	225	226	231	233	228	228	230	232
VA	H3473	INNOVAGE VIRGINIA PACE – CHARLOTTESVILLE, LLC	227	230	234	232	236	242	243	245	252	253	256	258	264
VA	H3991	CONCERTOHEALTH OF NORTHERN VIRGINIA, LLC	35	33	35	35	36	36	38	38	35	33	34	34	34
VA	H5037	MOUNTAIN EMPIRE OLDER CITIZENS, INC.	84	87	92	92	91	92	93	90	90	93	92	89	91
VA	H8096	CENTRA HEALTH, INC.	295	297	303	314	315	325	328	329	329	335	344	346	355
VA	H8655	INNOVAGE VIRGINIA PACE II, LLC	543	545	549	542	550	559	559	550	551	544	544	548	545
VA TOTAL			1,774	1,788	1,814	1,814	1,830	1,855	1,872	1,868	1,907	1,908	1,923	1,937	1,978

State	Contract Number	Plan Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
WA	H3084	INTERNATIONAL COMMUNITY HEALTH SERVICES	93	93	97	95	98	99	98	98	97	98	97	95	97
WA	H3284	PNW PACE PARTNERS, LLC	137	141	147	153	157	159	167	171	177	186	191	195	194
WA	H5007	PROVIDENCE HEALTH SYSTEM	1,164	1,182	1,193	1,203	1,229	1,235	1,246	1,254	1,274	1,271	1,260	1,270	1,281
WA TOTAL			1,394	1,416	1,437	1,451	1,484	1,493	1,511	1,523	1,548	1,555	1,548	1,560	1,572
WI	H5212	COMMUNITY CARE, INC.	472	477	481	474	481	475	478	467	465	450	455	452	460
WI TOTAL			472	477	481	474	481	475	478	467	465	450	455	452	460
TOTAL PACE ENROLLMENT			62,304	62,839	63,559	64,066	64,877	65,556	66,239	66,128	66,912	67,329	67,851	68,593	69,575
PERCENT CHANGE FROM PREVIOUS MONTH			1%	1%	1%	1%	1%	1%	1%	0%	1%	1%	1%	1%	1%

⁵ Totals reflect enrollment as of the June 1, 2025 payment. The payment reflects enrollments accepted through May 9, 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 (June 2024 – June 2025). Previous months of enrollment are not displayed.

