

May 2022

MPM Provider Quality Newsletter

To access the materials referenced in this newsletter, go to:
www.medpointmanagement.com/provider-resources

- > Click on "Quality Management Information" and then "2022 Quality Newsletters."
- > All materials are listed in one PDF document.
- > Please also note that MedPOINT's Reference Guides are available under "HEDIS Documents."

QM Bulletin Board – Question of the Month

MedPOINT Management (MPM) wants to hear from you! Please visit our discussion board at <https://qualitypoint.medpointmanagement.com> and give your feedback to this month's question:

What are some of your best practices for managing patient access and flow as a provider and/or clinic?

If you have other questions and would like input from other providers/health centers in MedPOINT managed groups, you can post your question using the same link above. Check out the other resources available to you while you're there. We look forward to some great discussions!

Cozeva Corner

Did you know Cozeva displays missing A1c results by patient?

Diabetes Care | HbA1c Poor Control ⓘ
2022 · ALL · All · Continuous Enrollment Logic On

Denom. Eligibility	Last Test	Test Result	Last Visit
01/18/2022	05/04/2022		10/02/2020
04/16/2021	04/27/2022	12.0	08/06/2020
06/14/2021	04/26/2022	10.1	

As you can see from the image above, Cozeva provides patient-level detail for A1c tests and results at the Provider Level. From the **Provider Level Registry**, select AbA1c Poor Control. The system will navigate you to the Patient Detail screen for this measure. This screen provides the **Last Test** date and the **Test Result** for each patient.

Sort your results by the Last Test date to bring 2022 Dates of Service to the top. You can now see which test results have not been received and which member results are non-compliant. If the test date is older than 2 months and results are not present, it's time to track down the lab report and upload the record into Cozeva's Supplemental Data portal.

Not sure how to access this? Ask your HEDIS/STARs Quality Specialist for assistance by calling (818) 702-0100 ext. 1353 or email us at qualitymeasures@medpointmanagement.com.

Children's Oral Health

Dental caries is the most common chronic disease in children in the U.S. According to the 2011-2016 Nation Health and Nutrition Examination Survey, approximately 23% of children aged 2-5 years had dental caries in their primary teeth. Providers can play an important part in preventing dental caries in children age 5 and younger.

The **United States Preventative Services Task Force** recommends primary care clinicians:

1. Apply fluoride varnish to the teeth of all children as soon as the first tooth comes in.
2. Prescribe oral fluoride supplementation for children 6 months and older whose water supply doesn't contain enough fluoride.

You can view the full list of recommendations at www.uspreventiveservicestaskforce.org. Please continue recommending visits to a dentist and talking about good oral health with your youngest members and their caregivers.

Behavioral Health Screening Tools for Your Patients

Mental illness is an important health issue, and nearly one in five U.S. adults experience it annually. Mental Health plays a key role in your patients' ability to maintain good physical health. Depression and anxiety may affect their ability to participate in health promoting behaviors. Stigma and discrimination can make it hard to access care.

Screening tools can be a way to identify symptoms and used as a resource to talk with members about treatment options. Screening tools that can be utilized by PCPs include:

- PHQ-9 depression screening
- GAD-7 anxiety screening
- Alcohol and Drug Screening, Assessment, Brief Interventions and Referral to Treatment (SABIRT)
- Adverse Childhood Experiences (ACEs)

You can find free access to these forms at www.lacare.org/providers/provider-resources/tools-toolkits/behavioral-health-services/resources.

May is Hepatitis Awareness Month

The month of May is designated as Hepatitis Awareness Month in the United States. During this month, the CDC and their public health partners work to shed light on the impact of these hidden epidemics by raising awareness of viral hepatitis while encouraging testing and vaccination. Raising awareness and promoting understanding of viral hepatitis transmission and risk factors can lead to decreased social stigma against viral hepatitis. 66% of people with hepatitis B are unaware of their infection and about 40% of people living with hepatitis

C do not know they are infected. Testing all adult and pregnant patients for hepatitis C can identify future care and treatment needs. PCPs and/or offices that test for hepatitis are encouraged to register your testing services online and make sure that your services are public. More information on this can be found at www.cdc.gov/hepatitis/awareness/HepatitisAwarenessMonth.htm.

