

Changes Effective 8.1.25

			Numerous and various grammar, layout, formatting, punctuation, and verbiage edits to aid clarity.
I.B.	Foundational Overview Membership Accountability Verification Form	I.B.	Provides additional instruction a church Accountability Verification Form
I.C.	Foundational Overview Statement of Faith and Lifestyle Requirements A person initiating a legal proceeding against REDEEM HealthShare Ministry would disqualify himself from membership. 1 COR 6:1-8	I.C.	Added Samaritan Ministries International A person initiating a legal proceeding against REDEEM HealthShare Ministry or Samaritan Ministries International would disqualify himself from membership. 1 COR 6:1-8
I.C.	Foundational Overview Statement of Faith and Lifestyle Requirements Accountability Verification Form	I.C.	Provides additional instruction a church Accountability Verification Form
I.D.	Foundational Overview Health Care Sharing in General THE PAYMENT OF MEDICAL BILLS BY MEMBERS THROUGH REDEEM HEALTHSHARE MINISTRY OR OTHERWISE IS NOT GUARANTEED IN ANY WAY.	I.D.	Reinforces voluntary support THE ASSISTANCE WITH MEDICAL BILLS BY MEMBERS THROUGH REDEEM HEALTHSHARE MINISTRY OR OTHERWISE IS NOT GUARANTEED IN ANY WAY.
II.A.	Health Care Sharing Programs How Health Care Sharing Works / Overview Members deposit their monthly share amounts into a specific member-owned (not-REDEEM-owned), bank account—called a Share Account—opened by the member during the application process with our third-party fiduciary, America’s Christian Credit Union.	II.A.	Clarifies frequency of deposit, the amount, and who opens the Share Account Members deposit monthly their Total Share amounts into a specific member-owned (not-REDEEM-owned), bank account—called a Share Account—opened by the primary member during the application process with our third-party fiduciary, America’s Christian Credit Union.
II.A.	Health Care Sharing Programs How Health Care Sharing Works / Overview All eligible medical bills are subject to an Annual Unshareable Amount (AUA), which is the dollar amount a household membership must pay toward their own eligible medical bills during a twelve (12) month period before their eligible medical bills can be published and shared by REDEEM HealthShare. Some REDEEM programs have Co-Share amounts and other limits described herein.	II.A.	Explains to whom the member pays their AUA All eligible medical bills are subject to an Annual Unshareable Amount (AUA), which is the dollar amount a household membership must pay direct to providers toward their own eligible medical bills during a twelve (12) month period before their eligible medical bills can be published and shared by REDEEM HealthShare. Some REDEEM programs have Co-Share amounts and other limits described herein.
II.B.	Health Care Sharing Programs Membership Terminology The AUA resets on the anniversary of your membership date or upon switching between programs or AUA levels.	II.B.	Clarifies when the AUA resets The AUA 12-month period begins on your membership date. The AUA resets on the anniversary of your membership date or upon switching between programs or AUA levels after which it resets on the Effective Date Anniversary.
II.B.	Health Care Sharing Programs Membership Terminology Your membership date is the date that your	II.B.	Further defines Membership Date Your membership date is the date that your membership in a REDEEM HealthShare program