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

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
AZ	H0321	4	FIDE	ARIZONA PHYSICIANS IPA, INC.	**	**	**	**	**	**	**	5,810	5,861	5,865	5,958	5,979	5,976
AZ	H4931	15	FIDE	BANNER - UNIVERSITY CARE ADVANTAGE	**	**	**	**	**	**	**	3,087	3,084	3,109	3,120	3,120	3,150
AZ	H5580	4	FIDE	MERCY CARE	**	**	**	**	**	**	**	3,389	3,417	3,364	3,336	3,296	3,263
AZ	H5590	10	FIDE	BRIDGEWAY HEALTH SOLUTIONS OF ARIZONA, INC.	**	**	**	**	**	**	**	*	*	*	*	*	*
AZ TOTAL					**	**	**	**	**	**	**	12,286	12,362	12,338	12,414	12,395	12,389
CA	H0976	1	FIDE	SCAN HEALTH PLAN	17,906	17,708	17,512	17,391	17,268	17,206	17,162	17,894	18,129	18,340	18,377	18,400	18,493
CA	H0976	2	FIDE	SCAN HEALTH PLAN	2,204	2,280	2,325	2,320	2,307	2,329	2,405	2,386	2,390	2,355	2,365	2,372	2,409
CA	H1224	1	CO	LOCAL INITIATIVE HEALTH AUTHORITY FOR LA COUNTY	19,647	19,731	19,795	20,035	20,235	20,341	20,369	22,780	24,015	25,144	25,771	26,343	27,282
CA	H2819	1	CO	CALIFORNIA PHYSICIANS' SERVICE	15,738	15,587	15,465	15,226	15,092	15,032	14,846	14,940	14,902	15,149	15,181	15,290	15,369
CA	H3038	3	CO	MOLINA HEALTHCARE OF CALIFORNIA	17,504	17,695	17,967	18,432	18,707	18,914	18,900	19,444	19,713	19,992	20,468	20,646	21,422
CA	H3561	7	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	5,363	5,413	5,419	5,476	5,473	5,481	5,431	5,246	5,154	5,068	4,972	4,804	4,793
CA	H3561	8	CO	HEALTH NET COMMUNITY SOLUTIONS, INC.	32,848	32,628	32,629	32,522	32,351	32,228	32,078	31,337	30,960	30,460	30,488	29,460	29,421
CA	H4045	1	CO	SANTA CLARA COUNTY HEALTH AUTHORITY	10,756	10,719	10,675	10,742	10,729	10,721	10,691	10,863	10,909	11,119	11,181	11,160	11,293
CA	H4471	1	CO	BLUE CROSS OF CALIFORNIA PARTNERSHIP PLAN LLC	65,016	65,916	66,789	68,202	69,359	70,373	69,648	75,645	77,044	80,230	82,062	83,890	85,692
CA	H4733	1	CO	COMMUNITY HEALTH GROUP	7,016	7,064	7,243	7,360	7,425	7,551	7,589	7,816	7,855	8,053	8,189	8,332	8,500
CA	H5433	1	CO	ORANGE COUNTY HEALTH AUTHORITY	17,327	17,327	17,363	17,337	17,289	17,281	17,190	17,164	17,112	17,123	17,097	17,150	17,292
CA	H5433	3	CO	ORANGE COUNTY HEALTH AUTHORITY	**	**	**	**	**	**	**	103	189	253	277	332	380

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
CA	H5649	2	CO	CENTRAL HEALTH PLAN OF CALIFORNIA, INC.	**	**	**	**	**	**	**	10,236	10,251	10,043	9,974	9,867	9,734
CA	H6019	1	CO	SAN MATEO HEALTH COMMISSION	8,440	8,428	8,394	8,361	8,339	8,296	8,229	8,279	8,241	8,315	8,334	8,372	8,389
CA	H8794	1	CO	KAISER FOUNDATION HP, INC.	47,373	47,820	48,266	49,102	49,832	50,422	50,479	52,077	52,820	53,768	54,566	55,227	56,079
CA	H8794	2	CO	KAISER FOUNDATION HP, INC.	22,340	22,506	22,566	22,762	22,926	23,058	23,050	23,473	23,747	24,035	24,306	24,479	24,691
CA	H8894	1	CO	INLAND EMPIRE HEALTH PLAN	35,363	35,532	35,578	35,736	35,818	36,015	36,046	36,226	36,196	36,712	36,869	36,943	37,253
CA TOTAL					324,841	326,354	327,986	331,004	333,150	335,248	334,113	355,909	359,627	366,159	370,477	373,067	378,492
DC	H2406	53	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	8,790	8,757	8,698	8,395	8,365	8,444	8,495	8,714	8,720	8,743	8,644	8,273	8,448
DC	H7464	10	HIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	608	620	630	644	657	682	686	817	825	861	912	956	1,013
DC TOTAL					9,398	9,377	9,328	9,039	9,022	9,126	9,181	9,531	9,545	9,604	9,556	9,229	9,461
FL	H1032	175	HIDE	SUNSHINE STATE HEALTH PLAN, INC.	13,274	13,076	12,905	12,735	12,496	12,319	11,222	10,869	10,736	10,166	10,299	10,249	10,226
FL	H1032	176	FIDE	SUNSHINE STATE HEALTH PLAN, INC.	476	469	486	529	550	585	455	**	**	**	**	**	**
FL	H1036	280	FIDE	HUMANA MEDICAL PLAN, INC.	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	21,525	22,527
FL	H1045	65	HIDE	PREFERRED CARE PARTNERS, INC.	**	**	**	**	**	**	**	1,095	1,238	1,368	1,479	1,570	1,671
FL	H1889	26	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	13,489	15,752	17,881	19,220	20,162	21,327
FL	H2509	1	FIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	1,373	1,396	1,390	1,363	1,359	1,356	1,360	1,360	1,361	1,346	1,301	1,211	1,198
FL	H2509	3	HIDE	UNITEDHEALTHCARE OF FLORIDA, INC.	**	**	**	**	**	**	**	20,638	23,359	26,368	28,472	30,425	32,512
FL	H2962	35	HIDE	ULTIMATE HEALTH PLANS, INC.	218	215	207	201	192	180	180	159	152	147	143	152	156

