

 Compiled by	 Share Plus Complete			 Medi-Share		 Bronze Silver Gold				
	ADMINISTRATIVE									
Website	https://libertyhealthshare.org			https://mychristiancare.org/		http://www.chministries.org/			http://samaritanministries.org/	
Acceptance of Shared Beliefs	Required			Required		Required			Required	
Religious Faith	Any			Christianity		Christianity			Christianity	
Limits on pre-existing conditions	Yes			Yes		Yes			Yes	
Exception to pre-existing conditions	HealthTrac Program *			No		No			Yes*	
Sharing starts immediately	Yes			Yes		Yes			Yes	
Provider Network	None			MultiPlan PPO Network, Optional*		None			None	
Medical bills processed electronically	Yes			Yes		No			No	
Annual Out of Pocket Limit -Terminology	Annual Unshared Amount (AUA)			Annual Household Portion (AHP)		Personal Responsibility (PR)			-	
Other Programs by Same	Solidarity Healthshare			-		-			CMF Curo	
THE NUMBERS										
Membership Dues	\$135, Annual			\$120, one-time		None			None	
Application Fee	None			\$50		None			\$200	
Monthly Cost Range, Individual	From \$107	From \$131	From \$149	From \$61-\$1,387 * Healthy Incentive Discount Avail.		\$45 per unit *	\$85 per unit	\$150 per unit	\$220*	
Monthly Cost Range, Couple	From \$198	From \$227	From \$249						\$440	
Monthly Cost Range, Family	From \$345	From \$374	From \$399						\$495	
Annual Out of Pocket Limit, All Incidents	Known As AUA : \$500 Individual \$1,000 Couple, \$1,500 Family			Known as AHP Select from \$500 to \$10,000		\$5,000 per incident	\$1,000 per incident	\$500 per unit per year	\$250,000 per need, up to 3 Needs approval for 4th need	
Shared Cost per Medical Incident / Need	70% after AUA	100% after AUA		100% after AHP		100% after Personal Responsibility			After the first \$300	
Max Shared Amount per Incident / Need	\$125,000	\$1 million		No limit		\$125,000	\$125,000	\$125,000	\$250,000	
Extended Sharing per Incident / Need	N/A			N/A		Available *	Available *	Avail, No limit	No Limit, with <i>Save to Share</i>	
Extended Sharing Premium						\$40/year + \$25 per unit			\$15/year + \$133/person	
MEDICAL SERVICES										
Annual Physical	Yes			No		No			No	
Well Child Visits	Yes			Yes, up to age 6		No			No	
Preventive Immunizations	Yes			No		No			No	
Screening mammogram/colonoscopy	Yes			No		No			No	
Office or Hospital Visit	Member's Responsibility until AUA *			After AHP , \$35/visit copay*		No	No	After PR	Need-based *	
Direct Primary Care Membership Sharing	Yes			No		No			Yes	
Emergency Care (for emergencies only)	Member's Responsibility until AUA *			After AHP , \$135/visit copay*		No	No	After PR	Need-based *	
Ambulance, Land or Air	To Hospitals, or Between Hospitals			Between Hospitals Only		Between Hospitals Only			Between Hospitals Only	
Prescriptions, non-pre-existing conditions	For 45 days after incident			For 6 months after incident		No	No	After PR	For 120 days after incident	
Mental Health	Not Sharable			6 months' max, non pre-existing		Not Sharable			Not Sharable	
Maternity	Sharable, after AUA			After AHP , only when AHP \$1,250+		Hospital Only	Hospital Only	Yes, after PR	Need-based *	
Chiropractor	Maximum 12 visits a year			Max. 20 visits per 6-week period		No	No	Not covered	Need-based *	
Home Health Care	Up to 30 days per incident			Up to 60 days per incident		No	No	Max. 45 sessions per incident (combined)	No	
Physical / Occupational Therapy	Maximum 20 sessions a year for all therapy types			Max. 20 sessions per diagnosis		No	No		Max. 40 sessions per need (combined)	
Speech Therapy				Max. 10 visits After Stroke, Surgery, or Trauma		No	No			

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 as of time of writing.

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

(1) Liberty Healthshare

HealthTrac Program: Diabetes, Hypertension, Heart disease, Cholesterol, Obesity, and Tobacco Use
Direct Primary Care Membership often include office visits in the monthly membership fee.

(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.

(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

(4) Samaritan Ministries

Pre-existing Condition Exclusion: Diabetes, Hypertension, Cholesterol

Rates are less if both adults are less than 25 years of age: \$180 Individual, \$360 Couple, \$445 Family.

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