Health Cost Sharing Plans	Sedera (1) Acesss+ Membership	Zion Health DPC	Altrua (3)	Samaritan (4)	Christian Care (5)	Christian Healthcare Ministries The biblical solution to healthcare costs			Liberty HealthShare (7)			Solidarity (8)			united (9)
by ochna health	\$5,000 IUA \$2,500 \$500	\$5,000 IUA \$2,500 \$1,000	Ruby Emerald Diamond	Given Basic Classic	Medi-Share	Bronze	Silver	Gold	Essential	Connect	United	12000 6000 3000		3000	** ricamishare
	T	·			ADMINISTRATIVE										
Website	sedera.com/	zionhealth.org	altruahealthshare.org	samaritanministries.org	mychristiancare.org	chministries.org		libertyhealthshare.org		solidarityhealthshare.org		re.org	unitedrefuahhs.org		
Religious Faith	Any In first 12-36 months of membership	Any In first 24 months	Any In first 24 months	Christianity In first 12 months	Christianity In first 36 months	Christianity In first 12-36 months		Christianity In first 36 months			Catholic In first 12 months			Jewish In first 12 months	
Pre-existing limitations * Pre-existing exception	Yes	Yes	Yes	Yes	No	No		ionuis	No		No		is	In lirst 12 months	
Tre existing exception	100	103	103	103	110	110		110		Limited Sharing in first 60 days (ER,		/CD			
Expenses shareable	Immediately	Immediately	After 90-day (12mos for cancer for Ruby)	Immediately	Immediately	Immediately			Immediately (submit within 180 days)			Illness)			Incidents occuring in first 60 days: max \$25k
Provider Network	Any   No Network Required	Any   No Network Required	MultiPlan (Optional)	Any   No Network Required	PHCS (Optional)	Any   No Network Required		Any   No Network Required		Any   No Network Required		quired	Any   No Network Required		
Out of Pocket Term.	Initial Unshareable Amt (IUA)	IUA	Member Responsibility Amt (MRA) 2 levels	Annual Unshared Amount (AUA)	Ann. Household Portion (AHP)	Personal Responsibility (PR)		Annual Unshared Amount (AUA)			Annual Unshared Amount (AUA)		int (AUA)	Annual Pre-Share Amount (APA)	
Similar Programs	Select+ (Business Plan)	Essential (Business Plan)	2 101010	CMF Curo (Catholic)	THE NUMBERS	-									
Application Fees, etc.	\$30 Set up fee	\$50 Registration fee	\$100 Fee +/- \$25 Elective donation / year	\$200 Startup fee	\$50 Application fee +\$2/mo	T	None		\$135 Applicat	tion Fee + <b>\$75</b> /y	r at renewal	\$13	5 Application	Fee	\$125 Application Fee + \$75/yr at renewal
Monthly Cost, Indiv.	From \$113   \$153   \$208	From \$75 \$100 \$150	From \$113 \$265 \$297	. F 6400   6400			T		From \$159	\$209	\$259	From \$64	\$134	\$174	From \$199, with \$500 APA
Monthly Cost, Couple	From \$207 \$286 \$396	From \$150 \$200 \$300	From \$167 \$413 \$440	Program is From \$100 \$160 closed as of From \$200 \$454	From < \$100 (varies by Age, AHP) + \$95 potential health discount	\$85/unit	\$125/unit	\$205/unit	From \$259	\$339	\$459	From \$252	\$322	\$357	From \$349, with <b>\$1,000 APA</b>
Monthly Cost, Family	From \$300 \$416 \$574	From \$250 \$350 \$450	From \$221 \$551 \$588	04/2022 From \$250 \$530	Co-share option for lower cost	Unit is eith	ı ner self, spous	se, dependent	From \$499	\$639	\$849	From \$384	\$464	\$504	From \$499, with \$1,500 APA
