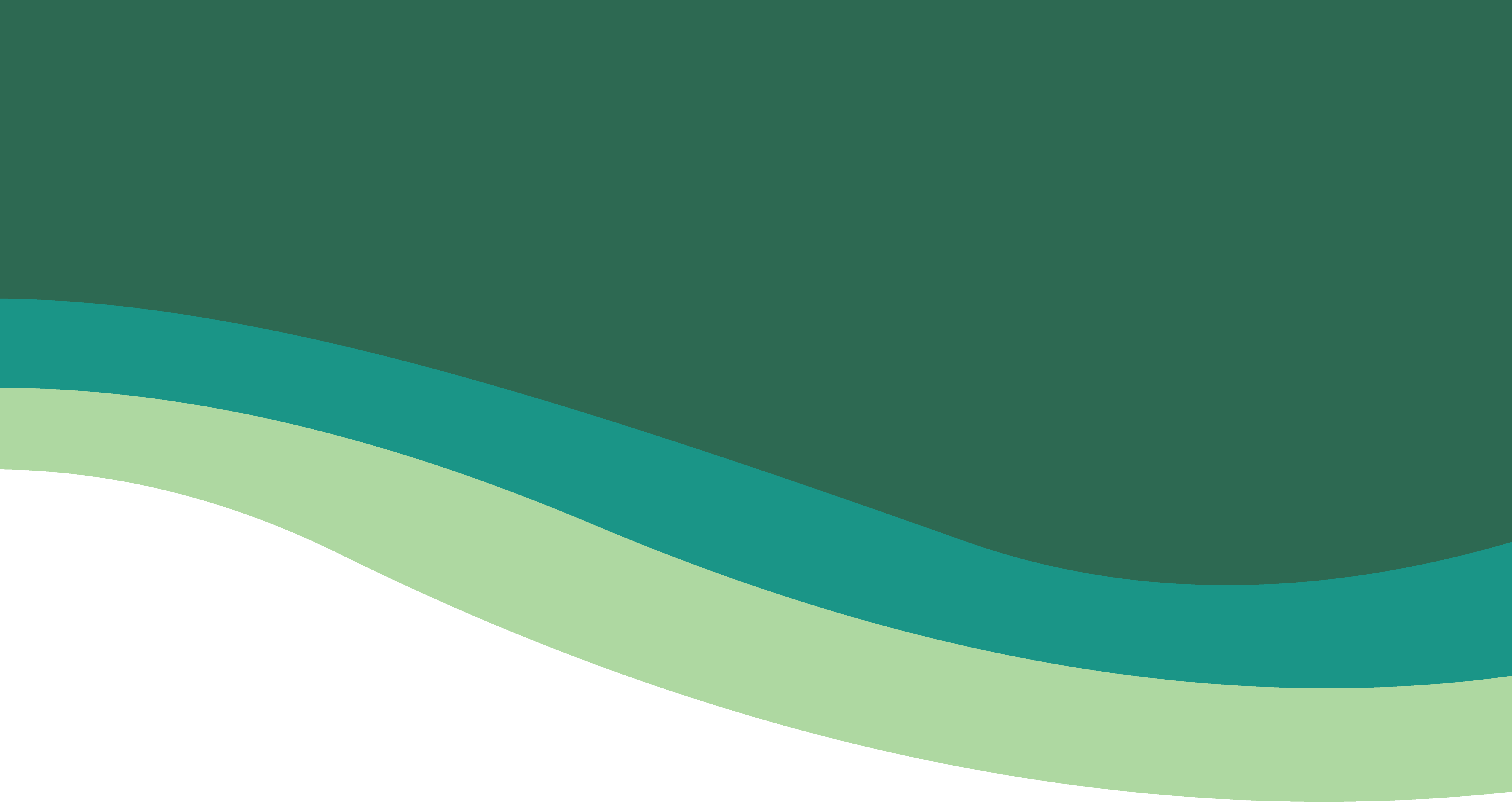




Member Guidelines



Knew Health is not an insurance company nor is the membership offered through an insurance company. Knew Health Membership does not satisfy state or federal requirements for healthcare coverage or minimum essential coverage. This is not a legally binding agreement to reimburse or indemnify you for medical expenses you incur. There is no guarantee of payment of medical expenses you incur.



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Subheading

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Knew Health's Mission

At Knew Health, we believe everyone should have easy access to preventive health and wellness resources. And everyone should have a safety net for when unexpected medical costs occur.

We put your health first by providing access to personalized health coaching, routine health visits and screenings, allowances for wellness care that goes beyond the routine, access to the highest quality supplements, complimentary lab work, telemedicine, 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 helping you easily navigate the healthcare system and choose the highest quality care for the most fair and reasonable rates. We make it possible to invest back into your health and wellness, and we'll have your back when unexpected medical costs happen. We're also here for joyous times of pregnancy and birth, whether it's a home birth or hospital delivery.

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 the highest quality healthcare, 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.

Guiding Beliefs

At Knew Health, we are united by a shared commitment to vibrant health and intentional living. Our community believes that true well-being comes from caring for our bodies, minds, and spirits through disciplined self-care and proactive wellness. We prioritize practices that foster strength, balance, and longevity — nourishing nutrition, regular movement, mindfulness, and natural healing. This is more than a lifestyle; it's a collective mission to support one another in health and in times of need. By embracing personal responsibility and preventative care, we create a compassionate and cost-effective approach to managing health costs while empowering each other to thrive.

Guiding Principles and Beliefs:

- We believe in the power of a health-conscious community to care for one another by directly sharing the costs of medical needs in a spirit of mutual support.
- We commit to living in alignment with practices that foster physical, emotional, mental, and spiritual health, including mindful nutrition, regular exercise, and proactive wellness.
- We value personal responsibility and preventative care, recognizing that the choices we make directly impact our long-term health and the well-being of our community.
- We embrace holistic and integrative health approaches, such as functional medicine, natural therapies, and evidence-based wellness practices.
- We support a balanced lifestyle and believe that self-care, discipline, and community support create the foundation for vibrant health and lower medical costs.

