

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 2017-03 June 28, 2017

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, 2017.

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

Example:	Butler Hospital inpatient charge Inpatient adjustment Amount paid		<u>x 54.50</u>	\$1000.00 <u>x 54.50 %</u> \$ 545.00	
Hospital		Inpatient	Ambulatory Surgery	Emergency Room	
Butler Hospital		54.50 %	N/A	N/A	
Kent Hospital		41.84 %	23.92 %	23.44 %	
Landmark Medical Center		29.01 %	29.69 %	20.28 %	
Memorial Hospital		71.80 %	54.80 %	63.05 %	
Miriam Hospital		34.85 %	28.04 %	20.36 %	
Newport Hospital		53.71 %	49.67 %	19.84 %	
Rhode Island Hospital		40.12 %	38.39%	27.90 %	
Rehabilitation Hospital of RI		34.12 %	N/A	N/A	
Roger Williams Hospital		45.33 %	32.16 %	30.92 %	
St. Joseph Hospital		44.20%	40.55 %	16.39 %	
South County Hospital		57.05 %	24.95 %	21.22 %	
Westerly Hospital		47.42 %	27.44 %	38.38 %	
Women & Infants Hospital		51.00 %	49.87 %	49.89 %	

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

Sincerely,

Matthew P. Caruf MB

Matthew P. Carey, III Chief Administrator



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