		3 x IUA per year	1st MRA: 1st MRA: 1st MRA: \$7,500 \$1,000 \$500	Co-share Amount	Max of <b>AHP</b> (\$3-\$12,000) or	-		N/A	AUA:	AUA:	AUA:	AUA:	AUA:	AUA:	Annual Maximum Co-Share
Annual Out of Pocket Max or Co-share, if any	3 x IUA per year		2nd MRA: 2nd MRA: N/A Max \$2,500	10-20% 10% None \$3.5-10k	AHP+Co-share of \$10-12,000		N/A		\$4-12k	\$1-3k	\$1-\$2.25k	\$12,000	\$6,000	\$3,000	\$1,000 Single; \$2,000 Couple; \$4,000 Family
Shareable Cost per Need	100% after IUA per need*	100% after IUA per need*	Only if > MRA amount	After AUA If > \$1,500 > \$400	100% after AHP or AHP+Co-Share	If > \$5,000	If > \$2,500	If > \$500	75% after AUA	85% after AUA	100% after	100% after AUA	100% after AUA	100% after AUA	80% after APA
May & Allowed per Need	IUA waived after 3rd need  No limt (max <1/3 total available \$)	\$500 IUA after 3rd need	75% (1st), 100% (2nd MRA) \$150,000/yr No limit after MRA	None \$236,500 \$250,000	No limit				\$600k			AUA	No limit	100	¢1 million lifetime per incident
Max \$ Allowed per Need	No limit (max <1/3 total available \$)	No limit	\$1 million lifetime \$2 million	None \$236,500 \$250,000 Save to Share	No limit		\$125,000 / ne yr renewed	Unlimited	φουυκ	\$1 million	\$1 million		INO IIITIIL		\$1 million lifetime per incident
Extended Sharing Avail. and Premium	N/A	N/A	N/A	\$15/year + \$133/person	N/A		ner's Keeper: +		N/A		N/A			N/A	
Assural Dhusiani	Net leaded and I Access thereigh DDC	O	Famela and a 40 c Mala a 50 c	No	MEDICAL SERVICES Limited	1	N-		2-mo wait, AUA waived   Up to \$400		Services + Labs   AUA waived			CO decumentine III e te @COO	
Annual Physical Well Child Visits	Not Included   Access through DPC  Not Included   Access through DPC	Once a year  Max \$250/visit	Female age > 40y, Male > 50y  Max 6 visits, \$300/visit, \$35 copay	No	Yes, up to <b>age 6</b>		No No		First 13 months of life only  AUA waived		7 visits in first 2 years; 3 visits in 2nd vear		ars;	60-day waiting   Up to \$600  Not subject to APA	
Immunizations	Pediatric: Yes; Adult: Flu vaccine only	Ped. only: 6-mo wait, time ltd	Flu vaccine only	No	No		No				Shareable, with restrictions			Subject to <b>APA</b>	
Screening Mammogram	Age 40+	Age 50+	Age 40+ Max \$500, \$35 copay	No	Shareable, subject to AHP	May be sharable		Age <49: q2y; Age 50+: q1y   <b>AUA</b> waived		Shareable			Age <49: once; Age 50+: q2y   <b>APA</b> waived		
Screening Colonoscopy	Age 45+, max \$2500	Ae 45+, q10y 6-month waiting period	Age 50+, 1/year, 3 per lifetime 12-month waiting period	No	Shareable, subject to AHP	May be sharable		Subject to AUA* (except Cologuard)		Shareable			Age 50+: q10y Max \$1,500		
Doctor's Office Visits	Not Included   Access through DPC	Not Included   Go through DPC	MRA Max \$300; \$35copay	Need-based*	After AHP, \$35 copay*	No	No	After PR	Through DPC Membership		Shareable			Shareable	
Hospitalization	100% after IUA*	IUA   Semi-private Room	Subject to MRA	Need-based*	Subject to AHP	After PR	After PR	After PR	Subject to AUA*		Shareable			Pre-notification required	
Emergency Care	100% after IUA*	IUA   +\$500 if 2nd ER for same	Subject to MRA	Need-based*	After AHP, \$200 copay*	After PR	After PR	After PR	Subject to AUA*		Shareable			Shareable	