Principles of Membership

Each member of Knew Health must comply with the following requirements to maintain membership 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 Knew Health is a membership, not an insurance entity, and that Knew Health cannot guarantee payment of medical expenses.
- I have a shared faith in myself and members of Knew Health, as well as the strength of our Community.
- I believe I have a fundamental right guaranteed by the U.S. Constitution to freely associate in the lawful exercise of common beliefs to voluntarily share health expenses with one another.
- I believe in the importance of charity and benevolence as well as the social duties of voluntariness, integrity, honesty, and personal responsibility.
- I believe that practicing good health measures and striving for a balanced lifestyle is a commitment that all Knew Health Community members should make.
- I agree to abstain from the use of ALL illegal drugs in my state of residence, as well as abstaining from using prescription medications without a prescription.
- I agree to refrain from excessive alcohol consumption, and acts which are harmful to the body.
- I agree that members who use tobacco products, including, but not limited to, cigarettes, e-cigarettes, cigars, chewing tobacco, snuff, vape products, pipe tobacco, and smoked cannabis will have an increased monthly contribution of \$195.00 per Membership.
- I agree 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 on 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 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, 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.

Membership in the Knew Health Community is 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 Knew Health 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 the Knew Health Community. All member Needs and medical costs occurring after the membership is inactivated and before reinstatement will be ineligible for 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 and accurate membership enrollment form, the incomplete or inaccurate 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.

Membership Requirements

Knew Health offers different enrollment types for individuals and families. Monthly contributions are based on the enrollment type, Initial Unshareable Amount (IUA), and the age of the oldest participating member. 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.

- Individual Membership: an individual member of Knew Health
- Spouse/Domestic Partner Membership: A combined membership made up of two individuals that are married or are domestic partners
- Adult & Children: A combined membership made up of an individual adult member and any eligible dependent children (see below), without membership of a spouse or domestic partner
- Family Membership: A combined membership made up of two individuals who are married or who are domestic partners, and any dependent children

2. Dependents

An unmarried dependent child may participate under a combined membership with the head of household through the age of 25. Children born into a membership from an eligible maternity Need may participate under a combined membership as long as they are added to the membership within 30 days of their birth. Under a combined membership, the primary member 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 child reaches the age of 26 or marries, that child 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 pre-existing conditions.

3. Newborns

Newborns whose birth is part of a shareable maternity Need will need to be added to the Knew Health membership within 30 days of the birth to be active as of their date of birth. In the case of a change in household enrollment type, the monthly contribution amount will be adjusted and accounted for at the time the newborn is added.

Newborns who are not born as part of a shareable maternity Need must be enrolled manually in a Knew Health membership, taking effect the 1st of the month following enrollment. Any genetic conditions or medical 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/Smoked Products

Knew Health households with one or more tobacco users are required to contribute a higher monthly contribution to maintain membership. The monthly tobacco or smoked product surcharge is \$195.00 per Membership.

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

If a Member engages in tobacco/smoked product use after joining, they must contact Knew Health to have that change reflected on their membership. Please note that failure to report Tobacco/Smoked Product Use to Knew Health may result in termination of membership.

Member Responsibilities

All members of Knew Health share certain responsibilities to remain a part of the sharing Community. 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 the Knew Health Community to share in a member’s medical expenses, the member is responsible for submitting a complete and correct Need 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

Knew Health Community members are expected to act with honor and integrity. Members must not falsify medical Needs or medical records or use deceptive practices. Knew Health does not accept altered or changed medical records. If a member abuses the trust of Knew Health and its members, their membership will be revoked and may be subject to legal proceedings on behalf of the Community.

4. Accountability

Knew Health Community Members are expected to make every effort to obtain the lowest healthcare prices without sacrificing quality of care. These efforts include, but are not limited to, applying for Financial Assistance Programs (FAPs), obtaining self-pay discounts and adjustments, obtaining prompt-pay adjustments, engaging in good-faith with third-party negotiating teams, and initiating payment plans. If a Member does not act in good-faith to obtain the lowest healthcare prices, the Member may be held to Usual, Reasonable, and Customary (URC) pricing. Members are accountable to one another to ensure that costs, whether below or above the Initial Unshareable Amount (IUA), are the lowest possible to avoid monthly contribution increases.

General Wellness Sharing

The Knew Health Community proudly shares in the general wellness of our members, values the health of our community and is dedicated to their health and happiness.

For the following general wellness categories, members are not limited in their choice of licensed healthcare practitioner and general wellness is not subject to Initial Unshareable Amounts (IUAs). If general wellness visits or services result in the need for additional diagnostic testing, these future costs will be subject to a member's Initial Unshareable Amount (IUA) and a new Need. These allowances are based on a membership year (EX: if your membership became effective on May 1st your membership Year is 05/01/XXXX through 04/30/XXXX).

Shareable General Wellness:

- Adult annual well-visit: one visit shareable up to \$250/year
- Well-woman visit one visit shareable up to \$250/year, additional \$150 for a pap smear
- Well-child visits: shareable up to \$250/visit+immunizations costs based on age
 - Children Aged 0-12 months: 6 visits per year
 - Children Aged 13-24 months: 3 visits per year
 - Children Aged 25-36 months: 2 visits per year
 - Children Aged 36 months-18 years: 1 visit per year
- Screening Mammogram: Shareable up to \$500 starting at age 40 (schedule as recommended by healthcare provider)*
- Screening Colonoscopy: Shareable up to \$2500 starting at age 45 (schedule as recommended by healthcare provider)*
- STD Screenings: shareable up to \$150 per year
- Birth Control**: IUDs (intrauterine device) shareable up to \$1000 every 3 years, IUD removal office visits shareable up to \$300 every 3 years, all other forms are shareable up to \$200 per year

*The Knew Health Community will share in the cost of alternatives to routine breast cancer and colorectal cancer screenings, such as thermograms, 3-D ultrasounds, stool tests, and sigmoidoscopies. We encourage members to work with their licensed healthcare providers to confirm the optimal testing for their health Needs and cancer screenings. If a member proceeds with alternatives to mammograms or colonoscopies and requires additional testing, these costs will be subject to the member's IUA before being eligible to share. Please note that this does not extend to full body thermograms or scans. If screenings are needed before the recommended age, a note from your licensed healthcare provider will be required detailing the necessity for early screening.

