

knewhealth



**MEMBER
GUIDELINES**

At Knew Health, we have reimagined the HealthShare model to simplify the experience of our members and make medical cost sharing more accessible. Our Member Guidelines outline who we are as an organization and how we share in the medical costs of our members.

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Knew Health's Mission

Welcome. Thank you for your interest in Knew Health. Our founder, Joshua Rosenthal, believes that everyone should have access to preventative health and wellness resources. And everyone should have a safety net for when unexpected medical costs occur.

Knew Health makes healthcare simple and affordable by pairing preventative health with medical cost sharing.

We put your health first by providing access to personalized health coaching, preventive coverage, allowances for preventive medical care above and beyond conventional care, access to the highest quality supplements, complimentary lab work, and monthly seminars on health and wellness education.

And when you have a health need, we provide you with the freedom to choose the right providers for you. We give you a team dedicated to help you easily navigate the healthcare system. We make it possible to invest back into your health and wellness, and we'll have your back when unexpected medical costs happen.

The concept of medical cost sharing has evolved over decades of communities coming together in times of need and sharing burdens with one another. Knew Health has created a one-of-a-kind Community of passionate individuals that pull together to efficiently manage one another's medical costs.

Knew Health will make your life better. We will change the way you think about healthcare by making it easier to live healthier, to feel your best, to save money on healthcare costs, to receive the best quality care, and we'll help one another every step of the way. Through our intentionally different, wellness-focused healthcare solution, you can achieve your optimal wellness and have the stability of our Community at your back.

Principles of Membership

Each member of Knew Health must comply with the following requirements to maintain membership with Knew Health Alliance, hereby known as Knew Health, and remain eligible to participate in the medical cost sharing program and participate in all other Knew Health services. Adherence to the Knew Health Principles of Membership minimizes medical risks, encourages good health practices, and ensures member integrity and accountability.

All Knew Health members must attest to the following statements:

- I believe that a community of ethical, health-conscious people can most effectively care for one another by directly sharing the costs associated with each other's health care needs. I recognize that Knew Health welcomes members of all faiths.
- I understand that Knew Health is a benevolent organization, not an insurance entity, and that Knew Health cannot guarantee payment of medical expenses.
- I agree to practice good health measures and strive for a balanced lifestyle. I agree to abstain from the use of any illicit or illegal drugs and refrain from excessive alcohol consumption, and acts which are harmful to the body. I understand that members who use tobacco will have an increased monthly contribution (per household) of fifty dollars.
- I am obligated to care for my family. I believe that mental, physical, emotional, or other abuse of a family member, or any other person, is morally wrong. I commit to treating my family and others with care and respect at all times.
- I agree to submit to mediation followed by subsequent binding arbitration, if needed, for any instance of a dispute with Knew Health or its affiliates.

Membership Eligibility

Membership eligibility in Knew Health is primarily based upon two factors.

1. Adherence to the Knew Health Principles of Membership.
2. Participation in the community by submitting monthly contributions.

After committing to these primary obligations, prospective members are eligible to enroll in the Knew Health community. Membership may begin on a date elected by the prospective member or specified by Knew Health. The first monthly contribution must be received before the membership is considered active.

1. Commitment

Members of Knew Health commit to abide by a set of personal standards as outlined in the Knew Health Principles of Membership. If a violation of the Principles of Membership is discovered through review of a member's submitted medical records, all cost sharing for the needs of that member will be put on hold. This hold will begin on the date in which the violation was discovered or recorded in the member's medical records. A notification of the hold and an explanation of the discovery will be issued to the member.

The member will be granted 30 days to submit documentation supporting compliance with the Principles of Membership. If the submitted documentation does not satisfactorily demonstrate compliance with the Principles of Membership, the member will automatically be withdrawn from the sharing program and membership will be revoked. In the event that membership is revoked due to a violation of the Principles of Membership, Knew Health will not return the offending member's contributions received prior to the date of withdrawal.

2. Participation through Contributions

To participate in the member-to-member medical cost sharing community and access Knew Health services, members must submit the monthly contribution amount associated with their level of membership.

Members have multiple options for submitting their monthly contributions. Individual members can make contributions directly to Knew Health. For members who enroll in Knew Health through their workplace, payments can be made through their employer.

All member contributions are voluntary, but the monthly contribution is required to be active and eligible for sharing. Monthly contributions must be received no later than 30 days after the billing date. If a monthly contribution is not received by the last day of the billing month, the membership will become inactive and the member will be withdrawn from the medical cost sharing community.

Any member that has been withdrawn may reapply, provided they meet all enrollment and eligibility requirements. Once the member reapplies and membership is reinstated by Knew Health, the member will become eligible to participate in cost sharing. All member needs and medical costs occurring after the membership is inactivated and before reinstatement will be ineligible for cost sharing, and any medical conditions existing before the date of reinstatement will be considered pre-existing. Any member whose membership has been inactivated three times will not be eligible to reapply.

3. Qualification

To be qualified for membership, an applicant must meet all criteria set forth in the membership guidelines and the membership enrollment form. If at any time it is discovered that a member did not submit a complete membership enrollment form, the incomplete form could result in either a retroactive membership limitation or a retroactive denial of membership.

While member health status has no effect on eligibility for membership, there are limitations on medical cost sharing for some conditions that existed prior to a member's effective date.

Enrollment Requirements

Knew Health offers different enrollment types for individuals and families. Monthly contributions are based on the enrollment type, initial unshareable amount, and member age. This section outlines the different household memberships and who is eligible for enrollment therein.

1. Determination of Household Membership

There are four tiers of membership, and member contributions are calculated depending on the participating members of a household.

- Member Only: an individual member of Knew Health
- Member & Spouse: Two married members or two domestic partners
- Member & Child(ren): A member and any eligible dependent children, without membership of a spouse
- Member & Family: A member, spouse/domestic partner, and any dependent children

2. Dependents

An unmarried dependent may participate under a combined membership with the head of household through the age of 25. Children born into a membership due to an eligible maternity need may participate under a combined membership. Under a combined membership, the head of household is responsible for ensuring that each individual participating under the combined membership complies with membership guidelines and the Knew Health Principles of Membership.

Once a dependent reaches the age of 26 or marries, that dependent is no longer eligible to participate under the combined membership. A dependent who wishes to continue participating as a member with Knew Health may complete an enrollment form. Any medical needs that occur between the time when a child leaves their parent's membership and enrolls in their own membership are not shareable. If a dependent ages-out of their Knew Health membership but chooses to re-enroll at a later date, they will be subject to the limitations associated with preexisting conditions.

3. Newborns

Newborns whose birth is part of a shareable maternity need will automatically be enrolled in a Knew Health membership at birth. In the case of a change in household enrollment type, the monthly contribution amount will be adjusted automatically. If a member does not wish for their newborn to be added to their membership, they must notify Knew Health 30 days prior to birth.

Newborns who are not born as part of a shareable maternity need must be enrolled manually in a Knew Health membership. The newborn's membership will begin on the date of enrollment. Any genetic conditions or complications for newborns not born as part of a shareable maternity need are considered pre-existing and subject to the same limitations as defined in the section "Medical Conditions Existing Prior to Membership."

4. Adoption

Knew Health regards adopted children the same as biological children regarding membership. Any physical conditions of which the adoptive parents are aware prior to the legal adoption of the child are considered pre-existing conditions and are subject to the sharing limitations and phase-in period outlined in the Member Guidelines. Adopted children cannot be added to a Knew Health membership prior to birth.

5. Grandchildren

A grandchild (or grandchildren) may be included as part of their grandparent's membership if they meet the following criteria.

1. The grandparent has legal custody of the grandchild.
2. The grandchild lives with their grandparents at least nine months out of the year.
3. There is no other agency, person, or group responsible for the grandchild's medical needs.

6. Tobacco

Knew Health households with one or more tobacco users are required to contribute a higher monthly contribution to maintain membership. The monthly tobacco surcharge is \$112.50 per household.

