



gracewell[®]

Senior Care

Member Guidelines
Effective as of March 1, 2026

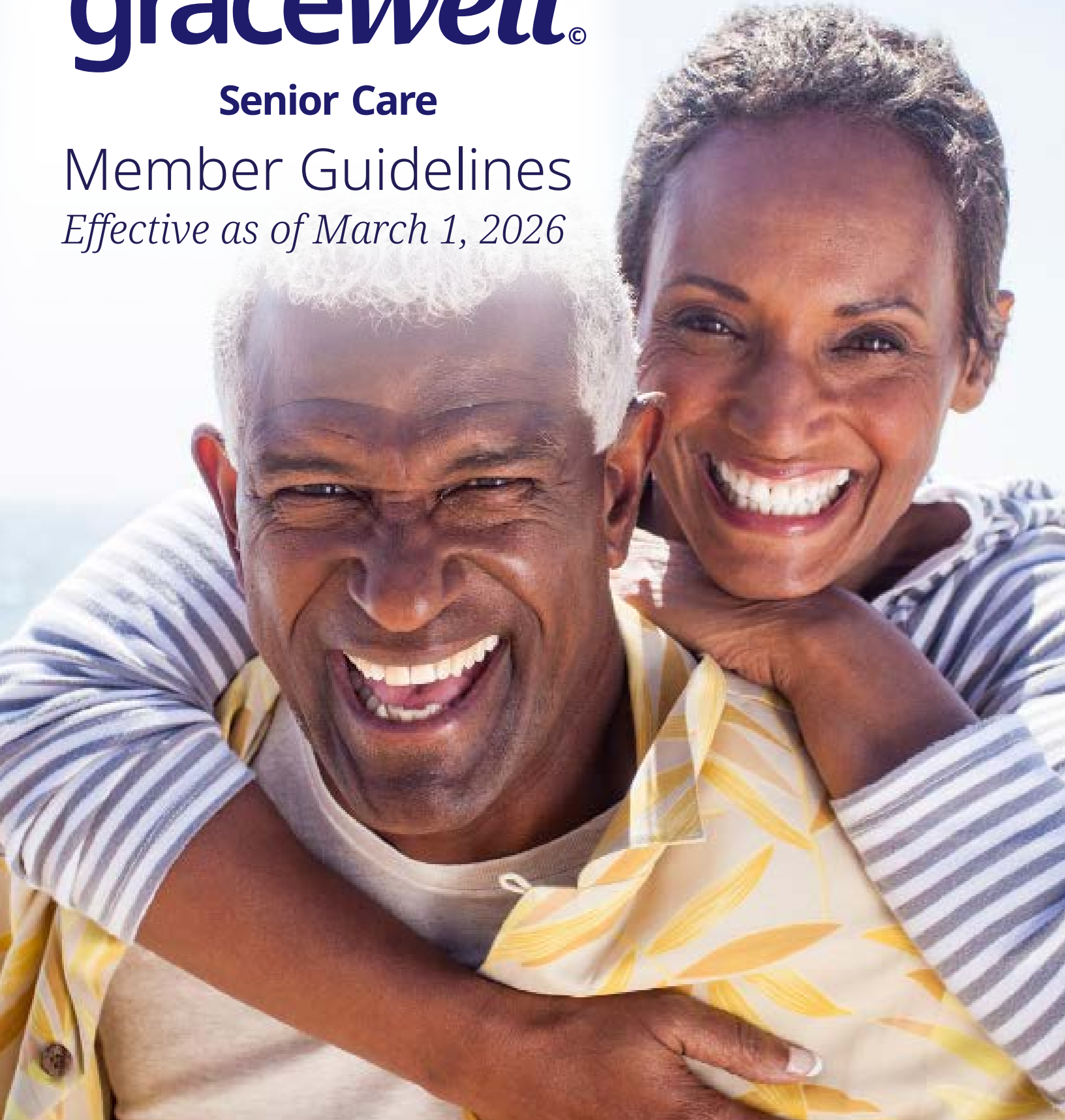


Table of Contents

- STATEMENT OF SHARED BELIEFS & ETHICS 4**

 - Our Beliefs, Ethics, & Standards 4
- I. BILL SHARING 6**

 - A. Healthcare Sharing is Voluntary 6
 - B. Eligible for Sharing 6
 - C. Limited Sharing 8
 - 1. Prescriptions 8
 - 2. Blood 8
 - 3. Mental Health 9
 - 4. Motor Vehicle Accidents 9
 - 5. Virtual Care: Telehealth 9
 - D. Not Eligible for Sharing 10
 - E. Discretionary Review of Sharing Requests 11
- II. MEDICALLY NECESSARY TREATMENT 13**

 - A. Sharing Limits 14
 - B. Permitted Sharing Level(s) 14
 - C. Approved Treatment 16
 - D. Use of Programs 17
- III. PROGRAM DETAILS 18**

 - A. Healthcare Sharing 18
 - B. Primary Responsibility Amount (PRA) 18
 - C. Guidelines Govern 18
 - D. Changes to the Guidelines 19
 - E. No Member or Health Sharing Liability 19
 - F. Pilot Programs 20
- IV. MEMBERSHIP 21**

 - A. Qualifications 21
 - B. Membership Requirements 22

C. Non-U.S. Citizens	22
D. Late Fees and Cancellation Policy for Failure to Deposit Monthly Share	22
E. Third-Party Fiduciary Assessment Fee	23

V. CONDITIONS OF SHARING 24

A. GraceWell Is Not a Substitute for Insurance as May Be Required by Law	24
B. GraceWell is Secondary to Other Sources	25
C. Assignment of Third-Party Claims	25
D. Sharing Appeal	25
E. Mediation and Arbitration	26
F. Negotiated Settlement Agreements	27

VI. VIRTUAL SHARE EXCHANGE 28

A. Share Account	29
B. Monthly Share Notice	29
C. Account Management	30
D. Publishing & Sharing	30
E. Virtual Bill Accounts	31
F. Provider Payments	32
G. Distributed Reserves	32

VII. GLOSSARY OF TERMS 33

Basic Terms Unique to Health Sharing	33
GraceWell Program & Membership	34
Share Account Activation	35
Monthly Share Notice	35
Medical Bills & Needs	36
Matching & Sharing	37
Share Account	37



A photograph of three elderly women of diverse backgrounds hugging each other warmly outdoors. They are all smiling and appear to be in a park or garden setting. The woman on the left has short grey hair and is wearing a blue jacket. The woman in the middle has dark hair and is wearing a pink jacket. The woman on the right has grey hair and is wearing a white jacket with a teal headband. The background is a soft-focus green and brown, suggesting trees and foliage.

