

Division of Workers' Compensation P.O. Box 20190, Cranston, RI 02920-0942 Phone 401-462-8100 Fax 401-462-8105 http://www.dlt.ri.gov/wc

Information Letter 2014-07 June 24, 2014

Rhode Island Workers' Compensation Hospital Rates

The inpatient, emergency room and ambulatory surgery adjustments to charges are effective for all hospital services provided on or after July 1, 2014.

Hospital charges should be multiplied by the appropriate percentage listed below.

Example: Butler Hospital inpatient charge \$1000.00
Inpatient adjustment x 53.60 %
Amount paid \$536.00

Hospital	Inpatient	Ambulatory Surgery	Emergency Room
Butler Hospital	53.60 %	N/A	N/A
Kent Hospital	42.47 %	32.63 %	30.51 %
Landmark Medical Center	32.40 %	24.55 %	34.50 %
Memorial Hospital	64.62 %	47.71 %	87.11 %
Miriam Hospital	37.04 %	18.50 %	25.25 %
Newport Hospital	70.36 %	43.01 %	54.65 %
Rhode Island Hospital	45.19 %	47.93 %	41.08 %
Rehabilitation Hospital of RI	63.58 %	N/A	N/A
Roger Williams Hospital	48.35 %	35.41 %	25.28 %
St. Joseph Hospital	46.02 %	45.08 %	28.53 %
South County Hospital	53.61 %	28.44 %	25.22 %
Westerly Hospital	49.62 %	31.38 %	31.49 %
Women & Infants Hospital	47.38 %	41.49 %	73.50 %

Adjustments are based on approved cost finding methodology and other statistical data furnished by each hospital.

Sincerely,

Matthew P. Carey, III Assistant Director

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