



Children's Health Under Medicaid

**A National Review of Early and Periodic Screening, Diagnostic,
and Treatment Services
2015 – 2019**

Prepared by Daniel Young, Zamir M. Brown, Sarah Somers, and Jane Perkins
National Health Law Program

4th Edition
July 2021

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About the National Health Law Program

The National Health Law Program (NHeLP) is a nonprofit public interest organization working to improve health care access for America's working and unemployed poor, children, minorities, the elderly, and people with disabilities. Since 1969, NHeLP has served individuals, legal advocates, community-based organizations, providers and policy makers who are working to preserve and improve health care access.

Selected EPSDT Resources from the National Health Law Program

Issue Brief Series: EPSDT Litigation Trends (most recent update Oct. 2020)

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Medicaid's Early and Periodic Screening, Diagnosis, and Treatment in Schools and the Free Care Rule, 46 HEALTH ADVOCATE (Feb. 2016)

NATIONAL HEALTH LAW PROGRAM, EPSDT VISION AND HEARING SERVICES (May 2015)

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The problem is to discover, as early as possible, the ills that handicap our children. There must be continuing follow-up treatment so that handicaps do not go untreated ... We must enlarge our efforts to give proper eye care to a needy child. We must provide help to strengthen a poor youngster's limb before he becomes permanently disabled. We must stop tuberculosis in its first stages before it causes serious harm.

We look toward the day when every child, no matter what his color or his family's means, gets the medical care he needs, starts school on an equal footing with his class mates, seeks as much education as he can absorb...in short, goes as far as his talents will take him...

President Lyndon B. Johnson
Introducing the EPSDT Legislation
90th Cong., 1st Sess. (1967)

The EPSDT participation and screening data are vital to decision makers in their assessment of the services provided to eligible children.

Office of Inspector General, 1992

The EPSDT data collected . . . have the potential to improve CMS oversight of beneficiaries' receipt of necessary services and screenings. However, CMS has not taken sufficient steps to help ensure the appropriateness of its state data collection, evaluations, and assistance . . .

Government Accountability Office, 2019

The Goal of EPSDT is to assure that individual children get the health care they need when they need it – the right care to the right child at the right time.

CMS, EPSDT – A Guide for States:
Coverage in the Medicaid Benefit for
Children and Adolescents, 2014

Background to this Chart Book

The EPSDT program requires each state to complete a reporting form provided by the U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services (CMS). This form, known as the Form CMS-416, measures the states' efforts to ensure that eligible children receive the services provided through EPSDT. The forms are collected each year by the federal government.

This chart book presents Form CMS-416 data from the states for Federal fiscal years 2015-2019 as reported by CMS. For additional discussion of the data, see Appendix A, Methodology.

In August 1998, NHeLP first published *Children's Health Under Medicaid: A National Review of Early and Periodic Screening, Diagnosis and Treatment*, providing national and state-based Form-416 data for Federal fiscal years 1994-1996. The second edition of *Children's Health Under Medicaid* was published in September 2001 and provided data from Federal fiscal years 1997-1998. The third edition was published in May 2005 and provided data from 1999-2003.

Overview to the Medicaid EPSDT Program

Millions of children in the United States live in poverty and are therefore more likely to be in poor health than children in higher-income families. Lack of access to healthy food, fewer educational opportunities, greater exposure to environmental hazards, and inadequate housing increase the likelihood that a low-income child will be in poor health. Indeed, children living in poverty, particularly children of color, are more likely than other children to have poor health, including vision, hearing and speech problems, dental problems, skin lesions, elevated lead blood levels, sickle cell disease, early childhood trauma, behavioral problems, anemia, asthma, and pneumonia.¹

Early detection and treatment can avoid or minimize the effects of many of these childhood conditions. The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) service was added to the Medicaid program in 1967 and repeatedly strengthened to do just this. It was designed to have a broader focus than Medicaid for adults, requiring health education and coordination with entities that provide other services to children.

Over 37 million children in the United States were eligible for EPSDT in 2020.² Because it reaches so many children, EPSDT has the potential to improve dramatically the overall health of children living in the United States.

Since its inception, the program's success in screening and treating eligible children has not met expectations. For example, Congress has made dental screening and lead testing mandatory components of each state's EPSDT program. When we last published this book using 2003 data, just 30 percent of children received a preventive dental screen and only 14 percent of children under five years of age received a lead blood test. The numbers have improved since 2003 but the gains are marginal over that time. In 2019, only 43 percent of children were reported as receiving a preventive dental screen; and just 22 percent of children under five years of age were reported as receiving a lead blood test. Those improvements amount to less than a one-percent increase per year.

The United States continues to lag behind other countries in assuring preventive care for children.³ Until such care becomes a national priority, this trend is certain to continue.

The Scope of EPSDT

The Medicaid Act requires participating states to comply with the following EPSDT requirements:⁴

- **Eligibility.** EPSDT applies to Medicaid-eligible children and youth under the age of 21.
- **Medical Check-ups.** States must provide eligible children with periodic medical check-ups called “medical screens.” This screen must include the following five components:
 - A comprehensive health and developmental history;
 - A comprehensive unclothed physical exam;
 - Immunizations (as determined by the Advisory Committee on Immunization Practices);

The Scope of EPSDT

- Laboratory test when appropriate, including lead blood testing, *and*
- Health education and anticipatory guidance.

All of these elements must occur if a visit is to be reported by the state on the Form CMS-416 as an EPSDT medical screen.⁵

Medical screens must be provided according to a prescribed “periodicity schedule” and at other intervals, when medically necessary. The periodicity schedule is to be set by the state after consultation with recognized medical organizations involved in child health care. Congress and CMS have suggested consulting Bright Futures, developed by American Academy of Pediatrics (AAP).⁶ Any qualified provider operating within the scope of his or her practice, as defined by state law, can provide a screening service.⁷

- **Vision, Hearing, and Dental Services.** States are responsible for providing periodic vision, hearing, and dental examinations, as well as diagnosis and treatment for vision, hearing, and dental problems.
 - Vision services must include vision screens and diagnosis and treatment of vision defects, including eyeglasses.⁸
 - Hearing services must include hearing screens and diagnosis and treatment for defects in hearing, including hearing aids.⁹
 - Dental services must include dental screens, relief of pain and infections, restoration of teeth, and maintenance of dental health.¹⁰

Vision, hearing, and dental services must be provided according to separate periodicity schedules and at other intervals, as medically necessary. The periodicity schedule for each type of screen is to be determined by the state after consultation with recognized medical and dental organizations involved in child health care. An oral screening as part of a physical examination does not substitute for examination by a dental professional.¹¹

- **Necessary treatment.** The state Medicaid agency must assure the provision of necessary treatment and services listed within the scope of benefits in the Medicaid Act that are necessary to correct or ameliorate a physical or mental condition of the individual child.¹²
- **Outreach and informing.** The state Medicaid agency must inform eligible individuals of the availability of EPSDT services, the importance of immunizations, and the benefits of preventive care. This notification must be both written and oral, using clear and nontechnical language. In addition, prior to the due date of a child's periodic examination, the agency must offer and, if needed, provide assistance with transportation and appointment scheduling.¹³

EPSDT Reporting Requirements

The Medicaid Act requires each state to report annually on EPSDT, by age group and basis of eligibility:

- the number of children provided screening services;
- the number of children referred for corrective treatment;
- the number of children receiving dental services;
- the number of blood lead tests, and
- the participation rates for the program.

The Medicaid Act provides that the Secretary of the Department of Health and Human Services shall, not later than July 1, 1990, and every 12 months thereafter, develop and set annual participation goals for each state for participation of children in EPSDT.¹⁴ In 1990, the secretary established that each state should be providing at least 80 percent of EPSDT recipients with timely medical screens by fiscal year 1995.¹⁵ The Secretary has not subsequently revised these screening goals.

States are to report EPSDT compliance on the Form CMS-416 and to submit the complete form to CMS by April 1 of each year. The information on the form serves to:

- demonstrate the state's attainment of participant and screening goals; and
- show trend patterns and projections from which decisions can be made to ensure that eligible children are given the best possible health care.¹⁶

EPSDT Reporting Requirements

The 1999 Revisions

Effective fiscal year 1999, CMS revised the Form CMS-416 significantly.¹⁷ A copy of the Form is included as Appendix B.

The revisions improved the Form in some ways, including requiring reporting on dental services and lead blood testing. On the other hand, the revised Form CMS-416 includes other changes that, while making the reporting easier for states and managed care plans, result in the loss of important information. For example, the form allows states to report using their own periodicity schedules, which makes it difficult to compare across states. It also eliminated reporting for vision and hearing assessments.

For more details about the 1999 changes, see the third edition of this Chart Book. For additional discussion of the revised Form CMS-416, please consult the CMS instructions for completing the form, included at Appendix C; and the NHeLP publication, *Measuring Preventive Health Performance: A Primer for Child Advocates on the Medicaid EPSDT Reporting Form* (Oct. 2003).

The Form CMS-416 is revised regularly. The most recent revision, in 2021, contained only minor changes.

TABLE A

American Academy of Pediatrics' Periodicity Recommendations versus State Periodicity Schedule
Reported on Form CMS-416 (FY 2019)

	<1	1-2	3-5	6-9	10-14	15-18	19-20
AAP	7	5	3	4	5	4	2
State							
AL	5	4	3	4	5	4	2
AK	6	5	3	4	5	4	2
AZ	7	4	3	4	5	4	2
AR	5	4	3	2	5	4	2
CA	7	5	3	4	5	4	2
CO	7	5	3	4	5	4	2
CT	6	5	3	4	5	4	2
DE	7	5	3	4	5	4	2
DC	7	5	3	4	5	4	2
FL	7	5	3	4	5	4	2
GA	7	5	3	4	5	4	2
HI	6	4	3	2	3	2	1
ID	6	5	3	4	5	4	2
IL	6	5	3	4	5	4	2
IN	7	5	3	4	5	4	2
IA	6	5	3	4	5	4	2
KS	6	5	3	4	5	4	2
KY	5	4	3	2	5	4	2
LA	7	5	3	4	5	4	2
ME	7	5	3	4	5	4	2
MD	6	5	3	4	5	4	2
MA	6	4	3	4	5	4	2
MI	7	4	4	4	5	4	2
MN	5	5	3	4	5	4	2
MS	6	5	3	4	5	4	2
MO	5	4	3	2	3	2	1

	<1	1-2	3-5	6-9	10-14	15-18	19-20
AAP	7	5	3	4	5	4	2
State							
MT	7	5	3	4	5	4	2
NE	6	5	3	4	5	4	2
NV	7	5	3	4	5	4	2
NH	7	5	3	4	5	4	2
NJ	6	4	3	4	5	4	2
NM	7	5	3	4	5	4	2
NY	6	4	4	4	5	4	2
NC	5	4	3	4	5	4	2
ND	7	5	3	4	5	4	2
OH	7	5	3	4	5	4	2
OK	7	5	3	4	5	4	2
OR	6	5	3	4	5	4	2
PA	7	5	3	4	5	4	2
PR	7	4	3	4	5	4	2
RI	6	4	3	4	5	4	2
SC	7	5	3	4	5	4	2
SD	7	5	3	4	5	4	2
TN	7	5	3	4	5	4	2
TX	7	5	3	4	5	4	2
UT	7	5	3	4	5	4	2
VT	7	5	3	4	5	4	2
VA	7	5	3	4	5	4	2
WA	5	4	3	2	3	2	1
WV	6	5	3	4	5	4	2
WI	7	5	3	4	5	4	2
WY	7	4	3	2	5	4	2



Less than AAP recommendations



Equal to AAP Recommendations



More than AAP Recommendations

The Accuracy of EPSDT Data

CMS provides detailed instructions to states for completing the Form CMS-416. Despite this fact, there are numerous concerns with the data. Some child health advocates complain that the form overrepresents the number of children receiving EPSDT services because children are counted as having received an EPSDT screen even though they did not receive all five of the required elements of a Medicaid EPSDT screen. At the same time, some states and managed care organizations claim the forms *underrepresent* the number of children receiving EPSDT services, children receive screens from providers who do not report them, and the use of capitation payments means that claim forms for specific services are not submitted to the state, thus depriving it of valuable information about service delivery.

Not surprisingly, studies and government performance audits have revealed problems with data accuracy and collection and faulted CMS for failing to ensure data accuracy and enforcing reporting requirements.¹⁸ When studies have occurred, they have usually confirmed the low compliance rates reflected on the states' Forms.¹⁹ For example, a report from the Government Accountability Office (GAO) found that only about half of EPSDT-eligible Medicaid beneficiaries received recommended screenings and services in 2017. It also found that CMS has failed to collect data necessary to comply with the lead blood screening requirement. Moreover, it faulted CMS for failing to adjust performance measures to reveal whether an individual beneficiary received the recommended number of well-child screens. At the same time, the GAO recognized that CMS has improved the quality of EPSDT data and provided extensive technical assistance to states on data quality.²⁰

The Accuracy of EPSDT Data

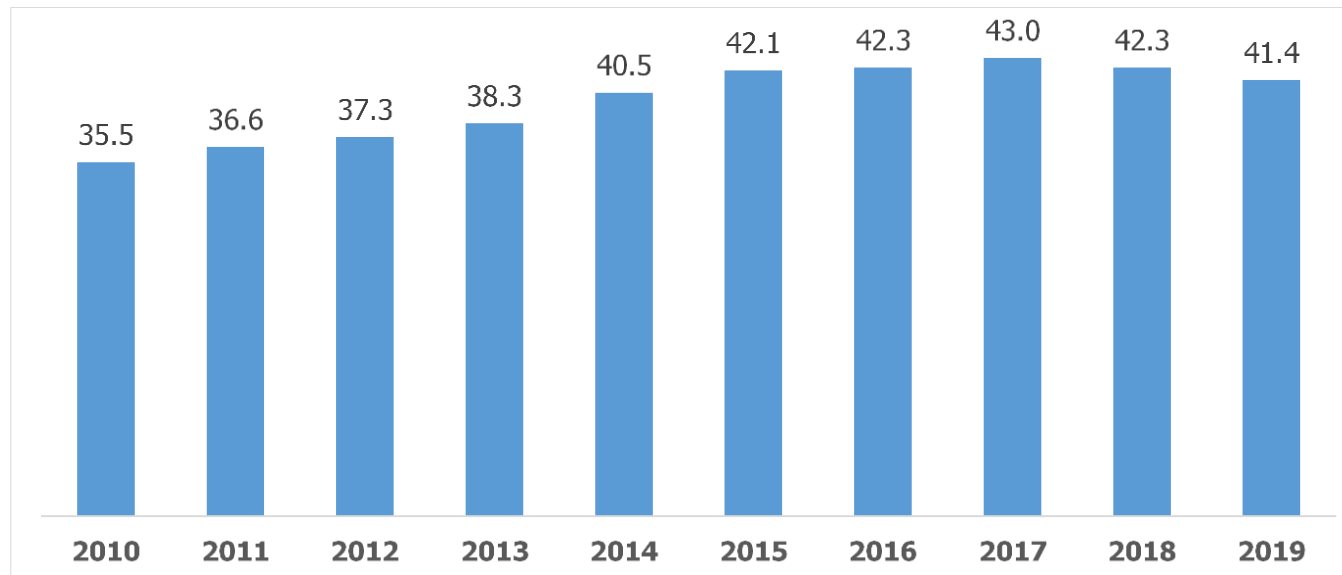
CMS has announced plans to increasingly rely on other data, such as that collected through the Child Core Set to assess and improve states' performance on EPSDT.²¹ However, the Form CMS-416 will continue to be a part of CMS oversight. Despite issues with CMS-416 data, it is the source most closely tailored to EPSDT's requirements and goals and therefore a key source of information for the federal and state governments, as well as advocates, scholars, and policy analysts.

NATIONAL PROFILE

Number of Eligible Children

In 2010 there were 35.5 million children eligible for EPSDT. This number continued to increase until 2017 when the number of eligible children reached 43 million. The following two years saw a decline of approximately 1,600,000 eligible children, from 43 million to 42.3 million in 2018 and another drop to 41.4 million in 2019.

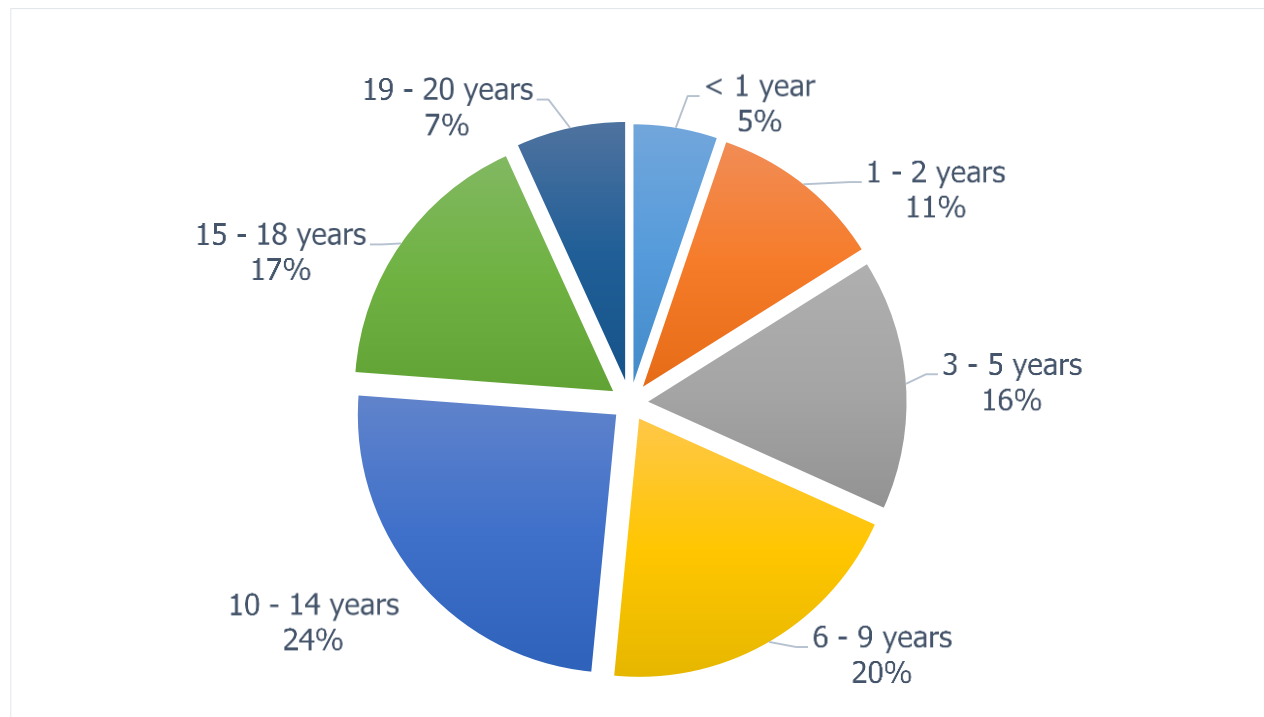
Figure 1: Number of Eligible Children
(in millions)



Eligibility by Age Group

Of the 41.4 million children eligible for EPSDT in 2019, 2.1 million (five percent) were under one-year-old, 4.5 million (11 percent) were between the ages of 1 and 2, 6.5 million (16 percent) were between the ages of 3 and 5, 8.2 million (20 percent) were between the ages of 6 and 9, 10.2 million (24 percent) were between the ages of 10 and 14, 7.0 million (17 percent) were between the ages of 15 and 18, and 2.8 million (7 percent) were between the ages of 19 and 20.

Figure 2: Eligibility by Age Group - Fiscal Year 2019

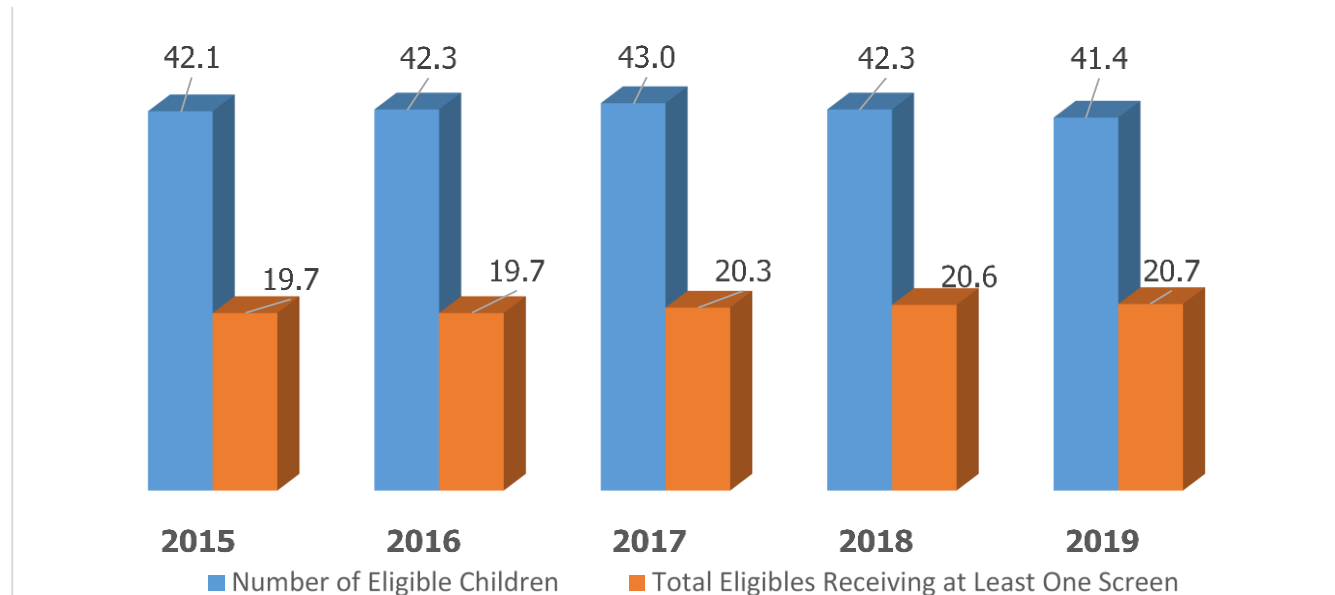


Number of Children Screened

The medical screen rate is the percentage of all eligible children who received at least one initial or periodic screen in any given year. Unlike the participant and screening rates on the Form CMS-416, the medical screen rate reflected here in Figure 3 is not adjusted according to the states' periodicity schedule or the average period of eligibility. The theory is that all eligible children, including adolescents, should receive at least one screen a year.

In 2019, approximately 20.7 million children received at least one initial or periodic screen.

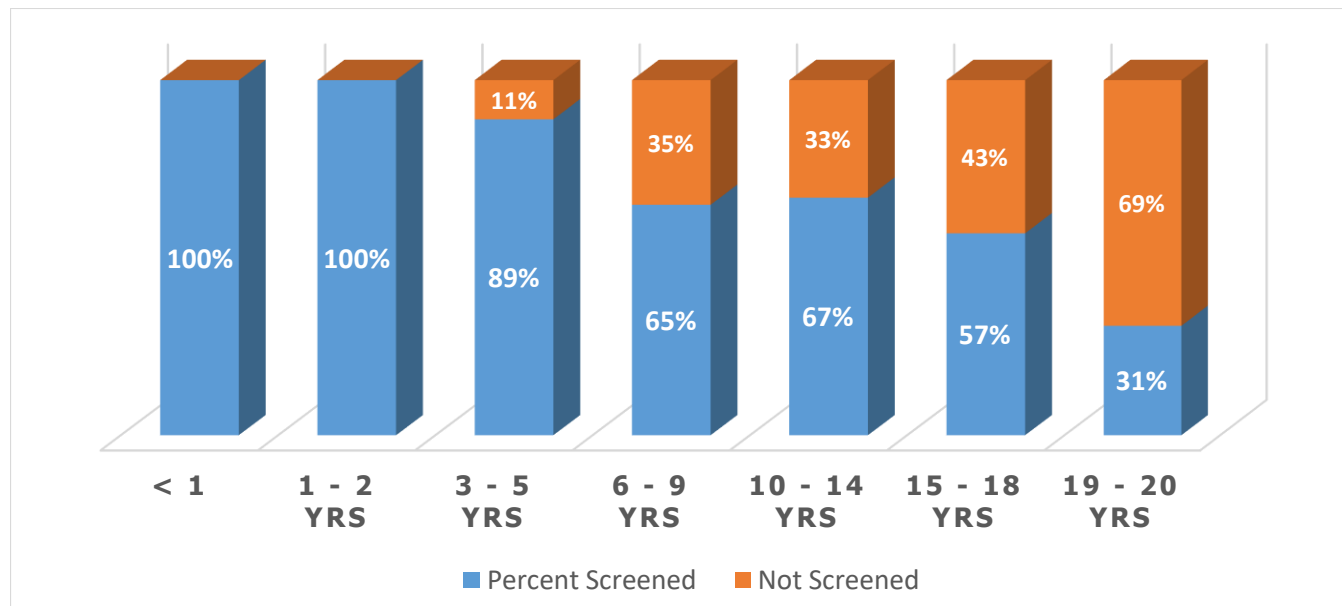
Figure 3: Number of Eligible Children vs. Number Receiving at Least One Initial or Periodic Screen (in millions)



Medical Screens by Age Group

Children under age one and children ages one to two were equally likely to receive at least one initial or periodic screen in 2019 when compared with all other age groups. Both age groups received more screens than expected based on eligibility. Eighty-nine percent of eligible children ages 3-5, followed by 65 percent of children ages 6-9, 67 percent of children ages 10-14, 57 percent of children ages 15-18, and 31 percent of children ages 19-20 received at least one initial or periodic screen in 2019.

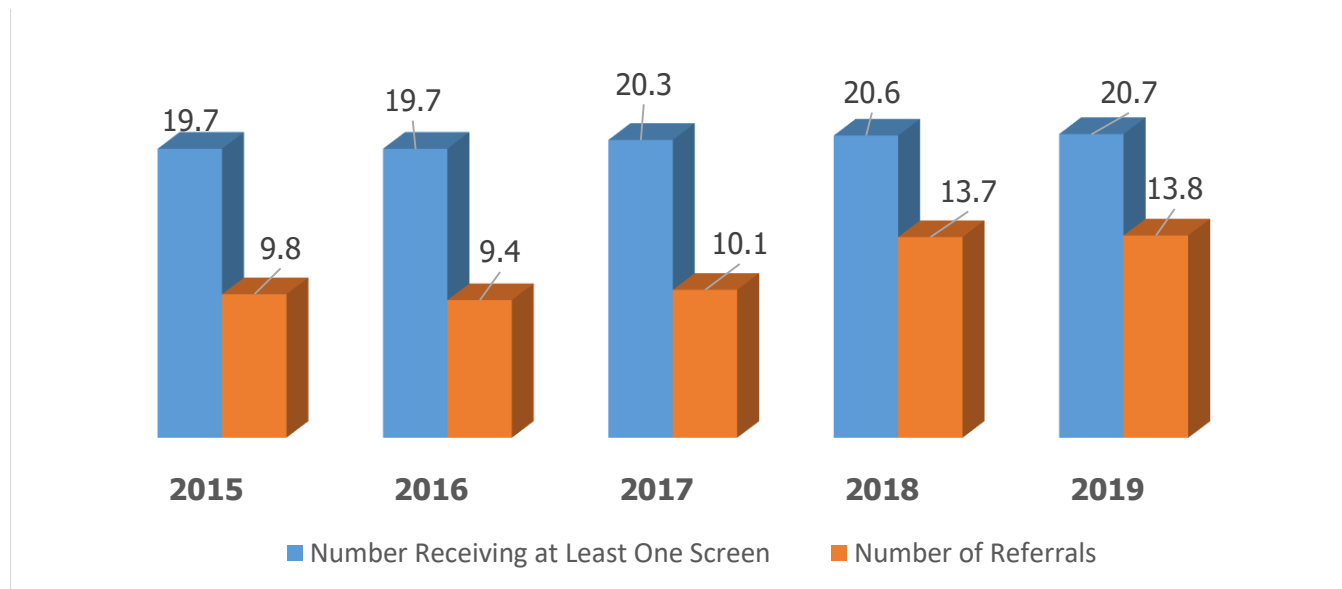
Figure 4: Medical Screens by Age Group – Fiscal Year 2019



Referrals for Corrective Treatment

The number of referrals for corrective treatment received by those children receiving at least one initial or periodic screen has risen overall from 2015 to 2019, starting at 9.8 million referrals in 2015 and increasing to 13.8 million by 2019. Additionally, the percentage of referrals increased from 49 percent in 2015 to 66 percent in 2018, with the largest increase occurring from 2017 to 2018.

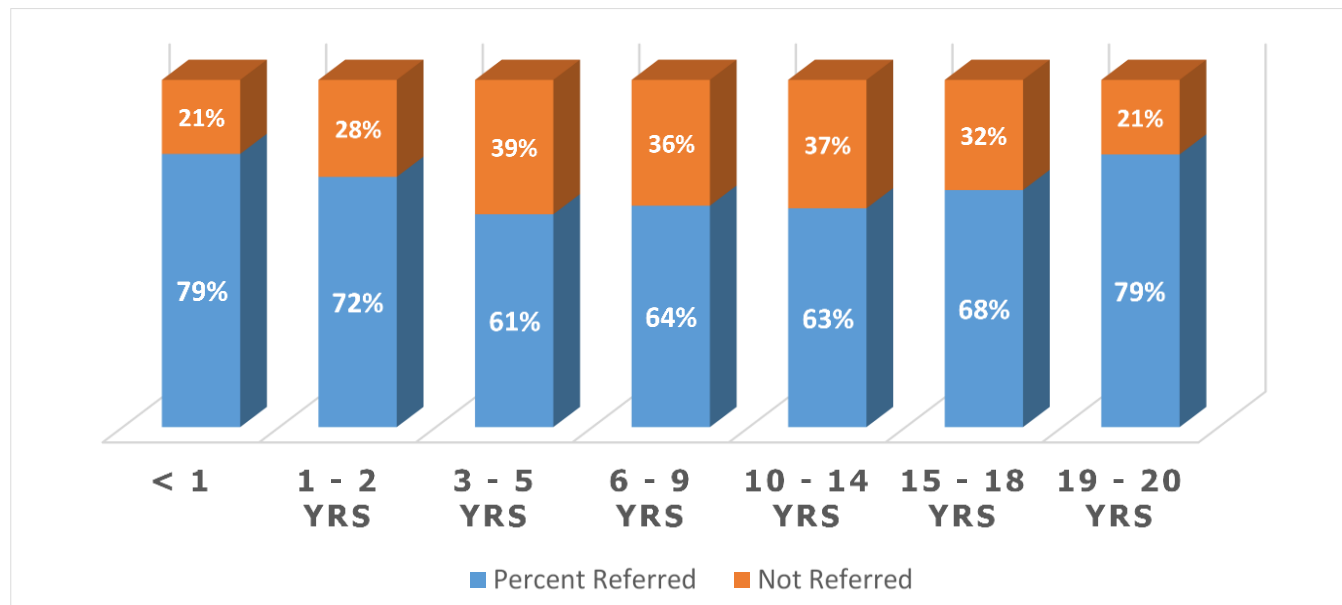
Figure 5: Number of Children Receiving at Least One Initial or Periodic Screen vs. Number of Children Receiving Referrals for Corrective Treatment (in millions)



Referrals for Corrective Treatment by Age Group

In 2019, of all children receiving at least one initial or periodic medical screen, 79 percent of infants, 72 percent of children between the ages of 1 and 2, 61 percent of children between the ages of 3 and 5, 64 percent of children between the ages of 6 and 9, 63 percent of children between the ages of 10 and 14, 68 percent of children between the ages of 15 and 18, and 79 percent of children between the ages of 19 and 20 received a referral for corrective treatment

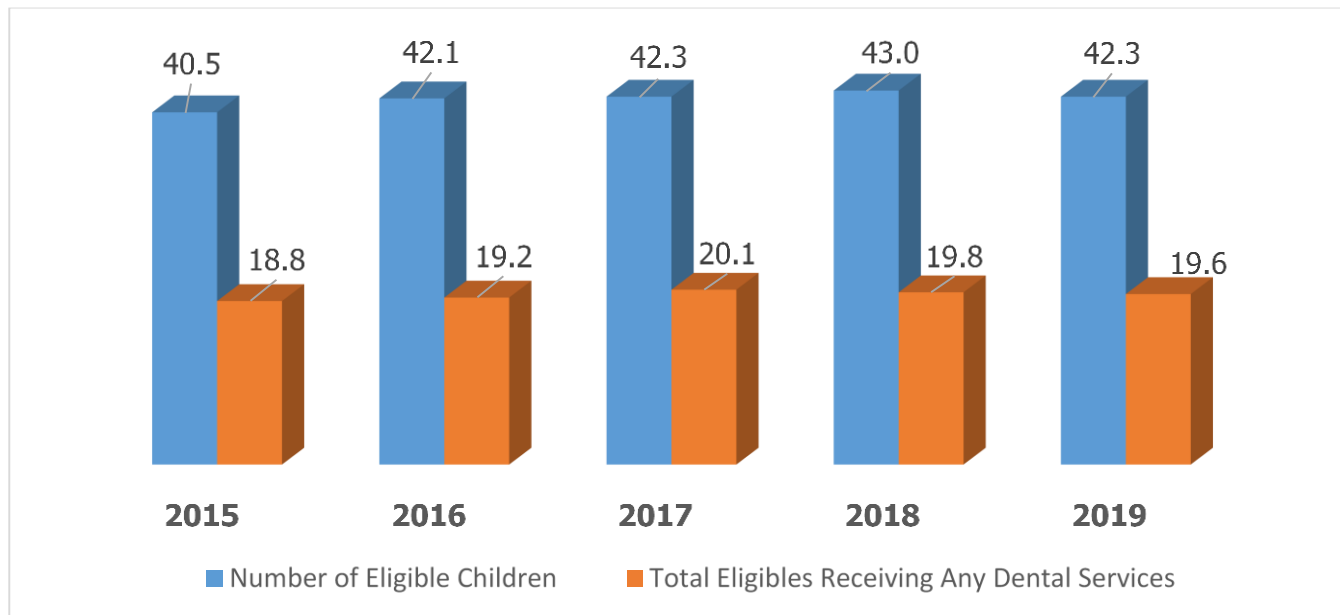
Figure 6: Referrals for Corrective Treatment by Age Group - Fiscal Year 2019



Number of Dental Services

The percentage of children receiving any dental services was 46 percent in 2015. It fluctuated slightly each subsequent year – 45 percent in 2016, 47 percent in 2017 – to down to 46 percent in 2018 and 2019.

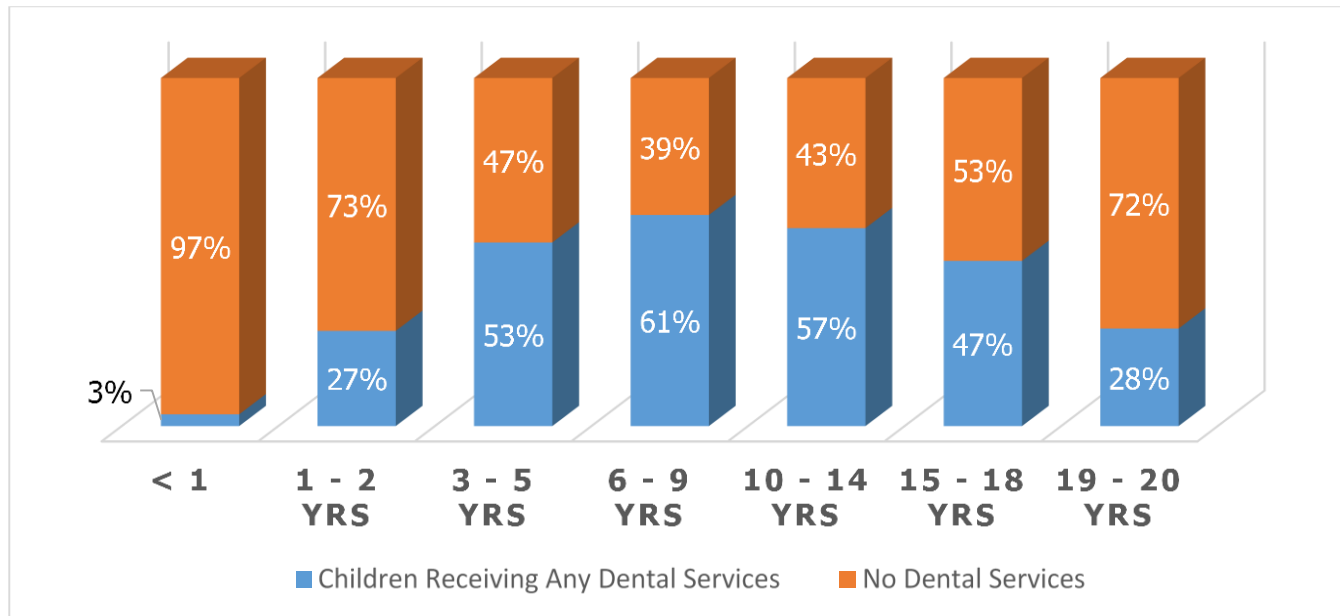
Figure 7: Number of Eligible Children vs Number Who Received Any Dental Services (in millions)



Dental Services by Age Group

In 2019, children between the ages of 6 and 9 were the most likely to receive dental services (61 percent). Three percent of infants, 27 percent of children between the ages of 1 and 2, 53 percent of children between the ages of 3 and 5, 57 percent of children between the ages of 10 and 14, 47 percent of children between the ages of 15 and 18, and 28 percent of children between the ages of 19 and 20 received dental services.

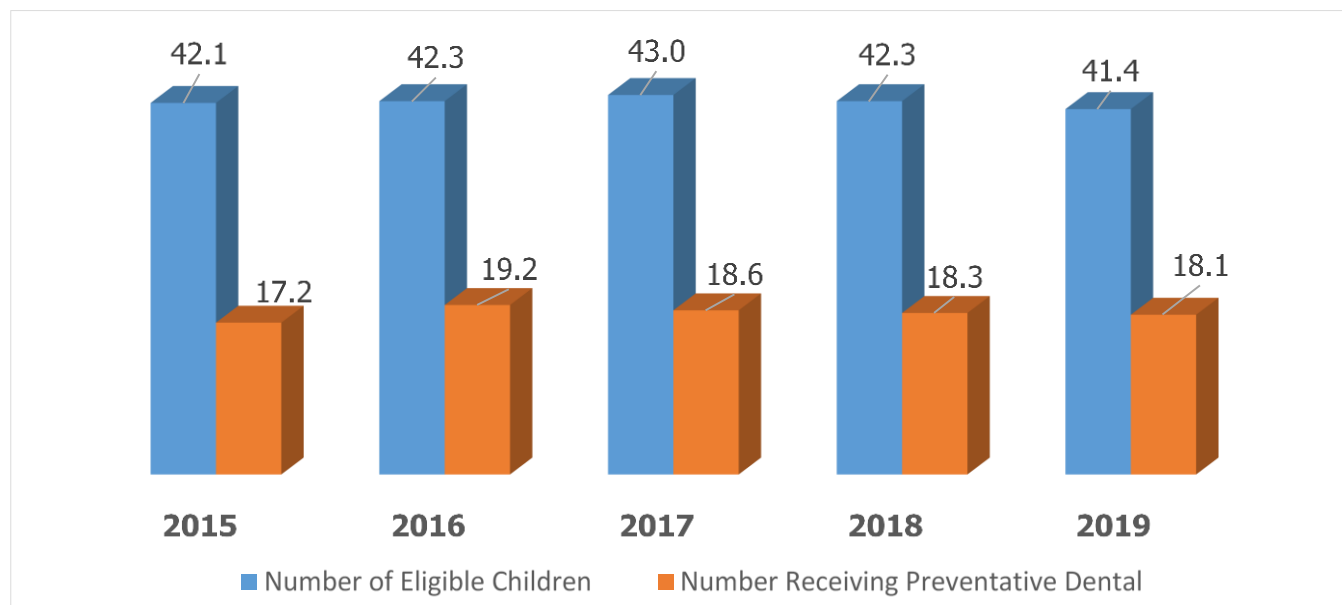
Figure 8: Dental Services by Age Group - Fiscal Year 2019



Preventive Dental Services

During 2015, 17.2 million children received preventive dental services. In 2016, this number rose to 19.2 million but declined in 2017 to 18.6 million. In 2018 and 2019 the number receiving dental services dropped slightly to 18.1 million.

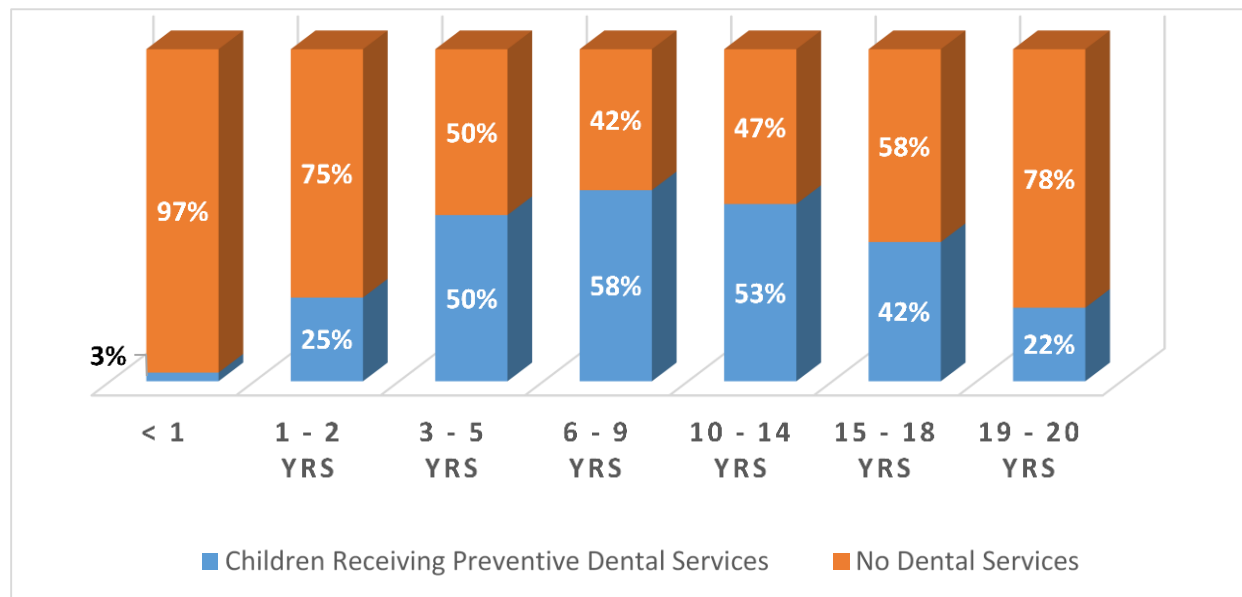
Figure 9: Number of Eligible Children vs. Number Who Received Preventive Dental Services (in millions)



Preventive Dental Services by Age

As with children receiving dental services, children between the ages of 6 and 9 were most likely to receive preventive dental services (58 percent). Three percent of infants, 25 percent of children between the ages of 1 and 2, 50 percent of children between the ages of 3 and 5, 53 percent of children between the ages of 10 and 14, 42 percent of children between the ages of 15 and 18, and 22 percent of children between the ages of 19 and 20 received preventive dental services.

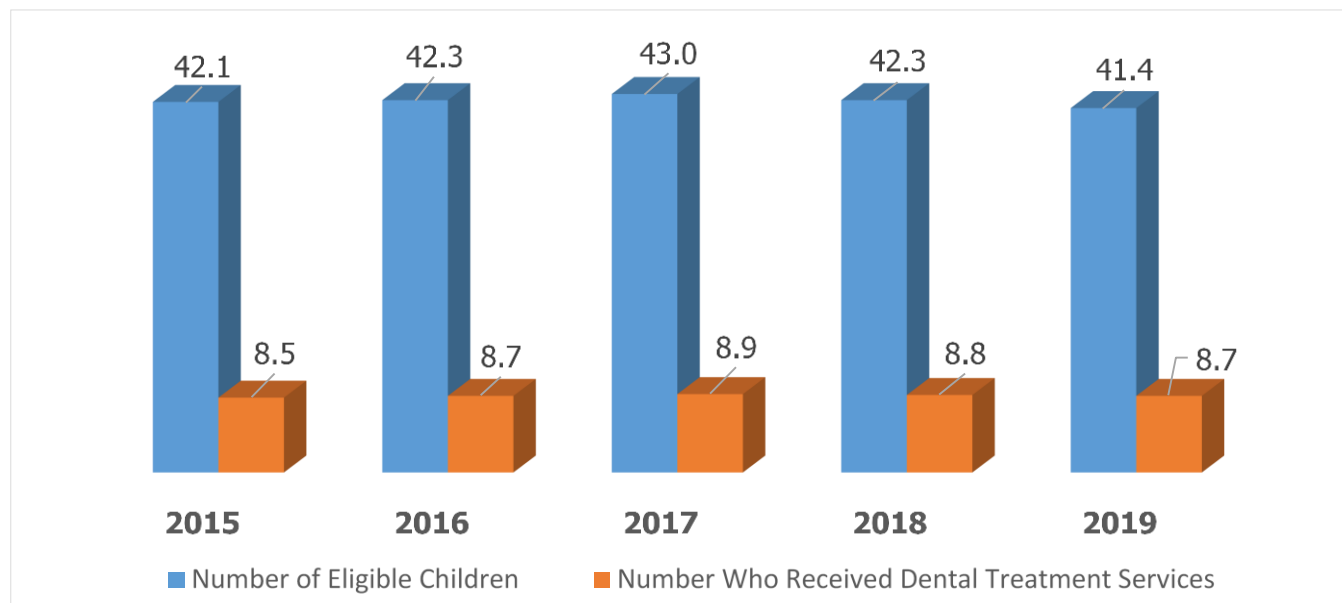
Figure 10: Preventive Dental Services by Age Group - Fiscal Year 2019



Dental Treatment Services

The percentage of eligible children receiving dental treatment services stayed fairly consistent at 20 percent from 2015 through 2018. In 2019 there was a small uptick to 21 percent of eligible children who received dental treatment services. There were only minor fluctuations in the number of children receiving treatment, peaking at 8.9 million in 2017.

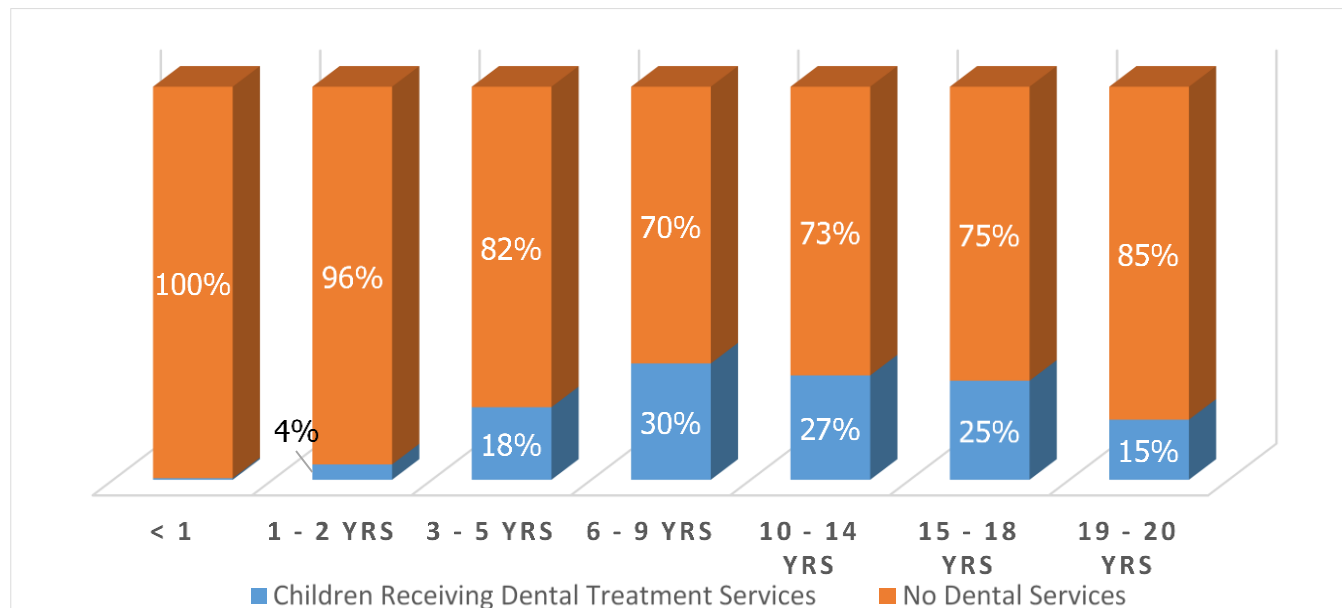
Figure 11: Number of Eligible Children vs. Number Who Received Dental Treatment Services (in millions)



Dental Treatment Services by Age Group

Children between the ages of 6 and 9 had the highest percentage of children receiving dental treatment services (30 percent). Less than one percent of infants, 4 percent of children between the ages of 1 and 2, 18 percent of children between the ages of 3 and 5, 27 percent of children between the ages of 10 and 14, 25 percent of children between the ages of 15 and 18, and 15 percent of children between the ages of 19 and 20 received dental treatment services.

