

Sound Retirement Radio.COM
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HOSTED BY JASON PARKER



**026 Health Insurance Alternatives 2
with Medi-Share and Andrea_Miller**

Speaker 1: Welcome back, America to Sound Retirement Radio where we bring you contents, ideas and strategies designed to help you achieve clarity, confidence and freedom as you prepare for and transition through retirement. Now, here is your host, Jason Parker.

Jason: Seattle, Tacoma, Olympia, Gig Harbor ... all of the good people right here in Kitsap County, and for those of you tuning in around the country via the podcast or online at 'Soundretirementradio.com', thank you so much. I do want to say a special shout out to those of you. We had a little technical glitch a couple of months ago where our RSS Feed broke. As a result, we started to lose our position in iTunes.

At one point, we're all the way up to like I think number three when you searched 'iTunes for Retirement' under podcast. We fell way back off the top of the list, but you guys being the great listeners that you are, you brought us back. We're now at number five, so thank you for sticking with us through some of our technological challenges. It is very humbling, but sure is appreciative to have so many wonderful people out there.

Thank you for rating the show. Thank you for sending us emails and telling your friends about the work we're doing. It means a lot to me.

I know how much you all appreciate our jokes every Saturday morning, so I've got one here for you queued up. "Why did the man put his money in the freezer?" He wanted cold hard cash. I asked my director first impressions, her name is Stephanie to come up with a couple of jokes, and so she gave me her favorite which happens to be she has twin four-year olds, and so this is her kids' favorite so I'll share this one with you.

"Where does the general keep his armies?" In his sleeves. I know. Some of you are sitting there listening, "Get armies in his sleeves?" It took me a couple of times too. Don't feel bad.

Anyways, welcome back. I know you love those jokes. I just can't wait to share them with you every Saturday morning. This is the second part. This is going to be if you're listening online or visiting the website, this is episode number 26. It's a two-part series. I've been exploring health care sharing.

The first episode was episode 24 where we had a gentleman from Samaritans Ministry on the program, so today is going to be the second half of that program. I'm excited to bring our guest on so that we can talk a little bit more about what health care sharing is and another organization that's

providing this type of help for people around the country. I want everybody to understand why I personally am researching this, because I have been researching this health sharing ministries for some time for my own family, but here's what happened.

Before Obama Care took effect, my family deductible ... so my family is pretty healthy and we have a pretty high deductible. We had a \$7,000 family deductible with a \$10,000 max out of pocket in any one year. We figured we could afford something up to \$10,000. We were comfortable covering that expense and anything catastrophic or over 10,000 where we wanted the insurance to kick in.

After the Affordable Care Act took effect, we saw our deductible, our family deductible went from \$7,000 up to \$10,000, so it's 43\$ increase on my deductible, and then my max out of pocket in any one year increased from 10,000 max out of pocket up to 12,500, so my insurance got worse. What was really frustrating is that my health insurance premiums increased 70% in one year, so not only is my coverage by my standards worse than it was before, but I'm paying 70% more for it.

A good friend of mine told me about a health sharing organization that he was a part of, and he had a good experience with it. Change is not easy for any of us. I've been using traditional health insurance for a long time and making a change away from that is really scary for both me and my wife, and so I wanted to do a lot of research on the topic before we made any change. We have not made a change yet. We're still in research mode, but I figured a lot of our listeners out there probably have the same questions, so why not get experts on the program and we'll all go through this educational experience together.

Today, I have Andrea Miller on the program. She is medical director and Vice President of Sharing at Christian Care Ministries. The name of the program is 'Medi-Share'. With 30 years of experience as a physician, Dr. Andrea Miller joined Christian Care Ministry in 2012. The lead organizations worked to equip Medi-Share members to be well informed patients to counsel them through treatment options and to inform them of the impacts of the Affordable Care Act.

Miller's long background in managed care as well as her experience creating an HMO in the midst of former President Clinton's work to rally support for the Health Security Act has positioned her as an expert on how individuals will be impacted by the Affordable Care Act, and what options they have including health care sharing. Apparently, this is unbelievable, but Andrea Miller is one of the few people who has actually read all 906 pages of the Affordable Care Act. It had been quite an exercise. Before joining Christian Care Ministry, Miller founded two private medical practices and managed them from the ground up. She developed and implemented medical staff policies for Saint Mary's Health Network in Nevada and served as hospice medical director for the Wuesthoff Hospice and Palliative Care in Florida.

