

## CHA Sharing Choices for 2023

### Traditional Sharing (TS) – CHA’s Flagship High-Limit Sharing Program

TS offers sharing of most healthcare needs on a percentage basis. Among other things, its members share the cost of office visits (for both sick and well visits), diagnostic work, surgery, ambulance, emergency room, hospital stays, and diabetic supplies. TS gives the member the freedom to have his medical providers bill CHA directly, thus avoiding the burden of paperwork necessitated by our self-pay programs. Optionally, Traditional members may participate in dental and vision sharing as well. See *Overview of shareable and non-shareable items* for more details. Monthly share contributions vary by age and are calculated for each person in the family through the fifth child. No additional shares are billed for the sixth child on. There is an Annual Member Responsibility (AMR) of \$1,000 per person with a maximum of \$2,000 per family. After this is satisfied, CHA shares bills at 80%, with the remaining 20% being the member’s responsibility. For 2023, this sharing program has an increased maximum shareable amount of \$150,000 per person per year, and the board of directors will continue to consider each case that exceeds this maximum and offer additional assistance where needed through the Brother-to-Brother Fund. Diabetic supply assistance, as well as membership in the optional Vision Sharing and Dental Sharing are available exclusively with the TS. As with all sharing programs offered through CHA, you remain personally responsible for your medical expenses. There is no guarantee that any medical expense you submit will be shared by other members.

### Diamond Care Sharing (DCS) – CHA’s High Limit Self-Pay Sharing Program

DCS is for those who are willing to contribute a bit more than with ECS monthly and consequently can submit more items for sharing from DCS. The monthly shares are based on units as with ECS, with a maximum sharing amount of three units per family. The DCS has an Annual Member Responsibility (AMR) of \$1,000 per person. Incidents must exceed \$1,000 to be eligible for sharing, even after the AMR has been satisfied. As with ECS, bills are usually handled as self-pay and the member is responsible to assemble and submit the bills to the office along with the appropriate documentation to be considered for sharing. Bills should be negotiated by the member to obtain a fair and reasonable price for the services rendered. If assistance is needed, CHA’s repricing team can help. Approved bills are shared at 100% after the member’s AMR of \$1,000 has been satisfied. Payment is usually issued to the member who in turn issues payment to the provider. There is an annual sharing limit of \$200,000 per person and a lifetime limit of \$125,000 per illness. See *Overview of shareable and non-shareable items* for more details about what is eligible for sharing. As with all sharing programs offered through CHA, you remain personally responsible for your medical expenses. There is no guarantee that any medical expense you submit will be shared by other members.

Both the Emerald Care Sharing and Diamond Care Sharing are offered with an optional companion sharing program called ExtenCare, which offers an additional \$100,000 of sharing per year. There is an additional cost per unit per month to add this.

### Emerald Care Sharing (ECS) – CHA’s ‘Bare Bones’ Self-Pay Sharing Program

ECS is for those who prefer to handle their own health care costs for the most part but would like to have some help available for major health care expenses. As with all the sharing programs offered through CHA, you remain personally responsible for your medical expenses. There is no guarantee that any medical expense you submit will be shared by other members. The monthly shares are based on units. A single person is one unit, each spouse in a family is one unit, and all children in a family comprise one unit. There is a maximum sharing amount of three units per household regardless of the number of children enrolled. Members of the ECS will have an Incident Member Responsibility (IMR) of \$5,000 per incident, meaning they are personally responsible for the first \$5,000 of each incident before it is eligible for sharing. Because all sharing under ECS is on a “per incident” basis, bills are usually handled as self-pay. This means the provider will bill the member, who will assemble all bills pertaining to the incident and submit them to CHA along with the appropriate documentation as per CHA Guidelines. Bills should be negotiated by the member to obtain a fair and reasonable price for the services rendered. CHA’s repricing team can help with this if needed. Once the bill has been determined to be shareable, CHA will share 100% of the approved, negotiated charges after the member’s IMR of \$5,000 has been satisfied. Payment is usually issued to the member who in turn issues payment to the provider. There is an annual sharing limit of \$100,000 per person, and a lifetime limit of \$125,000 per illness. Because of the lower cost of ECS, there is a limited list of shareable items. See *Overview of shareable and non-shareable items*. **Please note: this program is not well suited to helping with maternity needs.**