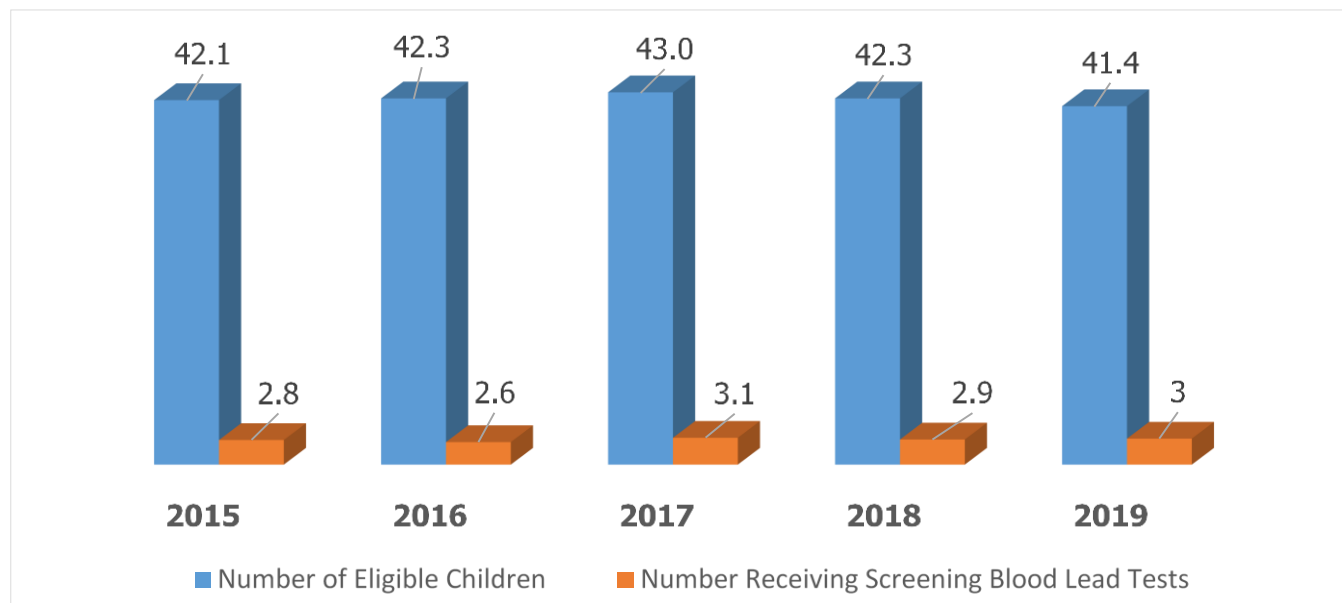
Figure 12: Dental Treatment Services by Age Group - Fiscal Year 2019



Screening Blood Lead Tests

The number of children up to age five receiving screening blood lead tests has fluctuated slightly from 2.8 million children in 2015, dropping to 2.6 million in 2016. The number increased in 2017 to 3.1 million before dropping again in 2018 to 2.9 million children. In 2019, 3 million children received screening blood lead tests. Approximately, 6 to 7 percent of eligible children received screening blood lead tests from 2015 to 2019.

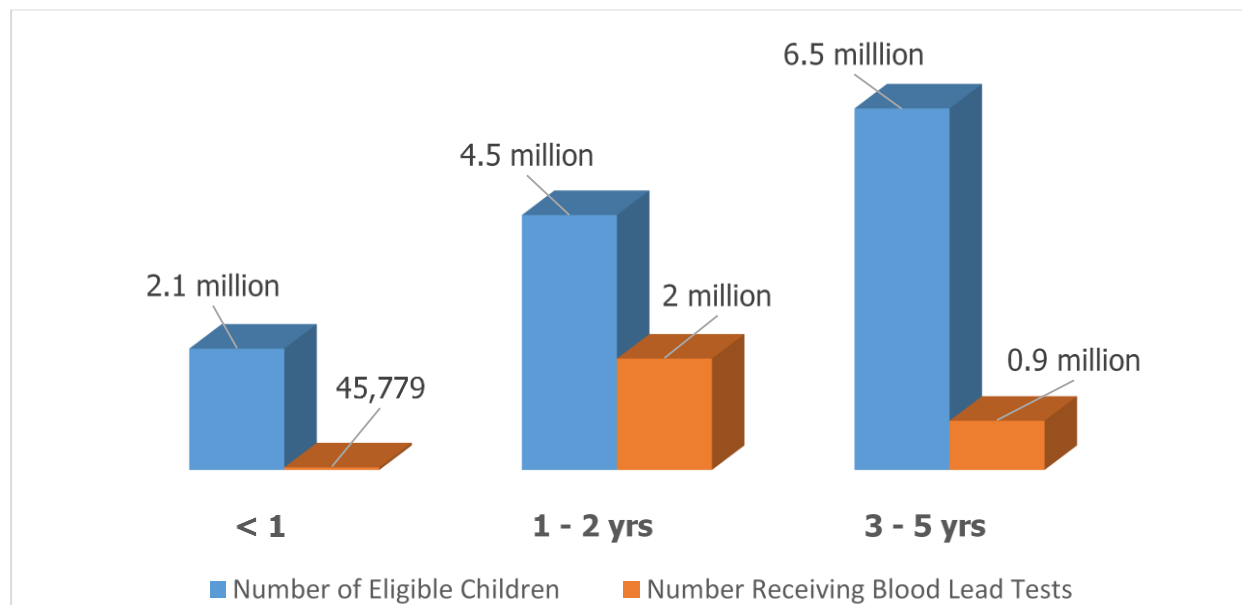
Figure 13: Number of Eligible Children vs. Number Receiving Screening Blood Lead Tests (in millions)



Screening Blood Lead Tests by Age Group

In 2019, of the 2.1 million eligible infants, 45,779 received screening blood lead tests. Out of 4.5 million eligible children between the ages of 1 and 2, just over 2 million received screening blood lead tests in 2019. And out of 6.5 million children between the ages of 3 and 5, only 920,292 received screening blood lead tests in 2019.

Figure 14: Screening Blood Lead Tests by Age Group - Fiscal Year 2019



STATE PROFILES

Table 1: Number of Children Eligible for EPSDT in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Alabama	668,366	43,489	80,965	106,510	132,769	164,401	110,596	29,636
Alaska	113,869	5,329	12,402	18,892	23,026	26,960	18,681	8,579
Arizona	953,818	48,454	100,134	145,560	184,050	237,356	164,129	74,135
Arkansas	476,857	25,200	52,454	75,290	94,131	115,995	78,332	35,455
California	5,945,296	254,472	550,473	872,540	1,156,899	1,507,172	1,113,623	490,117
Colorado	651,930	29,971	65,857	99,522	128,574	163,695	113,577	50,734
Connecticut	386,548	17,746	37,750	56,482	75,043	95,938	69,882	33,707
Delaware	118,034	6,098	12,974	18,429	23,449	28,815	19,340	8,929
District of Columbia	99,287	4,971	11,401	17,018	21,189	23,092	14,456	7,160
Florida	2,550,568	141,722	294,594	410,622	509,958	624,774	420,893	148,005
Georgia	1,408,785	82,412	165,215	226,429	285,264	356,802	231,223	61,440
Guam	26,492	1,344	3,200	4,726	5,709	6,229	4,011	1,273
Hawaii	178,932	8,991	18,681	27,692	36,620	43,335	30,555	13,058
Idaho	216,951	11,162	24,236	36,339	44,870	54,333	36,748	9,263
Illinois	1,424,879	73,171	152,070	218,811	275,938	352,084	245,759	107,046
Indiana	830,746	45,461	94,778	134,210	165,213	201,117	136,053	53,914
Iowa	352,687	20,991	41,366	55,683	68,425	84,017	55,567	26,638
Kansas	270,686	16,368	33,049	45,873	54,900	65,343	42,827	12,326
Kentucky	612,623	32,747	66,848	98,158	124,707	154,606	107,736	27,821
Louisiana	845,547	42,158	87,933	130,914	163,553	208,648	146,511	65,830
Maine	122,054	5,655	12,140	18,107	24,377	30,858	21,883	9,034
Maryland	731,332	37,597	78,295	114,491	147,377	181,637	119,476	52,459
Massachusetts	658,610	33,534	68,202	96,258	125,632	159,068	116,269	59,647
Michigan	1,205,284	63,399	130,058	185,839	236,992	285,158	206,531	97,307
Minnesota	616,923	29,589	66,799	99,604	124,426	149,765	102,351	44,389
Mississippi	405,684	26,456	51,305	70,107	88,791	110,731	44,415	13,879
Missouri	727,148	38,028	78,014	120,344	149,147	183,355	123,471	34,789

Table 1: Number of Children Eligible for EPSDT in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Montana	128,555	5,770	13,007	20,796	25,898	31,298	21,180	10,606
Nebraska	200,651	11,876	24,086	33,677	41,748	49,923	31,730	7,611
Nevada	401,178	21,106	45,143	64,652	81,303	99,103	64,469	25,402
New Hampshire	112,848	4,859	11,074	17,221	22,849	28,677	20,310	7,858
New Jersey	852,219	45,260	94,469	129,927	168,146	205,485	143,671	65,261
New Mexico	392,985	17,654	37,078	58,122	76,558	100,673	71,362	31,538
New York	2,551,260	139,751	281,353	376,096	483,290	590,412	439,814	240,544
North Carolina	1,299,579	71,015	148,820	220,786	259,749	318,502	215,295	65,412
North Dakota	57,296	3,427	7,754	10,550	11,305	12,643	7,793	3,824
Ohio	1,463,519	76,030	164,829	231,961	288,734	351,620	244,200	106,145
Oklahoma	621,188	34,130	70,290	101,219	127,295	157,122	105,033	26,099
Oregon	430,397	23,074	46,720	64,741	82,417	103,031	73,015	37,399
Pennsylvania	1,385,251	68,657	148,723	214,639	271,933	331,380	235,322	114,597
Puerto Rico	386,438	10,946	30,566	51,261	73,204	96,307	79,079	45,075
Rhode Island	141,504	6,015	13,616	22,154	27,377	34,802	25,735	11,805
South Carolina	770,389	37,886	81,727	124,701	157,268	196,396	127,958	44,453
South Dakota	94,028	5,214	10,904	15,840	19,999	23,712	14,921	3,438
Tennessee	903,456	50,879	104,261	143,823	179,617	218,278	145,509	61,089
Texas	3,746,100	232,420	449,529	622,954	756,709	931,902	608,083	144,503
Utah	234,161	15,725	30,563	39,078	47,522	57,244	35,499	8,530
Vermont	76,459	2,995	6,875	11,430	15,416	19,435	14,430	5,878
Virginia	766,207	41,432	87,668	121,314	153,678	187,781	123,216	51,118
Washington	916,201	43,221	93,767	144,460	185,338	227,961	155,636	65,818
West Virginia	239,724	12,214	25,144	35,941	47,365	57,788	41,758	19,514
Wisconsin	569,165	31,323	63,433	91,931	113,754	138,979	94,206	35,539
Wyoming	46,794	2,770	5,745	7,733	9,653	11,570	7,536	1,787
Nation	41,387,488	2,162,164	4,488,337	6,481,457	8,199,154	10,197,308	7,041,655	2,817,413

Table 2 - Number of Children Referred for Corrective Treatment in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Alabama	147,951	14,005	27,883	25,209	25,866	33,741	19,802	1,445
Alaska	23,415	3,600	5,325	4,253	3,036	4,073	2,750	378
Arizona	199,004	30,416	46,238	28,873	27,602	36,429	23,697	5,749
Arkansas	149,816	16,557	33,442	29,330	18,716	30,953	19,239	1,579
California	2,554,727	148,176	391,616	483,487	473,806	614,996	370,793	71,853
Colorado	174,372	19,020	39,277	28,956	24,796	35,400	22,437	4,486
Connecticut	0	0	0	0	0	0	0	0
Delaware	34,091	4,641	7,757	5,072	5,248	6,595	3,902	876
District of Columbia	38,273	3,397	7,201	5,684	6,409	8,103	5,614	1,865
Florida	1,747,870	107,965	251,096	326,484	354,293	408,078	245,098	54,856
Georgia	30,093	3,980	5,563	5,374	5,310	6,413	3,285	168
Guam*	1,048	0	DS	DS	133	367	406	111
Hawaii	41,671	3,690	8,257	6,904	6,532	8,393	6,486	1,409
	72,967	7,047	14,594	12,531	12,096	14,615	10,370	1,714
Illinois	507,948	47,805	99,944	99,211	67,975	110,043	64,966	18,004
Indiana	392,680	30,526	71,585	74,499	69,307	88,854	49,955	7,954
Iowa*	1,886	DS	DS	0	0	0	DS	DS
Kansas	96,015	11,930	21,138	17,954	14,799	18,410	10,625	1,159
Kentucky	150,396	21,020	36,181	25,298	20,083	28,356	17,456	2,002
Louisiana	231,814	20,458	26,259	34,286	47,583	59,213	37,158	6,857
Maine	42,555	3,738	7,457	6,464	7,966	9,572	6,080	1,278
Maryland	444,375	28,047	65,478	81,874	84,444	106,745	61,417	16,370
Massachusetts	318,099	9,835	40,231	50,687	63,564	78,833	55,641	19,308
Michigan	84,336	41,631	34,593	2,460	1,188	1,906	1,790	768
Minnesota	38,115	2,661	7,161	7,505	7,465	8,449	4,388	486
Mississippi	86,020	15,932	26,762	15,498	10,723	13,426	3,455	224
Missouri	65,302	8,126	11,463	9,034	10,377	13,866	10,092	2,344

*See Methodology, Appendix A

Table 2 - Number of Children Referred for Corrective Treatment in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Montana	46,917	5,153	9,075	9,584	7,265	10,272	4,866	702
Nebraska*	95	DS	DS	16	13	23	DS	0
Nevada	111,628	12,204	22,132	20,345	18,784	22,723	12,486	2,954
New Hampshire	32,684	2,905	6,917	5,301	5,580	6,476	4,682	823
New Jersey	99,460	154	10,244	23,503	21,643	22,353	15,105	6,458
New Mexico*	603	416	DS	DS	14	12	58	86
New York	1,341,343	114,727	210,896	229,081	246,443	292,672	191,889	55,635
North Carolina	363,846	51,506	91,639	64,595	50,277	62,774	37,795	5,260
North Dakota	21,645	2,472	4,582	4,326	3,438	4,459	2,166	202
Ohio	459,579	47,093	96,785	80,988	70,571	89,171	62,227	12,744
Oklahoma	36,193	944	1,364	4,943	8,777	10,628	8,162	1,375
Oregon	186,666	16,213	36,137	33,927	27,903	41,134	25,196	6,156
Pennsylvania	409,869	45,717	91,481	62,490	61,888	76,643	55,599	16,051
Puerto Rico	141,073	3,462	15,358	22,865	27,219	33,804	25,758	12,607
Rhode Island	50,813	3,743	9,280	8,128	8,362	10,816	8,169	2,315
South Carolina	228,879	24,710	47,906	35,912	39,764	50,863	26,739	2,985
South Dakota	9,749	3,315	3,222	1,066	653	829	622	42
Tennessee	334,365	31,760	70,854	56,666	56,311	68,505	39,351	10,918
Texas	1,707,007	159,781	328,114	298,382	298,366	387,809	218,511	16,044
Utah	23,542	7,309	13,215	1,434	509	651	DS	DS
Vermont	0	0	0	0	0	0	0	0
Virginia	234,715	27,002	56,780	42,704	34,070	43,337	25,871	4,951
Washington	28,434	7,746	6,548	2,898	3,385	4,325	2,933	599
West Virginia	83,584	7,675	15,609	13,311	15,010	17,506	11,977	2,496
Wisconsin	183,356	20,331	41,601	31,478	26,561	36,079	22,583	4,723
Wyoming	12,751	1,953	3,348	2,257	1,518	2,280	1,313	82
Nation	13,823,635	1,202,494	2,479,588	2,443,127	2,403,641	3,041,973	1,860,960	389,451

*See Methodology, Appendix A

Table 3 - Number of Children Receiving Any Dental Services in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Alabama	315,292	197	18,191	58,136	81,658	94,633	54,962	7,515
Alaska	51,849	189	3,628	9,238	12,905	14,414	8,906	2,569
Arizona	446,496	1,765	34,170	77,995	110,387	130,509	73,265	18,405
Arkansas	223,570	204	11,718	38,436	56,774	68,358	39,409	8,671
California	2,748,453	5,997	148,571	453,162	685,893	814,993	497,193	142,644
Colorado	340,526	2,060	27,161	56,007	80,463	99,898	58,486	16,451
Connecticut	234,488	474	16,574	37,760	54,612	67,773	42,761	14,534
Delaware	54,656	22	2,716	9,240	14,232	16,285	9,449	2,712
District of Columbia	56,772	59	4,273	11,211	14,438	15,338	8,513	2,940
Florida	989,264	5,121	58,680	173,222	266,729	297,644	160,903	26,965
Georgia	682,429	242	31,037	127,048	185,581	213,591	111,811	13,119
Guam	9,410	DS	534	2,042	2,645	2,552	1,394	DS
Hawaii	92,641	204	7,298	17,069	23,649	25,620	15,054	3,747
Idaho	106,313	175	6,872	19,778	27,723	31,571	17,772	2,422
Illinois	615,111	360	27,222	104,695	163,254	192,894	102,271	24,415
Indiana	354,808	416	18,576	62,376	94,397	105,431	60,552	13,060
Iowa	175,733	3,449	16,493	33,369	42,249	47,943	26,636	5,594
Kansas	110,685	165	6,302	20,909	30,149	33,033	17,751	2,376
Kentucky	296,329	244	13,600	52,870	79,477	90,799	52,064	7,275
Louisiana	415,076	403	25,144	76,110	100,446	120,003	71,867	21,103
Maine	44,076	145	2,093	7,002	11,859	13,360	7,726	1,891
Maryland	412,014	314	25,518	72,042	103,438	121,626	68,920	20,156
Massachusetts	311,447	275	15,286	46,806	74,151	93,253	60,151	21,525
Michigan	467,925	220	19,794	78,861	127,600	136,065	83,145	22,240
Minnesota	248,276	172	10,184	42,664	65,293	74,526	43,244	12,193
Mississippi	203,979	163	12,282	40,627	56,312	68,062	22,830	3,703
Missouri	263,473	235	11,986	44,296	72,605	82,544	46,024	5,783

Table 3 - Number of Children Receiving Any Dental Services in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Montana	64,648	152	4,348	11,797	16,300	18,734	10,456	2,861
Nebraska	95,530	78	5,954	17,670	25,947	28,737	15,111	2,033
Nevada	157,424	211	8,435	26,477	41,833	48,862	26,074	5,532
New Hampshire	60,548	173	3,848	9,853	15,092	18,225	11,159	2,198
New Jersey	429,996	521	23,682	72,801	106,911	126,925	75,984	23,172
New Mexico	218,564	379	12,531	36,994	53,472	65,808	38,987	10,393
New York	1,122,579	1,093	47,454	183,744	286,276	329,353	199,365	75,294
North Carolina	651,308	853	37,140	123,222	163,308	194,358	113,152	19,275
North Dakota	18,110	DS	895	3,454	5,237	5,183	2,744	DS
Ohio	550,346	345	17,144	93,078	146,917	166,932	98,163	27,767
Oklahoma	296,485	392	14,561	51,409	76,715	92,864	53,980	6,564
Oregon	190,929	334	11,650	33,135	49,356	54,562	31,413	10,479
Pennsylvania	646,877	997	39,057	115,308	161,639	185,797	110,739	33,340
Puerto Rico	194,580	138	6,657	29,134	45,860	57,563	39,132	16,096
Rhode Island	69,731	59	4,377	11,615	17,112	20,662	12,836	3,070
South Carolina	375,493	252	21,800	64,981	99,240	116,197	62,411	10,612
South Dakota	43,002	113	3,023	7,942	11,561	12,840	6,735	788
Tennessee	428,534	274	23,252	73,884	109,505	128,060	74,152	19,407
Texas	2,324,748	38,877	269,673	427,004	538,411	639,860	364,380	46,543
Utah	109,152	246	7,356	20,910	28,886	32,728	17,121	1,905
Vermont	44,205	22	2,294	7,087	10,901	13,165	8,538	2,198
Virginia	376,263	283	22,279	66,234	96,912	114,516	63,614	12,425
Washington	519,985	3,442	49,215	95,691	126,833	144,950	80,745	19,109
West Virginia	116,611	64	4,254	19,799	30,202	34,828	21,809	5,655
Wisconsin	226,768	289	9,535	39,411	64,027	69,118	36,527	7,861
Wyoming	21,841	44	1,425	4,064	5,721	6,409	3,698	480
Nation	19,625,348	72,901	1,227,742	3,419,669	4,973,093	5,799,954	3,342,084	789,065

Table 4: Percentage of Children Receiving Any Dental Services in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Alabama	47%	<1%	22%	55%	62%	58%	50%	25%
Alaska	46%	4%	29%	49%	56%	53%	48%	30%
Arizona	47%	4%	34%	54%	60%	55%	45%	25%
Arkansas	47%	<1%	22%	51%	60%	59%	50%	24%
California	46%	2%	27%	52%	59%	54%	45%	29%
Colorado	52%	7%	41%	56%	63%	61%	51%	32%
Connecticut	61%	3%	44%	67%	73%	71%	61%	43%
Delaware	46%	<1%	21%	50%	61%	57%	49%	30%
District of Columbia	57%	1%	37%	66%	68%	66%	59%	41%
Florida	39%	4%	20%	42%	52%	48%	38%	18%
Georgia	48%	<1%	19%	56%	65%	60%	48%	21%
Guam*	36%	N/A	17%	43%	46%	41%	35%	N/A
Hawaii	52%	2%	39%	62%	65%	59%	49%	29%
Idaho	49%	2%	28%	54%	62%	58%	48%	26%
Illinois	43%	<1%	18%	48%	59%	55%	42%	23%
Indiana	43%	<1%	20%	46%	57%	52%	45%	24%
Iowa	50%	16%	40%	60%	62%	57%	48%	21%
Kansas	41%	1%	19%	46%	55%	51%	41%	19%
Kentucky	48%	<1%	20%	54%	64%	59%	48%	26%
Louisiana	49%	<1%	29%	58%	61%	58%	49%	32%
Maine	36%	3%	17%	39%	49%	43%	35%	21%
Maryland	56%	<1%	33%	63%	70%	67%	58%	38%
Massachusetts	47%	<1%	22%	49%	59%	59%	52%	36%
Michigan	39%	<1%	15%	42%	54%	48%	40%	23%
Minnesota	40%	<1%	15%	43%	52%	50%	42%	27%
Mississippi	50%	<1%	24%	58%	63%	61%	51%	27%
Missouri	36%	<1%	15%	37%	49%	45%	37%	17%

*See Methodology, Appendix A

Table 4: Percentage of Children Receiving Any Dental Services in 2019

	Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Montana	50%	3%	33%	57%	63%	60%	49%	27%
Nebraska	48%	<1%	25%	52%	62%	58%	48%	27%
Nevada	39%	1%	19%	41%	51%	49%	40%	22%
New Hampshire	54%	4%	35%	57%	66%	64%	55%	28%
New Jersey	50%	1%	25%	56%	64%	62%	53%	36%
New Mexico	56%	2%	34%	64%	70%	65%	55%	33%
New York	44%	<1%	17%	49%	59%	56%	45%	31%
North Carolina	50%	1%	25%	56%	63%	61%	53%	29%
North Dakota	32%	N/A	12%	33%	46%	41%	35%	N/A
Ohio	38%	<1%	10%	40%	51%	47%	40%	26%
Oklahoma	2%	1%	21%	51%	60%	59%	51%	25%
Oregon	44%	1%	25%	51%	60%	53%	43%	28%
Pennsylvania	47%	1%	26%	54%	59%	56%	47%	29%
Puerto Rico	50%	1%	22%	57%	63%	60%	49%	36%
Rhode Island	49%	1%	32%	52%	63%	59%	50%	26%
South Carolina	49%	<1%	27%	52%	63%	59%	49%	24%
South Dakota	46%	2%	28%	50%	58%	54%	45%	23%
Tennessee	47%	<1%	22%	51%	61%	59%	51%	32%
Texas	62%	17%	60%	69%	71%	69%	60%	32%
Utah	47%	2%	24%	54%	61%	57%	48%	22%
Vermont	58%	<1%	33%	62%	71%	68%	59%	37%
Virginia	49%	<1%	25%	55%	63%	61%	52%	24%
Washington	57%	8%	52%	66%	68%	64%	52%	29%
West Virginia	49%	<1%	17%	55%	64%	60%	52%	29%
Wisconsin	40%	<1%	15%	43%	56%	50%	39%	22%
Wyoming	47%	2%	25%	53%	59%	55%	49%	27%
Nation	47%	3%	27%	53%	61%	57%	47%	28%

Table 5: Number of Children Receiving Screening Blood Lead Tests in 2019

	Total	< 1	1-2	3-5		Total	< 1	1-2	3-5
Alabama	45,003	1,473	33,751	9,779	Montana	2,112	22	1,580	510
Alaska*	2,300	DS	1,837	DS	Nebraska	16,363	66	10,138	6,159
Arizona	38,202	495	24,755	12,952	Nevada	8,977	128	6,109	2,740
Arkansas	18,135	310	13,508	4,317	New Hampshire	7,915	50	6,180	1,685
California	321,829	1,834	206,418	113,577	New Jersey	117,379	2,644	65,149	49,586
Colorado	21,830	173	17,131	4,526	New Mexico	11,810	166	8,295	3,349
Connecticut	37,262	314	25,064	11,884	New York	214,446	4,943	131,327	78,176
Delaware	6,563	36	4,769	1,758	North Carolina	110,295	339	92,521	17,435
District of Columbia	8,990	381	6,303	2,306	North Dakota	2,074	17	1,225	832
Florida	181,090	2,488	135,528	43,074	Ohio	104,991	952	72,701	31,338
Georgia	96,653	2,142	84,496	10,015	Oklahoma	39,562	382	30,004	9,176
Guam*	41	0	DS	DS	Oregon	11,084	113	8,455	2,516
Hawaii	9,048	522	6,969	1,557	Pennsylvania	144,902	4,913	115,665	24,324
Idaho	5,934	12	4,847	1,075	Puerto Rico	70,382	286	12,643	57,453
Illinois	180,822	5,858	93,179	81,785	Rhode Island	11,061	205	5,968	4,888
Indiana	46,109	1,042	33,150	11,917	South Carolina	44,150	864	36,205	7,081
Iowa	28,716	123	19,064	9,529	South Dakota*	3,199	DS	2,036	DS
Kansas	13,399	181	9,538	3,680	Tennessee	71,176	592	55,794	14,790
Kentucky	38,911	450	28,264	10,197	Texas	294,136	1,616	225,216	67,304
Louisiana	49,659	251	35,939	13,469	Utah	6,783	20	5,260	1,503
Maine	4,056	26	3,070	960	Vermont	4,842	20	4,042	780
Maryland	74,359	1,040	50,388	22,931	Virginia	62,513	674	40,269	21,570
Massachusetts	91,708	2,841	47,251	41,616	Washington	16,465	113	12,675	3,677
Michigan	114,577	2,136	74,295	38,146	West Virginia	13,977	108	10,317	3,552
Minnesota	41,731	811	33,325	7,595	Wisconsin	53,129	942	34,902	17,285
Mississippi	31,501	175	19,513	11,813	Wyoming*	1,189	DS	DS	DS
Missouri	52,003	469	31,365	20,169					
					Nation	3,005,343	45,758	2,038,393	918,336

*See Methodology, Appendix A

STATE CHARTS

The following pages provide state-by-state summaries of the Form CMS-416 data for fiscal years 2015-2019 and charts showing the total number of eligible children and participant ratios. Charts indicating total number of eligible children are not uniformly scaled and cannot be compared across states.

Alabama 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	712,703	45,146	87,187	115,598	153,692	161,904	118,354	30,822
	FY 2016	707,830	44,285	87,689	112,865	151,599	161,501	119,178	30,713
	FY 2017	720,568	46,191	90,817	114,316	150,809	167,653	119,686	31,096
	FY 2018	681,427	39,263	83,368	108,560	140,237	166,379	114,073	29,547
	FY 2019	668,366	43,489	80,965	106,510	132,769	164,401	110,596	29,636
Screening Ratio									
	FY 2015	60%	65%	100%	66%	43%	48%	36%	13%
	FY 2016	62%	69%	100%	67%	45%	50%	38%	14%
	FY 2017	63%	63%	100%	68%	49%	53%	41%	16%
	FY 2018	59%	62%	100%	63%	44%	47%	38%	15%
	FY 2019	63%	57%	100%	69%	50%	54%	43%	17%
Participant Ratio									
	FY 2015	52%	81%	77%	63%	42%	46%	35%	13%
	FY 2016	53%	81%	78%	64%	44%	48%	37%	14%
	FY 2017	55%	76%	77%	65%	48%	51%	40%	16%
	FY 2018	52%	85%	79%	60%	43%	46%	37%	15%
	FY 2019	56%	78%	80%	66%	49%	52%	41%	17%
Referrals									
	FY 2015	111,141	10,815	22,683	19,031	20,026	23,384	14,174	1,028
	FY 2016	115,200	10,769	22,892	19,156	21,245	24,800	15,221	1,117
	FY 2017	128,166	12,536	25,232	20,815	23,067	28,155	17,091	1,270
	FY 2018	75,925	11,142	12,132	11,686	14,178	16,602	9,668	517
	FY 2019	147,951	14,005	27,883	25,209	25,866	33,741	19,802	1,445
Dental Services									
	FY 2015	324,004	146	18,152	61,658	91,632	89,359	55,628	7,429
	FY 2016	326,798	206	18,299	60,793	91,506	91,099	57,473	7,422
	FY 2017	323,467	184	18,333	59,059	88,211	92,929	57,253	7,498
	FY 2018	307,790	201	17,125	55,788	81,731	91,266	54,405	7,274
	FY 2019	315,292	197	18,191	58,136	81,658	94,633	54,962	7,515
Lead Screening ^a									
	FY 2015	44,165	1,538	31,575	11,052				
	FY 2016	47,846	1,635	34,296	11,915				
	FY 2017	46,246	1,613	33,970	10,663				
	FY 2018	43,012	1,408	32,124	9,480				
	FY 2019	45,003	1,473	33,751	9,779				

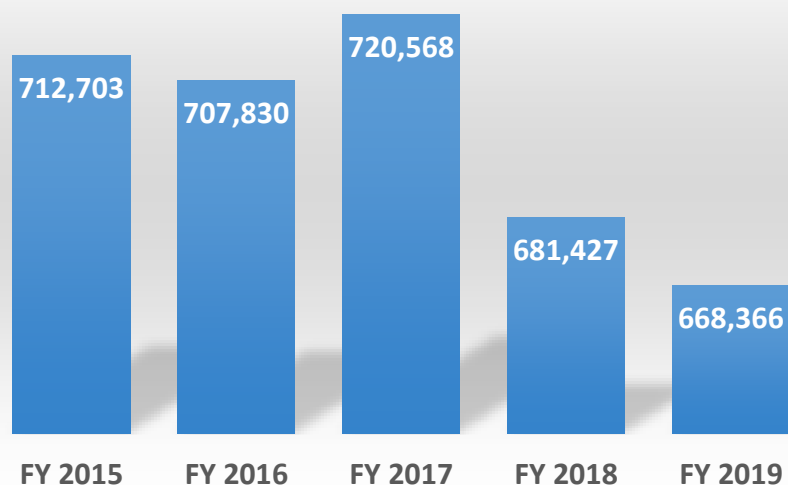
^a CMS requires this information for children under age six

Alabama 2015 – 2019

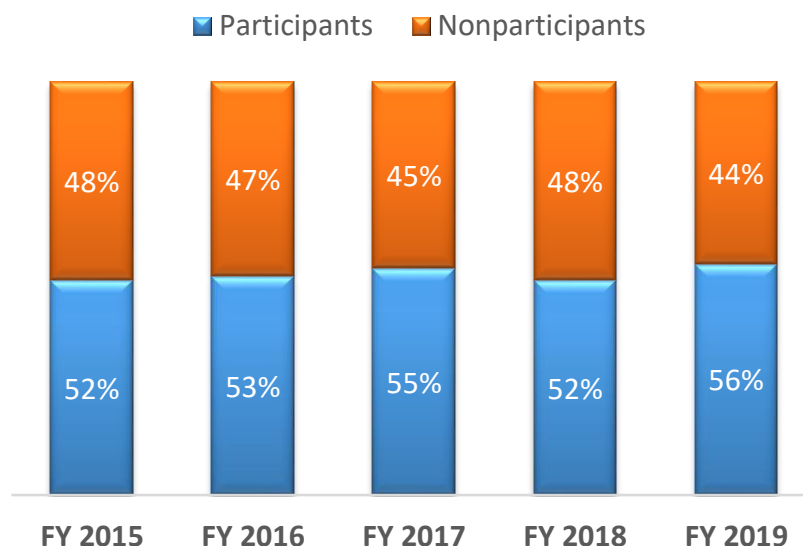
**AAP Periodicity Recommendations vs Alabama Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Alabama	2014 – 2019	5	4	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Alaska EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	97,235	6,014	12,019	16,072	20,404	21,388	16,063	5,275
	FY 2016	98,126	5,994	11,891	15,812	20,530	21,924	15,918	6,057
	FY 2017	106,483	5,890	12,942	16,999	21,858	23,994	17,396	7,404
	FY 2018	110,807	5,500	12,805	17,973	22,658	25,666	18,237	7,968
	FY 2019	113,869	5,329	12,402	18,892	23,026	26,960	18,681	8,579
Screening Ratio									
	FY 2015	53%	100%	65%	62%	27%	36%	34%	10%
	FY 2016	54%	100%	62%	63%	30%	39%	35%	9%
	FY 2017	51%	100%	60%	60%	29%	37%	33%	8%
	FY 2018	50%	100%	60%	58%	31%	37%	32%	8%
	FY 2019	48%	100%	59%	55%	31%	35%	29%	8%
Participant Ratio									
	FY 2015	40%	89%	66%	53%	25%	31%	29%	9%
	FY 2016	41%	90%	66%	53%	27%	34%	31%	8%
	FY 2017	39%	91%	64%	51%	26%	33%	29%	7%
	FY 2018	38%	90%	65%	49%	28%	32%	28%	7%
	FY 2019	36%	91%	63%	47%	27%	31%	26%	7%
Referrals									
	FY 2015	21,931	3,951	5,616	4,145	2,375	3,176	2,432	236
	FY 2016	22,810	4,050	5,361	4,090	2,681	3,652	2,701	275
	FY 2017	23,717	4,011	5,721	4,243	2,787	3,820	2,795	340
	FY 2018	23,135	3,680	5,466	4,032	2,970	3,925	2,734	328
	FY 2019	23,415	3,600	5,325	4,253	3,036	4,073	2,750	378
Dental Services									
	FY 2015	44,330	102	2,838	8,169	11,640	11,923	7,993	1,665
	FY 2016	40,326	61	2,514	7,467	11,033	11,182	6,691	1,378
	FY 2017	50,078	232	3,509	8,962	12,897	13,540	8,667	2,271
	FY 2018	51,714	162	3,788	9,099	13,097	14,247	8,949	2,372
	FY 2019	51,849	189	3,628	9,238	12,905	14,414	8,906	2,569
Lead Screening ^a									
	FY 2015	241	1	127	113				
	FY 2016	206	5	134	67				
	FY 2017	1,397	7	741	649				
	FY 2018	1,438	3	958	477				
	FY 2019	2,300	DS	1,837	DS				

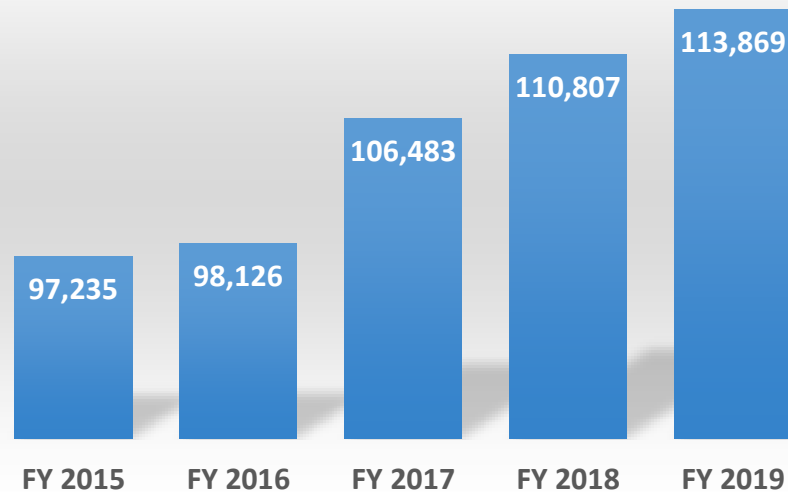
^a CMS requires this information for children under age six

Alaska EPSDT 2015 – 2019

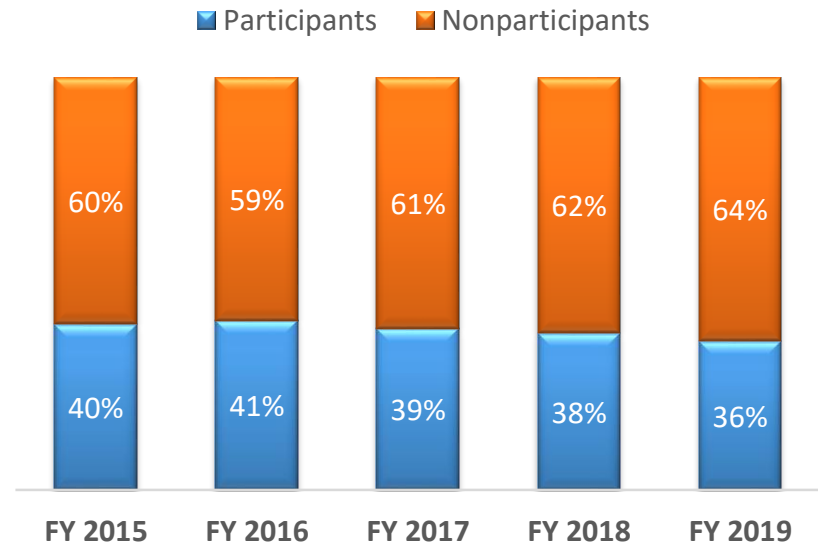
**AAP Periodicity Recommendations vs Alaska Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Alaska	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Arizona EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	826,864	52,663	101,152	136,959	183,192	194,251	130,662	27,985
	FY 2016	823,598	51,432	107,380	137,596	175,945	192,662	131,324	27,259
	FY 2017	998,104	52,039	112,325	152,279	200,729	240,354	164,770	75,608
	FY 2018	987,150	49,710	106,856	151,645	192,072	243,485	166,850	76,532
	FY 2019	953,818	48,454	100,134	145,560	184,050	237,356	164,129	74,135
Screening Ratio									
	FY 2015	67%	87%	100%	68%	49%	51%	38%	15%
	FY 2016	62%	84%	87%	61%	45%	48%	37%	14%
	FY 2017	65%	99%	95%	67%	49%	53%	42%	17%
	FY 2018	65%	100%	98%	66%	49%	53%	43%	19%
	FY 2019	66%	99%	100%	67%	49%	54%	43%	20%
Participant Ratio									
	FY 2015	52%	94%	73%	60%	44%	45%	33%	13%
	FY 2016	48%	94%	67%	54%	41%	43%	32%	13%
	FY 2017	50%	95%	73%	60%	45%	48%	38%	16%
	FY 2018	51%	95%	74%	60%	45%	49%	39%	18%
	FY 2019	51%	95%	75%	60%	46%	49%	39%	18%
Referrals									
	FY 2015	569,108	36,729	78,298	98,687	132,898	136,066	77,079	9,351
	FY 2016	550,768	35,954	79,450	97,221	123,042	130,936	75,720	8,445
	FY 2017	209,026	32,987	50,525	30,050	29,718	37,571	22,998	5,177
	FY 2018	203,526	31,430	49,061	29,137	27,955	37,144	23,282	5,517
	FY 2019	199,004	30,416	46,238	28,873	27,602	36,429	23,697	5,749
Dental Services									
	FY 2015	384,426	620	29,761	74,721	112,164	105,942	55,053	6,165
	FY 2016	355,598	853	29,612	71,211	99,709	97,453	51,549	5,211
	FY 2017	469,794	1,706	36,688	81,740	122,434	134,820	73,966	18,440
	FY 2018	456,521	1,652	34,673	79,072	114,925	133,616	74,183	18,400
	FY 2019	446,496	1,765	34,170	77,995	110,387	130,509	73,265	18,405
Lead Screening ^a									
	FY 2015	35,080	496	19,948	14,636				
	FY 2016	36,581	536	21,877	14,168				
	FY 2017	42,772	560	25,882	16,330				
	FY 2018	39,342	511	24,616	14,215				
	FY 2019	38,202	495	24,755	12,952				

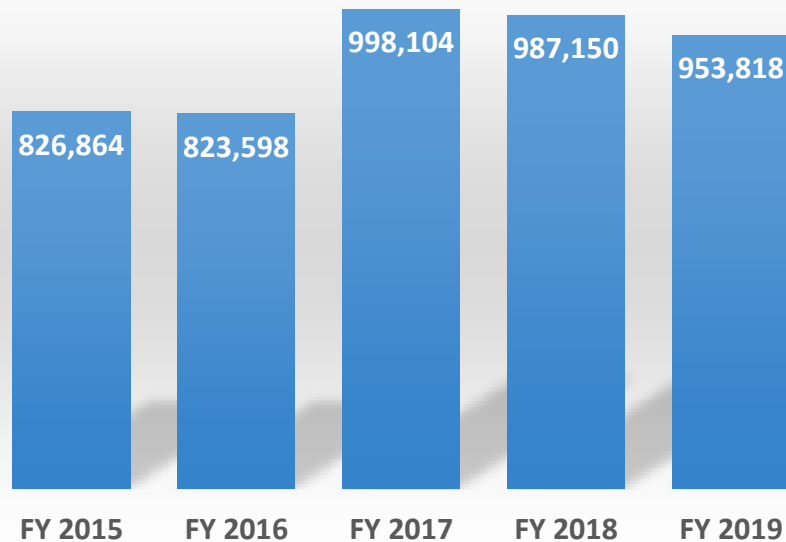
^a CMS requires this information for children under age six

Arizona EPSDT 2015 – 2019

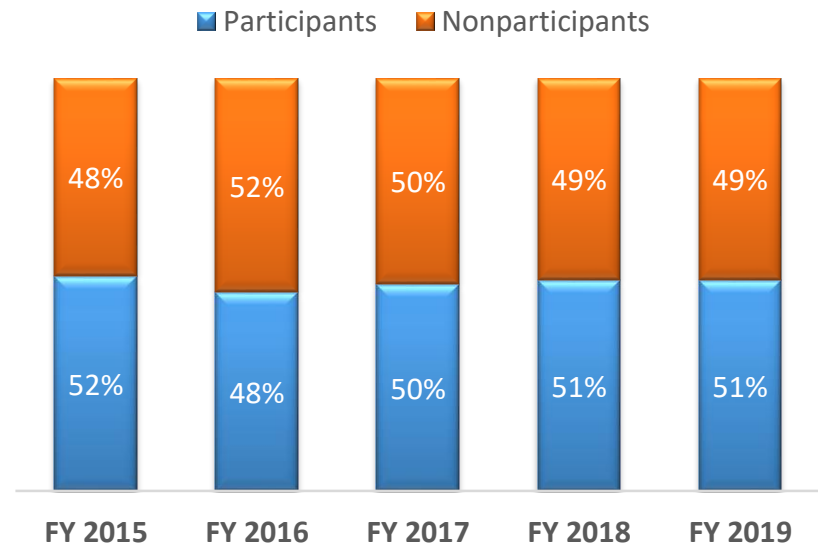
**AAP Periodicity Recommendations vs Arizona Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Arizona	2014 – 2019	7	4	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Arkansas EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	458,643	23,773	50,797	77,037	101,395	104,020	72,424	29,197
	FY 2016	488,547	26,350	54,008	79,127	105,881	112,363	78,662	32,156
	FY 2017	496,353	26,557	56,268	77,836	103,117	116,284	80,868	35,423
	FY 2018	478,694	25,748	54,084	75,539	95,765	114,412	77,917	35,229
	FY 2019	476,857	25,200	52,454	75,290	94,131	115,995	78,332	35,455
Screening Ratio									
	FY 2015	57%	85%	100%	59%	56%	35%	28%	5%
	FY 2016	61%	93%	100%	62%	63%	40%	32%	4%
	FY 2017	72%	100%	100%	73%	80%	49%	41%	6%
	FY 2018	70%	100%	100%	70%	72%	44%	37%	7%
	FY 2019	80%	100%	100%	81%	87%	54%	47%	10%
Participant Ratio									
	FY 2015	45%	88%	68%	57%	55%	34%	27%	5%
	FY 2016	48%	92%	67%	58%	61%	39%	30%	4%
	FY 2017	50%	94%	71%	60%	65%	40%	33%	4%
	FY 2018	45%	93%	71%	54%	56%	35%	29%	4%
	FY 2019	52%	94%	73%	63%	69%	43%	37%	7%
Referrals									
	FY 2015	127,232	14,809	28,396	29,139	18,455	22,531	13,115	787
	FY 2016	134,718	16,511	29,136	28,816	19,607	25,321	14,592	735
	FY 2017	145,236	17,015	34,665	28,117	18,870	28,896	16,834	839
	FY 2018	132,879	16,628	33,851	25,481	15,635	25,353	15,053	878
	FY 2019	149,816	16,557	33,442	29,330	18,716	30,953	19,239	1,579
Dental Services									
	FY 2015	223,541	112	10,364	42,045	64,874	62,920	37,050	6,176
	FY 2016	228,867	138	10,730	40,725	64,584	66,359	39,538	6,793
	FY 2017	231,995	173	12,248	40,150	62,649	68,775	40,703	7,297
	FY 2018	183,226	179	10,071	32,023	47,903	54,892	32,013	6,145
	FY 2019	223,570	204	11,718	38,436	56,774	68,358	39,409	8,671
Lead Screening ^a									
	FY 2015	15,100	290	9,224	5,586				
	FY 2016	16,115	251	10,539	5,325				
	FY 2017	19,470	292	13,692	5,486				
	FY 2018	17,399	404	12,598	4,397				
	FY 2019	18,135	310	13,508	4,317				

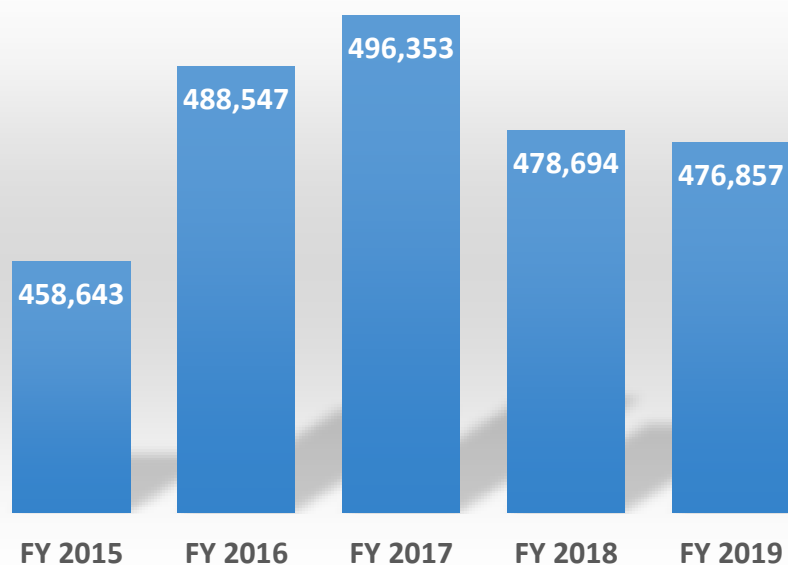
^a CMS requires this information for children under age six

Arkansas EPSDT 2015 – 2019

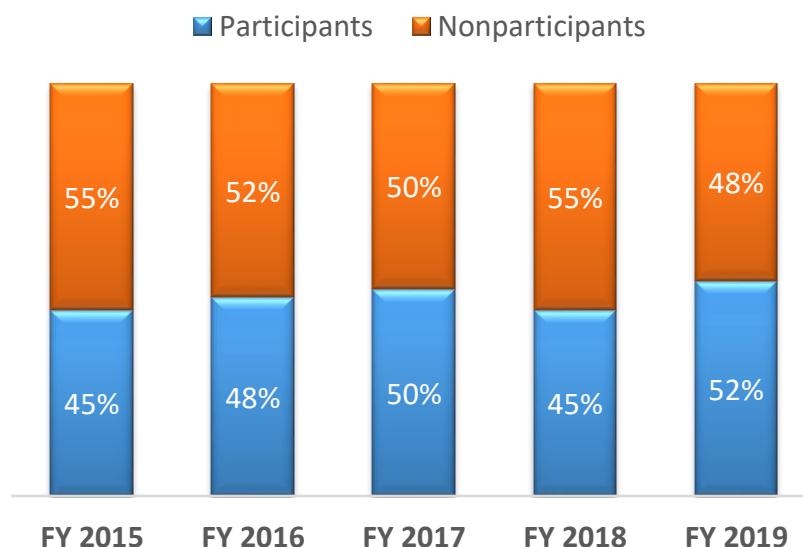
**AAP Periodicity Recommendations vs Arkansas Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Arkansas	2014 – 2016	6	3	3	2	5	4	2
	2017 – 2019	5	4	3	2	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

