

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 2018-04 June 25. 2018

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, 2018.

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

Example: Butler Hospital inpatient charge \$1000.00 Inpatient adjustment \$x 49.60 % Amount paid \$496.00

Hospital	Inpatient	Ambulatory Surgery	Emergency Room
Butler Hospital	49.60 %	N/A	N/A
Kent Hospital	40.87 %	29.86 %	18.79 %
Landmark Medical Center	22.90 %	27.18 %	17.08 %
Miriam Hospital	31.89 %	24.72 %	17.20 %
Newport Hospital	46.94 %	47.38 %	18.46 %
Rhode Island Hospital	36.54 %	35.57%	26.78 %
Rehabilitation Hospital of RI	33.57 %	N/A	N/A
Roger Williams Hospital	43.64 %	32.52 %	12.23 %
St. Joseph Hospital	25.80%	44.55 %	15.32 %
South County Hospital	57.19 %	24.75 %	20.18 %
Westerly Hospital	47.19 %	29.09 %	32.36 %
Women & Infants Hospital	46.83%	46.82 %	35.22 %

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

Sincerely,

Matthew P. Carey, III Chief Administrator

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