	membership in REDEEM HealthShare started.		started. All medical bills with a date of service after this date will be determined for eligibility under these Guidelines.
II.B.	<p>Health Care Sharing Programs Membership Terminology</p> <p>A member who migrates without membership interruption from Samaritan™ Classic or Samaritan™ Basic in good standing to REDEEM HealthShare membership.</p>	II.B.	<p>Further defines Samaritan Ministries Legacy Member</p> <p>A member who migrates without membership interruption from Samaritan™ Classic or Samaritan™ Basic in good standing to REDEEM HealthShare membership. These members have transferred their participation from a current Samaritan Classic or Samaritan Basic program.</p>
II.E.	<p>Health Care Sharing Programs REDEEM™ SeniorSaver</p> <p>REDEEM SeniorSaver is a program for members 65 years of age and older. It is designed to work with Medicare Parts A and B providing a significantly lower monthly share. Medicare Parts A and B will cover 80% of the costs of bills incurred for services that Medicare covers; the REDEEM community shares the remaining 20%. Members are not required to join REDEEM SeniorSaver when they turn 65; they can participate in REDEEM Essential or REDEEM Enhanced for as long as they like. REDEEM SeniorSaver has a \$500 AUA.</p> <p>Additional REDEEM SeniorSaver Requirements</p> <ol style="list-style-type: none"> 1. You must have Medicare Parts A and B to participate in REDEEM SeniorSaver. 2. You must also have Medicare Part D to have prescriptions shared. 3. You may only participate as an individual. Those wishing to have a “couple” or “family” membership will need to participate in REDEEM Essential or REDEEM Enhanced. 4. All other membership requirements in Conditions of Sharing (Section IV) and Foundational Overview (Section I) apply. <p>Shareable in REDEEM SeniorSaver</p> <ol style="list-style-type: none"> 1. Items that Medicare Parts A and B cover will also be shareable with REDEEM members after Medicare’s coverage has been applied and the \$500 AUA has been reached. 2. Prescriptions may be shared only for REDEEM SeniorSaver members with Medicare Part D after Medicare’s coverage has been applied and the \$500 AUA has been reached. 3. The exceptions to the above would be any bill related to services declared as not eligible for sharing in Section III.H. 	II.E.	<p>Added Medicare Advantage and removed Shareable in REDEEM SeniorSaver</p> <p>REDEEM SeniorSaver is a program for members 65 years of age and older. It is designed to work with Medicare Parts A and B (and if applicable, Medicare Advantage plans) with sharing secondary to those Medicare plans. Medicare Parts A and B will cover 80% of the costs of bills incurred for services that Medicare covers; the REDEEM community shares the remaining 20% portion of eligible bills, with some exceptions. Members are not required to join REDEEM SeniorSaver when they turn 65; they can participate in REDEEM Essential or REDEEM Enhanced for as long as they like. REDEEM SeniorSaver has a \$500 AUA.</p> <p>Additional REDEEM SeniorSaver Requirements</p> <ol style="list-style-type: none"> 1. REDEEM SeniorSaver requires participation in Medicare Part A and Part B and is considered secondary to Medicare Part A, Part B, and, if applicable, Medicare Advantage plans. 2. Members wishing to have prescriptions shared must also have Medicare Part D. 3. Members may only participate as an individual. Those wishing to have a “couple” or “family” membership will need to participate in REDEEM Essential or REDEEM Enhanced. 4. All other membership requirements in Conditions of Sharing (Section IV) and Foundational Overview (Section I) apply.
II.F.	<p>Health Care Sharing Programs FlexShare™</p> <p>A membership may submit bills in the FlexShare program after six months of participation. The annual allowance amount resets on the membership anniversary date, and any unused balance does not carry over to the next year.</p>	II.F.	<p>Revised when FlexShare annual allowance resets</p> <p>A household membership may submit bills in the FlexShare program after six months of participation. The annual allowance amount resets on the membership anniversary date or on the effective date, and any unused balance does not carry over to the next year.</p>

II.G.	Health Care Sharing Programs Annual Sharing Caps and Lifetime Limits Annual Sharing Maximum	II.G.	Defined maximum is per household membership Annual Sharing Maximum (household membership)
II.G.	Health Care Sharing Programs Annual Sharing Caps and Lifetime Limits REDEEM™ Essential 20% Membership responsibility	II.G.	Added clarification REDEEM™ Essential 20% Membership responsibility
II.H.	Health Care Sharing Programs Liability REDEEM HealthShare is not liable for the payment of a member's medical bill. If sharing occurs, the shared medical bills are paid by the member that incurred the bill from other member's share contributions only, not from funds of REDEEM HealthShare itself.	II.H.	Added language around volunteer community REDEEM HealthShare is not liable for the payment of a member's medical bill. If sharing occurs, the shared medical bills are paid by the member that incurred the bill from other member's share contributions only, not from funds of REDEEM HealthShare itself. Members have no legal obligation to contribute toward another member's medical bill, but send assistance as part of a volunteer community.
II.H.	Health Care Sharing Programs Liability These are the only exceptions. Otherwise, members must not certify that REDEEM HealthShare is insurance to avoid purchasing insurance required by law, rule, or regulation, such as worker's compensation insurance.	II.H.	Provides example These are the only exceptions. Otherwise, members must not certify that REDEEM HealthShare is insurance to avoid purchasing insurance required by law, rule, or regulation, such as worker's compensation insurance, or extended auto coverage in some states, such as Michigan.
		III.A.	Added: Superbill Expenses Eligible for Sharing Submission Timeframe Members should ask their provider for a Superbill, which is a common and comprehensive healthcare industry billing documentation format.
		III.A	Moved from Section III.F. Expenses Eligible for Sharing Prepayment. When prepayment is requested, REDEEM HealthShare will make every effort to negotiate with the provider/facility to ensure that we obtain a rate that is consistent with our Permitted Sharing Level. If the provider/facility is unable to provide a rate that meets our Permitted Sharing Level, we will make every effort to find a provider/facility whose fees are closer to our Permitted Sharing Level. The member can choose to see the provider of their choice, but if the rate is more than our Permitted Sharing Level, then prepayment and sharing will be limited to 200% of the CMS rate, and the member will be responsible for the remaining balance. Any bills paid in full by the member will be shared based off what was actually paid by the member. Right to Reject Charges. REDEEM HealthShare has the discretion to declare amounts ineligible for sharing it finds unreasonable, excessive, or duplicate charges.

