

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code	Fiscal Year								
NC	2018	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
1a. Total individuals eligible for EPSDT	CN:	1,318,761	72,008	151,455	222,768	270,280	318,246	218,604	65,400
	MN:	1,450	53	35	69	244	367	387	295
	Total:	1,320,211	72,061	151,490	222,837	270,524	318,613	218,991	65,695
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	1,257,029	56,473	147,481	217,146	259,177	305,628	209,504	61,620
	MN:	918	10	18	29	161	258	229	213
	Total:	1,257,947	56,483	147,499	217,175	259,338	305,886	209,733	61,833
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:	149,916	156	18,551	32,555	32,821	38,809	26,337	687
	MN:	0	0	0	0	0	0	0	0
	Total:	149,916	156	18,551	32,555	32,821	38,809	26,337	687
2a. State Periodicity Schedule			5	4	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	2.00	1.00	1.00	1.00	1.00	1.00
3a. Total Months of Eligibility	CN:	13,865,939	430,273	1,668,212	2,473,345	2,874,682	3,417,827	2,335,838	665,762
	MN:	7,732	58	121	244	1,363	2,191	1,774	1,981
	Total:	13,873,671	430,331	1,668,333	2,473,589	2,876,045	3,420,018	2,337,612	667,743
3b. Average Period of Eligibility	CN:	0.92	0.63	0.94	0.95	0.92	0.93	0.93	0.90
	MN:	0.70	0.48	0.56	0.70	0.71	0.71	0.65	0.78
	Total:	0.92	0.63	0.94	0.95	0.92	0.93	0.93	0.90
4. Expected Number of Screenings per Eligible	CN:		3.15	1.88	0.95	0.92	0.93	0.93	0.90
	MN:		2.40	1.12	0.70	0.71	0.71	0.65	0.78
	Total:		3.15	1.88	0.95	0.92	0.93	0.93	0.90
5. Expected Number of Screenings	CN:	1,434,417	177,890	277,264	206,289	238,443	284,234	194,839	55,458
	MN:	676	24	20	20	114	183	149	166
	Total:	1,435,093	177,914	277,284	206,309	238,557	284,417	194,988	55,624
6. Total Screens Received	CN:	1,082,233	247,145	306,788	162,698	121,779	152,552	81,249	10,022
	MN:	322	27	27	21	56	93	58	40
	Total:	1,082,555	247,172	306,815	162,719	121,835	152,645	81,307	10,062
7. SCREENING RATIO	CN:	0.75	1.00	1.00	0.79	0.51	0.54	0.42	0.18
	MN:	0.48	1.00	1.00	1.00	0.49	0.51	0.39	0.24
	Total:	0.75	1.00	1.00	0.79	0.51	0.54	0.42	0.18
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	1,183,217	56,473	147,481	206,289	238,443	284,234	194,839	55,458
	MN:	660	10	18	20	114	183	149	166
	Total:	1,183,877	56,483	147,499	206,309	238,557	284,417	194,988	55,624
9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN:	681,197	54,412	125,042	149,729	117,919	147,147	77,414	9,534
	MN:	275	8	12	15	55	92	55	38
	Total:	681,472	54,420	125,054	149,744	117,974	147,239	77,469	9,572
	CN:	0.58	0.96	0.85	0.73	0.49	0.52	0.40	0.17

* Includes 12-month visit

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

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10. PARTICIPANT RATIO	MN:	0.42	0.80	0.67	0.75	0.48	0.50	0.37	0.23
	Total:	0.58	0.96	0.85	0.73	0.49	0.52	0.40	0.17
11. Total Eligibles Referred for Corrective Treatment	CN:	354,527	51,159	91,875	61,370	50,150	59,109	35,938	4,926
	MN:	134	7	10	12	24	32	34	15
	Total:	354,661	51,166	91,885	61,382	50,174	59,141	35,972	4,941
12a. Total Eligibles Receiving Any Dental Services	CN:	654,467	665	36,971	121,658	169,428	192,858	113,530	19,357
	MN:	367	0	0	14	84	131	87	51
	Total:	654,834	665	36,971	121,672	169,512	192,989	113,617	19,408
12b. Total Eligibles Receiving Preventive Dental Services	CN:	617,340	300	35,666	118,230	164,303	183,779	100,180	14,882
	MN:	323	0	0	14	81	119	73	36
	Total:	617,663	300	35,666	118,244	164,384	183,898	100,253	14,918
12c. Total Eligibles Receiving Dental Treatment Services	CN:	292,290	179	2,471	38,746	82,005	90,903	66,058	11,928
	MN:	172	0	0	7	35	53	43	34
	Total:	292,462	179	2,471	38,753	82,040	90,956	66,101	11,962
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	80,290				44,474	35,816		
	MN:	35				21	14		
	Total:	80,325				44,495	35,830		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	638,296	653	36,827	120,587	166,561	188,171	107,343	18,154
	MN:	347	0	0	14	81	123	84	45
	Total:	638,643	653	36,827	120,601	166,642	188,294	107,427	18,199
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	98,649	6,679	74,927	16,904	78	44	15	2
	MN:	9	0	9	0	0	0	0	0
	Total:	98,658	6,679	74,936	16,904	78	44	15	2
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	725,530	7,196	92,883	130,244	169,452	192,862	113,536	19,357
	MN:	376	0	9	14	84	131	87	51
	Total:	725,906	7,196	92,892	130,258	169,536	192,993	113,623	19,408
13. Total Eligibles Enrolled in Managed Care	CN:	1,238,288	53,846	146,236	215,301	256,634	302,436	206,216	57,619
	MN:	838	8	15	25	154	238	211	187
	Total:	1,239,126	53,854	146,251	215,326	256,788	302,674	206,427	57,806
14a. Total Number of Screening Blood Lead Tests	CN:	106,331	360	89,213	16,758				
	MN:	10	0	8	2				
	Total:	106,341	360	89,221	16,760				

* Includes 12-month visit

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