

■ HARD STOP — Ask This FIRST (Only Knockout)

"In the last 12 months, have you used tobacco, vaping, or e-cigarettes?"

YES = Cannot enroll. OneShare Health requires a 12-month abstinence attestation.

Say: "This program requires 12 months tobacco/vaping free. Let me find other options for you."

■ WAITING PERIODS - ALL Classic Programs (Catastrophic Program same except where noted)

- **Accidents / Injuries / Acute Illness** → Day ONE — no wait — ALL programs
- **Telemedicine / Virtual Urgent Care** → Day ONE — \$0 Visit Fee — 100% shared — ALL programs
- **Childhood Immunizations (0–24 mo, AAP)** → Day ONE — no wait — no Visit Fee — 100% shared — Classic only*
- **Emergency Room** → Day ONE — \$500 Visit Fee — bills \$10K+ go to ISA — ALL programs
- **General Medical (surgery, hospital, labs)** → 90 days — ALL programs
- **Cancer (new, never had before)** → 90 days — then eligible — ALL programs (see cancer section)
- **Preventive Services + 1 Wellness Visit** → 180 days — 100% shared up to \$1,500/yr* — Classic only (NOT on Catastrophic)
- **Pre-Existing Conditions** → 24 months — ALL programs except CAT365 (pre-ex NEVER eligible on CAT365)
- **Maternity** → Program active BEFORE conception — Classic Crown ONLY — NOT eligible on any other program

*Preventive \$1,500 eff. Aug 1, 2026, at each Member's Program Anniversary Date. Immunizations: provider must code as preventive.

■ PRE-EXISTING: 24-Month Wait

Any condition treated/diagnosed in the 24 months before the Active Date, OR any chronic unresolved condition known to the member — including:

- Heart disease / stents / cardiac conditions
- Diabetes (Type 1 or Type 2)
- COPD / Asthma (active/treated)
- Cancer within last 5 years (see cancer section)
- Back / spine / disc issues
- Clotting disorders / DVT / pulmonary embolism
- Kidney disease / renal conditions
- Autoimmune conditions (lupus, MS, rheumatoid, etc.)
- Sleep apnea (active treatment/CPAP)
- Obesity-related conditions (active treatment)

Related conditions also wait 24 months. Always ask before enrolling.

NOT Pre-Existing (Sharing Eligible from day one)

✓ High Blood Pressure (Hypertension)

Routine BP screening at a PCP visit eligible.
Annual monitoring — not subject to 24-month wait.

✓ Thyroid Conditions

Annual TSH blood test eligible.
Monitoring only — not subject to 24-month wait.

✓ High Cholesterol (Hyperlipidemia)

Annual lipid panel eligible.
Monitoring only — not subject to 24-mo wait.

Routine maintenance only. Subject to program PCP visit limits and Preventive sharing max.

■ WHAT RESETS EACH PROGRAM YEAR vs. WHAT DOES NOT

✓ RESETS every Program Year:

- ISA (Individual Share Amount)
- Preventive sharing limit (\$1,500)
- PCP visit count (1/3/5 per year by tier)
- Urgent care visit count (1 or 2 per year)

✗ Does NOT reset — carries for life:

- Lifetime Sharing Maximum (accumulates forever)
- Pre-existing 24-mo wait (clocks from Active Date)
- Cancer 5-year lookback (clocks from Active Date)
- Waiting periods (clock from Active Date, not year)

Lifetime Sharing Maximum is per Member. It does not reset even if the Member leaves and re-enrolls later.

■ CANCER RULES — Know These Before You Enroll Anyone

✓ Never had cancer

90-day wait, then eligible. Quote confidently.

! Cancer MORE than 5 years before Active Date

A NEW, unrelated cancer may be eligible after 90 days — but only with documentation proving no diagnosis/treatment in the 5 years before Active Date. Recurrence or metastasis of the prior cancer = NEVER eligible.
Same cancer type on different body part = recurrence.

✗ Cancer within the LAST 5 years before Active Date

ALL cancer expenses ineligible — not just the prior cancer. Any type. Zero cancer sharing. Be honest before enrolling.

QUICK FIT CHECK — IS OneShare Health RIGHT FOR THIS PROSPECT?

5 questions. Follow the arrows. 2 minutes max.

Say this first: *"Before I run a quote, I want to ask you a few quick questions to make sure this is the right fit for you. Is that okay?"*

Q1 Have you used tobacco, vaping, or e-cigarettes in the last 12 months?

YES → STOP

Cannot enroll. OneShare Health requires 12-month abstinence.
Say: "This Program requires you to be tobacco and vaping free for a full year. Let me find other options for you."

