



# PROGRAM MEMBERSHIP LEVELS

**DAILY**  
Prices as Low as **\$87**

**CHOICE**  
Prices as Low as **\$105**

**CRISIS**  
Prices as Low as **\$128**

**CORE**  
Prices as Low as **\$192**

COVENANTSHARE.ORG

	DAILY	CHOICE	CRISIS	CORE
<b>Personal Responsibility Amount Yearly (PRAY)</b>	\$100	\$10,000	\$5,000 \$10,000	\$1,000   \$2,000 \$5,000
<b>Yearly Membership Sharing Limit</b>	N/A	\$150,000	\$250,000	\$250,000
<b>Lifetime Membership Sharing Limit</b>	N/A	\$300,000	\$500,000	\$500,000

	DAILY	CHOICE	CRISIS	CORE
<b>THE FOLLOWING SERVICES ARE ELIGIBLE* FOR SHARING** AFTER THE PRAY AMOUNT IS MET:</b>				
<b>Eligible Services<sup>†</sup></b>	<b>MEMBER PREFERRED PROVIDER GROUP<sup>††</sup></b>			
<b>Physician Office Sharing</b>	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100% <sup>1,2</sup>	Not Eligible	Member-to-Member Sharing = 100%
<b>Laboratory Test Sharing<sup>3</sup></b>	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%
<b>Urgent Care Sharing</b>	Member-to-Member Sharing = 100% <sup>4</sup>	Not Eligible	Not Eligible	Member-to-Member Sharing = 100%
<b>Specialty Care Sharing</b>	Member-to-Member Sharing = 100% <sup>5</sup>	Not Eligible	Not Eligible	Member-to-Member Sharing = 100%
<b>Emergency Room Sharing</b>	Not Eligible	Member-to-Member Sharing = 100% <sup>6</sup>	Member-to-Member Sharing = 100% <sup>5</sup>	Member-to-Member Sharing = 100% <sup>7</sup>
<b>Ambulance Sharing</b>	Not Eligible	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%
<b>Hospital Sharing</b>	Not Eligible	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%
<b>Maternity Sharing</b>	Member-to-Member Sharing = 100% <sup>8</sup>	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%
<b>Surgery Sharing</b>	Not Eligible	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%	Member-to-Member Sharing = 100%

\* For a comprehensive list of all shareable and non-shareable services for each specific membership level of the Covenant program, please refer to the respective membership guidelines located on the website.  
 \*\* If a member chooses to go to a provider not found in the Member Preferred Provider Group (MPPG), member-to-member sharing is reduced to 50% for services eligible for sharing.  
 † Shareable by the membership community up to the yearly and lifetime program sharing limits.  
 †† MultiPlan Private Health Care Service (PHCS) network. Covenant HealthShare does not own or operate the MultiPlan PHCS network.

- Limit two (2) physician office visits per Choice program year per Member and, as applicable, per each registered eligible dependent under a membership. Visits are not transferable between a Member and the Member's registered eligible dependents.
- After Member payment of per visit Fellowship Advising Fee of \$50.
- Laboratory tests completed in a physician office, urgent care clinic, or specialty care provider office, or ordered by your provider during a visit to be completed outside of the office/clinic, such as at an off-site laboratory are eligible for sharing.
- Limit three (3) urgent care visits per Daily program year per Member and, as applicable, per each registered eligible dependent under a membership. Visits are not transferable between a Member and the Member's registered eligible dependents.
- Limit two (2) specialty care visits per Daily program year per Member and, as applicable, per each registered eligible dependent under a membership. Visits are not transferable between a Member and the Member's registered eligible dependents.
- Up to the per incident sharing limit of \$15,000.
- Up to the per incident sharing limit of \$5,000.
- Office visits for the Daily program at the OB/GYN for routine prenatal and postnatal care are eligible for sharing.

This is NOT insurance.



▶ **\$100 Personal Responsibility Amount Yearly**

Age Tiers	Member	Member + 1	Family	Family of 5+
18-29	\$86.40	\$129.60	\$194.40	\$291.60
30-39	\$108.00	\$162.00	\$243.00	\$364.50
40-49	\$135.00	\$202.50	\$303.75	\$455.63
50-59	\$178.20	\$267.30	\$400.95	\$561.33
60+	\$258.39	\$387.59	\$581.38	\$872.07

▶ **\$10,000 Personal Responsibility Amount Yearly**

Age Tiers	Member	Member + 1	Family	Family of 5+
18-29	\$104.12	\$151.68	\$223.02	\$330.03
30-39	\$127.90	\$187.35	\$276.53	\$410.29
40-49	\$157.63	\$231.94	\$343.41	\$510.61
50-59	\$205.19	\$303.28	\$450.42	\$626.98
60+	\$293.47	\$435.70	\$649.05	\$969.08

▶ **\$5,000/\$10,000 Personal Responsibility Amount Yearly**

Age Tiers	Member		Member + 1		Family		Family of 5+	
18-29	\$156.80	\$127.36	\$235.20	\$191.04	\$352.80	\$286.56	\$529.20	\$429.84
30-39	\$196.00	\$159.20	\$294.00	\$238.80	\$441.00	\$358.20	\$661.50	\$537.30
40-49	\$245.00	\$199.00	\$367.50	\$298.50	\$551.25	\$447.75	\$826.88	\$671.63
50-59	\$323.40	\$262.68	\$485.10	\$394.02	\$727.65	\$591.03	\$1,018.71	\$827.44
60+	\$468.93	\$380.89	\$703.40	\$571.33	\$1,055.09	\$856.99	\$1,582.64	\$1,285.49

▶ **\$1,000/\$2,000/\$5,000 Personal Responsibility Amount Yearly**

Age Tiers	Member			Member + 1			Family			Family of 5+		
18-29	\$240.00	\$224.00	\$191.36	\$360.00	\$336.00	\$287.04	\$540.00	\$504.00	\$430.56	\$810.00	\$756.00	\$645.84
30-39	\$300.00	\$280.00	\$239.20	\$450.00	\$420.00	\$358.80	\$675.00	\$630.00	\$538.20	\$1,012.50	\$945.00	\$807.30
40-49	\$375.00	\$350.00	\$299.00	\$562.50	\$525.00	\$448.50	\$843.75	\$787.50	\$672.75	\$1,265.63	\$1,181.25	\$1,009.13
50-59	\$495.00	\$462.00	\$394.68	\$742.50	\$693.00	\$592.02	\$1,113.75	\$1,039.50	\$888.03	\$1,559.25	\$1,455.30	\$1,243.24
60+	\$717.75	\$669.90	\$572.29	\$1,076.63	\$1,004.85	\$858.43	\$1,614.94	\$1,507.28	\$1,287.64	\$2,422.41	\$2,260.91	\$1,931.47

**Conditional Costs:**

\$25 charitable donation at time of membership registration.

\$50 additional Monthly Membership Gift (MMG) for Members who use tobacco, including electronic forms of tobacco.

This is NOT insurance.