



AMBASSADOR CORE
Caring through Sharing

"Carry each other's burdens, and in this way you will fulfill the law of Christ." **Galatians 6:2**

What is a Health Care Sharing Ministry?

Health Care Sharing Ministries (HCSMs) have been around for centuries. This practice is founded on the New Testament guidance to share in each other's burdens. A HCSM unites people who share common Religious and Ethical beliefs. This faith community then voluntarily shares a monthly contribution to share in each other's medical needs.

A health care sharing program is not insurance. It is a membership-based, nonprofit ministry. Neither membership in a Health Care Sharing Ministry nor the Member Guidelines constitute a promise to pay, or an obligation to share.

Although HCSMs are not health insurance and do not qualify as minimum essential coverage under the ACA, the law grants HCSM members an exemption from the ACA's minimum essential coverage requirement.

1.5 million Americans have chosen to join a Health Care Sharing Ministry.

Who is Joppa Health Share?

Our Mission is to guide our faith community to share what they have to bless those in need.

Members of Joppa Health Share make fixed monthly contributions to the health sharing community. These contributions go toward eligible medical expenses among all Members.

The contribution amount depends on the Sharing Program elected. Our Ministry's Sharing Programs provide a flexible and affordable alternative to health insurance. Members can enroll in a Sharing Program that fits their needs and their budget at any time.

We are a ministry of the National Hispanic Christian Leadership Conference (NHCLC). As the largest Latino Christian organization in America, the NHCLC leads millions of Hispanic Born-Again Christians via their 40,118 Evangelical congregations.

"All the believers were united in heart and mind. And they felt that what they owned was not their own, so they shared everything they had. The apostles testified powerfully to the resurrection of the Lord Jesus, and God's great blessing was upon them all." Acts 4:32-33

**Joppa Health Share is not available in all States.
For the most up-to-date State availability list, go to:
<https://www.joppahealth.org/state-specific-notice/>**



General Guidelines*	
PPO Network	First Health®
Member Responsibility Amount (MRA)¹	Per Inpatient Hospitalization/Surgery Outpatient Surgery: \$2,500 \$5,000 \$10,000 Outpatient MRA per Member per Program Year: \$2,500
In/Out-of-Network Co-Sharing Percentages	Unless stated otherwise: After the Member's MRA is met, eligible expenses are shared subject to In/Out-of-Network Co-Sharing Percentages. In-Network: Joppa Health Share shares 80% Member Shares 20% Out-of-Network: Joppa Health Shares 70% Member Shares 30%,
Maximum Reasonable Allowed Charges	Out-of-Network sharing reimbursement is based on the lesser of the Out-of-Network provider actual billed amount or Maximum Reasonable Allowed Charges for Eligible Services provided.
Maximum Limit Per Incident	Unless stated otherwise: \$175,000
Lifetime Sharing Maximum	\$525,000
Inpatient Hospitalization / Surgery Outpatient Surgery Emergency Services	
Member Responsibility Amount (MRA) per Inpatient Hospitalization/Surgery and Outpatient Surgery per Member¹	Options: \$2,500 \$5,000 \$10,000 ¹
Inpatient Hospitalization/Surgery (includes required Pre-Admission testing)	After the MRA is met, subject to In/Out of Network Co Sharing Percentages
Outpatient Surgery (includes required Pre-Admission Testing)	After the MRA is met, subject to In/Out of Network Co Sharing Percentages
Inpatient/Outpatient Surgery Limit	2 Surgeries per Program Year per Member
Emergency Room	In/Out-of-Network: \$1,000 Emergency Room Fee per Visit. After the Emergency Room Fee is met, and subject to In/Out-of-Network Co-Sharing Percentages. Maximum Sharing Limit per Visit: \$10,000 Limit: 2 Visits per Program Year per Member
Ambulance	In/Out-of-Network: \$500 Ambulance Transport Fee. After the Ambulance Transport Fee is met, and subject to In/Out-of-Network Co-Sharing Percentages. Maximum Sharing Limit per Medical Emergency: \$5,000. Limit: 2 Emergency Ambulance Transports per Program Year
Eligible Outpatient Care following an Inpatient Hospitalization/Surgery, Outpatient Surgery and Emergency Services	
Outpatient MRA per Member per Program Year	\$2,500
Physician Office Follow Up Visits	After the Outpatient MRA is met, subject to In/Out-of-Network Co-Sharing Percentages Limit: 3 Visits per Incident
Diagnostic/X-Ray/Labs Follow up	After MRA is met, subject to In/Out-of-Network Co-Sharing Percentages Limit: \$5,000 per Incident
Infusion Therapy Follow Up Care	After the MRA is met, the Member is responsible for a \$50 Visit Fee, remaining medical expenses are subject to In/Out-of-Network Co-Sharing Percentages Limit per Program Year of \$15,000
Outpatient Occupational, Physical & Speech Therapy	After the Member's MRA is met, the Member is responsible for a \$50 Visit Fee and remaining medical expenses are subject to In/Out-of-Network Co-Sharing Percentages Limit: 10 Visits Combined per Incident.