A household member who has used any tobacco product one or more times a month within the past year is considered a tobacco user. Tobacco products include, but are not limited to, cigarettes, cigars, chewing tobacco, snuff, vape products, and pipe tobacco. Smoked cannabis products are considered tobacco for the purposes of the tobacco surcharge.

Member Responsibilities

All members of Knew Health share certain responsibilities to remain a part of the sharing program. Because the actions of one member can affect the entire community, each member will be held accountable for following these standards.

1. Member Contributions

Monthly membership contributions should be made in a timely manner. If contributions are not made within 30 days of the due date, the membership will be inactivated, and any needs will not be shareable. See “Participation through Contributions” for more information.

2. Proper Submission of Medical Needs to Knew Health

For Knew Health to share in a member’s medical expenses, the member is responsible for submitting a complete and correct Needs Request within six months of the treatment date to Knew Health. This process is outlined in the section titled “Submission of Medical Needs.”

3. Trust & Accountability

Knew Health community members are expected to act with honor and integrity. Members should not falsify medical needs or medical records or use deceptive practices. If a member abuses the trust of Knew Health and its members, their membership may be revoked.

How Needs are Shared

This section explains how the shareable amount of a member's medical expenses will be determined.

Medical needs are submitted on a per member, per incident basis. Medical needs may be injuries or illnesses that result in medical expenses. These medical expenses may be incurred by receiving medically necessary treatment from licensed medical professionals and facilities, such as physicians, emergency rooms, and hospital facilities.

When a member has a medical expense to be shared, the member must submit original, itemized bills for the medical expense within six months of treatment. Bills submitted more than six months after the service date of treatment will not be shareable. There is no lifetime limit on the number of conditions or the total dollar amount that may be shared.

1. Determination of a Need

Expenses related to the same medical condition, whether expenses for a single incident or separate incidents, will be shared as one need. The related expenses will accumulate toward the total need amount.

2. Initial Unshareable Amount (IUA)

The initial unshareable amount, or IUA, is the amount that a member will pay before the Knew Health community shares in eligible medical expenses. The IUA is also known as your personal responsibility. Knew Health has five primary levels of personal responsibility: \$500, \$1,000, \$1,500, \$2,500, and \$5,000. The lower your personal responsibility (or IUA), the higher your monthly contribution will be.

All qualifying medical expenses submitted after the IUA is met are shareable with the Knew Health community at one hundred percent. There is no annual or lifetime limit. You will not need to pay the IUA for a single need again until you are symptom free for 12 months. Additionally, you will not be responsible for more than three IUAs in a rolling 12-month period.

3. Changing your IUA

Members may choose to change their IUA once per membership year. If an IUA is lowered, a 60-day waiting period will apply to all needs other than those resulting from an accident.

4. Maximum Shareable Amount

There is no annual or lifetime maximum shareable amount for any member or membership household. Knew Health has a systematic way to handle large needs and has budgeted to address large needs.

5. Multiple Needs in a 12-Month Period

Member households that experience multiple needs will be responsible for up to three IUAs within a rolling 12-month period. After a member has paid three IUAs in a twelve-month period, any additional shareable needs of \$500 or more will be shared with the Knew Health community at one hundred percent.

6. Insurance Companies & Government Entities

Insurance companies and government entities are primarily responsible for the payment of a member's medical expenses. Members who are eligible for benefits through either insurance or government assistance must contact the Knew Health Needs team before submitting their medical need.

7. Active Membership

To participate in medical cost sharing with the Knew Health community, a membership must be active. Membership is considered active when the member has paid their monthly contributions on time and is in good standing with Knew Health.

For a medical need to be shared, the membership must be active during the date(s) of service, when medical bills are received, and at the time the IUA is paid. If a membership deactivates before the determination of sharing is made, the bills will not be shared with the community. Any pre-existing condition limitations are applied based on the first date of active membership.

8. Late Fees and Interest

Any late payment fees or interest charges that may accrue to medical bills before the member meets their IUA are the member's responsibility—they are not shareable.

Additionally, any late payment fees or interest charges caused by a member's delay in providing necessary documentation to Knew Health are not shareable.

9. Appeals

If a member believes that a limitation was incorrectly placed on member sharing, an appeal may be submitted. Members may submit an appeal and provide supporting medical evidence to have the membership limitation removed. All appeals are reviewed by a committee that includes at least one Knew Health board member.

To file an appeal, send the medical evidence, an explanation of why you feel that the limitation was placed unfairly, and any supporting documentation to needs@knewhealth.com.

Medical Conditions Existing Prior to Membership

To keep membership contributions low for all members, Knew Health implements a waiting period for sharing of medical conditions that exist prior to enrollment in a Knew Health membership. This section defines medical conditions prior to membership and outlines the sharing limitations.

1. Definition: 24 Months Symptom and Treatment Free

Needs that arise from conditions that existed prior to membership are only shareable if the condition was regarded as cured and did not require treatment or present symptoms for 24 months prior to the effective date of membership.

Any diagnosed illness or injury for which a person has been examined, taken medication, had symptoms, or received medical treatment within 24 months prior to the effective date of membership is considered a pre-existing condition. For more information, please see the definition of pre-existing condition listed under “defined terms.”

2. Exceptions for High Blood Pressure, High Cholesterol, and Diabetes

High blood pressure, high cholesterol, and diabetes (types 1 and 2) will not be considered preexisting conditions as long as the member has not been hospitalized for the condition in the 12 months prior to enrollment and is able to control it through medication and/or diet.

3. Exceptions for Other Medical Conditions

Knew Health recognizes that each member’s situation is different. Knew Health reserves the right to make exceptions for certain medical conditions on a case-by-case basis. Knew Health makes decisions in service to the community as a whole.

4. Pre-Existing Condition Phase-In Period

Pre-existing conditions have a phase-in period wherein sharing is limited. Starting from the initial enrollment date, members have a one-year waiting period before pre-existing conditions are shareable. After the first year, pre-existing needs are eligible for sharing on a limited basis, with the amount increasing each membership year. Members are never required to pay a second IUA for the same need, including pre-existing conditions.

Knew Health attempts to negotiate all medical bills received. Even if a pre-existing condition is not shareable, members may still receive discounts for their services through negotiation.

Shareable amounts for pre-existing conditions:

- Year One: \$0 (waiting period)
- Year Two: \$25,000 maximum per need
- Year Three: \$50,000 maximum per need
- Year Four: \$125,000 maximum per need

After year four of membership, expenses related to pre-existing conditions will remain shareable at a maximum of \$125,000 in a 12-month rolling period and resetting each membership year.

Limitations on Sharing

Member needs not associated with a prior medical condition are generally shareable. The following list reflects limitations on sharing. All shareable expenses are subject to the member's IUA.

1. Abortion

Expenses for the abortion of a living, unborn baby are not shareable.

2. ADHD, ADHS, and SPD Treatment

Expenses for prescriptions related to ADHD, ADHS, and SPD are not shareable.

3. Allergy Treatments

Allergy testing and medication is excluded from sharing. Needs that arise out of non-seasonal allergies, such as an emergency room visit for an allergic reaction, are considered shareable.

4. Alternative Medical Practices

Alternative medical treatments may be shared with the Knew Health community with prior written approval from Knew Health. Alternative medical treatments without written approval may not be shareable. To be considered a viable alternative to a traditional treatment plan, these treatments must be considered safe and effective. A member is also required to demonstrate the proposed value of the alternative treatment.

What is needed for Knew Health to consider an alternative medical need?

- Explanation of why the alternative medical need was selected
- Explanation of why the alternative medical need should be shared
- Doctor notes on current condition (Knew Health can help obtain doctor notes)
- Estimated costs (Knew Health can help obtain the estimated costs, if appropriate)

Knew Health considers alternative medical treatment plans on an individual basis and may put a cap on visits or shareable costs depending on the service.

5. Alcohol and Drug Abuse Treatment

Treatment for alcohol abuse, substance abuse, or chemical dependency is shareable up to \$3,000 per member.