Miller is certified in managed care and board certified in family medicine, hospice, palliative care. She attended medical school at State University

OF NEW YORK'S Upstate Medical University in Syracuse, New York, and completed her residency at Saint Vincent Family Practice in Erie, Pennsylvania. Miller has served on numerous medical mission trips to Guatemala and currently resides in Melbourne and Florida.

Andrea Miller, welcome to Sound Retirement Radio.

Andrea: Thanks. It's a pleasure to be with you.

Jason: Boy, that was quite the bio and a little bit of a tongue twister there. You read all 906 pages of that Affordable Care Act?

Andrea: Actually that was the easy part because there are literally thousands of pages of explaining what all those regulations means.

Jason: Thousands of pages to go along with it, so when you're having a hard time sleeping, you just break up the old Affordable Care Act and ...

Andrea: That's right. It works great.

Jason: Thank you for being here. Our listeners, I'm interested in the subject. I'm looking forward to learning a lot from you about health care sharing. You work with Medi-Share, and so I was hoping we could start this conversation off, help our listeners understand what is a health care sharing organization.

Andrea: I'd be happy to. I've only been with Medi-Share a little over two years, so I had to learn about it too, and I was delighted when I did. Health Care Sharing Ministry is an organization that's a not-for-profit that basically helps individual Christians get together and agree to share each other's medical expenses.

Jason: Okay. What are the nuts and bolts of it? What are the mechanics? How does it work?

Andrea: It works if you choose to be a member, you apply to be a member, and then you open your own checking account at a Christian Credit Union and place money in that account each month. Then, if you go to the doctor and you have a need to get ... you show a little card to the doctor, and the doctor sends the bill to our address, we check the bill to make sure that the medical need is something that is part of the guidelines and therefore eligible for sharing. Then, if it is, we help facilitate getting money from someone else's account into your account so that there's a check that goes from your bank account right to your doctor's office.

Jason: Medi-Share facilitates all of that, so the member doesn't have to go in to this account and see that there's cash there, and then send the check to the doctors? You guys handle all the back office stuff.

Andrea: Yes. That's right. We really facilitate all that, but it is a direct deposit from your account into someone else's account. You know who that person is so that if you want to send them a note or tell them that you're praying for them, you can do that.

Jason: One of the things because we had Samaritans Ministry on, and you Samaritans Ministry and Medi-Share seem to be the two names that kept coming up as I've been researching this. One of the things I thought was interesting was that Samaritans Ministry, they actually had their members writing a check to other members around the country when there was a need, but Medi-Share, it sounds like it's maybe a little bit more efficient from the standpoint that you don't actually do that, you just put your sharing amount into your own checking account and then in the back scenes. Medi-Share handles making sure the payments are sent to the right people.

Andrea: Yes. That's correct. It's like there's different churches and different people enjoy the worship in different churches. With the sister ministries, different people have different wants and needs about how they actually participate in the sharing. The Christian Care Ministry and Medi-Share have a way of doing it that many people find to be quite convenient.

Jason: How long has Christian Care Ministry been around?

Andrea: Twenty-one years.

Jason: How many people do you currently serve?

Andrea: We currently serve about 100,000 people, about 35,000 families, and it's growing every day.

Jason: In my mind, this type of a program, I know that it's not insurance. You can't call this insurance, but it sure looks and feels and smells a lot like the reason that most of us buy insurance. I mean, we know that if there's something that happens to us and we can't cover all the cost, we pull resources through an insurance company traditionally, and then those costs are covered.

This type of health care sharing is the same idea, it's just we're cutting the insurance out and pulling like-minded people together to share the expense. Is that the bottom line?

Andrea: It is. There are some pretty unique differences between them. One is that it is definitely a faith-based program. The people who put their money in their account in order to share with the other people in Medi-Share don't have a government guarantee or a legal guarantee that their needs will be shared. However, we've had a 100% of all eligible bills in the last 20 years that have been eligible for sharing, have actually been shared.

We have a very good track record there and I think it's over a half of billion dollars has been shared.

Jason: Half a billion dollars?

Andrea: It's a substantial amount of money that is shared.

Jason: That's incredible. Explain to us if somebody ... First of all, I have a family of four, me, my wife and two young kids. If we wanted to sign up for something like Medi-Share, how much would we have to pay? Does the sharing amount change based on where you live or how does that work?