* Pre-Existing Condition Limitations, Waiting Periods and Program Guidelines and Limitations apply. Review Member Program Guidelines for full Program details.

¹Members elect Inpatient Hospitalization MRA Amount (\$2,500, \$5,000, or \$10,000) upon enrolling in their Program

Our Members have access to a full suite of discounts, services and quality care designed to improve their well-being and make their health care dollars go further!

Additional Member Services¹

**Virtual Primary Care
(Lyric powered by MyTelemedicine)**

Virtual Primary Care from head to toe

- Virtual Primary Care: Select a Primary Care Physician to manage routine and on-going health conditions
- Virtual Urgent Care: 24/7/365 on-demand access to licensed physicians for common illnesses
- Virtual Behavioral Health/Therapy & Counseling: No cost with a licensed counselor. And up to 3 free visits to psychologists or psychiatrists, for personal issues, including stress, anxiety, depression, plus many other mental/behavioral health issues
- Care Navigation: get answers to everyday medical questions
- Annual Wellness Test/Labs: No cost annual wellness exam and lab panel, for primary and spouse. Discount on additional labs available through partnership with Quest Diagnostics and LabCorp.
- Health Risk Assessment: Identify and treat any known or unknown health risks

**Virtual Primary Care
(Lyric powered by MyTelemedicine)**

Select and keep your own physician

- Annual wellness visits in minutes
- Lab work (Quest & LabCorp)
- Urgent care visits
- Ongoing chronic care treatment
- Routine follow-up appointments
- Specialty referral
- Skip the germ-filled waiting rooms
- Avoid costly in-person visits
- Care navigation
- Behavioral health

Additional Member Services¹

Virtual Primary Care	✓
Joppa Rx Membership	✓
Dental	✓
Vision	✓
Emotional Wellness	✓
Diabetic Supplies	✓
MRI and Imaging	✓
Lab	✓
Hearing	✓
Fitness/Nutrition	✓
Gym	✓
24/7 Pet	✓

¹Lyric powered by MyTelemedicine is not Owned or Operated by Joppa Health and are not sharing services. This service is not insurance or intended to replace health insurance.

Additional Member Services are not owned or operated by Joppa Health Share and are not sharing services.

WellCard Savings Services: This is Not Insurance. It is a discount medical program. It does not replace COBRA or any other medical insurance program nor is it a Medicare Part D prescription drug plan. WellCard Savings does not qualify for essential coverage under the Affordable Care Act (ACA-Obamacare). Cardholders are responsible for paying the discounted cost at the time of service from participating providers. WellCard Savings has no membership fee nor is participation in any organization or purchase of any good or service required to obtain or use WellCard Savings. WellCard Savings will not share or sell your personal information. The discount medical plan organization is Access One Consumer Health, Inc. (not affiliated with AccessOne Medcard), 84 Villa Road, Greenville, SC, 29615, www.accessonedmpo.com. This program is not available to residents of Montana, but may be used by non-residents at participating Montana providers. Other state residents: visit www.WellCardSavings.com for full disclosure statement.

Are there Waiting Periods that apply before Members' Needs Requests are eligible for sharing?

Yes. Unless stated otherwise there is a 90-Day Waiting Period from each Member's Effective Date for any medical expenses other than for Accidents, Injuries, and Acute Illnesses.

The Pre-Existing Condition Limitation and the 24-Month, 36-Month or 60-Month Waiting Period from the Member's Effective Date apply. Pre-Existing Condition means any illness, or injury for which a Member received medical treatment, advice, care, or services including any diagnostic measures, took prescribed drugs or showed signs and symptoms, whether treated or not, within 24 months (or 60 Months for Cancer) before each Member's Effective Date.

There is a 10-Month Waiting Period from the Mother's Effective Date who enrolled the Newborn within 30 days of birth, for Newborn Delivery Inpatient Hospitalization for or related to any congenital conditions. Expenses for the Routine Newborn Inpatient Hospital expenses (Well Newborn) including expenses for diagnostic testing incurred while confined primarily for well-baby care, are not eligible for sharing.

