



INDIVIDUAL
& FAMILY



A New Era of Affordable Quality Healthcare Choices During Times of Transition

Trinity HealthShare programs offer affordable quality healthcare choices for individuals and families through our healthcare sharing community.

Trinity HealthShare's InterimCare program is built on an innovative cost-sharing model designed to streamline access to individual and family-focused healthcare without the costs and complexities of most one-size-fits-all traditional medical plans.

A full spectrum of healthcare choices available year round: InterimCare is specifically designed to provide a full spectrum of comprehensive cost-sharing options for individuals and families during times of transition. The sharing program has three levels with robust services and terms from 30 to 364 days available year round.

Trinity HealthShare is a 501(c)(3) non-profit organization that provides Health Care Sharing Ministry (HCSM) services to guide the cost sharing of member contributions for certain eligible healthcare needs, such as hospitalization, surgery and emergency room visits. Healthcare sharing programs are not insurance products. Members agree to and sign a Statement of Beliefs and share the cost of medical expenses in accordance with those beliefs.

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A Roadmap of Comprehensive Interim Healthcare

Trinity HealthShare Ministry programs give individuals and families a clear path to the healthcare services they need during times of transition.

Built on the MultiPlan PHCS network, a nationwide preferred provider organization (PPO), Trinity HealthShare's InterimCare program provides access to more than 1,000,000 healthcare professionals in over 6,000 facilities across the United States.




* MSRA (member shared responsibility amount) is the amount members must pay out of pocket before medical expenses become eligible for sharing with other members.

Interim Healthcare Sharing Plans for Times of Transition

Trinity HealthShare's Interim healthcare sharing programs are designed for the transition times of life. Whether you're changing jobs, relocating, or starting a new business, InterimCare can give you peace of mind when life's inevitable detours take you and your family in new directions.

MEMBER PROFILE EXAMPLE¹

	Name: Jane Smith Age: 45 Health Status: Excellent (non-smoker) Employment Status: Self-employed new business owner Program: InterimCare Premium Term Length: 30 Days Active: June 2018 MSRA: \$2,500	Out-of-pocket Maximum: \$5,000 Per Incident Maximum Limit: \$500,000 Lifetime Maximum Limit: \$1,000,000 Monthly Contribution: \$299.37
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Jane, who is a runner with no known health problems, woke at 4am with excruciating pain shooting down her left arm. She called 911 and was rushed to the emergency room, where they did an electrocardiogram (EKG) and some blood tests. Her EKG came back slightly abnormal and her bloodwork showed proteins that often point to a damaged heart muscle. They admitted her to the hospital and performed an x-ray (angiogram) to get a better look at blood flow to and from her heart. The results confirmed that Jane was having a heart attack. She was immediately rushed into surgery where doctors put in a stent to restore blood flow in her main artery.

DESCRIPTION	Incident Costs	Program Shares	Member Shares
Ambulance ²	\$5,000.00	\$2,500	\$2,500.00 (MSRA)
Emergency Room (ER) Consult Fee	\$300.00	\$0	\$300.00
EKG	\$2,500.00	\$2,500.00	100% Eligible With ER Consult Fee
Diagnostic Labs	\$10,000.00	\$10,000.00	100% Eligible With ER Consult Fee

After Jane was assessed in the emergency room, she was admitted to the hospital. Since she had already met her \$2,500 MSRA, her program shared 80% of eligible sharing costs and she shared the remaining 20% of eligible sharing costs up to the \$5,000 out-of-pocket maximum.

Inpatient X-rays	\$3,200.00	\$2,560.00	\$640.00
Anesthesia	\$7,800.00	\$6,240.00	\$1,560.00

When Jane met the \$5,000 out-of-pocket maximum, her program shared 100% of the eligible sharing costs up to \$500,000.00 per incident maximum limit.

