



REPORTING ON

Prenatal Care

NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP) for Empire Plan enrollees and for their enrolled dependents, COBRA enrollees with their Empire Plan benefits and Young Adult Option enrollees

Five Important Steps to Having a Healthy Baby

1. Call your doctor

As soon as you think you are pregnant, call your doctor. You can do the most for your baby during the first three months of pregnancy, so try to start your doctor visits as soon as possible.

The Empire Plan covers your maternity care under the Medical/Surgical Program. You may choose a participating or non-participating provider for your maternity care.

Participating Provider

If you choose a participating provider (obstetrician, family practice physician or certified nurse-midwife), there are no copayments for prenatal visits, delivery or your six-week checkup after delivery. You pay only your copayment for covered services at participating laboratories.

To locate an Empire Plan participating provider or laboratory, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the Medical Program. Or, visit the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online. Follow the prompts to the NYSHIP Online home page, and click on Find a Provider. Always check with the provider before you receive services to make sure he or she participates in The Empire Plan for New York State government employees.

Congratulations on your pregnancy! Every baby deserves a healthy beginning. You can take steps before your baby is even born to help ensure a great start for your infant. That's why The Empire Plan offers mother and baby the coverage you need. When your primary coverage is The Empire Plan, The Empire Plan Future Moms Program provides you with special services.

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This issue of *Reporting On* is for information purposes only. Please see your doctor for diagnosis and treatment. Read your plan materials for complete information about coverage.

Non-Participating Provider

If you choose a non-participating provider (obstetrician, family practice physician or certified nurse-midwife), after the annual deductible is met, The Empire Plan pays 80 percent of the reasonable and customary charges for maternity care up to your coinsurance maximum. You pay the balance, until the coinsurance is met. There are separate charges for services at non-participating laboratories.

2. Call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447)

The Empire Plan Hospital Program provides your hospital coverage at hospitals or licensed birthing centers through the Empire Plan Hospital Program, administered by Empire BlueCross BlueShield. You must call for preadmission certification before maternity and other hospital admissions related to your pregnancy.

3. Enroll in the Future Moms Program

As soon as you know you are pregnant, call 1-877-7-NYSHIP (1-877-769-7447) and select Option 2 for the Hospital Program for preadmission certification and to learn about the Future Moms Program. Call early – during the first month of pregnancy, if possible – and tell the representative you're calling about your pregnancy.

The maternity specialist will ask you some questions to determine if there are any potential concerns. Questions may include:

- Is this your first pregnancy?
- Have you had problems during previous pregnancies?
- Do you have diabetes?
- Do you get urinary tract infections?

If you choose to participate in the Future Moms Program, you will receive the following:

- A toll-free number you can call for answers to your questions about important topics, such as pregnancy, labor, nursing and postpartum depression – staffed by registered nurses, 24 hours a day, seven days a week
- A helpful prenatal care book – *Mayo Clinic Guide to Healthy Pregnancy*
- Educational materials to help you handle any unexpected events
- Screening by a registered nurse for common pregnancy risks like premature delivery or depression
- Useful tools to help you, your doctor and your Future Moms nurse keep track of your pregnancy and spot possible risks
- Free phone consultations with a dietitian, pharmacist, lactation consultant, exercise physiologist or licensed behavioral health clinician, if needed

For more information on the services offered by the Future Moms Program, see page 6.

4. Be informed

Ask your doctor or nurse-midwife, the doctor's nurse and the maternity specialist questions. Community resources and web sites listed on the back cover of this publication provide even more information. *Be informed.* Make sure you know how you can have a healthy pregnancy and baby.

5. Enroll your baby for coverage

Remember to change from Individual coverage to Family coverage or add your baby to your Family coverage.

If you are an active employee, contact your agency Health Benefits Administrator **within 30 days of your baby's birth.**

If you are a retiree, write to the Department of Civil Service Employee Benefits Division, Albany, New York 12239, **within 30 days of your baby's birth.***

* Retirees of Participating Agencies: Call the Health Benefits Administrator at your former agency.

Fatigue

Supporting a pregnancy will take a lot of your energy, especially in the first trimester. It is important to get plenty of rest. Fatigue is related to the high levels of the hormone progesterone. Eating foods rich in protein and iron may help. Remember to take a prenatal vitamin for optimal nutritional support.

Nausea

Although often called morning sickness, nausea during pregnancy can happen at any time. Hormone levels are a contributing factor, including rising levels of the hormones, human chorionic gonadotropin (hCG) and/or estrogen. Not every woman experiences nausea, so do not be concerned if you are not experiencing this symptom. Try the following to relieve any sickness:

- Eat small frequent meals. The stomach empties slowly during pregnancy and may not hold a large meal. Avoid spicy, fried and greasy foods.
- Keep crackers at your bedside. Some women find that eating crackers before getting out of bed or moving around can help.
- Some women have aversions to certain smells. Identify the trigger situations and avoid them.
- Try fresh ginger. Ginger can be found in certain beverages, such as sodas or teas. Make sure to look for items made with real ginger. You can also try grating fresh ginger into a beverage.

- Take your prenatal vitamins with your evening meal or before bed rather than on an empty stomach.

Fortunately, the symptoms lessen for many women as they end their first trimester. In the meantime, be sure to incorporate healthy nutritional choices so that you and your baby get the essential daily requirements for optimal health.

