Sedera

SELECT+ Membership Guidelines

Medical Cost Sharing for Employees



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*Guidelines are subject to change

What is Sedera?

Welcome to the Sedera Medical Cost Sharing Community!

It's no secret that America's healthcare system has problems. Healthcare costs are increasingly unaffordable for ordinary people. Health insurance often limits people's access to providers of their choice. Costs lack transparency and providers lack accountability. These problems make people feel frustrated, confined, and overwhelmed; but it doesn't need to be this way.

That is why Sedera was created.

Sedera is a Medical Cost Sharing Community, providing employees a new approach to manage their healthcare needs. Sedera Members join a Community of like-minded individuals who are committed to leading a healthy lifestyle and want to be active and engaged participants in their healthcare decision making.

Members of the Sedera Medical Cost Sharing Community ("Sedera MCS Community") remain responsible for paying their own healthcare costs. But, if these healthcare costs are shareable as agreed to and outlined in the Community's guidelines, the other Members of the Community can contribute funds to partially offset these healthcare costs. This Sedera model is built on the legacy of the faith-based Medical Cost Sharing platform and borrows from the best innovations of the modern sharing economy.



The Sedera MCS Community promotes open access to healthcare, and it gives Members the freedom to choose their medical providers. There is no provider network. Instead, Members seek cost savings and help obtain more transparency from medical professionals.

Sedera's goal is to provide exceptional service to Members of our Community, reduce their healthcare costs and empower them to lead healthier lives. Together, we are tapping the power of community to create a new normal in healthcare.

Organization and Membership

The Sedera Medical Cost Sharing Community (“Sedera MCS Community”) is a membership-based non-insurance Community of like-minded individuals established for the purpose of sharing legitimate healthcare expenses between Members, as more particularly described in these Membership Guidelines. The Sedera MCS Community is modeled after a number of proven and highly successful medical sharing ministries that have facilitated the sharing of their members’ healthcare expenses for more than two decades within the confines of the Christian community. The sharing model has its roots philosophically in religious movements that can be traced back to the time of Christ.

The Sedera MCS Community was founded in response to the urgent need of companies to find affordable ways to help with the healthcare costs of their employees. Sedera’s founders have been deeply involved in issues of medical cost containment for the past 22 years, working with clients all around the country with Members across the United States. Sedera’s administrative offices are located in Austin, Texas. Sedera’s purpose is to assist its Members in the sharing of legitimate medical expenses by and for the exclusive use of its Members.

The Sedera MCS Community emphasizes facilitating a Medical Cost Sharing Community for its Members through the sharing of their financial needs, and by encouraging one another with practical tools to maintain their health. The Sedera MCS Community Members willingly assist one another with healthcare costs through voluntary monthly giving.

Membership in Sedera MCS Community, by and of itself, is not qualifying coverage as defined by the Affordable Care Act (ACA). However, some third-party affiliates provide other solutions that satisfy the federal or state law requirements without compromising the moral and/or spiritual beliefs of the Sedera MCS Community Members.* Participating Member households are required to abide by the Sedera Membership Guidelines, as set forth in this document. Memberships are not refused on the basis of the health status of individual Members, although medical conditions that existed prior to membership may be limited or excluded from sharing.

No one is denied membership based on Pre-existing Medical Conditions, but any conditions that existed prior to membership would not be shareable with the Community until certain membership longevity requirements are met.

*Any group self-insurance plan is not provided by or affiliated with the Sedera MCS Community. It is typically administered by a Third-Party Administrator.

Key Terms for Understanding

Basic Sedera Terms	Definition
Member	A person, or Dependent thereof, who has agreed in writing to abide by the requirements of the Sedera MCS Community and made their Monthly Contribution and is thereby eligible to participate in the sharing of Needs Cases with other Members.
Need	One or more Medical Bills caused by an injury, illness, or a medical event to an eligible Member.
Needs Case	A Need submitted to the Community for sharing consideration.
Medical Bill	A medical expense presented to the Community as part of a Needs Case.
Shareable	Eligible for sharing with the Community as outlined by the Membership Guidelines.

Other Sedera Terms	Definition
Ancillary Member Services (AMS)	Ancillary Member Services (AMS') are the portion of peripheral services that are made available to Members along with their membership in the Sedera MCS Community. AMS' are designed to enhance the membership experience, as well as reduce costs.
Application Date	The date a Member's application/enrollment is completed and received by Sedera for membership in the Sedera Medical Cost Sharing Community. This date may be different from the Start Date.
Benevolence Organization	An organization whose primary purpose is to care for the needs of the persons/members who make up the membership.
Community Stewardship Board (CSB)	A board comprised of Sedera MCS Community personnel, including medical professionals, tasked with reviewing the application and/or interpretation of the Guidelines by the Needs Coordination Team.
Dependent	A minor under the age of 18 or an unmarried individual between the ages of 18-26 who is a natural offspring, stepchild, adopted child, or otherwise under legal guardianship of a Member. Please see Section 3 for more details.
Expert Second Opinion Program	A consultation with a medical expert, other than the patient's current doctor, in order to confirm the diagnosis/treatment plan or gain new perspective on available treatment alternatives.
Household	A term used to describe the individual and/or family unit participating in the Sedera Medical Cost Sharing Membership that encompasses all

	Membership types including Member Only, Member+Spouse, Member+Child(ren), and Member+Family.
Initial Unshareable Amount (IUA)	The specified financial amount (in dollars) that Members are required to bear on their own prior to any amount that may be eligible for sharing. The IUA is applied on a per Need basis.
Life Change Event (LCE)	A life event that allows a Member to make changes to certain aspects of the Member's Sedera Membership outside of the Member's standard yearly renewal period. Please see Section 2 for more details on the LCE.
List Bill Entity (LBE)	An entity that wishes to provide services that allow Members to make sharing contributions directly from their wages to certain Members of the Sedera Medical Cost Sharing Community. A List Bill Entity (or "LBE") can include employers, associations, and other organizations that want to help facilitate/provide ease of payment or membership management to participating Members and their eligible dependents.
Maximum Shareable Amount ("limit")	Certain medical conditions have a maximum dollar amount (limit) that can be shared for any one Need as described in the Membership Guidelines.
Medical Cost Sharing (MCS) / Health Care Sharing (HCS)	A membership-based non-insurance arrangement established for the purpose of sharing legitimate medical expenses between Members.
Medical Necessity	The accepted healthcare services and supplies provided that are appropriate to the evaluation and treatment of a disease, condition, illness, or injury and consistent with the applicable standard of care and supervised by clinical professionals working within their scope of practice.
Membership	Term used to describe participation in the Sedera MCS Community.
Membership Advisor	A Sedera team member dedicated to assisting Members. Member Advisors can be reached at 1-855-973-3372.
Membership Requirements	The required principles and ongoing behavioral code attested to by Members, as required for membership in the Sedera MCS Community.
Membership Year	The effective period of time in which a Member is eligible for Ancillary Member Services, patient advocacy and participation in Medical Cost Sharing. The Membership Year begins on the Start Date of membership and continues until the one-year anniversary of that date.
Minimum Essential Coverage (MEC)	Minimum Essential Coverage (MEC) is a requirement of the Affordable Care Act. Membership in the Sedera Medical Cost Sharing Community does not provide Minimum Essential Coverage as required by any federal or state law.
Monthly Share	The monthly monetary allotment contributed to the Sedera MCS Community for participating Members in order to remain an active Member.
Patient Advocate/Advocacy	A third-party advocate that works on behalf of a Member/the Community. For example, a Member's Needs Coordinator may assign a

	dedicated Patient Advocate to communicate directly with the Member's healthcare providers to help reduce their medical bills.
Pre-existing Medical Conditions	Any medical condition that existed prior to membership (diagnosed, suspected, or producing observable signs or symptoms) is considered a Pre-existing Medical Condition. Needs that result from Pre-existing Medical Conditions are subject to sharing limitations (as presented in these Guidelines) unless 36 months immediately prior to membership Start Date has passed without any signs or symptoms of the condition, without any treatment needed, without any medication prescribed or taken, and without any suspicion by the patient or doctors that the condition is resurfacing. This applies whether or not the cause of the symptoms is unknown or misdiagnosed. Please see Section 5 for the more detailed explanation.
Proration	If shareable Needs are ever significantly greater than shares available in any given month, the Sedera MCS Community may prorate the Needs amount requested for medical expenses. This involves an across-the-board percentage reduction of Needs payments but does not necessarily mean that all Member Needs will not be met in that month.
Routine Medical Care	Includes medical examinations and tests that doctors provide to patients who are healthy, as far as they know, in order to screen them for medical issues that may not yet be causing symptoms. Also includes medical services that are prescribed on a regularly scheduled basis for the purpose of screening and monitoring known risk situations or cured medical conditions, e.g., annually, biennially.
Start Date	The date an applicant/Member starts their membership in the Sedera Medical Cost Sharing Community. This date may be different from the Application Date.
Tobacco/Vape User	A Member who engages in regular use of cigarettes, cigars, pipes, smokeless tobacco, e-cigarettes, nicotine products, and vaping products.
Unshareable Amount(s)	A medical expense incurred by a Member that is not shareable for one or more of the following reasons: violation of Member responsibilities, non-current membership status, or any other condition that is excluded by the Guidelines.

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Sedera Membership Guidelines

The Sedera Membership Guidelines consist of the Administrative Guidelines and Sharing Guidelines and are commonly referenced as the Membership Guidelines, Sharing Guidelines, or Guidelines.

Administrative Guidelines

1. Sedera MCS Community Principles of Membership

The following requirements protect all Members by assuring honor and integrity on the part of Members and by minimizing medical risks and ensuring proper accountability while encouraging good health practices.

Membership in the Sedera Medical Cost Sharing Community, a Covenant Healthshare Inc. Benevolence fund, requires agreeing to all of the following commitments of this section as well as the submission of an application for membership. As long as Members continue to meet these requirements and fulfill all membership duties as determined by the Board of Directors, their membership will continue. If at any time a Member no longer meets all these membership requirements, they must notify Sedera immediately, and their Sedera MCS Community membership and all privileges will cease unless otherwise indicated.

While Member health status has no effect on eligibility for membership, there are limitations on the sharing of Needs Cases for some conditions that existed prior to the membership Effective Date. See Sections 4-7 for a detailed list of Shareable and non-shareable Needs Cases.

A) Sedera Ethical Beliefs and Principles

The Ethical Beliefs of our Community:

The Members of the Sedera Medical Cost Sharing Community are united by a shared faith in the following beliefs and principles. As a demonstration of these beliefs and principles, we have decided to come together to support each other and share medical needs according to the Membership Guidelines with all-comers from all backgrounds, nationalities, ethnicities, and races, as long as each Member accepts the beliefs of this Community as outlined in these Ethical Beliefs and Principles:

1. We share a faith in each other and in the strength of our Community.
2. We are committed to the idea of assisting one another, believing that strengthening the well-being of all humanity, both in the present and the future, is a virtuous pursuit. Moreover, we see it as our moral and ethical duty to willingly provide voluntary support to our fellow Community Members for their medical needs.
3. The fundamental belief within our Community is that we support one another by sharing in the medical cost burdens of fellow members whenever possible and when resources are available. This commitment is rooted in the principle of treating others as we would want to be treated, as articulated in the saying, "Do unto others as you would have them do to you."
4. Our Community is guided by principles that encourage generosity in every aspect, with the aim of producing gratitude. We are dedicated to acts of benevolence,

charity, and missions, both domestically and globally. We accomplish these acts of social responsibility through volunteer work and financial contributions, all supported by the integrity, honesty, and personal accountability of our Community members. We believe in personal accountability for our decisions and responsible stewardship of all that is entrusted to us and share faith that all Members of our Community will be empowered to apply these beliefs and principles in their day-to-day lives.