There is a 12-Month Waiting Period from each Member's Effective Date for Organ Transplant services.

Cancer: There is a 12-Month Waiting Period for Newly Diagnosed Cancer sharing for Members who have never been diagnosed or treated for Cancer. For Members who have been diagnosed with or treated for Cancer within 60-Months of the Member effective date, the Member must be Cancer free for 60-Months after the Member Effective date for newly diagnosed Cancer to be eligible for sharing. A Metastasized or Recurring Cancer is never eligible for sharing. For members who were previously diagnosed with or treated for Cancer, but Cancer free during the 60-Months prior to the Member Effective Date, the 12-Month Waiting Period for Newly Diagnosed Cancer Sharing applies, and supporting documentation that the Member was Cancer free during the 60 Months prior to the Member Effective Date may be required. A Metastasized or Recurring Cancer is never eligible for sharing.

Needs Requests submitted for services received prior to completion of the Waiting Periods are not eligible for sharing.

What is a MRA?

The MRA or Member Responsibility Amount is the amount that each Member is responsible to pay for eligible medical expenses before the Program and the Membership begins to share in the Member's eligible medical expenses.

Inpatient Hospitalization/Surgery, and Outpatient Surgery MRA Options selected upon Member's enrollment:
\$2,500 | \$5,000 | \$10,000 per Incident.

Outpatient Follow Up Care after an eligible Inpatient Hospitalization/Surgery, Outpatient Surgery or Emergency Room Services MRA: \$2,500 per Program Year per Member.

Members may also be responsible for Visit Fees in lieu of an MRA or in addition to a MRA.

How are Member's Needs Requests Shared?

Once the Member's MRA is met, Joppa Health Share will share in eligible medical expenses subject to the Co-Sharing In/Out of Network Sharing Percentages.

In-Network Needs Request	Out-of-Network Needs Request
Joppa Health Share Shares 80% Member Shares 20%	Joppa Health Share Shares 70% Member Shares 30%

Are Annual Wellness Exam and Preventive Services eligible for sharing?

No. However, Members may utilize the Virtual Primary Care and full suite of discounts available through the Additional Member Services offered by our valued Partners.

Are there medical conditions or services that are not eligible for sharing?

Yes. Members should review the Ambassador Core Member Guidelines for full list of Medical Conditions and Services not eligible for sharing.

Are Members required to use a specific list of Providers for health care?

Joppa Health Share Members have access to the First Health® Network. Providers participating in the Network have negotiated discounts that can reduce the Member's medical costs and may result in significant health care savings. Using an Out-of-Network Provider or Facility is still the Member's choice. The Out-of-Network services can result in higher Member Out-of-Pocket responsibility.

Is the Ambassador Core Program Insurance? Joppa Health Share is a Health Care Sharing Ministry.

The Ambassador Core Program is not insurance and Joppa Health Share is not an insurance company. Members of Joppa Health Share make fixed monthly contributions to the health sharing community according to the sharing level elected. Eligible medical bills are shared with the funds of all Members who faithfully share.

Neither Joppa Health Share nor Members of Joppa Health Share (a.) guarantees payment of a Member's medical bill, or (b.) assumes liability for the payment of a Member's medical bill.

Members of a Health Care Sharing Ministry under 26 USC § 5000A(d)(2)(B)(ii), are exempt from the ACA individual mandate.

Joppa Health Share is committed to assisting our Members by bringing together a robust bundle of Additional Member Services, by partnering with the leaders in Telemedicine and Discount Services to help members reduce their medical expenses and responsibility.

Preferred Provider Network

Joppa Health Share Members have access to one to the Nation's largest PPO Networks.

First Health® Network has negotiated discounted rates with these healthcare providers and facilities.

Members can access these discounted rates by choosing to use the In Network Providers.

First Health is the brand name used for products and services provided by one or more of the Aetna group of companies, including First Health Group Inc.

Virtual Primary Care

Joppa Health Share Members have access to Virtual Primary Care, made available by lyric powered by MyTelemedicine.

Telemedicine is a 24/7/365 doctor's visit over the phone or via web to consult, diagnose and if needed prescribe for common and acute illness. Most commonly treated include cold & flu, allergies, sinus problems, bronchitis, ear infections, urinary tract infections, pink eye, and many other non-emergency situations.

