



Medi-Share is founded on the belief that there is a better way to access healthcare and as a member, you are joining a community of believers that cares about each other's health. This community focuses on people and stewardship while inspiring one another to live healthier lifestyles for the glory of the Lord and for success in this Biblical model of sharing.

Program Overview

The Health Partnership program is a member-voted guideline designed to provide our members the support and resources they need to live the healthy lives God intended. For those with elevated risk factors like hypertension, high cholesterol, BMI/waist circumference and other localized health conditions, like sleep apnea, IBD and autoimmune disorders.

Medi-Share members voted in 2003 to allow applicants with increased health risks to participate in a Health Partnership program rather than be ineligible for Medi-Share membership. Research shows certain conditions can be reversed or prevented through therapeutic lifestyle changes, and by reversing and/or preventing certain diseases, people are able to live healthier and fuller lives. God calls us to steward our bodies well, so taking care of the temple that He created through our lifestyle choices brings honor and glory to Him. Ultimately, when the overall Medi-Share membership is healthier, Medi-Share becomes even more affordable for our members as a health care alternative.

About Health Partnership Enrollment

Enrollees of the Health Partnership program may graduate from the program and have the monthly \$99 Health Partnership fee removed by achieving set goals that are verified annually with lab work and verification forms.

Health Partnership Outcome Goals

RISK FACTOR	REQUIRED TO GRADUATE	OPTIMAL HEALTH
WEIGHT (BMI)	From 18.5 - 31.9	From 18.5 - 24.9
WAIST - MEN	Below 41"	Below 34"
WAIST - WOMEN	Below 38"	Below 30"
BLOOD PRESSURE	Below 130/80 mmHg	Below 115/75 mmHg
TOTAL CHOLESTEROL	Below 210	Below 150
HDL - MEN/WOMEN	≥50/≥59	60 or higher
LDL*	Below 130	Below 70
Triglycerides*	Below 150	Below 100
HbA1c	4.2 - 5.9	4.2-5.2
* Lipid panel/Blood Sugar should be fasting.		

Health Partnership Covenant

Upon graduation from the Health Partnership program, I will be required to re-verify my results annually for a period of three years. If any of the re-verification metrics are not in line, I understand that I will be re-enrolled in the Health Partnership program and the \$99 monthly fee will be added to my monthly share notice. Upon the subsequent graduation, the three year verification process will restart.

Health Coaches do not diagnose, prescribe for, or treat disease, illness, or injury, and that any and all medical issues should be discussed with my physician. I understand that I am not to participate in any activity that my physician says would not be safe for me, including but not limited to diet and exercise, and will disclose to my Coach any health concerns or limitations that could affect my health. I understand my coach may require me to get a medical clearance for exercise from my physician. I agree to apply proper guidelines for safety and technique in performing exercise, and to progress at a safe pace. I understand that there are risks while exercising, such as incurring physical injury to bone, muscle, ligament, or tendons and in very rare instances, life threatening problems such as heart attack or stroke. I understand that I am to stop exercising and consult with my physician and/or call 911 if I develop symptoms of lightheadedness, dizziness, difficulty breathing, chest/shoulder/neck/jaw pain or pain radiating to the back during or following an exercise session. I realize coaching calls are recorded for quality assurance.