

CHRISTIAN HEALTHCARE MINISTRIES GUIDELINES

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127 HAZELWOOD AVENUE
BARBERTON, OHIO
800.791.6225

WWW.CHMINISTRIES.ORG
[WWW.FACEBOOK.COM/
CHRISTIANHEALTHCAREMINISTRIES](http://WWW.FACEBOOK.COM/CHRISTIANHEALTHCAREMINISTRIES)

Important notice: Members who call the CHM office detailing their circumstances and asking if medical bills qualify will be given an opinion, not a decision. Bills cannot be authorized for CHM sharing over the phone. If a member sends bills and details of a medical incident in writing, a decision will be sent by return mail or email. For more information on submitting bills to CHM, see Guideline J or visit chministries.org/stepbystep.

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A. WHAT IS CHM?

Christian Healthcare Ministries (CHM) is a ministry of Christians sharing fellow Christians' medical bills. CHM follows the New Testament model described in Acts and other places throughout the New Testament.

CHM is a fulfillment of the new commandment Jesus gave His disciples at the Last Supper (John 13:34). CHM carries out this defining action, which Jesus gave as the illustration of how the world would know we are disciples of Christ (John 13:35).

For more than 2,000 years the Body of Christ has systematically changed the world because of the transformation that occurs in the hearts of each individual believer. We are no longer motivated by selfishness; we are called to be selfless.



The everyday actions of CHM members show that the Body of Christ is different from the rest of the world. Why would a Christian in Idaho, Georgia or any other state generously, faithfully and voluntarily donate money to take care of the medical bills of fellow members throughout the United States and the world? It is because of the transformative power of Jesus Christ and the Holy Spirit.

The mission of Christian Healthcare Ministries is to glorify God, show Christian love, and experience God's presence as Christians share each other's medical bills.

CHM's role is to make Christians aware of the needs of others and New Testament-inspired help is provided to them from fellow believers using a definable, accountable, dependable framework.



Nifty tip: You may wonder, “Am I allowed to have CHM rather than insurance under Obamacare?” The answer is yes. Christian Healthcare Ministries is a health cost sharing ministry and is an eligible option for individuals under the national health care bill (Affordable Care Act).

Christian Healthcare Ministries meets each of the qualifications set forth for health cost sharing ministries in the U.S. health care legislation. Alternately, you can use CHM as a supplement to health insurance. More info is available at chministries.org/affordablecareact.

B. WHO CAN BE A MEMBER?

If you are a Christian, you can be a member of Christian Healthcare Ministries. A Christian is a person who embraces and follows the teaching of the New Testament in its entirety. Additionally, you must:

- abstain from the use of tobacco and the illegal use of drugs (I Corinthians 6:19-20)
- follow biblical principles regarding the use of alcohol
- attend group worship regularly as health permits (Hebrews 10:25)
- have either a U.S. mailing address or consistent, reliable, secure Internet service through which you can receive documents with confidential information (via attachment through an active email address, drop box/FTP capability, etc.)



C. WHO CAN BE INCLUDED IN MY MEMBERSHIP?

You, your spouse and your dependent children can be included in your membership. Different units may participate at different sharing levels (see Guideline G). Christian Healthcare Ministries uses a

unit system; a unit is typically defined as a participating individual within a membership. A single person is one unit, a married couple is two units, and a family is three units, regardless of the number of dependent children.

1. Single-parent households

If you are legally and financially responsible for the children, your membership will be two units (the parent is the first unit and all children are the second unit).

2. Households with one participating spouse

If one spouse is a CHM member and the other spouse chooses not to be a member, the participating spouse is one CHM unit and all dependent children are an additional unit (a total of two units).

3. Adopted children

When a CHM member adopts a child or otherwise has obtained legal custody with legal responsibility for a child’s medical care, that child can be included in your CHM membership. If any other source is responsible, willing or available to pay the child’s medical bills, these resources must be exhausted before CHM members can share bills.

4. Adult children

Adult children can remain on their parents’ membership until their 26th birthday as long as they meet the following qualifications: (1) they must be Christians living by biblical principles; (2) they must be single; and (3) they must be legal dependents. Legal dependence is defined as children who are reported as dependents on their parent’s income tax forms.

Children who are no longer legal dependents can transition seamlessly to their own CHM membership. Immediate transition will allow any issues relating to pre-existing conditions to date back to the original start date when they participated under their parents’ membership.

Notify the CHM Member Assistance department (1-800-791-6225, ext. 5993) if your adult child or children choose not to be CHM members. However, remaining a member is to their advantage because with CHM their membership will never be canceled due to an expensive illness, nor will their monthly financial gift be raised because they become sick. The Body of Christ will help bear their burdens.

D. CAN GROUPS JOIN CHM?

Christian Healthcare Ministries has hundreds of participating groups—ranging in size from two people to over 200 families—among them church groups, businesses of varying sizes, and Christian schools and colleges. Group members must be Christians living by biblical principles.



CHM's solutions will help you create a plan that satisfies the requirements of the Patient Protection and Affordable Care Act (ACA, or Obamacare). However, **your group health plan must be set up properly or you can be heavily fined. Therefore, all groups should seek guidance from attorneys and CPAs knowledgeable about the law's requirements.** CHM can provide referrals to reliable, independent professionals.

To learn more about the advantages of CHM group membership and how to get started, please call us at 1-800-791-6225, ext. 1002, or email groups@chministries.org.

E. HOW DO I JOIN?

It's vitally important that you read and understand all CHM literature explaining who we are, what we do and how we do it. (This information is available to all prospective members via

these Guidelines, printed CHM Information Pack and through our website.) Based on that understanding, complete the Member Application, sign it and send it to the CHM office. You can do so online at www.chministries.org or by hard copy. (Your online acceptance is considered a digital "signature.")

Reading our materials will help you understand that **CHM is not insurance**. Health insurance requires a contract between you and a third party. The contract says that if you have medical bills covered by a health insurance policy, the company will be legally obligated to pay those bills for you. If the company doesn't pay, you and/or your medical provider can take action against it in a court of law.

Members of CHM do not have a contract. Instead, members follow the model of the Church, the Body of Christ. We as a Christian family recognize there is a need. We have a common focus on the need, a personal desire to assist with that need, and a common commitment to voluntarily assist one another with that need.

Sometimes people question how we can be sure our members will honor their commitment to carry each other's burdens. We point to our history: for 35 years CHM members have faithfully shared eligible medical needs.

This same method CHM uses to voluntarily share medical costs is used by every church that pays its pastor; for every mission activity; every church building and educational program; evangelistic and ministerial associations; and every other similar program or institution. God's people come together with a common understanding, focus, commitment and action to voluntarily fund that cause.

The Body of Christ has cared for its members for 2,000 years. Christian Healthcare Ministries members have faithfully continued that legacy by caring for each other since 1981—and have done so without a contract. Christ has changed our hearts and our nature to love one another and to act on that love.

F. WHAT HAPPENS WHEN I JOIN?

1. Welcome Packet and Checklist of Understanding

You will receive CHM membership cards and a Welcome Packet within two weeks of submitting your Member Application. The packet includes all the forms you need to submit medical bills for sharing. Make copies of and keep these forms for future use (if you need them).



The Checklist of Understanding (COU) also is included in the Welcome Packet and on the CHM website.

Complete this form and return it to CHM as quickly as possible. Written for legal purposes, the COU states

that you understand that CHM is a voluntary cost-sharing ministry and not a health insurance company. The COU must be on file with Christian Healthcare Ministries before we can share your medical needs. This is an important document: it corrects insurance regulators who may incorrectly assume that CHM members do not understand the difference between voluntary health cost-sharing and health insurance.

2. Member Gift Form

Each month members receive a statement (Member Gift Form) with the amount of their voluntary sharing financial gift. The amount is sent directly from one member to another through an escrow account that is audited according to generally accepted accounting principles (GAAP), as is required by federal law. The amount of your gift is based on the sharing level you choose and the number of units in your membership.

If possible, please send your financial gift to CHM immediately upon receipt of your Member Gift Form statement. The CHM office must receive your monthly financial gift by the 10th of the next month (or the next business day after the 10th if it falls on a weekend or holiday). Any financial gifts received after this date won't be reflected on the next Member Gift Form statement.



Nifty tip: For example, if the CHM office receives your financial gift after December 10, your January statement won't show the gift applied to your account because the statement will have already been created (the change will, however, show on your February Member Gift Form).

The reverse side of each Member Gift Form contains a letter from the CHM President and CEO. This letter contains vital information about your ministry membership.

3. CHM monthly newsletter

Each month you will receive the CHM newsletter, which also is a must-read piece of information. Announcements of changes and explanations of procedures are included in the newsletter.

It also contains valuable information on living a healthy life—spiritually, physically and emotionally. CHM has a consulting doctor and other contributing writers who write on health and medical issues of interest to you and your family. There are stories from fellow members telling of their experiences and the amazing hand of God as He has touched their lives. The newsletter is an important source of encouragement and a vital tool in keeping members up-to-date on the wonderful things God is doing through Christian Healthcare Ministries.



