Anabaptist HealthShare

Guidelines

Anabaptist HealthShare Plans

	Catastrophic	Standard	Complete
Individual			
Individual Monthly Contribution	$60	$130	$170
Individual Social Security Exempt	$90	$160	$200
Family Includes $85 per household (not per child) if there are any dependents under the age of 18.			
Family Monthly Contribution	$180	$345	$425
Family Social Security Exempt	$240	$405	$485
Group An organization of 20 or more units (Refer to page 6 for the definition of group & unit).			
Group Individual Contribution	$60	$120	$155
Group Individual Social Security Exempt	$90	$150	$185
Group Family Contribution	$180	$325	$395
Group Family Social Security Exempt	$240	$385	$455
Program Details			
Per Incident ISA* Individual Shared Amount/Member Responsibility (Remainder is eligible for AHS sharing. Resets annually)	$5,000	$1,500	$750
Sharing Limit Per Illness/Incident	$150,000	$500,000	Unlimited
Maternity** (Not included on Catastrophic Plan)			
Maternity ISA through a hospital	Not Included	$3,000	$2,000
Maternity ISA through a midwife (If total is not above $7,000)	Not Included	$1,500	$1,000
Maternity complications that result in a hospital stay for mother or child	Not Included	Included	Included
Pre-existing Conditions (See Page 3)	Not Shareable	Up to $12,000	Up to $18,000
Doctor's Office Visits	Not Included	Incident-related	Incident-related
Prescriptions	Not Included	Incident-related	Incident-related
Physcial Therapy	Not Included	Incident-related	Incident-related
Dental & Optometry	Not Included on any plan		
Emergency Room	Included on all plans		
Transportation to Emergency Room	Not Included	Included	Included
Chronic Illness	Not Included	Included (ISA resets annually)	Included (ISA resets annually)
End of Life Sharing	Not Included	$3,000	$3,000

There is a one-time, $100 per household enrollment fee for AHS membership.

* Maximum of 3 incidents per calendar year requiring ISA (Each case after the third is eligible for 100% sharing by AHS with no ISA).

**See page 3, Plan Levels & Participation

The 7 Pillars of Sharing in the AHS Program

(Following each of these points is important for your sharing success)

1. **Pre-authorization** is required if you want to have a medical case shared in the program. Call Anabaptist HealthShare (AHS) at 540-738-2640 or email info@sharing.health to pre-authorize. Without a case being pre-authorized, the guidelines do not allow those bills to be shared unless it was a genuine emergency. All non-emergency bills must have been pre-authorized by the AHS team. This pre-authorization should occur prior to any scheduling, especially surgery scheduling, due to the varying rates charged by providers.

2. **Emergency** cases should get prompt attention at a MedExpress/Urgent Care/prompt care type facility, where appropriate. Use an emergency room as a last resort. Please notify AHS promptly afterwards.

3. **"Self-pay" or "Uninsured"** is how you report to any medical provider.
   - **A sharing group is not insurance, so do not mention AHS.** Doing so confuses providers and makes bill management more difficult.
   - **Have all bills sent to your address.** Once you receive them, submit them to AHS for processing.

4. **Unpaid** is how you submit medical bills to AHS. Do not pay any bill yourself that you plan to turn into AHS for sharing. Bills should be emailed, faxed, or mailed to AHS as soon as received. Bills submitted after 90 days of the date of service may not be eligible for sharing. Also, keep submitting any repeat bills and all notices from the hospital so AHS can stay updated on the current billing status. AHS guidelines do not allow for sharing of bills that members pay on their own unless instructed to do so by the AHS team.

5. **Stewardship of Resources** requires that bills are not paid above what is reasonably required by hospitals. The first bills you receive are typically inflated by several hundred percent! All AHS members agree to cooperate fully with the AHS team as they work with the hospitals' procedures in finding the bottom line. This may include applying for financial assistance and Medicaid.

