

## Annual EPSDT Participation Report

Form CMS-416

Fiscal Year: 2021

State: Mississippi

CMS Generated Reporting of State Form CMS-416 Data Using T-MSIS		X State report generated by CMS using information reported in T-MSIS.								
Description	Cat	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20	
1a. Total Individuals Eligible for EPSDT	CN	426,510	24,893	51,216	68,530	81,000	101,981	73,059	25,831	
	MN	0	0	0	0	0	0	0	0	
	Total	426,510	24,893	51,216	68,530	81,000	101,981	73,059	25,831	
1b. Total Individuals Eligible for EPSDT for 90 Continuous Days	CN	412,486	20,085	50,513	67,403	78,830	99,092	71,075	25,488	
	MN	0	0	0	0	0	0	0	0	
	Total	412,486	20,085	50,513	67,403	78,830	99,092	71,075	25,488	
1c. Total Individuals Eligible Under a CHIP Medicaid Expansion	CN	0	0	0	0	0	0	0	0	
	MN	0	0	0	0	0	0	0	0	
	Total	0	0	0	0	0	0	0	0	
2a. State Periodicity Schedule			7	5	3	4	5	4	2	
2b. Number of Years in Age Group			1	2	3	4	5	4	2	
2c. Annualized State Periodicity Schedule			7	2.5	1	1	1	1	1	
3a. Total Months of Eligibility	CN	4,703,266	150,428	590,981	785,302	909,292	1,147,081	823,328	296,854	
	MN	0	0	0	0	0	0	0	0	
	Total	4,703,266	150,428	590,981	785,302	909,292	1,147,081	823,328	296,854	
3b. Average Period of Eligibility	CN	0.95	0.62	0.97	0.97	0.96	0.96	0.97	0.97	
	MN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	0.95	0.62	0.97	0.97	0.96	0.96	0.97	0.97	
4. Expected Number of Screenings per Eligible	CN		4.34	2.43	0.97	0.96	0.96	0.97	0.97	
	MN		0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total		4.34	2.43	0.97	0.96	0.96	0.97	0.97	
5. Expected Number of Screenings	CN	539,768	87,169	122,747	65,381	75,677	95,128	68,943	24,723	
	MN	0	0	0	0	0	0	0	0	
	Total	539,768	87,169	122,747	65,381	75,677	95,128	68,943	24,723	
6. Total Screens Received	CN	315,480	84,231	101,228	45,547	26,265	37,464	18,791	1,954	
	MN	0	0	0	0	0	0	0	0	
	Total	315,480	84,231	101,228	45,547	26,265	37,464	18,791	1,954	
7. SCREENING RATIO	CN	0.58	0.97	0.82	0.70	0.35	0.39	0.27	0.08	
	MN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	0.58	0.97	0.82	0.70	0.35	0.39	0.27	0.08	
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN	400,450	20,085	50,513	65,381	75,677	95,128	68,943	24,723	
	MN	0	0	0	0	0	0	0	0	
	Total	400,450	20,085	50,513	65,381	75,677	95,128	68,943	24,723	
9. Total Eligibles Receiving at Least One Initial or Periodic Screen	CN	176,088	19,506	40,408	38,662	24,508	34,087	17,059	1,858	
	MN	0	0	0	0	0	0	0	0	
	Total	176,088	19,506	40,408	38,662	24,508	34,087	17,059	1,858	

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10. PARTICIPANT RATIO	CN	0.44	0.97	0.80	0.59	0.32	0.36	0.25	0.08
	MN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.44	0.97	0.80	0.59	0.32	0.36	0.25	0.08
11. Total Eligibles Referred for Corrective Treatment	CN	120,996	19,009	33,198	22,405	13,886	20,052	11,156	1,290
	MN	0	0	0	0	0	0	0	0
	Total	120,996	19,009	33,198	22,405	13,886	20,052	11,156	1,290
12a. Total Eligibles Receiving Any Dental Services	CN	195,809	158	11,844	36,331	47,083	56,816	36,037	7,540
	MN	0	0	0	0	0	0	0	0
	Total	195,809	158	11,844	36,331	47,083	56,816	36,037	7,540
12b. Total Eligibles Receiving Preventive Dental Services	CN	177,633	62	10,466	34,524	44,963	51,819	30,118	5,681
	MN	0	0	0	0	0	0	0	0
	Total	177,633	62	10,466	34,524	44,963	51,819	30,118	5,681
12c. Total Eligibles Receiving Dental Treatment Services	CN	86,684	44	876	10,629	20,420	28,485	21,745	4,485
	MN	0	0	0	0	0	0	0	0
	Total	86,684	44	876	10,629	20,420	28,485	21,745	4,485
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN	19,859				10,121	9,738		
	MN	0				0	0		
	Total	19,859				10,121	9,738		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN	187,321	146	11,695	35,954	46,240	53,772	32,635	6,879
	MN	0	0	0	0	0	0	0	0
	Total	187,321	146	11,695	35,954	46,240	53,772	32,635	6,879
12f. Total Eligibles Receiving Oral Health Services Provided by a Non-Dentist Provider	CN	14,986	1,589	10,437	2,782	109	27	26	16
	MN	0	0	0	0	0	0	0	0
	Total	14,986	1,589	10,437	2,782	109	27	26	16
12g. Total Eligibles Receiving Any Preventive Dental or Oral Health Service	CN	184,764	414	16,272	35,463	44,991	51,823	30,120	5,681
	MN	0	0	0	0	0	0	0	0
	Total	184,764	414	16,272	35,463	44,991	51,823	30,120	5,681
13. Total Eligibles Enrolled in Managed Care	CN	382,128	19,918	48,585	64,014	74,410	92,435	65,574	17,192
	MN	0	0	0	0	0	0	0	0
	Total	382,128	19,918	48,585	64,014	74,410	92,435	65,574	17,192
14a. Total Number of Screening Blood Lead Tests	CN	32,719	86	23,506	9,127				
	MN	0	0	0	0				
	Total	32,719	86	23,506	9,127				

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14b. Methodology Used to Calculate the Total Number of Screening Blood Lead Tests			Enter X for Method I		Enter X for Method II		Enter X for Method III		
		CPT Code 83655 within certain diagnoses codes (Method I)	X	HEDIS (Method II)		Combination Methodology (Method III)			

CN= Categorically Needy      MN=Medically Needy  
DS = Data suppressed because data cannot be displayed per the Centers for Medicare & Medicaid Services' cell-size suppression policy, which prohibits the direct reporting of data for beneficiary and record counts of 1 to 10 and values from which users can derive values of 1 to 10.  
States are not required to provide the EPSDT benefits to children enrolled in Medicaid through the medically needy benefit.  
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