Health Cost Sharing Plans Compared: 2026

A patient guide from rootsMD Direct Care Family Medicine. Health cost sharing is not insurance.

www.rootsdpc.com
Verona, Wisconsin

IUA (Initial Unshareable Amount) is what you pay per illness or injury before the community shares the rest; it is like a deductible, but per event. **AHP** (Annual Household Portion) and **Personal Responsibility** are yearly amounts, like a deductible. **Monthly cost** is like a premium. Ranges run from the youngest member with the highest IUA to the oldest with the lowest. In the medical services section, shared always means after your IUA, AHP or Personal Responsibility unless noted, and only for conditions that are not pre-existing. **Shaded columns on the right** are plans that require members to be practicing Christians; the four plans on the left have no religious requirement.

	Sedera	Zion HealthShare	Knew Health	CrowdHealth	Samaritan Ministries Christian faith required	Medi-Share Christian faith required	Christian Healthcare Ministries (CHM) Christian faith required
OVERVIEW							
Website	www.sedera.com	www.zionhealthshare.org	www.knewhealth.com	www.joincrowdhealth.com	www.samaritanministries.org	www.medishare.com	www.chministries.org
Type and faith requirement	Non-religious sharing community. Members agree to ethical principles.	Non-religious nonprofit. No statement of faith.	Non-religious sharing community. Members agree to lifestyle principles.	Crowdfunding run by a private company. Not a sharing ministry. No faith requirement.	Christian ministry. Members send shares directly to each other.	Christian ministry (Christian Care Ministry). Works most like insurance.	Christian ministry, founded 1981. Flat price per unit, any age.
Monthly cost: one person	About $88 to $413 (quote)	Direct: $114 to $320 Essential: $84 to $298	About $178 to $379 (quote)	Up to $200 (under 55) or $340 (55 and over)	Classic: $210 to $400 Basic: $125 to $235	About $115 to $470 (quote)	Gold $299 Silver $169 Bronze $115
Monthly cost: couple	About $187 to $795	Direct: $205 to $617 Essential: $165 to $541	About $280 to $700	About $120 to $400	Classic: $650 to $760 Basic: $260 to $430	About $219 to $720	Gold $598 Silver $338 Bronze $230
Monthly cost: family	About $325 to $1,175	Direct: $334 to $899 Essential: $276 to $777	About $400 to $950	Up to $660 (family of four or more)	Classic: $735 to $785 (3 to 7 people) Basic: $375 to $525	About $390 to $850 (family of four)	Gold $897 Silver $507 Bronze $345
Other fees	Tobacco or vape household: +$75 a month	Tobacco or cannabis household: +$50 a month	Tobacco household: +$112.50 a month	Fixed fee of $60 to $65 per member is included in the totals above	$200 start-up fee reported. Save to Share: $133 to $399 a year plus $15	$100 application fee. Coaching program fee for some applicants	CHM Plus: +$42 per unit a month (needed above $125,000)
What you pay before sharing starts	IUA of $500, $1,000, $1,500, $2,500 or $5,000 per need. No more than 3 a year.	IUA of $1,250, $2,500 or $5,000 per need. No more than 3 in 12 months.	IUA of $1,000, $2,500 or $5,000 per need. No more than 3 a year.	$500 per health event. No yearly limit on the number of events.	Classic: $1,000 per need. Basic: $2,000 per need, then 10% (up to $2,500 more). No yearly cap on number of needs.	AHP of $3,000 to $12,000 per household per year. Plus $50 per visit, $500 per ER visit, $25 telehealth, even after the AHP is met.	Personal Responsibility of $1,250 (Gold), $3,000 (Silver) or $6,000 (Bronze) per unit, once a year.
Most the plan will share	No annual or lifetime limit. Limited by funds available.	No annual or lifetime limit on new conditions.	No annual or lifetime limit on new conditions. Hospital room charges up to $250,000 per need. No single need may use more than 10% of yearly funds.	No stated limit per event. Depends on members choosing to fund.	$500,000 per need (Classic), $497,500 (Basic). More only with Save to Share. Needs can be prorated.	No annual or lifetime limit. $50,000 in first month; $125,000 per pregnancy.	$125,000 per illness. With CHM Plus: unlimited (Gold) or $1 million (Silver, Bronze).
Pre-existing conditions	36-month look-back. Year 1: none. Year 2: $25,000. Year 3: $50,000. Year 4: full. Some programs list $15,000 and $30,000.	24-month look-back. Year 1: none. Years 2 to 4: $25,000, $50,000, $125,000 per request. Then $125,000 a year. Controlled blood pressure, cholesterol and diabetes exempt.	24-month look-back. Year 1: none. Year 2: $25,000. Year 3: $50,000. Year 4 on: $125,000. Controlled blood pressure, cholesterol and diabetes exempt.	Years 1 and 2: none. From year 3: $25,000 a year. High blood pressure and cholesterol exempt.	Shared only after 12 months free of symptoms, treatment and medication. 5 years for cancer, heart and genetic conditions. Type 1 diabetes never.	36-month look-back. Nothing for 36 months. Then $100,000 a year; $500,000 a year after 60 months. Medication for these never shared.	Not pre-existing after 1 year symptom-free (5 for cancer). Gold: $15,000 in year 1, $50,000 total by year 3. Silver and Bronze: not shared.
Provider choice	Any licensed provider. No network.	Any licensed provider. No network.	Any licensed provider. No network.	Any licensed provider. Bills above 120% of fair price can be declined.	Any provider. No network. Shares arrive in about 2 to 3 months.	First Health PPO network. Outside it, sharing is reduced and you owe 20% more at non-network facilities.	Any medical provider. Alternative and functional medicine not shared.