Anesthesia	\$23,000.00	\$23,000.00	\$0
Inpatient Heart Surgery	\$120,000.00	\$120,000.00	\$0
Inpatient Rehabilitation Therapy	\$14,000.00	\$14,000.00	\$0
Anti-platelet Prescription	\$30.00	\$30.00	\$0
Hospital Stay (4 days)	\$16,126.67	\$16,126.67	\$0
Total	\$201,956.67	\$196,956.67	\$5,000.00

1. For representation only. This is not an actual example.

2. When MSRA has already been met, program shares 100% of ground ambulatory costs per program year and up to \$10,000 in sharing eligibility for air transport, up to the program year maximum limit.

PREMIUM PROGRAM DETAILS

PROGRAM SERVICES PER MEMBER ¹	MultiPlan PHCS (in-network)		
Member Shared Responsibility Amount (MSRA)	\$1,000 \$2,500 \$5,000		
Co-expense ²	Program Shares: 80% You Share: 20%		
Out-of-pocket Maximum (within sharing limits) ²	\$5,000		
Per Incident Maximum Limit ²	\$500,000		
Lifetime Maximum Limit ²	\$1,000,000		
Section 1	Services Eligible Prior to Meeting MSRA		
The services in Section 1 are available to InterimCare members upon enrollment. They do not require you to meet MSRA prior to using them.			
Program Term Length	0 – 30 Days	31 – 180 Days	181 – 364 Days
Telemedicine	Free	Free	Free
Wellness & Preventive Care ³	Not Eligible	Not Eligible	Eligible
Primary Care ⁴	Not Eligible	31 – 59 Days: 1 Visit 60 – 180 Days: 2 Visits \$50 Consult Fee	3 Visits \$50 Consult Fee
Urgent Care ⁵	1 Visit No Consult Fee		
Emergency Room ⁶	1 Visit \$300 Consult Fee		
Section 2	Services Eligible After Meeting MSRA		
The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing.			
Specialty Care	\$75 Consult Fee + Cost of Visit Program Shares: 80% You Share: 20%		
Pediatrics	\$75 Consult Fee + Cost of Visit Program Shares: 80% You Share: 20%		
OB/GYN	\$75 Consult Fee + Cost of Visit Program Shares: 80% You Share: 20%		
Maternity	Not Eligible		
Prescription Discount ⁷	Program Shares: 80% You Share: 20%		
Additional Visits to Emergency Room	Program Shares: 80% You Share: 20%		
Inpatient Services			
Hospitalization	Program Shares: 80% You Share: 20%		
Surgical	Program Shares: 80% You Share: 20%		
Outpatient Services			
Hospitalization	Not Eligible		
Surgical	Program Shares: 80% You Share: 20%		

- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. All other healthcare services for pre-existing conditions are eligible upon effective date.
- Program will share 80% up to the \$5,000 out-of-pocket maximum. Then will share 100% up to the per incident maximum limit of \$500,000.
- Visits are not eligible with program terms under 180 days.
- Consult fee is in addition to the cost of your visit and does not apply to your MSRA. Additional visits are eligible after meeting your program MSRA at a \$50 consult fee, program will share 80% of cost of visit.
- Only one visit is eligible at no consult fee. Additional visits are eligible after meeting your program MSRA; program will then share 80% up to the out-of-pocket maximum up to the per incident maximum limit;
- Only one visit is eligible at a \$300 consult fee. Emergency room cost sharing is subject to review and is only meant for life-threatening situations. Cost sharing for illness is not eligible unless admitted.
- Rx eligibility is limited to a maximum of \$3,000 per person. Member shares the lowest price available for prescription and then submits sharing request.

Administrative and conditional fees: \$100 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.

PREMIUM PROGRAM DETAILS

\$1,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$302.40	\$453.60	\$604.80	\$319.20	\$478.80	\$638.40	\$336.00	\$504.00	\$672.00
40–49	\$332.64	\$498.96	\$680.40	\$351.12	\$526.68	\$718.20	\$369.60	\$554.40	\$756.00
50–59	\$449.06	\$773.39	\$914.76	\$474.01	\$816.35	\$965.58	\$498.96	\$859.32	\$1,016.40
60–64	\$608.58	\$1,060.67	\$1,130.22	\$642.39	\$1,119.59	\$1,193.01	\$676.20	\$1,178.52	\$1,255.80

