

Summary of Guideline Changes EFFECTIVE 11.1.25

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			Numerous and various grammar, layout, formatting, punctuation, and verbiage edits to aid clarity.
I.B.		I.B.	Removed Statement of Faith and Lifestyle Requirements
I.C.	Statement of Faith and Lifestyle Requirements Believe that your body is a temple of the Holy Spirit and that any sexual activity outside traditional Biblical marriage as designed by God between one biological man and one biological woman is sin. Empowered by the indwelling Holy Spirit, you are committed to living a holy and consecrated life in which you abstain from any such activity. GEN 1:27, 2:24 MATT 19:5 1 COR 6:18	I.C.	Changed section header Membership Requirements Revised statement about Gender/Sex Believe that your body is a temple of the Holy Spirit, that God gifted you your biological sex, and that manifesting any identity outside of your God-given biological sex, and any sexual activity outside traditional, historically Biblically orthodox marriage as designed by God between one biological man and one biological woman, is sin. Empowered by the indwelling Holy Spirit, you are committed to living a holy and consecrated life in which you live a life in conformity with your God-given biological sex, and abstain from any sexual activity outside of traditional, historically orthodox Biblical marriage. GEN 1:27, 2:24 MATT 19:5 1 COR 6:18
II.C.	REDEEM™ Essential REDEEM Essential offers a reliable solution at a low monthly cost and allows the household membership to select the level of sharing participation to determine their monthly share amount and AUA. Members mutually share eligible medical expenses, subject to the AUA, a Co-Share amount, and subject to \$1 million per household membership maximum per year.	II.C.	Clarifies some REDEEM™ Enhanced eligible medical expenses are not eligible for REDEEM™ Essential REDEEM Essential offers a sharing solution at a low monthly cost and allows the household membership to select the level of sharing participation to determine their monthly share amount and AUA. Members share eligible medical expenses. Members do not share certain preventative screenings, wellness visits, and outpatient prescription costs. REDEEM Essential has a \$1 million per household membership maximum per year.
		III.A.	Added Right to Reject Changes. REDEEM HealthShare has the discretion to declare amounts ineligible for sharing it finds unreasonable, excessive, or duplicate charges.
III.A.	Be the Result of Condition, Injury, or Illness: The bill must be for a condition, injury, or illness and have a Date of Service (DoS) after the membership start date. Bills for pre-existing conditions are also shareable under certain circumstances. The guidelines for pre-existing conditions are discussed in detail in Section III.D. In every case, bills must always have a Date of Service (DoS) after the membership start date to be eligible for sharing.	III.A.	Revised referenced section (See Section III.F) Added The bill must be for a physical condition being treated—not a psychological, emotional, or spiritual condition. Examples of ineligible conditions: Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder, Sensory Process Disorder, Post Traumatic Stress Disorder, and cognitive developmental issues.

	Bills not related to a condition, injury, or illness—such as preventive and routine wellness visits—may only be shareable in REDEEM Enhanced (See Section III.G) or in FlexShare.		
III.A.	For Incurred Services or Qualifying Estimates: In most instances the bill must be for actual services incurred. However, for maternity or in cases where significant savings can be achieved, the submission of bill estimates may be acceptable.	III.A.	Added Please contact Member Care for more details.
III.B.	Approved Sharing of Bills To be eligible for sharing, bills for professional services—including assessing, diagnosing, treating, reporting, or giving advice in a medical capacity—must be submitted by the medical provider via the EDI on the REDEEM Member Card, on a Superbill, on a CMS 1500 form, or UB and IB form, or uploaded by the member through the online bill submission portal in the Member Center. The services or items in the bills must be ordered or provided ordered by a:	III.B.	section rewritten to clarify how providers may submit bills differs from how members may submit bills differs from how members may submit bills To be eligible for sharing, a provider must submit their billing via 1) the Electronic Data Interchange (EDI) on the REDEEM Member Card, 2) a Center for Medicare and Medicaid Services card (CMS) 1500, or 3) a Uniform Billing (UB) and Integrated Billing (IB) form. Bills submitted by the provider must follow standard healthcare industry submission and coding guidelines to meet sharing consideration. Many medical providers are willing to submit their bills electronically directly via the Member Card EDI number. However, if a member must manually submit a bill for processing, the member must submit the bill using the online submission portal in the Member Center. Members should ask their provider for a Superbill, which is a common and comprehensive healthcare industry billing documentation format. Member submitted bills must include the following itemized details: Name of patient Diagnosis and International Classification of Diseases (ICD-10) codes Procedure and Current Procedural Terminology (CPT) codes Provider's National Provider Identifier (NPI) Provider's National Provider Identifier (NPI)
III.C.	Non-Shareable Conditions in First Membership Year. The following conditions are not shareable for the first 12 months of membership, except through FlexShare if that option is selected. This waiting period does not apply to Samaritan Ministries Legacy Members.	III.C.	Clarifies Legacy member tenure carries over to REDEEM but there is still a 6 month waiting period if FlexShare is selected Non-Shareable Conditions in First Membership Year. The following conditions are not shareable for the first 12 months of membership. For Samaritan Ministries Legacy Members who join REDEEM without membership interruption, this waiting period begins at

