

# HSA SECURE

## Member Guidelines



**INCLUSIVE**



**TRANSPARENT**



**SIMPLE**

Your Community. Your **HealthShare.**

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At HSA Secure HealthShare, we have streamlined the HealthShare experience to make medical cost sharing more accessible to everyone. Our Member Guidelines outline who we are as an organization, and how we facilitate sharing in the medical costs of our members.

## HEALTHSHARE BEGINNINGS

Medical cost sharing organizations, also known as HealthShares, began in the 1980s when a beloved pastor in Ohio was involved in a terrible automobile accident. His congregation came together to pay his medical bills—in full, in just forty-five days. This same community decided to continue following the biblical mandate to “bear one another’s burdens” by sharing healthcare costs in a simple yet practical way.

Members of HealthShares across the country share one another’s medical expenses in a similar fashion. This system has proven to be an effective alternative to traditional health insurance. Members enjoy the freedom, stability, and flexibility of medical cost sharing while keeping more money in their own pockets.

HSA Secure HealthShare began facilitating medical cost sharing with its members in 2019 and has since become the fastest-growing, top-rated HealthShare in the nation. Learning from the organizations that came before, HSA Secure HealthShare was founded with the mission to reimagine what medical cost sharing could be and better serve member needs amid the rapidly changing environment of American healthcare.

## OUR MISSION

HSA Secure HealthShare offers superior quality service to our community. Our goal is to change the healthcare industry by connecting like-minded individuals to an innovative and affordable medical cost sharing community. We are a community that employees are proud to be a part of, medical professionals prefer for their patients, and members love and recommend to their family and friends.

## PRINCIPLES OF MEMBERSHIP

Adherence to the HSA Secure HealthShare Principles of Membership minimizes medical risks, encourages good health practices, and ensures member integrity and accountability. Our members must comply with certain requirements to maintain membership and remain eligible to participate in our medical cost sharing community.

HSA Secure HealthShare members are expected to act with honor and integrity. Members should not falsify a sharing request, medical records, or use other deceptive practices. If a member abuses the trust of our community, their membership may be revoked or withdrawn.

All HSA Secure HealthShare members must attest to the following statements:

1. I believe that a community of ethical, health-conscious people can most effectively care for one another by directly sharing the costs associated with each other's healthcare needs. I acknowledge that HSA Secure HealthShare affiliates itself with , and considers itself accountable to, a higher power. I recognize that HSA Secure HealthShare welcomes members of all faiths.
2. I understand that HSA Secure HealthShare is a benevolent organization, not an insurance entity, and that HSA Secure HealthShare cannot guarantee payment of medical expenses.

3. I will practice good health measures and strive for a balanced lifestyle. I agree to abstain from the use of any illicit or illegal drugs and refrain from excessive alcohol consumption, acts which are harmful to the body. I understand that members who use tobacco will have an increased monthly contribution (per household) of \$50.
4. I am obligated to care for my family. I believe that mental, physical, emotional, or other abuse of a family member, or any other person, is morally wrong. I am committed to always treating my family and others with care and respect.
5. I agree to submit to mediation followed by subsequent binding arbitration, if needed, for any instance of a dispute with HSA Secure HealthShare or its affiliates.

## MEMBERSHIP ELIGIBILITY

Membership eligibility is primarily based on:

1. Adherence to the HSA Secure HealthShare Principles of Membership.
2. Participation in the community by submitting monthly contributions.
3. Reside in the United States or Puerto Rico.

After committing to these primary eligibility requirements, prospective members are eligible to join the HSA Secure HealthShare community. Membership may begin on a date selected by the prospective member or specified by HSA Secure HealthShare, known as the membership start date. The prospective member's monthly contribution must be received within 15 days of the agreed-upon membership start date. Once the first monthly contribution has been received membership is considered active.

## Commitment

Members commit to abide by a set of personal standards as outlined in our Principles of Membership. If a violation of the Principles of Membership is discovered through review of a member's submitted medical records, all sharing for that member will be put on hold. This hold will begin on the date the violation was discovered or recorded. Notification of the hold and an explanation of the discovery will be issued to the member.

Members will have 30 days to submit documentation supporting compliance with the Principles of Membership. If submitted documentation does not satisfactorily demonstrate compliance, membership may be revoked. If membership is revoked due to a violation of the Principles of Membership, HSA Secure HealthShare will not return the offending member's contributions received prior to the date of revocation.

## Participation Through Contributions

Members submit monthly contributions (based on their membership IUA option) to participate in the medical cost sharing community. Direct members can make their contributions directly with HSA Secure HealthShare. Essential members can make monthly contributions through their employer or DPC practice.

Participation in the medical cost sharing community is voluntary, but monthly contributions are required for active membership and sharing eligibility. Monthly contributions must be received no later than 30 days after the contribution date. If a monthly contribution is not received by the last day of the billing month, the membership will become inactive, and the member will be withdrawn from the medical cost sharing community.

Withdrawn members may reapply if they meet all eligibility requirements. Once the member reapplies and membership is reinstated by HSA Secure HealthShare, the member will become eligible to participate in our medical cost sharing community. All sharing requests submitted after the membership is inactive and before reinstatement will be ineligible for member-to-member sharing, and any medical conditions existing before the member is reinstated will be considered pre-membership medical conditions.

### **Qualification**

Applicants must meet all criteria in the Member Guidelines, Principles of Membership, and membership application form to qualify for membership. If, at any time, it is discovered that a member did not submit a complete membership sign-up form, membership may be retroactively withdrawn or revoked.

While member health status has no effect on eligibility for membership, there are sharing limits for some pre-membership medical conditions. Sharing requests that are not eligible for sharing may still be shareable through the Additional Giving fund.

See the [Additional Giving section](#) for details.

### **Active Membership**

Membership is considered active when the member has paid their monthly contributions on time and is in good standing with HSA Secure HealthShare. For a sharing request to be shared, membership must be active during the date(s) of service, when medical bills are received, and when the IUA is paid. If a membership becomes inactive before a sharing determination



is made, the bills may not be shared with the community. Any pre-membership medical condition limitations are applied based on the first date of active membership.

### **Residency Statement**

HSA Secure HealthShare members must reside within, and be a resident of, the United States or Puerto Rico to participate in and contribute to medical cost sharing. Members who choose to move outside of the United States or Puerto Rico must notify HSA Secure HealthShare in writing within 15 days of moving, and the membership will be withdrawn.

## **MEMBERSHIP REQUIREMENTS**

HSA Secure HealthShare offers different membership options for individuals and families. Monthly contributions are based on the membership type (Direct or Essential), age group, and initial unshareable amount (IUA).

### **Determination of Household Membership**

There are four membership tiers, differentiated by the number of members taking part in the household membership.