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
FL	H5410	25	HIDE	HEALTHSPRING OF FLORIDA, INC.	220	210	198	188	182	182	175	166	156	145	142	143	137
FL	H5410	31	HIDE	HEALTHSPRING OF FLORIDA, INC.	104	100	94	92	90	83	80	77	79	74	73	73	68
FL	H5410	32	HIDE	HEALTHSPRING OF FLORIDA, INC.	139	131	129	174	171	167	198	193	205	142	152	152	139
FL	H5410	42	HIDE	HEALTHSPRING OF FLORIDA, INC.	356	346	342	340	330	320	311	280	276	248	235	235	234
FL	H5410	47	HIDE	HEALTHSPRING OF FLORIDA, INC.	36	37	36	33	34	32	30	26	26	26	28	26	29
FL	H5410	49	HIDE	HEALTHSPRING OF FLORIDA, INC.	414	501	589	789	1,631	2,288	2,876	3,330	3,674	3,711	3,231	2,294	1,470
FL	H5420	16	HIDE	PREFERRED CARE NETWORK, INC.	**	**	**	**	**	**	**	2,872	3,328	3,767	4,008	4,219	4,418
FL	H7284	3	HIDE	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	536	510	500	444	415	401	394	282	265	131	113	103	95
FL	H9986	3	FIDE	HPMP OF FLORIDA, INC.	20	15	14	12	19	16	14	**	**	**	**	**	**
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	122	124	117	105	126	123
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	51	43	37	33	33	35
FL	H9986	4	HIDE	HPMP OF FLORIDA, INC.	**	**	**	**	**	**	**	*	*	*	*	*	*
FL TOTAL					17,184	17,024	16,907	16,914	17,483	17,942	17,307	69,448	77,676	84,552	89,261	92,698	96,365
HI	H1230	8	FIDE	KAISER FOUNDATION HP, INC.	1,586	1,585	1,600	1,613	1,601	1,607	1,594	1,594	1,607	1,612	1,595	1,548	1,561
HI	H2406	132	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	14,575	15,702	16,385	16,641	17,003	17,242
HI	H2491	4	FIDE	WELLCARE HEALTH INSURANCE OF ARIZONA, INC.	2,446	2,449	2,422	2,422	2,418	2,407	2,404	2,386	2,383	2,342	2,289	2,203	2,172
HI	H3832	11	FIDE	HAWAII MEDICAL SERVICE ASSOCIATION	**	**	**	**	**	**	**	2,864	3,019	3,006	3,033	3,041	2,772
HI	H5969	2	FIDE	ALOHACARE	2,156	2,186	2,193	2,198	2,192	2,088	2,047	2,045	2,024	2,013	1,983	1,988	2,033
HI TOTAL					6,188	6,220	6,215	6,233	6,211	6,102	6,045	23,464	24,735	25,358	25,541	25,783	25,780

