



<<Date>>

<<Head of Household>>

<<Address>>

<<City>>, <<State>> <<ZIP>>

Member: <<Name>>

ID: <<ID>>

DOB: <<DOB>>

PCP: <<PCP>>

Telephone: <<Number>>

Dear Parent/Guardian of <<Name of Child>>:

<<Name of Child>> is <1/2/4/6/9/12/15/18/24/30> months old, and it may be time for a well-child checkup. Your child must see his or her primary care provider (PCP) within 90 days of joining the Plan. If your child is missing his or her shots or has not had a recent checkup, please call your child's PCP and make an appointment. There is no charge for these checkups.

Age	Well-Child Checkup and Immunization Schedule
3–5 days	Well-child checkup; newborn screening blood tests; and vaccination (Hepatitis B [HepB] shot if not done at birth)
1 month	Well-child checkup; newborn screening blood test if not already completed; vaccination (second Hep B)
2 months	Well-child checkup; vaccinations (Diphtheria, Tetanus and Pertussis [DTaP], HepB; Haemophilus influenzae type b [Hib], Inactivated Polio Virus [IPV], Pneumococcal conjugate, [PCV], Rotavirus [RV])
4 months	Well-child checkup; vaccinations (DTaP, Hib, IPV, PCV, RV)
6 months	Well-child checkup; vaccinations (DTaP, HepB, IPV, PCV, Hib & RV [depending on brand used previously], influenza)
9 months	Well-child checkup; lead screening
12 months	Well-child checkup; dental exam; lead test; vaccinations (Measles, Mumps, Rubella [MMR], Hib, Chickenpox [Varicella], PCV between 12 and 15 months, Hepatitis A [2 doses series] between 12 and 23 months, influenza)
15 months	Well-child checkup; vaccination (DTaP between 15 and 18 months)
18 months	Well-child checkup; dental exam
24 months	Well-child checkup; dental exam; lead test; vaccination (influenza yearly)
30 months	Well-child checkup; dental exam



Choices for a Healthy Life



If the PCP on your ID card does not match the name on this letter, contact Customer Service. Call 1-866-231-1821 (TTY/TDD: 1-877-247-6272). You can also call if you need help with making an appointment or arranging transportation. You can reach us Monday through Friday, 7am to 7pm Eastern.

[Plan Name] also has a Personal Health Advisor who can answer your health care questions. When you are not sure what kind of care your child needs, call 1-800-919-8807 (TTY/TDD: 1-800-955-8770). There is no charge for this. You can call any time, day or night.

For people with asthma:

If your child has asthma and has not seen his or her doctor in the last 3 months, call and make an appointment. This is very important.

For people with diabetes:

If your child has diabetes and has not seen his or her doctor in the last 3 months, call and make an appointment. This is very important.

National guidelines say that people with diabetes should receive the following:

- Blood sugar average—called a hemoglobin A1c (HbA1c). Should be checked at least once a year (it should be less than 7%).
- LDL-cholesterol—checked at least once a year (if greater than 100mg/dL, appropriate treatment is needed).
- Eye exam (dilated) by an eye doctor once a year.
- Microscopic urine test for protein once a year.
- Routine foot exams.
- Doctor visit every 3 months.

Sincerely,

[Plan Name]

Para solicitar este documento en español o para escuchar la traducción llame al Servicio al Cliente al 1-866-231-1821 (TTY/TDD: 1-844-247-6272).

