Exhibit A - SEDERA SELECT+ Pricing

Employer/Employee Solution

 \$500 IUA*

 <30</th>
 30+

 EO
 \$210
 \$294

 ES
 \$489
 \$628

 EC
 \$426
 \$567

 EF
 \$711
 \$897

	\$1,000 IUA*	
	<30	30+
EO	\$169	\$208
ES	\$384	\$433
EC	\$337	\$395
EF	\$557	\$620

	\$1,500 IUA*	
	<30	30+
EO	\$152	\$185
ES	\$340	\$381
EC	\$300	\$350
EF	\$494	\$546

	\$2,500 IUA*	
	<30	30+
EO	\$137	\$169
ES	\$299	\$346
EC	\$267	\$318
EF	\$434	\$496

	\$5,000 IUA*	
	<30	30+
EO	\$126	\$158
ES	\$272	\$320
EC	\$244	\$295
EF	\$394	\$459

Note: The above per month pricing includes both the Member Share Amount and Member Services Fees of \$65 for EO, \$110 for ES and EC, and \$160 for EF.

EO - Employee Only

- ES Employee+Spouse
- **EC** Employee+Child(ren)
- **EF** Employee+Family

Buy-Up Option:	
LibertyRx Prescription	
MO	\$27.50
MS	\$27.50
MC	\$27.50
MF	\$27.50

* IUA stands for Initial Unshareable Amount which is the amount a member pays on a per Need or Incident basis before sharing through the community begins. Sedera Households with one or more tobacco users contribute an additional \$75.00 per month. If the member who is a tobacco user is over the age of 50, then Medical Needs for that Member are limited to \$25,000 for each of the following four disease categories: Cancer, Heart conditions, COPD and Stroke. See Section 8.A. of the Sedera SELECT Guidelines for more information. The prices above are for Health Care Sharing and its related Member Services and do not include any costs related to a MEC type plan or funding for an Health Savings Account (HSA), Health Reimbursement Account (HRA), or Flexible Spending Account (FSA).

COMPANY NAME:	
By:	
Name:	
Title:	
Date:	

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