			the member's start date in the legacy program. When selected, FlexShare always has an initial 6 month waiting period. Bills for these conditions are eligible for FlexShare after the initial 6 month waiting period:
III.C.	Non-Shareable Treatments in First Membership Year. The following treatments are not shareable for the first 12 months of membership, except through FlexShare if that option is selected. This waiting period does not apply to Samaritan Ministries Legacy Members.	III.C.	Clarifies Legacy member tenure carries over to REDEEM but there is still a 6 month waiting period if FlexShare is selected Non-Shareable Treatments in First Membership Year. The following treatments are not shareable for the first 12 months of membership. For Samaritan Ministries Legacy Members who join REDEEM without membership interruption, this waiting period begins at the member's start date in the legacy program. Bills for these conditions are eligible in FlexShare, if that option is selected, after the initial 6-month waiting period.
III.D.	This waiting period does not apply to Samaritan Ministries Legacy Members. Conditions and treatments that were eligible for sharing according to the Pre-Existing Conditions in the Guidelines for Health Care Sharing in Samaritan™ Classic and Basic are eligible to be shared without waiting in REDEEM HealthShare.	III.D.	Clarifies Legacy member tenure carries over to REDEEM for pre-existing conditions For Samaritan Ministries Legacy Members who join REDEEM without membership interruption, this waiting period begins at the member's start date in the legacy program. Conditions and treatments that were eligible for sharing according to the Pre-Existing Conditions in the Guidelines for Health Care Sharing in Samaritan™ Classic and Basic are eligible to be shared without waiting in REDEEM HealthShare.
III.E.	To be considered medically necessary in REDEEM Essential, REDEEM Enhanced, or REDEEM SeniorSaver, the service must meet all of the following requirements: It must not be maintenance therapy or maintenance treatment; Its purpose must be to restore health; It must not be primarily custodial in nature; It must not be a listed item or treatment not allowed for reimbursement in the United States by CMS (Medicare).	III.E.	Revised requirements In REDEEM Essential, REDEEM Enhanced, or REDEEM SeniorSaver, the medically necessary service must meet all of the following requirements: Its purpose must be to restore health. It must be eligible for reimbursement in the United States by CMS (Medicare) or listed in Section III.F. It must be eligible for sharing per the program Guidelines. It must not be maintenance therapy or maintenance treatment It must not be primarily custodial in nature.
III.F.1.	Maternity and Newborns Due Date Requirements. Maternity expenses are eligible for memberships where two or more members (one of whom must be the mother) have been active for at least 12 months before the estimated due date. This 12-month waiting period also restarts after a switch from REDEEM Essential to REDEEM Enhanced or from a higher to a lower AUA.	III.F.1.	Added language for how maternity waiting periods work for Legacy members and when an active member marries and adds a spouse For Samaritan Ministries Legacy Members who join REDEEM without membership interruption, this waiting period begins at the member's start date in the legacy program. REDEEM HealthShare makes an exception when one of the members has been active for 12 months and adds their future spouse or spouse within 30 days before or after the wedding day. If the member applies to add their spouse and the ministry approves then sharing in eligible needs including a pregnancy occurring on or after the marriage date will start on the marriage date.
III.F.2.	Prescription Medications Inpatient Prescriptions. Prescriptions administered as part of inpatient treatment are shareable. These are	III.F.2.	Added exceptions and REDEEM SeniorSaver requirements Exceptions may be made in the case of medications