- Member Only: An individual member
- Member & Spouse: Two married members or two members in a domestic partnership
- Member & Child(ren): A member and any eligible dependent children, without membership of a spouse or domestic partner
- Member & Family: A member, spouse or domestic partner, and any dependent children

## Dependents

An unmarried dependent under 26 years of age, and any child born into a membership in connection with an eligible maternity sharing request, may participate under a household membership with the Primary Member. The Primary Member is responsible for ensuring that each individual participating under the household membership complies with the Member Guidelines and our Principles of Membership.

When a dependent turns 26 or marries, that dependent can no longer participate under the household membership. A dependent who wishes to continue as a member with us may complete an application form. Any sharing requests that occur between the time when a dependent leaves a guardian's membership and begins their own are not shareable. Dependents who age out of a membership but later choose to re-join will be subject to the sharing limitations for pre-membership medical conditions.

## Newborns

Newborns whose birth is related to an eligible maternity sharing request must be added to the household membership by the parent within 30 days of birth. In the case of a membership tier change, the monthly contribution amount will automatically be adjusted for the next contribution. If the parent does not sign-up their newborn within 30 days, any conditions present at birth or that occur before the child's membership start date will be considered pre-membership medical conditions.

If a parent wishes to add a newborn who was not born in connection with an eligible maternity sharing request, the parent must submit a membership application form for the baby. The newborn's membership start date can be no sooner than seven days after delivery.

Any genetic conditions or complications for newborns not born in connection with an eligible maternity sharing request are considered pre-membership medical conditions and subject to the same limitations as defined in the [Pre-Membership Medical Conditions section](#).

## Adoption

HSA Secure HealthShare considers adopted children the same as biological children. Any physical conditions the adoptive parents are aware of prior to the legal adoption of the child are considered pre-membership medical conditions and are subject to the sharing limitations and phase-in period as defined in the [Pre-membership Medical Conditions section](#). Adopted children cannot be added to a HSA Secure HealthShare membership prior to birth.

## Grandchildren

A grandchild (or grandchildren) may be included as part of their grandparent's membership under the following criteria:

1. The grandparent has legal custody of the grandchild.
2. The grandchild lives with their grandparents at least nine months out of the year.
3. There is no other group, agency, or person responsible for the grandchild's medical needs.

## Tobacco Users

HSA Secure HealthShare members, or households with one or more tobacco users, are required to contribute a higher monthly contribution to maintain membership. The monthly tobacco surcharge is \$50 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. Smoked cannabis products are considered tobacco for the purposes of the tobacco surcharge.

Please refer to the [Tobacco Use Over 50 section](#).

## SHARING REQUESTS

Sharing requests are submitted on a per member, per medical need basis. A medical need is the reason for which a member submits a sharing request. This includes, but is not limited to, preventive visits, maternity, an accident, or a serious medical incident. Each medical need may result in medical expenses incurred by receiving medically necessary treatment from licensed medical professionals and facilities, such as physicians, emergency rooms, and hospital facilities.

When a member has a medical expense to be shared, the member must submit a sharing request. Once their sharing request is open, the member must submit original, itemized bills for the medical expense within six months of treatment. Bills submitted more than six months after the date of service may be considered ineligible for sharing. There is no lifetime limit on the number of eligible expenses that may be shared.

## **Determination of a Sharing Request**

Expenses related to the same medical need, whether expenses for a single incident or separate incidents, will be shared as one sharing request.

## **Maximum Shareable Amount**

There is no annual or lifetime maximum for any member or membership household. However, some expenses may be subject to limitations according to these Member Guidelines. HSA Secure HealthShare has a systematic way to handle large sharing requests and has budgeted to account for them.

## **Insurance, Third-Party Administrators, & Government Assistance Plans**

In the event that a HSA Secure HealthShare member is also covered by any relevant insurers, third-party administrators, or government assistance plans, and a medical need arises, the member's insurance, third-party administrator, or government assistance plan shall be primarily responsible for the payment of the member's medical expenses.

Members must submit a sharing request within six months of the medical need informing HSA Secure HealthShare of their coverage by insurance, third-party administrator, or government assistance plan, upon which the insurance, third-party administrator, or government assistance plan will be primarily responsible for the payment of the member's medical expenses. Upon final payment by the primary insurance, third-party administrator, or government assistance plan, HSA Secure HealthShare will review remaining expenses for eligibility for sharing.

Failure to disclose coverage with an insurance, third-party administrator, or government assistance plan may result in ineligibility for sharing. This includes, but is not limited to, any form of coverage through a non-member spouse, family member, employer, or government entity. If you have primary insurance coverage, HSA Secure HealthShare will be the secondary payor, and some expenses not covered by insurance may be shareable. Exceptions may be made for maternity sharing requests. Contact HSA Secure HealthShare prior to your provider visit.

## **Appeals**

If a member believes that a limitation was incorrectly placed on member sharing, they may submit an appeal. Members may submit an appeal and provide supporting medical evidence to have the membership limitation removed. All appeals are reviewed by a committee that includes at least one HSA Secure HealthShare board member, as well as trained medical professionals.

Appeal requests must be submitted within 30 days of the sharing request determination and must be submitted by the member, not the member's providers. HSA Secure HealthShare can request additional information from providers if needed.

## THE INITIAL UNSHAREABLE AMOUNT (IUA)

The initial unshareable amount, or IUA, is the amount a member must pay before expenses related to a medical need become shareable with the medical cost sharing community. We have three membership IUA options: \$1,000, \$2,500, and \$5,000.

After the IUA is met, additional eligible medical expenses are shareable with the HSA Secure HealthShare community. There is no annual or lifetime limit on eligible expenses. Members do not need to pay another IUA for any given sharing request until they are symptom free for 12 months. Additionally, members will not be responsible for more than three IUAs in a rolling 12-month period.

### Changing IUA Amounts

Members may choose to change their IUA once per membership year. If an IUA is lowered, a 60-day waiting period will apply to all sharing requests other than those resulting from an accident.

### Multiple Sharing Requests in a 12-Month Period

We provide a safeguard for households that experience more than three shareable medical needs in a 12-month period. If a household has paid three IUAs in a 12-month period, any additional shareable expenses of \$500 or more will be shared in full with no IUA responsibility.

## SUBMISSION OF SHARING REQUESTS

We strive to share medical expenses in a timely, accurate manner. To do this, it is crucial for members to submit sharing requests correctly and include all required documentation.

## Submitting a Sharing Request

Sharing requests should be submitted through the Member Portal, as soon as possible. Most nonemergency sharing requests, such as surgical procedures, should be submitted prior to the date of service.

Members may contact HSA Secure HealthShare directly during business hours for help with this process.

Contact the Member Care team:

- 800-913-0172
- [info@hsaforamerica.com](mailto:info@hsaforamerica.com)

The Medical Advocacy service is complimentary to all HSA Secure HealthShare members. Our team of experts is here to help members find providers and facilities. We can help members obtain self-pay discounts and pay ahead of time for eligible expenses.

