



Liberty
HealthShareSM

2022 Sharing Guidelines Changes | FAQ

MARCH 1, 2022

Important Information on Sharing Guidelines Changes:

Why did the Board of Directors approve changes to the Sharing Guidelines?

Our leadership team and Board of Directors have been finalizing a plan to address our outstanding backlog. The first components of this plan, Sharing Guidelines changes and new programs, were communicated last Fall. We also took steps to negotiate with providers to reduce the amounts of larger expenses so they would be more manageable.

Guiding us in our decision-making was Liberty HealthShare's Mission: Shepherd the Christian tradition of healthcare sharing through prayer, education, personal responsibility, and stewardship of the community's resources. We've amended our Sharing Guidelines to steward our shared resources and decrease our sharing times. We are committed to helping to facilitate sharing of eligible medical expenses for our committed members.

What are the Sharing Guidelines changes?

- Excessive charges (Balance bills) are no longer eligible for sharing.
- Medical expenses \$200 or less (per visit/per member) are not eligible for sharing and will not apply to the AUA. There are exceptions for wellness, screenings, vaccinations, chiropractic/acupuncture/ancillary therapies and DPC membership.
- The first \$500 in charges for qualifying emergency room services are not eligible for sharing unless a resulting hospital admission occurs within 23 hours.
- Prenotification is no longer required for cancer diagnosis, chiropractic care, acupuncture, diagnostic mammogram, diagnostic colonoscopy, complementary or alternative medical (CAM) management/integrative health and ancillary therapies (Physical Therapy, Speech Therapy, Occupational Therapy, Respiratory Therapy).
- Sharing limits have been added for chiropractic care, acupuncture, osteopathic manipulative treatment, ancillary therapies and naturopathic/alternative treatments or medication, Complementary Alternative Medicine/Integrative Health.

When are the amended guidelines effective?

- Sharing Guideline changes are **effective May 1, 2022**
- Please visit your ShareBox to read the Sharing Guidelines Amendments.

Is this an indication that the changes you made in December didn't work?

Absolutely not. Those actions will take some time to realize their full impact and are only a part of the overall strategy to address the backlog.

What is a balance bill?

Balance bills are medical charges that exceed a fair and reasonable amount for a medical service. As self-pay patients, healthsharing members agree to share discounted, fairly-priced medical expenses. After an eligible medical expense has been submitted to your sharing community, it is either applied to your Annual Unshared Amount (AUA) or it is shared by other members. After receiving payment some providers demand the remaining balance of their submitted medical expense. This is a balance bill.

How does not sharing balance bills benefit members?

A major factor of the backlog is balance bills. Nearly 20% of medical expenses that are submitted to our healthsharing community are balance bills. These are expenses that result when healthcare providers seek payment in excess of the fair and reasonable amount already shared by members. In other words, 80% of our members' providers accept the repriced amount, while 20% of those providers add to our SharePower imbalance. The SharePower used for excessive charges is not available for fair and reasonable medical expenses.

Why this new position on balance bills?

It is not new. Our Sharing Guidelines have always included provisions related to excessive charges. These provisions note that charges in excess of fair and reasonable amounts may not be eligible for sharing. Liberty HealthShare has provided resources to enable our members to research and select quality providers who charge a fair price for medical services and we will continue to provide a service that will advocate on behalf of our members to reduce balance bills.

What is an initial non-sharable amount?

An initial non-sharable amount is the portion of a medical expense that is the member's personal burden and not eligible for sharing. These initial non-sharable amounts should not be considered burdens carried by other members and setting a minimal non-sharable amount will help add to our SharePower for true member burdens. Eligible medical expenses in excess of these amounts may be shared and will be applied to a member's AUA according to their program.

Why are you instituting this \$200 initial non-sharable medical expense amount?

Our backlog consists of a very high number of medical expenses submitted that are under \$200. Healthsharing was founded on faith-based principles that provided the opportunity for a community of like-minded people to share in one another's burdens not their everyday loads.

Are wellness visits subject to this \$200 limitation?

Annual preventative wellness visits and related lab work are eligible for sharing, up to a maximum of \$400 of the fair and reasonable charges as determined by Liberty HealthShare and are not subject to the AUA nor subject to guideline limitations for medical expenses \$200 or less.

Are preventative screenings subject to this \$200 limitation?

Preventative screenings are not subject to the guideline limitations for medical expenses \$200 or less.

What about vaccinations?

Vaccinations are not subject to the guideline limitations for medical expenses \$200 or less.

How does this \$200 limitation impact members who use Direct Primary Care?

DPC membership is not subject to guideline limitations for medical expenses \$200 or less.

Why are you instituting a \$500 initial non-sharable amount on emergency room visits?

Our SharePower has been heavily taxed with rising medical costs and utilization. Adding to this, a majority of emergency room visits submitted have been by members with medical needs better suited to their primary care physician, not true emergencies. To encourage good stewardship and utilization of our resources, the \$500 initial non-sharable amount will encourage members to utilize lower-cost urgent care and outpatient clinics for treatment of acute accident, injury or urgent illnesses rather than the emergency room.

What are you changing in regards to prenotification?

Prenotification is no longer required for cancer diagnosis, chiropractic care, acupuncture, diagnostic mammogram, diagnostic colonoscopy, complementary or alternative medical (CAM) management/integrative health and ancillary therapies (Physical Therapy, Speech Therapy, Occupational Therapy, Respiratory Therapy).

What are the new sharing limits for chiropractic care, acupuncture, osteopathic manipulative treatment and ancillary therapies?

These medical services will be eligible for sharing up to \$50 per visit by a licensed provider with a \$1,000.00 maximum share limit per member per membership year (inclusive of **ALL** chiropractic, acupuncture, osteopathic manipulative treatment, complementary or alternative medical (CAM) management and ancillary services) and subject to the AUA.

What are the new sharing limits for Naturopathic/Alternative Treatments or Complementary Alternative Medicine/Integrative Health?

These medical services will be eligible for sharing up to a \$1,000.00 maximum share limit per member per membership year (inclusive of ALL naturopathic, alternative treatments or medication, complementary alternative medicine and integrative health) and subject to AUA.

Why have these Sharing Guideline changes been made?

Members are committed to both giving and receiving. This is a dual effort, and our members are committed to this process. As a ministry, this is how we ensure that we have enough shared resources to share medical bills. The cost of healthcare continues to rise and we make choices to help our members reduce their healthcare expenses in a community of other like-minded people.

How do we protect our community SharePower?

This is the core of our healthsharing community, our collective resources that help our members in need. To help steward our resources, we ask members to understand what a healthsharing community is and what it isn't. Our language, processes and goals are community focused and centered on one another.

How will this impact medical expenses that haven't been shared yet?

These changes will help us be successful in our effort to address our backlog, reduce our sharing times and return to providing the kind of service members deserve and expect. Beginning May 1, we will strategically address the pre-2022 backlog by dedicating a percentage of SharePower each month. Our goal is to share eligible medical expenses submitted in 2022 in less than 120 days.

If I cancel my program, will my expenses be shareable?

Outstanding eligible medical expenses will be shared according to the Sharing Guidelines. Only Active Sharing Members in Good Standing are eligible to share medical expenses. Any eligible expenses incurred and submitted at least 60 days prior to a member's change in active status may be shared. Expenses incurred or submitted within 60 days of a member's change in active status will not be eligible for sharing.

What if I am scheduled to cancel and change my mind?

If a member changes their mind within the 60 days of cancellation, they can reactivate their membership without reapplying for membership.