Constipation

During pregnancy your digestive system may slow down. Although uncomfortable, it is not dangerous and can be managed. Do not take any laxatives unless instructed to do so. Also try these tips:

- Increase your fluid intake.
- Increase your fiber; eat more fresh fruits and vegetables.
- If you're not already exercising, add mild exercise to your daily routine.
- You may take a stool softener such as docusate sodium: 100mg, up to twice a day. This medication is safe during pregnancy; it is added to many prenatal vitamins.

Breast Changes

Breast changes are one of the very earliest symptoms in pregnancy. Rising hormone levels can cause breast tissue to become swollen, heavier and sore. While this may be uncomfortable, there is nothing to worry about. Invest in a good supportive bra to ease some of the discomfort.

Frequent Urination

For many women this symptom begins around the sixth or seventh week after conception as the uterus starts to grow. Initially this may also be due to enlarged ovaries taking up space in the pelvic cavity. This may be bothersome, but not worrisome. If you develop burning with urination, blood in your urine, or fever, you must call your doctor.

Cramping/Spotting

A small amount of cramping that resembles menstrual cramps can be normal. Remember your uterus is a muscle and it is working with the developing pregnancy. On occasion, cramping may be accompanied by spotting. Again, spotting may be perfectly normal. However, if at any time you experience heavy, bright red bleeding or severe, constant cramping, please notify your doctor.

Emotions

It is natural to be worried that every twinge is something to be concerned about and you may find yourself very emotional. Try to focus your energy and thoughts on the positives!

TAKE ACTION TO BE HEALTHY

If you become pregnant, or are planning on becoming pregnant, you will need to adjust your lifestyle to ensure that you and your baby are as healthy as possible.

- Get early, regular care. Talk to your doctor about prenatal care, your lifestyle and personal and family medical history. These discussions can help your doctor identify possible risk factors and recommend treatment or lifestyle changes specific to your situation.
- Take a prenatal multivitamin. A good prenatal vitamin will have higher levels of folic acid, which helps protect against birth defects, premature birth, low birth weight, miscarriage

and pregnancy complications. Folic acid is also naturally found in orange juice, peanuts, green leafy vegetables, beans, broccoli, asparagus, peas, lentils and enriched grain products.

- Stop smoking. Smoking during pregnancy can lead to low birth weight, preterm birth and stillbirth. Babies of mothers who smoked during pregnancy are more likely to have poor lung development, asthma, respiratory infections or even Sudden Infant Death Syndrome (SIDS). Avoid second-hand smoke; it is just as dangerous.
- Stop drinking alcohol, using illicit drugs, taking prescription and

over-the-counter drugs (including herbal supplements) that are not prescribed by a doctor who knows you are pregnant.

- Eat a balanced diet. Your baby is nourished by what you eat, so choose healthier foods and avoid those with no nutritional value.
- Gain enough weight, but not too much. Health care providers recommend that a woman of normal weight gain 25 to 35 pounds during the course of pregnancy. Ask your doctor how much weight you should gain, based on your weight before pregnancy.

Based on information from the March of Dimes and WebMD

EXERCISE DURING PREGNANCY

Moderate exercise for at least 30 minutes on most, if not all, days of your pregnancy is recommended unless there is a medical reason to avoid exercise, according to the American College of Obstetricians and Gynecologists (ACOG).

Exercise during pregnancy can benefit both you and your baby by:

- Preventing high blood pressure and gestational diabetes that sometimes develops during pregnancy
- Building stamina for labor and delivery
- Easing common discomforts like constipation, backache, fatigue and varicose veins
- Enhancing well-being and promoting early recovery and weight loss after labor and delivery

- Relieving some emotional strains after your baby's birth, when some women are affected by postpartum depression, or "baby blues".

Always be mindful of your safety during exercise and take the following precautions:

- Discuss your plans for exercise with your doctor before you begin.
- Avoid activities that put you at high risk for injury, such as downhill skiing, horseback riding or contact sports.
- Keep your heart rate at a moderate level; a good rule of thumb to follow is to make sure you are able to speak comfortably during exercise. If you cannot say more than a few words without becoming out of breath, lower your exercise intensity.

- After your first trimester, avoid exercise that requires you to lay flat on your back for extended periods of time, which can reduce blood flow to the uterus.

- Avoid overheating and stay hydrated before, during and after exercise.

- Make sure you do a full cool down and stretch thoroughly after exercise.

Brisk walking, swimming, jogging and dancing are usually safe and effective forms of exercise during pregnancy. Or, try prenatal yoga or aerobics classes designed for pregnant women.

Based on information from the March of Dimes and WebMD

Prenatal tests are medical tests you receive while you are pregnant. They help your doctor monitor your health during pregnancy and the health of your developing baby.

Some prenatal tests are given to all pregnant women. These include blood pressure checks and blood and urine tests.

Your doctor will listen to your baby's heartbeat at each visit (beginning when your baby's heart is developed enough to be heard – usually by about 12 or 13 weeks). After about 20 weeks, your doctor will begin measuring your abdomen to follow your baby's growth. A normal heartbeat and growth rate are important signs that your baby is developing properly. Prenatal care also usually includes tests for the following:

- Hepatitis B, syphilis, HIV and other sexually transmitted diseases that could be dangerous to a developing baby.
- Cancer of the cervix. This is ruled out with a pap smear.
- Presence of antibodies in your blood to show immunity to rubella (German measles) and varicella (chickenpox), which can cause birth defects if you are infected during pregnancy.
- Anemia (low red blood cell count) to make sure you are getting enough iron. Too little iron could cause you to feel especially tired and possibly increase your risk of delivering your baby too soon.
- Your blood type, including whether or not you carry a protein called the Rh factor. Women who do not have the Rh factor are considered Rh negative and usually need a series of injections to protect their babies from a possible blood problem.

