

## Recommended Periodicity for Pediatric Well Checks

# Comparison of Child Health and Disability Prevention (CHDP) Program with San Francisco Health Plan (SFHP) and Blue Cross of California State Sponsored Business (BCCSSB)



|                 | 0-15 Mos.           | 16-23 Mos. | 2 Yr. | 3 Yr. | 4 Yr. | 5 Yr. | 6 Yr. | 7 Yr. | 8 Yr. | 9 Yr. | 10 Yr. | 11 Yr. | 12 Yr. | 13 Yr. | 14 Yr. | 15 Yr. | 16 Yr. | 17 Yr. | 18 Yr. | 19 Yr. | 20 Yr. |
|-----------------|---------------------|------------|-------|-------|-------|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| SFHP/<br>BCCSSB | Minimum of 6 visits | 😊          | 😊     | 😊     | 😊     | 😊     | 😊     | 😊     | 😊     | 😊     | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      | 😊      |
| CHDP            | 7 visits            | 😊          | 😊     | 😊     | 😊     |       |       | 😊     |       |       | 😊      |        |        |        | 😊      |        |        |        |        | 😊      |        |

San Francisco Health Plan and Blue Cross of California State Sponsored Business members should have a complete well check visit each calendar year from 2 - 20 years of age with the 😊s; exceptions the calendar year in which they turn 7 and 9 years of age.

**In certain circumstances with proper documentation CHDP may pay for an additional preventive health care (outside of the above PM 160 periodicity) when:**

- There is a need for a sports or camp physical examination
- The individual is in foster care or out-of-home placement:
  - Children in foster care may have one CHDP examination a year. Under age two years, all children should be seen according to the regular CHDP schedule.

- There is a need for a school or preschool entrance examination
- There is a need for providing additional anticipatory guidance to the individual, parent or legal guardian:
  - The education provided **must** be in conjunction with a partial or complete exam.
  - The CHDP program reimburses for preventive health medical assessments and screenings.

- There is a history of perinatal problems:
  - Well check ups
  - Immunizations
  - Screening to prevent disease and/or disabilities from occurring
- There is evidence of significant developmental disability:
- There is a need to complete health assessment requirements

**Note: Treatment and diagnostic services are not benefits of the CHDP Program and must be billed to Medi-Cal**

For questions and additional information please contact the organizations below:



San Francisco Health Plan  
(415) 615-4200  
bprice@sfhp.org

Blue Cross of California  
State Sponsored Business  
(415) 474-2212



Child Health and Disability  
Prevention Program  
(415) 575-5712