

Affordable Comprehensive Healthcare Choices for the Family

Trinity HealthShare's Alieracare Bronze | Silver | Gold (BSG) program offer a wide range of comprehensive healthcare sharing solutions that are affordable alternatives to traditional medical plans. Alieracare BSG puts the power of quality healthcare choices back into the hands of individuals and their families.

Trinity HealthShare's Alieracare Bronze | Silver | Gold Program Enhanced Services:

- Unlimited in-network primary care, urgent care and specialty care visits
- Cost sharing is available for new diagnoses of cancer
- Specific sharing eligible for some pre-existing conditions
- Lower MSRA options
- Prenatal and maternity cost sharing
- Out-of-network cost sharing options
- Save up to 90% on your home-delivery prescriptions immediately with Rx Valet



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BRONZE PROGRAM DETAILS

| PROGRAM SERVICES PER MEMBER | MultiPlan PHCS (in-network) | Non-network |
|--|--|--|
| Member Shared Responsibility Amount (MSRA) | \$1,000 \$2,500 \$5,000 \$10,000 | |
| MSRA (per family of 3+ members) | \$3,000 \$7,500 \$15,000 \$30,000 | |
| Out-of-pocket Maximum (per member within sharing limits) | \$3,000 \$7,500 \$15,000 \$30,000 | \$6,000 \$15,000 \$30,000 \$60,000 |
| Out-of-pocket Maximum (per family within sharing limits) | \$9,000 \$22,500 \$45,000 \$90,000 | \$18,000 \$45,000 \$90,000 \$180,000 |
| Lifetime Maximum Limit | \$1,000,000 | |
| Co-expense | Program Shares: 60% You Share: 40% | Program Shares: 50% You Share: 50% |
| Section 1 | Services Eligible Prior to Meeting MSRA | |
| The services in Section 1 are available to Alieracare members upon enrollment. They do not require you to meet MSRA prior to using them. | | |
| Telemedicine | Free | Not Eligible |
| Wellness & Preventive Care | Unlimited | Program Shares: 50% You Share: 50% |
| Primary Care | \$50 Consult Fee | Program Shares: 50% You Share: 50% |
| Pediatrics | \$50 Consult Fee | Program Shares: 50% You Share: 50% |
| OB/GYN | \$50 Consult Fee | Program Shares: 50% You Share: 50% |
| Specialty Care | \$125 Consult Fee | Program Shares: 50% You Share: 50% |
| Urgent Care | \$100 Consult Fee | Program Shares: 50% You Share: 50% |
| Emergency Room^{1,2} | \$500 Consult Fee | \$500 Consult Fee |
| Section 2 | Services Eligible After Meeting MSRA^{2, 3} | |
| The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing. | | |
| Maternity⁴ | Prenatal: Included Delivery: Included | Program Shares: 50% You Share: 50% |
| Generic & Non-preferred Prescription | Discount No Cost Sharing | Not Eligible |
| Preferred Prescription⁵ | Discount 50% Cost Sharing | Not Eligible |
| Mail Order Prescription⁵ | Discount 75% Cost Sharing | Not Eligible |
| Inpatient Services⁶ | | |
| Hospitalization | Program Shares: 60% You Share: 40% | Program Shares: 50% You Share: 50% |
| Surgical⁷ | Program Shares: 60% You Share: 40% | Program Shares: 50% You Share: 50% |
| Outpatient Services⁶ | | |
| Hospitalization | Program Shares: 60% You Share: 40% | Program Shares: 50% You Share: 50% |
| Surgical⁷ | Program Shares: 60% You Share: 40% | Program Shares: 50% You Share: 50% |

