

Your guide to a healthy pregnancy





Congratulations!

All of us at Molina Healthcare want to help you have a healthy pregnancy. We're here for you every step of the way!

When you need support during pregnancy, we're here. You can call our Healthy Moms, Healthy Babies program at (866) 472-4585 (TTY: 711) anytime you need help or want to learn more.

Keep our phone number handy: (866) 472-4585 TTY: 711

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Steps to a healthy pregnancy and baby

Step 1: Get started with an OB

You need to see an obstetrician (OB) as soon as you find out you're pregnant in the first trimester. It's important to start prenatal care early and get regular care during pregnancy. Be open and honest with your OB about your medical history and life. The more your OB knows, the more they can help you.

Need help finding an OB or making an appointment?

Call us at (866) 472-4585 (TTY: 711). If you want to change your OB, we can help you find a new one.

What to expect during your 1st prenatal visit

Your first prenatal visit will take more time than other visits. Someone in the office or your OB doctor should:

- Check your heart rate, blood pressure and temperature
- Get a urine and blood sample
- Ask you about:
 - Past pregnancies.
 - Any deliveries and children you've had.
 If you had complications with a past pregnancy, you could be at high risk.
 - Your last period to decide your due date.
 - Your health, the health of your baby's father and your family's health.
 - Your habits and lifestyle choices.
 - Any medicines you take. This includes prescription and over-the-counter.
- Talk with you about things that are unsafe for you and your baby.
- Do a pelvic exam.
- Talk about any risks for you or your baby and ways to treat them.
- Tell you how and when to contact them for any questions or issues during pregnancy.

What to expect during your follow-up prenatal visits

Your follow-up prenatal visits will take less time. Your OB or someone in the office will:

- Check your heart rate, blood pressure and temperature
- Get a urine sample
- Check your weight gain
- Measure the size of your uterus (fundal height) to track how your baby is growing
- Listen to your baby's heartbeat
- Ask if you can feel your baby move
- Draw blood if needed
- · Review warning signs with you

Your OB follow-up visits are key!

These visits can keep you and your baby healthy. Your OB can find and treat health problems early when they see you regularly.



Step 2: Get extra services for you and your baby



Step 3: Healthy eating choices



The best way to teach your baby how to eat healthy is for you to eat healthy during pregnancy. Eat a variety of foods and a rainbow of colors at each meal. This will make the fluid around your baby healthy. Your baby will also learn to like the taste of healthy foods.

Eat five or six small meals with:

- Iron-rich foods (lean meats, foods with added iron and dark, leafy vegetables).
 These foods are good for your heart and blood.
- Vegetables and fruits of all colors (melons, tomatoes and sweet peppers). These foods have potassium, which helps with muscle cramps and other important vitamins.
- Whole grain and high-fiber foods (100% whole wheat bread and cereals, brown rice and oats). These foods keep your bowels moving and help lower your risk of hemorrhoids.
- Protein foods (lean meats, fish, chicken and foods that WIC approves). These foods help your baby grow and give you energy.
- Calcium-rich foods (low-fat milk and yogurts and low-fat cheeses like ricotta or low-fat mozzarella). These foods give you healthy bones and teeth.
- Small amounts of healthy fats (avocado, nuts and olive oil). These foods give you energy.

 Some healthy snacks are okay in between meals (fat-free popcorn, low-fat yogurt or raw fruits and vegetables).

On top of a healthy diet, take your prenatal vitamin every day with food. If your prenatal vitamins make you sick, tell your OB.



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Foods to limit or cut out

No more than 1 a week during pregnancy

- Sugar foods (doughnuts, desserts and sodas)
- · Artificial sweeteners
- Fried foods or red meats
- French fries
- · Potato chips
- Canned tuna fish
- Caffeine (coffee, sodas, tea and chocolate)
- Foods high in salt (lunch meats cooked, canned, frozen and fast foods)



If you crave non-food items like dirt, clay or paper, talk to your OB right away. This is known as Pica and could harm you and your baby.

Stay hydrated by drinking at least eight, eight-ounce glasses of water a day.

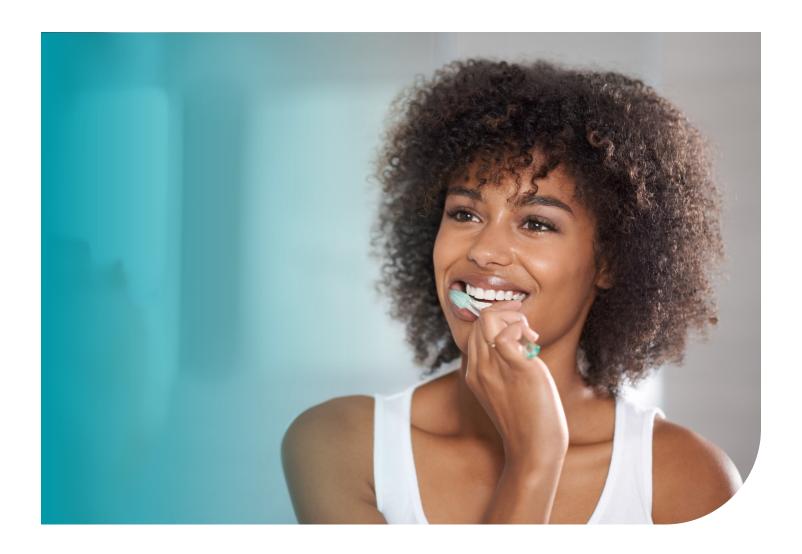
You can also drink milk and sometimes 100% fruit juice. One cup of pasteurized fruit juice and milk per day.

Never during pregnancy

- Beer, wine or alcohol
- Undercooked meats
- Undercooked eggs (sunny-side-up or over-easy)
- · Raw fish or sushi
- Sea fish with mercury in it (swordfish, tilefish, king mackerel or shark)
- Cheese that hasn't been processed at a dairy factory (cow, goat, blue, feta and brie)
- Raw honey
- Organ meats like liver







Step 4: Healthy teeth and gums

Keeping your teeth and gums healthy is important for you and your baby. If you're pregnant and have gum disease, your baby could be born too early or too small.

