



# Welcome to Universal HealthShare!

---

We're happy you've chosen to join Universal HealthShare. Good things happen when people share. This *Welcome Booklet* will walk you through your membership in Universal HealthShare and provide you with important information, links to valuable resources, and answers to frequently asked questions.

## Create Your Account

### Create Your Universal HealthShare Account

Visit our website at [www.UniversalHealthFellowship.org](http://www.UniversalHealthFellowship.org). At the top of the website, click on “Member Login.” The first time you visit our site you’ll be taken to a page where you can register for a new account. We’ll ask you to confirm that information, and then your login will be set up.

### Find Your Registration Materials

You can always find your current registration materials by accessing your account from our web page, as described above.

## Things You Need to Know

### Get the Details about Universal HealthShare

Do you want to dive into the details of your Universal HealthShare program? Visit your Member Portal to access the *Universal HealthShare Program & Guidelines*. This detailed publication will help you understand how your sharing program works, which medical needs are eligible for sharing, which are excluded from sharing, pre-existing condition limitations, waiting periods, and much more. *Universal HealthShare Program & Guidelines* (called *Guidelines* in the rest of this Welcome Booklet) is subject to change from time to time. The current version will always be published in your Member Portal.

## Universal HealthShare is NOT insurance.

### Here's why it isn't.

*The choice to become a Universal HealthShare member and share in other member's medical expenses is completely voluntary. Your monthly sharing contributions are voluntary. They are non-refundable gifts that help other Universal HealthShare members with their eligible expenses and help cover the operational and administrative costs of Universal Health Fellowship. In the same manner, voluntary contributions from other members are used to help share your eligible health care expenses.*



Because Universal HealthShare is not insurance, our Ministry – Universal Health Fellowship – is neither licensed nor registered by departments of insurance. Also, since there is no insurance policy or “policy term” involved, there is no defined time period for joining. Join whenever you wish and remain for as long as you voluntarily make recommended sharing contributions and meet other commitments to the Ministry and fellow Members.

## Read the Legal Notices

Universal HealthShare is not insurance and many state governments have published legal notices to inform their constituents about sharing organizations. Additionally, some states have adopted their own Individual Mandate, or personal responsibility regulations

replacing the Federal requirement which is no longer in force. It is important for each member to be familiar with their state notices and tax laws regarding sharing programs.

The state Legal Notices serve to further clarify that sharing programs are not health insurance plans. To read notices from all states that have issued them, click here:

<http://www.universalhealthfellowship.org/wp-content/uploads/2020/02/UHS-State-Legal-Notices-UHS-SLN-22820.pdf>

An additional notice discusses the federal and state Individual Mandates for health care programs. To read this notice, click here.

<http://www.universalhealthfellowship.org/wp-content/uploads/2020/02/UHS-State-Mandate-Penalties-Disclaimer-UHS-SMPD-22820.pdf>

## Completing Your Questionnaire

To activate membership in UHS AFA Program, you'll be asked to complete a detailed Medical Questionnaire for each member of the household within the UHS Member Portal. The Medical Questionnaire is required in order to create each member's initial health profile that will be used in supporting your families' health needs. Certain pre-existing conditions mean some sharing members' medical expenses may not be subject to sharing and some will have higher-cost or more frequent medical needs than others. Our sharing programs must accommodate this.

The information you provide in the Medical Questionnaire will be kept confidential and must be complete and accurate as it is used to determine any pre-existing conditions you or a member of the household may have that may affect how your medical expenses are shared. You are not eligible for sharing for medical needs until the Medical Questionnaire has been completed and your pre-existing conditions, if any, have been reported and confirmed.

## 90-Day Waiting Period

There is a 90-day waiting period before any other Medical Expense Need may be eligible for sharing, including, without limitation, any Medical Expense Need for an Annual Routine Physical or Well Child Exam. This 90-day waiting period does not apply for the Office Visit charge for Primary Care or Urgent Care visits.