Resources

- **HEDIS®/STARS Reference Guide 2022** – MedPOINT's 2022 HEDIS®/STARS Reference Guide provides requirement, specification, document, coding, and exclusion measure set information and is available on the MPM website.
- **COVID-10 Vaccination Incentive Program Extension** – The attached Provider Update from Health Net discusses that the COVID Vaccine Incentive has been extended to August 31, 2022 and provides information on how members can qualify.
- **Services for Members with Eating Disorders APL 22-003** – In the attached Just the Fax from Molina, providers can find clarification and guidance regarding their responsibility to coordinate and provide medically necessary services for members who are diagnosed with feeding and eating disorders and are currently receiving Specialty Mental Health Services from a county Mental Health Plan (MHP).
- **CHCS Health Literacy Fact Sheets** – Found on the MPM website, these sheets from the Center for Health Care Strategies, Inc. detail 6 different facts that promote member health literacy.
- **Molina Building Culturally Competent Healthcare Training Attestation Form** – The attached Just the Fax from Molina notifies providers of topics and resources on the Molina website to help build a culturally competent workforce.
- **2022 Member Grievance and Appeals Attestation Requirement** – The attached notice from Anthem details the new requirement that providers annually acknowledge that member grievance and appeals forms, a description of grievance procedures, and assistance in filing grievances are readily available at each contracted provider location.

Resources (continued)

- **Addition of Blood Pressure Monitors and Blood Pressure Cuffs to Medi-Cal Rx** - This DHCS notice, found on the MPM website, details the new coverage of home blood pressure monitor cuffs as a covered benefit under Medi-Cal RX as a pharmacy-billed item.
- **Health Education, Cultural & Linguistic Services (HECLS) Material Portal** - This step-by-step guide, found on the MPM website, provides instructions on how to order HECLS Material from the L.A. Care website.
- **CPT® Appendix T:** This attached American Medical Association guide summarizes the 36 CMS-approved CPT® codes that may be used for reporting audio-only services when appended with Modifier 93.
- **How to Help Keep Your Child or Teen Healthy** - The attached L.A. Care guide provides health service information for children and can be shared with your patients as a resource.
- **Give Your Baby the Best Start** - The attached L.A. Care brochure can be provided as part of patient education on various health information topics for infants.
- **VIIP + P4P Medi-Cal Program Description** - Please see L.A. Care's VIIP + P4P 2022 program description, located on the MPM website, for a full description of goals, action plans, data, etc. for this year's program.
- **Creating a Positive Patient Experience** - Located on the MPM website, this L.A. Care flyer from provides a full training schedule for a customer service/patient experience webinar training program for providers, managers, and staff.



Need assistance? (818) 702-0100, ext 1353
qualitymeasures@medpointmanagement.com

PROVIDERUpdate



NEWS & ANNOUNCEMENTS | APRIL 29, 2022 | UPDATE 22-349 | 2 PAGES

COVID-19 Vaccination Incentive Program Extended to August 31, 2022

Help Medi-Cal members get vaccinated and qualify for a \$50 Walmart® gift card

You can inspire your unvaccinated Medi-Cal patients to get their first dose of a COVID-19 vaccine. Share the information below about how to qualify for the gift card and the website to claim the reward during an office visit.

Along with extending the program, the age to qualify for a gift card has been lowered from age 12 to age 5.

Here's how they can qualify for a gift card

- Health Net Medi-Cal member.
- Age 5 or older.
- Get their first COVID-19 vaccine any time from November 22, 2021, through August 31, 2022.
- Claim gift cards by August 31, 2022.
- Be among the first 10,000 to submit their information on the rewards website.
- Have a valid email address to receive the e-gift card. Upon request, a physical gift card can be mailed to the member instead of an electronic copy.

Visit the rewards website

If the member qualifies, they can go to the myhealthpays® website at <https://wellcarerewards.inspireandperform.com>.

At the website, they will need to enter personal details, such as their Medicaid identification number, last name shown on their insurance card, date of the first shot, vaccine maker, and other information.