Contact the Medical Advocacy team:

- 800-913-0172
- [info@hsaforamerica.com](mailto:info@hsaforamerica.com)

## Required Documentation & Time Limit for Providing Documentation

In order to be eligible for sharing, sharing requests and each itemized bill and statement must be submitted within six months of the date of service. The IUA must also be paid within six months to be considered for sharing. When submitting a sharing request, members should submit any documentation received from their provider. HSA Secure HealthShare may



request additional documents that may be required throughout the sharing request process.

Document types can include, but are not limited to, receipts, proofs of payment, itemized bills and statements.

Original, itemized bills and statements should be submitted promptly to HSA Secure HealthShare along with the sharing request form for us to process the sharing request as soon as possible.

Please reference all applicable guidelines to determine if there are other document requirements or time limits.

### **Meeting the IUA**

Medical expenses are only shareable after members have met their IUA. Members should provide documentation to HSA Secure HealthShare of all payments that may contribute toward the member's IUA.

The IUA must be paid within six months of the date of service or bills may become ineligible for sharing. Consideration will be given for situations where the cost of treatment has not exceeded the IUA after six months for certain sharing requests. Members must communicate with their Member Needs team representative about a timeline for IUA payment.

### **Paying at the Time of Service**

HSA Secure HealthShare is not insurance, so members should tell their provider they are an uninsured, self-pay patient. That way, members can obtain self-pay discounts on services, which allows us to keep membership contributions low. Members should obtain

itemized

bills and receipts to request payment or reimbursement from HSA Secure HealthShare.

In some cases, prepayment may be an option.

Contact our Medical Advocacy team before receiving medical treatment for prompt payment at the time of service.

### **Requesting Discounts**

Members have options for sharing prior to, at the time of, or after medical services are rendered. For all purposes, members should present as self-pay patients and communicate costs and discounts as soon as possible to HSA Secure HealthShare.

## **PRE-MEMBERSHIP MEDICAL CONDITIONS**

To keep membership contributions low for all members, we implement a waiting period for sharing of medical conditions that existed prior to a member's membership start date. We call such medical conditions: pre-membership medical conditions. This section defines pre-membership medical conditions and outlines related sharing limitations.

### **Definition of a Pre-Membership Medical Condition**

A pre-membership medical condition is any illness or injury for which a person has

- been examined,
- been diagnosed,
- taken medication,
- had symptoms, or
- received medical treatment

within the 24 months prior to their membership start date. Sharing requests related to pre-membership medical conditions are only shareable if the condition was regarded as cured

and did not require treatment or present symptoms for 24 months prior to the membership start date.

### **Pre-Membership Medical Condition Phase-In Period**

Pre-membership medical conditions have a phase-in period wherein sharing is limited. Starting from the membership start date, there is a one-year waiting period before pre-membership medical conditions are shareable. After the waiting period, the shareable amount increases with each membership year.

Shareable amounts for pre-membership medical conditions:

- Year One: \$0 (waiting period)
- Year Two: \$25,000 maximum per sharing request
- Year Three: \$50,000 maximum per sharing request
- Year Four: \$125,000 maximum per sharing request

After four years of membership, expenses related to pre-membership medical conditions will be shareable up to a maximum of \$125,000 in a 12-month period. The shareable maximum resets each membership year.

**Please Note: pre-membership medical conditions may still qualify for sharing through the Additional Giving fund.**

### **Exceptions for High Blood Pressure, High Cholesterol, & Diabetes**

High blood pressure, high cholesterol, and diabetes (types 1 and 2) are not considered pre-membership medical conditions as long as

1. the member has not been hospitalized for the condition in the 12 months prior to joining, and
2. the member is able to control the condition through medication or diet.

## MEDICAL EXPENSES ELIGIBLE FOR SHARING

The following list reflects sharing limitations for certain conditions or requirements for certain expenses to become eligible. All shareable expenses are subject to the member's IUA.

### 1. Alcohol & Drug Abuse Treatment

Sharing for alcohol and drug abuse treatment is available upon membership start date and is not considered a pre-membership medical condition. Treatment for alcohol abuse, substance abuse, or chemical dependency is only shareable up to \$3,000 per member.

### 2. Alternative or Integrative Medical Practices

See [Therapeutic Treatments](#).

### 3. Ambulance Transport

Medical transportation, including air and ground, is eligible for sharing when it is required in relation to a specific shareable illness or injury. Every effort should be made to be transported to the closest appropriate facility.

### 4. Arthritis Treatment

Degenerative and arthritic conditions are considered pre-membership medical conditions and may be shareable beginning in the second year of membership. Any treatment costs, including but not limited to joint injections, physical therapy, and chiropractic manipulations, are subject to the pre-membership medical condition phase-in period.

## 5. Audiological

Audiological treatment to correct hearing loss is shareable.

## 6. Automobile Accidents

In the event of an automobile accident, HSA Secure HealthShare will only consider sharing in medical expenses after any relevant insurers have processed claims and made final payments. This includes, but is not limited to, automobile insurance, health insurance policies, government assistance plans, workers compensation, or liability insurance.

Incidental insurance policies are not considered relevant for this purpose. These include but are not limited to accident, critical illness, and hospital indemnity coverage. Members must submit a sharing request within six months of a medical need arising from the accident informing HSA Secure HealthShare of any relevant insurers, upon which the relevant insurers will be primarily responsible for the payment of the member's medical expenses. Any remaining expenses will be reviewed by HSA Secure HealthShare for sharing eligibility.

Failure to disclose coverage with an insurance, third-party administrator, or government assistance plan may result in ineligibility for sharing. This includes, but is not limited to, any form of coverage through a non-member spouse, family member, employer, or government entity. If you have primary insurance coverage, HSA Secure HealthShare will be the secondary payor, and some expenses not covered by insurance may be shareable.

## 7. Basal & Squamous Cell Cancer

Each individual location of a squamous cell or basal cell cancer requires a separate sharing request and separate IUA.

## 8. Breast Implant Removal

Breast implant removal is shareable only upon prior written approval from HSA Secure HealthShare.

## 9. Cataract Surgery

Cataract surgery is treated as a pre-membership medical condition and subject to a one-year waiting period before it is shareable. Each eye requires a separate sharing request and is subject to a separate IUA.

## 10. Chiropractic Services

See [Therapeutic Treatments](#).

## 11. Congenital Conditions

Congenital conditions of children born outside an eligible maternity sharing request will be considered pre-membership medical conditions and therefore subject to the waiting period for sharing.

See the [Maternity Sharing Requests section](#) for more information.

## 12. Contraception

Male and female contraceptive costs are not shareable. This includes but is not limited to intrauterine devices (IUDs), implantable contraceptive methods, and the "morning after" pill. Members can use HSA Secure HealthShare's discount program, Rx Share, for prescribed oral contraceptive medications that are available at a pharmacy. Hormonal treatments and IUDs for non-contraceptive purposes may be eligible for sharing.

