

Special Beginnings®

Maternity Program for Blue Cross Community Health Plans™ Members

Special Beginnings is a maternity program that is there for you whenever you need it. This program can help you to better understand and manage your pregnancy. Join Special Beginnings as early as possible in your pregnancy and help you and your baby to be healthy. If you are pregnant or have delivered a baby within the last 84 days (as a Blue Cross Community Health Plans member) you are eligible to join the program. When you join, you will get:

- **Health Education.** You will get information and materials on a variety of topics. You will learn about how your unborn baby is growing and newborn care. You will also get well-child information that is helpful for new parents. Other topics include nutrition and healthy life choices before and after your baby is born.
- Personal Phone Calls. The Special Beginnings Care Coordinator will call you throughout your pregnancy and after delivery. They will talk about how you and your baby are doing.

Blue Cross Community Health Plans is provided by Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association.



Personal, Confidential Help

Once you enroll, your Special Beginnings Care Coordinator will speak with you about your health and activities. They will also help you find more pregnancy-related resources if you need them. Our trained staff will:

- Check on your health and lifestyle to see if you have pregnancy risks. Risks include diabetes or high blood pressure.
- Help you find obstetrics (baby) doctors and specialty care.
- Teach you about prenatal (before birth), postpartum (after birth), and newborn care.
- Provide access to a 24-hour, toll-free telephone hotline staffed by trained registered nurses (1-888-343-2697).
 The 24/7 Nurseline includes access to an audio library with health information.

Join Today

For questions about Special Beginnings, please call **1-888-421-7781** (TTY/TDD: **711**), email

GPD_IL_Specialbeginnings@bcbsil.com, or text **ILTOT** to **33633** (English) or **ILBEBE** to **33633** (Spanish).

The information you get from the Special Beginnings Program does not replace the care you get from your doctor. It is important to see your doctor to get the health care you need.

As part of Special Beginnings, you may be eligible to get a free car seat, portable crib and/or diapers. You must join Special Beginnings to qualify. To ask for supportive aids and services, or materials in other formats and languages for free, please call, **1-877-860-2837** TTY/TDD: **711**.

Blue Cross and Blue Shield of Illinois complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross and Blue Shield of Illinois does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Blue Cross and Blue Shield of Illinois:

- Provides free aids and services to people with disabilities 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 services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Civil Rights Coordinator.

If you believe that Blue Cross and Blue Shield of Illinois 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, Office of Civil Rights Coordinator, 300 E. Randolph St., 35th floor, Chicago, Illinois 60601, 1-855-664-7270, TTY/TDD: 1-855-661-6965, Fax: 1-855-661-6960, Civilrightscoordinator@hcsc.net. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Civil Rights Coordinator is available to help you.

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

1-800-368-1019, **800-537-7697** (TDD)

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

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-877-860-2837 (TTY/TDD: 711)**.

Español (Spanish): ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-877-860-2837 (TTY/TDD: 711)**.

繁體中文 (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 1-877-860-2837 (TTY/TDD: 711).

Tagalog (Tagalog – Filipino): PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-860-2837 (TTY/TDD: 711).

Français (French): ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-877-860-2837 (ATS: 711).

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-877-860-2837 (TTY/TDD: 711)**.

Deutsch (German): ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-877-860-2837 (TTY/TDD: 711)**.

한국어 (Korean): 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-860-2837 (TTY/TDD: 711)번으로 전화해 주십시오.

Русский (Russian): ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-860-2837 (телетайп: 711).

(Arabic): العربية

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-778-068-7382 (رقم هاتف الصم والبكم: 117).

हिंदी (Hindi): ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-877-860-2837 (TTY/TDD: 711) पर कॉल करें।

Italiano (Italian): ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-877-860-2837 (TTY/TDD: 711)**.

ગુજરાતી (Gujarati): સુયના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહ્યય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-877-860-2837 (TTY/TDD: 711).

کریں کال ۔ ہیں دستیاب میں مفت خدمات کی مدد کی زبان کو آپ تو ،ہیں بولتے اردو آپ اگر :خبردار :(Urdu) اُردُو 1-877-860-2837 (TTY/TDD: 711).

Polski (Polish): UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-877-860-2837 (TTY/TDD: 711)**.

λληνικά (Greek): ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθε σή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε **1-877-860-2837 (TTY/TDD: 711)**.