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
ID	H5628	8	FIDE	MOLINA HEALTHCARE OF UTAH, INC.	5,539	5,587	5,470	5,543	5,520	5,571	5,487	5,537	5,569	5,724	6,148	7,320	9,744
ID	H9656	1	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	6,375	6,362	6,316	6,410	6,449	6,473	6,430	6,693	6,722	6,453	6,015	5,034	*
ID	H9656	2	FIDE	BLUE CROSS OF IDAHO CARE PLUS, INC.	1,473	1,471	1,458	1,459	1,462	1,471	1,467	1,521	1,524	1,448	1,322	1,116	*
ID TOTAL					13,387	13,420	13,244	13,412	13,431	13,515	13,384	13,751	13,815	13,625	13,485	13,470	9,744
MA	H2224	1	FIDE	SENIOR WHOLE HEALTH, LLC	6,536	6,507	6,370	6,329	6,322	6,307	6,265	5,301	5,199	4,939	4,885	4,841	4,829
MA	H2224	3	FIDE	SENIOR WHOLE HEALTH, LLC	5,424	5,468	5,390	5,397	5,477	5,520	5,497	5,275	5,291	5,186	5,175	5,164	5,195
MA	H2225	1	FIDE	COMMONWEALTH CARE ALLIANCE, INC.	15,645	15,873	16,067	16,418	16,612	16,879	16,907	16,651	16,510	16,318	16,094	15,941	16,098
MA	H2226	1	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	14,913	14,763	14,807	14,760	14,782	14,790	14,774	15,407	15,534	15,680	15,792	15,877	15,953
MA	H2226	3	FIDE	UNITEDHEALTHCARE INSURANCE COMPANY	7,694	7,622	7,612	7,633	7,668	7,661	7,631	7,968	8,012	8,034	8,044	8,060	8,128
MA	H8330	1	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	6,864	6,986	7,088	7,219	7,288	7,396	7,419	7,908	7,995	8,320	8,904	9,275	9,459
MA	H8330	2	FIDE	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	2,920	2,990	3,053	3,088	3,169	3,254	3,274	3,733	3,825	4,067	3,734	3,621	3,766
MA	H8928	1	FIDE	FALLON COMMUNITY HEALTH PLAN	9,531	9,523	9,504	9,386	9,315	9,280	9,227	9,277	9,351	9,431	9,470	9,549	9,611
MA	H9585	1	FIDE	BOSTON MEDICAL CENTER HEALTH PLAN, INC.	1,877	1,866	1,853	1,857	1,890	1,875	1,862	1,826	1,856	1,849	1,829	1,782	1,584
MA TOTAL					71,404	71,598	71,744	72,087	72,523	72,962	72,856	73,346	73,573	73,824	73,927	74,110	74,623
MN	H0845	1	FIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	48	46	42	39	37	37	34	**	**	**	**	**	**
MN	H2416	1	FIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	1,910	1,941	1,980	1,973	1,983	1,985	1,985	1,944	1,974	1,972	1,979	1,980	1,998
MN	H2417	1	FIDE	ITASCA MEDICAL CARE	342	331	327	327	323	330	328	322	340	334	330	328	328
MN	H2419	1	FIDE	SOUTH COUNTRY HEALTH ALLIANCE	1,216	1,194	1,183	1,161	1,138	1,132	1,115	1,014	1,012	1,009	993	980	981