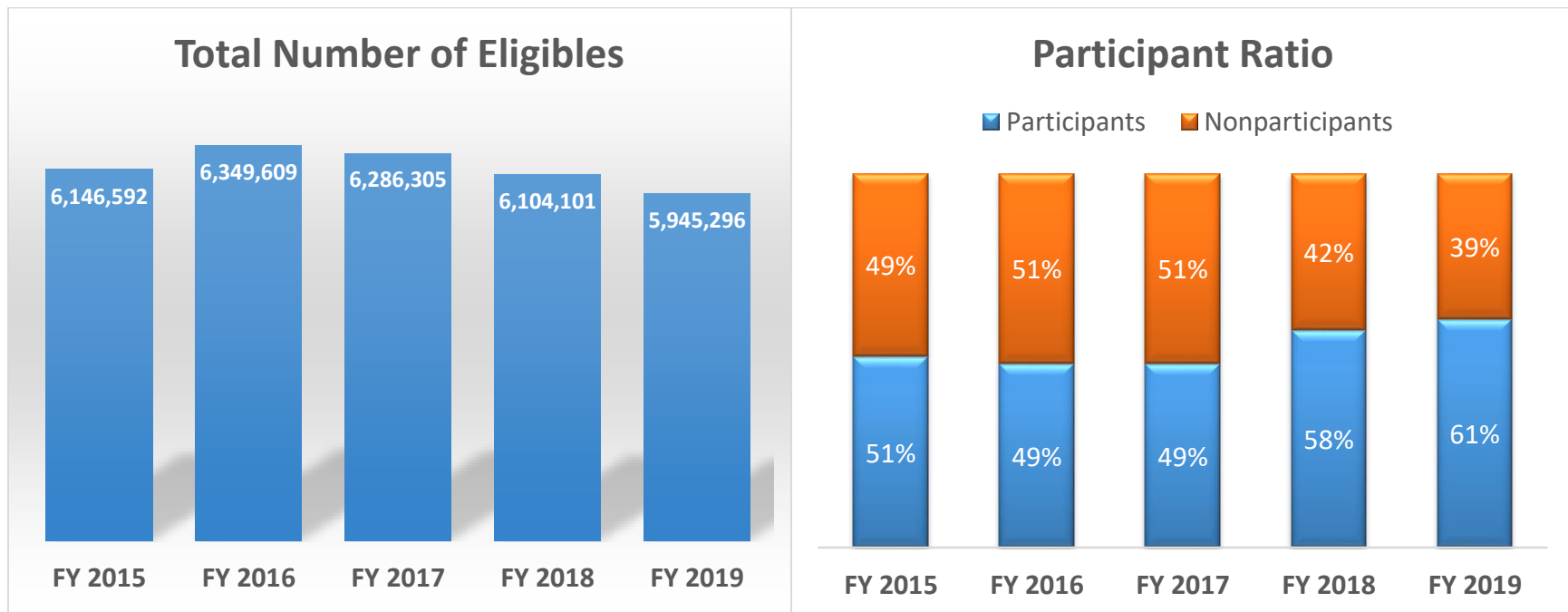
California EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	6,146,592	308,000	634,175	927,244	1,279,200	1,417,864	1,077,528	502,581
	FY 2016	6,349,609	303,960	634,472	938,122	1,292,103	1,503,450	1,160,041	517,461
	FY 2017	6,286,305	288,675	616,373	924,215	1,253,866	1,527,954	1,157,984	517,238
	FY 2018	6,104,101	266,427	586,965	895,978	1,196,445	1,520,731	1,136,704	500,851
	FY 2019	5,945,296	254,472	550,473	872,540	1,156,899	1,507,172	1,113,623	490,117
Screening Ratio									
	FY 2015	82%	70%	100%	100%	76%	73%	62%	39%
	FY 2016	61%	52%	99%	83%	55%	55%	42%	15%
	FY 2017	56%	51%	75%	78%	52%	52%	41%	16%
	FY 2018	88%	98%	100%	100%	79%	79%	65%	30%
	FY 2019	93%	100%	100%	100%	85%	83%	70%	34%
Participant Ratio									
	FY 2015	51%	78%	69%	68%	47%	46%	38%	21%
	FY 2016	49%	72%	69%	69%	46%	45%	35%	12%
	FY 2017	49%	71%	68%	68%	47%	47%	36%	14%
	FY 2018	58%	84%	76%	78%	55%	55%	45%	20%
	FY 2019	61%	85%	78%	81%	59%	58%	48%	23%
Referrals									
	FY 2015	52,856	8	8,701	13,250	12,095	12,008	6,264	530
	FY 2016	141,625	8,467	19,496	26,617	31,623	33,690	20,006	1,726
	FY 2017	123,497	7,721	16,711	24,004	26,382	30,064	17,371	1,244
	FY 2018	2,534,098	156,366	409,018	485,740	468,489	593,652	354,730	66,103
	FY 2019	2,554,727	148,176	391,616	483,487	473,806	614,996	370,793	71,853
Dental Services									
	FY 2015	2,569,524	3,630	144,367	467,033	715,405	694,332	419,068	125,689
	FY 2016	2,638,473	5,113	138,952	462,271	720,097	736,687	444,853	130,500
	FY 2017	2,786,093	5,641	158,313	472,389	727,893	797,194	485,995	138,668
	FY 2018	2,759,074	5,621	148,779	458,821	701,365	809,924	494,424	140,140
	FY 2019	2,748,453	5,997	148,571	453,162	685,893	814,993	497,193	142,644
Lead Screening ^a									
	FY 2015	288,141	2,465	186,999	98,677				
	FY 2016	244,376	2,312	152,927	89,137				
	FY 2017	328,894	2,380	209,456	117,058				
	FY 2018	320,721	2,135	206,378	112,208				
	FY 2019	321,829	1,834	206,418	113,577				

^a CMS requires this information for children under age six

California EPSDT 2015 – 2019

AAP Periodicity Recommendations vs California Schedules Reported on Form CMS-416 (2014-2019)			< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b California	2008 – 2019		7	5	3	4	5	4	2
	2014 – 2016		7	4	3	4	5	4	2
	2017 – 2019		7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

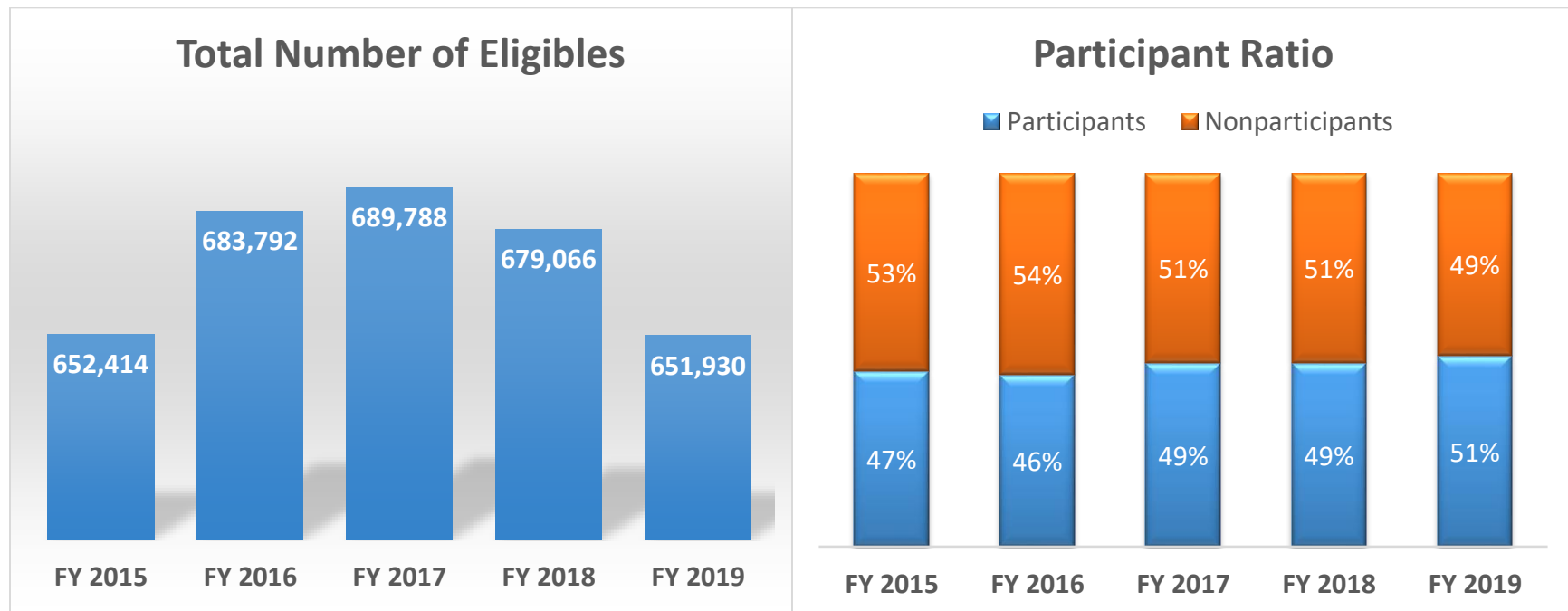
Colorado EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	652,414	34,018	69,811	103,382	142,918	153,880	101,581	46,824
	FY 2016	683,792	33,921	72,051	104,609	146,936	164,708	111,157	50,410
	FY 2017	689,788	32,478	71,927	104,200	144,093	169,246	115,307	52,537
	FY 2018	679,066	31,261	69,839	102,833	137,077	168,804	116,290	52,962
	FY 2019	651,930	29,971	65,857	99,522	128,574	163,695	113,577	50,734
Screening Ratio									
	FY 2015	61%	100%	94%	66%	42%	45%	34%	14%
	FY 2016	60%	100%	96%	66%	42%	44%	34%	14%
	FY 2017	63%	100%	100%	68%	45%	47%	36%	15%
	FY 2018	62%	100%	81%	69%	46%	48%	37%	15%
	FY 2019	65%	100%	84%	71%	47%	50%	39%	16%
Participant Ratio									
	FY 2015	47%	93%	76%	60%	40%	43%	32%	13%
	FY 2016	46%	92%	76%	60%	40%	42%	32%	13%
	FY 2017	49%	94%	78%	62%	43%	45%	34%	13%
	FY 2018	49%	96%	77%	63%	44%	45%	35%	13%
	FY 2019	51%	96%	78%	64%	45%	47%	37%	15%
Referrals									
	FY 2015	269,943	23,184	50,141	54,958	50,683	58,076	27,840	5,061
	FY 2016	278,008	22,834	52,072	54,878	51,476	60,527	30,907	5,314
	FY 2017	188,662	19,611	43,485	31,460	28,984	38,033	22,567	4,522
	FY 2018	182,283	19,753	41,583	30,424	26,946	36,692	22,512	4,373
	FY 2019	174,372	19,020	39,277	28,956	24,796	35,400	22,437	4,486
Dental Services									
	FY 2015	321,858	1,760	26,666	57,091	86,745	89,124	47,271	13,201
	FY 2016	347,641	2,127	27,012	58,865	91,186	98,670	54,578	15,203
	FY 2017	354,056	2,201	27,422	58,220	90,340	102,100	57,606	16,167
	FY 2018	346,800	1,852	27,112	57,229	85,074	100,777	58,034	16,722
	FY 2019	340,526	2,060	27,161	56,007	80,463	99,898	58,486	16,451
Lead Screening ^a									
	FY 2015	42,177	453	25,714	16,010				
	FY 2016	37,407	392	23,430	13,585				
	FY 2017	7,912	45	4,178	3,689				
	FY 2018	37,368	323	24,328	12,717				
	FY 2019	21,830	173	17,131	4,526				

^a CMS requires this information for children under age six

Colorado EPSDT 2015 – 2019

		(2014-2019)						
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b	2008 – 2019	7	5	3	4	5	4	2
Colorado	2014 – 2017	6	4	3	4	5	4	2
	2018 – 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Connecticut EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	382,416	18,517	39,007	57,268	78,771	89,266	68,461	31,126
	FY 2016	375,118	18,278	38,361	55,362	76,110	87,918	67,268	31,821
	FY 2017	379,773	18,372	38,014	55,647	75,698	90,996	68,360	32,686
	FY 2018	384,340	17,803	38,489	56,212	75,291	94,008	69,022	33,515
	FY 2019	386,548	17,746	37,750	56,482	75,043	95,938	69,882	33,707
Screening Ratio									
	FY 2015	80%	100%	100%	89%	65%	66%	60%	35%
	FY 2016	83%	100%	100%	92%	68%	70%	63%	39%
	FY 2017	81%	100%	100%	91%	66%	69%	62%	38%
	FY 2018	82%	100%	100%	92%	68%	69%	63%	38%
	FY 2019	82%	100%	100%	92%	68%	70%	64%	40%
Participant Ratio									
	FY 2015	66%	96%	87%	81%	63%	64%	56%	31%
	FY 2016	69%	97%	89%	83%	66%	67%	59%	35%
	FY 2017	68%	96%	88%	82%	64%	67%	58%	34%
	FY 2018	68%	96%	87%	82%	66%	67%	59%	36%
	FY 2019	69%	97%	87%	81%	67%	68%	60%	35%
Referrals									
	FY 2015	0	0	0	0	0	0	0	0
	FY 2016	0	0	0	0	0	0	0	0
	FY 2017	0	0	0	0	0	0	0	0
	FY 2018	0	0	0	0	0	0	0	0
	FY 2019	0	0	0	0	0	0	0	0
Dental Services									
	FY 2015	227,777	389	16,034	37,844	56,771	62,487	41,209	13,043
	FY 2016	230,851	477	16,901	37,896	56,486	63,323	41,873	13,895
	FY 2017	234,933	524	16,973	38,212	56,539	65,630	42,665	14,390
	FY 2018	235,479	483	16,870	38,391	55,365	67,170	42,587	14,613
	FY 2019	234,488	474	16,574	37,760	54,612	67,773	42,761	14,534
Lead Screening ^a									
	FY 2015	8,786	128	6,621	2,037				
	FY 2016	11,081	75	8,523	2,483				
	FY 2017	23,122	211	17,519	5,392				
	FY 2018	21,941	221	16,963	4,757				
	FY 2019	37,262	314	25,064	11,884				

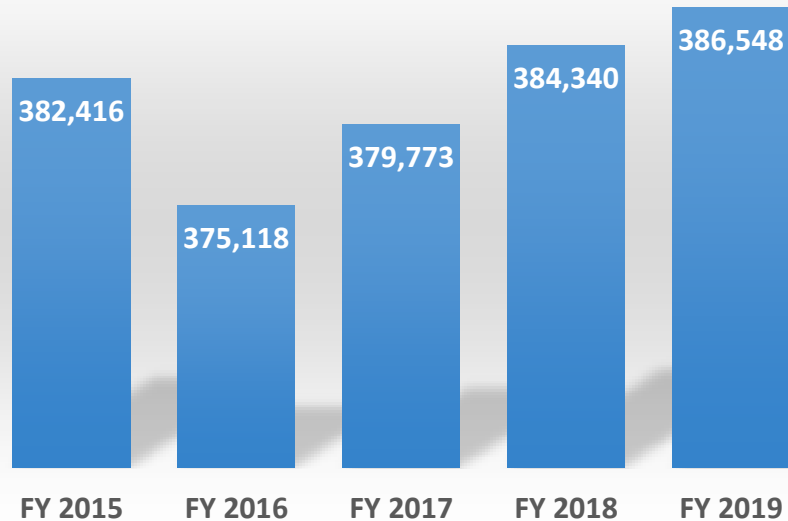
^a CMS requires this information for children under age six

Connecticut EPSDT 2015 – 2019

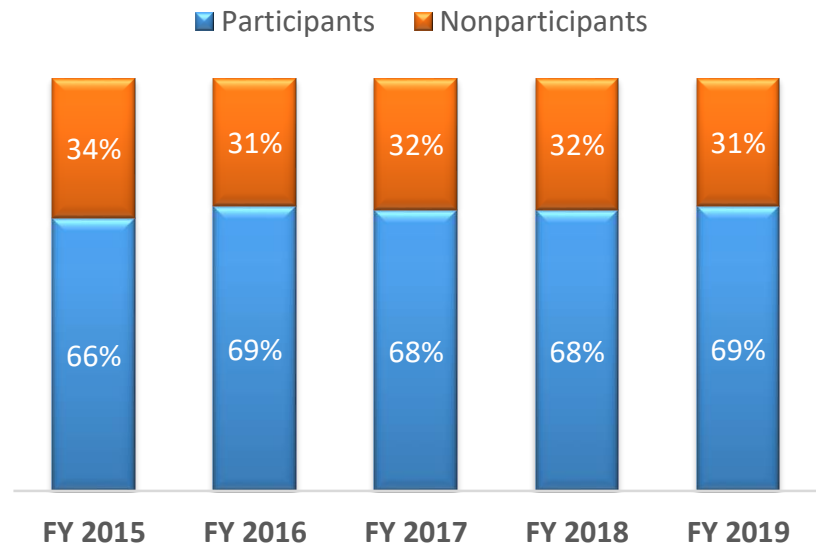
**AAP Periodicity Recommendations vs Connecticut Schedules Reported on Form CMS-416
(2014 – 2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Connecticut	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Delaware EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	117,701	6,456	13,198	18,927	25,230	26,632	18,207	9,051
	FY 2016	119,388	6,411	13,430	18,824	25,441	27,508	18,821	8,953
	FY 2017	137,069	6,483	15,104	21,124	29,465	32,929	22,370	9,594
	FY 2018	118,740	6,318	13,331	18,462	24,083	28,581	19,060	8,905
	FY 2019	118,034	6,098	12,974	18,429	23,449	28,815	19,340	8,929
Screening Ratio									
	FY 2015	74%	100%	100%	83%	61%	63%	48%	25%
	FY 2016	72%	100%	100%	81%	61%	60%	45%	24%
	FY 2017	84%	100%	100%	100%	80%	78%	62%	30%
	FY 2018	76%	100%	100%	80%	60%	57%	46%	22%
	FY 2019	71%	100%	92%	79%	58%	56%	45%	21%
Participant Ratio									
	FY 2015	57%	94%	79%	69%	55%	52%	40%	22%
	FY 2016	53%	98%	81%	63%	50%	46%	35%	19%
	FY 2017	54%	100%	79%	66%	50%	48%	38%	19%
	FY 2018	54%	93%	79%	65%	51%	48%	37%	18%
	FY 2019	55%	91%	77%	67%	53%	50%	40%	19%
Referrals									
	FY 2015	102	30	54	14	0	0	2	2
	FY 2016	0	0	0	0	0	0	0	0
	FY 2017	100	39	43	12	0	3	3	0
	FY 2018	32,887	4,744	8,027	4,809	5,167	6,030	3,333	777
	FY 2019	34,091	4,641	7,757	5,072	5,248	6,595	3,902	876
Dental Services									
	FY 2015	53,405	32	2,416	9,616	15,370	14,829	8,362	2,780
	FY 2016	54,947	25	2,629	9,556	15,420	15,670	8,836	2,811
	FY 2017	54,580	9	2,392	8,968	15,389	16,199	9,101	2,522
	FY 2018	53,823	12	2,848	9,192	14,232	15,879	9,051	2,609
	FY 2019	54,656	22	2,716	9,240	14,232	16,285	9,449	2,712
Lead Screening ^a									
	FY 2015	798	1	449	348				
	FY 2016	643	0	390	253				
	FY 2017	1,428	0	887	541				
	FY 2018	5,315	29	3,942	1,344				
	FY 2019	6,563	36	4,769	1,758				

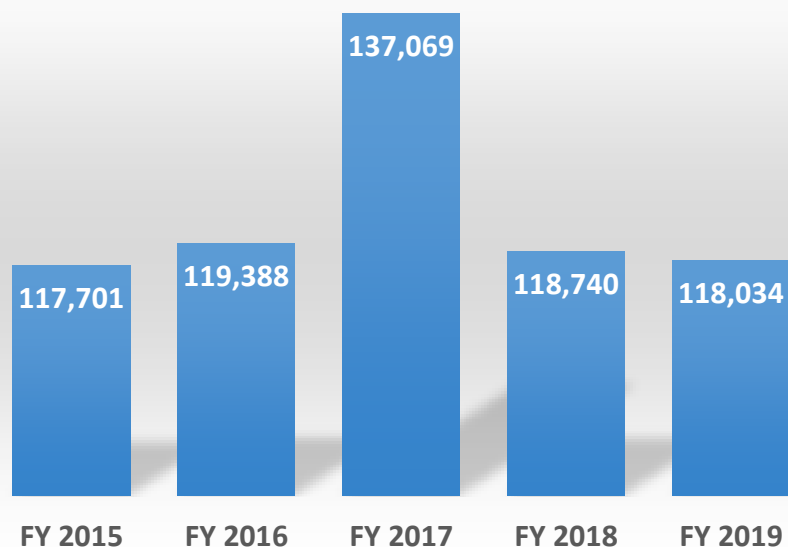
^a CMS requires this information for children under age six

Delaware EPSDT 2015 – 2019

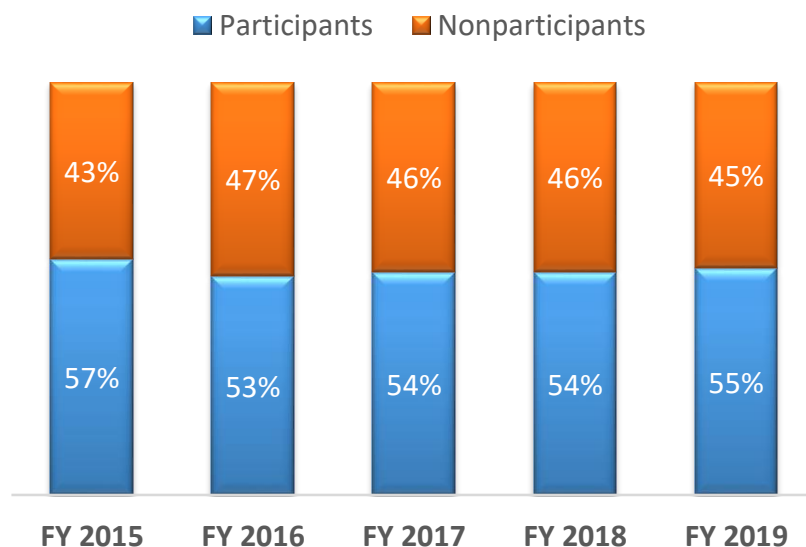
**AAP Periodicity Recommendations vs Delaware Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2015 – 2018	7	4	3	4	5	4	2
	2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

District of Columbia EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	98,670	5,705	11,955	17,109	20,971	19,835	15,012	8,083
	FY 2016	97,616	5,763	11,600	16,683	21,111	20,038	14,691	7,730
	FY 2017	94,543	5,483	11,405	15,750	20,361	20,143	14,062	7,339
	FY 2018	97,677	5,076	11,828	16,319	20,932	21,926	14,346	7,250
	FY 2019	99,287	4,971	11,401	17,018	21,189	23,092	14,456	7,160
Screening Ratio									
	FY 2015	88%	100%	95%	99%	83%	84%	75%	54%
	FY 2016	94%	100%	98%	100%	89%	92%	82%	50%
	FY 2017	100%	100%	100%	100%	94%	92%	77%	43%
	FY 2018	75%	100%	82%	81%	66%	65%	58%	34%
	FY 2019	74%	100%	81%	79%	66%	67%	60%	39%
Participant Ratio									
	FY 2015	63%	88%	78%	70%	62%	61%	51%	33%
	FY 2016	64%	89%	78%	72%	63%	64%	55%	32%
	FY 2017	66%	91%	80%	73%	66%	66%	57%	33%
	FY 2018	63%	94%	78%	69%	62%	61%	54%	31%
	FY 2019	63%	92%	78%	68%	62%	63%	55%	34%
Referrals									
	FY 2015	24,756	3,573	6,716	3,595	3,605	3,677	2,606	984
	FY 2016	27,403	3,385	5,676	4,126	4,626	4,855	3,541	1,194
	FY 2017	29,499	3,890	6,374	4,296	4,874	5,227	3,647	1,191
	FY 2018	54,441	3,872	8,906	9,879	11,348	11,685	6,768	1,983
	FY 2019	38,273	3,397	7,201	5,684	6,409	8,103	5,614	1,865
Dental Services									
	FY 2015	52,520	83	3,646	11,365	14,209	12,580	7,809	2,828
	FY 2016	50,942	41	3,597	10,582	13,926	12,375	7,707	2,714
	FY 2017	53,206	199	4,223	10,619	14,025	13,261	7,986	2,893
	FY 2018	55,395	38	4,134	10,763	14,492	14,712	8,374	2,882
	FY 2019	56,772	59	4,273	11,211	14,438	15,338	8,513	2,940
Lead Screening ^a									
	FY 2015	9,795	300	6,531	2,964				
	FY 2016	9,473	297	6,198	2,978				
	FY 2017	10,043	413	6,929	2,701				
	FY 2018	9,185	382	6,600	2,203				
	FY 2019	8,990	381	6,303	2,306				

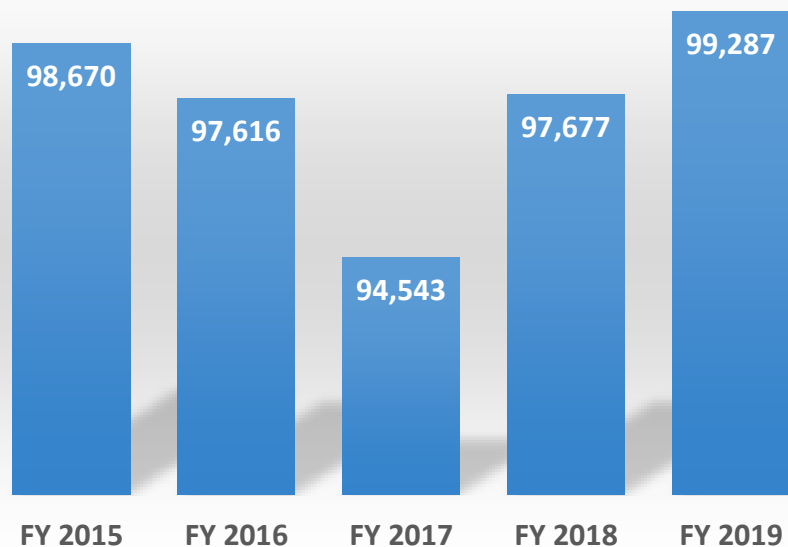
^a CMS requires this information for children under age six

District of Columbia EPSDT 2015 – 2019

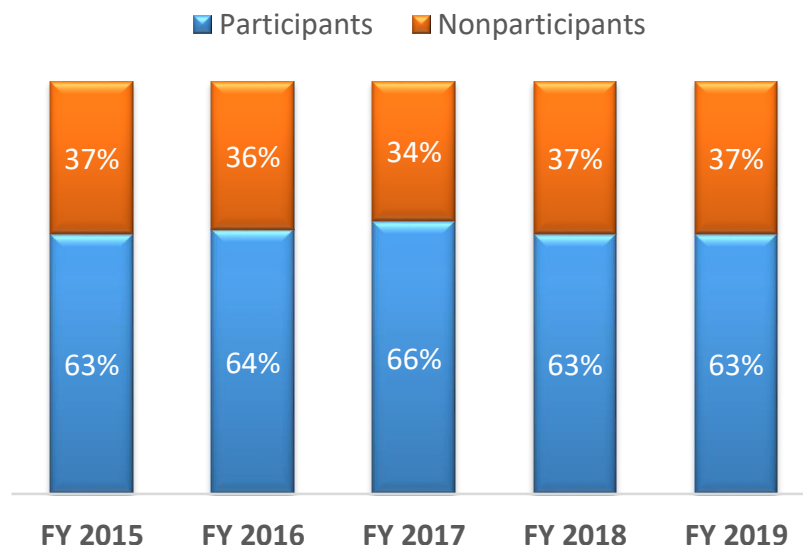
**AAP Periodicity Recommendations vs District of Columbia Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b	2008 – 2019	7	5	3	4	5	4	2
District of Columbia	2014	7	4	3	4	5	4	2
	2015 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

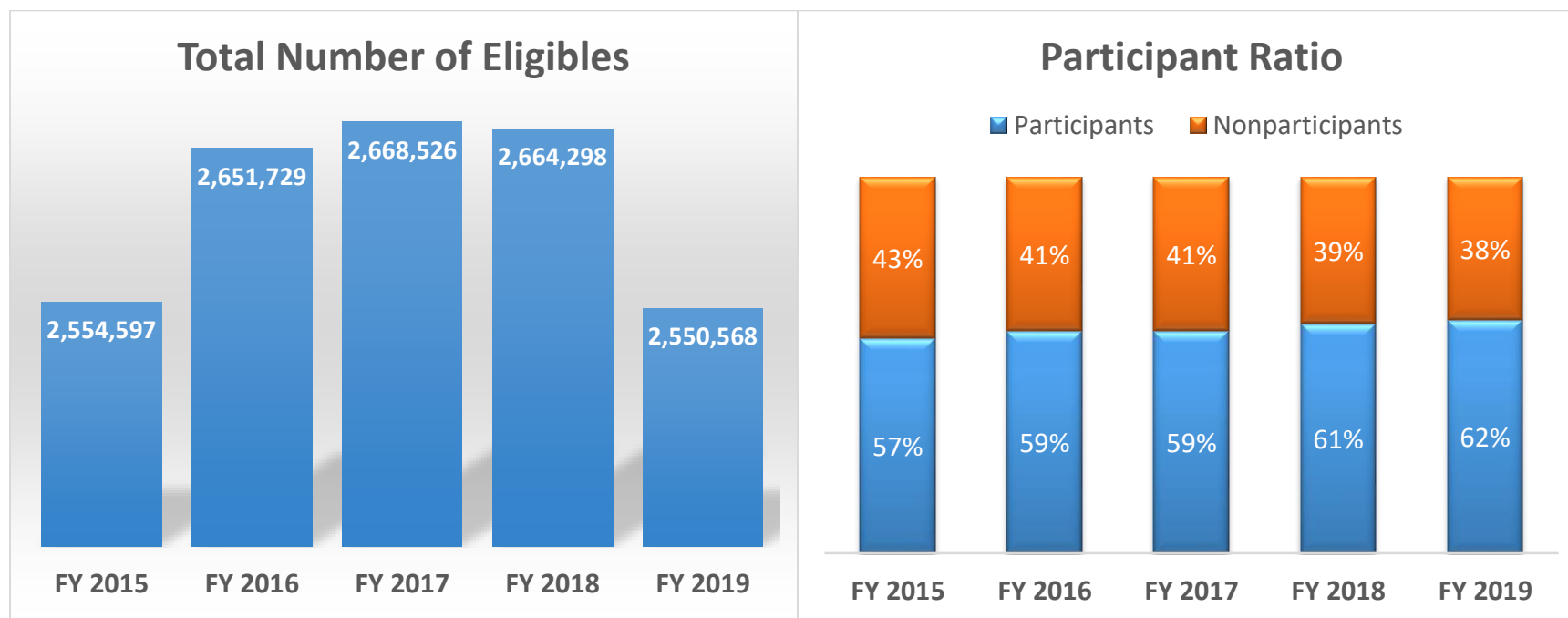
Florida EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	2,554,597	150,633	298,639	407,435	547,046	580,929	414,727	155,188
	FY 2016	2,651,729	150,902	308,396	419,942	559,303	613,069	438,729	161,388
	FY 2017	2,668,526	148,779	308,095	425,193	552,015	630,721	442,491	161,232
	FY 2018	2,664,298	145,378	305,264	427,160	540,132	645,624	442,741	157,999
	FY 2019	2,550,568	141,722	294,594	410,622	509,958	624,774	420,893	148,005
Screening Ratio									
	FY 2015	69%	94%	89%	82%	53%	53%	42%	19%
	FY 2016	72%	96%	91%	85%	56%	57%	45%	22%
	FY 2017	73%	96%	91%	84%	59%	59%	48%	24%
	FY 2018	75%	97%	92%	88%	62%	62%	50%	26%
	FY 2019	76%	98%	94%	89%	62%	62%	51%	27%
Participant Ratio									
	FY 2015	57%	94%	83%	73%	51%	50%	39%	17%
	FY 2016	59%	94%	83%	74%	52%	52%	41%	20%
	FY 2017	59%	94%	83%	73%	54%	54%	43%	21%
	FY 2018	61%	94%	82%	75%	57%	56%	45%	23%
	FY 2019	62%	94%	83%	76%	57%	57%	46%	24%
Referrals									
	FY 2015	1,393,826	114,165	243,202	283,828	276,405	281,799	162,570	31,857
	FY 2016	1,824,066	115,691	265,687	339,489	389,477	400,792	252,779	60,151
	FY 2017	1,836,376	113,939	264,993	340,018	384,330	415,454	257,735	59,907
	FY 2018	1,818,287	111,179	259,489	337,658	373,115	422,443	257,017	57,386
	FY 2019	1,747,870	107,965	251,096	326,484	354,293	408,078	245,098	54,856
Dental Services									
	FY 2015	831,913	587	31,298	147,298	251,530	239,067	137,153	24,980
	FY 2016	368,095	270	4,090	47,357	118,252	109,164	75,042	13,920
	FY 2017	1,002,962	1,402	44,867	171,227	288,330	298,585	168,857	29,694
	FY 2018	1,023,780	2,326	53,199	178,268	282,017	307,994	170,267	29,709
	FY 2019	989,264	5,121	58,680	173,222	266,729	297,644	160,903	26,965
Lead Screening ^a									
	FY 2015	196,704	2,500	134,822	59,382				
	FY 2016	207,360	2,615	146,461	58,284				
	FY 2017	201,811	2,524	146,209	53,078				
	FY 2018	204,566	2,832	149,155	52,579				
	FY 2019	181,090	2,488	135,528	43,074				

^a CMS requires this information for children under age six

Florida EPSDT 2015 – 2019

AAP Periodicity Recommendations vs Florida Schedules Reported on Form CMS-416 (2014-2019)								
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b Florida	2008 – 2019	7	5	3	4	5	4	2
	2014	6	4	3	2	5	4	2
	2015 – 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Georgia EPSDT 2015 – 2019

		Total	<1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,412,892	87,795	171,992	234,783	315,941	327,861	219,302	55,218
	FY 2016	1,440,360	86,941	171,460	233,380	317,010	341,424	232,304	57,841
	FY 2017	1,428,926	84,056	170,059	228,352	306,822	348,663	233,276	57,698
	FY 2018	1,453,433	82,829	171,677	231,847	301,643	362,184	238,079	65,174
	FY 2019	1,408,785	82,412	165,215	226,429	285,264	356,802	231,223	61,440
Screening Ratio									
	FY 2015	67%	91%	89%	76%	49%	49%	37%	11%
	FY 2016	68%	93%	91%	79%	51%	52%	39%	12%
	FY 2017	69%	94%	91%	79%	51%	53%	40%	13%
	FY 2018	67%	91%	86%	78%	52%	53%	40%	12%
	FY 2019	69%	94%	88%	81%	54%	56%	43%	15%
Participant Ratio									
	FY 2015	54%	95%	81%	67%	46%	46%	34%	10%
	FY 2016	55%	96%	81%	69%	48%	49%	36%	12%
	FY 2017	56%	95%	81%	69%	48%	50%	37%	12%
	FY 2018	55%	94%	79%	68%	49%	50%	38%	11%
	FY 2019	57%	95%	80%	69%	51%	52%	40%	14%
Referrals									
	FY 2015	32,909	4,942	6,684	6,208	6,182	5,883	2,884	126
	FY 2016	34,884	5,123	7,039	6,243	6,472	6,597	3,262	148
	FY 2017	34,301	4,931	7,223	6,090	6,087	6,447	3,359	164
	FY 2018	30,107	4,331	5,890	5,267	5,486	6,001	2,989	143
	FY 2019	30,093	3,980	5,563	5,374	5,310	6,413	3,285	168
Dental Services									
	FY 2015	692,946	222	31,804	134,548	209,141	199,160	106,174	11,897
	FY 2016	671,031	102	27,927	127,725	202,582	200,145	102,685	9,865
	FY 2017	700,236	193	32,310	129,377	201,123	211,311	113,527	12,395
	FY 2018	669,623	129	29,018	124,829	189,897	209,652	105,182	10,916
	FY 2019	682,429	242	31,037	127,048	185,581	213,591	111,811	13,119
Lead Screening ^a									
	FY 2015	108,025	3,529	90,773	13,723				
	FY 2016	103,487	3,028	88,305	12,154				
	FY 2017	100,544	2,018	87,395	11,131				
	FY 2018	98,121	1,575	86,282	10,264				
	FY 2019	96,653	2,142	84,496	10,015				

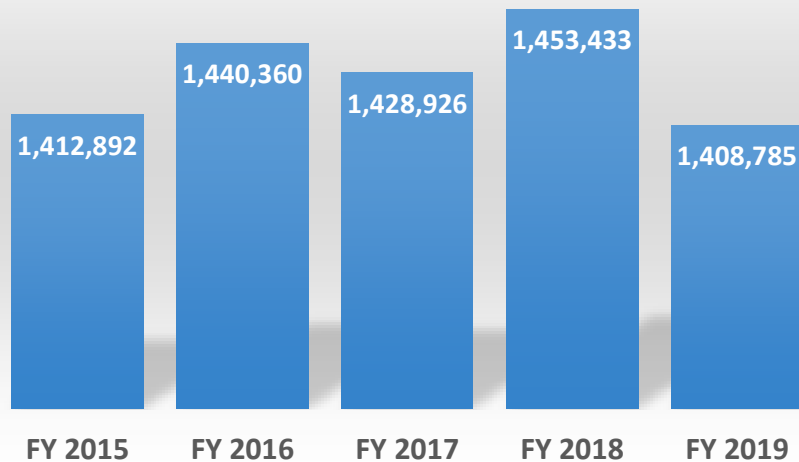
^a CMS requires this information for children under age six

Georgia EPSDT 2015 – 2019

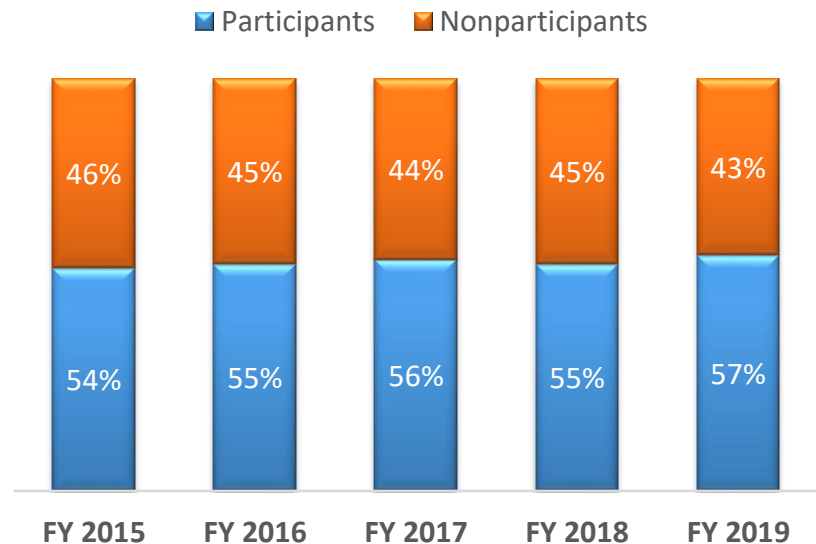
**AAP Periodicity Recommendations vs Georgia Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Georgia	2014 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Hawaii EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	174,827	9,735	20,617	28,208	36,093	39,333	28,151	12,690
	FY 2016	181,289	9,963	20,556	29,391	37,589	41,299	29,517	12,974
	FY 2017	183,005	9,670	20,046	29,478	37,822	42,728	30,351	12,910
	FY 2018	180,636	9,282	19,306	28,188	37,019	43,465	30,427	12,949
	FY 2019	178,932	8,991	18,681	27,692	36,620	43,335	30,555	13,058
Screening Ratio									
	FY 2015	97%	100%	100%	83%	98%	82%	92%	28%
	FY 2016	98%	100%	100%	81%	99%	81%	91%	28%
	FY 2017	100%	100%	100%	80%	100%	91%	93%	30%
	FY 2018	100%	100%	100%	82%	99%	94%	99%	32%
	FY 2019	100%	100%	100%	85%	100%	98%	100%	40%
Participant Ratio									
	FY 2015	82%	99%	87%	77%	94%	77%	86%	28%
	FY 2016	75%	87%	76%	71%	89%	73%	80%	25%
	FY 2017	81%	96%	82%	73%	94%	85%	85%	27%
	FY 2018	83%	96%	83%	74%	93%	87%	91%	29%
	FY 2019	87%	96%	84%	77%	100%	91%	98%	36%
Referrals									
	FY 2015	39,695	4,441	9,355	7,286	5,635	6,982	5,046	950
	FY 2016	37,875	3,843	7,721	7,337	5,436	7,187	5,287	1,064
	FY 2017	42,536	4,685	8,907	7,747	5,984	8,300	5,844	1,069
	FY 2018	41,566	3,932	8,629	6,914	6,148	8,443	6,272	1,228
	FY 2019	41,671	3,690	8,257	6,904	6,532	8,393	6,486	1,409
Dental Services									
	FY 2015	93,685	502	9,405	19,493	24,422	22,820	13,378	3,665
	FY 2016	98,764	624	9,611	20,179	25,544	24,484	14,246	4,076
	FY 2017	93,273	157	7,044	18,024	24,522	24,883	14,929	3,714
	FY 2018	93,135	180	7,126	17,434	24,030	25,586	15,036	3,743
	FY 2019	92,641	204	7,298	17,069	23,649	25,620	15,054	3,747
Lead Screening ^a									
	FY 2015	9,476	614	7,238	1,568				
	FY 2016	8,608	567	6,366	1,617				
	FY 2017	8,614	640	6,390	1,584				
	FY 2018	8,618	550	6,574	1,494				
	FY 2019	9,048	522	6,969	1,557				

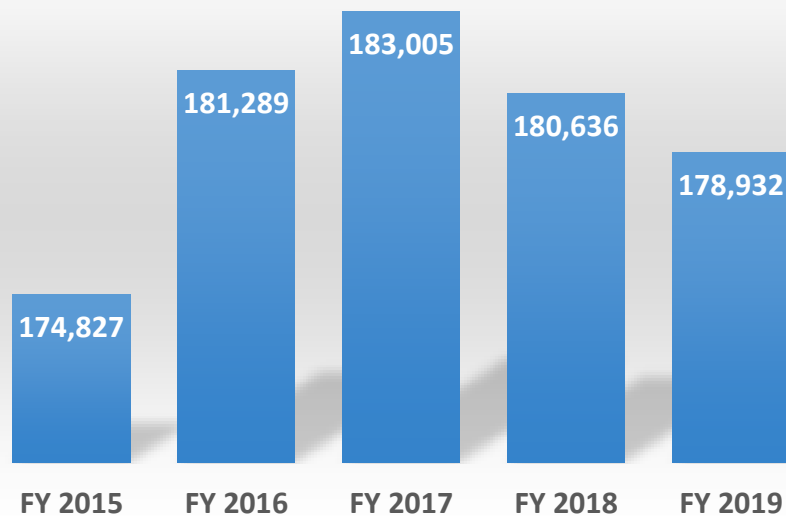
^a CMS requires this information for children under age six

Hawaii EPSDT 2015 – 2019

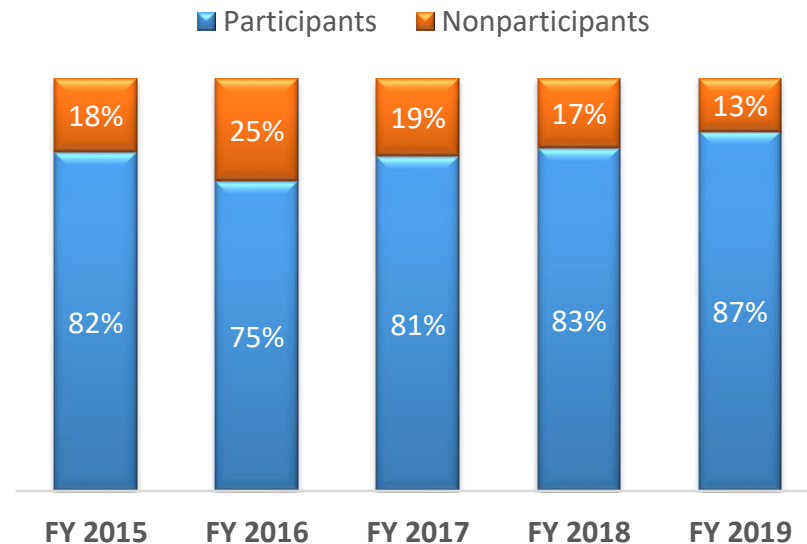
**AAP Periodicity Recommendations vs Hawaii 2Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Hawaii	2014 – 2019	6	4	3	2	3	2	1

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Idaho EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	224,191	12,857	26,918	37,954	49,908	52,058	35,049	9,447
	FY 2016	216,347	9,103	26,484	36,791	48,188	52,602	35,241	7,938
	FY 2017	233,730	12,107	27,240	39,292	50,165	56,989	37,926	10,011
	FY 2018	233,873	11,113	26,473	39,174	49,009	58,639	38,772	10,693
	FY 2019	216,951	11,162	24,236	36,339	44,870	54,333	36,748	9,263
Screening Ratio									
	FY 2015	61%	100%	79%	63%	41%	41%	30%	17%
	FY 2016	59%	100%	79%	60%	39%	40%	29%	16%
	FY 2017	63%	100%	78%	63%	40%	42%	30%	18%
	FY 2018	84%	100%	99%	92%	68%	67%	64%	58%
	FY 2019	87%	100%	100%	96%	70%	70%	65%	57%
Participant Ratio									
	FY 2015	47%	96%	77%	57%	39%	39%	28%	16%
	FY 2016	47%	96%	76%	55%	39%	39%	28%	16%
	FY 2017	47%	96%	75%	56%	38%	40%	28%	17%
	FY 2018	59%	97%	80%	68%	52%	51%	46%	42%
	FY 2019	61%	97%	82%	70%	55%	53%	48%	42%
Referrals									
	FY 2015	59,825	8,023	15,629	10,637	9,380	9,978	5,494	684
	FY 2016	60,328	7,954	15,421	10,482	9,407	10,561	5,843	660
	FY 2017	60,696	9,867	15,130	10,232	8,970	10,139	5,620	738
	FY 2018	57,669	7,093	14,605	10,246	8,917	10,284	5,754	770
	FY 2019	72,967	7,047	14,594	12,531	12,096	14,615	10,370	1,714
Dental Services									
	FY 2015	102,035	207	7,146	19,713	29,343	28,282	15,483	1,861
	FY 2016	124,312	0	4,978	21,817	35,359	37,113	21,332	3,713
	FY 2017	142,043	188	4,225	23,152	39,353	43,577	25,783	5,765
	FY 2018	111,612	208	7,433	20,470	29,528	33,121	18,260	2,592
	FY 2019	106,313	175	6,872	19,778	27,723	31,571	17,772	2,422
Lead Screening ^a									
	FY 2015	5,855	34	4,194	1,627				
	FY 2016	6,085	41	4,535	1,509				
	FY 2017	11,207	38	6,603	4,566				
	FY 2018	6,341	48	5,008	1,285				
	FY 2019	5,934	12	4,847	1,075				

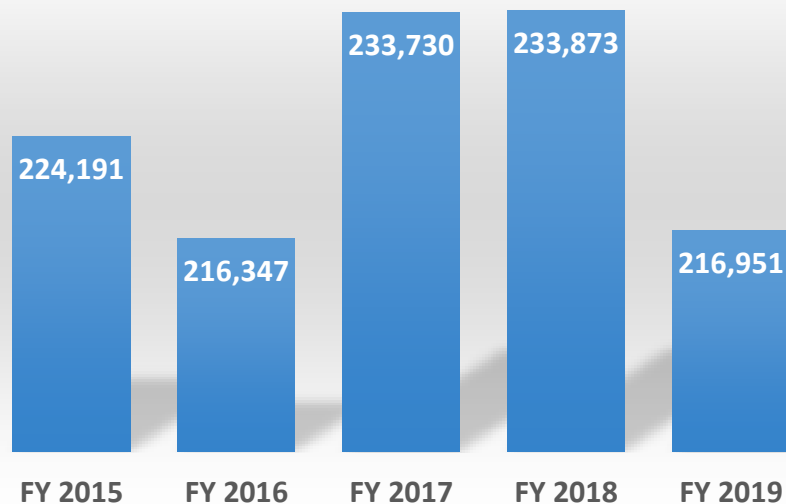
^a CMS requires this information for children under age six

Idaho EPSDT 2015 – 2019

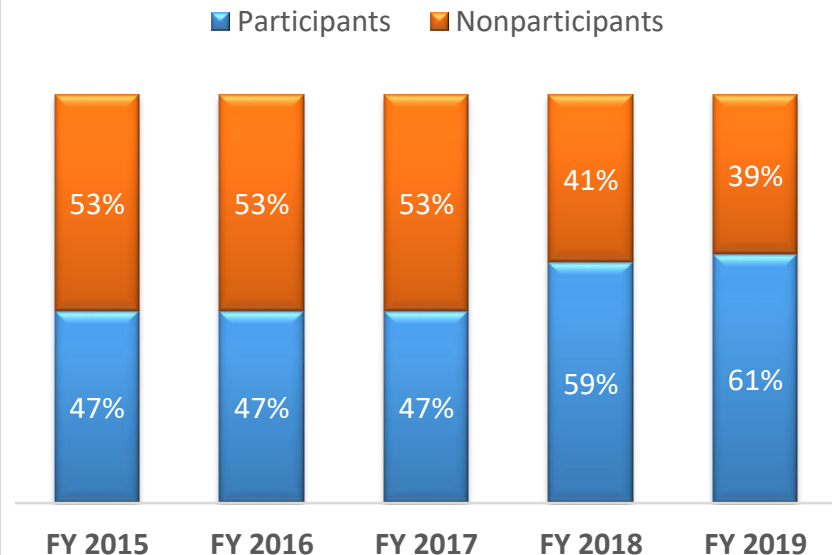
**AAP Periodicity Recommendations vs Idaho Schedules Reported on Form CMS-416
(2014-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Idaho	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