4. Brother's Keeper quarterly letter

Members participating in Brother's Keeper will receive a quarterly letter containing a list of medical needs exceeding \$125,000. They are asked to send cards and letters of encouragement to these fellow Christians. To learn more about Brother's Keeper, see Guideline Y.

G. HOW MUCH DOES IT COST TO PARTICIPATE IN CHM? DOES CHM HAVE

DIFFERENT PROGRAMS FROM WHICH I CAN CHOOSE?

CHM has three levels of participation: Gold, Silver and Bronze. These are called “participation levels,” “sharing levels,” or “programs.” Different units may participate at different sharing levels (see Guideline C). Make your choice prayerfully and wisely, because different programs offer different levels of health cost sharing support.



Nifty tip: Health care provider discounts that you help obtain on eligible medical bills are applied to your personal responsibility amount and help reduce your out-of-pocket costs. (This feature applies to all sharing levels; for more information, see Guidelines L and O.)



1. Gold level monthly financial gift: \$150 per unit, per month

• *\$500 personal responsibility* per unit, per year*

• Includes:

- inpatient or outpatient hospital incidents** and surgery
- medical testing
- maternity (see Guideline R for more information)
- physical therapy and home health care (up to 45 visits)
- incident-related doctor’s office visits
- incident-related prescriptions



Gold members have chosen to be responsible for the first \$500 per unit, per year (see Guideline C for an explanation of units). Before bills can be submitted for sharing, they must exceed \$500 per incident (before discounts). Any medical expense less than \$500 per incident is the member’s personal responsibility.



2. Silver level monthly financial gift: \$85 per unit, per month

• *\$1,000 personal responsibility per incident***

- includes only inpatient or outpatient hospital incidents and surgery performed anywhere
- Testing and treatment outside a hospital do not qualify for sharing
- The Silver level excludes most maternity costs. The only eligible costs are bills you incur as a hospital patient or bills from midwife services (up to \$2,500 per pregnancy).



Silver members have chosen not to share any prescriptions or doctors’ bills (except doctors’ bills incurred as a hospital patient). Before bills can be submitted for sharing, they must exceed \$1,000 per incident (before discounts). Any medical expense less than \$1,000 per incident is the member’s personal responsibility.



3. Bronze level monthly financial gift: \$45 per unit, per month

• *\$5,000 personal responsibility per incident***

- includes only inpatient or outpatient hospital incidents and surgery performed anywhere
- Testing and treatment outside a hospital do not qualify for sharing
- The Bronze level excludes most maternity costs (only bills you incur as a hospital patient can be shared).



Bronze members have chosen not to share any prescriptions or doctors’ bills (except doctors’ bills incurred as a hospital patient). Before bills can be submitted for sharing, they must exceed \$5,000 per incident (before discounts). Any medical expense less than \$5,000 per incident is the member’s personal responsibility.

**Personal responsibility: To learn more, see Guideline O.*

***Incidents: An incident includes medical treatment or testing that lasts until one of the following events occurs: 1) a certain medical condition is cured according to official medical records; 2) treatment is at a routine maintenance level; or 3) you experience 90 days without any kind of treatment for that particular condition. The medical bills incurred from the first test to the last treatment before the doctor releases you to a regular, routine maintenance regimen are considered a single incident. If 90 days pass and you receive no further treatment, any future bills you incur will be considered a separate incident.*

4. Changing sharing levels

You must be current with all monthly financial gifts throughout the time medical bills are being processed for sharing.

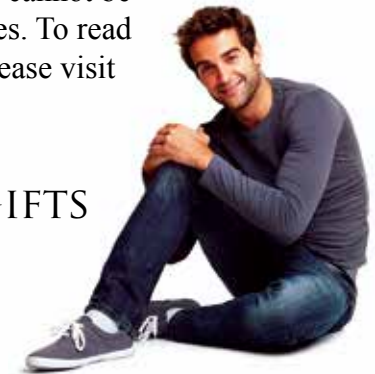
- If you drop to a lower sharing level, all existing illnesses permanently become pre-existing to any higher level, including any bills submitted but as of yet not shared.
- For information on changing to a higher level, please see Guideline Z.1.
- If you discontinue your membership, your medical bills will not be eligible for sharing.

If you intend to change your sharing level, number of units, discontinue your participation or change the status of your membership in any way, please allow 30 days for the change(s) to take effect.

5. Delinquent giving and cancellation by CHM

Christian Healthcare Ministries reserves the right to automatically cancel your membership after three months of not receiving a monthly financial gift from you. CHM takes care to notify members when their membership is delinquent and will work with you to catch up on your giving if you demonstrate intent to remain a member. If your membership is more than three months delinquent, CHM will not be able to share any medical bills you have submitted until your account has a zero balance due. If your membership is

automatically cancelled after three months of delinquency, you can reinstate your membership by catching up on your giving. However, any medical bills submitted but not yet shared at the time of cancellation—or any medical bills incurred between the time of cancellation and reinstatement—cannot be shared by Christian Healthcare Ministries. To read CHM’s privacy and security policies, please visit chministries.org/policies.



H. ARE MY FINANCIAL GIFTS TAX-DEDUCTIBLE?

The monthly financial gift amount that you must give in order to continue as a member in good standing is not tax deductible. All giving above that amount qualifies as a charitable contribution for income tax purposes—many people make donations to CHM above their required monthly financial gift. CHM is a 501(c)3 tax-exempt organization.

Missouri members only: Missouri law provides residents with a special state income tax advantage. The Missouri Form MO-1040 lists a “health care sharing ministry” line item deduction. When you file your taxes, write on this line the total amount you sent to Christian Healthcare Ministries in the previous calendar year. (The amount will be indicated on a statement the CHM office will send to you.)

I. WHAT SHOULD I DO IF I NEED MEDICAL CARE?

If you become ill or injured, you should seek appropriate care from the health care provider of your choice. Unlike some insurance companies, CHM does not require members to choose health care

providers only from an approved list. Many providers are aware of CHM—the ministry has worked with more than 40,000 of them.

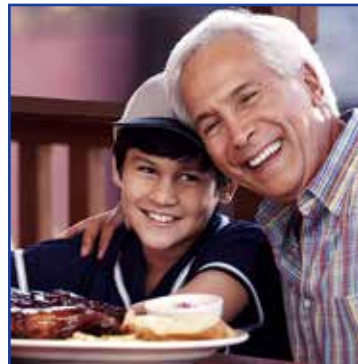


Nifty tip: For elective or non-life-threatening treatment, consider shopping for health care providers in your area. (One resource is CHM’s recommended provider and medical services list at chministries.org/providerlist.)

Though as a CHM member you may go to any hospital or doctor for treatment, selective shopping helps lower the cost of your medical care because you often can receive the same service at a lower price. To compare health care pricing in your area, visit healthcarebluebook.com.

Give providers your CHM membership card if they ask for proof of insurance. Tell them that you don’t have health insurance (since CHM is not insurance) and that you’re a “self-pay” or “private-pay” patient. Also, tell them that you’re part of a ministry of Christians who are willing to help you with your medical bills after all other available resources are exhausted.

Apply for any additional financial assistance available through your medical provider. If you are qualified for programs, discounts, or other funds, you are required to take advantage of these resources. By doing so you will help keep our monthly CHM gift amounts low.



Asking for a discount is asking for the same consideration that insured patients receive (due to discounted rates negotiated by their insurers). Many providers have a self-pay price and will extend you a discount—it usually means they receive faster payment and experience less difficulty and paperwork. Discounts represent nearly 60 percent of all medical bills submitted to CHM, so please don’t be shy about asking. Build a relationship with your provider(s); doing so is to your advantage and also is an advantage for other members.

J. WHAT SHOULD I DO WITH MY MEDICAL BILLS?

- 1. Tell your health care provider(s) to send all bills to you.** Bills must be translated into English and converted to U.S. dollars. Ask if payment is required on the date of scheduled treatment.
- 2. When you receive the itemized bills, immediately send copies of the bills to CHM along with the completed Needs Processing forms.** (Forms are available at www.chministries.org/downloads/NeedsProcessingPacketWeb.pdf. Alternately, you can submit bills and forms via the secure online Member Portal at chministries.org/members. Please see explanation of forms below.) Be sure to note if payment is required on the date of scheduled treatment.
- 3. Medical bills must be submitted within six months of the date of service;** however, the sooner our staff receives your bills, the sooner we can get them in the queue for sharing. The older the medical bills, the more difficult it is to obtain discounts, which help keep monthly financial gifts low.
- 4. Changing sharing levels:** You must be current with all monthly financial gifts throughout the time medical bills are being processed for sharing.
 - If you drop to a lower sharing level, all existing illnesses permanently become pre-existing to any higher level, including any bills submitted but as of yet not shared.
 - For information on changing to a higher level, please see Guideline Z.1.
 - If you discontinue your membership, your medical bills will not be eligible for sharing.
- 5. Chronic conditions:** Please submit an updated version of all of the items listed below (including letter of explanation) each calendar year. Please note that you do not need to send additional forms/letters for “add-on” bills incurred for the same incident within the same calendar year.

