

WeShare Legacy[®] Program Brochure

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WeShare Legacy[®] Program Brochure



The Legacy Program is for those who want a vibrant, thriving community of like-minded individuals supporting their health and wellness goals. This program is a great fit for those who need additional support for medical expenses left after Medicare, and for those wanting a wider provider network to extend what Medicare provides.

With low monthly contributions and Annual Member Care Share, you'll have added security that fits within your budget. WeShare Legacy works alongside your Medicare plan and provides the resources you need to proactively manage your whole health—mind, body, and spirit—with additional health sharing and wellness perks.

Peace of Mind Beyond Medicare's Coverage

WeShare Legacy provides added support to fill the gaps that Medicare coverage can leave, greatly reducing your potential out-of-pocket costs for medical care. Offering additional sharing support for:

- Bills where Medicare applies member liability (co-pay, co-insurance, or deductible)
- Eligible medical services not standardly covered by Medicare (e.g. preventive annual physicals, Acupuncture or Chiropractic care)
- Services beyond Medicare's limits, when WeShare Legacy offers broader sharing limits
- Services for professional providers who are not registered with Medicare (when the type of specialist provider needed is not available in the Medicare network within 30 miles of your home)

At WeShare, preventative care is our top priority. When you get ahead of those preventable health issues, you're then free to live the full life you want—and that's why WeShare shares 100% of your annual wellness and preventative costs. Our exclusive wellness perks then help support you in taking on a healthy lifestyle, giving you a clear, two-step approach to holistic wellness.

When you're not feeling your best and can't or don't want to leave the house, you have access to convenient care to help you get back to health.

- Telehealth services available through Amwell telemedicine to connect you with board-certified providers for assistance across a range of specialties including 24/7 urgent care, nutrition, and dermatology
- Virtual primary care, through Amwell telemedicine, to help you establish an ongoing relationship for your annual wellness visits, chronic care management, preventative care and more - without ever having to leave the comfort of home

WeShare Legacy membership is offered and administered by Unite Health Share Ministries (UHSM), which is a Healthcare Sharing Ministry (HCSM). WeShare Legacy membership reflects the program elements at the time of publishing (2025) and are subject to change with a given notice of 30-days. WeShare, healthcare by UHSM is not insurance. UHSM is not an insurance company. UHSM and no 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 receive as a WeShare Legacy Member. Copyright 2025 United Health Share Ministries. "UHSM," "WeShare," "WeShare Access," "WeShare Legacy" are trademarks of Unite Health Share Ministries. All rights reserved.

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Simple, Fair & Friendly Health Sharing

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

Easy To Understand Sharing Benefits

We keep it simple. When you need care, you'll use your Medicare benefits first. After that, WeShare looks at any leftover costs. You just have a \$500 Annual Member Care Share, kind of like a deductible, and then eligible bills are shared. No confusing co-shares or percentages to figure out.

Expanded Providers Beyond Medicare's Network

When you have trouble finding a Medicare specialist, your WeShare Membership includes access to the largest network of any sharing ministry through the PHCS® PPO Network, with 1,200,000+ doctors and specialty providers.

Telehealth Convenience

Access virtual care anytime, anywhere through Amwell telemedicine. Amwell's board-certified providers provide care across a range of specialties including 24/7 urgent care, primary care, nutrition, and dermatology. No more waiting to schedule an appointment – request a visit to receive care from the comfort of home. You will receive an email from Amwell to complete your enrollment and begin accessing virtual care.

Wellness Perks Included

Caring for your mind, body, and spirit goes beyond taking care of your medical needs. Whether you're looking for a nutrition and fitness plan or want resources to deepen your relationship with God, get exclusive wellness perks like FitBod, Active&Fit, HelloFresh, Noom, and RightNow Media (altogether valued at \$1,000!). See a full list and learn more at weshare.org/benefits-of-joining.

Prioritized Mental Well-being

We've teamed up with BetterHelp® and Amwell – online therapy providers offering tailored therapy for individuals. Members can receive up to 10 counseling sessions per calendar year at no additional cost through BetterHelp or 10 counseling sessions and 4 psychiatry sessions through Amwell telemedicine. If you prefer in-person counseling or psychiatric services, you can still leverage the Medicare network and your sharing benefits will consider your liability for eligible services once Medicare considers their portion. If you have trouble finding a Medicare counselor, you can also leverage the PHCS PPO for in-network WeShare providers.

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WeShare

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WeShare Legacy Sharing Summary

With low monthly Member contributions and a set \$500 Annual Member Care Share (AMCS) amount, you'll reap the benefit of savings compared to your standard Medicare out-of-pocket costs for medical services.