### **13. Cosmetic Surgery**

Expenses related to cosmetic surgery are shareable only for disfiguration due to a shareable injury or illness.

### **14. Dilation & Curettage (D&C)**

Dilation and curettage (D&C) procedures related to an approved sharing request and indicated for diagnostic and therapeutic purposes are generally considered to be shareable. Elective dilation and curettage procedures are not shareable.

Please also refer to the [Abortion section](#).

### **15. Durable Medical Equipment (DME)**

Durable medical equipment (DME) is shareable if it is prescribed by a licensed medical provider and if it is related to an approved sharing request.

Durable medical equipment can generally be rented, is reusable by other patients, is prescribed for a specific illness or injury, and can be used in the home. Some examples of DME are oxygen tanks, wheelchairs, walkers, crutches, canes, and hospital beds.

HSA Secure HealthShare encourages members to rent equipment when possible if the rental costs for the duration of the treatment are less than the purchase price. Sharing in the cost of purchasing DME requires prior written approval from HSA Secure HealthShare.

Sharing is limited to 120 days per medical need. Sleep apnea equipment is not shareable.

## 16. Emergency Visits

Emergency room (ER) visits are generally shareable, whether or not they are in conjunction with an eligible medical need. The first ER visit for a medical condition is treated as a normal sharing request. Each additional visit related to the same condition requires the member to take on a personal responsibility of \$500 in addition to the member's IUA. Members with nonemergency needs should seek out other treatment options such as doctor visits, telemedicine, urgent care clinics, or other appropriate care. Seeking proper nonemergency care reduces emergency room visits and the financial strain on the entire community.

## 17. Genetic Mutation

Sharing requests resulting from a genetic mutation that existed prior to membership are subject to the same limitations as other pre-membership medical conditions. If the member did not receive a diagnosis, require treatment, present symptoms, or take medication for the genetic mutation in the 24 months prior to membership, sharing requests related to the condition may not be subject to pre-membership medical condition limitations.

## 18. Genetic Testing

Genetic testing will only be considered for sharing if it is required for the treatment of a shareable condition, such as breast cancer.

## 19. Home Healthcare

Home healthcare expenses are shareable when related to an accident, illness, or injury and when the care has been prescribed by a licensed physician. Sharing of home healthcare expenses is limited to 30 days or \$5,000, whichever comes first.



## **20. Hospice Care**

Hospice care is shareable for 90-day periods with certification of terminal illness and when ordered by, and under the care of, a licensed medical professional.

## **21. Hyperbaric Therapy**

Inpatient or outpatient hyperbaric therapy may be shareable for the treatment of a specific illness or injury. Outpatient hyperbaric therapy is shareable for up to 35 therapy sessions.

## **22. Injections**

Injections related to an eligible sharing request are shareable up to \$5,000. Hormone therapy injections related to an eligible sharing request are shareable up to \$3,000. Injections related to gender transitioning or sex reassignment therapy are not shareable.

## **23. International Medical Treatment**

Medical expenses for emergency and acute care incurred outside the United States will be considered for sharing based on the Member Guidelines. Preventive or nonemergency services are not shareable without prior written approval from HSA Secure HealthShare.

## **24. Joint Replacement Treatment**

Beginning in the second year of membership, joint replacement treatment and surgery for degenerative arthritic conditions may be shareable.

See the [Arthritis Treatment section](#) for more information.

## 25. Laboratory Tests & Checkups

Laboratory tests and checkups are considered part of an eligible sharing request when prescribed by a licensed medical provider.

## 26. Long-Term Care & Skilled Nursing

Long-term care and skilled nursing are shareable when prescribed by a licensed medical provider for recovery from an eligible injury or illness. Sharing for these services is limited to 90 days per sharing request.

## 27. Massage Therapy

See [Therapeutic Treatments](#).

## 28. Maternity

See the [Maternity Sharing Requests section](#) for more details.

## 29. Medical Supplies

Medical supplies that directly aid in the treatment of, or recovery from, a shareable medical need are generally shareable for up to 120 days from the treatment start date, as prescribed by a licensed medical provider. Medical supply costs must be over \$100 per item to be considered for sharing, with a limit of \$500 per shareable medical need. HSA Secure HealthShare will share the retail costs (or fair market costs when applicable), and we encourage members to use vendors such as local pharmacies or medical supply stores.

Medical supplies are supplies that are disposable, not meant to be used by another patient, are meant for single use, or are meant for short-term use. Examples are joint stabilizing braces, urinary catheters, oxygen masks, and nasal cannulas.

### **30. Nutritionists**

Expenses related to nutritionist services are not shareable unless prescribed by a licensed medical provider. HSA Secure HealthShare must provide approval for nutritionist services prior to sharing.

### **31. Occupational Therapy**

Occupational therapy is shareable for inpatient treatment and up to 35 outpatient sessions per sharing request, up to \$7,500.

### **32. Organ Transplants**

Organ transplants are shareable; however, they are subject to limitations for pre-membership medical conditions.

### **33. Pain Therapy**

See [Therapeutic Treatments](#).

### **34. Physical Therapy**

See [Therapeutic Treatments](#).

### 35. Prescriptions

Prescription medications are considered shareable under the following conditions:

- The prescription is related to the treatment of an approved sharing request.
- The prescription is ordered by a licensed provider.
- The prescription is approved by HSA Secure HealthShare.

When these conditions are met, the member will be reimbursed for the cost or given a one-time use credit card for the exact cost of the prescription to take to the pharmacy and pay for their prescription.

Sharing in all prescription costs is limited to 12 months.

Prescriptions such as Eliquis, Humira, Stelara, and others, may be shareable under the above conditions. For all other prescriptions that do not meet the above conditions please use OptumRx. Please refer to their website for additional assistance.

### 36. Self-Referrals

Referrals not ordered by a licensed medical provider, or self-referrals, require review and approval for sharing by HSA Secure HealthShare, including all deposits, retainers, or other payments a provider may require prior to scheduling an appointment. Referrals ordered by a licensed medical provider for additional consultation or services directly related to a shareable medical need are generally considered to be shareable.

### **37. Speech Therapy**

Speech therapy in relation to a shareable illness, injury, or accident is shareable for 35 outpatient visits per condition, up to \$3,000. Speech therapy for conditions such as speech delays or learning impairments not caused by injury or accident is not shareable.

### **38. Sports**

Medical expenses related to recreational sporting activities are generally shareable. Illness or injury resulting from practicing, or participating in, any semi-professional or professional competitive athletic contest for which the member receives any compensation is not shareable.

### **39. Suicide & Attempted Suicide**

HSA Secure HealthShare encourages members to take advantage of our LifeWorks program as a mental health resource. However, we understand that in the event of a dependent suicide, financial assistance can slightly ease the burden on our members. For this reason, HSA Secure HealthShare will share in expenses related to the suicide or attempted suicide of an adolescent up to age 18. Up to \$25,000 may be shared after one year of continuous membership.