You need to send **all** of the following items to CHM for your bills to

be shared:

a. Itemized bills

A receipt is not an itemized bill; a receipt only shows what has been paid and doesn't include information about what services were performed. Please do not send receipts. Itemized bills contain the patient's name, date of service, place of service, treatment description and charges. CHM requires them for several reasons; the main reason is that itemization reduces the likelihood of billing errors, which speeds sharing time. Be sure to ask your health care providers for itemized bills.

- 1) **Members with Medicare only:** You may submit your Medicare Explanation of Benefits (EOB) form instead of itemized bills. You must still submit all of the forms listed below.

b. Needs Processing Form

The Needs Processing Form contains information necessary for CHM staff to process your medical bills: your contact information, medical situation information, medical bill details, etc.

c. Medical Release Form

The Medical Release Form was written by a CHM attorney to conform to current HIPAA regulations. It allows your medical provider(s) to share information with us so we can provide services to you. We must have a signed copy of this form in order to share your eligible medical bills; your medical provider(s) won't communicate with CHM about your bills unless we have a signed copy of this form.

d. Letter of explanation

Write a short explanation of your medical event and send it with your itemized bills and other forms. The letter helps CHM staff determine how to "assign" each bill to an illness/diagnosis. This process in turn affects your maximum lifetime sharing amount for each illness (see Guidelines X and Y).

For example, a young CHM member underwent treatment for a back injury. He suffered an allergic reaction to his medication, which caused additional problems. CHM did not assign the allergic reaction treatment to the back injury lifetime maximum, thus allowing more sharing eligibility for the member's back injury. In other words, CHM considered the allergic reaction a separate illness/diagnosis, which was beneficial to the member.

K. WHAT HAPPENS WHEN CHM RECEIVES MY BILLS?

When we receive your bills, our Member Records department stamps them with the date of receipt and enters them into our computer database. Our Needs Processing department makes sure they are not duplicates, that they are eligible bills, that they are itemized and that there are no billing mistakes made by your health care provider(s).

Our Member Advocate department then reviews the bills to make sure that the maximum discount has been obtained and verifies discounts with your medical providers (please make sure to immediately notify CHM of any discounts you receive.) The next step is performed by Finance department staff members, who release funds for sharing from the audited CHM bank account. You will receive a check or checks from the CHM office. It is your responsibility as a Christian to use the entire amount to promptly pay your medical providers. If you choose not to do so, you cannot remain a CHM member.

The sharing process described above takes about 90-120 days from the date CHM receives your itemized bill(s) and completed paperwork. We continually work to shorten sharing time. The larger the provider discount, the sooner the bill(s) can be shared. With your cooperation, we will do everything we can to meet your medical costs as quickly as possible.

Extra discounts



Your provider(s) may give you an additional discount when you pay the bill(s), so be alert to that possibility. Send the additional money back to CHM and we will use it for other members' medical bills. Returning these funds is required for CHM membership and also helps keep monthly financial gifts low. You'll find few things more rewarding than the great expression of love from your fellow members as they share your medical bills. Though you are suffering, you'll be reminded in a powerful way that you are not alone.

L. SHOULD I EVER PAY MY BILLS AT THE TIME I RECEIVE MEDICAL SERVICES?

It's acceptable to pay your bills at the time of service only if they total less than \$1,000. If you decide to do so, CHM members will share the eligible amount and the CHM office will send funds to reimburse you. However, you should still be able to obtain a discount.

Set up a payment plan if your bills total more than \$1,000 and try to negotiate at least 40 percent in discounts. The CHM Member Advocate department can help you negotiate a larger discount. The reason we ask for at least 40 percent is that insurance companies routinely receive 40 percent or more off their policyholders' medical bills.

We still recommend calling the Member Advocate department (1-800-791-6225) if you obtain a significant discount, especially if your provider requires a short timeframe for payment. Our staff will work with your provider(s). We may have previously worked with your provider(s) and obtained even larger discounts. Conversely, if you receive a discount larger than what we have obtained in the past, we need to hear from you so we can use that information to help other CHM members who use that provider's services in the future.

Payment after the time of service

It is your responsibility to use funds from CHM only to pay your



medical bills or to reimburse yourself for payments made to the appropriate health care providers. It is an abuse of members' trust to use money received for a shared need for any purpose other than payment of that need. Failure to provide accurate information or failure to use shared funds to pay for submitted needs will render you ineligible for CHM sharing until all of your providers are paid the accurate amount. Additionally, if your bills are shared and you subsequently receive further discounts, you must promptly return the amount of the overpayment to CHM.

M. SHOULD I APPLY FOR HOSPITAL FINANCIAL ASSISTANCE PROGRAMS?

Yes. Most hospitals have financial assistance programs funded by various sources.

In some cases, generous benefactors fund a program assisting patients with certain types of diseases. For example, a family may set up a foundation in memory of a loved one who has died from a specific disease; the family therefore wishes to fund research and treatment of that condition.

Most hospitals are required by law to provide a certain amount of free care to community residents. They set guidelines that patients must meet to be eligible for such benefits.

The government also allocates money for patients within a certain economic standard. The amount is pre-set and isn't determined by the number of patients using the funds. CHM requires members to use these resources if they're eligible for them. This practice is valuable because it helps keep monthly financial gifts low. The money is available for this purpose and CHM members have as much right to this source of funding as any other citizen.

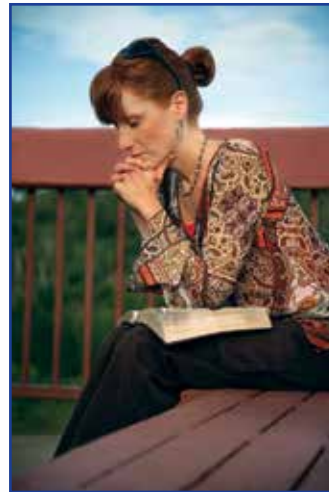
N. WHAT TYPES OF BILLS DOES CHM SHARE?

Christian Healthcare Ministries members share bills for procedures that are generally accepted by the medical community and that are researched, published in reputable medical journals, widely understood and accepted as mainstream medical treatment and have properly listed common procedural treatment (CPT) codes.



For example, here is a **non-exhaustive** list of the types of conditions for which bills are regularly shared by CHM members:

- Abdominal pain
- Accidental ingestion of harmful substances
- Back problems (excluding chiropractic)
- Blood problems and disorders
- Broken bones/fractures/dislocations/sprains (excluding crutches, walkers, etc.)
- Cancer/removal of pre-cancerous tissue
- Carpal Tunnel
- Cataract removal* (See Guideline N.3)
- Diabetes
- Diagnostic imaging tests (MRI, CAT scan, EKG, EEG, etc.)
- Diverticulitis
- Endoscopy, colonoscopy, etc.
- Female health issues
- Gallbladder



- Gastrointestinal
- Heart/cardiovascular
- Hernia repair
- Hip and knee replacement
- Hypertension
- Infections
- Injuries from accidents (for information on motorized vehicle accidents, see Guideline W)
- Internal hemorrhaging
- Kidney stones/gallstones
- Lung, liver, kidney and pancreas problems
- Maternity and complications (see Guideline R)
- Medically necessary reconstructive surgery
- Muscle problems
- Neurological disease
- Pneumonia/influenza
- Podiatry
- Stroke
- Ulcers
- Urology

A list of ineligible expenses appears in the Guidelines Appendix.

1. Alternative treatment, chiropractic and non-eligible bills
 CHM cannot share bills for alternative or chiropractic treatment, including blood work or testing supporting alternative treatment. This Guideline applies regardless of the type of practitioner (naturopaths, homeopaths, medical doctors, etc.). We don't pass judgment on the validity of alternative treatments; however, the reason members have chosen not to share these bills is that CHM doesn't have the capacity to research and test alternative treatments to determine their validity. The reason bills for chiropractic treatment are ineligible for sharing is that CHM members feel expenses for chiropractic care are manageable. When compared to high insurance premiums, most members still save money while setting aside funds for chiropractic expenses. To view a list of other non-eligible types of bills, please see the Appendix section.

2. CHM secondary to other payment sources

Christian Healthcare Ministries is secondary to other payment sources. Before submitting medical bills to CHM, a member must:

(1) submit bills to any insurance, Medicare, Medicaid, Workers' Compensation, fraternal benefits or any other resource available to pay all or part of the bills and (2) receive payment or notice of liability or rejection from such sources.