Statement of Shared Beliefs & Ethics

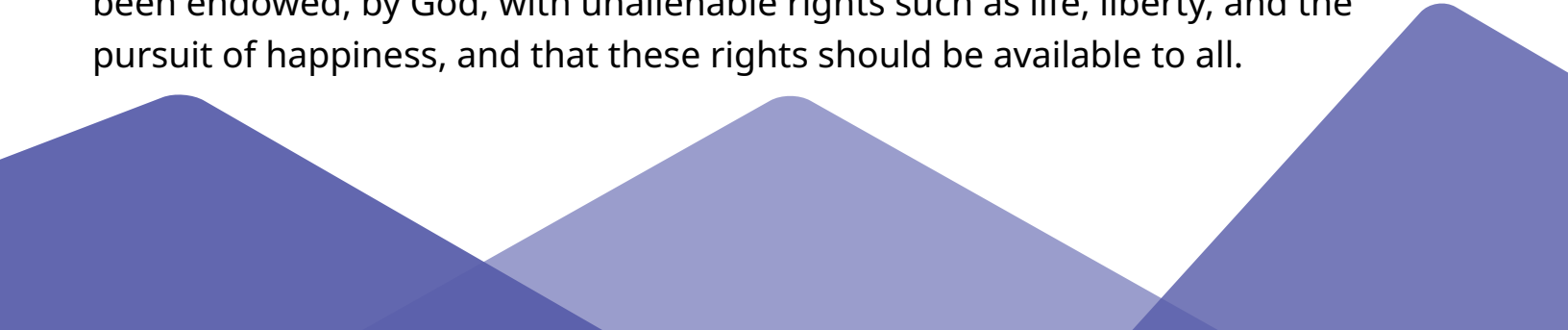
OUR BELIEFS, ETHICS, & STANDARDS

GraceWell is a program of Impact Health Sharing, a not-for-profit corporation that exists to create, exercise, and express practical applications of Christian faith, beliefs, and ethics. GraceWell operates in alignment with Impact Health Sharing's belief in bringing together individuals and families in shared acts of common good.

As Impact Health Sharing, we believe that the expression of these things, and the right to associate in the exercise of their expression, is a fundamental right guaranteed under the United States Constitution.

We welcome all people who are willing to honor and abide by Impact Health Sharing's Statement of Shared Beliefs & Ethics, by which GraceWell operates. We are a community that shares a common belief that by coming together, sharing together and acting together, we provide greater opportunities for health and freedom to our neighbors and, in turn, we gain the same opportunities for ourselves and our families.

As a community, we believe that it is both true and self-evident that all persons are created equal and in the likeness of God. We believe that all persons have been endowed, by God, with unalienable rights such as life, liberty, and the pursuit of happiness, and that these rights should be available to all.

Decorative blue geometric shapes at the bottom of the page, consisting of several overlapping triangles and trapezoids in various shades of blue.

As a community, we share a belief that contributing to one another's medical bills expresses our commitment to help each other pursue a life of liberty and happiness. At the core of what we do, and how we relate to and engage with one another as a community of people, is a set of common beliefs.

GraceWell is a program of Impact Health Sharing and operates in alignment with Impact Health Sharing's Statement of Shared Beliefs & Ethics. As a community, our Statement of Shared Beliefs & Ethics is as follows:

- 1. We believe that our rights and liberties originate from God and are bestowed by God.***
- 2. We believe that everyone is created equal and in the likeness of God.***
- 3. We believe that all persons have the right to life, liberty, and the pursuit of happiness.***
- 4. We believe in the principle taught by Christ of "love thy neighbor as thy self," regardless of race, religion, or creed.***
- 5. We believe we have a moral and ethical obligation taught by Christ to assist others in need.***
- 6. We believe that the Christian ideal of sharing and contributing to each other's medical bills is an expression of our commitment to our obligations to one another as a Christian-based community.***
- 7. We believe that it is our ethical duty to one another to maintain a healthy lifestyle and avoid foods, behaviors, habits, or any choices and activities that produce sickness or disease to ourselves or others.***
- 8. We believe that we have an ethical duty to each other to make legal, mature, and responsible decisions that do not create a risk of injury to ourselves or others.***
- 9. We believe it is our fundamental right of conscience to direct our own healthcare in consultation with our physicians, family, or other valued advisors.***
- 10. We believe we have a fundamental right guaranteed under the United States Constitution to associate in the lawful exercise of our common belief to voluntarily share health care expenses with one another.***

I. Bill Sharing

A. HEALTHCARE SHARING IS VOLUNTARY

Healthcare sharing is a voluntary sharing arrangement that brings together individuals in the GraceWell community in voluntary acts of common good, consistent with our community's statement of shared beliefs.

GraceWell and Impact Health Sharing are not insurance, and these Sharing Guidelines are not a contract for insurance.

The funds used to pay sharing requests belong to the collective GraceWell membership—not to GraceWell or Impact Health Sharing itself. Therefore, GraceWell must be a good steward of these funds: approving individual sharing requests that fall within these Guidelines and not approving sharing requests that fall outside the Guidelines.

B. ELIGIBLE FOR SHARING

GraceWell Members must have Medicare Parts A & B to participate in and maintain GraceWell Membership. In order for prescription costs to be eligible for sharing, Members must also have Medicare Part D.

All sharing will be secondary to Medicare. Eligible medical bills are eligible for



sharing with no Co-Share amount, based on the difference between the Medicare-allowable charges and the actual amounts paid by Medicare. Sharing is subject to the Member's Primary Responsibility Amount (PRA) and other limitations and exclusions set out in these guidelines. The Member must submit a copy of the Medicare Summary Notice (MSN) and the CMS 1500, or UB and IB form.

Pre-Existing Medical Condition limitations do not apply to GraceWell Members.

Not eligible for sharing:

- Treatment for Members that is not Medicare-eligible
- Treatment for Members who are not enrolled in Medicare Parts A & B

Prescription costs are only eligible for sharing for Members who have Medicare Part D and have submitted their prescription costs to Medicare Part D

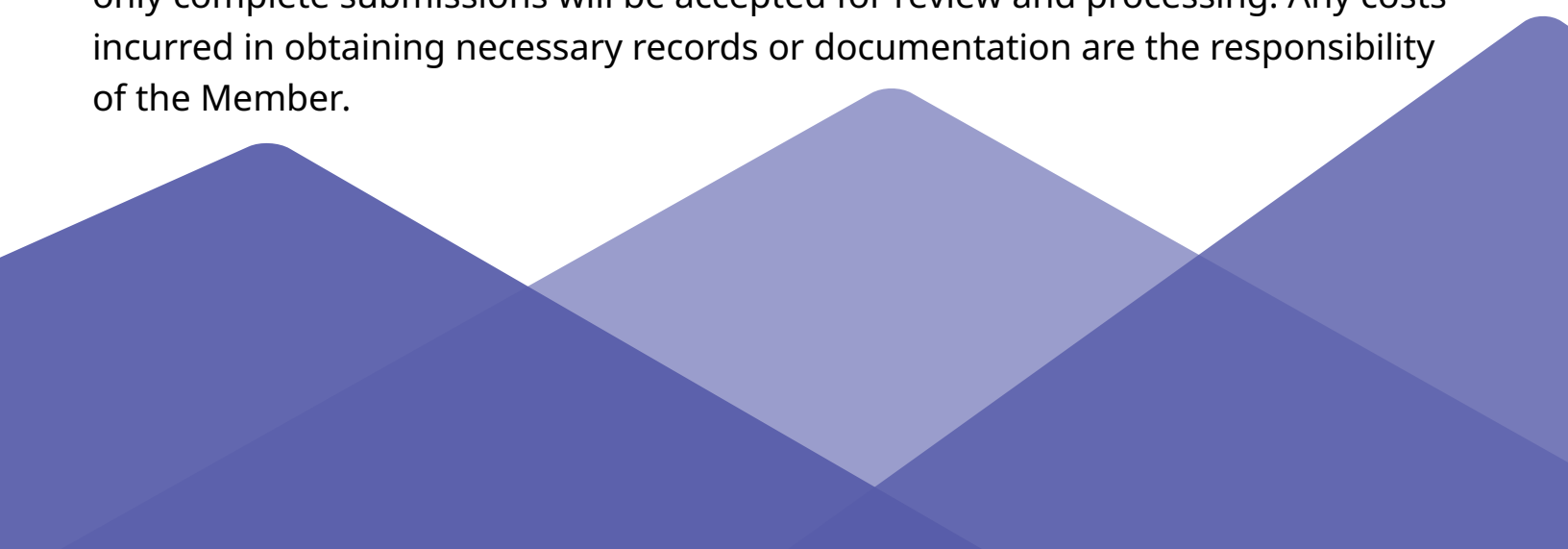
Medicare Advantage plans and/or Medicare Part C do not qualify for GraceWell.

