

ZION HEALTH

CONTACT US AT (888) 920-9466 | [ZIONHEALTH.ORG](https://zionhealth.org) | MEMBER@ZIONHEALTH.ORG

Zion Health is a non-profit community that enables Members to share in medical costs together. Community healthsharing works so well at Zion Health, because it is a great alternative to traditional health insurance. This outline represents the most common discussion points. For more information, see the full Membership Guidelines at [ZIONHEALTH.ORG](https://zionhealth.org).

ZION HEALTH PRINCIPLES OF MEMBERSHIP

Each Member of Zion Health must comply with the following requirements to preserve their membership with Zion Health, and continue to be eligible for participation in the sharing program. The requirements below benefit all Members by assuring honor and integrity on the part of the Member, as well as minimizing medical risks and ensuring proper accountability while encouraging good health practices. All Zion Health Members must agree with and attest to the following statements:

1. I believe that a community of moral, ethical and health-conscious people can most efficiently and effectively encourage and care for one another by directly sharing the costs and expenses associated with each other's health care needs. I also acknowledge that Zion Health has declared an affiliation with, and faith in, a higher power and welcomes members of ALL faiths.
2. I understand that Zion Health is a Benevolence Organization, not an insurance entity, and that while Zion Health assures that every effort will be made to have Members fulfill their monthly sharing commitment, Zion Health, in and of itself, cannot guarantee payment of any medical expenses. I agree to practice good health measures and strive for a balanced lifestyle.
3. I agree to refrain from the usage of any form of illicit/illegal drugs and excessive alcohol consumption, all of which are harmful to the body. Tobacco consumers have an increased share of \$50 monthly per household.
4. I believe I am obligated to care for my family and that physical, mental or emotional abuse of any kind to a family Member or anyone else is morally wrong.
5. I agree to submit to mediation followed by subsequent binding arbitration, if needed, for any instance of a dispute with Zion Health or its affiliates.

INITIAL UNSHAREABLE AMOUNT (IUA)

Initial Unshareable Amount (IUA) - This is the amount paid, by the Member, before the Zion Health community shares in Medical Expenses on a per need basis. This amount is also known as your personal responsibility. Zion Health has three primary levels of personal responsibility. The IUA options are \$1,000, \$2,500 and \$5,000. The lower the Initial Unshareable Amount, the higher the monthly sharing contributions. All qualified medical expenses submitted within six (6) months of service and after the IUA is met, are shareable with the Zion Health community at 100%, without an annual or lifetime limit. For each unexpected medical need, the Zion Health community shares in the expenses after the initial unshareable amount (IUA) is met. This amount, paid by the member, is not required to be paid again for this need until you are symptom free for 12 months. This ensures sharing to be placed where the community would recognize the most need.

MEDICAL CONDITIONS EXISTING PRIOR TO MEMBERSHIP

A need that stems from a condition which existed within the 2 years prior to membership would be a pre-existing condition and would not be considered fully shareable. However, it would be shareable if the condition is fully cured and has not had treatment or symptoms in the 24-month period prior to membership.

Any illness or accident for which a person has been diagnosed, received medical treatment, been examined, taken medication, or had symptoms in the 24 months prior to the Effective Date would fall into the Pre-existing category. For more information see pre-existing conditions definition.

PRE-EXISTING CONDITION PHASED IN PERIOD

Pre-existing conditions have a waiting or phase in period. Zion Health attempts to negotiate all medical bills received and many membership types include the PHCS network for pre-negotiated medical expenses.

YEARS OF MEMBERSHIP	
1ST YEAR	Waiting period of all pre-existing conditions
2ND YEAR	Up to \$25,000 of sharing for pre-existing conditions
3RD YEAR	Up to \$50,000 of sharing for pre-existing conditions
4TH YEAR & BEYOND	Up to \$125,000 of sharing for pre-existing conditions per year

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

THIS PUBLICATION AND MEMBERSHIP IN ZION 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 ZION HEALTH AND ANY OF ITS MEMBERS. NEITHER THESE GUIDELINES, NOR ANY OTHER ARRANGEMENT BETWEEN MEMBERS AND ZION HEALTH, CREATE ANY RIGHTS FOR ANY MEMBER AS A RECIPROCAL BENEFICIARY, A THIRD-PARTY BENEFICIARY, OR OTHERWISE. AN EXCEPTION TO A SPECIFIC PROVISION OF THESE GUIDELINES ONLY MODIFIES THAT PARTICULAR PROVISION AND DOES NOT SUPERSEDE OR VOID ANY OTHER PROVISIONS. THE DECISION BY ZION 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 ZION HEALTH TO REIMBURSE A MEMBER'S ELIGIBLE NEEDS.