The following sections are included to protect and be good stewards of the funds you and other members send to share medical bills.

a) Double recovery prohibited

If the amount of bills shared by CHM are more than should have been shared under these Guidelines, CHM may recover the excess amount from one or more of the members it has paid or for whom it has paid or any other person or organization that may be responsible for the costs shared by CHM. No member should benefit from multiple payments for the same cost and thereby profit at the expense of other members. Double recovery by a member takes away resources from other CHM members whose needs have yet to be shared.

b) Subrogation

This section of the Guidelines shall apply when CHM shares costs for your personal injury and you have the right to recover costs and/or damages from another. Becoming a member of CHM and sharing such costs constitutes your acceptance and acknowledgement of this Guideline provision.

CHM is subrogated to all of your rights of recovery to the extent of the costs shared by CHM for which you may be entitled to recover payment from any other person. CHM is subrogated to any right you have to recover payment from the person who caused the illness or injury, that person's insurer or any "uninsured motorist," "underinsured motorist," "medical payments," "no-fault," "Workers' Compensation" or other similar coverage provisions.

CHM's right of subrogation applies with equal force to any and all state, federal or common law claims of survivors, wrongful death, consortium or other similar claims. However, CHM's right

of subrogation shall not exceed the amounts shared or to be shared in the future by CHM.

CHM's subrogation right has first priority to any recovery and takes priority over the injured party, their attorney or any other person or entity with a claim, right or lien upon the recovery. CHM's right to subrogation will apply even if you have not been made whole, are not fully compensated or only partially recover from another person for your injuries.

c) Reimbursement

If at any time you have recovered from any party or through any insurance coverage set forth above, regardless of how you, your legal representative or any other party characterize the recovery, you are obligated to hold in trust for CHM, the whole proceeds of the recovery and must reimburse CHM to the extent of costs shared by CHM within 14 days of receipt of the recovery. At the time of recovery CHM shall have a constructive trust, equitable lien and other equitable rights on the entire funds recovered which can be asserted against any parties who may have possession of a portion of all of the fund.

CHM's reimbursement right has first priority to any recovery and takes priority over the injured party, their attorney or any other person or entity with a claim, right or lien on the recovery. CHM's reimbursement right shall not be reduced for any attorney fees or costs incurred by you or any other party. You will be responsible for payment of any expenses, including attorney's fees and court costs, incurred by CHM to enforce its right of reimbursement.

Any other person or entity with a claim, right or lien on the recovery, CHM's right to reimbursement will apply even if you have not been made whole, are not fully compensated or only partially recover from another person for your injuries.

d) Duties as a CHM member

- You must provide CHM any information requested by CHM within five (5) days of the request.
- You must notify CHM promptly of how, when and where an accident or incident resulting in personal injury to you occurred and all information regarding the parties involved.
- You must cooperate with CHM in the investigation and protection

of CHM's rights.

- You must not settle or compromise any claims you have with other persons unless CHM is notified in writing at least 20 days before such compromise and settlement.

e) Discretionary authority

CHM shall have discretionary authority to instruct the terms and conditions of the Subrogation and Reimbursement provisions and make determinations or construction which is not arbitrary and capricious and protects the interests of the CHM membership as a whole. CHM's determination will be final and conclusive.

3. Cataract surgery

Cataract surgeries for the right and left eye are considered the same medical incident if both procedures occur within 90 days. (See the Guidelines Glossary for the definition of an incident.) If cataract surgery for the second eye occurs more than 90 days after the surgery for the first eye, the surgeries will be considered separate incidents and your personal responsibility amount may be affected (see Guideline O.) Cataract surgery or surgeries occurring in your first year of membership are usually considered pre-existing conditions and bills are authorized according to Guidelines Z and AA.

O. WHEN I HAVE A MEDICAL NEED, AM I RESPONSIBLE TO PAY PART OF IT?

Galatians 6:2 says we should fulfill the law of Christ by carrying one another's burdens. Galatians 6:5 says that everyone should carry their *own load*. The use of the word "load" means there are responsibilities in our lives that we must fulfill. The "burden" referred to in verse 2 describes a load that is too big to be carried alone. A family member dies, your house burns down, you suffer a heart attack—those are burdens too big to carry alone.

Christian Healthcare Ministries members have determined what it means to carry their own load in the realm of health care. Their evaluation was centered on the things that happen in our personal lives that can be planned, scheduled, prepared for, prevented and/or

made affordable with good personal management.

The additional dynamic involved in determining the load members can carry individually is what they can afford individually. CHM recognizes that each person's circumstance is unique to that person, but our members have accepted a general standard that fits within the CHM structure:

- **Gold members** have chosen to be responsible for the first \$500 per unit, per year (see Guideline C for an explanation of units). Before bills can be submitted for sharing, they must exceed \$500 per incident (before discounts).
- **Silver members** have chosen not to share any prescriptions or doctors' bills (except doctors' bills incurred as a hospital patient). Before bills can be submitted for sharing, they must exceed \$1,000 per incident (before discounts). Any medical expense less than \$1,000 per incident is the member's responsibility.
- **Bronze members** have chosen not to share any prescriptions or doctors' bills (except doctors' bills incurred as a hospital patient). Before bills can be submitted for sharing, they must exceed \$5,000 per incident (before discounts). Any medical expense less than \$5,000 per incident is the member's responsibility.

Christian financial advisors Dave Ramsey, Larry Burkett and Howard Dayton all recommend having a small reserve of cash set aside to plan for unexpected emergencies. CHM members have agreed to shoulder the responsibility for smaller medical events such as ear infections, doctor visits for common ailments, etc. Such preparation requires some discipline and foresight.

If the event is more costly than the standards established by these Guidelines, fellow CHM members step in to assist.



In addition, CHM recognizes that there are some credible fields of medicine offering treatment necessary for healthy living; however, the level of expense involved in such treatment is minimal compared to other major

health events. Therefore, the following items have been defined by CHM members as not eligible for sharing because they are “load” expenses:

- dental expenses (Exception: dental expenses incurred due to an accident—other than accidents caused by chewing—are eligible for sharing.)
- vision correction (eye exams, eyeglasses, contact lenses, etc.)
- chiropractic treatment
- routine, maintenance prescriptions
- well visits/routine check-ups totaling less than your personal responsibility amount (see Guideline G).
- a more detailed list of other “load” expenses appears in the Appendix section of these Guidelines

P. WHAT SHOULD I DO ABOUT INCIDENTAL HEALTH EXPENSES THAT AREN'T SHARED BY CHM?

All CHM members can use a savings account to take control of their incidental health care costs (dental, vision, prescription, medical equipment, etc.). Also, CHM often recommends other programs and resources in its monthly newsletter and on its website. These programs and resources offer services that complement CHM’s offering of assistance with major health care costs. For up-to-date information, visit chministries.org/providerlist or call 1-800-791-6225, ext. 5993.



Q. WHAT SHOULD I DO IF I FIND OUT I'M PREGNANT?

1. Obtain medical care as soon as you know you're pregnant.

Call the Christian Healthcare Ministries office if you have questions after reviewing the following instructions. We can share

in your joy, help you get the most from our ability to help you, and (in most cases) send you funds for sharing before your baby is born.

2. **Ask for a prepayment agreement on your clinic/hospital/doctor's letterhead.** These charges are often bundled as a one- or two-day stay (sometimes called a “global fee” or a “Stork Package”) and are significantly less expensive than being admitted to a facility when it's time to give birth. (Note for Silver and Bronze members: Only charges you incur as a patient of a hospital are eligible for sharing.) When asking for a hospital prepayment agreement, keep in mind that room and board charges are not always included in the quoted price.
3. **After your first doctor visit please submit the following items to Christian Healthcare Ministries:** Your prepayment agreement, any itemized bills incurred so far, and completed Needs Processing Forms (download the forms at chministries.org/downloads/NeedsProcessingPacketWeb.pdf.) Early submission speeds the time for bill sharing. Notify the CHM office immediately if your health care provider sets a time limit for reduced charges. (Seven months is common).
4. **Any charge (lab, sonogram, etc.) incurred after the original agreement/bills are submitted should be sent to the CHM office as an “add-on” to the original amount.**

R. ARE MATERNITY BILLS ELIGIBLE FOR SHARING?

Christian Healthcare Ministries offers a maternity program at no extra cost to members. We want this experience to be full of joy and excitement as you welcome new life into the world.



Nifty tip: We highly recommend the Gold level for women who may become pregnant.

1. Gold members

All maternity expenses are eligible for sharing after the \$500 personal

responsibility requirement has been met. Christian Healthcare Ministries will share qualifying needs for pre-natal, delivery (including cesarean and multiple births), home births, midwives (see Guideline R. 11), post-natal (up to six weeks), and complications (mother and baby) with a maximum of \$125,000 per pregnancy, provided the mother joined CHM at least 300 days before the doctor's estimated due date. The maximum per-pregnancy amount of assistance is unlimited with participation in the Brother's Keeper program (see Guideline Y).

