U.S. News & World Report's hospital rankings

Categories

The annual list ranks hospital performance in 15 specialties or specialty areas. In 12 of these specialties, rankings are determined by an analysis of outcome measures. Rankings in the remaining 3 specialties are determined by surveys of physicians about the institutions' reputations.

1 **The Honor Roll**

For this list, *U.S. News* identifies 20 hospitals that deliver high-quality care in many specialties.

2 **Specialty rankings**

U.S. News ranks the top 50 hospitals with specialized programs in:

Data-based rankings

- Cancer
- Cardiology & heart surgery
- Diabetes and endocrinology
- Ear, nose & throat
- Gastroenterology & GI surgery
- Geriatrics
- Gynecology
- Neurology & neurosurgery
- Orthopedics
- Pulmonology & lung surgery
- Urology
- Rehabilitation

Survey-based rankings

- Ophthalmology
- Rheumatology
- Psychiatry

3 **Procedures and conditions rankings**

U.S. News rates medical centers' performance in 17 common inpatient procedures and conditions, such as diabetes, stroke, and heart attack, among others.
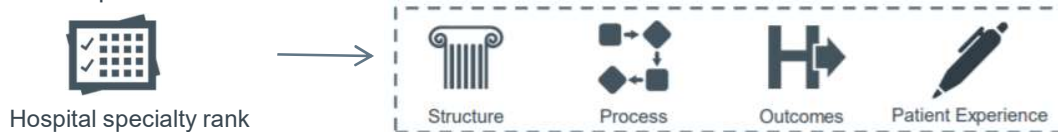
Eligibility

A hospital is eligible for consideration if it meets *one* of the following requirements:

- Is a teaching hospital
- Is affiliated with a medical school
- Has at least 200 beds
- Has at least 100 beds *and* offers at least four medical technologies from a list of eight determined by *U.S. News*

Ranking in a particular specialty also requires meeting a volume or discharge threshold specific to that specialty. However, hospitals that do not meet these requirements are still eligible if they are nominated by at least 1% of specialists who responded to the most recent three years of national physician surveys.

Survey process

U.S. News works with market research firm **RTI** to complete the rankings. For the 12 specialties with data-based rankings, the list's order depends on four factors: hospital structure, process/expert opinion, outcomes, and patient experience.

Hospital specialty rank → Structure | Process | Outcomes | Patient Experience

The structural measures include hospital volumes, staffing, and other measures of resources. The data source for most of these measures is the **American Hospital Association** (AHA) Annual Survey, although additional data comes from the **American Nurses Credentialing Center**'s roster of Nurse Magnet hospitals and the **National Cancer Institute**'s list of **NIH**-designated cancer centers. Process measures are based on the hospital's reputation, as determined by surveys of board-certified physicians.

Outcomes measures depend on the hospital's risk-adjusted mortality measures, as determined by **CMS**' Standard Analytical Files (SAF), which provide mortality data for fee-for-service Medicare beneficiaries, as well as the rate of patients sent home after an inpatient stay. The patient experience category is dependent on a hospital's HCAHPS mean score.

Survey process (cont.)

Non-data-driven categories are dependent only on the reputational survey outlined in the process measure section. The main survey components are weighted as follows:

Measure	Measure Description	Weight
Structure	Mostly determined by the AHA's Annual Survey, including metrics measuring the hospital's use of advanced technologies, number of patients, nurse staffing, patient services, presence of trauma centers, and number of intensivists.	**30.0%**
Process/ expert opinion	Based on an average number of nominations from the three most recent annual surveys (2019-2021) of practicing U.S. physicians using a database compiled by **Doximity**, the largest online professional network of U.S. physicians. A group of members and non-members were asked to name up to five hospitals in their specialty that provide the best care to patients. The results were then adjusted for the physicians' affiliation, demographics, and region.	**27.5%***
Outcomes	Measures patient outcomes based on 30-day patient survival rates from CMS' SAF files (which only include Medicare fee-for-service patients). The exception was rehabilitation due to rare outcomes of death. An adjusted mortality rate based on MS-DRGs was included. This method controls for case mix, patient age, gender, dual eligibility, and other factors, and was applied to the three most recent calendar years (CY2017 – CY2019) of Medicare claims submitted for reimbursement that appeared in the SAF data.	**30.0%**
	Tracks the risk-adjusted rate at which patients are discharged to home versus another care setting (such as a SNF, LTACH, or another hospital). This is meant to measure how effective the hospital is at delivering inpatient care that meets a patient's full needs.	**7.5%**
Patient experience	Based on each hospital's HCAHPS patient experience linear mean score. The 2020-21 ranking is based on HCAHPS scores from 2019.	**5.0% ****

* Note that process/expert opinion measures are weighted to only 24.5% for cardiology & heart surgery specialty scoring, with public transparency making up the remaining 3%. This public transparency category measures hospitals that participated in transparency initiatives by publicly reporting quality metrics through websites maintained by the American College of Cardiology and the Society of Thoracic Surgeons for cardiology & heart surgery. For neurology & neurosurgery, process measures are weighted to 25.5%, with public transparency making up the remaining 2%. The public transparency category measure for this specialty comes from hospitals reporting stroke care measures via the Get With The Guidelines stroke quality improvement program of the American Heart Association.

**,Patient experience was not a factor in rating rehabilitation programs. In that specialty, process/expert opinion was weighted at 55%, structure was 25%, and outcomes were 20%.

Honor Roll scoring

To determine the "Honor Roll" list, the top-ranked hospital in each data-driven specialty received 25 Honor Roll points, the number two-ranked hospital received 24 points, and so on. All hospitals ranked number 21-50 received five points. In rehabilitation and each of the three Best Hospitals specialty rankings based on expert opinion, the top ranked hospital received 10 points, the second received 9 points, and so on. In the procedures and conditions ratings for 15 of the 17 Best Hospitals, 12 points were awarded for each "high performing" rating. For the other two specialties, AVR and TAVR, 6 points were awarded to "high performing" ratings, given that these procedures are alternative treatments for the same underlying condition. The 20 hospitals that earned the most points out the possible 507 among all specialties were then recognized on the "Honor Roll."

Source: *U.S. News* Methodology, 7/27