

Exhibit B
 Financial Assistance Policy
 Amount Generally Billed (AGB) Calculation
 Last Updated: 7/1/17

Individuals who qualify for financial assistance will not be billed more than the amounts generally billed (AGB) to insured patients.

On an annual basis, Centegra Health System will update the AGB percentage based on the look back method for the prior 12 months' claim activity as defined below.

Total Billed Charges for Medicare and Private Insurance Plans	\$1,534,833,258
Less Total Discount(s) provided to Medicare and Private Insurance Plans	\$1,055,940,323
Total Amount Generally Billed to Insured Patients (Allowable)	\$478,892,935
Amounts Generally Billed (Allowable) Percentage	31.2%
Minimum Discount Percentage for Financial Assistance Program	68.8%

For eligible financial assistance services, Centegra Health System will not bill eligible patients more than 30% and will provide a minimum 70% discount off total charges.

*Centegra rounds the minimum discount percentage for financial assistance, based on the AGB, up from 68.8% to 70%.