### **40. Therapeutic Treatments**

When prescribed and performed by a licensed medical professional, and related to an eligible sharing request, expenses for therapeutic treatments are shareable up to either a maximum shareable amount of \$7,500, or a maximum total of 35 treatments, per medical need. Once either the maximum shareable amount, or maximum total of 35 treatments has been exceeded, therapeutic treatments related to the medical need are no longer shareable.

Therapeutic services include, but are not limited to:

- Alternative and/or integrative therapies such as acupuncture, craniosacral therapy, dry needling, ozone treatments, prolotherapy, and alternative infusion therapies.
- Chiropractic treatments and services provided by licensed chiropractors.
- Massage therapy and services provided by licensed massage therapists.
- Physical therapy and services performed by licensed physical therapists.

When alternative or integrative medical practices are chosen by the member, sharing in the same medical need may be limited if the member decides to return to traditional care methods.

#### **41. Tobacco Use over 50**

Medical cost sharing for the sharing requests of tobacco users 50 years of age and older is limited to \$50,000 for each of the following four disease categories:

- Stroke
- Cancer
- Heart conditions
- Chronic obstructive pulmonary disease (COPD)

#### **42. Varicose Veins**

Beginning in the second year of membership, evaluation and treatment for varicose veins may be shareable and is subject to the pre-membership medical condition phase-in period.

#### **43. Weight Reduction**

Beginning in the second year of membership, expenses related to weight reduction are shareable if prescribed by a licensed medical provider and approved by HSA Secure HealthShare, up to \$3,000 per sharing request.

## MEDICAL EXPENSES INELIGIBLE FOR SHARING

The HSA Secure HealthShare medical cost sharing community chooses not to share in some medical expenses. Decisions for sharing eligibility are made to benefit all members by keeping monthly contributions low and sharing in medical expenses based on our Principles of Membership. The following expenses are excluded from sharing with the HSA Secure HealthShare community.

### 1. Abortion

Expenses for the abortion of a living, unborn baby are not shareable.

### 2. ADHD, ADHS, & SPD Treatment

Expenses for prescriptions related to ADHD, ADHS, and SPD are not shareable. Members can use HSA Secure HealthShare's discount prescription program, Rx Share, for any prescribed medications that are available at a pharmacy.

### 3. Allergy Treatments

Allergy testing and medication is excluded from sharing. Members can take advantage of the Rx Share program to receive prescription discounts. Sharing requests related to non-seasonal allergies, such as an emergency room visit for an allergic reaction, may be considered for sharing.

#### **4. Conflict of Interest**

In keeping with the Principles of Membership, and in the interest of protecting the HSA Secure HealthShare community, medical expenses incurred by a member that obtains medical treatment from a provider with which the member has an affiliation, partnership, personal or business relationship, or the like, is not considered shareable.

#### **5. Dental**

Tooth damage caused by an accident or injury may be considered for sharing. Other dental services, such as caps, crowns, root canals, fillings, wisdom tooth extraction, and cleanings are not shareable.

#### **6. Diabetic Medication & Supplies**

Any medical expenses related to supplies, testing, medication, or other implements used to treat diabetes are not shareable.

#### **7. Fertility**

Expenses related to fertility evaluations and treatments are ineligible for sharing.

#### **8. Genetic Screening**

Genetic screenings are ineligible for sharing.

#### **9. Hearing Aids**

Expenses related to hearing aids are ineligible for sharing.

#### **10. Injuries Obtained from Certain Acts**



Injuries or illnesses resulting from a criminal act, euthanasia, assisted suicide, participation in a riot, or other such acts are not shareable.

Injuries or illnesses resulting from being under the influence of alcohol or drugs while committing a criminal act, such as operating a motor vehicle while impaired, are not shareable.

### **11. Late Fees & Interest**

Any late payment fees or interest charges that may accrue to medical bills before a member meets their IUA are the member's responsibility—they are not shareable. Additionally, any late payment fees or interest charges caused by a member's delay in providing necessary documentation to HSA Secure HealthShare are not shareable.

### **12. Medical Noncompliance**

Failure or refusal to comply with a physician treatment plan or leaving a facility against medical advice (AMA) may result in ineligibility of the sharing request and any complications that arise.

### **13. Medically Stable Conditions**

A shareable medical need may be considered medically stable when the treating provider determines that the condition is chronic and further treatment will not likely result in improvement. At this point, the sharing request is subject to review and may result in determination of ineligibility for future sharing.

### **14. Mental Health**

Expenses related to medications or other treatment for any mental health illness or condition are not shareable. Mental health conditions may include anxiety, depression, mental illnesses, and other psychological conditions. Through LifeWorks, HSA Secure HealthShare members may have access to regular, preventive mental health consultations. LifeWorks is available as an additional service to any membership. Members can use HSA Secure HealthShare's discount prescription program, Rx Share, for any prescribed medications that are available at a pharmacy.

### **15. Sleep Apnea**

Sleep apnea equipment and testing are not shareable.

### **16. Sterilization**

Elective sterilization, such as tubal ligation and vasectomy, is not shareable.

### **17. Surrogacy**

Expenses related to a surrogate pregnancy, whether or not the surrogate is a member, are not shareable.

### **18. Vision**

Vision expenses related to hardware, such as glasses and contacts, are ineligible for sharing. Annual optometry wellness exams may be eligible for sharing.

### **19. Vitamins & Supplements**

The cost of vitamins and supplements is not shareable.

## PREVENTIVE SERVICES

HSA Secure HealthShare shares in specific preventive services with the Direct Membership or with the additional Preventive Sharing service added to the Essential Membership.

Preventive sharing is not subject to the IUA.

HSA Secure HealthShare references the following resources regarding preventive sharing:

- US Preventive Services Task Force
- American Cancer Society
- Centers for Disease Control (CDC) and Prevention Guidelines
- American Academy of Pediatrics
- American Academy of Family Physicians

See the [Preventive Medical Sharing Guide](#) for more details.

### Annual Provider Visit

Sharing for an annual provider visit is available upon membership start date and every 12 months from the shareable visit date. Sharing is limited to the cost of the office visit only, up to \$175. Pap smears are considered shareable only when performed during the annual provider visit. Any additional services provided during the visit will be considered the member's responsibility, including X-rays, lab/blood work, and other services.

For these services, members may seek lower cost options by presenting themselves as self-pay patients. Members should take advantage of the Medical Advocacy service as it is a complimentary resource to help them locate low-cost facilities.

### Colonoscopies

Sharing for a screening colonoscopy is available every 10 years beginning at the age of 45 and after six months of continuous membership. Sharing is limited to \$5,000 for the screening colonoscopy, anesthesia, diagnostic testing, biopsies, and pathology performed as a part of the screening. Any additional costs, services, or follow-ups will be the member's responsibility. For high-risk members under 45, this service may be shareable with prior written approval from HSA Secure HealthShare.