III.B.	Expenses Eligible for Sharing 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 CMS 1500 form, or UB and IB form, or uploaded by the member through the online bill submission portal in the Member Center. These bills must be ordered by a: (see list in Guidelines)	III.B.	Clarifies bill submission 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: (see list in Guidelines)
III.B.	Expenses Eligible for Sharing Approved Sharing of Bills <ul style="list-style-type: none"> Residential setting (for home births only) 	III.B.	Added hospice care to residential setting for tests and treatments <ul style="list-style-type: none"> Residential setting (for home births or hospice care only)
		III.E.	Moved from Section III.F. Expenses Eligible for Sharing Off-label Drugs. Sharing of off-label drug use is considered medically necessary when all of the following conditions are met: <ul style="list-style-type: none"> The drug is approved by the FDA; The prescribed drug use is supported by one of the following standard reference sources: <ul style="list-style-type: none"> DRUGDEX; The American Hospital Formulary Service Drug Information; Medicare approved Compendia; or Scientific evidence is supported in well-designed clinical trials published in peer-reviewed medical journals, which demonstrate that the drug is safe and effective for the specific condition; and the drug is medically necessary to treat the specific condition, including life threatening conditions or chronic and seriously debilitating conditions.
		III. F.	Removed Section III.F. — Permitted Sharing Levels
III.G.	Expenses Eligible for Sharing Limited Sharing	III.F.	Section reference changed
III.F.2.	Expenses Eligible for Sharing Limited Sharing Outpatient Prescriptions (REDEEM Enhanced only). Outpatient prescriptions are shareable only within the REDEEM Enhanced program. There is an annual cap of \$1,000 per household membership, per year.	III.F.2.	Provides clarification and removed member card requirement for purchase 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.

	<p>Outpatient prescriptions are <u>not</u> subject to the AUA. Prescriptions medications must be purchased using the Member Card (see Rx Information on the card).</p>		<p>Outpatient prescriptions are <u>not</u> subject to the AUA.</p>
III.F.4.	<p>Expenses Eligible for Sharing</p> <p>Limited Sharing</p> <p>Therapies</p> <p>Therapies delivered in a repetitive protocol are subject to limitations and must be prescribed by a licensed medical professional. For each therapy category, there is a \$5,000 cap per household membership per year:</p> <p>In-office therapies (\$5,000 cap per household membership per year)</p> <ul style="list-style-type: none"> • Acupuncture/Acupressure • Cardiac • Chiropractic care • Disc decompression • Dry needling • Hyperbaric treatments • Massage therapy • Occupational therapy • Physical therapy • Respiratory • Softwave therapy • Speech therapy • Vision <p>Hormone therapies (\$5,000 cap per household membership per year).</p> <p>Injection therapies (\$5,000 cap per household membership per year).</p> <p>These therapies and treatments are subject to the AUA and Co-Share amounts. They must not be for pre-existing conditions.</p>	III.F.4.	<p>Expanded, clarified, and categorized</p> <p>Therapies delivered are subject to limitations and must be lawfully prescribed by a licensed medical professional. It must be a physical condition being treated—not a psychological, emotional, or spiritual condition. Examples of conditions we don't share for: Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder, Sensory Processing Disorder, Post Traumatic Stress Disorder, and cognitive developmental issues. For each of the three eligible therapy categories, there is a \$5,000 cap per category, per household membership per year, for a total of \$15,000 per year:</p> <p>Category A: Physical and Manipulative Therapies (\$5,000 cap per household membership per year)</p> <ul style="list-style-type: none"> • Acupuncture/Acupressure • Cardiac • Chiropractic care • Disc decompression • Dry needling • Hyperbaric treatments • Massage therapy • Occupational therapy • Physical therapy • Respiratory • Softwave therapy • Speech therapy • Vision <p>Category B: Hormone Therapies (\$5,000 cap per household membership per year)</p> <ul style="list-style-type: none"> • Androgen replacement therapy • Menopause related conditions • Pregnancy/Maternity support (excluding IVF) <p>Category C: Injection Therapies (\$5,000 cap per household membership per year)</p> <ul style="list-style-type: none"> • Platelet Rich Plasma/Stem Cells • Prolotherapy • Steroid and corticosteroid <p>Cosmetic injectables, such as dermal fillers, botulinum toxins, and body contouring are not shareable.</p> <p>These therapies and treatments are subject to the AUA and Co-Share amounts. They must not be for pre-existing conditions.</p>
III.F.8.	<p>Expenses Eligible for Sharing</p> <p>Limited Sharing</p> <p>Telemedicine</p> <p>No-cost urgent care telemedicine conducted using</p>	III.F.8.	<p>Revised sharing eligibility</p> <p>No-cost urgent care telemedicine conducted using our approved telehealth provider is freely available through the Member Center and is not</p>

