

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
	2019								
HI	CN:	178,932	8,991	18,681	27,692	36,620	43,335	30,555	13,058
	MN:	0							
	Total:	178,932	8,991	18,681	27,692	36,620	43,335	30,555	13,058
1a. Total individuals eligible for EPSDT	CN:	158,628	5,656	16,066	25,342	33,187	39,386	27,667	11,324
	MN:	0							
	Total:	158,628	5,656	16,066	25,342	33,187	39,386	27,667	11,324
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	22,249	189	1,795	3,350	5,288	6,525	4,769	333
	MN:	0							
	Total:	22,249	189	1,795	3,350	5,288	6,525	4,769	333
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:	1,693,063	41,163	164,851	269,894	363,828	432,850	303,768	116,709
	MN:	0							
	Total:	1,693,063	41,163	164,851	269,894	363,828	432,850	303,768	116,709
3b. Average Period of Eligibility	CN:	0.89	0.61	0.86	0.89	0.91	0.92	0.91	0.86
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.89	0.61	0.86	0.89	0.91	0.92	0.91	0.86
4. Expected Number of Screenings per Eligible	CN:		3.66	1.72	0.89	0.46	0.55	0.46	0.43
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:		3.66	1.72	0.89	0.46	0.55	0.46	0.43
5. Expected Number of Screenings	CN:	125,413	20,701	27,634	22,554	15,266	21,662	12,727	4,869
	MN:	0	0	0	0	0	0	0	0
	Total:	125,413	20,701	27,634	22,554	15,266	21,662	12,727	4,869
6. Total Screens Received	CN:	133,690	26,385	34,626	19,225	16,609	21,196	13,708	1,941
	MN:	0							
	Total:	133,690	26,385	34,626	19,225	16,609	21,196	13,708	1,941
7. SCREENING RATIO	CN:	1.00	1.00	1.00	0.85	1.00	0.98	1.00	0.40
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	1.00	1.00	1.00	0.85	1.00	0.98	1.00	0.40
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	98,800	5,656	16,066	22,554	15,266	21,662	12,727	4,869
	MN:	0	0	0	0	0	0	0	0
	Total:	98,800	5,656	16,066	22,554	15,266	21,662	12,727	4,869

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

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		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	2019								
	9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN: 85,651	5,445	13,507	17,267	15,550	19,681	12,452	1,749
		MN: 0							
	Total:	85,651	5,445	13,507	17,267	15,550	19,681	12,452	1,749
10. PARTICIPANT RATIO	CN:	0.87	0.96	0.84	0.77	1.00	0.91	0.98	0.36
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.87	0.96	0.84	0.77	1.00	0.91	0.98	0.36
11. Total Eligibles Referred for Corrective Treatment	CN:	41,671	3,690	8,257	6,904	6,532	8,393	6,486	1,409
	MN:	0							
	Total:	41,671	3,690	8,257	6,904	6,532	8,393	6,486	1,409
12a. Total Eligibles Receiving Any Dental Services	CN:	92,641	204	7,298	17,069	23,649	25,620	15,054	3,747
	MN:	0							
	Total:	92,641	204	7,298	17,069	23,649	25,620	15,054	3,747
12b. Total Eligibles Receiving Preventive Dental Services	CN:	70,754	79	5,065	12,976	18,251	20,250	11,433	2,700
	MN:	0							
	Total:	70,754	79	5,065	12,976	18,251	20,250	11,433	2,700
12c. Total Eligibles Receiving Dental Treatment Services	CN:	48,480	131	2,312	8,681	13,609	12,954	8,575	2,218
	MN:	0							
	Total:	48,480	131	2,312	8,681	13,609	12,954	8,575	2,218
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	7,783				4,236	3,547		
	MN:	0							
	Total:	7,783				4,236	3,547		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	72,418	113	5,483	13,220	18,278	20,362	11,921	3,041
	MN:	0							
	Total:	72,418	113	5,483	13,220	18,278	20,362	11,921	3,041
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	728		357	232	36		103	
	MN:	0							
	Total:	728	0	357	232	36	0	103	0
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	93,369	204	7,655	17,301	23,685	25,620	15,157	3,747
	MN:	0							
	Total:	93,369	204	7,655	17,301	23,685	25,620	15,157	3,747
13. Total Eligibles Enrolled in Managed Care	CN:	158,628	5,656	16,066	25,342	33,187	39,386	27,667	11,324
	MN:	0							
	Total:	158,628	5,656	16,066	25,342	33,187	39,386	27,667	11,324
14a. Total Number of Screening Blood Lead Tests	CN:	9,048	522	6,969	1,557				
	MN:	0							
	Total:	9,048	522	6,969	1,557				

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