

FAQ:

- **Q: Do I need an authorization to receive services from an obstetrician or midwife?**
  - **A:** *When you believe you may be pregnant, you should schedule an appointment with your Primary Care Physician, who will confirm your pregnancy and order your initial lab work. At that time you may wish to discuss your choice of obstetrical care provider with your PCP. An authorization is not necessary, if you use an in-area network health care professional to provide your maternity care. To determine which providers are covered by CHP, you may search the [Network Directory](#) or you may call the Member Services Department, at (850) 383-3311, for assistance*
  
- **Q: Where should I get my lab work done?**
  - **A:** *All laboratory work must be done at [LabCorp](#). Your primary care physician (PCP) will order all of your initial lab work to be done at LabCorp and forwarded to your obstetrician (OB). Additional lab work ordered by your OB must also be done at LabCorp. Your doctors will give you instructions and the appropriate lab orders.*
  
- **Q: What pregnancy-related expenses are covered by CHP?**
  - **A:** *CHP covers hospital and obstetrical services for normal pregnancy, delivery, miscarriage or pregnancy complications within the CHP service area unless the need for such services was not, and could not reasonably have been anticipated, before leaving the service area. If you plan to deliver your baby outside of the hospital setting, please call Member Services at (850) 383-3311 for more information. CHP provides coverage for maternity care according to Florida Statute 641.31 (18).*
  
- **Q: What if I need further tests or referrals?**
  - **A:** *CHP must authorize any additional referrals and tests. Any services (besides lab work) done outside your OB's office -- amniocentesis, OB ultrasound, etc. -- must be pre-arranged by your OB, who will verify that the service is medically necessary, that it is a covered benefit, and that the services are performed at a covered facility. If your OB refers you to any other facility, such as Shands Hospital, or orders outpatient tests or procedures, contact your PCP as soon as possible for authorization. To find out what services are covered by Capital Health Plan, call Member Services at (850) 383-3311.*
  
- **Q: Who do I call to get medical information?**
  - **A:** *We encourage you to keep in touch with both your Primary Care Physician and your Obstetrician during your pregnancy. Your Obstetrician will manage your pregnancy. Your Primary Care Physician will continue to manage any non-pregnancy related medical care. If you have general questions both before and after the baby is born, don't forget the [CHP Health Information Line](#), which is available 24/7, at no additional cost, to answer questions and assist you.*

- **Q: What is covered if I have to travel?**

- *A: Routine obstetrical care, including diagnostic tests and procedures, is not covered out of the Capital Health Plan service area. CHP recommends that you limit your out-of-town travel during your pregnancy. After 37 weeks gestation, out-of-area travel deliveries would be anticipated and therefore not covered.*

- **Q: How do I secure coverage for my newborn?**

- *A: The expense of your newborn will be covered for medically necessary hospitalization and newborn care only if you secure proper coverage for your baby. It is your responsibility to add your child to your policy. This should be done through the subscriber's human resources office within 30 days of the birth of your child. If you would like to pre-enroll your baby, check with the subscriber's human resources office to see if this is an option for you. Coverage for your baby will be denied -- even if you have family coverage -- until the next open enrollment if CHP does not receive notice from the employer within 60 days of the birth of the child. Early in your eighth month of pregnancy, call Member Services to request a list of primary care physicians so you can select one for your newborn. If you have questions about this enrollment process, please contact Member Services at (850) 383-3311.*

- **Q: The big day is here. What do I need to know?**

- *A: When you arrive at the hospital to deliver, it is important to identify yourself to labor and delivery personnel as a CHP member. You will also need to tell them whether your baby will have CHP coverage and the name of the doctor who will care for the baby. This doctor will be the baby's Primary Care Physician.*

- **Q: My baby is here. Now what?**

- *A: If your baby is already enrolled through the subscriber's human resources office, you will need to call Member Services as soon as possible with the baby's name. We will record the information in your child's membership and issue an identification card. If the baby is not yet enrolled, it is your responsibility to add your child to your policy. This should be done through the subscriber's human resources office within 30 days of the birth of your child. Coverage for your baby will be denied -- even if you have family coverage -- until the next open enrollment if CHP does not receive notice from the employer within 60 days of the birth of the child.*

- **Q: What do I need to know about feeding my newborn?**

- *A: Breast milk is the best source of nutrition for growing babies. Breast milk contains all the right nutrients in the right amounts. In addition to the nutritional benefits, breast fed babies receive antibodies through breast milk and are better equipped to fight infection. One of the most important and unique benefits of breast feeding is the lasting emotional bond that is formed between mother and child.*