	Samaritan Ministries		Liberty Health Share										
	Classic	Basic		Complete			Plus			Share			
	Age 30 or Over: Age 29 or Under:	Age of oldest	member	Harden 20	30 - 65	0	11420	20 65	0	Harda 20	20 -65	055	
	1 Person: \$220 1 Person: \$160	29 or Under 30-44	45-59 60+	Under 30	30 - 65	Over 65	Under 30	30 - 65	Over 65	Under 30	30 - 65	Over 65	
MONTHLY SHARE	2 Person: \$440 2 Person: \$440	1 Person: \$100 1 Person: \$120			Single: \$199				Single: \$206		Single: \$157		
	3+ Person: \$495 3+ Person: \$495 Widowed/Divorced & Widowed/Divorced		2 Person: \$280 2 Person: \$320		Couple: \$299		Family: \$374		Couple: \$327		Couple: \$248 Family: \$395		
MEMBER FINANCIAL	Children: \$305 Children: \$305 \$300 Per medical condition (less provider			raililly. 3399	raililly. 3449						raillily. 3333	raillily. 3443	
RESPONSIBILITY	discounts) \$1,500 Per medical condition (less provider discounts)			\$500 Per Person Per Incident Annually (\$1,500 Max)									
SHARING PERCENTAGE EXTRA FEES FOR CERTAIN	100% after initial unshareable amount is met 90% after initial unshareable amount is met			100% up to the limit									
CONDITIONS	None			\$80 per month for HealthTrac participation if member has a chronic condition particularly responsive to lifestyle changes  Membership Fee at signum: \$135									
ADDITIONAL FEES	One-time Administrative Fee when joining: \$200			Membership Fee at signup: \$135 Annual Membership Fee after first year: \$75 Monthly Administrative Fee: \$24									
MONTHLY SHARE REDUCED WHEN FEWER NEEDS	Yes			No									
DISCOUNTS FOR BEING	None			None									
HEALTHY IMPACT OF PROVIDER	All discounts are applied directly to pay the  All discounts are applied directly to pay the member's \$1,500 per												
DISCOUNTS	member's \$300 per medical condition portion medical condition portion		Does not reduce member responsibility										
	Optional annual savings for as-needed sharing.	Save to Share Increases sharing limit for those enrolled t	o half of the total funds available										
	1 Person Family: \$133 Annually												
EXTRA SHARING PROGRAMS		nd Single Parent Family: \$266 Annually Person Family: \$399 Annually	None										
		Special Prayer Needs											
	Optional giving to Needs which are not shared according to the guidelines.												
REFERRAL PROGRAM	\$100 Credit			\$100 Visa Giftcard									
EXAM REQUIRED FOR	None			Requires a Comprehensive Medical History Questionnaire to determine eligibility									
MEMBERSHIP HOW SOON SHARING STARTS	Membership start date is date application is received at Samaritan for postal mail applications and submission date for online applications. Future start date may be requested. Sharing begins in full immediately on Membership date.			Immediately for accidents, acute illness or injury. 60 day wait for everything else									
SHARING TIMELINE	applications. Tuture start date may be	30 - 60 Days	ery on Membership date.					30 - 45 day					
	\$250,000 per medical condition unless enrolled	in								CDIII			
SHARING LIMITS	Save to Share	\$236,500 per medical condition ur	niess enrolled in Save to Share	Up to ;	\$1,000,000 per i	ncident	Up to	\$125,000 per ir None	ncident	70% OT BIIIS	up to \$125,000	per incident	
PROVIDER NETWORK													
PRE-NOTIFICATION REQUIRED	No			Yes									
MEMBER ADVOCACY AVAILABILITY	Karis Group Negitiates Large Bills As Needed All States and Several Foreign Countries			SavNet Health Savings Discounts  All States									
ELIGIBILITY	See Membership Requirements at: https://www.samaritanministries.org/help/guidelines			https://www.libertyhealthshare.org/do-i-qualify									
GUIDELINES OF SHARING	https://www.samaritanministries.org/help/guidelines			https://www.libertyhealthshare.org/content/sharing-guidelines.pdf									
CHIROPRACTIC CARE	May be shared up to 40 visits per medical need. Maintenance treatments are not shared			Up to 12 visits per membership year for treatment of disease or injury. Additional visits may be shared upon pre-notification and approval.  Discounts also available through SavNet									
SCREENING / WELLNESS	May be chared only when procesibed become	e of symptoms for a condition that	ot avident prior to becoming a				ubject to the Ann						
VISITS	May be shared only when prescribed because of symptoms for a condition that were not evident prior to becoming a member. Follow-up tests or checkups more than one year after condition is stabilized, in remission, or cured are not shared			Colonoscopies, PSA Tests, and Mammograms for 50 yr+. Eligible for sharing once every 2 years and not subject to the Annual Unshared Amount: Colonoscopies, PSA Tests, and Mammograms for 49 yrs & under. Well baby visits and immunizations are eligible for sharing within									
