

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT									
Hawaii Medical FY 2006		Age Groups							
		Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
1. Total Individuals Eligible for EPSDT	CN	126,344	7,961	16,477	21,040	24,262	27,899	20,760	7,945
	MN	0							
	Total	126,344	7,961	16,477	21,040	24,262	27,899	20,760	7,945
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	2	1	1/2	3/5	1/2	1/2
3a. Total Months of Eligibility	CN	1,263,452	41,576	170,248	220,869	256,549	296,525	216,274	61,411
	MN	0							
	Total	1,263,452	41,576	170,248	220,869	256,549	296,525	216,274	61,411
3b. Average Period of Eligibility	CN	0.83	0.44	0.86	0.87	0.88	0.89	0.87	0.64
	MN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.83	0.44	0.86	0.87	0.88	0.89	0.87	0.64
4. Expected Number of Screenings per Eligible	CN		2.18	1.72	0.87	0.44	0.53	0.43	0.32
	MN		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total		2.18	1.72	0.87	0.44	0.53	0.43	0.32
5. Expected Number of Screenings	CN	101,190	17,323	28,375	18,406	10,690	14,826	9,011	2,559
	MN	0	0	0	0	0	0	0	0
	Total	101,190	17,323	28,375	18,406	10,690	14,826	9,011	2,559
6. Total Screens Received	CN	91,323	23,619	30,148	13,360	7,511	9,431	6,280	974
	MN	0	0	0	0	0	0	0	0
	Total	91,323	23,619	30,148	13,360	7,511	9,431	6,280	974
7. Screening Ratio	CN	0.90	1.00	1.00	0.73	0.70	0.64	0.70	0.38
	MN	0	0	0	0	0	0	0	0
	Total	0.90	1.00	1.00	0.73	0.70	0.64	0.70	0.38

*Includes 12-month visit

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

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Hawaii Medical FY 2006		Age Groups							
		Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
8. Total Eligibles Who Should Receive at Least One Initial or periodic Screen	CN	79,930	7,961	16,477	18,406	10,690	14,826	9,011	2,559
	MN	0	0	0	0	0	0	0	0
	Total	79,930	7,961	16,477	18,406	10,690	14,826	9,011	2,559
9. Total Eligibles Receiving at Least One Initial or Periodic Screen	CN	54,000	6,960	12,721	11,965	7,023	8,805	5,689	837
	MN	0	0	0	0	0	0	0	0
	Total	54,000	6,960	12,721	11,965	7,023	8,805	5,689	837
10. PARTICIPANT RATIO	CN	0.68	0.87	0.77	0.65	0.66	0.59	0.63	0.33
	MN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.68	0.87	0.77	0.65	0.66	0.59	0.63	0.33
11. Total Eligibles Referred for Corrective Treatment	CN	25,898	3,504	6,784	4,944	2,962	3,933	3,112	659
	MN	0	0	0	0	0	0	0	0
	Total	25,898	3,504	6,784	4,944	2,962	3,933	3,112	659
12a. Total Eligibles Receiving Any Dental Services	CN	51,543	104	4,931	11,525	12,933	13,051	7,451	1,548
	MN	0	0	0	0	0	0	0	0
	Total	51,543	104	4,931	11,525	12,933	13,051	7,451	1,548
12b. Total Eligibles Receiving Preventive Dental Services	CN	42,117	40	3,667	9,703	11,157	10,965	5,694	891
	MN	0	0	0	0	0	0	0	0
	Total	42,117	40	3,667	9,703	11,157	10,965	5,694	891
12c. Total Eligibles Receiving Dental Treatment Services	CN	27,081	6	1,212	6,089	7,691	6,683	4,349	1,051
	MN	0	0	0	0	0	0	0	0
	Total	27,081	6	1,212	6,089	7,691	6,683	4,349	1,051
13. Total Eligibles Enrolled in Managed Care	CN	126,344	7,961	16,477	21,040	24,262	27,899	20,760	7,945
	MN	0	0	0	0	0	0	0	0
	Total	126,344	7,961	16,477	21,040	24,262	27,899	20,760	7,945
14. Total Number of Screening Blood Level Tests	CN	6,512	476	5,044	959	22	9	2	0
	MN	0	0	0	0	0	0	0	0
	Total	6,512	476	5,044	959	22	9	2	0

*Includes 12-month visit

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

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