MyTelemedicine, Inc dba Lyric Health. All Rights reserved. Lyric Health does not guarantee that a prescription will be written. Lyric Health does not prescribe DEA controlled substances, lifestyle drugs and certain other drugs which may be harmful because of their potential for abuse. Lyric Health physicians reserve the right to deny care for potential misuse of services. Lyric Health operates subject to state regulations.

Joppa Rx Prescription Membership

Joppa Health Share Members have access to the Joppa Rx Prescription Membership

Through Joppa Rx's relationship and buying power with America's Pharmacy Source, over 600 of the most prescribed generic medications are available at no cost to members through this program. Medications are sourced in the United States and are all approved by the FDA.

THESE PLANS ARE NOT INSURANCE and is not intended to replace health insurance. THESE PLANS are not a Qualified Health Plan under the Affordable Care Act. THIS IS NOT A MEDICARE PRESCRIPTION DRUG PLAN These services are not owned or operated by Joppa Health Share, and are not insurance or intended to replace health insurance.

**The discount services are not owned or operated by Joppa Health Share, and are not insurance or intended to replace health insurance, nor are they an eligible needs request.

VISION CARE

Joppa Health Share Members have access to Lensabl+, a leading online vision services platform, enabling Members convenient access to vision care any time, anywhere.

Lensabl+ provides access to frames, lenses, contacts and eye exams at a fraction of the out-of-pocket costs. Members can see ANY eye doctor, rather than being limited to a network (or take the Lensabl online vision test)

WellCard Savings

Joppa Health Share Members have access to WellCard Savings, such as: Dental Visit Discounts, Lab Visit Discounts, RX and OTC Drugs, Diabetic Care Services and Supplies Vitaminst & daily Living Products and MORE

*This is Not Insurance. It is a discount medical program. It does not replace COBRA or any other medical insurance program nor is it a Medicare Part D prescription drug plan. WellCard Savings does not qualify for essential coverage under the Affordable Care Act (ACA- ObamaCare). Cardholders are responsible for paying the discounted cost at the time of service from participating providers.

WellCard Savings has no membership fee nor is participation in any organization or purchase of any good or service required to obtain or use WellCard Savings. WellCard Savings will not share or sell your personal information. The discount medical plan organization is Access One Consumer Health, Inc. (not affiliated with AccessOne Medcard), 84 Villa Road, Greenville, SC, 29615, www.accessonedmpo.com. This program is not available to residents of Montana, but may be used by non-residents at participating Montana providers. Other state residents: visit www.WellCardSavings.com for full disclosure statement.

Joppa Health Share, a 501(c)(3), is not an insurance company but a religious health care sharing ministry. *These services are not owned or operated by Joppa Health Share, and are not insurance or intended to replace health insurance. **The discount services are not owned or operated by Joppa Health Share, and are not insurance or intended to replace health insurance.

Joppa Health Share exists to bring Christians together to share each other's burdens and to share in God's blessings. For centuries, Christians all over the world have shared their lives, resources, and blessings as first outlined in the book of Acts.

"All the believers were united in heart and mind. And they felt that what they owned was not their own, so they shared everything they had. The apostles testified powerfully to the resurrection of the Lord Jesus, and God's great blessing was upon them all." —Acts 4:32–33

1. We believe it is our right to make our own decisions regarding healthcare, in consultation with physicians, family and/or other valued advisors, free from government dictates, restraints and oversight.
2. We believe that the Bible is God's Word to teach, correct, and train us to live.— 2 Timothy 3:16-17.
3. We believe our actions must be in accordance with biblical teachings.
4. We believe it is our spiritual duty to God and our ethical duty to others to maintain a healthy lifestyle and avoid foods, behaviors or habits that produce sickness or disease to ourselves or others. —1 Corinthians 6:19-20
5. We believe it is our biblical and ethical obligation to assist others with medical needs according to our available resources and opportunity. —Galatians 6:2

Disclaimers and Legal Notices

JOPPA HEALTH SHARE IS NOT AN INSURANCE COMPANY BUT A RELIGIOUS HEALTH CARE SHARING MINISTRY (HCSM) THAT FACILITATES THE SHARING OF MEDICAL REQUESTS AMONGST MEMBERS. Under 26 USC § 5000A(d)(2)(B)(ii), Joppa Health Share members are exempt from the ACA's individual mandate. Joppa Health Share does not assume any legal risk or obligation for payment of member medical requests. Neither Joppa Health Share, nor its members guarantee or promise that a medical needs request or medical expenses will be share or paid by the membership Please check: <https://www.joppahealth.org/state-specific-notices/> for the full, complete and most up to date state legal notices.