\$2,500 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$272.16	\$408.24	\$544.32	\$287.28	\$430.92	\$574.56	\$302.40	\$453.60	\$604.80
40–49	\$299.37	\$449.06	\$612.36	\$316.01	\$474.01	\$646.38	\$332.64	\$498.96	\$680.40
50–59	\$404.16	\$696.05	\$823.28	\$426.61	\$734.71	\$869.02	\$449.06	\$773.39	\$914.76
60–64	\$547.72	\$954.60	\$1,017.20	\$578.15	\$1,007.63	\$1,073.71	\$608.58	\$1,060.67	\$1,130.22

\$5,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$226.80	\$362.88	\$483.84	\$255.36	\$383.04	\$510.72	\$268.80	\$403.20	\$537.60
40–49	\$249.48	\$399.17	\$544.32	\$280.89	\$421.34	\$574.56	\$295.68	\$443.52	\$604.80
50–59	\$336.80	\$618.71	\$731.81	\$379.21	\$653.08	\$772.46	\$399.17	\$687.46	\$813.12
60–64	\$456.45	\$848.54	\$904.18	\$513.91	\$895.68	\$954.41	\$540.96	\$942.82	\$1,004.64

1. Primary member must be at least 18 years of age; monthly rate is based on eldest eligible family member.
2. Members under the age of 26 can qualify as a dependent.



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PLUS PROGRAM DETAILS

PROGRAM SERVICES PER MEMBER ¹	MultiPlan PHCS (in-network)		
Member Shared Responsibility Amount (MSRA)	\$1,000 \$2,500 \$5,000 \$10,000		
Co-expense ²	Program Shares: 75% You Share: 25%		
Out-of-pocket Maximum (within sharing limits) ²	\$10,000		
Per Incident Maximum Limit ²	\$250,000		
Lifetime Maximum Limit ²	\$1,000,000		
Section 1	Services Eligible Prior to Meeting MSRA		
The services in Section 1 are available to InterimCare members upon enrollment. They do not require you to meet MSRA prior to using them.			
Program Term Length	0 – 30 Days	31 – 180 Days	181 – 364 Days
Telemedicine	Free	Free	Free
Wellness & Preventive Care ³	Not Eligible	Not Eligible	Eligible
Primary Care ⁴	Not Eligible	1 Visit \$50 Consult Fee	1 Visit \$50 Consult Fee
Urgent Care ⁵	1 Visit \$100 Consult Fee		
Section 2	Services Eligible After Meeting MSRA		
The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing.			
Specialty Care	\$75 Consult Fee + Cost of Visit Program Shares: 75% You Share: 25%		
Pediatrics	\$75 Consult Fee + Cost of Visit Program Shares: 75% You Share: 25%		
OB/GYN	\$75 Consult Fee + Cost of Visit Program Shares: 75% You Share: 25%		
Maternity	Not Eligible		
Prescription Discount ⁶	Program Shares: 75% You Share: 25%		
Emergency Room ⁷	Program Shares: 75% You Share: 25%		
Inpatient Services			
Hospitalization	Program Shares: 75% You Share: 25%		
Surgical	Program Shares: 75% You Share: 25%		
Outpatient Services			
Hospitalization	Not Eligible		
Surgical	Program Shares: 75% You Share: 25%		

- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. All other healthcare services for pre-existing conditions are eligible upon effective date.
- Program will share 75% up to the \$10,000 out-of-pocket maximum. Then will share 100% up to the per incident maximum limit of \$250,000.
- Visits are not eligible with program terms under 180 days.
- Consult fee is in addition to the cost of your visit and does not apply to your MSRA. Additional visits are eligible after meeting your program MSRA at a \$50 consult fee, program will share 75% of cost of visit.
- Only one visit is eligible at \$100 consult fee. Additional visits are eligible after meeting your program MSRA; program will then share 75% up to the out-of-pocket maximum up to the per incident maximum limit.
- Rx eligibility is limited to a maximum of \$3,000 per person. Member shares the lowest price available for prescription and then submits sharing request.
- Emergency room cost sharing is subject to review and is only meant for life-threatening situations. Cost sharing for illness is not eligible unless admitted.

