WeShare

WeShare® Essential Program Brochure

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WeShare Essential is a virtual-based health sharing program that helps Members maintain a healthy lifestyle. By partnering with Amwell Telemedicine, WeShare Essential provides Primary Care, Urgent Care, Dermatology, Lactation, Nutrition, and Behavioral Health support with the convenience of on-the-go care. Members also receive in-person care for eligible services and prescription sharing benefits through CVS Caremark and MinuteClinic. It's a highly cost-effective program option for people who are looking for a healthcare sharing option for preventive care, unexpected injuries, and life-threatening illnesses.

Healthcare Anytime, Anywhere

WeShare Essential provides convenient, on-demand care — and added security for unexpected health issues — to bring wellness within reach for our Members with a busy lifestyle. Our community enjoys the peace of mind of quality, affordable, consistent care while being part of a family centered around health and wellbeing.

Your WeShare Essential membership is built to support you with a simple and connected care journey that starts with virtual care. Through Amwell Virtual Primary Care, you can establish a relationship with a dedicated Primary Care Provider who helps manage your health through annual wellness visits, prescription refills, lab work, and ongoing support for conditions like hypertension, diabetes, or depression. All virtual primary care visits are included at no additional cost. If you need care after hours or for immediate concerns like cold symptoms, infections, or minor injuries, Amwell's 24/7 Urgent Care is available to you, also at no additional cost.

You also have access to virtual specialist services through Amwell, including dermatology, nutrition, lactation support, and behavioral health. Members can receive up to 10 no-cost counseling sessions and 4 psychiatric visits per year through Amwell. If your provider recommends in-person care, you can visit a CVS MinuteClinic for services such as immunizations, injuries, infections, and reproductive health needs, all for just 20 dollars per visit. For more serious situations like emergencies, fractures, or life-threatening illnesses, you can seek care through the PHCS PPO network and use your sharing benefits to help with eligible expenses.

And if you end up needing medication, CVS Caremark™ supports all your prescription needs with more than 68,000 locations nationally, including Costco®, Kroger®, Walmart, and more.

WeShare Essential is healthcare that keeps up with you!

WeShare® Essential membership is offered and administered by Unite Health Share Ministries (UHSM), a Healthcare Sharing Ministry (HCSM). WeShare® Essential membership reflects the program elements at the time of publishing (2026) and is subject to change with 30 days' notice. WeShare®, healthcare by UHSM, is not insurance, and UHSM is not an insurance company. Neither UHSM nor any Sharing Member is compelled by law or otherwise to voluntarily contribute toward your medical bills. You are responsible for your medical bills regardless of any sharing of expenses you may receive as a WeShare® Essential Member.

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Simple, Fair, & Friendly Health Sharing

Here are just a few of the benefits and resources included in your WeShare Essential Sharing Program membership:

Easy To Understand Sharing Benefits

We make membership as simple as possible. When you need care, you'll see that either (1) your eligible services are included in your membership at no additional cost, (2) you'll pay a small consultation fee, or (3) you'll be responsible for bills until your Annual Member Care Share amount is reached.

Wellness Perks Included

Caring for your mind, body, and spirit goes beyond taking care of your medical needs. Whether you're looking to begin or maintain a nutrition or fitness plan, or want resources to deepen your relationship with God, WeShare Members have access to exclusive wellness perks including FitBod®, Active&Fit®, HelloFresh®, Noom®, and RightNow Media® (valued at over $1,000). Learn more at weshare.org/benefits-of-joining.

A Better You. Today.

We care about your whole well-being, and that includes your mental and emotional health. As part of your membership, you have access to a wide range of virtual therapy and behavioral health services through both BetterHelp and Amwell. BetterHelp, one of the nation's leading online counseling platforms, offers individual, couples, and family therapy, along with group sessions to help you navigate everyday challenges or focus on specific concerns. Amwell also provides access to licensed counselors and therapists, giving you even more flexibility and options for care. Your membership includes up to 10 counseling sessions per year through either BetterHelp or Amwell and up to 4 psychiatric visits annually through Amwell, all at no additional cost.

WeShare App

The WeShare app is your one-stop-shop for everything you need as a WeShare Member. From your digital Member ID card to the provider search tool to a robust rewards platform, the WeShare app is how your WeShare Essential membership goes wherever life takes you.