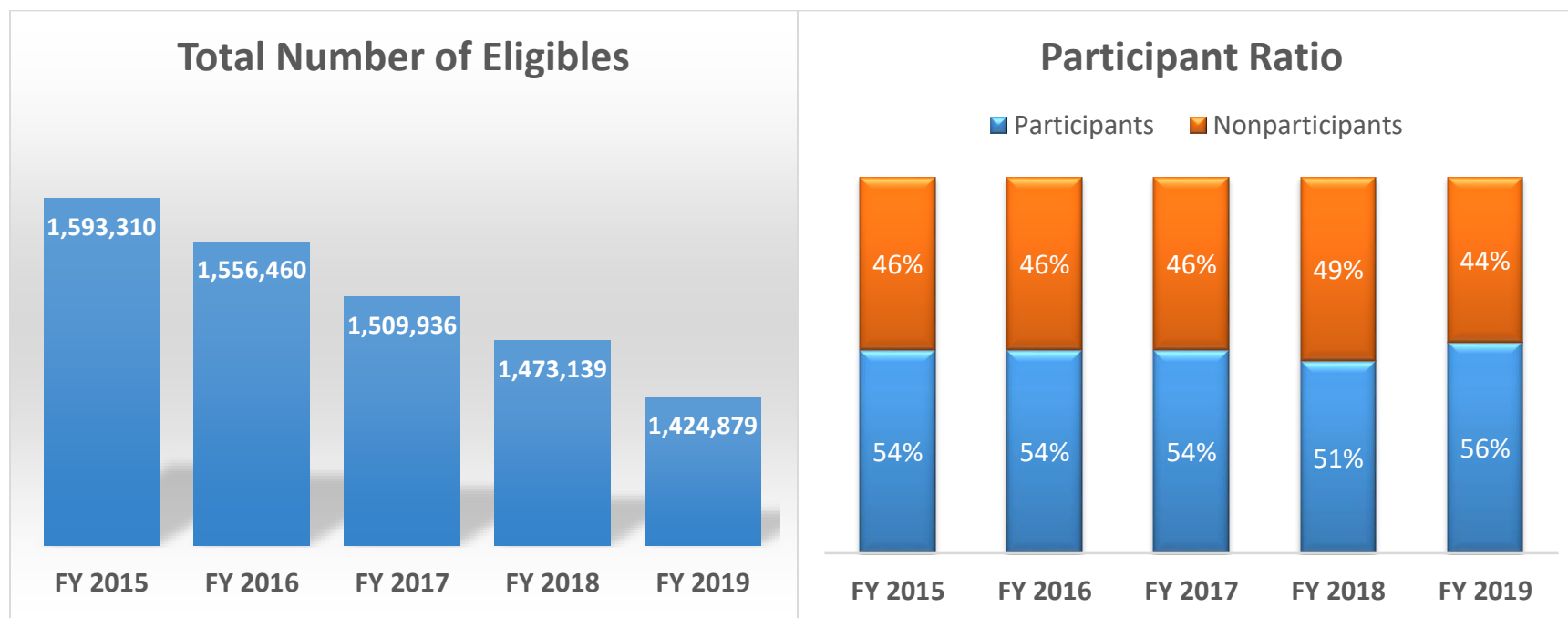
Illinois EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,593,310	76,416	168,031	247,715	343,628	377,077	266,157	114,286
	FY 2016	1,556,460	86,258	174,054	234,842	325,127	366,187	259,358	110,634
	FY 2017	1,509,936	79,646	169,783	227,783	307,849	364,526	254,557	105,792
	FY 2018	1,473,139	76,082	160,552	224,318	293,109	364,350	253,553	101,175
	FY 2019	1,424,879	73,171	152,070	218,811	275,938	352,084	245,759	107,046
Screening Ratio									
	FY 2015	70%	100%	84%	92%	48%	63%	48%	33%
	FY 2016	70%	100%	85%	89%	47%	61%	48%	32%
	FY 2017	70%	100%	83%	87%	47%	60%	47%	32%
	FY 2018	64%	100%	78%	80%	43%	55%	44%	29%
	FY 2019	71%	100%	84%	88%	48%	62%	49%	30%
Participant Ratio									
	FY 2015	54%	92%	79%	71%	42%	53%	41%	28%
	FY 2016	54%	92%	80%	70%	42%	52%	41%	27%
	FY 2017	54%	91%	79%	69%	42%	52%	41%	28%
	FY 2018	51%	90%	78%	66%	39%	49%	39%	25%
	FY 2019	56%	93%	79%	71%	44%	55%	43%	26%
Referrals									
	FY 2015	629,046	49,869	117,519	129,871	97,934	137,420	75,970	20,463
	FY 2016	574,147	55,785	119,290	112,353	82,559	117,658	67,924	18,578
	FY 2017	536,704	52,390	112,835	103,092	74,380	111,473	64,611	17,923
	FY 2018	481,161	48,354	104,519	91,345	63,310	98,133	59,191	16,309
	FY 2019	507,948	47,805	99,944	99,211	67,975	110,043	64,966	18,004
Dental Services									
	FY 2015	698,255	471	30,191	123,308	208,340	207,483	104,943	23,519
	FY 2016	653,857	387	28,064	110,139	191,553	198,432	102,281	23,001
	FY 2017	677,202	534	31,602	114,088	189,730	207,513	109,094	24,641
	FY 2018	654,836	362	29,135	110,591	178,317	203,986	107,993	24,452
	FY 2019	615,111	360	27,222	104,695	163,254	192,894	102,271	24,415
Lead Screening ^a									
	FY 2015	225,550	6,881	113,206	105,463				
	FY 2016	219,763	7,496	115,109	97,158				
	FY 2017	200,976	6,543	107,644	86,789				
	FY 2018	182,510	5,232	96,415	80,863				
	FY 2019	180,822	5,858	93,179	81,785				

^a CMS requires this information for children under age six

Illinois EPSDT 2015 – 2019

AAP Periodicity Recommendations vs Illinois Schedules Reported on Form CMS-416 (2015-2019)								
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b	2008 – 2019	7	5	3	4	5	4	2
	2014	6	4	3	2	3	2	1
	2015 – 2019	6	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Indiana EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	813,781	49,546	97,108	129,967	173,808	185,828	129,115	48,409
	FY 2016	829,648	47,620	98,844	131,713	174,935	191,236	133,410	51,890
	FY 2017	830,824	47,137	96,768	132,496	171,347	195,404	134,559	53,113
	FY 2018	834,097	46,746	95,231	135,057	167,755	199,834	135,237	54,237
	FY 2019	830,746	45,461	94,778	134,210	165,213	201,117	136,053	53,914
Screening Ratio									
	FY 2015	70%	94%	88%	81%	52%	58%	48%	22%
	FY 2016	69%	93%	86%	78%	52%	58%	48%	20%
	FY 2017	68%	96%	87%	76%	51%	56%	48%	21%
	FY 2018	72%	100%	91%	78%	53%	59%	50%	23%
	FY 2019	69%	95%	87%	76%	53%	57%	49%	23%
Participant Ratio									
	FY 2015	54%	94%	80%	66%	46%	48%	40%	19%
	FY 2016	53%	93%	79%	64%	46%	49%	40%	17%
	FY 2017	52%	93%	79%	61%	44%	47%	39%	18%
	FY 2018	53%	94%	79%	62%	46%	49%	41%	19%
	FY 2019	53%	93%	79%	62%	47%	49%	41%	20%
Referrals									
	FY 2015	384,281	33,887	73,614	75,149	70,819	80,102	44,886	5,824
	FY 2016	390,850	32,063	74,175	74,762	71,708	84,223	47,221	6,698
	FY 2017	376,271	31,495	71,996	70,982	66,962	81,687	46,226	6,923
	FY 2018	392,949	32,068	72,065	75,063	69,157	88,035	49,133	7,428
	FY 2019	392,680	30,526	71,585	74,499	69,307	88,854	49,955	7,954
Dental Services									
	FY 2015	368,162	416	19,196	66,349	107,359	104,976	60,701	9,165
	FY 2016	360,846	472	19,377	65,469	103,424	103,911	60,599	7,594
	FY 2017	362,647	433	18,877	63,361	100,201	105,328	61,614	12,833
	FY 2018	361,300	485	18,907	64,135	97,429	106,495	60,960	12,889
	FY 2019	354,808	416	18,576	62,376	94,397	105,431	60,552	13,060
Lead Screening ^a									
	FY 2015	39,586	905	27,367	11,314				
	FY 2016	41,084	1,104	28,347	11,633				
	FY 2017	43,547	1,015	30,258	12,274				
	FY 2018	45,421	1,312	32,127	11,982				
	FY 2019	46,109	1,042	33,150	11,917				

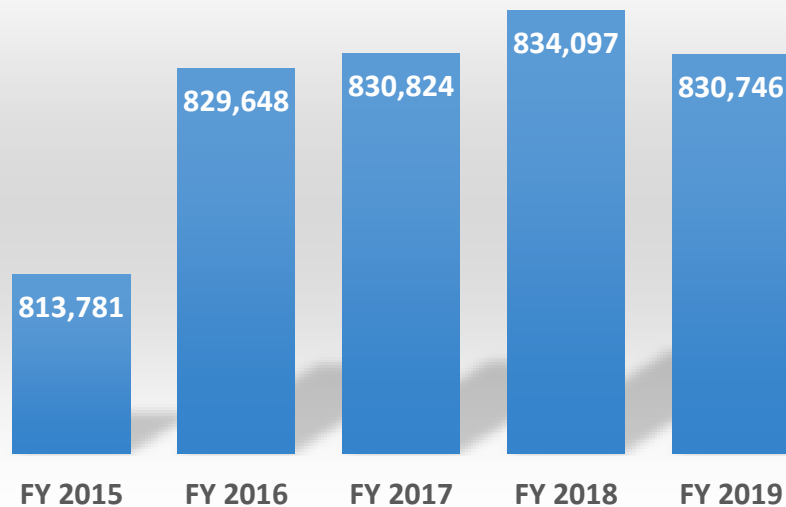
^a CMS requires this information for children under age six

Indiana EPSDT 2015 – 2019

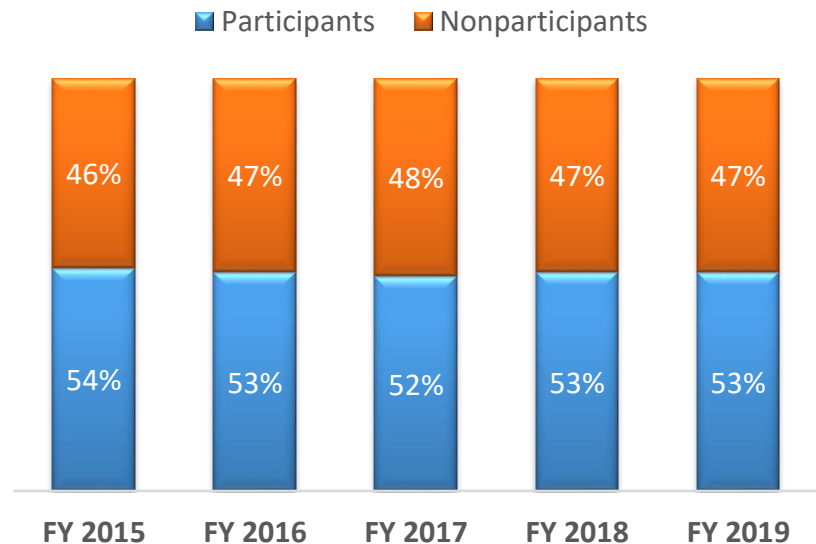
**AAP Periodicity Recommendations vs Indiana Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Indiana	2014 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Iowa EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	348,596	21,974	42,890	55,260	74,339	76,346	53,565	24,222
	FY 2016	355,970	22,047	44,349	55,365	73,933	79,489	55,208	25,579
	FY 2017	355,250	21,916	43,566	55,828	71,411	81,374	55,411	25,744
	FY 2018	350,562	21,355	42,353	55,303	68,494	82,202	54,980	25,875
	FY 2019	352,687	20,991	41,366	55,683	68,425	84,017	55,567	26,638
Screening Ratio									
	FY 2015	92%	100%	100%	78%	80%	73%	77%	53%
	FY 2016	100%	100%	100%	90%	98%	90%	98%	67%
	FY 2017	100%	100%	100%	94%	100%	98%	100%	68%
	FY 2018	79%	100%	100%	87%	51%	56%	52%	34%
	FY 2019	81%	100%	100%	89%	53%	58%	53%	29%
Participant Ratio									
	FY 2015	73%	91%	77%	72%	76%	69%	69%	34%
	FY 2016	77%	92%	79%	73%	83%	75%	76%	40%
	FY 2017	82%	93%	81%	77%	91%	83%	88%	41%
	FY 2018	59%	93%	81%	77%	48%	51%	45%	23%
	FY 2019	58%	94%	82%	78%	49%	52%	45%	19%
Referrals									
	FY 2015	3,428	3,343	83	0	0	0	2	0
	FY 2016	1,606	1,573	25	1	0	0	1	6
	FY 2017	437	425	7	1	0	1	0	3
	FY 2018	1,919	1,906	9	0	0	0	3	1
	FY 2019	1,886	DS	DS	0	0	0	DS	DS
Dental Services									
	FY 2015	168,067	3,427	16,540	32,411	44,318	41,933	24,286	5,152
	FY 2016	172,963	3,292	16,539	32,652	44,613	44,528	25,684	5,655
	FY 2017	177,955	3,170	16,800	33,848	44,227	47,202	26,924	5,784
	FY 2018	175,122	3,261	16,780	33,557	42,516	47,165	26,276	5,567
	FY 2019	175,733	3,449	16,493	33,369	42,249	47,943	26,636	5,594
Lead Screening ^a									
	FY 2015	25,462	108	15,976	9,378				
	FY 2016	34,183	176	22,772	11,235				
	FY 2017	34,383	143	22,965	11,275				
	FY 2018	28,818	142	19,322	9,354				
	FY 2019	28,716	123	19,064	9,529				

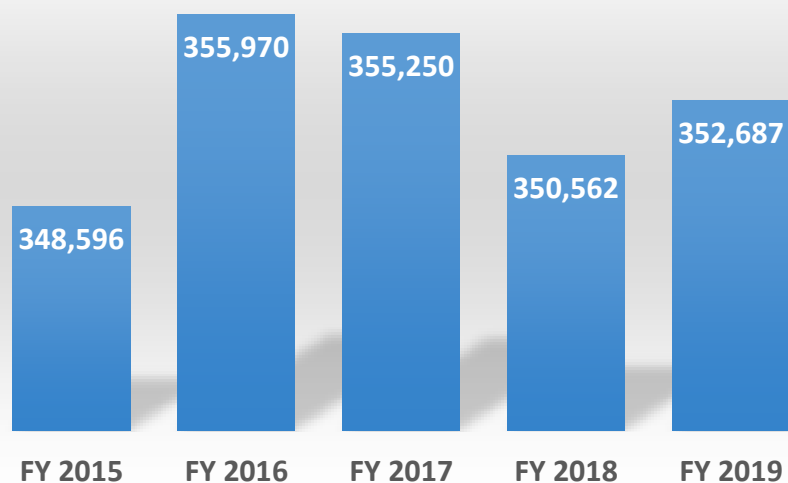
^a CMS requires this information for children under age six

Iowa EPSDT 2015 – 2019

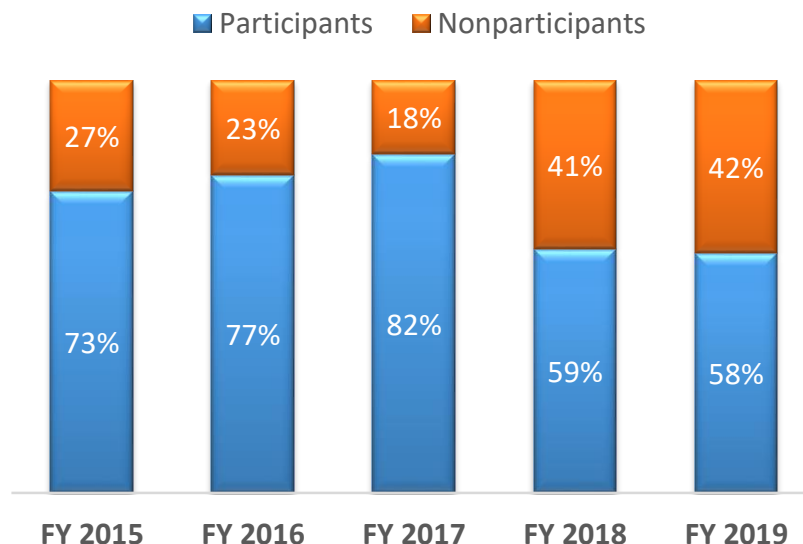
**AAP Periodicity Recommendations vs Iowa Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b Iowa	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	6	4	3	2	3	2	1
	2018 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Kansas EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	291,048	18,342	37,868	53,726	64,484	63,581	41,134	11,913
	FY 2016	293,933	17,923	36,596	50,120	65,122	67,655	44,179	12,338
	FY 2017	298,397	17,382	36,204	50,361	64,414	70,399	46,335	13,302
	FY 2018	278,795	16,836	34,737	46,545	58,116	66,841	43,607	12,113
	FY 2019	270,686	16,368	33,049	45,873	54,900	65,343	42,827	12,326
Screening Ratio									
	FY 2015	75%	100%	84%	80%	48%	52%	53%	99%
	FY 2016	63%	100%	74%	72%	43%	47%	39%	19%
	FY 2017	70%	100%	83%	80%	48%	51%	43%	20%
	FY 2018	70%	100%	82%	81%	49%	51%	42%	21%
	FY 2019	72%	100%	100%	82%	52%	54%	45%	21%
Participant Ratio									
	FY 2015	52%	90%	73%	62%	41%	42%	38%	41%
	FY 2016	50%	90%	73%	62%	40%	42%	34%	16%
	FY 2017	53%	93%	75%	67%	44%	46%	37%	18%
	FY 2018	54%	93%	75%	68%	45%	46%	37%	19%
	FY 2019	55%	94%	75%	68%	47%	48%	39%	19%
Referrals									
	FY 2015	73,181	11,690	15,451	12,895	12,245	12,953	7,107	840
	FY 2016	95,797	12,449	22,361	17,912	14,552	17,526	9,919	1,078
	FY 2017	98,803	12,587	22,713	18,427	15,111	18,254	10,510	1,201
	FY 2018	95,628	12,130	22,019	17,813	14,556	17,771	10,194	1,145
	FY 2019	96,015	11,930	21,138	17,954	14,799	18,410	10,625	1,159
Dental Services									
	FY 2015	129,720	233	8,510	27,293	38,235	34,596	18,293	2,560
	FY 2016	129,752	145	7,638	24,698	38,193	36,821	19,751	2,506
	FY 2017	129,564	219	7,830	24,644	36,746	37,034	20,372	2,719
	FY 2018	127,260	212	7,416	23,613	35,210	37,628	20,471	2,710
	FY 2019	110,685	165	6,302	20,909	30,149	33,033	17,751	2,376
Lead Screening ^a									
	FY 2015	20,066	249	13,885	5,932				
	FY 2016	17,599	244	12,154	5,201				
	FY 2017	15,823	224	11,131	4,468				
	FY 2018	14,407	188	10,155	4,064				
	FY 2019	13,399	181	9,538	3,680				

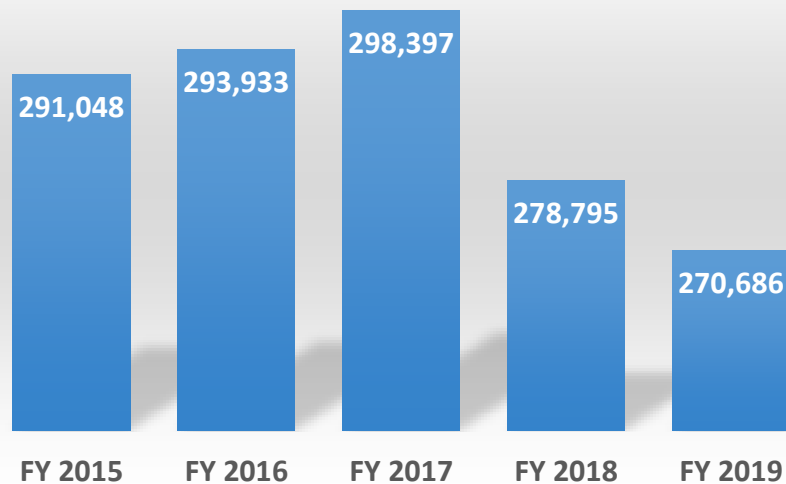
^a CMS requires this information for children under age six

Kansas EPSDT 2015 – 2019

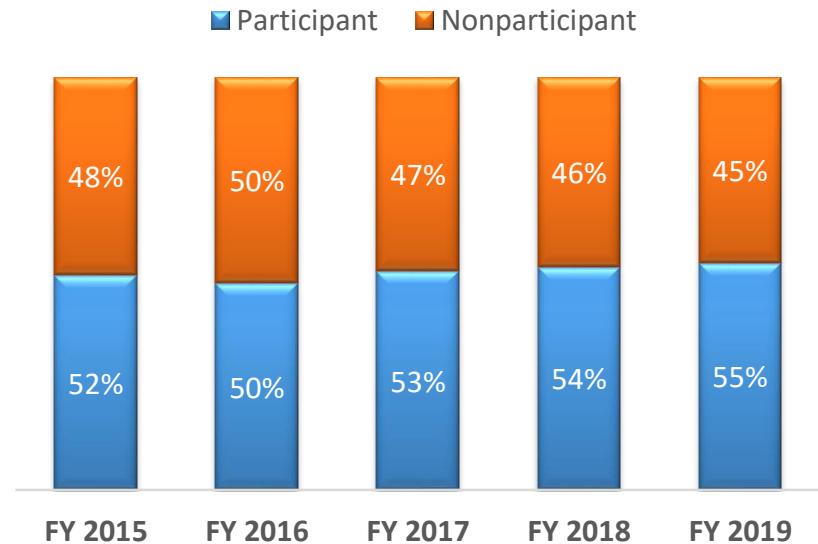
**AAP Periodicity Recommendations vs Kansas Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Kansas	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Kentucky EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	591,453	34,739	69,048	95,320	128,224	138,257	100,339	25,526
	FY 2016	606,723	34,375	70,595	97,086	130,004	143,622	104,396	26,645
	FY 2017	618,566	34,055	70,888	99,587	129,522	149,594	106,880	28,040
	FY 2018	624,316	33,369	69,341	101,159	128,380	154,960	108,710	28,397
	FY 2019	612,623	32,747	66,848	98,158	124,707	154,606	107,736	27,821
Screening Ratio									
	FY 2015	82%	100%	100%	83%	86%	57%	41%	30%
	FY 2016	86%	100%	100%	84%	91%	59%	42%	30%
	FY 2017	88%	100%	100%	83%	96%	60%	44%	33%
	FY 2018	93%	100%	100%	83%	100%	67%	55%	33%
	FY 2019	92%	100%	100%	86%	100%	63%	49%	35%
Participant Ratio									
	FY 2015	58%	93%	79%	68%	73%	47%	33%	24%
	FY 2016	59%	95%	80%	68%	76%	48%	34%	24%
	FY 2017	60%	96%	80%	68%	81%	49%	35%	26%
	FY 2018	65%	96%	81%	68%	95%	55%	43%	26%
	FY 2019	63%	96%	83%	70%	92%	52%	40%	28%
Referrals									
	FY 2015	106,211	13,588	28,615	19,837	13,493	18,481	10,885	1,312
	FY 2016	136,864	21,166	35,116	24,200	16,457	24,419	13,813	1,693
	FY 2017	143,587	21,491	35,828	25,166	18,013	26,220	14,963	1,906
	FY 2018	152,216	21,119	35,257	25,065	20,627	29,528	18,772	1,848
	FY 2019	150,396	21,020	36,181	25,298	20,083	28,356	17,456	2,002
Dental Services									
	FY 2015	267,600	178	13,264	50,871	75,502	75,611	45,691	6,483
	FY 2016	286,053	173	13,951	53,403	80,534	81,842	49,221	6,929
	FY 2017	299,153	246	14,389	55,142	82,430	87,778	51,764	7,404
	FY 2018	302,204	226	14,029	54,621	81,523	91,624	52,821	7,360
	FY 2019	296,329	244	13,600	52,870	79,477	90,799	52,064	7,275
Lead Screening ^a									
	FY 2015	37,959	602	26,382	10,975				
	FY 2016	40,007	619	28,215	11,173				
	FY 2017	39,714	509	27,987	11,218				
	FY 2018	37,831	514	26,881	10,436				
	FY 2019	38,911	450	28,264	10,197				

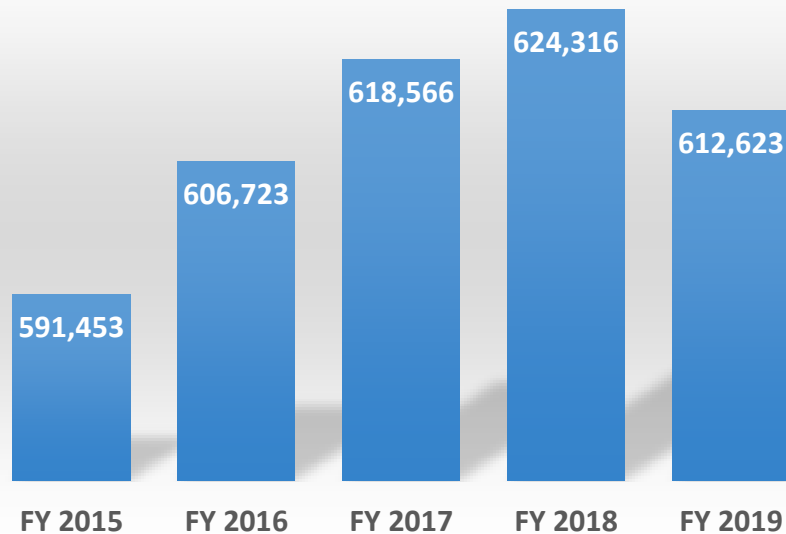
^a CMS requires this information for children under age six

Kentucky EPSDT 2015 – 2019

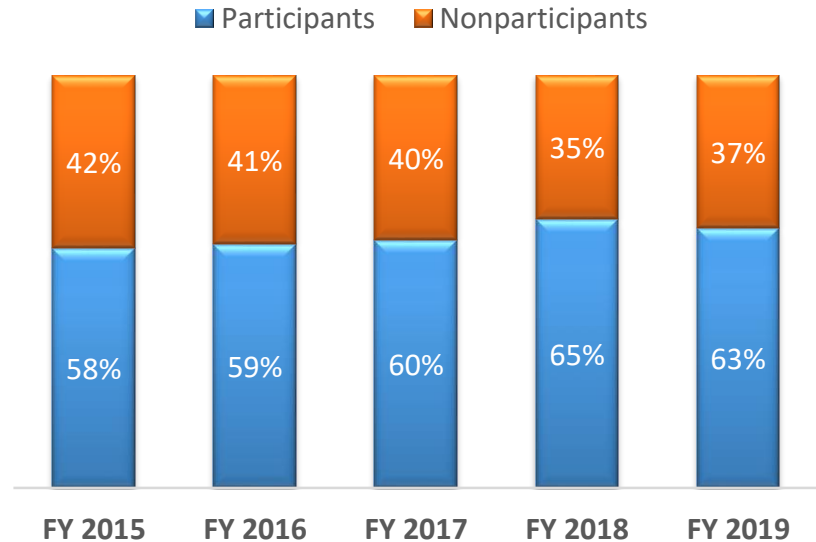
**AAP Periodicity Recommendations vs Kentucky Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Kentucky	2014 – 2019	5	4	3	2	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Louisiana EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	853,645	45,528	91,696	132,683	183,358	199,127	146,730	54,523
	FY 2016	886,049	45,020	93,394	135,531	188,135	208,818	154,815	60,336
	FY 2017	874,827	43,493	92,648	132,444	178,898	210,140	153,939	63,265
	FY 2018	862,202	42,332	89,546	131,986	170,059	211,580	151,185	65,514
	FY 2019	845,547	42,158	87,933	130,914	163,553	208,648	146,511	65,830
Screening Ratio									
	FY 2015	100%	100%	100%	86%	100%	100%	100%	40%
	FY 2016	100%	100%	100%	82%	100%	100%	100%	38%
	FY 2017	100%	100%	100%	89%	100%	100%	100%	48%
	FY 2018	87%	100%	100%	100%	69%	83%	73%	31%
	FY 2019	88%	100%	100%	100%	71%	86%	79%	31%
Participant Ratio									
	FY 2015	76%	95%	80%	62%	84%	81%	82%	31%
	FY 2016	77%	95%	81%	63%	88%	82%	83%	32%
	FY 2017	80%	96%	82%	66%	91%	85%	86%	39%
	FY 2018	57%	96%	82%	68%	49%	55%	47%	24%
	FY 2019	58%	95%	81%	68%	50%	56%	50%	24%
Referrals									
	FY 2015	170,626	22,996	25,778	28,005	29,136	36,063	25,819	2,829
	FY 2016	200,758	22,970	25,955	28,966	42,517	47,184	30,094	3,072
	FY 2017	212,617	21,584	27,005	31,650	44,191	51,568	31,742	4,877
	FY 2018	231,096	21,231	27,655	34,258	47,722	57,378	36,459	6,393
	FY 2019	231,814	20,458	26,259	34,286	47,583	59,213	37,158	6,857
Dental Services									
	FY 2015	397,221	270	25,720	75,332	109,239	107,432	68,122	11,106
	FY 2016	409,124	255	26,244	75,053	110,214	113,135	71,369	12,854
	FY 2017	423,823	450	27,936	76,228	108,188	118,197	74,100	18,724
	FY 2018	424,078	361	27,776	77,289	104,423	120,603	73,371	20,255
	FY 2019	415,076	403	25,144	76,110	100,446	120,003	71,867	21,103
Lead Screening ^a									
	FY 2015	56,908	319	38,599	17,990				
	FY 2016	57,613	287	39,884	17,442				
	FY 2017	49,174	269	35,487	13,418				
	FY 2018	54,066	304	39,141	14,621				
	FY 2019	49,659	251	35,939	13,469				

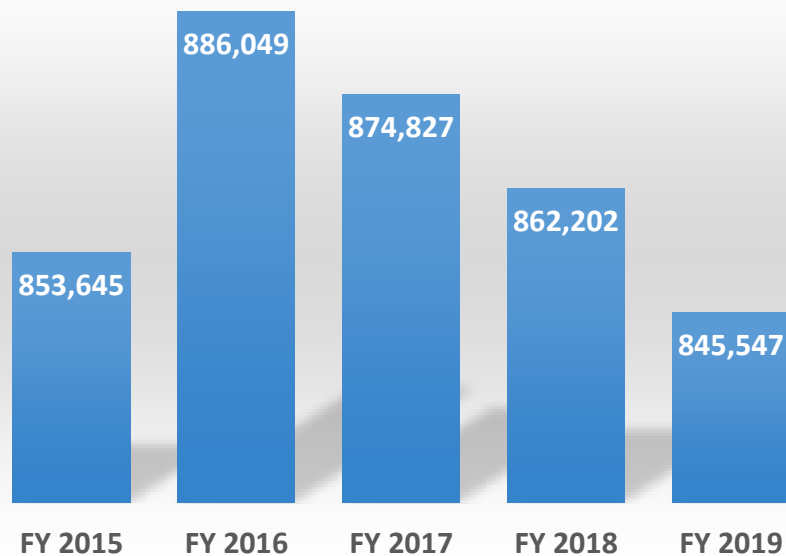
^a CMS requires this information for children under age six

Louisiana EPSDT 2015 – 2019

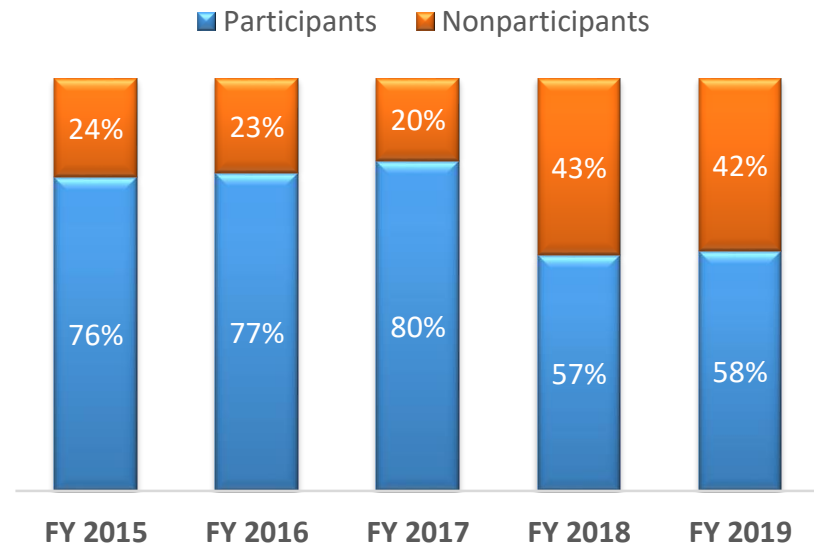
**AAP Periodicity Recommendations vs Louisiana Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	6	4	3	2	3	2	1
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

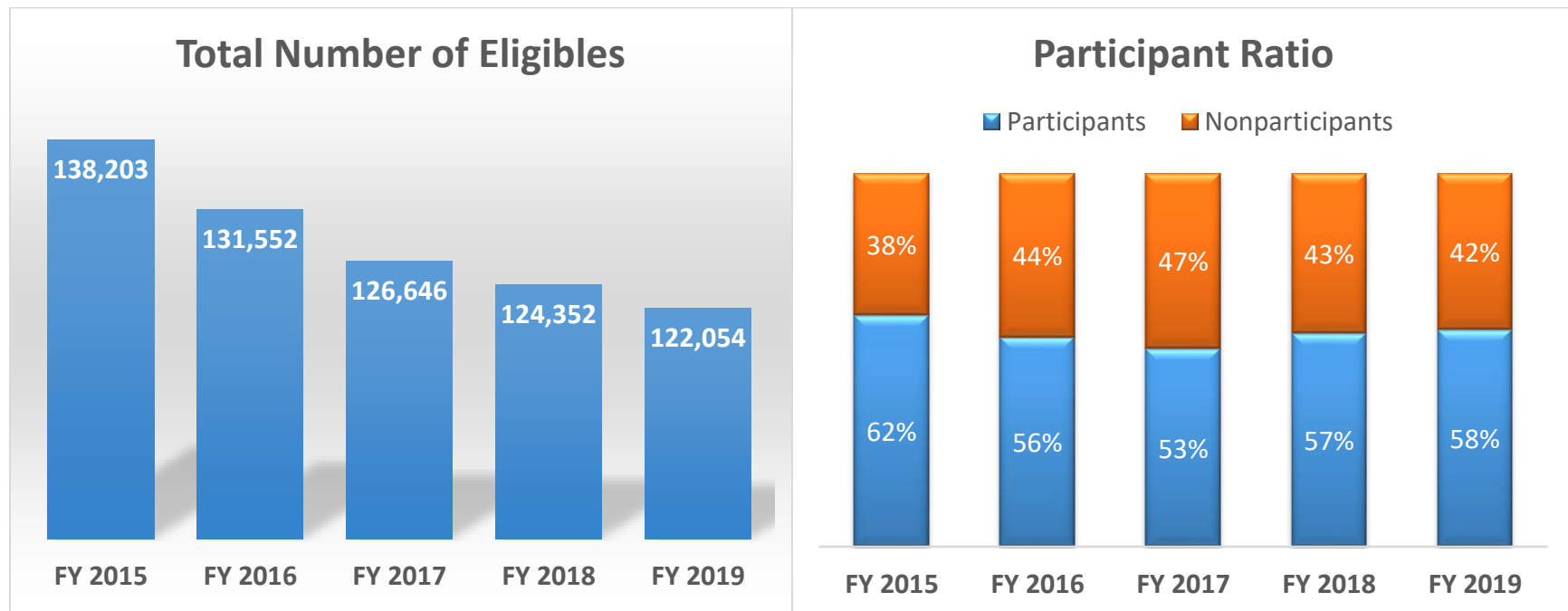
Maine EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	138,203	6,527	14,119	20,730	28,750	32,798	24,659	10,620
	FY 2016	131,552	6,438	13,615	19,360	27,250	31,240	23,465	10,184
	FY 2017	126,646	6,053	13,060	18,728	25,973	30,747	22,324	9,761
	FY 2018	124,352	5,974	12,527	18,473	25,009	30,782	21,951	9,636
	FY 2019	122,054	5,655	12,140	18,107	24,377	30,858	21,883	9,034
Screening Ratio									
	FY 2015	96%	100%	100%	96%	71%	71%	100%	31%
	FY 2016	89%	100%	100%	76%	73%	73%	59%	21%
	FY 2017	89%	100%	100%	75%	76%	74%	61%	24%
	FY 2018	92%	100%	100%	100%	78%	75%	62%	37%
	FY 2019	91%	100%	100%	100%	79%	75%	63%	38%
Participant Ratio									
	FY 2015	62%	96%	86%	69%	53%	52%	84%	23%
	FY 2016	56%	95%	87%	63%	54%	53%	43%	19%
	FY 2017	53%	34%	84%	60%	55%	53%	42%	21%
	FY 2018	57%	95%	83%	67%	56%	53%	43%	26%
	FY 2019	58%	94%	82%	68%	58%	54%	45%	27%
Referrals									
	FY 2015	48,657	4,338	9,314	7,517	8,969	10,298	6,722	1,499
	FY 2016	47,199	4,264	8,958	7,282	8,603	10,117	6,504	1,471
	FY 2017	44,187	3,944	8,244	6,595	8,372	9,570	6,013	1,449
	FY 2018	11,919	0	4,156	1,637	1,845	2,323	1,604	354
	FY 2019	42,555	3,738	7,457	6,464	7,966	9,572	6,080	1,278
Dental Services									
	FY 2015	53,974	103	2,491	8,435	14,638	15,778	10,046	2,483
	FY 2016	51,920	127	2,519	8,176	13,985	15,228	9,527	2,358
	FY 2017	47,960	147	2,318	7,512	12,922	14,285	8,519	2,257
	FY 2018	45,131	146	2,203	7,120	12,050	13,491	8,054	2,067
	FY 2019	44,076	145	2,093	7,002	11,859	13,360	7,726	1,891
Lead Screening ^a									
	FY 2015	4,373	20	3,304	1,049				
	FY 2016	4,234	27	3,368	839				
	FY 2017	4,978	15	3,715	1,248				
	FY 2018	4,468	28	3,308	1,132				
	FY 2019	4,056	26	3,070	960				

^a CMS requires this information for children under age six

Maine EPSDT 2015 – 2019

AAP Periodicity Recommendations vs Maine Schedules Reported on Form CMS-416 (2015-2019)								
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2015	8	4	3	4	5	2	2
	2016 - 2017	7	4	4	4	5	4	3
	2018 - 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Maryland EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	705,592	39,526	80,170	113,908	153,375	157,433	112,642	48,538
	FY 2016	704,535	39,136	80,414	111,610	151,887	159,986	113,293	48,209
	FY 2017	716,666	38,756	81,059	112,391	150,996	167,287	115,541	50,636
	FY 2018	730,677	38,282	80,000	114,934	150,134	176,577	118,623	52,127
	FY 2019	731,332	37,597	78,295	114,491	147,377	181,637	119,476	52,459
Screening Ratio									
	FY 2015	94%	100%	100%	100%	76%	78%	70%	46%
	FY 2016	97%	100%	100%	100%	76%	79%	74%	54%
	FY 2017	93%	100%	100%	100%	73%	76%	70%	51%
	FY 2018	89%	100%	100%	99%	73%	76%	71%	52%
	FY 2019	91%	100%	100%	100%	73%	77%	73%	54%
Participant Ratio									
	FY 2015	65%	91%	85%	78%	61%	61%	53%	35%
	FY 2016	67%	92%	85%	79%	63%	64%	56%	38%
	FY 2017	66%	93%	85%	78%	62%	63%	55%	36%
	FY 2018	67%	93%	85%	78%	63%	64%	56%	37%
	FY 2019	67%	94%	86%	78%	62%	64%	58%	39%
Referrals									
	FY 2015	404,420	28,743	65,281	78,180	83,373	84,929	51,261	12,653
	FY 2016	414,631	28,402	65,598	77,709	84,244	90,019	54,655	14,004
	FY 2017	429,504	28,424	66,847	79,754	86,022	96,422	57,201	14,834
	FY 2018	438,822	28,220	66,015	81,490	85,748	102,312	59,343	15,694
	FY 2019	444,375	28,047	65,478	81,874	84,444	106,745	61,417	16,370
Dental Services									
	FY 2015	373,123	280	24,261	70,136	104,140	99,070	58,571	16,665
	FY 2016	372,833	224	24,165	68,367	101,923	100,948	60,012	17,194
	FY 2017	397,392	249	25,212	70,673	105,495	110,958	65,549	19,256
	FY 2018	403,224	254	25,140	71,107	103,615	116,368	67,053	19,687
	FY 2019	412,014	314	25,518	72,042	103,438	121,626	68,920	20,156
Lead Screening ^a									
	FY 2015	67,892	1,195	43,627	23,070				
	FY 2016	73,201	978	48,636	23,587				
	FY 2017	75,949	1,026	50,589	24,334				
	FY 2018	73,425	1,246	48,242	23,937				
	FY 2019	74,359	1,040	50,388	22,931				

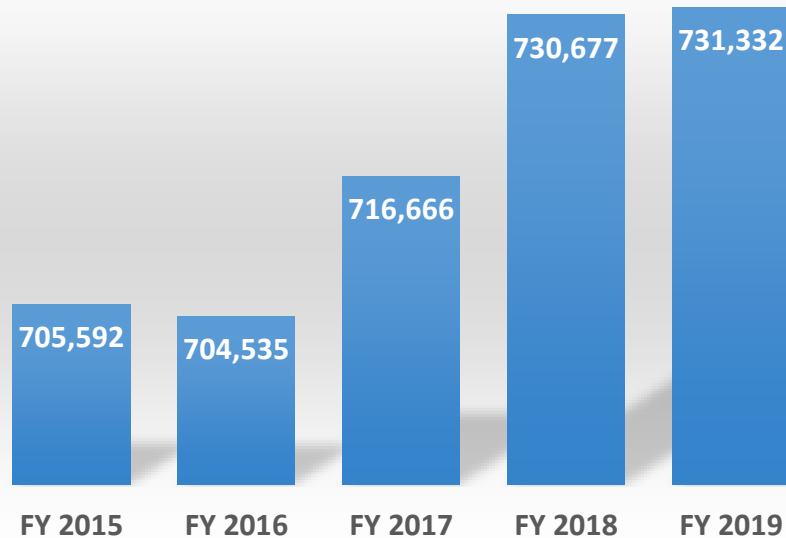
^a CMS requires this information for children under age six

Maryland EPSDT 2015 – 2019

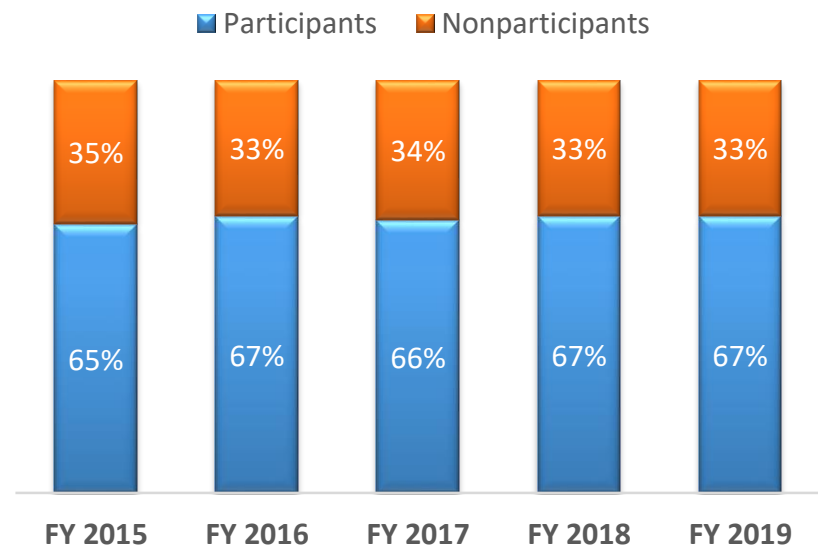
**AAP Periodicity Recommendations vs Maryland Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Maryland	2014 – 2017	6	4	3	4	5	4	2
	2018 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Massachusetts EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	711,925	38,951	79,244	107,518	144,307	156,703	122,832	62,370
	FY 2016	697,907	38,123	80,881	103,675	139,555	155,050	120,388	60,235
	FY 2017	685,230	37,404	76,874	100,138	134,448	156,725	118,856	60,785
	FY 2018	675,043	35,058	72,580	99,257	130,231	159,791	118,295	59,831
	FY 2019	658,610	33,534	68,202	96,258	125,632	159,068	116,269	59,647
Screening Ratio									
	FY 2015	100%	100%	100%	100%	100%	100%	100%	79%
	FY 2016	100%	100%	100%	100%	100%	100%	100%	86%
	FY 2017	100%	100%	100%	100%	100%	100%	100%	78%
	FY 2018	100%	100%	100%	100%	100%	100%	100%	74%
	FY 2019	100%	100%	100%	100%	100%	100%	100%	79%
Participant Ratio									
	FY 2015	69%	70%	81%	79%	70%	68%	61%	43%
	FY 2016	71%	72%	83%	81%	72%	70%	64%	45%
	FY 2017	70%	75%	83%	81%	72%	70%	64%	44%
	FY 2018	66%	80%	83%	75%	66%	65%	60%	37%
	FY 2019	73%	81%	86%	82%	74%	83%	67%	41%
Referrals									
	FY 2015	345,472	9,491	46,137	57,197	76,609	77,044	56,015	22,979
	FY 2016	347,299	11,293	45,630	56,073	74,399	78,640	56,892	24,372
	FY 2017	340,171	9,011	45,680	54,792	70,055	79,648	56,460	24,525
	FY 2018	366,655	11,031	48,646	59,187	74,043	89,068	62,135	22,545
	FY 2019	318,099	9,835	40,231	50,687	63,564	78,833	55,641	19,308
Dental Services									
	FY 2015	356,804	256	18,081	58,810	93,908	97,742	64,496	23,511
	FY 2016	352,496	254	17,923	57,264	90,857	97,821	64,790	23,587
	FY 2017	347,467	312	17,659	54,545	87,242	99,059	64,758	23,892
	FY 2018	351,477	307	18,039	54,663	85,373	102,927	66,413	23,755
	FY 2019	311,447	275	15,286	46,806	74,151	93,253	60,151	21,525
Lead Screening ^a									
	FY 2015	79,882	1,240	31,392	47,250				
	FY 2016	84,443	2,645	42,729	39,069				
	FY 2017	81,890	2,397	41,708	37,785				
	FY 2018	80,179	2,397	40,801	36,981				
	FY 2019	91,708	2,841	47,251	41,616				

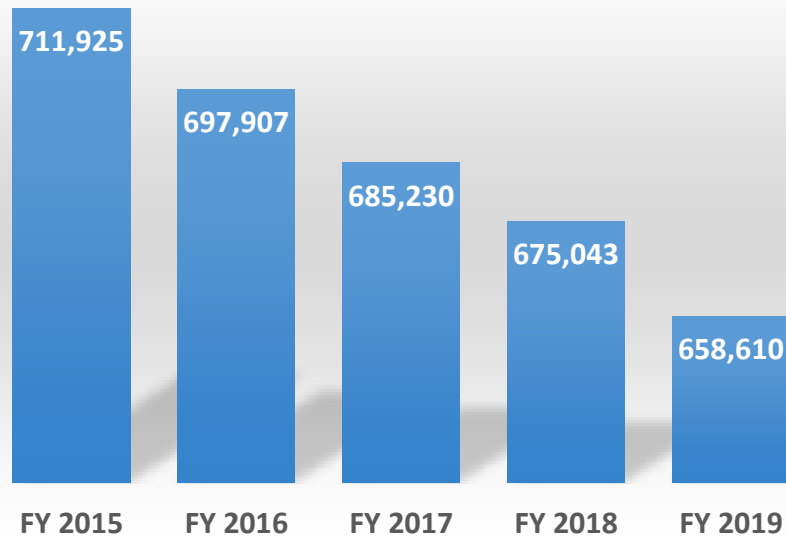
^a CMS requires this information for children under age six

