ShareWise
ADVANTAGE PRO



Key Catastrophic Benefits:

- Hospitalization and Surgery
- 3 Unshared Amounts (UAs) suited for varying budgets
- No Annual or Lifetime Sharing Maximums

Key Acute-Shared Benefits:

- First Dollar Benefits for Acute Physician & Urgent Care Visits
- Largest Nationwide PPO Network to access physicians

Additional Benefits:

- Healthcare Advocacy
- $0 Labs & $150 Imaging Program
- Discount Dental and Vision

ABOUT

ShareWise Advantage PRO is a collective solution to bring healthcare options to families like yours. Products and services are cultivated by ShareWELL, a health share community.

ShareWELL is not your typical Health Share company. We are committed to providing choices and breaking down barriers to wellness and healthcare. At ShareWELL, we are more than just another Health-Sharing community—we're a community built on innovation, compassion, and healthcare freedom. Every member's healthcare journey holds significance to us, and together, we're reshaping the healthcare narrative, one shared bill at a time. The ShareWELL portion of ShareWise allows for sharing of larger healthcare expenses due to unforeseen accidents and illnesses.

SUMMARY OF PROGRAM

Primary Care Membership Benefits	
In Network Services	PHCS Practitioner & Ancillary Network: www.multiplan.com/TTAPracAnc Prime Health Network: https://primehealthservices.com/fh/
Preventive Care	$2,500 Max Benefit per Membership Year
Virtual: **Telemedicine** **Behavioral Health**	Consultations at $0 Visit Fee, Unlimited Consultations at $0 Visit Fee, Limit 6 per Life Event
In-Network: **Primary Care** **Urgent Care Visits**	$20 Visit Fee, Limit 6 per Membership Year $50 Visit Fee, Limit of 4 per Membership Year
In-Network: **Specialist Visits** **Chiropractic Visits**	$50 Visit Fee, Limit of 4 per Membership Year $35 Visit Fee, Limit of 12 per Membership Year
Imaging: **Basic** **Advanced**	$50 Visit Fee - Limit of 6 per Membership Year $200 Visit Fee - Limit of 2 per Membership Year and up to $600 per test
Discount Labs & Advanced Imaging	Up to 3500 Laboratory Tests as low as $0 Cash-pay Fee Advanced Imaging Services as low as $150 Cash-Pay Fee per scan ****Concierge Team schedules lab(s) & advanced imaging at a facility near you**
Retail Pharmacy	• ACA Preventative Medications & Tier 1 Generics (Under $5) $0 Fill Fee • Tier 1 Generics (All other) $15 Fill Fee, Up to $100 per prescription • Tier 2 Preferred Brands $40 Fill Fee, Up to $100 per prescription • Tier 3 Non-Preferred Brands $65 Fill Fee, Up to $125 per prescription

Acute Care Services listed in the grid above are not a part of ShareWELL Health Share. Instead, these services are offered through MightyWell Concierge membership administered by Tall Tree Administrators.

Member is responsible for reviewing and understanding the Schedule of Benefits and Plan Document specific to Atlas Health prior to obtaining services, which is located in the Member Portal, or by calling Customer Service.

IN-Network Services through PHCS or Prime Health. NO OUT-OF-NETWORK SERVICES.

ShareWELL

SHARED SERVICES

Unshared Amount Options[1]	$ 1,500	$ 3,000	$ 6,000
Annual / Lifetime Sharing Maximum	There are no annual or lifetime maximums for Sharing Requests.		
Household Maximum UA	2 UA's in a rolling 12-month period		
Emergency Room	Shareable at 100% after UA is met		
Inpatient / Outpatient: Facility Expenses	Shareable at 100% after UA is met		
Inpatient / Outpatient: Provider Services			
Inpatient / Outpatient: Surgery			
Maternity*	Shareable at 100% after UA is met		
End of Life Sharing**	$10,000 Member's Death $10,000 Spouse's Death $2,500 Child's Death		

*1 Month Conception Waiting Period and Pre-existing Condition Limitations Apply
** After one year of active membership

ShareWise Advantage contains a health share program available through ShareWELL, a health-sharing community.

Member is responsible for reviewing and understanding Member Guidelines. Shared Needs are administered by ShareWELL Partners, LLC.

[1]UNSHARED AMOUNT (UA) is also known as your personal responsibility amount for catastrophic medical events.

[1]There are three UA level options: $1,500, $3,000, and $6,000.
All eligible medical expenses submitted after the UA is met, and within six months of service, are shareable at 100 percent. For each unexpected medical need, the ShareWELL will share medical costs after the UA is met. You will not need to pay the UA again until you are symptom-free for twelve months. Additionally, members will not be responsible for more than two UAs per household in a rolling twelve-month period.

