

Compiled by	Liberty [™] HealthShare [™] (1)			Christian Care Ministry (2)		Christian Healthcare Ministries (3)			Samaritan Ministries (4)		Altruia HealthShare (5)		
	OCHNA HEALTH	Share	Plus	Complete	Medi-Share	Bronze	Silver	Gold	Basic	Classic	Bronze	Silver	Gold
ADMINISTRATIVE													
Website	libertyhealthshare.org			mychristiancare.org		chministries.org/			samaritanministries.org		altruiahealthshare.org		
Acceptance of Shared Beliefs	Required			Required		Required			Required		Required		
Religious Faith	Any			Christianity		Christianity			Christianity		Any		
Limits on pre-existing conditions	Yes, if prior 36mos None after 3yrs			Yes None after 3yrs		Yes None after 3yrs			Yes None after 5yrs		Yes, if prior 24mos of effective date		
Exception to pre-existing conditions	HealthTrac Program *			No		No			Yes*		Not for Office Visits or Urgent Care		
Sharing starts immediately	Yes			Yes		Yes			Yes		No 90-day waiting period		
Provider Network	None			MultiPlan Network, Optional*		None			None		MultiPlan Network, Optional*		
Medical bills processing	Electronic			Electronic		No			No		Electronic		
Annual Out of Pocket Limit Term.	Annual Unshared Amount (AUA)			Ann. Household Portion(AHP)		Personal Responsibility (PR)			-		Member Responsibility Amt (MRA)		
Other Programs by Same	Solidarity Healthshare			-		-			CMF Curo				
THE NUMBERS													
Membership Dues	\$135, Annual			\$120, one-time		None			None		\$100-125, Annual		
Application Fee	None			\$50		None			\$200		\$100		
Monthly Cost Range, Individual	From \$107	From \$131	From \$149	From \$61-\$1,387 * Incentive Discount Avail.		\$45	\$85	\$150	From \$100*	\$220*	From \$135	From \$242	From \$269
Monthly Cost Range, Couple	From \$198	From \$227	From \$249			per unit*	per unit*	per unit*	From \$200	\$440	From \$269	From \$376	From \$403
Monthly Cost Range, Family	From \$345	From \$374	From \$399			From \$236,500, up to 3 needs/yr	From \$250,000, up to 3 needs/yr	From \$370	From \$504	From \$538			
Annual Out of Pocket Limit, All Incidents	AUA: \$500 Individual \$1,000 Couple, \$1,500 Family			Known as AHP Select from \$500 to \$10,000		\$5,000/ incident	\$1,000/ incident	\$500 per unit/yr	\$236,500, up to 3 needs/yr	\$250,000, up to 3 needs/yr	1st: \$1,500	\$1,000	\$500
Shared Cost per Incident / Need	70%	100% after AUA		100% after AHP		100% after PR			If over \$1,500	If over \$300	75% after 1st 100% after 2nd MRA		
Max Shared per Incident / Need	\$125,000	\$1 million		No limit		\$125,000			\$236,500	\$250,000	\$1 million lifetime		\$50,000/yr
Extended Sharing	N/A			N/A		Available *			No Limit, w/ Save to Share		\$1 million lifetime		
Extended Sharing Premium	N/A			N/A		\$40/year + \$25 per unit			\$15/year + \$133/person		N/A		
MEDICAL SERVICES													
Annual Physical	Yes, up to \$400 / member / year			No		No			No		Yes, up to \$400 / member / year		
Well Child Visits	Yes, up to \$400 / member / year			Yes, up to age 6		No			No		Yes, up to \$400 / member / year		
Preventive Immunizations	Yes			No		No			No		Part of Wellness, Pediatric only		
Screening mammogram, colon.	Yes			No		No			No		Part of Wellness, with limitations		
Office or Hospital Visit	Member's Responsibility until AUA*			After AHP, \$35/visit copay*		No	No	After PR	Need-based *		\$35 after MRA, max \$300/visit, 6/yr		
Direct Primary Care Membership	Yes			No		No			Limited*		No		
Emergency Care	Member's Responsibility until AUA*			After AHP, \$135/visit copay*		No	No	After PR	Need-based *		Subject to MRA		
Ambulance, Land or Air	Emergencies To/Between Hospitals			Between Hospitals Only		Between Hospitals Only			Between Hospitals Only		Emergencies: \$3k Land, \$10k Air		
Prescriptions, non-pre-existing	For 45 days after incident			For 6 months after incident		No	No	After PR	For 120 days after incident		No		
Mental Health	None			6 mos max (new diagnosis)		No			No		No		
Maternity	Sharable, after AUA			After AHP for AHP \$1,250+		Hospital Only		After PR	\$5,000	\$250,000	\$4,000 max, after 10 mos of couple membership prior to conception		
Chiropractor	Maximum 12 visits a year			Max 20 visits / 6-wk period		No	No	NOT covered	Couple membership only				
Home Health Care	Up to 30 days per incident			Up to 60 days / incident		No	No		Need-based *		After the 1st year		
Physical / Occupational Therapy	Maximum 20 sessions a year for all therapy types			Max 20 sessions / diagnosis		No	No	Max 45 sessions/ incident	No		No		
Speech Therapy	Maximum 20 sessions a year for all therapy types			Max. 10 visits After stroke, surgery, trauma		No	No		Max 40 combined sessions per need		After the 1st year, and only if after surgery		