Eligibility for sharing cannot be determined until after medical services are received and bills are submitted for sharing.

Bills must be received by GraceWell within 12 months from the date of service to be considered for sharing.

Bills are to be submitted by the provider following standard healthcare industry submission and coding guidelines. This is necessary for bills to be considered for sharing.

If a Member needs to submit a bill for processing, it must be submitted electronically using the Bill Submission tool located in the Member Center. Members are responsible for gathering and providing all required information, as only complete submissions will be accepted for review and processing. Any costs incurred in obtaining necessary records or documentation are the responsibility of the Member.



C. LIMITED SHARING

The following medical bills for certain conditions may be eligible for sharing, subject to a Member's PRA and other conditions that may apply. See each category below for details.

1. Prescriptions

Members must have Medicare Part D and have their prescriptions initially processed through Medicare in order for prescription costs to be eligible for sharing. All sharing will be secondary to Medicare.

Prescription medication expenses for prescribed drugs that may be dispensed, injected, or administered may be credited toward the annual PRA. Psychotropic medication is not eligible for sharing.

At the pharmacy, Members must present both their Medicare and GraceWell member cards (see Rx information on the card). Members pay 100% of the prescription amount at the pharmacy and submit eligible expenses in the Member Center. If the Member has Medicare Part D, the amount paid will be applied to the annual PRA.

After the Member's annual PRA has been met, eligible prescriptions for Members with Medicare Part D will be shared up to \$1200 per Member, per membership year.

Exceptions may be made in the case of medications for cancer and transplant recipients.

2. Blood

The cost of the first three pints of blood or equivalent quantities of packed red blood cells, including transportation and processing costs, if the blood is purchased, rather than donated, from a blood bank or a blood donor will be eligible for sharing, as the first three pints of blood are not covered by Medicare unless the hospital gets the blood free of charge.

3. Mental Health

Virtual Short-Term Teletherapy is only eligible for sharing with the teletherapy provider approved by GraceWell (found in the Member Center). Beyond the set number of complimentary short-term visits allowed with membership, Members are responsible for paying 100% for additional visits upfront and must submit those expenses to be considered for sharing. The provider fee for Virtual Short-Term Teletherapy is waived.

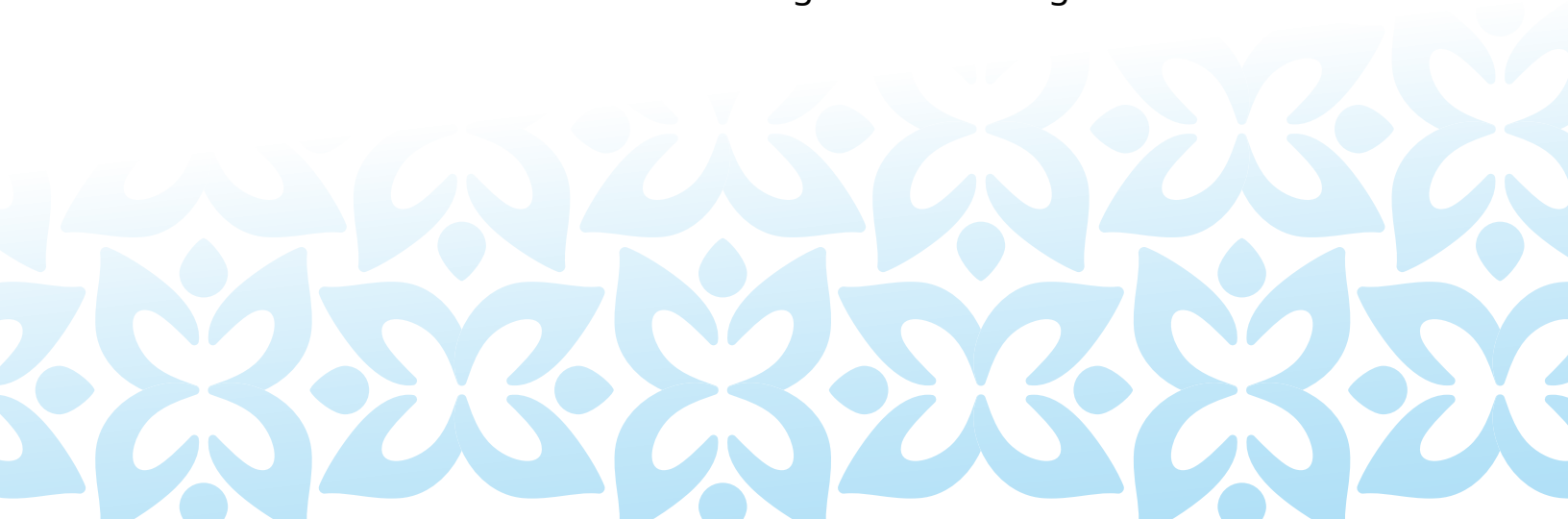
Outpatient Mental Health Care is eligible for sharing if performed by a qualified provider up to five visits per Member, per membership year.

4. Motor Vehicle Accidents

Treatment related to injuries received while in a motor vehicle is eligible for sharing, provided all legally required and industry recommended safety equipment was in use. Treatment related to motorcycle accidents is limited to \$100,000 per incident once PRA has been met. Sharing will be secondary to the vehicle insurance and Medicare. Treatment will not be shared if there was abuse of alcohol or legal drugs or the use of federally illegal drugs.

5. Virtual Care: Telehealth

Virtual telehealth visits are complimentary for Members when conducted using GraceWell's approved telehealth provider (found in the Member Center). The provider fee is waived at the time of service. Telehealth is subject to all other limitations of health sharing costs and is not a promise to pay or provide that service by either GraceWell or its membership. As with all other medical costs and expenses, contribution to telehealth remains voluntary. Only telehealth visits initiated via the Member Center will be eligible for sharing.



D. NOT ELIGIBLE FOR SHARING

Medical bills related to the following conditions are not eligible for sharing:

- Treatment that is not Medicare-eligible;
- Treatment that is in violation of the Statement of Beliefs and Ethics, including illness or injury arising from grossly negligent acts, abuse of alcohol, or any illegal activity, whether or not an arrest is made, charges are filed, or a conviction results;
- Treatment related to current use of illegal drugs;
- Drug/alcohol treatment or rehabilitation that is residential (inpatient) or outpatient;
- Procedure or surgery that is not medically necessary;
- Prophylactic (treatment intended to prevent disease) and preventive surgery without a personal history of diagnosis and a doctor's recommendation;
- Voluntary procedures/treatment, including cosmetic surgery or gender-affirming (transgender-related) surgery;
- Inpatient mental health services;
- Nutrition services;
- Alternative or naturopathic treatment;
- Experimental treatment;
- Genetic testing not required for treatment of an existing condition;
- Hearing aids;
- Non-prescription (over-the-counter) drugs and medical supplies/equipment;
- Fertility/infertility treatment;
- Direct Primary Care costs;
- Medical marijuana;

- Sleep studies not related to a specific disease or disorder;
- Weight management treatment or procedures;
- Dental or Vision services not related to a medical injury or illness;
- Orthotics;
- Transportation to appointments;
- Psychotropic medication;
- Vaccinations and / or immunizations;
- Treatments, procedures, and medications that are not FDA and CMS approved;
- Complications related to ineligible procedures, conditions, and diagnoses. This includes any future-related needs.