Sometimes gum disease is painful, but not always. You might have gum disease and not even know it.

Signs of gum disease

- · Your gums bleed when you brush your teeth
- Red, swollen or tender gums

If you have any of these signs, keep brushing and flossing every day. Visit a dentist to have your teeth cleaned. Be sure to tell the dentist you're pregnant. This is important for them to know if they need to take an x-ray.

We can help you get in touch with your dental provider, please call Member Services at (866) 472-4585 (TTY: 711).

MolinaHealthcare.com

Step 5: Avoid unhealthy choices

Smoking

There is **no** amount of smoking that is safe during pregnancy. Any type of smoking can cause complications during pregnancy. This included smoking cigarettes, cigars, e-cigarettes or vaping. When you smoke during pregnancy, your baby gets less oxygen.

Smoking can increase your risk of having:

- A miscarriage or stillbirth
- A baby being born too soon or too small



Secondhand or thirdhand smoke

Secondhand smoke is when you are around someone who is smoking, and you breathe in the smoke they exhale. It can cause:

- Low birth weight
- SIDS/SUID
- Ear infections
- Lung problems
- Coughing
- Wheezing
- Increases your baby's chances of going to the hospital for bronchitis or pneumonia

Thirdhand smoke is when the gas and particles from smoke sticks to surfaces like hair, skin, clothes, toys or furniture. If you or anyone smokes inside your house – **stop!**

A fan or air freshener will not remove secondhand or thirdhand smoke.



Smoking can increase your **baby's risk** of having:

- Crib death, also called Sudden Infant Death Syndrome/Sudden Unexplained Infant Death (SIDS/SUID)
- Ear and lung infections
- Lifelong learning problems

Stopping smoking will not only improve your health and the health of your baby, it will also:

- Lessen morning sickness
- · Give your baby more oxygen
- Lower your risk of a miscarriage or stillbirth
- Reduce complications during and after delivery
- Lower the risk of your baby being born too early or too small
- Lower the risk for SIDS/SUID

Relapse

Relapse is when you start smoking again after you've stopped. It can happen. Lots of people start smoking again. The first few days are the hardest. But the symptoms are a sign that your body is starting to recover!

Take one day at a time and reward yourself for success. Remind yourself why you stopped smoking. Quitting smoking is the best gift you can give your baby! It's never too late to quit smoking.

Want more information on how to quit? Go to the end of the next section.

Exercise during pregnancy

Regular exercise helps you adjust to the changes your body is going through during pregnancy. Exercise can relax you and get you ready for labor and delivery. Talk with your OB about the kinds of exercise you can do. Unless your OB says not to, try to exercise for at least 30 minutes most days of the week.

Overall conditioning like walking, swimming or biking is very good for you. These exercises increase your pulse rate, condition your body and strengthen your heart.



No matter what exercise you do, try to walk whenever you can. You can also try:

- Taking a lunchtime walk in the park with a friend if you're working.
- Parking away from the store entrance and walk the extra distance when you go shopping.
- Taking the stairs instead of the elevator when you can.

Alcohol

No amount of alcohol is safe during pregnancy.

Any type of alcohol (beer, wine, liquor) can cause complications during pregnancy. If you drink alcohol, it reaches your baby through the placenta. Exposure to alcohol can seriously harm your baby. It can:

- Stunt the growth of your baby's mind and body
- Increase your risk for complications
- Cause your baby to be born with Fetal Alcohol Syndrome (FAS)

Alcohol and FAS can increase your baby's risk of:

- Being born too early or too small
- Having withdrawal symptoms (these babies must stay in the hospital when mom goes home)
- Having birth defects
- Having lifelong medical and learning problems

To get help quitting alcohol, go to the end of the next section.





Pills, medicines and other substances

Some medicines are safe to use during pregnancy, like medicine to treat long-term conditions such as asthma, thyroid disease, diabetes or epilepsy.

Not all natural or home remedies are safe during pregnancy. Herbal, home remedies and aromatherapy could harm your baby.

Things you should always do:

- Check with your OB before taking any medicine (including herbal and home remedies)
- Tell your OB about any medicines or treatments you get from other doctors
- Only use over-the-counter medicines if your OB approves them and use them as little as possible
- Ask your OB about alternative pain medicine after delivery

What is Neonatal Abstinence Syndrome (NAS) or Neonatal Opiate Withdrawal (NOWS)?

NAS or NOWS is when your baby is exposed to any of these during pregnancy:

- Painkillers (opioids)
- Antidepressants
- Sleeping pills (benzodiazepines)
- Illicit street drugs (weed, ecstasy, cocaine and heroin)

It's important to let your OB know if you are using anything that can cause NAS or NOWS. Stopping too quickly can harm you and your baby.

Substances that cause NAS or NOWS can also increase the risk of:

- Miscarriage or stillbirth
- Birth defects
- Your baby being born too early or too small
- Withdrawal symptoms
- · SIDS/SUID
- Lifelong learning and behavior problems

Child Protective Services (CPS) might get involved if they think a baby is unsafe. Work with your OB to show that you want your baby to be safe.

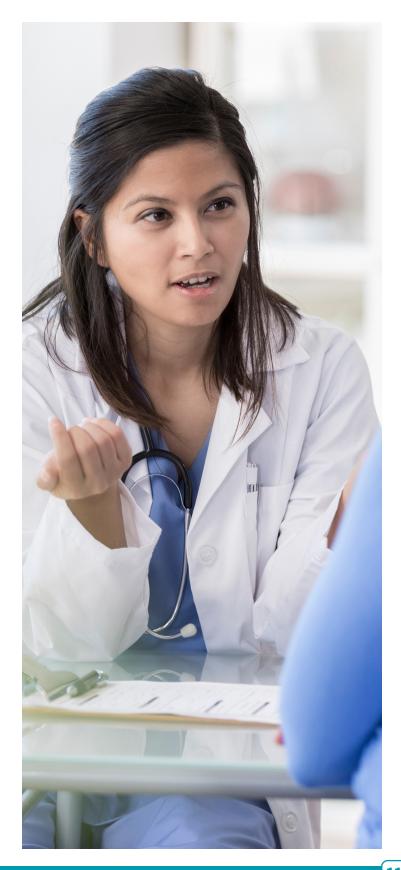
Getting help

Getting help with unsafe habits

You are four times more likely to quit unsafe habits if you have support. You can trust your OB! Tell your OB about any unsafe habits you struggle with and ask for help.

