



Medi-Share®
Christian Care Medical Sharing

*Behold, children are a heritage from the LORD,
The fruit of the womb is a reward.*

Psalm 127:3 (NKJV)

Congratulations on your pregnancy! What a blessing the Lord has bestowed upon you! We are excited to share in this special time with you and are providing the enclosed information to make your sharing process as effortless as possible so you may focus on your health and the little blessing to come.

Included is a quick overview of the Medi-Share Maternity Guideline (Section VII.) as well as the “Add a Newborn” form and some helpful information from our Health Initiatives Department to assist you during your pregnancy and after.

After carefully reviewing the information we’ve included, please feel free to call Member Services at (800) 264-2562 with any additional questions you may have.

We look forward to serving you!





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MATERNITY AND MEDI-SHARE 2.0 Questions and Answers

What do the Guidelines say about maternity and what are my provisions for sharing?

You will find a copy of the current maternity provisions (Section VII.) online at www.MyChristianCare.org. The current Guidelines govern, not the Guidelines in effect when you joined (Section I. C.).

Here are the important points regarding eligibility:

- There must have been faithful sharing for the mother from the month of conception through the month of delivery.
- The delivery must have been performed by an M.D., D.O. or a midwife who is properly licensed, certified or registered in the state of delivery.
- There is a limitation on sharing for non-C-section and C-section births, based on your annual household portion (AHP). Please see the charts below for the amount shareable after the AHP and your additional portion have been paid.
- Members cannot switch AHP levels during their pregnancy.
- **Important note:** If your maternity extends beyond your AHP effective date your AHP will reset and will have to be met again once again before sharing can occur.
- Expense for life-threatening complications to mother and/or child(ren) can be eligible for sharing only if the maternity is eligible for sharing.
- Circumcision expenses are shared as part of the maternity if they are performed within 30 days of delivery and the maternity share limit has not been exceeded.
- Genetic Testing: The cost of genetic testing without specific symptoms is not shareable (Guidelines Section VI.J. Routine screening tests and procedures without medical reasons). If you choose to have this type of testing done during your maternity, the costs related to those tests are your responsibility. If you do not wish to have any genetic testing done, it is recommended to notify your provider early in your pregnancy.

- If multiple births result from infertility treatment and complications to either mother and/or child(ren), the maximum amount shareable, regardless of the AHP and additional portion (if applicable), is \$25,000. If there are no complications, the standard maternity sharing limits apply.

Annual Household Portion (AHP)	Sharing Limit per Pregnancy	Annual Household Portion (AHP)	Sharing Limit for C-Section
\$500	N/A	\$500	N/A
\$1,250	\$8,000	\$1,250	\$24,000
\$2,500	\$6,500	\$2,500	\$19,000
\$3,750	\$5,000	\$3,750	\$16,500
\$5,000	\$3,500	\$5,000	\$14,000
\$7,500	\$2,000	\$7,500	\$9,000
\$10,000	\$500	\$10,000	\$4,000

Make sure you read the Guidelines for detailed information regarding the above points.

What are my alternatives for care?

- For sharing to be considered you must be seen by an **M.D., D.O.** or a **midwife licensed, certified, or registered in the state of delivery**. CCM does require a copy of documents confirming the license, certification or registration of the midwife. Failure to provide this documentation may affect the sharing of medical bills.
- Use providers that are in the **PHCS network** at www.MyChristianCare.org/PHCS or by calling 877-302-7427. If you elect to use providers that are not in the PHCS network, and there are PHCS providers in your area, you may incur an out-of-network penalty. See Section V. of the Guidelines for details.
- Some states provide Medicaid maternity programs and there are often other funded programs to help offset the cost of your maternity needs. Call 800-264-2562, extension 2904. **Reminder! Medi-Share is not insurance and is secondary to other resources.** See Guidelines Section XII. A.

How is Medi-Share billed for my maternity related expenses?

- Most deliveries are billed using global billing. The intent of global billing is to offer a convenient means of billing for providers who render total obstetrical care to a woman throughout her pregnancy. Global obstetrical (OB) billing consists of ante partum care, delivery and postpartum care. As a result of global billing, the only bills that are routinely shared prior to delivery are lab work and ultrasounds which are billed during the pregnancy.

- Have your providers submit their medical bills directly to Medi-Share for discounting and processing. Once the EOS (Explanation of Sharing) has been received, you will be able to determine what amount remains to be paid towards your Annual Household Portion (AHP) and Additional Portion.
- You are **STRONGLY** discouraged from prepaying any of your maternity bills. If you make a decision to pre-pay for your OB delivery services or the hospital stay, it is difficult to get the proper billing and discounting and the charges cannot be shared until after the delivery. The same applies if a midwife is prepaid for delivery fees.

How do I add my newborn child to Medi-Share?

