

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 2016-05 June 17, 2016

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, 2016.

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

Example: Butler Hospital inpatient charge \$1000.00 Inpatient adjustment \$\frac{x}{53.30\frac{\phi}{9}}\$\$
Amount paid \$533.00

Hospital	Inpatient	Ambulatory Surgery	Emergency Room
Butler Hospital	53.30 %	N/A	N/A
Kent Hospital	39.53 %	37.28 %	23.90 %
Landmark Medical Center	27.73 %	25.85 %	19.59 %
Memorial Hospital	70.10 %	59.80 %	58.67 %
Miriam Hospital	34.73 %	25.98 %	20.33 %
Newport Hospital	59.46 %	49.38 %	21.50 %
Rhode Island Hospital	41.15 %	35.63%	31.05 %
Rehabilitation Hospital of RI	34.66 %	N/A	N/A
Roger Williams Hospital	44.91 %	31.99 %	16.11 %
St. Joseph Hospital	42.10%	48.19 %	16.69 %
South County Hospital	55.08 %	25.08 %	20.12 %
Westerly Hospital	44.59 %	25.70 %	32.54 %
Women & Infants Hospital	47.67 %	41.33 %	58.73 %

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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