GENERAL NOTICE FOR THE FOLLOWING STATES: Alabama Code Title 22-6A-2, Alaska Statute 21.03.021(k), Arizona Statute 20-122, Arkansas Code 23-60-104.2, Florida Statute 624.1265, Georgia Statute 33-1-20, Idaho Statute 41-121, Illinois Statute 215-5/4-Class 1-b, Indiana Code 27-1-2.1, Louisiana Revised Statute Title 22-318,319, Maine Revised Statute Title 24-A, §704, sub-§3, Michigan Legislature Section 550.1867, Mississippi Code Title 83-77-1, Nebraska Revised Statute Chapter 44-311, New Hampshire Section 126-V:1, North Carolina Statute 58-49-12, South Dakota Statute Title 58-1-3.3, Texas Code Title 8, K, 1681.001, Virginia Code 38.2-6300-6301, Washington Revised Code 48.43.0009, Wyoming Statutes Title 26.1.104(a)(v)(C):

IMPORTANT NOTICE: This organization facilitating the sharing of medical expenses is not an insurance company, but a Health Care Sharing Ministry (HCSM). Neither this publication, nor its ministry memberships, nor ministry guidelines, nor plan of operation, nor financial assistance provided through the ministry, constitutes or creates an insurance policy and it is not provided through an insurance company. This document is not a contract of insurance or a promise to pay for the financial or medical needs of a participant by the ministry. As such, participation in the organization or a subscription to any of its documents should never be considered the purchase of insurance. If you join this ministry by purchasing one of its programs instead of purchasing health insurance, you will be considered uninsured. By the terms of this program, whether any participant in the program chooses to assist you with your medical bills, is completely voluntary. Neither the organization nor any other participant can be compelled by law or otherwise to contribute toward your financial or medical bills. Regardless of whether you receive any payment for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills and other obligations incurred regardless of any financial sharing you may receive from the organization for medical expenses. The memberships offered through this organization are not offered through an insurance company and the organization is not subject to the regulatory requirements or consumer protections codes established by States' Department of Insurance. Should you have complaints concerning this Health Care Sharing Ministry, you may report them to the office of the States' Attorney General.

IT IS VERY IMPORTANT THAT YOU REVIEW this organization's guidelines carefully and completely, and that you make sure you understand any limitations that may affect your personal medical and financial needs.

SPECIFIC NOTICE FOR THE FOLLOWING STATES:

Florida Statute 624.1265

Notice: The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor its plan of operation is an insurance policy. Membership is not offered through an insurance company, and the organization is not subject to the regulatory requirements or consumer protections of the Florida Insurance Code. Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant is compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered to be insurance. Regardless of whether you receive any payments for medical expenses or whether this organization continues to operate, you are always personally responsible for the payment of your own medical bills.

Missouri Statute §376.1750 and Wisconsin Statute 600.01(1)(b)(9):

IMPORTANT NOTICE: This publication is not an insurance company, nor is it offered or issued through an insurance company. This publication does not guarantee or promise that your medical bills will be published or assigned to other subscribers or members for payment. Whether anyone chooses to assist you with your medical bills will be entirely voluntary, as no one will be compelled to contribute towards your medical bills. As such, this publication should never be considered insurance, or a substitute for an insurance policy. Whether or not you receive any payments for medical expenses and whether or not this publication continues to operate, you are always personally responsible for the payment of your own medical bills.

KENTUCKY REVISED STATUTE 304.1-120 (7)

NOTICE: UNDER KENTUCKY LAW, THE RELIGIOUS ORGANIZATION FACILITATING THE SHARING OF MEDICAL EXPENSES IS NOT AN INSURANCE COMPANY, AND ITS GUIDELINES, PLAN OF OPERATION, OR ANY OTHER DOCUMENT OF THE RELIGIOUS ORGANIZATION DO NOT CONSTITUTE OR CREATE AN INSURANCE POLICY. PARTICIPATION IN THE RELIGIOUS ORGANIZATION OR A SUBSCRIPTION TO ANY OF ITS DOCUMENTS SHALL NOT BE CONSIDERED INSURANCE. ANY ASSISTANCE YOU RECEIVE WITH YOUR MEDICAL BILLS WILL BE TOTALLY VOLUNTARY. NEITHER THE ORGANIZATION OR ANY PARTICIPANT SHALL BE COMPELLED BY LAW TO CONTRIBUTE TOWARD YOUR MEDICAL BILLS. WHETHER OR NOT YOU RECEIVE ANY PAYMENTS FOR MEDICAL EXPENSES, AND WHETHER OR NOT THIS ORGANIZATION CONTINUES TO OPERATE, YOU SHALL BE PERSONALLY RESPONSIBLE FOR THE PAYMENT OF YOUR MEDICAL BILLS.