6. Ambulance Transports

Ambulance transports are shareable as part of a need when they are required in relation to a specific shareable illness or injury.

7. Audiological

Audiological needs to correct hearing loss are shareable. Expenses related to hearing aids are not shareable.

8. Automobile Accidents

Needs arising from an automobile accident are only shareable when a third party or insurance entity is not liable. If the member's medical need is being considered, or should be considered, by a third party or insurance entity, the need is not shareable until Knew Health receives documentation to reflect a lack of liability or partial payment.

9. Cataract Surgery

Cataract surgery is treated as a pre-existing condition and subject to a one-year waiting period before it is shareable. Each eye is considered a separate need and subject to an individual IUA.

10. Chiropractic

Services related to the treatment of a specific musculoskeletal injury or disease are shareable for up to 25 office visits per need for up to 120 days. All other chiropractic services will be treated as alternative medical practices and are subject to the limitations as outlined.

11. Chronic Pain Therapy

Services related to chronic pain therapy have the same limitations as an alternative medical practice. They are shareable as part of a related eligible need, and members must get prior approval from Knew Health for the number and type of sessions. See the limitations on injections for more information.

12. Cosmetic Surgery

Expenses related to cosmetic surgery are shareable only for disfiguration due to a shareable injury or illness.

13. Dental

Knew Health may share in dental-related expenses that are deemed medical.

14. Diabetic Medication & Supplies

Any medical expenses related to supplies, testing, medication, or other implements used to treat insulin-dependent diabetes (type 1) are not shareable.

15. Emergency Visits

Emergency room visits are generally shareable separately or in conjunction with an eligible medical need related to an illness, injury, or accident. The first ER visit for a medical condition is treated as a normal need. Each additional visit related to the same condition requires the member to take on a personal responsibility of \$500 in addition to the member's IUA.

Members with nonemergency needs should seek out other treatment options such as doctor visits, telemedicine, urgent care clinics, or other appropriate care. Seeking proper nonemergency care reduces emergency room visits and the financial strain on the entire community.

16. Fertility

Expenses related to fertility evaluations and treatments are not shareable.

17. Genetic Mutation

Needs resulting from a genetic mutation that existed prior to membership are subject to the same limitations as other pre-existing conditions.

If the member did not receive a diagnosis, require treatment, present symptoms, or take medication for the genetic mutation in the 24 months prior to membership, needs related to the condition are considered shareable without pre-existing condition limitations.

18. Home Healthcare

Home healthcare expenses are shareable when related to an accident or injury and when the care has been prescribed by a licensed physician. Sharing of home healthcare expenses is limited to 30 days and \$5,000.

19. Hospice Care

Hospice care is shareable for 90-day periods when ordered by and under the care of a licensed care professional and upon physician approval or certification of terminal illness.

20. Hospitalization

Hospitalization is shareable at a semi-private room rate. If a medical provider prescribes ICU or quarantine, those expenses are also shareable.

21. Hyperbaric Therapy

Inpatient or outpatient hyperbaric therapy may be shareable for the treatment of a specific illness or injury. Outpatient hyperbaric therapy is shareable for up to 35 therapy sessions.

22. Injections

Injections related to pain management for a shareable need are shareable up to \$5,000. Hormone therapy injections related to a shareable need are shareable up to \$3,000. Injections related to gender transitioning or sex reassignment therapy are not shareable.

23. Injuries Obtained from Certain Acts

Injuries or illnesses resulting from participation in a riot, criminal act, euthanasia, assisted suicide, or other such acts are not shareable.

24. Laboratory Tests and Checkups

Laboratory tests and checkups are shareable as part of an eligible need and prescribed by a licensed medical provider.

25. Long-Term Care and Skilled Nursing

Long-term care and skilled nursing are shareable when prescribed by a licensed medical provider for recovery from a shareable injury or illness. Sharing for these services is limited to 90 days per medical need.

26. Medical Equipment

Medical equipment, including durable medical equipment (DME), is shareable if it is prescribed by a licensed medical provider and if it is related to a shareable need.

27. Medical Supplies

Medical supplies that directly aid in the treatment of, or recovery from, a shareable need are generally shareable for up to 120 days from the treatment start date as prescribed by a licensed medical provider. Medical supply costs must be over \$100 per item to be shared. Knew Health will share the retail costs (or fair costs when applicable) and, thus, encourages members to use alternative vendors such as local pharmacies or medical supply stores.

28. Mental Health

Expenses related to medications or other treatment for any mental health illness or condition are not shareable. Mental health conditions may include anxiety, depression, mental illnesses, and other psychological conditions.

29. Naturopathic

Naturopathic care may be shareable pending written approval from Knew Health. Any expenses incurred prior to receiving written approval are not shareable.

30. Newborn Care

Routine care for a newborn without complications is included with an eligible maternity need.

NICU care and other complications are treated as a separate need of the baby. Expenses related to circumcision are excluded from sharing.

31. Nutritionists and Dieticians

Expenses related to nutritionist and dietician services are not shareable unless prescribed by a licensed medical provider. Knew Health must provide approval for nutritionist and dietician services prior to sharing.

32. Occupational Therapy

Occupational therapy is shareable for inpatient treatment and up to 35 outpatient sessions per need, up to \$7,500.

33. Organ Transplants

Organ transplants are shareable; however, they are subject to limitations for conditions existing prior to membership.

34. Physical Therapy

Physical therapy is shareable for inpatient treatment and up to 35 outpatient sessions per need, up to \$7,500.

35. Prescriptions

Prescriptions for medications related to an eligible need and that are billed by a provider are considered shareable.

Prescriptions filled at a pharmacy will be considered for sharing under the following conditions: prior approval is given by Knew Health, the prescription is related to the treatment of a shareable need, and prescription costs accumulate to \$500 monthly. Sharing for these prescriptions is limited to 12 months.

Other prescription costs are generally not shareable.

36. Preventive Services

Preventive services are not subject to the IUA.

37. Sleep Apnea

Sleep apnea equipment and testing is not shareable with the Knew Health community.

38. Speech Therapy

Speech therapy in relation to a shareable illness, injury, or accident is shareable for 35 outpatient visits per condition, up to \$3,000. Speech therapy for conditions such as speech delays or learning impairments not caused by injury or accident is not shareable.

39. Sports

Knew Health may share medical expenses related to sporting activities.

Injuries or illnesses resulting from participation in professional sports are not shareable.

Injuries or illnesses resulting from recreational karate, jujitsu, taekwondo, or other combat sports are shareable when the member has not been paid to compete.

40. Sterilization

Elective sterilization, such as tubal ligation and vasectomy, is not shareable.

41. Suicide and Attempted Suicide

In the event of a dependent suicide, financial assistance can slightly ease the burden on our members. For this reason, Knew Health will share in expenses related to the suicide or attempted suicide of an adolescent up to age 18, up to \$25,000 and after a one-year waiting period of continuous membership.

42. Surrogacy

Expenses related to a surrogate pregnancy, whether or not the surrogate is a member, are not shareable.

43. Therapeutic Massage Therapy

Expenses related to therapeutic massage are shareable if the therapy is related to an eligible need and prescribed by a licensed medical provider. Massage therapy is shareable for 25 sessions per need, up to \$3,000.

44. Tobacco Use over 50

Medical cost sharing for the needs of tobacco users 50 years of age and older is limited to \$50,000 for each of the following four disease categories:

- Stroke
- Cancer
- Heart conditions
- Chronic obstructive pulmonary disease (COPD)

45. Vision

Knew Health may share in vision-related expenses that are deemed medical.

46. Weight Reduction

Expenses related to weight reduction are shareable if prescribed by a licensed medical provider and approved by Knew Health—up to \$3,000 per need.

Maternity Needs

As a general rule, maternity needs are shareable and are treated like any other medical need.

