

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code	Fiscal Year								
	2017	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
NM	CN:	416,295	18,657	41,113	62,679	85,658	103,008	73,067	32,113
	MN:	0	0	0	0	0	0	0	0
	Total:	416,295	18,657	41,113	62,679	85,658	103,008	73,067	32,113
1a. Total individuals eligible for EPSDT	CN:	404,445	15,159	40,267	61,520	84,247	101,202	71,479	30,571
	MN:	0	0	0	0	0	0	0	0
	Total:	404,445	15,159	40,267	61,520	84,247	101,202	71,479	30,571
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	10,543	57	471	869	2,619	3,565	2,758	204
	MN:	0	0	0	0	0	0	0	0
	Total:	10,543	57	471	869	2,619	3,565	2,758	204
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:	6	4	3	2	4	4	4	2
	MN:	1	2	3	4	5	4	4	2
	Total:	6	4	3	2	4	4	4	2
2a. State Periodicity Schedule			6.00	2.00	1.00	0.50	0.80	1.00	1.00
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule									
3a. Total Months of Eligibility	CN:	3,782,290	173,850	352,093	580,460	802,480	958,407	676,342	238,658
	MN:	0	0	0	0	0	0	0	0
	Total:	3,782,290	173,850	352,093	580,460	802,480	958,407	676,342	238,658
3b. Average Period of Eligibility	CN:	0.78	0.96	0.73	0.79	0.79	0.79	0.79	0.65
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.78	0.96	0.73	0.79	0.79	0.79	0.79	0.65
4. Expected Number of Screenings per Eligible	CN:	368,502	87,316	58,790	48,601	33,699	63,757	56,468	19,871
	MN:	0	0	0	0	0	0	0	0
	Total:	368,502	87,316	58,790	48,601	33,699	63,757	56,468	19,871
5. Expected Number of Screenings	CN:	298,294	65,411	79,655	40,301	36,123	48,128	25,110	3,566
	MN:	0	0	0	0	0	0	0	0
	Total:	298,294	65,411	79,655	40,301	36,123	48,128	25,110	3,566
6. Total Screens Received	CN:	0.81	0.75	1.00	0.83	1.00	0.75	0.44	0.18
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.81	0.75	1.00	0.83	1.00	0.75	0.44	0.18
7. SCREENING RATIO	CN:	277,822	15,159	40,267	48,601	33,699	63,757	56,468	19,871
	MN:	0	0	0	0	0	0	0	0
	Total:	277,822	15,159	40,267	48,601	33,699	63,757	56,468	19,871
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

* Includes 12-month visit

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

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		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
NM	2017								
	9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN: 166,191	14,068	29,804	32,113	29,152	38,359	19,774	2,921
	MN: 0	0	0	0	0	0	0	0	0
	Total:	166,191	14,068	29,804	32,113	29,152	38,359	19,774	2,921
10. PARTICIPANT RATIO	CN:	0.60	0.93	0.74	0.66	0.87	0.60	0.35	0.15
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.60	0.93	0.74	0.66	0.87	0.60	0.35	0.15
11. Total Eligibles Referred for Corrective Treatment	CN:	391	236	18	12	6	19	58	42
	MN:	0	0	0	0	0	0	0	0
	Total:	391	236	18	12	6	19	58	42
12a. Total Eligibles Receiving Any Dental Services	CN:	230,443	292	13,588	38,687	59,149	67,594	40,466	10,667
	MN:	0	0	0	0	0	0	0	0
	Total:	230,443	292	13,588	38,687	59,149	67,594	40,466	10,667
12b. Total Eligibles Receiving Preventive Dental Services	CN:	208,072	146	12,382	35,886	55,034	61,432	34,878	8,314
	MN:	0	0	0	0	0	0	0	0
	Total:	208,072	146	12,382	35,886	55,034	61,432	34,878	8,314
12c. Total Eligibles Receiving Dental Treatment Services	CN:	229,635	290	13,513	38,572	58,989	67,372	40,291	10,608
	MN:	0	0	0	0	0	0	0	0
	Total:	229,635	290	13,513	38,572	58,989	67,372	40,291	10,608
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	25,708				13,445	12,263		
	MN:	0				0	0		
	Total:	25,708				13,445	12,263		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	212,114	258	12,987	36,626	55,382	61,791	35,916	9,154
	MN:	0	0	0	0	0	0	0	0
	Total:	212,114	258	12,987	36,626	55,382	61,791	35,916	9,154
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	1,050	38	694	146	95	52	18	7
	MN:	0	0	0	0	0	0	0	0
	Total:	1,050	38	694	146	95	52	18	7
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	231,163	325	14,090	38,774	59,199	67,621	40,481	10,673
	MN:	0	0	0	0	0	0	0	0
	Total:	231,163	325	14,090	38,774	59,199	67,621	40,481	10,673
13. Total Eligibles Enrolled in Managed Care	CN:	361,412	13,779	36,158	55,232	75,123	90,110	63,724	27,286
	MN:	0	0	0	0	0	0	0	0
	Total:	361,412	13,779	36,158	55,232	75,123	90,110	63,724	27,286
14a. Total Number of Screening Blood Lead Tests	CN:	12,274	197	8,354	3,723				
	MN:	0	0	0	0				
	Total:	12,274	197	8,354	3,723				

* Includes 12-month visit

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