ShareWELL

FAQ's

What is Health Sharing?

A Health Share is an arrangement whereby members agree to share medical expenses through voluntary giving. It is made up of like-minded individuals who all agree on the standards outlined in the **Membership Guidelines.** Health Share memberships are NOT insurance or registered as insurance.

Why do members join ShareWELL?

A ShareWELL membership means healthcare freedom, savings, and a safety net for the unexpected in life. While each individual, family, and business joins for different reasons, these are the ways in which ShareWELL makes one's healthcare journey a better one.

Are there any caps or maximums to how much the community will share for medical expenses?

No. There are no lifetime maximums, monthly caps, or other limitations on how much funding can be shared for eligible medical expenses. Certain care may have a sharing allowance that will be clearly outlined in the member guidelines.

Does ShareWELL only share in large medical expenses?

As part of the ShareWise Advantage PRO enrollment, members also have access to acute office visits to Primary Care, Specialist, and Urgent Care services. Eligible expenses under this portion of ShareWise Advantage PRO should be submitted to Tall Tree Administrators.

Do I have to file a claim for my dental and vision care?

No, there are not any claims to file for services received at a Careington dentist or VSP vision provider. When receiving services, the provider(s) will verify membership and provide a cash-pay price.

MEDICAL CONDITIONS EXISTING PRIOR TO MEMBERSHIP

ShareWELL members have a waiting period for medical conditions that existed before the membership start date. A pre-existing medical condition limitation is applied based on the first date of active membership.



Any illness or injury for which a person has had any of the following occur:

- Been examined
- Taken medication
- Had symptoms
- Received medical treatment

Within 24 months prior to the effective date of the membership is considered a pre-existing condition.

PRE-EXISTING FOR CANCER

Any testing, preventive treatments, prophylactics, or medications that were taken by the member 36 months prior to the start date of a previously diagnosed cancer will result in a recurrence of that type of cancer being considered a pre-existing condition.

EXCEPTIONS THAT ARE NOT CONSIDERED PRE-EXISTING

High blood pressure, high cholesterol, hyperthyroidism, hypothyroidism, and type 2 diabetes will not be considered preexisting conditions as long as the member has not been hospitalized for the condition in the 12 months before enrollment.

PRE-EXISTING CONDITION PHASE-IN PERIOD

Pre-existing conditions have a phase-in period wherein sharing is limited. Members have a one-year waiting period from the initial enrollment date before pre-existing conditions are eligible.

After the first year, pre-existing Sharing Requests are eligible with a sharing limit that increases each membership year.

Eligible Amounts By Membership Year	
YEAR ONE	$0 (waiting period)
YEAR TWO	$30,000 maximum per need.
YEAR THREE	$60,000 maximum per need.
YEAR FOUR	$150,000 maximum per need.
YEAR FIVE	The sharing maximum is removed for all pre-existing conditions.

DISCLAIMERS

ShareWELL is administered on behalf of its members by ShareWELL Partners, LLC. Although ShareWELL is not subject to state and federal insurance regulations, certain states require the publication of the following disclosure to meet exemption qualifications.

We encourage you to seek the advice of a health insurance professional to further explain the difference between state-regulated health insurance and mutual sharing ministries such as ShareWELL. As a Member of ShareWELL, we often refer to you as a Member of ShareWELL Partners, LLC. Under Texas statutes, membership does not entitle you to any rights as a member of a corporation, a non-profit or otherwise.

Notice: ShareWELL is NOT insurance, and these Guidelines are not an insurance contract. The Guidelines do, however, outline how voluntary sharing of healthcare expenses occurs among members. By becoming a ShareWELL member, you agree to these Guidelines and that ShareWELL has the legal right to facilitate sharing under these Guidelines for your benefit and the benefit of all members at your reasonable discretion. ShareWELL is not liable for payment of a member's medical bill(s). If sharing occurs, the shared medical bills are paid by the member who incurred the bill from other members' share contributions only, not from ShareWELL itself.

There is no risk transfer from a member to ShareWELL or from a member to other members, and there is no contract of indemnity between ShareWELL and any member, or between the members themselves.

State Specific Notices may be obtained by visiting:
https://sharewellhealth.org/statenotices/

To obtain a full copy of the Member Guidelines, please visit:
https://sharewellhealth.org/guidelines-accordion/

Membership Cancellation Request
The request must include the reason for cancellation and the month in which the membership cancellation is to be effective. The member must provide notice 15 days before the due date. ShareWELL does not prorate cancellations or gift refunds. Cancellation requests become effective the day before the due date.