	our approved telehealth provider is freely available through the Member Center and is not subject to the AUA and Co-Share. Other telehealth visits through other providers will not be eligible for sharing.		subject to the AUA and Co-Share. Telemedicine from other providers is subject to AUA and Co-Share as applicable.
III.F.13.	Expenses Eligible for Sharing Limited Sharing Preventative Screenings Mammogram. Women are eligible for one mammogram per year beginning at age 45. These bills are not shareable within the first six months of membership and are not subject to AUA.	III.F.13.	Added: breast ultrasound Mammogram. Women are eligible for one mammogram or breast ultrasound per year beginning at age 45. These bills are not shareable within the first six months of membership and are not subject to AUA.
		III.F.14.	Added: Direct Primary Care Expenses Eligible for Sharing Limited Sharing Direct Primary Care Both "Direct Primary Care" and "Concierge Medicine" are methods by which consumers pay a regular fee, usually monthly, to secure more favorable access to a primary care physician. That monthly fee for a member's household is shareable, up to \$100 for any month in which, in regards to that need, the physician is consulted, makes a referral, or charges for services.
		III.F.15.	Added: Medical Care Outside of the United States Expenses Eligible for Sharing Limited Sharing Medical Care Outside of the United States Bills from medical treatments occurring outside of the United States can be shared. They must be written or translated into English and the price must be converted to U.S. dollars. They must include all the bill itemization requirements in Section III.A.
III.H.	Not Eligible for Sharing	III.G.	Subsection reference changed
III.G.1.	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, 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	III.G.1.	Revised list 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

5. Inpatient psychological treatment, except as specified in Section III.G.
6. Non-medical expenses*
7. Bills related to an event while on active military duty
8. Bills that are required to be covered by worker's compensation insurance
9. Any injury or illness arising from any illegal activity
10. Charges outside the US if they traveled to that location for the sole purpose of receiving treatment
11. Any charges where a third-party is responsible
12. Charges not submitted within twelve (12) months from the Date of Service (DoS)
13. Charges for the release of medical records
14. Charges for anything relating to transsexualism, gender dysphoria, sexual reassignment, or change, including medications
15. 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
16. Drug/alcohol abuse treatment
17. Procedures or surgery that is not medically necessary
18. Prophylactic (treatment intended to prevent disease) and preventive surgery without personal history of diagnosis and a doctor's recommendation.
19. Experimental treatment
20. Psychotropic medication*
21. Birth control
22. Abortion
23. 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).
24. Transportation to appointments
25. Nutrition services*
26. Medical supplies*
27. Gym memberships*
28. Additional wellness visits beyond the one allowed per membership year in REDEEM Enhanced*

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

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
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.

