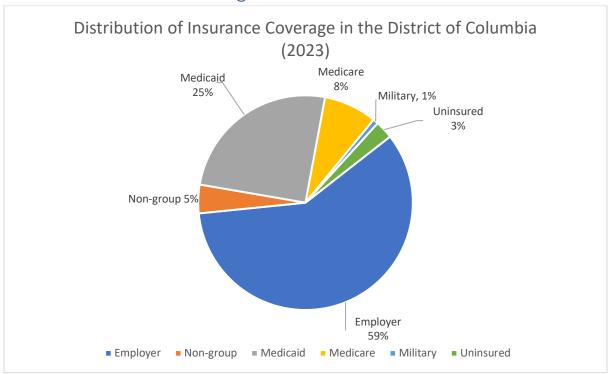
# District of Columbia (DC)

# Sources of Insurance Coverage



\*Source: KFF, Health Insurance Coverage of the Total Population, 2023

#### Medicare

In DC, approximately <u>51,900</u> residents are enrolled in Medicare, around 8% of the state's population (2023 data). Of those, <u>40%</u> of Medicare beneficiaries enrolled in a Medicare Advantage plan. For DC residents in the traditional Medicare program, the DC Department of Insurance, Securities and Banking (DISB) regulates Medicare supplemental plans. DISB provides a list of insurers marketing Medicare supplemental plans in DC here.

## Medicaid and the Children's Health Insurance Program (CHIP)

In DC, about <u>163,000</u> residents are enrolled in Medicaid or CHIP, approximately 25.2% of the population (2023 data).

DC adopted Medicaid expansion under the Affordable Care Act and covers childless adults under age 65 up to  $\underline{215\%}$  of the federal poverty level (FPL). Medicaid expansion currently covers around  $\underline{140,000}$  low-income adults (August 2024 data).

Medicaid covers children and pregnant women up to 324% FPL. Approximately 45% of all births in DC are covered by Medicaid (August 2024 data). In DC, the CHIP program is operated as an expansion of Medicaid. Currently, DC also covers children regardless of immigration status (up

to age 20) if they would otherwise qualify for Medicaid, using DC funds. Separate from the Medicaid program, DC residents age 21 and older with incomes up to 215% FPL who are ineligible for Medicaid based on immigration status can get coverage through the DC Healthcare Alliance program.

In DC, <u>most</u> Medicaid enrollees receive benefits via private managed care organizations (MCOs). These insurers have contracts with the DC Department of Health Care Finance (DHCF).

## Employer-sponsored Insurance

In DC, approximately <u>380,300</u> people are covered by employer-sponsored insurance (ESI), or 59% of the total state population (2023 data). Approximately <u>72%</u> of private-sector establishments in DC offer ESI. However, offer rates vary significantly by size of firm. In DC, 96.9% of large firms (50 or more employees) offer ESI, while 57% of small employers offer ESI—a higher proportion compared to other states.

In DC, <u>42.2%</u> of private sector businesses that offer health insurance self-fund at least one health plan. For large firms (50 or more employees) that offer health insurance, 56.9% self-fund at least one health plan.

#### Individual Market Insurance

Approximately <u>4.3%</u> of DC residents are enrolled in the individual market (2023 data). DC has a "closed market," meaning that all individual market coverage must be purchased through the Affordable Care Act Marketplace. In 2024, <u>14,799</u> DC residents selected a plan through the Affordable Care Act Marketplace, which in DC is run by the District and is called "<u>DC Health</u> Link."

Individual market health insurance is regulated in DC by the Department of Insurance, Securities and Banking (DISB).

DC has an individual mandate, or "responsibility requirement," meaning most people are required to maintain health insurance or else pay a penalty. More information about DC's coverage requirement, including the penalty and available exemptions, is available via DC Health Link's "Why Get Covered" page, available here.

## Other Coverage

Some DC residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers <u>0.8%</u>, or roughly 5,400 residents (2023 data).