E. DISCRETIONARY REVIEW OF SHARING REQUESTS

GraceWell evaluates each sharing request under these Guidelines. At times, the validity of a Member's request may be unclear. In these situations, GraceWell must then exercise discretionary judgment, on behalf of the entire GraceWell membership, to evaluate the request, using common sense and fairness as a guide. Medical records may also be required to aid in determining if sharing is eligible.

GraceWell is likely to deny a sharing request and possibly cancel membership where any of the following occurs:

- Relevant information appears to be obfuscated or changed during the sharing request process;
- A Member is abusive to staff during the processing of a sharing request;
- Failure to obtain requested medical records, fraudulent misrepresentation of, and/or purposely withholding certain portions of medical records;

- Intentional violation of the guidelines, as determined by GraceWell, indicating that intent was apparently not accidental;

Members are expected to fully cooperate with GraceWell in evaluating sharing requests, including with respect to obtaining medical records. Any costs incurred in obtaining necessary records or documentation are the responsibility of the Member.

Any Member who submits falsified documents or otherwise engages in deceptive practices will be subject to membership cancellation. The Member may request resolution via the Mediation and Arbitration provisions described in the Guidelines.





II. Medically Necessary Treatment

Eligible needs will be approved for sharing when medically necessary. Medically Necessary, which is defined as healthcare services that are clinically appropriate in terms of type, frequency, extent, site, and duration for the diagnosis or treatment of the Member's sickness or injury and ordered by a Physician exercising prudent clinical judgment for the purposes of evaluation, diagnosis or treatment of that Member's sickness or injury. The Medically Necessary setting and level of service is that which, considering the Member's medical symptoms and conditions, cannot be provided in a less intensive medical setting. Such services, to be considered Medically Necessary, must be no more costly than alternative interventions, including no intervention, and are at least as likely to produce equivalent therapeutic or diagnostic results without adversely affecting the Member's medical condition.

- It must not be maintenance therapy or maintenance treatment;
- Its purpose must be to restore health;
- It must not be primarily custodial in nature;
- It must not be a listed item or treatment not allowed for reimbursement by CMS (Medicare); and
- GraceWell reserves the right to incorporate CMS (Medicare) guidelines in effect on the date of treatment as additional criteria for determination of Medical

Necessity and/or eligibility of a Need.

- The mere fact that the service is furnished, prescribed or approved by a Physician does not mean that it is “Medically Necessary.”
- The determination of whether a service, supply, or treatment is or is not Medically Necessary may include findings of the American Medical Association and GraceWell’s own medical advisors.

Off-label Drug use is considered Medically Necessary when all of the following conditions are met:

- The Drug is approved by the FDA;
- The prescribed Drug use is supported by one of the following standard reference sources:
 - DRUGDEX;
 - The American Hospital Formulary Service Drug Information;
 - Medicare approved Compendia; or
 - Scientific evidence is supported in well-designed clinical trials published in peer-reviewed medical journals, which demonstrate that the Drug is safe and effective for the specific condition, and
- The Drug is Medically Necessary to treat the specific condition, including life-threatening conditions or chronic and seriously debilitating conditions.

A. SHARING LIMITS

For the first 60 days of membership, Members are eligible to have up to \$50,000 of their Eligible Medical Bills shared.

There is no lifetime limit on sharing except as noted herein (see Guidelines).

B. PERMITTED SHARING LEVEL(S)

“Permitted Sharing Level(s)” means charges for Medical Care, which is Medically Necessary for the care and treatment of Illness or Injury, but only to the extent that the fees charged are within all applicable limitations and restrictions

established in the GraceWell Guidelines including, but not limited to, the following:

- **Other Medical & Surgical Services.** The Permitted Sharing Level for any general medical and/or surgical Medical Care included in the Guidelines not addressed under the immediately preceding subsection or subsection (d) below may be established or calculated taking into consideration and/or based upon the average of: (i) allowable reimbursement amounts for such Medical Care included in the Guidelines according to the OPPS Reimbursement or other Medicare fee payment methodology plus an additional 50%; (ii) the costs for such Medical Care included in the Guidelines plus an additional 35%; or (iii) the Usual, Customary and Reasonable Fees as reflected in, or determined by reference to or through the use of any other industry-standard resources or widely recognized data sources, including any resources listed above or any other fee and/or cost information, sources, lists or comparative data published or publicly available (free, for purchase, or by subscription), or any combination of such resources that are sufficient, in the opinion of the Claims Delegate, to determine a reasonable amount of Medical Care included in the Guidelines.
- **Facilities Lacking Requisite Benchmarks & Specified Services.** In the event that, for technical reasons, Permitted Sharing Levels for Medical Care included in the Guidelines cannot be determined in accordance with the two immediately preceding subsections, and for other Medical Care included in the Guidelines specified below, the Permitted Sharing Levels may be determined as follows:
 - **Pharmaceuticals.** The Permitted Sharing Level for pharmacy charges from any Hospital or Independent Facility may be calculated based on pharmaceutical Costs, as follows:
 - 150% of Cost for pharmaceuticals other than High Dollar Drugs, but not to exceed the Usual, Customary and Reasonable Fees for such pharmaceuticals; or
 - 120% of Cost for High Dollar Drugs; but not to exceed the Usual, Customary and Reasonable Fees for such pharmaceuticals.
 - **Supplies, Implants & Devices.** The Permitted Sharing Level for charges for

medical and surgical supplies, implants, and devices may be based upon 120% of the cost to the Hospital or Independent Facility providing such items.

In the event that the Permitted Sharing Level exceeds the actual charge billed for the treatment, service, or supply in question, sharing and payments to providers will be based on the actual billed charge. The Permitted Sharing Level for Medical Care will not include charges related to Unbundling, Errors, Unclear Description, or Misidentification.

C. APPROVED TREATMENT

To be eligible for sharing, testing and treatment must be Medicare Parts A & B approved, as well as CMS- or FDA-approved and submitted on a CMS 1500 or a UB and IB form, and ordered by a:

- Medical Doctor (M.D.)
- Doctor of Osteopathy (D.O.)
- Nurse Practitioner (N.P. or A.P.R.N.)
- Physician's Assistant (P.A.)
- Doctor of Podiatric Medicine (D.P.M.)
- Midwife
- Ophthalmologist
- Doctor of Chiropractic (D.C)

These CMS or FDA-approved tests and treatments must occur at one of the following:

- Hospital
- Surgery center
- Clinic
- Doctor's office
- Diagnostic facility

Diagnosis and treatment are to be performed in the U.S. to be eligible for sharing. Medical bills incurred while outside the U.S. are only eligible for sharing when the need is the result of medically necessary urgent care as Medicare does not pay for medical care received outside of the United States. Complications related to ineligible procedures, conditions, or diagnoses are not eligible for sharing. Eighty percent of the billed charges for out-of-country urgent care that Medicare would have paid if it was provided in the United States, up to a \$25,000 lifetime maximum, will be eligible for sharing. If out-of-country emergency care is received, the Member is responsible for providing supporting documentation necessary for determining eligibility for sharing. Any costs incurred in obtaining necessary records or documentation are the responsibility of the Member.

D. USE OF PROGRAMS

If a Member qualifies for public assistance or private benevolence programs, they must apply for the program benefit before the bill can be considered for sharing. If the Member receives assistance through the use of a program, the next three months of their monthly Share Portion will be waived.





III. Program Details

A. HEALTHCARE SHARING

To participate, Members contribute a monthly share amount that is applied to the eligible medical bills of other Members.

B. PRIMARY RESPONSIBILITY AMOUNT (PRA)

The Primary Responsibility Amount (PRA) is the dollar amount a Member must pay toward their own Eligible Medical Bills during a 12-month period before their Eligible Medical Bills can be published and shared by the membership.