Active Membership
Membership is active when members have paid their monthly contributions on time and are in good standing with ShareWELL. For a Sharing Request to be processed, the membership must be active during the date(s) of service, when ShareWELL receives medical bills, and when the UA is paid. The Sharing Request may become ineligible if the membership becomes inactive before these three Sharing Request criteria are met.

Submitting Sharing Requests
Sharing Requests should be submitted to ShareWELL as soon as possible. Non-emergency Sharing Requests, such as surgical procedures, should be submitted before the care.

Required documentation for Sharing Requests must contain, but is not limited to, the following:

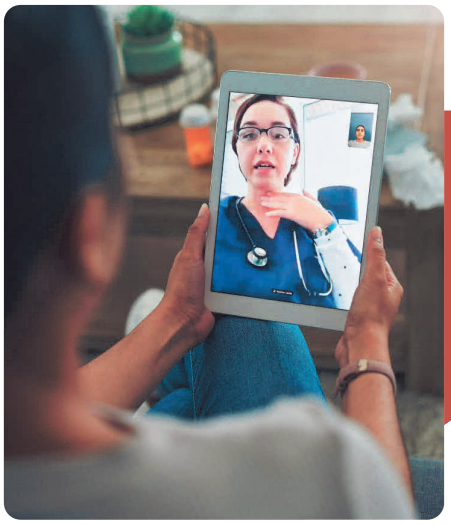
- Itemized medical bill(s)
- Provider notes
- Proof of Unshared Amount Payment

The amount related to this sharing portion as part of your membership is as follows:
UA $1,500: Member $200, Member + Spouse $375, Member + Child/Children $375, Member + Family $535;
UA $3,000: Member $155, Member + Spouse $285, Member + Child/Children $285, Member + Family $415;
UA $6,000: Member $125, Member + Spouse $225, Member + Child/Children $225, Member + Family $350.

VIRTUAL URGENT CARE

lyric

Doctors may be hard to reach, illnesses can occur in the middle of the night, and sometimes get away to sit in a waiting room. Get on-demand care when you need it most!



As a member, you may

- Access $0 Co-pay virtual consultations with licensed, and board-certified physicians
- Services are available 24 / 7 / 365

In some cases, a visit to the doctor's office can be avoided, saving time and money.

Acute Conditions include but are not limited to:

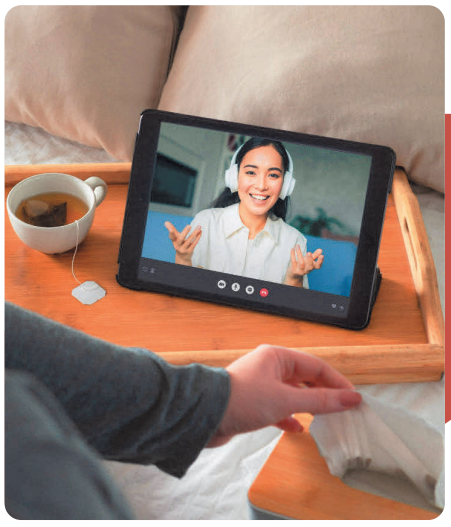
- Flu Symptomps
- Allergies
- Pink Eye
- Sore Throat
- Sinus Problems
- Urinary Tract Infection
- Stomach Viruses
- Acne
- Ear Infection
- Nausea
- Rashes

Disclaimer: MyTelemedicine, Inc. dba Lyric Health. All Rights Reserved. Lyric Health does not guarantee that a prescription will be written. Lyric Health does not prescribe DEA-controlled substances, lifestyle drugs, and certain other drugs that may be harmful because of their potential for abuse. Lyric Health physicians reserve the right to deny care for potential misuse of services. Lyric Health operates subject to state regulations.

VIRTUAL BEHAVIOR HEALTH CONSULTATIONS

lyric

Whether it's stress, anxiety, depression, or sudden loss, we can help.



Members may access a suite of virtual mental health services and speak with a Master-lever Therapist/ Counselor for several common behavioral health issues. Based on the issues experienced, the amount of counseling sessions will be clinically appropriate.

Virtual Counseling:

- Substance Abuse
- Death of a Loved One
- Stress and Anxiety
- Depression
- Relationship Issues
- Parenting Issues

Disclaimer: Licensed healthcare providers provide clinical services through medical practices affiliated with Lyric and other network providers. Additional or different telehealth requirements may be applicable in certain states; see www.getlyric.com for full terms and conditions.