Your monthly contribution is the amount you pay monthly to maintain your membership:

MONTHLY CONTRIBUTION COSTS	
Ages	Cost per month
65-69	\$115
70-74	\$130
75+	\$150

How the AMCS Works

When you need to access care, Medicare processes their portion first and then WeShare will apply dollars towards your Annual Member Care Share Amount, up to the \$500 maximum. It works similar to a deductible, so once the \$500 is reached, your sharing benefits pick up 100% of eligible costs. In other words, for eligible medical services, you'll only ever be responsible for \$500 for services rendered. No more massive Medicare deductible or co-insurance to worry about budgeting for.

MEDICAL SERVICES	
Preventative Care¹ Preventative services should be rendered by a Medicare provider and billed to Medicare first. WeShare will consider remaining Member responsibility for sharing once Medicare processes. Follows healthcare.gov guidelines and considers how the services are billed to determine services that are considered preventative. Follows CDC guidelines for recommended scheduling and frequency of preventative services, except where services are excluded per the membership guidelines.	
Routine Annual Physical	
Labs and Diagnostic Tests Includes preventative lab work and other testing ordered as part of your routine annual physical	
Immunizations Includes immunizations normally processed by Medicare Part D, even when the member does not have Part D	
100% not subject to AMCS	
Physician Services	
Amwell Virtual Urgent Care, Primary Care, Nutrition, Dermatology	
CVS MinuteClinic ¹	
Primary Care Provider (PCP) Office Visits ¹	
Urgent Care	
Specialist Office Visits	
Included with Membership	
100% after AMCS	
100% after AMCS	
100% after AMCS	
100% after AMCS	
Labs and Diagnostics	
Laboratory Services¹	
X-Ray & Diagnostic Imaging	
All Other Diagnostic Testing (e.g. sleep studies ¹ , EKG)	
100% after AMCS	

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MEDICAL SERVICES (CONT.)	
Physical, Spiritual, & Mental Wellness	
Acupuncture Up to 12 sessions per year	100% after AMCS
Chiropractic Treatment Up to 12 sessions per year	100% after AMCS
Physical, Occupational, & Speech Therapy Medicare will determine visit maximum and medical necessity for Medicare providers. WeShare pre-certification will determine visit maximum and medical necessity for PHCS providers (when a Medicare provider is not available within 30 miles of Member's address)	100% after AMCS
Behavior Health Counseling 10 counseling sessions are allowed per year. 4 Psychiatric visits are allowed, per year through Amwell or when rendered by a Medicare provider. Psychiatric visits rendered by any other provider are not eligible. See Inpatient and Outpatient sections for Behavioral Health sharing benefits rendered in a facility.	BetterHelp or Amwell Virtual Therapy: Included with Membership In-person: 100% after AMCS
Wellness Perks Membership includes access to exclusive wellness perks. Refer to the wellness perks brochure for additional information	Included with Membership
Emergency¹	
Emergency Room	100% after AMCS
Ambulance Services	\$500 Share Maximum, per ride, after AMCS
Air Transport	\$10,000 Share Maximum, per ride, after AMCS
Inpatient Services¹	
Inpatient services must be billed to Medicare first (unless inpatient hospital days have been exhausted). Medicare will determine medical necessity until inpatient hospital days have been exhausted with Medicare. Pre-certification is required with WeShare for consideration of inpatient hospital days beyond Medicare's allowance (once Medicare days have been exhausted).	
Specialty Care Includes care received while inpatient in the hospital, including but not limited to: dialysis, oncology, treatment of serious illness, orthopedic, cardiology, and surgery	
Anesthesiologist	100% after AMCS
Behavioral Health ² Includes all inpatient behavioral health services, except substance abuse, which are ineligible	
Skilled Nursing Facility	
Outpatient Services	
Ambulatory Surgery Center	
Behavioral Health ^{1, 2} Includes partial hospitalization, intensive outpatient, and other outpatient/facility related Behavioral Health services. Substance abuse services are not eligible.	100% after AMCS
Dialysis ^{1, 2}	
Outpatient Department of a Hospital: surgery and other services	

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MEDICAL SERVICES (CONT.)	
Specialty Services	
Dental Discounts	
Vision Discounts	Included with membership
Hearing Care Discounts	
Includes free hearing exams and discounted hearing aids	
Miscellaneous	
Durable Medical Equipment and Medical Supplies ¹	
Includes equipment supplied by a doctor, hospital, home health care agency, or a durable medical equipment supplier. Includes supplies utilized by a doctor, hospital or home health care agency; supplies received over-the-counter are not eligible. For Prosthetics and Orthotics, CPAP machines and supplies, infusion supplies, and oxygen, WeShare will only share in a member's Medicare responsibility from deductible, coinsurance or copayments. Such services are not eligible if Medicare denied for any reason.	
	100% after AMCS
Home Health Care ¹	
Skilled nursing services performed in the home	
	100% after AMCS
Injections and Infusion Therapy ^{1,2}	
Includes injections, infusion supplies and drugs administered by a doctor, hospital or home health care agency. Injections or medications filled at the pharmacy are not included.	
	100% after AMCS
All Other Eligible Services	100% after AMCS
Tobacco or E-Cigarettes	
Applicable in the event of tobacco 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

Intended to give a summary of commonly used, eligible services. However, it is not an all inclusive list. Please see the Member Guidelines or contact Member Services for detailed sharing benefit questions.

