





"Carry each other's burdens, and in this way you will fulfill the law of Christ." - Galatians 6:2



Hope Health Share, a 501(c)(3), is not an insurance company but a religious health care sharing ministry.

What is a Healthcare Sharing Ministry?

Health Care Sharing Ministries are non-profit organizations with Section 501(c)(3) federal tax-exempt status, that facilitate the sharing of eligible health care costs among Members who have common religious beliefs. Members of a Health Care Sharing Ministry, under 26 USC § 5000A(d)(2)(B)(ii), are exempt from the ACA individual mandate. Health Care Sharing Ministries are not Insurance and are not offered by an insurance company.

Who We Are & Our Mission

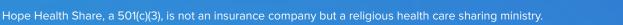
Hope Health Share is a healthcare sharing ministry, a subsidiary of Endtime Ministries, Inc., based on a biblical guidance and principles. As America's trusted voice on Bible prophecy, we are called to teach the principles of the Kingdom of God, help disciple every person on Earth, share the love of Christ, and explain current events through the lens of Bible prophecy. Using common-sense instruction and empowerment, we provide hope, peace and understanding to everyone in every walk of life. Endtime is built on faith, integrity, and committed supporters who share this call. Endtime is a not-for-profit corporation that is recognized as a tax exempt under Internal Revenue Code 501 (c) (3).



Hope Health Share provides community, an avenue to share in God's blessings, and hope to every Believer in every walk of life.

Our Members make a fixed monthly contribution to the health sharing community according to the sharing program elected. When Members incur an eligible medical expense, they submit the bill to Hope Health Share through their Membership. Eligible medical expenses meeting the Program Guidelines elected by the Member are then shared by the Hope Health Share Community.

Hope Health Share is an affordable alternative solution to traditional health insurance.



Who We Serve

Individuals and Families seeking affordable short term or long term alternatives to Health Insurance. Our Member's can enroll at any time without waiting for an open enrollment period or a qualifying life event. Our Programs allow like-minded Believers to share in each other's eligible needs.

Hope Health Share exists to bring Believers together to share each other's burdens and to share in God's blessings. For centuries, Believers all over the world have shared their lives, resources, and blessings as first outlined in the book of Acts.

"All the believers were united in heart and mind. And they felt that what they owned was not their own, so they shared everything they had. The apostles testified powerfully to the resurrection of the Lord Jesus, and God's great blessing was upon them all." —Acts 4:32–33

Membership Qualification

Believers are free to join Hope Health Share regardless of a health history. The qualification requirements for Membership in Hope Health Share—Believers who have agreed to share the costs of one another's eligible health care expenses—are simple.



Lifestyle

Hope Health Share Members must follow the Biblical lifestyle and abide with the Statement Beliefs. Hope Health Share members must abstain from the following activities:

- Use of any tobacco, nicotine, smoking device, or substitutionary smoking device (including but not limited to cigarettes, cigars, pipes, herbal cigarettes, e-cigarettes, vape pens, etc.);
- Illegal use of drugs; and sexual immorality (as defined in the Scriptures and expressed in our Statements of Beliefs on our website
- Additionally, members must follow biblical principles with respect to the use of alcohol.

Share Requests resulting from these activities will be deemed ineligible for sharing by the Hope Health Share Membership Guidelines.



Hope Health Share Premium Overview



Overview of Eligible Sharing Services Per Member ¹		
Personal Responsibility (PR)	Available Options: \$5,000 \$7,500 \$10,000	
Maternity Labor Delivery and Hospitalization PR	\$1,000	
Visit Fees	PCP: \$35 Visit Fee Specialist: \$75 Visit Fee Urgent Care Facility \$100 Visit Fee Emergency Room (ER) Visit Fee: In-Network: \$200 Visit Fee Out-of-Network: \$500 Visit Fee Outpatient Occupational, Physical & Speech Therapy Visit Fee - \$50 Visit Fee	
In/Out-of-Network Co-Sharing Percentages	Unless stated otherwise: After the Member's PR is met, eligible expenses are shared subject to In/Out-of-Network Sharing expenses. In-Network: Hope Health Share shares 80% Member Shares 20% Out-of-Network: Hope Health Shares 70% Member Shares 30%	
Maximum Reasonable Allowed Charges	Out-of-Network eligible medical expenses are subject to the Maximum Reasonable Allowed Charges.	
Maximum Limit per Diagnosed Medical Condition and all related treatment or Incident	Unless stated otherwise: \$200,000	
Lifetime Sharing Maximum	\$1,000,000	
Provider Network	First Health® Network	