## Understand Sharing vs. Conditional Membership

Sharing Members participate each month by contributing at least the suggested Monthly Share Contribution to share in another member's medical needs. If you are a Conditional Member of Universal HealthShare, you will be given an increase in the Monthly Share Contribution amount and possibly additional Membership requirements to help you take steps to improve your health.



Conditional Members are those with health conditions that may be improved or eliminated by a change in behavior, such as weight loss or smoking cessation. Any person accepted for Membership who is a Smoker/Nicotine User or suffers from Obesity will automatically be treated as a Conditional Member. If you are a Sharing Member and you develop a health condition that may be improved or eliminated by a change in behavior, Universal HealthShare may change you to a Conditional Member.

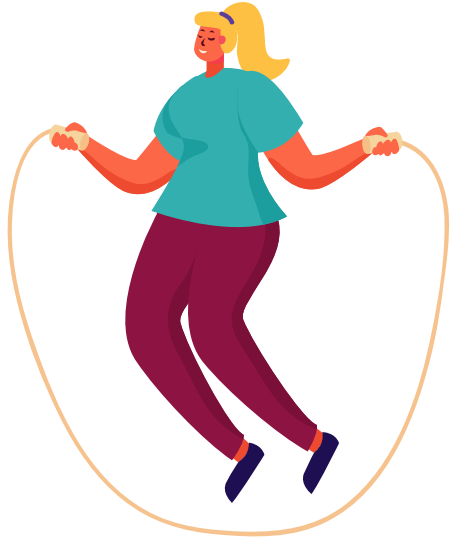
## Maintaining a Healthy Lifestyle

To qualify as an Active Member, you must provide a completed Membership Application, including a detailed medical history.

Whether you are accepted as an active member, or a Conditional Member, you must accept and comply with the lifestyle requirements in the *Guidelines* including, without limitation, the following:

1. Refrain from the use of tobacco or nicotine, in any form, smoking of any kind and any tobacco or smoking substitutes. You must attest that you have abstained from the use of tobacco, nicotine, smoking and substitutes for at least the 12 months preceding the date of your application.
2. Refrain from excessive use or abuse of alcohol. To be eligible for membership, applicants must attest that they have not abused or used alcohol to excess at any point during the 12 months preceding the date of their application.
3. Avoid misuse and abuse of prescription drugs. To become a Member, applicants need to attest that they have not misused or abused legal drugs, such as prescriptions or over-the-counter medication, at any point during the 12 months preceding the date of their application.

4. Abstain from the use of Illegal Drugs. To be eligible for membership, applicants need to attest that they have not used any illegal drugs at any point during the 12 months preceding the date of their application.
5. Exercise regularly and eat healthy foods that do not harm the body.
6. Refrain from engaging in hazardous activities and behaviors that evidence a willful disregard for personal health and safety.

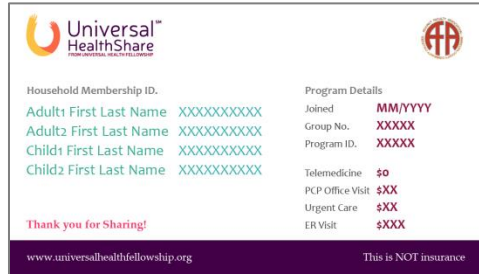


## How Universal HealthShare Works

### Understand Your Membership Card

**Find a provider.** Universal HealthShare has joined the Arizona Foundation Medical Care (AFMC) Network that gives you access to the largest PPO (Preferred Provider Organization) in the U.S. This means if you choose to work within the AFMC Network you will be assured of a quality provider who has agreed to provide favorable billing rates to patients within the AFMC Network, and to bill your sharing program for any eligible medical needs before billing you.

You may choose a provider who is outside the AFMC Network. If you do so, your sharing program will reimburse eligible expenses only for the lesser of in-network or out-of-network provider rates. Also, an out-of-network provider is not obligated to bill Universal HealthShare. They may ask that you provide payment as a self-paying patient.



Universal<sup>SM</sup> HealthShare

Household Membership ID.