	Sedera	Zion HealthShare	Knew Health	CrowdHealth	Samaritan Ministries Christian faith required	Medi-Share Christian faith required	Christian Healthcare Ministries (CHM) Christian faith required
DPC compatibility	Strong. Lower-priced programs for DPC patients. Little overlap with DPC.	Strong. Essential membership is offered through DPC practices and leaves out preventive sharing.	Good. 10% discount with DPC. Its own preventive sharing overlaps.	Neutral. No discount. Prepaid DPC fees not funded.	Fair. No overlap. DPC fee shareable up to $100 a month during a shared need.	Limited. DPC credit (up to $1,800 a year toward AHP) only on the $12,000 AHP. Telehealth and annual physical overlap.	Neutral. No DPC discount or credit found. Little overlap.
Financial reliability and transparency	Nonprofit fund files Form 990. No public audit found. Ask for one.	Strong. Financial statements posted online. 4-star Charity Navigator rating. About 90% of contributions go to bills.	Limited public information. Delaware corporation. Ask for financial statements.	Mixed. Monthly funding reports (about 99% of eligible bills). No public financial statements. Founded 2021.	Strong. Audit on request; Form 990 public. 88.4% went member to member in fiscal 2025.	Moderate. Audited statements said to be available on request.	Strong. Annual independent audit on request. Administrative costs under 10%.
Commonly not shared	Routine and preventive care. Long-term medicines after 120 days. Mental health above $750 a year.	Mental health care. Diabetic and allergy medication. Contraception. Sleep apnea.	Mental health care. Diabetes medication. Medicines you already take.	Counseling and psychiatric care. Addiction treatment. High-cost and brand-name drugs.	Routine and preventive care. Counseling. Medication beyond 120 days.	Counseling. Most screening. Prescriptions beyond 6 months.	Routine care. Counseling and chiropractic. Medication beyond 90 days.
Who can join	Ages 18 to 64. Not offered in every state.	Under 65. Not available in Washington State.	Under 65. Not available in 9 states (Wisconsin is available).	Under 65. No tobacco users. Weight limits: 260 lb men, 220 lb women.	Practicing Christians. Church 3 weeks of 4. No tobacco. Church leader confirms yearly.	Practicing Christians. No tobacco or vaping. Under 65 (separate 65+ program).	Practicing Christians. No tobacco or nicotine. No age limit.
MEDICAL SERVICES COVERED							
Annual physical	Not shared. Use your DPC practice.	Up to $175 a year (Direct; optional add-on for Essential).	One visit a year, up to $250. No IUA.	One wellness event a year, up to $300. No $500 commitment.	Not shared.	Shared, with basic labs. $50 provider fee. Not on the DPC option.	Only if the year's doctor-ordered preventive bills together reach your Qualifying Amount.
Well child visits	Not shared, except one newborn visit under maternity.	Up to $175 per visit, 2 weeks to 36 months. 6-month wait. Direct or add-on.	Up to $250 per visit. 6 visits in year one, fewer after.	Birth to 6 months, and 6 months to 3 years, each count as one $500 event. Then annual wellness.	Not shared.	Shared until age 6. Vaccines not included.	Not specifically addressed. Routine care must reach the Qualifying Amount.
Immunizations	Childhood vaccines to age 18 and a yearly flu shot. Other adult vaccines not shared.	Youth vaccines at CDC list price. 6-month wait. Flu shots and adult vaccines not shared.	Children: up to 110% of CDC price. Adults: capped per dose (flu $50).	Only through community or discount vaccine programs.	Not shared.	Not shared.	Not shared, except maternity-related.
Screening mammogram	Up to $600, age 40 and over. No IUA after 6 months.	Up to $600 a year from age 40. 6-month wait.	Up to $500 from age 40.	Not addressed. May count as the $300 wellness event.	Not shared unless ordered for symptoms.	Not shared.	Eligible when doctor-ordered and bills reach the Qualifying Amount.
Screening colonoscopy	Up to $2,500, age 45 and over. No IUA after 6 months.	Up to $5,000 every 10 years from age 45. 6-month wait.	Up to $2,500 from age 45.	Funded as its own health event. $500 commitment.	Not shared unless ordered for symptoms or it finds a shareable condition.	Not shared.	Eligible when doctor-ordered and bills reach the Qualifying Amount.
Doctor's office visits (illness or injury)	Shared after the IUA.	Shared after the IUA as part of an eligible need.	Shared after the IUA.	Funded after $500 per event.	Shared as part of a need above the IUA.	Shared after the AHP. $50 fee each visit.	Shared as part of an incident that reaches the Qualifying Amount.
Hospitalization	Shared after the IUA. No stated limit.	Shared after the IUA. No stated limit.	Shared after the IUA. Semi-private room up to $250,000 per need.	Funded as a health event. Contact a Care Advocate before planned care.	Shared, up to the per-need maximum.	Shared after the AHP. $50 fee. Pre-notification required.	Shared after Personal Responsibility. $125,000 per illness without CHM Plus.
Emergency care	Shared after the IUA. Notify within 48 hours.	Shared after the IUA. Repeat ER visits for the same condition add $500.	Shared after the IUA. Repeat ER visits for the same condition add $500.	Funded after $500. Bill negotiation help.	Shared.	Shared after the AHP. $500 fee. Notify within 72 hours.	Shared as part of an incident.
Ambulance, land or air	Shared when medically necessary.	Shared to the closest appropriate facility.	Up to $10,000 per need.	Not addressed. International air ambulance not funded.	Shared in emergencies or for prescribed transfers.	Shared when medically necessary.	Only to preserve life, limb or eyesight, to the nearest facility.
Prescriptions	120 days after a new diagnosis. Cancer drugs exempt. Specialty drugs up to $250,000 per need.	Up to 12 months when tied to an eligible need. Diabetes, allergy, contraceptive and mental health drugs excluded.	12 months per need, up to $10,000.	Generics through its discount tool. Maintenance drugs limited to a 12-month supply. No high-cost drugs.	120-day supply per need. Cancer and transplant drugs exempt.	6 months per new condition. Never for pre-existing conditions.	First 90-day supply for a new diagnosis.

