999 - STATE TOTAL FORM HCFA-416; ANNUAL EPSDT PARTICIPATION REPORT

STATE:NORTH CAROLINA FFY 04/05	CAT	AGE GROUPS							
		TOTAL	<1	1-2	3-5	6-9	10-14	15-18	19-20
1. NUMBER OF INDIVIDUALS ELIGIBLE FOR EPSDT	CN	888808	72308	129129	163238	166885	181302	128856	47090
	MN	2497	122	103	199	277	489	567	740
	TOTAL	891305	72430	129232	163437	167162	181791	129423	47830
2A. STATE PERIODICITY SCHEDULE	CN	XXXXXXXX	4.00	4.00	3.00	1.00	2.00	1.00	1.00
	MN	XXXXXXXX	4.00	4.00	3.00	1.00	2.00	1.00	1.00
	TOTAL	XXXXXXXX	4.00	4.00	3.00	1.00	2.00	1.00	1.00
2B. NUMBER OF YEARS IN AGE GROUP	CN	XXXXXXXX	1	2	3	4	5	4	2
	MN	XXXXXXXX	1	2	3	4	5	4	2
	TOTAL	XXXXXXXX	1	2	3	4	5	4	2
2C. ANNUALIZED STATE PERIODICITY SCHEDULE	CN	XXXXXXXX	4.00	2.00	1.00	0.25	0.40	0.25	0.50
	MN	XXXXXXXX	4.00	2.00	1.00	0.25	0.40	0.25	0.50
	TOTAL	XXXXXXXX	4.00	2.00	1.00	0.25	0.40	0.25	0.50
3A. TOTAL MONTHS OF ELIGIBILITY	CN	8380982	444936	1274527	1626246	1633196	1793276	1244662	364139
	MN	12627	452	528	1090	1507	2559	3066	3425
	TOTAL	8393609	445388	1275055	1627336	1634703	1795835	1247728	367564
3B. AVERAGE PERIOD OF ELIGIBILITY	CN	0.78	0.51	0.82	0.83	0.81	0.82	0.80	0.64
	MN	0.42	0.30	0.42	0.45	0.45	0.43	0.45	0.38
	TOTAL	0.78	0.51	0.82	0.82	0.81	0.82	0.80	0.64
4. EXPECTED NUMBER OF SCREENINGS PER ELIGIBLE	CN	XXXXXXXX	2.04	1.64	0.83	0.20	0.32	0.20	0.32
	MN	XXXXXXXX	1.20	0.84	0.45	0.11	0.17	0.11	0.19
	TOTAL	XXXXXXXX	2.04	1.64	0.82	0.20	0.32	0.20	0.32
5. EXPECTED NUMBER OF SCREENINGS	CN	626998	147508	211771	135487	33377	58016	25771	15068
	MN	636	146	86	89	30	83	62	140
	TOTAL	627634	147654	211857	135576	33407	58099	25833	15208
6. TOTAL SCREENS RECEIVED	CN	656978	235044	221898	94755	36416	42593	23636	2636
	MN	347	181	38	23	16	37	26	26
	TOTAL	657325	235225	221936	94778	36432	42630	23662	2662
7. SCREENING RATIO	CN	1.04	1.59	1.04	0.69	1.09	0.73	0.91	0.17
	MN	0.54	1.23	0.44	0.25	0.53	0.44	0.41	0.18
	TOTAL	1.04	1.59	1.04	0.69	1.09	0.73	0.91	0.17

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		TOTAL	<1	1-2	3-5	6-9	10-14	15-18	19-20
8. TOTAL ELIGIBLES WHO SHOULD RECEIVE AT LEAST ONE INITIAL OR PERIODIC SCREENING	CN	469156	72308	129129	135487	33377	58016	25771	15068
	MN	612	122	86	89	30	83	62	140
	TOTAL	469768	72430	129215	135576	33407	58099	25833	15208
9. TOTAL ELIGIBILES RECEIVING AT LEAST ONE INITIAL OR PERIODIC SCREENING	CN	347690	66264	96582	85690	34942	40011	21751	2450
	MN	263	118	24	23	15	33	26	24
	TOTAL	347953	66382	96606	85713	34957	40044	21777	2474
10. PARTICIPATION RATIO	CN	0.74	0.91	0.74	0.63	1.04	0.68	0.84	0.16
	MN	0.42	0.96	0.27	0.25	0.50	0.39	0.41	0.17
	TOTAL	0.74	0.91	0.74	0.63	1.04	0.68	0.84	0.16
11. TOTAL ELIGIBLES REFERRED FOR CORRECTIVE TREATMENT	CN	4447	1218	1203	943	436	417	205	25
	MN	1	0	0	1	0	0	0	0
	TOTAL	4448	1218	1203	944	436	417	205	25
12A. TOTAL ELIGIBLES RECEIVING ANY DENTAL SERVICES	CN	332298	4136	44298	62029	79674	82097	48558	11506
	MN	398	9	29	26	47	76	93	118
	TOTAL	332696	4145	44327	62055	79721	82173	48651	11624
12B. TOTAL ELIGIBILES RECEIVING PREVENTIVE DENTAL SERVICES	CN	292970	3979	43154	56012	73060	72754	37238	6773
	MN	257	1	7	18	43	58	69	61
	TOTAL	293227	3980	43161	56030	73103	72812	37307	6834
12C. TOTAL ELIGIBLES RECEIVING DENTAL TREATMENT SERVICES	CN	160557	33	2290	26972	45279	45653	32156	8174
	MN	236	2	6	14	33	40	55	86
	TOTAL	160793	35	2296	26986	45312	45693	32211	8260
13. TOTAL ELIGIBLES ENROLLED IN MANAGED CARE	CN	779349	54054	119527	150093	151204	160939	108730	34802
	MN	1389	46	61	118	164	278	326	396
	TOTAL	780738	54100	119588	150211	151368	161217	109056	35198
14. TOTAL NUMBER OF SCREENING BLOOD LEAD TESTS	CN	58690	275	43656	13508	1007	189	48	7
	MN	8	0	4	2	1	0	0	1
	TOTAL	58698	275	43660	13510	1008	189	48	8