Final step is to confirm the gift card

The member will receive an email to confirm the information that was shared on the website. The e-gift card arrives in their inbox in five to seven days. The gift card can be used online or in a Walmart store and will not expire.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- IFP (Ambetter from Health Net)
 - HMO/HSP
 - EPO
 - PPO
- Employer Group
 - HMO/POS/HSP
 - EPO
 - PPO
- Medicare Advantage (HMO/PPO) (Wellcare By Health Net)
- Cal MediConnect (Los Angeles/San Diego)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

provider_services@healthnet.com
800-675-6110

PROVIDER PORTAL

provider.healthnetcalifornia.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com

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Go to the Provider Library for more information

As a reminder, provider update 22-112, *Help Medi-Cal Members Get a COVID-19 Vaccine and a Gift Card*, was distributed on February 3, 2022. It included a table with information about where to find the materials listed below that have been posted in the Provider Library at **providerlibrary.healthnetcalifornia.com**:

- 22-039m, HEDIS® Monthly Care Gap Report Adds Member COVID-19 Vaccine Records.
- COVID-19 Vaccination Incentive for Medi-Cal Members and related FAQs.
- COVID-19 Member Flyer: Get a Gift Card When You Share Your Vaccination Status.

Additional information

If you have questions about the information in this update, contact the Health Net Medi-Cal Provider Services Center within 60 days at 800-675-6110.

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:**COUNTIES:**

- ☒ Imperial
- ☒ Riverside/San Bernardino
- ☒ Los Angeles
- ☐ Orange
- ☒ Sacramento
- ☒ San Diego

LINES OF BUSINESS:

- ☒ Molina Medi-Cal Managed Care
- ☐ Molina Medicare Options Plus
- ☐ Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- ☐ Molina Marketplace (Covered CA)

PROVIDER TYPES:

- ☒ **Medical Group/ IPA/MSO**
 - Primary Care**
 - ☒ IPA/MSO
 - ☒ Directs
- ☒ **Specialists**
 - ☒ Directs
 - ☒ IPA
- ☒ **Hospitals**
 - Ancillary**
 - ☒ CBAS
 - ☒ SNF/LTC
 - ☒ DME
 - ☒ Home Health
 - ☒ Other

FOR QUESTIONS CALL PROVIDER SERVICES:

(888) 562-5442, Extension:

Los Angeles/Orange Counties

X123017

Riverside/San Bernardino Counties

X120613

Sacramento County

X125682

San Diego County

X121735

Imperial County

X125682

Services for Members with Eating Disorders APL 22-003

This is an advisory notification to Molina Healthcare of California (MHC) network providers to provide clarification and guidance regarding their responsibility to coordinate and provide medically necessary services for members who are diagnosed with feeding and eating disorders and are currently receiving Specialty Mental Health Services (SMHS) from a county Mental Health Plan (MHP).

This notification is based on an All Plan Letter (APL) 22-003, which can be found in full on the Department of Health Care Services (DHCS) website at:

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL-22-003.pdf>

BACKGROUND

Eating disorders are complex conditions involving both physical and psychological components. As such, effective treatment of eating disorders involves a combination of physical and mental health interventions, often provided through an integrated therapeutic modality, program, or setting.

Coordinating appropriate and effective services and treatment for members with eating disorders involves unique complexities and is a shared responsibility between MHPs and MHC. MHC is required to provide and cover all medically necessary physical health and non-specialty mental health services, excluding those services that are carved out of MHC's contract with DHCS. MHC is contractually responsible for providing Comprehensive Medical Case Management Services, including coordination of care, to ensure the provision of all medically necessary services, whether those services are delivered within or outside of Molina's provider network.

These services are provided through either basic case, complex case, or Enhanced Care Management activities based on the medical needs of the member. Additionally, MHC is responsible for providing or arranging for medically necessary non-specialty mental health services (NSMHS) provided to members. MHPs are required to provide and cover all medically necessary SMHS in accordance with their contracts with DHCS.

The Early and Periodic Screening, Diagnostic, and Treatment Medicaid mandate entitles beneficiaries under the age of 21 to any medically necessary services coverable under Medicaid to correct or ameliorate identified conditions. Eating disorders are common among adolescents and young adults, and MHC and MHPs are obligated to provide services necessary to correct or ameliorate eating disorders for members under age 21, whether or not such service is generally

If you are not contracted with Molina and wish to opt out of the Just the Fax, email:

mhcprovidedcomm@molinahealthcare.com.

Please include provider name and fax number and you will be removed within 30 days.

only available to adults over age 21. Therefore, if it is medically necessary for a youth under age 21 to receive residential treatment or day treatment intensive services to treat the eating disorder, MHC and MHP need to provide or arrange for such services.