	Sedera	Zion HealthShare	Knew Health	CrowdHealth	Samaritan Ministries Christian faith required	Medi-Share Christian faith required	Christian Healthcare Ministries (CHM) Christian faith required
Cancer care	New diagnoses shared after the IUA. Tobacco users over 50 limited to $25,000.	Shared after the IUA. Tobacco-related cancer limited to $50,000.	New diagnoses shared after the IUA. Tobacco users over 50 limited to $25,000.	Not specifically addressed. New events funded after $500. High-cost drugs excluded.	Shared. Cancer drugs exempt from the 120-day limit.	Shared after the AHP. Pre-notification and care management required.	Chemotherapy and radiation shared. $125,000 per illness without CHM Plus.
Mental health and therapy	Counseling up to $750 a year.	Not shared.	Not shared. $200 yearly self-care credit. Postpartum depression up to $3,500.	Not funded, except virtual talk therapy in its app.	Not shared, except involuntary inpatient care up to $50,000.	Evaluation and medication for 6 months per new condition. Counseling not shared.	Not shared, except ER or inpatient stabilization.
Alcohol and drug treatment	Up to $3,000 per need.	Up to $3,000 per member.	Up to $3,000 per member, lifetime.	Not funded.	Not addressed. Related injuries not shared.	Not shared.	Not shared.
Weight reduction treatment	Up to $3,000 per member when prescribed.	Up to $3,000 per member when prescribed and approved.	Up to $3,000 per need when prescribed. No weight-loss drugs.	Not funded.	Not shared.	Not shared.	Not confirmed in the 2026 guidelines; not shared under earlier ones.
Maternity	Maternity IUA of twice your IUA, up to $5,000. Elective C-section $5,000 to $7,500 by program. Due date 9 to 12 months after joining, by program.	Maternity IUA of $2,500 or $5,000. Conception after 6 months (waived for employer groups). Midwife care up to $7,000.	One IUA ($5,000 reported for 2026). Due date after first 12 months. Home birth, midwife and birth center shared.	$3,000 per pregnancy. Due date 300 days after joining. Newborn added within 30 days.	Classic: you pay 30% up to $3,000. Basic: up to $13,500. IUA waived for home birth and VBAC. Two-person membership 300 days before due date. Doula up to $500.	Married members with AHP of $3,000 or more. Up to $125,000 per pregnancy. Membership from conception. Licensed midwives accepted.	You pay $2,500 (Gold), $5,000 (Silver) or $9,000 (Bronze), less $500 if you call within 16 weeks. Up to $125,000 per pregnancy without CHM Plus. Home births and midwives shared. Due date 300 days after joining.
Adoption	Child added from adoption date. Adoption costs not addressed.	Up to $2,000 toward birth costs after 1 year of membership.	Not shared. Adopted child added as a member.	Not funded. Child added within 30 days.	Birth mother's and child's medical bills shared like maternity.	$1,100 to $4,100 per adoption, by AHP. Up to two. 24 months of membership first.	Birth costs for babies adopted at birth not shared.
International treatment	Shared. Bills in English and US dollars.	Emergency and sudden-onset care only.	Emergency care only.	Funded at fair US prices. No medical evacuation.	Shared worldwide. Bills in English and US dollars.	Emergencies or while living abroad only.	Shared when traveling or serving abroad. No medical tourism.