¹Services must be rendered by a Medicare provider and submitted to Medicare first for processing. WeShare will consider remaining member responsibility for sharing once Medicare processes.

²WeShare will only consider sharing in the member's Medicare liability from deductible, coinsurance, or copayments. WeShare will not allow services once Medicare benefits have been exhausted or if Medicare denied for any reason.

Note: For eligible services subject to the AMCS, they are shared at 100% once the AMCS is met. Please see the program details or contact Member Services for a comprehensive list of eligible services.

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Hearing, Dental, Vision, and Lasik Discount Programs

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, scheduling free hearing exams or hearing equipment assessments, all while saving an average of 65% off MSRP.

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 AVERAGE SAVINGS				
Code Description	Regular Cost ¹	Plan Cost ²	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%
Totals	\$6,501	\$2,907	\$3,594	55%

¹Regular Cost is based on the average 80th percentile usual and customary rates as detailed in the 2024 Fair Health Report within the United States.

²Plan 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 ¹	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

¹Represents 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 35% 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 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 offers added resources and support for any Members diagnosed with a critical or chronic illness or cancer while enrolled as a Member of WeShare. We are also happy to help you navigate the complex world of healthcare, for any of your needs. If you need assistance, please do not hesitate to contact Member Services at 800-900-8476.

Terms and Conditions

Annual Sharing Maximums

Membership and wellness perks of WeShare are available for sharing upon the effective date of membership including, but not limited to, telehealth services provided through Amwell, routine annual physicals through annual checkups, and any immediate life-threatening emergency services. However, certain annual limitations apply (e.g. 12 visits for chiropractic care). Sharing eligibility and stipulations can be found in the WeShare Legacy 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 is not a reimbursement program. WeShare is NOT an insurance company nor is the membership offered through an insurance company. WeShare membership is offered and administered by Unite Health Share Ministries™ (UHSM), a nonprofit, religious health sharing ministry that facilitates Member-to-Member sharing of medical expenses. When stepping outside of the Medicare network (where eligible), WeShare Members have access to prenegotiated rates for medical services through the PHCS PPO, Amwell, BetterHelp. Members should never have to pay cash up-front for services in-network. All Sharing Members are responsible for their own medical expenses.

OTHER PROGRAM FEES	
Application fee	\$149 one-time fee
Tobacco, e-cigarette and marijuana users	\$50 per Member of usage, per month

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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. After the AMCS is met for the calendar year, all eligible medical costs subject to the AMCS are shared at 100%. 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% (listed herein).

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 leverages Medicare's guidelines and 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 either through Medicare or WeShare, depending on who made the decision. Please see the appeals section of the membership guidelines for more information.

Medicare Provider / Medicare Registered Provider – A person, facility or agency that has registered with Medicare and that Medicare will pay to render eligible services to Medicare beneficiaries. These providers can bill Medicare for their services and receive reimbursement for the eligible care they deliver.

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

Non-Medicare Provider / Not Medicare Registered – A person, facility or agency that has not registered with Medicare or signed a network agreement and therefore is unable to bill Medicare for healthcare services rendered.

Participating Provider – Medical care professionals, facilities, and services – those of which fall within an in-network jurisdiction – and are under contract with Medicare or WeShare through network partnerships with PHCS/MultiPlan to help limit medical costs for all Sharing Members. If you need to seek care outside of the Medicare network, please call Member Services at 800-900-8476 to ensure the service is eligible when rendered by a non-Medicare provider.

When searching for and using PHCS 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.

Program Guide – A summary of a Sharing Program's elements for eligible sharing, including some limits or AMCS, and share maximums.

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. Sharing Members must choose a Sharing Program tier, submit scheduled monthly contributions, through the form of direct payment, and are not to be ineligible, as a result of any other reason (including age restrictions). 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 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.



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 paid or assigned to others for payment. 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 is a program and product of United Faith Ministries, Inc., which is a 501 (c) (3) nonprofit corporation, dba "Unite Health Share Ministries" or "UHSM." WeShare Access, a program of Unite Health Share Ministries (UHSM), is a religious organization facilitating the sharing of 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 preexisting condition exclusions or other limitations.



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 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

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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: United 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 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.