5. We place a strong emphasis on personal accountability, as we believe that each member of the Community is responsible for being good stewards of our resources to strengthen the Community. We believe in living out our beliefs and principles in our daily lives, as they guide us in the responsibility we have towards our collective well-being.
6. We firmly believe that our bodies are precious, and it is our duty to honor them. This belief stems from the principle that we are entrusted with our well-being, and we strive to maintain our physical and mental health. As a result, we are committed to avoiding the consumption of illegal substances and refraining from engaging in dangerous, illegal, and unlawful activities. These actions not only have an adverse impact on us but also affect the well-being of our Community as a whole.
7. We are committed to the idea of maintaining good health as an essential part of our dedication. We strive for prosperity and well-being, mirroring the sentiment of valuing physical and mental health. To achieve this, we prioritize healthy practices, avoid harmful substances and addictive behaviors, and actively pursue a balanced and harmonious way of life.
8. We firmly believe it is our Community Members' fundamental right to make our own health choices, and we believe in seeking guidance from knowledgeable healthcare professionals and advisors. We also believe in seeking spiritual guidance in making decisions about our health.
9. We fully embrace our fundamental rights, as provided and protected by the U.S. Constitution, to exercise our faith and values by coming together as a healthcare sharing ministry to bear each other's medical burdens. We achieve this by commitment by directly and willingly sharing in the costs associated with our members' healthcare. among our members. We strongly believe that our faith and values bring us together and that the shared accountability of our Community, allows for each individual to be supported by the Community with compassion.
10. Our Community believes in its collective ability to make educated, informed and knowledgeable consumer decisions that create value for themselves and the American healthcare system.

B) Disclaimer

WARNING: The Sedera Medical Cost Sharing Community, a Covenant HealthShare, Inc. Benevolence fund (hereinafter "Sedera"), is not an insurance company nor is it insurance. Membership in Sedera is not issued or offered by an insurance company.

Whether a member/household chooses to provide monetary assistance to you and/or your household to help with your medical expenses is entirely voluntary. Neither you nor Sedera has any right to compel payment of medical cost sharing costs from any member. A membership with Sedera should never be considered similar to a group insurance policy or an individual insurance policy.

Transparency in Healthcare Sharing Ministry:

As a healthcare sharing ministry, It is important to understand that these ministries are not insurance providers. Instead, they function as communities where members voluntarily contribute funds to assist fellow members with their medical expenses.

Unlike insurance policies, participation in a healthcare sharing ministry is entirely optional, and members decide whether or not to provide financial support to other members in need. Neither the individual seeking assistance nor the healthcare sharing ministry can demand or require payment from its members.

A healthcare sharing ministry should not be viewed as an insurance policy, either group or individual, as it operates on principles of voluntary financial assistance among its members. It's crucial to recognize these distinctions when considering participation in such a community.

In your capacity as a member of this Healthcare Sharing Ministry, it is crucial to understand that regardless of whether you receive financial assistance for medical expenses or if this membership continues to operate, you will always be personally responsible for any unpaid medical bills. You do not possess any legal entitlement to seek reimbursement or indemnification for such expenses from Sedera, Covenant Health Share Inc., or any other member or household.

This agreement does not constitute a legally binding commitment to reimburse or indemnify you for your incurred medical costs. Instead, it serves as an opportunity for you to assist fellow members in need and, when you find yourself in need, to present your medical bills to other members and households in accordance with the outlined Membership Guidelines. Any financial assistance received will be provided by fellow members and/or households that are managed through the Sedera Medical Cost Sharing Community, a Covenant HealthShare Inc. Benevolence fund.

C) Member Commitments

Personal Commitments

On behalf of myself and my household:

1. I have read and understand the Guidelines and am confirming that all of my answers in this application process are true and accurate and indicate my commitment to abide by the Guidelines.

2. I acknowledge and comprehend that my participation in the Sedera Medical Cost Sharing Community is not insurance and is not provided or underwritten by any insurance provider. While every endeavor will be taken to facilitate the sharing of my medical expenses as a member, it is important to note that the Sedera Medical Cost Sharing Community, along with its partners and affiliates, cannot and do not guarantee payment for any medical bills.

3. I consent to engage in mediation and, if required, subsequent binding arbitration, in the event of any dispute arising between me and the Medical Cost Sharing Community or its affiliates, as elaborated in Section 3.D of the Guidelines. I hereby knowingly, willingly, and with full understanding, waive my right to a trial by jury to the maximum extent allowed by applicable law.

4. I understand that as a participant of a benevolence fund of a medical cost sharing community, like this Cost Sharing Community, there is no guarantee of payment for any medical expenses by the community or other Members. The concept of a cost sharing community involves individuals coming together to collectively share the burden of medical costs. It operates on the premise that Members contribute towards each other's medical expenses. Consequently, the sharing of medical expenses is entirely dependent on the contributions of Members, and as a result, the corresponding medical expense requests from Members may lead to sharing being prorated or possibly unavailable in a particular month.

5. I pledge, in a spirit of the ethical principles and moral responsibility to the community, to abstain from the use of any illegal substances. I am aware that medical Needs or requests arising from engaging in activities that are illegal or in violation of federal law will not be eligible for sharing within the Medical Cost Sharing Community.

6. As the head of household, I accept the responsibility to notify, educate and inform all persons listed on my application concerning their participation in the Community as well as their responsibilities, their obligation to the Community, and the basic constructs for sharing Needs Cases (If applicable).

7. I understand that my Monthly Member Contribution is composed of my Medical Cost sharing contribution plus any additional subscription services I elect to join alongside my Medical Cost Sharing membership.

8. I confirm and affirm that I am legally capable of agreeing to these declarations, and I possess the full authority to make such acknowledgements on behalf of all household members.

9. I acknowledge that Community utilizes the contact details I've supplied for all forms of communication, and it is my responsibility to keep my email addresses, phone numbers, and mailing addresses accurate at all times. I grant the Medical Cost Sharing Community permission to use the provided contact information for any communication pertaining to my Community Membership. I am also aware that Membership may not be accessible in certain states or jurisdictions, and if I move to such an area, the Medical Cost Sharing Community reserves the right, at its discretion, to terminate my membership. You can find information on Sedera Medical Cost Sharing State Availability on the website.

Community Commitments

1. I understand that I am joining a Community of moral, ethical, health-conscious people who are voluntarily sharing each other's medical expenses. The fundamental belief within our Community is that we support one another by sharing in the medical cost burdens of fellow members whenever possible and when resources are available. This commitment is rooted in the principle of treating others as we would want to be treated, as articulated in the saying, 'Do unto others as you would have them do to you.
2. I acknowledge that I am a self-pay (Cash) patient for medical services and that actively seeking equitable pricing for my medical care is advantageous for both my own well-being and the broader Community.
3. I commit to choosing medical professionals and hospitals based on transparent and good prices, am willing to travel to get the best value for elective procedures, select doctors and facilities that publish and charge fair and reasonable prices, and actively participate in the negotiations process.
4. I understand that the Community, by and of itself does not make any representations that it satisfies any federal or state law requirements for healthcare coverage or insurance.
5. I acknowledge that other obligated insurance, governmental entities, or responsible parties are always considered the primary payors, and I pledge to utilize these primary sources of coverage before submitting any potential Shareable Needs Case to the Community.
6. I understand that my participation in this voluntary program entails making contributions, and I am aware that my membership automatically continues from year to year unless I voluntarily notify the Community of my desire to terminate my membership.
7. I understand that I can notify the Community of my desire to cancel my membership at any time.

Needs Sharing Commitments

1. I understand that participation with the cost-sharing Community will not be denied based on pre-existing medical conditions. However, any conditions pre-existing before joining the Community may not be eligible for sharing until specific membership longevity requirements have been fulfilled.
2. I recognize that community members are conscious of the fact that, when requesting sharing assistance from others, the Community follows the Guidelines to determine which expenses qualify for sharing. Members do not expect the Community to include costs associated with unverified treatments and tests, extremely expensive healthcare providers, or hospitals.
3. I pledge to wholeheartedly collaborate with the Community and its affiliated partners in evaluating the shareability of Needs Cases, including providing requested documents, signing required releases, and engaging in communication with my Needs Coordinator as needed.
4. I solemnly commit to upholding principles of honor and integrity in all my dealings within the Community. I am aware that presenting a fraudulent Needs Case, involving myself in deceptive actions, or assisting another Member's breach of trust may result in the termination of my Household's membership. Furthermore, the Community maintains the right to investigate all instances of fraudulent behavior and cooperate with law enforcement authorities to the maximum extent allowed by the law.
5. I acknowledge the presence of a three-step internal appeals process detailed in Section 3.D.1. of the Guidelines and pledge to adhere to this process for all matters that require such escalations.
6. I acknowledge that my participation necessitates monthly contributions prior to accessing the cost-sharing membership services. Additionally, if I submit a Need, I understand and agree that any outstanding commitments related to my membership must be resolved before the Community can commence sharing. In essence, without a prior contribution, participation in community sharing is not possible.

2. Member Responsibilities

Members should familiarize themselves with the following responsibilities in order to participate in Medical Cost Sharing more effectively. Each Member’s faithful participation directly contributes to other Members.

1. New Members — Must fully complete, the Sedera MCS Community online enrollment flow. Your employer will generally facilitate the Monthly Contributions through their payroll system.
2. Monthly Member Contributions — Each Member’s Monthly Contributions can be handled through payroll withholding via the employer’s payroll system. The Monthly Member Contribution includes the Member Share Amount (“monthly shares”), the Member Services Fee, and other service costs. All of these are broken out in the

Member's Monthly Contribution statement. All Contributions are entirely voluntary. NO ONE is ever obligated to be a part of this Medical Cost Sharing membership.
Each month the monthly shares that Members have contributed are made available to other Members who have Shareable Needs Cases. The amount each individual Member contributes depends on the Member's household size, IUA selected, and the Primary Member's age.

3. Submission of Needs Cases to Sedera — See Section 3.A.2 for full details.
4. Misuse of Trust and Accountability — At all times, Sedera Members are expected to act with honor and integrity. Members presenting a falsified Needs Case, using deceptive practices, or participating in another Member's misuse of trust will have their membership cancelled. When a Needs Case is requesting other Members to share financially in order to relieve the burden of a medical expense, the Member submitting the Needs Case is committing that those monies will be used to help pay their financial obligations to their medical providers, as directed by Sedera to the extent of the monthly shares received. Members submitting Needs Cases further commit to work with Sedera's staff and its authorized affiliates to seek equitable prices from providers and to document amounts paid to providers. When an issue of possible misuse of trust by a Member arises (whether or not still active or currently a Member), Sedera may seek the assistance of the Member's employer and provide them with the necessary information to address the issue and hold the Member accountable. The Member may request resolution of the question through the mediation and arbitration provisions described in Section 12 of the Guidelines.
5. Member Cooperation — At all times, Sedera Members are expected to fully cooperate with Sedera and its partners. This includes fully cooperating in any determination concerning whether Needs Cases are Shareable and/or the extent to which Needs Cases are Shareable. Members agree to obtain any documents or sign an authorization as requested by Sedera or its partners. Furthermore, to the extent that any Medical Bill could be the responsibility of a third party, Sedera Members agree to fully disclose the same and cooperate in any investigation/inquiry conducted by Sedera and/or its partners. Sedera Members with minor Dependents agree to fully cooperate on behalf of the minor Dependent. Sedera reserves the right to not share in Needs Cases if the Member Responsibilities are not met and/or the Membership Guidelines are not followed. Furthermore, Sedera may close any Needs Case and determine that the Needs Case is unshareable if a Needs Case remains inactive for 6 months, the Member fails to provide requested information within 6 months of the request, and/or the Member fails to respond to Sedera for a 6-month period. Upon request by Sedera or its authorized partner, Sedera Members are expected to make reasonable efforts to contact their medical provider's offices via telephone and/or in writing who are non-responsive for billed amounts that are deemed unreasonable.
6. Member Behavior — Each Member has voluntarily chosen to join a Community of moral, ethical, and health-conscious individuals, and each Member agrees to refrain from the use of threatening, aggressive, harassing, or abusive language and/or behavior when interacting with Sedera employees or other Members of the Sedera Community. This specifically includes but is not limited to, the use of personal or

legal threats. Members understand that engaging in such behavior can result in termination of their membership.