POLICY:

MHC and MHPs share a joint responsibility to provide medically necessary services to Medi-Cal beneficiaries with eating disorders. Some treatment for eating disorders (both inpatient and outpatient SMHS) is covered by MHPs. Some treatment for eating disorders is also covered by MHC. Since eating disorders are complex conditions involving both physical and psychological symptoms and complications, the treatment typically involves blended physical health and mental health interventions, which MHC and MHPs are jointly responsible to provide.

As stated previously, MHC is responsible for the physical health components of eating disorder treatment and NSMHS, and MHPs are responsible for the SMHS components of eating disorder treatment, specifically:

- MHPs must provide, or arrange and pay for, medically necessary psychiatric inpatient hospitalization and outpatient SMHS.
- MHC must provide inpatient hospitalization for members with physical health conditions, including those who require hospitalization due to physical complications of an eating disorder and who do not meet criteria for psychiatric hospitalization. MHC must also provide or arrange for NSMHS for members requiring these services.
- MHC must cover and pay for emergency room professional services as described in Section 53855 of Title 22 of the California Code of Regulations. This includes all professional physical, mental, and substance use treatment services, including screening examinations necessary to determine the presence or absence of an emergency medical condition and, if an emergency medical condition exists, for all services that are medically necessary to stabilize the member. Emergency services include professional services and facility charges claimed by emergency departments.
- For partial hospitalization and residential eating disorder programs, MHPs are responsible for the medically necessary SMHS components, and MHC is responsible for the medically necessary physical health components.

As stated above, MHC is contractually responsible for providing Comprehensive Medical Case Management Services, including coordination of care, to ensure the provision of all medically necessary services, whether those services are delivered within or outside of Molina's provider network. These services are provided through either basic case, complex case or Enhanced Care Management activities based on the medical needs of the member. As a result, MHC must coordinate all medically necessary care for members, including locating, arranging, and following up to ensure services were rendered for partial hospitalization and residential eating disorder programs, when such treatment is medically necessary for a member.

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (888) 562-5442. Please refer to the extensions on page one.

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X120613

Sacramento County

X125682

San Diego County

X121735

Imperial County

X125682

Molina Building Culturally Competent Healthcare Training Attestation Form

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding the Molina Building Culturally Competent Healthcare Training Series.

Please see below the topics and resources on the Molina website which will help you build a culturally competent workforce:

<https://www.molinahealthcare.com/providers/ca/medicaid/resource/cme.aspx>.

There are 5 short training modules each about 4-9 minutes in length.

1. **Introduction to Cultural Competency:**

<https://www.youtube.com/watch?app=desktop&v=O8gEIWap0Y4>

2. **Health Disparities:**

<https://www.youtube.com/watch?app=desktop&v=iHidsPWAPww>

3. **Specific Population Focus – Seniors and Persons with Disabilities:**

<https://www.youtube.com/watch?app=desktop&v=QHhKyuSg3hU>

4. **Specific Population Focus – LGBTQ and Immigrants / Refugees:**

<https://www.youtube.com/watch?app=desktop&v=2ensw9UGz3A>

5. **Becoming Culturally Competent:**

https://www.youtube.com/watch?app=desktop&v=1_0LZDzMldA

All providers are also encouraged to fill out the **Provider Attestation Form** after completing the training sessions. By completing this attestation form, you are helping to provide quality services through a culturally competent workforce.

Please see the link below to access the **Provider Attestation Form:**

https://docs.google.com/forms/d/e/1FAIpQLSeZGPuceQw-RydQDJ3xLcfau5rIslOAXjrkhPJ_CLeeKzGImA/viewform

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (888) 562-5442. Please refer to the extensions to the left.

If you are not contracted with Molina and wish to opt out of the Just the Fax, email:

mhcprovidedcomm@molinahealthcare.com.

Please include provider name and fax number and you will be removed within 30 days.

Action required: 2022 member grievance and appeals attestation requirement

Published: May 18, 2022 - **Administrative**

Anthem Blue Cross (Anthem) participating providers are **required** to acknowledge (annually) that member grievance and appeals forms, a description of grievance procedures, and assistance in filing grievances are readily available at each contracted provider location.