		<p>III.H.</p> <p>Added subsection</p> <p>REDEEM SeniorSaver Sharing Limitations</p> <p>REDEEM SeniorSaver is a sharing program for those aged 65 and over designed to be secondary to Medicare Part A, Part B, and if applicable Medicare Advantage plans. There are some specific exclusions and limits:</p> <ol style="list-style-type: none"> 1. Items that Medicare Parts A and B cover will also be shareable with REDEEM members after Medicare's coverage has been applied and the \$500 AUA has been reached. 2. Prescriptions may be shared only for REDEEM SeniorSaver members with Medicare Part D after Medicare's coverage has been applied and the \$500 AUA has been reached. 3. The exceptions to the above would be any bill related to services declared as not eligible for sharing in Section III.G. 4. Blood transfusions: in some scenarios requiring blood transfusion, blood products must be purchased by the provider for the member. Those costs are shareable. 5. Inpatient acute care hospitalization: <ol style="list-style-type: none"> a. Days 1-60: Medicare covers these costs b. Days 61-150: Medicare covers the significant portion of costs, the balance is shareable c. Days 151-beyond: Not shared
IV.B.2.	<p>Conditions of Sharing</p> <p>Inactivation of Membership</p> <p>Involuntary Inactivation</p> <p>Notice Periods</p> <ul style="list-style-type: none"> • 30 Days' Notice: After 30 days of non-compliance, members will receive a notice informing them of their ineligibility for sharing until the issue is resolved. Membership will be suspended at this point, which means that members are not eligible to have their bills shared. • 45 Days' Notice: After 45 days of non-compliance, members may receive a second notice. • 60 Days' Notice: After 60 days of non-compliance, the membership will be inactivated, effective from the date the member should have funded the share wallet or completed the click-to-share requirement 	<p>IV.B.2.</p> <p>Clarified type of bills (new) and removed 45 Days' Notice</p> <p>Notice Periods</p> <ul style="list-style-type: none"> • 30 Days' Notice: After 30 days of non-compliance, members will receive a notice informing them of their ineligibility for sharing until the issue is resolved. Membership will be suspended at this point, which means that members are not eligible to have new bills shared. • 60 Days' Notice: After 60 days of non-compliance, the membership will be inactivated, effective from the date the member should have funded the share wallet or completed the click-to-share requirement.
IV.C.	<p>Conditions of Sharing</p> <p>Restart of Membership</p> <ul style="list-style-type: none"> • Bills for conditions incurred or discovered after inactivation will be considered pre- 	<p>IV.C.</p> <p>Clarifies waiting period</p> <ul style="list-style-type: none"> • Bills for conditions incurred or discovered after inactivation will be considered pre-existing and will not be shared in the new

	existing and will not be shared in the new membership.		membership until applicable pre-existing waiting periods have lapsed.
IV.D.	<p>Conditions of Sharing Changing Programs</p> <p>Qualifying Life Event Changes. Members are allowed to change their AUA level or program within 30 days of the following circumstances, with the effective date being the first day of the following month:</p> <ul style="list-style-type: none"> • Membership anniversary • Change in marital status • Change in child/dependents • Birth/Adoption • Loss of spouse • Loss of employment • Dependent turns 26 	IV.D.	<p>Removed membership anniversary as a qualifying life event</p> <p>Qualifying Life Event Changes. Members are allowed to change their AUA level or program within 30 days of the following circumstances, with the effective date being the first day of the following month:</p> <ul style="list-style-type: none"> • Change in marital status • Change in child/dependents • Birth/Adoption • Loss of spouse • Loss of employment • Dependent turns 26 <p>The Program Change Request form is available in the Forms section of the Member Center.</p> <p>Membership Anniversary Changes. Members are allowed to change their AUA level or program each year, effective with the first day of their anniversary month. Requests must be submitted at least 30 days in advance of the anniversary month, using a the Membership Anniversary Program Change Request form. This form is emailed to the primary member 60 days before the membership anniversary date.</p>
IV.D.	<p>Conditions of Sharing Changing Programs</p> <ul style="list-style-type: none"> • 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 applied within one to two months after the switch is effective. 	IV.D.	<p>Clarifies where fee appears</p> <ul style="list-style-type: none"> • 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.
IV.I.	<p>Conditions of Sharing Other Responsible Parties</p> <p>Funds raised by crowdfunding for shareable medical expenses must be reported and will be applied to reduce the shareable amount.</p> <p>A member who has the right to a reimbursement from an HRA, FSA, or HSA for a shareable medical expense is not required to pay the bill with those funds, although he should consider whether this resource should be used to lessen the burden that the community will bear. If HRA, FSA, or HSA money is used to pay the expense, then that bill may still be submitted to be shared. Please note: there may be income tax consequences from using reimbursements from an HRA, FSA or HSA to pay for an expense for which you also received share amounts. Please consult your tax advisor.</p> <p>If a member simultaneously participates in another</p>	IV.J.	<p>Removed text from IV.I. and created new subsection</p> <p>Other Sources of Payment</p> <p>A member who has the right to a reimbursement from an HRA, FSA, or HSA for a shareable medical expense is not required to pay the bill with those funds, although he should consider whether this resource should be used to lessen the burden that the community will bear. If HRA, FSA, or HSA money is used to pay the expense, then that bill may still be submitted to be shared. Please note: there may be income tax consequences from using reimbursements from an HRA, FSA or HSA to pay for an expense for which you also received share amounts. Please consult your tax advisor.</p> <p>Funds raised by crowdfunding for shareable medical expenses must be reported and will be applied to reduce the shareable amount.</p>