- If the mother is a member from the time of conception, a newborn can be a member from birth if the [Add a Newborn Form](#) is completed and submitted within 30 days of delivery. One is included in this package for your use, or can be downloaded at www.MyChristianCare.org.
- If the notification deadline is not met, the member may be required to submit an application for the child to be added to the parent's program. The application to add a family member can be found at www.MyChristianCare.org. If you have questions, call Member Services.
- Children born into Medi-Share can potentially change your **monthly share amount**. If you are sharing at a level of two, the addition of a child will increase your share to the family amount.

What if this maternity is not eligible for sharing because I have not been a member since conception?

- Any expenses related to current pregnancy will not be eligible for sharing, including medical bills for the maternity, delivery, or complications related to the birth (mother or child).
- Any complication during this pregnancy will be considered a Pre-existing condition in any future pregnancy.
- Your baby will not be on your Medi-Share program until you add them after their birth. You can do so by completing an Add-on Application 21 days AFTER the birth of your child. You will have to complete the application process for your child including completing a medical questionnaire. There is no application fee for adding your child onto your existing program.
- Because you were not a member when you became pregnant, you cannot apply for Extra Blessings to pay for your maternity.
- Assistance may be available through an alternative program and we would like to help you in finding one. If you qualify, the alternative program may pay for this current pregnancy.

Questions? Call Member Services at (800) 264-2562.

The following articles are from author Joel Fuhrman, M.D. used with the author's permission. For more helpful information, visit www.drfuhrman.com. If you have any questions or would like to view more of the resources available through Christian Care Ministry, please call the Health Initiatives Department at 800.264.2562, ext. 2911.

What Precautions Should I Take When I am Pregnant or Nursing? By Joel Fuhrman, M.D.

The developing baby inside you is sensitive to the effects of toxins more so than any other time in its life. It is never too early to start protecting yourself and your unborn child; this should happen before pregnancy occurs. Clearly, there are a lot of dangerous habits to avoid before pregnancy, and there are also a lot of fears women have that are not founded in science or logic.

The real concerns are not microwave ovens, cell phones and hair dryers. The things we know to be really risky for you and your unborn children are:

- Caffeine
- Nicotine, including second hand smoke
- Alcohol
- Medications both over-the-counter and prescription drugs
- Herbs and high dose supplements, vitamin A
- Fish, mollusks, shellfish and sushi (raw fish)
- Hot tubs and saunas
- Radiation
- Household cleaners and paint thinners
- Cat litter
- Raw milk and cheese
- Soft cheeses and blue-veined cheese such as feta, Roquefort and Brie
- Artificial colors, nitrates and MSG
- Deli meats, luncheon meats, hot dogs and undercooked meats

When a pregnant woman uses drugs, even aspirin, she and her unborn child can face serious health problems. Because something is natural or purchased in a health food store, it does not mean that it is safe. Herbal remedies work because of their medicinal properties from naturally occurring toxins; they are not health food. I also advise against dying your hair during pregnancy.

Toxoplasmosis and listeria are two infectious agents recognized to be dangerous to your unborn child. If you have a cat, only change the litter wearing disposable gloves. By avoiding raw dairy products, soft cheeses and undercooked meats, you can reduce the risk of contracting listeria.

Caffeine has been a controversial topic for decades. Evidence clearly concludes that heavy coffee drinkers have increased risk of spontaneous abortion and low birth weight in infants, but the evidence is not clear for moderate users of caffeine. Nevertheless, it is wise to stay away from as many toxic substances as possible. The bottom line is, if in doubt, don't do it.

Fish Consumption and Pregnancy

I advise pregnant women to completely avoid seafood products; it is just too difficult to know what pollutants lies within. Shellfish and mollusks are particularly risky.

Fish is one of the most polluted foods we eat, and it may place consumers at high risk for various cancers. Scientists have linked tumors in fish directly to the pollutants ingested along the aquatic food chain, a finding confirmed by the National Marine Fisheries Service Laboratory. From the flounder in Boston Harbor to English sole in Puget Sound, scientists report that hydrocarbon pollution from habitat concentrate in fish. There are high cancer rates around New Orleans, where fresh fish and shellfish are a staple of the local cuisine.

Fish with Highest and Lowest Mercury Levels

Highest	Lowest
tilefish swordfish mackerel shark white snapper tuna	salmon flounder sole tilapia trout

Source: Mercury levels in seafood species. U.S. Food and Drug Administration, Center for Food Safety and Applied Nutrition, Office of Seafood, May, 2001.

Higher levels of mercury found in mothers who eat more fish have been associated with birth defects, seizures, mental retardation, developmental disabilities and cerebral palsy. This is mostly the result of women having eaten fish when they were pregnant. Scientists believe that fetuses are much more sensitive to mercury exposure than are adults, although adults do suffer from varying degrees of brain damage from fish consumption.