6. **A Genuine Spirit of Sharing** in a group of believers is a beautiful example of loving our neighbors as we love ourselves. When members conscientiously use this program like they would want others to use it increases sharing power.

7. **Patience** and much longsuffering are needed to deal with the medical system. Hospital billing systems are designed to keep you on edge with their recurring billing cycles and collection efforts. Thank you in advance for your patience as the AHS team works diligently on your behalf. Great results are achieved when everyone works patiently together!

Plan Levels & Participation: All family members in the program are required to be on the same sharing plan level. Children over 18 may choose their own sharing plan level. Maternity cases are not eligible for sharing unless both spouses are in the program (or they make the membership contribution equivalent).

Changing Levels: If a member changes to a lower sharing level, bills for any current or previous conditions will be shared at the lower level. If a member changes to a higher level, bills related to any illnesses, injuries, or symptoms experienced prior to switching will be subject to a 12 month wait period before shared at the higher plan level.

Medicare Eligible Members 65 and over: This Sharing Plan requires Medicare-eligible members 65 and over to be covered under Medicare parts A and B. Plan ISA applies per case. If a member is enrolled in Medicare parts A and B, the monthly contribution amount is reduced to only:

- $60 per month for the Standard Plan.
- $85 per month for the Complete Plan.
- Pharmaceuticals are shared if the member is also enrolled in Medicare Part D. Plan ISA applies.

Social Security Exempt Members 65 and over: There is a 75/25 sharing for Social Security exempt members over 65 after ISA is met. Any social security exempt individuals 60 and over must come with a group of at least 20 units in order to be eligible for AHS membership.

Auto-related Injuries: Members are encouraged (but not required) to include personal medical coverage as part of their auto insurance. Whatever the case, a $5,000 ISA applies per accident. This $5,000 ISA applies to all motorized vehicles including, but not limited to, ATVs, UTVs, e-bikes, e-scooters, tractors, and any horse-drawn vehicles or implements.

Work-related Injuries: If you wish to have your job-related injuries shareable at AHS, you will need to enroll in the AHS Workers Aid Plan (See Page 9). Anyone legally required to have Workers Compensation coverage is not eligible to participate in the Workers Aid Plan.

Pre-existing Conditions: A pre-existing condition is any health issue accompanied by any current or former signs or symptoms indicating a need for medical attention. Pre-existing conditions do not require an official diagnosis or active treatment by a physician. On both the Standard and Complete plans, some pre-existing conditions are eligible for sharing after a 12-month wait period and are subject to the following guidelines: Standard plan up to $12,000 per year, per person; Complete plan up to $18,000 per year, per person. However, all pre-existing organ failure (including diabetes, heart conditions, kidney dialysis, etc.), and pre-existing genetic or congenital conditions are not eligible for sharing. Medical equipment needed to treat or maintain these conditions and any extended health issues resulting from these conditions are also not eligible for sharing. However, AHS will aid in bill negotiating for all members with any of the above pre-existing illnesses.

Congenital Conditions: If it is a shareable maternity and both parents are members of either the Standard or Complete plan, birth defects, and congenital conditions of a new infant are eligible to be shared up to a lifetime maximum of $150,000 per child. AHS can assist in enrolling members in available financial aid programs.

Wellness Checkups, Screenings, Physicals: Wellness procedures, if ordered by a doctor, become shareable after 12 months of membership. The ISA does apply. Multiple wellness procedures occurring within a 30-day period can be considered a single case, with a single ISA. Example: Physician ordered labs and Mammogram done at the same time.

Physical Therapy: Incident-related physical therapy is shareable on the Standard and Complete plans.

Mental or Behavioral Treatments will be reviewed on a case-by-case basis by the AHS Medical Review Committee.

