



Jefferson Medical Center (JMC)

FINANCIAL ASSISTANCE POLICY - ATTACHMENT IV

Calculation of Amounts Generally Billed (AGB)

To calculate *Amounts Generally Billed (AGB)*, we have chosen to use a “look-back” method based on actual past claims paid to JMC by Medicare fee-for-service together with all private health insurers. This calculation is based on all Medicare and private health insurance payments received for inpatient and outpatient acute services in calendar year 2024.

Payer Group	Total Inpatient and Outpatient Charges for 2024	Total Inpatient and Outpatient Allowed Amount for 2024	AGB for 2024 Inpatient and Outpatient Services
Total of Medicare and Ins.	169,490,184	114,182,249	67%

Based on the data listed above, JMC allowed a blended discount rate for Medicare and private health insurance. This volume is equivalent to a 33% discount rate. We will allow a 50% discount for all uninsured patients according to our Billing and Collections Policy. This discount will be recalculated annually (Next Update April 1, 2026).