How to get ready to quit

- Avoid people and situations that make you want to do the habit
- Change your routine so you can avoid triggers
- Think about the bad things that can happen if you keep doing these unsafe habits
- Think about the good things that will happen if you stop
- Ask for help and support from your friends, family and OB
- Make a list of things to help distract you if you feel an urge. You might:
 - Talk to your baby and tell them how much you love them, and you want the best for them
 - Remind yourself of the good things that can happen if you stop
 - Take a walk
 - Search the internet for happy videos
 - Play a game on your cell phone
 - Call a positive friend for support
 - Go for a drive
 - Call one of the phone numbers on the next page
- Praise yourself for the progress you have made so far
- Take it one day or even one hour at a time.



We cover behavioral (mental) health benefits!

Resource	Contact Information	
Impower Crisis Line	(689) 688-9875	
Mobile Crisis Services	(800) 435-7968	
Рух	(855) 499-4777 or download the app at PyxHealth.com/ store-download	



Tips to help you quit smoking:

- · Only smoke outside
- Get rid of all ashtrays in the house
- Ask others not to smoke around you
- Chose a day to stop, write it down and post it on the fridge
- Call (800) QUIT NOW at (800) 784-8669
- Call the American Cancer Society at (800) 227-2345
- Contact your local health department for support groups or classes
- Visit Smokefree.gov



Tips to help you quit drinking:

- Call the National Alcohol and Drug Dependence Hopeline at (800) 622-2255
- Call the Substance Abuse Treatment Facility Locator at (800) 662-4357
- Visit Findtreatment.samhsa.gov
- Visit aa.org (Alcoholics Anonymous)



Tips to help with substance use, misuse or abuse

- Call the National Alcohol and Drug Dependence Hopeline at (800) 622-2255
- Call the Substance Abuse Treatment Facility Locator at (800) 662-4357
- Visit Findtreatment.samhsa.gov
- Visit Findhelpnowky.org/
- Visit NA.org (Narcotics Anonymous)

Protect yourself and your baby from domestic violence

Not all relationships are healthy and supportive. Abuse is when someone is hurting you in any way. There are different types of abuse. Abuse can be mental, emotional, physical or sexual. An abuser can be anybody in your life.

Protect yourself from abuse — it's the best thing for you and your baby!



When someone:

- Makes fun of you, calls you names or puts you down in front of your friends or family
- Controls where and when you go somewhere
- Controls how you get food, money, sleep or other resources
- Keeps you away from friends or family
- Blames you for their frustrations or anger
- Accuses you of being unfaithful
- Threatens you or your family
- Demands to know where you are at all times
- Destroys your favorite things
- Pushes, shoves, slaps or throws things at you
- · Kicks or chokes you
- Leaves marks or bruises on you
- Forces you to do things you don't want to, including sexual acts





How to handle abuse:

- If you're being abused, don't hide it. No one can help you if they don't know.
- Don't be afraid to ask for help. You and your baby have the right to be safe!
- Talk to someone you trust like your OB, a family member, friend or call one of the numbers on this page.

Things to know:

- Know how to quickly exit your home through doors and windows.
- Tell a trusted neighbor what to do, like call the police, if something happens.
- Know where you will go if you must leave.
- Your children have a high chance of being abused by the same person that is abusing you. The risk is even higher if your partner is not the child's parent.
- Children in an abusive home have a higher chance of becoming an abuser and having drug or alcohol problems later in life.

Abuse is not your fault. You are not alone. Help is available!

Who can I call for help?

You can call the Abuse Hotline at (800) 752-6200 or the 24-hour Crisis Line at (877) 803-7577. If you don't know what to do or you can't get away, call 911!

Things that are unsafe things for you during pregnancy

Never do thi	is during pregnancy	Why?	
	Don't change or clean a cat litter box or be around one during and after the cat uses it.	Cats can carry a parasite that can cause toxoplasmosis that can hurt your baby.	
	Don't douche.	Douching can wash away good bacteria and increase your risk of yeast infection. It also can introduce an infection to your baby.	
	Don't take bubble baths.	Bubble baths can cause urinary tract irritation and infection.	
	Don't be around people who are sick.	You can get sick.	
	Don't use hot tubs, steam rooms or saunas.		
	Don't do impact or jumping sports or ride animals.	These things are dangerous	
	Don't ride jarring rides like roller coasters or bumper cars.	during pregnancy. They can cause your placenta to pull away from the uterus (placental abruption).	
	Don't do hard physical work like lifting, pushing or pulling heavy loads.	This can threaten your life and your baby's life.	
	Don't use dangerous machinery like chainsaws or jackhammers.		
	Don't touch lizards, snakes or turtles.	They have harmful bacteria on their skin called salmonella.	

Things to know

Warning signs

What are the warning signs of a problem during pregnancy?

- Regular contractions when you feel like your belly is tightening up like a ball. You might have contractions with or without pain.
- Vaginal bleeding
- Bloody show mucus with a small blood streak (this is normal after 37 weeks)
- Leaking of fluid from the vagina
- Vaginal discharge that changes in color, odor or amount
- Low, dull backache
- Pelvic pressure or pressure between your legs or in your thighs
- Your baby does not move as much as before or stops moving
- · Stomach pain with or without diarrhea
- Cramping that feels like a period
- · Burning or pain when urinating
- Feeling dizzy or faint
- Blurred vision, seeing spots or other vision changes
- Headache that does not go away
- Vomiting or diarrhea that does not stop
- Chills, a rash or fever
- Sudden swelling in your face or hands
- Sudden increase in swelling in your feet or legs

If you have any of these warning signs or if you don't feel right, call your OB right away! Your OB may want to see you or send you to the hospital.

