ChildrenFirst Rewards Program

ChildrenFirst is a rewards program for parents whose children are members of Community Health Plan of Washington. They can earn a $20 online gift card after every child check-up if they:

- Keep up-to-date on all Well Child checkups.
- Keep up-to-date on all immunizations recommended by the CDC.

In order to receive their reward, members must have the doctor’s office (you) file a claim on their behalf. ChildrenFirst claim forms can be found at chpw.org/for-providers/documents-and-tools.

If you are not familiar with ChildrenFirst, please call us at 1-800-440-1561. We can guide you through the claims process.
Welcome to the world, (baby’s name)!

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**Child Check-ups**

- 5 YEARS
- 6 YEARS
- 7 YEARS
- 8 YEARS
- 9 YEARS
- 10 YEARS

**Teen Check-ups**

- 11 YEARS
- 12 YEARS
- 13 YEARS
- 14 YEARS
- 15 YEARS
- 16 YEARS
- 17 YEARS
- 18 YEARS

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**Key**

- Immunization
- Flu shot
- Well Child Visit

*Flu and HPV immunizations are optional and not required for rewards*
Birthday:__________________________

Weight:__________________________

Length:__________________________

Sex:__________________________

Doctor’s name:__________________________

Doctor’s phone:__________________________

Well Child Reward
Check-up Schedule

Infant Check-ups

- 2 weeks
- 1 month
- 2 months
- 4 months
- 6 months
- 9 months

Toddler Check-ups

- 12 months
- 15 months
- 18 months
- 24 months
- 30 months
- 3 years
- 4 years
Most babies need to have at least 8 checkups by their first 18 months.

- 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months

There is a section in this book for each visit.

**Bring it with you when you see the doctor.**

Information in this book is intended to be general guidance for children who are generally healthy. If your child has special health needs, make a plan with your doctor to get them the care they need.
1 Month Visit

The doctor will ask if your baby is starting to smile, lift their head during tummy time, or follow you with their eyes.

Your baby may have gotten their first shots when they were born. Check with your doctor to make sure they are up to date.

Baby’s weight: ______________________

Baby’s height: ______________________

Notes from this visit: ______________________

Before you leave…

Next appointment set for: ______________________

Don’t forget to claim your $20 online gift card reward from ChildrenFirst!

Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.
2 Months Visit

The doctor will ask if your baby is smiling, moving their arms and legs together, or getting fussy when they’re bored.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **Rotavirus** (1st of 3)
- **HepB** (2nd of 3)
- **IPV** (1st of 3)
- **PCV13** (1st of 4)
- **DTap** (1st of 4)
- **Hib** (1st of 3)

Before you leave…

- Baby’s weight: __________________________
- Baby’s height: __________________________
- Notes from this visit: ____________________

Next appointment set for: __________________ (date)

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4 Months Visit

The doctor will ask if your baby is babbling, reaching for things, or starting to roll.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **Rotavirus** (2nd of 3)
- **IPV** (2nd of 3)
- **PCV13** (2nd of 4)
- **DTap** (2nd of 4)
- **Hib** (2nd of 3)

**Before you leave…**

- Baby’s weight: ____________________________
- Baby’s height: ____________________________
- Notes from this visit: _____________________
  _______________________________________
  _______________________________________
  _______________________________________

Next appointment set for: ________________________ (date)

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6 Months Visit

The doctor will ask if your baby is trying to sit, looking around, or putting things in their mouth.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **Rotavirus** (3rd of 3)
- **HepB** (3rd of 3)
- **Flu** (1st of 2)
- **PCV13** (3rd of 4)
- **DTap** (3rd of 4)
- **Hib** (3rd of 3)

**Before you leave...**

Baby’s weight: ____________________________

Baby’s height: ____________________________

Notes from this visit: ______________________

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Next appointment set for: ____________________________ (date)

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Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.
9 Months Visit

The doctor will ask if your baby is babbling, reaching for things, or starting to crawl.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **Flu** (2nd of 2)

**Before you leave…**

Baby’s weight: ________________________________________

Baby’s height: ________________________________________

Notes from this visit: ________________________________________

______________________________________________________

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Next appointment set for: _____________________________

(date)

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Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.
**1 Year Visit**

The doctor will ask if your baby is starting to stand, trying to use objects, or copying your motions.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **MMR** *(1st of 1)*
- **VAR** *(1st of 1)*
- **HepA** *(1st of 2)*
- **PCV13** *(4th of 4)*
- **Hib** *(4th - if needed)*

**Before you leave…**

- Baby’s weight: ____________________________
- Baby’s height: ____________________________
- Notes from this visit: ____________________
  _________________________________________
  _________________________________________
  _________________________________________

Next appointment set for: ____________________ *(date)*

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Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.
15 Months Visit

The doctor will ask if your baby is starting to use objects correctly, respond to simple questions, or take their first steps.

The doctor will give your baby immunizations (shots) to protect them from diseases:

- **DTap** (4th of 4)
- **Flu** (1 each year)

**Before you leave…**

- Baby’s weight: ____________________________
- Baby’s height: ____________________________
- Notes from this visit: ____________________________

Next appointment set for: ____________________________

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Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.
18 Months Visit

The doctor will ask if your baby is using more words, trying to climb, or doing things for him or herself.

There are no specific immunizations (shots) scheduled for this visit. Check with your doctor to make sure your child is up to date.

Before you leave…

Baby’s weight: ________________________________

Baby’s height: ________________________________

Notes from this visit: ________________________________

________________________________________

________________________________________

________________________________________

Next appointment set for: ________________________________ (date)

Don’t forget to claim your $20 online gift card reward from ChildrenFirst!

Talk to your doctor’s office to get started. If they have any questions, show them the back cover of this booklet.