

## Shands Live Oak Regional Medical Center

### Financial Assistance Policy – 2018 Amounts Generally Billed Percentage

In order to serve the health care needs of our community and to comply with the requirements of its Operating Agreement, **Shands Live Oak Regional Medical Center** will provide financial assistance to patients without financial means to pay *for Inpatient, Outpatient and Emergency Room services provided by the hospital*. Financial assistance may cover all or part of the costs of care that patients do not have the financial means to pay, but are limited to emergency and medically necessary services only. For purposes of this policy, “medically necessary” services are those that meet Medicare medical necessity criteria.

For emergency and medically necessary care, the hospital will not charge any patient who is determined to be eligible for financial assistance more than the “AGB percentage” (amounts generally billed) of its full price before any contractual allowances, discounts, or deductions for the services provided as a part of such care. The amount billed to the patient determined to be eligible for financial assistance will not exceed the AGB percentage.

The AGB percentage used in complying with this section is determined using the look-back method, as those methods are defined in federal tax law. Under the look-back method for determining AGB, Shands Live Oak Regional Medical Center determines the AGB percentage 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 percentage of gross charges, called AGB percentage. The hospital calculates their AGB percentage no less frequently than annually by dividing the sum of certain claims for emergency and other medically necessary care by the sum of the associated gross charges for those claims.

Shands Live Oak Regional Medical Center's 2018 AGB percentage was determined by using the year ending 2017 (period of 1/1/2017 – 12/31/2017) total consolidated charges less all contractual adjustments, policy discounts, administrative adjustments and uncollectable revenue recorded against total charges. Based on this methodology the 2018 AGB percentage is 16.64%.