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WeShare Essential Sharing Summary

WeShare Essential is available at two membership tiers. With either a $5,000 or $10,000 Annual Member Care Share, Members can choose the annual out-of-pocket limit that fits their needs. The $5,000 AMCS amount is perfect if you want a little more security—if you have a major health event, then you pay less out-of-pocket when you need care. With the $10,000 AMCS amount, your Monthly Contribution to your Sharing Program is less and is great if you're someone who does not frequently access medical care beyond preventive visits or the virtual care included with your membership.

ANNUAL MEMBER CARE SHARE (AMCS)	
Individual	**Family[1]**
$5,000	$10,000
$10,000	$20,000

[1]For families, a minimum of two Members must meet their individual maximum AMCS within a calendar year.

WeShare Essential offers generous sharing for virtual care, CVS MinuteClinic, urgent care, emergencies, accidents, and life-threatening illnesses. However, it is not a comprehensive healthcare program and does not include sharing for office-based physician services, diagnostics before a diagnosis, or follow-up care after stabilization (such as physical therapy). Hospital sharing includes inpatient care and outpatient facility services for accidental injuries and life-threatening conditions only. A summary of eligible services and sharing levels is provided below.

MEDICAL SERVICES	
Preventative Care Follows healthcare.gov guidelines, except where services are excluded per the membership guidelines	
Routine Annual Physical Visits must be through Amwell virtual primary care or CVS MinuteClinic; Standard lab panel is included	$0 Consultation Fee
Physician Services Labs ordered by Amwell, CVS MinuteClinic, or any Urgent Care are eligible and should be sent to Quest Diagnostics or LabCorp of America where a $40 lab fee will apply. If the lab is drawn and processed in-house (e.g. Urgent Care), they are eligible at 100% after the AMCS is met.	
Amwell Virtual Primary Care, Urgent Care, Nutrition, Dermatology, and Lactation Support	$0 Consultation Fee
CVS MinuteClinic	$20 Consultation Fee
Urgent Care Two visit limit per year	$100 Consultation Fee
Virtual Behavioral Health and Psychiatric Counseling Excludes in-patient or out-patient services. 10 counseling sessions are allowed per Member, per year through Amwell or BetterHelp. 4 psychiatric visits are allowed per member, per year through Amwell. Please be aware that medications typically associated with psychiatric diagnoses are not eligible for sharing under this program.	$0 Consultation Fee
Wellness Support	
Wellness Subscriptions Membership includes access to exclusive wellness perks. Refer to the wellness perks brochure for additional information.	Included with Membership

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MEDICAL SERVICES (CONT.)	
Emergency	
Emergency Room Includes emergency room department charge and the ER Physician fees; all other services follow the specific sharing benefit for the service being rendered and may be subject to AMCS. Subject to AMCS if admitted inpatient.	$750 Consultation Fee
Ambulance Services	$500 Share Maximum, per ride, after AMCS
Air Transport	$10,000 Share Maximum, per ride, after AMCS
Labs	100% after AMCS
X-Ray & Diagnostic Imaging	X-Ray: $25 Consultation Fee All other imaging: 100% after AMCS
Surgery and Anesthesia	100% after AMCS
Inpatient Services	
Hospitalization Surgery Anesthesiologist Labs	100% after AMCS
X-Ray & Diagnostic Imaging	X-Ray: $25 All other imaging: 100% after AMCS
Outpatient Services*	
Ambulatory Surgery Center Hospital Surgery Center	100% after AMCS
Pre-Existing Conditions	
Pre-Existing Conditions Qualifying diagnosed or undiagnosed pre-existing conditions accepted include, but are not limited to: Pre-Diabetes, Type 2 Diabetes, Hypertension (High Blood Pressure), Hypotension (Low Blood Pressure); Hyperlipidemia	Year 1: Up to $15,000, after AMCS Year 2: Up to $25,000, after AMCS Year 3: Up to $50,000 after AMCS
Tobacco, Marijuana, or E-Cigarettes Applicable in the event of tobacco, marijuana, or e-cigarette related illnesses such as Cancer, Respiratory Disease, Vascular Diseases including Coronary Disease and Stroke, Oral / Esophageal Diseases and Gastric / Duodenal Ulcers	$25,000 AMCS
Specialty Services	
Dental Discounts Through Careington Dental - POS Network Vision Discounts Through Superior Vision – SPVC Hearing Care Discounts Includes free hearing exams and discounted hearing aids through Amplifon Hearing Health Care	Included with membership
Miscellaneous	
Durable Medical Equipment Including but not limited to crutches, wheelchair, etc. Equipment must be obtained from a licensed supplier and ordered as a result of an eligible inpatient or outpatient service, CVS MinuteClinic or Amwell visit, or an Urgent Care visit	$1,200 Maximum per Member, per year, after AMCS

*Consultation Fees apply to each visit/session.