Emotional warning signs

The way you think and feel are part of your health. Having a healthy mind and emotions are important for you and your baby. Most pregnant women have mood swings during pregnancy and after delivery.

Talk to your OB if you:

- Feel sad most of the time or it lasts at least two weeks
- Have a history of depression or anxiety
- Have any new symptoms of depression or anxiety

Moms with mental health needs have a higher risk of pregnancy complications. These complications can put you and your baby at risk.

You're not alone! You can still have a healthy pregnancy with mental health needs. Don't hide how you're feeling. Someone can help you when they know you need it.

If you have any thoughts of hurting yourself or someone else, call 911.



Your 1st trimester (Weeks 1 to 12 | Months 1 to 3)

- If you're not taking prenatal vitamins yet, start taking them every day.
- Keep up with any vaccines you need while pregnant. They will help your baby after birth.
- Your OB will want to see you every month.
- Hormones can make you feel sick to your stomach.
 This is called morning sickness, but it can happen
 at any time of the day. If you have morning
 sickness:
 - Keep snacks like crackers or almonds with you
 - Eat five or six small meals during the day instead of three regular-sized meals
- It's okay to have mood swings. Your body is going through a lot of changes.
- Call your OB if you have any warning signs. If you're not sure if something is a warning sign, call our 24-hour Nurse Advice Line at 275-8750, Spanish: (866) 648-3537, (TTY: (866) 735-2922).
- Talk to your OB before using any home remedies.





Did you know?

- About 25% of pregnant
 women can develop a
 subchorionic hematoma. This
 is when blood forms between
 the wall of the uterus and the
 chorionic membrane during
 pregnancy. Subchorionic
 hematomas are most
 common during weeks 10 to
 20 of pregnancy. They make
 up about 10% of all vaginal
 bleeding. Most hematomas are
 not a cause for concern.
- One in four women lose their pregnancy before week 20.
 If this happens, help is available for you:
 - You can call Lifeline at (800) 273-TALK (8255) 24 hours a day, 7 days a week.
 - You can also learn more at Nationalshare.org and Pregnancyloss.org.

Your 2nd trimester (Weeks 13 to 26 | Months 4 to 6)

- Your OB will want to see you every month.
- You may be ready to wear maternity clothes.
- Your OB will do an ultrasound to find your baby's organs and make sure they're growing properly.
 They might be able to see if you're having a girl or boy. If you don't want to know the sex of your baby, tell them before they do the test!

Here's what you can expect:

- Someone will draw your blood to check your baby's brain and spinal cord. This is called Alpha-Fetoprotein (AFP).
- You will get a glucose tolerance test (GTT).
 This checks to see how your body is controlling your blood sugar now that you're pregnant.
 It's usually done around 24 to 28 weeks. If you have a history of diabetes, your OB may do it as early as 13 to 14 weeks.
- You should not eat or drink anything after midnight the night before the test.
- The lab will draw your blood after you drink a glucose solution.
- Your OB may want to do other tests. They will explain what the tests are, ask for your permission and tell you why they want to do the tests.
- It's too early for delivery. Call your OB if you have any warning signs! If you're not sure if something is a warning sign, call our 24-hour Nurse Advice Line at English: (888) 275-8750, Spanish: (866) 648-3537, (TTY: (866) 735-2922).
- Drink at least eight glasses of water every day.
- As your belly gets bigger, your balance will be off.
 Take extra care when using bathtubs and stairs.
- Talk to your OB about finding and signing up for prenatal classes.
- Ask your OB when and how to start keeping track of your baby's movements.

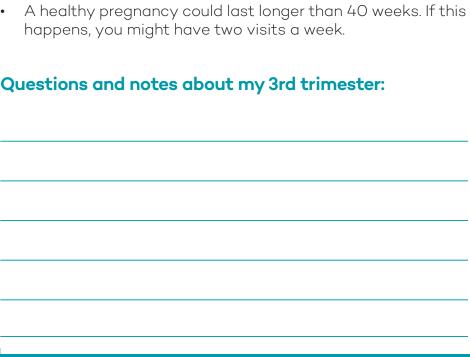




Questions and	notes	about	my 2	2nd
trimester.				

Your 3rd trimester (Weeks 27 to 40 | Months 7 to 9)

- If you haven't had a glucose tolerance test yet, your OB should schedule one for you.
- Talk to your OB about finding and signing up for prenatal classes.
- You need two visits during both your 7th and 8th month of pregnancy.
- You need weekly visits during your 9th month of pregnancy.
- If you have any pregnancy complications, your OB may see you more often and may do extra tests. These visits are important for you and your baby.
- Your baby will kick and stretch, respond to light and sounds and weigh about five or six pounds.
- Your OB might do a swab of your vagina around 36 weeks. This makes sure there are no infections that could be unsafe for your baby during delivery. You might not know you have an infection.
- If you think you've had contractions, your OB may want to check your cervix.
- If you haven't had any contractions, you can ask your OB to not check your cervix.
- If you're having signs of labor or any warning signs, call your OB right away. If you're unsure if something is a warning sign, call our 24-hour Nurse Advice Line at (888) 275-8750, Spanish: (866) 648-3537, (TTY: (866) 735-2922).
- happens, you might have two visits a week.







Getting prepared

Ways to get prepared and things to know

- Pack a bag for the hospital in your 3rd trimester.
- If you go into labor on your own and your contractions aren't happening often enough or dilating your cervix, your OB might give you medicine to help start your labor.
- Your OB may decide to start your labor for you. This is called induction. Some reasons for this are:
 - You're past your due date
 - Your blood pressure is too high
 - You have other health problems
 - Your water has broken, but labor hasn't started
 - Your baby has health problems

- · Labor is coming too soon if you have:
 - Lightening or dropping (your baby had dropped or settled deeper into your pelvis)
 - Bloody show (mucus with streaks of blood)
 - An increase in energy (nesting)



Braxton Hicks vs. true labor

There is a difference between false labor (Braxton Hicks) and true labor. The chart on this page will give you all the details!