III.F.3.	subject to the AUA, applicable Co-Share amounts, and annual maximums. Outpatient Prescriptions (REDEEM Enhanced only). Prescribed medications are shareable only within the REDEEM Enhanced program. There is an annual cap of \$1,000 per household membership, per year. Outpatient prescriptions are not subject to the AUA. Mental Health Costs for involuntary commitment up to \$50,000 per year are shareable and subject to AUA and Co-Share. Outpatient mental health treatment, such as counseling and therapy, is shareable only through FlexShare.	III.F.3.	for cancer and transplant recipients. Requirements for exception consideration include application to a Patient Assistance Program (PAP) and other available programs for medication cost when available. REDEEM SeniorSaver members who want to share prescription bills must also have Medicare Part D. Revised second paragraph Costs for involuntary commitment up to \$50,000 per year are shareable and subject to AUA and Co-Share. Voluntary inpatient and outpatient mental health treatment, such as counseling, therapy, special education charges, and care for learning deficiencies or behavioral problems are only shareable through FlexShare.
III.F.4.	Therapies Category A: Physical and Manipulative Therapies (\$5,000 cap per household membership per year)	III.F.4.	Revised list and added Home Care therapies to Category A Category A: Physical and Manipulative Therapies (\$5,000 cap per household membership per year):
III.F.6.	Motor Vehicle Related Medical bills incurred for injuries resulting from motorized vehicles will only be eligible for sharing after any insurance entity or other liable third party has paid their portion, provided all other Guideline requirements are met. If the member submitting the bill was operating the vehicle, the vehicle must not have been operated recklessly.	III.F.6.	Revised eligibility language Medical bills incurred for injuries resulting from motorized vehicles only meet sharing eligibility 1) after any insurance entity or other liable third party has paid their portion and, 2) provided all other Guideline requirements are met. If the member submitting the bill was operating the vehicle, then the member must not have operated the vehicle recklessly. To determine eligibility, report the motor vehicle related injuries to Member Care.
III.F.11.	Routine & Wellness Visits (REDEEM Enhanced) Routine and wellness visits are eligible for sharing only if the member is part of the REDEEM Enhanced program. Each member is eligible for one routine visit per year. These routine wellness visits are capped at	III.F.11.	Clarified eligibility and added school physical Routine and wellness visits are eligible for sharing when the member is part of the REDEEM Enhanced program. Each member is eligible for one routine visit and labs per year. Members can substitute a traditional wellness

	\$300 per person, per year and are not subject to the AUA requirements.		visit with a school physical. The limit for routine wellness visits and labs is \$300 per person, per year. The cost of a routine visit or a school physical is not subject to the AUA requirements.
III.F.13.	Preventative Screenings (REDEEM Enhanced) Colonoscopy. Adults are eligible for one colonoscopy every five years per person or every two years for high-risk individuals (as determined by their physician), beginning at age 45. Cologuard (or equivalent testing) may be substituted for a scheduled colonoscopy if desired. These bills are not subject to the AUA and are not eligible for sharing within the first six months of membership.	III.F.13	Clarified and expanded upon sharing eligibility Colonoscopy. Adults are eligible for one colonoscopy every five years per person or every two years for high- risk individuals (as determined by their physician), beginning at age 45. Members may substitute Cologuard (or equivalent testing) for a scheduled colonoscopy if desired. These bills are not subject to the AUA and are not eligible for sharing within the first six months of the Member Start Date. Required treatment during the procedure such as polypectomies and pathology are eligible for sharing when part of the original preventative screening. You may need to have your bill re-processed if your provider bills the additional treatment separately. If your test shows a medical issue, follow-up procedures, testing, or treatment will be subject to and apply toward your AUA, and Co-Share. If you have already met your AUA, then your bill is eligible for sharing through the usual process.
III.F.13.	Preventative Screenings (REDEEM Enhanced) Gynecological. Women are eligible for annual gynecological wellness visits, including Pap tests each year. These bills are not subject to the AUA and are not eligible for sharing within the first six months of membership.	III.F.13.	Added dollar limit Gynecology. Women are eligible for annual gynecological wellness visits, including Pap tests. The limit is \$300 per person, per year. These bills are not eligible for sharing with the first six months of the Member Start Date and are not subject to AUA.
III.G.	Not Eligible for Sharing Treatment that is in violation of the Statement of Faith and Lifestyle Requirements (listed in Foundational Principles) including illness or injury arising from grossly negligent acts, use of illegal drugs, abuse of alcohol, or any illegal activity, whether an arrest is made, charges are filed, or a conviction results, is not eligible for sharing. Additionally, the following expenses are not eligible for sharing, unless noted: 1. Cosmetic surgeries, injections, or procedures, with exceptions: a. Breast reconstruction after cancer b. Medically necessary breast reduction c. Reconstructive surgery from any injury d. Cleft palate 2. Infertility treatment 3. In-vitro fertilization 4. Genetic testing 5. Inpatient psychological treatment, except as specified in Section III.G. 6. Bills related to an event while on active military duty 7. Bills that are required to be covered by worker's compensation insurance	III.G.	Section revised The following expenses are not eligible for sharing unless noted: 1. Treatment that is in violation of the Member Requirements including illness or injury arising from grossly negligent acts, use of illegal drugs, abuse of alcohol, or any illegal activity, whether an arrest is made, charges are filed, or a conviction results. For more information, see the Foundational Overview section. 2. Cosmetic surgeries, injections, or procedures, with exceptions: • Breast reconstruction after cancer for the affected breast and the non-affected breast only if the breast cancer is eligible for sharing and only if recommended for symmetry purposes. Revisions of initial breast reconstructions are ineligible for sharing except in cases of infection, necrosis, or treatment of lymphoma. • Medically necessary breast reduction. • Reconstructive surgery from any injury. • Cleft palate.