Massachusetts EPSDT 2015 – 2019

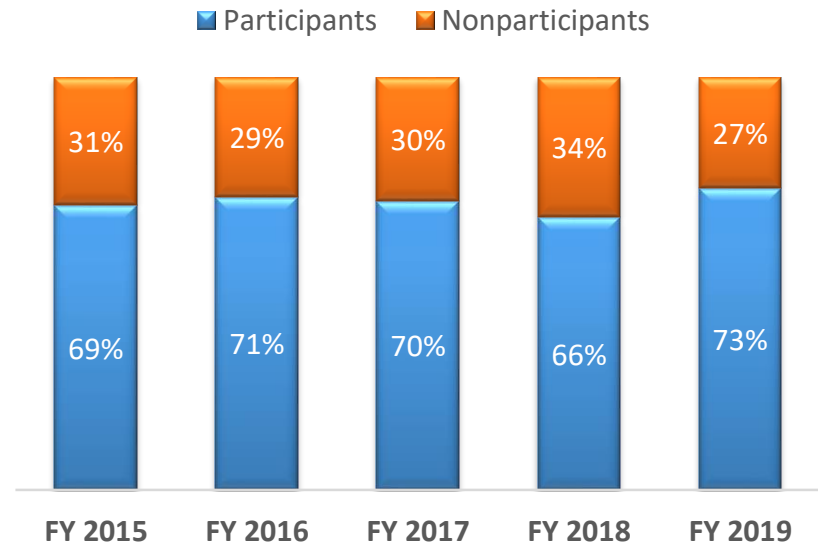
**AAP Periodicity Recommendations vs Massachusetts Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Massachusetts	2014 – 2019	6	4	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Michigan EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,201,887	70,010	139,056	187,894	246,795	277,714	210,438	69,980
	FY 2016	1,235,079	68,390	138,379	190,204	247,485	281,361	212,014	97,246
	FY 2017	1,208,103	66,581	134,695	186,453	240,355	278,316	205,953	95,750
	FY 2018	1,204,877	64,456	133,142	186,321	236,855	281,467	205,612	97,024
	FY 2019	1,205,284	63,399	130,058	185,839	236,992	285,158	206,531	97,307
Screening Ratio									
	FY 2015	69%	98%	100%	60%	51%	53%	44%	30%
	FY 2016	71%	99%	100%	63%	54%	57%	47%	29%
	FY 2017	70%	100%	100%	62%	54%	56%	46%	29%
	FY 2018	72%	100%	100%	64%	56%	58%	48%	30%
	FY 2019	72%	100%	100%	64%	57%	59%	49%	31%
Participant Ratio									
	FY 2015	51%	91%	74%	58%	44%	45%	37%	25%
	FY 2016	52%	91%	75%	60%	46%	48%	40%	24%
	FY 2017	52%	92%	76%	60%	46%	47%	39%	24%
	FY 2018	52%	92%	75%	60%	46%	47%	39%	24%
	FY 2019	52%	91%	76%	60%	47%	48%	40%	25%
Referrals									
	FY 2015	0	0	0	0	0	0	0	0
	FY 2016	0	0	0	0	0	0	0	0
	FY 2017	0	0	0	0	0	0	0	0
	FY 2018	87,774	43,747	34,854	2,818	1,377	2,107	2,042	829
	FY 2019	84,336	41,631	34,593	2,460	1,188	1,906	1,790	768
Dental Services									
	FY 2015	440,564	506	14,560	75,652	128,162	127,650	78,489	15,545
	FY 2016	504,854	433	19,270	88,010	146,071	144,890	82,925	23,255
	FY 2017	514,327	413	20,019	85,303	142,342	148,823	92,182	25,245
	FY 2018	482,421	414	19,955	81,315	132,101	139,940	86,035	22,661
	FY 2019	467,925	220	19,794	78,861	127,600	136,065	83,145	22,240
Lead Screening ^a									
	FY 2015	112,145	2,265	71,476	38,404				
	FY 2016	129,549	2,908	79,942	46,699				
	FY 2017	123,543	2,501	78,260	42,782				
	FY 2018	114,551	2,259	73,919	38,373				
	FY 2019	114,577	2,136	74,295	38,146				

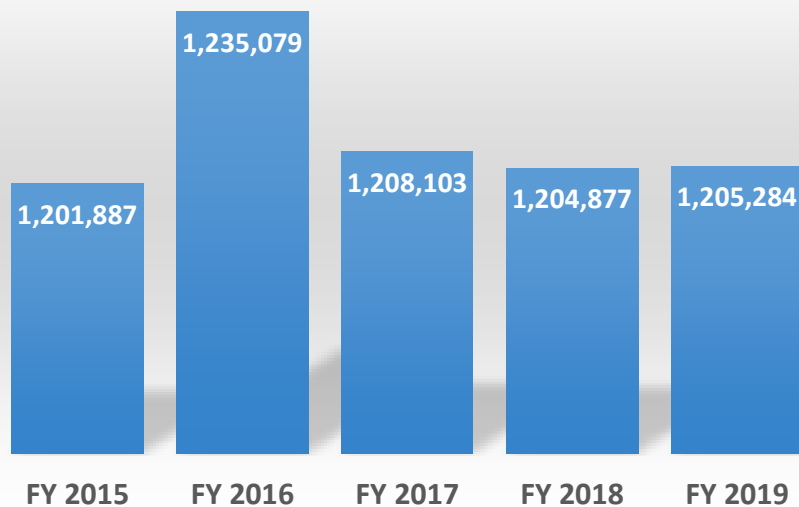
^a CMS requires this information for children under age six

Michigan EPSDT 2015 – 2019

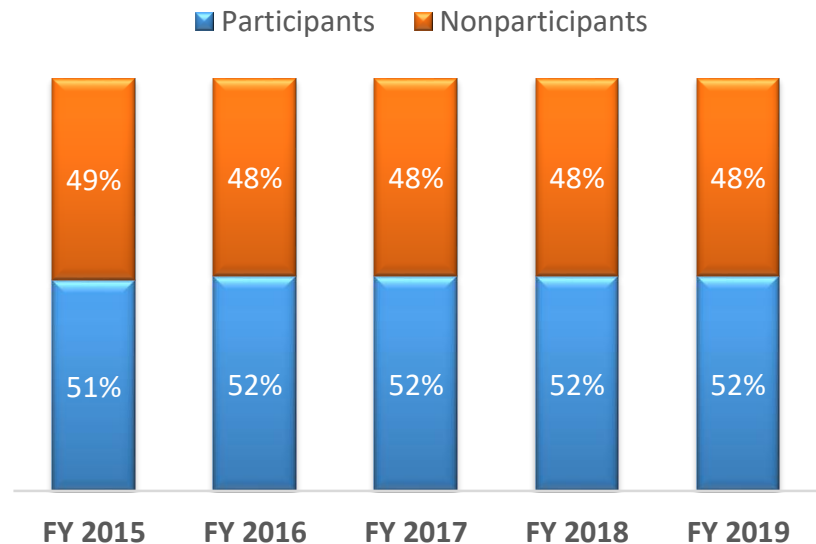
**AAP Periodicity Recommendations vs Michigan Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Michigan	2014 – 2019	7	4	4	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Minnesota EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	591,603	31,933	71,045	95,325	126,167	133,128	92,400	41,605
	FY 2016	624,767	33,687	74,967	100,166	131,085	142,356	98,730	43,776
	FY 2017	654,600	33,721	78,502	105,870	134,752	152,976	104,477	44,302
	FY 2018	652,252	32,679	80,199	105,529	130,579	154,004	104,325	44,937
	FY 2019	616,923	29,589	66,799	99,604	124,426	149,765	102,351	44,389
Screening Ratio									
	FY 2015	88%	100%	100%	71%	80%	72%	66%	41%
	FY 2016	89%	100%	100%	71%	82%	75%	68%	41%
	FY 2017	90%	100%	100%	72%	86%	76%	70%	42%
	FY 2018	64%	100%	83%	72%	45%	47%	36%	20%
	FY 2019	67%	100%	85%	77%	49%	50%	39%	22%
Participant Ratio									
	FY 2015	70%	92%	77%	66%	77%	68%	62%	39%
	FY 2016	72%	93%	77%	66%	79%	71%	64%	39%
	FY 2017	73%	91%	77%	67%	83%	72%	66%	40%
	FY 2018	51%	92%	76%	66%	44%	45%	34%	19%
	FY 2019	53%	93%	80%	68%	47%	47%	37%	21%
Referrals									
	FY 2015	19,267	1,637	4,100	4,035	3,623	3,772	1,868	232
	FY 2016	27,699	2,373	5,700	5,558	5,292	5,735	2,765	276
	FY 2017	30,329	2,352	6,300	6,350	5,629	6,373	3,025	300
	FY 2018	33,842	2,591	6,640	6,620	6,607	7,398	3,596	390
	FY 2019	38,115	2,661	7,161	7,505	7,465	8,449	4,388	486
Dental Services									
	FY 2015	221,387	195	8,335	38,296	62,502	63,500	37,231	11,328
	FY 2016	228,792	176	8,998	38,982	63,539	66,777	38,813	11,507
	FY 2017	236,713	191	9,474	40,552	64,691	70,305	40,047	11,453
	FY 2018	247,234	157	10,327	42,676	65,784	74,017	42,314	11,959
	FY 2019	248,276	172	10,184	42,664	65,293	74,526	43,244	12,193
Lead Screening ^a									
	FY 2015	40,379	1,394	31,807	7,178				
	FY 2016	44,176	1,391	35,364	7,421				
	FY 2017	44,088	1,304	35,208	7,576				
	FY 2018	43,656	1,030	35,077	7,549				
	FY 2019	41,731	811	33,325	7,595				

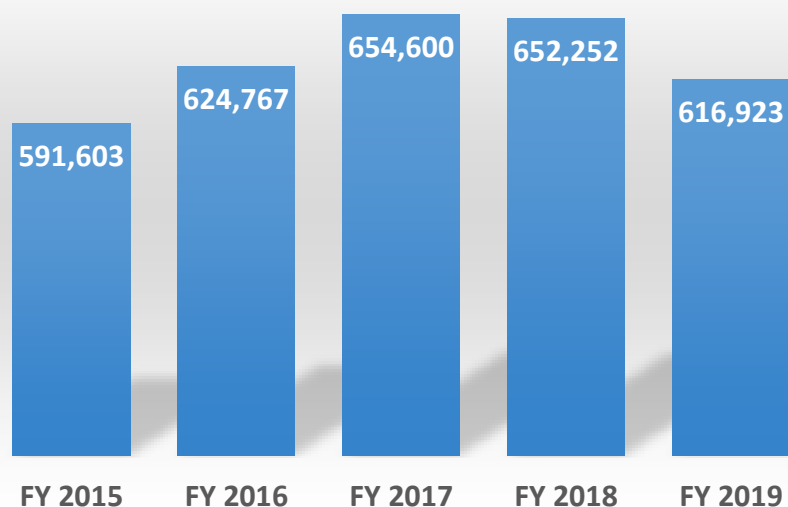
^a CMS requires this information for children under age six

Minnesota EPSDT 2015 – 2019

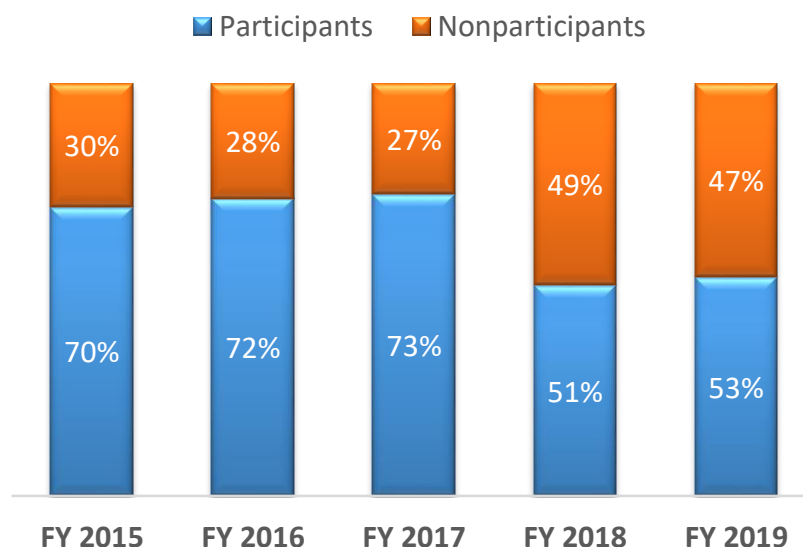
**AAP Periodicity Recommendations vs Minnesota Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	5	4	3	2	3	2	1
	2018 – 2019	5	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

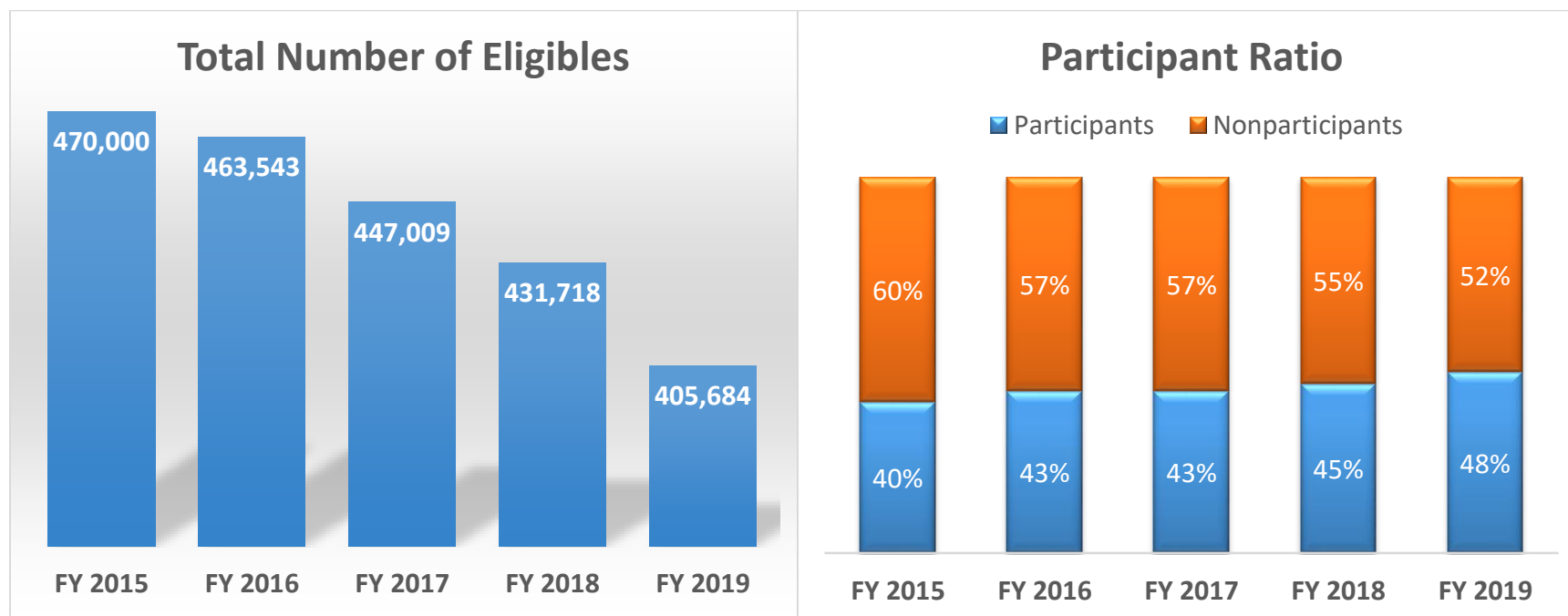
Mississippi EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	470,000	28,486	57,484	79,035	110,681	105,319	72,646	16,349
	FY 2016	463,543	27,723	56,433	77,386	108,313	109,114	67,591	16,983
	FY 2017	447,009	27,362	54,251	74,917	102,151	110,975	59,830	17,523
	FY 2018	431,718	26,848	52,918	73,728	96,891	111,728	52,361	17,244
	FY 2019	405,684	26,456	51,305	70,107	88,791	110,731	44,415	13,879
Screening Ratio									
	FY 2015	57%	100%	88%	58%	31%	35%	26%	12%
	FY 2016	56%	97%	75%	63%	34%	37%	26%	13%
	FY 2017	58%	100%	78%	64%	35%	37%	25%	13%
	FY 2018	60%	100%	80%	68%	35%	37%	27%	13%
	FY 2019	64%	100%	83%	71%	38%	41%	30%	15%
Participant Ratio									
	FY 2015	40%	96%	72%	50%	28%	30%	22%	11%
	FY 2016	43%	97%	75%	54%	31%	33%	23%	11%
	FY 2017	43%	97%	76%	55%	32%	33%	23%	12%
	FY 2018	45%	97%	76%	58%	31%	34%	24%	12%
	FY 2019	48%	97%	78%	60%	35%	37%	27%	13%
Referrals									
	FY 2015	110,690	20,904	28,061	19,091	15,748	17,374	8,836	676
	FY 2016	85,429	16,454	27,147	14,128	11,436	11,379	4,562	323
	FY 2017	83,768	16,028	26,848	14,366	11,138	11,281	3,822	285
	FY 2018	82,756	15,844	26,696	14,968	10,189	11,276	3,502	281
	FY 2019	86,020	15,932	26,762	15,498	10,723	13,426	3,455	224
Dental Services									
	FY 2015	224,099	142	11,491	45,775	67,674	60,401	34,531	4,085
	FY 2016	228,913	174	12,497	45,681	67,772	65,043	33,354	4,392
	FY 2017	223,651	149	12,595	43,669	64,538	67,714	30,225	4,761
	FY 2018	216,490	202	12,959	42,933	61,138	68,026	26,585	4,647
	FY 2019	203,979	163	12,282	40,627	56,312	68,062	22,830	3,703
Lead Screening ^a									
	FY 2015	49,325	899	27,796	20,630				
	FY 2016	39,268	357	21,826	17,085				
	FY 2017	34,061	247	20,466	13,348				
	FY 2018	32,494	239	19,613	12,642				
	FY 2019	31,501	175	19,513	11,813				

^a CMS requires this information for children under age six

Mississippi EPSDT 2015 – 2019

AAP Periodicity Recommendations vs Mississippi Schedules Reported on Form CMS-416 (2015-2019)								
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b Mississippi	2008 – 2019	7	5	3	4	5	4	2
	2014	5	3	3	4	5	4	2
	2015	5	4	3	4	5	4	2
	2016 – 2019	6	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Missouri EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	687,806	41,019	84,610	112,566	150,671	158,082	110,200	30,658
	FY 2016	717,324	40,725	87,332	115,403	153,614	166,652	116,133	37,465
	FY 2017	748,737	39,615	87,118	123,767	158,284	179,999	122,972	36,982
	FY 2018	760,005	39,640	83,205	128,269	157,240	187,601	127,241	36,809
	FY 2019	727,148	38,028	78,014	120,344	149,147	183,355	123,471	34,789
Screening Ratio									
	FY 2015	100%	100%	100%	100%	100%	100%	100%	100%
	FY 2016	100%	100%	100%	100%	100%	100%	100%	100%
	FY 2017	100%	100%	100%	100%	100%	100%	100%	100%
	FY 2018	96%	100%	100%	68%	93%	86%	99%	100%
	FY 2019	100%	100%	100%	76%	100%	95%	100%	100%
Participant Ratio									
	FY 2015	70%	94%	77%	63%	75%	65%	67%	55%
	FY 2016	68%	93%	70%	55%	76%	66%	71%	51%
	FY 2017	66%	92%	70%	52%	75%	64%	67%	47%
	FY 2018	62%	91%	67%	49%	69%	61%	63%	42%
	FY 2019	67%	92%	71%	53%	78%	66%	68%	45%
Referrals									
	FY 2015	37,283	4,512	5,700	6,278	5,567	6,246	6,244	2,736
	FY 2016	68,756	8,277	12,847	10,682	11,238	12,635	10,080	2,997
	FY 2017	71,507	8,353	13,239	10,814	11,956	14,007	10,377	2,761
	FY 2018	69,666	8,097	12,279	10,126	11,386	14,506	10,658	2,614
	FY 2019	65,302	8,126	11,463	9,034	10,377	13,866	10,092	2,344
Dental Services									
	FY 2015	246,513	174	10,321	42,746	75,342	71,594	40,884	5,452
	FY 2016	250,529	144	10,915	41,919	75,036	74,066	42,397	6,052
	FY 2017	251,312	134	10,502	41,712	73,364	77,083	42,821	5,696
	FY 2018	250,664	171	10,395	41,767	71,595	78,250	43,275	5,211
	FY 2019	263,473	235	11,986	44,296	72,605	82,544	46,024	5,783
Lead Screening ^a									
	FY 2015	66,097	686	38,755	26,656				
	FY 2016	67,605	829	41,043	25,733				
	FY 2017	68,878	708	41,822	26,348				
	FY 2018	56,121	477	33,538	22,106				
	FY 2019	52,003	469	31,365	20,169				

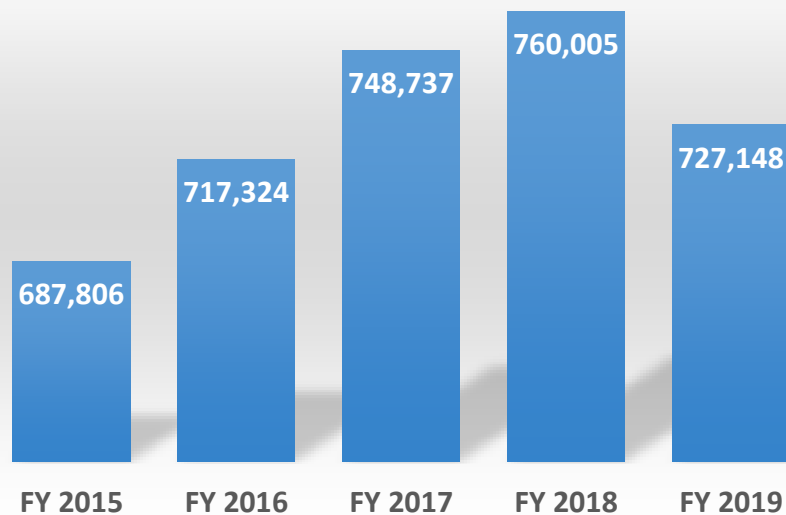
^a CMS requires this information for children under age six

Missouri EPSDT 2015 – 2019

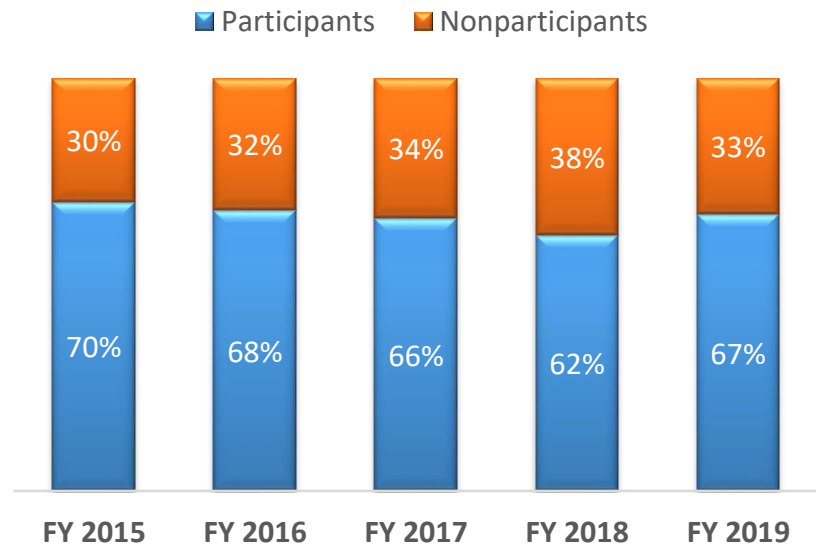
**AAP Periodicity Recommendations vs Missouri Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Missouri	2014 – 2019	5	4	3	2	3	2	1

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Montana EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	122,954	7,324	15,164	21,111	24,580	29,426	19,654	5,695
	FY 2016	120,192	6,956	14,222	19,335	25,205	27,345	18,748	8,381
	FY 2017	125,568	6,434	14,499	19,956	25,824	28,916	19,630	10,309
	FY 2018	127,843	6,092	13,851	20,602	25,612	30,279	20,364	11,043
	FY 2019	128,555	5,770	13,007	20,796	25,898	31,298	21,180	10,606
Screening Ratio									
	FY 2015	60%	100%	79%	69%	32%	40%	29%	10%
	FY 2016	67%	100%	92%	77%	36%	45%	33%	12%
	FY 2017	74%	100%	100%	82%	43%	56%	40%	10%
	FY 2018	86%	100%	100%	96%	57%	74%	50%	15%
	FY 2019	59%	100%	83%	65%	38%	47%	34%	10%
Participant Ratio									
	FY 2015	38%	88%	64%	50%	24%	30%	23%	8%
	FY 2016	43%	97%	74%	57%	28%	35%	26%	10%
	FY 2017	44%	98%	76%	56%	32%	39%	29%	8%
	FY 2018	40%	94%	73%	52%	30%	35%	25%	8%
	FY 2019	42%	94%	73%	53%	32%	38%	27%	9%
Referrals									
	FY 2015	33,949	4,669	8,211	7,209	4,882	5,864	2,899	215
	FY 2016	36,988	4,923	9,100	7,683	5,237	6,469	3,177	399
	FY 2017	44,846	4,763	9,893	9,098	7,045	9,216	4,300	531
	FY 2018	46,989	5,457	9,660	9,510	7,038	9,922	4,660	742
	FY 2019	46,917	5,153	9,075	9,584	7,265	10,272	4,866	702
Dental Services									
	FY 2015	52,344	220	4,170	10,744	14,611	13,484	7,587	1,528
	FY 2016	51,960	67	3,557	9,345	14,413	14,713	8,181	1,684
	FY 2017	66,967	105	4,734	12,088	17,610	18,965	10,345	3,120
	FY 2018	64,509	140	4,535	11,614	16,514	18,357	10,289	3,060
	FY 2019	64,648	152	4,348	11,797	16,300	18,734	10,456	2,861
Lead Screening ^a									
	FY 2015	1,529	19	886	624				
	FY 2016	2,456	20	1,447	989				
	FY 2017	2,825	13	1,698	1,114				
	FY 2018	2,158	20	1,555	583				
	FY 2019	2,112	22	1,580	510				

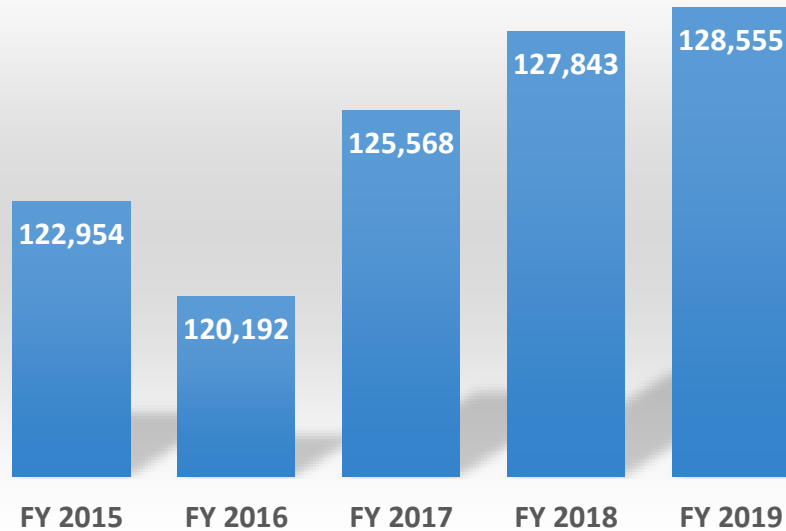
^a CMS requires this information for children under age six

Montana EPSDT 2015 – 2019

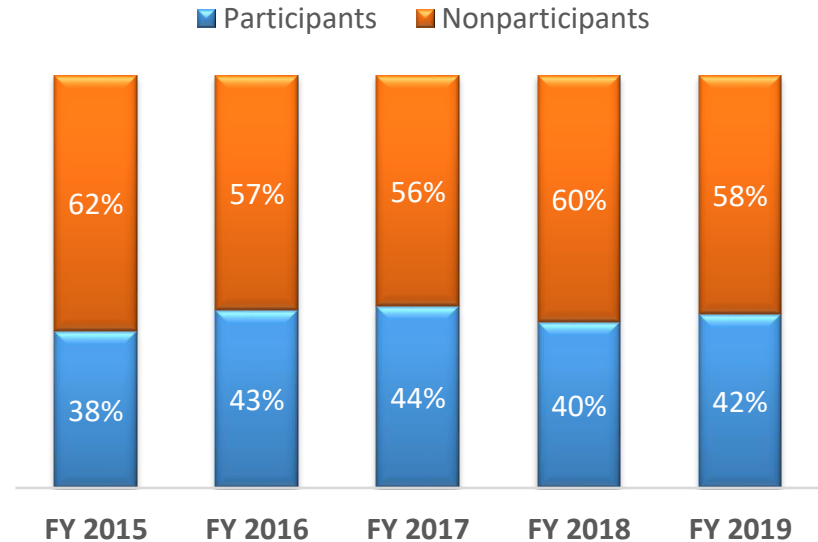
**AAP Periodicity Recommendations vs Montana Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Montana	2014 – 2018	6	5	3	4	5	4	2
	2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Nebraska EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	200,248	12,942	25,505	33,875	45,133	45,655	28,920	8,218
	FY 2016	199,222	12,532	25,440	33,087	44,585	46,829	29,195	7,554
	FY 2017	199,528	12,384	25,098	33,273	43,320	48,040	29,774	7,639
	FY 2018	201,609	12,163	24,806	33,987	42,590	49,501	30,856	7,706
	FY 2019	200,651	11,876	24,086	33,677	41,748	49,923	31,730	7,611
Screening Ratio									
	FY 2015	66%	100%	87%	72%	31%	49%	37%	12%
	FY 2016	64%	100%	84%	69%	31%	45%	36%	13%
	FY 2017	71%	100%	94%	77%	36%	47%	39%	17%
	FY 2018	73%	100%	100%	78%	37%	50%	41%	17%
	FY 2019	72%	100%	92%	75%	39%	56%	44%	17%
Participant Ratio									
	FY 2015	43%	93%	68%	53%	25%	36%	28%	10%
	FY 2016	44%	93%	72%	56%	27%	37%	29%	11%
	FY 2017	46%	93%	74%	58%	30%	39%	31%	12%
	FY 2018	48%	93%	74%	60%	32%	42%	33%	12%
	FY 2019	48%	93%	75%	60%	34%	42%	33%	14%
Referrals									
	FY 2015	2,627	869	356	313	316	422	327	24
	FY 2016	3,472	1,346	503	408	381	426	366	42
	FY 2017	4,109	1,740	978	361	324	365	309	32
	FY 2018	854	398	138	78	71	102	59	8
	FY 2019	95	DS	DS	16	13	23	DS	0
Dental Services									
	FY 2015	100,257	59	6,124	18,947	29,601	28,602	14,666	2,258
	FY 2016	100,546	56	6,256	18,445	29,520	29,211	14,999	2,059
	FY 2017	101,610	57	6,242	18,941	28,871	30,045	15,308	2,146
	FY 2018	101,481	68	6,531	19,209	27,972	30,164	15,485	2,052
	FY 2019	95,530	78	5,954	17,670	25,947	28,737	15,111	2,033
Lead Screening ^a									
	FY 2015	12,133	98	7,543	4,492				
	FY 2016	15,953	64	9,831	6,058				
	FY 2017	16,443	103	10,018	6,322				
	FY 2018	16,452	85	10,094	6,273				
	FY 2019	16,363	66	10,138	6,159				

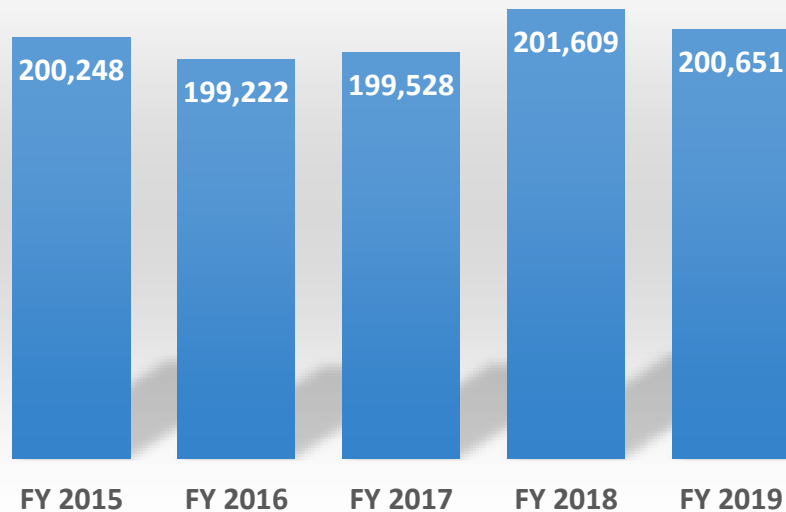
^a CMS requires this information for children under age six

Nebraska EPSDT 2015 – 2019

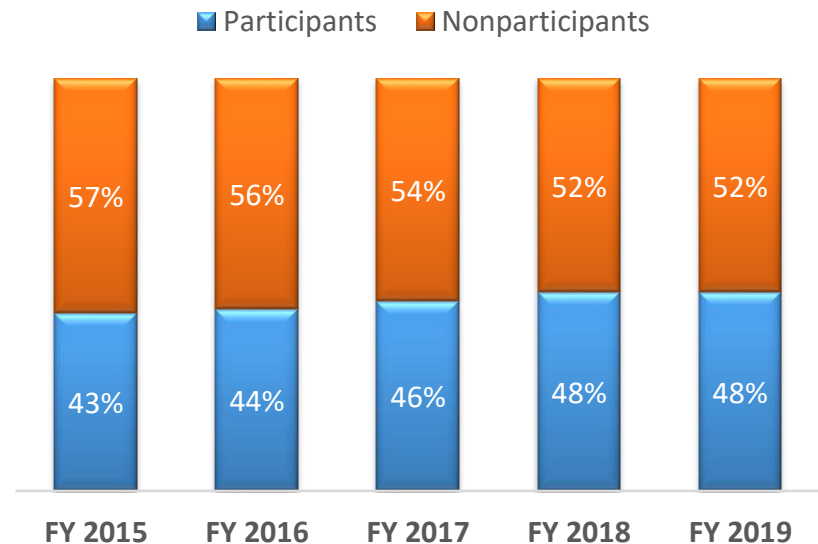
**AAP Periodicity Recommendations vs Nebraska Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Nebraska	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Nevada EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	388,484	22,810	46,452	64,570	85,535	87,473	56,879	24,765
	FY 2016	390,719	23,366	46,038	63,301	84,403	90,069	59,022	24,520
	FY 2017	400,378	23,265	46,832	64,391	84,084	95,052	61,484	25,270
	FY 2018	405,991	23,135	46,771	65,321	83,029	98,525	63,736	25,474
	FY 2019	401,178	21,106	45,143	64,652	81,303	99,103	64,469	25,402
Screening Ratio									
	FY 2015	93%	100%	100%	77%	93%	79%	71%	25%
	FY 2016	93%	100%	100%	77%	89%	77%	71%	30%
	FY 2017	87%	100%	98%	71%	83%	76%	67%	24%
	FY 2018	61%	87%	80%	74%	45%	48%	37%	14%
	FY 2019	63%	90%	82%	75%	48%	50%	39%	13%
Participant Ratio									
	FY 2015	66%	88%	71%	60%	78%	65%	58%	22%
	FY 2016	68%	89%	75%	61%	78%	66%	60%	27%
	FY 2017	65%	83%	71%	57%	73%	65%	58%	22%
	FY 2018	47%	83%	70%	59%	40%	42%	32%	13%
	FY 2019	49%	92%	73%	61%	42%	43%	33%	12%
Referrals									
	FY 2015	83,511	14,054	20,701	16,577	12,780	12,451	6,018	930
	FY 2016	81,682	9,613	20,577	16,439	13,728	13,769	6,654	902
	FY 2017	116,141	13,574	23,425	21,635	20,736	21,611	11,914	3,246
	FY 2018	94,895	13,680	20,360	17,817	15,154	17,631	8,808	1,445
	FY 2019	111,628	12,204	22,132	20,345	18,784	22,723	12,486	2,954
Dental Services									
	FY 2015	130,928	79	7,389	23,843	38,318	37,113	19,244	4,942
	FY 2016	151,671	125	8,054	25,908	43,405	44,975	23,670	5,534
	FY 2017	155,450	140	8,305	26,337	43,094	47,308	24,771	5,495
	FY 2018	159,394	173	8,697	26,897	42,759	49,175	26,048	5,645
	FY 2019	157,424	211	8,435	26,477	41,833	48,862	26,074	5,532
Lead Screening ^a									
	FY 2015	10,721	125	7,051	3,545				
	FY 2016	7,378	108	4,551	2,719				
	FY 2017	9,327	168	6,342	2,817				
	FY 2018	10,412	214	7,102	3,096				
	FY 2019	8,977	128	6,109	2,740				

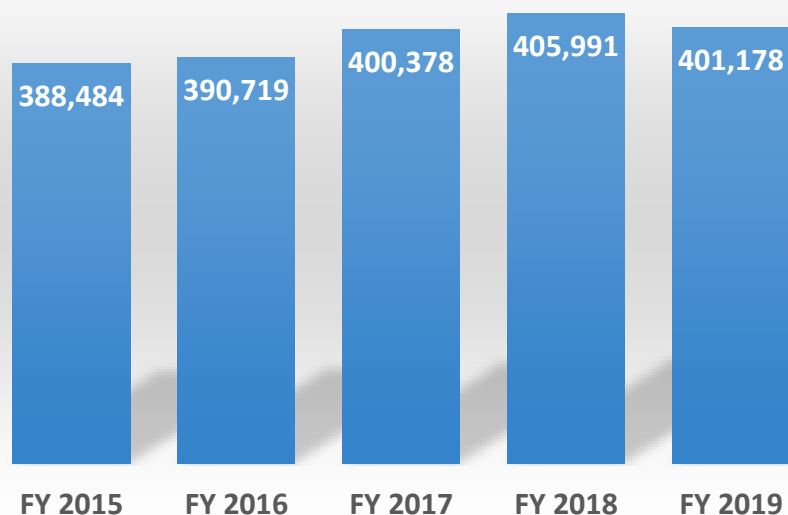
^a CMS requires this information for children under age six

Nevada EPSDT 2015 – 2019

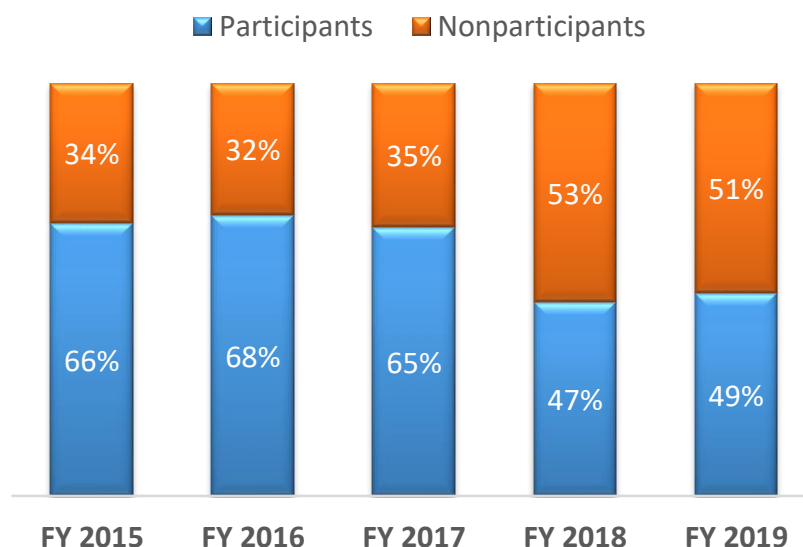
**AAP Periodicity Recommendations vs Nevada Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	Nevada							
	2014 – 2017	5	4	3	2	3	2	1
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

New Hampshire EPSDT 2015 – 2019

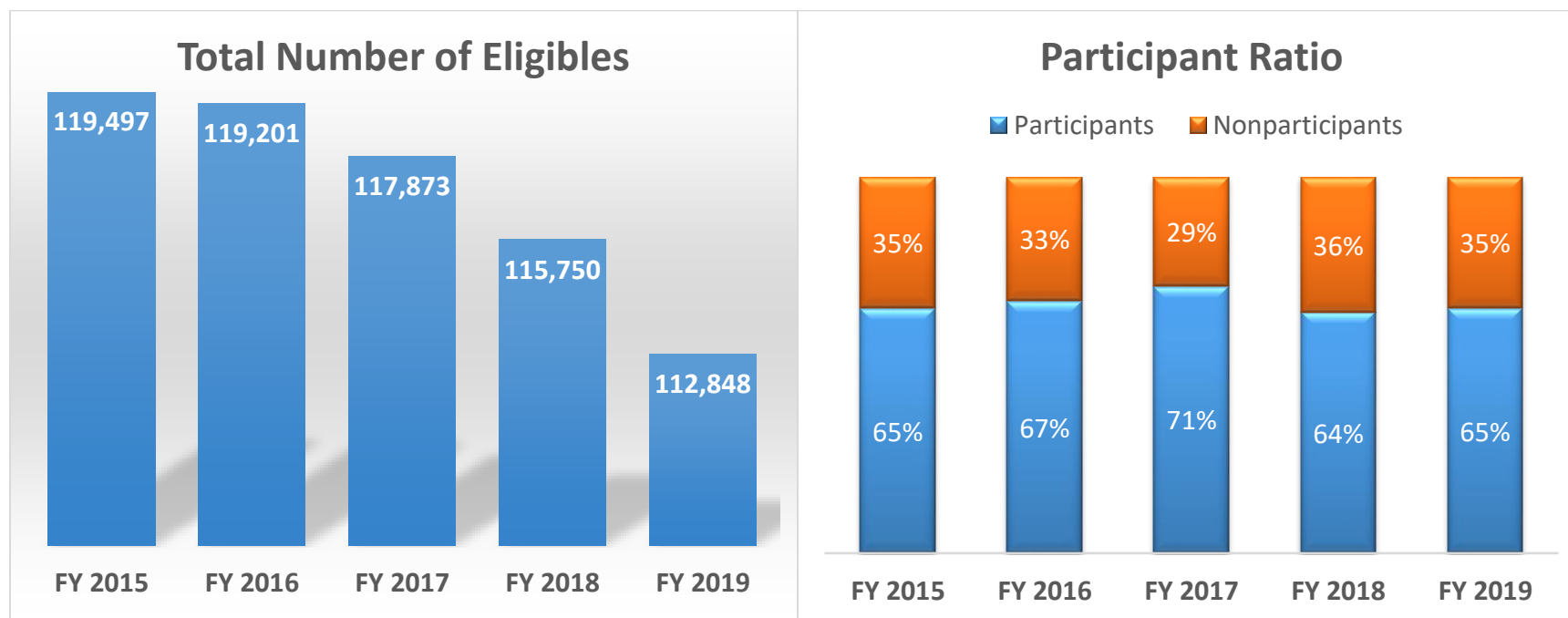
		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	119,497	5,718	12,442	18,458	24,977	28,123	21,252	8,527
	FY 2016	119,201	5,589	12,356	18,308	24,716	28,381	21,227	8,624
	FY 2017	117,873	5,372	12,140	18,019	24,201	28,652	21,085	8,404
	FY 2018	115,750	5,157	11,668	17,655	23,585	28,871	20,788	8,026
	FY 2019	112,848	4,859	11,074	17,221	22,849	28,677	20,310	7,858
Screening Ratio									
	FY 2015	80%	100%	100%	77%	100%	60%	48%	22%
	FY 2016	88%	100%	100%	86%	100%	64%	53%	19%
	FY 2017	85%	100%	100%	82%	100%	63%	52%	29%
	FY 2018	74%	92%	94%	85%	67%	67%	56%	31%
	FY 2019	76%	92%	97%	87%	69%	68%	59%	33%
Participant Ratio									
	FY 2015	65%	93%	80%	69%	100%	56%	45%	20%
	FY 2016	67%	94%	85%	73%	100%	58%	47%	16%
	FY 2017	71%	92%	86%	76%	100%	61%	50%	26%
	FY 2018	64%	91%	84%	76%	64%	63%	52%	28%
	FY 2019	65%	89%	84%	77%	66%	63%	54%	29%
Referrals									
	FY 2015	33,689	3,277	6,620	5,589	5,805	7,159	4,561	678
	FY 2016	38,213	3,420	7,538	6,569	6,381	8,327	5,396	582
	FY 2017	44,086	3,293	8,353	7,653	7,727	10,023	6,414	623
	FY 2018	30,961	3,131	6,937	4,902	5,160	5,989	4,302	540
	FY 2019	32,684	2,905	6,917	5,301	5,580	6,476	4,682	823
Dental Services									
	FY 2015	62,439	108	3,742	10,383	16,345	17,851	11,643	2,367
	FY 2016	62,329	129	3,797	10,250	16,157	17,885	11,676	2,435
	FY 2017	60,785	109	3,729	9,898	15,581	17,859	11,408	2,201
	FY 2018	60,412	146	3,740	9,769	15,331	17,966	11,271	2,189
	FY 2019	60,548	173	3,848	9,853	15,092	18,225	11,159	2,198
Lead Screening ^a									
	FY 2015	6,026	47	5,055	924				
	FY 2016	6,408	36	5,331	1,041				
	FY 2017	7,016	46	5,749	1,221				
	FY 2018	6,914	32	5,580	1,302				
	FY 2019	7,915	50	6,180	1,685				

^a CMS requires this information for children under age six

New Hampshire EPSDT 2015 – 2019

**AAP Periodicity Recommendations vs New Hampshire Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	6	4	3	2	5	4	2
	2018 – 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

New Jersey EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	872,992	53,576	98,666	139,422	184,860	197,323	138,887	60,258
	FY 2016	881,497	53,228	98,102	138,105	183,411	201,040	142,799	64,812
	FY 2017	866,475	52,368	96,169	133,930	176,642	201,201	141,065	65,100
	FY 2018	867,457	54,212	95,562	132,296	172,815	204,689	142,366	65,517
	FY 2019	852,219	45,260	94,469	129,927	168,146	205,485	143,671	65,261
Screening Ratio									
	FY 2015	80%	88%	100%	91%	67%	68%	60%	38%
	FY 2016	79%	89%	100%	89%	66%	68%	61%	38%
	FY 2017	80%	95%	100%	90%	66%	69%	63%	39%
	FY 2018	87%	100%	100%	97%	72%	75%	70%	45%
	FY 2019	93%	100%	100%	100%	76%	80%	75%	50%
Participant Ratio									
	FY 2015	61%	89%	82%	71%	57%	57%	50%	31%
	FY 2016	62%	91%	83%	72%	58%	59%	52%	31%
	FY 2017	63%	93%	84%	74%	59%	61%	54%	32%
	FY 2018	66%	94%	85%	76%	61%	63%	57%	36%
	FY 2019	70%	91%	86%	81%	66%	68%	61%	38%
Referrals									
	FY 2015	122,033	231	11,632	28,776	29,922	26,876	18,131	6,465
	FY 2016	111,771	194	11,059	26,345	27,007	24,223	16,537	6,406
	FY 2017	103,932	171	10,930	24,151	23,227	22,791	16,148	6,514
	FY 2018	106,149	151	10,773	24,703	24,014	23,713	16,120	6,675
	FY 2019	99,460	154	10,244	23,503	21,643	22,353	15,105	6,458
Dental Services									
	FY 2015	409,467	364	21,141	74,958	114,797	113,397	65,823	18,987
	FY 2016	415,526	363	21,128	73,288	113,765	117,148	69,124	20,710
	FY 2017	417,976	529	21,856	71,906	109,287	120,089	72,041	22,268
	FY 2018	430,446	428	23,627	73,469	109,650	125,565	74,582	23,125
	FY 2019	429,996	521	23,682	72,801	106,911	126,925	75,984	23,172
Lead Screening ^a									
	FY 2015	91,020	1,546	46,591	42,883				
	FY 2016	88,138	3,149	50,496	34,493				
	FY 2017	104,139	2,642	54,295	47,202				
	FY 2018	124,764	2,771	66,732	55,261				
	FY 2019	117,379	2,644	65,149	49,586				

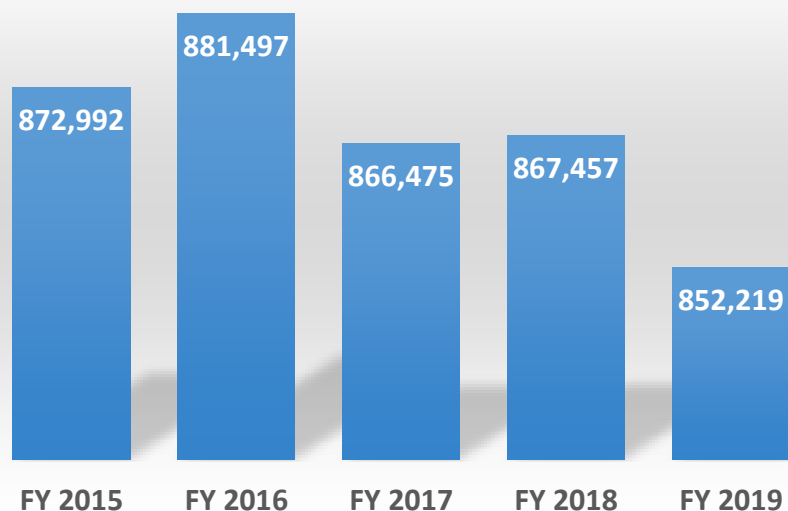
^a CMS requires this information for children under age six

New Jersey EPSDT 2015 – 2019

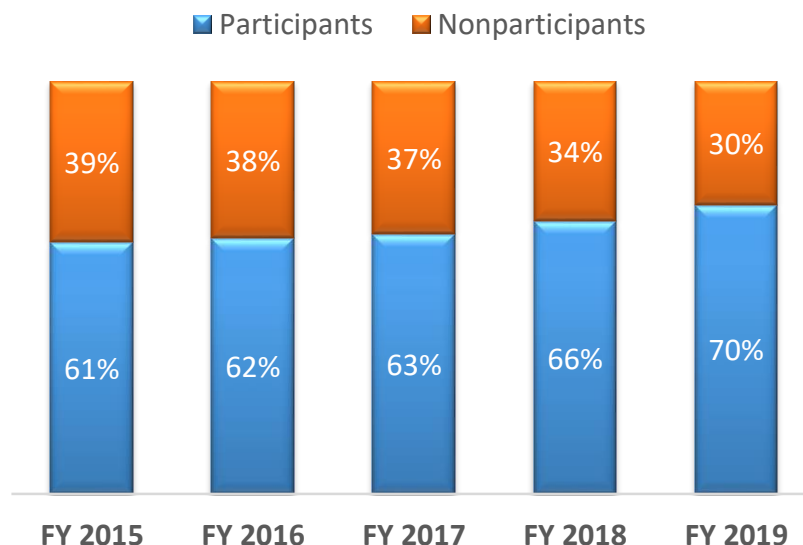
**AAP Periodicity Recommendations vs New Jersey Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
New Jersey	2014 – 2019	6	4	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