Hope Health Share Premium Overview



Eligible Sharing Services	In-Network	Out-of-Network
Preventive and Routine Care Primary Care Physician (PCP) Visits Specialist Visits Urgent Care Facility Visits	6 Visits per Member per Program Year PCP: \$35 Visit Fee Specialist: \$75 Visit Fee Urgent Care Facility \$100 Visit Fee After the Member's Visit Fee eligible expenses are shared up to the per Visit Maximum Sharing Limit: PCP: \$500 Specialist: \$500 Urgent Care Facility \$750 PR and In/Out-of-Network Co Sharing Percentages are Waived Pre-Existing Condition Limitation does not Apply Out-of-Network Services are subject to the Maximum Reasonable Allowed Charge	
Diagnostic/X-Ray/Labs	After the Member's PR is met Hope Health Share shares 80% Member Shares 20%	After the Member's PR is met Hope Health Share shares 70% Member Shares 30%
Emergency Room	In-Network: \$200 Visit Fee After the Member's PR is met Hope Health Share shares 80% Member Shares 20%	Out-of-Network: \$500 Visit Fee After the Member's PR is met Hope Health Share shares 70% Member Shares 30%
	Limit: 2 Emergency Room Visits per Program Year	
Inpatient Hospitalization	After the PR is met Hope Health Share shares 80% Member shares 20%	After the PR is met Hope Health Share shares 70% Member shares 30%
Inpatient/Outpatient Surgery	After the PR is met Hope Health Share shares 80% Member shares 20%	After the PR is met Hope Health Share shares 70% Member shares 30%
	Limit: 2 Per Program Year	
Other Limited Eligible Services	Non-Hospital Admission Cardiac Rehab Home Health Care Prosthetics Outpatient Physical, Occupational and Speech Therapy Emergency Room Visits per Program Year	

¹Unless stated otherwise, there is a 90-day Waiting Period for any medical expenses, other than Accidents, Injuries, and Acute Illnesses. Specific eligible services and medical diagnosis or incidents have additional Waiting Periods, Frequency and Sharing Maximum Limits.

Unless stated other wise the Pre-Existing Conditions Limitations apply to Sharing Services . Out-of-Network Services Share Requests are subject to the Maximum Allowable Charge.

Review the Program Guidelines for full explanation of Waiting Periods, Pre-Existing Condition Limitations, and eligible sharing guidelines, frequencies and limitations. The Member's Personal Responsibility (PR) apply to each Member and resets at each Program Year Anniversary.

Hope Health Share Additional Member Services*



Hope Health Share is committed to assisting our Members by bringing together a robust bundle of Additional Non-Sharing Services. By partnering with leaders in Provider Networks, Telemedicine and Discount Services, Members have access to budget saving solutions.

Preferred Provider Network

Hope Health Share Members have access to one to the Nation's largest PPO Networks.

First Health[®] Network has negotiated discounted rates with these healthcare providers and facilities. Members can access these discounted rates by choosing to use the In Network Providers.

First Health is the brand name used for products and services provided by one or more of the Aetna group of companies, including First Health Group Inc.

Telemedicine - Virtual Urgent Care made available by lyric

Hope Health Share Members Have Access to Virtual Urgent Care, When Its Needed Most!



Visit with a doctor 24/7 - whenever, wherever \$0 Consult Fee.



With a **virtual care visit** you can talk — by **phone** or **video** — to a doctor who can diagnose common medical conditions and even prescribe medications, if needed

Most commonly treated include cold & flu, allergies, sinus problems, bronchitis, ear infections, urinary tract infections, pink eye, and many other non-emergency situations.

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

Hope Rx Prescription Membership

Hope Health Share Members have access to the Hope Health Rx Prescription Membership

Members can go to the Local Pharmacy for Acute Medications or Order Chronic/Over the Counter Medications for free Home Delivery. Through Hope Health Rx's relationship and buying power with America's Pharmacy Source, over 600 of the most prescribed generic medications are available at **No Cost** to Our Members.