	health care sharing ministry, he may not seek shares/payments from multiple ministries in excess of his shareable bills, for to do so is to obtain assistance beyond his burden.		If a member simultaneously participates in another health care sharing ministry, he may not seek shares/payments from multiple ministries in excess of his shareable bills, for to do so is to obtain assistance beyond his burden.
IV.J. IV.K. IV.L.	Conditions of Sharing Sharing Appeal Misuse of Trust and Accountability Sponsorship	IV.K. IV.L. IV.M.	Subsection reference changed Sharing Appeal Misuse of Trust and Accountability Sponsorship
V.A.	REDEEM™ Sharing Platform Share Account The money in your Share Account is insured and is fully controlled by you except as described herein.	V.A.	Defines Share Account owner The money in your Share Account is insured and is owned by the primary member and fully controlled by you except as described herein.
V.D.	REDEEM™ Sharing Platform Publishing & Sharing Members who have been matched and allocated to share in another member's medical bill may withdraw from the membership prior to the expiration of the three-day publishing period, in which case no funds will be transferred to the receiving member.	V.D.	Clarifies funds transfer Members who have been matched and allocated to share in another member's medical bill may withdraw from the membership prior to the expiration of the three-day publishing period, in which case no funds of a withdrawn member will be transferred to the receiving member.
		VI.	Added new section For Providers REDEEM HealthShare processes bills electronically, with payments typically made to the provider within 30-40 days of receiving the member's bill. Payments are made from Shares collected by the patient from the REDEEM member community. A. Member Payments Members pay a monthly Share Amount based on age, membership size, and selected Unshareable Amount (AUA). Monthly Shares sent by the REDEEM community to the patient are used to pay the patient's medical bills. We recommend providers submit bills electronically through EDI using the Payer ID on the patient's member card for quick processing. B. Payment Processing Most bills are processed within 30 days, with electronic payments sent to the provider, less any amounts the member will pay directly (AUA or Co-Share). The provider receives an Explanation of Sharing (EoS) detailing the amounts paid from Shares collected by the patient from the REDEEM member community. C. Permitted Sharing Levels "Permitted Sharing Levels" means charges for medical care, which is medically necessary for the care and treatment of illness or injury, but only to the extent that

the fees charged therefore are within all applicable limitations and restrictions established by the REDEEM HealthShare Sharing Guidelines including, but not limited to, the following:

Hospitals (both inpatient and outpatient services), Ambulatory Surgery Centers, Independent Facilities, and Other Medical & Surgical Services. The Permitted Sharing Level for medical care established by the Guidelines shall be based upon the average of 150% of the Medicare Allowable Amount for the medical care included in the Guidelines and 135% of the cost of the medical care included in the Guidelines; provided, however, that any such Permitted Sharing Level based on the cost of the medical care included in the Guidelines shall be limited to an amount not to exceed 175% of the Medicare Allowable Amount or the amount of Usual, Customary and Reasonable Fees for the medical care included in the Guidelines.

Professional Services. The Permitted Sharing Levels for professional services shall be determined based upon the chart for the professional service identified. This chart is available upon request. Professional services refer to shareable services provided by medical professionals identified in Section III.B.

Dialysis Services. The Permitted Sharing Level for dialysis services (which shall include dialysis, facility services, supplies, and medications provided during treatment) shall be determined by review of the Medicare Allowable Amount for the billing hospital or physician in light of clinical considerations pertinent to the patient being treated.