**Over-the-counter items are excluded

Adult Immunization Allowances:

- Chickenpox (Varicella): shareable up to \$185 per dose
- Diphtheria, Whooping Cough (Pertussis), and Tetanus (TDAP): shareable up to \$75 per dose
- Flu (influenza): shareable up to \$50 per dose
- Hepatitis A: shareable up to \$105 per dose
- Hepatitis B: shareable up to \$155 per dose
- Human Papillomavirus (HPV): shareable up to \$295 per dose
- Measles, Mumps, and Rubella (MMR): shareable up to \$115 per dose
- Meningococcal: shareable up to \$225 per dose
- Pneumococcal: shareable up to \$275 per dose
- Shingles: shareable up to \$225 per dose
- COVID-19 Vaccine (annual): \$100 per dose (annual max)
- Respiratory Syncytial Virus (RSV): \$250 per dose

*This maximum shareable cost includes a \$25 administrative cost for self-pay patients.

Pediatric Immunization Allowances:

The Knew Health Community will share in pediatric immunization, administrative fees, and the cost of the vaccination, which are shareable up to 110% of the Private Sector Cost/Dose as published by the Center for Disease Control (CDC).

<https://www.cdc.gov/vaccines-for-children/php/awardees/current-cdc-vaccine-price-list.html>

General Lab Work

Lab work is an area where prices can vary drastically. To ensure that members can get fair rates on yearly lab work, Knew Health members have access to Evexia Diagnostics, whose rates run up to 90-95% lower than most other lab services. We encourage all members to use Evexia Diagnostics whenever possible.

Through Evexia Diagnostics, members have a selection of free tests, as well as individual tests, specialty kits, and panels. The lab allowance is applicable to blood work only (this does not include specialty kits).

The Knew Health Community will share up to \$80 per member per year for general lab work. This allowance is based on a membership Year (EX: if your membership became effective on May 1st, 05/01/XXXX through 04/30/XXXX).

If Evexia Diagnostics is not available, Members should contact your Knew Health Care Team to check all available lab work resources to ensure you do not incur lab costs that cannot be shared

Self-Care Credit (Supplemental Allowance)

Knew Health members go above and beyond routine wellness care to stay as healthy as possible. To help manage the cost of additional wellness care, each membership receives \$200 per year. This is not per member. This credit is based on a membership Year (EX: if your membership became effective on May 1st, 05/01/XXXX through 04/30/XXXX).

Examples include:

- maintenance chiropractic
- acupuncture care
- massage therapy
- counseling/therapy (mental/behavioral health)
- gym memberships
- nutritional supplement costs
- additional lab work

This credit is in addition to general wellness sharing and cannot be used for expenses that would go towards your Initial Unshareable Amount for injury, illness, or pregnancy expenses.

Direct Primary Care

Members of Knew Health can receive a 10% discount on their monthly contribution when they combine their membership with a direct primary care (DPC) membership that meets the following criteria:

- A minimum of 50% of the household is active with a direct primary care provider
- The direct primary care provider's website must clearly demonstrate that they are a direct primary care practice
- Virtual direct primary care may qualify if it meets all other criteria
- The membership must include routine primary care services

Please note that this discount is in lieu of sharing costs that are included with their direct primary care (DPC) membership. For any other general wellness services that are billed separately and not included in the direct primary care (DPC) membership, these costs can still be shared under the applicable allowance, i.e. immunizations, mammograms, etc.

To provide proof of DPC participation, members must provide a statement of participation from their practitioner or proof of payment. This needs to be emailed to hello@knewhealth.com. Proof of participation must be provided to Knew Health every 12 months.

How Medical 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, illnesses, or pregnancies 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 (date of service). Bills submitted more than six months after the 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.

In the event that a member suffers injury at the hand of another person/party leading that person/party to be liable or potentially liable for payment and the liable party and/or their insurer refuses to pay unless or until a legal remedy is reached, the member will be responsible to pursue such legal remedy against the liable person/party. The Knew Health Community reserves the right to not share and/or place conditions on the sharing of these Needs requests until such matter is settled or adjudicated.

2. Initial Unshareable Amount (IUA)

The Initial Unshareable Amount, or IUA, is the amount that a member will pay per Need before the Knew Health Community shares in eligible medical expenses. The IUA is also known as your personal responsibility. Knew Health has three primary levels of personal responsibility: \$1000, \$2500, and \$5000.

The lower your personal responsibility (or IUA), the higher your monthly contribution will be. Eligible medical expenses submitted after the IUA is met for a specific Need are shareable. There is no annual or lifetime limit. You would not be responsible to pay the IUA for the same Need again until you are symptom free for 12 months. Additionally, a membership will not be responsible for more than three IUAs in a membership year.

3. Changing Your IUA

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

4. Maximum Shareable Amount

While there is no lifetime maximum amount eligible for sharing for any household or membership, sharing is limited by the aggregate amount available for sharing from member contributions. In order to ensure equitable sharing among members, no single Need Request may consume more than 10% of the aggregate amount available for sharing in any calendar year. The ability to share up to 10% of the aggregate amount available for sharing in any calendar year, may only occur up to a maximum of two years.

5. Multiple Needs in a Membership Year

Memberships (including those with more than one member) that experience multiple Needs will only be responsible for up to three IUAs per membership within a membership year. After a membership has paid three IUAs in a membership year any additional shareable Needs that exceed \$500 in that membership year will have the IUA waived.

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 Knew Health before submitting their medical Need. Knew Health is not intended to share in co-pays or co-insurance, but the Knew Health Community may consider bills after they have been submitted to an insurance plan or government program. Explanations of benefits must be submitted for consideration in these circumstances.