False labor (Braxton Hicks)

- Irregular contractions
- Does not get stronger
- Does not become more frequent
- Goes away when you drink water, walk or change positions

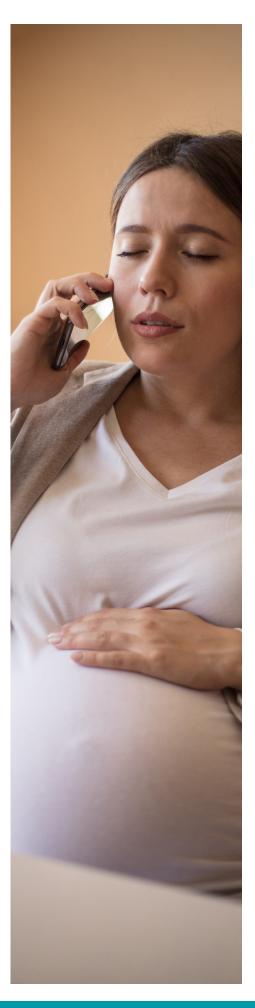
True labor

- · Regular contractions
- Gets stronger
- Becomes more frequent
- Might start in your back and hug around to your belly
- Does not go away when you drink water, walk or change positions
- Dilates the cervix

If you have any labor signs before 37 weeks, call your OB right away!

Things to know:

- If your water breaks, it might be a small amount of fluid or a gush. It can be clear, green, yellow or blood-tinged. Call your OB and go straight to the hospital. Do not take a bath or insert a tampon.
- If you think you're in labor, start timing your contractions and call your OB. They will ask you about your contractions.
 - You'll need something to record time, such as your cell phone.
 - Time your contractions from the start of one to the start of the next one. This tells you how often they are coming.
 - Time each contraction from start to finish. This tells you the length of each contraction.
 - Do not drive yourself to the hospital if you're in labor.
 Have a friend or family member drive you and wear your seatbelt. If you don't have anyone to drive you, call 911.
 - Go straight to the hospital if your water has broken, you have heavy vaginal bleeding or if you don't feel your baby moving.



Types of deliveries

Vaginal delivery

- This is when the baby passes through the vagina or birth canal.
- Most women have vaginal deliveries.
- During labor, contractions will dilate your cervix until it is completely open or dilated. You will push your baby out of your vagina.

Cesarean section (C-section) delivery

- This is when your baby is born through surgery. Your baby is born through a cut that your OB makes in your belly and uterus.
- Sometimes a baby cannot be safely delivered through the vagina, and a C-section is needed. You might schedule this and know ahead of time.
- If something unplanned happens during labor, you might need a C-section. Some reasons for an unplanned C-section are:
 - You're in labor too long or your cervix won't dilate
 - You or your baby do not tolerate labor (distress)

If you have a C-section:

- You might not get to hold your baby right away
- The nurse or pediatrician might take the baby to the nursery to watch them closely for a few hours
- Once the surgery is over, you will go to the recovery room
- When you're in your regular room, the nurse or pediatrician will bring your baby to you

Vaginal birth after C-section (VBAC)

This is when a previous baby was delivered by C-section, but the current baby is delivered vaginally.

Recovery time

Two days after a vaginal delivery:

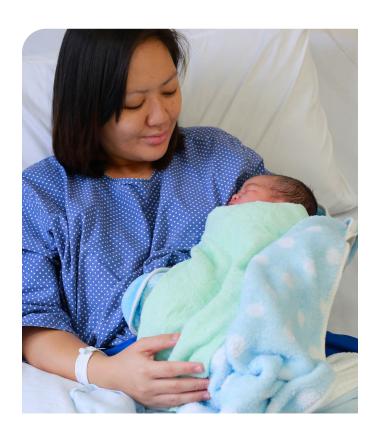
- Staff will check your vitals regularly and show you how to care for yourself. This includes ice packs, sitz bath, numbing spray and pain relief.
- Staff will give you personal care items to take home.

Four days after a C-section:

- Staff will check your incision and vital signs regularly and show you how to care for yourself. If you pushed before your surgery, someone will show you how to care for your vaginal area.
- Staff will give you personal care items to take home.

Your baby might stay in the room with you:

- Staff and a nurse will show you how to take care of your baby. This includes feeding, safe sleep, cord care and giving baths.
- Staff will give you personal care items to take home.





Choices for baby

Your baby's pediatrician

- A pediatrician is a doctor who cares for children from birth to early adulthood.
- A family primary care provider (PCP) is a doctor who provides care from birth to old age.
- Choosing your baby"s doctor, a pediatrician or a family PCP is a big decision. You want to be happy with your choice and trust their care.
- You'll want to choose your pediatrician before you deliver and make sure they're accepting new patients. Your baby will need to see the pediatrician very soon after birth.
- Your baby may be able to get their first immunizations before leaving the hospital.
- If you already have children and are happy with their doctor, you can take your newborn to the same doctor.
- Ask friends, family, neighbors or co-workers for doctors they like and trust. Your OB can also help you choose the best doctor for your baby.
- You can visit the office and meet the doctor before deciding. Call and ask the office for a tour and ask questions such as:
 - What are your hours?
 - What should I do if my baby has an emergency?
 - Who will take care of my baby when the doctor is off or out of town?
 - What hospital or emergency room (ER) does the doctor use?
 - What kind of support do you have if I want to breastfeed?
- If you need help finding a pediatrician, please call Member Services at (866) 472-4585. We can give you a list of doctors that are accepting new patients and help you choose one.