7. Member's Responsibility for Stewardship — The Member understands that they are cash pay patients for medical services and agrees to seek fair pricing for their medical services, which benefits both the individual Member and the Community. The Member realizes the importance of shopping for medical services and commits to shopping for the best value (cost and quality). The Member will attempt to choose medical professionals and hospitals based on transparent and reasonable prices and is willing to consider traveling to get the best value for elective procedures, select doctors and facilities that charge fair and reasonable prices, and actively participate with Sedera on behalf of the Community to negotiate down overpriced medical bills that the Member and their household may incur. For non-emergent care, if a Member has been informed that their medical bill or estimate is overpriced or their provider is unwilling to negotiate, Sedera, with full discretion can limit sharing of any Medical Bills that are not fairly and reasonably priced. Additionally, if a Member continues to submit overpriced Medical Bills, Sedera may determine that no Medical Bills or Needs Cases will be shared and ultimately can terminate membership. If a Member is unable to meet their IUA obligation and it results in a discount being lost, the lost discount amount will not be eligible for sharing.
8. Authorization Requirement — The majority of medical bills are grossly inflated. Therefore, Member cooperation with bill negotiation is required on medical bills that exceed the Member's IUA. Members agree to authorize Sedera and/or its affiliates, to negotiate billed charges on their behalf. Members who refuse bill negotiations negatively impact the Sedera MCS Community as a whole. Consequently, Sedera reserves the right to reduce the amount shared by up to 50% off billed charges for bills over $500, in cases where a Member refuses authorization to negotiate on their behalf.
9. Expert Second Opinion (ESO) program[1] —In order to ensure that Members receive the most up-to-date and effective medical treatment available, Members may be asked, and the Member agrees to complete an ESO Consultation prior to the Community sharing in non-emergency treatments. Please note that participation in the ESO program prior to a Member's procedure does not guarantee or create a legally enforceable right or entitlement to the sharing of a particular Needs Case since there is not a contractual promise or legally enforceable right to the sharing of Needs Cases under the Membership Guidelines. Finally, Sedera has the right to ask a Member and the Member agrees to engage in the ESO program at any time to help support the determination/application of the Membership Guidelines to a specific Needs Case. Sedera also has the right to ask a Member and the Member agrees to provide a reason/justification if the ESO program suggests a less invasive surgery/treatment and the Member decides not to change their treatment plan.
10. Advance Payment for Medical Services — Sharing is meant to occur after a medical expense has been incurred. The Sedera Medical Cost Sharing Community understands that in some instances medical providers require up-front or advance payments prior to delivering service. In these instances, Members should make every effort to limit the up-front payment to their selected IUA and request to be billed for any remaining charges. Please contact your Needs Coordinator early on in the

process if you suspect or believe that an up-front payment may be required. Your Sedera Needs Coordinator can help you explore cash pay provider and service options. Special consideration can be given for up-front payment requests that exceed $3,000 with necessary documentation. Notification to Sedera for up-front sharing requests must occur at least 14 days prior to the scheduled medical procedure in order to allow for adequate time to process and share the Good Faith Estimate. Please note that up-front sharing is not available for continuous treatment protocols. In instances where medical providers require payment prior to service, Sedera Members should make every effort to avoid paying full-billed charges for services in excess of their IUA, as this eliminates the ability to negotiate highly inflated medical bills. Paying highly inflated amounts for medical services reduces the effectiveness of the cash-pay patient approach and ultimately results in higher costs to the Community as a whole. As such, Sedera reserves the right to reduce sharing by up to 50% per bill for Members who pay full-billed charges in advance of the procedure which exceed industry price norms.

11. Members are responsible for ensuring that Sedera has accurate contact information, including but not limited to email address, phone number(s), and mailing address. Sedera may use the provided contact information for all communication with the Member(s) related to the Household Membership, Needs Cases, or any other related purpose. I understand that there may be States or Jurisdictions in which Sedera membership is or may become unavailable and that upon notification of my relocation to such a State or Jurisdiction, Sedera, in its full discretion, may terminate my membership. Sedera Medical Cost Sharing State Availability.

3. Process and Administration

A) Membership Requirements and Management

There are four primary levels of household participation for Sedera membership. The Monthly Member Contributions are derived from household membership status. See Section 3.A.2 for details.

Unmarried children aged 18 and younger, and unmarried children ages 19-26 who meet the requirements of Section 3.A.3 below, may be included as a child in a family membership and may submit Needs Cases for sharing if they meet the Member requirements as listed above and are included on the membership enrollment form.

3.A.1.	Application and Start Date Limitations	None. Unlike health insurance plans, membership in the Sedera Medical Cost Sharing Community has no calendar date restrictions for enrollment. However, membership Start Dates always begin the first day of the requested month of membership.
3.A.2.	Determination of Membership Level	Four tiers (Household Members): •Member Only (MO) •Member & Spouse (MS) •Member & 1 or more Child (MC) •Member & Family (MF) Please Note: The Monthly Member Contribution varies depending on each Member Household's Dependent status and age (under 30 or 30+). This

1 - PLEASE REMEMBER: The Expert Second Opinion program only provides information services and no doctor patient relationship is being created. Please review the terms of service/use for the program for further details.

		determination is based on the age of the oldest Member as of the membership Start Date.
3.A.3.	Child Dependent Participation	Dependents of a Member may participate in the Sedera Medical Cost Sharing Community. Sedera will give special consideration, on a case-by-case basis, to unmarried children ages 26 and over that may qualify as a Dependent due to legal guardianship. Any such determination will be made by Sedera, at its sole discretion. As a general rule, married children, and those age 26 and over, are not eligible to participate on their parent's membership at the end of the month during which they turn 26. Married children and those age 26 and over therefore must establish a new distinct membership with the Sedera MCS Community.
3.A.4.	Marriage	When a Member's child Dependents gets married, they must request their own membership.
3.A.5.	Newborn	Newborns will be included within the household membership retroactive to the date of birth as long as the Member notifies Sedera to add the child to the membership no later than 30 days after birth. Otherwise, the Start Date will be no earlier than the date of notification to Sedera. REMEMBER: Failure to add the newborn within 30 days after birth will result in the newborn's prior medical bills being unshareable. Sedera should be notified as soon as possible to add subsequent newborn children to the membership. Please be aware that there are specific Guidelines that address sharing in Needs Cases for a newborn. See Section 7.
3.A.6.	Adoption	New adoptions will be included within the household membership retroactive to the date of adoption as long as the Member notifies Sedera to add the child to the membership no later than 30 days after the adoption. Otherwise, the Start Date will be no earlier than the date of notification to Sedera. Sedera should be notified as soon as possible to add subsequent adopted children to the membership. Member is required to provide adoption documentation to verify this Life Change Event. Adopted, unmarried children are considered Members of the household the same as biological children. Any physical condition of which the adopting parents are aware that the adopted child has prior to the adopting parents being legally responsible for the child's expenses, or prior to the child's Start Date within his parents' membership, will be considered a "Medical Condition that existed prior to membership" under Section 7.
3.A.7.	Cancellation and Termination of Membership	Cancellations and terminations have to do with ending your membership with the SMCSC. Cancellations are initiated at the Member's request. Terminations are initiated by Sedera for lack of payment and/or violation/abuse of Sedera's Guidelines. Cancellation: A Member can notify the Sedera MCS Community in writing of their desire to cancel their membership at any time; however, the cancellation will generally become effective at midnight on the last day of the billing cycle in which the cancellation occurs. Please note that if your employer provides list billing (i.e., helps collect and deposit with Sedera your Monthly Member Contribution from your paycheck each billing cycle) as a convenience for you, the actual effective date of any cancellation may be affected by the terms of the List Bill Agreement. Please contact your List Bill

		Entity and a Sedera Member Advisor for more detail about canceling your membership. Termination: Sedera may terminate a membership as provided in these Membership Guidelines. The termination will generally become effective at midnight on the last day of the billing cycle in which the termination occurs. Please note that if you are working with a List Bill Entity, the actual effective date of any termination may be affected by the terms of the applicable List Bill Agreement. Terminations may be retro-dated to the end of the billing period for which Sedera received contributions.
3.A.8.	Reinstatement of Membership	Cancellation: Members who cancel their Sedera membership, whether through termination of employment or otherwise, may reapply for membership, if eligible, via Sedera ACCESS+. In general, re-enrollments that are more than 30 days past cancellation are treated as new enrollments. Termination: Members who have been terminated may reapply for membership with the Sedera Medical Cost Sharing Community; however, Sedera in its sole discretion may deny any such request to re-enroll. If a Member is allowed to re-enroll, they are treated as new enrollments, regardless of the elapsed time between termination and new Start Date.
3.A.9.	Membership After Age 65	Members aged 65 and older may continue with the Sedera MCS Community after the Member turns 65 years of age provided the Member is enrolled in Medicare Parts A and B, proof of which is required. If Member is not enrolled in Medicare Parts A and B, Member's Membership terminates on the last day of the month in which the Member turns 65.
3.A.10.	Changes to Membership During the Membership Year - Life Change Event (LCE)	Every Sedera Membership has a yearly renewal date based on the membership Start Date (Membership Year) when a Member can make certain changes to their Membership options. Membership options include items such as household Membership level, IUA level, and additional services purchased. A Life Change Event (LCE) also allows a Member to make changes to their dependents and/or Membership level during the Membership Year within 30 days of the LCE and will be made effective at the start of the next billing cycle. An LCE includes: 1. Changes in your household: a) A Member or Spouse having a baby or adopting a child; b) A Member or dependent getting married or divorced; c) A Member or dependent dying; d) a dependent turning 26 years old. 2. Changes in your employment status. Please Note: Automatic changes to membership based on changes in a Member's age take effect on the yearly renewal date.
3.A.11.	Death of a Member	Upon the death of a Member, please notify a Sedera Member Advisor as soon as possible. Sedera will likely require certain documentation to efficiently handle any existing Needs Case and/or close or make changes to an existing Sedera Membership. A Sedera Member Advisor can also help answer any question about submitting a Needs Case on behalf of a deceased Member or how Medical Cost Sharing works.
3.A.12.	Change to Selected IUA	A Member's chosen IUA affects the Monthly Member Contribution and therefore the amount available to the Community for Medical Cost Sharing.

		Increase. A Member can choose to increase their selected IUA at any time. The new Monthly Member Contribution will go into effect/be pulled/reflected on the next billing cycle. Please contact a Sedera Member Advisor if you have any questions. Sedera reserves the right, at its sole discretion to determine an exception to this general rule. **Decrease**. A Member may decrease their IUA only during the month prior to their renewal date. The new Monthly Member Contribution will go into effect/be pulled/reflected on the next billing cycle. Please Note: Any change in a Member's IUA will not affect any open or ongoing Needs Case.
3.A.13.	Changes to Household/Member Contact Information	Changes to Household/Member Contact information, including email, phone number, and mailing address, must be updated in the Member Portal. Members are required to maintain accurate records. Sedera may be restricted from servicing membership in certain States or Jurisdictions, and upon notice of a Membership relocating to any of those territories, Sedera, in its full discretion, may terminate the Membership. Sedera Medical Cost Sharing State Availability.

B) Submission of Needs Case

Eligible medical expenses will be shared for all Household Members who meet the membership requirements in Section 1. For a Needs Case to be Shareable, the Member Household must be current with their annual membership meaning all Monthly Member Contributions and Monthly Shares are paid-to-date. Members are advised to carefully follow these instructions for submitting their Needs Cases.

The following diagram depicts the general process for processing a Member Needs Case:



The Process

1. As soon as a Member anticipates the likelihood of a medical Need (non-emergency), they should contact a Sedera Member Advisor at 1-855-973-3372 (See Section 6.A.7.) so that Sedera may assist them through the process. Note: Emergency medical Needs should be addressed immediately by the nearest qualified emergency professional. Please notify a Member Advisor as soon as reasonably possible after an emergency care visit.