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
MN	H2422	2	FIDE	HEALTHPARTNERS, INC.	5,769	5,693	5,695	5,688	5,666	5,655	5,604	5,456	5,435	5,462	5,456	5,450	5,456
MN	H2425	1	FIDE	HMO Minnesota	9,928	9,897	9,947	9,947	9,972	9,960	9,870	9,764	10,073	9,978	10,029	10,127	10,304
MN	H2456	2	FIDE	UCARE MINNESOTA	17,203	17,140	17,120	17,091	17,126	17,097	16,917	16,675	17,233	17,165	17,284	17,435	17,559
MN	H2458	2	FIDE	MEDICA HEALTH PLANS	10,222	10,244	10,264	10,300	10,310	10,309	10,217	10,032	10,243	10,130	10,112	10,121	10,112
MN	H2926	1	HIDE	PRIMEWEST RURAL MN HEALTH CARE ACCESS INITIATIVE	362	366	410	445	453	459	456	448	484	488	500	505	513
MN	H5703	1	HIDE	SOUTH COUNTRY HEALTH ALLIANCE	460	460	459	456	453	451	447	416	425	445	453	462	471
MN	H5937	1	HIDE	UCARE MINNESOTA	9,382	9,327	9,378	9,461	9,537	9,546	9,451	9,242	9,734	9,829	10,079	10,282	10,397
MN	H7778	1	HIDE	UNITEDHEALTHCARE OF ILLINOIS, INC.	94	97	96	99	100	95	95	**	**	**	**	**	**
MN	H9952	1	HIDE	MEDICA HEALTH PLANS	1,944	1,918	1,911	1,906	1,911	1,906	1,887	1,840	1,851	1,841	1,874	1,925	1,951
MN TOTAL					58,880	58,654	58,812	58,893	59,009	58,962	58,406	57,153	58,804	58,653	59,089	59,595	60,070
NJ	H0913	13	FIDE	WELLCARE HEALTH PLANS OF NEW JERSEY, INC.	7,683	7,699	7,719	7,773	7,827	7,816	7,767	7,752	7,789	7,177	7,207	7,341	7,383
NJ	H3113	5	HIDE	OXFORD HEALTH PLANS (NJ), INC.	46,189	45,882	45,677	44,065	43,930	43,998	44,117	45,661	45,631	45,981	46,035	45,469	45,542
NJ	H3240	13	FIDE	AMERIGROUP NEW JERSEY, INC.	13,517	13,414	13,313	13,169	13,080	13,069	12,323	12,741	12,602	12,620	12,718	12,801	12,914
NJ	H3240	24	FIDE	AMERIGROUP NEW JERSEY, INC.	975	997	1,048	1,116	1,145	1,160	1,165	1,180	1,205	1,272	1,325	1,359	1,453
NJ	H6399	1	FIDE	AETNA BETTER HEALTH INC. (NJ)	7,276	7,242	7,304	7,555	7,719	7,851	7,744	6,647	6,457	6,255	6,123	5,985	5,836
NJ	H8298	1	FIDE	HORIZON HEALTHCARE OF NEW JERSEY, INC.	20,722	20,622	20,595	20,573	20,639	20,839	21,060	21,537	21,766	21,952	22,012	22,172	22,377
NJ TOTAL					96,362	95,856	95,656	94,251	94,340	94,733	94,176	95,518	95,450	95,257	95,420	95,127	95,505
NM	H0294	49	HIDE	UNITEDHEALTHCARE INSURANCE COMPANY	**	**	**	**	**	**	**	1,313	1,346	1,384	1,132	937	766
NM TOTAL					**	**	**	**	**	**	**	1,313	1,346	1,384	1,132	937	766