Safe travel tips and car seats

- When your baby is ready to be discharged from the hospital, you'll need a car seat.
- Always read the instructions for the car seat. Learn how to properly install the seat
 in the car and how to secure your baby in the seat. You must install the car seat
 before you can take your baby home.
- If you are unsure how to install the car seat, call your local police, fire station or health department. They will check the car seat for free.
- Always place car seats in the back seat.
- Infants should face the rear of the car until they are about two years old.
- Ask about the car seat rules on public transportation.
- If you borrow or buy a used car seat:
 - Geck with the manufacturer for any safety recalls.
 - Make sure it has never been in an accident.
 - D not use the seat if it's expired.
- When it's cold outside, strap your baby into their car seat first. Then, cover them with a blanket. This will make sure the straps fit properly on the baby. It's not safe to use a blanket or bulky coat in between the baby and straps.



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Safe sleep

SIDS/SUID is when infants die during sleep and is the leading cause of death for infants between the ages of one month and one year. Many deaths happen because of unsafe sleeping environments.

Examples of sleeping environments

Safe sleep — ALWAYS do this!

- When it's time to sleep, lay your baby on their back.
- When it's time to be awake and active, lay your baby on their tummy for "tummy time." Make sure you're with them during tummy time.
- When it's time to sleep, put your baby in their own area such as a:
 - Safety-approved crib
 - Bassinet
 - Pack 'n' Play
- Use a safe sleep surface such as a safety-approved mattress with a fitted sheet.
- When it's time to sleep, dress your baby in light clothing such as a sleeper or something that's not too hot or too cold.

Unsafe sleep — NEVER do this!

- Don't put your baby to sleep on their belly.
- Don't use bumper pads or put blankets, pillows, toys or stuffed animals in your baby's sleep area.
- Don't use an outdated or unapproved crib.
- Don't sleep with your baby (co-sleeping or bed-sharing), or let anyone sleep with your baby.
- Don't let your baby sleep on an adult bed, a sofa, a pillow, any other soft surface, in a bouncy seat, carrier or in a swing. Babies can suffocate in these places. If your baby falls asleep in one, move them to a safe sleep area.
- Don't smoke during pregnancy or allow anyone to smoke around your baby.

Breastfeeding

Breastfeeding is best, but it's not always right for everyone. It's not safe to breastfeed with certain medical conditions. Talk to your OB to see if breastfeeding is right for you.

Benefits of breastfeeding for you

- Brings you closer to your baby
- Is more convenient because it's always ready, the right temperature and the right amount
- Costs less money
- Your baby's diapers are less smelly
- · Helps you lose pregnancy weight faster
- Helps your uterus go back to its normal size faster

Benefits of breastfeeding for your baby

Breast milk is the perfect food because it:

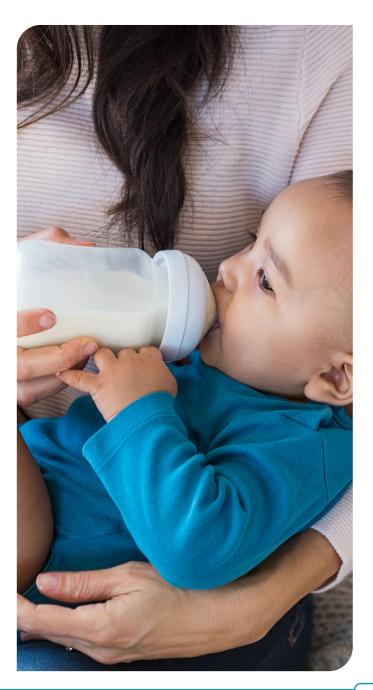
- Is made by you, for your baby
- Is easier for your baby to digest
- Has antibodies to help your baby's immune system fight infections
- Lowers your baby's chance of getting colds, allergies and asthma
- Lowers your baby's chance of having stomach problems like gas and colic problems that can cause crying
- Lowers your baby's chance of being overweight as a teen and adult
- Lowers your baby's chance of having diabetes as a teen and adult



Bottle feeding

If you choose not to or cannot breastfeed due to a medical issue, baby formula is a great choice. Formula is made from cow milk and/or soy. If you sign up for the WIC program, they will help you get formula. WIC provides Nestle Good Start® brand.

Changing formulas can be stressful to a baby's system. They may be fussy, have more gas or constipation. If you need to change your baby's formula, talk to your baby's doctor.



Back at home

Let your body heal

Your body has been through a lot, and it will take time to heal.

There are things you can do to help your body heal:

- Get plenty of rest and try to sleep when your baby sleeps.
- Keep taking your prenatal vitamins and any prescribed medicines.
- Keep eating a variety of healthy foods and drink plenty of fluids.
- Don't lift anything heavier than your baby until your OB tells you it's ok.
- Ask family and friends to help with household chores and meals. This will allow you more time
 to rest and bond with your baby.
- Keep using ice packs, peri bottles, numbing spray, sitz baths and witch hazel pads for comfort.
- If you had a C-section, check your incision daily for redness, bleeding or drainage.
- If you cannot see your incision, look in a mirror or have a family member look at it.
- Don't have sex until your OB tells you it's okay.
- Your period might start around six to eight weeks after delivery. If you're breastfeeding, you might not have a period. Even if you don't have a period, you can still get pregnant. It's important to use birth control.
- As your body adjusts to hormone changes, you might have mood swings, night sweats, skin changes or hair loss or texture changes. These things often go away within a few weeks. Talk to your OB if you have concerns.
- Schedule a postpartum exam to make sure you're healing after delivery.



Baby blues or postpartum depression?

There is a difference between baby blues and postpartum depression. Many women have some form of baby blues which go away in a few days or a week. These symptoms are mild and do not need treatment. If these feelings last longer than two weeks, you might need treatment.