2. Members who have already experienced a Need that exceeds their Initial Unshareable Amount (IUA) should access their Sedera Member Portal online to open a Needs Case.
3. The Member then organizes their Medical Bills, goes online to the Member Portal, clicks on “Needs Management” from the menu bar, and completes the online Needs Case Submittal Process. This includes uploading copies of all relevant Medical Bills and any proof of payments made towards the Member’s Initial Unshareable Amount (IUA). If you have any questions about the Needs Case Submittal Process, please feel free to contact a Sedera Member Advisor.
4. Upon completion of the online Needs Case Submittal Process, Sedera will review the Needs Case and the submitted documentation against the Membership Guidelines. If the Needs Case is determined to be Shareable processing of your Medical Bills will begin.
5. Inflated Medical Bills, and those over $1,000.00 may go through the bill negotiations process. If bill negotiation is necessary, your Needs Coordinator will help you throughout the process as our bill negotiators work to reduce your Medical Bills on your behalf. Once bill negotiations are complete, your Shareable Medical Bills will be shared with the Community and funds will be sent to you so you can pay the negotiated balance.

   Negotiations for reductions — One of the primary contributors to the Sedera MCS Community’s ability to maintain low Monthly Contribution requirements is the success we have historically achieved by bill reductions from inflated original invoices through our skilled negotiators. Sedera encourages Members to only pay their Initial Unshareable Amount (IUA), so that outside bill negotiators can negotiate the remaining bills on behalf of the Member. When Members submit medical bills for sharing, they are committing to cooperate with Sedera’s staff and representatives to seek equitable prices from providers and to document amounts the Member has paid to providers.

   As long as the monthly Needs Cases requested are less than the Monthly Member Contributions received, Shareable Needs Cases/Medical Bills will be fully shared. In the event that Needs Cases are more than the Monthly Member Contributions, sharing of Needs Cases may require proration. For more information on proration please see Section 4.B. of these Guidelines.
6. Sedera Members are responsible for paying their providers directly. Sedera does not pay medical providers on behalf of Members, so Needs Case payments are sent directly to your external bank account connected to your Medical Cost Sharing Account created at enrollment. Members also receive an Explanation of Needs Shared which explains the dollar amount Members need to pay to which providers.

C) Binding Decisions

Although Sedera’s staff members are trained to be forthright in phone conversations, oral opinions offered by any Sedera employee do not constitute or

ensure a binding decision. Members who call to inform us of their circumstances in order to discover if the Need qualifies will be given an opinion — not a binding decision. Written rulings will be issued only to Members who submit requests in writing. The written inquiry must explain the circumstances and medical procedures involved and specify that a written ruling be returned in writing. Such written response from Sedera will constitute a decision that will commit Sedera to share the bill through the normal Needs sharing process.

D) Disputes And Reconciliation

The Sedera MCS Community serves a Community of like-minded individuals who wish to help one another. Members resolve to handle disputes fairly between each other or with Sedera in private or within the Community. A Member who chooses to violate this common belief and covenant and takes a dispute to court demeans the entire Sedera membership and places undue strain on the Community. Sedera Members who pursue court proceedings against the Sedera MCS Community, its Members, or its affiliates, understand that their memberships will be consequently terminated.

Therefore, in becoming a Member or reaffirming one's membership, Members agree that any claim or dispute, with or against the Sedera MCS Community, its employees, directors, other Members or associate Members, that is related to the Sedera MCS Community and the Sedera membership in any way, shall be settled by non-biased mediation or, if mediation is unsuccessful, by legally binding arbitration. Sedera agrees similarly with respect to any matter that it may have against a Member. Any such mediation and/or arbitration shall take place in Austin, Travis County, Texas. The procedure to be used depends upon the nature of the issue as explained in paragraphs A and B.

1. Questions Regarding Whether a Need is Shareable/Appeals Process

Nearly all Needs Cases can be determined to be Shareable or not shareable according to the Guidelines. In matters where the Guidelines may not provide absolute clarity, Sedera shall have the sole discretion to determine whether the Needs Case should be Shareable. Sedera may, but shall not be required to, consider prior procedure and precedent in making such a determination. Any such determination shall be final and binding.

If a Needs Case is determined to be not shareable, and the Member believes that the Sedera Needs Coordinator is misinterpreting the Guidelines or the Member's particular circumstances, then the Member may seek reconsideration of the decision by the appeals process generally described below. Please note that regardless of the outcome of the appeals process, the existence of an appeals process should not and does not create a legally enforceable right or entitlement to the sharing of a particular Needs Case since there is not a contractual promise or legally enforceable right to the sharing of Needs Cases under the Membership Guidelines. A Member has 90 days from the date the determination in question was rendered to initiate the first step in the appeals process.

The appeals process is a three-step process: 1) The Member may call a Member Advisor or Needs Coordinator and request that the Sedera Needs Operations

Manager review the decision made by the Needs Coordinator assigned to the Member's Needs Case(s). The Needs Operations Manager will provide their decision, usually within 10 business days; 2) If the Member believes that the Needs Operations Manager is still misinterpreting the Guidelines or the Member's particular circumstances, then the Member has 90 days from the day the determination in question was rendered by the Needs Operations Manager to make a written request to Sedera to have the Needs Case submitted to the Sedera Community Stewardship Board (CSB) to determine if, or how much, of a Needs Case will be Shareable. The CSB reserves the right to recommend partial sharing (less than the full amount) of a Needs Case. Please contact your Member Advisor or Needs Coordinator to receive a copy of the Needs Appeal Form to make this written request. 3) If the Member believes that the CSB is still misinterpreting the Guidelines or the Member's particular circumstances, then the Member has 30 days to make a written request to have the Needs Case(s) submitted to a panel of seven randomly chosen Members who have agreed to review the Need to determine whether it is shareable ("Member Review Panel" or "MRP"). If any two Members out of the seven Member MRP agree that the Needs Case(s) should be Shareable, then Sedera will treat the Needs Case(s) as Shareable in the usual fashion.

If the Member still believes that the conclusion of the MRP is wrong, the dispute will be settled by mediation, and if unsuccessful, by binding arbitration. Any such mediation and/or arbitration shall be conducted solely in Austin, Travis County, Texas subject to the laws of the state of Texas. Such arbitration shall be conducted in accordance with the rules of arbitration published from time to time by the American Arbitration Association. The Sedera MCS Community and the Sedera Member agree that each party shall bear its own costs and evenly split the cost of any mediator(s) or arbitrator(s). The Sedera MCS Community and the Member agree to be legally bound by the Arbitrator's decision.

2. Resolution of All Other Issues

Any issue not included under paragraph A to be resolved by the Member panel shall be settled in accordance with mediation and if such mediation is unsuccessful, by binding arbitration. Any such mediation and/or arbitration shall be conducted solely in Austin, Travis County, Texas subject to the laws of the state of Texas. Such arbitration shall be conducted in accordance with the rules of arbitration published from time to time by the American Arbitration Association. Sedera and the Member agree that each party shall bear its own costs and evenly split the cost of any mediator(s) or arbitrator(s). The Sedera MCS Community and the Member agree to be legally bound by the Arbitrator's decision. However, if both the Sedera MCS Community and the Member agree, the dispute may be submitted to a randomly selected panel of seven Members instead.

3. Agreement Not to Go to Court

Members understand that these methods shall be the sole remedy for any controversy or claim arising out of their relationship with the Sedera MCS Community and to the extent permitted by law, expressly waive their rights to file

a lawsuit in any civil court against the Sedera MCS Community, its employees, Members, associate Members, and directors, for such disputes, except to enforce an arbitration decision obtained under paragraphs A or B. This also includes any determinations as to whether the matter in dispute comes within this arbitration agreement or can be required to be arbitrated. Judgment upon an arbitration award under either paragraph A or B may be entered only in the District Court of Travis County, Texas. To the greatest extent permitted by law, each Member hereby waives the right to trial by jury.

E) AMENDMENT OF GUIDELINES

The Sedera Medical Cost Sharing Guidelines are a Community and Member resource to understand available sharing for medical procedures, illnesses, etc., and what limits may exist for certain Needs/Community sharing. Changes to the Guidelines are made with the Community in mind, as it continues to grow in numbers and diversity. The decisions made when changing the Guidelines are a balance between the desire to share in reasonable, unexpected, necessary medical expenses and the desire to have a reasonably priced membership. The Guidelines are adjusted and created to best align with the current medical and scientific findings and practices. While some medical procedures or practices find themselves charged with political connotations Sedera's decisions are not and should not be seen or understood as the Community taking any political positions.

The Sedera MCS Board reserves the right to make changes as necessary to the Guidelines to ensure that the Community is serving its Members and protecting the Community's ability to share in Needs. These changes and clarifications range from adjusting limits on sharing in certain procedures, deciding to no longer share or deciding to fully share in new procedures, etc. As the Guidelines change, we encourage Members to review the changes as they are announced, as they will become effective for each Member on the effective date. Please Note: As a general rule, the Member's Need(s) are shared in accordance with the Guideline effective at the time that the Need is incurred.

1. Procedures

These Guidelines may be amended by the Sedera MCS Community Board of Directors. The Board has the option of first taking an advisory vote of Members and/or households in good standing.

2. Effective Date

Amendments to the Guidelines will go into effect as soon as administratively practical or as designated by the Board. If Members have a Need that began prior to the adopted change, the sharing of bills related to that Need will be determined by the Guidelines as they existed on the date the bills were incurred. If a Member's ongoing/open Need would be affected by any Guideline change or amendment, those changes will be reflected on the sharing of that Need on the same date that the amended Guidelines go into effect. A Member can request review by the CSB if they believe this change would cause financial hardship.

3. Notice of Amendments

Members will be notified of changes to the Guidelines through postings on the Sedera website, or by provision of updated Guidelines when they are notified that their Membership renewal is due.

Sharing Guidelines

4. Shareable Needs Cases

This section explains how the shareable amount of a Member's Medical Bills will be determined. There is no annual limit on the number of Needs Cases that may be shared. Original, itemized Medical Bills that Members want considered for sharing must be submitted within 6 months of the date of service. Medical Bills submitted more than 6 months after the service date of service will not ordinarily be Shareable.

A) Basic Need Levels

Needs Cases are submitted on a per Member, per incident, basis. These are injuries, illnesses, and medical events resulting in Medical Bills incurred by receiving medically necessary treatment from licensed medical professionals; including physicians, emergency rooms, hospital facilities (whether inpatient or outpatient), and in certain circumstances the costs related to medical case management.

4.A.1.	Initial Unshareable Amount (IUA)	The financial portion ($500, $1,000, $1,500, $2,500, or $5,000 U.S. dollars) that Members pay their medical provider(s) prior to any amount being eligible for sharing. After the IUA has been satisfied, a Shareable Needs Case, as determined by the Guidelines, becomes eligible for sharing consideration.
4.A.2.	Maximum Shareable Amount per Needs Case	While there is no lifetime maximum amount eligible for sharing for any Household, sharing is limited to the total number of shares made available by the collective participants. No single Needs Case may consume more than one third of the total number of shares available in order to assure adequate shares for all Members. The Member Share Amounts are allocated as needed to handle both large and small medical bills that qualify for sharing. Because large bills are a fact of life in any community, Sedera allocates a specific portion of every month's Member Share Amounts to the very large medical costs requested in that month. Fifteen percent of the Member Share Amount received each month is allocated to very large Needs Cases.
4.A.3.	Determination of "Needs Case"	Expenses related to the same medical condition, including those for separate incidents, (e.g., separate treatments or episodes of symptoms) will be shared as one Needs Case and accumulate towards the total Needs Case amount. When 12 consecutive months have passed without any symptoms, medication, or other treatment for the condition that originally created the Need, or related subsequent conditions, and the condition recurs, it would be treated as a new Needs Case.
4.A.4.	Multiple Needs Cases Within a 12-month Period	Members and Households that experience multiple Needs Cases within their 12-month Membership Year are required to pay the first three IUAs at the selected amount. If there is a fourth Needs Case during the same Membership Year, no IUA would apply. The fourth Needs Case, and any subsequent Needs Case(s), would be eligible for sharing with no IUA subject to any stated restrictions or limitations in the Guidelines. (Please remember that to qualify as a Needs Case, the medical expense must first exceed the Member's IUA.)

