

Healthgrades Top Hospitals

Healthgrades publishes its list of the top 50, 100, and 250 hospitals annually

Top Hospitals Methodology

For the top 50 hospitals:

- 1 To determine the top 50 hospitals, Healthgrades identifies hospitals that have received their “Distinguished Hospital Award for Clinical Excellence” for at least seven consecutive years
- 2 If less than 50 hospitals meet this criteria, Healthgrades fills the remaining slots with hospitals that received the award for the last six consecutive years (sorted by volume-weighted average z-score on the Clinical Excellence analysis; see more detail on this score below).

For the top 100 hospitals:

- 3 To identify the next top 50 hospitals, Healthgrades expands eligibility to hospitals that received the Clinical Excellence award for at least the last five consecutive years and ranks them based on consecutive years having achieved the award and by volume-weighted average z-score.

For the top 250 hospitals:

- 4 The list of the top 250 hospitals includes the full list of recipients of the 2019 Distinguished Hospital Award for Clinical Excellence. This accounts for the top 5% of performers on Healthgrades’ clinical quality metrics.

Data Sources

Inpatient data for the years 2015-2017 from the Medicare Provider Analysis and Review (MedPAR), which is purchased from CMS¹

Distinguished Hospital Award for Clinical Excellence Methodology

To receive Healthgrades’ Distinguished Hospital Award for Clinical Excellence, a hospital must be in the top 5% of all hospitals in the country for clinical excellence across 32 outcomes and conditions (see the following page for a list). To be eligible, a hospital must have data in the MedPAR files for at least 21 of the 32 conditions.

To evaluate hospital performance across these 32 outcomes and conditions, Healthgrades evaluates each hospital’s actual performance on each measure compared to their predicted performance (based on a specific risk-adjustment model that accounts for each hospital’s demographic and clinical risk factors; see [here](#) for the detailed methodology). The mortality-specific measures are adjusted to place a higher statistical influence on 30-day mortality (60% weight) over in-hospital mortality (40% weight). Each of the 32 calculations results in a z-score that is weighted by hospital volumes and averaged across all measures to determine an overall hospital performance score.

Hospitals are then listed in descending order based on their overall performance score, and the top 5% of facilities nationwide (250 total) receive the Clinical Excellence Award.

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Clinical Outcomes and Conditions Measures Evaluated

Mortality-Based Procedures & Conditions

Bowel Obstruction	Esophageal/Stomach Surgeries	Respiratory Failure
COPD ¹	Gastrointestinal Bleed	Sepsis
Colorectal Surgeries	Heart Attack	Small Intestine Surgeries
CABG ² Surgery	Heart Failure	Stroke
Coronary Interventional Procedures	Pancreatitis	Valve Surgery
Cranial Neurosurgery	Pneumonia	
Diabetic Emergencies	Pulmonary Embolism	

In-Hospital Complications-Based Procedures & Conditions

Abdominal Aortic Aneurysm Repair	Pacemaker Procedures
Back and Neck Surgeries (Without Spinal Fusion)	Peripheral Vascular Bypass
Carotid Surgery	Prostate Removal Surgery
Defibrillator Procedures	Spinal Fusion
Gallbladder Surgery	Total Knee Replacement
Hip Fracture Treatment	Transurethral Prostate Resection Surgery
Hip Replacement	

1) Chronic Obstructive Pulmonary Disease
2) Coronary Artery Bypass Graft