| Rates | \$1,000 MSRA | | | \$2,500 MSRA | | | \$5,000 MSRA | | | \$10,000 MSRA | | |
|-------|--------------|------------|------------|--------------|------------|------------|--------------|------------|------------|---------------|------------|------------|
| | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 | Family |
| 18-29 | \$393.01 | \$589.52 | \$786.02 | \$352.35 | \$528.54 | \$704.71 | \$325.25 | \$487.88 | \$650.51 | \$260.20 | \$390.31 | \$520.40 |
| 30-39 | \$491.26 | \$736.89 | \$982.52 | \$440.45 | \$660.66 | \$880.89 | \$406.57 | \$609.85 | \$813.12 | \$325.25 | \$487.88 | \$650.51 |
| 40-49 | \$540.39 | \$810.58 | \$1,105.34 | \$484.49 | \$726.74 | \$991.00 | \$447.22 | \$670.83 | \$914.77 | \$357.77 | \$536.66 | \$731.81 |
| 50-59 | \$702.40 | \$1,209.68 | \$1,430.80 | \$621.63 | \$1,070.58 | \$1,266.28 | \$573.81 | \$988.23 | \$1,168.87 | \$459.05 | \$790.58 | \$935.09 |
| 60-64 | \$937.86 | \$1,634.57 | \$1,741.75 | \$840.85 | \$1,465.48 | \$1,561.57 | \$776.17 | \$1,352.75 | \$1,441.45 | \$620.94 | \$1,082.20 | \$1,153.16 |

- Emergency room cost sharing is subject to review and is only meant for life-threatening situations. If at the time during the emergency room visit the member is admitted to the hospital, the \$500 consult fee will be applied to the MSRA.
- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. Pre-existing or recurring occurrences of cancer are not eligible for sharing. If previously diagnosed with cancer, members must be cancer-free for five (5) years before being eligible for sharing on new cancer occurrences. All other healthcare services for pre-existing conditions and new occurrences of cancer are eligible upon effective date.
- Pre-existing conditions: chronic or recurrent conditions that have shown symptoms and/or received treatment within the past 24 months are not eligible for sharing during the first 24 months of membership. On the 25th month of continuous membership, the condition will no longer be subject to the pre-existing condition sharing limitations.
- Maternity services are included at program co-expense (program pays 60% after MSRA in-network and 50% after MSRA non-network); unlimited for physician vaginal delivery; \$8,000 max for physician caesarean; \$50,000 max for complications of mother and child.
- Prescriptions are eligible for cost sharing through Rx Valet by the percentage shown once a separate prescription MSRA of \$1,500 has been met. Members are required to pay prescription cost out of pocket before submitting receipts. There is a maximum reimbursement of \$4,000 per program year.
- Imaging (CT scans, PET scans, MRIs); labs; x-rays and diagnostic imaging will be eligible at co-expense (program pays 60% after MSRA in-network and 50% after MSRA non-network).
- Non-emergency surgical services are unavailable for the first two months for Bronze plans. Surgical services do not include cosmetic surgery.
- Members under the age of 26 can qualify as a dependent.

Administrative and conditional fees: \$125 one-time enrollment fee. Add \$60 per member who smokes, vapes or uses nicotine of any kind.

Trinity HealthShare programs follow medical eligibility review protocols described in the program but are not a promise to pay.

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SILVER PROGRAM DETAILS

| PROGRAM SERVICES PER MEMBER | MultiPlan PHCS (in-network) | Non-network |
|--|--|--|
| Member Shared Responsibility Amount (MSRA) | \$1,000 \$2,500 \$5,000 \$10,000 | |
| MSRA (per family of 3+ members) | \$3,000 \$7,500 \$15,000 \$30,000 | |
| Out-of-pocket Maximum (per member within sharing limits) | \$3,000 \$7,500 \$15,000 \$30,000 | \$6,000 \$15,000 \$30,000 \$60,000 |
| Out-of-pocket Maximum (per family within sharing limits) | \$9,000 \$22,500 \$45,000 \$90,000 | \$18,000 \$45,000 \$90,000 \$180,000 |
| Lifetime Maximum Limit | \$1,000,000 | \$1,000,000 |
| Co-expense | Program Shares: 70% You Share: 30% | Program Shares: 60% You Share: 40% |
| Section 1 | Services Eligible Prior to Meeting MSRA | |
| The services in Section 1 are available to Alieracare members upon enrollment. They do not require you to meet MSRA prior to using them. | | |
| Telemedicine | Free | Not Eligible |
| Wellness & Preventive Care | Unlimited | Program Shares: 60% You Share: 40% |
| Primary Care | \$35 Consult Fee | Program Shares: 60% You Share: 40% |
| Pediatrics | \$35 Consult Fee | Program Shares: 60% You Share: 40% |
| OB/GYN | \$35 Consult Fee | Program Shares: 60% You Share: 40% |
| Specialty Care | \$75 Consult Fee | Program Shares: 60% You Share: 40% |
| Urgent Care | \$75 Consult Fee | Program Shares: 60% You Share: 40% |
| Emergency Room^{1,2} | \$300 Consult Fee | \$500 Consult Fee |
| Section 2 | Services Eligible After Meeting MSRA^{2, 3} | |
| The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing. | | |
| Maternity⁴ | Prenatal: Included Delivery: Included | Program Shares: 60% You Share: 40% |
| Generic & Non-preferred Prescription | Discount No Cost Sharing | Not Eligible |
| Preferred Prescription⁵ | Discount 50% Cost Sharing | Not Eligible |
| Mail Order Prescription⁵ | Discount 75% Cost Sharing | Not Eligible |
| Inpatient Services⁶ | | |
| Hospitalization | Program Shares: 70% You Share: 30% | Program Shares: 60% You Share: 40% |
| Surgical⁷ | Program Shares: 70% You Share: 30% | Program Shares: 60% You Share: 40% |
| Outpatient Services⁶ | | |
| Hospitalization | Program Shares: 70% You Share: 30% | Program Shares: 60% You Share: 40% |
| Surgical⁷ | Program Shares: 70% You Share: 30% | Program Shares: 60% You Share: 40% |