<b>Sharing Program Overview</b>	<b><i>Traditional Sharing (TS)</i></b>	<b><i>Diamond Care Sharing (DCS)</i></b>	<b><i>Emerald Care Sharing (ECS)</i></b>
<b>Share Pricing</b>	Varies from \$84 to \$357 per person per month based on member's age	\$219 per unit per month with a maximum of 3 units (\$657) per household	\$63 per unit per month with a maximum of 3 units (\$189) per household
<b>Member Responsibility</b>	Annual Member Responsibility (AMR) of \$1,000 per person with maximum of \$2,000 per household per year. AMR is \$500 per person for those on Medicare A&B.	Annual Member Responsibility (AMR) of \$1,000 per person	Incident Member Responsibility (IMR) of \$5,000 per person per incident
<b>Incident threshold to qualify for sharing</b>	All approved bills are applied to AMR or shared as per CHA Guidelines.	Incident must exceed \$1,000 to be eligible for sharing even if AMR has already been satisfied.	Incident must exceed \$5,000 to be eligible for sharing – only the amount over \$5,000 will be shared.
<b>Submission of Medical Bills</b>	Bills may be submitted to CHA directly by the provider, or may be sent to the member to submit to CHA with proper documents.	Bills are usually sent to the member, who will assemble bills for the incident & submit to CHA with proper documents.	Bills are usually sent to the member, who will assemble bills for the incident & submit to CHA with proper documents.
<b>Handling of discounts</b>	Discounts are taken off total amount billed before anything is applied to AMR or shared by CHA.	Discounts are taken off total amount billed before anything is applied to AMR or shared by CHA.	Discounts are taken off total amount billed before anything is applied to IMR or shared by CHA.
<b>Sharing percentage</b>	80% after AMR is satisfied when primary; 100% of remaining bill when secondary to other coverage	100% after AMR is satisfied	100% after IMR is satisfied
<b>Annual sharing limit</b>	\$150,000 per person	\$200,000 per person (unless enrolled in ExtenCare)	\$100,000 per person (unless enrolled in ExtenCare)
<b>Illness sharing limit</b>	No lifetime limit or illness limit	Lifetime limit of \$125,000 per illness (unless enrolled in ExtenCare)	Lifetime limit of \$125,000 per illness (unless enrolled in ExtenCare)
<b>Help beyond the sharing limits</b>	Bills that exceed the \$150,000 limit are eligible for board review and further donations	An additional \$100,000 per person per year is available by participating in the ExtenCare companion program at an additional cost of \$28 per unit per month. To receive help from ExtenCare, you must be enrolled before the incident begins.	
<b>Pre-existing clauses</b>	No pre-existing clauses or waiting periods	Incidents for which you are receiving treatment (other than routine medication) when you join ECS or DCS (whether or not you have been a member of a different sharing program with CHA) will not be shareable (exclusion for returning missionaries). New incidents which begin after becoming a member will be shareable.	
<b>Member Responsibility for Maternity Cases</b>	OB bills are paid by case year based on the year in which the pregnancy begins with only one AMR and Annual Limit per pregnancy	OB bills will have a new Annual Member Responsibility each year, even when one pregnancy spans portions of two years.	Since each pregnancy is considered one incident, IMR of \$5,000 will apply to each pregnancy. (Only inpatient bills are eligible for sharing.)
<b>Secondary to Other Assistance &amp; Other Provisions</b>	These sharing programs are secondary to all other types of coverage or financial assistance except for state aid, who is always the payer of last resort. If funds that are shared by CHA for the payment of medical bills are not used for this purpose, membership in the sharing program may be terminated.		

