

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
HI	2017								
	CN:	183,005	9,670	20,046	29,478	37,822	42,728	30,351	12,910
	MN:	0							
	Total:	183,005	9,670	20,046	29,478	37,822	42,728	30,351	12,910
1a. Total individuals eligible for EPSDT	CN:	162,821	6,080	16,620	27,006	33,906	39,582	28,101	11,526
	MN:	0							
	Total:	162,821	6,080	16,620	27,006	33,906	39,582	28,101	11,526
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	22,202	235	1,680	3,317	5,184	6,467	4,981	338
	MN:	0							
	Total:	22,202	235	1,680	3,317	5,184	6,467	4,981	338
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:								
	MN:								
	Total:								
2a. State Periodicity Schedule			6	4	3	2	3	2	1
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule			6.00	2.00	1.00	0.50	0.60	0.50	0.50
3a. Total Months of Eligibility	CN:	1,746,543	44,542	165,600	293,987	367,128	440,306	312,140	122,840
	MN:	0							
	Total:	1,746,543	44,542	165,600	293,987	367,128	440,306	312,140	122,840
3b. Average Period of Eligibility	CN:	0.89	0.61	0.83	0.91	0.90	0.93	0.93	0.89
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.89	0.61	0.83	0.91	0.90	0.93	0.93	0.89
4. Expected Number of Screenings per Eligible	CN:		3.66	1.66	0.91	0.45	0.56	0.47	0.45
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:		3.66	1.66	0.91	0.45	0.56	0.47	0.45
5. Expected Number of Screenings	CN:	130,235	22,253	27,589	24,575	15,258	22,166	13,207	5,187
	MN:	0	0	0	0	0	0	0	0
	Total:	130,235	22,253	27,589	24,575	15,258	22,166	13,207	5,187
6. Total Screens Received	CN:	131,537	27,980	34,594	19,704	15,201	20,195	12,299	1,564
	MN:	0							
	Total:	131,537	27,980	34,594	19,704	15,201	20,195	12,299	1,564
7. SCREENING RATIO	CN:	1.00	1.00	1.00	0.80	1.00	0.91	0.93	0.30
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	1.00	1.00	1.00	0.80	1.00	0.91	0.93	0.30
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	103,093	6,080	16,620	24,575	15,258	22,166	13,207	5,187
	MN:	0	0	0	0	0	0	0	0
	Total:	103,093	6,080	16,620	24,575	15,258	22,166	13,207	5,187

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

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HI	2017								
	9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN: 83,278	5,857	13,578	18,016	14,291	18,824	11,291	1,421
		MN: 0							
	Total:	83,278	5,857	13,578	18,016	14,291	18,824	11,291	1,421
10. PARTICIPANT RATIO	CN:	0.81	0.96	0.82	0.73	0.94	0.85	0.85	0.27
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.81	0.96	0.82	0.73	0.94	0.85	0.85	0.27
11. Total Eligibles Referred for Corrective Treatment	CN:	42,536	4,685	8,907	7,747	5,984	8,300	5,844	1,069
	MN:	0							
	Total:	42,536	4,685	8,907	7,747	5,984	8,300	5,844	1,069
12a. Total Eligibles Receiving Any Dental Services	CN:	93,273	157	7,044	18,024	24,522	24,883	14,929	3,714
	MN:	0							
	Total:	93,273	157	7,044	18,024	24,522	24,883	14,929	3,714
12b. Total Eligibles Receiving Preventive Dental Services	CN:	71,468	38	4,389	13,589	19,252	19,924	11,523	2,753
	MN:	0							
	Total:	71,468	38	4,389	13,589	19,252	19,924	11,523	2,753
12c. Total Eligibles Receiving Dental Treatment Services	CN:	48,469	106	2,484	9,087	13,599	12,305	8,694	2,194
	MN:	0							
	Total:	48,469	106	2,484	9,087	13,599	12,305	8,694	2,194
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	7,832				4,475	3,357		
	MN:	0							
	Total:	7,832				4,475	3,357		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	73,586	69	4,997	13,933	19,331	20,084	12,089	3,083
	MN:	0							
	Total:	73,586	69	4,997	13,933	19,331	20,084	12,089	3,083
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	93,273	157	7,044	18,024	24,522	24,883	14,929	3,714
	MN:	0							
	Total:	93,273	157	7,044	18,024	24,522	24,883	14,929	3,714
13. Total Eligibles Enrolled in Managed Care	CN:	160,508	5,274	16,380	26,736	33,587	39,255	27,876	11,400
	MN:	0							
	Total:	160,508	5,274	16,380	26,736	33,587	39,255	27,876	11,400
14a. Total Number of Screening Blood Lead Tests	CN:	8,614	640	6,390	1,584				
	MN:	0							
	Total:	8,614	640	6,390	1,584				

* Includes 12-month visit
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