1. General

As with any other medical need, expectant mothers pay a single IUA for all expenses related to their maternity need. Shareable expenses may be related to miscarriage, prenatal care, postnatal care, and delivery. STD screenings prescribed by a licensed practitioner as part of routine prenatal care are shareable as part of the maternity need. Maternity needs requests must be submitted within 30 days from the date the member's pregnancy is verified.

2. Separate Needs

Any need of the baby, whether occurring before or after birth, is separate from the mother's maternity need. Expenses for any pregnancy or birth-related complications of the mother will be shared as part of the maternity need.

3. Early Sharing Requests

A maternity care provider may reduce normal charges if a member prepays some or all of the bill. If this is the case, Knew Health will consider sharing the maternity need prior to delivery. To be considered for early sharing, the member must submit an estimate from the provider with the needs request form.

4. Home Births

Home births typically incur fewer expenses. If the costs are significantly lower for a home birth than for a hospital birth and the member is under the care of a licensed care provider, Knew Health may partially waive the IUA for the maternity need.

5. Pregnancy Prior to Membership

Pregnancy that begins prior to membership, is not shareable. A newborn conceived prior to membership must be enrolled in Knew Health by the parents within 30 days of the child's birth.

For any pregnancy that is not shared as an eligible maternity need with Knew Health, any complications or conditions present at the time of birth are considered pre-existing and are subject to the applicable waiting periods for sharing.

6. Waiting Period

Pregnancy is considered a pre-existing condition if the pregnancy begins within the first 60 days of the membership.

7. Premature Birth

The baby's needs are fully shareable, even if the baby is born prematurely. Any services not included in a standard maternity need would be considered a separate need of the baby.

Submission of Medical Needs

Knew Health strives to share in its members' medical needs in a timely, accurate manner. To do this, it is crucial for members to submit medical needs correctly and include all required documentation.

1. Submitting a Needs Request

Needs requests should be submitted through the Knew Health Member Portal. Needs requests should be submitted as soon as possible. Most non-emergency needs requests, such as surgical procedures, should be submitted prior to the date of service. For any help with this process, members may contact Knew Health directly during business hours.

2. Required Documentation

Needs requests must contain all required documentation, including but not limited to the following:

- Itemized bills
- Proof of IUA payment
- Medical records and other additional documents

3. Time Limit for Providing Documentation

Original, itemized bills should be submitted promptly to Knew Health along with the needs request form in order for Knew Health to process your need as soon as possible. In order to be shared, bills and needs requests must be submitted within six months of the date of service.

4. Meeting the IUA

Needs are only shareable with Knew Health after the member has met their IUA. Members should provide documentation to Knew Health of all payments that may contribute toward the member's IUA. The IUA must be paid within six months of the needs request submission or bills may become ineligible for sharing.

5. Negotiating Medical Bills

Knew Health prefers to pay providers quickly and negotiate the best rates for healthcare services. This helps Knew Health keep rates low for members.

Members should inform Knew Health about any potential cash-pay discounts and consult with the Needs team prior to signing any payment arrangements. Knew Health is happy to participate in cost negotiations for its members.

End of Life Assistance

If a member, or a member's dependent, dies after one year of uninterrupted membership, financial assistance will be provided to the surviving family. The member community will provide assistance upon receipt of a copy of the death certificate.

Financial assistance will be provided to the surviving family as follows:

- \$10,000 upon the death of a primary member
- \$10,000 upon the death of a dependent spouse
- \$2,500 upon the death of a dependent child

Appendix A: Defined Terms

1. Annual limit

The maximum amount shared for eligible needs per participating member per year. Knew Health does not have annual or lifetime sharing limits for our members unless specifically stated in the Membership Guidelines.

2. Application date

The date Knew Health receives a complete membership application.

3. Benevolent organization

An organization whose primary purpose is to care for the needs of the persons/members who make up the membership. A benevolent organization is not an insurance company.

4. Benevolent fund

A fund maintained by Knew Health created from the contributions of members for the exclusive purpose of sharing eligible needs of members in accordance with the Medical Cost Sharing Guidelines.

5. Contribution list

A list of members who are being billed by payroll deduction through a company opposed in lieu of direct billing from Knew Health.

6. Date of Service

The day medical services were rendered on behalf of a participating member.

7. Dependent

The head of household's spouse or unmarried child(ren) under the age of 26, who are the head of household's dependent by birth, legal adoption, or marriage, and who are participating under the same combined membership. Unmarried children under 26 years of age may participate in the membership as a dependent.

8. Effective date

The date a person's membership begins.

9. Eligible need

A medical need that qualifies for sharing via the contributions of Knew Health members.

10. Head of household

The oldest participating member in the household.

11. Household membership

One or more family members participating under the same membership.

12. Healthcare sharing

A membership-based, non-insurance arrangement established for the purpose of sharing legitimate healthcare expenses between members.

13. Inactive member

A contributor, and contributor's dependents if applicable, who has/have not submitted monthly contributions in the manner established by the Member Guidelines. An inactive member is not eligible for sharing.

14. Ineligible need

A need disqualified from voluntary sharing of contributions from member contributions due to a policy set forth in the Member Guidelines.

15. Initial Unshareable Amount

The specified financial amount that members are required to bear on their own prior to any amount that may be eligible for sharing.

16. Licensed medical professional

An individual who has successfully completed a prescribed program of study in a variety of health fields and who has obtained a license or certificate indicating his or her competence to practice in that field (MD, DO, ND, NP, PT, PA, Chiropractor etc.)

17. Lifetime limit

The maximum amount shared for eligible needs over the course of an individual member's lifetime of membership.

18. Maternity Need

A need request that must be submitted once a member becomes pregnant within 30 days of confirmation of pregnancy from a licensed medical professional.

19. Maximum shareable amount

The maximum dollar amount (limit) that can be shared for any one need. Certain medical needs have a maximum shareable amount as described in the Guidelines.

20. Medically necessary

A service, procedure, or medication necessary to restore or maintain physical function and that is provided in the most cost-effective setting consistent with the member's condition. The fact that a provider may prescribe, administer, or recommend services or care does not make it medically necessary. This applies even if it is not listed as a membership limitation, or in the Member Guidelines. To help determine medical necessity, Knew Health may request medical records and information from licensed medical professionals.

21. Member(s)

A person or people (or dependent thereof) who has agreed in writing to abide by the requirements of Knew Health and is thereby eligible to participate in the sharing of medical needs with other members in accordance with the Member Guidelines and membership type.

22. Membership

This term applies to the collective body of all active, participating members of Knew Health.

23. Membership cancellation request

A request by a member to Knew Health requesting that their membership be cancelled. The request must include the reason for cancellation and the requested month in which the cancellation of the membership is to be effective. Knew Health requires 15 day notice prior to your payment draft date. Knew Health does not prorate cancellations or gift refunds. Cancellations become effective on the last day of your monthly billing anniversary following the timely receipt by Knew Health of your membership cancellation request.

24. Membership commitment

The required principles and ongoing behavioral code attested to by members as required for membership.

25. Member responsibility amounts

Amounts needed to be paid by the member for medical costs that are not sharable with the Knew Health community.

26. Membership update

A communication from the member to Knew Health providing any changes to the details of their membership information (i.e. change of address, phone number, etc.) or requesting that their membership be changed. The change request or update may take up to three business days to complete. Once a representative of Knew Health approves the requested changes, the approved changes may go into effect on the monthly membership anniversary.

27. Membership limitation

A specified medical condition for which medical needs arising from or associated with the condition are ineligible for reimbursement from the Benevolent Fund. An associated condition is one that is caused directly and primarily by the medical condition that is specifically ineligible. The membership limitation will be issued during the application process and may be subject to medical record review. Membership limitations (excluding cancer) do not apply to office visits/urgent care.

28. Member plan

A variety of sharing options are available with different initial unshareable amounts and sharing limits, as selected in writing on the membership application or enrollment portal and approved by Knew Health.