RETAIL PRESCRIPTION SAVINGS

Members have access to prescription drug savings through the ValuScript pharmacy plan, providing discounted pricing at over 65,000 retail pharmacies nationwide.

Medication Tier	Member Copay	Maximum Available Amount
ACA Preventative Medications	$0	N/A
Tier 1 Generics (Top 200)	$0	N/A
Tier 1 Generics (All other)	$15	Up to $100 per prescription
Tier 2 Preferred Brands	$40	Up to $100 per prescription
Tier 3 Non-Preferred Brands	$65	Up to $125 per prescription

*Specialty Medications

Some specialty medications fall outside the standard tiers. Members can search pricing through **ValuScript** or contact **ValuScript** for assistance and additional pricing options.

Using Your Pharmacy Savings

- Visit your preferred retail pharmacy
- Present your **ValuScript member card** with a valid prescription
- Pricing is applied based on the RX tier structure
- Participating pharmacies are available nationwide

ValuScript RX Tools

Members can search medication prices and locate participating pharmacies using the **ValuScript website**.

- Search prescription discounts
- Medication price estimator
- Pharmacy locator
- Prescription lookup by pharmacy

Visit ValuScript.com →

RX Support

For assistance with prescription services:

ValuScript Support
800-314-2069

HEALTH CONCIERGE & ADVOCACY

With your health plan, members have access to amazing, simple-to-use services that will help support bringing healthcare back into the hands of the patient.

Healthcare Navigation[1]

- **Search**—Search for the hospitals, prescriptions, surgery centers, and medical facilities for nonemergency procedures that fit your needs.
- **Compare**—Compare estimated costs of outpatient procedures.
- **Transfer**—Patient advocates will help get medical records transferred to new providers.
- **Schedule**—Patient advocates assist with scheduling appointments on behalf of the members.

Medical Bill Navigation[2]

- **Review**— Negotiator reviews bills for discrepancies and inaccuracies.
- **Negotiate**— Negotiators are armed with data, a history of successful negotiations, and savvy.
- **Communicate**— Members are kept informed throughout the process.



DISCLAIMER:

1. Healthcare Navigation estimates are only estimates of procedures.
2. Medical bills must have been incurred while active on the health plan that includes this service within the 50 U.S. states. Services eligible for medical events with cumulative out-of-pocket expenses that are equal to or greater than one hundred dollars. As a best-efforts service, our discounts or negotiation service cannot be guaranteed or promised to members.
3. We are a third-party advocacy company that your plan utilizes to assist its members with surprise bills. We work between the plan, claims department, and provider to ensure that claims are processed correctly according to your benefits as well as try and get you the lowest possible out-of-pocket amount.

DISCOUNTED LABS & IMAGING SERVICES

AL&I
AFFORDABLE LABS & IMAGING

Affordable Labs & Imaging provides you access to thousands of imaging centers and laboratories at discounts of up to 60%. With a call to our concierge team, we will help members locate a lab or imaging facility and schedule your appointment at a discounted rate.

Our mission is simple: ***Provide transparency in healthcare and to provide affordable access to care for everyone.*** A lack of access to affordable health care is our country's single most important financial and physical problem that needs to be addressed.

AL&I is a resource available to consumers looking for affordable options for **MRIs, CT Scans, PET Scans, Ultrasounds, X-ray, Mammograms and Labs.**

With AL&I, you no longer have to "go down the hall." You have a choice!

- Diagnostic Imaging
- Laboratory Testing
- Gastroenterology

	Typical Rate	With AL&I*
MRI	$1,050	$260
CT Scan	$594	$134
CBC Blood Test	$26	$4
Lipid Panel	$77	$5
Colonoscopy	$3,700	$1,075



Discount Dental

Careington POS Dental Network

Members may take advantage of savings offered by an industry leader in dental care. Careington International Corporation is one of the most recognized professional dental networks in the nation and boasts one of the largest dental networks nationally with afocus on neighborhood dentists. Careington networks are a leader in member-transparent pricing with robust fee schedules.

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.
- 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.
- Cosmetic dentistry such as bonding and veneers also included
- All dentists must meet highly selective credentialing standards based on education, background, license standing and other requirements.
- Members may visit any participating dentist on the plan and change providers at any time.

How to Access Your Discount Dental Savings:

- **Step 1:** To locate a participating provider, please call **(800)290-0523** or visit **www.careington.com** to access the online provider search.
- **Step 2:** When scheduling an appointment, please inform the participating provider's office you are a member of the Careington Dental Network.
- **Step 3:** Please present your Careington ID card upon arrival to receive savings.
- **Step 4:** The provider will obtain payment at the time of service. You will be responsible for paying the total bill, less the applicable savings, when service is provided.

