

Beaumont

AMOUNT GENERALLY BILLED (“AGB”) CALCULATION

BHSH System (including substantially related entities) does not charge Financial Assistance Policy (“FAP”)-eligible patients more for Emergent and other Medically Necessary care than amounts generally billed (AGB) to those who have insurance covering such care. Rather, BHSH System provides Emergent or other Medically Necessary care free of charge to any patients who meet the eligibility criteria for financial assistance under this Policy. BHSH System uses the look-back method and calculates an AGB percentage for each hospital facility by dividing the sum of all of the amounts of its claims for Emergency and other Medically Necessary care that have been allowed by Medicare fee-for-service in combination with private insurance for the preceding twelve (12) month calendar year, by the sum of the associated gross charges for those claims.

AGB is determined by multiplying the gross charges for all care provided to the FAP-eligible patient/guarantor, including Emergency and other Medically Necessary care, by the applicable AGB percentage in the following table.

Name of Facility/Provider	AGB %
Beaumont Hospital Dearborn	22
Beaumont Hospital Farmington Hills	24
Beaumont Hospital Grosse Pointe	23
Beaumont Hospital Royal Oak	25
Beaumont Hospital Taylor	23
Beaumont Hospital Trenton	22
Beaumont Hospital Troy	23
Beaumont Hospital Wayne	22
Beaumont Medical Group	36