

Calculation of Amounts Generally Billed

Following a determination of financial-assistance eligibility, an individual will not be charged more for emergency or other medically necessary care than the amounts generally billed (AGB) to individuals with insurance. **Cook Children’s Health System** uses the “Look-Back-Method” to calculate AGB by dividing the sum of Medicare fee-for-service, Medicaid, and private health insurer claims by the associated gross charges for those claims. Claims during the prior fiscal year (12 months) are included in the calculation. The AGB is calculated annually and applied on a calendar year basis. Cook Children’s will separately calculate the AGBs for Cook Children’s Medical Center and Cook Children’s Medical Center – Prosper, but will apply the more generous AGB calculation as the system-wide rate for all Cook Children’s entities. See below for the most recent calculation of AGB.

Cook Children’s Medical Center

Gross Charges:	\$4,013,550,020
Contractual:	\$1,729,345,404
Discount Rate:	43%
AGB Rate for CCMC for Calendar Year 2026:	57%

Cook Children’s Medical Center - Prosper

Gross Charges:	\$221,808,998
Contractual:	\$ 72,436,232
Discount Rate:	33%
AGB Rate for PCCMC for Calendar Year 2026:	67%

Cook Children’s Health Care System AGB rate for calendar year 2026: 57%