*AMCS does not apply to services that apply a designated fee (e.g, consultation fee), unless otherwise stated.

*Outpatient facility care provided for the single outpatient incident correlated to an accidental injury or life-threatening illness is eligible. Each subsequent outpatient service must be related to a current life-threatening illness or urgent need. Diagnostics to diagnose a condition and follow-up care for a stabilized illness or injury are not eligible. Surgical services related to an accidental injury are eligible when performed to stabilize an acute fracture or traumatic injury to allow proper healing. These services do not need to occur on the same day as the initial emergency or outpatient visit. Procedures performed within 21 days of the injury are eligible when they are directly related to the stabilization or treatment of the acute injury. Procedures performed after 21 days may be eligible with clinical review and must demonstrate that the service is required for proper healing of the original injury and that any delay was medically appropriate.

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Pharmacy

There is a separate AMCS for prescriptions and an annual pharmacy share maximum applies, as outlined below.

ANNUAL MEMBER CARE SHARE (AMCS)		
Annual Member Care Share (AMCS)	**Annual Pharmacy Share Maximum**	**Prescription Fees**
$250 per Member	$2,500 per Member	Based on medication's formulary, see grid below

PHARMACY SERVICES	
Formulary Generic Medications	
Pharmacy, up to a 30-day supply Mail-Order, up to a 90-day supply	40% co-share, AMCS does not apply
Standard Brand Formulary Medication	
Pharmacy, up to a 30-day supply Mail-Order, up to a 90-day supply	30% co-share, after AMCS is met
Non-Formulary / Specialty Brand Medications	Not eligible

*Topical cream prescriptions are not eligible

Note: Mail order is set up and managed through CVS Caremark online. You have the option to pick up, 1-2 day delivery, or mail order delivery for 90-day maintenance drugs only at CVS Pharmacy locations. Small fee for 1-2 day delivery may apply.

Prescription Discount Program

Optum Perks is a free prescription discount service available to WeShare Members, providing potential savings apart from your Pharmacy Sharing Services above. It offers coupons and discount cards that can help you save up to 80% on most FDA-approved medications, select medical equipment, and non-prescription injections like flu and shingles shots. These discounts are accepted at thousands of pharmacies nationwide and can help lower your out-of-pocket costs.

Note: Members must choose between using Optum Perks or their pharmacy benefits—they cannot use both for the same prescription. Be sure to talk to your pharmacist to understand which option is best for your situation and ensure you're making the most cost-effective choice.

Optum Perks for Prescription Drugs

Optum Perks is a free prescription discount service available to WeShare Members. It offers coupons and discount cards that can help you save up to 80% on most FDA-approved medications, select medical equipment, and non-prescription injections like flu and shingles shots. These discounts are accepted at thousands of pharmacies nationwide and can help lower your out-of-pocket costs—even if you already have pharmacy or sharing benefits.

Important: Optum Perks is not compatible with your pharmacy benefits. If you use Optum Perks for a prescription, you will not be able to use your pharmacy benefits for that same medication.

Talk to your pharmacist to understand which option is best for your situation and make the most cost-effective choice.

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Amwell Virtual TeleMedicine

Primary Care:

- Establish a relationship with a dedicated Primary Care Provider (PCP) for all your primary care needs (e.g.: manage all aspects of your health or focus on specific conditions, like hypertension, breathing problems, obesity, diabetes, or depression). Get annual physicals, prescription refills, referrals, labs, and more. $0 consult fee.

Urgent Care:

- Get care 24/7 for common health issues including colds, allergies, COVID-19 symptoms, the flu, sinus infections, UTIs, and more. Physicians assess your symptoms, provide a treatment plan, and send prescriptions to the pharmacy of your choice when needed.

