



## Amounts Generally Billed (AGB)

### AGB Calculation under the Look-Back Method

Under the look-back method for determining AGB, a hospital facility determines AGB for any emergency or other medically necessary care provided to a FAP-eligible individual by multiplying the hospital facility's gross charges for that care by one or more percentages of gross charges, called AGB percentages. Hospital facilities must calculate their AGB percentages at least annually by dividing the sum of the amounts of all its claims for emergency or other medically necessary care that have been allowed by certain health insurers during a prior 12-month period divided by the sum of the associated gross charges for those claims. The hospital calculates the AGB using Medicare and Commercial claims.

### AGB Fiscal Year 2024 (October 1<sup>st</sup>, 2022 – September 30<sup>th</sup>, 2023)

Department	Charge Total	Receipt Total	AGB Percentage (Discount)
All Other Services	\$525,309,948	\$156,744,855	70%
ER	\$189,939,203	\$56,466,178	70%
Lab	\$135,684,632	\$18,853,717	86%
Medical Oncology	\$263,982,246	\$47,224,150	82%
Outpatient Surgery	\$271,568,018	\$83,292,664	69%
Radiology	\$262,918,036	\$51,659,664	80%
<b>Grand Total</b>	<b>\$1,621,371,922</b>	<b>\$395,728,618</b>	<b>76%</b>