Pennsylvania 40 Penn. Statute §23(b):

IMPORTANT NOTICE: This publication is not an insurance company, nor is it offered or issued through an insurance company. This publication does not guarantee or promise that your medical bills will be published or assigned to other subscribers or members for payment. Whether anyone chooses to assist you with your medical bills will be entirely voluntary, as no one will be compelled to contribute towards your medical bills. As such, this publication should never be considered insurance, or a substitute for an insurance policy. Whether or not you receive any payments for medical expenses and whether or not this publication continues to operate, you are always personally responsible for the payment of your own medical bills.

Montana SB 149:

NOTICE: The health care sharing ministry facilitating the sharing of medical expenses is not an insurance company and does not use insurance agents or pay commissions to insurance agents. The health care sharing ministry's guidelines and plan of operation are not an insurance policy. Without health care insurance, there is no guarantee that you, a fellow member, or any other person who is a party to the health care sharing ministry agreement will be protected in the event of illness or emergency. Regardless of whether you receive any payment for medical expenses or whether the health care sharing ministry terminates, withdraws from the faith-based agreement, or continues to operate, you are always personally responsible for the payment of your own medical bills. If your participation in the health care sharing ministry ends, state law may subject you to a waiting period before you are able to apply for health insurance coverage.

Joppa Health Share is not available in all States. For the most up-to-date State availability list, go to <https://www.joppahealth.org/state-specific-notices/>

How to Have A Personal Relationship With Jesus Christ

If you do not know what it means to be Born Again, then it's by no accident that you're reading this page right now. The decision to be Born Again is the most important decision of your life—it will determine where you will spend eternity.

Being Born Again means that one has been born spiritually and has received the gift of eternal life through a personal relationship with Jesus Christ.

Jesus Christ wants to have a personal relationship with you. In order to have this relationship, you must first acknowledge that nobody is good enough to earn his or her way into heaven. **“For all have sinned and fall short of the glory of God”—Romans 3:23**

No matter how good we are, it is impossible for us to meet God's standard, and our best efforts will only earn us death—which means eternal separation from God in hell. **“By For the wages of sin is death, but the gift of God is eternal life in Christ Jesus our Lord.”—Romans 6:23**

The word “But” in the verse above is very important. We cannot earn entrance to Heaven, BUT God provided a way for us to spend eternity with Him—and by His grace, offers it to us as a free gift! **“For it is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God—not by works, so that no one can boast.”—Ephesians 2:9**

God exists in three persons: the Father, the Son, and the Holy Spirit. God loves you so much, that God the Father sacrificed His Son, Jesus Christ—the second Member of the Godhead—as your substitute. Jesus took on human form when He was born as a baby in Bethlehem 2,000 years ago. Though He was 100% human, He was also 100% God. Jesus faced the same temptations we all face, but He lived a perfect, sinless life, meeting the Father's standard to enter heaven—something only He could do. Then, He died on the cross, taking the full penalty for your sins upon Himself in your place.

On the third day (what we know as Easter Sunday), Christ rose from the dead and lives today as proof of His Deity—to demonstrate that the Father accepted His sacrifice on our behalf, and to show us that God has the power to raise us from the dead. **“For God so loved the world that he gave his one and only Son, that whoever believes in him shall not perish but have eternal life.”—John 3:16**

In order to receive this free gift of salvation—to be forgiven of your sins and have eternal life you must simply accept Christ as your Savior, trusting that He paid the penalty for your sins in-full through His death on the Cross, then rose from the dead. You can do this through a simple prayer like this:

“Dear Jesus, I acknowledge that I'm a sinner and that I could never earn my way into heaven. I believe You died in my place on the cross, paying the penalty I deserve for my sins. Right now, I place my complete faith and trust in You as my Savior. Thank You for forgiving my sins and giving me the gift of eternal life—Amen”

If you prayed a prayer like this and have placed trust in Christ as your Savior, you have been born again and now have a personal relationship with Christ. We suggest that you tell someone whom you know to be a fellow Believer and seek a Bible-believing church. For more information about what to do next, please visit <https://goingfarther.net>.



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www.joppahealth.org

“Carry each other's burdens, and in this way you will fulfill the law of Christ.” Galatians 6:2