Ambulance, Land/Air	For medical reasons   After IUA	Linked to medical need request	Emergencies   Land: max \$3k; Air. \$10k	Emergencies only	Between Hospitals Only		To nearest fac	cility	To nearest facility		To nearest facility		ty	To nearest facility; max \$25,000 for Air	
DPC Membership	Separate   Not Included	Separate   Not Included	No	No Sharable max \$100/mo	Up to \$1,800 shareable, after AHP		No		Partially Sharable*		Shareable, up to \$1,250/yr per family		r per family	No	
Prescriptions	During first <b>120</b> days of illness During first <b>12 months:</b> transplants No limitations for cancer, SLIT	Up to 12 months as related to a need request, max \$500/mo Available Rx Share add-on	No	First <b>120</b> days only	First <b>6 mos</b> after new diagnosis	No	No	After PR	During first <b>45</b> days for acute illness Subject to <b>AUA</b>		First 90 days after onset of incident		of incident	No	
Mental Health*	Max <b>\$1,500</b> Outpatient Max <b>\$5,000</b> Inpatient	Therapy w/ LifeWorks add-on	No	Inpatient only, up to \$50,000	Max 6 mos after new diagnosis	Only ER visit shareable		No		Shareable			Up to 10 visits/yr, \$125/visit		
Maternity*	Separate Maternity IUA: \$5,000 Routine, \$7,500 C-section No infertility treatments	IUA applies Time limit on need request No infertility treatment	None   90-day waiting period   (Ruby or \$5,000 Pregnancy MRA Sapphire)   Max Y1 \$12k; Y2+ \$25k	Due date > Start Date + 260 days Couple or Family plans only	After AHP for AHP > \$3,000 Max \$125,000 No infertility treatment	Hospiti	al Only	Max <b>\$125,000</b>	Shareable only if conception occurs after 7 months of membership Up to \$125,000/pregnancy   No Doula		Shareable			Due Date > Start Date + 10 months Pregnancy Pre-Share of \$2,500 for Married Single, \$900 for Couple	
Chiropractor	Max 15 visits \$1,500/need or /year	Max 25 visits/need	After the 1st year	Up to <b>120</b> days	Pre-surgical only: Max 20 visits, 6wks	No		Chiro. or Acupuncture: Up to <b>12</b> visits/yr, \$75/visit		Max 12 visits per year		year	Chiro: 12 visits/yr, \$75/visit; Acupuncture: 10 visits		
Hospice	Up to 90 days, max \$200/day	Up to 90 days	N/A Up to 90 days + poss and		Up to 30 days	No		Hospice: Up to 30 days; Respite: 5 days		Shareable			Pre-notification required		
поврісе	T	Up to 90 days per need	90-day waiting, max 40 visits or days/yr	No	Up to 30 days	No	No	Max 20 days	Prenotification to Liberty required		Shareable			Up to 30 days	
Skilled Nursing / LTC	Up to 60 days, max \$25,000/need			Visiting nurse: first 45 days	Max 60 days per incident	No	No No Max 45 visits		Up to 30 days per incident		Shareable			Up to 30 days	
	Up to <b>60</b> days, max <b>\$25,000</b> /need  Up to <b>90</b> days, max <b>\$200</b> /day	Max 30 days and \$5,000	No	visiting flurse. Ilist 43 days	, ,	No		No							
Skilled Nursing / LTC		Max 30 days and \$5,000  Up to 120 days for items > \$100	No No	Rental: 1 month; Purchase: max \$5,300	Rent: 6 months, or Purchase; With restrictions		No			No			No		No
Skilled Nursing / LTC Home Health Care	Up to 90 days, max \$200/day Up to 75% cost of equipment,			Rental: 1 month;	Rent: 6 months, or Purchase;	No No	No No No	Max 45 visits		No RT: Max 12 initia visits ehab: 12 initial +		Max		year	No  Max 12 visits for all therapy types combined