| Rates | \$1,000 MSRA | | | \$2,500 MSRA | | | \$5,000 MSRA | | | \$10,000 MSRA | | |
|-------|------------------|------------|------------|--------------|------------|------------|--------------|------------|------------|---------------|------------|------------|
| | Age ⁸ | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 |
| 18-29 | \$471.61 | \$707.42 | \$943.23 | \$422.83 | \$634.24 | \$845.65 | \$390.31 | \$585.45 | \$780.60 | \$312.24 | \$468.36 | \$624.48 |
| 30-39 | \$589.52 | \$884.28 | \$1,179.03 | \$528.54 | \$792.80 | \$1,057.06 | \$487.88 | \$731.81 | \$975.75 | \$390.31 | \$585.45 | \$780.60 |
| 40-49 | \$648.46 | \$972.71 | \$1,326.41 | \$581.38 | \$872.08 | \$1,189.20 | \$536.66 | \$805.00 | \$1,097.72 | \$429.34 | \$644.00 | \$878.17 |
| 50-59 | \$842.88 | \$1,451.62 | \$1,716.97 | \$745.95 | \$1,284.69 | \$1,519.53 | \$688.57 | \$1,185.87 | \$1,402.65 | \$550.86 | \$948.69 | \$1,122.11 |
| 60-64 | \$1,125.44 | \$1,961.48 | \$2,090.11 | \$1,009.02 | \$1,758.57 | \$1,873.89 | \$931.40 | \$1,623.29 | \$1,729.74 | \$745.12 | \$1,298.63 | \$1,383.80 |

- Emergency room cost sharing is subject to review and is only meant for life-threatening situations. If at the time during the emergency room visit the member is admitted to the hospital, the \$300 consult fee will be applied to the MSRA.
- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. Pre-existing or recurring occurrences of cancer are not eligible for sharing. If previously diagnosed with cancer, members must be cancer-free for five (5) years before being eligible for sharing on new cancer occurrences. All other healthcare services for pre-existing conditions and new occurrences of cancer are eligible upon effective date.
- Pre-existing conditions: during the first 24 months of continuous membership, sharing is available up to \$10,000 of total medical expenses incurred for pre-existing conditions per program year, only after a separate MSRA equal to two times your program MSRA has been met. On the 25th month of continuous membership, the condition will no longer be subject to the preexisting condition sharing limitations.
- Maternity services are included at program co-expense (program pays 70% after MSRA in-network and 60% after MSRA non-network); unlimited for physician vaginal delivery; \$8,000 max for physician caesarean; \$50,000 max for complications of mother and child
- Prescriptions are eligible for cost sharing through Rx Valet by the percentage shown once a separate prescription MSRA of \$1,500 has been met. Members are required to pay prescription cost out of pocket before submitting receipts. There is a maximum reimbursement of \$4,000 per program year.
- Imaging (CT scans, PET scans, MRIs); labs; x-rays and diagnostic imaging will be eligible at co-expense (program pays 70% after MSRA in-network and 60% after MSRA non-network).
- Non-emergency surgical services are unavailable for the first two months for Silver plans. Surgical services do not include cosmetic surgery.
- Members under the age of 26 can qualify as a dependent.