<b>Overview of shareable and non-shareable items</b>	<b><i>Traditional Sharing</i></b> All shareable items are applied to AMR and/or shared.	<b><i>Diamond Care Sharing</i></b> All shareable items are subject to being part of a qualifying incident.	<b><i>Emerald Care Sharing</i></b> All shareable items are subject to being part of a qualifying incident.
<b>Shareable only means an item or expense is eligible for consideration to receive an allocation of the sharing resources. It does not guarantee any form of payment.</b>			
<b>Ambulance</b>	Shareable	Shareable up to \$5,000	Not shareable
<b>Anesthesia</b>	Shareable	Shareable	Shareable
<b>Assistant Surgeon</b>	Shareable	Shareable	Shareable
<b>Breast &amp; Eye Prostheses</b>	Shareable	Shareable	Not Shareable
<b>Cataract Surgery</b>	Shareable	Shareable	Shareable
<b>Chemotherapy</b>	Shareable	Shareable	Not shareable
<b>Chiropractic Care</b>	Up to 12 manipulative treatments per year are shareable, as well as procedures that would be shareable if performed by medical personnel.	Not shareable	Not shareable
<b>Consultations</b>	Shareable	Shareable	Shareable
<b>Critical Care Unit</b>	Shareable	Shareable	Shareable
<b>Delivery Room</b>	Shareable	Shareable	Shareable
<b>Dental Accidents</b>	Shareable	Shareable	Shareable
<b>Diabetic Supplies</b>	Up to \$150/mo for non-insulin dependent, \$300/mo for insulin dependent; not subject to AMR or 80% limit	Not shareable	Not shareable
<b>Diagnostic Testing</b>	Shareable	Shareable	Shareable
<b>Direct Primary Care (DPC) Monthly Subscriptions</b>	Shareable at 50%, not subject to AMR	Not shareable	Not shareable
<b>Disc Decompression Therapy</b>	Shareable	Not shareable	Not shareable
<b>Durable Medical Equipment</b>	Some DME shareable - See Guidelines for complete list.	Limited to apnea monitor, bili-blanket, home infusion pump, insulin pump, CGM, nebulizer, orthotics	Not shareable
<b>Emergency Room</b>	Shareable	Shareable	Shareable
<b>Hearing Aids</b>	Shareable	Not shareable	Not shareable
<b>Home Health</b>	Up to 24 licensed personnel visits per year are shareable	Up to 24 licensed personnel visits per year are shareable	Not shareable
<b>Hospice</b>	Shareable	Shareable	Not shareable
<b>Hospital Room &amp; Board</b>	Shareable	Shareable	Shareable
<b>Intensive Care Unit</b>	Shareable	Shareable	Shareable

<b>Maternity Care &amp; Delivery</b>	Shareable except for take-home meds (includes pre-existing pregnancy)	Shareable— (pre-existing pregnancies excluded)	Inpatient charges only are shareable— (pre-existing pregnancies excluded)
<b>Mental Health Treatment</b>	Shareable with exclusions	Shareable with exclusions	Shareable with exclusions
<b>Nursery &amp; Neo-natal Nursery</b>	Shareable	Shareable	Shareable
<b>Office &amp; Out-patient Surgery</b>	Shareable	Shareable	Shareable
<b>Office Visits</b>	Shareable	Shareable	Shareable (excludes OB)
<b>Operating Room</b>	Shareable	Shareable	Shareable
<b>Out-patient IV Infusions</b>	Shareable	Shareable	Not Shareable
<b>Physician Charges for Inpatient Care</b>	Shareable	Shareable	Shareable
<b>Plastic Surgery for Reconstruction</b>	Limited Sharing	Limited Sharing	Not Shareable
<b>Prescriptions &amp; Injections</b>	Limited to meds used in hospital or surgery, chemo drugs, RhoGam or Progesterone for OB use	Shareable as part of qualifying incident; excludes routine maintenance medications	Shareable during in-patient hospital stay or emergency room treatment only
<b>Pulmonary Procedures</b>	Shareable	Shareable	Shareable
<b>Radiation</b>	Shareable	Shareable	Not Shareable
<b>Recovery Room</b>	Shareable	Shareable	Shareable
<b>Skilled Nursing</b>	Shareable	Shareable	Shareable
<b>Supplies for Outpatient Burn, Accident, and Respiratory Needs</b>	Shareable	Shareable	Shareable
<b>Surgeons' Fees</b>	Shareable	Shareable	Shareable
<b>Surgical Implants, including prosthetic, excluding dental</b>	Shareable	Shareable	Shareable
<b>Therapy, including but not limited to Eye, Occupational, Physical, &amp; Speech</b>	Shareable	Shareable up to 45 sessions if ordered by MD, ARNP, or PA and performed by licensed therapist	Not Shareable