Andrea: The sharing amount are based on the age of the oldest person who is in the family, and then whether it is a single husband and wife or husband, wife and children.

Jason: Okay. I'm just about to turn 40. I'm 39 years old right now. I'm the oldest one in my family. What would we be looking at any ... Do you know what the premium ... or I guess it's not a premium. I have to get my mind around this idea that we're not paying insurance premiums. Any idea what the cost would be for our family?

Andrea: For families, the average is around \$300 a month. For individuals, it's about a hundred dollars a month.

Jason: Okay, so \$300 a month. That's less than half of what I'm paying for insurance. When does it kick in? How much of a medical need do I have to have before members actually come together to help share in the increased expense? Do you understand what I'm saying?

Andrea: No. I'm really sorry but I'm having a lot of trouble hearing you right now.

Jason: I'm sorry. Let's take a quick break and we'll be right back after this.

All righty, folks. Welcome back to another round of Sound Retirement Radio. I'm your host, Jason Parker. Thank you so much for tuning in. This is the episode number 26 where it's the second part of a series I'm doing on health care sharing, how health care sharing works. I have Andrea Miller on the program. She is with Medi-Share.

Andrea, can you hear me okay? Is our connection improved at all?

Andrea: Yes, it is better.

Jason: Okay.

Andrea: Thank you.

Jason: You were just saying that the average family of my size of four is paying about \$300 per month in costs, but that ... My question was when does ... Is there a deductible or amount that we pay out of pocket before the Medi-Share members start sharing in the costs?

Andrea: Yes. We have a thing called an 'Annual Household Portion' which is the amount that a family would pay for their own medical bills prior to other members sharing. That can vary anywhere from \$12,050 to \$10,000 depending on which amount the family selects.

Jason: Okay. It is similar to insurance then, and that if I ... for with my insurance plan that I have right now, we elect a deductible of \$10,000 per year for our family with a max out of pocket of \$12,500. Is there a limit on what will be covered through Medi-Share?

I mean, let's say we have this \$5,000 sharing before the other members start helping us with our medical bills, and then we end up with \$200,000 medical emergency. Is there a limit on what's going to be covered? How much money is going to be shared?

Andrea: There is no limit on how much is shared.

Jason: Wow. What's the most that you guys have experienced in Medi-Share?

Andrea: I don't know the exact amount but it's well over \$500,000.

Jason: Wow, so you had one incident where somebody needed over \$500,000 of medical needs and ...

Andrea: We've had. We've definitely had more than one of those.

Jason: Wow, and all the numbers came together to help cover that expense?

Andrea: Yes, that's a beauty of a sharing ministry is that people can come together to help each other. Again, it isn't just the fact that someone's helping you with your bill, but generally, our members are praying for each other as well.

Jason: Yes, I really ... A friend of mine went through an experience where he had a health sharing ... he's part of a health sharing ministry. He said actually, one of the best parts about that were the letters of encouragement and letters of prayer that he received from people around the country, not just the fact that his wife's health care cost were covered. That is really a unique approach in system.

I have to tell you, one of the concerns that I've heard as I've talked to people about this, people look at me like this is something that's too good to be true, like it's some kind of scam that they're getting involved in. How can consumers, people out there be confident that this isn't a scam or that it's a legitimate type of program?

Andrea: Again, I think the best thing you can do is look at the track record that we have had. We've been around for 21 years, and we have shared a 100% of eligible bills, so our members have been able to do that right along. I think that's really the best way. The other thing is to ask people who are in the ministries to find out about it. Certainly, with the electronic age, the way it is now, there's lots of opportunities to ask questions to people around the country to find out.

Jason: Is there any third party accountability or auditing that takes place to make sure that the organization is fulfilling their mission and be in good stewards of the resources?

Andrea: We are independently audited every year, so I think that we've never had any problems with that. Our board of directors has an audit committee that takes care ... seriously making sure that everything is the way it should be.

Jason: Okay. When I had James Larisberry on the program from Samaritanis Ministry, I was asking him about regulations and who regulates or oversees this type of ministry that you've established. His statement was, "Your state's attorney general." Is that also the case with Medi-Share? Is it just the attorney general's office that's going to help oversee and protect consumers?

Andrea: I am sorry but I did not get that question again. You're echoing.

Jason: I'm sorry. The question had to do with the state's attorney general and who ... Are you also overseen by the state's attorney general in terms of consumer protection and making sure that people aren't being taking advantage of?