29. Membership withdrawal

When a membership has been or will be cancelled due to the submission of a Membership Cancellation Request, a violation of the Knew Health's Principles of Membership, or non-receipt of a voluntary monthly contribution or annual membership fee for more than 10 days past the date such payment was due. Such cancellation of membership is referred to as membership withdrawal.

30. Monthly contributions

Monetary contributions given voluntarily and placed in the care of Knew Health by a member to maintain active membership and to be disbursed for to the eligible needs of its members in accordance with the Member Guidelines

31. Needs request

A request that is required to process medical needs for accidents, injuries, or medical conditions that result in medical costs. Need requests can be submitted to needs@knewhealth.com or in the Knew Health Member Portal. The needs request must be submitted to Knew Health within six (6) months of the need to be eligible for sharing.

32. Non-affiliated provider

A non-network, licensed medical professional or facility as determined by Knew Health.

33. Office visit

Sick visits, wellness visits, specialists, and urgent care are generally considered to be office visits. The medical bill must include an office visit CPT code for the need to qualify as an office visit. Qualifications for sharing eligibility include exclusion of prior medical conditions and meeting your initial unshareable amount (IUA).

34. Plan administration

A collaborative process of planning, evaluating, facilitating, coordinating, and advocating for options and services to meet a participating Member's Eligible Needs through available resources to promote quality, cost-effective results.

35. Pre-existing condition

Any illness or accident for which a person has been diagnosed, received medical treatment, been examined, taken medication, or had symptoms for 24 months prior to the effective date. For information on sharing for pre-existing conditions, see the section of the Member Guidelines titled "Conditions Existing Prior to Membership."

36. Proration

If shareable needs are ever significantly greater than shares available in any given month, Knew Health may prorate the needs amount requested for medical expenses. This involves an across the board percentage reduction of needs payments but does not necessarily mean that all member needs will not be met in that month.

37. Shareable amount

The amount of the need request that remains after the member's initial unshareable amount has been satisfied and falls within the guidelines for sharing within the membership.

38. Explanation of benefits (EOB)

Correspondence that is delivered to the participating members and their providers once medical needs have been processed, are pending, or have been rejected. The Sharing Summary will state their member responsibility amount as well as any amounts shared by the Benevolent Fund on the member's behalf.

39. Unusual, customary, and reasonable costs (UCR)

The general cost of medical services in a geographic area, as determined by Knew Health, based on what providers in the area usually charge for the same or a similar medical service.

40. Unshareable amount(s)

A medical expense incurred by a member that is not shareable for one or more of the following reasons: a member's violation of the Knew Health's Principles of Membership, non-current membership status, or any other condition or requirement that is excluded by the Member Guidelines.

Appendix B: Frequently Asked Questions

What does Knew Health believe?

Knew Health believes that its members, in concert with the medical providers of their choosing, have a natural incentive to do what is best for themselves and their families. We also believe individuals have the primary responsibility for making their own healthcare decisions. When members have financial needs due to illness that are greater than they can bear individually, the goal of the Knew Health community, in a corporate sense, is to assist members in carrying one another's burdens. The method by which Knew Health seeks to facilitate the sharing of members' medical costs is to teach and apply these principles of community and responsibility as an integral part of its sharing philosophy.

What kind of company is Knew Health?

Knew Health Alliance, is a Delaware corporation with administrative offices in Englewood, New Jersey. Knew Health is not an insurance company. Knew Health provides the framework and administrative support for a healthcare cost sharing membership program.

Isn't Knew Health really just another health insurance company?

No. Insurance arrangements are a contract whereby one party agrees to be legally responsible for and accept another party's risk of loss in exchange for a payment—a premium. Medical cost sharing is an arrangement whereby members agree to share medical expenses through the act of voluntary giving. Knew Health is not licensed or registered by any insurance board or department. Knew Health does not assess applicants' health risks because neither Knew Health nor its members are assuming financial liability for any other member's risk. Unlike insurance, the focus of Knew Health is to provide an avenue for members to help each other bear their immediate healthcare expenses.

What's the advantage of Knew Health not being a health insurance company?

When health care costs are paid by someone other than the person receiving care, as is typically the case when an insurance company or government entity agrees to cover such costs, the healthcare model can be undermined. Knew Health believes many of the current 46 problems with the healthcare system are the direct result of restricting personal freedom and responsibility through dependence on third-party payers. Knew Health is designed to allow members to help one another while maintaining freedom of choice and personal responsibility.

Is Knew Health legal?

As a nonprofit corporation, Knew Health is required to abide by certain state and federal regulations. The health sharing program administered by Knew Health may be legally operated in all fifty (50) states. Currently, Knew Health cannot enroll new members in the state of Washington.

How are members of Knew Health affected by the federal healthcare law (including the Affordable Care Act)?

Beginning in 2019, individuals are no longer required to obtain minimum health insurance coverage pursuant to the “individual mandate” under the Affordable Care Act and will not be penalized for failing to purchase traditional health insurance.

How does Knew Health handle medical claims?

Because there is no transfer of risk, as defined in applicable insurance rules and regulations, with respect to Knew Health’s medical cost sharing program, no “claim” is ever owed by a Knew Health on behalf of any member. When members incur medical expenses, they experience medical needs that may or may not be eligible for reimbursement from the Benevolent Fund. Knew Health members are required to submit proof of their medical expenses to Knew Health. Knew Health then evaluates each submission for eligibility or ineligibility based on the Member Guidelines. Eligible needs are designated for sharing using the funds accumulated through monthly member contributions.

What procedure should I follow to request reimbursement for my medical bills when I have a need?

At or before the time a member receives medical service, the member should inform their medical providers (doctors, laboratories, clinics, hospitals, etc.) that he or she is a self-pay patient. Healthcare providers can send bills directly to Knew Health. Any proof of payment made towards their IUA (initial unshareable amount) should be submitted to Knew Health. Knew Health will review the submitted documentation for sharing with the community. Knew Health's team of medical bill negotiators may contact the providers to discuss the appropriate payment for the services that were performed and determine if negotiations are applicable for the billed amounts.

How long does it take Knew Health to process a medical need?

Typically, eligible reimbursement is made to members, or payment is made to the providers within 5-7 days once all documentation has been received.

Can I choose my own doctors and hospitals without being penalized?

Yes. Each member's personal freedom to select the medical providers of their choice is fundamental to Knew Health's philosophy. Knew Health endeavors to provide members with detailed and current information and recommendations to help them identify and receive treatment from the highest quality health provider(s). Accordingly, there are no out-of-network penalties or other restrictions.

Does Knew Health charge monthly premiums?

Because Knew Health is not insurance, it does not charge premiums. Rather, Knew Health's members freely choose to assist other members with their medical expenses by contributing a predetermined amount each month; called a "share." Ninety percent (90%) of each member's monthly contributions are designated solely for assisting other members' needs.

Does Knew Health use deductibles and co-insurance?

Because Knew Health is not insurance, it does not charge premiums. Rather, Knew Health's members freely choose to assist other members with their medical expenses by contributing a predetermined amount each month; called a "share." Ninety percent (90%) of each member's monthly contributions are designated solely for assisting other members' needs. No. Knew Health's process differs significantly from insurance practices in this regard; to our member's advantage. Traditional insurance deductibles are cumulative over the course of a predetermined plan period. Co-insurance is the portion of the medical expense owed by the patient. These insurance cost-sharing measures can amount to thousands of dollars in out-of-pocket costs to insurance policy holders annually. Conversely, when members incur an eligible medical expense that exceeds the initial unshareable amount, any amount above the initial unshareable amount may be eligible for sharing. On the fourth medical need in a household, the member no longer needs to pay the initial unshareable amount. If the additional medical expenses are more than \$500, the remaining costs are fully shareable with the community.

Will Knew Health share medical costs that were incurred outside of the United States?

Yes, members' eligible needs, wherever incurred, will be handled through the Knew Health sharing program.

What are Knew Health's membership requirements?

Knew Health members must agree to the Principles of Membership and be under 65 years of age.

Can my membership be dropped if I have very high medical needs?