\$0 Member Cost Acute Medications (Immediate Need)If there's an immediate need for these types of medications, Members receive a prescription card in the welcome packet to use at a retail pharmacy. This card includes the top most prescribed acute medications for \$0 Member Cost up to a 21-day supply at over 64,000 pharmacies nationwide.

\$0 Member Cost Maintenance Medications (Chronic Needs) Maintenance drugs are medications prescribed for chronic, long-term conditions and are taken on a regular, recurring basis. Examples of chronic conditions are: high blood pressure, high cholesterol and diabetes, to name a few.

Over-The-Counter Medications (Everyday)J Hope Health RX offers the most common Over-The-Counter medications, such as Ibuprofen, Acetaminophen, Fexofenadine, Diphenhydramine and others at a fraction of the price.

SaveOnDiabetes: Glucose Meters, Test Strips, Medications & More!SaveOn Diabetes is our game-changing program for members with Diabetes in which they will get a COMPLEMENTARY meter, low cost testing strips, lancets and more.

THESE PLANS ARE NOT INSURANCE and is not intended to replace health insurance. THESE PLANS are not a Qualified Health Plan under the Affordable Care Act. THIS IS NOT A MEDICARE PRESCRIPTION DRUG PLAN These services are not owned or operated by Hope Health Share, and are not insurance or intended to replace health insurance.

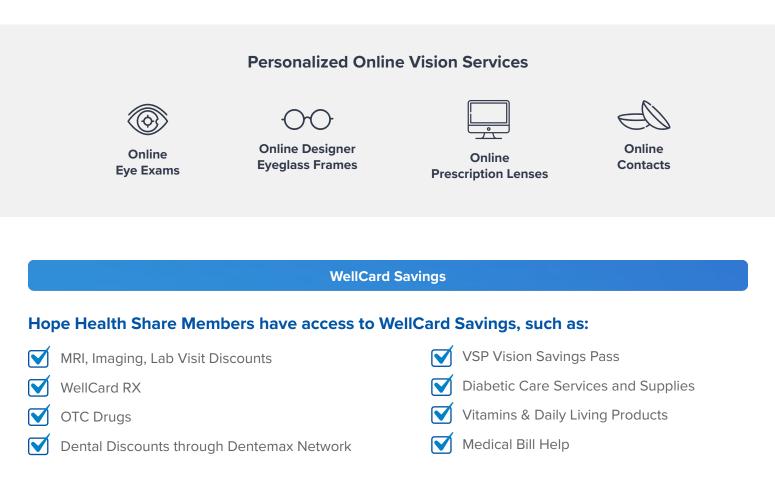
*The Additional Member Services are not owned or operated by Hope Health Share, and are not insurance or intended to replace health insurance, nor are they an eligible needs request.

Hope Health Share Additional Member Services*

Š

Vision Care Made Available By Lensabl+ Gold Level

Lensabl+ is a leading online vision services platform enabling Members convenient access to vision care anytime, anywhere. Lensabl provides access to frames, lenses, contacts and eye exams at a fraction of the out-of-pocket costs. Members can see ANY eye doctor, rather than being limited to a network (or take the Lensabl online vision test).



*This is Not Insurance. It is a discount medical program. It does not replace COBRA or any other medical insurance pro-gram nor is it a Medicare Part D prescription drug plan. WellCard Savings does not qualify for essential coverage under the Affordable Care Act (ACA- ObamaCare). Cardholders are responsible for paying the discounted cost at the time of service from participating providers.

WellCard Savings has no membership fee nor is participation in any organization or purchase of any good or service re-quired to obtain or use WellCard Savings. WellCard Savings will not share or sell your personal information. The discount medical plan organization is Access One Consumer Health,Inc. (not affiliated with AccessOne Medcard), 84 Villa Road, Greenville, SC, 29615, www.accessonedmpo.com. This program is not available to residents of Montana, but may be used by non-residents at participating Montana providers. Other state residents: visit www.WellCardSavings.com for full disclo-sure statement.

*The Additional Member Services are not owned or operated by Hope Health Share, and are not insurance or intended to replace health insurance, nor are they an eligible needs request.

