MEDICAID WILL COVER FEWER PAST MEDICAL BILLS STARTING IN 2027

Starting January 1, 2027, Medicaid will only cover medical bills from 1 month before you apply if you are a childless adult, or up to 2 months for parents and children.



WHAT IS CHANGING?

Currently, Medicaid may be able to help pay for covered medical bills you received up to 3 months before you applied.

Starting January 1, 2027, this timeline is shrinking:

- **Childless Adult:** Medicaid will only cover medical bills from 1 month before your application date.
- **Parents, Children, Medicare Recipients, LTC groups:** Medicaid will cover medical bills from up to **2 months** before your application date.

WHAT DOES THIS MEAN FOR YOU?

Apply as soon as possible.
If you wait too long to apply for Medicaid, some older medical bills may not be covered.

Do not wait until bills pile up or become overdue.

If you think you may qualify for Medicaid, apply right away.

CONTACT US FOR MORE INFORMATION:

Computer: districtdirect.dc.gov.
Phone App: ★ Use the District Direct Mobile App.
Call: (202) 727-5355; TTY 711.
In Person: Visit a local DHS Service Center.
Fax: (202) 671-4400.

DHCF Department of Health Care Finance
DC Department of Human Services
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MURIEL BOWSER, MAYOR



ATTENTION DC CARE PROVIDERS & FACILITIES

Starting **January 1, 2027**, the Department of Health Care Finance (DHCF) will reduce the standard 3-month retroactive eligibility window to 1 or 2 months for non-exempt adult populations.

CLINICAL & OPERATIONAL IMPACT

• **Reimbursement Gaps:** A compressed retroactive window limits your facility's ability to claim backdated fee-for-service or managed care payments for uncertified months.

• **System Monitoring:** The District is also increasing the strictness of duplicate and deceased tracking. Facilities must report changes in resident placement or vitals immediately to prevent processing holds.

PROVIDER ACTION STEPS

To mitigate provider shortfalls and secure uninterrupted facility coverage, intake and billing teams must adopt these protocols:

1- Initiate Early Renewals: Utilize electronic data lookups via the provider portal to check verification statuses 90 days before expiration. Do not let a resident's certification window lapse.

2- Accelerate Documentation: Ensure all financial holdings, asset verifications (AVS), and medical necessity document sheets are completed and uploaded instantly at initial admission.

Contact us for technical billing support, case status tracking, and provider portal assistance:

Provider Web Portal (Eligibility Checks): Log in to the electronic verification portal at www.dc-medicaid.com.

Provider Inquiry Line: Call the DHCF Provider Services Hotline at **(202) 906-8319** or the Medicaid Enterprise Support Helpdesk.

Policy & Escalations Contact: For formal LTC policy inquiries, contact the DHCF Division of Long-Term Care directly.

DHCF Department of Health Care Finance

DC Department of Human Services

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