Sample Savings

Procedure Description	Regular Cost*	Plan Cost**	Savings Amount	Savings %
Adult Cleaning	$132	$63	$69	52%
Child Cleaning	$94	$46	$48	51%
Routine Checkup	$78	$33	$45	58%
Extensive Oral Exam	$136	$56	$80	59%
Four Bitewing X-Rays	$89	$42	$47	53%
Composite (White) Filling	$210	$98	$112	53%
Crown (porcelain fused to noble metal)	$1,498	$804	$694	46%
Complete Upper Denture	$2,152	$1,067	$1,085	50%
Molar Root Canal	$1,459	$777	$682	47%
Extraction (single tooth)	$255	$109	$146	$146

* Regular cost is based on the average of the 80th percentile usual and customary rates as detailed in the 2018 FAIR Health Report in the Los Angeles, Orlando, Chicago and NYC metropolitan areas.
** These fees represent the average of the assigned POS fees in the Los Angeles, Orlando, Chicago and NYC metropolitan areas.
Prices subject to change.

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 from discount participating providers. The list of participating providers is at **www.careington.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.

Discount Vision

VSP Vision Savings Pass

VSP Vision Savings Pass is a discount vision program that offers savings+ on eye care and eyewear. With the best choices in eyewear, VSP makes it easy to find the perfect frame that's right for you. Members can choose from great brands like Anne Klein, bebe®, Calvin Klein, Flexon®, Lacoste, Nike, Nine West and more.*

With This Program You Will Receive

- Access to discounts through a trusted, private-practice VSP doctor
- One rate of $50 for eye exams**
- 15% savings on contact lens exams***
- Special pricing on complete pairs of glasses and sunglasses
- Unlimited use on materials throughout the year
- Exclusive Member Extras and special offers

How to Access Your Discount Vision Savings:

- **Step 1:** To find a VSP doctor, call **(800)877-7195** or visit **www.vsp.com**.
- **Step 2:** **At your appointment, tell your VSP doctor that you're a VSP member for immediate savings on eye exams and eyewear.**

Service	Reduced prices and savings
WellVision Exam® (Once every calendar year)	$50 with purchase of a complete pair of prescription glasses 20% off without purchase.
Retinal Screening	Guaranteed pricing with WellVision Exam, not to exceed $39
Lenses (With purchase of a complete pair of prescription glasses)	Single vision $40 Lined trifocals $75 Lined bifocals $60 Polycarbonate for children $0
Lens Enhancements	Average savings of 20-25% on lens enhancements such as progressive lenses and scratch-resistant and anti-reflective coatings.
Frames	25% savings on the purchase of a complete pair of prescription glasses
Sunglasses	20% savings on unlimited non-prescription sunglasses from any VSP doctor (Within 12 months of your last WellVision Exam)
Contact Lenses	15% savings on contact lens exam (fitting and evaluation)

LCA–National Lasik Network

Serving you with Choice, Quality and Savings

- LasikPlus, the featured provider, offers $800 savings on custom LASIK with free enhancements for life PLUS a free LASIK exam, over $100 in value.
- When you choose any of the over 600 nationwide locations++, you will receive discounts of 15% off standard prices or 5% off promotional prices.
- Call **(866)921-2106**, or visit **www.careingtonlasik.com** for more information.

*Brands subject to change
**This cost is only available with the purchase of a complete pair of prescription glasses; otherwise you'll receive 20% off an eye exam only.
***Applies only to contact lens exam, not materials. You're responsible for 100% of the contact lens material cost.
+Not available in WA.
++Product not available in MT.
This plan is not insurance.



MEMBER COST

Member Responsibility ("Unshared Amount")	$1,500 UA	$3,000 UA	$6,000 UA
Member Only	$ 425.00	$ 380.00	$ 330.00
Member + Spouse	$ 648.00	$ 553.00	$ 488.00
Member + Child/ Children	$ 681.00	$ 586.00	$ 521.00
Member + Family	$ 871.00	$ 751.00	$ 681.00

[+]Tobacco Households: Add $100 to Retail Rates

Members, or households with one or more tobacco users, must pay a higher monthly tobacco surcharge to maintain membership. The surcharge is $100 per household. A member, or one or more members within a household, who has used any tobacco product one or more times within the past year is considered a tobacco user. Tobacco products include, but are not limited to, cigarettes, cigars, chewing tobacco, snuff, pipe tobacco, and inhaled products through vape, hookah, and similar delivery devices.



Contact Information

Customer Support: (800)229-7443
Mon–Thu: 9am–7pm CST
Fri: 9am–5pm CST