Home health care	In-home nursing up to $200 a day for 90 days.	Up to 30 days.	30 days and $5,000 per need.	Not addressed. Custodial care not funded.	Visiting nurse up to 45 days after hospital release.	Up to 60 days. Must be homebound.	Up to 45 visits.
Hospice	Up to $200 a day for 90 days.	90-day periods with certification.	60 days or $10,000.	Not funded beyond 30 days.	90 days, renewable.	Home: 60 days. Inpatient: 30 days.	Not addressed in the guidelines reviewed.
Skilled nursing and long-term care	60 days or $25,000 per need.	Shared for recovery when prescribed. No stated limit.	60 days or $20,000 per need.	Not funded.	Long-term and nursing home care not shared. Inpatient rehab up to 45 days.	Skilled nursing 30 days. Long-term care not shared.	Skilled nursing up to 20 days. Long-term care not shared.
Sleep apnea	Equipment up to $2,500 for a new diagnosis.	Not shared.	Not shared.	Treated as pre-existing if already diagnosed.	Not shared in the first 12 months.	Sleep studies shared when ordered.	Shared with referral and sleep study. Devices up to $8,000.
Durable medical equipment	75% of cost, up to $25,000 per need.	Shared when prescribed, for 120 days per need. Rental preferred.	70% of cost, up to $25,000 per need.	Shared when prescribed. Disposables limited to 120 days.	Up to $5,000 with a prescription.	Rental up to 6 months, or one purchase.	Life-sustaining equipment only, up to $8,000 per illness.
Chiropractor	Adults, for an injury, up to $3,000 a year.	Within $7,500 or 35 treatments per need, combined with other therapy.	Within the $7,500 recovery allowance per need.	Injuries only. No maintenance care.	Shared. Counts toward 20 sessions per need.	Only when a physician recommends it in place of surgery. 20 visits.	Not shared.
Physical and occupational therapy	Each up to $3,000 a year.	$7,500 or 35 sessions per need.	Within the $7,500 recovery allowance per need.	Only when doctor-ordered for a health event.	20 outpatient sessions per need.	20 visits combined.	45 sessions per injury or illness.
Speech therapy	Up to $3,000 a year.	35 visits, up to $3,000, after illness or injury.	Within the $7,500 recovery allowance per need.	Not funded.	Within 20 sessions per need, after illness or accident.	10 visits after stroke, surgery or trauma.	Only after a catastrophic illness such as stroke.

Notes. Sedera, Medi-Share and Knew Health price by personal quote; their ranges, and the CrowdHealth couple figure, are estimates from an independent tracker (WhichHealthShare). Other figures come from each plan's own 2026 rate sheet or guidelines, read in November 2026. Knew Health terms are from its November 2024 guidelines. Sedera service limits are from its October 2023 SELECT+ guidelines and August 2025 PRIME+ summary, and may differ by program. CHM service terms are from its January 2026 guidelines. Not addressed means the guidelines reviewed do not mention the service. Zion Essential is offered through a DPC practice or employer. CHM counts one adult as one unit, a couple as two and a family of any size as three. Plans change their rules often: read the current guidelines before joining. This sheet is general information, not insurance, legal or tax advice.