

How to Claim your CHPW ChildrenFirst™ Rewards

As a Community Health Plan of Washington (CHPW) Apple Health (Medicaid) member, you can receive free gift cards for prenatal (pregnancy), postpartum (after delivery), and well-child checkups through our ChildrenFirst™ Program.

- **Prenatal: Up to \$100 in gift cards**
- **Postpartum: A \$50 gift card**
- **Well-Child: A \$20 gift card per checkup of up to a total reward value of up to \$540**



For full details of prenatal, postpartum and Well-Child forms visit this URL: chpw.org/childrenfirst



How it works

Here's how members can get the gift cards:



1. See the doctor or health care provider

- ✓ Complete a well-child checkup, postpartum checkup, or eligible prenatal visit.



2. Fill out the online reward form

- ✓ Go to chpw.org/childrenfirst and select the reward program (Prenatal, Postpartum, or Well-Child). Make sure you have your or your child's CHPW Member ID handy. Fill out the information requested on the form.
- ✓ You will see an approval confirmation and we will send you an email right away if your submission is accepted. Remember, members can complete the form themselves. Clinic staff submission and signatures are no longer required.



3. Get your reward in the mail

- ✓ Your gift card will be sent to the mailing address entered on the online form. Expect the reward within 2-3 weeks.

Eligibility

To qualify for reward you must:

- Be an active CHPW member on the date you submit the reward request
- Be an active CHPW member on the date of the Prenatal, Postpartum, or Well-Child appointment

Questions?

Call CHPW Customer Service at 1-800-440-1561, Monday through Friday, 8 a.m. – 5 p.m.



Important tips for filling out online submission form



- On the first screen, the member’s ID, Name, and Date of Birth must match exactly what is on member’s CHPW ID card.
- The “Age Group” field refers to the age group found on the well-child visit schedule. There are 27 visits listed. These start at age 2 weeks and go up to member’s 18th birthday. You can file for a \$20 gift card every time your child gets a checkup on the schedule. The full schedule can be found here: www.chpw.org/wellchildrewards
- You must submit one online form for each visit. If you are submitting for more than one visit, be sure to fill out a new form for each visit.
- The Prenatal Reward Program offers up to 2 gift cards, for \$60 and \$40 respectively. Pregnant members can get the \$60 card after a checkup during their first trimester, or within 42 days of becoming a CHPW member. They can get the \$40 card for a second prenatal visit at any time after the first visit.
- The address you enter on the submission form will be the one we use to mail the rewards. Remember to notify us if your address changes.
- Members, clinic staff, and providers can all fill out the reward submission forms.

Information needed to complete online form

Prenatal Reward:

_____ Mother’s CHPW Member ID	_____ Date of Birth	_____ Phone Number
_____ Est. Delivery Date	<input type="checkbox"/> Twins <input type="checkbox"/> Triplets	_____ 1 st Prenatal Visit Date
		_____ 2 nd Prenatal Visit Date

Postpartum Reward:

_____ CHPW Member ID	_____ Date of Birth	_____ Phone Number
_____ Delivery Date	_____ Postpartum Visit Date	

Well-Child Reward:

_____ Appointment Date	_____ Child’s Member ID Number	_____ Date of Birth
_____ First Name	_____ Last Name	_____ Checkup Age Group
_____ Parent/Guardian First Name	_____ Parent/Guardian Last Name	_____ Phone Number

Other Information:

_____ Address	_____ City	_____ State/Zip
_____ Provider First Name	_____ Provider Last Name	_____ Clinic Name
Gift Card Type (choose one): <input type="checkbox"/> Amazon <input type="checkbox"/> Safeway <input type="checkbox"/> Target		