Cleft palate.

• Birth defect—like missing all or part of an ear.

3. Medication or treatment for sexual health or

compensation insurance

8. Any injury or illness arising from any illegal activity

9. Any charges where a third-party is responsible

- 10. Charges not submitted within twelve (12) months from the Date of Service (DoS)
- 11. Charges for the release of medical records
- 12. Charges for anything relating to transsexualism, gender dysphoria, sexual reassignment, or change, including medications
- 13. Charges for travel or accommodations to pursue treatment at a non-local site of care unless approved by the Ministry on a case-by-case basis
- 14. Drug/alcohol abuse treatment
- 15. Procedures or surgery that is not medically necessary
- 16. Prophylactic (treatment intended to prevent disease) and preventive surgery without personal history of diagnosis and a doctor's recommendation.
- 17. Experimental treatment
- 18. Birth control
- 19. Abortion
- 20. Complications related to ineligible procedures, conditions, and diagnoses except pre-existing maternity. If complications arise from a medical procedure that is not shareable, expenses for treating the complications are shareable unless the procedure that was the cause was not shareable due to moral reasons (e.g., abortion) or the complication itself is not shareable (e.g., a routine dental problem arising from the treatment of a routine dental problem).
- 21. Transportation to appointments
- 22. Psychotropic medication*
- 23. Nutrition services*
- 24. Medical supplies*
- 25. Gym memberships*
- 26. Non-medical expenses
- 27. Additional wellness visits beyond the one allowed per membership year in REDEEM Enhanced*

Items with an asterisk (*) may be shared under FlexShare.

- dysfunction.
- 4. Fertility or Infertility treatment.*
- 5. In-vitro fertilization.
- 6. Non-required genetic testing for treatment of an existing condition.*
- 7. Treatment related to genetic defects, hereditary diseases, or congenital conditions which was known or producing symptoms before membership.
- 8. Inpatient psychological treatment*, except as specified in section III.F. Limited Sharing | 3. Mental Health
- 9. Outpatient mental health treatment, such as counseling, therapy, special education charges, and care for learning deficiencies or behavioral problems.* 10. Bills related to an event while on active military duty. 11. Bills that worker's compensation insurance should cover.
- 12. Any injury or illness arising from any illegal activity.13. Any charges where a third-party is responsible.14. Bill irregularities:
 - Charges not submitted within twelve (12) months from the date of service
 - Additional information requested from the member or provider needs to be received by REDEEM within 12 months of service or 90 days from the date requested, whichever is later. REDEEM HealthShare must receive any additional information requested from the member or provider no later than 12 months from the date of service or 90 days after the date requested, whichever is later.
 - Excessive or unnecessary provider charges which includes afterhours, holiday, and weekend fees

Note: See section VI.C. Permitted Sharing Levels and section III. B. Approved Sharing of Bills for more information.

- 15. Charges for the release of medical records.*
- 16. Charges for anything relating to transsexualism, gender dysphoria, sexual reassignment, or change, including medications.
- 17. Charges for travel or accommodations to pursue treatment at a non-local site of care unless approved by the ministry on a case-by-case basis.
- 18.Drug and alcohol abuse treatment.
- 19. Medical marijuana.
- 20. Care for symptoms not related to a specifically diagnosable disease or injury, such as ongoing fatigue and malaise*
- 21. Psychological, emotional, or spiritual conditions.
 22. Neurodevelopmental conditions including but not limited to; Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder, Sensory Process Disorder, Post Traumatic Stress Disorder, and cognitive developmental issues.*
- 23. Procedures or surgery that are not medically