Nutrition:

- Schedule an appointment to receive meal plans, recipes, and tips to reach your goals from registered dieticians.

Lactation Consultation:

- Need breastfeeding support? Schedule a visit and get care without having to leave home with your baby.

Dermatology:

- Have a concern about the health of your skin, hair, or nails? You don't have to schedule an appointment with a dermatologist or wait several weeks to be seen. Simply complete a pre-screen questionnaire, summary of the symptoms, and images of the area impacted to receive a customized treatment plan.

Sleep Support, Hearing, Dental, Vision, and Lasik Discount Programs

Advanced Sleep Support

Quality sleep is one of the most powerful foundations of overall health. Research shows that restorative, uninterrupted sleep supports heart health, strengthens the immune system, regulates metabolism and weight, enhances focus and memory, and reduces stress and anxiety. Poor sleep quality has been linked to higher risks of chronic conditions like heart disease, diabetes, and depression. Simply put, better sleep doesn't just help you feel more energized — it helps your body and mind function at their best every day.

That's why we partner with Sleepwatchers to offer discounts on their comprehensive support that helps you achieve the quality sleep your body and mind need. Their experienced sleep practitioners provide thorough, personalized evaluations to determine the most appropriate testing or treatment plan for you. WeShare Essential Members save nearly 60% on average for sleep studies, consultations, and sleep equipment when accessing Sleepwatchers' services.

Amplifon Hearing Health Care

Amplifon offers a wide choice of state-of-the-art products from leading hearing aid brands to meet your lifestyle, technology, and hearing needs, all at a discounted rate. A hearing care professional can help you determine which option is right for you. Amplifon offers support with locating care and scheduling free hearing exams or hearing equipment assessments, all while saving an average of 65% off MSRP.

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Careington Dental – POS Network

We've partnered with Careington International Corporation, an industry leader in dental care, to provide you hassle-free savings to maintain your oral hygiene. You have access to one of the most recognized networks in the nation with 20% to 50% savings on most dental procedures, including routine oral exams, unlimited cleanings, and major work such as dentures, root canals, crowns, and more. Plus, all dentists must meet highly selective credentialing standards based on education, background, license standing, and other requirements. Simply present your discount card to your dental provider and save.

Careington Dental Plan Features:

- Save 20% to 50% on most dental procedures including routine oral exams, unlimited cleanings, and major work such as dentures, root canals, and crowns. You can also save on cosmetic dentistry such as bonding and veneers.
- 20% savings on orthodontics including braces and retainers for children and adults.
- 20% reduction on specialists' normal fees. Specialties include endodontics, oral surgery, pediatric dentistry, periodontics, and prosthodontics where available.
- Visit any participating dentist on the plan and change providers at any time.
- Get the care you need without surprise costs or annual spending limits.

CAREINGTON CARE POS SAMPLE SAVINGS

Procedure Description	*Regular Cost	**Plan Cost	Savings $	Savings %
Routine Checkup	$76	$33	$43	57%
Extensive Oral Exam	$134	$59	$75	56%
Four Bitewing X-Rays	$92	$41	$51	55%
Adult Cleaning	$133	$63	$70	53%
Child Cleaning	$92	$46	$46	50%
Composite (White) Filling (Front Teeth)	$215	$100	$115	53%
Crown (porcelain fused to noble metal)	$1,556	$699	$857	55%
Molar Root Canal	$1,638	$685	$953	58%
Complete Upper Denture	$2,299	$1,060	$1,239	54%
Extraction (single tooth)	$266	$121	$145	55%

*Regular Cost is based on the average 80th percentile usual and customary rates as detailed in the 2024 Fair Health Report within the United States.

**Plan Cost represents the average of the assigned Careington Care POS plan fees within the United States.

* Prices subject to change.

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Superior Vision – SPVC

Save 5% to 30% on eye care and wear with the Superior Vision discount program. Discounts are offered at more than 40,000 participating provider locations on exams, eyeglasses, contact lenses, LASIK, and more. Even if you've got 20/20 vision, comprehensive eye exams can help detect signs of serious health conditions like glaucoma, diabetes, high blood pressure, and high cholesterol.

