



Welcome to Universal HealthShare SmartShare!

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

Create Your Account

First, Create Your UHS SmartShare Account

Visit <https://UniversalHealthFellowship.org>. At the top of the website, click on “Member Login” to be taken to the Member Portal. The first time you visit your Member Portal, you’ll see a page where you can register for your new account. We’ll ask you to confirm that information, and your login to the Member Portal will be set up.

Find Your Registration Materials

You can always find your current registration materials by accessing your account as described above.

Things You Need to Know

Get the Details about UHS SmartShare

Do you want to dive into the details of your UHS SmartShare 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 Kit) is subject to change from time to time. The current version will always be published in your Member Portal.

UHS SmartShare is NOT insurance.

Here's Why it Isn't.

The choice to become a UHS

SmartShare member and

share in other member's

medical expenses is

completely voluntary. Your

monthly sharing

contributions are non-

refundable voluntary

contributions that help

other UHS SmartShare

members with their eligible

medical expenses and help share the operational 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 UHS SmartShare is not insurance, our Ministry –

called Universal Health Fellowship – is neither licensed nor

registered by departments of insurance.



Since there is no insurance policy or “policy term” involved, there is no defined time period for joining. You may 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

UHS SmartShare is not insurance and therefore is not regulated by any insurance organization, including governments. Many state governments have published legal notices to inform their constituents about sharing organizations. Additionally, some states have adopted their own Individual Mandates, 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, including whether they qualify for an exemption from their state's Individual Mandate, if any.

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 SmartShare, you'll be asked to complete a detailed Medical Questionnaire for each member of the household within the UHS SmartShare Member Portal. The Medical Questionnaire is required 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 Medical Expense Need may be eligible for sharing. This waiting period does not apply to the Office Visit charge for Primary Care, Pediatric Care, Specialty Care or Urgent Care visits. Annual Preventive and Wellness Care also does not have a waiting period.

Understand Sharing Membership vs. Conditional Membership

Sharing Members participate each month by contributing at least the suggested Monthly Share Contribution to share in another member's eligible medical expenses. If you are a Conditional Member of UHS SmartShare, you may be subject to an additional Monthly Share Contribution 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 or activities, such as weight loss or smoking cessation. Any person accepted for Membership who is a Smoker or 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, UHS SmartShare may change your membership status to Conditional Member.

Maintaining a Healthy Lifestyle

To join UHS SmartShare, 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:



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 tobacco, nicotine, smoking and substitutes for at least 12 months before your application date.

Refrain from excessive use or abuse of alcohol. To be eligible, 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.



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 time during the 12 months before the application date.

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 time during the 12 months before the application date.

Exercise regularly and eat healthy foods that do not harm the body.

Refrain from engaging in hazardous activities and behaviors that evidence a willful disregard for personal health and safety.



How UHS SmartShare Works

UHS SmartShare is more affordable than other sharing programs, and much more affordable than traditional insurance plans, because it has especially low recommended voluntary contributions. This makes UHS SmartShare a great choice for those who are generally

healthy but want the peace of mind of an affordable health care cost sharing program in case of unexpected illness or injury. Here are the features that can make UHS SmartShare a smart choice.

- With UHS SmartShare you can see your doctor on Day One of the Program with your payment of a consultation fee.
- UHS SmartShare will share medical expenses up to a maximum of \$27,500 per year, per member, for all eligible expenses.
- Eligible in-patient hospital room and board expense and any surgical procedure expenses are limited to \$2,750 per day up to the \$27,500 annual limit, which is also inclusive of any other eligible, sharable medical expenses incurred throughout the Program year.
- There is a 90-day waiting period before any in-patient medical expenses or out-patient surgical procedure expenses are eligible for sharing, and you must always track your remaining balance.
- Primary Care and Pediatric office visits require an office visit consultation fee. The Office Visit charge is sharable at 100% for up to four visits per year combined with no waiting period. See the *Guidelines* for details.
- Urgent Care and Specialty Care visits require an office visit consultation fee. The Office Visit charge is sharable at 100% for up to two visits each per year with no waiting period. See the *Guidelines* for details.
- For CT Scans and MRIs, there is a 90-day waiting period and a consultation fee that is fixed at \$400 per visit when performed at

non-hospital facilities.

- X-rays at non-hospital facilities have a 90-day waiting period and are shared at \$200 each.
- All shared medical expenses are limited to the daily limit of \$2,750, and the annual limit of \$27,500.
- Consultation Fees referenced above are your personal responsibility for each visit for any type of medical service.

These limitations, which are described in more detail in your *Guidelines*, allow us to offer UHS SmartShare to qualified individuals and eligible family members at a much lower monthly contribution.

Here's an example of how this works. Let's imagine you have a three-day visit in a hospital with eligible medical expenses of \$3,000 per day.

- \$2,750 per day for room and board may be considered eligible for sharing with your UHS SmartShare program because the program limits eligible medical expenses to \$2,750 per day for a combined maximum of \$27,500 for the year. (Any amount above that limit is your responsibility.)
- After three days in the hospital, you will have \$8,250 (\$2,750 for three days) eligible for sharing. Any remaining balance above that amount is your personal responsibility and must be resolved by you your provider.
- After this hospital stay, you will have spent \$8,250 of your \$27,500 annual maximum. And, if you've submitted no other medical expenses for sharing that year, you will have remaining a

sharable amount of \$19,250 for all other eligible medical expenses for the rest of the year.