Members cannot be dropped from the sharing program due to their medical needs. Neither membership nor monthly contribution is adversely impacted by the amount of medical expenses a member or their family members may have.

Can my family members participate in the sharing program?

Spouses, domestic partners, and dependent children are welcome to participate in the sharing program.

What if my dependents do not agree to abide by the Knew Health Member Guidelines?

All Members of Knew Health must agree to abide by the Knew Health membership requirements as directed by Knew Health. For children under the age of 26 who are living with their member parent or guardian, Knew Health requires that the member hold their children responsible for compliance with all requirements stated in the Member Guidelines. For example, Knew Health does not approve the sharing of medical expenses for injuries resulting from the use of illegal substances. Hence, medical expenses incurred by a member's child who is injured while he/she is under the influence of an illegal substance are generally not eligible for sharing.

Is there a lifetime or yearly maximum amount that is eligible for sharing for any one person or family?

There are no lifetime or annual maximum amounts eligible for sharing for most medical needs. Some conditions have limits, generally calculated per need, as described in the section "Limitations on Sharing." There is no limit on the number of needs that an individual member or household may have.

What kinds of needs do Knew Health members share?

In general, needs for illnesses or injuries resulting in visits to licensed medical providers, emergency rooms, testing facilities, or hospitals are shared on a per person, per incident basis once the member has met their personal responsibility by paying their initial unshareable amount.

What kinds of needs do Knew Health members not share?

Needs resulting from medical conditions that existed prior to the effective date are typically not shared or are shared in a limited capacity. Each member has an IUA (initial unshareable amount) for which reimbursement from the Benevolent Fund will not be made.

How does Knew Health handle very large medical expenses?

Knew Health takes steps to ensure that money is set aside for very large medical needs. A minimum of 15% of all monthly member contributions are set aside in preparation of the occurrence of very large medical expenses, i.e. those over \$100,000.

What amounts do members share for maternity needs?

For a pregnancy that begins after the start of a member's effective date, maternity needs are shared like any other need. For a pregnancy that began prior to a member's effective date, pregnancy is treated as a pre-existing condition and not shared.

Am I excluded from membership/reimbursement eligibility if I am a cancer survivor?

No. In fact, there are several ways in which costs related to treatment for cancer survivors could be shared:

- 1) The expenses for a second occurrence of cancer would only be ineligible for sharing if it "resulted from" the first episode of cancer.

- 2) Except for insulin-dependent diabetes, all conditions a member had prior to their effective date may be shareable according to the limitations set forth in the section "Medical Conditions Existing Prior to Membership."

How does Knew Health handle expenses for medical treatments that occurred overseas?

Bills from medical treatments that occurred overseas must be written in or translated into English and the price converted to U.S. dollars before the need is submitted. They are then processed in the same manner as bills from medical treatment in the U.S.

What if I lose my job or change employers? Can I take my Knew Health plan with me?

Yes, continuation of membership in Knew Health's sharing program after termination of employment is a simple process. Because membership is individually based, members can change the billing method at any time.

This program sounds kind of unusual; does it really work?

The concept of medical cost sharing has been highly successful within the confines of faith based groups for more than forty (40) years. During this time period, hundreds of thousands of individuals, families, and businesses have shared hundreds of millions of dollars in medical expenses. As a result, there is a strong foundational precedent in the concept of medical cost sharing.

A community of health-conscious individuals who care for their fellow men can successfully participate in the sharing of medical expenses in a manner that will reduce the financial burden of receiving medical care for all members. Members should note, however, that past successes by faith-based sharing groups assisting one another is no guarantee of the future success of similar programs. There is no promise or contract by Knew Health or the members to contribute toward any need any other member might have in the future.

What happens if Knew Health's members' needs are greater than the monthly contributions received?

Knew Health keeps excess funds to share member needs in the event that needs for a month exceed the monthly contributions received. To date, all eligible needs have been shared in full without need to draw from the excess funds.

However, if the rare event occurs that all needs cannot be met for a given month, Knew Health uses a prorating method to evenly distribute the available funds among members with needs. For example, if the monthly contributions received for a given month amounts to 80% of the needs submitted for that month, each member would have 80% of their eligible expenses shared that month. The Knew Health community has not needed to prorate member needs in the past and has ample excess sharing contributions to draw from, but has these procedures in place to account for every possibility.

How much does it cost to belong to Knew Health?

Every member provides a specific monthly contribution depending on their plan type, age, and chosen initial unshareable amount. Employer contributions, if applicable, can also affect the monthly cost to the member. See the Knew Health website for current monthly contribution rates. Monthly contributions are subject to change by vote of Knew Health's board of directors.

Can my employer pay some, or all, of my monthly contribution amount?

Yes, there is no limit (other than business financial restraints) as to how much your employer can contribute towards your required monthly contribution.

How is my portion of the monthly contribution collected?

Knew Health offers multiple payment options for members to pay their monthly contributions, including card payment and payment through payroll deductions.

Are my monthly contributions higher if I, or a participating member in my family, uses tobacco products?

Yes. Tobacco use of any kind is clinically proven to cause serious health conditions. Due to the increased likelihood of higher medical costs associated with tobacco use, Knew Health households with one or more tobacco users are required to contribute a higher monthly contribution amount to maintain membership. Additionally, medical needs for tobacco users age 50 and older are limited to \$50,000 for each of the following four disease categories: cancer, heart conditions, COPD, and stroke.

Are my monthly contributions a pre-tax deduction like health insurance premiums?

No. The monthly contribution is a voluntary contribution towards a membership program that facilitates the sharing of member's medical bills. As such, the money members contribute to the Knew Health program is a post-tax contribution.

How often can the monthly contribution amounts be changed?

Monthly contribution amounts can be changed twice a year, in accordance with the policies and procedures set forth in these guidelines. The monthly contribution can only change when approved by Knew Health's board of directors. To date, Knew Health has never had to increase the monthly contribution rate and does not plan to do so in the near future.

Are my pre-existing conditions always unshareable?

In the first year of membership, pre-existing conditions are not shareable with the Knew Health community. Pre-existing conditions become shareable on a limited basis after one year of continuous membership, with the limit increasing to a maximum of \$125,000 per need in the fourth year of membership and onward. For more information, see the section “Medical Conditions Existing Prior to Membership.”

Appendix C: Company FAQs

Is Knew Health a group benefit?

No, Knew Health is an individual and family medical cost sharing program. We allow for a company contribution list. Employees who participate can be added or removed from the contributions list at any time and billed directly.

Why should my company participate in Knew Health's medical cost sharing program?

Participation in Knew Health's program is always voluntary, both from the company's and the employee's perspectives. Business owners choose to work with Knew Health because they value community and personal responsibility and because they want to use a cost sharing approach to ensure provision of quality healthcare for their employees. There are numerous factors that contribute to Knew Health's greater efficiencies for both companies and employees.

Does Knew Health's medical cost sharing program comply with the Affordable Care Act requirements?

Knew Health's sharing program is not a substitute for insurance as defined by the Affordable Care Act and therefore does not meet the requirements by itself.

What are the risks and liabilities my company may be exposed to through participation in Knew Health?

Knew Health Alliance is a voluntary and benevolent program. It is not insurance. Member companies are not purchasing insurance coverage by participating in the sharing program. By participating in the sharing program, companies are neither promising their employees that their larger medical bills will be paid, nor are they taking on liability to pay those bills as a company. Companies can choose to contribute on behalf of their employee members.

Can my employee's monthly contributions be collected via payroll deductions?

Yes. Knew Health allows members to join a contribution list of members who are part of a company. Employers can deduct member contributions by payroll deduction on a post-tax basis.

Can my company pay some or all of its employee's monthly contributions?

Yes. Participating companies can contribute as much of the employee's monthly contributions as they wish. It should be recognized that this is viewed as a component of the employee's total compensation. Companies can tier their employees based on legal requirements and offer different product bundles to each tier. Talk to your legal representative about legal requirements on tiering qualifications.