4.A.5.	Effect of Discounts	Keeping medical expenses to a minimum is an advantage to all Sedera MCS Community Members. Therefore, Members are asked to contact their Member Advisor in all medical incidents that are not emergency situations. If you are involved in a medical emergency, please contact your Member Advisor within 48 hours, or as soon as reasonably possible. Members who pay full-billed charges for medical services which exceed industry price norms may be subject to sharing reductions. See Section 2 for further details.
4.A.6.	Multiple Simultaneous/Related Needs Cases	If more than one Shareable condition is treated during the same period of time (unless associated with a single incident/accident), the Member must submit separate Need Cases for each condition. Each Need Case must be submitted with through a separate Needs Case Submittal Process. The Member's IUA will apply to each Need Case, subject to the multiple Need Case limits. See 4.A.4. Excluding emergencies, each Shareable Needs Case performed on a joint, eye or other body part to treat aging-related degenerative diseases (examples include treatment of knee osteoarthritis, cataracts) is treated as a separate Needs Case, even if there is a single underlying diagnosis that necessitates the procedures.
4.A.7.	Advanced Notification	Notifying your Sedera Member Advisor as soon as possible of a new medical diagnosis or medical incident (e.g., within three days of receiving notice from your doctor) is strongly encouraged. Doing so enables Sedera to assist Members in locating and utilizing highly qualified medical providers at fair prices. We refer to these as "Best Value" providers. Member Advisors are equipped with access to multiple data resources to assist in determining high quality medical care at fair and reasonable rates and are empowered to reward Members who embrace using Best Value providers. For example, by reducing or waiving the Member's IUA.
4.A.8.	Medical Case Management	Medical Case Management is a collaborative process that helps plan, coordinate, and/or facilitate treatment plans to help arrange the appropriate medical care for disabled, ill, or injured individuals. In certain circumstances the costs of these services are Shareable with the Sedera Medical Cost Sharing Community. Please contact your Sedera Needs Coordinator for further details.
4.A.9.	IUA Reduction for Free Market, Transparent Priced Procedures	If a Member shops for and obtains their sharable procedure or intervention from a surgical center or provider which posts non-hyperinflated prices transparently, their IUA may be reduced or waived.

B) Payments from Others who are Obligated to Pay

4.B.1.	Insurance Entities and/or Government Programs	Obligated insurance and/or government entities are always considered the primary payor for any Member's Medical Bills. Members who are eligible for benefits through either insurance arrangements or government programs are required to contact their Sedera Member Advisor before submitting their Needs Case. The Member Advisor can assist in submitting the Member's Medical Bills to the entity (e.g., Medicare, Medicaid, Worker's Compensation, or any other responsible private insurance payor) prior to submitting them to

		Sedera. Notice of payment, or rejection, must be received from the potentially liable party before Sedera will consider whether the Needs Case is Shareable. Any amount paid by an obligated third-party payor will reduce the Member's IUA, dollar for dollar, up to the full amount. Amounts paid over and above the IUA by obligated third parties will not be shared. Example: A Member's child is playing at a friend's home and suffers a fall down the stairs. The child requires treatment for lacerations and a broken wrist. The total negotiated medical expenses come to $4,000. The accident was later attributed to a toy being left on the stairway, causing the child to trip. The Member discovers that the parents' homeowners' policy has a $1,000 medical liability provision and the property insurance company awards a claim to the Member's medical provider. In this case, the Member's Initial Unshareable Amount (IUA) would be eliminated and the burden for Sedera Members would also be reduced as follows: a. Original Needs Case; $4,000 medical expense - $500 Member portion IUA = $3,500 Sedera MCS Community Shareable amount a. Adjusted Needs Case, after insurance award; $4,000 medical expense - $1,000 insurance award $0 Member IUA eliminated = $3,000 adjusted Sedera MCS Community Shareable amount
4.B.2.	Pursuing Legal Remedy	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. Sedera reserves the right to not share and/or place conditions on the sharing of these Needs Cases until such matter is settled or adjudicated. Please contact your Member Advisor if you have questions related to a specific situation.
4.B.3.	Other Available Assistance	Members must seek reimbursement from other responsible payers, including government entities, for any portion of their Needs Case, when the Member is eligible for such benefits.
4.B.4.	Discounts	Discounts given by any healthcare provider should be listed when completing the online Needs Case Submittal Process and will not be eligible for sharing. Generally, we encourage Members to only pay their Initial Unshareable Amount (IUA) at the point of service so that Sedera's staff will have the opportunity to negotiate the rest of the Medical Bills for that Needs Case. See also Section 4.A.5.
4.B.5.	Balancing Needs Cases and Shares/Proration	The amount of a Needs Case that is Shareable may be affected by the amount of other Members' Needs Cases. Each month there is a fixed amount of committed Monthly Shares available from Members to be sent out to meet Needs Cases. However, the Needs Cases of Members fluctuate, and in any one month may be greater, or lesser, than the shares available. Needs Cases take varying amounts of time to process to be ready for sharing, and there is rarely an exact match between the amount of shares available for a month and the Needs Cases. Many times, the mismatch between Needs Cases and shares is remedied by overlapping Needs Cases received over two months, but occasionally the discrepancy is too large for this simple adjustment. The handling of large fluctuations is described as follows: 1. **When Monthly Shares exceed Needs Cases —** If the available Monthly Shares exceed the Sharable Needs Cases in any given month, and all of the prorated Needs Cases from the previous month have also been

		met, the additional Monthly Shares may be used to offset Needs Cases for the following months. 2. **When medical Needs Cases exceed Monthly Shares/Prorating —** Sedera's goal is that all Members Shareable Needs Cases will be shared. However, in the event that the Shareable Needs Cases are significantly greater than the Monthly Shares available for that particular month, we may use a prorating contingency plan. Example: if $500,000 in total Needs Cases are shared in a given month, but only $400,000 in Monthly Shares are available, Sedera would take the percentage of Monthly Shares as compared to Needs Cases—$400,000/$500,000 = 80%—and apply that percentage to each Needs Case. Thus, Sedera Members would share 80% of the normal Shareable amount of each Needs Case presented for that particular month. If a Member has a Needs Case for which the Sedera MCS Community would normally share $1000, $800 would be available for sharing. Importantly, experience to date has shown that through our bill negotiations process adequate funds have been available to meet the final negotiated costs of all Sharable Needs Cases.
4.B.6.	Time Limit for Sharing Documentation	The earlier that Medical Bills are submitted typically enables the best opportunity for price reduction via negotiations with medical providers. When there are a number of Medical Bills related to treating the same incident, it is helpful for them to be submitted together if they can all be obtained within a 30-day period. Original, itemized Medical Bills should be submitted to Sedera via the online Needs Case Submittal Process as soon as possible. Barring extraordinary circumstances, bills submitted more than 6 months from the date of service ("DOS") will not ordinarily be shared. However, exceptions will be considered for bills that will be applied towards a Members IUA for up to 12 months from DOS. Members are encouraged to open a Needs Case upon first DOS, regardless of exceeding IUA, to utilize Sedera navigation resources and maximize processing efficiency.
4.B.7.	Other Medical Cost Sharing Communities	Sedera Members are free to participate in other Medical Cost Sharing communities in addition to Sedera. However, a Sedera Member should not profit from incurring a medical Need or unduly burden one community over another. Members with a Shareable Needs Case in Sedera, while a Member of multiple sharing communities, will need to cooperate and provide supporting documentation to show what is shareable/has been shared by another community. The Sedera MCS Community will share in its proportional share of the Needs Case. Example: If Sedera is one of two responsible MCS Communities, Sedera will share 50% of the Needs Case; if Sedera is one of three responsible MCS Communities, Sedera will share in 1/3 of the Needs Case; etc.

5. Medical Conditions Existing Prior to Membership

Medical Bills for any medical service/treatment provided during membership which meets these Guidelines are Shareable while being a Member in good standing, except as explained below or as otherwise agreed prior to membership.

5.A.1.	Chronic or Recurrent Conditions Existing Prior to Membership	With the exception of specified time periods stated in Section 6 below, medical Needs Case that result from a chronic or recurrent Pre-existing Medical Condition are subject to sharing limitations, unless 36 months immediately prior to membership Start Date have passed without any signs or symptoms of the condition, without any treatment needed, without any medication prescribed or taken, and without any suspicion by the patient or doctors that the condition is resurfacing. This applies whether or not the cause of the symptoms is unknown or misdiagnosed. Recurrent acute severe allergic reactions (hives, swelling, swollen airways, shock, anaphylaxis) requiring urgent or emergent intervention will be considered a chronic/recurrent condition and will be subject to pre-existing condition sharing limitations if such events have occurred 3 or more times in the 36 months prior to membership Start Date, regardless of the triggering allergen. Please Note: Sedera may require that the Member provide a written statement from a physician that the current Needs Case was not caused by the prior condition. If you can or could have answered “Yes” to any of the below, you most likely have a pre-existing condition that will be subject to the pre-existing condition sharing limits. See section 6 for more information. 1. Have you met with a doctor or other medical professional to discuss a medical situation within the last 36 months? 2. Are you thinking about going to see a doctor or other medical professional because something is bothering you? 3. Are you taking medication(s) for any condition or symptom?
5.A.2.	Verification for Certain Conditions	For some conditions listed below (all of Section 6 and Appendix), a written verification signed by both the Member and the Member’s treating physician must be submitted to substantiate that there have been no signs or symptoms of the condition, no treatment needed, no medication recommended or taken, and no suspicion by the patient or doctors that the condition was resurfacing for at least 36 months prior to membership Start Date.
5.A.3.	Exceptions for Certain Other Medical Conditions	Because healthcare dynamics vary considerably from one Member to the next, Sedera reserves the right to make exceptions for certain medical conditions on a case-by-case basis; provided the outcome is positive to both the Member and the membership as a whole. As such, Sedera will carefully consider unique situations and /or conditions of prospective Members, who may have received treatment in the past or who are currently receiving treatment for a medical condition that is not clearly defined in the Guidelines. Any exception to the Guidelines, rendered by Sedera must be provided in writing in advance of the membership effective date. Any and all exceptions shall be given in the sole and absolute discretion of Sedera. Sharing exceptions for a condition for one or more Members shall not obligate Sedera to include the same or similar condition of any other current or prospective Member.

6. Shareable Conditions

A) Shareable Conditions for which Medical Bills are Eligible for Sharing

Medical Bills are Shareable if they fit within the Guidelines approved by the Board of Directors. The Guidelines place some limitations on the types of physical maladies and medical services for which Needs Cases are shared and limit the sharing of Medical Bills incurred due to illnesses related to certain Pre-existing Medical Conditions.

This section is designed to enable Members to determine whether the medical services required for specific injuries, illnesses, and medical event would be Shareable, and to confirm if or when medical expenses would be Shareable for known medical conditions. There are some services and charges that are not Shareable (Sections 6.C. & 6.D.). Members are advised to contact their Sedera Member Advisor if they have any questions regarding the application of these Guidelines. Also, see Section 3.A.3 regarding Binding Decisions.

Most physical conditions are eligible for sharing within a range of special provisions for certain conditions as explained below.

Member Needs Cases resulting from conditions within the time periods indicated prior to membership, require a verification statement signed by both the Member and their doctor, as described in Section 5.A.2. This is to ensure that the condition did not exist prior to membership, or that the Member had no signs or symptoms of the condition, no treatment was needed or undertaken, no medication prescribed or taken, and there was no suspicion by the patient or doctors that the condition was resurfacing. This applies whether or not the cause of the symptoms is unknown or misdiagnosed.

B) Needs Cases for which Medical Cost Sharing is Limited

Visits to licensed medical providers, emergency rooms/urgent care centers, hospitals, laboratory, and testing facilities, as well as out-patient surgery centers for physician-ordered lawful medical treatments for illnesses, injuries, and medical events are generally Shareable. Expenses for services rendered outside of the United States are shareable provided the documentation meets the requirements in the Appendix.

