

**FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT**



<b>State Code</b>		<b>Fiscal Year</b>								
<b>MS</b>		<b>2022</b>								
CMS Generated Reporting of State Form CMS-416 Data Using T-MSIS		Enter X if your state gives CMS permission to generate the data for this form on behalf of your state using information reported in T-MSIS.								
		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:	483,987	24,206	51,592	73,287	91,989	115,148	90,366	37,399	
	MN:	0								
	Total:	483,987	24,206	51,592	73,287	91,989	115,148	90,366	37,399	
1b. Total Individuals Eligible for EPSDT for 90 Continuous Days	CN:	470,311	19,457	50,560	71,853	90,048	112,848	88,570	36,975	
	MN:	0								
	Total:	470,311	19,457	50,560	71,853	90,048	112,848	88,570	36,975	
1c. Total Individuals Eligible Under a CHIP Medicaid Expansion	CN:	0	0	0	0	0	0	0	0	
	MN:	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			7.00	2.50	1.00	1.00	1.00	1.00	1.00	
3a. Total Months of Eligibility	CN:	5,364,984	145,916	585,946	829,938	1,039,424	1,305,177	1,025,134	433,449	
	MN:	0								
	Total:	5,364,984	145,916	585,946	829,938	1,039,424	1,305,177	1,025,134	433,449	
3b. Average Period of Eligibility	CN:	0.95	0.62	0.97	0.96	0.96	0.96	0.96	0.98	
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total:	0.95	0.62	0.97	0.96	0.96	0.96	0.96	0.98	
4. Expected Number of Screenings per Eligible	CN:		4.34	2.43	0.96	0.96	0.96	0.96	0.98	
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total:		4.34	2.43	0.96	0.96	0.96	0.96	0.98	
5. Expected Number of Screenings	CN:	592,326	84,443	122,861	68,979	86,446	108,334	85,027	36,236	
	MN:	0	0	0	0	0	0	0	0	
	Total:	592,326	84,443	122,861	68,979	86,446	108,334	85,027	36,236	
6. Total Screens Received	CN:	333,459	83,756	101,433	48,986	29,752	42,563	23,739	3,230	
	MN:	0								
	Total:	333,459	83,756	101,433	48,986	29,752	42,563	23,739	3,230	
7. SCREENING RATIO	CN:	0.56	0.99	0.83	0.71	0.34	0.39	0.28	0.09	
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total:	0.56	0.99	0.83	0.71	0.34	0.39	0.28	0.09	
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	455,039	19,457	50,560	68,979	86,446	108,334	85,027	36,236	
	MN:	0	0	0	0	0	0	0	0	
	Total:	455,039	19,457	50,560	68,979	86,446	108,334	85,027	36,236	

\* 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:	190,649	18,901	40,216	40,940	27,642	38,477	21,469	3,004	
	MN:	0								
	Total:	190,649	18,901	40,216	40,940	27,642	38,477	21,469	3,004	
10. PARTICIPANT RATIO	CN:	0.42	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:	0.42	0.97	0.80	0.59	0.32	0.36	0.25	0.08	
11. Total Eligibles Referred for Corrective Treatment	CN:	132,844	18,475	33,720	25,807	16,678	22,491	13,601	2,072	
	MN:	0								
	Total:	132,844	18,475	33,720	25,807	16,678	22,491	13,601	2,072	
12a. Total Eligibles Receiving Any Dental Services	CN:	229,639	155	12,097	39,076	55,470	66,481	45,486	10,874	
	MN:	0								
	Total:	229,639	155	12,097	39,076	55,470	66,481	45,486	10,874	
12b. Total Eligibles Receiving Preventive Dental Services	CN:	207,521	49	10,733	36,977	52,957	60,804	37,873	8,128	
	MN:	0								
	Total:	207,521	49	10,733	36,977	52,957	60,804	37,873	8,128	
12c. Total Eligibles Receiving Dental Treatment Services	CN:	102,679	57	919	10,871	23,413	33,214	27,717	6,488	
	MN:	0								
	Total:	102,679	57	919	10,871	23,413	33,214	27,717	6,488	
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	23,729				12,271	11,458			
	MN:	0								
	Total:	23,729				12,271	11,458			
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	219,524	138	11,952	38,645	54,495	63,167	41,235	9,892	
	MN:	0								
	Total:	219,524	138	11,952	38,645	54,495	63,167	41,235	9,892	
12f. Total Eligibles Receiving Oral Health Services Provided by a Non-Dentist Provider	CN:	14,404	1,479	10,050	2,755	114	4	2	0	
	MN:	0								
	Total:	14,404	1,479	10,050	2,755	114	4	2	0	
12g. Total Eligibles Receiving Any Preventive Dental or Oral Health Service	CN:	229,576	384	16,031	38,711	54,608	65,314	44,320	10,208	
	MN:	0								
	Total:	229,576	384	16,031	38,711	54,608	65,314	44,320	10,208	
13. Total Eligibles Enrolled in Managed Care	CN:	386,820	19,238	45,056	59,390	75,662	95,416	74,251	17,807	
	MN:	0								
	Total:	386,820	19,238	45,056	59,390	75,662	95,416	74,251	17,807	
14a. Total Number of Screening Blood Lead Tests	CN:	31,687	163	23,082	8,442					
	MN:	0								
	Total:	31,687	163	23,082	8,442					

\* Includes 12-month visit

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