Logos are trademarks of the respective ministries. Information are for quick overview and comparison only, and not meant to be comprehensive.

Best efforts were given to ensure the most accurate information, but typo errors and details might be missed.

Please consult the full sharing guidelines of the respective programs for complete information.

Plans are ACA-exempt with regards to the insurance penalty, though enforcement is unclear, and subject to change from governmental rules and regulations.



(1) Liberty Healthshare

Most sharing requests have restrictions, and may require pre-approval. Enrollment requires completion of a health questionnaire.

HealthTrac Program: Diabetes, Hypertension, Heart disease, Cholesterol, Obesity, and Tobacco Use

Direct Primary Care Membership often include office visits in the monthly membership fee.

Sharing Guidelines: <https://libertyhealthshare.org/content/sharing-guidelines.pdf>



(2) Medi-Share

Monthly Amount depends on age, family size, and selection of AHP amount

Cost might be higher when not using MultiPlan, such as a co-liability of 20% at non-PPO hospitals.

The \$35 and \$135 co-payments are required even after the member has met the AHP amount.

Sharing Guidelines: <https://mychristiancare.org/medi-share/what-is-medishare/how-medi-share-works/medi-share-guidelines/>



(3) Christian Healthcare Ministries

A unit can be an adult, or all dependent children of an adult.

One unit: 1 adult

Two units: 2 adults, or 1 adult + children

Three units: 2 adults + children

Extended Coverage with Brothers' Keeper Program:

Participation is required for Extended Coverage.

For Bronze and Silver, amount is increased by \$100,000 per year of renewal up to \$1 million maximum.

For Gold, it is unlimited.

Annual fee is \$40 per year, plus \$25 per quarter per unit

Sharing Guidelines: http://www.chministries.org/downloads/CHMGuidelines2018_V1.pdf



(4) Samaritan Ministries

Pre-existing Condition Exclusion: Diabetes, Hypertension, Cholesterol

Sharing for pre-existing conditions possible after 1 year without symptoms or treatment, or 5 years for genetic defects, hereditary diseases, cases of related cancers, and heart conditions

The monthly Share amount for an individual membership 29 years old or younger is \$160.

All other household sizes are the same regardless of age in Samaritan Classic: \$440 for couple, \$305 for single-parent (divorced/widowed) household, \$495 for a family of three or more

Samaritan shares DPC expenses only up to \$100 for that month in which a physician is consulted, makes a referral, or charges for services related to a shareable need

Samaritan shares expenses for Medical Equipment up to \$4,950.

Sharing Guidelines: <https://samaritanministries.org/help/guidelines>



(5) Altrua Healthshare

Only plans for the Gold package displayed

Rates slightly slower for the other packages

Sharing Guidelines: <https://altruahealthshare.org/resources/guidelines/>