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
NY	H0034	2	FIDE	HAMASPIK, INC.	911	934	951	954	956	955	972	982	1,001	1,043	1,086	1,108	1,104
NY	H0423	7	FIDE	METROPLUS HEALTH PLAN, INC.	181	181	187	190	192	199	208	216	246	274	295	298	319
NY	H1732	1	FIDE	HEALTHPLUS HP, LLC	145	163	195	209	210	207	207	**	**	**	**	**	**
NY	H2168	2	FIDE	VILLAGE SENIOR SERVICES CORPORATION	3,106	3,176	3,256	3,461	3,601	3,723	3,749	4,226	4,370	4,581	4,780	4,967	5,129
NY	H3305	34	HIDE	MVP HEALTH PLAN, INC.	**	**	**	**	**	**	**	1,046	972	989	1,039	1,081	1,110
NY	H3347	7	FIDE	ELDERPLAN, INC.	4,265	4,360	4,413	4,550	4,634	4,720	4,902	5,014	5,099	5,342	5,527	5,746	6,013
NY	H3359	34	FIDE	HEALTHFIRST HEALTH PLAN, INC.	30,380	30,947	31,440	32,012	32,482	32,934	33,121	33,612	34,219	34,845	35,335	36,037	37,288
NY	H3359	38	HIDE	HEALTHFIRST HEALTH PLAN, INC.	589	565	597	607	712	740	779	**	**	**	**	**	**
NY	H3387	13	FIDE	UNITEDHEALTHCARE OF NEW YORK, INC.	**	**	**	**	**	**	**	11	*	*	*	*	*
NY	H5549	3	FIDE	VNS CHOICE	4,557	4,621	4,679	4,782	4,856	4,934	4,936	5,461	5,403	5,656	5,875	6,060	6,335
NY	H5599	3	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	995	1,037	1,090	1,130	1,170	1,234	1,241	1,930	2,005	2,305	2,800	3,166	3,651
NY	H5599	8	FIDE	NEW YORK QUALITY HEALTHCARE CORPORATION	522	542	571	606	656	717	709	**	**	**	**	**	**
NY	H5991	13	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	216	214	205	227	251	279
NY	H5991	13	HIDE	HEALTH INSURANCE PLAN OF GREATER NEW YORK	**	**	**	**	**	**	**	288	295	292	310	326	338
NY	H5992	7	FIDE	SENIOR WHOLE HEALTH OF NEW YORK, INC.	300	296	291	279	278	275	279	277	276	259	259	251	248
NY	H6776	2	FIDE	ELDERSERVE HEALTH, INC.	311	321	329	345	364	369	375	378	394	432	480	532	644
NY	H6988	4	FIDE	CENTERS PLAN FOR HEALTHY LIVING, LLC	1,820	1,847	1,855	1,886	1,897	1,901	1,856	1,952	1,947	2,002	2,038	2,074	2,121
NY	H7524	1	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	52	55	55	57	63	63

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
NY	H7524	3	HIDE	EXCELLUS HEALTH PLAN COMMUNITY CARE LLC	**	**	**	**	**	**	**	735	828	863	941	1,007	1,051
NY	H8432	41	FIDE	ANTHEM HEALTHCHOICE HMO, INC.	**	**	**	**	**	**	**	216	217	235	296	353	531
NY TOTAL					48,082	48,990	49,854	51,011	52,008	52,908	53,334	56,612	57,541	59,378	61,345	63,320	66,224
TN	H0251	4	FIDE	UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.	1,120	1,060	1,070	1,085	1,084	1,101	1,101	1,131	1,097	1,097	1,096	1,095	1,086
TN	H3259	2	FIDE	VOLUNTEER STATE HEALTH PLAN	536	542	540	538	532	533	537	549	566	567	580	591	596
TN	H5828	1	FIDE	AMERIGROUP TENNESSEE, INC.	604	592	582	571	568	556	525	593	598	613	628	632	646
TN TOTAL					2,260	2,194	2,192	2,194	2,184	2,190	2,163	2,273	2,261	2,277	2,304	2,318	2,328
VA	H0421	1	HIDE	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	**	**	**	**	**	**	**	9,752	9,574	8,811	8,529	7,879	7,724
VA	H1610	1	FIDE	COVENTRY HEALTH CARE OF VIRGINIA, INC.	9,967	9,707	9,790	9,983	9,812	9,695	9,549	13,685	13,770	13,828	13,710	13,691	13,653
VA	H2445	1	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	1,618	1,717	1,819	2,145	2,588	2,645
VA	H2445	3	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	12,701	13,210	13,982	14,308	14,264	14,708
VA	H2445	5	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	**	**	**	**	**	**	**	15,071	14,465	12,148	11,275	9,964	9,481
VA	H4499	1	FIDE	SENTARA HEALTH PLANS	**	**	**	**	**	**	**	8,534	8,572	8,338	8,296	8,256	8,109
VA	H4694	1	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	8,577	8,463	8,268	8,072	7,906	7,791
VA	H4694	3	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	5,865	6,294	6,789	6,937	7,158	7,367
VA	H4694	4	FIDE	HEALTHKEEPERS, INC.	**	**	**	**	**	**	**	9,817	10,484	11,136	11,731	12,207	12,823
VA	H7559	1	FIDE	Molina Healthcare of Virginia, LLC	**	**	**	**	**	**	**	1,264	1,260	1,220	1,209	973	957