All other colonoscopies are not shareable as a preventive service but may be considered for sharing as a separate sharing request dependent upon the reason and only with prior written approval from HSA Secure HealthShare. All non-preventive colonoscopies are subject to the IUA.

### **Mammograms**

Sharing for a mammogram is available after six months of continuous membership and every year beginning at the age of 40. Sharing is limited to \$600 for a 2D or 3D mammogram. The exam, appointment, and evaluation of imaging performed as a part of the screening will count toward the \$600 limit. Any additional services provided will be the member's responsibility. For high-risk members under the age of 40 this service may be considered for sharing with prior written approval from HSA Secure HealthShare.

If the finding of the screening mammogram warrants an ultrasound, HSA Secure HealthShare will consider sharing in the cost.

All other mammograms are not shareable as a preventive service but may be considered for sharing as a separate sharing request dependent upon the reason and only with prior written approval from HSA Secure HealthShare. All non-preventive mammograms are subject to the IUA.

## Youth Immunizations

Sharing for youth immunizations is available upon membership start date for members born in connection with an eligible maternity sharing request, and after six months of continuous membership for all other members up to the age of 18.

Sharing is limited for each immunization dose as outlined below:

- HPV (Human Papilloma Virus) - \$254
- Men (Meningococcal) - \$202
- PCV (Pneumococcal) - \$227
- RV (Rotavirus Immunization) - \$131
- IPV (Inactivated Polio Immunization) - \$39
- HIB (Haemophilus Influenza Type B) - \$29
- Hep A (Hepatitis A) - \$36
- Hep B (Hepatitis B) - \$27
- VAR (Varicella) - \$151
- DTaP (Diphtheria, Tetanus, acellular pertussis) - \$35
- Tdap (Tetanus, Diphtheria, acellular pertussis) - \$35
- MMR (Measles, Mumps, Rubella) - \$251

## Shareable Immunizations

Visits	Hep B	RV	DTaP	HiB	PCV	IPV	MMR	VAR	Hep A	Tdap	HPV	Men
Birth	X											
1 Month	well child visit, no immunizations											
2 Months	X	X	X	X	X	X						
4 Months		X	X	X	X	X						
6 Months	X	X	X	X	X	X						
9 Months	well child visit, no immunizations											
12 Months				X	X		X	X	X			
15 Months	well child visit, no immunizations											
18 Months			X						X			
24 Months	well child visit, no immunizations											
30 Months	well child visit, no immunizations											
3 Years	well child visit, no immunizations											
4-6 Years			X			X	X	X				
7-10 Years	annual provider visit, no immunizations											
11-12 Years										X	X	X
13-15 Years	annual provider visit, no immunizations											
16 Years												X
17-18 Years	annual provider visit, no immunizations											

In addition to the well child visits listed above, one annual provider visit between birth and 36 months is shareable if it is not coded as a well child visit and qualifies based on member guidelines.

<b>Hep B</b>	Hepatitis B	<b>RV</b>	Rotavirus	<b>DTaP</b>	Diphtheria, tetanus, acellular pertussis	<b>HiB</b>	Haemophilus influenza type B
<b>PCV</b>	Pneumococcal vaccine	<b>IPV</b>	Inactivated polio vaccine	<b>MMR</b>	Measles, mumps, rubella	<b>VAR</b>	Varicella
<b>Hep A</b>	Hepatitis A	<b>Tdap</b>	Tetanus, diphtheria, acellular pertussis	<b>HPV</b>	Human papilloma virus	<b>Men</b>	Meningococcus

### Well Child Visits

Sharing for well child visits is available upon membership start date for members born in connection with an eligible maternity sharing request and after six months of continuous membership for all other members. Sharing is limited to \$175 for the office visit costs, and associated immunizations are limited as outlined in the [Youth Immunizations section](#).

Qualifying visits are for children at the following ages:

- Birth
- 1 Month
- 2 Months
- 4 Months
- 6 Months
- 9 Months
- 12 Months
- 15 Months
- 18 Months
- 30 Months
- 36 Months

## MATERNITY SHARING REQUESTS

As a general rule, maternity sharing requests are shareable and are treated like any other sharing request.

As with any other sharing request, expectant mothers pay a single IUA for all expenses related to their maternity sharing request. Shareable expenses may be related to miscarriage, prenatal care, postnatal care, and delivery. Please submit your maternity sharing request as soon as possible, but no later than six months from pregnancy confirmation.

### Waiting Period

If conception occurs prior to or within the first 60 days of the membership, the pregnancy will be considered as existing prior to membership. Pregnancy existing prior to membership is not shareable.

The conception date will be confirmed by medical records. Members who purposely misrepresent their conception dates may be subject to membership revocation.

Newborns who are not born in connection with an eligible maternity sharing request may be added to a household membership by submitting a membership application to HSA Secure HealthShare. The newborn's membership start date can be no sooner than seven days after delivery. Any complications that the newborn may have, or any medical conditions present at birth, will be considered pre-membership medical conditions.

See the [Pre-membership Medical Condition section](#) for details.

## What is Shareable

### PRENATAL

- Routine office visits
- Routine lab work
- Fetal non-stress test (after 36 weeks)
- Up to three standard ultrasounds (unless an unexpected complication requires additional scans)
- STD/STI screenings prescribed by a licensed practitioner as part of routine prenatal care

### DELIVERY

- Ob-gyn labor and delivery
- Cesarean
- Multiple births
- Hospital labor and delivery
- Hospital room and board
- Anesthesiologist



- Legally practicing midwives
- Home births
- Birthing centers
- Charges related to unexpected complications for the mother
- One in-hospital pediatrician visit, including routine immunizations, routine lab work, and routine hearing tests (all shareable when the baby is added to the membership within 30 days of delivery and when these services occur prior to discharge from hospital)

## POSTNATAL

- Mother's six-week postpartum checkup with pap test
- Two-week cesarean post-op appointment

## What is Unshareable

### PRENATAL

- 3D and 4D ultrasounds
- Most immunizations (such as flu shots)
- Non-prescription supplements
- Genetic testing, including but not limited to:
  - Amniocentesis
  - Inhibin A
  - Alpha-Fetoprotein Serum (AFP)
  - Any type of Nuchal Translucency (NT) ultrasound
  - NIPT testing
  - Services by companies providing genetic testing

### DELIVERY

- Doula services
- Birthing tubs (or other items related to midwife delivery)
- Placenta encapsulations
- Circumcision
- Diagnostic hearing screening (including evoked auditory tests, BAEP, ABR, or BAER)

## POSTNATAL

- Breast pumps
- Lactation consultant
- Mother's immunizations
- Postpartum counseling
- Additional postpartum services

Other services may be ineligible or eligible as determined by HSA Secure HealthShare. If you have questions about a specific service, please contact HSA Secure HealthShare prior to receiving care. All genetic testing will be the responsibility of the member.