- Bacteria in your urine, which could indicate an infection that can pose a serious risk for both you and your baby.
- Sugar in your urine, which can be a sign of diabetes. Your doctor may suggest additional tests if sugar shows up in your urine.
- Protein in your urine, which can indicate a urinary tract infection or, later in pregnancy, a pregnancy-related condition that includes high blood pressure. Your doctor may suggest additional tests if your urine has protein in it.
- Gestational diabetes. A glucose tolerance test that is usually performed at about 28 weeks identifies this condition.
- Presence of Group B streptococcus (GBS). Your doctor performs a cervical test at about the sixth month of your pregnancy. If the bacteria is present (common for many women and considered a normal part of a woman's reproductive system), you may receive treatment during labor to protect the baby from becoming infected during birth.
- Cystic fibrosis (CF), an inherited disease that can severely affect breathing and digestion.

Your doctor may perform other prenatal tests over the course of your pregnancy, depending on you and your partner's medical and family history. These tests can include a blood screening for alpha-fetoprotein (AFP) given between the 16th and 18th weeks of pregnancy. This screening determines a baby's risk for certain disorders, including Down syndrome.

One or more ultrasounds may also be offered. An ultrasound uses sound waves to create a picture of the baby and helps the doctor date

Empire Plan Coverage

The Empire Plan covers in full all routine pre- and postnatal visits and urinalyses received from Empire Plan-participating obstetricians/gynecologists, family practice physicians or certified nurse-midwives. Additional testing, based on medical necessity, is also covered, but may be subject to a copayment. The Empire Plan Basic Medical Program covers services received from non-participating providers. (See your NYSHIP General Information Book and Empire Plan Certificate for more information about The Empire Plan Basic Medical Program.)

the pregnancy and follow the baby's growth and development. This test also helps determine the presence of more than one baby, the level of fluid around the baby, the health and location of the placenta and the sex of the baby.

Your doctor may suggest more tests, including amniocentesis, a test of the fluid surrounding the baby that detects certain genetic abnormalities; chorionic villus sampling (CVS), a sampling of the baby's tissue from the fingerlike projections in the placenta; and/or a fetal non-stress test that measures the frequency of a baby's movement in the womb and how the baby's heart rate relates to the movement.

If you have any questions about prenatal tests or the terms used here, discuss them with your doctor. If you are unsure whether a test will be covered, call The Empire Plan toll free at 1-877-769-744 (1-877-7-NYSHIP) before you receive the test.

Pregnancy is an exciting and special time, but it can also be a little overwhelming.

As a part of your health plan you can sign up for the Future Moms Program – a pregnancy support program designed just for moms-to-be. Whether this is your first pregnancy or your fifth, the Future Moms Program can help you along the way.

As soon as your doctor confirms your pregnancy, call The Empire Plan and notify us that you are pregnant. This call is important. When you call, your pregnancy-related hospital admissions will be precertified, so you will be covered at the highest level when you are admitted. Also, you will speak with a maternity specialist who will ask you some basic questions about your pregnancy. The maternity specialist will ask you if you would like to participate in the Future Moms Program.

When you sign up for the Future Moms Program you receive:

- Your own maternal health coach
- Access to a registered nurse helpline 24 hours a day, seven days a week
- Helpful and informative materials throughout your pregnancy on topics including your baby's development and growth, fitness and nutrition, feeding your baby, choosing the right doctor and infant safety

Initial Assessment

At the beginning of the program, a nurse will ask questions to check risk factors. If you are identified

as high risk for pre-term labor, additional support and education are available through the High Risk Pregnancy Program (see page 12).

Shortly after you join the Future Moms Program, you'll receive a Future Moms Program Welcome Kit in the mail.

This packet includes:

- A Future Moms welcome letter with a toll-free number, available 24/7 for help with all your pregnancy-related questions
- The book, *Mayo Clinic Guide to Healthy Pregnancy*
- A Maternity Care Diary, which will help you track milestones during your pregnancy, including your baby's development and how your body may be changing

28 Weeks

Around the 28th week of pregnancy, your Future Moms Program nurse will call to check in with you again. Your nurse will discuss your most recent checkup, confirm that you have had the appropriate tests and screenings and answer any questions you have about prenatal tests, delivery options, caring for your baby or any other health concerns on your mind.

After this phone call, you will receive another packet with helpful information about your third trimester and preparing for labor, with topics including delivery options and postpartum depression.

After Delivery

Your Future Moms Program nurse will call you two to four weeks after your delivery to congratulate you

Call at Any Time

You can call the Future Moms Program at any time for information relating to your pregnancy or delivery or if you have questions about your benefits or course of treatment. Nurses are available 24 hours a day, seven days a week at 1-877-7-NYSHIP (1-877-769-7447). Spanish-speaking nurses are available and, if you speak a language other than English or Spanish, we have access to a language line. If you have trouble speaking or hearing, you can use TTY/TTD services. Call 800-257-6494 or call the relay center at 800-828-1140. Call your health care provider for a nonemergency medical condition or illness. If you have a medical emergency, call 911 or your local emergency number immediately.

on the birth of your child and check on how you and the baby are doing. Your nurse can also offer additional support if you have the baby blues or are suffering from postpartum depression. After this call, you will receive a birth kit that includes information on infant care and home safety.

