

FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT



State Code NV	Fiscal Year								
	2016	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:	390,719	23,366	46,038	63,301	84,403	90,069	59,022	24,520
	MN:	0							
	Total:	390,719	23,366	46,038	63,301	84,403	90,069	59,022	24,520
1b. Total Individuals eligible for EPSDT for 90 Continuous Days	CN:	345,071	17,881	42,594	58,040	75,051	78,650	50,994	21,861
	MN:	0							
	Total:	345,071	17,881	42,594	58,040	75,051	78,650	50,994	21,861
1c. Total Individuals Eligible under a CHIP Medicaid Expansion	CN:	33,867	98	1,904	3,366	9,042	11,169	7,365	923
	MN:	0							
	Total:	33,867	98	1,904	3,366	9,042	11,169	7,365	923
2a. State Periodicity Schedule			5	4	3	2	3	2	1
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule			5.00	2.00	1.00	0.50	0.60	0.50	0.50
3a. Total Months of Eligibility	CN:	3,737,741	125,950	451,033	623,300	842,796	905,929	577,765	210,968
	MN:	0							
	Total:	3,737,741	125,950	451,033	623,300	842,796	905,929	577,765	210,968
3b. Average Period of Eligibility	CN:	0.90	0.59	0.88	0.89	0.94	0.96	0.94	0.80
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.90	0.59	0.88	0.89	0.94	0.96	0.94	0.80
4. Expected Number of Screenings per Eligible	CN:		2.95	1.76	0.89	0.47	0.58	0.47	0.40
	MN:		0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:		2.95	1.76	0.89	0.47	0.58	0.47	0.40
5. Expected Number of Screenings	CN:	292,972	52,749	74,965	51,656	35,274	45,617	23,967	8,744
	MN:	0	0	0	0	0	0	0	0
	Total:	292,972	52,749	74,965	51,656	35,274	45,617	23,967	8,744
6. Total Screens Received	CN:	272,633	69,008	77,671	39,763	31,437	35,225	16,949	2,580
	MN:	0							
	Total:	272,633	69,008	77,671	39,763	31,437	35,225	16,949	2,580
7. SCREENING RATIO	CN:	0.93	1.00	1.00	0.77	0.89	0.77	0.71	0.30
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.93	1.00	1.00	0.77	0.89	0.77	0.71	0.30
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN:	225,733	17,881	42,594	51,656	35,274	45,617	23,967	8,744
	MN:	0	0	0	0	0	0	0	0
	Total:	225,733	17,881	42,594	51,656	35,274	45,617	23,967	8,744

* Includes 12-month visit

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

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9. Total Eligibles Receiving at least One Initial or Periodic Screen	CN:	153,847	15,853	31,778	31,699	27,647	30,124	14,428	2,318
	MN:	0							
	Total:	153,847	15,853	31,778	31,699	27,647	30,124	14,428	2,318
10. PARTICIPANT RATIO	CN:	0.68	0.89	0.75	0.61	0.78	0.66	0.60	0.27
	MN:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total:	0.68	0.89	0.75	0.61	0.78	0.66	0.60	0.27
11. Total Eligibles Referred for Corrective Treatment	CN:	81,682	9,613	20,577	16,439	13,728	13,769	6,654	902
	MN:	0							
	Total:	81,682	9,613	20,577	16,439	13,728	13,769	6,654	902
12a. Total Eligibles Receiving Any Dental Services	CN:	151,671	125	8,054	25,908	43,405	44,975	23,670	5,534
	MN:	0							
	Total:	151,671	125	8,054	25,908	43,405	44,975	23,670	5,534
12b. Total Eligibles Receiving Preventive Dental Services	CN:	141,255	61	7,156	24,466	41,703	42,815	20,944	4,110
	MN:	0							
	Total:	141,255	61	7,156	24,466	41,703	42,815	20,944	4,110
12c. Total Eligibles Receiving Dental Treatment Services	CN:	73,128	26	877	9,770	23,014	22,716	13,355	3,370
	MN:	0							
	Total:	73,128	26	877	9,770	23,014	22,716	13,355	3,370
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN:	35,032				15,376	19,656		
	MN:	0							
	Total:	35,032				15,376	19,656		
12e. Total Eligibles Receiving Dental Diagnostic Services	CN:	146,369	124	7,999	25,325	41,899	43,331	22,479	5,212
	MN:	0							
	Total:	146,369	124	7,999	25,325	41,899	43,331	22,479	5,212
12f. Total Eligibles Receiving Oral Health Services provided by a Non-Dentist Provider	CN:	1,508	0	138	209	158	323	478	202
	MN:	0							
	Total:	1,508	0	138	209	158	323	478	202
12g. Total Eligibles Receiving Any Dental Or Oral Health Service	CN:	152,225	125	8,155	26,005	43,471	45,091	23,788	5,590
	MN:	0							
	Total:	152,225	125	8,155	26,005	43,471	45,091	23,788	5,590
13. Total Eligibles Enrolled in Managed Care	CN:	299,946	16,046	37,709	50,550	65,742	68,298	43,361	18,240
	MN:	0							
	Total:	299,946	16,046	37,709	50,550	65,742	68,298	43,361	18,240
14. Total Number of Screening Blood Lead Tests	CN:	7,378	108	4,551	2,719				
	MN:	0							
	Total:	7,378	108	4,551	2,719				

* Includes 12-month visit

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