



## ST. VINCENT'S HEALTH SYSTEM, INC.

### AMOUNT GENERALLY BILLED CALCULATION

Last Updated: 07/01/2024

St. Vincent's Health System, Inc., calculates the AGB percentages below using the "look-back" method and includes Medicare fee-for-service and all private health insurers that pay claims to the Organization, all in accordance with IRS Reg. Sec. 1.501(r)-5(b)(3), 1.501(r)-5(b)(3)(ii)(B) and 1.501(r)-5(b)(3)(iii). The details of those calculations and AGB percentages are described below.

The AGB percentages for Ascension St. Vincent's are as follows:

AGB for hospital facility charges:

- Ascension St. Vincent's Riverside 16.0 %
- Ascension St. Vincent's Southside 19.9 %
- Ascension St. Vincent's Clay County 18.3 %
- Ascension St. Vincent's St. Johns County 18.7 %
- Ascension St. Vincent's Healthcare Consolidated Lab Services 19.55%

AGB for physicians' professional fees:

- St. Vincent's Medical Group 32.9%

This AGB percentage is calculated by dividing the sum of the amounts of all of the hospital facility's claims for emergency and other medically necessary care that have been allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility by the sum of the associated gross charges for those claims. The only claims that are utilized for purposes of determining the AGB are those that were allowed by a health insurer during the 12-month period prior to the AGB calculation (rather than those claims that relate to care provided during the prior 12 months).

Notwithstanding the foregoing AGB calculations, St. Vincent's Health System, Inc., has chosen to apply a lower AGB percentages for all facility charges, professional fees and lab services as follows:

St. Vincent's Health System AGB: 16%