Administrative and conditional fees: \$100 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.

PLUS PROGRAM DETAILS

\$1,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$272.16	\$423.36	\$567.00	\$287.28	\$446.88	\$598.51	\$302.40	\$470.40	\$630.00
40–49	\$302.40	\$468.72	\$619.92	\$319.20	\$494.76	\$654.36	\$336.00	\$520.80	\$688.80
50–59	\$415.80	\$715.18	\$831.60	\$438.90	\$754.91	\$877.80	\$462.00	\$794.64	\$924.00
60–64	\$521.64	\$956.34	\$1,043.28	\$550.62	\$1,009.47	\$1,101.24	\$579.60	\$1,062.60	\$1,159.20

\$2,500 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$244.94	\$381.03	\$510.31	\$258.55	\$402.19	\$538.65	\$272.16	\$423.36	\$567.00
40–49	\$272.16	\$421.85	\$557.92	\$287.28	\$445.28	\$588.92	\$302.40	\$468.72	\$619.92
50–59	\$374.22	\$643.65	\$748.44	\$395.02	\$679.42	\$790.02	\$415.80	\$715.18	\$831.60
60–64	\$469.48	\$860.71	\$938.95	\$495.56	\$908.52	\$991.12	\$521.64	\$956.34	\$1,043.28

\$5,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$204.12	\$338.69	\$453.60	\$229.83	\$357.51	\$478.80	\$241.92	\$376.32	\$504.00
40–49	\$226.80	\$374.97	\$495.94	\$255.36	\$395.81	\$523.49	\$268.80	\$416.64	\$551.04
50–59	\$311.86	\$572.13	\$665.28	\$351.12	\$603.93	\$702.24	\$369.60	\$635.71	\$739.20
60–64	\$391.23	\$765.07	\$834.62	\$440.50	\$807.58	\$880.99	\$463.68	\$850.08	\$927.36

\$10,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$163.29	\$254.02	\$340.20	\$172.37	\$321.75	\$430.92	\$217.72	\$338.69	\$453.60
40–49	\$181.44	\$281.23	\$371.95	\$191.52	\$356.23	\$471.14	\$241.92	\$374.97	\$495.94
50–59	\$249.48	\$429.10	\$498.96	\$263.34	\$543.53	\$632.02	\$332.64	\$572.13	\$665.28
60–64	\$312.98	\$573.80	\$625.97	\$330.37	\$726.82	\$792.90	\$417.31	\$765.07	\$834.62

1. Primary member must be at least 18 years of age; monthly rate is based on eldest eligible family member.
2. Members under the age of 26 can qualify as a dependent.



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VALUE PROGRAM DETAILS

PROGRAM SERVICES PER MEMBER ¹		MultiPlan PHCS (in-network)		
Member Shared Responsibility Amount (MSRA)		\$1,000 \$2,500 \$5,000 \$10,000		
Co-expense ²		Program Shares: 70% You Share: 30%		
Out-of-pocket Maximum (within sharing limits) ²		\$10,000		
Per Incident Maximum Limit ²		\$250,000		
Lifetime Maximum Limit ²		\$1,000,000		
Section 1		Services Eligible Prior to Meeting MSRA		
The services in Section 1 are available to InterimCare members upon enrollment. They do not require you to meet MSRA prior to using them.				
Program Term Length		0 – 30 Days	31 – 180 Days	181 – 364 Days
Telemedicine		Free	Free	Free
Wellness & Preventive Care ³		Not Eligible	Not Eligible	Eligible
Section 2		Services Eligible After Meeting MSRA		
The services in Section 2 require you to meet your selected MSRA amount before your medical expenses are eligible for member sharing.				
Primary Care		Program Shares: 70% You Share: 30%		
Specialty Care		\$75 Consult Fee + Cost of Visit Program Shares: 70% You Share: 30%		
Pediatrics		\$75 Consult Fee + Cost of Visit Program Shares: 70% You Share: 30%		
OB/GYN		\$75 Consult Fee + Cost of Visit Program Shares: 70% You Share: 30%		
Maternity		Not Eligible		
Prescription Discount		Not Eligible		
Emergency Room ⁴		Program Shares: 70% You Share: 30%		
Inpatient Services				
Hospitalization		Program Shares: 70% You Share: 30%		
Surgical		Program Shares: 70% You Share: 30%		
Outpatient Services				
Hospitalization		Not Eligible		
Surgical		Program Shares: 70% You Share: 30%		

