Outstanding Patient Experience Award™
2012 Methodology

HealthGrades’ Outstanding Patient Experience Award™ recognizes hospitals for their patient satisfaction based on their patients’ experiences in their hospital. HealthGrades analyzed patient satisfaction data for 3,837 hospitals in the country using HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) hospital survey data obtained from the Centers for Medicare and Medicaid Services (CMS).

HealthGrades applied a scoring methodology to compare hospitals nationally, create an overall patient satisfaction score for each hospital, and determine the recipients of the 2012 Outstanding Patient Experience Award.

Data Acquisition
HealthGrades analyzed patient experience in U.S. hospitals using HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) hospital survey data released in January 2012 by the Centers for Medicare and Medicaid Services (CMS). The HCAHPS data covers patients discharged between April 2010 and March 2011. The HCAHPS data was selected for several reasons.

- It includes survey responses from a representative sample of patients visiting the hospital.
- The HCAHPS survey is a standardized survey instrument and data collection methodology for measuring patients’ perceptions of their hospital experience.
- The survey allows for objective and meaningful comparisons of hospitals locally, regionally and nationally on topics that are important to consumers.

To be considered for the Outstanding Patient Experience Award, a hospital had to have:

- More than 100 survey responses
- At least 50 acute care beds
- A minimum HealthGrades average star rating of 2.5. (The exception to this is stand-alone cancer facilities which do not receive HealthGrades ratings.)

About HCAHPS
For this standardized patient experience survey, a random sample of patients visiting a hospital was given a 27-question survey within 48 hours to six weeks after discharge. Patients were surveyed throughout the year, and the survey was administered by mail, telephone, mail with telephone follow up, or interactive voice recognition. Participating hospitals may either use an approved survey vendor or collect their own HCAHPS data (if approved by CMS to do so). CMS’s target is that each hospital has 300 completed surveys annually. For more information on HCAHPS, see www.hcahps.org.
The 27 questions are rolled up to provide **ten measures**:

1. **Overall rating**—How do patients rate the hospital overall?
2. **Recommendation to family/friends**—Would patients recommend the hospital to friends and family?
3. **Communication with doctors**—How often did doctors communicate well with patients?
4. **Communication with nurses**—How often did nurses communicate well with patients?
5. **Responsiveness of hospital staff**—How often did patients receive help quickly from hospital staff?
6. **Pain management**—How often was patients’ pain well controlled?
7. **Communication about medicines**—How often did staff explain medicines before giving them to patients?
8. **Discharge information**—Were patients given information about what to do during their recovery at home? (This question was the only yes/no measure.)
9. **Cleanliness**—How often were the patients’ rooms and bathrooms kept clean?
10. **Quietness**—How often was the area around patients’ rooms kept quiet at night?

To ensure that publicly reported HCAHPS scores allow fair and accurate comparisons across hospitals, CMS performs adjustments that eliminate any advantages or disadvantages that might result from the methods used to survey patients or characteristics of patients.

**Award Methodology**

To determine recipients for HealthGrades Outstanding Patient Experience Award, HealthGrades performed the following steps.

1. First, HealthGrades excluded hospitals that did not meet the minimum requirement of 50 acute care beds or at least 100 survey responses.
2. HealthGrades then excluded hospitals that did not meet an overall star average of 2.5 or higher. The exception to this is stand-alone cancer facilities which do not receive HealthGrades ratings.
3. For nine of the ten measures (listed above), CMS reported percentages of patient responses associated with **positive** (“always”), **neutral** (“usually”) and **negative** (“sometimes/never”) responses. One measure, the Discharge Information question was a yes/no response.

HealthGrades standardized the percentages associated with a **positive** or yes response to mean zero and variance one, thereby producing ten standardized scores. Specifically, for each positive (always) response, the standardized score is calculated as:

- \[(\text{hospital percent} - \text{national average percent}) / \text{standard deviation}\]

A higher percentage is favorable.
4. HealthGrades standardized the percentages associated with a negative ("sometimes/never") response, thereby producing nine standardized scores. Specifically, for each negative ("sometimes/never") response, the standardized score is calculated as:

- \( \frac{\text{national average percent } - \text{hospital percent}}{\text{standard deviation}} \)
  A lower percentage is favorable.

5. To create a ranking score, HealthGrades took the weighted average of the 19 standardized scores. In the weighting process, the Overall rating question and the Recommendation to family/friends question each carried a weight of 25%. All other scores were weighted equally accounting for the remaining 50%.

6. Finally, hospitals were ranked according to the ranking score. The hospitals with rankings in the top 10% of all hospitals considered were designated as Outstanding Patient Experience Award recipients.

Limitations of the Data Models

It must be understood that while these models may be valuable in identifying hospitals that have higher patient satisfaction than others, one should not use this information alone to determine the quality of care provided at each hospital. The models are limited by the following factors:

- Not all of the nation’s hospitals have survey data. Nearly 75% have data.
- Although HealthGrades has taken steps to carefully compile these data using its methodology, no techniques are infallible, and therefore some information may be missing, outdated or incorrect.

Please note that a high ranking, rating, or award for a particular hospital is not a recommendation or endorsement by Health Grades, Inc. of a particular hospital; it means that the data associated with a particular hospital has met the foregoing qualifications. Only individual patients can decide whether a particular hospital is suited for their unique needs.

Also note that if more than one hospital reported to CMS under a single provider ID, HealthGrades analyzed patient outcome data for those hospitals as a single unit. Throughout this document, therefore, “hospital” refers to one hospital or a group of hospitals reporting under a single provider ID.