Hope Health Share, a 501(c)(3), is not an insurance company but a religious health care sharing ministry. *These services are not owned or operated by Hope Health Share, and are not insurance or intended to replace health insurance. **The discount services are not owned or operated by Hope Health Share, and are not insurance or intended to replace health insurance.

Hope Health Share Frequently Asked Questions



Who Can Enroll in Hope Health Share?

Hope Health Share welcomes those who share our Statement of Faith Individuals 18-65, Married Couples, Parent & Child, Families residing full time in the US or Puerto Rico.

Eligible Dependents Include: Spouse - Under the Age of 65, Child/ Children - Under the age of 26.

Hope Health Share programs are not available to the residents of CA, CO, MA, MD, MT, NM, PA, VT and WA. **Please visit:** https://hopehealthshare.com/legal-disclaimer-and-notices for the most up to date state availability listing.

Are there Waiting Periods that apply before Members' Needs Requests are eligible for sharing?

Yes. Unless stated otherwise there is a 90-Day Waiting Period from each Member's Effective Date for any medical expenses other than for Accidents, Injuries, and Acute Illnesses.

The Pre-Existing Condition Limitation and the 24-Month, 36-Month or 60-Month Waiting Period from the Member's Effective Date apply. Pre-Existing Condition means any illness, or injury for which a Member received medical treatment, advice, care, or services including any diagnostic measures, took prescribed drugs or showed signs and symptoms, whether treated or not, within 24 months (or 60 Months for Cancer) before each Member's Effective Date. The Pre-Existing Condition Limitation does not apply to PCP, Specialist or Urgent Care Facility Visits.

There is a 10-Month Maternity Waiting Period from each Married Member's Effective Date for Maternity Labor Delivery and Mother's Inpatient Hospitalization or Birthing Center Need Requests.

There is a 12-Month Waiting Period from each Member's Effective Date for a Preventive Screening Colonoscopy.

There is a 12-Month Waiting Period from each Member's Effective Date for Organ Transplant services.

Unless stated otherwise the Pre-Existing Condition Limitations and the 24-Month or 36-Month Waiting Period from the Member's Effective Date will apply. The Pre-Existing Condition Limitation does not apply to the Day-to-Day Care PCP, Specialist or Urgent Care Facility Visits.

Cancer: There is a 12-Month Waiting Period for Cancer sharing for Members who have never been diagnosed or treated for Cancer. For Members who have been diagnosed with or treated for Cancer within 60-Months of the Member effective date, the Member must be Cancer free for 60-Months after the Member Effective date for newly diagnosed Cancer to be eligible for sharing. A Metastasized or Recurring Cancer is never eligible for sharing. For members who were previously diagnosed with or treated for Cancer, but Cancer free during the 60-Months prior to the Member Effective Date, the 12-Month Waiting Period for Cancer Sharing applies, and supporting documentation that the Member was Cancer free within 60 Months of the Member Effective Date may be required. A Metastasized or Recurring Cancer is never eligible for sharing.

Needs Requests submitted for services received prior to completion of the Waiting Periods are not eligible for sharing.

What is a PR (Personal Responsibility)?

The PR is an abbreviation for Personal Responsibility. This is the is the amount that each Member is responsible to pay for eligible medical expenses submitted before the Program and the Membership begins to share in the Member's eligible medical expenses. The PR does not apply to eligible expenses from PCP Visits, Specialist Visits and Urgent Care Facility Visits. The PR applies to each Program Year.

Members select their PR when enrolling in the Hope Health Share Premium Program.

How are Member's Needs Requests Shared?

Once the Member's PR is met, Hope Health Share will share in eligible subject to the Co-Sharing In/Out of Network Sharing Percentages.

In-Network Needs Request Out-of-Network Needs Request Hope Health Share Shares 80% Member Shares 20%

Hope Health Share Shares 70% Member Shares 30%

Are Annual Wellness Exam and Preventive Services eligible for sharing?

After the 90 Day Waiting period, Members may use their allotted PCP or Specialist Visits, subject to the \$35 Primary Care Visit Fee or \$75 Specialist Visit Fee for their Annual Wellness medical needs. Well Child Visits and Youth Immunizations are eligible for sharing, as delivered during a PCP Visit, after the 90-Day waiting period from the Member's Effective Date.

Are there medical conditions or services that are not eligible for sharing?

