

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code	Fiscal Year								
		Totals	Age Group <1	Age Group 1-2	Age Group 3-5	Age Group 6-9	Age Group 10-14	Age Group 15-18	Age Group 19-20
MS	2014								
1a. Total individuals eligible for EPSDT	CN:	425,105	28,342	54,465	77,189	96,997	93,229	60,963	13,920
	MN:	0	0	0	0	0	0	0	0
	Total:	425,105	28,342	54,465	77,189	96,997	93,229	60,963	13,920
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	400,524	23,019	51,837	74,044	92,896	89,313	58,410	11,005
	MN:	0	0	0	0	0	0	0	0
	Total:	400,524	23,019	51,837	74,044	92,896	89,313	58,410	11,005
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:	0	0	0	0	0	0	0	0
	MN:	0	0	0	0	0	0	0	0
	Total:	0	0	0	0	0	0	0	0
2a. State Periodicity Schedule			5	3	3	4	5	4	2
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule			5.00	1.50	1.00	1.00	1.00	1.00	1.00
3a. Total Months of Eligibility	CN:	4,524,632	175,434	605,659	856,262	1,074,240	1,033,226	674,911	104,900
	MN:	0	0	0	0	0	0	0	0
	Total:	4,524,632	175,434	605,659	856,262	1,074,240	1,033,226	674,911	104,900
3b. Average Period of Eligibility	CN:	0.94	0.64	0.97	0.96	0.96	0.96	0.96	0.79
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.94	0.64	0.97	0.96	0.96	0.96	0.96	0.79
4. Expected Number of Screenings per Eligible	CN:		3.20	1.46	0.96	0.96	0.96	0.96	0.79
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:		3.20	1.46	0.96	0.96	0.96	0.96	0.79
5. Expected Number of Screenings	CN:	460,113	73,661	75,682	71,082	89,180	85,740	56,074	8,694
	MN:	0	0	0	0	0	0	0	0
	Total:	460,113	73,661	75,682	71,082	89,180	85,740	56,074	8,694
6. Total Screens Received	CN:	290,982	79,254	89,531	46,000	28,241	31,048	15,705	1,203
	MN:	0	0	0	0	0	0	0	0
	Total:	290,982	79,254	89,531	46,000	28,241	31,048	15,705	1,203
7. SCREENING RATIO	CN:	0.63	1.00	1.00	0.65	0.32	0.36	0.28	0.14
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.63	1.00	1.00	0.65	0.32	0.36	0.28	0.14
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	385,626	23,019	51,837	71,082	89,180	85,740	56,074	8,694
	MN:	0	0	0	0	0	0	0	0
	Total:	385,626	23,019	51,837	71,082	89,180	85,740	56,074	8,694

* Includes 12-month visit
Note: "CN" = Categorically Needy, "MN"= Medically Needy

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code	Fiscal Year								
		Totals	Age Group <1	Age Group 1-2	Age Group 3-5	Age Group 6-9	Age Group 10-14	Age Group 15-18	Age Group 19-20
MS	2014								
	9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN: 164,573	21,968	37,309	38,922	25,086	26,825	13,387	1,076
	MN: 0	0	0	0	0	0	0	0	0
	Total:	164,573	21,968	37,309	38,922	25,086	26,825	13,387	1,076
10. PARTICIPANT RATIO	CN:	0.43	0.95	0.72	0.55	0.28	0.31	0.24	0.12
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.43	0.95	0.72	0.55	0.28	0.31	0.24	0.12
11. Total Eligibles Referred for Corrective Treatment	CN:	97,721	20,628	23,869	18,183	13,004	14,092	7,278	667
	MN:	0	0	0	0	0	0	0	0
	Total:	97,721	20,628	23,869	18,183	13,004	14,092	7,278	667
12a. Total Eligibles Receiving Any Dental Services	CN:	204,217	136	11,512	47,383	58,840	53,116	29,710	3,520
	MN:	0	0	0	0	0	0	0	0
	Total:	204,217	136	11,512	47,383	58,840	53,116	29,710	3,520
12b. Total Eligibles Receiving Preventive Dental Services	CN:	187,446	71	10,078	44,494	55,863	48,852	25,447	2,641
	MN:	0	0	0	0	0	0	0	0
	Total:	187,446	71	10,078	44,494	55,863	48,852	25,447	2,641
12c. Total Eligibles Receiving Dental Treatment Services	CN:	93,079	15	1,519	15,717	27,541	27,536	18,544	2,207
	MN:	0	0	0	0	0	0	0	0
	Total:	93,079	15	1,519	15,717	27,541	27,536	18,544	2,207
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	33,750				16,483	17,267		
	MN:	0				0	0		
	Total:	33,750				16,483	17,267		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	195,255	111	11,104	45,264	57,275	50,707	27,594	3,200
	MN:	0	0	0	0	0	0	0	0
	Total:	195,255	111	11,104	45,264	57,275	50,707	27,594	3,200
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	19,532	1,345	7,366	6,373	2,647	805	839	157
	MN:	0	0	0	0	0	0	0	0
	Total:	19,532	1,345	7,366	6,373	2,647	805	839	157
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	211,570	1,472	16,606	47,966	58,951	53,224	29,804	3,547
	MN:	0	0	0	0	0	0	0	0
	Total:	211,570	1,472	16,606	47,966	58,951	53,224	29,804	3,547
13. Total Eligibles Enrolled in Managed Care	CN:	75,571	22,826	27,755	3,037	5,338	6,938	5,547	4,130
	MN:	0	0	0	0	0	0	0	0
	Total:	75,571	22,826	27,755	3,037	5,338	6,938	5,547	4,130
14. Total Number of Screening Blood Lead Tests	CN:	49,429	938	25,970	22,521				
	MN:	0	0	0	0				
	Total:	49,429	938	25,970	22,521				

* Includes 12-month visit

Note: "CN" = Categorically Needy, "MN"= Medically Needy