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
VA	H7464	5	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	941	986	1,005	970	994	1,060	1,078	**	**	**	**	**	**
VA	H7464	7	FIDE	UNITEDHEALTHCARE OF THE MID-ATLANTIC, INC.	8,964	8,926	8,788	8,507	8,465	8,511	8,537	**	**	**	**	**	**
VA TOTAL					19,872	19,619	19,583	19,460	19,271	19,266	19,164	86,884	87,809	86,339	86,212	84,886	85,258
WI	H2034	1	FIDE	COMMUNITY CARE HEALTH PLAN, INC.	502	501	496	485	483	472	477	472	479	474	471	476	472
WI	H2237	7	FIDE	INDEPENDENT CARE HEALTH PLAN, INC.	908	916	921	913	921	929	940	907	914	893	890	876	892
WI	H5209	2	FIDE	MOLINA HEALTHCARE OF WISCONSIN, INC.	1,056	1,048	1,034	1,023	1,017	1,008	996	978	975	967	955	952	952
WI TOTAL					2,466	2,465	2,451	2,421	2,421	2,409	2,413	2,357	2,368	2,334	2,316	2,304	2,316
TOTAL AIP ENROLLMENT					670,324	671,771	673,972	676,919	681,053	685,363	682,542	859,845	876,912	891,082	902,479	909,239	919,321
PERCENT CHANGE FROM PREVIOUS MONTH					1%	0%	0%	0%	1%	1%	0%	26%	2%	2%	1%	1%	1%

⁷ Totals reflect enrollment data from June 1, 2025. The payment reflects enrollments accepted through May 9, 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 (June 2024–June 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, June 2024–June 2025^{14,15,16,17}

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
PR	H4003	17	HIDE	MMM HEALTHCARE, LLC	46,569	45,745	44,808	44,018	43,394	42,812	42,406	45,274	44,285	42,018	41,325	40,772	40,233
PR	H4003	49	HIDE	MMM HEALTHCARE, LLC	7,799	7,559	7,303	7,096	6,949	6,832	6,704	**	**	**	**	**	**
PR	H4003	58	HIDE	MMM HEALTHCARE, LLC	3,786	3,869	3,924	4,032	4,094	4,121	4,034	4,380	4,372	4,417	4,486	4,535	4,522
PR	H4004	48	HIDE	MMM HEALTHCARE, LLC	7,182	7,121	7,010	6,896	6,811	6,766	6,673	6,705	6,718	6,574	6,573	6,494	6,418
PR	H4004	62	HIDE	MMM HEALTHCARE, LLC	39,083	38,887	38,688	38,888	38,867	38,912	38,873	42,902	43,067	43,552	44,121	44,382	44,590
PR	H4004	67	HIDE	MMM HEALTHCARE, LLC	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	4,833	5,163	5,430
PR	H4004	69	HIDE	MMM HEALTHCARE, LLC	**	**	**	**	**	**	**	473	507	556	593	603	593
PR	H4007	16	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	1,864	1,794	1,721	1,655	1,621	1,587	1,546	1,370	1,263	1,012	915	858	782
PR	H4007	18	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,426	2,364	2,260	2,172	2,128	2,096	2,069	2,416	2,166	1,786	1,642	1,568	1,476
PR	H4007	19	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	864	844	811	789	771	751	742	**	**	**	**	**	**
PR	H4007	26	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	6,229	6,206	6,116	6,038	6,067	6,014	6,025	5,051	4,662	4,097	3,942	3,822	3,706
PR	H4007	27	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	2,718	2,746	2,762	2,783	2,817	2,812	2,824	2,458	2,415	2,484	2,499	2,482	2,439
PR	H4007	30	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	5,654	5,809	5,868	6,099	6,317	6,508	6,629	4,367	3,284	2,499	2,273	2,135	1,965