Maternity:

- Maternities are shareable on the Standard and Complete plans if the due date is a minimum of 10 months after enrollment and both parents are members of Anabaptist HealthShare.
- Please notify AHS as soon as a pregnancy is confirmed.
- Maternity through a hospital or midwife includes:
  - Sharing for all bills related to the maternity case including prenatal checkups.
  - Up to 2 ultrasounds (unless additional ultrasounds are deemed necessary by a medical doctor).
  - 3 chiropractic visits, these can be used as either chiropractic, massage or pelvic floor therapy.
  - Tongue or lip ties and circumcision are shared within the maternity case if done within 30 days of birth.
- The cost of a doula is not shareable.
- If an infant has ongoing medical needs after 30 days of birth, the infant becomes its own case separate from the maternity case.
- If the birth is the first child, the child rate is due on the first day of the month following the birth.
- If the child is not added to the plan, its medical needs will not be shared after the first day of the month following the birth.

Cancer Sharing: Recurring or "new" cancers after a pre-existing cancer are shareable after a documented cancer-free period of 10 years and having been a member of AHS a minimum of 2 years. Cancer is always shareable for members who have never had cancer before becoming a member.

Medical Treatments in Mexico: Cancer treatment is the only medical treatment AHS shares in Mexico. Cancer treatment in Mexico is shareable up to $20,000 on the Standard Plan and up to $30,000 on the Complete Plan if it was not pre-existing cancer. Note: AHS does not share full treatment in both Mexico and the USA. Any amount paid to a Mexican clinic will need to be deducted from treatment in the USA. Any amount paid in the USA will need to be deducted before Mexico sharing. These limits do not apply to AHS members who are missionaries and residing in Mexico.

Alternative Treatment: AHS does not share alternative, functional, integrative, natural, or non-FDA approved treatments. This includes any treatment done at these facilities. The AHS program is designed to share medical necessities such as surgeries, injuries, cancer, heart disease, births, etc. The modest contribution rates of AHS are not designed to share the continuing treatments often recommended by alternative clinics. AHS is not opposed to alternative treatment, but this sharing program is not designed to share those costs and members are encouraged to research their options well in advance of any treatment.

Lyme Disease: After the annual ISA is met which applies for chronic conditions, AHS shares up to $4,000 per year, per case for Lyme treatment for a maximum of 3 years. Lyme patients may seek treatment at the provider of their choice. This includes alternative treatment. Note: If diagnosed early, the normal routine of antibiotic treatment has often been successful.

Medical Equipment: Medical equipment prescribed by a medical doctor is eligible for sharing up to $10,000 (lifetime limit per member. Examples include, but are not limited to defibrillators, insulin pumps, oxygen concentrators, etc.).

Adoptions: New family members added by adoption are eligible for a sharing contribution of up to $6,000 to assist with verified adoption costs. A $1,500 ISA and 12-month wait period applies. Adoption-sharing contributions are made after the adoption has been finalized. The new child may register with AHS as a new member and pre-existing condition exclusions would apply. In order to be shareable, both parents must have been members prior to the bills being incurred.

Sharing Outside the USA: AHS shares medical bills incurred outside the United States on a limited basis.

- Long and short term mission sharing may be approved by AHS on a case-by-case basis.
- For leisure travel, AHS recommends acquiring travel insurance.

Traveling for Medical Procedures: There may be times when, at the discretion of AHS, a member is asked to travel for a medical procedure.

Charity: A portion of member contributions may be used for hardship cases and other charitable causes.

Exclusions

- **Any illnesses, accidents, or cases that result from the following:** Alcohol, tobacco, vaping, illegal drugs, abuse of legal drugs, and intimate relationships outside of marriage.
- **Pre-existing Conditions** (See Page 3).
- **Infertility Treatments** are not shareable. However, pregnancies resulting from such treatments are shareable according to the member's plan.
- **Contraceptives** and related costs are not sharable. This includes vasectomies and tubal ligations.
- **Organ Transplants** are not sharable.
- **Alternative Treatment** (See Page 4).
- **Medical Bills not Pre-authorized by AHS:** Except for emergency room and Urgent Care visits, all medical expenses must be pre-authorized by AHS.
- **International Life Flights** are not shareable.
- **Bariatric Weight Loss Surgeries** or complications resulting from such surgeries are not sharable.
- **Hearing Aids** needed due to aging.
- **Long Term Care:** Nursing Home and Hospice Care.
- **Chiropractic Visits** are not normally shareable.
- **Dental & Vision** are not shareable (unless accident-related).
- **Unreasonably Costly Procedures or Medications:** Procedures and medications which are considered unreasonably expensive, uncommon, or experimental may not be eligible for sharing, at the discretion of AHS.