All Eligible Medical Bills are subject to the annual PRA. The PRA 12-month period begins on the Membership Date.

The PRA resets on the anniversary of your Membership Date. Your Membership Date is the date that your membership in the GraceWell Program started.

C. GUIDELINES GOVERN

These Guidelines explain the program requirements and govern the sharing of medical bills. The Guidelines in effect at the time of service govern the program,

not the Guidelines in effect when a Member joins. The Guidelines are available online at [LiveGraceWell.com](https://www.LiveGraceWell.com).

D. CHANGES TO THE GUIDELINES

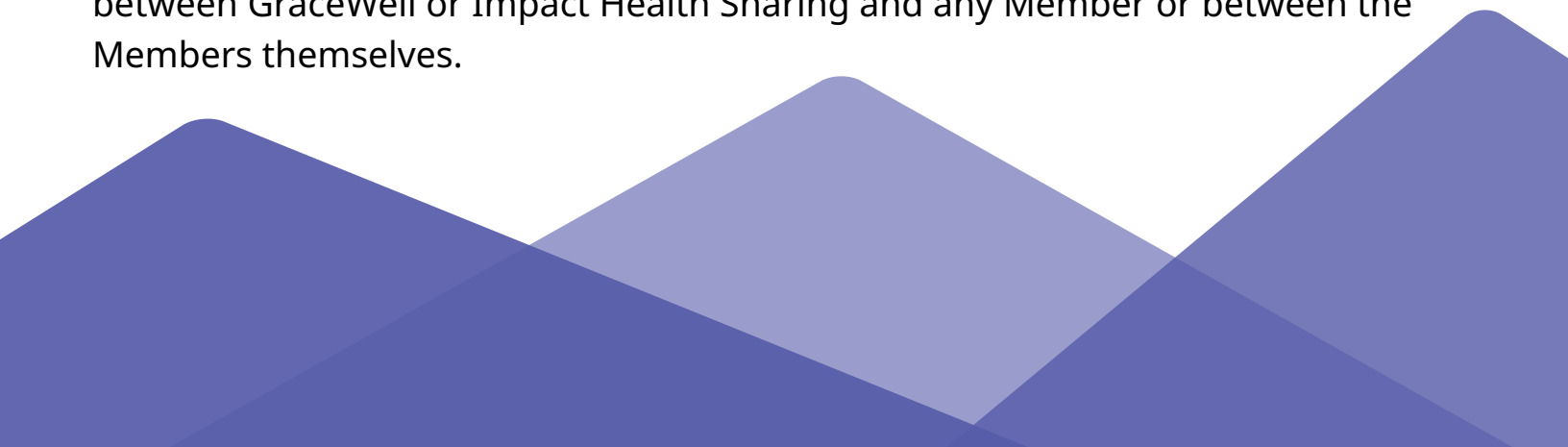
Changes to the Guidelines can be made by a majority vote of the Board of Directors at any time. Notification to the membership of the changes will be made and all changes will be available at LiveGraceWell.com for 24 months from the date of the change.

E. NO MEMBER OR HEALTH SHARING LIABILITY

GraceWell is a program of Impact Health Sharing. Neither GraceWell nor Impact Health Sharing is insurance. Impact Health Sharing is a Healthcare Sharing Organization as outlined in the Patient Protection and Affordable Care Act and was created to facilitate the sharing of medical bills and expenses among Members, one with another, according to these Guidelines, in GraceWell's reasonable discretion. Neither GraceWell, nor Impact Health Sharing, is liable for the payment of a Member's medical bill. If sharing occurs, the shared medical bills are paid by the Member who incurred the bill from other Members' share contributions only, not from funds of GraceWell itself.

GRACEWELL IS NOT AN INSURANCE COMPANY. IMPACT HEALTH SHARING IS NOT AN INSURANCE COMPANY. HEALTH SHARING IS NOT INSURANCE OR A CONTRACT FOR INSURANCE. THE PAYMENT OF MEDICAL BILLS THROUGH GRACEWELL, IMPACT HEALTH SHARING, OR OTHERWISE IS NOT GUARANTEED IN ANY WAY.

There is no transfer of risk from a Member to GraceWell or Impact Health Sharing, or from a Member to other Members; and there is not a contract of indemnity between GraceWell or Impact Health Sharing and any Member or between the Members themselves.



F. PILOT PROGRAMS

GraceWell may, in its sole discretion, offer Pilot Programs to any segment or group of Members to test the feasibility of new proposals and programs. The benefits offered in a Pilot Program may not be available to the entire Membership.

Members not selected for participation in a Pilot Program are not entitled to the benefits of the Program unless and until GraceWell opens the Pilot Program to the entire Membership. Further, Members who receive benefits through a Pilot Program will no longer be entitled to those benefits once a Pilot Program has completed/ended.

Participation in a Pilot Program is entirely voluntary.

Any Pilot Program that is eventually opened to the entire Membership may also be ended by GraceWell without notice.





IV. Membership

A. QUALIFICATIONS

To be eligible to participate in GraceWell, an applicant must:

- Be 65 or older
- Have Medicare Parts A&B. For prescription costs to be eligible for sharing, Members must have Medicare Part D as well. All sharing will be secondary to Medicare. There is only one PRA level available to these senior adults (see pricing calculator at livegracewell.com). This program is only available to individuals.
- Important Notice Regarding Medigap Coverage
 - If you cancel a Medigap policy (Medicare Supplement Insurance) to join the GraceWell community (a program of Impact Health Sharing), you will not have Guaranteed Issue Rights if you re-apply for Medigap coverage in the future. Guaranteed Issue Rights allow Medicare beneficiaries to buy certain Medigap plans without medical underwriting (health screenings). Without Guaranteed Issue Rights, you could be denied coverage, face higher premiums, or be subject to enrollment waiting periods.

- Have abstained from the use of illegal drugs for at least 12 months prior to applying for membership
- Agree with the Statement of Beliefs and Ethics outlined in these Guidelines

B. MEMBERSHIP REQUIREMENTS

- Members cannot use illegal drugs
- Participation in GraceWell will be online, and monthly share contributions must be made using Electronic Funds Transfers (EFTs) or a credit card. The contributions will be electronically transferred from the Member's bank account or credit card to a Virtual Share Account in order to send funds to other Members. Receiving Members will receive those funds in bill-pay accounts, the sole purpose of which will be to reimburse Members for their Eligible Medical Bills.

C. NON-U.S. CITIZENS

The following individual(s) can join GraceWell.

- Those who possess a U.S.-issued Social Security Number and a valid Identification Card issued by the U.S government or a state government.
- Those who possess an Individual Taxpayer Identification Number (ITIN) and also have a government-issued Identification Card issued by Mexico, Canada, or Guatemala.

D. LATE FEES AND CANCELLATION POLICY FOR FAILURE TO DEPOSIT MONTHLY SHARE

A \$25 late fee will be assessed if a Member does not deposit the Monthly Share within 30 days after the due date. Membership will be cancelled if a Member does not deposit the Monthly Share within 60 days after the due date. The Cancellation Date will be retroactive to the last day of the month for which the last Monthly Share was deposited. Only Eligible Medical Bills incurred on or before the

Cancellation Date will be considered for sharing.

Cancellations: Members must notify GraceWell of their intent to cancel by the last day of the month. They may contact GraceWell by phone or by email at members@care.livegracewell.com.

E. THIRD-PARTY FIDUCIARY ASSESSMENT FEE

Member share payments are deposited into Member-owned bank accounts opened by the Member through enrollment with our third-party fiduciary, America's Christian Credit Union. To complete the account setup, ACCU requires verification of identity. If the documents provided at enrollment do not meet ACCU's requirements, the Member will be notified and will have 30 days to provide the identity verification documents. After 30 days, a \$100 assessment fee will be applied to the monthly share amount until the requested identity verification documents have either been emailed to members@care.livegracewell.com or uploaded by the Member in their Member Center. Note: GraceWell will refund the assessment fee or fees once the Member provides the requested documents.