SUPERIOR VISION SAMPLE SAVING

Service	Regular Cost*	Plan Cost	Typical Member Savings
Vision Exam	$155	$75	$80
Frames	$130	$91	$39
Single Vision Lenses	$80	$40	$40
Photochromics	$100	$70	$30
Anti-Reflective Coating	$102	$45	$57
Total	$567	$321	$246

*Represents national average retail costs comparing to Member Fee Schedule. The actual savings may vary based on amount purchased and location.

This plan is not insurance.

QualSight LASIK – AMST

Members receive savings of 20% to 30% off the overall national average cost of LASIK surgery through QualSight at more than 800 locations.

The QualSight program is not an insured program.

THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. The list of participating providers is at uhsm.solutionssimplified.com. A written list of participating providers is available upon request. Discount Plan Organization and administrator: Careington International Corporation, 7400 Gaylord Parkway, Frisco, TX 75034; phone 800-441-0380. This plan is not available in Vermont, Utah, Washington, and Montana.

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White Glove Care

Our Member Services and Provider Concierge teams are committed to ensuring a worry-free experience for all and are always happy to help answer questions, check status updates, or help you navigate your healthcare journey. In that spirit, WeShare Essential offers added resources and support through the for any and all Members diagnosed with a critical or chronic illness or cancer while enrolled as a Member of WeShare Essential.

Terms and Conditions

Waiting Periods and Annual Sharing Maximums

Membership and wellness perks of WeShare Essential are available for sharing upon effective date of membership including, but not limited to, telehealth services provided through Amwell, CVS MinuteClinic, routine annual physical, and any immediate life-threatening emergency services. However, certain limitations apply for select services. For example, cancer procedures and treatments require twelve (12) months of continuous membership. Some services also have annual sharing maximums per Member or per instance share limits (e.g., ambulance has a $500 per ride share limit, while durable medical equipment has a $1,200 annual maximum). Sharing eligibility and stipulations can be found in the WeShare Essential membership guidelines. In the event a service is not eligible or fully shared by the program Members are always personally responsible for their own medical bills.

Not a Reimbursement Program or Insurance

WeShare Essential is not a reimbursement program. WeShare Essential is NOT an insurance company nor is the membership offered through an insurance company. WeShare Essential membership is offered and administered by Unite Health Share Ministries™ (UHSM), a nonprofit, religious health sharing ministry that facilitates Member-to-Member sharing of eligible medical expenses. WeShare Essential Members have access to pre-negotiated rates for medical services through CVS MinuteClinic and CVS Caremark Networks. Members should never have to pay cash upfront for services in-network, with the only payment incurred at the time of service being the per Member, per visit consultation fee, as outlined in the membership guidelines. All Sharing Members are responsible for their own medical expenses, less any shared dollars.

OTHER PROGRAM FEES	
Application fee	**$149 one-time fee**
Tobacco, e-cigarette and marijuana users	**$50 per Member of usage, per month**
Four or more listed dependents	**$50 per dependent, per month**
Program Change Fee	**$99 per program change, limited to once per year**

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Annual Member Care Share (AMCS) – The amount each Sharing Member commits to paying their care provider when obtaining services, before the Sharing Program will contribute towards eligible medical needs. This amount is based on the selected Sharing Program tier and is accumulated as medical services are received throughout the calendar year, from January 1 through December 31. AMCS must be met for each individual Sharing Member within a calendar year, including the Sharing Members that are considered dependents. For families, a minimum of two members must meet their maximum AMCS within a calendar year. After the AMCS is met for the calendar year, all eligible medical costs subject to the AMCS are shared at 100%, for all family members. Generally, and unless otherwise noted, the AMCS applies to services obtained. However, certain services are not subject to the AMCS and may be shared at 100% or only require a consultation or service fee (listed herein). If a consultation or service fee applies, it will continue to apply even after the AMCS is met.

Annual Pharmacy Share Maximum – The maximum amount any WeShare Essential program will share, per Member, per year, for eligible pharmacy services.

Consultation/Consult Fee – A fixed dollar amount that is paid by a Sharing Member to the participating provider at the time of medical services rendered.

Eligible/Eligible for Sharing – A status indicating that a Sharing Member has met the conditions to qualify for sharing as described in the membership guidelines and as aligned with the parameters of the Sharing Program. Eligible for sharing expenses are those medically necessary services, supplies and/or treatment that are eligible for sharing under this Health Sharing Program. Charges for services, supplies, and/or treatments meant to treat or correct a preventable condition or a cost which arises solely due to a provider's medical error are not considered eligible for sharing expenses. A finding of provider negligence and/or malpractice is not required for service(s) and/or fee(s) to be considered not reasonable and allowed or not eligible for sharing.