Administrative and conditional fees: \$125 one-time enrollment fee. Add \$60 per member who smokes, vapes or uses nicotine of any kind.

Trinity HealthShare programs follow medical eligibility review protocols described in the program but are not a promise to pay.

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GOLD PROGRAM DETAILS

| PROGRAM SERVICES PER MEMBER | MultiPlan PHCS (in-network) | Non-network |
|--|---|--|
| Member Shared Responsibility Amount (MSRA) | \$1,000 \$2,500 \$5,000 \$10,000 | |
| MSRA (per family of 3+ members) | \$3,000 \$7,500 \$15,000 \$30,000 | |
| Out-of-pocket Maximum (per member within sharing limits) | \$3,000 \$7,500 \$15,000 \$30,000 | \$6,000 \$15,000 \$30,000 \$60,000 |
| Out-of-pocket Maximum (per family within sharing limits) | \$9,000 \$22,500 \$45,000 \$90,000 | \$18,000 \$45,000 \$90,000 \$180,000 |
| Lifetime Maximum Limit | \$1,000,000 | |
| Co-expense | Program Shares: 80% You Share: 20% | Program Shares: 70% You Share: 30% |
| Section 1 | Services Eligible Prior to Meeting MSRA | |
| The services in Section 1 are available to Alieracare members upon enrollment. They do not require you to meet MSRA prior to using them. | | |
| Telemedicine | Free | Not Eligible |
| Wellness & Preventive Care | Unlimited | Program Shares: 70% You Share: 30% |
| Primary Care | \$20 Consult Fee | Program Shares: 70% You Share: 30% |
| Pediatrics | \$20 Consult Fee | Program Shares: 70% You Share: 30% |
| OB/GYN | \$20 Consult Fee | Program Shares: 70% You Share: 30% |
| Specialty Care | \$75 Consult Fee | Program Shares: 70% You Share: 30% |
| Urgent Care | \$75 Consult Fee | Program Shares: 70% You Share: 30% |
| Emergency Room ^{1,2} | \$150 Consult Fee | \$300 Consult Fee |
| Section 2 | Services Eligible After Meeting MSRA^{2,3} | |
| The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing. | | |
| Maternity ⁴ | Prenatal: Included Delivery: Included | Program Shares: 70% You Share: 30% |
| Generic & Non-preferred Prescription | Discount No Cost Sharing | Not Eligible |
| Preferred Prescription ⁵ | Discount 50% Cost Sharing | Not Eligible |
| Mail Order Prescription ⁵ | Discount 75% Cost Sharing | Not Eligible |
| Inpatient Services⁶ | | |
| Hospitalization | Program Shares: 80% You Share: 20% | Program Shares: 70% You Share: 30% |
| Surgical ⁷ | Program Shares: 80% You Share: 20% | Program Shares: 70% You Share: 30% |
| Outpatient Services⁶ | | |
| Hospitalization | Program Shares: 80% You Share: 20% | Program Shares: 70% You Share: 30% |
| Surgical ⁷ | Program Shares: 80% You Share: 20% | Program Shares: 70% You Share: 30% |

| Rates | \$1,000 MSRA | | | \$2,500 MSRA | | | \$5,000 MSRA | | | \$10,000 MSRA | | |
|-------|--------------|------------|------------|--------------|------------|------------|--------------|------------|------------|---------------|------------|------------|
| | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 | Family | Member | Member +1 | Family |
| 18-29 | \$524.02 | \$786.02 | \$1,048.03 | \$469.80 | \$704.71 | \$939.61 | \$433.66 | \$650.51 | \$867.34 | \$346.94 | \$520.40 | \$693.86 |
| 30-39 | \$655.02 | \$982.52 | \$1,310.03 | \$587.26 | \$880.89 | \$1,174.52 | \$542.08 | \$813.12 | \$1,084.17 | \$433.66 | \$650.51 | \$867.34 |
| 40-49 | \$720.52 | \$1,080.78 | \$1,473.79 | \$645.98 | \$968.97 | \$1,321.33 | \$596.29 | \$894.44 | \$1,219.69 | \$477.03 | \$715.55 | \$975.75 |
| 50-59 | \$936.52 | \$1,612.91 | \$1,907.74 | \$828.83 | \$1,427.43 | \$1,688.37 | \$765.08 | \$1,317.63 | \$1,558.49 | \$612.06 | \$1,054.11 | \$1,246.80 |
| 60-64 | \$1,250.49 | \$2,179.43 | \$2,322.34 | \$1,121.13 | \$1,953.97 | \$2,082.09 | \$1,034.89 | \$1,803.66 | \$1,921.94 | \$827.91 | \$1,442.93 | \$1,537.55 |