Yes. Members should review the Hope Premium Member Guidelines for full list of Medical Conditions and Services not eligible for sharing.

Are Members required to use a specific list of Providers for health care?

Hope Health Share Members have access to the First Health® Network. Providers participating in the Network have negotiated discounts that can reduce the Member's medical costs and may result in significant health care savings. Using an Out-of-Network Provider or Facility is still the Member's choice. The Out-of- Network services can result in higher Member Out-of-Pocket responsibility.

Is the Hope Premium Program Insurance?

No. Hope Health Share is a Health Care Sharing Ministry. The Hope Premium Program is not insurance and Hope Health Share is not an insurance company. Members of Hope Health Share make fixed monthly contributions to the health sharing community according to the sharing level elected. Eligible medical bills are shared with the funds of all Members who faithfully share.

Neither Hope Health Share nor Members of Hope Health Share (a.) guarantees payment of a Member's medical bill, or (b.) assumes liability for the payment of a Member's medical bill.

Members of a Health Care Sharing Ministry under 26 USC 5000A(d)(2)(B)(ii), are exempt from the ACA individual mandate.

Hope Health Share Additional FAQ's



Are there Medical Expenses or Diagnosis that include additional Limitations?

Yes, these limitations may include Pre-Existing Conditions limitations, waiting periods, specified frequencies, specified maximums, and /or reduced lifetime maximums.

Pre-Existing Conditions - There are defined Pre-existing Conditions that once the Waiting Period is met, have a \$25,000 Lifetime Maximum for eligible expenses.

These conditions include: ALS, Alzheimer's Disease, Aneurysm; Cerebral Palsy; Cystic Fibrosis; Dementia; Diabetes Type I; Down's Syndrome; Emphysema; Fragile X Syndrome; Fibromyalgia; Hepatitis (Chronic Viral B & C); HIV/AIDS; Lupus; Lyme's Disease; Macular Degeneration (wet or dry); Morbid Obesity; Multiple Sclerosis; Muscular Dystrophy; Osteoarthritis; Osteoporosis; Parkinson's Disease; Sickle-Cell Disease; Spina Bifida; Typhoid.

Other incidents or Medical Diagnoses with limitations include: Cancer - Lifetime Maximum Limit for all Cancer: \$200,000 For Member's age 50 and older, who were Tobacco users, there is a \$75,000 Lifetime Limit on Cancer Sharing.

Labor Delivery and Inpatient Hospitalization or Birthing Center Needs - Up to \$5,000 per Pregnancy (whether for a single or

multiple birth) limit for the Maternity ending in a normal delivery or a cesarean section that is not medically necessary including but not limited to charges and expenses arising from physician care,hospital or birthing center admissions, attendance by midwives, or home deliveries accompanied by a Midwife or Physician.

Up to \$8,000 per Pregnancy (whether for a single or multiple birth) for Maternity ending in a delivery by cesarean section that is medically necessary because of complications that arise at the time of delivery including but not limited to charges and expenses arising from physician care, hospital admissions.

Up to \$50,000 per Pregnancy (whether for a single or multiple birth) for Maternity ending in a natural delivery or cesarean section, for combined expenses for the Member and Newborn arising from complications at the time of delivery that threaten the life of the Member or Newborn and requiring care or services not normally rendered at the time of delivery.

Organ Transplant - Lifetime Maximum \$100,000

Recreational Vehicles - Eligible Accidents while using motor vehicles, such as, but not limited to; aircraft, ATVs, boats, go-karts, jet skis, motorcycles, motorized self balancing vehicle, snowmobiles whether as an operator or passenger Lifetime Maximum Limit per Incident: \$50,000. **Tobacco Use Limitations** - Any health-related issues will be treated as a Pre-Existing Condition and any Share Request submitted will be subject to the Pre-Existing Condition Limitation.

For Members over the age 50, after the Pre-Existing Condition waiting period is met, Need Requests are limited to \$75,000 for each of the following four medical diagnoses: Stroke, Cancer, Heart Conditions, Chronic Obstructive Pulmonary Disease (COPD).

Why does the Hope Premium Program include limitations on eligible sharing?

The Hope Premium Program is not insurance. Member's eligible medical expenses are shared from the contributions of all Members. No matter how large the ministry grows, Hope Health Share will always be bound by finite resources.