		24. Weight management treatment or procedures.* 25. Consultations include but are not limited to dietary, diabetic, lactation, and genetic counseling.* 26. Custodial or Long-term care.* 27. Educational services and materials including but not limited to; Lamaze, breast feeding, and early childhood intervention. 28. Prophylactic (treatment intended to prevent disease) and preventive surgery without personal history of diagnosis and a doctor's recommendation.* 29. Experimental treatment* 30. Birth control for the purpose of contraception. 31. Abortion. 32. Hearing aids.* 33. Dental or Vision services not related to medical injury or illness.* 34. Orthotics.* 35. Durable Medical Equipment including but not limited to mobility equipment such as motorized wheelchairs or scooters, exercise equipment and home modifications. Does not include CPAP to treat a specific disease when ordered by a qualifying provider.* 36. Sleep studies not related to a specific disease or disorder* 37. Complications related to ineligible procedures, conditions, and diagnoses except pre-existing maternity. If complications arise from a medical procedure that is not shareable unless the procedure that was the cause was not shareable due to moral reasons, like an abortion, or the complication itself is not shareable, like a routine dental problem arising from the treatment of a routine dental problem. 38. Transportation to appointments 39. Psychotropic medication* 40. Nutrition services* 41. Non-prescription (over-the-counter) drugs and medical supplies/equipment;* 42. Gym memberships* 43. Non-medical expenses* 44. Additional wellness visits beyond the one allowed per membership year in REDEEM Enhanced* 45. Routine, wellness visits and prevention screenings for REDEEM Essential* 46. Immunizations for REDEEM Essential* 47. Outpatient Prescriptions for REDEEM Essential* 48. Premiums for insurance products
	III.H.	Removed exception from REDEEM SeniorSaver Sharing limitations list and put at end of section The exception to the above would be any bill related to services declared as not eligible for sharing in Section III.G.

necessary.

		IV.D.	Added to Qualifying Life Event Changes Turning 65 and would like to join REDEEM SeniorSaver
IV.D.	Switching Fee and Resetting AUA Switching Fee. Changing your program or AUA level requires a switching fee of \$100. You can choose the first day of any future month for your switch to occur and the \$100 switching fee will be included in your Total Share Amount Due within one to two months after the switch is effective. Resetting AUA. Changing your program or AUA level will reset the AUA for the year. Adding or Removing Members Eligibility. You can add or remove members from your membership at any time. Share Amount Adjustment. If the addition or removal of a member impacts your share amount, the change will be reflected in your next Share Notice.	IV.D.	Clarified how Switching Fee and Resetting AUA works • Switching Fee. Changing your program or AUA level requires a switching fee of \$100. You can choose the first day of any future month for your switch to occur and the Total Share Amount Due (Member Center) will include the \$100 switching fee within one to two months after the switch is effective. • Resetting AUA. Changing your program or AUA level will reset the AUA. • You can add or remove members from your membership at any time without incurring a fee.
IV.K.	For all civil matters of procedure and substance regarding any dispute or claim that comes within these mediation/arbitration requirements, the laws of the State of Texas, and if applicable of the United States, shall govern.	IV.K.	Updated to state disputes are settled in the State of Illinois For all civil matters of procedure and substance regarding any dispute or claim that comes within these mediation or arbitration requirements, the laws of the State of Illinois, and if applicable of the United States, will govern.
VIII.A.	Governance REDEEM HealthShare Ministry is governed by the Samaritan Ministries Board of Directors, all of whom are members of the ministry's health care sharing programs. Six members of the Board of Directors are elected by the membership which includes the participants in all Samaritan Ministries International programs. Samaritan Ministries founder, Ted Pittenger, is a permanent Board Member and appoints two unelected Board Members, for a total of nine members. Each Board Member's term is for three years. None of the elected Board Members have a financial or employment interest in REDEEM HealthShare or Samaritan Ministries. No Board Members receive financial compensation for their service, except for reimbursement of expenses incurred attending the meetings. The Board has three regularly scheduled meetings as needed.	VIII.A.	Updated to reflect the current Board of Directors structure REDEEM HealthShare is a division of Samaritan Ministries International. Members of REDEEM HealthShare are members of Samaritan Ministries. The Samaritan Ministries Board of Directors, all of whom are members of the ministry's health care sharing programs, govern REDEEM HealthShare Ministry. There are nine seats on the Board. Elected members fill six of those seats. The six elected members serve staggered terms of three-years; two are elected annually. The International President and two people, appointed by the Board, fill the remaining seats. This arrangement allows a balance of input between Samaritan leadership and the membership at large. No board member receives compensation for their service to the Board as a Director. The Board has three regularly scheduled meetings each year and special meetings as needed.