V. Conditions of Sharing

A. GRACEWELL IS NOT A SUBSTITUTE FOR INSURANCE AS MAY BE REQUIRED BY LAW

GraceWell is a program of Impact Health Sharing. Neither GraceWell nor Impact Health Sharing is insurance. However, GraceWell may be used as a substitute for or an exemption from mandated insurance coverage in the following circumstances:

- To satisfy the federal mandate that became effective January 1, 2014, requiring “applicable individuals” to maintain “minimum essential [insurance] coverage”
- To satisfy a certain state requirement to maintain “minimum creditable [insurance] coverage”

These are the only exceptions. Otherwise, Members must not certify that GraceWell is insurance to avoid purchasing insurance required by law, rule, or regulation, for example, worker’s compensation insurance or sports activity insurance.



B. GRACEWELL IS SECONDARY TO OTHER SOURCES

If a Member has insurance or is eligible/qualified for any insurance benefits or other health or welfare benefits, such as an employment-related health or welfare plan, worker's compensation insurance, homeowner's insurance, or fraternal benefits, the Member is expected to take all reasonable steps to qualify for such payments and to exhaust benefits available under those resources before submitting a request for sharing.

C. ASSIGNMENT OF THIRD-PARTY CLAIMS

In certain instances where a sharing event may have been caused by actions of a third-party, the Member may be required to assign to GraceWell any and all rights that Member has against all parties responsible for causing the injuries or illnesses. This is up to the total amount Members provided to or for the benefit of the Member and to reimburse GraceWell on behalf of Members. This includes any and all amounts Members provide to or on behalf of a Member as a result of injuries or illnesses which result from the actions or liability of a third party, and/or which result in a settlement, judgment, or other award or recovery to or by a Member.

D. SHARING APPEAL

A Member can appeal bill-sharing decisions with which they disagree if he or she believes:

- the medical records were misread, or
- the Guidelines were misapplied.

After a review, if the Member disagrees with the decision, the Member has 90 days to request a review by a Seven Member Appeal Panel established by GraceWell. GraceWell and the Member will both submit a written position

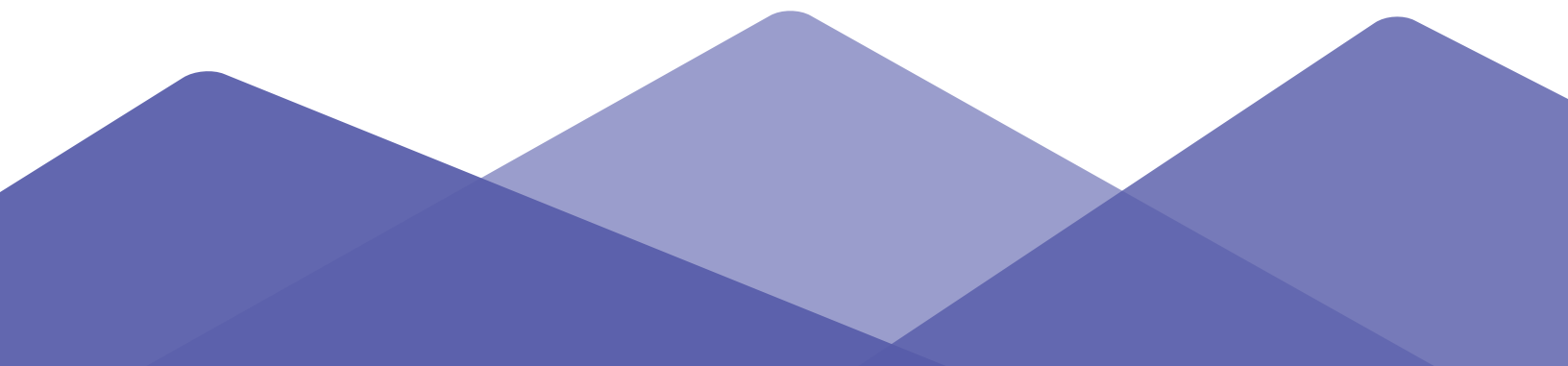
statement to the panel. A teleconference will be held where the panel can ask questions of both the Member and GraceWell. A simple majority vote (four out of seven) will carry the decision to share or not.

E. MEDIATION AND ARBITRATION

While these Guidelines are not a contract for insurance, the Guidelines do outline the manner in which voluntary sharing occurs among Members under the GraceWell program and Impact Health Sharing. Further, you have authorized GraceWell to exercise reasonable discretion to administer the program according to these Guidelines.

Any claim or dispute arising out of, or related to, these Guidelines or against GraceWell and/or Impact Health Sharing or any of its directors, officers, agents, employees, or contractors after a Member has exhausted his or her appeals provided for in Section IV(D), shall be directed to mediation in Broward County, Florida before a single mediator selected by Impact's Board of Directors with the costs of such mediation being split equally among the disputing parties.

In the event that such dispute is not resolved within 30 days of such mediation, then such dispute will be finally settled by binding arbitration in accordance with the Commercial Arbitration Rules of the American Arbitration Association then in effect by a single arbitrator appointed by GraceWell in accordance with said rules in Broward County, Florida. Except by agreement of the parties, the arbitration hearing shall begin within 90 days of the date that such arbitrator conducts his or her initial hearing in the matter. Further, unless agreed to in writing by the parties, the time allotted for such hearing shall not exceed five business days, and the parties shall have an equal time to present evidence at such hearing. The determination of the arbitrator will be final and binding upon the parties to such arbitration, and judgment upon the award rendered by the arbitrator may be entered in any court having competent jurisdiction. The costs of arbitration shall be borne equally by all parties involved; provided, however, the arbitrator



may assess all costs of such dispute (including reasonable attorneys' fees) against one party in the event that the arbitrator determines that such party caused such dispute to be brought to arbitration through his or her bad faith or frivolous action or inaction. Any additional costs that a party may incur during the course of and relating to the arbitration will be borne solely by the party that incurs the same including, without limitation, such party's respective incurred attorneys' fees.

Notwithstanding the foregoing, any party may seek injunctive relief with respect to any dispute, claim or controversy arising out of or relating to this Agreement in the courts located in Broward County, Florida and the parties hereto hereby irrevocably submit to the exclusive jurisdiction of such courts for the purpose of this Section IV(E).

MEMBERS AGREE THAT THESE METHODS OF DISPUTE RESOLUTION SHALL BE THE SOLE REMEDY FOR ANY DISPUTE, CLAIM, OR CONTROVERSY ARISING OUT OF OR RELATING TO THESE GUIDELINES OR AGAINST GRACEWELL OR ANY OF ITS DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, OR CONTRACTORS, AND SUCH MEMBERS AND GRACEWELL EXPRESSLY WAIVE THEIR RESPECTIVE RIGHTS TO FILE ANY LAWSUIT IN ANY CIVIL COURT AGAINST ONE ANOTHER (OTHER THAN FOR THE PURPOSE OF SEEKING INJUNCTIVE RELIEF PURSUANT TO THE FOREGOING PARAGRAPH) AND THE RIGHT TO PURSUE ANY CLASS OR REPRESENTATIVE CLAIMS AGAINST EACH OTHER IN COURT, ARBITRATION, OR ANY OTHER PROCEEDING, WITH FULL KNOWLEDGE OF THE CONSEQUENCES OF SUCH WAIVER. THE ARBITRAL TRIBUNAL MAY NOT CONSOLIDATE MORE THAN ONE PERSON'S CLAIMS AND MAY NOT OTHERWISE PRESIDE OVER ANY FORM OF A REPRESENTATIVE OR CLASS PROCEEDING TO THE FULLEST EXTENT ALLOWABLE BY LAW. IN THE EVENT THAT THIS PROHIBITION ON CLASS ACTIONS OR CLASS ARBITRATIONS IS DEEMED INVALID OR UNENFORCEABLE, THEN THE REMAINING PORTIONS OF THIS SECTION IV(E) WILL REMAIN IN FULL FORCE AND EFFECT.