Baby blues: Postpartum depression: Sadness Constant sadness, hopelessness or feeling overwhelmed Mood swings Crying all the time Tearfulness or crying spells No energy or feeling tired all the time Decreased appetite No appetite Difficulty sleeping No interest in spending time with friends or Feeling nervous for no clear reason family or doing things you used to enjoy Feeling scared for your newborn or No interest in taking care of yourself or yourself for no clear reason your baby Feeling like things will never be the same

Things you can do

- Let your OB know how you're feeling. Your OB can help you get back to feeling like yourself again
- Get plenty of rest
- Keep eating a rainbow of colors at every meal
- · Keep taking your prenatal vitamins
- Talk to your partner, family or friends
- Join a support group with other new moms
- Ask for help with household chores
- Ask people you trust to watch your baby so you can have some time for yourself

Postpartum depression can start any time after delivery. Symptoms are more serious and can last from a few weeks to several months. Call your OB right away if you or your loved ones see any signs of postpartum depression. If you have thoughts of hurting yourself, your baby or anyone else, please call 911.



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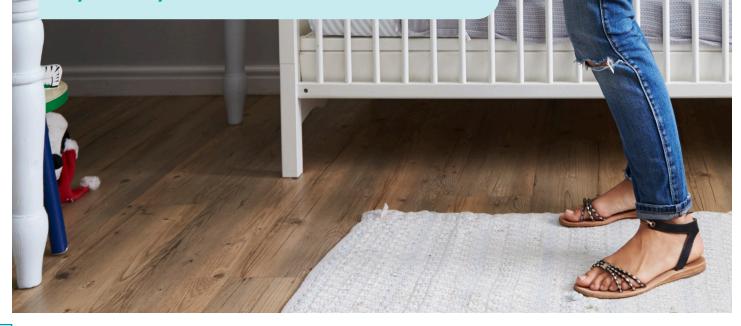


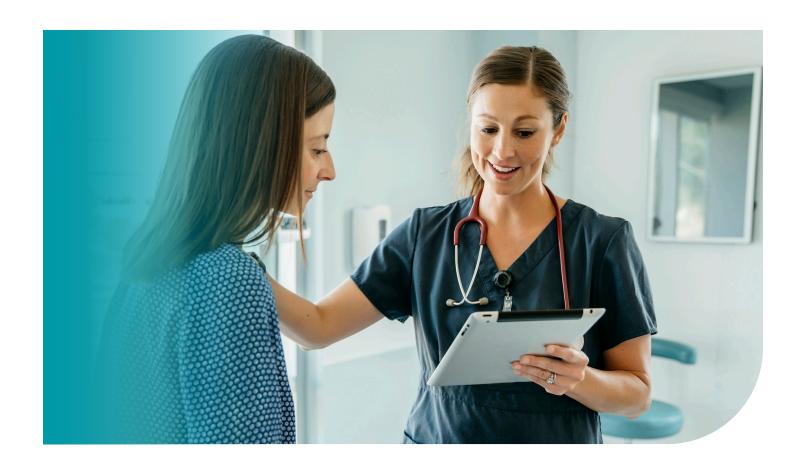
What are the most common reasons babies cry?

- Hunger (this is the first thing you should think of when your baby cries)
- Stomach problems from colic or gas
- Need to be burped
- · Dirty or wet diaper
- Need to sleep
- · Need to be held or cuddled
- Too hot or cold
- Something is hurting or bothering them (this could be a clothes tag or buttons irritating their skin)

If you've checked these things and your baby is still crying, you can put them in a safe sleep area on their back in a crib. Walk away to take a few minutes to calm yourself down. Check on the baby every 10 to 15 minutes until you are both calm.

Never shake a baby. Shaking is abuse and your baby can die.





Your postpartum visit

It's very important to see your OB after delivery. If you had complications or a C-section, see your OB two weeks after delivery. Then, see your OB again for your regular postpartum visit at six weeks.

If you have any of these warning signs before your appointment, call your OB right away:

- · Burning or pain when you urinate
- Vomiting or diarrhea that does not stop
- Feeling dizzy or faint
- Having chills, a rash or fever
- Blurred vision, seeing spots or other vision changes
- Sudden swelling in your face or hands
- A headache that does not go away
- A sudden increase in swelling in your feet or legs

What happens at a postpartum visit?

Your OB checks to make sure you're healing from delivery. Your OB will discuss birth control options with you. Wait at least 18 months before you get pregnant again. If you had complications during your pregnancy, it's even more important to go to your postpartum visit.

Choose a PCP

It's important to make an appointment with a PCP. Your PCP will take care of most of your care and make referrals when you need them. Think of your PCP as your "medical home" — the place that knows you the best!

If you have any medical needs about eight weeks after your delivery, your OB should tell you to call your PCP. If you need help finding a PCP, call Member Services at (866) 472-4585 (TTY: 711). If you haven't had a dental or vision exam during your pregnancy, now is the time to make an appointment to get them done.

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Why are immunizations so important?

Immunizations are shots that help the body fight disease. Each shot fights a different disease, like chickenpox, measles or mumps. Kids need shots to keep them safe from disease and to get ready for school. Talk to your doctor about which shots your kids need. **Remember, these shots are covered at no cost to you.**

Here's a look at the shot schedule recommended by the Centers for Disease Control and Prevention (CDC):

Shots your kids need:	When they need them:
Hepatitis B (HepB)	 1st dose: birth 2nd dose: 1 to 2 months 3rd dose: 6 to 18 months
Rotavirus (RV): RV1 (two doses) RV5 (threedoses)	 1st dose: 2 months 2nd dose: 4 months 3rd dose: 6 months
Diptheria, Tetanus, Acellular Pertussis (Dtap)	 1st dose: 2 months 2nd dose: 4 months 3rd dose: 6 months 4th dose: 15 to 18 months 5th dose: 4 to 6 years
Haemophilus Influenza Type B (Hib) (three or four doses)	 1st dose: 2 months 2nd dose: 4 months 3rd dose: 6 months 4th dose: 12 to 15 months
Pneumococcal Conjugate (PCV13)	 1st dose: 2 months 2nd dose: 4 months 3rd dose: 6 month 4th dose: 12 to 15 months



