MercyOne Western Iowa Region calculates an Amounts Generally Billed (AGB) using the “look-back” method and including 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 that calculation and AGB percentage are described below.

The Amounts Generally Billed (AGB) for MercyOne Western Iowa Region (based on paid Medicare claims from 06/01/2020 - 05/31/2021:

\[
\frac{\text{Medicare Contractual Allowance}}{\text{Medicare Total Charges}} = \text{AGB}
\]

\[
\frac{156,288,974}{113,151,903} = 72.4\%
\]

These AGB percentages are 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).