The Future Moms Program provides a valuable element of additional support and guidance during and after your pregnancy.

It's important to eat smart and make healthy food choices to support your baby's growth during pregnancy. Try to eat foods from each of the five food groups every day. They provide important nutrients that you and your baby need.

In general, most women need around 300 extra calories per day during pregnancy. However, the exact amount of extra calories you need depends on your weight before pregnancy. Talk to your health provider to learn more about a healthy eating plan that's right for you. Be sure to watch serving sizes and remember fatty foods (like doughnuts and chips) and sweets (like sodas, cookies and candy) don't give your baby enough of what he or she needs to grow.

Healthy eating hints

Meals: Eat four to six smaller meals a day instead of three bigger ones to help relieve the heartburn and discomfort you feel as your baby grows bigger.

Snacks: Cheese, yogurt, fruit and vegetables are satisfying, healthy snacks. Peanut butter and nuts are also good, if you aren't allergic to them.

Liquids: Drink at least six to eight glasses of water, juice or milk every day.

Vitamins: Take a multivitamin or prenatal vitamin every day. Ask your health care provider if you also need to take an iron or calcium supplement.

Caffeine: Limit your caffeine to 200 milligrams daily (the amount in one 12-ounce cup of coffee). Caffeine in coffee depends on the brand you drink and how it's made, so check the label on the package, or ask at your coffee shop. Try decaffeinated coffee (has a smaller amount of caffeine). Caffeine is also found in tea, chocolate, soda and some over-the-counter medicine, so read labels to know how much caffeine you're getting.

Foods to avoid

- Raw fish, especially raw shellfish
- Soft-scrambled or runny eggs and foods made with raw or lightly cooked eggs
- Unpasteurized juices
- Raw sprouts, especially alfalfa sprouts
- Unpasteurized milk and any foods made from it
- Unpasteurized soft cheeses, such as brie, feta, Camembert, Roquefort, and queso blanco
- Herbal supplements and some herbal teas
- Fish high in mercury, including shark, swordfish, king mackerel and tilefish. It's okay to eat up to 12 ounces a week of fish containing small amounts of mercury. These 12 ounces can include shrimp, salmon, pollock, catfish and canned light tuna. (Eat only 6 ounces of albacore tuna.)
- Raw or undercooked meat, poultry, seafood and hot dogs. Deli meats (such as ham and bologna) can cause food poisoning. Avoid them or heat them before eating.
- Refrigerated pâtés, meat spreads or smoked seafood. Canned and shelf-stable versions are safe.

MEDICATIONS AND PREGNANCY

FDA Pregnancy Categories

The Food and Drug Administration categorizes medications based on possible risks to the fetus.

- Category A - Human studies have shown no risk to the fetus. These medications are considered safe.
 - Category B - Animal studies have not shown any risk to the fetus or if they have, human studies have shown no risk. These medications are generally safe.
 - Category C - Animal studies have shown an adverse effect on the fetus but no human studies have been done. However, potential benefits of the medication may outweigh the possible risk.
 - Category D - There is documented risk to the fetus based on data from human experiences. Category D will rarely be prescribed.
- Category X - There is documented evidence of fetal abnormalities. Risks completely outweigh the benefits of these medications and they will never be prescribed.

What should I take if I have a cold or allergies?

- For a headache you may take acetaminophen (Tylenol), a Category B drug. Extra strength is acceptable.
- For a runny nose or allergies you may take diphenhydramine (Benadryl) or loratadine (Claritin). Both are Category B. **Note: Avoid allergy medications found behind the pharmacy counter (including Claritin D).**
- For a cough, first try increasing fluids, using a humidifier and elevating your pillows. guaifenesin (Robitussin), a category C drug, can be

used if the cough is severe. You also may use cough drops and salt water gargles.

Most often, the best remedy is fluids, rest and time, but if you develop a fever or your symptoms last longer than 7-10 days with no improvement, call your obstetrician.

What should I take if I have heartburn?

- Maalox - This is a category B drug for occasional heartburn.
- ranitidine (Zantac) - This is a category B drug for persistent heartburn.
- TUMS - This is a category C drug. Try the first two medications first.

The best way to avoid heartburn is to eat small frequent meals. Drink plenty of fluids and avoid spicy or fried foods.

SKINCARE PRODUCTS TO AVOID

While most products are completely safe, there are a handful of skincare ingredients best avoided while pregnant or breastfeeding.

Retinoids

Retinoids are a type of vitamin A praised for reducing wrinkles and improving skin tone. However, studies have shown that high doses of vitamin A during pregnancy can be harmful to an unborn child. Oral retinoids, such as isotretinoin (Accutane, an acne treatment), are known to cause birth defects.

On the label: Differin (adapalene), Retin-A, Renova (tretinoin), Retinoic acid, Retinol, Retinyl linoleate, Retinyl palmitate, Tazorac and Avage (tazarotene).

Salicylic acid

This mild acid is used to treat certain skin disorders, including acne. BHA, or beta hydroxy acid, is a form of salicylic acid. High doses of salicylic acid have shown to cause birth defects and various pregnancy complications. **Note:** Alpha hydroxy acids, sometimes listed as AHAs, glycolic acid, or lactic acid, are safe.

On the label: Salicylic acid, Beta hydroxy acid (BHA)

Soy

Although generally considered safe, soy has estrogenic effects, which can worsen the “mask of pregnancy” (dark splotches on facial skin, also known as melasma or chloasma).