2. Silver members

Only maternity bills incurred as a patient of the hospital and above your \$1,000 personal responsibility amount are eligible for sharing by CHM members. The mother must have joined CHM at least 300 days before the stated due date. All fees incurred other than as a patient of the hospital, such as doctor fees for services rendered when you're not a patient of the hospital, ultrasound bills and all similar fees cannot be shared by CHM members. *Exception:* Midwife fees for Silver members are eligible for sharing up to \$2,500 per pregnancy even though these services are not performed in a hospital. See Guideline R.11.

3. Bronze members

Only maternity bills incurred as a patient of the hospital and above your \$5,000 personal responsibility amount are eligible for sharing by CHM members. The mother must have joined CHM at least 300 days before the stated due date. All fees incurred other than as a patient of the hospital, such as doctor fees for services rendered when you're not a patient of the hospital, ultrasound bills and all similar fees cannot be shared by CHM members.

4. Pre-existing maternity needs

If a member joins CHM while she is pregnant, bills for that pregnancy cannot be shared through the regular CHM sharing program or through the Prayer Page. Members must have a due date for delivery at least 300 days after joining CHM for bills to be eligible for sharing.

5. Changing sharing levels

You must be current with all monthly financial gifts throughout the time medical bills are being processed for sharing. If you drop to a lower sharing level, the pregnancy becomes pre-existing to any higher level, including any bills submitted but as of yet not shared. If you are pregnant and change to a higher level, bills for that pregnancy cannot be shared at the higher level. If you discontinue your membership, your medical bills will not be eligible for sharing.

If you intend to change your sharing level, number of units, discontinue your participation or change the status of your membership in any way, please allow 30 days for the change(s) to take effect.

6. Babies as CHM members

Any non-routine medical bills your baby incurs in the first three months after birth are eligible for sharing. After three months the CHM staff will automatically add your new baby to your membership. If the new baby is your first child, your membership will increase by one unit and your monthly financial gift also will increase (Gold: \$150; Silver: \$85; Bronze: \$45). Your financial gift won't increase if your membership is already three units. If you wish to remove the baby from your membership, contact the CHM Member Assistance department at 1-800-791-6225, ext. 5993.



7. Ineligible bills

- Contraceptives or birth control expenses.
- Bills for fertility procedures or treatments.
- Bills for gestation or surrogate maternity procedures, including in vitro fertilization (IVF) and pregnancies resulting from IVF, gestation or surrogate procedures.
- Bills for sterilization or reversal procedures.

- Bills for genetic testing are ineligible unless testing is required to determine treatment for a current medical condition. In all such cases, you or your doctor must submit your medical records.

8. Adoption

When a CHM member adopts a child or otherwise has obtained legal custody with legal responsibility for a child's medical care, that child can be included in your CHM membership. If any other source is responsible, willing or available to pay the child's medical bills, these resources must be exhausted before CHM members can share bills.

9. Unwed mothers

There are times even in the Christian community that unwed women become pregnant. Christian Healthcare Ministries members have agreed not to share medical bills for pregnancies of unwed mothers. Instead, CHM recognizes that in such circumstances the assistance needed goes far beyond financial aid. Therefore, we encourage you to seek help from a compassionate, Christian pregnancy center if you find yourself in this situation. That agency will be best suited to address all of your needs—spiritual, emotional, financial, and physical. You are in our prayers.

10. Congenital conditions

Needs for birth defects or congenital conditions (and bills from resulting conditions) may be submitted for sharing with a maximum total not to exceed \$25,000 per diagnosis. CHM will always assist members with finding other sources of funding for such conditions.

11. Midwives

CHM shares bills from legally-practicing midwives according to the Guidelines set forth for Gold and Silver members (see Guidelines R.1 and R.2). CHM can only share bills from one midwife per pregnancy.

S. HOW DOES CHM WORK FOR MEDICARE-ELIGIBLE PEOPLE?

CHM members or prospective members of Medicare-eligible age



must have Medicare parts A and B to become/remain CHM members with full sharing eligibility. If you aren't eligible for Medicare, your membership will be approved on a case-by-case basis.

If you are Medicare age but choose not to participate in Medicare, CHM can only share the amount of your eligible medical bills that Medicare would not have paid. The outstanding balance would be your responsibility.

1. CHM as a supplement (Gold level)

Many members use CHM as a Medicare supplement. There is no distinction between the Gold level for Medicare age members and non-Medicare age members. Gold level membership does not include expenses from routine doctor visits, maintenance prescriptions or medical treatment below \$500 retail (before any discounts are applied).

2. Out-of-pocket expenses

The amount Medicare pays for a particular incident applies toward your \$500 personal responsibility. Therefore, your out-of-pocket cost is \$0 when Medicare pays \$500 or more for that incident. (See the Glossary section for the definition of "incident.") The amount of your out-of-pocket expenses will depend on your personal and family health history. We recommend that you evaluate your medical situation to make the right choice for you.

T. ARE PRESCRIPTIONS ELIGIBLE FOR SHARING?

1. Gold level

Incident-related (related to the test or procedure performed) prescription costs are eligible for sharing. ("Incident" is defined in the Glossary section of these Guidelines.)



2. Silver and Bronze levels

Silver and Bronze do not include provision for any prescription medication.

3. All sharing levels

Prescriptions used for maintenance treatment and over-the-counter (OTC) medications cannot be shared by CHM members (see Guideline P).

U. DOES CHM SHARE BILLS FOR MEDICAL TRANSPORTATION?

1. Gold members

Christian Healthcare Ministries cannot share bills incurred for transportation from the site of your emergency to a medical facility. Bills for medical transportation are **only** eligible for sharing when:

- a) you are in a life-threatening situation *and*
- b) you are transferred from one hospital to a nearby hospital that can provide the necessary services *and*
- c) the reason for the transfer is because the first hospital cannot adequately care for you. (*Note: The hospital or facility to which you are transferred must be the nearest hospital able to provide the care you need.*)

For example, suppose you visit the emergency room with chest pain. The doctors stabilize you, but determine that they're not equipped to treat you and must transport you to a different hospital. Bills from this scenario are eligible for sharing if it is a life-threatening situation; however, these bills are not eligible if the situation isn't life-threatening. The determination of whether a situation is life-threatening is based on your medical records and accompanying doctor reports.

2. Silver and Bronze members

Medical transportation bills are not eligible for sharing. There often are other provisions for this type of service. We encourage you as a

CHM member to do your due diligence and find out what medical transportation services are available in your area. It will keep costs down for you and all CHM members; it also puts you in control of your health care. Please consider this Guideline when choosing a participation level.



Nifty tip: For example, many rural areas offer transport services for a flat fee, such as \$50 per year. In some cases, this service also includes transportation to your home after you are discharged from the hospital.

Another option is to use the services of volunteer fire departments with trained paramedics. One CHM staff member gave the following example: "If I need emergency transportation while in the service area, the fire department will respond and transport me to a medical facility. I already pay for this service through my local taxes."

3. Missionaries

CHM cannot share medical bills for emergency flights whereby you are transported to the United States from a different country, even if the situation is life-threatening. We strongly encourage you to look into other available resources. Please check with your mission agency for more information.



V. DOES CHM SHARE BILLS FOR MEDICAL APPLIANCES AND EQUIPMENT?

1. Gold members

The cost of medical equipment prescribed by a medical doctor is eligible for sharing up to \$4,000. The equipment must be necessary to sustain life and includes items such as sleep apnea equipment,* aerosol machines, pacemakers, defibrillators, insulin pumps, and oxygen supply/generators. CHM will only share these

expenses after all other forms of available assistance have been exhausted. The costs of additional accessories or supplies acquired after the initial procurement of medical equipment are not eligible for sharing.

**Bills for sleep apnea treatment or equipment prescribed, administered or recommended by a dentist are not eligible for sharing.*

2. Silver and Bronze members

Only devices inserted as part of a surgery are eligible for sharing; the expense is included in the cost of the surgery.

W. ARE BILLS FROM MOTORIZED VEHICLE ACCIDENTS ELIGIBLE FOR SHARING?

1. Licensed motorized vehicles

If members are involved in an accident involving licensed motorized vehicles, bills resulting from the members' injuries are eligible for sharing—up to \$125,000 per diagnosis—**after all other sources of funding are exhausted.**

If members are riding in a non-member's vehicle, the amount available in the non-member's insurance policies must be exhausted before CHM can share medical bills for the members. If the members or non-member driver are not at fault, the amount available in the offending party's insurance policies must be exhausted first.

2. Automobile insurance

There are many variations in insurance policy offerings and numerous state rules and regulations regarding auto insurance. Therefore, CHM has not set a minimum requirement for members regarding auto insurance. **However, for the sake of keeping monthly financial gifts low, we strongly urge you to set the highest possible limit on the medical assistance available through your auto insurance policy. If**

you obtain the lowest limit possible, CHM reserves the right to limit your sharing eligibility at the ministry's discretion.