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
PR	H4007	31	HIDE	HUMANA HEALTH PLANS OF PUERTO RICO, INC.	**	**	**	**	**	**	**	2,337	3,941	5,386	5,913	6,170	6,243
PR	H5577	2	HIDE	MCS ADVANTAGE, INC.	32,337	32,415	32,409	32,328	32,363	32,076	32,056	31,522	31,340	31,282	30,963	30,922	31,009
PR	H5577	17	HIDE	MCS ADVANTAGE, INC.	26,073	25,962	25,707	25,346	25,192	24,879	24,783	24,723	24,602	24,474	24,241	24,282	24,304
PR	H5577	29	HIDE	MCS ADVANTAGE, INC.	36,861	37,523	38,001	38,425	38,893	39,072	39,419	37,384	37,140	36,541	35,888	35,593	35,290
PR	H5577	46	HIDE	MCS ADVANTAGE, INC.	25,033	25,368	25,682	25,934	26,139	26,307	26,613	27,268	27,433	27,491	27,339	27,384	27,409
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	7,205	7,309	7,442	7,624	7,697	7,890	8,739	11,797	13,056	14,460	15,298	15,969	16,702
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	4,143	4,182	4,206	4,271	4,299	4,352	4,806	6,283	6,944	7,704	7,961	8,260	8,550
PR	H5577	54	HIDE	MCS ADVANTAGE, INC.	6,914	6,932	6,955	6,925	6,884	6,869	7,196	9,288	9,532	9,979	10,069	10,248	10,500
PR	H5577	55	HIDE	MCS ADVANTAGE, INC.	1,989	2,011	2,043	2,089	2,105	2,125	2,156	**	**	**	**	**	**
PR	H5774	24	HIDE	TRIPLE S ADVANTAGE, INC.	16,411	16,460	16,378	16,247	16,262	16,286	16,078	**	**	**	**	**	**
PR	H5774	26	HIDE	TRIPLE S ADVANTAGE, INC.	2,197	2,231	2,209	2,159	2,167	2,179	2,082	**	**	**	**	**	**
PR	H5774	28	HIDE	TRIPLE S ADVANTAGE, INC.	8,724	8,770	8,788	8,611	8,668	8,621	8,224	3,862	2,950	1,922	1,546	1,234	1,083
PR	H5774	35	HIDE	TRIPLE S ADVANTAGE, INC.	1,584	1,597	1,560	1,544	1,588	1,591	1,515	1,152	1,025	957	923	872	857
PR	H5774	36	HIDE	TRIPLE S ADVANTAGE, INC.	6,060	5,915	5,735	5,535	5,454	5,416	5,256	**	**	**	**	**	**
PR	H5774	40	HIDE	TRIPLE S ADVANTAGE, INC.	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	373	366
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	16	33	46	49	52	50
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	44	68	77	74	77	88
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	*	22	27	23	22	25
PR	H5774	41	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	89	107	174	187	191	181
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	150	174	237	270	284	297

State	Contract Number	Plan ID	Integration Status	Contract Name	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	11	13	16	17	19	18
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	21	33	42	39	39	38
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	*	*	*	*	*	*
PR	H5774	42	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	16	29	33	34	37	41
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	13,487	13,977	14,515	14,829	14,898	15,051
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	2,919	2,995	3,098	3,140	3,149	3,149
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	2,581	2,519	2,302	2,227	2,165	2,155
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	4,298	4,118	3,862	3,753	3,645	3,614
PR	H5774	43	HIDE	TRIPLE S ADVANTAGE, INC.	**	**	**	**	**	**	**	5,511	5,389	5,242	5,191	5,161	5,124
PR TOTAL					305,596	305,604	304,489	303,777	303,878	303,326	303,807	303,203	303,804	303,551	303,527	303,860	304,298
PERCENT CHANGE FROM PREVIOUS MONTH					0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

¹² Totals reflect enrollment data from June 1, 2025. The payment reflects enrollments accepted through May 9, 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 (June 2024–June 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>.