Shots your kids need:	When they need them:
Inactivated Poliovirus (IPV)	 1st dose: 2 months 2nd dose: 4 months 3rd dose: 6 to 18 months 4th dose: 4 to 6 years
Influenza (IIV) or Influenza (LAIV)	Yearly shot (1 or 2 doses): 6 months to 18 years
Measles, Mumps, Rubella (MMR)	1st dose: 12 to 15 months2nd dose: 4 to 6 years
Varicella (VAR)	1st dose: 12 to 15 months2nd dose: 4 to 6 years
Hepatitis A (HepA)	Two doses: 12 to 23 months
Tetanus, Diptheria, Acellular Pertussis (Tdap)	• 11 to 12 years
Human Papillomavirus (HPV)	 Two doses: 9 to 14 years Three doses: 15 years and older
Meningococcal	1st dose: 11 to 12 years2nd dose: 16 years

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Please note: If you have a disability and need more help, we can help you. If you need someone that speaks your language, we can also help. You may call our Member Services Department at (866) 472-4585 for more help from 8:00 am to 7:00 pm. If you are blind or have trouble hearing or communicating, please call 711 for TTY/TTD services. We can help you get the information you need in large print, audio (sound), and braille. We provide you with these services for free.

Tenga en cuenta lo siguiente: si tiene una discapacidad y necesita más ayuda, podemos ayudarlo. También podemos ayudarlo si necesita a alguien que hable en su idioma. Para obtener más ayuda, puede llamar a nuestro Departamento de Servicios para Miembros al (866) 472-4585, de 8:00 a. m. a 7:00 p. m. Si es ciego o tiene problemas de audición o comunicación, llame al 711 para acceder a servicios de TTY/TDD. Podemos ayudarlo a obtener la información que necesita en letra de molde grande, audio (sonido) y en sistema Braille. Estos servicios son gratuitos.

Remake: Si ou gen yon andikap epi ou bezwen plis èd, nou kapab ede w. Si ou bezwen yon moun ki pale lang ou an, nou kapab ede w tou. Ou gendwa rele Depatman Sèvis Manm nou an nan (866) 472-4585 pou jwenn plis èd soti 8è:00 a.m. rive 7è:00 p.m. Si ou avèg oswa ou gen difikilte pou tande oswa pou kominike, tanpri rele 711 pou sèvis TTY/TTD yo. Nou kapab ede w jwenn enfòmasyon oubezwen an gwo karaktè, odyo (son) ak an Bray. N ap ba w sèvis sa yo pou gratis.

Xin lưu ý: Nếu quý vị là người khuyết tật và cần thêm trợ giúp, chúng tôi có thể giúp quý vị. Nếu quý vị cần người có thể nói ngôn ngữ của quý vị, chúng tôi cũng có thể giúp. Quý vị có thể gọi cho Bộ phận Dịch vụ thành viên của chúng tôi theo số (866) 472-4585 để được trợ giúp thêm từ 8:00 am đến 7:00 pm. Nếu quý vị bị mù hoặc có vấn đề về thính giác hoặc giao tiếp, vui lòng gọi 711 cho dịch vụ TTY/TTD. Chúng tôi có thể giúp quý vị nhận thông tin quý vị cần bằng bảng chữ in lớn, âm thanh và chữ nổi Braille. Chúng tôi cung cấp miễn phí các dịch vụ này cho quý vị.

Non-Discrimination Notification

Molina Healthcare of Florida, Inc.



Medicaid

Discrimination is against the law. Molina Healthcare of Florida, Inc. (Molina) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Molina:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact Molina Member Services at (866) 472-4585 (TTY: 711).

If you believe that Molina has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Civil Rights Coordinator

200 Oceangate, Ste 100

Long Beach, CA 90802

Phone: (866) 472-4585 (TTY: 711)

Fax: (877) 508-5738

Email: civil.rights@molinahealthcare.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Molina Member Services is available to help you. You may obtain our grievance procedure by visiting our website at: https://www.molinahealthcare.com/members/common/en-US/Notice-of-Nondiscrimination.aspx

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

Phone: (800) 368-1019 (TDD: (800) 537-7697)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Non-Discrimination Tag Line - Section 1557

Molina Healthcare of Florida, Inc.

English ATTENTION: If you speak English, language

assistance services, free of charge, are

available to you. Call (866) 472-4585 (TTY: 711).

Spanish ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos

de asistencia lingüística. Llame al (866) 472-4585 (TTY: 711).

French ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib

Creole gratis pou ou. Rele (866) 472-4585 (TTY: 711).

(Haitian

Creole)

Vietnamese CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

Gọi số (866) 472-4585 (TTY: 711).

Portuguese ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

Ligue para (866) 472-4585 (TTY: 711).

Chinese 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電

(866) 472-4585 (TTY: 711) 。

French ATTENTION: Si vous parlez français, des services d'aide linguistique vous

sont proposés gratuitement. Appelez le (866) 472-4585 (TTY:711).

Tagalog PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng

tulong sa wika nang walang bayad. Tumawag sa (866) 472-4585 (TTY: 711).

Russian ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные

услуги перевода. Звоните (866) 472-4585 (телетайп: 711).

قظوملد: اذا تكذركذا ثدحت غة للا، نإف تامدخة وداعسما الميوغلا رفاوتت ناجم لابكا. لتصامقرب

472-4585 (866) (مقر فتاه مصلا مكبالو: 711).

Italian ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di

assistenza linguistica gratuiti. Chiamare il numero (866) 472-4585 (TTY: 711).

German ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche

Hilfsdienstleistungen zur Verfügung. Rufnummer: (866) 472-4585 (TTY: 711).

Korean 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

(866) 472-4585 (TTY: 711) 번으로 전화해 주십시오.

Polish UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy

językowej. Zadzwoń pod numer (866) 472-4585 (TTY: 711).

Gujarati સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્કાષા સહ્યય સેવાઓ તમારા માટે ઉપલબ્ધ છે.

ફ્રીન કરી (866) 472-4585 (TTY: 711).

Thai เรยน: ถาคณพดภาษาไทยคณสามารถใชบรการชวยเหลอทางภาษาไดฟร โทร (866) 472-4585

(TTY: 711).