3. Non-licensed motorized vehicles

CHM can only share medical bills when all safety equipment is worn properly. **A helmet must be worn at all times when operating any vehicle commonly known as an ATV.** ATVs include (but aren't limited to) four-wheelers, three-wheelers and motorcycles. Farm vehicles for which manufacturers don't recommend a helmet (such as tractors and Gator-type vehicles) are an exception to this rule.

4. Non-members

CHM cannot share medical bills for non-members injured in an accident, regardless of the circumstances. Please take this Guideline into consideration when choosing your auto insurance medical pay limit.

X. WHAT IS THE MAXIMUM AMOUNT CHM WILL SHARE FOR A MEDICAL NEED?

After a member's personal responsibility amount has been satisfied, eligible medical bills are shared up to the maximum lifetime limit of \$125,000 *per diagnosis*. For example, a diagnosis of gallbladder problems and a diagnosis of a heart condition would be separate diagnoses; thus, each would be eligible for up to \$125,000 in shared costs.

It's important that you become a Brother's Keeper member to increase your maximum lifetime limit per diagnosis (see Guideline Y).

Y. WHAT ABOUT MEDICAL BILLS EXCEEDING THE MAXIMUM SHARING AMOUNT?



For medical bills exceeding the \$125,000 sharing limit, CHM has a program called Brother's Keeper. Brother's Keeper increases the sharing limit per diagnosis (illness). For multiple diagnoses, each one is eligible for an increased amount in shared costs:

1. Gold members

Signing up for Brother's Keeper provides *unlimited* cost support per diagnosis.

2. Silver and Bronze members

Signing up for Brother's Keeper provides an additional \$100,000 of cost support. With each annual Brother's Keeper renewal, members receive an additional \$100,000 of assistance, accruing up to \$1 million per diagnosis.



For medical needs exceeding \$125,000, Brother's Keeper participants send a *quarterly* designated gift amount (average amount: \$25 per membership unit) to the CHM office, where it is deposited in an audited bank account and sent to other members with catastrophic medical bills. Members receive a quarterly Brother's Keeper letter and statement reflecting how much is due that quarter. They also receive a card with the name of a Brother's Keeper member for whom they can pray and send cards and letters of encouragement.

Brother's Keeper quarterly unit gifts are often less than \$25. Brother's Keeper members also send a \$40 *annual* administrative fee.

Z. WHAT IS A PRE-EXISTING CONDITION?

A pre-existing condition is any medical condition for which you experience signs, symptoms or treatment before joining Christian Healthcare Ministries.

For example, if you have a stent that was inserted for a heart

condition, the stent is considered treatment and your heart condition is pre-existing.

A condition is not considered pre-existing if you have experienced one year without signs, symptoms or treatment for that condition and it is documented by your official medical records. In contrast, cancer is no longer pre-existing if, after your doctor has pronounced you cancer-free or in remission, you have gone *five* years without any signs, symptoms, or treatment.

1. Changing sharing levels

If a member switches from Bronze to Silver or from Silver to Bronze, the pre-existing condition will be authorized at the Bronze level. If a member switches from Silver or Bronze to Gold, any *new* incident for the condition is eligible for the Gold schedule (see Guideline AA.2.) Medical records are used to determine whether an incident is in active or maintenance treatment (see Guideline AA.1.)

AA. ARE BILLS FROM PRE-EXISTING CONDITIONS ELIGIBLE FOR SHARING?

The following sections describe CHM's special programs for pre-existing conditions. Please note that any medical bills considered for these programs must also follow **all** other CHM Guidelines for sharing, such as those regarding participation level, etc.

1. Active or maintenance

We distinguish between pre-existing conditions in an "active" incident and conditions in "maintenance" treatment. (See the Guidelines Glossary for the definition of a medical incident.) Medical bills cannot be shared if, at the time you join CHM, the bills are for pre-existing conditions that are actively undergoing treatment other than with maintenance (routine) medications. If there is any question about whether you're in an active incident, CHM will request your official medical records. If you have gone at least 90 days without testing or treatment and your doctor states that you

are cured or on a maintenance treatment regimen, bills for any new incident related to the pre-existing illness are eligible for sharing according to the information below.

2. Schedule

If these criteria are met, **Gold level members only** can receive assistance with medical bills for pre-existing conditions according to the following schedule:

- **In the first year of membership**, bills incurred for a pre-existing condition are eligible for sharing up to \$15,000.
- **In the first two years of membership**, bills incurred for a pre-existing condition are eligible for sharing up to \$25,000 (\$15,000 during the first year plus \$10,000 during the second year).
- **In the first three years of membership**, bills incurred for a pre-existing condition are eligible for sharing up to \$50,000 (\$15,000 during the first year plus \$10,000 during the second year plus \$25,000 during the third year).
- **After the third year of membership**, the condition is no longer considered pre-existing.



3. Prayer Page

If you are a Gold level member and your medical bills exceed these limits (or if you are a Silver or Bronze member), the excess amount may be eligible to appear on the ministry's Prayer Page, which is printed in the monthly newsletter. Members' names, addresses, medical need explanation and gift updates are included on the page (with the members' permission).

All CHM members are invited and encouraged to give to Prayer Page needs (above regular monthly gifts) as they feel led. Donations for Prayer Page needs sent to the CHM office qualify as tax-deductible charitable contributions.

This portion of our ministry is an amazing testimony to the power

of the Holy Spirit to change people's hearts. To learn more about the Prayer Page, call 1-800-791-6225 (ask for the Prayer Page) or e-mail prayerpage@chministries.org.

4. Changing sharing levels

Silver or Bronze members with a pre-existing condition who change to the Gold level will begin the schedule described above as though they are a new member. If a member changes to a lower sharing level, bills for their pre-existing condition will be shared at the lower level. If a member changes to a higher level, bills for an incident in active treatment cannot be shared at the higher level.

5. Maternity

If a member joins CHM while she is pregnant, bills for that pregnancy cannot be shared through the regular CHM sharing program or through the Prayer Page. Members must have an estimated due date for delivery at least 300 days after joining CHM



for bills to be eligible for sharing. **Please note:** Our Gold program offers a generous maternity program. Silver and Bronze exclude most maternity costs. (To learn more about maternity, see Guidelines Q and R).

BB. HOW CAN I CONTRIBUTE TOWARD PRAYER PAGE NEEDS?

CHM members are encouraged to give to Prayer Page needs over and above their monthly financial gift. They can send their gift to the CHM office. CHM then sends Prayer Page donations to members listed on the Prayer Page, who use the funds to pay their medical bills. Donations sent to Prayer Page recipients through the CHM office qualify as charitable contributions for tax purposes.

In addition, CHM members often send cards and notes of encouragement to members listed on the Prayer Page. The blessings these members report from receiving the cards and notes are well-documented in CHM newsletter stories.

Now! program in your church, **you will receive a free month of CHM membership for every new family who joins as a result of your efforts.** For more information, call 1-800-791-6225, ext. 5993.

DD. WHAT MEASURES ARE IN PLACE TO MAKE SURE CHM OPERATES WITH INTEGRITY AND ACCOUNTABILITY?

1. Board of Directors and internal controls

In accordance with good business practices and the laws governing not-for-profit tax-exempt organizations, Christian Healthcare Ministries has an independent Board of Directors that controls its functions. The names and qualifications of its board members are supplied upon request.

- a. A stringent Board of Directors conflict of interest policy is in place. It requires full disclosure of any ties to CHM and exclusion from discussing or voting on any related topic. The policy has been reviewed and approved by the Internal Revenue Service.
- b. Management and the Board of Directors review regular financial statements and reports on CHM's financial position. The Board also reviews and approves an annual budget.
- c. An annual certified audit is conducted by an outside independent public accounting firm with not-for-profit accounting and auditing experience. It checks all aspects of CHM from the receipt and disbursement of money to the systems and procedures that control operations.
- d. Christian Healthcare Ministries employs a highly qualified and effective chief financial officer.
- e. CHM implemented and abides by the provisions of the Sarbanes-Oxley Act of 2002, which directly addresses fraud prevention. As a non-profit organization, CHM is not required to take this action, but it does so as an additional safeguard.
- f. CHM staff members who receive money do not disburse money.
- g. CHM staff members who prepare checks for payment do not sign the checks.
- h. CHM staff members who sign the checks do not reconcile bank statements.
- i. All disbursements—whether from escrow funds or operating funds—are reviewed by the CHM president and the chief financial officer.

CC. IS THERE AN EASY WAY TO TELL MY FRIENDS ABOUT CHM?

1. Bring-a-Friend

If you tell your friends about CHM and they join as the result of your efforts, you will receive a free month of ministry membership after your friends send their third monthly financial gift. Those who bring a friend each month can be part of CHM for free!

Bring-a-Friend benefits everyone.

Christians benefit from fulfilling Galatians 6:2, which tells believers to carry each other's burdens. Help from fellow Christians comes through CHM to meet health care costs, a critical life need.