### The Uninsured

Approximately  $\underline{2.7\%}$ , or 17,500 DC residents are uninsured (2022 data), the second-lowest uninsured rate in the country.

Among the non-elderly population: People of color are significantly more likely to be uninsured in DC than White people. Hispanic residents have the highest uninsured rate (6.8%), followed

by Black residents (3.9%). White residents have the lowest uninsured rate (0.8%) among all racial groups. Lack of insurance is also highly correlated with income. Approximately  $\underline{6.1\%}$  of people under 100% FPL and 4.7% of people between 100-199% FPL are the uninsured in DC, while just 1.3% of people at or above 400% FPL are uninsured.

# State Regulators: DC

The CMS Regional Office for DC is based in Philadelphia. Media inquiries may be submitted here.

# Department of Insurance, Securities and Banking (DISB)

The Department of Insurance, Securities and Banking (DISB) regulates the business of insurance in DC. For health insurance companies, DISB is responsible for:

- **Licensure**: All insurers operating in the state must obtain a license. Insurers must demonstrate that they are financially solvent and capable of paying claims. After initial certification, companies must file financial information with DISB annually. Reports on financial examinations conducted by DISB are available here.
- Form review: DISB reviews health insurers' contracts and covered benefits to ensure that they comport with state and federal law, including the Affordable Care Act (ACA), the Mental Health Parity and Addiction Equity Act (MHPAEA), the Health Insurance Portability & Accountability Act (HIPAA), and the No Surprises Act.
- **Rate review**: Health insurers must submit proposed premium rates to DISB, and the agency has the authority to review and require adjustments. DISB provides information about insurers' proposed and final rates here.
- Marketing: DISB is responsible for oversight of insurers' marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and oversees insurance agents and brokers.
- Enforcement: DISB has authority to enforce state and federal insurance laws.
  Enforcement tools can range from issuing a cease and desist order, imposing fines, or seeking an injunction. Consumers can learn more about filing a complaint and access the online complaint form here.

# DC Department of Health Care Financing (DHCF)

DC's Department of Health Care Financing (DHCF) runs the state's Medicaid program, and manages the contracts with the managed care organizations (MCOs) that deliver Medicaid in DC. A list of participating MCOs is available <a href="here">here</a>. Medicaid enrollment reports can be found <a href="here">here</a>. DHCF also contracts with an external organization to review MCO performance, including quality, network adequacy, and other measures. Annual reports on MCO performance measures are available <a href="here">here</a>. DHCF can conduct an enforcement action against an MCO if it fails to meet its contract obligations. Enforcement actions can include corrective action plans, monetary penalties, and terminated contracts.

## DC Attorney General

The DC Attorney General (AG) can investigate, seek voluntary compliance, or bring actions against insurance companies and other businesses and entities that violate consumer protection laws related to the provision of health insurance and health services. Consumers can file complaints against a business <a href="here">here</a>, but the Office of the AG's website <a href="here">directs</a> consumers to DISB, DHCF, the DC Office of the Health Care Ombudsman, and the Department of Labor for insurance disputes.

# Other Sources of Information

# Health Insurance Navigators, Agents and Brokers (collectively, "consumer assisters")

DC's health insurance Marketplace (DC Health Link) provides grants to local organizations called "Assisters" that are tasked with assisting consumers, determining eligibility for coverage affordability programs, and helping consumers with post-enrollment questions. DC-based insurance agents and brokers perform similar consumer assistance functions, but they are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through this page on the Marketplace website.

# Office of Health Care Ombudsman and Bill of Rights

DC also has an Office of Health Care Ombudsman and Bill of Rights (OHCOBR). This office runs DC's external review program (under the ACA, insurers must provide enrollees with an internal review of adverse benefit decisions and the right to an external, independent appeal). Consumers can get more information about filing appeals <a href="here">here</a>. OHCOBR offers services to DC residents outside of the appeals process, including advice about billing issues, prescription drug coverage, and state program eligibility. The Office also acts on consumers' behalf in processes such as Medicaid hearings or internal review processes. Annual summaries of OHCOBR's cases can be found here.