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.

For a medical Need to be shared, the membership must be fully paid and 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 Community sharing, an appeal may be submitted. Members may submit an appeal and provide supporting medical evidence to have the sharing determination or 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 through the Appeal Form located in the Knew Health Member Portal within 30 days of the original determination being issued.

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 the effective date of 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 appears to be cured and 24 months prior to the effective date of membership have passed without symptoms, treatment, or medication (even if the cause of the symptoms are unknown or misdiagnosed).

Any medical condition that was symptomatic, suspected, diagnosed or required treatment within the 24 months prior to the effective date of membership is considered a pre-existing condition.

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 pre-existing conditions as long as the member has not been hospitalized for the condition in the 12 months prior to the effective date of membership and is able to control it through medication and/or lifestyle modifications.

3. Pre-Existing Condition Phase-In Period

Pre-existing conditions have a phase-in period wherein sharing is limited. Starting from the membership effective 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.

Knew Health attempts to negotiate all medical bills received. Even if a pre-existing condition is not shareable, members may still receive assistance to pursue 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. ADHD and SPD

Shareable after one year of continuous Membership. Maximum shareable amount of \$1,000 per member per membership year.

2. Allergy Care

Allergy testing, curative treatments, and medications are eligible for sharing after one, continuous year of Membership, up to \$2,500 per eligible Need. Needs arising from acute, non-seasonal allergies, such as an emergency room visit for an allergic reaction, are considered shareable. Each new acute episode is regarded as a new Need subject to the member's IUA. Such testing will not be shareable if ordered by alternative/functional/integrative medicine practitioners.

Treatment, testing, and medication for seasonal allergies are not shareable.

3. Alcohol and Substance Abuse Treatment

Treatment for alcohol abuse, substance abuse, or chemical dependency is shareable up to a lifetime maximum of \$3,000 per member. The Knew Health Community does not share costs for treatments related to addictions other than for alcohol abuse, substance abuse, or chemical dependency. Injuries or illnesses that directly result from a member abusing drugs, alcohol, or other controlled substances will not be shared.

4. Audiology

Audiological Needs to correct hearing loss are shareable up to a lifetime maximum of \$10,000 per member. Expenses related to hearing aids are not shareable.

5. Complications of Non-Shareable and/or Elective Surgeries/Procedures

Generally not Shareable. Exceptions exist when a true complication occurs during or immediately after the surgery/procedure that results in a member needing and receiving emergency medical attention to address an issue unrelated to the original intent of the non-shareable surgery/procedure.

Example: while receiving cosmetic breast implants, a member has a reaction to the anesthesia, resulting in emergency medical attention.

Complications from elective or cosmetic procedures, including dissatisfaction, regret, failure to obtain the desired results, or failure of cosmetic devices are not considered shareable complications.

6. Cosmetic Procedures

Generally not shareable. Exceptions exist when such procedures are necessary because of disfigurement resulting from a shareable Need. A mastectomy, reconstruction, or cosmetic procedure occurring because of a new cancer diagnosis after a membership Effective Date, is also generally eligible for sharing subject to any other applicable limitations in the Guidelines. Members undergoing a mastectomy, reconstruction, or cosmetic procedure as part of a pre-existing cancer diagnosis are subject to the Pre-Existing Sharing Limitations. Complications related to a shareable Need are generally shareable. Cosmetic reconstruction when eligible for sharing is limited to a lifetime maximum of \$20,000 per member. A member undergoing bilateral breast reduction as part of a shareable Need is eligible for up to a lifetime maximum of \$10,000 per member. Complications including dissatisfaction, regret, or failure to obtain the desired results are not considered shareable.

7. Dental

Dental procedures, such as, but not limited to, tooth extractions, cavities, crowns, and root canals, are generally not shareable when the procedure is or can be ordered/provided by a dentist, dental surgeon, oral surgeon, orthodontist, periodontist, endodontist, or other dental professional.

Tooth damage caused by a traumatic accident or injury may be considered for sharing up to a lifetime maximum of \$10,000 per member. Eating, chewing, and grinding related injuries are not considered a traumatic injury.

8. Dermatology

Dermatological screenings, annual visits, and checkups are not shareable. Diagnosis and therapy for normal, non-cancerous dermatologic conditions related to aging are not shareable. Diagnosis and therapy for other dermatological illnesses that exceed a member's IUA are generally shareable subject to other applicable provisions in the Member Guidelines.

9. Diabetic Medication & Supplies

Any medical expenses related to supplies, medication, or other implements used to treat or manage diabetes are not shareable.

10. Dialysis/End Stage Renal Care

Dialysis and/or End Stage Renal Disease shareable up to 12 months or \$90,000 per Need whichever is exceeded first.

11. 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 emergency room 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 non-emergency Needs should seek out other treatment options such as doctor visits, telemedicine, urgent care clinics, or other appropriate care. Seeking proper non-emergency care reduces emergency room visits and the financial strain on the entire Community.

12. Emergency Medical Transportation

Emergency transports, including but not limited to ambulance and airlifts, for life threatening emergencies are shareable as part of a Need when they are medically required in relation to a specific shareable illness or injury and/or whenever practical due to the severity, proximity and circumstances associated with a specific illness or injury, shareable up to \$10,000 per Need. Ambulance transports are not shareable for convenience purposes only or for scheduled appointments.

13. Fertility Care

Expenses related to fertility evaluations and treatments are not shareable.

14. Genetic Mutation and Testing

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. Genetic testing will only be considered for sharing if it is required for the treatment of a shareable condition, such as breast cancer.

15. High-Cost Therapeutics

Experimental drugs and/or therapies, such as cell therapy, gene therapy, immunotherapy, biologics, or individual new therapeutics are not eligible for sharing.

16. 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 per Need.

17. Hospice Care

Hospice care is shareable for up to 60-days or \$10,000, whichever occurs first, when ordered by and under the care of a licensed care professional and upon physician approval or certification of terminal illness.