Christian Healthcare Ministries benefits from Bring-a-Friend through a stronger member base that shortens the time it takes to help everyone meet medical costs. As more Christians participate, more people are helped. The most effective way to keep monthly financial gift amounts low is to bring more members into CHM. To learn how to bring a friend, visit chministries.org/bringafriend.

2. Acts: Now!

Someone you know does not have a good way to meet health care costs. It may be the person sitting next to you in your church service, Bible study, Sunday School class, small group or some other church function.

To bolster and expand the Bring-a-Friend program, CHM crafted an outreach to local churches. It's called Acts: Now! Acts: Now! is a personal, loving outreach to Christians across the country. It is based on the way believers helped each other in the book of Acts (chapters 2 and 4). The best ambassadors for CHM are the people who are part of it, who are sharing their financial gifts to support their fellow Christians even as their fellow Christians are supporting them.

Acts: Now! can be customized to fit an individual church's specific preferences, schedule, needs and capabilities. By facilitating an Acts:

CHM BOARD OF DIRECTORS 2016



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Jeff Yount

2. Christian Healthcare Ministries standards

a. Mission and Organization

- 1) To glorify God, show Christian love, and experience God's presence as Christians share each other's medical bills.
- 2) Must be filed with and designated by the IRS as a nonprofit 501(c)(3) tax-exempt organization.
- 3) The organization should have written personnel policies—approved by the board trustees/directors—governing the work and activities of all employees.

b. Governing Body

- 1) The board should have no fewer than five (5) unrelated trustees/

directors.

- 2) The majority of board members should be independent (not employees or relatives of employees).
- 3) The board should meet as frequently as necessary to fully and adequately conduct the business of the organization. At a minimum, the board should meet four times a year. Board meetings may be conducted in person or by telephone, video, or online conferencing.
- 4) The board, among other things, should be responsible for:
 - determining the mission of the organization;
 - establishing policies for the effective management of the organization;
 - establishing and approving the organization's conflict of interest policies;
 - approving the organization's budget and periodically assessing the organization's financial performance in relation to the budget;
 - reviewing the results of the annual audited financial statements and evaluating recommendations made in the independent CPA's management letter;
 - hiring the president, determining his/her compensation, and evaluating performance annually;
 - periodically reviewing the appropriateness of the overall salary structure of the organization
 - reviewing and approving written meeting minutes reflecting board actions.

c. Conflict of Interest

- 1) The organization should have a written conflict of interest policy applicable to board members, staff, and volunteers that is approved by the board and that meets or exceeds the Internal Revenue Service recommended policies.
- 2) Conflict of interest statements should be provided to and signed by board members, staff, and volunteers, both at the time of the individual's initial affiliation with the organization and periodically thereafter.

d. Financial and Legal Accountability

- 1) The organization must operate in accordance with an annual budget approved by the board.
- 2) Internal financial statements must be prepared monthly and be



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provided to, and reviewed by, board members at each board meeting.

- 3) Annual financial statements must be audited by an independent Certified Public Accounting firm.
- 4) Copies of the organization's audited financial statements must be provided to anyone upon request.
- 5) Copies of the organization's IRS Form 990 must be provided to anyone upon request.
- 6) The organization must be in compliance with all applicable federal, state, and local laws and regulations.
- 7) The organization must be a corporation in good standing with its state of incorporation.
- 8) The organization must provide employees with a confidential means to report suspected financial impropriety or misuses of the organization's resources.

e. Program

- 1) Limits its membership to individuals who are of a similar faith and who live by biblical principles.
- 2) Open to participation regardless of current medical conditions; provision should be made to share all needs—including pre-existing conditions—even if through different sharing methods.
- 3) Individual sharing levels do not change or vary because of age or medical conditions.
- 4) No one is dropped from membership because of medical conditions.
- 5) Members have freedom to choose their own health care providers.
- 6) Presents amounts that members may contribute with (a) no assumption of risk or promise to pay among the members and (b) no assumption of risk or promise to pay by the organization to the members.
- 7) Provides in a written disclaimer on or accompanying all promotional documents distributed by or on behalf of the organization, including applications and guideline materials that is the same as or substantially similar to the following: *Notice: This program is not insurance and is not offered through an insurance company. Whether anyone chooses to assist you with your medical bills will be totally voluntary, as no other member will be compelled by law to contribute toward your medical bills. As such, this program should never be considered insurance. Whether you receive any payments for medical expenses and whether or not this program continues to operate, you are always personally*



responsible for the payment of your own medical bills.

APPENDIX: BILLS INELIGIBLE FOR SHARING

1. Bills incurred prior to joining Christian Healthcare Ministries
2. Dental expenses
 - Exception: Dental expenses incurred due to an accident—other than accidents caused by chewing—are eligible for sharing.
 - Expenses from Temporomandibular Joint Disorders (TMJ/TMD) are not eligible for sharing. This exclusion applies regardless of variations in diagnostic coding (i.e. micrognathia, congenital malformations of the jaw, etc.), where treatment is being rendered, or the type of practitioner providing the treatment.
 - Bills for sleep apnea treatment or equipment prescribed, administered or recommended by a dentist are not eligible for sharing. (See Guideline V.1.)
3. Incidental medical expenses: vision correction (optometrist services, eye exams, eyeglasses, contact lenses, etc.); audiological expenses; chiropractic treatment; routine, maintenance prescriptions; over-the-counter medications; well visits/routine check-ups and related testing (see Guidelines O and P)
4. Elective, non-health related cosmetic surgery. Bills from medically necessary breast reductions are eligible for sharing.
5. Weight reduction programs or procedures
6. Abortions or births from unwed mothers (see Guideline R.9)
7. Infertility testing or treatment; sterilization or reversal (see Guideline R.7)
8. Gestation or surrogate maternity procedures; in vitro fertilization and associated maternity bills (see Guideline R.7). Genetic testing is ineligible unless required for determining treatment for a current medical condition. Medical records must be provided.
9. Congenital conditions (limits apply; see Guideline R.10)
10. Psychological treatment, tests or counseling. Only emergency room bills incurred to physically stabilize the patient are eligible

for sharing.

11. Prosthetics
12. Medical supplies, including (but not limited to): syringes, test strips, lancets, orthotics, batteries, etc.
13. Medical appliances and equipment, including (but not limited to): hearing aids, breast pumps, crutches, etc. (Some equipment qualifies but limits apply; see Guideline V.)
14. Alternative treatment (See Guideline N)
15. Non-medical expenses such as travel expenses, postage, shipping, finance charges, interest, nutritionist services, phone calls, private room, etc.
16. Bills incurred as the result of the abuse of drugs or alcohol; costs incurred from self-inflicted, non-accidental incidents
17. Bills incurred from motorized vehicle accidents in which members were not wearing a helmet or wearing the proper safety equipment (see Guideline W)
18. Medical transportation (limits apply; see Guideline U)
19. Immunizations
20. Nursing home care/rehab housing
21. Developmental or educational therapy; for Gold members, only therapy related to an eligible illness (stroke, paralysis, etc.) is eligible for sharing. (See Guideline G.1.)

CHRISTIAN HEALTHCARE MINISTRIES GLOSSARY



You'll find that familiarizing yourself with these terms is very helpful in managing your CHM membership and understanding the health cost sharing process.

Authorize: Authorization is the process all medical bills undergo once they are submitted to the CHM office. CHM's Needs Processing representatives approve bills for sharing according to the CHM Guidelines and the member's participation level.

Bring-a-Friend: Bring-a-Friend is a program in which members encourage Christian friends, neighbors and extended family to join CHM and benefit from the joy of knowing that their monthly financial gifts also will help other Christians. **You'll receive a free month of CHM participation for each new membership you bring into CHM.** The free month is applied after your friend submits his third monthly gift. (To receive proper credit, make sure that your name and member number appears in the sponsor section of your friend's Member Application.)

Brother's Keeper: Brother's Keeper is a program for medical bills exceeding the \$125,000 per diagnosis sharing limit. To learn more, see Guideline Y.

Checklist of Understanding (COU): The Checklist of Understanding (COU) is a form new CHM members receive with their welcome packet that must be completed and returned to CHM as quickly as possible. The COU is a legal document stating you understand that CHM is a voluntary cost-sharing ministry and not a health insurance company. The COU must be on file with Christian Healthcare Ministries before we can share your medical needs; it corrects insurance regulators who may incorrectly assume that CHM members do not understand the difference between voluntary health cost-sharing and health insurance.

Illness: An illness is a diagnosis of a disease, injury or medical condition that has been identified and can be treated once or multiple times (multiple incidents). CHM sharing limits are determined by illness. Members can receive up to \$125,000 per illness in the regular sharing program and up to \$1 million or more per illness by participating in the Brother's Keeper program.

Example 1: Diabetes is an illness that can be treated at a maintenance level but can flare up and create an incident. The incident (medical bills related to the flare-up) has a definite start and end date; the illness can last a lifetime.

Example 2: Your knee hurts so you go to the doctor, who orders an MRI. After viewing your test results, he diagnoses you with arthritis. He gives you a cortisone shot and your knee soon feels better.

