

LIGHTHOUSE HEALTH Membership FAQ

What is Healthcare Cost Sharing?

Healthcare Cost Sharing is an arrangement whereby Members agree to share medical expenses through an act of voluntary giving. It is NOT insurance. It is not licensed or registered by any insurance board or department. It does not assess applicants' health risks, because the Community is not assuming financial liability for any other Member's risk. Unlike insurance, the focus of the Medical Cost Sharing membership is on how our Members help one another with their immediate needs, so they are never alone when it matters most.

Is the Healthcare Cost Sharing Approach new?

No, Healthcare Cost Sharing traces its origins back many years to the Amish and Mennonite communities, and began expanding in the 1980s with the advent of large, Christian-based health care sharing ministries and eventually into secular agorist communities of like-minded individuals.

The concept has since evolved to include fintech-enabled, ethically-aligned Healthcare Cost Sharing communities, but the purpose remains the same: for the Community to help relieve the burden of the individual in their time of need.

What kinds of expenses are eligible to be paid by Lighthouse Health?

Members have great freedom in how and when they use their Lighthouse Health coverage. Emergency and preventative medical, dental, vision, chiropractic, and mental health costs are eligible for coverage. This includes expenses from illnesses or injuries resulting in visits to licensed medical providers, emergency rooms, diagnostic testing facilities, and laboratory or hospital charges. Cosmetic procedures are generally not covered at this time. Please refer to the Member Guidelines for more details.

What happens if the amount of funding requests exceeds the amount of money in the Lighthouse Community Fund?

Due to the nature of cost-sharing pools, 100% payment cannot be guaranteed and it is possible that at a given moment the amount of member funding requests could surpass the amount of funds in the Lighthouse Community Fund. In these instances we would use a pro-rata funding method to evenly distribute the burden. For example, if the fund only contains enough to cover 90% of member requests, payment for each request would be adjusted to 90% and the members would be responsible for the remaining 10%. However, we are able to mitigate this risk significantly with active fund management, negotiating provider prices on members' behalf, and negotiating payment terms on members' behalf.

Does Lighthouse Health membership make me eligible for a Health Savings Account (HSA)?

Unfortunately, current laws and IRS rules require a High Deductible Health Plan purchased through traditional insurance. We would love to help change these rules so that everyone can enjoy the benefits of tax-advantaged HSA accounts! But at this time Lighthouse Health membership does not meet HSA eligibility requirements. While Lighthouse Health membership is fine for many people as a primary coverage, membership also pairs nicely with high deductible traditional insurance plans!

Who manages the Lighthouse Community Fund?

Lighthouse of Jackson LLC is the sole administrator of the Lighthouse Community Fund. Management terms and fees are reviewed and set by the Lighthouse Community Fund board of directors.

Are there any fees for membership?

There is a payment processing and platform fee of 9% which is deducted before funds are displayed in your account.