A look-back period of 36 months applies to all Pre-existing Medical Conditions for Sedera MCS Community applicants. A Pre-existing Medical Condition, as previously defined, is subject to sharing limitations unless 36 months immediately prior to membership Start Date has passed without any signs or symptoms of the condition, without any treatment needed, without any medication prescribed or taken, and without any suspicion by the patient or doctors that the condition is resurfacing. This applies whether or not the cause of the symptoms is unknown or misdiagnosed.

A new Pre-existing Medical Condition occurring after a Member’s Application Date and within the 60 days immediately preceding the Start Date will not be subject to the Pre-existing Medical Condition limitations. Other limitations may still apply.

Sharing Limitations for Pre-existing Medical Conditions are gradually removed according to the following schedule:

Time Constraints for Pre-Existing Medical Conditions after Membership Start Date	Sharing Eligibility
First 12 Months	Not Shareable
Months 13 – 24	Shareable to $25,000
Months 25 – 36	Shareable to $50,000
Months 37 and after	Fully Shareable

See Appendix for details pertaining to special provisions for conditions stated in the above table.

A look-back period of 12 months applies to all potential Tobacco/Vape User applicants. If at any time during the 12 months preceding the Application Date a Member meets the Tobacco/Vape User definition, then the Member is considered a Tobacco/Vape User. Additionally, if at the Application Date a Member was not considered a Tobacco/Vape User and the Member engages in the outlined Tobacco/Vape User behavior, the Member must contact a Sedera Member Advisor to have that change reflected in their membership. Tobacco/Vape User Members are subject to the following additional restrictions and the Proof of Cessation requirements as outlined in the Appendix.

Additional Sharing Restrictions for Tobacco/Vape Users:

Cigarette smoking is the leading preventable cause of death in the U.S. Sedera Medical Cost Sharing Households with one or more Tobacco/Vape Users are required to share a higher Monthly Contribution amount to incentivize the Member(s) to stop tobacco use or vaping.

Exceptions: The occasional celebratory cigar or pipe is acceptable.

Until the Member(s) meets the Requirements to Prove Cessation of Tobacco as outlined in the Appendix, Tobacco/Vape Users age 50 and older, in addition to the higher Monthly Contribution amount also have a Shareable limit of $25,000 for each of the following conditions:

1. Cancer
2. Respiratory Disease
3. Vascular disease including coronary disease and stroke
4. Oral and Esophageal disease
5. Gastric and Duodenal Ulcers

Please note that failure to report a Tobacco/Vape User to Sedera may result in termination of Membership.

There are special rules and limitations for certain services and some services are not shareable as indicated below:

6.B.1.	ADD, ADHD, Autism, and SPD Treatment	Maximum shareable amount of $3,000 per Member per Membership Year.

6.B.2.	Allergy/ Allergies	Generally Shareable. However, special considerations are noted here: **Acute Allergic Reactions:** Treatment for acute allergic reactions is Shareable unless subject to pre-existing condition limitations (See Section 6.B.). Each discrete episode of acute allergic reaction is considered a separate Need with its own IUA applied before sharing. **Allergy Diagnostic Testing:** Sharable after IUA only if ordered by a physician who is trained adequately to understand and interpret the ordered testing (usually this means allergists). Such testing will not be Shareable if ordered by alternative/functional/integrative medicine practitioners. **Allergen Immunotherapy for allergic disease:** Injected or oral/sublingual immunotherapy for food allergy (including peanut (Palforzia)) is not Sharable. Injected or oral/sublingual immunotherapy for inhalant allergies is partially shareable (50%), after IUA, when overseen or ordered by physicians who are trained adequately to provide these therapies and who are not alternative/ functional/ integrative practitioners. (Injectable Epinephrine is addressed in section 6.B.28.).
6.B.3.	Alternative Medical Practices	Unproven and insufficiently proven diagnostics and therapeutics are considered Alternative and are not Shareable. Alternative practice methods include ayurvedic, acupuncture, homeopathy, naturopathy, functional/integrative medicine, most use of CBD and all marijuana, and any practice that promotes insufficiently proven methods. See Section 6.B.12. for sharing considerations for chiropractic. All of the following are also considered alternative/insufficiently proven diagnoses and treatments: nutritional supplements, detoxification, stem cell or platelet-rich plasma (PRP) therapies (other than where proven effective), or other regenerative diagnostics or therapeutics; non-FDA approved uses of cryotherapy and light therapy, IV Infusion Therapy performed at wellness centers or medical spas, and all diagnostics and lab tests performed on healthy people other than screening testing as recommended by the US Preventive Service Task Force; and use of diagnostics and therapeutics for mold toxicity, chronic Lyme, Electromagnetic Hypersensitivity Syndrome, and other poorly-characterized conditions;. Alternative therapeutics may be considered for limited (partial) sharing if the Community Stewardship Board is provided convincing evidence of the value/effectiveness for the specific disease being treated. A Sedera Member Advisor or Needs Coordinator is available to discuss the submission process.
6.B.4.	Alcohol or Drug Abuse Treatment	Treatment for Alcohol / Substance Abuse / Chemical Dependency is Shareable to a maximum of $3,000 per separate Needs Case.
6.B.5.	All Other Addiction Treatment	Not shareable. The Sedera MCS Community does not share costs for treatments related to addictions other than for Alcohol/Substance Abuse & Chemical dependency. However, Sedera's Member Advisors are available to assist Members in locating qualified medical providers and/or alternative treatment options.
6.B.6.	Ambulance Transports	Shareable as part of a Needs Case whenever medically indicated by a licensed medical doctor, and/or whenever practical due to the

		severity, proximity and circumstances associated with a specific illness or injury. Not Shareable for convenience purposes only.
6.B.7.	Audiological	**Audiological Testing:** Shareable above IUA for assessment of hearing loss subject to the Pre-existing Condition sharing limitations. **Cochlear Implants:** Shareable as outlined in Section 6.B.26. ("Implanted Medical Devices & Internal Prosthetics") and Section 6.B.31. ("Medical Equipment & External Prosthetics") if prescribed by a licensed medical provider. **Hearing Aids:** Generally not Shareable. Shareable one time per Member at 50% of the cost up to $1,000 if a result of a new traumatic injury or new acute illness leading to hearing loss.
6.B.8.	Autopsy	Generally not Shareable.
6.B.9.	Breast Surgery – Cosmetic, Cancer, Mastectomy, Reduction	**Cosmetic:** Not Shareable. Note: this includes, but is not limited to, breast augmentation and implants. See Section 6.B.15. for more details. **Cancer:** A mastectomy, reconstruction, or cosmetic procedure occurring because of a new cancer diagnosis after Membership Start Date, is generally eligible for sharing subject to any other applicable limitations in the Guidelines. Members undergoing a mastectomy, reconstruction, or cosmetic procedure as a part of a pre-existing cancer diagnosis are subject to the Pre-existing Sharing Limitations. Complications related to a Shareable Needs Case are generally Shareable. Cosmetic Reconstruction after Cancer: • Shareable up to $20,000 per breast and 50% sharing for any amount above the $20,000. **Preventive Mastectomy:** Please see Preventive Cancer Surgeries, Section 6.B.43. **Breast Reduction:** A Member undergoing a breast reduction as part of a Shareable Needs Case is eligible for up to 75% sharing. Please Note: Complications including dissatisfaction, regret, or failure to obtain the desired results are not considered Shareable complications.
6.B.10.	Cancer/Chronic Illness Diagnosis	Generally Shareable for a new diagnosis. If related to cancer/chronic illness of a type the Member had prior to their Membership Start Date, then it may be subject to the Pre-existing Conditions sharing limitations. A Member diagnosed with cancer or another chronic illness, should notify a Sedera Member Advisor as soon as possible to discuss the tools and resources that may be available to help them.
6.B.11.	Chaplaincy	Not Shareable outside of Sedera's ancillary services network, however access to Chaplains is provided as part of the Ancillary Member Services program. Chaplains, both male and female, are available to Members via telephone. They are experts in listening and providing spiritual support and encouragement.
6.B.12.	Chiropractic	Services related to treatment of a specific musculoskeletal injury or musculoskeletal disease are Shareable for Members 18 years of age

		and older sharing limited to $3,000 per Needs Case with a maximum of $3,000 per Membership Year, including related items for treating the musculoskeletal injury or musculoskeletal disease such as prescribed X-rays. Maintenance treatments are not Shareable. All other chiropractic services, including any treatments on Members under 18 years of age, will be considered "Alternative Medical Practices" per the Guidelines.
6.B.13.	Colonoscopy	**Diagnostic Colonoscopy:** Shareable after IUA for a diagnostic colonoscopy when ordered and performed by a licensed medical provider to evaluate signs/symptoms related to a potentially Shareable Needs Case. **Screening Colonoscopy:** Shareable without an IUA up to a maximum of $2,500 per Member per colonoscopy (as a well-patient procedure) after a continuous membership of 6 months or more. Shareable with an IUA with a membership of less than 6 months. Only eligible for sharing when a screening colonoscopy is performed as recommended by the U.S. Preventive Service Task Force on a Member age 45 or older who does not have signs/symptoms or history of colon disease. If a screening colonoscopy identifies a colon abnormality, such as a polyp or diverticula, that colonoscopy will then be considered a diagnostic colonoscopy with no IUA. The $2,500 per Member per colonoscopy limit will still apply to that colonoscopy and all future colonoscopies will be considered diagnostic and be shared only after IUA.
6.B.14.	Complications of a Non-Shareable Surgery/Procedure	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. Please Note: Complications from cosmetic procedures, including dissatisfaction, regret, failure to obtain the desired results, or failure of cosmetic devices are not considered shareable complications.
6.B.15.	Cosmetic Surgery/Procedures	Generally not Shareable unless necessary because of disfiguration due to a Shareable Needs Case.
6.B.16.	Counseling/Psychological Services	Shareable to a maximum of $750 per Needs Case with a maximum of $750 per Membership Year.
6.B.17.	Dental & Oral	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, **except** when performed to repair new dental problems suffered as part of a traumatic injury. Please Note: eating, chewing, and grinding related injuries are not considered a traumatic injury.
6.B.18.	Dermatology	Dermatology screenings, annual visits, and checkups are considered Routine Medical Care and 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 Membership Guidelines.
6.B.19.	Diagnostic Neuropsychological Testing	Shareable once for each Member under the age of 18 or brain injury victim up to $3,000 per Member, if the Member is not eligible for any public or governmental diagnostic testing program that pays for or provides the testing.
6.B.20.	End Stage Renal Disease ("ESRD")	Generally not Shareable unless the Member is not eligible for ESRD Medicare and provides reasonable proof of their ineligibility or denial.
6.B.21.	Fertility/Infertility	Not Shareable.
6.B.22.	High-Cost Therapeutics	Sharing in high-cost medications, cell therapy, gene therapy, and other individual new therapeutics is limited to $250,000 per Needs Case and is subject to all other applicable limitations and conditions in these Guidelines including, but not limited to, the Pre-existing Medical Condition sharing limitations and IUA.
6.B.23.	Hospice/Palliative Care	Shareable as ordered by a licensed physician is shareable to a maximum of $200 per day and a maximum of 90 days per Member. Additional partial sharing may be considered by the Community Stewardship Board.
6.B.24.	Hospital Emergency Rooms, Hospitalization, and Urgent Care Facilities	Generally Shareable for medically necessary services resulting in Medical Bills that exceed the Member's chosen IUA.
6.B.25.	Immunizations	Except for an annual Influenza vaccination (flu shot), adult immunizations are a Member responsibility so are not Shareable. Routine Childhood immunizations are Sharable for children from birth through age 18 for: • Diphtheria, Tetanus, Pertussis (Whooping Cough) • Haemophilus influenza type b • Hepatitis A • Hepatitis B • Human Papillomavirus (HPV) • Inactivated Poliovirus • Influenza (flu shot) • Measles • Meningococcal • Pneumococcal • Rotavirus • Varicella (Chickenpox)
6.B.26.	Implanted Medical Devices & Internal Prosthetics	For a new diagnosis, implanted medical devices are generally Shareable, subject to any applicable provision or limitations of the Guidelines. This includes the reasonable/medically necessary maintenance/repair/replacement of the implanted medical device. Pre-existing implanted medical devices and their

