

Amounts Generally Billed

Amounts Generally Billed (AGB) is based on the lowest average of the amounts that were paid to a KP facility by private health insurers, Medicare fee-for-service and Medicaid fee-for-service (and co-pays and deductibles) for emergency or medically necessary services, based on actual claim data from November 1, 2017 to October 31, 2018, which is consistent with the look-back method. Total expected payment from allowed claims was divided by total billed charges for such claims, and that number was subtracted from 1 to calculate the AGB percentage. The 2019 AGB reduction to gross charges is 57% for hospital charges.