F. NEGOTIATED SETTLEMENT AGREEMENTS

On rare occasions, a provider and/or its billing agent may require GraceWell to enter a negotiated settlement agreement to fully clear an outstanding bill

incurred by a Member. In such cases, GraceWell will pay a specific amount toward the outstanding bill as per our guidelines and the settlement agreement, and the Member will be required to pay the remaining balance that represents the Member's Personal Responsibility Amount (PRA). In such a case, GraceWell will be unable to release sharing funds to the provider until the Member has fully paid his or her PRA in the amount specified in the negotiated settlement agreement. Failure by the Member to produce these funds in the timeline outlined in the settlement agreement can result in the settlement agreement being null and void by the provider and/or its billing agent. If the agreement is null and void and a new settlement agreement must be made, GraceWell will only share the lesser amount of the agreements, and the remaining balance will be the Member's responsibility.



VI. Virtual Share Exchange

To make Healthcare Sharing convenient and efficient, GraceWell and Impact Health Sharing deploy a technology platform called a Virtual Share Exchange ("VSE"). The VSE enables all GraceWell Members to participate in the Healthcare Sharing process electronically, as well as to monitor the transactional activities of their individual Share Accounts and the community at large. Your GraceWell membership requires that you activate your own Share Account and enable the Virtual Share Exchange to administer the sharing process on your behalf. By

activating your Share Account and accepting the Virtual Share Exchange “Terms and Conditions” and Disclosures, you have given GraceWell and its Service Agents express permission to conduct financial transactions necessary for the administration of the program on your behalf.

A. SHARE ACCOUNT

To participate in the GraceWell program, all Members must activate a Share Account on the Virtual Share Exchange Platform. Your Share Account is a virtual account, and all deposited funds are received by America’s Christian Credit Union, which holds them “For the Benefit of Members”. The Share Account will display your account balances, share transaction history, and other relevant information, and include your own dashboard management tools. The money in your Share Account is insured in the event ACCU becomes insolvent (see disclosure at LiveGraceWell.com).

To activate your Share Account, you will be required to provide the necessary personal information to comply with US Banking Regulations. Once your information is submitted and verified, you will be required to link your Share Account to one of your External Bank Accounts, such as Bank of America or Wells Fargo. Each month, you will fund your Share Account with an EFT (Electronic Funds Transfer) from your External Bank Account or using a credit card.

B. MONTHLY SHARE NOTICE

GraceWell Members will receive a Monthly Share Notice through the VSE Platform to inform them and remind them of the monthly amount that they are to contribute. The monthly amount that you are to contribute (your Total Share Amount Due) is based on the GraceWell Sharing Program.

The amount specified in your Monthly Share Notice is transferred through an EFT drawn from your External Bank Account or from your credit card, if you prefer. EFTs/card charges are always for the “Total Share Amount Due.” The “Total Share Amount Due” is displayed on every Monthly Share Notice, and it will include the current Monthly Share Amount, any Past Due Amounts, and any relevant Service Fees.

The Total Share Amount Due may be paid manually within the VSE Platform or through Recurring EFTs/credit card charges that you configure within the system. You will have the ability to add, edit, and delete your Recurring EFTs/credit card charges, as well as your linked External Bank Account and credit card(s), at any time.

C. ACCOUNT MANAGEMENT

Your Share Account is a financial account that you own and control. You will have the ability to add, edit, and delete your Recurring Electronic Funds Transfer (EFT)/Credit Card Charge settings, as well as your linked External Bank Account/Credit Cards, at any time. You may also choose to have your medical bills “anonymously” shared among the membership, otherwise Members who share in your medical bills will be able to see with whom they are sharing.

Please note that the funds in a Member’s Share Account are not intended for the payment of the Member’s own medical bills, expenses, or annual Primary Responsibility Amount (PRA). Instead, these funds are designated for Member-to-Member, or peer-to-peer (P2P), sharing. This means that each Member contributes to the medical needs of other Members, rather than drawing from a collective fund for their own expenses.

Additionally, the balance in a Member’s Share Account is not refundable upon cancellation or termination of membership, as those funds have already been committed to the sharing community in accordance with the principles and guidelines of the program.

D. PUBLISHING & SHARING

Participation in the GraceWell sharing community is voluntary. This means that when you are selected to participate in a sharing event, if you object to that particular sharing event for any reason, you may withdraw and terminate your membership during the three-day publishing period (described below) rather than participate in that sharing event.

Medical Bills that are Eligible for Sharing are matched, allocated, and published to the membership prior to sharing. To be compliant with regulations and safe

harbor statutes, Impact implements a Member-to-Member or peer-to-peer (P2P) approach to sharing, which means that Members share funds directly with one another rather than drawing funds from a pool.

Your medical bills will be submitted to GraceWell by your medical providers. GraceWell will process all bills for eligibility per the Guidelines. Eligible bills are then submitted into the Virtual Share Exchange for sharing. Amounts Approved for Sharing are allocated to your fellow Members who have been matched to share in (contribute toward payment of) your bill.


Members who have been matched to share your bill will be notified through a process called “publishing” as to the amount that will be withdrawn from their Share Account for the payment of your bill. They will also be notified as to who will be receiving their funds unless you choose the anonymous setting in your Share Account dashboard’s Sharing Permissions. Once the three-day publishing period has ended, the amount published to each Member is transferred to a Virtual Bill Account for the payment of your bill.

Members who have been matched and allocated to share in another Member’s medical bill may withdraw from membership prior to the expiration of the three-day Publishing Period, in which case no funds will be transferred to the receiving Member.

Because a Member may refuse to share in a particular medical expense for any reason or no reason, the sharing process remains entirely voluntary for every Member. However, as noted above, any sharing refusal requires withdrawal from membership before the end of the three-day Publishing Period.

E. VIRTUAL BILL ACCOUNTS

If you have an Eligible Medical Bill that has been approved for sharing, the VSE will create a Virtual Bill Account for the payment of that bill. Virtual Bill Accounts are unique to a specific medical bill and are linked to your Share Account. Amounts collected in your Virtual Bill Account(s) are restricted and are displayed as a single line item transaction in your Share Account.



F. PROVIDER PAYMENTS

Virtual Bill Accounts remain open until the Amount Approved for Sharing has been fully collected and transferred to your medical provider as payment for your bill. While Virtual Bill Accounts are aggregated in the transactional view of your Share Account, these funds are restricted and cannot be withdrawn from your Share Account. Once all the allocated funds have been transferred from the Members who were matched to pay your medical bill, those funds are released for payment to your Medical Provider, or reimbursed to the Member if the Member has already paid the provider. The transfer of funds out of your Virtual Bill Account will be displayed as a single line item transaction in your Share Account.

G. DISTRIBUTED RESERVES

In order to process and pay medical bills quickly, Impact implements a practice called “Distributed” or “Decentralized,” Reserving. Neither GraceWell nor Impact Health Sharing is insurance, so we do not collect and hold medical reserves in a centralized bank account. Instead, the Monthly Share Amount is set at a level to build a small balance (or reserve) in every Member’s individual Share Account. These “Distributed Reserves” enable GraceWell to better manage the ebb and flow of medical usage and payments.