AHS's heart is to serve its members, rather than trying to find reasons to avoid doing so. Should you have a need that is not eligible for sharing, please contact AHS to review available options!

Terms & Definitions

ISA is an acronym for "Individual Shared Amount" and is the member's responsibility per incident or illness. After the ISA is met, AHS will share the remainder of the medical billings at 100%, subject to AHS guidelines and specific membership plan details. The ISA resets annually.

Group: A group is 20 or more units from an individual church, district, ministry, or employer. A group must have an assigned representative and submit the monthly contributions with a single payment to receive the group discount.

Unit: A unit is any member 18 years or older. Children from the same family under the age of 18 qualify as one unit collectively. Example: husband = 1 unit; wife = 1 unit; children under 18 = 1 unit; total = 3 units. Each child 18 and older qualifies as his/her own unit.

Social Security Exempt is when a person has signed an IRS Form 4029 and does not pay Social Security and Medicare taxes.

Congenital Conditions relate to abnormalities or genetic conditions that are discovered at or prior to birth or soon thereafter.

HealthCare Sharing Ministries (HCSM) are not insurance, but rather facilitate the voluntary sharing of one another's medical needs. They do not guarantee payments for any medical bill. The programs offered are not insurance products, and any member needs to be aware of the differences. Please feel free to call if you have any questions.

Pre-authorization means getting a medical procedure approved for sharing by AHS before it is scheduled or performed (See Page 2).

Elective Non-Emergency Procedures are medical procedures that are scheduled by the patient.

Financial Assistance (FA) is a term many hospitals use when determining rates for self-pay persons who do not have insurance. The term "financial assistance" is simply the path hospitals often use to reduce a bill from the original raw bill. Many of these FA programs require disclosure of annual income.

Federal Poverty Guidelines (FPG) are income levels used to determine eligibility for various medical assistance programs. Hospitals often multiply the FPG times 2 or 3 to determine their sliding scale rates. Even those with significant incomes can qualify for partially reduced bills.

Medicare: Most US citizens qualify for Medicare benefits beginning on the first day of the month they turn 65. Medicare typically covers medical costs at an 80/20 rate. 80% of the Medicare rate is paid, leaving the member to pay only 20% of the greatly reduced rate. Medicare "Part A Hospital" is usually free. "Part B Physicians" has a monthly fee. There are other alphabets such as "Part D" which covers medications. You can learn more on the web at Medicare.gov or by visiting your local Social Security office.

Medicaid is a state-managed program that is primarily based on income, and generally covers more than Medicare. Medicaid varies state by state, but if qualifying, it may cover the needs of children, pregnant women, elder care, etc. A Medicaid application is often required by hospitals before going on to the next step in their bill negotiation process. A Medicaid "denial" usually means a person is over income or resources. A denial opens the way to proceed to the Financial Assistance process. Medicaid is a taxpayer-funded program.

Frequently Asked Questions

- **Are doctor's office/wellness visits shareable?** Most doctor office visits are less than a plan's ISA and therefore do not qualify for sharing. However, if the doctor's office visit is in relation to an illness or injury that is eligible for sharing, the doctor's bill is included in the "case" and eligible to be shared on both the Standard and Complete plans, after the ISA is met. If the bill is required to be paid at time of service, you pay as "self-pay," then send AHS the receipt if the visit is part of an eligible case.