New Mexico EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	402,696	19,846	41,874	61,659	87,256	95,891	67,713	28,457
	FY 2016	413,935	19,407	42,126	62,789	87,715	100,020	71,196	30,682
	FY 2017	416,295	18,657	41,113	62,679	85,658	103,008	73,067	32,113
	FY 2018	406,225	17,756	39,227	60,684	81,219	102,713	72,709	31,917
	FY 2019	392,985	17,654	37,078	58,122	76,558	100,673	71,362	31,538
Screening Ratio									
	FY 2015	84%	81%	100%	85%	100%	78%	47%	18%
	FY 2016	84%	84%	100%	86%	100%	76%	46%	18%
	FY 2017	81%	75%	100%	83%	100%	75%	44%	18%
	FY 2018	70%	68%	100%	87%	57%	62%	46%	18%
	FY 2019	74%	87%	100%	91%	59%	64%	49%	19%
Participant Ratio									
	FY 2015	62%	92%	72%	67%	89%	62%	37%	15%
	FY 2016	61%	94%	73%	68%	87%	61%	36%	15%
	FY 2017	60%	93%	74%	66%	87%	60%	35%	15%
	FY 2018	53%	93%	75%	69%	46%	50%	36%	15%
	FY 2019	54%	93%	76%	72%	48%	52%	39%	16%
Referrals									
	FY 2015	302	195	9	11	8	8	31	40
	FY 2016	316	194	12	12	8	17	34	39
	FY 2017	391	236	18	12	6	19	58	42
	FY 2018	363	228	9	8	6	9	47	56
	FY 2019	603	416	DS	DS	14	12	58	86
Dental Services									
	FY 2015	213,351	217	12,945	36,941	58,545	60,945	35,396	8,362
	FY 2016	225,472	263	13,587	38,685	59,652	64,802	38,546	9,937
	FY 2017	230,443	292	13,588	38,687	59,149	67,594	40,466	10,667
	FY 2018	224,424	320	13,143	37,860	55,928	66,806	39,938	10,429
	FY 2019	218,564	379	12,531	36,994	53,472	65,808	38,987	10,393
Lead Screening ^a									
	FY 2015	11,366	185	7,125	4,056				
	FY 2016	11,881	215	7,582	4,084				
	FY 2017	12,274	197	8,354	3,723				
	FY 2018	11,987	191	8,383	3,413				
	FY 2019	11,810	166	8,295	3,349				

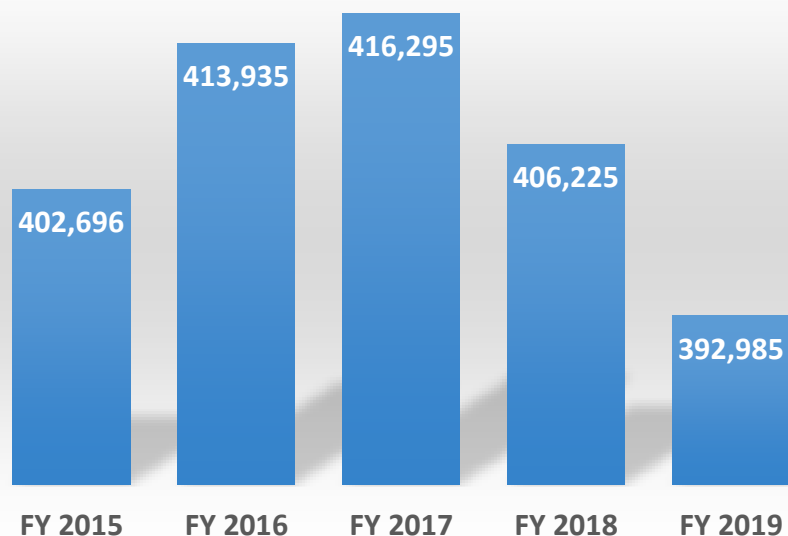
^a CMS requires this information for children under age six

New Mexico EPSDT 2015 – 2019

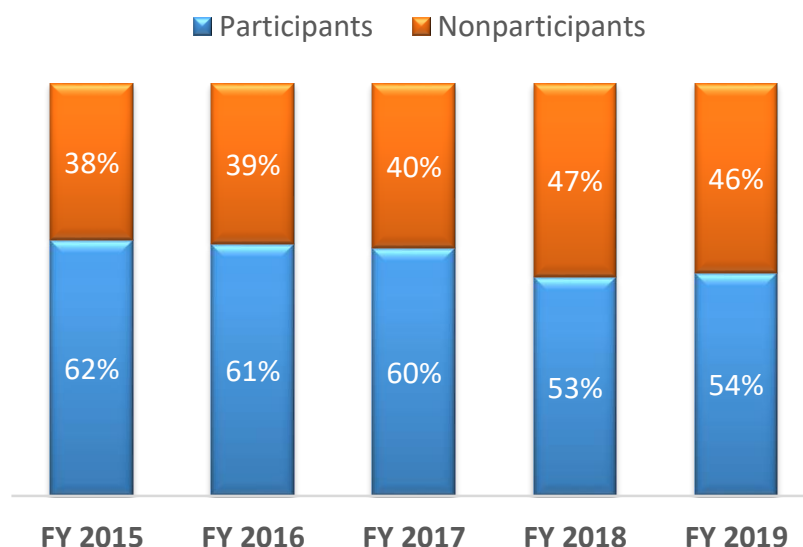
**AAP Periodicity Recommendations vs New Mexico Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
New Mexico	2014 – 2017	6	4	3	2	4	4	2
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

New York EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	2,573,730	156,439	309,935	392,819	508,202	552,531	422,481	231,323
	FY 2016	2,658,612	182,779	314,738	395,669	517,282	571,618	439,405	237,121
	FY 2017	2,648,477	181,544	307,010	389,030	509,490	580,540	442,585	238,278
	FY 2018	2,582,181	146,266	292,236	381,505	495,387	586,382	441,548	238,857
	FY 2019	2,551,260	139,751	281,353	376,096	483,290	590,412	439,814	240,544
Screening Ratio									
	FY 2015	99%	77%	100%	100%	100%	78%	69%	48%
	FY 2016	90%	78%	100%	94%	100%	71%	62%	41%
	FY 2017	98%	77%	100%	100%	100%	81%	73%	37%
	FY 2018	97%	82%	100%	100%	100%	78%	71%	37%
	FY 2019	85%	85%	100%	81%	81%	79%	72%	38%
Participant Ratio									
	FY 2015	70%	84%	78%	74%	100%	60%	53%	37%
	FY 2016	67%	76%	74%	70%	100%	59%	51%	33%
	FY 2017	75%	77%	82%	80%	100%	67%	60%	32%
	FY 2018	75%	89%	83%	79%	100%	67%	60%	32%
	FY 2019	68%	92%	84%	74%	69%	69%	61%	34%
Referrals									
	FY 2015	0	0	0	0	0	0	0	0
	FY 2016	0	0	0	0	0	0	0	0
	FY 2017	0	0	0	0	0	0	0	0
	FY 2018	1,338,487	117,254	216,061	229,323	248,536	285,438	188,799	53,076
	FY 2019	1,341,343	114,727	210,896	229,081	246,443	292,672	191,889	55,635
Dental Services									
	FY 2015	1,031,707	830	41,546	179,820	276,514	285,060	177,158	70,779
	FY 2016	1,071,806	883	44,125	182,066	287,299	299,165	186,533	71,735
	FY 2017	1,097,511	863	46,169	183,866	290,723	311,738	191,757	72,395
	FY 2018	1,096,328	1,060	45,332	181,718	285,627	317,084	193,460	72,047
	FY 2019	1,122,579	1,093	47,454	183,744	286,276	329,353	199,365	75,294
Lead Screening ^a									
	FY 2015	27,108	441	17,432	9,235				
	FY 2016	25,832	568	16,294	8,970				
	FY 2017	222,401	5,520	134,290	82,591				
	FY 2018	216,687	5,233	131,206	80,248				
	FY 2019	214,446	4,943	131,327	78,176				

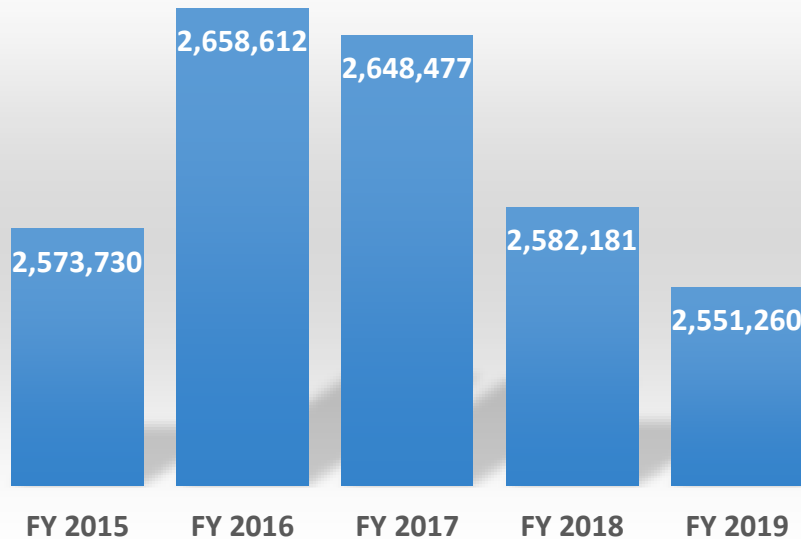
^a CMS requires this information for children under age six

New York EPSDT 2015 – 2019

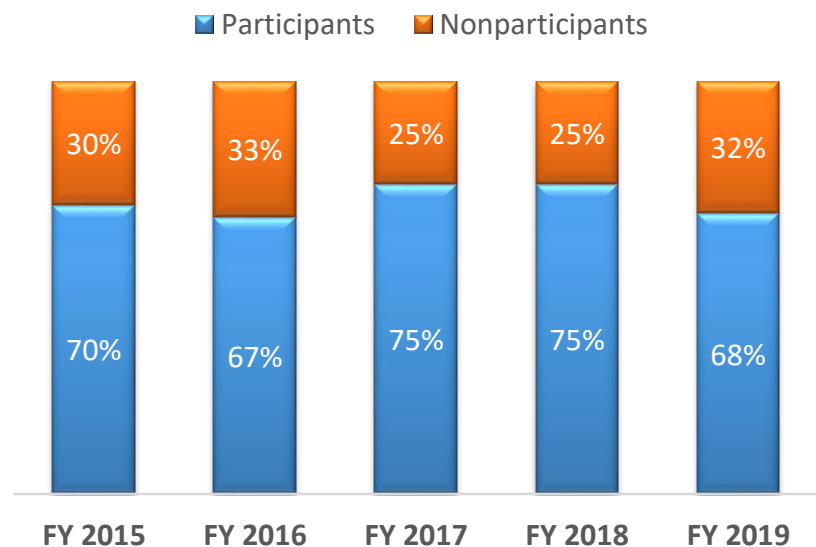
**AAP Periodicity Recommendations vs New York Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	New York 2014 – 2018	6	3	3	2	5	4	2
	2019	6	4	4	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

North Carolina EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,328,341	73,660	156,426	226,239	293,008	301,884	211,320	65,804
	FY 2016	1,319,891	73,444	154,845	221,578	285,033	302,411	214,246	68,334
	FY 2017	1,329,341	73,136	154,329	222,964	279,273	311,806	218,259	69,574
	FY 2018	1,320,211	72,061	151,490	222,837	270,524	318,613	218,991	65,695
	FY 2019	1,299,579	71,015	148,820	220,786	259,749	318,502	215,295	65,412
Screening Ratio									
	FY 2015	87%	100%	100%	79%	49%	51%	40%	19%
	FY 2016	87%	100%	100%	80%	49%	51%	40%	16%
	FY 2017	88%	100%	100%	80%	50%	54%	41%	17%
	FY 2018	75%	100%	100%	79%	51%	54%	42%	18%
	FY 2019	78%	100%	100%	82%	53%	56%	44%	19%
Participant Ratio									
	FY 2015	57%	96%	89%	73%	47%	49%	38%	18%
	FY 2016	57%	96%	89%	74%	48%	50%	38%	16%
	FY 2017	58%	96%	90%	73%	49%	52%	39%	16%
	FY 2018	58%	96%	85%	73%	49%	52%	40%	17%
	FY 2019	59%	96%	85%	75%	51%	54%	42%	18%
Referrals									
	FY 2015	355,716	53,638	92,244	62,815	52,610	56,208	33,179	5,022
	FY 2016	352,515	52,579	92,177	61,540	51,234	57,073	33,407	4,505
	FY 2017	359,968	51,804	92,899	62,571	52,074	59,946	35,759	4,915
	FY 2018	354,661	51,166	91,885	61,382	50,174	59,141	35,972	4,941
	FY 2019	363,846	51,506	91,639	64,595	50,277	62,774	37,795	5,260
Dental Services									
	FY 2015	641,985	501	36,134	119,582	181,979	178,495	105,280	20,014
	FY 2016	642,565	532	36,298	118,826	177,326	180,688	108,710	20,185
	FY 2017	654,667	689	37,481	121,363	174,384	188,097	112,166	20,487
	FY 2018	654,834	665	36,971	121,672	169,512	192,989	113,617	19,408
	FY 2019	651,308	853	37,140	123,222	163,308	194,358	113,152	19,275
Lead Screening ^a									
	FY 2015	104,370	506	86,920	16,944				
	FY 2016	107,284	407	89,705	17,172				
	FY 2017	106,767	371	88,583	17,813				
	FY 2018	106,341	360	89,221	16,760				
	FY 2019	110,295	33/9	92,521	17,435				

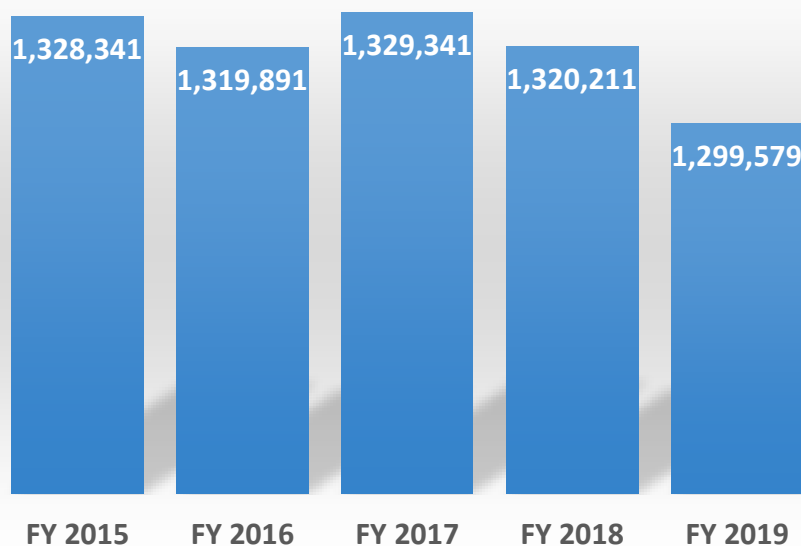
^a CMS requires this information for children under age six

North Carolina EPSDT 2015 – 2019

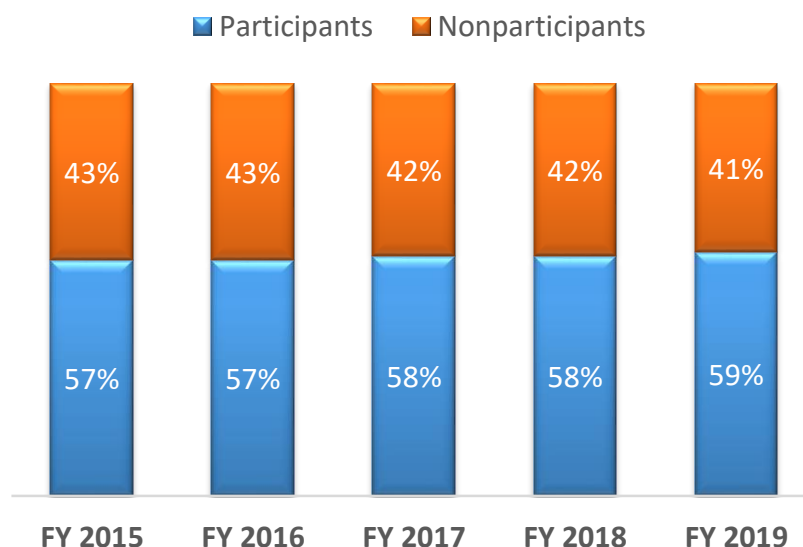
**AAP Periodicity Recommendations vs North Carolina Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	3	2	3	4	5	4	2
	2018 – 2019	5	4	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

North Dakota EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	56,855	3,774	8,448	10,336	12,193	11,606	7,959	2,539
	FY 2016	60,587	3,992	8,476	10,634	12,207	12,289	7,947	5,042
	FY 2017	60,561	3,744	8,423	10,917	12,080	12,913	8,035	4,449
	FY 2018	60,193	3,537	8,350	10,816	12,051	13,179	8,108	4,152
	FY 2019	57,296	3,427	7,754	10,550	11,305	12,643	7,793	3,824
Screening Ratio									
	FY 2015	62%	86%	95%	64%	34%	43%	34%	13%
	FY 2016	54%	78%	64%	59%	34%	44%	36%	14%
	FY 2017	55%	83%	65%	58%	35%	45%	38%	12%
	FY 2018	52%	67%	65%	58%	36%	45%	37%	17%
	FY 2019	59%	84%	66%	64%	42%	51%	41%	17%
Participant Ratio									
	FY 2015	42%	70%	54%	54%	30%	36%	28%	10%
	FY 2016	40%	86%	58%	46%	28%	35%	27%	11%
	FY 2017	42%	85%	59%	46%	31%	36%	30%	10%
	FY 2018	42%	86%	60%	48%	31%	37%	31%	11%
	FY 2019	48%	89%	64%	53%	38%	44%	35%	13%
Referrals									
	FY 2015	10,729	1,872	3,318	1,884	1,304	1,430	845	76
	FY 2016	12,855	2,456	3,552	2,290	1,536	1,888	1,048	85
	FY 2017	13,521	2,319	3,657	2,369	1,675	2,169	1,233	99
	FY 2018	13,364	1,708	3,591	2,482	1,804	2,369	1,308	102
	FY 2019	21,645	2,472	4,582	4,326	3,438	4,459	2,166	202
Dental Services									
	FY 2015	17,530	96	1,147	3,476	4,992	4,456	2,700	663
	FY 2016	15,932	14	644	3,166	4,581	4,381	2,481	665
	FY 2017	16,540	16	701	3,243	4,617	4,683	2,590	690
	FY 2018	10,968	3	301	1,943	3,291	3,269	1,695	466
	FY 2019	18,110	DS	895	3,454	5,237	5,183	2,744	DS
Lead Screening ^a									
	FY 2015	1,736	16	938	782				
	FY 2016	5	0	1	4				
	FY 2017	12	0	9	3				
	FY 2018	0	0	0	0				
	FY 2019	2,074	17	1,225	832				

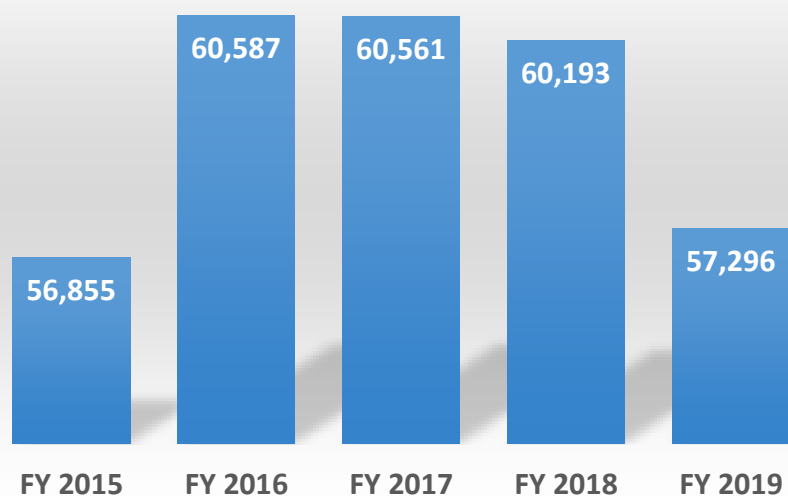
^a CMS requires this information for children under age six

North Dakota EPSDT 2015 – 2019

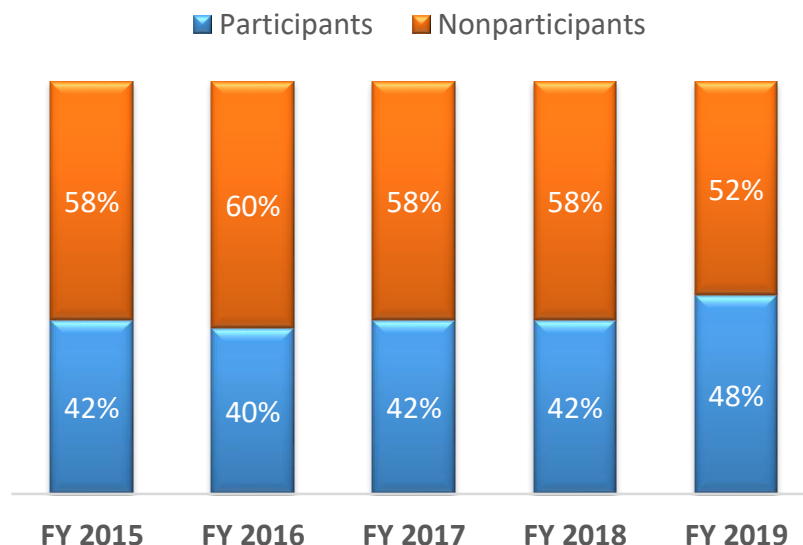
**AAP Periodicity Recommendations vs North Dakota Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
North Dakota	2014 – 2018	7	4	3	4	5	4	2
	2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Ohio EPSDT 2015 – 2019

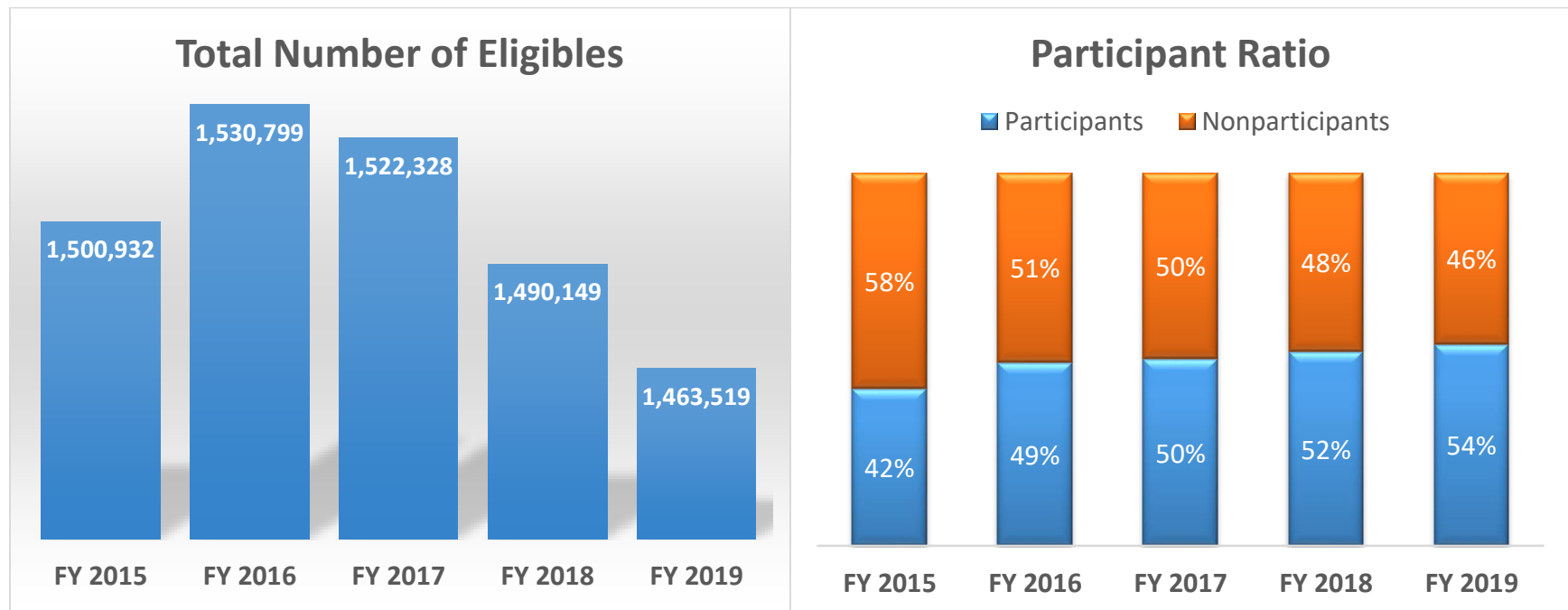
		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,500,932	78,656	174,080	234,735	314,687	340,704	250,469	107,601
	FY 2016	1,530,799	79,704	178,686	239,167	315,723	347,482	257,356	112,681
	FY 2017	1,522,328	79,567	169,440	242,263	308,985	352,706	256,208	113,159
	FY 2018	1,490,149	77,200	164,230	237,511	298,266	353,765	249,838	109,339
	FY 2019	1,463,519	76,030	164,829	231,961	288,734	351,620	244,200	106,145
Screening Ratio									
	FY 2015	52%	81%	64%	66%	38%	40%	36%	15%
	FY 2016	60%	89%	71%	76%	45%	48%	45%	19%
	FY 2017	61%	89%	79%	74%	45%	47%	45%	20%
	FY 2018	62%	89%	80%	76%	46%	47%	45%	21%
	FY 2019	66%	96%	85%	79%	49%	50%	48%	23%
Participant Ratio									
	FY 2015	42%	88%	69%	56%	33%	34%	30%	12%
	FY 2016	49%	92%	73%	65%	40%	42%	38%	16%
	FY 2017	50%	92%	76%	65%	41%	43%	39%	17%
	FY 2018	52%	92%	78%	68%	44%	44%	41%	19%
	FY 2019	54%	93%	78%	70%	47%	47%	43%	20%
Referrals									
	FY 2015	326,257	48,226	77,131	52,445	45,897	56,268	39,008	7,282
	FY 2016	445,535	49,475	96,172	79,914	67,541	82,907	58,681	10,845
	FY 2017	444,847	47,182	97,558	78,832	68,036	82,238	59,105	11,896
	FY 2018	448,090	47,349	97,045	79,434	68,238	84,074	59,832	12,118
	FY 2019	459,579	47,093	96,785	80,988	70,571	89,171	62,227	12,744
Dental Services									
	FY 2015	529,616	201	15,387	91,646	149,988	151,763	94,821	25,810
	FY 2016	542,939	219	16,074	93,503	152,605	156,240	97,328	26,970
	FY 2017	546,583	232	16,626	94,266	149,055	159,419	98,663	28,322
	FY 2018	553,219	291	16,813	93,793	149,938	165,561	98,867	27,956
	FY 2019	550,346	345	17,144	93,078	146,917	166,932	98,163	27,767
Lead Screening ^a									
	FY 2015	104,188	1,246	68,986	33,956				
	FY 2016	105,411	1,241	71,241	32,929				
	FY 2017	106,479	1,073	72,028	33,378				
	FY 2018	108,438	996	72,440	35,002				
	FY 2019	104,991	952	72,701	31,338				

^a CMS requires this information for children under age six

Ohio EPSDT 2015 – 2019

**AAP Periodicity Recommendations vs Ohio Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Ohio	2014 – 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Oklahoma EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	615,493	38,275	76,204	105,138	134,488	140,629	93,736	27,023
	FY 2016	631,542	37,790	77,106	104,904	139,550	146,794	98,808	26,590
	FY 2017	638,155	37,220	76,231	104,457	139,647	151,682	102,737	26,181
	FY 2018	632,594	35,880	75,442	102,916	134,576	153,827	103,242	26,711
	FY 2019	629,144	34,998	72,671	102,870	130,998	156,264	104,955	26,388
Screening Ratio									
	FY 2015	84%	100%	100%	63%	71%	65%	54%	22%
	FY 2016	86%	100%	100%	64%	76%	70%	58%	25%
	FY 2017	84%	100%	100%	61%	74%	67%	57%	22%
	FY 2018	89%	100%	100%	66%	82%	72%	61%	24%
	FY 2019	60%	90%	81%	67%	43%	46%	32%	12%
Participant Ratio									
	FY 2015	60%	92%	71%	53%	64%	56%	47%	19%
	FY 2016	63%	92%	71%	54%	68%	61%	51%	22%
	FY 2017	61%	92%	71%	53%	67%	59%	49%	20%
	FY 2018	65%	92%	73%	56%	74%	63%	53%	21%
	FY 2019	47%	93%	74%	58%	40%	40%	28%	11%
Referrals									
	FY 2015	37,887	995	1,947	5,714	9,768	10,289	7,601	1,573
	FY 2016	33,481	812	1,472	5,044	8,777	9,129	6,975	1,272
	FY 2017	35,547	854	1,422	5,127	8,925	10,109	7,634	1,476
	FY 2018	36,428	894	1,389	5,041	8,952	10,637	8,148	1,367
	FY 2019	36,193	944	1,364	4,943	8,777	10,628	8,162	1,375
Dental Services									
	FY 2015	290,378	196	14,660	51,730	82,757	85,181	49,295	6,559
	FY 2016	290,514	185	14,031	51,398	81,568	86,436	50,497	6,399
	FY 2017	297,464	244	14,377	51,957	80,961	90,440	52,827	6,658
	FY 2018	293,727	303	14,243	51,196	77,793	90,599	53,386	6,207
	FY 2019	296,485	392	14,561	51,409	76,715	92,864	53,980	6,564
Lead Screening ^a									
	FY 2015	8,552	92	6,009	2,451				
	FY 2016	38,499	566	27,346	10,587				
	FY 2017	42,152	540	30,015	11,597				
	FY 2018	39,761	476	29,396	9,889				
	FY 2019	39,562	382	30,004	9,176				

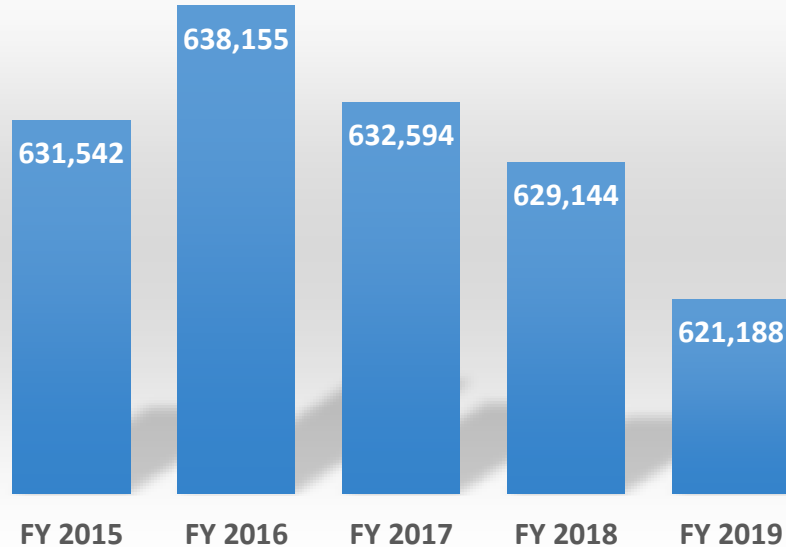
^a CMS requires this information for children under age six

Oklahoma EPSDT 2015 – 2019

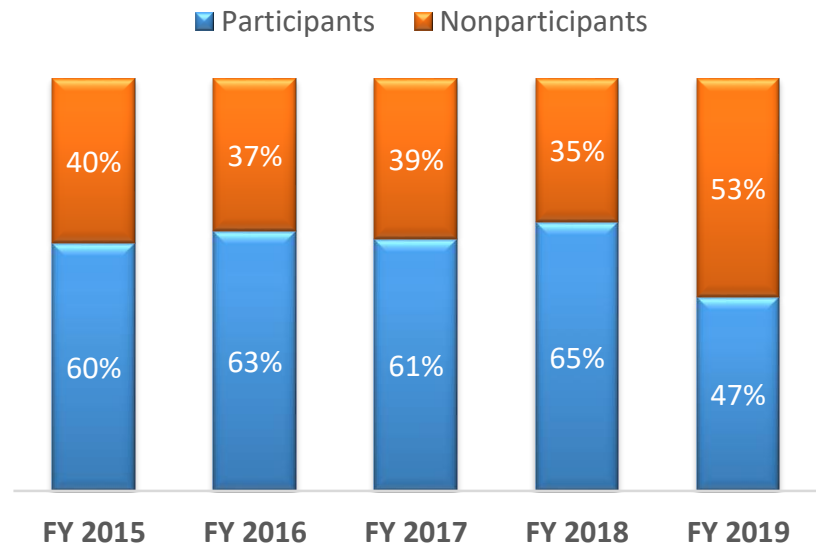
**AAP Periodicity Recommendations vs Oklahoma Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Oklahoma	2014 – 2018	6	3	3	2	3	2	1
	2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Oregon EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	487,235	27,275	56,850	75,279	101,755	107,070	78,757	40,249
	FY 2016	478,501	26,872	55,936	72,867	97,883	107,138	78,871	38,934
	FY 2017	468,563	25,335	53,448	70,941	93,873	107,402	77,720	39,844
	FY 2018	446,557	23,790	49,859	66,968	86,336	104,750	76,061	38,793
	FY 2019	430,397	23,074	46,720	64,741	82,417	103,031	73,015	37,399
Screening Ratio									
	FY 2015	52%	95%	70%	58%	35%	37%	30%	13%
	FY 2016	57%	100%	73%	63%	41%	43%	35%	17%
	FY 2017	61%	100%	76%	67%	45%	46%	39%	20%
	FY 2018	67%	100%	86%	71%	49%	52%	45%	23%
	FY 2019	70%	100%	90%	75%	52%	56%	49%	26%
Participant Ratio									
	FY 2015	41%	92%	73%	53%	33%	34%	27%	12%
	FY 2016	46%	92%	75%	57%	38%	39%	31%	15%
	FY 2017	48%	95%	77%	59%	41%	42%	34%	17%
	FY 2018	52%	96%	80%	63%	45%	46%	39%	20%
	FY 2019	54%	96%	82%	65%	47%	49%	43%	23%
Referrals									
	FY 2015	157,664	18,081	38,357	30,569	22,925	28,115	16,259	3,358
	FY 2016	170,636	17,880	39,016	31,966	26,095	32,311	19,239	4,129
	FY 2017	175,453	17,398	38,374	32,940	26,605	34,742	20,536	4,858
	FY 2018	183,259	16,595	37,772	33,470	27,364	38,890	23,530	5,638
	FY 2019	186,666	16,213	36,137	33,927	27,903	41,134	25,196	6,156
Dental Services									
	FY 2015	182,311	177	10,506	32,647	51,706	48,413	29,687	9,175
	FY 2016	189,383	270	10,906	33,362	52,805	51,445	31,201	9,394
	FY 2017	193,431	264	11,762	33,868	52,340	53,219	31,838	10,140
	FY 2018	194,496	284	11,654	33,818	51,247	54,608	32,442	10,443
	FY 2019	190,929	334	11,650	33,135	49,356	54,562	31,413	10,479
Lead Screening ^a									
	FY 2015	8,258	176	5,282	2,800				
	FY 2016	9,768	220	6,266	3,282				
	FY 2017	11,048	174	7,794	3,080				
	FY 2018	10,951	144	8,031	2,776				
	FY 2019	11,084	113	8,455	2,516				

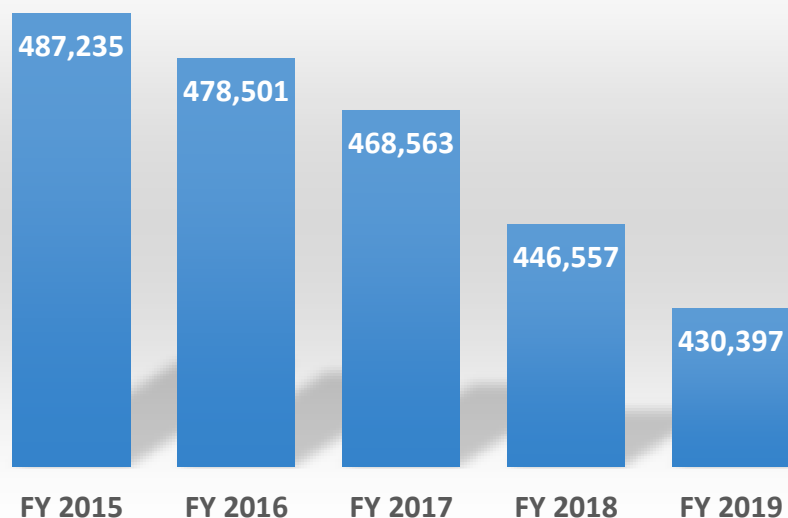
^a CMS requires this information for children under age six

Oregon EPSDT 2015 – 2019

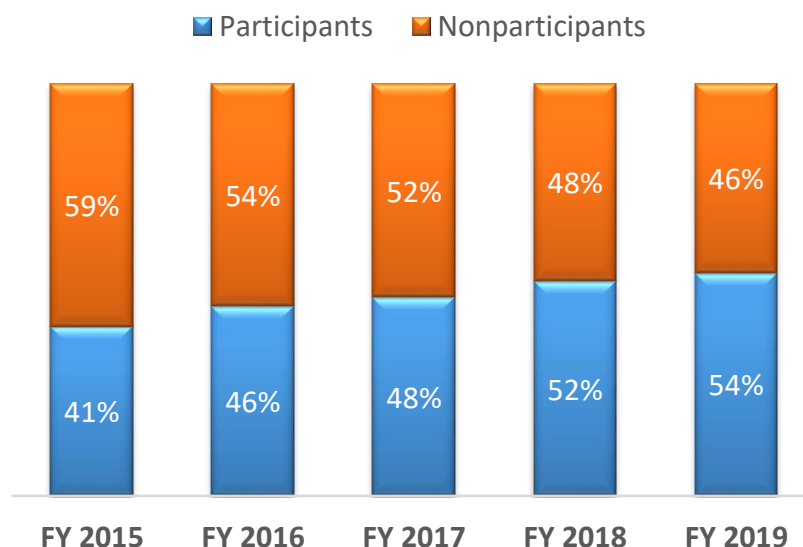
**AAP Periodicity Recommendations vs Oregon Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Oregon	2014 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Pennsylvania EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	1,318,852	71,167	147,737	207,769	271,252	296,636	218,465	105,826
	FY 2016	1,337,960	63,828	149,467	209,550	274,400	305,766	225,267	109,682
	FY 2017	1,387,021	70,545	151,837	214,829	279,594	321,523	233,292	115,401
	FY 2018	1,393,928	69,669	149,780	215,111	276,651	329,790	235,954	116,973
	FY 2019	1,385,251	68,657	148,723	214,639	271,933	331,380	235,322	114,597
Screening Ratio									
	FY 2015	83%	100%	100%	90%	64%	63%	58%	35%
	FY 2016	100%	100%	100%	100%	80%	80%	73%	42%
	FY 2017	74%	100%	90%	76%	55%	55%	51%	28%
	FY 2018	71%	100%	90%	76%	54%	53%	49%	29%
	FY 2019	72%	100%	90%	77%	55%	54%	50%	30%
Participant Ratio									
	FY 2015	66%	94%	83%	81%	62%	61%	54%	31%
	FY 2016	79%	95%	84%	100%	78%	78%	69%	38%
	FY 2017	58%	94%	81%	68%	54%	54%	48%	26%
	FY 2018	57%	94%	81%	69%	53%	52%	46%	27%
	FY 2019	57%	94%	81%	69%	53%	52%	47%	28%
Referrals									
	FY 2015	388,531	46,637	88,669	58,366	60,864	69,797	49,933	14,265
	FY 2016	387,153	39,026	88,765	58,622	61,768	72,579	51,960	14,433
	FY 2017	406,107	45,894	89,186	59,542	63,533	76,804	55,949	15,199
	FY 2018	407,484	46,630	90,802	62,206	62,080	75,209	54,685	15,872
	FY 2019	409,869	45,717	91,481	62,490	61,888	76,643	55,599	16,051
Dental Services									
	FY 2015	571,766	632	27,685	106,236	154,426	156,080	96,775	29,932
	FY 2016	587,044	460	30,133	106,600	155,914	162,356	100,419	31,162
	FY 2017	631,903	1,021	35,827	114,375	162,779	175,954	108,102	33,845
	FY 2018	646,462	1,303	38,158	116,122	163,083	183,254	110,280	34,262
	FY 2019	646,877	997	39,057	115,308	161,639	185,797	110,739	33,340
Lead Screening ^a									
	FY 2015	105,163	5,406	73,665	26,092				
	FY 2016	93,913	4,929	65,516	23,468				
	FY 2017	144,109	4,742	114,953	24,414				
	FY 2018	143,511	5,065	113,953	24,493				
	FY 2019	144,902	4,913	115,665	24,324				

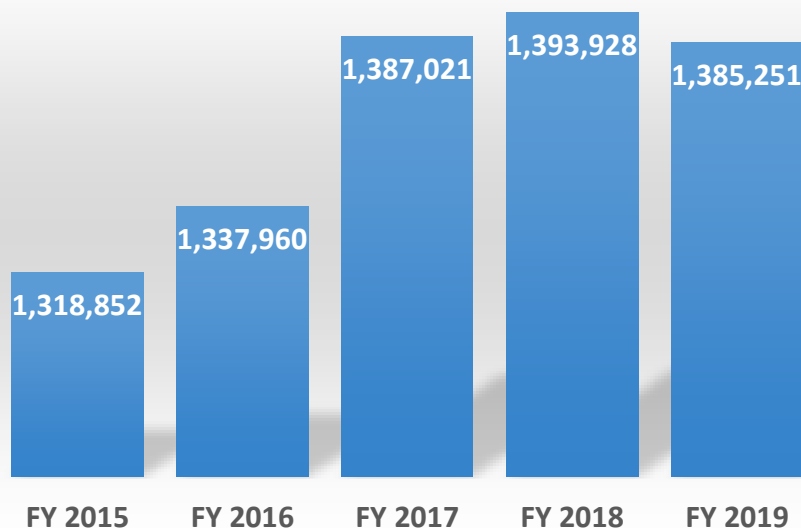
^a CMS requires this information for children under age six

Pennsylvania EPSDT 2015 – 2019

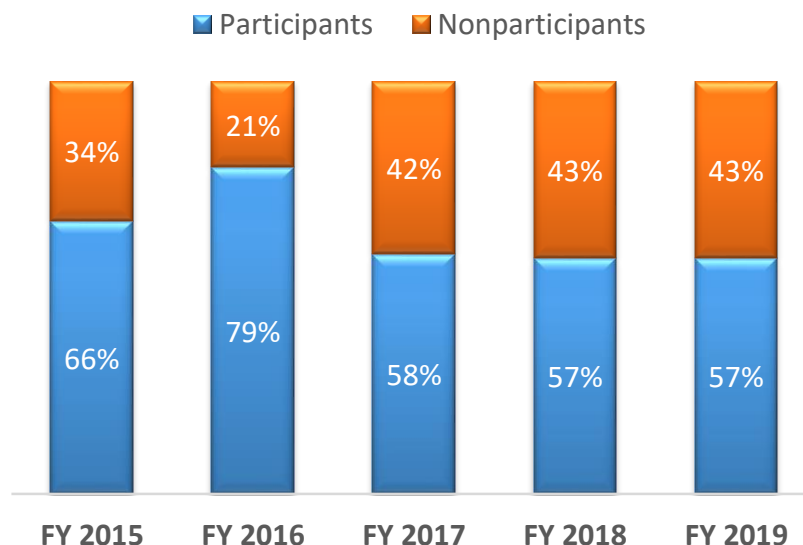
**AAP Periodicity Recommendations vs Pennsylvania Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	6	5	3	4	5	4	2
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

**Puerto Rico
EPSDT 2015 – 2019**

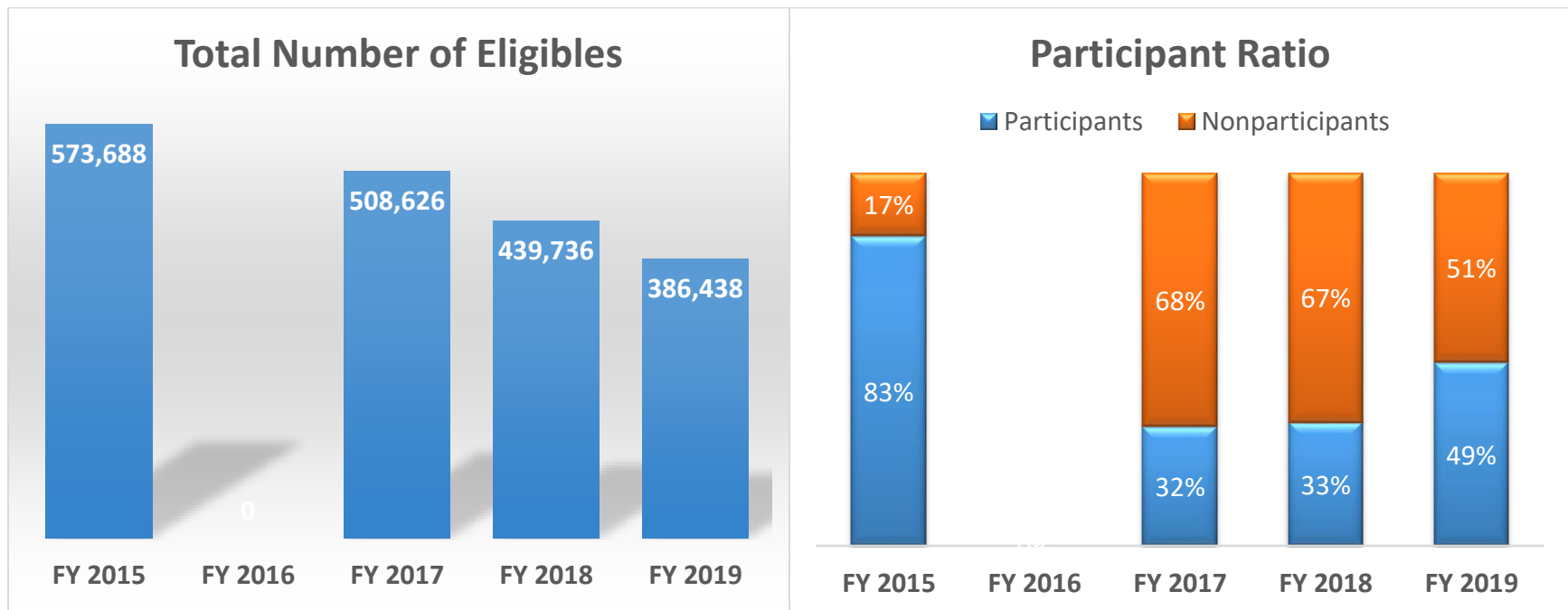
		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	573,688	21,930	56,158	85,088	111,048	134,507	115,269	49,688
	FY 2016	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	FY 2017	508,626	15,635	43,348	72,933	99,197	121,786	93,232	62,495
	FY 2018	439,736	12,006	36,509	61,203	85,461	107,901	91,495	44,801
	FY 2019	386,438	10,946	30,566	51,261	73,204	96,307	79,079	45,075
Screening Ratio									
	FY 2015	100%	100%	100%	100%	100%	100%	100%	100%
	FY 2016	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	FY 2017	15%	11%	15%	26%	17%	14%	13%	8%
	FY 2018	63%	39%	71%	100%	72%	60%	50%	34%
	FY 2019	75%	44%	80%	100%	86%	72%	63%	45%
Participant Ratio									
	FY 2015	83%	70%	72%	92%	89%	83%	79%	77%
	FY 2016	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	FY 2017	32%	53%	48%	41%	33%	30%	24%	22%
	FY 2018	33%	47%	47%	44%	35%	31%	26%	20%
	FY 2019	49%	53%	57%	66%	53%	46%	41%	33%
Referrals									
	FY 2015	1,515,545	11	8,142	154,607	418,488	426,440	376,707	131,150
	FY 2016	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	FY 2017	96,776	4,713	12,928	19,060	17,713	14,409	16,577	11,376
	FY 2018	91,951	3,065	11,316	16,881	18,242	21,384	15,523	5,540
	FY 2019	141,073	3,462	15,358	22,865	27,219	33,804	25,758	12,607
Dental Services									
	FY 2015	275,748	244	11,760	49,402	65,356	72,114	56,077	20,795
	FY 2016	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	FY 2017	239,711	182	10,274	38,962	55,656	63,699	43,322	27,616
	FY 2018	212,780	133	8,877	34,423	49,666	58,109	43,454	18,118
	FY 2019	194,580	138	6,657	29,134	45,860	57,563	39,132	16,096
Lead Screening ^a									
	FY 2015	252,906	719	54,878	197,309				
	FY 2016	N/A	N/A	N/A	N/A				
	FY 2017	112,359	2,529	27,345	82,485				
	FY 2018	10,643	25	3,594	7,024				
	FY 2019	70,382	286	12,643	57,453				

^a CMS requires this information for children under age six

Puerto Rico EPSDT 2015 – 2019

**AAP Periodicity Recommendations vs Puerto Rico Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2014 – 2017	7	5	3	4	5	4	2
	2018 – 2019	7	4	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