On the label: Lethicin, Phosphatidylcholine, Soy, Textured vegetable protein (TVP)

Makeup

Products marked “noncomedogenic” or “nonacnegenic” are oil-free and don’t clog pores. These are safe and will not affect the health of your baby. Minerals-only makeup lines are also safe, as they sit on top of skin and are not as easily absorbed.

The most precious gift you can give your baby is a healthy start in life. Deciding whether to breast or bottle feed your baby is a big decision. Consider the pros and cons of each and discuss this decision with both your baby's pediatrician and your own doctor before your baby is born.

Babies fed either breast milk or formula can grow and develop normally, and each offers advantages. Whichever you choose, feeding time is a wonderful opportunity to bond with, as well as nourish your baby and to stimulate intellectual, social and emotional development.

Breast Milk

Breast milk is a complete form of nutrition for almost all babies and has extra ingredients that cannot be duplicated. However, there can be cases when breastfeeding is not always the best option. Discuss this decision with your baby's pediatrician and your own doctor.

The American Academy of Pediatrics recommends feeding a baby breast milk exclusively (no water, juice, nonhuman milk, formula or food) for the first six months of a baby's life, and to continue breastfeeding throughout the baby's first year.

Benefits of Breast Milk

Breast milk contains fatty acids to promote brain development, antibodies and other substances that help protect a baby from illness. It naturally provides ideal amounts of protein, sugar, fat, most vitamins, growth factors, hormones and additional nourishment that a baby needs for healthy growth and development. And, as the infant grows, breast milk changes to adapt to the child's changing needs.

Breast milk is usually easily digested by a baby, and may reduce gas and discomfort. Studies show that babies fed breast milk may have a lower incidence of vomiting, diarrhea, ear infections and other types of infections. Breastfeeding also promotes correct development of the jaw, teeth and speaking abilities. And, breast milk is almost always available and free.

Breastfeeding can also benefit the mother, who may lose weight gained during pregnancy more easily, have less chance of developing anemia after delivery and the risk of developing certain diseases later in life. Breastfeeding can also help reduce the risk of uterine bleeding after delivery by releasing hormones that can help mothers feel calm and relaxed, which may help protect from postpartum depression.

Breastfeeding and Your Empire Plan Benefits

If you are in a group that is considered a nongrandfathered plan (that is either administratively determined or has settled its contract with New York State), you are covered for one double electric breast pump per pregnancy in conjunction with birth.

Breast pumps are available for purchase at no cost to you when you use a participating supplier. Visit <https://www.cs.ny.gov/ebd> and select Using Your Benefits, then Empire Plan Providers, Pharmacies and Services and click the link under the Medical/Surgical Program to access the online directory. Or, call 1-877-7-NYSHIP (1-877-769-7447) and select 1 for the Medical Program.

If you plan on breastfeeding, check to see if a lactation consultant is available at the hospital where you plan to deliver. If you are in a group that is considered nongrandfathered (that is either administratively determined or has settled its contract with New York State), you are also covered for comprehensive breastfeeding support and counseling. This benefit is covered at no cost to you during pregnancy and/or the postpartum period if you are in a nongrandfathered group and use a participating provider.

Formula

Formula is a safe and healthy alternative to breast milk. A variety of formulas are available and each offers essential nourishment and different compositions for the digestive and dietary needs of babies.

Certain formulas are very similar to breast milk. Some mothers combine breast milk and formula feeding, which benefits the baby by providing unique nutrients present in breast milk and enables the mother and other caregivers to take advantage of the benefits of formula feeding.

If you decide to feed your baby formula, be sure the one you choose provides DHA and ARA; these nutrients support healthy brain and eye development.

Your formula should also be fortified with calcium, iron, easy-to-digest protein and a healthy level of calories and vitamins and minerals. These are all vital to the baby's health and development.

Ask your pediatrician for a recommendation about which formula is best as your child grows and changes.

Many new parents may have never cared for a baby until their own is born. A baby can be exciting and unfamiliar at the same time, and it's normal to be nervous about parenting. You have a vital role in the health and well-being of your baby. The following are helpful tips to get you off to the right start:

- Share the tasks of feeding, changing and caring for your baby so that both parents can get rest.
- Do not overload your baby's crib, bassinet, stroller (or any place your baby may sleep) with lots of stuffed toys and/or blankets. This increases risk of SIDs or suffocation.
- Childproof the nursery, bathroom, kitchen, fireplace – any area of your house that poses a threat to your baby – and check the safety of any baby furniture or gadgets (cribs, high chairs, strollers, swings, playyards) that you purchase or are given secondhand. There are a number of web sites with baby product recalls and reviews, including www.safekids.org, www.cpsc.gov and www.jpma.org. **Note:** It is not recommended to use a secondhand car seat.
- Introduce new foods into your baby's diet as your doctor advises you. Be aware of food allergies in your family that your baby may have inherited.
- Dress your baby appropriately for the weather. Make sure your baby's room is the right temperature (65°F is ideal).
- Take your baby out for walks or activities. Babies love the sights and sounds of the outdoors and benefit from new experiences and stimuli.
- Hold, cuddle and play with your baby. This helps both you and your baby thrive and form a strong bond.
- Smile, talk and laugh with your baby. Studies show that a baby can hear your voice while in the womb and can recognize parents within the first week of life.

Dependent Care Advantage Account (DCAAccount)

A Dependent Care Advantage Account, or DCAAccount, is available to eligible employees of New York State Executive Branch who are Management/Confidential employed by the Unified Court System or represented by Council 82, CSEA, DC-37, Legislature, NYSCOPBA, PBA, PEF or UUP.