		maintenance/repair/replacement are subject to the Sharing Limitations for Pre-existing Medical Conditions. Please Note: The maintenance/repair/replacement of the external components of implanted medical devices are considered “Medical Equipment & External Prosthetics” and subject to the applicable sharing restrictions.
6.B.27.	In-Home Nursing Care	Shareable as ordered by a licensed physician for the purpose of recovering from an illness or injury is shareable to a maximum of $200 per day and a maximum of 90 days per Needs Case. Additional partial sharing may be considered by the Community Stewardship Board.
6.B.28.	Injectable Epinephrine	Injectable Epinephrine kept on hand for acute treatment of allergic reactions is considered by Sedera to be a maintenance medication and therefore is not Sharable after the first prescription, except that replacement epinephrine injectors will be shared up to a maximum of $200 after IUA when previous supply was used during a recent allergic reaction. Please Note: Most generic two-packs can be found for less than your IUA and less than $200. A Sedera Member Advisor can help you find reduced prices for most medications.
6.B.29.	Laboratory Tests	Shareable only when prescribed by a licensed medical provider to diagnose the cause of signs and symptoms of a condition when not subject to limitations for Pre-Existing Conditions. The Sedera MCS Community will not share in laboratory diagnostics for which the practice either receives a kickback or upcharges more than 10% over the available wholesale lab price. This is to avoid the conflict of interest that induces certain doctors to order excessive tests.
6.B.30.	Mammography / Mammograms	**Diagnostic Mammograms:** Shareable after IUA when ordered by a licensed medical provider to evaluate signs/symptoms related to a potentially Shareable Needs Case. **Screening Mammograms:** Shareable without IUA up to a maximum of $600 per Member per Mammogram (as a well-patient procedure) after a continuous membership of 6 months or more. Shareable with an IUA with a membership of less than 6 months. Only eligible for sharing as a routine biennial screening mammogram performed on a Member, age 40 and older as recommended by the U.S. Preventive Service Task Force who does not have signs/symptoms of breast disease. Shareable after IUA when ordered by a licensed medical provider if the Member has a genetic risk or family history of breast cancer, as recommended by the US Preventive Services Task Force.
6.B.31.	Medical Equipment & External Prosthetics-Rental/Purchase	Shareable at 75% of the cost of the medical equipment if prescribed by a licensed medical provider up to $25,000 per Needs Case. Medical equipment costs above $25,000 are generally not Shareable. Medical equipment costs above $25,000 may be considered for additional partial sharing by the Community Stewardship Board.

		a. Qualifying equipment: The equipment must be customary or necessary part of directly treating the condition (such as oxygen tanks and devices/respirators, special shoes, orthotics, crutches, compression socks, etc.). b. Maintenance/Repair/Replacement: The cost of maintaining, repairing, or replacing equipment is not shareable.
6.B.32.	Medical Supplies	Generally Shareable within 120 days of treatment start as prescribed by a licensed medical provider.
6.B.33.	Naturopathic Medicine	Treated as "Alternative medical practices" as outlined in Section 6.B.3.
6.B.34.	Newborn Care	See Maternity Guidelines Section 7.
6.B.35.	Nutritionists	Not Shareable unless prescribed by a licensed medical provider. “Alternative Medical Practices" provisions apply.
6.B.36.	Optical/Eye Disease	Shareable for expenses due to glaucoma and other diseases or injury to eyes. Cataract surgery is generally shareable subject to a maximum of $5,000 per eye, each eye is treated as a Separate Needs Case. Vision Therapy subject to a maximum of $3,500 per separate Need Case. Lasik and other refraction corrective surgery, eyeglasses, and contacts are generally not Shareable.
6.B.37.	Organ Transplants	**For Members needing an organ transplant:** Generally Shareable. Sharing is subject to Pre-existing Condition sharing limitations and price negotiation and may require proof of ineligibility or denial for public or nonprofit organ donor programs. **Donor Member to Recipient Non-Member:** Generally not Shareable.
6.B.38.	Osteopathic	Shareable for adjustments and manipulation, up to a maximum of $3,000 per separate Needs Case. Other medical treatments Shareable subject to meeting medical necessity requirements.
6.B.39	Outpatient Surgery Centers	Generally Shareable for medically necessary services resulting in expenses that exceed the Member’s selected Initial Unshareable Amount (IUA).
6.B.40.	Out-of-country (USA) Medical Expenses	Generally Shareable for medically necessary services resulting in expenses that exceed the Member’s selected Initial Unshareable Amount (IUA).
6.B.41.	Physician Office Visits	Generally Shareable for medically necessary services due to illness or injury resulting in expenses that exceed the Member’s selected Initial Unshareable Amount (IUA).
6.B.42.	Prescriptions	Prescribed and/or injectable medications related to a qualifying medical condition are Shareable for the customary cost of the first 120 days after a new diagnosis. (Treatments for cancer and sublingual immunotherapy — a curative treatment for allergies — are not subject to this limitation; medications related to organ transplants are limited to 12 months duration.) All medications, prescribed or not, administered during inpatient hospital stays will be shareable. Sedera has various mechanisms in order to substantially reduce the

		cost of maintenance medications, including the use of a discount pharmacy program. Curative medications are prescribed with the intent to cure a disease or ailment, serve a short-term bridge toward recovery/healing (e.g., antibiotics, chemotherapy medications, or short-term pain medications, etc.). Maintenance medications are prescribed to control a medical condition (e.g., cholesterol medication, blood pressure control, thyroid medications, etc.). Please Note: Sedera Members do not share the cost of prescriptions for maintenance of chronic or recurring conditions (e.g., diabetes, eczema, blood pressure control) beyond the initial 120-day period.
6.B.43.	Preventive Cancer Surgeries	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, up to 75% after the IUA. Reconstructive surgery post-preventive surgeries/procedures and/or post-surgery hormone replacement are not Shareable.
6.B.44.	Prosthetics and Orthotics	Generally Shareable, but not for cosmetic only purposes.
6.B.45.	Psychiatric Care	Inpatient psychiatric care and outpatient psychiatric care for the treatment for injuries and detectable organic agents causing cognitive disabilities are Shareable up to $7,000 per separate Needs Case. Prescribed psychotropic medications are shared as other prescription medications. (See Section 6.B.42) Other types of psychiatric care or services are shareable to a maximum of $3,000 per separate Needs Case when prescribed by a licensed medical provider.
6.B.46.	Sexually Transmitted Diseases/Illnesses (STDs/STIs)	HIV, AIDS, and other STD/STI treatments are generally Shareable. Previous diagnosis of HIV, AIDS, or other STDs/STIs are subject to the Pre-existing Condition sharing limitations. If the HIV, AIDS, or other STD/STI was contracted during an illegal use of needles or drug activity, the Needs Case would not be considered shareable.
6.B.47.	Skilled Nursing Facilities / Long-Term Care Facilities (Nursing Homes)	Shareable prescribed by a licensed medical provider. Sharing is limited to 60 days or $25,000 per Needs Case, whichever comes earlier. Long-term care/ Skilled Nursing costs above $25,000 are generally not Shareable, however they may be considered for additional partial sharing by the Community Stewardship Board.
6.B.48.	Sleep Apnea	**Equipment:** For new diagnosis, Sleep Apnea equipment including, but not limited to, MAD, CPAP, APAP and BiPAP devices is limited to a maximum Shareable amount of $2,500 per Needs Case. For existing diagnosis, please see “Medical Equipment & External Prosthetics” for maintenance/repair/replacement and the applicable sharing restrictions. **INSPIRE Sleep Apnea Surgery:** Sharing in INSPIRE surgical treatment for sleep apnea is available only if standard and specific clinical criteria are met. Requests for partial sharing must be approved by the CSB in advance of the procedure.
6.B.49.	Sterilization	Elective sterilization such as tubal ligation and vasectomy, or the reversal of the same, is not Shareable.

6.B.50.	SYNAGIS	SYNAGIS is a prescription medication that is used to help prevent a serious lung disease caused by respiratory syncytial virus (RSV) in certain children with specific diseases. Synagis is Shareable if prescribed and provided in accordance with the most recent clinical guidelines for its use as established by the American Academy of Pediatrics.
6.B.51.	Temporomandibular Joint Dysfunction (TMJ) Syndrome	Shareable subject to a lifetime sharing limit of $3,000 per Member.
6.B.52.	Therapy	Outpatient or inpatient Physical Therapy, Occupational Therapy, and Speech Therapy are each individually Shareable for up to $3,000 per Membership Year (not per Needs Case) when clearly indicated to reverse, control, or recover from a medical condition, subject to pre-existing condition limitation and IUA. Exception: In the case of a child (under age 18), if the disease/injury that caused the need for therapy began after the membership Start Date, the Member may request an exception to the $3,000 sharing limit per Membership Year, which if granted, may require additional conditions be in place. Specific therapies outlined here, including Physical, Occupational, Speech, and Vision (Optical) are shareable as outlined. All other therapies are generally not Shareable.
6.B.53.	Transplants	See Organ Transplants. See Section 6.B.37.
6.B.54.	Travel Expenses	Basic lodging and air/ground transportation are generally Shareable for Member and one travel companion when a Member can demonstrate the cost of the procedure plus travel results in significant savings for the Community.
6.B.55.	Varicose Veins	Varicose Veins procedures are generally not Shareable. Such procedures are generally considered cosmetic procedures, however there are instances where they can cause medical danger. In such instances, Sedera will require medical records that include a written physician statement that the varicose veins are a significant medical danger. After these materials are provided, the varicose veins procedure is eligible for sharing subject to a lifetime maximum sharing limit of $2,500 per Member.
6.B.56.	Weight Reduction	Shareable only if prescribed by a licensed medical provider and a $3,000 maximum shareable amount per Member.

C) Injuries Involving Motor Vehicles

Most Needs Cases for motor vehicle related injuries are Sharable. A “motor vehicle” is any vehicle with an engine/motor used for transportation, work, or recreation. Medical Bills must be submitted to any responsible or liable party before they will be considered for sharing. See Section 4.B.1.

6.C.1.	Shareable with Requirements	Needs Cases from injuries in an accident where the Member is an operator or passenger (in, on, or being towed by the vehicle) of on-road, or off-road motor vehicles such as snowmobiles, go-karts,

		off-road motorcycles, four-wheel ATVs, tractors, farm implements, construction equipment, six-wheel ATVs, golf carts, personal moving devices, motorized watercraft of all kinds, and all aircraft, will be Shareable for the Medical Bills of the Needs Case that are not the responsibility of any insurance entity or other liable party, and if all of the following conditions are met. The operator and any rider: a. Were appropriately licensed, as required by applicable law, to operate the vehicle involved in the incident, and b. Were not engaged in formal racing or stunt competition, and c. Were not operating the vehicle recklessly, or under the influence of alcohol or any illegal substance, in accordance with Federal laws.
6.C.2.	Shareable Expenses	Needs Cases from injuries sustained in a motor vehicle accident where the Member **is not** an operator or passenger (in, on, or being towed by the vehicle), but a pedestrian, bicyclist, bystander, etc., is Shareable for the Medical Bills of the Needs Case that are not the responsibility of any insurance entity or other liable party.

D) Miscellaneous Items Not Shared

6.D.1.	Abortion	Needs Cases resulting in expenses for abortion of a living, unborn baby will not be shared.
6.D.2.	Abuse of Drugs or Alcohol	Injuries or illnesses that directly result from a Member abusing drugs or alcohol will not be shared.
6.D.3.	Accidents to Teeth While Chewing	Needs Cases resulting from breaking or injury to natural teeth and teeth structure by accident while chewing are not Shareable.
6.D.4.	Armed Conflicts	Needs Cases resulting from a Member's active participation as a combatant in an armed conflict, but not including acting in self-defense or in defense of hearth or home, are not Shareable.
6.D.5.	Infertility Expenses	Needs Cases resulting in expenses for prescriptions, tests, treatment, in vitro fertilization, or other procedures related to infertility are not Shareable.
6.D.6.	Injuries Obtained from Certain Acts	Needs Cases caused as a result of participation in a public riot, criminal act, assisted suicide, or euthanasia are not Shareable.
6.D.7.	Monetary Interest/Late Charges	Financial charges incurred for late payment or interest charges from any care provider or interest or finance charges from any lending institution that a Member borrows from to pay Medical Bills are not Shareable unless a substantial savings for early payment (40% or greater) will result.
6.D.8.	Non-medical Expenses	Telephone calls, cots and/or meals for visitors and other expenses not directly related to medically necessary services are not Shareable.