- **When is a maternity case not shareable?** If a birth occurs in less than 10 months after becoming a member, that maternity case will not be shareable. Exceptions can be made if a doctor or midwife verifies an early or premature birth in which the due date for the pregnancy was at least 10 months after taking out membership. Also, note that maternity is not sharable in the "Catastrophic" membership plan. This includes any medical needs of both mother and child.

- **How does a new infant become a member?** If there are other children already in the program and you have a sharable pregnancy, the new infant automatically becomes a member without any additional monthly contribution required. Please notify AHS of the name and date of birth to update the family record.
  - If the new infant is the first child, and it was a shareable pregnancy, the infant is considered a full member with the $85 per month child contribution beginning on the first full month after the birth (additional children will not require any additional contribution).
  - If it was a non-shareable pregnancy (example: due date is within 10 months of the parents joining AHS) the new infant can become a member through registration with AHS. However, the new infant is considered a new member, and pre-existing condition exclusions and other limitations would apply, the same as for other new members.

- **What happens if a member falls behind in submitting the monthly sharing contribution?**
  The member will be reminded by AHS. No bills will be eligible for sharing on a membership overdue 30 days or more unless satisfactory arrangement has been made with AHS. After 60 days, the membership will become "inactive." If a former member wishes to reinstate an inactive account, it will be considered a new member application with new pre-existing condition requirements and application fees applied.

- **When do I need to notify AHS of a case?** For non-emergency situations notify AHS as soon as you become aware of the need for medical attention. In an emergency, notify AHS as soon as you leave the ER or have been admitted to the hospital.

- **Does AHS share medical bills that are incurred outside the United States?**
  On a limited basis.
  - Long and short term mission sharing may be approved by AHS on a case-by-case basis.
  - For leisure travel, AHS recommends acquiring travel insurance.

Medical Bill Policy

- **AHS is not Insurance.** The AHS team members serve as Patient Advocates for members of the sharing program in resolving medical bills.
- **Best Available Path:** It is the policy of AHS to utilize the best available path provided by a hospital to reach the bottom line of a member's bill. This path could include using: self-pay rates, income-based rates, Medicaid, Medicare, Financial Assistance, catastrophic bill rates, plain community pricing, etc. All bills remain a member's bills. AHS is not a guarantor of payment.
- **Working Together:** All members of AHS agree to fully cooperate with the AHS Patient Advocates as they work with hospitals to find the final amount owed for bills. This could include submitting tax forms to verify income etc., as required by a hospital. If a member would rather find their own path in getting to the bottom line for a bill, that bill will not be shareable in the AHS program.

Anabaptist HealthShare

- Is a "Health Care Sharing Ministry" recognized by the U.S. Department of Health and Human Services
- Is a 501(c)(3) public charity
- Is a non-profit corporation
- Is a qualified ACA Exemption

Contact Information

- **Hours:** 8:30 AM - 4:30 PM EST, Mon-Fri.
- **Phone:** 540-738-2640
- **Fax:** 434-234-0234
- **Email:** info@sharing.health
- **Website:** www.sharing.health
- **Address:** P.O. Box 343, Madison, VA 22727

Worker's Aid Plan

Worker's Aid Plan is an economical job-related injury and time off work mutual aid program. If you wish to have your job-related injuries shared at AHS, you will need to enroll in the AHS Workers Aid Plan. Anyone legally required to have Workers Compensation coverage is not eligible to participate in the Workers Aid Plan. Note For Family Farms: The Workers Aid Plan is required for anyone 18 years of age and over working on the family farm. (This applies to any new enrollments beginning January 1, 2024)

Anabaptist HealthShare is a 501(c)(3) nonprofit corporation that has organized this Worker's Aid program as a branch of its ministry to the Anabaptists.