Adult1 First Last Name XXXXXXXXXXXX  
Adult2 First Last Name XXXXXXXXXXXX  
Child1 First Last Name XXXXXXXXXXXX  
Child2 First Last Name XXXXXXXXXXXX

Program Details

Joined MM/YYYY  
Group No. XXXXXX  
Program ID. XXXXXX

Telemedicine \$0  
PCP Office Visit \$XX  
Urgent Care \$XX  
ER Visit \$XXX

Thank you for Sharing!

www.universalhealthfellowship.org

This is NOT insurance

To find a provider within the AFMC Network, call PAS Customer Service Monday through Friday from 8 a.m. to 8 p.m. at 1 (888) 366-6243 (Eastern Time) and identify yourself as a Universal HealthShare program participant who is accessing AFMC Network for Sharing programs. You may also search online at [www.afmc.com/providersearch](https://www.afmc.com/providersearch)

**Billings.** Bills for eligible medical needs should be sent to UHS Needs, PO Box 17580, Clearwater, FL 33762.

For Pre-notification or Customer Service call: 1 (888) 366-6243  
To find a provider visit: <https://www.afmc.com/providersearch>  
For Telemedicine call: 1 (888) 501-2405  
Send needs to UHS Needs, PO Box 17580, Clearwater, FL 33762

Pre-notification is required before these procedures will be eligible for sharing:

- All Inpatient Hospital Confinements
- All Surgical Procedures – Inpatient, Outpatient and Ambulatory
- Organ and Tissue Transplant Services
- Cancer Treatment and Oncology Services
- Independent Lab Tests and Imaging
- Home Health Care Services
- Carpal Tunnel Treatments

Report all Emergency Hospital Admissions and Maternity Admissions for Pre-Notification within 48 hours of admission, or on the next business day after admission, to be eligible for sharing.  
If you're not certain whether pre-notification is necessary, please call us at 1 (888) 366-6243.

**For Medical Emergencies Seek Immediate Medical Help.**

UHS-9HC-21420

**Pre-Notification.** The other side of your card describes the procedures that require pre-notification before they can be considered for sharing, and how to

obtain that pre-notification. If you ever have questions about when to pre-notify us, call us at 1 (888) 366-6243.



**Pre-Certification.** Please note that a few rare procedures require pre-certification over and above pre-notification, including a requirement for a second medical opinion. These conditions are:

- Transplant of any organ or tissue
- Coronary bypass or graft of any kind
- Knee or hip replacement

These conditions must be pre-certified before they can be qualified for sharing. To begin pre-certification, call our customer service team. They will instruct you on the process to follow.

**Visit your provider.** It is your responsibility to confirm your provider or facility's continued participation in the AFMC Network and accessibility under your sharing program. When scheduling your appointment, specify that you have access to the AFMC Network through your Sharing program, confirm the provider's current participation in the AFMC Network, their address and that they are accepting new patients. Please follow pre-notification procedures as described above. To ensure proper handling of your Medical Need, always present your current benefits ID card upon arrival at your appointment. Please note: AFMC and its subsidiaries are not insurance companies, do not pay claims, and do not guarantee health benefit coverage.

## Prescription Drug Sharing and Discount Services

Prescription drugs are only eligible for sharing when provided by a Hospital as part of inpatient treatment or provided by a Facility during an outpatient surgical procedure. Medications are not otherwise sharable, but there are drug discount services available from independent third parties. We don't endorse or profit from any

discount program, but we encourage you to contact them to learn how they may help. Here are some links to explore:

- [www.RXassist.org/faqs/drug-discount-cards](http://www.RXassist.org/faqs/drug-discount-cards)
- [www.BlinkHealth.com](http://www.BlinkHealth.com)
- [www.GoodRX.com](http://www.GoodRX.com)
- [www.WeRX.org](http://www.WeRX.org)

## Ask for Discounts!

Even if a medical service is not eligible for sharing through Universal HealthShare, your AFMC providers may agree to extend a special discount to you for services rendered. At the very least, ask for one. They are not obligated to provide one to you but ask for one.