VII. Glossary of Terms

BASIC TERMS UNIQUE TO HEALTH SHARING

“Contribute” or “Contribution” – The dollar amounts voluntarily transferred by a Member to GraceWell for continued participation in the GraceWell Sharing Program. Because participation in the GraceWell Sharing Program is not a contract for insurance and participation is voluntary, contributions are not a “demand for payment” for a product or service.

“Invoice” or “Statement” – A demand for payment for medical care services rendered, submitted by a medical care provider to a Member.

“Pay” or “Payment” – The dollar amounts tendered to a medical care provider or facility by GraceWell and/or a Member under the GraceWell Sharing Program in consideration for a medical care service rendered by the provider to a Member under the provider’s contract for service.

“Share” or “Sharing” – The joint sharing of certain medical expenses incurred by a Member that is contributed to by other Members of the GraceWell sharing community.

“Share Notice” or “Notice” – A notification of voluntary contribution amounts due under the GraceWell Sharing Program submitted by GraceWell to a Member. Share Notices are typically delivered monthly as a “Monthly Share Notice.”

GRACEWELL PROGRAM & MEMBERSHIP

Bill Approved for Sharing – An Eligible Medical Bill that meets the criteria for sharing in the Guidelines and meets the other conditions for sharing, including whether the Member’s PRA has been met and other sharing limits have not been exceeded.

Cancellation Date – The month and day membership ends due to the Member’s withdrawal or an administrative cancellation.

Effective Date – The date the Member’s current PRA has begun.

Eligible for Sharing – Any testing, treatment, procedure, or service that meets the criteria for sharing as established in the Guidelines.

Eligible Medical Bill – An incurred medical bill that meets the criteria for sharing as established in the Guidelines, the Eligible Medical Bill may be reduced by any discounts, fees, or other sources of payment.

Illegal Drugs – Any “controlled substance” or “dangerous drug” that has not been legally prescribed and/or dispensed, or the use of a prescription drug that is not in accordance with the manner in which it was prescribed.

Member – Any Member of the GraceWell Sharing Program.

Membership Date – The date a Member’s participation in GraceWell begins. Medical bills incurred after this date may be considered for sharing among Members.

Medical Emergency - For the purposes of sharing, a medical emergency is defined as:

- A sudden and unforeseen illness, injury, or condition that requires immediate medical attention to prevent:
 - Serious jeopardy to the life or long-term health of the Member,
 - Serious impairment to bodily functions, or
 - Serious dysfunction of any bodily organ or part.

Primary Responsibility Amount (PRA) – The dollar amount a Member must satisfy toward his or her own Eligible Medical Bills during a 12-month period before their Eligible Medical Bills can be published and shared by the Membership. The PRA 12-month period begins on the Membership Effective Date.

SHARE ACCOUNT ACTIVATION

Auto-Share (Recurring EFT) – a Sharing Permission enabling a Member to set up recurring Electronic Funds Transfers (EFTs) to transfer the Total Share Amount Due specified in his or her Monthly Share Notice.

External Account – an existing bank account that is linked to the Member’s Share Account and is used to transfer via EFT the Total Share Amount Due into the Share Account each month.

Manual Share – a function that enables a Member to initiate an “on-demand” EFT to transfer the Total Share Amount Due specified in the Member’s Monthly Share Notice.

Permissions – are auto-enable functions (ex., Auto-Share) that are set and managed by the Member.

Share Account – the Member-controlled virtual account that is linked to both your External Account and your deposit account at America’s Christian Credit Union and is used for all sharing transactions and activities.

MONTHLY SHARE NOTICE

Grace Period – the number of days between the Share Due Date and Past Due Date.

Monthly Share Amount – the sum of the Share Portion and Required Miscellaneous Portions published in the Share Notice.

Due Date – the day of the month that a delinquent Total Share Amount Due becomes past due.

Past Due Reminders – Share Notice Reminders sent to Members who have not paid their Share Notice and are past due.

Payment Reminders – Share Notice Reminders are sent only to Members who pay manually instead of automatically and only if the Total Share Amount has not yet been paid.

Previous Balance – is the sum of any past due, unpaid amounts published in the Share Notice.

Required Miscellaneous Portion – an amount set by the health sharing organization to fund certain described activities, such as its administrative and program expenses.

Share Due Date – the day of the month by which the Total Share Amount Due must be paid in full.

Share Notice – the written notification to a Member that details the Total Share Amount Due for the month.

Share Notice Date – similar to a statement date or invoice date, it is the day of the month that the Share Notice is published and distributed.

Share Payment (Funding) – transferring funds (Total Share Amount due) from a Member's External Account to his or her Share Account.

Share Portion – the portion of the Monthly Share Amount that is collected and used specifically for Member-to-Member sharing of Eligible Medical Bills.

Total Share Amount Due – the sum of the Monthly Share Contribution Amount (Share Portion and Required Miscellaneous Portion), Optional Portion (auto-enabled by the Member), Service Fee, and any past due amount (Previous Balance).

MEDICAL BILLS & NEEDS

Adjusted Amount – the discounted or repriced amount.

Approved for Sharing – the portion of the Adjusted Amount that is Eligible for Sharing as per the program guidelines.

Bill Status – the processing stage/state of a specific Need or Bill.

Charge Amount – the gross amount billed by the medical provider.

Medicare Summary Notice (MSN) - A Medicare MSN is a statement sent by Medicare after a medical service is received. It explains what services were provided, what Medicare paid, and what amount, if any, may be the Member's responsibility. It is not a bill, but a summary used to understand how a claim was processed and to verify charges.

Explanation of Sharing (EOS) – is a notice sent to a Member detailing the eligibility status of a bill, any discounted amounts, what portion of the remaining Charge Amount has been shared by GraceWell Members, and any remaining amount that must be paid by the Member.

Member Responsibility – the portion of the Adjusted Amount calculated to be the Member's responsibility and will not be shared.

Need – is a grouping of medical bills by a medical event such as knee surgery. Individual medical bills may sometimes be referred to as a "Need."

Published Amount – the portion of the Adjusted Amount that is eligible for sharing and has been published/allocated to the Membership for sharing.

Received Date – the date that GraceWell receives the medical bill and begins processing the bill for eligibility.

Service Date – the date that the Member (patient) received services from the medical provider.

Shared Amount – the Published Amount that has been shared and collected in the Member's Sharing Account.

MATCHING & SHARING

Sharing (Member-to-Member Transfers) – moving funds from a sending Member's Share Account to a receiving Member's Virtual Bill Account.

SHARE ACCOUNT

Available Balance – the total sum that is available for sharing a new Eligible Medical Bill and/or Withdrawal. It is the Total Balance minus the Pending Balance minus the Restricted Balance.

Debits & Sharing – The “Negative (-)” transactions debited out of the Member’s Share Account, which would be Miscellaneous Required Portion (i.e. Debits), Optional Portion, and Share Portion.

Deposits & Credits – The “Positive (+)” transactions that are credited to the Member’s Share Account, such as EFTs (i.e. Deposits) and Shared Funds Received (i.e. Credits) that a Member might receive to pay their Eligible Medical Bill.

Pending Balance – the sum of EFT(s) that have been initiated but have not yet posted to the Member’s Share Account.

Restricted Balance – the sum of funds that have been credited to the Member’s Share Account for the purpose of paying an Eligible Medical Bill.

Total Balance – the sum of the Pending Balance, Restricted Balance, and Available Balance in a Member’s Share Account.

STATE DISCLOSURES

Access Full State Disclosures at [LiveGraceWell.com](https://www.LiveGraceWell.com)