- **Membership Eligibility:** Members of the Worker's Aid Plan must be members of traditional Anabaptist churches. This requires adherence to the Dordrecht Confession of Faith or similar Confessions, and adherence to the core tenants of Anabaptist theology. The definition of "member" is any employee or employer who is enrolled in the plan including self-employed individuals.
- **Monthly Sharing Amount:** $24 per month.
- **One-time Entry Contribution:** $50 per worker.
- **$2,000 ISA:** annually, per case. This is the individual member's responsibility.
- **$5,000 ISA for on-the-clock auto-related injuries:** Members are encouraged to include personal medical coverage as part of their auto insurance. This $5,000 ISA applies to all motorized vehicles including, but not limited to, ATVs, UTVs, e-bikes, e-scooters, tractors, and any horse-drawn vehicles or implements.
- **No Annual Limit:** 100% of medical bills are eligible for sharing after the first $2,000 is met.
- **Pre-authorization:** All non-emergency room procedures must be pre-authorized by an AHS representative. Emergency Rooms should be used only if the need is not treatable at a Prompt Care, etc. All members agree to accept counsel from their church deacon and/or AHS advisors in the case of larger bills. Larger bills will be shared as funds are available. In all cases, due diligence will be made to achieve satisfactory payment arrangements with both providers and members. Members should always seek to be good stewards of the health care system, using the least costly alternatives whenever feasible. It may be financially prudent to travel some distance to a health care provider that offers a better rate.
- **Work-related Sharing:** This sharing plan shares work-related accidents and injuries incurred during employment or self-employment activities. Those experiencing vehicle and buggy related accidents should seek assistance from any applicable auto insurance or mutual aid as a first resort.
- **Pre-existing Conditions:** are not eligible for sharing.
- **Time Off Work:** Up to two calendar months of lost work time may be shared at two-thirds (66%) of regular wages earned. Sharing begins after one week of lost work time.
- **Enrollment:** Please contact AHS for more information or to enroll.

Anabaptist HealthShare

"Sharing the Medical Needs of the Anabaptist Community"

Application for HealthShare Membership

(Application is for HealthShare and Worker's Aid)

To apply online: www.sharing.health/apply

Date:_____

Marital Status: (circle one) Single Engaged Married Widow/Widower

First Name:_____ Middle:_____ Last:_____

D.O.B.:_____

Social Security Exempt: (circle one) YES NO

Phone Number:_____

Email:_____

Address: _____

City:_____ State:_____ Zip Code:_____

Spouse Name:_____ Middle: _____ Last:_____

D.O.B.: _____

Social Security Exempt: (circle one) YES NO

Phone Number: _____

Email: _____

Church Membership at:_____

Affiliation:_____

Deacon's Name:_____

Deacon Contact Information:_____

Group Name: (if joining with a group) _____

Desired Start Date: (please choose the 1st of a month, i.e. May 1st, June 1st, etc.) _____

Desired Sharing Plan: (circle one) **Catastrophic** **Standard** **Complete** **Worker's Aid**

Do you need the Worker's Aid add-on for work related injuries? (circle one) YES NO

There is a one time $100 enrollment fee for the HealthShare Program.

There is a one time $50 enrollment fee for the Worker's Aid Program.

Children under 18 years old

(Include additional sheets as necessary)

First & Middle Name _____ D.O.B. _____ Gender: (circle one) M F

First & Middle Name _____ D.O.B. _____ Gender: (circle one) M F

First & Middle Name _____ D.O.B. _____ Gender: (circle one) M F

First & Middle Name _____ D.O.B. _____ Gender: (circle one) M F

First & Middle Name _____ D.O.B. _____ Gender: (circle one) M F

Children 18 years or older who are living at home and wish to join the program

First & Middle Name _____ D.O.B. _____

Gender: (circle one) M F Social Security Exempt: (circle one) YES NO

Phone Number:_____ Email: _____

First & Middle Name _____ D.O.B. _____

Gender: (circle one) M F Social Security Exempt: (circle one) YES NO

Phone Number:_____ Email: _____

First & Middle Name _____ D.O.B. _____

Gender: (circle one) M F Social Security Exempt: (circle one) YES NO

Phone Number:_____ Email: _____

Are all applicants U.S. citizens? (circle one) YES NO

Do all applicants have Social Security Numbers? (circle one) YES NO

For Persons 65 years or older (circle if applicable)