Medical Need(s) – Charges or expenses rendered for medical services provided by a facility or a licensed medical professional to address illnesses or accidents.

Medically Necessary – A service, procedure, or medication that is necessary to restore or maintain physical function of a Sharing Member, and is provided in the most cost-effective setting, consistent with the Sharing Member's condition. The fact that a medical professional may prescribe, administer, or recommend services/care does not constitute a medical necessity, even if it is not listed as a membership limitation, or an ineligible need in the membership guidelines. To help determine medical necessity, WeShare Essential may request the Sharing Member's medical records, and may require a second opinion from a third-party medical professional. Additionally, medically necessary relates to healthcare services or supplies determined by the shareable medical bill (SMB)s administrator in its discretion as necessary to diagnose or treat an illness, injury, condition, disease, or its symptoms, and that meet accepted standards of medicine.

If your shareable medical bill (SMB) is denied for reasons that involve medical judgment (such as lack of medical necessity) you may appeal the decision. Please see the appeals section of the membership guidelines for more information.

Membership Guidelines – A document which provides the recital of guidelines by which Sharing Members agree to. The membership guidelines describe the program elements, resources, membership details, and any stipulations/limitations that apply to membership and Sharing Programs. The membership guidelines help Sharing Members understand how monthly contributions are shared in accordance with the escrow instructions.

Participating Providers – Medical care professionals, facilities, and services **–** those of which fall within an in-network jurisdiction **–** and are under contract with WeShare through network partnerships with PHCS/MultiPlan and CVS Caremark to help limit medical costs for all Sharing Members. Participating providers can be found at weshare.org/find-a-provider or by calling Member Services at 800-900-8476.

When searching for participating providers, any results provided are for reference only; participating physicians, hospitals and/or healthcare providers may change at any point, and directories can at times be outdated. Please confirm network participation with provider and provide individual WeShare membership identification card(s) prior to scheduling any appointments, and before any service is rendered. Members are always personally responsible for their own medical bills.

Pre-Existing Condition – Any medical condition that a Sharing Member has prior diagnostics, represented symptoms for, been examined related to, and/or has received treatment prior to becoming an Active Sharing Member – whether could have been known to a Sharing Member or not– is considered a pre-existing condition.

Sharing Member – Those who have applied to become a WeShare Sharing Member and have agreed with the Statement of Faith and Shared Beliefs; the sharing membership commitments, and the escrow instructions, and are not to be ineligible, as a result of any other reason (including age restrictions). Sharing Members much choose a Sharing Program tier, submit scheduled monthly contributions, through the form of direct payment. Sharing Members may submit eligible medical needs for sharing in conjunction with the membership guidelines, those of which constitute the specific Sharing Program and the escrow instructions.

Sharing Program – WeShare healthcare Sharing Programs offer a community of members who share in eligible medical expenses. They are available through varying tiers, those of which constitute Annual Member Care Share (AMCS) amounts and maximums. Each tier is selected and approved on the membership application, recorded, and audited for accuracy.

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General Notices

This program is not an insurance company nor is it offered through an insurance company. This program does not guarantee or promise that your medical bills will be shared. Whether anyone chooses to pay your medical bills will be totally voluntary. As such, this program should never be considered as a substitute for an insurance policy. Whether or not you receive any payments for medical expenses and whether this program continues to operate, you are always liable for any unpaid bills. Neither WeShare nor UHSM constitute as an insurance company nor is the membership offered through an insurance company.

WeShare Essential is a program and product of Unite Faith Ministries, Inc., which is a 501 (c) (3) nonprofit corporation, dba "Unite Health Share Ministries" or "UHSM." WeShare Essential, a program of Unite Health Share Ministries (UHSM), is a religious organization facilitating the sharing of eligible medical expenses.

It is not an insurance company, and neither its guidelines or its plan of operation, or any other documents of the religious organization constitute or create an insurance policy. Membership is not offered through an insurance company, and the organization is not subject to the regulatory requirements or consumer protections of any state's insurance code. The sharing programs, services, publications, and any materials given should never be considered a substitute for an insurance policy.