It is of vital importance that all Members act as good stewards of the Membership resources and the Member community. Each Member should honor and care for their physical wellbeing, living a healthy lifestyle help safekeep Hope Health Share Membership resources. These resources are shared by and among all Members.



Hope Health Share Legal Disclaimer and Notices



The following legal notices are required by state regulation and are intended to notify individuals that nonprofit health sharing entities such as Hope Health Share and health care sharing ministry plans are not insurance, and that such entities do not provide any guarantee or promise to pay your medical expenses. Hope Health Share's role is to enable self- pay patients to help fellow ministry members through Members' monthly contributions.

Note: Hope Health Share Programs are not available to the residents of CA, CO, MA, MD, MT, NM, PA, VT, WA.

GENERAL NOTICE

This organization facilitates the sharing of medical expenses but is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. Sharing is available for all eligible medical expenses; however, 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 you or your provider receive any payments for medical expenses and whether or not this program continues to operate, you are always liable for any unpaid bills. This health care sharing ministry is not regulated by the State Insurance Departments. You should review this organization's guidelines carefully to be sure you understand any limitations that may affect your personal medical and financial needs.

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 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.

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 to be 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 vour own medical bills.

Florida Statute 624.1265

Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor its plan of operation is an insurance policy. Membership is not offered through an insurance company, and the organization is not subject to the regulatory requirements or consumer protections of the Florida Insurance Code. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant is compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered to be insurance. Regardless of whether you receive any payments for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Georgia Statute 33-1-20

Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant will be compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered 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.

Idaho Statute 41-121

Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation is an insurance policy. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant will be compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered 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.

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 to be insurance. Whether or not you receive any payments for medical expenses and whether or not this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Indiana Code 27-1-2.1

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 to be insurance. Whether or not you receive any payments for medical expenses and whether or not 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 to be 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 Article 48, Section 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 or not this entity continues to operate, you are always liable for any unpaid bills.

Michigan Section 550.1867

Notice: Hope Health Share 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 this 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 needs.

Mississippi 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 to be 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 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.

Montana Sections 33-1-102 AND 33-1-201, MCA

Notice: The health care sharing ministry facilitating the sharing of medical expenses is not an insurance company and does not use insurance agents or pay commissions to insurance agents. The health care sharing ministry's guidelines and plan of operation are not an insurance policy. Without health care insurance, there is no guarantee that you, a fellow member, or any other person who is a party to the health care sharing ministry agreement will be protected in the event of illness or emergency. Regardless of whether you receive any payment for medical expenses or whether the health care sharing ministry terminates, withdraws from the faithbased agreement, or continues to operate, you are always personally responsible for the payment of your own medical bills. If your participation in the health care sharing ministry ends, state law may subject you to a waiting period before you are able to apply for health insurance coverage.

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

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 58-49-1

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. 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 to be 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.

Oklahoma

Especially for Oklahoma Residents: This is not an insurance policy. It is a voluntary program that is neither approved, endorsed, or regulated by the Oklahoma Department of Insurance and the program is not guaranteed under the Oklahoma Life and Health Insurance Guaranty Association.

Pennsylvania 40 Penn. Statute Section 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 or not this publication continues to operate, you are always liable for any unpaid 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 to be insurance. Regardless of whether you receive any payments for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

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.

Utah Statute Title 31A-1-103(3)(c), as last amended by Laws of Utah, Chapter 274.

Notice: The title of insurance code does not apply to health benefits provided by a health care sharing organization if the organization is described as a 501(c)(3). This is not an insurance policy. It is a voluntary program that is neither approved, endorsed or regulated by the Utah Department of Insurance and the program is not guaranteed under the Utah Life and Health Guaranty Association.

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.

Washington RCW 48.43.009

Notice: Health care sharing ministries re not health carriers as defined in RCW 48.43.005 or insurers as defined in RCW 48.01.050. For purposes of this section, "health care sharing ministry" has the same meaning as in 26 U.S.C. Sec 5000A.

Wisconsin Statute 600.01 (1) (b) (9)

Notice: 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(a)(v)(c)

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 payments of your medical bills regardless of any financial sharing you may receive for the organization for medical expenses. You are also responsible for payment of your medical bills if the organizations ceases to exist or ceases to facilitate the sharing of medical expenses.