Will you need child care for your baby? The DCAAccount could help save you money by allowing you to pay for your child's care with pre-tax dollars. Under this program, you may set aside up to \$5,000 in pre-tax salary for eligible child care. See your agency Health Benefits Administrator for details or visit www.flexspend.ny.gov.

Employees of Participating Employers and employees of Participating Agencies: Ask your agency Health Benefits Administrator if a similar benefit is available to you.

CHOOSING YOUR BABY'S DOCTOR

Follow this checklist of questions when choosing your baby's doctor:

- Is the doctor an Empire Plan participating provider?
- At what hospitals does the doctor admit patients?
- Are these hospitals in The Empire Plan network?
- Who covers for the doctor if he or she is unavailable?
- Are the doctors who cover for the doctor affiliated with the same hospitals? Are they board certified?
- What is the physician's pediatric background? Is he or she board certified? Does the doctor have a subspecialty if your child has special medical needs?
- What are the office hours?
- When is the best time to call with routine questions?
- Is emergency coverage available 24 hours a day, including weekends?
- How long does it take to get a nonemergency appointment in this office?
- Do you and the doctor have similar views on sensitive topics and parenting issues (such as breastfeeding, single parenthood, alternative medicine, circumcision and co-sleeping)?
- Are waiting rooms and exam rooms clean and engaging for you and your child?
- How friendly and helpful is the office staff?

Your Pediatrician

Choosing a pediatrician is an important part of planning for a new baby. This is the doctor who will care for your child as he or she grows and develops.

A good time to start looking is about six or seven months into your pregnancy. Ask relatives and friends for recommendations. Talk to parents in your neighborhood or get referrals from your own doctor. Request a tour of the pediatrician's office and request to meet the doctor and staff who work there.

HEALTH CARE SPENDING

The Health Care Spending Account (HCSAccount) helps State employees pay for health-related expenses with tax-free dollars. This includes unreimbursed expenses (such as copayments and deductibles) for medical, hospital, laboratory, prescription drug, dental, vision and hearing. You have an opportunity to enroll each fall during the HCSAccount open enrollment period.

Before participating in the HCSAccount program, you should carefully consider what your eligible expenses might be.

Reviewing your expenses from previous years can help you determine how much to contribute. You can set aside \$100 to \$2,500 per year in an HCSAccount. Under federal law, any money that you put into your HCSAccount must be used for expenses incurred during the plan year in which it was contributed. Unless you experience a qualifying event, you cannot change the amount of your HCSAccount annual election.

You may be eligible to enroll in a HCSAccount if you are represented by CSEA, PEF, NYSCOPBA, Council 82, District

Council 37, PBA, PIA, UUP or if you are designated Management/Confidential or if you are a non-judicial employee of the Unified Court System. Additional eligibility requirements apply; see your Health Benefits Administrator, usually located in your personnel or Human Resources office, for additional information.

Medical case management is a voluntary program to help identify and coordinate covered services you or your baby may need. You must call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Hospital Program for this service, which is available through the Benefits Management Program.

Some serious conditions, such as neonatal (newborn) complications may require extended care. If your baby needs this type of care, you may be faced with many decisions about treatment plans and facilities. The Benefits Management Program can provide information that may help you make the best possible choice based on the patient's situation.

Preadmission certification and concurrent review help the Benefits Management Program determine if medical case management would be appropriate. If the Benefits Management Program decides that this service could help you, your baby or any member of your family covered by The Empire Plan, a nurse coordinator who is familiar with benefits available under The Empire Plan and local and regional health care resources will contact you. The nurse will meet with you and your family to discuss the patient's medical situation.

Your acceptance of this service is voluntary. With your written consent, the nurse and your

attending physician will identify treatment options covered under The Empire Plan so that you and your family have the information available to make the best medical decisions possible. The nurse will also identify any community resources that may be available.

When you accept medical case management, inpatient services will be coordinated by the Empire Plan Hospital Program, administered by Empire BlueCross BlueShield. Outpatient services will be coordinated by the Medical/Surgical Program, administered by UnitedHealthcare.

Even if you do not elect to participate in the Medical Case Management Program, always call The Empire Plan within 48 hours or as soon as reasonably possible if you are admitted to the hospital. Anyone can make the call, but you are responsible for ensuring that The Empire Plan is notified. You will pay a higher share of the cost if you do not follow The Empire Plan Benefits Management Program procedures.

High Risk Pregnancy Program

The High Risk Pregnancy Program is a component of the Future Moms Program that is designed specifically for women who have been identified as high risk. Like other elements of the Future Moms Program, participation is voluntary.

If you are identified as high risk and elect to participate in the High Risk Pregnancy Program, you will be contacted at least once a month by your Future Moms Program nurse for ongoing assessments.

This additional support is tailored to your individual needs. The timing of these calls will be based on the severity and control of symptoms and/or risk factors.

For most women, the birth of a child is a time of joy and happiness. At the same time, 50 to 80 percent of new mothers experience symptoms of postpartum depression, or the “baby blues” during the first week after delivery. These feelings of moodiness, depression, anxiety, irritability and fatigue, sometimes attributed to after-delivery hormonal changes, typically last only a few days and are gone within two weeks of the birth.

However, for some new mothers, these feelings are more intense and do not subside. This is a more serious form of depression that may develop at *any time within a year* of childbirth. Women with postpartum depression can experience any number of symptoms, the most common of which are extreme sadness, crying, guilt, feelings of hopelessness and/or worthlessness, difficulty concentrating, fatigue, changes in eating habits and insomnia. In more extreme cases, fear of harming the baby (though this rarely happens) and suicidal thoughts can occur.

