

Discount Percentages

Patients eligible for Financial Assistance will not be charged more than the Amounts Generally Billed (AGB) to insured patients for emergency and other medically necessary care. St. Joseph's uses the look-back method to calculate AGB by dividing the total allowed amounts for Medicare fee-for-service claims by the total gross charges associated with those claims, in accordance with Internal Revenue Code Section 501(r). AGB is used to ensure that patients eligible for financial assistance are not charged more than the amounts generally billed to insured patients. In general, the AGB calculation also informs the structure of partial charity discount percentages. However, in certain cases, partial charity discount percentages may be established or adjusted to comply with applicable state laws, regulations, or other local requirements. The partial charity discount percentages, effective 7/1/2025, for each of our facilities are listed below.

St. Joseph's offers uninsured patients an automatic discount. The uninsured discount percentages effective 7/1/2025, for each of our facilities are listed below.

Facility Name	Hospital Visit Partial Charity %	Medical Group Visit Partial Charity %	Uninsured Discount %
St. Joseph's Syracuse	Insured: 68.2% Underinsured: 0-199% = 100% 200-300% = 90% 301-400% = 80% Uninsured: 0-199% = 100% 200-300% = 95% 301-400% = 90%	Insured: 72.5% Underinsured: 0-199% = 100% 200-300% = 90% 301-400% = 80% Uninsured: 0-199% = 100% 200-300% = 95% 301-400% = 90%	35%

“Hospital Visit” refers to facility charges for inpatient and outpatient hospital services. “Medical Group Visit” refers to professional services billed by employed physicians or affiliated medical groups, which may be billed separately from hospital services.