The diagnosis of arthritis in your knee is an illness. The medical examinations, testing and treatment you undergo is an incident. Two years later, your knee starts to hurt again. You return to the doctor, who says your arthritis has flared up. He gives you another cortisone shot. After two weeks, you go back because it still hurts. He tells you that you need a knee replacement and schedules the surgery. You undergo surgery and physical therapy. After a few months, he gives you a clean bill of health. This scenario describes a second incident within the illness of arthritis in your knee.

Incident: An incident includes medical treatment or testing that lasts until one of the following events occurs: 1) a certain medical condition is cured according to official medical records; 2) treatment is at a routine maintenance level; or 3) you experience 90 days without any kind of testing or treatment for that particular condition. The medical bills incurred from the first test to the last treatment before the doctor releases you to a regular, routine maintenance regimen are considered a single incident. If 90 days pass and you receive no further testing or treatment, any future bills you incur will be considered a separate incident. Personal responsibility amounts for the Silver and Bronze participation levels are per incident (Gold personal responsibility is per unit, per year).

Example: You go to the doctor due to pain in your side. He examines you and gives you some instructions before sending you home. The next week you return because the pain has continued. The doctor orders a blood test and an ultrasound. After reviewing the results, he diagnoses you with appendicitis and sends you to the hospital. He performs an appendectomy. The hospital releases you with instructions to visit the doctor's office in one week for follow-up. At that visit the doctor tells you come back again the following week, at which time he pronounces you cured. Medical bills you incur for each of these situations each fall under the category of a single incident.

Member Gift Form: The Member Gift Form is a monthly statement notifying you that your financial gift amount is due. Along with your membership account statement, the Member Gift Form includes a ministry update letter each month. Reading the letter keeps you informed on ministry policies, activities and events.

Need: A need is an individual medical bill. It's often necessary for CHM members and staff to distinguish between individual medical bills. A need is categorized under a particular incident, which falls under a certain illness/diagnosis.

Newsletter: The CHM monthly newsletter contains articles and information helpful and relevant to ministry members. All members are strongly encouraged to read each newsletter to stay up-to-date on CHM news, activities, and policy changes.

Personal responsibility: Personal responsibility is the amount CHM members are responsible to pay for a medical event. Gold level members are responsible for \$500 per unit, per year (total bills incurred per medical incident must exceed \$500). Silver and Bronze members have personal responsibility amounts of \$1,000 and \$5,000 per incident, respectively. All CHM members are responsible to pay incidental medical expenses, such as maintenance prescriptions, dental expenses, etc. (see Guideline O).

Faith requires mutual sharing of needs. According to Galatians 6:2-5, every believer should carry his own load in addition to bearing the burdens of others. CHM practices this biblical principle through the concept of personal responsibility. (Bill discounts, insurance, Medicare, payments or other assistance can apply toward your personal responsibility amount and reduce out-of-pocket costs. This feature is unique to CHM.)

Pre-existing condition: A pre-existing condition is any medical illness with signs, symptoms or treatment predating membership in Christian Healthcare Ministries (even if it has not been diagnosed). CHM has cost-sharing programs for bills from pre-existing conditions (see Guidelines Z and AA).

Reduction (discount): A reduction is a discount given by a health care provider. CHM members are technically self-pay patients and often qualify for reductions on their medical bills. Reductions represent nearly 60 percent of all medical bills submitted to CHM; without them,

CHM monthly financial gifts would be more than twice as high. Please don't be shy about asking for a reduction.

Share/sharing: Sharing occurs when CHM sends funds (members' monthly financial gifts and extra gifts) to members whose medical bills are eligible according to the CHM Guidelines, or when the ministry reimburses members who paid for eligible medical needs out-of-pocket. We take care to make sure our members understand that CHM is not insurance and does not assume the legal obligation to pay your medical bills. Your fellow members voluntarily share your medical bills and you use that money to pay your bills. For more than 30 years, CHM members have faithfully given money each month to share each other's medical expenses. Members have shared more than \$1 billion in medical costs!

Sharing level: There are three service levels from which members can choose: Gold (\$150 per unit, per month), Silver (\$85 per unit, per month) and Bronze (\$45 per unit, per month). The dollar amounts are called monthly financial gifts and are required for medical bill sharing eligibility. Medical bills are approved for sharing based on the CHM Guidelines and the member's sharing level. Switching levels affects the amount and type of medical bills eligible for sharing.

Submit needs/bills: Bills are submitted to CHM via U.S. mail, fax, or by using the online Member Portal at chministries.org/members. *Email submission is not recommended because it's not a secure means of transmitting your confidential information; CHM cannot be held liable for security infringements.* A complete guide to submitting bills is available at chministries.org/stepbystep. CHM isn't an insurance company and cannot be billed by health care providers. Members must be billed directly, after which members must send the itemized bills to the ministry within six months of the date of service. The faster bills are submitted to the CHM office, the faster they can be presented for sharing among CHM members. Bills are shared based on when they are received by the CHM offices, not on when they are incurred.

Units: A unit is one qualifying individual. Two units are two qualifying immediate family members; three units are three or more qualifying immediate family members. No family's monthly financial gift exceeds

three units, regardless of the number of immediate family members. The number of units determines monthly financial gift and personal responsibility amounts. For more details, see Guideline C.

LEGAL NOTICES

Christian Healthcare Ministries (hereinafter "CHM"), a not-for-profit religious organization, is not an insurance company. No ministry operations or publications are offered through or operated by an insurance company. CHM does not guarantee or promise that your medical bills will be shared or assigned to others for financial gifts. Whether any CHM member chooses to share the burden of your medical bills will be entirely voluntary. As such, CHM should never be considered as a substitute for an insurance policy. Whether you receive any financial gifts for medical expenses and whether CHM continues to operate, you are always liable for any unpaid bills.

Certain states require us to notify their residents of our legal status in a specific way:

Especially for Florida Residents: A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll-free, within the state of Florida. Registration does not imply endorsement, approval, or recommendation by the State of Florida. 1-800-435-7352 Our Florida registration number is SC-03543. CHM has not retained any professional solicitors or professional fundraising consultants and 100% of each contribution is received by our organization.

Especially for Kentucky Residents: Notice: CHM is not an insurance company. CHM's related operations and publications are not issued by an insurance company and they are not offered through an insurance company. CHM does not guarantee or promise that your medical bills will be shared or assigned to others for financial gifts. Whether any member chooses to share the burden of your medical bills will be totally voluntary. CHM should never be considered as a substitute for an insurance policy. Whether you receive any gifts for medical expenses, and whether or not CHM continues to operate, you will always remain liable for any unpaid bills.

Especially for Maryland Residents: Notice: CHM is not an insurance company. CHM's related operations and publications are not issued by or offered through an insurance company. CHM does not guarantee or promise that your medical bills will be shared or assigned to others for financial gifts. No other member will be compelled to contribute toward the cost of your medical bills. Therefore, CHM should never be considered a substitute for an insurance policy. This activity is not regulated by the Maryland Insurance Administration, and your liabilities are not covered by the Maryland Life and Health Guarantee Fund. Whether or not you receive any financial gifts for medical expenses and whether or not CHM continues to operate, you are always liable for any unpaid bills.

Especially for Oklahoma Residents: This is not an insurance policy. It is a voluntary program that is neither approved, endorsed or regulated by the Oklahoma Department of Insurance and the program is not guaranteed under the Oklahoma Life and Health Insurance Guaranty Association.

Especially for Pennsylvania Residents: Notice: CHM is not an insurance company. CHM's related operations and publications are not issued by or offered through an insurance company. CHM does not guarantee or promise that your medical bills will be shared or assigned to others for financial gifts. Whether any member chooses to share the burden of your medical bills will be totally voluntary. As such, CHM should never be considered as a substitute for insurance. Whether you receive any financial gifts for medical expenses, and whether or not CHM continues to operate, you are always liable for any unpaid bills.

Especially for South Dakota Residents: CHM is not an insurance company. CHM's program is not an insurance contract. This plan does not fall under the jurisdiction of the South Dakota Division of Insurance and the plan is not covered under the South Dakota guaranty fund.

Especially for Wisconsin Residents: Attention: CHM is not an insurance company. CHM's related operations and publications are not issued by or offered through an insurance company. CHM does not guarantee or promise that your medical bills will be shared or assigned to others for financial gifts. Whether any member chooses to share the burden of your medical bills is entirely voluntary. CHM should never be considered as a substitute for an insurance policy. Whether or not you receive any financial gifts for medical expenses, and whether or not CHM continues to operate, you will always remain responsible for the payment of your own medical bills.

Christian Healthcare Ministries is a health cost sharing ministry and is an eligible option under the national health care bill (Affordable Care Act) signed into law on March 23, 2010. Christian Healthcare Ministries meets each of the qualifications set forth for health cost sharing ministries in the U.S. health care legislation. Alternately, you can use CHM as a supplement to health insurance.