How do I set up my employees' withholding amounts?

Companies should consult with their own legal and tax advisors for more information regarding payroll and income tax implications for their specific situations.

Is there any additional administration or work for my company as a result of participation?

The Knew Health team is glad to assist with any questions you or your staff might have regarding monthly contributions and the entire Knew Health process.

The cost savings sounds great, but how will my employees be affected by Knew Health's program?

The employees of participating businesses are granted the opportunity to voluntarily join Knew Health's medical cost sharing program. As such, participating employees voluntarily choose to pay the portion of the monthly contribution that is not carried by their company. Any employee can withdraw from the program at any time, but if they do, they will no longer be eligible to receive contributions towards their medical expenses in the event that they incur a medical need.

Disclaimer

Knew Health is not an insurance company. Neither this publication nor membership in Knew Health are issued or offered by an insurance company. The purpose of these Member Guidelines is to help members understand and identify medical needs that qualify for potential sharing and the process by which payments are made. The Member Guidelines are not for the purpose of describing to prospective members what amounts will be reimbursed by Knew Health. While Knew Health has shared all eligible needs of its members to date, membership does not guarantee or promise that your eligible needs will be shared. Rather, membership in the Knew Health community merely guarantees the opportunity for members to care for one another in a time of need and present their medical needs to other members as outlined in these membership guidelines. The financial assistance Members receive will come from other members' monthly contributions and not from Knew Health.

THIS PUBLICATION AND MEMBERSHIP IN KNEW HEALTH SHOULD NEVER BE CONSIDERED A SUBSTITUTE FOR A HEALTH INSURANCE POLICY. IF THE MEMBERSHIP IS UNABLE TO SHARE IN ALL OR PART OF A MEMBER'S ELIGIBLE MEDICAL NEEDS, EACH MEMBER WILL REMAIN SOLELY FINANCIALLY LIABLE FOR ANY AND ALL UNPAID MEDICAL NEEDS. THESE GUIDELINES DO NOT CREATE A LEGALLY ENFORCEABLE CONTRACT BETWEEN KNEW HEALTH AND ANY OF ITS MEMBERS. NEITHER THESE GUIDELINES, NOR ANY OTHER ARRANGEMENT BETWEEN MEMBERS and KNEW HEALTH CREATE ANY RIGHTS FOR ANY MEMBER AS A RECIPROCAL BENEFICIARY, A THIRD-PARTY BENEFICIARY, OR OTHERWISE. AN EXCEPTION TO A SPECIFIC PROVISION OF THESE GUIDELINES ONLY MODIFIES THAT PARTICULAR PROVISION AND DOES NOT SUPERSEDE OR VOID ANY OTHER PROVISIONS. THE DECISION BY KNEW HEALTH TO REIMBURSE A MEMBER'S ELIGIBLE NEEDS DOES NOT AND SHALL NOT CONSTITUTE A WAIVER OF THIS PROVISION OR ESTABLISH BY ESTOPPEL OR ANY OTHER MEANS ANY OBLIGATION ON THE PART OF KNEW HEALTH TO REIMBURSE A MEMBER'S ELIGIBLE NEEDS.

Version 22.3

knewhealth



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MATERNITY GUIDE

We are so excited to share in this exciting and special time with you! The Member Guidelines, which are attached separately, explain what maternity services are eligible for sharing with Knew Health. This Maternity Guide will help you understand the process through which Knew Health shares in your maternity services as well as your responsibilities as a contributing member of Knew Health.

Please read each section of this guide carefully so you are familiar with each step of the process to avoid situations that could cause your maternity services to become ineligible for sharing.

KEY MATERNITY GUIDELINES

Here is a list of the most important maternity guidelines that define the submission timeline requirements for your maternity need. Please refer to the full maternity guidelines for further information and a complete list of what services are and are not shareable.

- Any pregnancy that is conceived prior to membership or within the first 60 days of membership is not eligible for sharing.
- Each membership has an IUA (Initial Unshareable Amount). This is your financial responsibility for each Medical Need shared with Knew Health. Your IUA amount was selected when you enrolled with Knew Health. Your IUA must be paid before Knew Health can share in any maternity related expenses.
- IUAs may be paid directly to Knew Health or to the provider. It is preferred that IUAs are paid directly to Knew Health rather than the provider. Please contact Knew Health if you would like to pay us directly.
- If you overpay your IUA to your provider, you must submit copies of all payment receipts to Knew Health along with associated itemized bills before a reimbursement can be issued.
- Because reimbursements are limited to 2 per need, we can reimburse once halfway through the pregnancy and again after delivery.
- Knew Health is not medical insurance; therefore, members of Knew Health are uninsured patients (unless they have medical insurance through a medical insurance provider). For this reason, Knew Health members should tell their providers they are uninsured and ask how the providers will work with them as an uninsured patient.
- If you have primary insurance, you must declare this when you submit your maternity need.
- Maternity Need Requests must be submitted no later than 6 months after pregnancy confirmation at your initial provider visit.

MATERNITY NEED CHECKLIST

I just found out I'm pregnant! Now what do I do?

- Submit maternity Need Request online
- Schedule your first provider appointment
- Submit Provider notes from your appointment to Knew Health
- Submit bills/financial agreements/payment packages to Knew Health
- Pay your IUA
- Submit your facility payment agreement to Knew Health
- Have your baby
- Add your newborn to your Knew Health Membership within 30 days of birth
- Submit any final medical bills to Knew Health

Your Maternity Sharing Request

You are encouraged to open a maternity Need as soon as you receive confirmation of your pregnancy. This allows for proper and timely processing of the bills associated with the shareable maternity services and avoids circumstances where medical services may become ineligible for sharing with Knew Health. Maternity Needs must be submitted in writing through your Knew Health Member Portal.

At your first provider appointment...

- Request a record of the first OB visit and submit to needs@knewhealth.com
- Tell your provider you do not have insurance and ask how the provider will work with you as a self-pay patient. Request a financial package or prepayment agreement with the provider that includes self-pay discounts. Request that your provider provide a copy of the package or agreement in writing. These packages include prenatal, delivery, and postpartum care. They may or may not include sonogram and bloodwork.
- Submit itemized bills and package/agreement documents to needs@knewhealth.com

When you schedule the birth with the facility...

- Contact the pre-registration department, let them know you are not insured and ask them how they will work you as a self-pay patient. Request a written prepayment agreement and submit it to Knew Health as soon as possible.

When your baby is born...

- Add your newborn to your Knew Health membership within 30 days of delivery.
- Gather all final medical bills and submit them to Knew Health.

OBTAINING A PREPAYMENT AGREEMENT

Prepayment agreements can be obtained from most OB/GYNs and hospitals or birthing centers. Obtaining a prepayment agreement allows Knew Health to pay for your eligible maternity expenses ahead of time.

Prepay agreements with itemized statements must be submitted within six months of your pregnancy confirmation, but it is best to obtain these documents as soon as possible. Knew Health cannot share in any medical expenses until you have paid your IUA.

OB/GYN

A prepayment agreement from your OB/GYN is also called a global package. It will usually include appointments, blood work, and labor and delivery charges.

HOSPITAL

If you plan to give birth at a hospital, you will need a hospital prepayment agreement in addition to your OB/GYN prepayment agreement. In most cases, Knew Health can prepay your delivery charges before the baby is born.

BIRTHING CENTER OR HOME BIRTH

If you do not plan to deliver in a hospital, obtain a prepayment agreement from the provider who will deliver your newborn. The agreement should include any services from prenatal care to delivery. All charges must be pre-approved by Knew Health. Please refer to the Member Guidelines for a complete list of what is and is not shareable.

SUBMITTING BILLS

All submitted bills related to your maternity Need Request must include the following information:

- Patient's name
- Date of service
- Place of service
- An itemized list of charges for each service
- Procedural (CPT) codes for each service (or a detailed description of services)

FREQUENTLY ASKED QUESTIONS

HOW DO I KNOW IF MY MATERNITY NEED REQUEST IS SHAREABLE?