18. Hospitalization

Hospitalization is shareable at a semi-private room rate up to \$250,000 per Need. If a medical provider prescribes ICU or quarantine, those expenses are also shareable up to \$250,000 per Need.

19. Injections

Injections related to pain management or inflammation are shareable up to \$5,000 per Need. Injections related to hormone therapy are shareable up to \$3,000 per Need. Injections related to gender transitioning or sex reassignment therapy are not shareable.

20. Injuries Obtained from Certain Acts

Injuries or illnesses resulting from participation in a riot, an act of war (declared or undeclared), civil insurrection, rebellion, riot, criminal acts (whether or not charged), euthanasia, assisted suicide, use of illegal substances, gross negligence or other such acts are not shareable.

21. Laboratory Tests, Diagnostic Imaging, and Check-Ups

Laboratory tests, diagnostic imaging, and checkups are shareable as part of an eligible Need when prescribed by a licensed medical provider. Fees for convenience, such as having phlebotomy/blood work done at home, are not eligible for sharing.

22. 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 60 days or \$20,000, whichever occurs first, per medical Need.

23. Medical Equipment

Medical equipment, including durable medical equipment, is shareable if prescribed by a licensed medical provider and related to a shareable Need up to 70% of the cost of the medical equipment up to \$25,000 per Need. The equipment must be a customary or necessary part of directly treating the condition (such as oxygen tanks and devices/respirators, special shoes, orthotics, crutches, etc.). Custom braces or orthotics are shareable up to one item or pair per body part, exceeding this limit needs prior approval.

24. Medical Practices (Alternative)

Some alternative medical treatments may be shared with the Knew Health Community with prior written approval from Knew Health. Toxic mold therapies, chronic lyme therapies, IV infusion therapies, peptide therapies, ozone therapies, light therapies, and platelet rich plasma/stem cell (PRP) therapies are not eligible to be shared with the Knew Health Community.

For other alternative medical treatments to be considered for approval, the treatment plan must be considered safe and effective. A member and licensed provider must be able to demonstrate the proposed value of the alternative treatment versus using current standards of care (also referred to as traditional or conventional treatment).

Approving alternative Needs will be done on an equitable basis to the current standards of care of the same condition. Alternative treatments that are more costly than the current standards of care may be capped on the amount that will be eligible for sharing. Choosing to start with alternative treatment and changing towards current standards of care may limit sharing based on what was shared for the alternative method.

Alternative treatments that need to go through the appropriate process include, but are not limited to:

- Acupuncture
- Homeopathy
- Naturopathy
- Functional and integrative medicine
- Nutritional supplements
- Detoxification
- Craniosacral therapy
- Use of diagnostics and therapeutics for Electromagnetic Hypersensitivity Syndrome, MCAS, chronic pain and other poorly characterized conditions
- Non-FDA approved uses of cryotherapy and light therapy
- All diagnostics and lab tests performed on healthy people other than screening testing as recommended by the US Preventive Task Force.
- Heavily marketed diagnostics or therapeutics that lack sufficient evidence to gain FDA approval.

What is required for Knew Health to consider an alternative medical Need in place of the current standards of care?

- Explanation of why the alternative medical treatment is being selected over the current standards of care. This should include, but not be limited to, evidence of treatment efficacy for the condition substantiated by peer-reviewed medical journals.
- The treatment plan from the provider that includes notes, costs, estimated duration of care, and an explanation of treatment.

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. Any expenses incurred prior to receiving written approval are not shareable. If a healthcare provider cannot itemize the services being provided, we cannot share in these requests. Treatment plans have to be clearly broken down into details (services by code, number of services, any other items included with the plan, and a clear timeline). Treatment plans can only be approved for durations up to 1 month in advance.

25. Medical Supplies

Medical supplies that directly aid in the treatment of, or recovery from, a shareable Need are generally shareable for up to 90 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).

26. 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. See section for ADHD and SPD.

27. Motor Vehicle Accidents

Needs resulting from a motor vehicle accident (automobile, motorcycle, motorized scooter, etc.) may be eligible for sharing if they are not the responsibility of any insurance or liable party. This would pertain to expenses that exists after any relevant insurers or responsible parties have processed claims and made final payment. This includes, but is not limited to, automobile insurance, health insurance policies, government assistance plans, workers compensation, or liability insurance.

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. If the member is suing another party for damages, the Knew Health Community cannot share in the resulting medical expenses.

The Knew Health Community will not share in motor vehicle accidents in which the member did not have the required insurance and/or liability coverage.

28. Newborn Care

Routine care for a newborn without complications is included with an eligible maternity Need. NICU (Newborn Intensive Care Unit) care and other complications are treated as a separate Need of the newborn. NICU care and complications resulting from premature birth are shared up to \$250,000 per Need or 12 months, whichever comes first. Expenses related to circumcision are excluded from sharing.

29. Non-Medical Expenses

Telephone calls, cots, meals for visitors, shipping costs, and other expenses not directly related to medically necessary services are not shareable.

30. Nutritionists and Dieticians

Expenses related to nutrition 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. All Knew Health members have access to complementary health coaching and fitness resources which can assist with nutrition and diet education as a part of their membership.

31. Organ Transplants

Organ transplants are shareable; however, they are subject to limitations for conditions existing prior to membership and are shareable up to \$100,000 per member, per lifetime.

If the member is an organ donor these costs are generally not shareable.

32. Over-The-Counter Costs

Over-the-counter medical products, such as medications or medical equipment, are not eligible for sharing for medical Needs.

33. Prescription Medications

Prescription medications are considered shareable if they are related to the treatment of an eligible Need and prescribed or ordered by a licensed medical doctor (MD). The sharing of medications is limited to 12 months per Need, not to exceed \$10,000.

Long-term maintenance medications that a member has already been taking at the time of enrollment are not eligible for sharing. This will be determined by the class of medication. Changing to a new medication in the same class for the treatment of an ongoing condition will not renew sharing eligibility for another 12 months.