Any publication or any other material given by UHSM are not issued by an insurance company, nor are they offered through an insurance company. This publication or any other materials do not represent, guarantee or promise that you will be eligible for membership or that your medical bills will be published or assigned to other members for payment. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant is compelled by law to contribute towards your medical bills. Regardless of whether you receive any payments for medical expenses or whether this organization continues to operate, you are always responsible for the payment of your own medical bills.

This is NOT Insurance.

State-Specific Notices

Alabama Code Title 22-6A-2
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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.

Alaska Statute 21.03.021(k)
Notice: The organization coordinating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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. Participation in the organization or a subscription to any of its documents should never be considered to be insurance. Regardless of whether you receive a payment for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Arizona Statute 20-122
Notice: The organization facilitating the sharing of medical expenses is not an insurance company and the ministry's guidelines and plan of operation are not an insurance policy. Whether anyone chooses to assist you with your medical bills will be completely voluntary because participants are not compelled by law to contribute toward your medical bills. Therefore, participation in the ministry or a subscription to any of its documents should not be insurance. Regardless of whether you receive any payment for medical expenses or whether this ministry continues to operate, you are always personally responsible for the payment of your own medical bills.

Arkansas Code 23-60-104.2
Notice: The organization facilitating the sharing of medical expenses is not an insurance company and neither its guidelines nor plan of operation is an insurance policy. If anyone chooses to assist you with your medical bills, it will be totally voluntary because participants are not compelled by law to contribute toward your medical bills. Participation in the organization or a subscription to any of its documents should never be considered insurance. Regardless of whether you receive a payment for medical expenses or if this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Colorado, Disclaimer:
A health care cost-sharing arrangement is not a qualified health plan, and participation or membership in a health care cost-sharing arrangement does not guarantee payment of bill or medical expenses. A member of a health care cost-sharing arrangement remains personally responsible for payment of all bills or medical expenses. A member of health care costs-sharing arrangement may be subject to certain pre-existing condition exclusions or other limitations.

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Florida Statute 624.1265
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. Membership is not offered through an insurance company, and the organization is not subject to the regulatory requirements or consumer protections of the Florida Insurance Code. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant is 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 payments for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Georgia Statute 33-1-20
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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 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.

Idaho Statute 41-121
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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 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.

Illinois Statute 215-5/4-Class 1-b
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation constitute or create an insurance policy. Any assistance you receive with your medical bills will be totally voluntary. As such, participation in the organization or a subscription to any of its documents should never be considered insurance. Whether or not you receive any payments for medical expenses and whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Indiana Code 27-1-2.1-1
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 insurance. Whether or not you receive any payments for medical expenses and whether 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 NOR 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.

Louisiana Revised Statute Title 22-318,319
Notice: The ministry facilitating the sharing of medical expenses is not an insurance company. Neither the guidelines nor the plan of operation of the ministry constitutes an insurance policy. Financial assistance for the payment of medical expenses is strictly voluntary. Participation in the ministry or a subscription to any publication issued by the ministry shall not be considered as enrollment in any health insurance plan or as a waiver of your responsibility to pay your medical expenses.

Maine Revised Statute Title 24-A, §704, sub-§3
Notice: The organization facilitating the sharing of medical expenses is not an insurance company and neither its guidelines nor plan of operation is an insurance policy. 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. Participation in the organization or a subscription to any of its documents should never be considered insurance. Regardless of whether you receive payment for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Maryland Code Ann. Ins. §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 this entity continues to operate, you are always liable for any unpaid bills.

Michigan Section 550.1867
Notice: Unite Faith Ministries, Inc., DBA WeShare, Unite Health Share Ministries or UHSM, that operates this health care sharing ministry is not an insurance company and the financial assistance provided through the ministry is not insurance and is not provided through an insurance company. Whether any participant in the ministry chooses to assist another participant who has financial or medical needs is totally voluntary. A participant will not be compelled by law to contribute toward the financial or medical needs of another participant. This document is not a contract of insurance or a promise to pay for the financial or medical needs of a participant by the ministry. A participant who receives assistance from the ministry for his or her financial or medical needs remains personally responsible for the payment of all of his or her medical bills and other obligations incurred in meeting his or her financial or medical needs.