To complete this year's required attestation, **due by June 17, 2022**, please follow the steps below. The process takes approximately five minutes.

1. **Select** the [survey questionnaire and attestation](#).
2. **Answer** the questions and **provide the information**
3. **Complete** the attestation and **submit**.

All pertinent information related to this requirement, including access to forms (in multiple languages) and procedures, is located at [anthem.com/ca/forms](https://www.anthem.com/ca/forms).

1. Go to *View by Topic* and select the drop-down menu.
2. Select **Grievance & Appeals**.
3. Select the desired resource link.

We appreciate your cooperation and support. For additional information regarding member grievance and appeals requirements, please see below.

The Department of Managed Health Care's (DMHC) routine medical survey includes evaluation of a health plan's compliance with California Health and Safety Code section 1368(a)(2); 28 CCR 1300.68(b)(6) and (7). These regulations require health plans to ensure that grievance forms, a description of grievance procedures, and assistance in filing grievances are readily available at each contracting provider's office, contracting facility, or plan facility.

Please review and distribute the Anthem grievance form to all your participating offices. It is important to implement processes to provide grievance forms and assistance to Anthem members promptly upon request.

Your agreement with Anthem requires you to comply with all applicable laws and regulations and to cooperate with Anthem's administration of its grievance program which includes annually attesting that member grievance and appeals forms, a description of grievance procedures, and assistance in filing grievances are readily available at each contracting provider's office, contracting facility, or plan facility.

Information can be accessed on the process of submitting member grievances and appeals, grievance forms in multiple languages, and definitions and appeal rights at anthem.com/ca/forms and within the *Anthem Blue Cross Provider Manual*.

CABC-COMM-000360-22

URL: <https://providernews.anthem.com/california/article/action-required-2022-member-grievance-and-appeals-attestation-requirement>

Featured In:

Action required: 2022 member grievance and appeals attestation requirement

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CPT® Appendix T: CPT Codes That May Be Used For Synchronous Real-Time Interactive Audio-Only Telemedicine Services

Most recent changes to the CPT® Appendix T

- Addition of Appendix T accepted by the CPT Editorial Panel at the February 2022 meeting.

It is important to note that further CPT Editorial Panel or Executive Committee actions may affect these codes and/or descriptors. For this reason, code numbers and/or descriptor language in the CPT code set may differ at the time of publication. In addition, further Panel actions may result in gaps in code number sequencing.

The following Appendix T was accepted at the February 2022 CPT Editorial Panel meeting for the 2022 CPT production cycle.

Appendix T Guidelines	Released to AMA website	Effective	Publication
<p>► Appendix T ◀ ► CPT Codes That May Be Used For Synchronous Real-Time Interactive Audio-Only Telemedicine Services ◀</p> <p>► This listing is a summary of CPT codes that may be used for reporting audio-only services when appended with Modifier 93. Procedures on this list involve electronic communication using interactive telecommunications equipment that includes, at a minimum, audio. The codes listed below are identified with the ◀ symbol.</p> <p>90785 97804 90791 99354 90792 99355 90832 99356 90833 99357 90834 99406 90836 99407 90837 99408 90838 99409 90839 99497 90840 99498 ◀ 90845 90846 90847 92507 92508 92521 92522 92523 92524 96040 96110 96116 96160 96161 97802 97803</p>	April 1, 2022	April 1, 2022	CPT® 2023

Regular health visits can help your child to stay healthy.



- ✓ If your child is a new member, take him/her to see the health care provider for their first health visit and **Staying Healthy Assessment** within 3 months of enrollment and every year.
- ✓ Your health care provider can give you advice on what to expect at different stages of your child's growth.

Well-Child and Teen Health Services (11-19 Years)