34. Preventive (Prophylactic) Medicine

Needs used to prevent a condition that has not yet developed or been diagnosed, are not eligible for sharing in the first 12 months of membership. These procedures include but are not limited to mastectomies, hysterectomies, and salpingectomies/salpingo-oophorectomies.

If a member demonstrates medical indication of high risk for a future diagnosis of cancer and elects to undergo preventive surgery to reduce this risk, the costs associated with this surgery are generally shareable with prior approval from Knew Health after Year 2 of membership, up to \$30,000 after the IUA has been met.

35. Recovery Allowance

Members receive an allowance of up to \$7,500 per eligible medical Need related to seek the recovery care their licensed healthcare provider recommends.

As part of the allowance, eligible expenses include:

Chiropractic Care

Occupational Therapy

Physical Therapy

Speech Therapy

Hyperbaric Therapy

*Any alternative treatments included with this allowance must be submitted to Knew Health as an alternative medical treatment for approval.

Knew Health will review on a case-by-case basis for Needs resulting from more severe injuries or illnesses, such as stroke, heart attack, and serious accidents, that require treatment costs beyond the allowance amount.

Care packages that include a number of recovery care sessions in a lump sum that is not itemized may not be eligible for sharing. Members need to submit care packages for prior review.

Therapeutic massage therapy is not shareable.

36. Sleep Apnea

Sleep apnea-related expenses, including appointments, testing, and equipment, are not shareable.

37. Sports

The Knew Health Community may share medical expenses related to sporting activities. Injuries or illnesses resulting from participation in professional sports or when the participant is paid to compete are not shareable.

Hazardous sporting activities including, but not limited to, motorcycle racing, off-road vehicle competitions, hang gliding, parasailing, skydiving, drag racing, motocross racing, road racing, sporting stunts, and mixed martial arts (MMA) are not eligible for sharing.

38. Sterilization

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

39. 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.

40. Surgical Procedures

Prior medical review and approval is required for non-emergent surgical procedures to be eligible to share. Expert second opinions associated with the procedure are eligible to share. The Knew Health Community encourages the use of expert second opinions prior to surgical procedures and will assist in facilitating expert second opinions.

Members should attempt to work with surgery centers and outpatient facilities whenever possible to avoid incurring inflated surgery charges. Notify the Knew Health Care Team as soon as surgery is recommended to assist in obtaining good-faith estimates at the necessary facilities.

41. Surrogacy

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

42. Temporomandibular Joint Dysfunction (TMJ)

TMJ-related expenses, including appointments, testing, and equipment, are shareable up to \$1500 per member, per lifetime.

43. Tobacco or Smoked Product Use over 50

Sharing for the eligible Needs of tobacco or smoked product users 50 years of age and older is limited to \$25,000 for each of the following conditions:

- Stroke
- Cancer
- Heart conditions
- Chronic obstructive pulmonary disease (COPD)
- Oral and Esophageal disease
- Gastric and Duodenal Ulcers

44. Vision

Shareable for expenses due to glaucoma and other medical diseases or injury of the eyes. Cataract surgery is treated as a pre-existing condition and subject to a one-year waiting period before it is shareable. Cataract surgery is generally shareable, subject to a maximum of \$5,000 per eye with each eye being subject to an IUA. Vision Therapy is subject to a maximum of \$3,500 per separate Need. Lasik and other refraction correction surgery, eyeglasses, and contacts are not shareable.

45. Weight Reduction

Expenses related to weight reduction are shareable if prescribed by a licensed medical provider and approved by Knew Health. These expenses are shareable up to \$3,000 per Need. Injections and medications related to weight loss are not shareable.

46. Worker's Compensation

Expenses related to a work injury are not eligible for sharing.

If a 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. If the member is suing another party for damages the Knew Health Community cannot share in the resulting medical expenses.

Maternity Needs

As a general rule, maternity Needs are shareable as long as the pregnancy begins after 90 days of active Membership and the estimated delivery date falls after the first 12 months of membership.

Maternity IUA

Sharing for maternity Needs differs from other shareable Needs in that they have a Maternity Initial Unshareable Amount (Maternity IUA) of \$5,000*. This applies to normal vaginal deliveries and emergency c-section deliveries. Non-emergency/elective c-section deliveries have a total Maternity IUA of \$7,500. Needs resulting from miscarriages will revert to the Member's standard IUA.

*The Maternity IUA will apply to pregnancies that begin on or after 01/01/2026.

1. General

As with any other medical Need Requests, expectant mothers pay a single Maternity IUA for all expenses related to their maternity Need Request. The Maternity IUA will be \$5000 regardless of the Member's standard IUA. 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.

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 Need Request form.

4. Pregnancy Prior to Membership

A pregnancy that begins prior to membership is not shareable.

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.

5. Waiting Period

Maternity expenses incurred prior to the member's effective date of membership are not shareable. Likewise, maternity expenses for a pregnancy with an expected delivery date in the first 12 months of membership are not shareable.

Newborns who are not born as part of a shareable maternity Need must be enrolled manually in a Knew Health membership no later than 30 days after the date of birth to be effective on the date of birth. If manually enrolled 30 days after the date of birth, the newborn's membership will begin on the 1st day of the next month. 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".

6. Adding Newborn To Membership

For a newborn to be added to a membership effective as of the date of birth, the request must be submitted to Knew Health within 30 days of the date of birth. If the request is received beyond 30 days after the date of birth, the newborn's membership will begin on the 1st day of the next month.

What is Shareable

Many times, maternity services are billed as a global fee or as a part of a financial agreement. This will generally include all professional obstetric or midwifery services for routine antepartum care, delivery services, and postpartum care. The Knew Health Community can share up to an additional 30% above the average local global maternity fee for a midwife, birthing center, or obstetrics clinic.

If a member prepays their global fee and switches to a new provider before the end of the pregnancy, sharing may be limited for additional global and/or other fees.