What causes postpartum depression?

Most experts agree that it is the result of many factors. Evidence suggests that changes in hormones after delivery such as estrogen, progesterone and thyroid are involved. Complications during labor and delivery, a severe case of baby blues, having a “difficult baby,” stress and lack of emotional

support also may contribute to the problem. In addition, there are factors unrelated to delivery that place the mother at risk for developing postpartum depression. These include a personal or family history of depression or mood disorders, relationship problems, unemployment of the mother or her partner or other stressful events during the preceding year.

What should you do if you think you are suffering from postpartum depression?

First, don't be afraid to let your doctor know what you've been experiencing. Unfortunately, you may be one of as many as 50 percent of women with this problem who never acknowledge the symptoms or seek treatment and therefore suffer needlessly. Once your doctor is aware of the problem, he or she can help you determine the best form of treatment for you. This may include counseling from the physician or a mental health professional, involvement in a postpartum depression support group, medication or a combination of two or more of these approaches.

Remember that you may get valuable support by telling your partner or a relative or friend how you're feeling. Finally, take care of yourself. Eat well, get plenty of rest, try to exercise every day, ask for help from others and spend time with friends.

More about Postpartum Depression

There is helpful information about postpartum depression on the customized Empire Plan Mental Health and Substance Abuse Program web site at www.achievesolutions.net/empireplan. You can find self-help questionnaires, articles and other resources by going to the Mental Health Condition Center and selecting Depression, then choosing Postpartum Depression.

If you think you or a loved one is suffering from postpartum depression, or if you have questions, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select Option 3 for the Mental Health and Substance Abuse Program.

Q. Will my dental work pose a risk to my unborn baby?

A. Routine dental work should continue throughout your pregnancy and should not cause concern. In fact, delaying needed dental work could be risky. Badly decayed teeth or impacted wisdom teeth can cause infection that could spread and endanger both you and your baby. When your body is fighting to stay healthy, by-products and chemicals are produced and travel through your bloodstream. If these chemicals reach your uterus, they may cause premature labor. Research suggests that women who have gum disease or periodontitis may be seven times more likely to have a baby born too early and too small. Be sure to tell your dentist or hygienist you are pregnant so necessary precautions are taken. Avoid X-rays unless they are absolutely necessary.

Q. Is touching raw meat or cleaning my cat's litter box safe during pregnancy?

A. A parasite that causes toxoplasmosis is found in raw meat and cat feces; it can cause severe brain damage in the fetus. Pregnant women should practice good hygiene when handling raw meat, avoid contact with sandboxes and litter boxes and wear gloves when gardening.

Q. I am a victim of domestic violence. Where can I go for help?

A. Call the New York State Coalition Against Domestic Violence hotline toll free at 1-800-942-6906; for a Spanish-speaking representative, call 1-800-942-6908. And, talk with your doctor. Your baby's health is at stake.

Q. Is it safe for me to use household cleaning products while I'm pregnant?

A. Some cleaning agents may cause birth defects after prolonged direct contact with your skin. Be careful not to use cleaners with strong fumes, like oven cleaners. Wear gloves and facial protection and work in a well-ventilated area. Read labels or contact the manufacturer to find out more about a product's safety. You can also call your doctor to check if the substance is dangerous for pregnant women.

Q. If a woman is HIV positive, will her baby be born HIV positive too?

A. New drugs can reduce the risk of HIV-positive mothers passing the virus onto their babies to 2 percent or less, compared to about 25 percent for untreated mothers. It is important for a woman considering pregnancy or who is already pregnant to have an HIV blood test. The New York State AIDS Hotline provides information about free anonymous testing. Call toll free 1-800-541-2437; for a Spanish-speaking representative, call toll free 1-800-233-7432.

Childbirth Education Classes

In the sixth or seventh month of your pregnancy, you and a partner may want to take a childbirth education class. These classes usually run up to eight weeks and may include:

- Information about what to expect during pregnancy, labor and delivery
- Suggestions of proper diet and exercise
- Relaxation and breathing techniques to use during labor and delivery
- The best support your partner can give you during delivery
- A chance to meet and spend time with other expecting parents

Taking a childbirth education class can reduce your stress by preparing you for pregnancy, labor and delivery. Contact your doctor's office, local hospital or birthing center for more information and to make a reservation.

Note: Any charges for these services will not be reimbursed by The Empire Plan.

It is better to be tested for HIV during pregnancy than to wait until delivery. If a woman without prenatal HIV test results declines HIV testing during delivery, hospitals are required to conduct expedited HIV testing on her newborn. Treatments for mom during or shortly after delivery can reduce transmission from mother to baby by up to two-thirds. If you are HIV positive, do not breastfeed your baby. The HIV virus can be carried in breast milk.

Q. I'm 36 years old. Is pregnancy safe after age 35?

A. While advances in medical care can help women over age 35 have safer pregnancies than in the past, there is a higher risk of pregnancy complications.

These include high blood pressure, gestational diabetes, placental problems, miscarriage or stillbirth, or having a baby with a genetic disorder like Down syndrome.

Good prenatal care is especially important in order to minimize risks and improve your chances for a healthy pregnancy and child.

