

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code HI	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
	2010								
1a. Total individuals eligible for EPSDT	CN:	152,233	8,813	19,198	25,773	29,783	32,126	24,700	11,840
	MN:	2	1	0	1	0	0	0	0
	Total:	152,235	8,814	19,198	25,774	29,783	32,126	24,700	11,840
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	135,927	5,919	17,663	23,746	27,340	29,548	22,429	9,282
	MN:	0	0	0	0	0	0	0	0
	Total:	135,927	5,919	17,663	23,746	27,340	29,548	22,429	9,282
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:	26,659	168	1,621	3,280	6,079	7,722	6,407	1,382
	MN:	0	0	0	0	0	0	0	0
	Total:	26,659	168	1,621	3,280	6,079	7,722	6,407	1,382
2a. State Periodicity Schedule			5	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			5.00	2.00	1.00	0.50	0.60	0.50	0.50
3a. Total Months of Eligibility	CN:	1,555,614	46,391	203,621	276,806	321,026	348,529	263,892	95,350
	MN:	1	0	0	1	0	0	0	0
	Total:	1,555,615	46,391	203,621	276,807	321,026	348,529	263,892	95,350
3b. Average Period of Eligibility	CN:	0.95	0.65	0.96	0.97	0.98	0.98	0.98	0.86
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.95	0.65	0.96	0.97	0.98	0.98	0.98	0.86
4. Expected Number of Screenings per Eligible	CN:		3.25	1.92	0.97	0.49	0.59	0.49	0.43
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:		3.25	1.92	0.97	0.49	0.59	0.49	0.43
5. Expected Number of Screenings	CN:	121,995	19,237	33,913	23,034	13,397	17,433	10,990	3,991
	MN:	0	0	0	0	0	0	0	0
	Total:	121,995	19,237	33,913	23,034	13,397	17,433	10,990	3,991
6. Total Screens Received	CN:	117,218	27,540	37,902	17,816	11,199	12,488	8,880	1,393
	MN:	0	0	0	0	0	0	0	0
	Total:	117,218	27,540	37,902	17,816	11,199	12,488	8,880	1,393
7. SCREENING RATIO	CN:	0.96	1.00	1.00	0.77	0.84	0.72	0.81	0.35
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.96	1.00	1.00	0.77	0.84	0.72	0.81	0.35
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	92,427	5,919	17,663	23,034	13,397	17,433	10,990	3,991
	MN:	0	0	0	0	0	0	0	0
	Total:	92,427	5,919	17,663	23,034	13,397	17,433	10,990	3,991

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

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9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN:	70,061	7,099	15,320	16,136	10,497	11,703	8,061	1,245
	MN:	0	0	0	0	0	0	0	0
	Total:	70,061	7,099	15,320	16,136	10,497	11,703	8,061	1,245
10. PARTICIPANT RATIO	CN:	0.76	1.00	0.87	0.70	0.78	0.67	0.73	0.31
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.76	1.00	0.87	0.70	0.78	0.67	0.73	0.31
11. Total Eligibles Referred for Corrective Treatment	CN:	34,045	4,627	8,375	6,682	4,423	5,028	3,932	978
	MN:	0	0	0	0	0	0	0	0
	Total:	34,045	4,627	8,375	6,682	4,423	5,028	3,932	978
12a. Total Eligibles Receiving Any Dental Services	CN:	68,884	157	9,975	17,218	16,225	15,277	8,519	1,513
	MN:	0							
	Total:	68,884	157	9,975	17,218	16,225	15,277	8,519	1,513
12b. Total Eligibles Receiving Preventive Dental Services	CN:	53,514	101	7,302	13,579	13,404	12,229	6,088	811
	MN:	0							
	Total:	53,514	101	7,302	13,579	13,404	12,229	6,088	811
12c. Total Eligibles Receiving Dental Treatment Services	CN:	32,522	43	2,848	8,406	8,068	7,433	4,815	909
	MN:	0							
	Total:	32,522	43	2,848	8,406	8,068	7,433	4,815	909
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	4,693				2,609	2,084		
	MN:	0							
	Total:	4,693				2,609	2,084		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	56,536	113	8,149	14,130	13,597	12,637	6,773	1,137
	MN:	0							
	Total:	56,536	113	8,149	14,130	13,597	12,637	6,773	1,137
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	0	0	0	0	0	0	0	0
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	68,884	157	9,975	17,218	16,225	15,277	8,519	1,513
	MN:	0							
	Total:	68,884	157	9,975	17,218	16,225	15,277	8,519	1,513
13. Total Eligibles Enrolled in Managed Care	CN:	149,281	8,753	18,981	25,445	29,219	31,417	24,049	11,417
	MN:	0	0	0	0	0	0	0	0
	Total:	149,281	8,753	18,981	25,445	29,219	31,417	24,049	11,417
14. Total Number of Screening Blood Lead Tests	CN:	8,943	674	6,821	1,448				
	MN:	0							
	Total:	8,943	674	6,821	1,448				

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