

## 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
<b>Well-Care Visits</b> 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
<b>Anemia Test</b> Low iron can cause tiredness and headaches	The health care provider may recommend testing if at risk
<b>Dental/Oral Checkup</b> Looks for tooth decay and gum disease	Every 6 Months
<b>Diabetes Screening</b> HbA1c test	The health care provider may recommend screening if at risk
<b>Sexually Transmitted Diseases (STDs)</b> 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.
<b>Tuberculosis (TB) Test</b> Tuberculosis can cause lung and brain damage	The health care provider may recommend screening if at risk
<b>Cholesterol Test</b> High cholesterol can damage the heart	The health care provider may recommend testing if at risk
<b>Check for Skin Cancer Risk</b>	The health care provider may recommend screening if at risk
<b>Check for Depression and Anxiety</b>	Every year starting at age 11
<b>Check for Alcohol, Drug Use, Tobacco, Cannabis, Vaping, Pills and Secondhand Smoke</b>	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.



#### Member Services

**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)

#### 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](http://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.

LA0221 07/20

## How to Help Keep Your Child or Teen Healthy

### Health Services for Children and Teens



L.A. Care  
HEALTH PLAN

For All of L.A.



### 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.

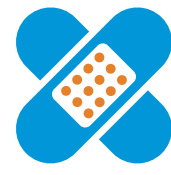
- ✓ Keeping your child healthy starts with getting the right health services at the right time.
- ✓ These services look for problems early when they may be easier to treat.
- ✓ Take your child to see the health care provider each year for well-care visits.

### 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
<b>Well-Care Visits</b> 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
<b>Autism Screening</b> Tests for communication problems	<input type="checkbox"/> [MM/DD/YY] 18 Months <input type="checkbox"/> [MM/DD/YY] 24 Months
<b>Anemia Test</b> Low iron can cause tiredness and headaches	<input type="checkbox"/> [MM/DD/YY] 12 Months
<b>Oral Health</b> 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 <sup>st</sup> of his or her first school year.
<b>Fluoride Varnish</b> 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.
<b>Lead Screening</b> 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.
<b>Tuberculosis (TB) Test</b> Tuberculosis can cause lung and brain damage	The health care provider may recommend screening if at risk
<b>Cholesterol Test</b> 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	Age Range																	
				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			
★ <b>HepB</b> Hepatitis B	Liver Disease, Cancer	3	<input type="checkbox"/> HepB	<input type="checkbox"/> HepB				<input type="checkbox"/> HepB													
<b>RV</b> Rotavirus	Severe Diarrhea, Dehydration	2 or 3			<input type="checkbox"/> RV	<input type="checkbox"/> RV	<input type="checkbox"/> RV														
★ <b>DTaP/Tdap</b> 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"/> DTaP	<input type="checkbox"/> Tdap			
<b>Hib</b> 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											
<b>PCV</b> Pneumococcal	Pneumonia, Meningitis	4			<input type="checkbox"/> PCV	<input type="checkbox"/> PCV	<input type="checkbox"/> PCV			<input type="checkbox"/> PCV											
★ <b>IPV</b> Inactivated Polio Vaccine	Muscle Paralysis, Disabilities, Deformities	4			<input type="checkbox"/> IPV	<input type="checkbox"/> IPV				<input type="checkbox"/> IPV							<input type="checkbox"/> IPV				
<b>Flu</b> Influenza	Pneumonia, Bronchitis (lung inflammation), Ear and Sinus Infections	Each Year								Get your child the flu shot each year											
★ <b>MMR</b> Measles, Mumps, Rubella	Pneumonia, Deafness, Brain Damage	2								<input type="checkbox"/> MMR							<input type="checkbox"/> MMR				
★ <b>VAR</b> Varicella (chickenpox)	Blisters, Skin Infections, Nerve Damage, Vision Loss (eyesight)	2								<input type="checkbox"/> VAR							<input type="checkbox"/> VAR				
<b>HepA</b> Hepatitis A	Fever, Diarrhea, Tiredness	2								<input type="checkbox"/> HEP A			<input type="checkbox"/> HEP A								
<b>HPV</b> Human Papillomavirus	Cervical Cancer, Genital Warts	2 or 3															<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> HPV				
<b>MCV4</b> Meningococcal (Meningitis)	Meningitis, Brain Damage, Hearing Loss, Learning Disabilities	2															<input type="checkbox"/> MCV4	<input type="checkbox"/> MCV4			
<b>MenB</b> 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.