Q. Is there any reason to limit fish intake during my pregnancy?

A. Yes. Certain types of fish may be contaminated with high levels of mercury or industrial pollutants that are harmful to your unborn baby. Avoid eating swordfish, shark, king mackerel or tilefish, which can contain high levels of mercury. It's okay to eat up to 12 ounces a week of fish that contains a small amount of mercury. The 12 ounces can include shrimp, salmon, pollock, catfish and canned light tuna (6 ounces for albacore tuna).

Q. Is it possible for me to transfer a sexually transmitted disease (STD) to my unborn baby?

A. Sexually transmitted diseases in pregnant women may cause spontaneous abortion or complications in your newborn, including pneumonia, eye infections and permanent neurological damage. If you think you have a sexually transmitted disease, see your doctor as soon as possible. Most STDs are treated easily. The earlier a woman seeks treatment, the less likely she is to pass the disease on to her baby.

Q. How can I prevent exposing my baby to dangerous levels of lead?

A. A home built before 1978 may contain high lead levels that can be dangerous to pregnant women and children. Be aware of lead paint on surfaces such as windowsills, railings and stair edges, especially at a height that a child may chew. Before renovating or buying an older home, consider testing the painted surfaces for lead. Your local health department can recommend experts.

If lead is found, hire an expert who follows safety precautions (such as blocking off the room) to remove it. Stay out of the home until the paint is gone and a thorough cleanup is completed. Afterwards, make sure painted surfaces are in good condition, especially those your baby can touch.

To minimize levels of lead in tap water, the Environmental Protection Agency recommends running your tap water until it is cold – at least 60 seconds – and a minimum of two minutes if the tap has not been used for more than six hours. Use only cold tap water for drinking, cooking and making infant formula. Call your local health department or your doctor if you have questions.

Q. I have heard of babies dying of SIDS. What is it and how can I reduce my baby's risk?

A. SIDS is "sudden infant death syndrome," the diagnosis for the sudden unexplained death of an infant under one year of age. SIDS is the leading cause of death in infants between one month and one year of age. Most SIDS deaths occur

between the ages of two and four months. While there is no way to predict which babies will die from SIDS, there are ways to lower your baby's risk:

- Put your baby to sleep on his or her back (unless advised otherwise by your doctor), even for naps.
- Place your baby on a firm mattress and not a soft surface (like a waterbed).
- Do not use fluffy pillows or comforters, or put soft pillow-like toys in your baby's crib.
- Keep your baby's face and head uncovered during sleep.
- Do not let your baby get too warm during sleep.
- Take your baby for regular well-baby checkups and routine immunizations.
- Do not smoke during pregnancy or allow smoking around your baby. Smoking during pregnancy has been associated with an increased risk of SIDS. See page 16 for smoking cessation resources.

RESOURCES

All 1-800, 1-877 and 1-888 telephone numbers are toll free.

Alcoholism and Substance Abuse

NYS Office of Alcoholism and Substance Abuse Services
1-800-522-5353

Cancer

National Cancer Institute
1-800-4-CANCER
(1-800-422-6237)

Diabetes

American Diabetes Association
1-800-DIABETES
(1-800-342-2383)

Domestic Violence

NYS Coalition Against Domestic Violence Hotline
1-800-942-6906

In Spanish:

1-800-942-6908

Environmental Health

NYS Department of Health
1-800-458-1158

Food and Nutrition

Growing Up Healthy Hotline,
NYS Department of Health
1-800-522-5006

Heart Health

This *Reporting On* is based in part on information from:

- American Academy of Pediatrics
www.aap.org
- American Congress of Obstetricians and Gynecologists
www.acog.org
- American Dental Association
www.ada.org
- American Medical Association
www.ama-assn.org
- Centers for Disease Control and Prevention
www.cdc.gov
- March of Dimes
www.marchofdimes.com
- National Institutes of Health
www.nih.gov
- U.S. Environmental Protection Agency
www.epa.gov
- U.S. Food and Drug Administration
www.fda.gov
- WebMD
www.webmd.com

American Heart Association
1-800-AHA-USA-1
(1-800-242-8721)

HIV/AIDS

NYS AIDS Information Hotline,
NYS Department of Health
1-800-541-2437

In Spanish:

1-800-233-7432

Lead Exposure

National Lead Information Center Hotline, U.S. Environmental Protection Agency
1-800-424-LEAD
(1-800-424-5323)

Oral Care

American Dental Association
312-440-2500

Pregnancy and Birth Defects

March of Dimes
1-888-MODIMES
(1-888-663-4637)

The Empire Plan NurseLineSM and Future Moms Program

1-877-7-NYSHIP
(1-877-769-7447)

You can call this number to reach an experienced registered nurse, 24 hours a day, 7 days a week. You can call the same number to reach The Empire Plan's NurseLine's Health Information Library. Enter PIN number 335 and a four-digit topic code from The Empire Plan NurseLine brochure. If you do not have your brochure, ask the NurseLine nurse to send you one.

Smoking Cessation

New York State Smokers' Quitline,
NY residents
1-866-697-8487

North American Quitline Consortium,
residents of other states
1-800-QUIT-NOW
(1-800-784-8669)

New York State Department of Civil Service, Employee Benefits Division, Albany, New York 12239 • <https://www.cs.ny.gov>

It is the policy of the New York State Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on the Department of Civil Service web site (<https://www.cs.ny.gov>). Check the web site for timely information that meets universal accessibility standards adopted by New York State for NYS Agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. NYS and PE Retirees, NYS and PE COBRA Enrollees and Young Adult Option Enrollees: Contact the Employee Benefits Division at (518) 457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).