NO → Continue ✓

Q2 Do you have active cancer, or been treated for any cancer in the last 5 years?

YES → FLAG / DISCLOSE

Cancer expenses will NOT be eligible.
They CAN enroll but must understand: zero cancer sharing until the 5-year window clears, and recurrence is never eligible.
Enroll ONLY with full disclosure.

NO → Continue ✓

Q3 Have you been treated for any serious condition in the last 24 months? (heart disease, diabetes, COPD, clotting disorders, autoimmune, kidney disease, etc.)

YES → FLAG / EXPLAIN

That condition = pre-existing. 24-month wait for related expenses.
They CAN still enroll.
Say: "Your [condition] would have a 24-month waiting period for related care. Accidents, ER, telemedicine are all available right away. Want me to walk you through exactly what would and wouldn't apply?"

NO → Continue ✓

Q4 Are you pregnant, or planning to get pregnant soon?

YES → FLAG / EXPLAIN

Maternity = Classic Crown Program ONLY. Program must be active BEFORE conception.
Already Pregnant? = Not eligible this pregnancy.
Planning?: Enroll in Classic Crown NOW before conception.
New limits as of Aug. 1, 2026: \$10K natural / \$15K C-section

NO → Continue ✓

Q5 If something big happened, such as hospitalization or surgery, could you pay \$5,000–\$10,000 out of pocket? (That is the Individual Sharing Amount (ISA) — like a deductible, but you choose the amount.)

YES → QUOTE IT ✓

Great fit. Run the quote in OSHXpress.
Classic Enhanced or Classic Crown for most families.
Catastrophic Program for young, healthy, lowest-cost shoppers.
After ISA is met: Eligible expenses share at 100%.

NO → PAUSE & EDUCATE

Walk them through ISA options.
\$10K ISA = lower monthly cost.
If they truly cannot pay any ISA, be honest: this may not be the right fit. Better to say so now than when Sharing Eligibility is being reviewed.

✓ BEST FIT PROFILES—OneShare Health is a great conversation for:

- 1099 / gig workers / self-employed with no traditional employer coverage
- People priced out of major medical (\$400–\$600+/mo premiums)
- Between jobs — COBRA is too expensive
- People who don't want government-run or government-mandated healthcare
- Families who want a Christian, faith-community-based model
- Healthy individuals who want low monthly cost + big-event protection
- Employer-sponsored coverage is not offered or unaffordable
- People who want a simple, transparent, community-centered alternative

SHARING MINISTRY vs. TRADITIONAL INSURANCE — LANGUAGE GUIDE

Use the RIGHT words everytime. Compliance requires it.

Why this matters:

OneShare Health is NOT insurance. Using insurance words is a compliance violation and can mislead members. Every word matters: members make decisions based on how agents describe the program. Get it right every time.

Golden rule: if it sounds like insurance, don't say it.

✗ NEVER SAY THIS

✓ ALWAYS SAY THIS

Insurance / Health Insurance	Health Care Sharing Membership
Policy	Program / Membership
Premium	Monthly Contribution
Deductible	ISA (Individual Share Amount)
Co-pay	Visit Fee
Covered / Coverage	Eligible for Sharing
Benefits	Program Features
Explanation of Benefits (EOB)	Explanation of Sharing (EOS)
Claim	Sharing Request
Lifetime Maximum Per-	Lifetime Sharing Maximum
incident maximum In-network	Per-Incident Sharing Maximum
doctor	First Health Network provider
Prior authorization	Pre-Notification
Pays 80% after deductible	Eligible expenses shared at 100% after the ISA is met
Guaranteed coverage	Eligible for Sharing per the Guidelines — no guarantees
Copay waived / no copay	No Visit Fee applies

KEY CONCEPTS TO EXPLAIN TO EVERY PROSPECT

Not insurance: OneShare Health is a community of Members who voluntarily share each other's eligible medical expenses. OneShare Health facilitates the process — they are not an insurance company and make no promise to pay.

No guarantee: Sharing follows the published Membership Guidelines. No promise or guarantee of payment — this is why the Monthly Contribution is more affordable than insurance premiums.

ISA ≠ deductible: The ISA is what the member pays before eligible expenses are shared. It applies per Program Year — not per incident. After the ISA is met, eligible expenses share at 100%.

After ISA = 100%: Unlike insurance that typically pays 80% after a deductible (leaving 20% coinsurance), OneShare Health shares eligible expenses at 100% up to Program limits. No co-insurance.

No referrals ever: OneShare Health never requires a referral to see a specialist. Members schedule directly. No gatekeeper.