- Emergency room cost sharing is subject to review and is only meant for life-threatening situations. If at the time during the emergency room visit the member is admitted to the hospital, the \$150 consult fee will be applied to the MSRA.
- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. Pre-existing or recurring occurrences of cancer are not eligible for sharing. If previously diagnosed with cancer, members must be cancer-free for five (5) years before being eligible for sharing on new cancer occurrences. All other healthcare services for pre-existing conditions and new occurrences of cancer are eligible upon effective date.
- Pre-existing conditions: during the first 24 months of continuous membership, sharing is available up to \$20,000 of total medical expenses incurred for pre-existing conditions per program year, only after a separate MSRA equal to two times your program MSRA has been met. On the 25th month of continuous membership, the condition will no longer be subject to the preexisting condition sharing limitations.
- Maternity services are included at program co-expense (program pays 80% after MSRA in-network and 70% after MSRA non-network); unlimited for physician vaginal delivery; \$8,000 max for physician caesarean; \$50,000 max for complications of mother and child.
- Prescriptions are eligible for cost sharing through Rx Valet by the percentage shown once a separate prescription MSRA of \$1,500 has been met. Members are required to pay prescription cost out of pocket before submitting receipts. There is a maximum reimbursement of \$4,000 per program year.
- Imaging (CT scans, PET scans, MRIs); labs; x-rays and diagnostic imaging will be eligible at co-expense (program pays 80% after MSRA in-network and 70% after MSRA non-network).
- Non-emergency surgical services are unavailable for the first two months for Gold plans. Surgical services do not include cosmetic surgery.
- Members under the age of 26 can qualify as a dependent.

Administrative and conditional fees: \$125 one-time enrollment fee. Add \$60 per member who smokes, vapes or uses nicotine of any kind.

Trinity HealthShare programs follow medical eligibility review protocols described in the program but are not a promise to pay.

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STATEMENT OF BELIEFS

Because Trinity HealthShare, Inc. is a religious organization, members are required to agree with the organization's Statement of Beliefs:

1. We believe that our personal rights and liberties originate from God and are bestowed on us by God.
2. We believe every individual has a fundamental religious right to worship God in his or her own way.
3. We believe it is our moral and ethical obligation to assist our fellow man when they are in need, according to our available resources and opportunity.
4. We believe it is our spiritual duty to God and our ethical duty to others to maintain a healthy lifestyle and avoid foods, behaviors, or habits that produce sickness or disease to ourselves or others.
5. We believe it is our fundamental right of conscience to direct our own healthcare, in consultation with physicians, family, or other valued advisor.

LEGAL NOTICES

The following legal notices are required by state regulation, and are intended to notify individuals that health care sharing ministry plans are not insurance, and that the ministry does not provide any guarantee or promise to pay your medical expenses.

GENERAL LEGAL 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.

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 your own medical bills.

Florida Statute 624.1265

Trinity HealthShare, Inc. is not an insurance company, and membership is not offered through an insurance company. Trinity HealthShare, Inc. is not subject to the regulatory requirements or consumer protections of the Florida Insurance Code.

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.

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STATE SPECIFIC NOTICES (CONTINUED)

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.

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.

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 **TRINITY**
HealthShare
TrinityHealthShare.com

THIS IS NOT AN INSURANCE PRODUCT

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

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 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 58-49-12

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Pennsylvania 40 Penn. Statute Section 23(b)

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South Dakota Statute Title 58-1-3.3

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Texas Code Title 8, K, 1681.001

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Virginia Code 38.2-6300-6301

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

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