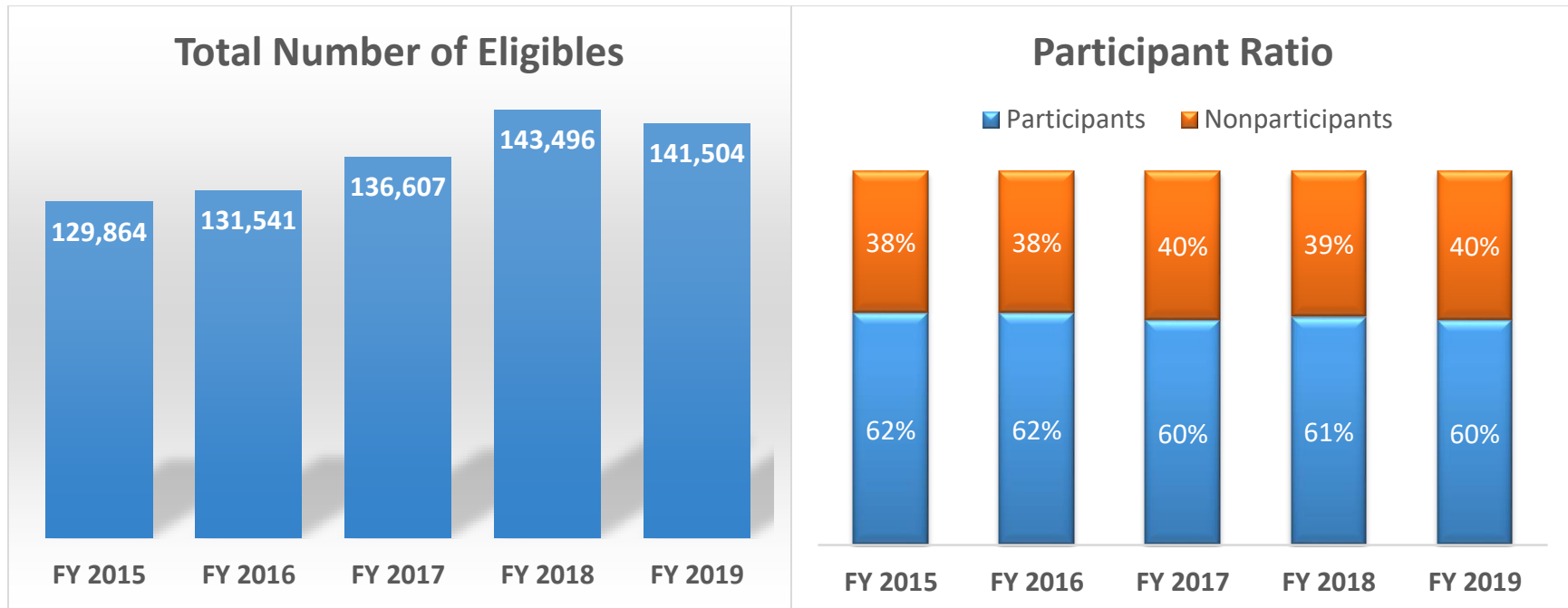
Rhode Island EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	129,864	6,385	14,347	19,163	26,507	30,269	22,936	10,257
	FY 2016	131,541	5,787	14,457	19,519	26,786	30,852	23,427	10,713
	FY 2017	136,607	6,000	14,345	20,891	27,140	32,580	24,384	11,267
	FY 2018	143,496	6,386	14,429	22,486	27,782	34,549	25,753	12,111
	FY 2019	141,504	6,015	13,616	22,154	27,377	34,802	25,735	11,805
Screening Ratio									
	FY 2015	77%	100%	100%	85%	63%	63%	55%	40%
	FY 2016	73%	84%	100%	82%	61%	62%	55%	42%
	FY 2017	78%	100%	100%	82%	64%	64%	58%	37%
	FY 2018	77%	100%	100%	77%	61%	60%	54%	42%
	FY 2019	76%	100%	100%	76%	62%	60%	55%	36%
Participant Ratio									
	FY 2015	62%	88%	75%	75%	61%	59%	51%	35%
	FY 2016	62%	88%	79%	72%	60%	60%	52%	39%
	FY 2017	60%	86%	79%	68%	58%	58%	51%	32%
	FY 2018	61%	92%	80%	68%	59%	58%	52%	38%
	FY 2019	60%	92%	83%	66%	60%	57%	51%	32%
Referrals									
	FY 2015	48,956	7,242	8,513	7,523	7,600	9,504	6,674	1,900
	FY 2016	48,860	3,213	9,265	8,022	8,350	10,460	7,510	2,040
	FY 2017	49,613	3,447	9,192	8,034	8,302	10,643	7,787	2,208
	FY 2018	51,399	3,992	9,277	8,165	8,496	10,835	8,323	2,311
	FY 2019	50,813	3,743	9,280	8,128	8,362	10,816	8,169	2,315
Dental Services									
	FY 2015	58,102	115	3,260	9,401	15,593	17,281	9,922	2,530
	FY 2016	63,584	83	4,179	10,290	16,612	18,633	11,009	2,778
	FY 2017	65,910	57	4,298	10,789	16,806	19,346	11,616	2,998
	FY 2018	68,288	78	4,549	11,394	16,890	20,041	12,461	2,875
	FY 2019	69,731	59	4,377	11,615	17,112	20,662	12,836	3,070
Lead Screening ^a									
	FY 2015	3	222	6,168	5,626				
	FY 2016	12,653	231	6,712	5,710				
	FY 2017	12,554	226	6,744	5,584				
	FY 2018	11,829	228	6,465	5,136				
	FY 2019	11,061	205	5,968	4,888				

^a CMS requires this information for children under age six

Rhode Island EPSDT 2015 – 2019

AAP Periodicity Recommendations vs Rhode Island Schedules Reported on Form CMS-416 (2015-2019)								
		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP ^b	2008 – 2019	7	5	3	4	5	4	2
Rhode Island	2015 – 2019	6	4	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

South Carolina EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	768,039	38,981	91,457	123,837	168,217	174,009	125,141	46,397
	FY 2016	770,785	38,588	87,721	124,386	167,052	178,519	127,448	47,071
	FY 2017	767,838	38,337	87,550	124,676	163,881	184,308	127,251	41,835
	FY 2018	769,943	37,659	85,038	126,139	160,117	191,000	127,293	42,697
	FY 2019	770,389	37,886	81,727	124,701	157,268	196,396	127,958	44,453
Screening Ratio									
	FY 2015	78%	94%	100%	56%	70%	62%	55%	19%
	FY 2016	81%	98%	100%	57%	74%	67%	60%	21%
	FY 2017	83%	100%	100%	58%	75%	69%	61%	21%
	FY 2018	58%	88%	79%	60%	42%	46%	35%	14%
	FY 2019	60%	90%	83%	64%	45%	49%	37%	15%
Participant Ratio									
	FY 2015	60%	91%	69%	52%	67%	59%	52%	18%
	FY 2016	63%	91%	73%	53%	71%	63%	56%	20%
	FY 2017	64%	92%	73%	54%	72%	65%	57%	20%
	FY 2018	47%	93%	75%	56%	40%	43%	32%	13%
	FY 2019	50%	93%	78%	59%	43%	46%	35%	14%
Referrals									
	FY 2015	47,962	1,673	6,737	7,909	9,585	9,196	8,851	4,011
	FY 2016	41,863	1,463	5,184	7,694	9,187	8,225	7,220	2,890
	FY 2017	38,815	1,334	4,516	7,007	8,155	8,106	6,952	2,745
	FY 2018	213,729	24,633	47,495	33,267	36,559	45,233	23,996	2,546
	FY 2019	228,879	24,710	47,906	35,912	39,764	50,863	26,739	2,985
Dental Services									
	FY 2015	361,474	238	19,893	64,998	106,625	100,742	57,374	11,604
	FY 2016	357,346	245	20,609	63,084	103,731	101,794	57,759	10,124
	FY 2017	364,581	218	21,203	64,245	102,573	107,558	59,565	9,219
	FY 2018	367,850	245	20,916	64,276	100,548	111,675	60,574	9,616
	FY 2019	375,493	252	21,800	64,981	99,240	116,197	62,411	10,612
Lead Screening ^a									
	FY 2015	7,028	68	5,048	1,912				
	FY 2016	43,760	783	34,562	8,415				
	FY 2017	43,573	826	34,538	8,209				
	FY 2018	43,160	759	34,656	7,745				
	FY 2019	44,150	864	36,205	7,081				

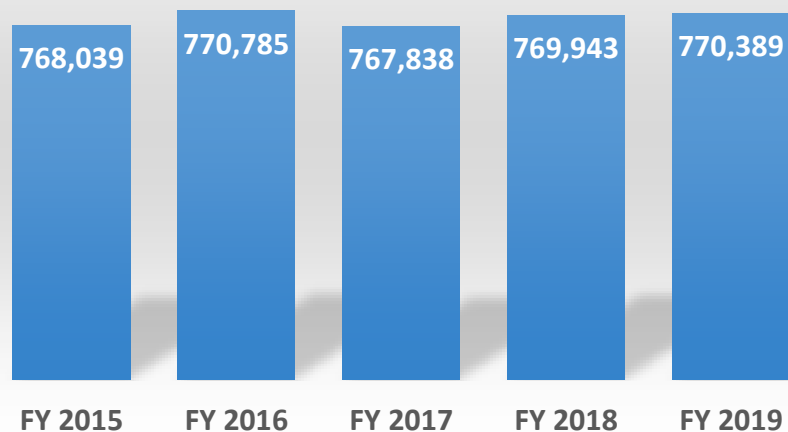
^a CMS requires this information for children under age six

South Carolina EPSDT 2015 – 2019

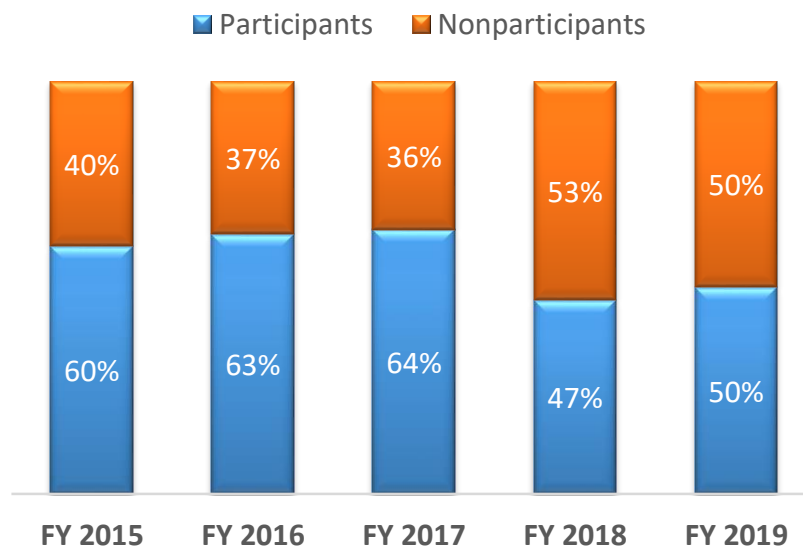
**AAP Periodicity Recommendations vs South Carolina Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
South Carolina	2014 – 2017	6	3	3	2	3	2	1
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

South Dakota EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	94,628	5,973	11,911	16,307	21,080	21,435	13,952	3,970
	FY 2016	96,662	5,869	12,055	16,605	21,312	22,542	14,599	3,680
	FY 2017	98,326	5,917	11,935	16,643	21,281	23,683	15,017	3,850
	FY 2018	96,384	5,414	11,629	16,288	20,628	24,064	14,845	3,516
	FY 2019	94,028	5,214	10,904	15,840	19,999	23,712	14,921	3,438
Screening Ratio									
	FY 2015	44%	66%	79%	48%	20%	22%	19%	10%
	FY 2016	64%	87%	100%	63%	29%	40%	29%	17%
	FY 2017	67%	89%	100%	69%	33%	42%	33%	16%
	FY 2018	67%	94%	100%	72%	37%	45%	35%	18%
	FY 2019	69%	98%	100%	74%	39%	50%	40%	16%
Participant Ratio									
	FY 2015	33%	80%	62%	44%	20%	21%	18%	10%
	FY 2016	35%	86%	58%	43%	20%	27%	19%	10%
	FY 2017	35%	87%	60%	44%	21%	27%	20%	9%
	FY 2018	36%	89%	60%	45%	23%	27%	20%	10%
	FY 2019	38%	88%	60%	47%	25%	32%	25%	11%
Referrals									
	FY 2015	27,460	4,436	7,075	6,087	3,591	3,953	2,103	215
	FY 2016	10,961	3,700	3,847	1,177	574	1,015	599	49
	FY 2017	10,831	3,734	3,816	1,179	617	858	594	33
	FY 2018	9,656	3,451	3,351	1,051	585	677	502	39
	FY 2019	9,749	3,315	3,222	1,066	653	829	622	42
Dental Services									
	FY 2015	33,443	32	2,101	6,668	9,754	9,463	4,769	656
	FY 2016	42,633	85	3,037	8,274	12,256	12,053	6,104	824
	FY 2017	43,906	75	3,015	8,382	12,284	12,837	6,475	838
	FY 2018	46,638	113	3,215	8,853	12,697	14,008	6,865	887
	FY 2019	43,002	113	3,023	7,942	11,561	12,840	6,735	788
Lead Screening ^a									
	FY 2015	879	2	877	0				
	FY 2016	3,467	13	2,081	1,373				
	FY 2017	3,402	9	2,099	1,294				
	FY 2018	3,332	13	2,247	1,072				
	FY 2019	3,199	DS	2,036	DS				

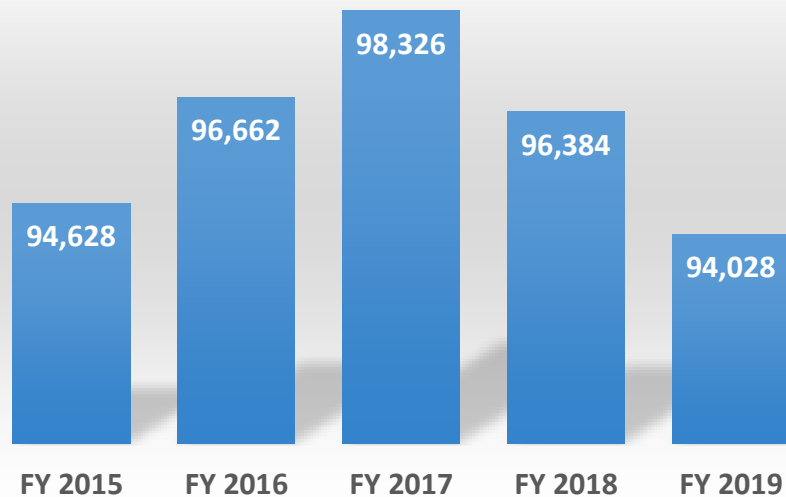
^a CMS requires this information for children under age six

South Dakota EPSDT 2015 – 2019

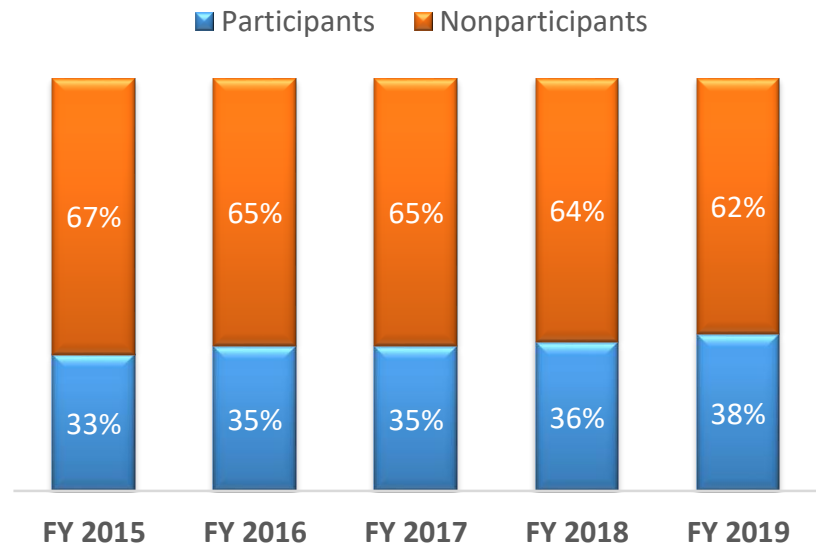
**AAP Periodicity Recommendations vs South Dakota Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
South Dakota	2014 – 2017	6	3	3	2	3	2	1
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Tennessee EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	868,503	52,916	105,088	140,033	186,144	190,643	133,926	59,753
	FY 2016	924,406	52,371	109,943	151,041	195,051	205,383	145,348	65,269
	FY 2017	964,169	52,359	109,376	158,625	200,030	220,968	153,471	69,340
	FY 2018	944,763	51,274	106,922	154,122	191,873	224,967	151,099	64,506
	FY 2019	903,456	50,879	104,261	143,823	179,617	218,278	145,509	61,089
Screening Ratio									
	FY 2015	71%	100%	83%	82%	60%	59%	45%	30%
	FY 2016	69%	100%	84%	79%	55%	57%	44%	27%
	FY 2017	74%	100%	91%	85%	61%	61%	47%	31%
	FY 2018	77%	98%	96%	90%	65%	67%	51%	34%
	FY 2019	79%	100%	94%	93%	67%	68%	53%	36%
Participant Ratio									
	FY 2015	55%	91%	80%	69%	50%	50%	38%	23%
	FY 2016	54%	93%	80%	67%	48%	49%	38%	21%
	FY 2017	57%	94%	82%	70%	52%	52%	40%	23%
	FY 2018	60%	95%	83%	73%	55%	56%	44%	25%
	FY 2019	61%	91%	83%	76%	58%	59%	45%	27%
Referrals									
	FY 2015	301,263	33,601	68,595	52,090	52,524	53,171	31,538	9,744
	FY 2016	312,875	34,031	70,835	54,580	52,969	57,133	33,553	9,774
	FY 2017	318,303	33,838	71,380	55,553	53,944	59,377	34,507	9,704
	FY 2018	328,524	34,183	71,418	57,120	55,396	63,614	36,989	9,804
	FY 2019	334,365	31,760	70,854	56,666	56,311	68,505	39,351	10,918
Dental Services									
	FY 2015	416,715	246	20,738	72,139	119,769	116,469	68,564	18,790
	FY 2016	441,588	282	21,813	76,885	124,106	124,902	73,571	20,029
	FY 2017	445,054	267	22,265	77,337	122,123	129,308	74,103	19,651
	FY 2018	428,029	249	22,597	75,661	112,228	125,438	73,169	18,687
	FY 2019	428,534	274	23,252	73,884	109,505	128,060	74,152	19,407
Lead Screening ^a									
	FY 2015	16,383	0	7,187	9,196				
	FY 2016	70,684	888	53,106	16,690				
	FY 2017	72,824	779	54,996	17,049				
	FY 2018	73,892	786	55,780	17,326				
	FY 2019	71,176	592	55,794	14,790				

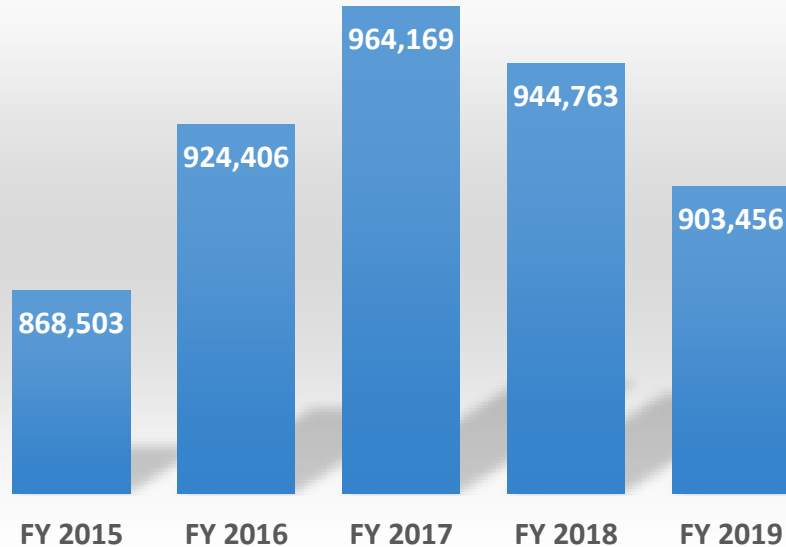
^a CMS requires this information for children under age six

Tennessee EPSDT 2015 – 2019

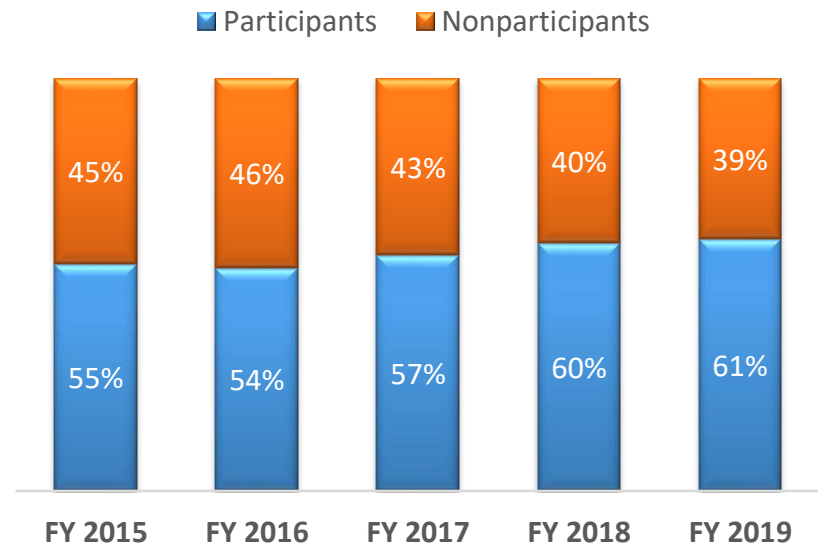
**AAP Periodicity Recommendations vs Tennessee Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Tennessee	2014 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Texas EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	3,932,612	258,599	487,169	642,460	868,172	911,863	585,305	179,044
	FY 2016	3,946,620	254,854	493,881	636,347	857,587	928,647	598,998	176,306
	FY 2017	3,937,199	245,165	489,142	638,614	829,244	942,507	610,480	182,047
	FY 2018	3,832,615	237,458	469,996	634,295	791,330	942,663	612,450	144,423
	FY 2019	3,746,100	232,420	449,529	622,954	756,709	931,902	608,083	144,503
Screening Ratio									
	FY 2015	85%	99%	98%	96%	74%	76%	60%	21%
	FY 2016	86%	100%	99%	98%	75%	77%	62%	23%
	FY 2017	82%	94%	97%	94%	72%	74%	60%	25%
	FY 2018	84%	96%	98%	97%	73%	75%	62%	26%
	FY 2019	85%	96%	100%	98%	74%	76%	64%	27%
Participant Ratio									
	FY 2015	70%	93%	85%	79%	66%	67%	53%	19%
	FY 2016	71%	94%	85%	80%	67%	68%	55%	21%
	FY 2017	68%	96%	85%	77%	65%	65%	53%	23%
	FY 2018	69%	97%	85%	78%	65%	66%	54%	24%
	FY 2019	70%	96%	86%	79%	66%	68%	56%	25%
Referrals									
	FY 2015	824,373	159,203	201,761	126,680	118,154	135,985	75,550	7,040
	FY 2016	852,479	156,201	207,610	127,816	120,740	147,021	85,074	8,017
	FY 2017	2,050,856	171,439	389,022	389,520	371,213	466,993	242,043	20,626
	FY 2018	1,736,673	164,319	342,133	302,272	308,328	389,185	214,422	16,014
	FY 2019	1,707,007	159,781	328,114	298,382	298,366	387,809	218,511	16,044
Dental Services									
	FY 2015	2,293,800	38,921	270,779	426,275	595,706	597,669	323,322	41,128
	FY 2016	2,396,169	41,774	288,392	436,012	606,884	630,366	347,073	45,668
	FY 2017	2,453,924	41,354	296,327	444,028	597,805	654,008	366,360	54,042
	FY 2018	2,404,696	40,125	285,434	440,539	568,818	653,598	368,971	47,211
	FY 2019	2,324,748	38,877	269,673	427,004	538,411	639,860	364,380	46,543
Lead Screening ^a									
	FY 2015	316,908	5,021	230,124	81,763				
	FY 2016	273,219	2,116	202,897	68,206				
	FY 2017	311,104	2,438	235,637	73,029				
	FY 2018	304,347	1,981	230,480	71,886				
	FY 2019	294,136	1,616	225,216	67,304				

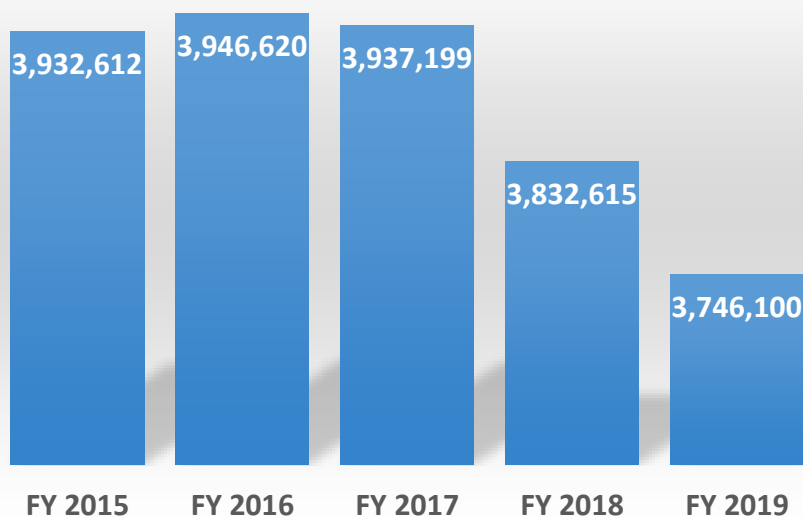
^a CMS requires this information for children under age six

Texas EPSDT 2015 – 2019

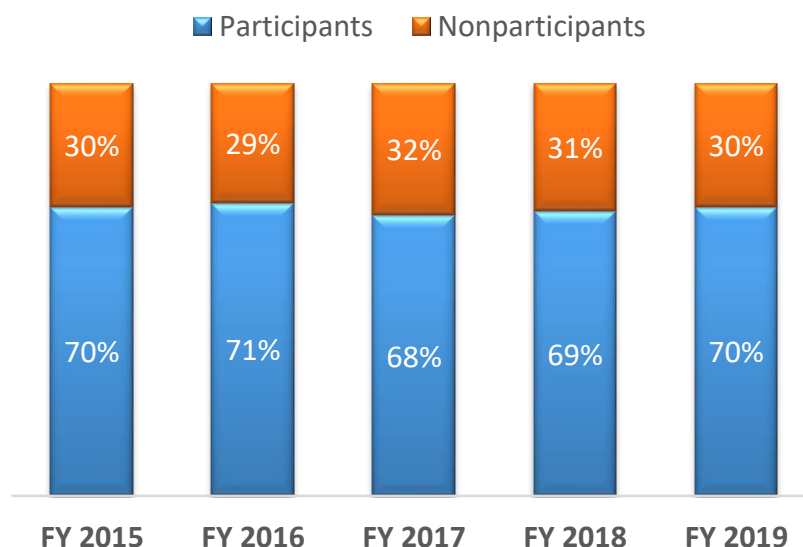
**AAP Periodicity Recommendations vs Texas Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Texas	2015 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Utah EPSDT 2015 – 2019

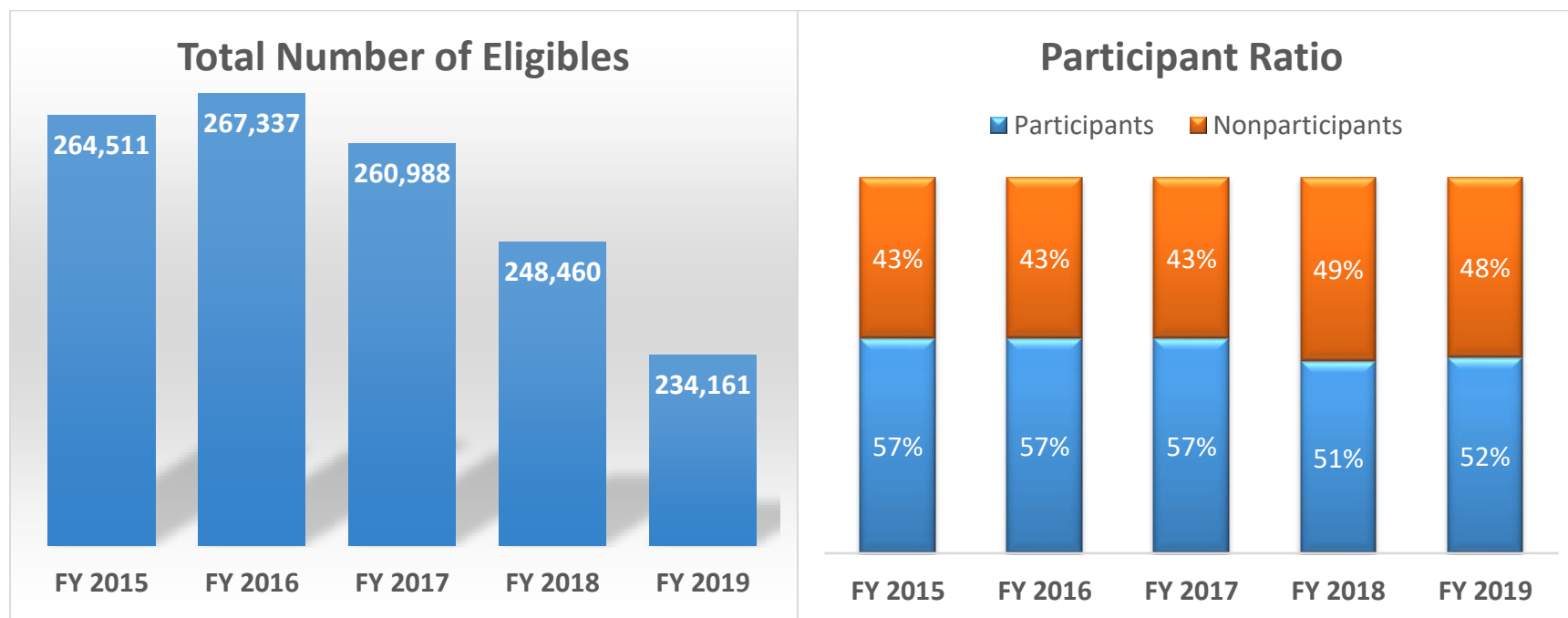
		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	264,511	19,473	36,699	45,842	59,216	58,745	36,435	8,101
	FY 2016	267,337	18,934	36,880	45,037	58,960	60,719	38,505	8,302
	FY 2017	260,988	17,788	35,431	43,469	55,734	61,425	38,600	8,541
	FY 2018	248,460	16,696	33,240	41,713	51,344	59,883	37,340	8,244
	FY 2019	234,161	15,725	30,563	39,078	47,522	57,244	35,499	8,530
Screening Ratio									
	FY 2015	72%	78%	100%	68%	76%	43%	36%	13%
	FY 2016	71%	78%	100%	68%	79%	42%	35%	13%
	FY 2017	71%	78%	100%	67%	81%	42%	36%	15%
	FY 2018	60%	68%	88%	66%	40%	41%	34%	15%
	FY 2019	62%	69%	93%	70%	42%	42%	36%	15%
Participant Ratio									
	FY 2015	57%	93%	76%	60%	70%	39%	32%	12%
	FY 2016	57%	93%	77%	62%	75%	40%	32%	13%
	FY 2017	57%	94%	77%	61%	77%	40%	34%	14%
	FY 2018	51%	94%	78%	61%	38%	39%	32%	15%
	FY 2019	52%	94%	79%	63%	40%	41%	34%	14%
Referrals									
	FY 2015	23,547	13,430	9,322	333	128	186	144	4
	FY 2016	27,675	8,755	15,271	1,684	700	754	496	15
	FY 2017	26,580	8,351	14,851	1,547	620	726	469	16
	FY 2018	24,899	7,880	13,918	1,427	537	712	409	16
	FY 2019	23,542	7,309	13,215	1,434	509	651	DS	DS
Dental Services									
	FY 2015	119,765	170	8,151	24,077	35,451	33,003	17,028	1,885
	FY 2016	120,986	177	8,201	23,589	35,002	34,034	18,123	1,860
	FY 2017	113,193	171	7,593	21,716	31,892	33,164	17,006	1,651
	FY 2018	114,219	225	7,542	21,630	30,815	34,266	17,834	1,907
	FY 2019	109,152	246	7,356	20,910	28,886	32,728	17,121	1,905
Lead Screening ^a									
	FY 2015	8,860	1,695	5,583	1,582				
	FY 2016	5,107	52	3,775	1,280				
	FY 2017	5,218	42	3,965	1,211				
	FY 2018	5,726	38	4,307	1,381				
	FY 2019	6,783	20	5,260	1,503				

^a CMS requires this information for children under age six

Utah EPSDT 2015 – 2019

**AAP Periodicity Recommendations vs Utah Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Utah	2015 – 2017	6	4	3	2	5	4	2
	2018 – 2019	7	5	3	4	5	4	2



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Vermont EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	80,186	3,483	8,003	12,080	16,313	19,210	14,690	6,407
	FY 2016	82,496	3,332	7,985	12,321	16,845	19,803	15,077	7,133
	FY 2017	79,979	3,231	7,546	12,022	16,250	19,451	14,703	6,776
	FY 2018	77,974	3,093	7,295	11,688	15,699	19,427	14,360	6,412
	FY 2019	76,459	2,995	6,875	11,430	15,416	19,435	14,430	5,878
Screening Ratio									
	FY 2015	77%	100%	100%	89%	65%	62%	49%	22%
	FY 2016	89%	100%	100%	100%	71%	70%	59%	33%
	FY 2017	78%	100%	100%	88%	63%	64%	53%	27%
	FY 2018	77%	100%	100%	89%	64%	64%	54%	27%
	FY 2019	82%	100%	100%	93%	68%	67%	57%	29%
Participant Ratio									
	FY 2015	53%	94%	82%	66%	52%	50%	40%	17%
	FY 2016	58%	95%	88%	71%	56%	56%	45%	22%
	FY 2017	60%	96%	89%	74%	58%	58%	48%	24%
	FY 2018	61%	96%	89%	75%	60%	60%	49%	24%
	FY 2019	63%	96%	90%	76%	62%	61%	51%	25%
Referrals									
	FY 2015	0	0	0	0	0	0	0	0
	FY 2016	0	0	0	0	0	0	0	0
	FY 2017	0	0	0	0	0	0	0	0
	FY 2018	0	0	0	0	0	0	0	0
	FY 2019	0	0	0	0	0	0	0	0
Dental Services									
	FY 2015	44,347	15	2,011	7,174	11,401	12,754	8,625	2,367
	FY 2016	45,564	23	2,129	7,208	11,619	13,138	8,764	2,683
	FY 2017	44,760	20	2,262	7,055	11,328	12,956	8,601	2,538
	FY 2018	44,616	24	2,256	7,149	10,986	13,188	8,529	2,484
	FY 2019	44,205	22	2,294	7,087	10,901	13,165	8,538	2,198
Lead Screening ^a									
	FY 2015	5,959	36	5,006	917				
	FY 2016	5,990	27	5,064	899				
	FY 2017	5,912	26	4,950	936				
	FY 2018	5,603	33	4,744	826				
	FY 2019	4,842	20	4,042	780				

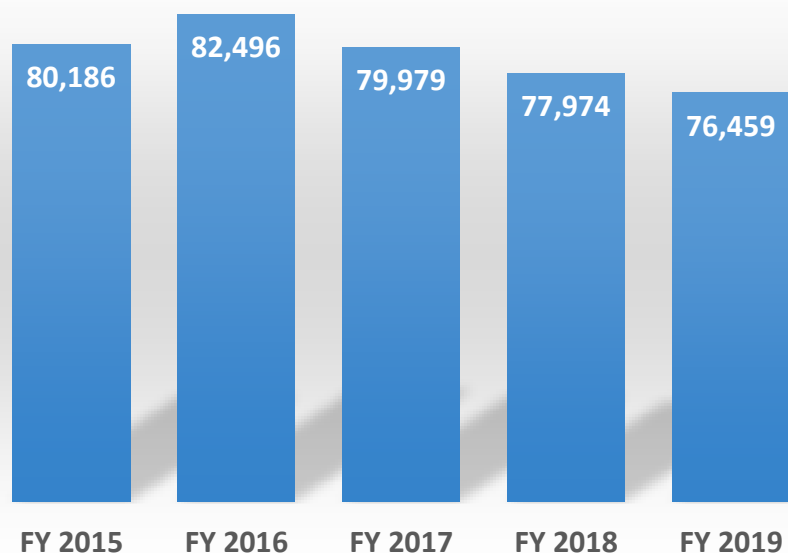
^a CMS requires this information for children under age six

Vermont EPSDT 2015 – 2019

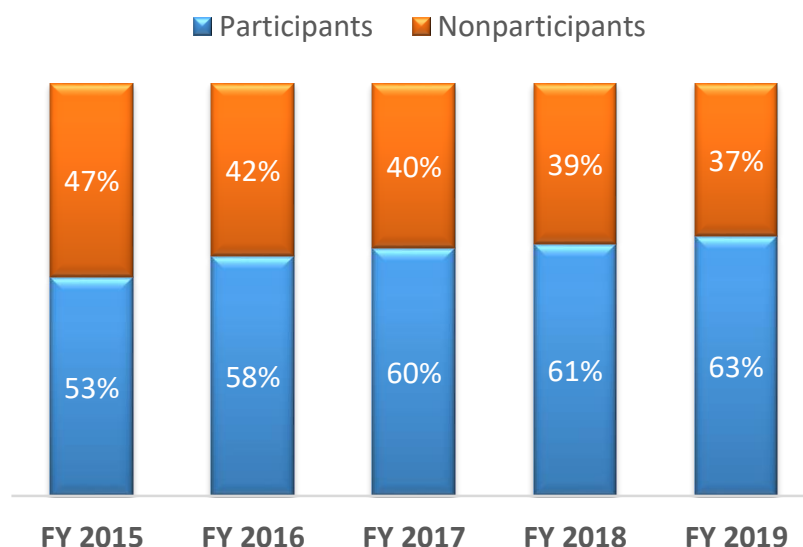
**AAP Periodicity Recommendations vs Vermont Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Vermont	2015 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Virginia EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	740,953	44,358	87,747	122,351	163,693	168,734	114,721	39,349
	FY 2016	744,264	43,535	88,301	120,662	162,048	172,434	116,551	40,733
	FY 2017	739,556	42,859	87,863	118,406	156,891	175,321	116,513	41,703
	FY 2018	739,258	42,256	87,128	117,711	152,475	179,397	117,177	43,114
	FY 2019	766,207	41,432	87,668	121,314	153,678	187,781	123,216	51,118
Screening Ratio									
	FY 2015	64%	74%	90%	85%	47%	50%	41%	16%
	FY 2016	71%	92%	97%	89%	51%	54%	45%	20%
	FY 2017	71%	92%	96%	86%	51%	54%	44%	22%
	FY 2018	72%	94%	96%	87%	53%	55%	45%	23%
	FY 2019	74%	100%	98%	90%	53%	55%	46%	25%
Participant Ratio									
	FY 2015	55%	82%	82%	77%	45%	47%	36%	13%
	FY 2016	56%	94%	83%	76%	46%	48%	38%	15%
	FY 2017	55%	93%	83%	74%	46%	48%	38%	15%
	FY 2018	57%	93%	84%	76%	48%	50%	40%	17%
	FY 2019	55%	94%	82%	75%	47%	48%	39%	20%
Referrals									
	FY 2015	213,564	24,967	55,116	41,208	32,572	36,037	21,342	2,322
	FY 2016	534,805	30,172	75,564	97,466	116,845	121,826	77,504	15,428
	FY 2017	225,210	26,989	57,037	40,415	33,663	40,047	23,782	3,277
	FY 2018	234,680	27,331	57,733	42,440	34,492	43,461	25,505	3,718
	FY 2019	234,715	27,002	56,780	42,704	34,070	43,337	25,871	4,951
Dental Services									
	FY 2015	348,284	266	20,359	65,698	100,251	98,098	56,169	7,443
	FY 2016	352,271	302	20,626	64,535	99,754	101,101	58,265	7,688
	FY 2017	369,033	293	23,010	66,424	101,294	108,774	61,179	8,059
	FY 2018	371,584	324	22,891	66,647	98,351	112,449	62,611	8,311
	FY 2019	376,263	283	22,279	66,234	96,912	114,516	63,614	12,425
Lead Screening ^a									
	FY 2015	53,210	725	31,652	20,833				
	FY 2016	52,482	811	31,865	19,806				
	FY 2017	61,633	675	38,674	22,284				
	FY 2018	60,900	655	38,584	21,661				
	FY 2019	62,513	674	40,269	21,570				

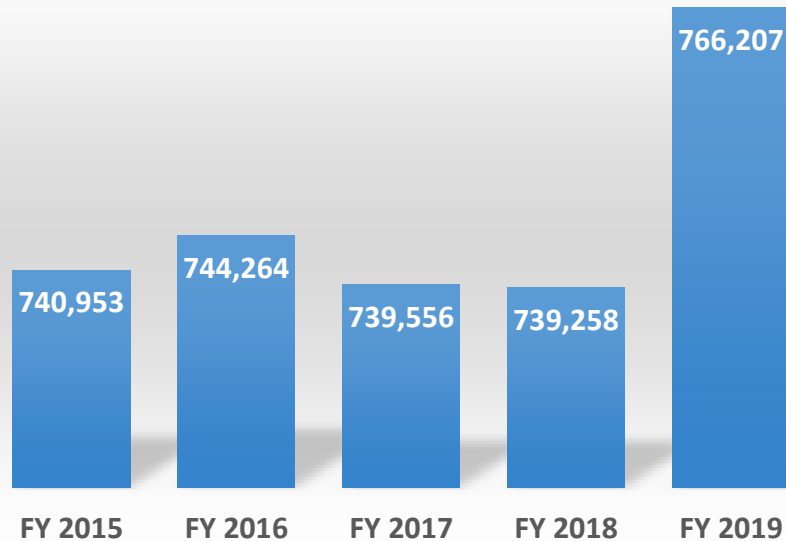
^a CMS requires this information for children under age six

Virginia EPSDT 2015 – 2019

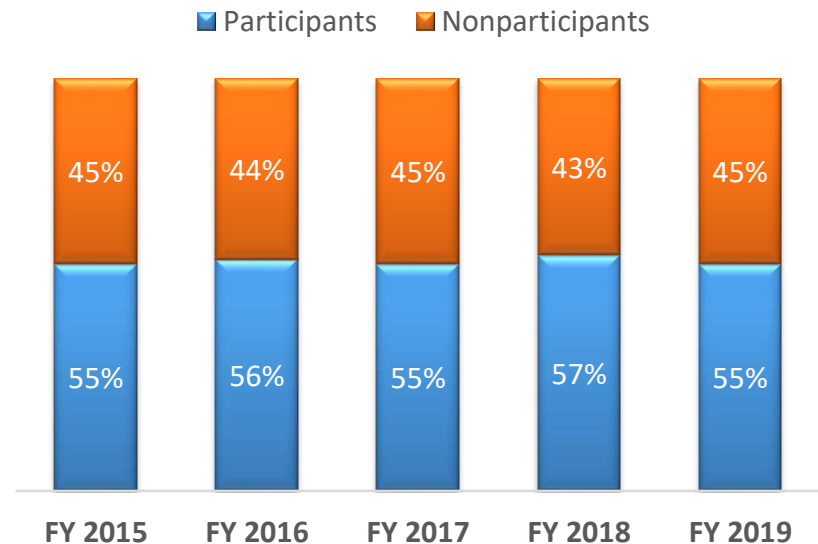
**AAP Periodicity Recommendations vs Virginia Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Virginia	2015 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Washington EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	898,253	47,067	99,000	143,299	193,186	204,476	147,343	63,882
	FY 2016	931,266	47,639	101,243	147,312	199,148	215,439	154,466	66,019
	FY 2017	940,426	45,915	101,674	148,068	197,824	223,666	156,839	66,440
	FY 2018	935,214	44,186	98,650	147,616	192,339	228,565	157,121	66,737
	FY 2019	916,201	43,221	93,767	144,460	185,338	227,961	155,636	65,818
Screening Ratio									
	FY 2015	89%	100%	100%	68%	86%	76%	65%	34%
	FY 2016	91%	100%	100%	68%	88%	77%	69%	34%
	FY 2017	93%	100%	100%	69%	92%	80%	70%	35%
	FY 2018	96%	100%	100%	71%	96%	82%	71%	33%
	FY 2019	93%	100%	100%	74%	100%	87%	76%	35%
Participant Ratio									
	FY 2015	71%	91%	80%	63%	82%	71%	60%	26%
	FY 2016	72%	91%	81%	63%	84%	73%	64%	27%
	FY 2017	73%	93%	81%	64%	88%	75%	65%	29%
	FY 2018	75%	93%	82%	66%	92%	78%	67%	28%
	FY 2019	78%	92%	83%	68%	97%	82%	71%	31%
Referrals									
	FY 2015	25,056	5,913	6,572	2,608	3,204	3,753	2,525	481
	FY 2016	26,148	6,531	6,539	2,706	3,203	3,943	2,721	505
	FY 2017	28,869	8,216	6,954	2,819	3,203	4,132	2,956	589
	FY 2018	28,845	7,927	6,569	2,802	3,475	4,568	2,867	637
	FY 2019	28,434	7,746	6,548	2,898	3,385	4,325	2,933	599
Dental Services									
	FY 2015	503,851	2,886	49,554	94,494	132,729	129,802	76,573	17,813
	FY 2016	522,904	3,025	51,420	96,901	136,503	136,338	80,151	18,566
	FY 2017	531,619	3,092	52,177	96,798	135,957	142,714	81,579	19,302
	FY 2018	529,135	3,111	51,656	96,627	131,125	145,434	81,712	19,470
	FY 2019	519,985	3,442	49,215	95,691	126,833	144,950	80,745	19,109
Lead Screening ^a									
	FY 2015	17,124	229	11,470	5,425				
	FY 2016	19,699	292	13,261	6,146				
	FY 2017	18,922	167	13,693	5,062				
	FY 2018	17,928	145	13,587	4,196				
	FY 2019	16,465	113	12,675	3,677				

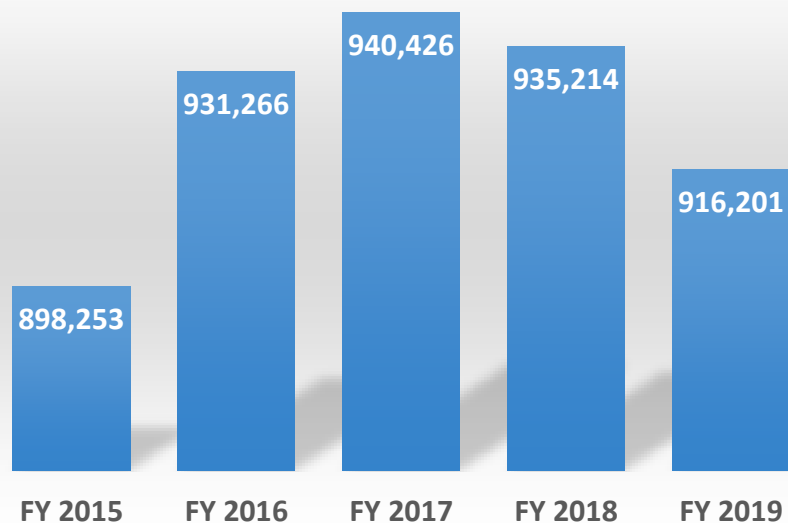
^a CMS requires this information for children under age six

Washington EPSDT 2015 – 2019

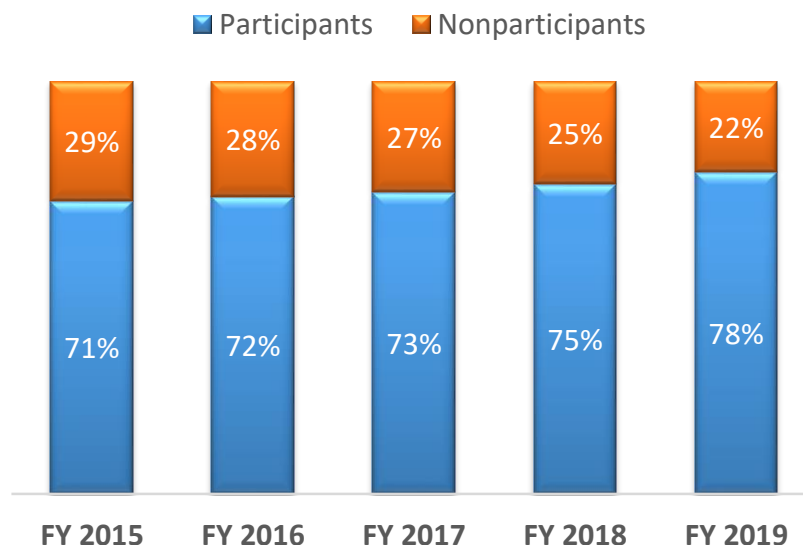
**AAP Periodicity Recommendations vs Washington Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2015 – 2018	5	3	3	2	3	2	1
	2019	5	4	3	2	3	2	1