- Hospitalization, surgery and emergency room services for pre-existing conditions have a 24-month waiting period. All other healthcare services for pre-existing conditions are eligible upon effective date.
- Program will share 70% up to the \$10,000 out-of-pocket maximum. Then will share 100% up to the per incident maximum limit of \$250,000.
- Visits are not eligible with program terms under 180 days.
- Emergency room cost sharing is subject to review and is only meant for life-threatening situations. Cost sharing for illness is not eligible unless admitted.

Administrative and conditional fees: \$100 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.

VALUE PROGRAM DETAILS

\$1,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$151.20	\$302.40	\$415.80	\$159.60	\$319.20	\$438.91	\$168.00	\$336.00	\$462.00
40–49	\$226.80	\$340.20	\$453.60	\$239.40	\$359.11	\$478.80	\$252.00	\$378.00	\$504.00
50–59	\$332.64	\$582.12	\$623.70	\$351.12	\$614.46	\$658.36	\$369.60	\$646.80	\$693.00
60–64	\$434.70	\$782.46	\$869.40	\$458.85	\$825.93	\$917.70	\$483.00	\$869.40	\$966.00
\$2,500 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$136.08	\$272.16	\$374.22	\$143.64	\$287.28	\$395.01	\$151.20	\$302.40	\$415.80
40–49	\$204.12	\$306.18	\$408.24	\$215.46	\$323.19	\$430.92	\$226.80	\$340.20	\$453.60
50–59	\$299.38	\$523.91	\$561.34	\$316.01	\$553.01	\$592.52	\$332.64	\$582.12	\$623.70
60–64	\$391.23	\$704.21	\$782.46	\$412.98	\$743.34	\$825.93	\$434.70	\$782.46	\$869.40
\$5,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$113.40	\$241.92	\$332.64	\$127.68	\$255.36	\$351.12	\$134.40	\$268.80	\$369.60
40–49	\$170.11	\$272.16	\$362.88	\$191.52	\$287.28	\$383.04	\$201.60	\$302.40	\$403.20
50–59	\$249.48	\$465.70	\$498.96	\$280.90	\$491.57	\$526.68	\$295.68	\$517.44	\$554.40
60–64	\$326.04	\$625.97	\$695.52	\$367.08	\$660.74	\$734.16	\$386.40	\$695.52	\$772.80
\$10,000 MSRA									
Rates	0 – 30 Days			31 – 180 Days			181 – 364 Days		
Age¹	Member	Member +1	Family²	Member	Member +1	Family²	Member	Member +1	Family²
18–39	\$90.72	\$181.44	\$249.48	\$95.76	\$229.83	\$316.01	\$120.96	\$241.92	\$332.64
40–49	\$136.08	\$204.12	\$272.16	\$143.64	\$258.55	\$344.74	\$181.44	\$272.16	\$362.88
50–59	\$199.58	\$349.27	\$374.22	\$210.67	\$442.41	\$474.01	\$266.11	\$465.70	\$498.96
60–64	\$260.82	\$469.48	\$521.64	\$275.31	\$594.68	\$660.74	\$347.76	\$625.97	\$695.52

1. Primary member must be at least 18 years of age; monthly rate is based on eldest eligible family member.
2. Members under the age of 26 can qualify as a dependent.

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

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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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

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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)

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Mississippi Title 83-77-1

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Missouri Section 376.1750

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STATE SPECIFIC NOTICES (CONTINUED)

Nebraska Revised Statute Chapter 44-311

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New Hampshire Section 126-V:1

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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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