Andrea: Yes. I think as a not-for-profit, certainly, all the different governmental agencies do [check 00:19:42] on that.

Jason: Okay. Very good. Let's go to another quick break and we'll come back here in just a minute, see if we can improve our connection.

Speaker 1: Are you 50 years or older and have at least \$500,000 of investable assets? If so, this message may be beneficial for you. Are you confident that you will be able to retire and not run out of money? Are you concerned about higher inflation, higher taxes and what market volatility will do to your portfolio?

If you answered yes to any of these questions, then I encourage you to take advantage of this offer. Jason Parker, the author of 'Sound Retirement Planning' and President of 'Parker Financial' is offering a free report titled, '10 Things to Know About Planning Your Retirement Income' that may provide you answers to the above questions and much more.

Call his office at 1-800-514-5046 to receive your report free of charge. Again, call now at 1-800-514-5046.

Jason: All righty, folks. Welcome back. This is Jason Parker, your host of Sound Retirement Radio and the author of 'Sound Retirement Planning'. Thank you for making my book one of the 'Amazon Bestsellers' under the category of 'Retirement Planning'. That has been a real honor, and thank you for all of the reviews on Amazon. It's great to see what people think about the book. I'd love to hear from you.

If we haven't connected on Facebook, join us on Facebook. Join the conversation. Let's have a talk and let's help influence the type of programming that we do here on Sound Retirement Radio. You can find us on Facebook at 'Facebook.com/soundretirementplanning'.

All right. I have Andrea Miller on the program. Andrea Miller is with Medi-Share. This is one of these health care sharing organizations. You're listening to episode number 26 if you're just tuning in, and this is a two-part series that we're doing on health sharing. The first series or the first part of the series was episode 24, so if you're looking to listen to these programs online, you'll have the access to the transcripts and all the show notes and links to anything we discuss at 'Soundretirementradio.com' or 'Soundretirementplanning.com'.

Andrea Miller, I was just asking you about the vision behind Medi-Share. What is it exactly that Medi-Share is hoping to accomplish here?

Andrea: Our vision is really to help Christians become an authentic community and share each other's every day burdens.

Jason: Sound Retirement Radio is really focused on the needs of people who are just getting ready to retire or people who have already retired. Is Medi-Share relevant for that demographic? If somebody says they're already 65 years old and they're enrolled in Medicare, would they even be interested in this type of a plan or program?

Andrea: Yes. We have a special program for people who are on Medicare. It's our 'Senior Assist Program'. That basically ... the members of that program share with each other expenses which are not covered by Medicare but are deemed to be eligible through Medicare.

Jason: That's kind of like a separate pool of people that share in those expenses that's not part of this. Okay.

Andrea: Yes.

Jason: That's interesting. One of the big concerns that I have when considering making a change is the Affordable Care Act says that if you don't have qualified insurance coverage of qualified coverage, that you could end up paying penalties or fines for not carrying insurance. How does Medi-Share or health sharing organizations fit into the Affordable Care Act?

Andrea: I'm pleased to tell you that we have an exemption. All health care sharing ministries that have specific characteristics that are written right into the Affordable Care Act are exempt so that if you as an individual demonstrated that you were a member of a health care sharing ministry, that you would not be susceptible to any fines or penalties.

Jason: Okay. Can people be turned away by a hospital or a doctor if they go in and they don't have traditional insurance but they're participating in one of these health sharing organizations, health sharing ministries? Can the doctor turn them away and just say, "I'm sorry, we're not going to see you." Can the hospital turn people away?

Andrea: Two different questions, and I'm not a lawyer, but I know that there are certainly laws that if someone comes to an emergency room with an emergency that they must be seen regardless of ability to pay. As far as individual physicians go, individual physicians if it's not an emergency situation have the right to choose their own patients, so they can do that with anyone.

Jason: Okay. Within the Medi-Share world, do you have to use a preferred provider network?

Andrea: No, we don't require people to use a preferred provider network. However, we do have one available to them if they would like, and that gives them the added security that if someone is not using that network, then the amount that the other members will share related to an eligible expense is mandated by a usual and customary charge, so that if a doctor for example

charged ten times as much as the usual charge for a particular procedure, the other people would share just the amount that's the usual and customary.

Jason: Okay. If a doctor agrees to be a part of that preferred provider network, then they agree to the cost structure, and so there would be less surprises from a member's standpoint?