6.D.9.	Over the Counter Products	Herbs, vitamin supplements, teas etc., are not shareable unless prescribed by an authorized member of a hospital staff for a hospitalized patient. The Guidelines for "Alternative Medical Practices" also apply. See Section 6.B.3.
6.D.10.	Routine Medical Care	Expenses such as routine physicals, checkups, vaccinations, other than Influenza shots, IUDs/Birth control/contraceptives, long-term maintenance prescriptions and other routine medical expenses are generally not Shareable. Exception: Diagnostic procedures prescribed on a regularly scheduled basis for the purpose of screening and monitoring known risk situations or cured medical conditions when ordered by a licensed medical provider (e.g., colonoscopies, mammograms, endoscopies, et al.). Pre-existing condition limitation rules apply. Member's selected IUA applies in all Needs Cases. Routine physicals, checkups, vaccinations, etc., may be covered by an employer sponsored group health plan. Some exceptions exist for colonoscopies, mammograms, and childhood vaccinations as described throughout these Guidelines.
6.D.11.	Self-inflicted Injuries & Suicide	Generally Shareable for medical expenses related to non-accidental, self-inflicted injuries or attempted or threatened suicide for Members under 18 years of age. Necessary follow-up psychiatric treatment is subject to the stated Psychiatric Care amounts. See Section 6.B.45.
6.D.12.	Surrogacy	Medical Bills related to a surrogate pregnancy, whether or not the surrogate is a Member, are not Shareable.
6.D.13.	Wisdom Teeth Extractions	Not shareable. See "Dental & Oral" Section 6.B.17.

7. Maternity Needs

In general, maternity Needs Cases include Medical Bills for prenatal care, delivery, postnatal care, and miscarriage. Active Members who have received an expected delivery date after the first nine (9) months of their membership Start Date from a qualified medical professional are eligible for sharing.

Medical cost sharing for maternity Needs differs from other Shareable medical Needs Cases as follows:

1. Normal vaginal deliveries and emergency Cesarean section deliveries for eligible maternity cases have a total Maternity Initial Unshareable Amount (Maternity IUA) of two times the Member's selected IUA up to a maximum of $5,000. Non-emergency/elective Cesarean section deliveries have a fixed Maternity IUA of $5,000.
2. Sharing for Medical Bills related to childbirth with an expected delivery date within the first 9 months of membership are limited. See Section 7.C.

3. Medical Bills resulting from miscarriages revert to the Member's standard IUA.
4. Newborns will be included within the Household Membership retroactive to the date of birth as long as the Member notifies Sedera to add the child to the membership no later than 30 days after birth. Please see section 3.A.5 for further details.

Access to Sedera's Member Services and Patient Advocacy teams is available to all Members, whether or not the Member is pregnant at time of membership.

The specific Guidelines for maternity Needs Cases that are Shareable can be found in Sections A, B and C below:

A) Maternity Needs Cases That Are Shareable

7.A.1.	General Rule	Shareable maternity Needs for eligible cases include expenses for prenatal care, delivery, postnatal care, miscarriage, and congenital conditions. There are special criteria for sharing Needs of the child from genetic defects and hereditary diseases. See the Appendix.
7.A.2.	Adopted Child	Medical Bills of the birth mother and an adopted child, for which the adopting parents are liable, and which are not from a "medical condition existing prior to membership," are Shareable the same as other maternity Needs Case, less any credit amount to which the Member is entitled under the federal adoption income tax credit due solely to those Medical Bills. However, any physical condition which the adopted child has prior to the adopting parents being legally responsible for the child's expenses, or prior to their Start Date within their parents' membership, will be considered a "medical condition existing prior to membership" under Section 5.
7.A.3.	Early Sharing Request	Early Sharing Requests for maternity Needs Cases are not available for Members with pre-existing pregnancies. Members generally pay their medical providers at reduced rates, due to their cash pay status, and submit their Medical Bills/Needs Case(s) to Sedera after delivery. If a maternity care provider will reduce the normal charges if a Member prepays some or all of the Medical Bill, Sedera will consider sharing the maternity Needs Case prior to the birth. The Member must request an estimate and submit it via the online Needs Case Submittal Process. If the resulting Medical Bills are less than the pre-paid amount, the Member must contact a Sedera Member Advisor who will advise where to send the excess amount. Requested surplus amounts not returned to Sedera will be charged back to the Member. Failure to return excess amounts could result in termination of membership.
7.A.4.	Separate Needs Cases	Medical Bills for all pregnancy and birth-related complications of the mother will be shared as a part of the maternity Needs Case. Routine postnatal care of the child, including no more than one routine outpatient doctor visit, will be part of the mother's maternity Needs Case. Any pre-birth Needs Case of the child or a post-birth Needs Case of the child beyond routine natal care will be considered a Needs Case separate from the mother's maternity Needs Case, if the newborn is added within 30-days from the birth date.

B) Application of Maternity Initial Unshareable Amount

7.B.1.	Maternity Cost Sharing	Only the portion of a maternity Medical Bill that exceeds the Member's Maternity IUA will be eligible for sharing.
7.B.2.	Maternity IUA	The Maternity IUA is the IUA that applies to eligible maternity Needs Cases. Normal vaginal deliveries and emergency Cesarean section deliveries for eligible maternity cases have a total Maternity IUA of two times the Member's select IUA up to a maximum of $5,000. Non-emergency/elective Cesarean section deliveries have a fixed Maternity IUA of $5,000.

C) Maternity Sharing Restrictions and Limits for Conditions that Existed Prior to Membership

7.C.1.	General Rule	For pregnancies that have an expected delivery date within the first nine (9) months of membership, the amount eligible for sharing for their maternity Needs Case from the pregnancy will be equal to the total Monthly Shares the Member has contributed from the beginning of their membership through the month of delivery. If a Member terminates their membership, or allows it to lapse and later rejoins, the amount available for maternity Needs Case will be calculated from the date of the most recent membership Effective Date. Certain exceptions exist based on group size and participation numbers. Sharing in pre-existing pregnancies will only be available if the mother remains a Member through the birth of the child. New groups with ten (10) or more participating Members are eligible for sharing any pre-existing pregnancies as follows: Qualifying Members who are pregnant when joining the Sedera MCS Community agree to a separate $5,000 Maternity IUA. Maternity costs incurred after the membership effective date, which exceed the Member's Maternity IUA, will be eligible for sharing with the Sedera MCS Community.
7.C.2.	Ancillary Advocacy Services	Sedera Member Advisors are available to assist active Members during their pregnancy regardless of their membership Start Date or expected delivery date.
7.C.3.	Breast Pumps	Medically necessary breast pumps are Shareable up to $200 for one breast pump per Household when it is not covered under a MEC or other applicable plan or program.
7.C.4.	Complications and Conditions After Birth	Any complication of the mother which first produces symptoms and is first discovered after birth will be considered part of the mother's Shareable maternity Needs Case. Any complication to or defects in the child which first produces symptoms and is first discovered after birth will be a regular Needs Case of the child's if the child is a Member at birth.

7.C.5.	Complications and Conditions Through Birth	Medical Bills associated with a Needs Case due to complications of pregnancies that have an expected delivery date within the first nine (9) months of membership are generally not Shareable. Exceptions exist for qualifying pregnancies. Expenses related to miscarriages are generally Shareable after IUA. Please Note: Complications of pregnancy for both the mother and baby are Shareable after the IUA for: 1. Existing Members who become pregnant after their membership Start Date (due date equal to or greater than 9 months from membership Start Date). 2. New Members who are currently pregnant and whose List-Bill Entity has 10 or more participating Members on their Start Date, and 3. All Members for complications that arise after delivery.
7.C.6.	Doulas	Costs related to Doulas are not Shareable.
7.C.7.	Expenses Prior to Membership	Any maternity expenses incurred while the mother is not a Member are not Shareable.
7.C.8.	Premature Births	The baby's Needs Case is fully Shareable for a baby born prematurely requiring extraordinary medical care.
7.C.9.	Routine Maternity Expenses After Membership	Generally not Shareable. Exceptions exist as described in Section 7.C.1. above.
7.C.10.	Surrogacy Costs	Costs related to surrogacy are not Shareable.

Appendix

Medical Condition	Sharing Status	Modifier/Exception
1. Back Problems	Shareable	During the first three years of membership the statement described in Section 5.A.2. must be provided. Sharing limits stated in Section 6.A. and B. will apply if a Need request is determined to be a medical condition that existed prior to membership.
2. Complications from Maternity	Shareable	Medical Bills for complications to the mother are considered part of the maternity Needs Case.
3. Diabetes that doesn't require insulin (including	Shareable	Except maintenance medications as described in Section 6.B.41. During the first three years of membership the statement

most Type 2 diabetics)		described in Section 5.A.2. must be provided. Sharing limits stated in Section 5.A. and B. will apply if a Needs Case is determined to be a medical condition that existed prior to membership.
4. Genetic Defects	Shareable when at least **one** of the following is true: 1. The condition had not been diagnosed nor exhibited observable symptoms in the 36 contiguous months prior to the effective date of membership; 2. Neither the condition nor a symptom of the condition was discovered until after membership had begun; 3. The condition exists in a person who has been included in a membership from birth and the mother was included in a membership prior to the delivery; or 4. If the condition exists in a person who was adopted, the person has been included in a membership since the adoption, and the adopting parents were unaware of the condition at the time the adoption was finalized.	Sharing limits stated in Section 6.A. and B. will apply if a Needs Case is determined to be a Pre-existing Medical Condition.
5. Heart Conditions	Shareable	During the first **three** years of membership the statement described in Section 5.A.2. must be provided. See high blood pressure exception below. Sharing limits stated in Section 6.A. and B. will apply if a Needs Case is determined to be a prior medical condition.
6. Hereditary Diseases	Shareable	Under the same conditions as Genetic Defects.
7. High Blood Pressure	Shareable	Provided the Member has not been hospitalized for high blood pressure within **three** years prior to membership and has been able to control this condition through medication and/or diet. An incident that begins after membership becomes effective is shareable and would qualify for one 120-day period for sharing of prescription expenses. See Section 6.B.42.

		Medication thereafter for maintaining a chronic condition is not Shareable.
8. Sharing Outside of the United States		If a Member has a Sharable Needs Case that occurs outside of the United States, the Member will be required to provide Sedera the itemized Medical Bill translated into English and the price converted into U.S. Dollars.
9. Requirements to Prove Cessation of Tobacco		To prove Cessation of Tobacco, 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 negative 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 Sedera has received all required tests and affidavit/acknowledgement, the Member will no longer be subject to the Tobacco/Vape User fee or the limitations placed on the tobacco/vape related illnesses, which will take effect at the start of the next billing cycle. If a Member becomes a Tobacco/Vape User during the aforementioned 12-month period, the 12-month period will restart upon submittal of a negative cotinine test. Please Note: Nicotine usage will make these tests positive, so all nicotine supplements need to be stopped as well.
10. Requirements to Prove Cessation of Vaping Non-nicotine		To prove that a Member has stopped vaping any non-nicotine product, the Member will need to submit an affidavit or acknowledgement indicating that their last vape of a non-nicotine product was at least 3 months prior to the date of submission. Provided that the Member is not a tobacco user, the Member will no longer be subject to the Tobacco/Vape User fee, or the limitations placed on the tobacco/vape related illnesses, which will take effect at the start of the next billing

		cycle. Please Note: Cessation of Tobacco is outlined in this Appendix.