Health Services	When to go to the health care provider
Well-Care Visits Medical and Family Health History Physical Exam and Blood Pressure Eyesight and Hearing Growth, Development and Behavior, with family, school and groups Physical Activity Healthy Eating Body Mass Index (measure for a healthy weight)	Each year or as the health care provider recommends
Anemia Test Low iron can cause tiredness and headaches	The health care provider may recommend testing if at risk
Dental/Oral Checkup Looks for tooth decay and gum disease	Every 6 Months
Diabetes Screening HbA1c test	The health care provider may recommend screening if at risk
Sexually Transmitted Diseases (STDs) Chlamydia, Gonorrhea, Syphilis Human Immunodeficiency Virus (HIV) Human Papillomavirus (HPV)	Every year starting at age 15. The health care provider may recommend screening if at risk.
Tuberculosis (TB) Test Tuberculosis can cause lung and brain damage	The health care provider may recommend screening if at risk
Cholesterol Test High cholesterol can damage the heart	The health care provider may recommend testing if at risk
Check for Skin Cancer Risk	The health care provider may recommend screening if at risk
Check for Depression and Anxiety	Every year starting at age 11
Check for Alcohol, Drug Use, Tobacco, Cannabis, Vaping, Pills and Secondhand Smoke	Every year starting at age 11

Your child may need these health services more or less often if your health care provider recommends

? Which health topics would you like to talk with the health care provider about?

- Traumatic and Stressful Life Events (Abuse, Neglect, Household Concerns)
- Asthma
- Body Mass Index (BMI)
- Breast Feeding
- Dental Health
- Diabetes
- Eye Health
- Exercise, Physical Activity, and Sports
- Family Planning, Birth Control
- Healthy Foods and Eating
- High Blood Pressure
- Human Papillomavirus (HPV) Vaccine
- Mental Health Concerns
- Parenting
- Pregnancy Health
- Safety
- Screen Time/Video Games
- Secondhand Smoke
- STDs and HIV
- Quitting Smoking
- Weight Concerns

Adverse Childhood Experiences and related stressful life events: Many families have stressful life events. This can affect your child's health and well-being. Please talk with your health care provider about these stressful life events.



	L.A. Care Covered™ 1.855.270.2327 (TTY 711) Medi-Cal 1.888.839.9909 (TTY 711)	1.800.605.2556 (TTY 1.800.735.2929)	1.888.285.7801 (TTY 1.888.757.6034)
Member Services			
Nurse Advice Line 24/7 for health questions	1.800.249.3619 (TTY 711)	1.800.609.4166 (TTY 1.800.735.2929)	1.800.224.0336 (TTY 1.800.368.4424)
Website	lacare.org	blueshieldca.com/promise	anthem.com/ca

My Health Care Provider's Name: _____
 My Health Care Provider's Phone Number: _____
 Questions I have for my Health Care Provider: _____

My Specialist's Name: _____
 My Specialist's Phone Number: _____
 Questions I have for my Specialist: _____

To order additional copies for health care providers, visit: lacare.org/providers/provider-resources/tools-toolkits/health-education-tools



Sources for information within these Preventive Health Guidelines: The American Academy of Pediatrics, American Academy of Pediatric Dentistry, Centers for Disease Control and Prevention, U.S. Preventive Services Task Force, California Department of Public Health, and Los Angeles County Department of Public Health.

LAD221 07/20

How to Help Keep Your Child or Teen Healthy

Health Services for Children and Teens



Use this guide to help you:



Learn what health services your child can get from the health care provider



Find out which services are right for your child



Keep track of the services your child gets



Developed by L.A. Care Health Plan working with Blue Shield of California Promise Health Plan and Anthem Blue Cross. Together, we provide Medi-Cal Managed Care Services in Los Angeles County.



Keep Your Child or Teen Healthy!

If your child is a new member, take him/her to see the health care provider for their first visit and **Staying Healthy Assessment** within 3 months of enrollment and every year. These services are at no cost to you.

- ✓ Keeping your child healthy starts with getting the right health services at the right time.
- ✓ These services look for problems early when they may be easier to treat.
- ✓ Take your child to see the health care provider each year for well-care visits.

Well-Baby and Child Health Services (0-10 Years)

Take your child for each visit to get the right health services at the right time.

