

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 2020-05 July 7, 2020

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, 2020.

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

Example:	Butler Hospital inpatient charge Inpatient adjustment Amount paid		e \$1000.00 <u>x 49.01 %</u> 490.01 4	
Hospital		Inpatient	Ambulatory Surgery	Emergency Room
•		•		
Butler Hospital		49.01 %	N/A	N/A
Kent Hospital		43.19%	31.91 %	18.01%
Landmark Medical Center		24.62 %	34.00 %	20.00 %
Miriam Hospital		33.01 %	24.78 %	22.48 %
Newport Hospital		50.25%	38.96%	19.03 %
Rhode Island Hospital		37.72 %	32.95%	27.99 %
Rehabilitation Hospital of RI		32.76 %	N/A	N/A
Roger Williams Hospital		43.53 %	32.93 %	11.85 %
St. Joseph Hospital		23.39%	68.42 %	15.13 %
South County Hospital		48.84 %	24.68 %	22.88%
Westerly Hospital		43.79 %	21.35 %	25.43%
Women & Infants Hospital		45.36%	36.73 %	27.79%
			00.10 /0	21.1070

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

Sincerely,

Matthew P. Caref MB

Matthew P. Carey, III Chief Administrator



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