Medicare: A B D Name: _____

Medicare: A B D Name: _____

Medical Conditions

(Please list for all applicants)

Please list any pre-existing and current medical conditions such as pregnancy, cancer, heart conditions, needed surgeries, chronic conditions, genetic conditions, past surgeries, and other health conditions. Include information about medical conditions even if they were not formally diagnosed or treated.

Our Statement of Faith

As an Anabaptist medical sharing group, we share these commonly held beliefs:

- We believe in and practice the 1 Corinthians 11 teaching on the headship veiling as well as modesty in dress. It is required for AHS membership that ladies wear the veiling and skirts consistently on a daily basis.
- We believe in the Anabaptist practice of nonresistance as a way of life. This is expressed by not taking up arms, by not initiating lawsuits, and by not engaging in retaliation of any kind (Matthew 5:39).
- We believe in the biblical principle of sharing with those who experience medical needs (Galatians 6:2).
- We believe in the sanctity and dignity of human life, and that God created every life for a special meaning and purpose (Psalms 139:13-14).
- We believe that our bodies are the temples of the Holy Ghost, and that it is our responsibility to God and our fellow members to exemplify Christ in every aspect of life, including choices and habits that affect our health, and to avoid habits and behaviors that are harmful to the body (1 Corinthians 6:19-20).
- We believe in the power of prayer and that prayer should be a conviction and faithful practice of our daily lives (1 John 5:14).
- We believe in a God who cares for his people through sickness and health. He is the Great Physician and the Provider of all our needs. He is Joy in sorrow, a Comfort in pain, and our ever-present Help in times of trouble (1 Peter 5:7).

Medical Bill Policy

AHS is not insurance. The AHS team members serve as Patient Advocates for members of the sharing program in resolving medical bills. **It is the policy of AHS to utilize the best available path provided by a hospital to reach the bottom line of a member's bill.** This path could include using: self-pay rates, income-based rates, Medicaid, Medicare, Financial Assistance, catastrophic bill rates, plain community pricing, etc. All bills remain a member's bills. AHS is not a guarantor of payment. All members of AHS agree to fully cooperate with the AHS Patient Advocates as they work with hospitals to find the final amount owed for bills. This could include submitting tax forms to verify income, etc., as required by a hospital. If a member would rather find their own path in getting to the bottom line for a bill, that bill becomes the full responsibility of the member and will not be a shareable bill in the AHS program.

By signing below, I affirm that this Medical Sharing Application is true and complete to the best of my knowledge, that I am in adherence with the Statement of Faith and Practice, and that I agree to comply with the Medical Bill policy. If, at any time, I no longer adhere to the Statement of Faith and Practice, I agree to promptly notify AHS.

I also hereby authorize AHS to contact my group representative, deacon, or other church leader to discuss my medical bills or sharing requests.

Member signature required:_____

No application fee is required until application is accepted.

Additional Information (optional)

_____

_____

_____

_____

_____

Anabaptist HealthShare Contact Information

- **Hours:** 8:30 AM - 4:30 PM EST, Mon-Fri.
- **Phone:** 540-738-2640
- **Fax:** 434-234-0234
- **Email:** info@sharing.health
- **Website:** www.sharing.health
- **Address:** P.O. Box 343, Madison, VA 22727