Andrea: Yes. Yes. Basically, if the need is eligible for sharing and the member does stay in network and we are part of a largest network in the country, so it's not a restricted network in any way, then the membership would share a hundred percent of the bill that was eligible after the annual household portion was met.

Jason: Okay. How about prescriptions? If people need prescription medications, is that covered through Medi-Share?

Andrea: Medi-Share members actually have guidelines that they vote on, and they have voted on allowing there to be a medication sharing, but it's only for the first six months of using a medicine with the exception of chemotherapy and transplant drugs, where basically there isn't a time limit on that. The other medications, it's the six months amount.

Jason: Okay. How much of the cost of membership would you say goes to cover administrative costs?

Andrea: Apparently it's 23%.

Jason: Twenty-three percent, and for every dollar, \$0.23 is going to cover the administrative cost?

Andrea: It is, but let me explain a little bit about some of the administrative cost. In order to have the PPO which allows our members to have an average over 30% discount on any of their health care costs, the administrative portion of Medi-Share pays over three dollars per household per month for that. That's one of the things that is called 'Administrative'.

Jason: Okay.

Andrea: We have some other discount arrangements where we utilize other networks or other ways of trying to get discounts or actually not trying, but obtaining discounts for our members and the costs of that are also included in the administrative cost. There's a lot of different things involved in that.

Jason: Okay. Now, if you're just tuning in, I have Andrea Miller on the program with us. She is with Medi-Share, a health sharing organization with Christian Care Ministry. Andrea, you are a doctor, and you established two private medical practices. From your standpoint as a doctor, did you ever participate in anything like health sharing organization? Were you ever a part of a preferred PPO, a preferred provider?

Andrea: I was part of a preferred provider organization, but my largest practice was back in the '80s. That was before the time of any of the health care sharing ministries as far as I know. I would have been thrilled to have something like

THIS available to be a part of ... had it been there at the time that I was doing that.

Jason: You feel like most doctors then would be receptive to wanting to participate in something like this?

Andrea: We find that absolutely most doctors are. Most doctors want the people that they take care of to be able to get the health care they need. They just want to be sure that if they order something, that that person can get it done. I can speak as a physician. It's very disheartening if I see somebody and I know that they need something but they just can't afford to have it done. It's always a relief when you know that the person can get the care that they need without concern .

Jason: Yes. As I've been researching Medi-Share, I checked on the directory that you have online to see which doctors were participating in the preferred provider network. I was very happy to find that our children's pediatrician was part of that network. I was surprised to see that my own doctor was not participating, and so I called the doctor's office and asked them, and they just said that at this time, they've decided not to participate in the network.

If I choose to continue to go to my doctor, what are the negative consequences for me in that type of a situation?

Andrea: If you were to go to your doctor, the main thing that you would want to do is you would want to let him know that you are a part of Medi-Share and ask that if you were to order any tests for you or hospitalize you that if possible, you would like him to order those or arrange for the hospitalization to be done at a place that is in network. His bill would be adjudicated according to what usual and customary is for doctor's visit, and unless he's really far out of line in terms of his charges, it probably wouldn't make a great deal of difference to you on an office call, because it's very likely that the amount that he would charge would be very, very close to the amount that would be shareable.

Jason: Okay. They said that they would be willing to bill ... I believe they said that they'd be willing to bill Medi-Share but they just weren't participating in the preferred provider network. I think one of the things that makes your organization different from the other that I interviewed is that when you're participating in Medi-Share, the cost or the bill is actually sent from the physician to Medi-Share.

Andrea: Right.

Jason: That's different than sending a bill out to other people around the country and then writing a check. It's a little bit of a different structure.

Andrea: It is. I think it's a little bit simpler for most people and it's a little bit easier to explain to the doctor's office. They're pretty used to seeing a card that has an explanation of where to send something, so it makes them a little bit more comfortable sometimes.

Jason: Okay. What was your experience with open enrollment this past year?

Andrea: The open enrollment basically gave us all a very, very busy fall and spring, I think all of the health care sharing ministries because so many people were just trying to find out what their options were. We had many more phone calls, many more applications, we had a great amount of increase in membership in the last nine months.

Jason: Wow. Do you think with this influx of people that you guys are going to be able to maintain the sharing amount that families are currently paying or because more people are participating? Do you think it's going to be likely that those costs are going to start to increase and are we just going to end up back in paying dollar amounts that are similar to what we would pay from an insurance standpoint?