Health Services	When to go to the health care provider
Well-Care Visits Medical and Family Health History Physical Exam and Blood Pressure Eyesight and Hearing Growth, Development and Behavior, with family and groups Physical Activity Healthy Eating Body Mass Index (BMI) (measure for a healthy weight)	<input type="checkbox"/> [MM/DD/YY] 2-3 days after Birth <input type="checkbox"/> [MM/DD/YY] 1 Month <input type="checkbox"/> [MM/DD/YY] 2 Months <input type="checkbox"/> [MM/DD/YY] 4 Months <input type="checkbox"/> [MM/DD/YY] 6 Months <input type="checkbox"/> [MM/DD/YY] 9 Months <input type="checkbox"/> [MM/DD/YY] 12 Months (1 year) <input type="checkbox"/> [MM/DD/YY] 15 Months <input type="checkbox"/> [MM/DD/YY] 18 Months <input type="checkbox"/> [MM/DD/YY] 24 Months (2 years) <input type="checkbox"/> [MM/DD/YY] 30 Months <input type="checkbox"/> [MM/DD/YY] Each year thereafter
Autism Screening Tests for communication problems	<input type="checkbox"/> [MM/DD/YY] 18 Months <input type="checkbox"/> [MM/DD/YY] 24 Months
Anemia Test Low iron can cause tiredness and headaches	<input type="checkbox"/> [MM/DD/YY] 12 Months
Oral Health Checks for oral and dental health	Take your baby to the dentist when the first tooth shows and no later than 12 months. Take your child to the dentist every 6 months. California law requires your child to have a dental checkup by May 31 st of his or her first school year.
Fluoride Varnish Brushed on teeth to prevent tooth decay	At the health care provider or dentist office, fluoride varnish may be used as soon as teeth are present. Brushed on teeth 4 times a year until age 5.
Lead Screening Lead poisoning can cause brain damage and learning problems	Screen at 12 months and 24 months. If your child has not been screened, then your child should be screened once before the age of 6.
Tuberculosis (TB) Test Tuberculosis can cause lung and brain damage	The health care provider may recommend screening if at risk
Cholesterol Test High cholesterol can damage the heart	The health care provider may recommend screening if at risk
Your child may need these health services more or less often if your health care provider recommends	



Get Your Child or Teen the Right Shots at the Right Time

- ✓ Vaccines (shots) help keep children and teens healthy by protecting them from serious health problems.
- ✓ Shots are quick and can prevent years of illness.

These Shots	Help Prevent	Number of Shots	Age Birth	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	19-23 Months	2-3 Years	4-6 Years	7-10 Years	11-12 Years	13-15 Years	16-18 Years
★ HepB Hepatitis B	Liver Disease, Cancer	3	<input type="checkbox"/> HepB	<input type="checkbox"/> HepB					<input type="checkbox"/> HepB									
RV Rotavirus	Severe Diarrhea, Dehydration	2 or 3			<input type="checkbox"/> RV	<input type="checkbox"/> RV	<input type="checkbox"/> RV											
★ DTaP/Tdap Diphtheria/Tetanus/Pertussis	Breathing Problems, Muscle Spasms, Whooping Cough	5 DTaP 1 Tdap			<input type="checkbox"/> DTaP	<input type="checkbox"/> DTaP	<input type="checkbox"/> DTaP				<input type="checkbox"/> DTaP			<input type="checkbox"/> DTaP			<input type="checkbox"/> Tdap	
Hib Haemophilus Influenzae	Meningitis (brain infection), Pneumonia, Blood Infection	3 or 4			<input type="checkbox"/> Hib	<input type="checkbox"/> Hib	<input type="checkbox"/> Hib		<input type="checkbox"/> Hib									
PCV Pneumococcal	Pneumonia, Meningitis	4			<input type="checkbox"/> PCV	<input type="checkbox"/> PCV	<input type="checkbox"/> PCV		<input type="checkbox"/> PCV									
★ IPV Inactivated Polio Vaccine	Muscle Paralysis, Disabilities, Deformities	4			<input type="checkbox"/> IPV	<input type="checkbox"/> IPV			<input type="checkbox"/> IPV					<input type="checkbox"/> IPV				
Flu Influenza	Pneumonia, Bronchitis (lung inflammation), Ear and Sinus Infections	Each Year						Get your child the flu shot each year										
★ MMR Measles, Mumps, Rubella	Pneumonia, Deafness, Brain Damage	2							<input type="checkbox"/> MMR					<input type="checkbox"/> MMR				
★ VAR Varicella (chickenpox)	Blisters, Skin Infections, Nerve Damage, Vision Loss (eyesight)	2							<input type="checkbox"/> VAR					<input type="checkbox"/> VAR				
HepA Hepatitis A	Fever, Diarrhea, Tiredness	2							<input type="checkbox"/> HEP A		<input type="checkbox"/> HEP A							
HPV Human Papillomavirus	Cervical Cancer, Genital Warts	2 or 3															<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> HPV	
MCV4 Meningococcal (Meningitis)	Meningitis, Brain Damage, Hearing Loss, Learning Disabilities	2															<input type="checkbox"/> MCV4	<input type="checkbox"/> MCV4
MenB Meningococcal B (Meningitis)	Meningitis, Brain Damage, Hearing Loss, Learning Disabilities	2 or 3																<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> MenB

Stay up to date with your child's vaccines. The colored boxes above show the age range when shots are recommended. Your child's health care provider may suggest different times than those listed above.