Checkups for the baby after delivery are not part of the maternity sharing request. If the newborn has any complications, they would require a separate sharing request. All of the baby's checkups and any complications are subject to eligibility determination based on the Member Guidelines.

## Maternity IUA Payment

Like any other shareable medical expense, the member's IUA must be paid prior to any sharing. The IUA must be paid within six months of the first date of service or the maternity sharing request may become ineligible for sharing. Consideration will be given for situations where the cost of treatment has not exceeded the IUA after six months. Please contact the Maternity Needs department at 888-920-9466 in this situation.

Any late payment fees or interest charges incurred because of a late IUA payment are not shareable.

HSA Secure HealthShare can take a one-time payment over the phone, paid directly to us, to meet the IUA. Please speak with the Maternity Needs team to make an IUA payment over the phone. Members can also make payments directly to providers. Payments made directly to providers can count towards the IUA for shareable services. In the event of overpayment, IUA reimbursements can be given to the member. HSA Secure HealthShare has two reimbursement periods: midway through the pregnancy and after delivery.

### **Home Births**

Home births typically incur fewer expenses. If the costs are significantly lower for a home birth than for a hospital birth and the member is under the care of a licensed care provider, HSA Secure HealthShare may partially waive the IUA for a maternity sharing request.

### **Separate Sharing Requests**

Any additional sharing request of the baby after birth, whether the condition existed before or after birth (including congenital conditions), is separate from the mother's maternity sharing request and will require a new sharing request and IUA for each baby. Expenses for any pregnancy or birth-related complications of the mother are eligible for sharing as part of the maternity sharing request.

### **Premature Birth**

A newborn's eligible medical needs are considered shareable as part of an eligible maternity sharing request, even if the baby is born prematurely. Any services outside standard maternity and newborn care would be considered a separate medical need for the baby and will require a new sharing request submission and new IUA.

## **In Vitro Fertilization (IVF)**

Expenses related to fertility treatments are ineligible for sharing. For pregnancies occurring by IVF or other non-traditional fertilization methods, HSA Secure HealthShare defines date of conception as the date the fertilized embryo is implanted in the uterus.

## **Miscarriage**

Any expenses related to a miscarriage that is associated with an eligible maternity sharing request are shareable if the costs exceed your IUA.

Expenses related to a miscarriage that is not associated with an eligible maternity sharing request are eligible under a regular sharing request.

## **Gestational Diabetes**

Gestational diabetes is considered a complication of pregnancy, and members who develop this condition are encouraged to follow the recommendations of their treating providers. Gestational diabetes is not considered insulin dependent. Therefore, costs of medications prescribed to treat gestational diabetes, including insulin, can be shared according to our prescription sharing guidelines.

Members are encouraged to seek counsel from their ob-gyn on dietary changes and exercise. Glucometers and test strips can be purchased at local pharmacies or online at reasonable costs. For these reasons, nutritionists, other therapists, and testing supplies are not shareable.

## ADDITIONAL GIVING

Members are encouraged to give funds in addition to their standard monthly contributions. One hundred percent of Additional Giving contributions are placed in the Additional Giving fund, which is used solely to assist members who have a sharing request that would not normally qualify for sharing. Additional Giving funds are not subject to any administrative costs. Additional Giving is not mandatory, and members may contribute however much they feel is appropriate.

All members who adhere to the Principles of Membership and follow the Member Guidelines are eligible to apply for assistance through the Additional Giving fund via an Additional Giving sharing request. Members may apply when they have an ineligible sharing request.

### Guidelines for Additional Giving

Sharing requests that do not meet the Member Guidelines may be eligible for sharing through the Additional Giving fund.

- Members and other contributors may give additional funds to share with the community or give toward a specific sharing request.
- Members are encouraged to share out of their surplus.
- Members looking to request sharing from the Additional Giving fund must still meet their IUA before the sharing request becomes eligible for sharing.
- Members who apply for sharing from the Additional Giving fund may only have part of their costs shared.

## END OF LIFE ASSISTANCE

If a member, or a member's dependent, dies after one year of uninterrupted membership, we will provide financial assistance to the surviving family. Our community will provide assistance after we receive a copy of the death certificate.

Financial assistance will be provided to the family as follows:

- \$10,000 upon the death of a primary member
- \$10,000 upon the death of a dependent spouse
- \$2,500 upon the death of a dependent child

## DEFINED TERMS

### ADDITIONAL GIVING FUND

A fund made up of voluntary contributions from members of our medical cost sharing community, and the generous donations of others, for the purpose of supporting other members who have unshareable medical expenses. The allocation of these funds is decided on a case-by-case basis by the Additional Giving Committee.

### ADDITIONAL GIVING SHARING REQUEST

A sharing request for ineligible medical expenses. The request and expenses must align with the Principles of Membership and may be considered for sharing from the Additional Giving fund.

### ADDITIONAL CONTRIBUTIONS

Contributions in excess of the monthly contribution for the household membership, additional services, and IUA.

### ADDITIONAL SERVICES

Optional services that may be added to, or included with, existing memberships. These include preventive sharing, Teladoc®, Rx Share, and LifeWorks.

### AFFILIATES

An individual, DPC, marketing organization, or others certified to offer HSA Secure HealthShare memberships. Depending on state laws and requirements, as well as their own preferences, affiliates may or may not be compensated for doing so.

**ANNUAL MAXIMUM**

The maximum amount that may be shared per member, per year. HSA Secure HealthShare does not have annual or lifetime sharing limits for eligible medical expenses. However, some expenses may be subject to limitations according to our Member Guidelines.

**APPLICATION DATE**

The date HSA Secure HealthShare receives a complete membership application.

**BASE MEMBERSHIP**

A household's identified combination of membership type, membership tier, membership age group, and membership IUA.

**COMMUNITY FUND**

A fund, made up of monthly contributions from members, for the exclusive purpose of paying for, or reimbursing, the cost of members' eligible medical expenses.

**COMPANY**

A marketing organization or employer certified to offer HSA Secure HealthShare memberships that is not compensated.

**CONGENITAL CONDITION**

Anomalies of body structure or function that are present at birth or that are identified or diagnosed within the first year of life.



## **CONTINUOUS MEMBERSHIP**

The uninterrupted period of time when a household or individual has been an active member of the medical cost sharing community, by which sharing limitations requiring phase-in or waiting periods are determined.

## **CONTRIBUTION LIST**

A list of all members who contribute, whether it be through direct billing from HSA Secure HealthShare or through their employer.

## **DATE OF SERVICE**

The date medical services were rendered on behalf of a member.

## **ELIGIBLE SHARING REQUEST**

A sharing request that is eligible for sharing with the medical cost sharing community.

## **HOUSEHOLD**

A group of members, including the primary member, their spouse or domestic partner, and/or unmarried children under 26. A household can only have one household membership.

## **HOUSEHOLD MEMBERSHIP**

A membership associated with, and applied to all members of, a household. Individual members within the household can have unique membership start and termination dates.