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
- Chiropractic care shareable up to 8 sessions, whether occurring prenatal or up to 2 months post delivery
- Pelvic Floor Therapy shareable up to 2 sessions, whether occurring prenatal or up to 3 months post delivery

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)
- Diagnostic Hearing Screening (including evoked auditory tests, BAEP, ABR< or BAER)

Postnatal

- Mother's six-week postpartum checkup with pap test
- 2-week cesarean post-op appointment
- Chiropractic care shareable up to 8 sessions, whether occurring prenatal or up to 2 months post delivery
- Pelvic Floor Therapy shareable up to 2 sessions, whether occurring prenatal or up to 3 months post delivery
- Postpartum depression care shareable up to \$3500 per pregnancy*

*Postpartum depression care is intended for medical, mental, and/or behavioral health care, as well as support groups. This is not intended to manage non-healthcare expenses.

What is Unshareable

Prenatal

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

Delivery*

- Doula services
- Birthing tubs (or other items)
- Placenta encapsulations
- Circumcision

*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
- Massage Therapy
- 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 general wellness, or would be considered a separate Need Request and subject to Member Guidelines eligibility determination.

Complications of the newborn 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 Maternity IUA must be paid prior to Community sharing. The Maternity 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 Maternity 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.

Members will make payments equivalent to the Maternity IUA directly to providers for shareable services. In the event of overpayment, Maternity IUA reimbursements can be given to the member.

Switching Providers

If a member begins their pregnancy care with one provider with a global fee and then switches to another provider later in their pregnancy, future sharing for the pregnancy may be limited up to 50%. Please note that this limitation will not apply in situations where the switch in providers is medically necessary, as opposed to elective.

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. NICU (Newborn Intensive Care Unit) care and other complications are treated as a separate Need of the newborn. NICU care and complications resulting from premature birth are shared up to \$250,000 per Need or 12 months, whichever comes first.

In Vitro Fertilization (IVF)

Expenses related to fertility treatments are not shareable.

Elective C-Sections

If a member elects a c-section when not medically necessary, the Maternity IUA responsibility will be increased to \$7500. Sharing for the delivery may be limited up to 80% of the total cost after the increased Maternity IUA has been met.

Miscarriage

Any expenses related to a miscarriage that are associated with an eligible maternity Need are shareable if the costs exceed your standard IUA and will not be subject to the \$5000 Maternity IUA.

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

Abortion

Abortion expenses that relate to an eligible maternity Need are reviewed on a case-by-case basis for sharing eligibility. If eligible for sharing, these costs may be subject to limitations.

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.

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 Need Request

Members are responsible for collecting all relevant documentation and submitting that to Knew Health. Need Requests must be submitted through the Knew Health Member Portal. Need Requests should be submitted as soon as possible. Most non-emergency Need 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

Need Requests must contain all required documentation, including but not limited to the following:

- Itemized bills*
- Proof of IUA payment
- Medical records, Letters of Medical Necessity and other additional documents
- Treatment plans
- HIPAA Forms**

*If a healthcare provider cannot itemize the services being provided, these costs cannot be shared with the Knew Health Community. Treatment plans have to be clearly broken down into details (services by code, number of services, any other items included with the plan, and a clear timeline). Treatment plans can only be approved for durations of up to 1 month in advance.

**In order to equitably and fairly apply the Guidelines, relevant medical documentation may be needed to verify the history of a condition as well as to verify that expenses are related to the specific Need Request. If medical records or HIPPA forms are not provided, Knew Health may not be able to determine sharing eligibility.

3. Time Limit for Providing Documentation

Original, itemized bills should be submitted promptly to Knew Health along with the Need Request form in order for Knew Health to process your Need as soon as possible. In order to be shared, bills and Need 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 Need Request submission or bills may become ineligible for sharing.

5. Negotiating Medical Bills

The Knew Health Community prefers to share 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 Member Care 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 Knew Health 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

While there is no lifetime maximum amount eligible for sharing for any household or membership, sharing is limited by the aggregate amount available for sharing from member contributions. In order to ensure equitable sharing among members, no single Need Request may consume more than 10% of the aggregate amount available for sharing in any calendar year. The ability to share up to 10% of the aggregate amount available for sharing in any calendar year, may only occur up to a maximum of two years.

2. Application date

The date Knew Health receives a complete membership application.

3. 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.

4. Date of Service

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

5. Dependent

The head of the household's spouse, domestic partner, or unmarried children under the age of 26, who are the head of households 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.

6. Effective Date

The date a person's membership begins.

7. Eligible Need

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

8. Head of household

The oldest participating member in the household, whose age determines the monthly contribution cost.

9. Household membership

One or more family members participating under the same membership.

10. Healthcare sharing or medical cost sharing

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

11. 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.

12. Ineligible Need

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

13. Initial Unshareable Amount (IUA)

The specified financial amount that members are required to bear on their own prior to any amount that may be eligible for sharing. Maternity Needs are subject to a \$5000 Maternity IUA regardless of the member's standard IUA.

14. 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 indicating their competence to practice in that field (MD, DO, NP, PA, CNM). They must be listed on the National Provider Registry (NPI).

15. 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. Maternity Needs are subject to a \$5000 IUA, regardless of the member's standard IUA.

16. Maximum shareable amount

The maximum dollar amount (limit) that can be shared for any one Need. Certain medical Needs have a maximum shareable amount or sharing limitation as described in the Guidelines.

17. 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.

18. 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.

19. Membership

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

20. Membership Cancellation Request

A request by a member to Knew Health requesting that their membership be canceled. 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.

21. Member responsibility amounts

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

22. Membership change/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.

23. Membership options

A variety of sharing options are available with different Initial Unshareable Amounts (IUA) and sharing limits, as selected in writing on the membership application or enrollment portal and approved by Knew Health.

24. Membership withdrawal/Delinquent Membership

When a membership has been or will be canceled 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 30 days past the date such payment was due (delinquent). Such cancellation of membership is referred to as membership withdrawal or a delinquent membership.

25. Membership Year

The twelve month period immediately following the effective date of membership and beginning again each anniversary of the membership effective date.