DIRECT PRIMARY CARE	The monthly fee for a member is may be shared within the limit for tests and checkups as part of a May be Shared need up to			1st year after birth and not subject to Annual Unshared Amount.  A portion of monthly membership fees may be shared									
HOMEOPATHIC CARE	\$100 for any month in which the physician is consulted, makes a referal or charges for services  May be shared as long as treatments and prescriptions are within the allowed practice of a licensed provider			Shared if treating a medically diagnosed condition, is less invasive and less costly than conventional medical treatment, is expected to									
NATUROPATHIC CARE	Treatments lawfully provided by a licensed Doctor of Naturopathy that meet all other requirements may be shared			prevent more costly future conventional treatment, and is presented for prior approval  Shared if treating a medically diagnosed condition, is less invasive and less costly than conventional medical treatment, is expected to									
	May be shared for injury or illness related phys				pre	vent more costl	y future convent	ional treatment	t, and is present	ed for prior appr	oval		
THERAPY		therapy.				Up to 10 visits	per membershi	p year subject t	o pre-notificatio	n and approval			
MATERNITY	May be shared when membership began 270 da	ys May be shared when membership beg	an 270 days before the due date.										
	before the due date. Effective March 31, 2018 Effective March 31, 2018 maternity will be shared only in a multi-person												
	maternity will be shared only in a multi-person membership. Shared needs include prenatal care, delivery, postnatal care, and congenital conditions. Shared services include those of doulas			Eligible for sharing for a mother who has been a Sharing Member prior to conception. Includes Physician Care, Hospital or Birthing Center									
	delivery, postnatal care, and congenital conditions. (up to \$500), midwives, doctors, nurse practitioners and other licensed			Admissions, Attendance by Midwives, Home Delivery accompanied by Midwife or Physician and Cesarean or ther services when needed due to complications.									
	Shared services include those of doulas (up to medical professionals. Subject to the maximum maternity shareable amount under Samaritan Basic of \$5,000 unless qualifying bills exceed												
	other licensed medical professionals.	\$20,00											

HOSPICE	May be shared for 90 days upon prescription by physician or certification that the person is terminally ill. Additional 90 day periods may be shared with a renewed prescription or certification.	5 days of any 30 day period is shared						
AMBULANCE / LIFE FLIGHT	May be shared when medically or otherwise necessary	Eligible for sharing when required for transportation to nearest medical facility capable of providing the necessary care						
PRESCRIPTION DRUGS	Medications prescribed for a shared need are shared up to 120 day supply. Cancer and Auto-Immune drugs are not subject to this limitation. Prescription Discount Card also included free with membership.	Discounts available for Tier 1 drugs \$10; Tier 2 drugs \$20; and Tier 3 drugs \$50. Tier 4 drugs are shared for 45 days before and after each incident at 50% of cost up to \$75. Maintenance and preventative drugs are not shared but discounts may be available. Exceptions for Canadrugs.						
PRE-EXISTING CONDITIONS	May be Shared if the condition appears to be cured and 12 months have passed without symptoms, treatment or medication.  Exceptions are for genetic defects, hereditary diseases, cases of related cancers, and heart conditions. These require a symptom/treatment free period of 5 years. Pre-diabetes, high blood pressure, high cholesterol, basal cell carcinoma and pacemaker maintenance and repair (under certain circumstances) are not considered pre-existing conditions. Any un-shared amounts may be eligible for Special Prayer Needs sharing.	Year 3 Shared up to 325,000; Year 3 Shared up to an additional \$25,000; Year 4: No longer considered pre-existing.						
CATASTROPHIC	Save to Share Program increases sharing limit for those enrolled to half of the total funds available (currently approximately \$20 million).	None						
WHO SUBMITS BILLS FOR SHARING	Member	Provider						
WHERE DO MEMBERS SEND THEIR SHARE	Directly to Members 11 months of year. Send to Samaritan Ministries 1 month of year for administrative costs.	Directly to Members through an online 'share box' account.						
FAQ	https://samaritanministries.org/help/faq	https://www.libertyhealthshare.org/faq						
PHONE NUMBERS	1-877-764-2426	1-855-58-LIBERTY						
WEBSITE	https://www.samaritanministries.org/	www.libertyhealthshare.org						