**INACTIVE MEMBER**

A member, and applicable dependents thereof, who have withdrawn from membership or have had their membership revoked.

**INELIGIBLE SHARING REQUEST**

A sharing request ineligible for sharing by the medical cost sharing community, for reasons stipulated in our Member Guidelines and Principles of Membership.

**INITIAL UNSHAREABLE AMOUNT (IUA)**

The amount members are required to pay on their own before associated eligible medical expenses may be shared. Members have six months from the initial date of service to meet their IUA.

**LICENSED MEDICAL PROFESSIONAL**

An individual who has successfully completed a prescribed program of study in one of a variety of health fields, and who has obtained a license or certificate indicating their competence to practice in that field (MD, DO, ND, NP, PT, PA, Chiropractor, etc.), and whose license or certificate is both active and recognized by the state where services are rendered.

**LIFETIME MAXIMUM**

The maximum amount that may be shared by a member for the lifetime of their membership. HSA Secure HealthShare does not have annual or lifetime sharing limits for eligible medical expenses. However, some expenses may be subject to limitations according to our Member Guidelines.

## **MEDICAL COST SHARING**

A membership-based practice of sharing eligible medical expenses between members.

## **MEDICAL COST SHARING COMMUNITY**

The collective body of all active members of HSA Secure HealthShare (also referred to as the “HSA Secure HealthShare community,” or “community”).

## **MEDICAL COST SHARING ORGANIZATION**

A nonprofit organization whose primary purpose is to care for the needs of its members and facilitate each member’s ability to care for one another. A medical cost sharing organization is not an insurance company.

## **MEDICALLY NECESSARY**

A service, procedure, medication, evaluation, or treatment necessary to restore or maintain physiological function, and that is provided in the most cost-effective setting consistent with the member’s condition. The fact that a provider may prescribe, administer, or recommend services does not always make them eligible for sharing. This applies even if the recommended service is not listed as a membership limitation or mentioned in the Member Guidelines. To help determine medical necessity, we may request medical records and information from licensed medical professionals.

## **MEDICAL NEED**

The reason for which a member submits a sharing request. This includes, but is not limited to, preventive visits, maternity, an accident, or a serious medical incident.

## **MEMBER**

The individual(s) within a household, or dependent(s) thereof, who, demonstrated by their participation, have agreed to abide by our requirements and are thereby eligible to share medical expenses with other members in accordance with the Member Guidelines, and their membership type. This includes the primary member, their spouse or domestic partner\* and any unmarried children (by birth, marriage, or legal guardianship) under the age of 26.

\*Domestic Partner is an unrelated and unmarried person who shares common living quarters with a Primary Member and lives in a relationship that is not legally defined as marriage by the state in which the member resides.

## **MEMBER RESPONSIBILITY**

Any amount paid by the member for medical costs that is not shareable with the medical cost sharing community. These amounts are in addition to the IUA.

## **MEMBERSHIP**

There are a variety of available options for the primary member to choose from, featuring different IUAs, sharing limits, and monthly contributions.

## **MEMBERSHIP AGE GROUP**

The age group, as defined by HSA Secure HealthShare, which the oldest household member belongs to.

**MEMBERSHIP IUA**

The IUA that is chosen by the primary member, usually at the time of joining, and applied to the household's sharing requests.

**MEMBERSHIP START DATE**

The date on which a person's membership begins.

**MEMBERSHIP TIER**

Determined by the number of individuals participating in a household membership and their relationship to the primary member.

**MEMBERSHIP TYPE**

Defined as either Direct or Essential.

**MEMBERSHIP WITHDRAWAL**

A membership is considered withdrawn when the member either requests they be withdrawn from the medical cost sharing community, ages out, or fails to submit timely monthly contributions (for more than ten days past the contribution date). Members who are withdrawn from the medical cost sharing community are eligible for reinstatement, unless they were withdrawn due to aging out at 65. Members have 30 days from the membership withdrawal date to reinstate their membership and qualify for continuous membership. Both withdrawal and revocation of membership causes a membership to become inactive until it is reinstated (if eligible).

**MEMBER-TO-MEMBER SHARING**

Members voluntary sharing of one another's medical expenses.

## MONTHLY CONTRIBUTIONS

A set monetary amount voluntarily submitted by a member and placed in the care of HSA Secure HealthShare, for the purpose of maintaining active membership and sharing in the medical expenses of fellow members. Funds are disbursed each month for members' medical expenses, other than the small portion of these funds allocated for administrative and vendor costs, as allowed by law. All members are given the opportunity to determine the types of medical services they share, and this can be done through the member's online portal.

## PRE-MEMBERSHIP MEDICAL CONDITION

Any illness or injury for which a person has been examined, been diagnosed, taken medication, had symptoms, or received medical treatment within 24 months prior to their membership start date.

## PRIMARY MEMBER

The member who created the household membership. The primary member may or may not be the oldest member in the membership household.

## REVOCATION OF MEMBERSHIP

Membership may be revoked for multiple reasons including, but not limited to, a violation of our Principles of Membership. Members who have their membership revoked may not have it reinstated or reestablished.

Revocation of membership causes a membership to become inactive.

**SHAREABLE**

Medical expenses are shareable with the medical cost sharing community when they qualify in accordance with the Member Guidelines and are determined to be eligible for sharing.

**SHARING LIMIT**

The maximum amount that can be shared for any individual sharing request or type of medical service, as described in the Member Guidelines.

**SHARING REQUEST**

A form required to notify the medical cost sharing community of a member's medical need and associated medical expenses.

See the applicable sections of the Member Guidelines for qualifying requirements.

**SHARING REQUEST TYPE**

Identified as either regular, surgery, preventive, maternity, alternative, or Additional Giving depending on the type of medical services and treatment the member is receiving.

**TOBACCO SURCHARGE**

An additional monthly charge of \$50 a month for a membership household wherein one or more members uses tobacco as defined in our Member Guidelines.

**UNSHAREABLE AMOUNT(S)**

A medical expense incurred by a member that is excluded from sharing based on our Member Guidelines and Principles of Membership.

## DISCLAIMER

HSA Secure HealthShare is not an insurance company. Neither this publication nor membership in HSA Secure HealthShare are issued or offered by an insurance company. The purpose of the Member Guidelines is to help members understand and identify medical needs that may qualify for member sharing and the process by which member-to-member sharing is facilitated. The Member Guidelines are not for the purpose of defining the amounts that HSA Secure HealthShare community will reimburse or share into. While the HSA Secure HealthShare community has shared in all eligible member sharing requests to date, membership does not guarantee or promise that all eligible sharing requests will be shared. Rather, membership in the HSA Secure HealthShare community merely guarantees the opportunity for members to share the financial burden in another member's time of need. The financial assistance members receive will come from other members' monthly contributions and not from HSA Secure HealthShare.

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## STATE NOTICES

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