Any pregnancy that is conceived prior to membership or within the first 60 days of membership is not eligible for sharing. Your conception date will be verified based on notes from your first provider appointment.

HOW WILL I KNOW WHAT BILLS ARE ELIGIBLE FOR SHARING?

Once Knew Health receives the necessary paperwork and itemized invoices, we will review the bills to make sure they're eligible for sharing according to our Member Guidelines and that there are no billing mistakes.

WHEN WILL KNEW HEALTH SHARE MY EXPENSES?

Each member has an Initial Unshareable Amount (IUA) that must be paid before your maternity Need Request becomes eligible for sharing. Your IUA, or personal responsibility amount, was selected when you enrolled with Knew Health.

WHAT IF MY HEALTHCARE PROVIDER WILL ONLY BILL PER VISIT?

If your OB/GYN will not provide you with a prepayment agreement, you must submit medical bills directly to Knew Health. To ensure you receive a fair rate, inform your provider you are an uninsured, self-pay patient.

HOW DO I PAY MY IUA?

IUAs can be paid to your provider or directly to Knew Health. We prefer you pay your IUA directly to Knew Health. Please contact us if you would like to pay your IUA directly.

If you pay your IUA to your provider, you must submit copies of all payment receipts.

If you overpay your IUA, Knew Health can make reimbursements twice per medical Need Request, once halfway through the pregnancy and a second after delivery.

HOW LONG DO I HAVE TO SUBMIT MEDICAL BILLS?

Bills must be submitted within six months of service. Expenses that are submitted after this deadline are not eligible for sharing.

HOW DO MY PROVIDERS RECEIVE PAYMENT?

Knew Health can pay the provider directly or reimburse you for eligible expenses. If your provider has a set limit for reduced charges (seven months is common), notify Knew Health as soon as possible.

WHAT IF I HAVE COMPLICATIONS WITH MY PREGNANCY?

Please contact Knew Health and let us know and we will work with you.

WHAT IF MY PROVIDER RECOMMENDS THAT I SEE OTHER PROVIDERS?

Please contact Knew Health prior to your first visit with your additional provider so we can discuss what services are shareable with your maternity Need Request. Some services may not be shareable. We may require medical confirmation and a letter of medical necessity from your provider for additional services to be eligible for sharing.

WHAT IF I HAVE MEDICAL INSURANCE ALONGSIDE MY KNEW HEALTH MEMBERSHIP?

If you have primary insurance, you must declare this when you submit your medical Need Request.

knewhealth



**MATERNITY
GUIDELINES**

GENERAL

As with any other medical need requests, expectant mothers pay a single IUA for all expenses related to their maternity Need Request. Shareable expenses may be related to miscarriage, prenatal care, postnatal care, and delivery.

Please submit your maternity Need Request as soon as possible, but no later than 6 months from pregnancy confirmations so we can best assist you with your maternity Need Request.

WAITING PERIOD

Pregnancy is considered to have existed prior to Membership if conception occurs prior to or within the first 60 days of the Membership.

Conception that occurs prior to Membership or within the first 60 days of Membership is not shareable.

Newborns who are not born as part of a shareable maternity Need must be enrolled manually in a Knew Health Membership. The newborn's Membership will begin on the date of enrollment, but can be no sooner than seven days after delivery. Any complications that the newborn may have, or any medical conditions present at birth, will be considered pre-membership medical conditions. Such conditions are subject to the same waiting periods as other pre-membership medical conditions.

WHAT IS SHAREABLE

PRENATAL

- Routine office visits
- Routine lab work
- Most immunizations (such as flu shots)
- Fetal non-stress test (after 36-weeks)
- Up to three standard ultrasounds (unless an unexpected complication requires additional scans)
- STD/STI screenings prescribed by a licensed practitioner as part of routine prenatal care

DELIVERY

- OB/GYN labor and delivery
- Cesarean
- Multiple births
- Hospital labor and delivery
- Hospital room and board
- Anesthesiologist
- Legally practicing midwives
- Home births
- Birthing centers
- Charges related to unexpected complications with mother
- One in-hospital pediatrician visit, including routine immunizations, routine lab work, and routine hearing tests (these are shareable when the baby is added to the membership within 30 days of delivery and when these services occur prior to discharge from hospital)

POSTNATAL

- Mother's six-week postpartum checkup with pap test
- 2-week cesarean post-op appointment

WHAT IS UNSHAREABLE

PRENATAL

- 3D & 4D ultrasounds
- Non-prescription supplements
- Genetic testing, including but not limited to
 - Amniocentesis Inhibin A
 - Alpha-Fetoprotein Serum (AFP)
 - Any type of Nuchal Translucency (NT) ultrasounds
 - NIPT testing
 - Services by companies providing genetic testing

DELIVERY

- Doula services
- Birthing tubs (or other items)
- Placenta encapsulations
- Circumcision
- Diagnostic Hearing Screening (including evoked auditory tests, BAEP, ABR^c or BAER)

Other services may be ineligible as determined by Knew Health. If you have questions about a specific service, please contact Knew Health prior to receiving care.

POSTNATAL

- Breast pumps
- Lactation consultant
- Mother's immunizations
- Postpartum counseling
- Additional postpartum services

If you have questions about a specific service, please contact Knew Health prior to testing. All genetic testing will be the responsibility of the member.

Check-ups for the baby after delivery are not part of the maternity need request. These would either fall under standard preventive care, or would be considered a separate Need Request and subject to Member Guidelines eligibility determination.

Complications related to the baby would be considered a separate Need Request and subject to eligibility determination based on the Member Guidelines.

IUA PAYMENTS

Like any other shareable medical expense, the IUA must be paid prior to any cost sharing. The IUA must be paid within six months of the first day of service, or the maternity Need Request may become ineligible for sharing. Consideration will be given for situations where the cost of treatment has not exceeded the IUA after six months. Please contact the Needs Team in this situation. Any late payment fees or interest charges incurred because of a late IUA payment are not shareable.

Knew Health can take a one-time IUA payment, paid directly to us, to meet your IUA. Please speak with our Needs Team to coordinate an IUA payment. Members can also make payments directly to providers. Payments made directly to providers can count towards your IUA for shareable services. In the event of overpayment, IUA reimbursements can be given to the member. Knew Health has two reimbursement periods: midway through the pregnancy and after delivery.

SEPARATE NEED REQUESTS

Any additional Need Requests of the baby after birth, whether the condition existed before or after birth (including congenital conditions), is separate from the mother's maternity Need Request and will require a new medical Need Request submission and IUA for each baby. Expenses for any pregnancy or birth-related complications of the mother are considered for sharing as part of the maternity Need Request.

PREMATURE BIRTH

The baby's eligible Need Requests are considered shareable as part of an eligible maternity Need, even if the baby is born prematurely. Any services not included in a standard maternity Need would be considered a separate Need for the baby and will require a new medical Need Request submission and new IUA for each baby.

IN VITRO FERTILIZATION (IVF)

Expenses related to fertility treatments are not shareable.

For pregnancies occurring by IVF or other "non-traditional" fertilization methods, Knew Health defines the date of conception as the date the fertilized embryo is implanted in the uterus.

MISCARRIAGE

Any expenses related to a miscarriage that is associated with an eligible maternity Need are shareable if the costs exceed your IUA.

Expenses related to a miscarriage that is not associated with an eligible maternity Need are shareable as a regular Need Request.

GESTATIONAL DIABETES

Gestational diabetes is considered a complication of pregnancy, and members who develop this condition are encouraged to follow the recommendations of their treating providers.

Gestational diabetes is not considered insulin dependent. Therefore, costs of medications prescribed to treat gestational diabetes, including insulin, can be shared according to our prescription sharing guidelines.

Members are encouraged to seek counsel from their OB/GYN on dietary changes and exercise. Glucometers and test strips can be purchased at local pharmacies or online at reasonable costs. For these reasons, nutritionists, other therapists, and testing supplies are not shareable.