Dear Valued Member,

We are announcing updates to the **ShareWELL Member Guidelines**, which will take effect on **September 1, 2025**. These updates were reviewed and recommended by our board of directors and approved unanimously.

The **revised guidelines will apply only to Sharing Requests submitted on or after September 1, 2025**. Sharing Requests submitted prior to this date will be reviewed based on the guidelines in effect at the time of submission. The exception to this is the new 90 day waiting period will only affect enrollments that happen after October 1, 2025.

**Overview:**

**New Principle**:

* Members agree to work with ShareWELL to find and utilize fair-cost healthcare services when appropriate.

**New Section**

**Scheduled Care Review**

Certain non-emergency procedures may be placed under review to protect the community from inflated costs and allow time for negotiation with providers. Members are required to notify ShareWELL as soon as a procedure is recommended or scheduled. This ensures there is sufficient time to review costs, confirm eligibility, and arrange fair pricing before care takes place. Emergency procedures are never delayed or subject to this review.

* A review period may last up to 30 days for scheduled, non-emergency procedures.
* Failure to notify ShareWELL in advance or in a timely manner may result in reduced sharing eligibility.
* Hospital-based procedures may be subject to limited sharing when lower-cost options such as outpatient or surgical centers are available.
* Members who work with ShareWELL to find fair-cost providers may qualify for a reduction of their Unshared Amount (UA).

**Adding: Initial 90-Day Ineligibility for Certain Conditions**

The following conditions and any related treatment are not eligible for sharing if signs, symptoms, diagnosis, or treatment occur within the first 90 days of membership:

* Gallbladder-related care – including gallstones, gallbladder removal, or related complications
* Kidney stones – including diagnostic imaging, treatment, or removal procedures
* Cancer – any form of diagnosis, staging, or active treatment
* Tumors- Benign and malignant

**New Guidelines:**

* **GLP-1 or Semaglutide**

Complications are not eligible for sharing unless prescribed for diabetes treatment.

* **Breast Reduction Surgery**

Eligible after the initial pre-existing waiting period for a one-time allowance of up to $8,000.

* **Diagnostic Colonoscopy**

Considered pre-existing and not shared in the first year of membership. A $2,000 per Sharing Request allowance for colonoscopy.

* **ER Visits for Non-Emergency**

The maximum sharing allowance is $10,000 per emergency room admission for non-life-threatening or care unrelated to a severe medical condition requiring immediate care. Examples include but are not limited to panic attack, anxiety, dehydration, and minor injury.

* **Ambulance for Non-Emergency**

The maximum sharing allowance is $1,000 for non-life-threatening or non-emergency care.

* **Newborn Congenital Conditions**

For children born from an eligible Maternity Sharing Request, sharing is limited to $125,000 for medical bills related to congenital conditions after the initial hospital discharge.

* **NICU (Neonatal Intensive Care Unit)**

For NICU admission sharing is limited to 35 days after birth.

* **Prescriptions**

Prescriptions are considered eligible when related to the treatment of an approved Sharing Request that does not have a pre-existing limitation and is ordered by a licensed provider. Sharing in all prescription costs is limited to whichever comes first, 12 months or $100,000 per Sharing Request.

* **Second Opinions**

A second opinion of a diagnosis or recommended procedure is an eligible expense.

* **Surgical Repairs & Revisions (added to treated as pre-existing)**

Any procedure that is intended to revise, repair, or correct a prior surgery regardless of when or where the original surgery was performed. This includes, but is not limited to, procedures addressing complications, failed outcomes, or enhancements of previous surgeries.

* **Gerd/Acid Reflux**

Added to treated as pre-existing list.

* **Varicose Veins**

Added to treated as pre-existing list.

**Updates:**

* Increased medical supply allowance from $1,000 to $3,000 per Sharing Request.
* Increased allowance for prenatal and postnatal care from $5,000 to $6,000 per Sharing Request.
* Clarifying the Sharing Request Allowance section.
* Tobacco usage changed from one per year to once per month. If applied members pay a $100 monthly surcharge.
* Minor changes to language throughout the Member Guidelines that provide clarity but do not change how Sharing Requests are determined.