Even the FDA, which normally ignores reports on the dangers of our cavalier food practices, acknowledges that large fish such as shark, swordfish, yellow fin, and blue fin tuna are potentially unhealthful. Researchers are also concerned about other toxins concentrated in fish that can cause brain damage long before the cancers caused by chemical, carrying fish appear.

Avoid Fish When Pregnant - Take a DHA Supplement Instead

I am concerned about pregnant women eating fish and advice against it. Instead, I recommend a predominantly plant centered diet, with essential fats from raw nuts, seeds and avocados. A dietary plan for a healthy pregnancy is much like a dietary plan for excellent health. It should include a minimum of five fresh fruits a day, lots of raw and cooked green vegetables, vegetable/bean soup, about 2 to 3 ounces of raw nuts and seeds daily or avocado for a clean source of raw fats. It should include tomatoes, red peppers and berries for their beneficial phytochemicals and at least one yellow/orange starchy vegetable such as corn, sweet potato or squash. Those desiring animal products should limit themselves to eggs and some white meat fowl, but not fish. Dairy fat is also a common source of DDT and other toxic pesticides and toxic substances. So, cheese and butter, which are high in saturated fat, should be avoided. The fatty portion of dairy foods is, after fish, the largest dietary source of the fat-soluble chemical in pesticides.

All pregnant women should take a supplement of DHA. Docosahexaenoic acid (DHA) is an omega-3 long chain polyunsaturated fatty acid and one of the crucial building blocks of human brain tissue. Early in life, DHA is supplied via the placenta and from breast milk. Adequate DHA is particularly important for pregnant and nursing women. Studies have shown improved intelligence scores of breast fed children whose mothers took DHA supplements during pregnancy and nursing. The DHA levels in the breast milk from women in the United States are among the lowest in the world.

DHA deficiencies starting in childhood can contribute to multiple problems later in life, such as hyperactivity and allergies. In fact, dyslexia and ADHD have been linked to the low DHA intake common in the United States. An adequate level of DHA has been found to improve behavior and symptoms of ADHD.

Deficiencies of DHA may increase vulnerability to depression and may be responsible for most postpartum depression after the baby's needs extract DHA from the mother's stores. DHA supplementation is indicated in anyone with a history of depression.

The typical modern diet is low in DHA in both omnivores and vegetarians alike. Most people eat a diet rich in omega-6 fats, but deficient in omega-3. Vegetarians and those who limit their intake of fish, wild meat and eggs have especially been noted to have low levels of DHA. Many vegetarians who consume sufficient flax, hemp, walnuts and greens as a source of short chain omega-3 fat may manufacture sufficient DHA fat on their own, but even with an ideal diet, lots of those on vegan diets are still found to be too low in this extremely beneficial compound.

Feeding Kids Right, By Joel Fuhrman, M.D.

Food choices, especially food choices early in life, are the primary cause of disease and poor quality of life in this country. The major health problems that plague us – clogged arteries, obesity, diabetes, cancers, and others begin in childhood. What we feed our children from infancy through adolescence, and how we respond to their childhood illnesses, will influence the kind of health and longevity they enjoy the rest of their lives.

We would like to encourage you to read *Disease Proof Your Child* by Dr. Joel Fuhrman. This book contains fascinating science which demonstrates that the current epidemic of adult cancers and other diseases are closely linked to what we eat. The seeds for future auto-immune diseases are also sown in childhood eating. By eating right today, children can be healthy tomorrow.

The solution for frequently ill children is not more and more antibiotics. Eating the right nutrient-dense foods has a significant impact on children's resistance to dangerous infections, their intelligence, and success in school. A change in dietary habits can have a dramatic effect on reducing the occurrences of illness like: ear infections, asthma, and allergies.

The book *Disease Proof Your Child* gives dietary recommendations that take science to the family table in a manner that kids will like. It contains essential knowledge for parents to ensure that their children are eating right to maintain a healthy mind and body. It includes guidelines on how to get even the pickiest eater to learn to love healthy food. Delicious, easy to prepare, child tested recipes are included.

There are thousands of books out there on nutrition, and many of them contradict each other with different viewpoints and advice. Nutritional science is not political and it is not a belief system. When the data is reviewed with completeness and integrity, one has no choice but to recognize that the diets most people are feeding their children today are destructive. They destine their child to a lifetime of compromised health and a premature death from cancer.

Christian Care Ministry recommends the book, Disease Proof Your Child by Joel Fuhrman M.D. which emphasizes the importance of these principles and offer practical solutions to implementing them in your home. Feeding kids right can be challenging but it is worth the effort. Prayerfully consider adopting as much of a nutrient dense diet as your household can manage. Please call our Health Initiatives Team of Coaches if you have health related questions or need help (800.264.2562 extension 2911)