Andrea: I can't predict the future, but I have no reason to think that's going to happen. The people are the same people that are asking, that are coming in the membership. People who come in to membership in a health care sharing ministry generally have done just what you've done. They've taken some time to look at it, to say, "Is this really right for me and my family?", when we do recommend when they come onboard, that they understand it is a sharing ministry, it isn't an insurance company. It's a different kind of relationship.

When our people do that, there's more of a community and more of a commitment there. We are working very hard to try to find ways to make sure that our members can have as many of their needs shared as possible at the lowest expense for the entire membership. We take that quite seriously, and that's one of my primary responsibilities is to try to help figure out not only how to make sure that the care stays affordable, but even more important, what can we do to help you all so that the care that you get is actually the care that you need.

Jason: All right. Folks, we're at that point again we need to take a break. If you're just joining us, I have Andrea Miller on the program, part of Christian Care Ministry in the Medi-Share Program, a health care sharing organization. After the break, I'm going to ask Andrea about the difference if Medi-Share is more affordable than health insurance. We will be right back after this.

All righty, folks. Welcome back to another round of Sound Retirement Radio. I am your host, Jason Parker. It is my great joy and pleasure to be joining you all on a Saturday morning. I thank you so much for tuning in. Thank you for making Sound Retirement Radio one of the top spots on iTunes under 'Podcast and Retirement'. That is a real honor, and it's hard to believe we've been doing this for five years now. I appreciate all of your listenership, the people that stick with us even though sometimes we mess things up and even though my jokes are really bad, you keep tuning in. We appreciate that.

I have Andrea Miller on the program with us. This is episode 26, a two-part series we've been doing on health care sharing organizations. The first one was episode 24. If you want to go back and listen to that one online, we have all the transcripts and links right on the website.

I want to remind all of our listeners, if you're getting ready to retire or just about to retire, retirement is all about cash flow. It's your income that will determine your lifestyle. Social security is one of the best annuities out there in terms of income, and there are tips and tricks on how to maximize that income. If you haven't had a chance to watch the video that we have available, go to 'Soundretirementplanning.com' and watch a quick video, and we'll teach you how to maximize your social security benefits.

Andrea Miller, we were just about to talk about the fact or ask the question, "Is Medi-Share more affordable than insurance?"

Andrea: Every family is different. They need to look at their own ... similar to what people's retirement needs are. They need to look at what it is that they planned to or expect to need to spend money on related to their health.

I can tell you that most of our families have said that they will spend about 40% less on their Medi-Share sharing amount than what they had been spending before on an insurance premium.

Jason: I just had a curiosity. Most of us buy health insurance not because we're worried about the small trips to the doctor's office. Most of us are comfortable paying that kind of expense out of pocket, but I think most of us are really concerned about "What happens if something really bad happens? Am I going to be covered or am I going to be just financially, totally devastated and wiped out?", and that's why most of us buy insurance.

At least that's for my family. That's the reason we choose to have high deductible plans and try to keep our premium cost as low as possible. Is there a maximum lifetime amount that Medi-Share would ever cover? Is there a spot or a point where they just shut you off and say, "We're sorry but this is just getting too expensive"?

Andrea: No. Actually, up until about a year ago, we did have a lifetime max of I think it was five million dollars, but we stopped having that maximum for a couple of reasons. One was we just hadn't frankly ever had to use it. The bigger one was we talked it over as an executive team and said, "What we try to do ..." We say, "What is it that we think our members want?", and we do have a steering committee that are made up of members that we ask those questions to.

We said, "If we were with a member and help them through medical expenses that the medical need was so devastating that it cost a large amount of money, a million dollars or two million dollars", we would not feel right at that point of just all of a sudden saying, "We're really sorry but we can't help you anymore." We wouldn't expect that any of the people that are members of Medi-Share would feel right about that either.

The last thing we want to do is to not be there when people really need it, so we just talk to our steering committee and they voted to totally take that away, but there are no lifetime access for that reason.

Jason: Okay. Now, it's Christian Care Ministry. What's the criteria to be a member of Medi-Share?

Andrea: Yes. To be a member of Medi-Share, people need to sign a statement of faith. We ask them to sign an agreement that states that they will follow a Biblical lifestyle, and we ask them to give us their testimony about their Christian faith and then they fill out a simple application.

Jason: Okay. If somebody says they're not a Christian, then they can't join the Medi-Share community.