26. Monthly contributions

Monetary contributions are given voluntarily and placed in the care of the Knew Health Community by a member to maintain active membership and to be disbursed to the eligible Needs of its members in accordance with the Member Guidelines. Contributions are made monthly on an automatic subscription and

27. Need Request

A Request that is required to process medical Needs for accidents, injuries, or medical conditions that result in medical costs. Need Requests must be submitted via the Knew Health Member Portal. The Need Request must be submitted to Knew Health within six months of the start of the condition to be eligible for sharing and bills must be submitted within 6 months of the date of service to be eligible for sharing.

28. 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.

29. Membership 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.

30. Pre-existing condition

Any medical condition that was symptomatic, suspected, diagnosed or required treatment within the 24 months prior to the effective date of membership is considered a pre-existing condition. For information on sharing for pre-existing conditions, see the section of the Member Guidelines titled "Medical Conditions Existing Prior to Membership."

31. Proof of Cessation for Tobacco Use

To prove cessation of tobacco use, a member will be required to show cessation of tobacco for a 12-month period. To do this, a member is required to submit three (3) negative cotinine tests: 1) the first negative cotinine test date triggers the start of the 12-month period; 2) the second cotinine test can be submitted any time during the next 10 months; and 3) the third negative cotinine test must occur during the month preceding the 12-month anniversary of the first test. A member will also be required to submit an affidavit or acknowledgement stating the last date of tobacco use upon submitting their third negative cotinine test. Once the 12 months have passed and Knew Health has received all required tests and affidavit/acknowledgement, the member will no longer be subject to the monthly tobacco surcharge on their membership contribution. The limitations for sharing in Needs related to stroke, cancer, heart conditions, chronic obstructive pulmonary disease (COPD), oral and esophageal disease, and gastric and duodenal ulcers for members over the age of 50 are still in effect even with proof of cessation.

32. Proration

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

33. Shareable amount

The amount of the Need Request that remains after the member's Initial Unshareable Amount (IUA) has been satisfied and falls within the guidelines for sharing within the membership.

34. Explanation of Sharing (EOS)

Correspondence that is delivered to the participating members once medical Needs have been processed, are pending, or have been rejected. The Explanation of Sharing Summary will state their member responsibility amount or IUA as well as any amounts shared by the Community on the member's behalf.

35. Usual, 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. The Knew Health Community may limit sharing based on UCR.

36. 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, delinquent 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 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 is a Delaware corporation and is not an insurance company. Knew Health provides the framework and administrative support for the 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. Knew Health memberships provide 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 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.

How are Knew Health members affected by federal healthcare laws (including the ACA)?

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 health insurance.

How does Knew Health handle medical Need Requests?

Because there is no transfer of risk, as defined in applicable insurance rules and regulations, with respect to Knew Health, 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 Community. 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 sharing 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 they are 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 Member Care Team 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 within 1-2 weeks 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) for the most fair and reasonable prices. Accordingly, there are no out-of-network penalties or other restrictions, though sharing may be limited to UCR if a Member knowingly visits a provider that charges significantly higher rates than UCR.

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 “monthly contribution”.

Does Knew Health use deductibles and coinsurance?

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 "monthly contribution". These shares or membership contributions make up the Community Fund, which are then used to share in members' eligible medical expenses. Knew Health's process differs significantly from insurance practices in this regard; to our members' advantage. 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. Conversely, when members incur an eligible medical expense that exceeds the Initial Unshareable Amount (IUA), 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 IUA if the additional medical expenses are more than \$500.

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

Eligible medical expenses that exceed a member's IUA that occur overseas as a result of a medical emergency are shareable. 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 treatments that occur in the U.S.

Non-emergency services that occur overseas are generally not eligible to share, regardless of cost savings.

What constitutes a medical emergency?

Emergency care refers to medical services provided for conditions that require immediate attention to prevent serious harm or risk to life. It typically involves sudden and acute symptoms or injuries that could lead to significant disability or death if not treated promptly. Examples include, but are not limited to, heart attacks, strokes, severe bleeding, or acute respiratory distress. Emergency care is characterized by urgent interventions to stabilize patients, manage pain, and address life-threatening conditions, often provided in emergency departments or during ambulance services. The primary goal is to prevent deterioration of the patient's condition and provide immediate relief from severe symptoms.

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 Knew Health Community?

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

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?

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. While there is no lifetime maximum amount eligible for sharing for any household or membership, sharing is limited by the aggregate amount available for sharing from member Contributions. In order to ensure equitable sharing among members, no single Need Request may consume more than 10% of the aggregate amount available for sharing in any calendar year. The ability to share up to 10% of the aggregate amount available for sharing in any calendar year, may only occur up to a maximum of two years.

What kinds of Needs do Knew Health members share?

In general, Needs for illnesses, injuries, and pregnancies 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 (IUA).

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 Community Fund will not be made.

What amounts do members share for maternity Needs?

Pregnancies with an estimated delivery date that falls after the first 12 months of membership are shared like any other Need. For a pregnancy that began prior to a member’s effective date or with an estimated delivery date that falls within the first 12 months of membership, pregnancy is treated as a pre-existing condition and not shared.

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

Yes, continuation of membership in Knew Health Community 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 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 one another 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 membership 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 via automatic monthly subscriptions through a credit or debit card.

Are my monthly contributions higher if my household uses tobacco or other smoked products?

Yes. Tobacco or smoked product 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 or smoked product users are required to contribute a higher monthly contribution amount to maintain membership. Additionally, medical Needs for tobacco or smoked products users aged 50 and older are limited to \$25,000 for each of the following four disease categories: stroke, cancer, heart conditions, COPD, oral and esophageal disease, and gastric and duodenal ulcers.

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."

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Appendix C: Company FAQs

Is Knew Health a group benefit?

No, Knew Health is an individual and family sharing Community. 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?

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 community 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 comply with the Affordable Care Act requirements?

Knew Health 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 is a voluntary program. It is not insurance. Companies are not purchasing insurance coverage by participating in the program. By participating in the 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 the Knew Health Community?

The employees of participating businesses are granted the opportunity to voluntarily join Knew Health. 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 Knew Health 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 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.