The Child and Teen Checkups (C&TC) Program

Hennepin County

# Checkups



#### Child and Teen Checkups (C&TC)

- Preventive healthcare benefit
- For children and youth, newborn through age 20
- On Medical Assistance





### Eligibility

- •Children/youth ages 0–21
- •On Medical Assistance
- •Automatic with MA
- •No separate application







#### Goals of C&TC

- Identify potential health problems early
- Provide diagnosis, treatment and referral
- Encourage good health habits
- Find primary clinic for both medical and dental care





# Prevention is important!

- Health problems can be hard to see
- They can affect growth, development and learning
- Important to treat early to prevent bigger problems later





### We help families...



•Find a medical or dental clinic

- •Schedule appointments at your clinic
- •Arrange interpreter services and transportation to appointments
- •Connect families to resources
- •Reminder letters and phone calls



#### Lead Based Paint

- Houses built before 1978
- Children can
  - breathe or swallow the lead dust
  - eat paint chips
  - Elevated lead levels can lead to damage to the brain and nervous system





#### C&TC Checkup Schedule



**C&TC Checkup schedule:** 0-1 month 2 months 4 months 6 months 9 months 12 months 15 months 18 months 24 months 30 months 3 years and every year after!





#### C&TC Well Child Checkups

Completed at the primary care clinic

#### Regular (Primary) Clinic is where...

•You are comfortable and feel respected

- Your child's records are kept
- You and your child can develop a relationship with the clinic staff



Go to your primary clinic for...

- •All C&TC well child checks
- Your child's shots (including the flu shot!)
- Care for occasional illnesses like earaches
- Routine care for illnesses like asthma





#### Head to Toe Checkup

- Physical exam
- Height/weight
- Lab work including lead testing at 12 and 24months
- Immunizations
- Developmental and mental health screenings
- Education on child development and safety



#### Hearing and Vision Checks

- Part of every C&TC Checkup
- Children aren't aware of problems, as this is their "normal"







#### Learning...

- Children need good vision to learn:
  - How to recognize facial expressions
  - See the board at school



- Children need good hearing to learn:
  - How to talk
  - Hear their teacher at school

#### Developmental Screening

•Screen for autism at 18 and 24months

•Monitor how children are playing, learning, speaking, behaving and moving



#### How does your child...

Experience feelings and play with friends?
How safe do they feel to explore and learn?

•What are your concerns?

## Mental Health Matters



Fluoride Varnish

- Coating brushed on the teeth to prevent cavities
- Applied at the C&TC Well Child visit as soon as first tooth appears
- Every visit through age 5





#### Preventive Dental Checkups

- Every 6 months as soon as first tooth appears
- Start early to develop good dental habits
- Is a benefit of the C&TC program







Main Phone number 612–348–5131 Phone Hours M–F 8–4:30

To refer a family via our web form:

<u>Child and Teen Checkups (C&TC) Program | Hennepin</u> <u>County</u>



#### Making a C&TC Referral via Web Page

H Child and Teen Checkups referral					
ENNEPIN COUNT MINNESOTA	Y		Anonymo		
hild and Teen	Checkups referral				
Referral type Agency referral Client/ Agency referral Visit date MM/DD/YYYY	Self-referral O SCHW event referral	○ Virtual outreach follow-up			
Child/Children					
Child/Children First Name	Last Name	Date of Birth			
	Last Name	Date of Birth MM/DD/YYYY			
	Last Name				
First Name	Last Name Last Name				



#### Step by Step Instructions

	HENNEPIN COUNTY MINNESOTA			Anonymot		
	Child and Referral type Agency referral Agency ref Visit date MM/DD/YYYY Child/Children	Client/Self-referral	Kups referral ○ SCHW event referral	<ul> <li>Virtual outreach follow-up</li> <li>Choose Agency refe</li> <li>Provide Date of</li> <li>Add name(s) and birt</li> <li>who require assistan- add more tha</li> </ul>	of clinic visit h dates of children ce (use plus sign to	
	First Name		Last Name	Date of Birth		
				MM/DD/YYYY	÷.	
arent(s) ïrst Name		Last Name		Date of Birth MM/DD/YYYY		

Child and Teen Checkups

#### Parent(s) First Name Last Name Date of Birth .... MM/DD/YYYY Add Parent Family or MA case number Phone number\* Type O Home O Cell Referring Agency O Bloomington Public Health O BT O HUG O NIS O Minneapolis Public Schools Other Please specify referring agency Parent Name and phone number must be completed. Use "Other" for Referring Agency and Referring Agency Worker specify clinic name. Referring Agency Worker must also be completed Interpreter O Not Needed ○ Spanish ○ Somali ○ Hmong O Other

The Child and Teen Checkups Program is a preventive health care program for children, youth, and young adults from birth through age 20 on Medical Assistance.

#### Check all that apply

Are you (if under age 21) and your child(ren) ...

Up to date with health/dental checkups?

Up to date with vaccines?

Pregnant or within 3 months postpartum?

Do you need help...

□ Finding a medical clinic?

Making a medical appointment?

What Happens to Referrals? Is assigned within one business day to a SCHW

Receives a call within 3 business days

If there's no answer, SCHW leaves a Voice Mail

Will receive a second call within 10 days



## A GOOD Referral starts with YOU!

client

eiving ounty

l call



#### We help families...

- Find a medical or dental clinic and help make appointments
- Arrange transportation for medical and/or dental appointments
- Follow up with referrals to specialists
- Arrange interpreter services
- Connect families to resources









#### checkups@hennepin.us



#### 612-348-5131