Andrea: That's correct. We are ... The core canon of what we do is based on our Biblical belief that we're sharing one another's burdens and as Christians, and so it isn't that we don't love people who are not Christians. We find other ways to help them, but this particular ministry is designed specifically for Christians.

Jason: Is it denomination specific? Do you have to belong to a certain denomination?

Andrea: Not at all. We have a statement of faith that follows most Christian ... people can sign without any difficulty. They read each statement and say whether they agree with that.

Jason: Okay. Who would you say Medi-Share is probably not a good fit for?

Andrea: I don't think it's a good fit for someone who wants someone else to take care of everything about them. In other words, there are some things that the Medi-Share members have asked specifically that they want to pay themselves similar to what you said about that you are comfortable paying for your own doctor's office visit. For that reason, our members have voted that they do not want routine office visits or preventive visits shared by the membership not because they believe it's not the right thing to do but because they think they can budget for it.

That is something that would irritate or frustrate somebody, and that probably would be not be a good fit for them. One of the things I really like about us is that we don't interfere with the relationship between the member and their doctor in any way. We don't require preauthorization to have things done because we're not insurance. It's a sharing ministry, so if you have a medical need that's eligible, it's between you and your doctor, what it is you do to get that needs met.

Jason: I would imagine though, there are certain medical procedures that the members have voted to not participate in sharing in. Isn't that true?

Andrea: Yes there are, and they're the ones that are pretty commonly not shared by other people such as cosmetic surgery is probably one of the bigger ones. In addition to that, issues that are specifically related to a non-Biblical lifestyle, so a pregnancy of an unmarried person is one of the things that is not shared amongst the ministry.

We will pray with the person and we will try to help them find alternate means of helping them, but it's not something that the other members share in.

Jason: Are there preexisting condition exclusions? If somebody has had cancer in the last year, would they be precluded from being able to become a member of Medi-Share?

Andrea: We don't have any re ... I'm sorry. Let me start over. We don't decline a person from being a member for any reason that's related to medical. The only reason we ever decline somebody being a member is related to them not feeling comfortable signing the statement of faith or something of that nature. However, we also do not share a preexisting condition for a period of up to three years, and for cancer, it's up to seven years.

Jason: If somebody has had cancer and have ongoing checkups and things going on, they would probably be wise to stick with their existing health insurance program not switch to something like this because the sharing community is not going to come in and help cover the ongoing expenses associated with that?

Andrea: Yes. I would say at this point, that's true that it would probably be a better choice for them just to stay where they are.

Jason: As you look out into the world of insurance and health sharing organizations, what do you see is the biggest disadvantage to the type of program that you're offering there through Christian Care Ministry and the Medi-Share program? What's the biggest disadvantage?

Andrea: It's hard for me to say that there's a big disadvantage. I do think that I look forward to the day that we will be able to totally eliminate preexisting conditions because it's in our hearts, so that's what we would like to be able to do. The problem that we've had in the past is that doing that would have in all likelihood made the sharing amounts unaffordable for people.

Jason: Right.

Andrea: Now that there are alternatives for people, my hope is that we will be able to get to that. That's probably the biggest negative that I can think of.

Jason: Like you said at the beginning of the program, there's a lot of different options for people out there, Medi-Share being one of them. Who are some of the other big players in this space?

Andrea: In the health care sharing ministry?

Jason: Correct.

Andrea: That would be Samaritan Ministry. I think you've spoken with Trierni, and Christian Health Care Ministries. I had to say it very carefully because we are Christian Care Ministry, and as you could imagine, the two sometimes get confused.

Jason: Yes. That's pretty similar. For our listening community out there, if they want to learn more about the work that you folks are doing and how the programs work, what's the best way for them to do that?

Andrea: There's two different ways depending on whether they like to be on the internet or not. If they like the internet, 'MyChristiancare.org' is the website, and there's lots of information about that there. Then, if they would like to speak to an actual life human being, we have that available as well, and that would be 1-800-Psalm-23. That's 1-800-Psalm-23.

Jason: That's cool. Andrea Miller, we're just about out of time. Thank you so much for the work you're doing and for taking time out of your busy schedule to be a guest of Sound Retirement Radio.

Andrea: Thank you so much for having me. I've really enjoyed our conversation.

Jason: Absolutely. For our listeners, once again, 'MyChristiancare.org' or 1-800-Psalm-23. We'll have all the show notes, transcripts and this message will be recorded so you can go back and listen to it again. Until next week. This is Jason Parker signing out.

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