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

West Virginia EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	248,587	13,527	28,385	39,529	51,953	57,830	43,430	13,933
	FY 2016	249,445	14,622	26,105	38,038	50,728	57,221	43,007	19,724
	FY 2017	253,900	13,281	26,975	38,968	51,189	59,215	43,744	20,528
	FY 2018	246,479	12,742	26,093	37,624	48,887	58,261	42,766	20,106
	FY 2019	239,724	12214.00	25,144	35,941	47,365	57,788	41,758	19,514
Screening Ratio									
	FY 2015	100%	100%	100%	100%	100%	81%	62%	9%
	FY 2016	100%	100%	100%	100%	100%	93%	71%	19%
	FY 2017	98%	100%	100%	100%	75%	72%	61%	31%
	FY 2018	91%	100%	100%	100%	67%	67%	59%	27%
	FY 2019	85%	100%	100%	98%	67%	64%	57%	28%
Participant Ratio									
	FY 2015	56%	96%	84%	69%	84%	42%	33%	6%
	FY 2016	60%	87%	88%	73%	98%	47%	37%	13%
	FY 2017	54%	93%	81%	71%	50%	47%	39%	17%
	FY 2018	54%	93%	81%	70%	50%	47%	40%	18%
	FY 2019	56%	94%	81%	71%	53%	50%	42%	20%
Referrals									
	FY 2015	29,950	1,820	2,301	5,619	6,509	7,872	5,563	266
	FY 2016	57,082	2,472	9,010	11,499	11,904	12,779	8,132	1,286
	FY 2017	85,516	8,310	16,670	14,332	15,293	16,979	11,598	2,334
	FY 2018	81,412	7,933	16,020	13,392	14,267	16,033	11,504	2,263
	FY 2019	83,584	7,675	15,609	13,311	15,010	17,506	11,977	2,496
Dental Services									
	FY 2015	114,616	210	5,943	23,126	30,673	32,309	20,526	1,829
	FY 2016	125,864	238	6,356	24,409	34,033	34,448	22,051	4,329
	FY 2017	122,310	52	4,133	21,569	32,851	35,395	22,372	5,938
	FY 2018	119,705	57	4,145	21,020	31,340	35,131	22,296	5,716
	FY 2019	116,611	64	4,254	19,799	30,202	34,828	21,809	5,655
Lead Screening ^a									
	FY 2015	13,179	814	9,073	3,292				
	FY 2016	12,719	641	8,892	3,186				
	FY 2017	16,687	138	12,088	4,461				
	FY 2018	15,816	98	11,666	4,052				
	FY 2019	13,977	108	10,317	3,552				

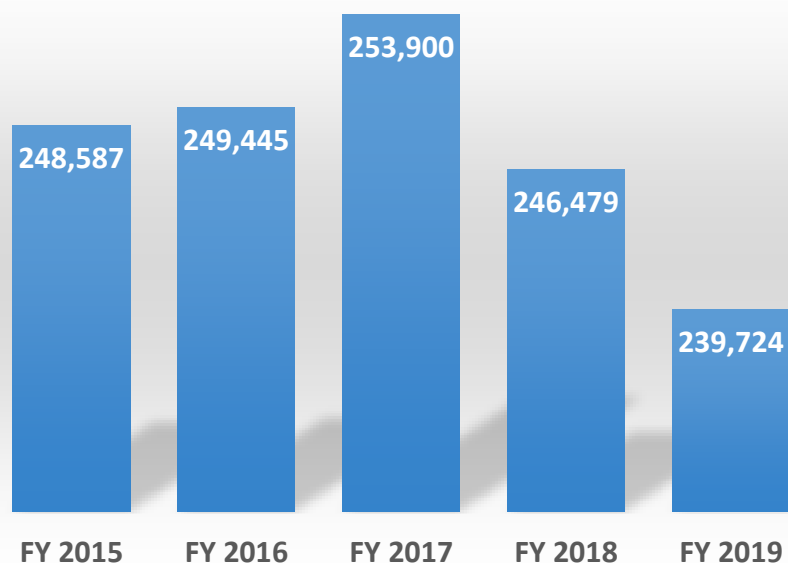
^a CMS requires this information for children under age six

West Virginia EPSDT 2015 – 2019

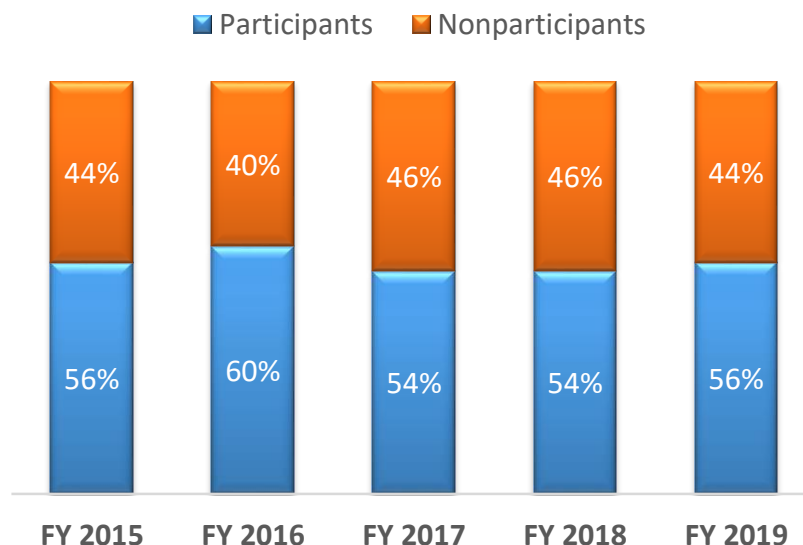
**AAP Periodicity Recommendations vs West Virginia Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	West Virginia							
	2015 – 2016	7	4	3	2	5	4	2
	2017 – 2019	6	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Wisconsin EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	599,290	34,536	69,352	98,145	129,610	135,518	95,391	36,738
	FY 2016	595,904	34,133	69,217	96,016	127,184	136,593	96,346	36,415
	FY 2017	587,886	32,954	67,698	94,881	122,785	138,279	95,536	35,753
	FY 2018	579,624	32,031	65,788	93,528	118,532	139,280	94,784	35,681
	FY 2019	569,165	31,323	63,433	91,931	113,754	138,979	94,206	35,539
Screening Ratio									
	FY 2015	100%	100%	100%	80%	100%	89%	82%	46%
	FY 2016	100%	100%	100%	80%	100%	90%	84%	49%
	FY 2017	100%	100%	100%	74%	100%	83%	81%	49%
	FY 2018	69%	100%	89%	73%	51%	52%	42%	26%
	FY 2019	70%	100%	92%	76%	53%	53%	43%	27%
Participant Ratio									
	FY 2015	76%	94%	81%	65%	90%	75%	69%	39%
	FY 2016	78%	94%	81%	66%	96%	79%	72%	42%
	FY 2017	79%	95%	81%	66%	97%	80%	77%	46%
	FY 2018	56%	95%	81%	66%	49%	50%	40%	24%
	FY 2019	57%	95%	81%	68%	51%	51%	41%	25%
Referrals									
	FY 2015	193,367	23,196	46,944	34,967	29,941	33,994	20,246	4,079
	FY 2016	193,986	22,842	46,861	33,670	29,869	35,371	21,210	4,163
	FY 2017	185,468	21,272	44,891	32,011	27,652	33,712	21,581	4,349
	FY 2018	183,996	20,771	43,383	31,376	27,119	35,015	21,673	4,659
	FY 2019	183,356	20,331	41,601	31,478	26,561	36,079	22,583	4,723
Dental Services									
	FY 2015	159,190	61	4,384	27,703	52,133	46,501	23,833	4,575
	FY 2016	170,925	92	5,341	29,915	54,355	50,267	26,027	4,928
	FY 2017	225,397	163	8,338	38,742	67,147	67,289	36,217	7,501
	FY 2018	228,008	189	8,857	39,399	66,020	68,745	36,826	7,972
	FY 2019	226,768	289	9,535	39,411	64,027	69,118	36,527	7,861
Lead Screening ^a									
	FY 2015	55,685	1,131	37,040	17,514				
	FY 2016	57,910	1,211	38,589	18,110				
	FY 2017	58,882	1,139	38,883	18,860				
	FY 2018	56,552	1,054	37,193	18,305				
	FY 2019	53,129	942	34,902	17,285				

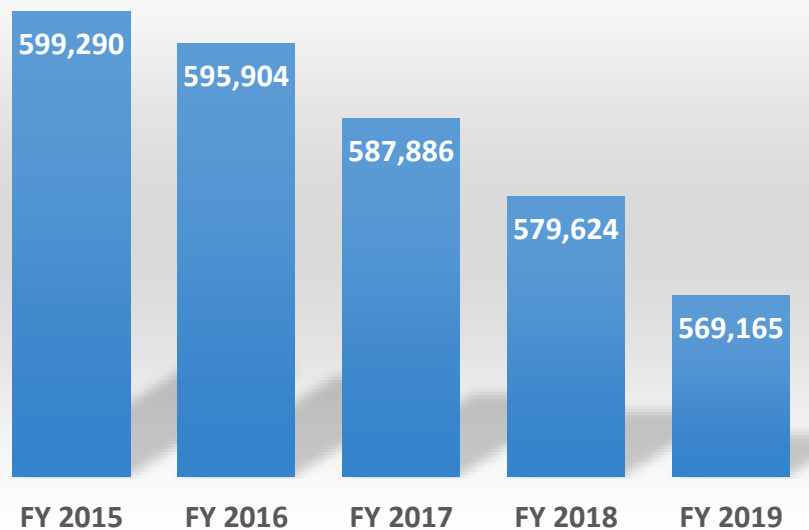
^a CMS requires this information for children under age six

Wisconsin EPSDT 2015 – 2019

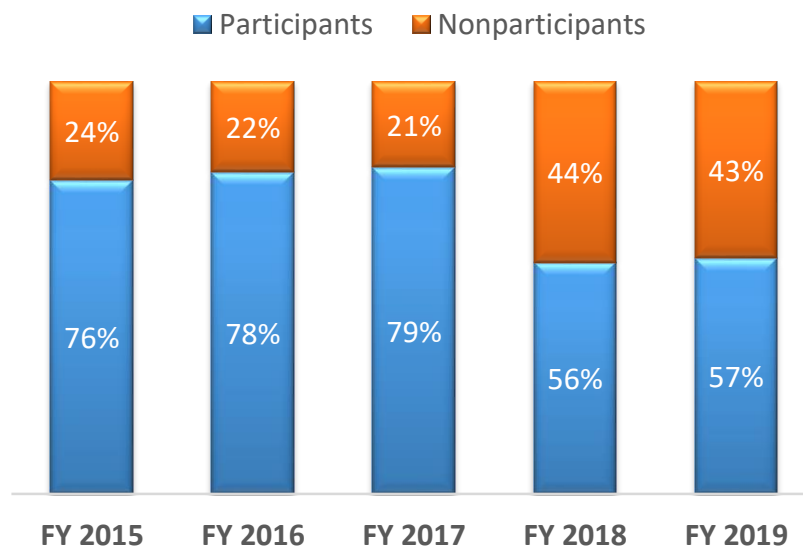
**AAP Periodicity Recommendations vs Wisconsin Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
	2015 – 2017	5	4	3	2	3	2	1
	2018 – 2019	7	5	3	4	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

Wyoming EPSDT 2015 – 2019

		Total	< 1	1-2	3-5	6-9	10-14	15-18	19-20
Number of Eligibles									
	FY 2015	60,062	3,477	7,478	10,254	13,417	13,178	9,027	3,231
	FY 2016	56,004	3,406	6,927	9,496	12,373	12,576	8,480	2,746
	FY 2017	51,611	3,063	6,684	8,665	11,068	12,184	7,955	1,992
	FY 2018	49,218	2,907	6,207	8,193	10,236	12,049	7,719	1,907
	FY 2019	46,794	2,770	5,745	7,733	9,653	11,570	7,536	1,787
Screening Ratio									
	FY 2015	59%	92%	90%	54%	48%	32%	23%	7%
	FY 2016	66%	96%	100%	61%	54%	36%	27%	9%
	FY 2017	100%	100%	100%	100%	100%	100%	100%	100%
	FY 2018	70%	100%	100%	65%	62%	42%	32%	10%
	FY 2019	70%	100%	100%	65%	62%	41%	32%	12%
Participant Ratio									
	FY 2015	43%	93%	67%	48%	46%	29%	21%	7%
	FY 2016	47%	95%	72%	54%	52%	33%	25%	9%
	FY 2017	50%	96%	74%	57%	53%	34%	26%	8%
	FY 2018	52%	96%	75%	58%	59%	39%	29%	10%
	FY 2019	52%	95%	77%	58%	59%	38%	30%	12%
Referrals									
	FY 2015	365	63	107	63	40	56	36	0
	FY 2016	405	52	113	77	41	67	55	0
	FY 2017	13,275	2,206	3,767	2,451	1,511	2,117	1,154	69
	FY 2018	13,606	2,132	3,561	2,469	1,648	2,454	1,272	70
	FY 2019	12,751	1,953	3,348	2,257	1,518	2,280	1,313	82
Dental Services									
	FY 2015	24,766	26	1,391	4,714	7,232	6,679	4,014	710
	FY 2016	25,191	31	1,450	4,834	7,171	6,928	4,137	640
	FY 2017	23,980	25	1,504	4,603	6,585	6,823	3,920	520
	FY 2018	22,775	39	1,424	4,273	5,985	6,726	3,834	494
	FY 2019	21,841	44	1,425	4,064	5,721	6,409	3,698	480
Lead Screening ^a									
	FY 2015	1,639	8	930	701				
	FY 2016	1,680	9	993	678				
	FY 2017	1,403	5	907	491				
	FY 2018	1,155	4	785	366				
	FY 2019	1,189	DS	DS	DS				

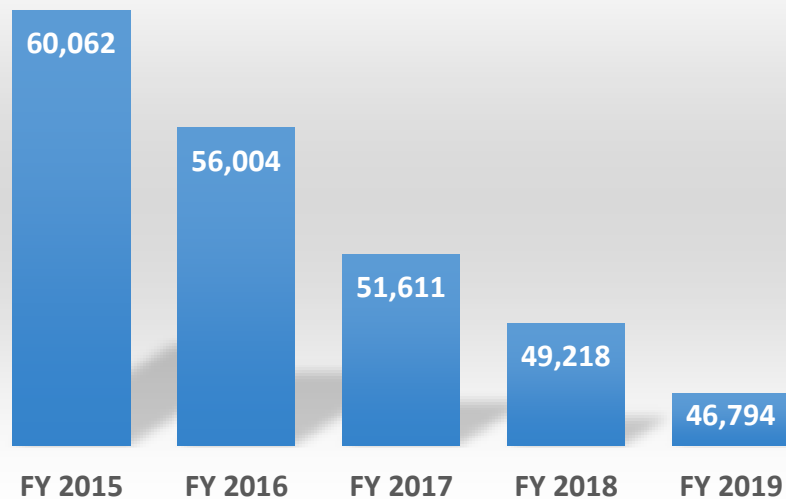
^a CMS requires this information for children under age six

Wyoming EPSDT 2015 – 2018

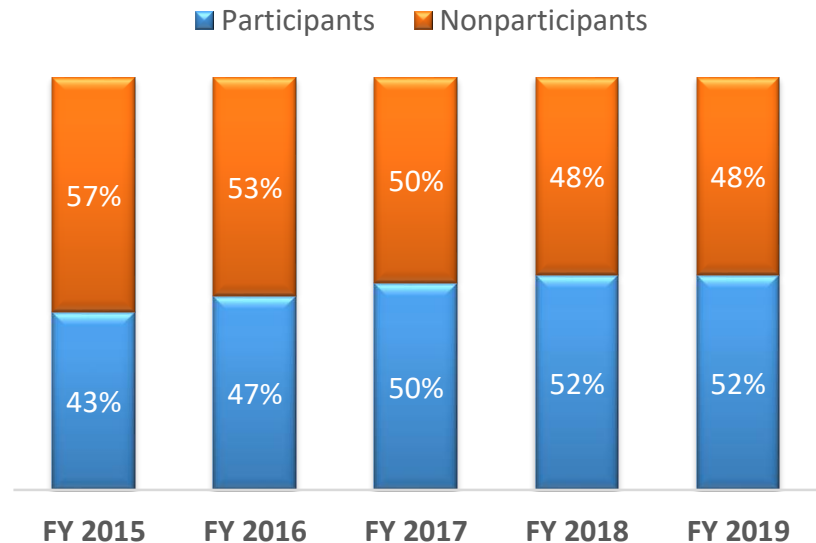
**AAP Periodicity Recommendations vs Wyoming Schedules Reported on Form CMS-416
(2015-2019)**

		< 1	1-2	3-5	6-9	10-14	15-18	19-20
AAP^b	2008 – 2019	7	5	3	4	5	4	2
Wyoming	2015 – 2019	7	4	3	2	5	4	2

Total Number of Eligibles



Participant Ratio



PARTICIPANT RATIO: The unduplicated number of children who received one or more medical screen(s) through EPSDT compared to the number of eligible children expected to receive a medical screen, based on the annualized state periodicity schedule and the average period of eligibility. In 1990, the Centers for Medicare & Medicaid Services established a participant ratio goal of 80 percent, to be achieved by fiscal year 1995.

^b AAP recommends an additional screening at age 21, for a total of 31 appointments

/

APPENDIX A: METHODOLOGY

Methodology

/Data Collection

Data used in this book were taken directly from the Form CMS-416 as reported by Centers for Medicare & Medicaid Services on its web site, <https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html>, as follows: fiscal years 2015, 2016, 2017 (accessed May 7, 2020); fiscal year 2018 (accessed November 23, 2020); and fiscal year 2019 (accessed January 4, 2021).

Data Reporting

Unlike the previous version of this chart book, all of the states posted Form CMS-416 for the years covered, and it was not necessary to duplicate data from a prior or subsequent year. There are several instances in the state charts where states did not report data or reported data that seemed incongruous with numbers reported by the state in previous years, or in the same year but differing age groups, or by other similarly-sized states. Only in certain instances have we attempted to determine why these reported numbers are potentially misleading. For the most part we can only comment on how they are different. There usually is not enough available information to explain why the numbers do not fit with the rest of the data.

Numerous states did not report data for various age groups or reported “DS” – Data Suppression: It is indication that the counts for a particular age group are low enough that a potential risk of identification or breach of confidentiality exists if the count is published. Data is also suppressed when the counts are deemed unreliable.

Guam – Guam is not required to report use of EPSDT services via Form CMS-416 (CMS 2016c). [Medicaid and CHIP in Guam | MACPAC](#)

APPENDIX B: CMS FORM-416

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code	Fiscal Year								
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:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
1b. Total Individuals Eligible for EPSDT for 90 Continuous Days	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
1c. Total Individuals Eligible Under a CHIP Medicaid Expansion	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
2a. State Periodicity Schedule									
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule			0.00	0.00	0.00	0.00	0.00	0.00	0.00
3a. Total Months of Eligibility	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
3b. Average Period of Eligibility	CN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Expected Number of Screenings per Eligible	CN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5. Expected Number of Screenings	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
6. Total Screens Received	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
7. SCREENING RATIO	CN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	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
9. Total Eligibles Receiving at Least One Initial or Periodic Screen	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
10. PARTICIPANT RATIO	CN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. Total Eligibles Referred for Corrective Treatment	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12a. Total Eligibles Receiving Any Dental Services	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12b. Total Eligibles Receiving Preventive Dental Services	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12c. Total Eligibles Receiving Dental Treatment Services	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	0							
	MN:	0							
	Total:	0				0	0		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12f. Total Eligibles Receiving Oral Health Services Provided by a Non-Dentist Provider	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
12g. Total Eligibles Receiving Any Preventive Dental or Oral Health Service	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
13. Total Eligibles Enrolled in Managed Care	CN:	0							
	MN:	0							
	Total:	0	0	0	0	0	0	0	0
14a. Total Number of Screening Blood Lead Tests	CN:	0							
	MN:	0							
	Total:	0	0	0	0				
14b. Methodology Used to Calculate the Total Number of Screening Blood Lead Tests		CPT Code 83655 within certain diagnoses codes (Method I)	Enter X for Method I	HEDIS (Method II)	Enter X for Method II	Combination Methodology (Method III)	Enter X for Method III		

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

APPENDIX C:

CMS FORM-416 Instructions

2700.4 Instructions for Completing Form CMS-416: Annual Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Participation Report

Effective for the reporting period federal fiscal year 2020 (October 1, 2019 through September 30, 2020), with submission of Form CMS-416 by April 1, 2021.

PRA Disclosure Statement: Annual completion of the Form CMS-416 is mandatory for states pursuant to section 1902(a)(43)(D) of the Social Security Act which requires states to annually report on the provision of Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0354 (expiration date May 31, 2023). The time required to complete this information collection is estimated to average 29 hours per response including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4- 26-05, Baltimore, Maryland 21244-1850.

A. Purpose -- The annual EPSDT report (form CMS-416) provides basic information on participation in the Medicaid child health program. The data are used to assess the effectiveness of state Medicaid programs in reaching EPSDT eligible children in terms of the number of individuals under the age of 21 (by age group and basis of Medicaid eligibility) who are provided child health screening services, referred for corrective treatment, and receiving dental services. Child health screening services are defined for purposes of reporting on this form as initial or periodic screens required to be provided according to a state's screening periodicity schedule.

The completed report demonstrates the state's attainment of its participation and screening goals. Participation and screening goals are two different standards against which EPSDT performance (or penetration) is measured on the form CMS-416. From the completed reports, trend patterns and projections are developed for the nation and for individual states or geographic areas, from which decisions and recommendations can be made to ensure that eligible children are given the best possible health care. The information is also used to respond to congressional and public inquiries.

B. Reporting Requirement -- Each state that supervises or administers a medical assistance program under Title XIX of the Social Security Act must report annually on form CMS-416. These data must include services reimbursed directly by the state under fee-for- service, or through managed care, prospective payment, or other payment arrangement or through any other health or dental plans that contract with the state. Each state is required to collect encounter data (or other data as necessary) from managed care and prospective payment entities in sufficient detail to provide the information required by this report. States may contact the state lead in their CMS office or the EPSDT technical assistance mailbox, EPSDT@cms.hhs.gov, if technical assistance is needed to complete this form.

Effective Date --These associated revised instructions must be used starting with the reporting period federal fiscal year 2020, beginning October 1, 2019 through September 30, 2020, for data due to CMS on the Form CMS-416 on or before April 1, 2021.

A. Submittal Procedure -- States should submit the annual Form CMS-416 **and** the state medical and dental periodicity schedules electronically to the CMS central office via the EPSDT technical assistance mailbox at EPSDT@cms.hhs.gov not later than April 1 of the year following the end of the federal fiscal year being reported.

The **electronic form and instructions** are available on the CMS website at:
<https://www.medicaid.gov/medicaid/benefits/epsdt/index.html>.

States may **not** modify the electronic form or submit variations of the form; it must be submitted as downloaded from Medicaid.gov: [https://www.medicaid.gov/medicaid/benefits/downloads/form- 416.zip](https://www.medicaid.gov/medicaid/benefits/downloads/form-416.zip)

States that have data limitations or that have made program changes during a reporting period that significantly impact data results, such as a change in the periodicity schedule to follow the most recent version of the American Academy of Pediatrics' Bright Futures™ guidelines, may include a brief note with the cover correspondence accompanying their CMS-416 submission. This information will be included in a separate footnotes document on the Medicaid.gov website, accompanying the national and state data reports.

B. Detailed Instructions -- Enter your state name and the federal fiscal year as directed below.

State -- Enter the name of your state using the two-character state code in upper case format.

Fiscal Year -- Enter the federal fiscal year (FFY) being reported in YYYY format.

Note: The federal fiscal year is from October 1 through September 30. For example, FFY 2020 is October 1, 2019 through September 30, 2020.

CMS Generated Reporting of State Form CMS-416 Using T-MSIS -- In an effort to reduce state reporting burden, CMS has developed the capacity to generate state-specific Form CMS- 416 reports using state-reported data to CMS via the Transformed Medicaid Statistical Information System (T-MSIS). This option is available only to states that are current with T- MSIS data submissions and pass T-MSIS benchmarks for data quality and completeness. If your state gives CMS permission to generate Form CMS-416 data using T-MSIS, please enter an "X" in the space provided on the form, along with the two-digit state code and the federal fiscal year. The rest of the form should remain blank. The form and copies of the state's current medical and dental periodicity schedules should be submitted to CMS by April 1st via the EPSDT technical assistance mailbox. States that select this option will be given an opportunity to review and validate the T-MSIS generated report before it is finalized and made publicly available.

States that choose not to have CMS generate the state-specific Form CMS-416 or who do not meet the criteria to have CMS generate the Form CMS-416 should follow the detailed instructions for the completion of the Form CMS-416.

For each of the following line items, report total counts by the age groups indicated and if categorically or medically needy (described below). In cases where calculations are necessary, perform separate calculations for the total column and for each age group. **You must enter a number in each line and column of data requested even if the number is "0."**

Important Reporting Requirements:

- Report age based upon the individual's age as of September 30 of the reporting year.
- Report all data in the age category reflecting the individual's age at the end of the federal fiscal year even if the individual received services in two age categories. For example, if a child turned age 3 on September 1st, but received EPSDT services at age 2, these services would be counted in the age 3-5 category.
- The population for which the data is reported on Lines 3a –14 are children from Line 1b, that is unduplicated counts of individuals enrolled for at least 90 continuous days during the reporting period.

- The objective of CMS-416 reporting is to capture on each line all services that were provided, regardless of payment status and unduplicated by child. Report data based on visits during which a service was provided to an eligible individual during the reporting period, according to the instructions for each line, regardless of whether the unduplicated claim was paid, unpaid, or denied. States must be able to ensure that once a service is reported on the CMS-416, it is not reported again in any reporting period if payment status changes, for example, from unpaid to paid.
- Do not enter any data into the greyed-out cells.

Categorically Needy (CN) and Medically Needy (MN) Eligibility Groups -- For purposes of reporting data on the CMS-416, children should be reported as medically needy (with or without spend down) or categorically needy (not medically needy) based on their eligibility status as of September 30th of the reporting federal fiscal year. If they weren't enrolled in Medicaid on September 30th because their eligibility was terminated prior to this date, their status should be reported as of the date they were terminated. States should determine the basis of eligibility consistent with the instructions from the [**T-MSIS Data Dictionary**](#) in consultation with state Medicaid eligibility officials, if needed.

Line 1a -- Total Individuals Eligible for EPSDT -- Enter the total unduplicated number of individuals under the age of 21 enrolled in Medicaid or a Children's Health Insurance Program (CHIP) Medicaid expansion program determined to be eligible for EPSDT services, distributed by age and by basis of eligibility (i.e., CN or MN) as of September 30. If a child was not enrolled in Medicaid on September 30th because their eligibility was terminated prior to this date, the child should still be included on this line. Their age should be reported as of September 30th of the reporting year, while their basis of eligibility should be reported as of the date they were terminated. "Unduplicated" means that an eligible person is reported only once, although he/she may have had more than one period of eligibility during the year, and that a claim for a service that was provided is only counted once, whether the claim was unpaid, paid, or denied. Include all individuals regardless of whether the services are provided under fee-for-service, prospective payment, managed care, or other payment arrangements. Medicaid-eligible individuals under age 21 are considered eligible for EPSDT services regardless of whether they have been informed about the availability of EPSDT services or whether they accept EPSDT services at the time of informing. Individuals for whom third-party liability is available should also be counted in the number.

Do not include in this count the following groups of individuals:

- Medically needy individuals under the age of 21 if your state does **not** provide EPSDT services for the medically needy group;
- Individuals eligible for Medicaid only under a Section 1115 waiver as part of an expanded population for which the full complement of EPSDT services is not available;
- Undocumented aliens who are eligible only for emergency Medicaid services;
- Children in separate state CHIP programs; or
- Other groups of individuals under age 21 who are eligible only for limited services as part of their Medicaid eligibility (for example, pregnancy-related services).

Line 1b -- Total Individuals Eligible for EPSDT for 90 Continuous Days -- Enter the total unduplicated number of individuals under the age of 21 **from Line 1a** who have been continuously enrolled in Medicaid or a CHIP Medicaid expansion program for at least 90 continuous days in the federal fiscal year and determined to be eligible for EPSDT services, distributed by age and by basis of eligibility. For example, if an individual was enrolled from October 1 to November 30 and again from August 1 to September 30, the individual would not be considered eligible for 90 continuous days in the federal fiscal year.

Line 1c -- Total Individuals Eligible for EPSDT under a CHIP Medicaid Expansion Program -- Enter the total unduplicated number of individuals **included in Line 1b** who are under the age of 21 and eligible for EPSDT services as part of a CHIP Medicaid expansion program. For children who have been eligible for EPSDT under both Medicaid and a CHIP Medicaid expansion program during the report year, include the child on this line if they are enrolled in a CHIP Medicaid expansion as of September 30.

Line 2a -- State Periodicity Schedule -- Enter the number of initial or periodic general health screenings required to be provided to individuals within the age group specified according to the state's medical periodicity schedule. (Example: If your state's periodicity schedule requires screening at 12, 15, 18, 24, and 30 months, the number 5 should be entered in the 1-2 age group column.) **Make no entry in the total column.**

If your state follows the 2019 American Academy of Pediatrics' Bright Futures™ guidelines, the periodicity schedule should be reported on the form as follows:

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
7	5	3	4	5	4	2

Note: As noted above, use the state's current medical periodicity schedule to complete Line 2a and submit a copy of the state's current medical and dental periodicity schedules to CMS with your CMS-416 submission.

Line 2b -- Number of Years in Age Group -- Make no entries on this line. This is a fixed number reflecting the number of years included in each age group.

Line 2c -- Annualized State Periodicity Schedule -- Make no entries on this line. This line is auto-calculated by dividing the values on Line 2a by the numbers on Line 2b. This is the number of screenings expected to be received by an individual in each age group in one year.

Line 3a -- Total Months of Eligibility -- Enter the total months of eligibility for the individuals in each age group in Line 1b during the reporting year. An individual child should only be counted once in the age group the individual is in as of September 30. **Include the total months of eligibility in the age category where the individual is reported, even if the individual had months of eligibility in two age categories during the reporting period. For example, if an individual was eligible for 12 months, from October 1st through September 30th, but turned age 3 on August 1st, all 12 months of eligibility would be counted in the age 3-5 category.**

Line 3b -- Average Period of Eligibility -- Make no entries on this line. This line is auto-calculated by dividing the values on Line 3a by the numbers on Line 1b, and dividing that number by 12. This number represents the portion of the year that individuals remained eligible for EPSDT services during the reporting year.

Line 4 -- Expected Number of Screenings per Eligible -- Make no entries on this line. This line is auto-calculated by multiplying Line 2c by Line 3b. This number reflects the expected number of initial or periodic screenings per individual under age 21 per year based on the number required by the state-specific periodicity schedule and the average period of eligibility.

Line 5 -- Expected Number of Screenings -- Make no entries on this line. This line is auto-calculated by multiplying Line 4 by Line 1b. This reflects the total number of initial or periodic screenings expected to be provided to the eligible individuals in Line 1b.

Line 6 -- Total Screens Received -- Enter the total number of initial or periodic screens furnished to eligible individuals from Line 1b under fee-for-service, prospective payment, managed care or other payment arrangements, based on an unduplicated paid, unpaid, or denied claim. **Note:** States may use the CPT codes listed below as a proxy for reporting these initial or periodic screens. Use of these proxy codes is for reporting purposes only. States must continue to ensure that all five age-appropriate elements of an EPSDT screen, as defined by law, are provided to EPSDT recipients.

This number should not reflect sick visits or episodic visits provided to the enrolled individual unless an initial or periodic screen was also performed during the visit. However, it may reflect a screen outside of the normal state periodicity schedule that is used as a "catch-up" EPSDT screening. (A catch-up EPSDT screening is defined as a complete screening that is provided to bring an individual child up-to-date with the state's screening periodicity schedule. For example, a child who did not receive a periodic screen at age five visits a provider at age 5 years and 4 months. The provider may use that visit to provide a complete age appropriate screening and the screening may be counted on the CMS-416.) **Report all screening data in the age category reflecting the individual's age at the end of the federal fiscal year even if the individual received services in two age categories. For example, if a child turned age 3 on September 1st, but had a 30-month well-child visit the previous March, the 30-month visit would be counted in the age 3-5 age category.** Use the codes below or other documentation of such services furnished under capitated or prospective payment arrangements. The codes to be used to document the receipt of an initial or periodic screen are as follows:

CPT-4 codes: Preventive Medicine Services * 99381 New Patient under one year

99382 New Patient (ages 1-4 years)

99383 New Patient (ages 5-11 years)

99384 New Patient (ages 12-17 years)

99385 New Patient (ages 18-39 years) 99391 Established patient under one year 99392 Established patient (ages 1-4 years)

99393 Established patient (ages 5-11 years)

99394 Established patient (ages 12-17 years)

99395 Established patient (ages 18-39 years)

99460 Initial hospital or birthing center care for normal newborn infant

99461 Initial care in other than a hospital or birthing center for normal newborn infant

99463 Initial hospital or birthing center care of normal newborn infant (admitted/discharged same date)

***These CPT codes do not require use of a "Z" code. QR**

CPT-4 code s: Evaluation and Management Codes **

99202-99205 New Patient

99213-99215 Established Patient

**** These CPT-4 codes must be used in conjunction with the following Z codes:**

Z76.2 (Encounter for health supervision and care of other healthy infant and child)

Z00.121 (Encounter for routine child health examination with abnormal findings)

Z00.129 (Encounter for routine child health examination without abnormal findings)

Z00.110 (Health examination for newborn under 8 days old)

Z00.111 (Health examination for newborn 8 to 28 days old)

Z00.00-01 (Encounter for general adult medical examination without/with abnormal findings)

Z02.0 (Encounter for examination for admission to educational institution)

Z02.1 (Encounter or pre-employment examination)

Z02.2 (Encounter for examination for admission to residential institution)

Z02.3 (Encounter for examination for recruitment to armed forces)

Z02.4 (Encounter for examination for driving license)

Z02.5 (Encounter for examination for participation in sport)

Z02.6 (Encounter for insurance purposes)

Z02.81 (Encounter for paternity testing)

Z02.82 (Encounter for adoption services)

Z02.83 (Encounter for blood-alcohol and blood-drug test)

Z02.89 (Encounter for other administrative examinations)

Z00.8 (Encounter for other general examination)

Z00.6 (Encounter for examination for normal comparison and control in clinical research program)

Z00.5 (Encounter for examination of potential donor of organ and tissue)

Z00.70 (Encounter for examination for period of delayed growth in childhood without abnormal findings)

Z00.71 Encounter for examination for period of delayed growth in childhood with abnormal findings)

Line 7 -- Screening Ratio -- Make no entries on this line. This line is auto-calculated by dividing the actual number of initial and periodic screening services received (Line 6) by the expected number of initial and periodic screening services (Line 5). This ratio indicates the extent to which EPSDT eligibles received the number of initial and periodic screening services required by the state's periodicity schedule, prorated by the proportion of the year for which they were EPSDT eligible.

Line 8 -- Total Eligibles Who Should Receive at Least One Initial or Periodic Screen -- Make no entries on this line. This line is auto-calculated by multiplying Line 4 by Line 1b. Note: If the number on Line 4 is greater than 1, the number 1 will be used.

(This will eliminate situations where more than one visit is expected in any age group in a year.) This reflects the number of individuals who should receive at least one initial or periodic screen, based on the state's periodicity schedule.

Line 9 -- Total Eligibles Receiving at Least One Initial or Periodic Screen -- Enter the unduplicated number of individuals under age 21 with at least 90 days continuous enrollment within the federal fiscal year from Line 1b, including those in fee-for-service, prospective payment, managed care, and other payment arrangements, who received at least one documented initial or periodic screen during the year, based on an unduplicated paid, unpaid, or denied claim. **Refer to codes in Line 6.**

Line 10 -- Participant Ratio -- Make no entries on this line. This line is auto-calculated by dividing Line 9 by Line 8. This ratio indicates the extent to which eligibles are receiving any initial and periodic screening services during the year.

Line 11 -- Total Eligibles Referred for Corrective Treatment -- Enter the unduplicated number of individuals from Line 1b, including those in fee-for-service, prospective payment, managed care, and other payment arrangements, who had a paid, unpaid, or denied claim for a visit/service that occurred within 90 days from the date of an initial or periodic screening within the reporting period, where none of the following is included as part of the claim: capitation payments, administrative fees, transportation services, nursing home services, ICF-MR services, HIPP payments, inpatient services, dental care, home health services, long-term care services, or pharmacy services. Include only those instances where both the screening and the visit/service for which the subsequent claim was processed occurred within the reporting period.

Dental and Oral Health Lines 12a – 12g

NOTE A: For purposes of reporting the information on dental and oral health services in Lines 12a – 12g, “unduplicated” means that an individual may be counted only once on each line.

However, an individual may be counted on two or more lines. For example, individuals under the age of 21 may be counted once on Line 12a for receiving any dental service, counted again on Line 12c for receiving a dental treatment service and, if applicable, counted again on Line 12f for receiving an oral health service by a qualified health care practitioner or by a dental professional who is neither a dentist nor providing services under the supervision of a dentist.

These numbers should be inclusive of services reimbursed directly by the state under fee-for-service, or under managed care, prospective payment, or any other payment arrangements, or through any other health or dental plans that contract with the state to provide services to Medicaid or CHIP Medicaid expansion enrollees, based on an unduplicated paid, unpaid, or denied claim. For each dental or oral health line (Lines 12a – 12g), the universe of appropriate procedure codes to report is provided in the instructions below (HCPCS or equivalent CDT or CPT codes).

NOTE B: “Dental services” refers to services provided by or under the supervision of a dentist. Supervision is a spectrum and includes, for example, direct, indirect, general, collaborative or public health supervision as provided in the state’s dental practice act. The most common examples of this are dentists themselves, and dental hygienists who are working under the supervision of dentists. “Oral health services” refers to services provided by any qualified

health care practitioner or by a dental professional who is neither a dentist nor providing services under the supervision of a dentist. The most common examples of this are primary care medical providers and dental hygienists or dental therapists who are not working under the supervision of a dentist.

NOTE C: Each dental or oral health line, Lines 12a-12g, collects information related to a type of dental service, a type of oral health service, or both. As described in Note B, this distinction relates to the type of provider who delivered the service. The instructions for each dental or oral health line specify the provider type(s) relevant to that line. It is important to pay close attention to this part of the instructions, and to report on each line only services delivered (rendered) by the type(s) of providers specified for that line. Rendering provider type can usually be discerned from the claim form. For example: a child who received a fluoride varnish treatment (D1208) from a dentist should be reported on Line 12b, preventive dental service; a child who received a fluoride varnish treatment from a physician should be reported on Line 12f, oral health service. Both children should be reported on Line 12g, preventive dental or oral health service.

Line 12a -- Total Eligibles Receiving Any Dental Services -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who received at least one dental service by or under the supervision of a dentist. These services are defined by HCPCS codes D0100 – D9999 (or equivalent CDT codes D0100 – D9999), or equivalent CPT codes, based on an unduplicated paid, unpaid, or denied claim. All individuals reported on Lines 12b through 12e should be reported on this line, though an individual should be counted only **once** on this line regardless of how many dental services he or she received during the reporting period. See Notes A, B, and C, above.

Line 12b -- Total Eligibles Receiving Preventive Dental Services -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who

received at least one preventive dental service by or under the supervision of a dentist. These services are defined by HCPCS codes D1000 - D1999 (or equivalent CDT codes D1000 – D1999), or equivalent CPT codes that are for preventive dental services and only if provided by or under the supervision of a dentist, based on an unduplicated paid, unpaid, or denied claim. See Notes A, B, and C above.

Line 12c -- Total Eligibles Receiving Dental Treatment Services -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who received at least one dental treatment service by or under the supervision of a dentist. These services are defined by HCPCS codes D2000 – D9999 (or equivalent CDT codes D2000 – D9999), or equivalent CPT codes that include only those that involve periodontics, maxillofacial prosthetics, implants, oral and maxillofacial surgery, orthodontics, adjunctive general services, and only if provided by or under the supervision of a dentist, based on an unduplicated paid, unpaid, or denied claim. See Notes A, B, and C, above.

Line 12d -- Total Eligibles Receiving a Sealant on a Permanent Molar Tooth -- Enter the unduplicated number of individuals with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b, in the appropriate age categories of 6-9 and 10-14, who received a sealant on a permanent molar tooth. Sealants are defined by HCPCS code D1351 (or equivalent CDT code D1351), based on an unduplicated paid, unpaid, or denied claim. For this line, include sealants placed by any dental professional for whom placing a sealant is within his or her scope of practice. Permanent molars are teeth numbered 2, 3, 14, 15, 18, 19, 30, 31, and additionally, for those states that cover sealants on third molars, also known as wisdom teeth, the teeth numbered 1, 16, 17, 32. See Notes A, B, and C, above.

Line 12e -- Total Eligibles Receiving Diagnostic Dental Services -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who received at least one diagnostic dental service by or under the supervision of a dentist. These services are defined by HCPCS codes D0100 – D0999 (or equivalent CDT codes D0100 – D0999), or equivalent CPT codes that are for diagnostic dental services, and only if provided by or under the supervision of a dentist, based on an unduplicated paid, unpaid, or denied claim. See Notes A, B, and C, above.

12f -- Total Eligibles Receiving Oral Health Services Provided by a Non-Dentist Provider -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who received at least one oral health service by a non-dentist provider. These services are defined by HCPCS codes D0100 – D9999 (or equivalent CDT codes D0100 – D9999), or equivalent CPT codes that are for oral health services, and only if provided by a non-dentist provider, based on an unduplicated paid, unpaid, or denied claim. A “non-dentist provider” is any qualified health care practitioner who is neither a dentist nor providing services

under the supervision of a dentist. NOTE: Due to the variance in state practice acts and reimbursement policies, some states may not have data to report on this line. See Notes A, B, and C, above.

12g -- Total Eligibles Receiving any Preventive Dental or Oral Health Service -- Enter the unduplicated number of individuals under the age of 21 with at least 90 continuous days of enrollment during the federal fiscal year from Line 1b who received either a preventive “dental service” by or under the supervision of a dentist or a preventive “oral health service” by a qualified health care practitioner who is neither a dentist nor providing services under the supervision of a dentist. These services are defined by HCPCS codes D1000 - D1999 (or equivalent CDT codes D1000 – D1999), or equivalent CPT codes that are for preventive dental or oral health services, based on an unduplicated paid, unpaid, or denied claim. All individuals reported on Line 12b, as well as only those individuals from Line 12f who received preventive services, should also be reported on this line. While some individuals may appear on both Lines 12b and 12f, an individual should be counted only **once** on this line regardless of how many preventive dental services and/or preventive oral health services he or she received during the reporting period. See Notes A, B, and C, above.

Line 13 -- Total Eligibles Enrolled in Managed Care -- This number is reported for informational purposes only. Enter the total unduplicated number of individuals **from Line 1b** who are enrolled in any type of managed care arrangement, whether medical or dental or both, at any time during the reporting year. This includes any capitated arrangements such as managed care entities or individuals assigned to a primary care provider or primary care case manager, regardless of whether reimbursement to the provider is fee-for-service or capitated.

Line 14a -- Total Number of Screening Blood Lead Tests -- Enter the total number of screening blood lead tests furnished to eligible individuals under the age of six **from Line 1b** (that is, with at least 90 continuous days of enrollment during the federal fiscal year) under fee-for- service, prospective payment, managed care, or any other payment arrangements, based on an unduplicated paid, unpaid, or denied claim. Follow-up blood tests performed on individuals who have been diagnosed with or are being treated for lead poisoning should not be counted.

You may use one of two methods, or a combination of these methods, to calculate the number of blood lead screenings provided:

- 1) Count the number of times CPT code 83655 (“lead”) for a blood lead test is reported within certain ICD-10 CM codes (see Note below); or
- 2) You may include data collected from use of the HEDIS®¹ measure developed by the National Committee for Quality Assurance to report blood lead screenings if your state has elected to use this performance measure.

Line 14b -- Methodology Used to Calculate the Total Number of Blood Lead Tests -- Identify the methodology used by your state to calculate the number of blood lead tests furnished to the children reported on Line 14a by entering an "X" on the form next to the methodology used:

- 1) CPT Code 83655 within certain diagnoses codes (Method I)
- 2) HEDIS (Method II)
- 3) Combination Methodology (Method III)

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NOTE: On a claim, CPT code 83655 is the procedure code for blood lead level tests. States should report instances of CPT code 83655 which are accompanied by a diagnosis code that would indicate a person is receiving a screening blood lead test, such as a well-child check (for example Z00.121 or Z00.129), exposure to lead (Z77.011), or encounter for screening for disorder due to exposure to contaminants (Z13.88), with or without secondary codes. CPT 83655, when accompanied by a diagnosis code of T56.0X1A–4A, T56.0X1D-4D, T56.0X1S-4S or a code in the M1A.1 series would generally indicate that the person receiving the blood lead test had already been diagnosed with, or was being treated for, lead poisoning. This would not be considered a screening test. States should not report CPT codes 83655 when accompanied by a diagnosis code of T56.0X1A–4A, T56.0X1D- 4D, T56.0X1S-4S or a code in the M1A.1 series.

Endnotes

- 1 See, e.g., American Academy of Pediatrics Council on Community Pediatrics, *Poverty and Child Health in the United States*, PEDIATRICS, Apr. 2016 (explaining the effects of childhood poverty and potential solutions to ameliorate the problem); Ashish P. Thakrar et al., *Child Mortality in the US and 19 OECD Comparator Nations: A 50-Year Time-Trend Analysis*, 37 HEALTH AFFAIRS 140, 140 (2018) (“Children in the US also face a morbidity disadvantage, with higher rates of injury, obesity, HIV infection, and adolescent pregnancy, compared to children from peer countries.”); *Poverty and Health - The Family Medicine Perspective*, AMERICAN ACAD. FAM. PHYSICIANS, <https://www.aafp.org/about/policies/all/poverty-health.html> (last visited June 3, 2021); Off. Disease Prevention & Health Promotion, *Poverty*, Literature Summary for one of the *Social Determinants of Health*, HEALTHY PEOPLE, <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/poverty> (last visited June 3, 2021).
- 2 See Centers for Medicare & Medicaid Services, *Medicaid and CHIP Enrollment Trends Snapshot through September 2020*, <https://www.medicaid.gov/medicaid/national-medicaid-chip-program-information/downloads/september-medicaid-chip-enrollment-trend-snapshot.pdf>.
- 3 See, e.g., Dougal S. Hargreaves et al., *U.S. Children and Adolescents Had Fewer Annual Doctor and Dentist Contacts Than Their Dutch Counterparts, 2010–12*, 34 HEALTH AFFAIRS 2113, 2113 (2015) (“Studies have consistently shown that US children and adolescents are less healthy than children and adolescents in other high-income countries: For example, US children have poorer outcomes for mortality, mental health disorders, and obesity, and greater exposure to a wide range of health risks.”); UNITED NATIONS CHILD’S EMERGENCY FUND OFFICE OF RESEARCH, *WORLDS OF INFLUENCE UNDERSTANDING: WHAT SHAPES CHILD WELL-BEING IN RICH COUNTRIES*, INNOCENTI REPORT CARD 16, at 11 (2020), <https://www.unicef-irc.org/publications/pdf/Report-Card-16-Worlds-of-Influence-child-wellbeing.pdf> (ranking the United States 36 out of 38 high-income countries regarding child well-being outcomes, which factors in a child’s mental well-being, physical health, and academic and social skills).
- 4 See 42 U.S.C. 1396a(a)(10), 1396a(a)(43), 1396d(a)(4)(B), 1396d(r); 42 C.F.R. § 441.50-441.62; Centers for Medicare & Medicaid Services (CMS), STATE MEDICAID MANUAL§ 2700 & part 5.
- 5 See CMS, STATE MEDICAID MANUAL§ 2700.4.

6 *See* HR. REP. No. 101-247, at 399 (Sept. 1989), *reprinted at* 1989 U.S.C.C.A.N. 1906, 2125. *See also* CMS, EPSDT – A GUIDE FOR STATES: COVERAGE IN THE MEDICAID BENEFIT FOR CHILDREN AND ADOLESCENTS at 4 (June 2014).

7 CMS, EPSDT GUIDE at 4.

8 42 U.S.C. § 1396d(r)(2).

9 *Id.*, § 1396d(r)(4).

10 *Id.*, § 1396d(r)(3).

11 CMS, STATE MEDICAID MANUAL § 5123.G.

12 42 U.S.C. § 1396d(r)(5). *See also Id.*, § 1396a(a)(43)(B).

13 *Id.*, § 1396a(a)(43)(A); CMS, STATE MEDICAID MANUAL §§ 5121, 5150.

14 *Id.*, §§ 1396a(a)(43)(D), 1396d(r).

15 *See* CMS, STATE MEDICAID MANUAL § 5360.B.2 (Exhibit A, Expected Improvement in EPSDT Participation); *Id.* at § 5360.C (establishing screening goal).

16 *Id.*, § 2700.4.

17 *See* CMS; STATE MEDICAID MANUAL § 2700.4, Health Care Financing Administration (predecessor to CMS), *Dear State Medicaid Director* (July 19, 1999) (on file with authors).

18 *See* U.S. Gov't Accountability Office, *Medicaid: Additional CMS Data and Oversight Needed to Help Ensure Children Receive Recommended Screenings* (GAO-19-481) (Aug. 2019) (2019 GAO Report). For earlier studies, *see, e.g.*, U.S. General Accounting Office, *States Use Varying Approaches to Monitor Children's Access to Care* at 4 (Jan. 2003); Office of Inspector General, Department of Health and Human Services, *Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Performance Measurement* (Aug. 1992) (reporting that states' methods of calculating the form often resulted in inflated screening and participant ratios).

19 2019 GAO Report at 13.

20 *Id.* at 19.

21 *Id.* at 24.