Mississippi Code Title §83-77-1
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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 insurance. Regardless of whether you receive any payment of medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Missouri Section 376.1750
Notice: This publication is not an insurance company nor is it offered through an insurance company. Whether anyone chooses to assist you with your medical bills will be totally voluntary, as no other subscriber or member will be compelled to contribute toward your medical bills. As such, this publication should never be considered insurance. Whether you receive any payments for medical expenses and whether this publication continues to operate, you are always personally responsible for the payment of your own medical bills.

Nebraska Revised Statute Chapter 44-311
IMPORTANT NOTICE. This organization is not an insurance company, and its product should never be considered insurance. If you join this organization instead of purchasing health insurance, you will be considered uninsured. By the terms of this agreement, whether anyone chooses to assist you with your medical bills as a participant of this organization will be totally voluntary, and neither the organization nor any participant can be compelled by law to contribute toward your medical bills. Regardless of whether you receive 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 Nebraska Department of Insurance. You should review this organization's guidelines carefully to be sure you understand any limitations that may affect your personal medical and financial needs.

New Hampshire Section 126-V:1
IMPORTANT NOTICE This organization is not an insurance company and its product should never be considered insurance. If you join this organization instead of purchasing health insurance, you will be considered uninsured. By the terms of this agreement, whether anyone chooses to assist you with your medical bills as a participant of this organization will be totally voluntary, and neither the organization nor any participant can be compelled by law to contribute toward your medical bills. Regardless of whether you receive 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 New Hampshire Insurance Department. You should review this organization's guidelines carefully to be sure you understand any limitations that may affect your personal medical and financial needs.

North Carolina Statute 58-49-12
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. Whether anyone chooses to assist you with your medical bills will be voluntary. 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 insurance. Regardless of whether you receive any payment for medical expenses or whether this organization continues to operate, you are always personally liable for the payment of your own medical bills.

Pennsylvania 40 P.S. Insurance § 23(b)
Notice: This publication is not an insurance company nor is it offered through an insurance company. This publication does not guarantee or promise that your medical bills will be published or assigned to others for payment. Whether anyone chooses to pay your medical bills will be totally voluntary. As such, this publication should never be considered a substitute for insurance. Whether you receive any payments for medical expenses and whether this publication continues to operate, you are always liable for any unpaid bills.

South Carolina, Important Notice:
The health care sharing ministry facilitating the sharing of medical expenses is not a health insurance company, and neither its guidelines nor plan of operation is an insurance policy. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant or group of participants 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

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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.

South Dakota Statute Title 58-1-3.3
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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 insurance. Regardless of whether you receive any payments for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Texas Code Title 8, K, 1681.001
Notice: This health care sharing ministry facilitates the sharing of medical expenses and is not an insurance company, and neither its guidelines nor its plan of operation is an insurance policy. 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 ministry 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 ministry continues to operate, you are always personally responsible for the payment of your own medical bills. Complaints concerning this health care sharing ministry may be reported to the office of the Texas attorney general.

Virginia Code § 38.2-6300-6301
Notice: This publication is not insurance and is not offered through an insurance company. Whether anyone chooses to assist you with your medical bills will be totally voluntary, as no other member will be compelled by law to contribute toward your medical bills. As such, this publication should never be considered to be insurance. Whether you receive any payments for medical expenses and whether or not this publication continues to operate, you are always personally responsible for the payment of your own medical bills.

West Virginia, Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. 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.

Wisconsin Statute 600.01 (1) (b) (9)
ATTENTION: This publication is not issued by an insurance company, nor is it offered through an insurance company. This publication does not guarantee or promise that your medical bills will be published or assigned to others for payment. Whether anyone chooses to pay your medical bills is entirely voluntary. This publication should never be considered a substitute for an insurance policy. Whether or not you receive any payments for medical expenses, and whether or not this publication continues to operate, you are responsible for the payment of your own medical bills.

Wyoming 26-1-104 (v)
Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. Any assistance with your medical bills is completely voluntary. No other participant is compelled by law or otherwise to contribute toward your medical bills. Participation in the organization or a subscription to any of its documents shall not be considered to be health insurance and is not subject to the regulatory requirements or consumer protections of the Wyoming insurance code. You are personally responsible for payment of your medical bills regardless of any financial sharing you may receive from the organization for medical expenses. You are also responsible for payment of your medical bills if the organization ceases to exist or ceases to facilitate the sharing of medical expenses.