UHS SmartShare does not have a Non-Sharable Amount as other Universal HealthShare programs do, which makes it even more affordable when you have medical needs. A Non-Sharable Amount or NSA is the amount of medical expenses that must be paid before medical expenses can be eligible for sharing.

How to Find a Health Care Provider

UHS SmartShare has contracted with the PHCS/Multiplan Network that gives you access to one of the largest PPOs (Preferred Provider Organizations) in the country with over 700,000 providers. This means if you choose to work within the MultiPlan Network when you have a medical need, you will be assured of a quality provider who has agreed to provide favorable billing rates to PHCS/Multiplan Network patients, and to bill UHS SmartShare for any eligible medical expenses.

You may choose a provider outside the PHCS/Multiplan Network.

If you do so, UHS SmartShare will reimburse eligible expenses for the lesser of in-network or out-of-network provider rates. Also, an out-of-network provider isn't obligated to bill UHS SmartShare directly. They may ask you to pay as a self-service patient.

To find a provider in the PHCS/MultiPlan Network, call 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 UHS SmartShare member who is accessing the network for sharing.

You may also search for a provider online at FindProvider.UniversalHealthFellowship.org. This will take you to the PHCS/MultiPlan Home page. At the top right of the screen click on “Find a Provider” to search for a provider in your area.

What to Do with Medical Expense Bills

Bills for eligible medical expenses should be sent to UHS Needs, PO Box 17580, Clearwater, FL 33762. Your physician or medical facility may submit medical expenses on your behalf, but if they don't, you may submit them yourself to this address.

When You Visit Your Provider

It is your responsibility to confirm your provider's or facility's continued participation in the PHCS/MultiPlan Network and their accessibility under your sharing program. When you schedule your appointment, specify that you have access to the PHCS/MultiPlan Network through your Sharing program, confirm the provider's current participation in the network, their address, and that they are accepting new patients.

To ensure proper handling of your Medical Need, always present your current program ID card upon arrival at your appointment.

Please note: PHCS/MultiPlan Network and its subsidiaries are not insurance companies, they do not pay claims, and they do not guarantee health 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 popular 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

www.BlinkHealth.com

www.GoodRX.com

www.WeRX.org

www.SingleCare.com

Ask for Discounts!

If a medical service is not eligible for sharing through UHS SmartShare, your 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. It can only help.

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 medical need that is sharable
- The portion of the medical need that is owed by you



Making Voluntary Monthly Contributions

For your monthly contributions to UHS SmartShare, including Application and monthly Membership Dues, we ask that you use an Automated Clearing House or ACH as an alternative to credit cards. While we can accept credit card charges, they are considerably more expensive for HealthShare members. ACH is 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!

Primary Care, Specialty Care & Urgent Care Visits

As soon as you join your sharing program, primary care, pediatric care, specialty care and urgent care visits are immediately available. There are limitations to the number of visits so please refer to your *Guidelines*.



You must pay a Consultation Fee for each Primary Care, Pediatric 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% and will count towards your annual maximum lowering its balance. But, for medical expenses in addition to the consultation fees that may happen during or as a result of such visits, you will be responsible for these medical expenses and they are not

sharable. These expenses may include, for example, medical tests, lab work or specialist referrals. If you have question about how a procedure will be handled, please call Customer Service.

Preventive Care and Immunizations

Annual Physical/Wellness Exam and Preventive services are shared one time per year. The sharing plan shares a 100% per member per year, except for the office visit consultation fee, for physicals, wellness exams, immunizations, and other preventive services, subject to the limits of your program and restricted to the items on the Preventive Services Schedule.

The Preventive Care Services schedule represents preventive medical services that are eligible for sharing and any limitations on frequency and service. Services are sharable when performed at non-hospital facilities, generally through your primary care physician or Pediatrician. Immunizations that require multiple intervals (that is, multiple doses given at different times) will be shared.

An office visit consultation fee for the doctor is required and paid by the member (\$40 to a primary care doctor). If the service is not coded as preventive care, you may have to pay out of pocket.

Always ask your provider if the services you need are preventive or diagnostic/treatment. Please call Customer Service at (888) 366-6243 or check the *Guidelines* for specifics about your program's eligible physical wellness/preventive exams sharing needs.

To access the Preventive Service Schedule, use this link
PreventiveServices.UniversalHealthFellowship.org

Questions?

Read our Frequently Asked Questions

www.UniversalHealthFellowship.org/FAQs/

Do you need more help?

If you don't find the answers to your questions here or on the website, or if you would just like to speak to someone live, our Customer Service team can be reached at 1 (888) 366-6243, on Monday through Friday from 8:00 a.m. to 9:00 p.m. EST.

Important Links

[Universal HealthShare Program & Guidelines](#)

[Our Shared Faith and Beliefs \(Universal Health Fellowship\)](#)