★ **Shots for School** California requires all children to have these shots before attending school grades K-12. Contact your health care provider with questions.



Do You Know How to Place a Car Seat?

Rear-Facing Car Seat - Birth to 2 years

Buckle children in a rear-facing car seat until age 2 or when they reach the upper weight or height limit of the seat.

Forward-Facing Car Seat - 2 to 5 years

When children outgrow their rear-facing seat, they should be buckled in a forward-facing car seat until at least age 5 or when they reach the upper weight or height limit of that seat.

What Are Vaccines (Shots)?

Vaccines are shots that help keep your baby from getting sick. Most vaccines are given as shots, but some are given by mouth. They work by helping the body fight illness. In most cases, the shots will prevent your baby from getting serious diseases.

Your baby will need shots at different times to stay healthy.

If your baby does get sick, it will most likely be a much milder case.



L.A. Care's *Health In Motion*™ program offers helpful and fun health and wellness workshops in English and Spanish. For more information, call **1.855.856.6943** (TTY **711**).



L.A. Care members can also talk to a nurse 24 hours a day, 7 days a week, at no cost. The *Nurse Advice Line* phone number is **1.800.249.3619** (TTY **711**) and is listed on your health plan member ID card.

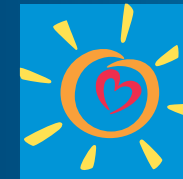


L.A. Care offers free health classes in the community on fitness, nutrition, and parenting at our *Family Resource Centers*. For a location near you, call **1.877.287.6290** (TTY **711**).



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GIVE YOUR BABY THE BEST START!

**The right shots
at the right time.**





It's important for your baby to get the right shots at the right time. Make sure you follow the well-baby visit schedule your doctor gives you and keep track of your baby's wonderful milestones along the way.










Do Shots Cause Autism?

Studies show that shots don't cause autism. Autism rates are the same in children who get shots as in those who don't.


If you think there is a problem with the way your baby plays, learns, speaks, or acts, talk with your baby's doctor.

Developmental Milestones From Birth to 24 Months


Developmental milestones are things most babies can do by a certain age. Track and check off your baby's milestones from birth to 24 months. Talk with your doctor about your baby's development.

 Birth	 1 Month	 2 Months	 4 Months	 6 Months	 9 Months	 12 Months	 15 Months	 18 Months	 24 Months
Sleeps, eats and cries	More alert and responsive	Can hold head up	Can hold a toy and shake it	Begins to sit without support	Crawls	May take a few steps without holding on	Can drink from a cup	Walks alone	Kicks a ball

Recommended Vaccines From Birth to 24 Months

Birth	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	
HepB	HepB			HepB						
		RV	RV	RV						
		DTaP	DTaP	DTaP			DTaP			
		Hib	Hib	Hib	Developmental Milestone Check-in*	Hib		Developmental Milestone Check-in*		
		PCV	PCV	PCV		PCV				
		IPV	IPV		IPV					
					Flu Shot/Influenza (Yearly)*					
						MMR				
						Varicella				
						HepA ⁵				

Is your family growing?
To protect your new baby and yourself against whooping cough, get a Tdap vaccine in the third trimester of your pregnancy. Talk with your doctor for more details.

 Shaded boxes indicate the vaccine can be given during shown age range.
*Talk to your child's doctor about the milestones your child has reached and what to expect next.

Well-Baby Visits From Birth to 24 Months

Keep track of your Well-Baby Visits.

Birth	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months
Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit	Doctor Visit
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date	Date	Date	Date	Date	Date	Date	Date	Date	Date

* Two doses given at least four weeks apart are recommended for children ages 6 months through 8 years old who are getting an influenza vaccine for the first time and for some other children in this age group.
⁵ Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months old and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high risk, should be vaccinated against HepA.