Medical Care Provided Under Direct Contract. The Permitted Sharing Levels for medical care provided by directly contracted hospitals or physicians will be the rates or fees established under the applicable contract; provided, however, that the amounts of such rates and fees shall be presumed to be Usual, Customary and Reasonable only to the extent that they do not include otherwise improper balances, which charges shall be outside of the Permitted Sharing Levels.

			<p>If the Permitted Sharing Level exceeds the actual charge billed for the treatment, service, or supply in question, sharing and payments to providers will be based on the actual billed charge. The Permitted Sharing Level for medical care will not include charges related to unbundling, errors, unclear description, or misidentification.</p>
VI. VII.	Glossary of Terms Appendix	VII. VIII.	<p>Section reference changed</p> <p>Glossary of Terms Appendix</p>
		VII.	<p>Deleted</p> <p>Glossary of Terms</p> <p>Sending – A function that enables a primary member to initiate an “on-demand” EFT from an external bank account or credit card to transfer the Total Share Amount Due specified in their Monthly Share Notice to the Membership’s Share Account.</p>
		VII.	<p>Added</p> <p>Glossary of Terms</p> <p>Deposit – A function that enables a primary member to initiate an “on-demand” EFT from an external bank account or credit card to transfer the Total Share Amount Due specified in their Monthly Share Notice to the membership’s Share Account.</p>
VIII.A.	<p>Appendix Governance</p> <p>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.</p>	VII.A.	<p>Clarifies voting eligibility</p> <p>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.</p>
		VIII.A.	<p>Added</p> <p>Appendix Governance</p> <p>Each household membership receives one vote.</p>
		VIII.D.	<p>Added</p> <p>Appendix State Disclosures</p> <p>North Dakota Century Code 50-37: The organization facilitating the sharing of medical expenses is not an insurance company and its guidelines and plan of operation are not an insurance policy. Whether anyone chooses to assist the participant with medical bills is voluntary. Participation in the organization or a subscription to its documents is not insurance, and regardless of whether the participant receives payments or the organization continues to operate, the participant is responsible for the payment of the participant’s medical bills.</p>
VIII.E.	Appendix Summary of Sharing	VIII.E.	<p>Revised AUA levels</p> <p>REDEEM Essential Annual Unshareable Amount</p>

	<p>REDEEM Essential Annual Unshareable Amount (AUA) Levels:</p> <ul style="list-style-type: none"> • \$3,500 • \$7,000 • \$10,500 • \$14,000 		<p>(AUA) Levels:</p> <ul style="list-style-type: none"> • \$3,000 • \$6,000 • \$9,000 • \$12,000
VIII.E.	<p>Appendix Summary of Sharing Annual limits/caps REDEEM Essential \$1 Million REDEEM Enhance \$2 Million</p>	VIII.E.	<p>Clarifies limit/cap REDEEM Essential \$1 Million per household membership REDEEM Enhance \$2 Million per household membership</p>
		VIII.E.	<p>Appendix Summary of Sharing Telemedicine Added Other providers are shareable subject to AUA/Co-Share.</p> <p>Deleted No Telehealth bills from other providers are shareable.</p>
		VIII.E.	<p>Appendix Summary of Sharing If you need sustained, repeated, therapeutic care Revised Category A, added categories B and C Category A: Physical and Manipulative Therapies</p> <ul style="list-style-type: none"> • Acupuncture/Acupressure • Cardiac • Chiropractic care • Disc decompression • Dry needling • Hyperbaric treatments • Massage therapy • Occupational therapy • Physical therapy • Respiratory • Softwave therapy • Speech therapy • Vision <p>Category B: Hormone Therapies</p> <ul style="list-style-type: none"> • Androgen replacement therapy • Menopause related conditions • Pregnancy/Maternity support (excluding IVF) <p>Category C: Injection Therapies</p> <ul style="list-style-type: none"> • Platelet Rich Plasma/Stem Cells • Prolotherapy • Steroid and corticosteroid <p>Deleted This category of therapies is typically delivered in-office and has its own maximum annual household membership share limit of \$5,000.</p>

			<p>Hormone therapies has its own maximum annual household membership share limit of \$5,000.</p> <p>Injection therapies has its own maximum annual household membership share limit of \$5,000.</p>
		VIII.E.	<p>Appendix Summary of Sharing Preventative Screenings Added Breast Ultrasound</p>