

## Amounts Generally Billed (“AGB”)

HSS utilizes the “look-back” method to calculate the Amount Generally Billed (“AGB”).

Specific percentages are calculated by applying the average Medicaid collection ratio to the amount charged. It is calculated annually by dividing 12 months of allowed Medicaid claims by the gross charges associated with those claims.

The specific AGB percentages are as follows:

<b>Provider Type</b>	<b>Category</b>	<b>% of Charges</b>
<b>Hospital</b>	Inpatient Services Non –Surgical Outpatient (Radiology, Lab, etc.)	28% of Hospital Charges
<b>Hospital</b>	Ambulatory Surgery Minor Procedures	13% of Hospital Charges
<b>Applicable Schedule A Physicians</b>	All except Radiologist. Includes Surgeon, Rheumatology, Pathology, etc.	7% of Physician Charges
<b>Applicable Schedule A Physicians</b>	Radiologist	9% of Physician Charges