## Understand Your Explanations of Sharing (EOS)

Explanations of Sharing (EOS) notices are mailed to you periodically as you incur eligible medical expenses. They will describe:

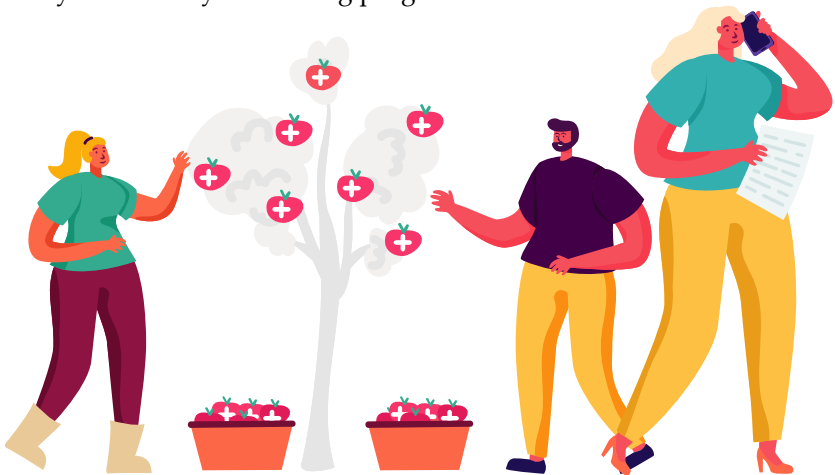
- The portion of the expense that is sharable
- The portion of the expense that is owed by you

## Know Your Non-Sharable Amount

Your Non-Sharable Amount or NSA is the amount of medical expenses you must pay before your medical expenses become eligible for sharing. Universal HealthShare offers multiple programs, so the amount you pay may vary. To learn your NSA amount, refer to your program information in your Welcome Kit.

## Making Voluntary Monthly Contributions

For your monthly contributions to Universal HealthShare, including enrollment and membership fees, we ask that you use ACH as an alternative to credit cards. ACH stands for Automated Clearing House, and it's the lowest fee way to move money from bank to bank – often much lower than credit card transactions. To use ACH, call our customer service line and ask to be set up for ACH. They will help you in a one-time process that will allow you to make your voluntary contribution each month with less fuss and less expense. Before you get on the phone with them, please have your checking account information handy. You will need your bank address, routing number and account number. Your bank routing number is a nine-digit code: the first set of numbers printed on the bottom of your checks, on the left side. Keeping costs lower is good for you and everyone else in your sharing program!



## Your Free Telemedicine Resources

If you are not experiencing an emergency, consider using our Telemedicine service. It's free and it allows you to contact a medical professional right away via your telephone 24x7 for a consultation

about next steps towards improved health and wellness.

Telemedicine will often be the fastest, lowest cost way for you to access health care services because the consultations are available to you for no consultation fee. For telemedicine, register online at [www.MDLIVE.com/FlexCare](http://www.MDLIVE.com/FlexCare). To activate telemedicine consultations, or to register via phone, call 1 (888) 501-2405.

## Primary Care, Specialty Care & Urgent Care Visits

As soon as you join your sharing program, primary care, specialty care and urgent care visits are immediately available. You must pay a Consultation Fee for each Primary Care, Specialty Care and Urgent Care visit at the time of your visit. The remaining portion of the Office Visit charge will be immediately sharable at 100% – regardless of whether your monthly Non-Sharable Amount has been met. But, for medical expenses in addition to the consultation fees that may happen during or as a result of such visits, your Non-Sharable Amount must be met before sharing can begin. These expenses may include, for example, medical tests or specialist referrals. If you have question about how a procedure will be handled, please call Customer Service.

## Questions?

Read our Frequently Asked Questions at  
[www.UniversalHealthFellowship.org/FAQs/](http://www.UniversalHealthFellowship.org/FAQs/).



### Do You Need More Help?

Lastly, if you don't find the answers to your questions here or on the website, or if you would just like to speak to a live person, we are ready to serve you. Our Member Services team can be reached at 1 (888) 366-6243, on Monday through Friday from 8:00 a.m. to 8:00 p.m. EST.

## Important Links

- [Universal HealthShare Program & Guidelines](#)
- [Our Shared Faith and Beliefs](#)