"Bear ye one another's burdens, and so fulfill the law of Christ." Galatians 6:2

Anabaptist HealthShare Legal Notices

General notice for the following states: **Alabama** Code Title 22-6A-2, **Alaska** Statutes 21.03.021, **Arizona** Statute 20-122, **Arkansas** Code 23-60- 104.2, **Florida** Statute 624.1265, **Georgia** Statute 33-1-20, **Idaho** Statute 41-121, **Louisiana** Revised Statute Title 22-318,319, **Maine** Revised Statute Title 24-A, §704, sub-§3, **Massachusetts**, **Michigan** Legislature Section 550.1867, **Mississippi** Code Title 83-77-1, **Montana** Code 50-4-111, **Nebraska** Revised Statute Chapter 44-311, **New Hampshire** Section 126-V:1, **North Carolina** Statute 58-49-12, **South Dakota** Statute Title 58-1-3.3, **Texas** Code Title 8, K, 1681.001, **Virginia** Code 38.2-6300-6301, and **Wyoming** Statutes Title 26.1.104(a)(v)(C).

Notice: Under the laws of your state, Anabaptist HealthShare (AHS), which facilitates the sharing of medical expenses, is not an insurance company. Its product should never be considered insurance, and neither its guidelines nor plan of operation is an insurance policy. If you join this organization instead of purchasing health insurance, you will be considered uninsured. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant will be compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered to be insurance. Regardless of whether you receive any payment for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills. This organization is not regulated by the State Department of Insurance, although complaints concerning this Health Care Sharing Ministry may be reported to the office of the State Attorney General. You should review this organization's guidelines carefully to be sure you understand any limitations that may affect your personal medical and financial needs. If your participation in the health care sharing ministry ends, state law may subject you to a waiting period before you are able to apply for health insurance coverage.

Specific Notice for the following states: **Indiana** Code 27-1-2.1, **Illinois** Statute 215-5/4-Class 1-b, **Missouri** Statute 376.1750 and **Wisconsin** Statute 600.01 (1)(b)(9).

Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor its plan of operation is an insurance policy. Any assistance you receive with your medical bills will be totally voluntary. Neither the organization nor any other participant can be compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered to be insurance. Whether or not you receive any payments for medical expenses and whether or not this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Kentucky Revised Statute 304.1-120 (7):

NOTICE: UNDER KENTUCKY LAW, THE RELIGIOUS ORGANIZATION FACILITATING THE SHARING OF MEDICAL EXPENSES IS NOT AN INSURANCE COMPANY, AND ITS GUIDELINES, PLAN OF OPERATION, OR ANY OTHER DOCUMENT OF THE RELIGIOUS ORGANIZATION DO NOT CONSTITUTE OR CREATE AN INSURANCE POLICY. PARTICIPATION IN THE RELIGIOUS ORGANIZATION OR A SUBSCRIPTION TO ANY OF ITS DOCUMENTS SHALL NOT BE CONSIDERED INSURANCE. ANY ASSISTANCE YOU RECEIVE WITH YOUR MEDICAL BILLS WILL BE TOTALLY VOLUNTARY. NEITHER THE ORGANIZATION OR ANY PARTICIPANT SHALL BE COMPELLED BY LAW TO CONTRIBUTE TOWARD YOUR MEDICAL BILLS. WHETHER OR NOT YOU RECEIVE ANY PAYMENTS FOR MEDICAL EXPENSES, AND WHETHER OR NOT THIS ORGANIZATION CONTINUES TO OPERATE, YOU SHALL BE PERSONALLY RESPONSIBLE FOR THE PAYMENT OF YOUR MEDICAL BILLS.

Maryland Article 48, Section 1-202(4):
Notice: This publication is not issued by an insurance company nor is it offered through an insurance company. It does not guarantee or promise that your medical bills will be published or assigned to others for payment. No other subscriber will be compelled to contribute toward the cost of your medical bills. Therefore, this publication should never be considered a substitute for an insurance policy. This activity is not regulated by the State Insurance Administration, and your liabilities are not covered by the Life and Health Guaranty Fund. Whether or not you receive any payments for medical expenses and whether or not this entity continues to operate, you are always liable for any unpaid bills.

Pennsylvania 40 Penn. Statute Section 23(b):
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