Hospital Performance

The annual Truven Health Analytics™ 100 Top Hospitals® identifies U.S. hospitals with the best overall performance across multiple organizational metrics, including clinical, operational, and financial. The ability of some hospitals to adapt as the industry is changing demonstrates leadership as the winners set the standards their peers seek to achieve. The study revealed that the nation’s best hospitals had a lower mortality index, considering patient severity; had fewer patient complications; followed accepted care protocols; had lower 30-day mortality and 30-day readmission rates; sent patients home sooner; provided more timely emergency care; kept expenses low, both in-hospital and through the aftercare process; and scored better on patient surveys of hospital experience.

**Better Patient Outcomes**

The 100 Top Hospital winners posted better patient survival rates and fewer patient complications. Overall, winners had 23% fewer deaths and 21% fewer complications than expected, considering patient severity, while their nonwinning peers had 5% more deaths as would be expected and only 6% fewer complications than expected.

**Better Efficiency**

Patients treated at 100 Top Hospitals returned home sooner and at lower costs. Winning hospitals had a median-adjusted average length of stay that was a half day shorter than their peers’ median, 4.4 days compared to 4.9 days. Similarly, the expense per discharge averaged $230 lower at winning hospitals, $6,457 vs. $6,687 per inpatient stay, a difference of 3.4%.

**About the Data:** As with all of the 100 Top Hospitals awards, the methodology is objective, and all data come from trusted public sources. Truven Health Analytics builds a database of short-term, acute care, nonfederal U.S. hospitals that treat a broad spectrum of patients. The primary data sources are the Medicare Provider Analysis and Review (MEDPAR) patient claims data set, the Centers for Medicare & Medicaid Services (CMS) Hospital Compare hospital performance data set, and the Hospital Cost Report Information System (HCRIS) Medicare cost report file. The most recent five years of data available are used for trending and the most current year for selection of winners. But hospital inpatient mortality and complications are based on two years of data combined for each study year data point. For more information, visit 100tophospitals.com or email 100tophospitals@truvenhealth.com

**Upcoming Topic:** Trends in Physician Practice

**FACT FILE PARTNER:**

www.truvenhealth.com

---

**SOURCE:** Truven Health 100 Top Hospitals® 2016.
LIMITED PERFORMANCE IMPROVEMENT OVER TIME

In recent years, U.S. hospitals overall (winners and nonwinners) have not been able to significantly improve performance across the entire balanced scorecard. However, over the years studied (2010–2014), there were a few noteworthy performance improvements for specific measures. Almost 74% of hospitals significantly improved their 30-day readmission rates, likely a result of the attention these measures are getting in payment systems. Nearly 30% of hospitals significantly improved their inpatient mortality rates, and 21% had significantly improved their 30-day mortality rates. On the operating efficiency front, 22% of hospitals had a significant increase in expense per discharge (declining performance). For the remainder of the measures, the majority of hospitals in the study had no statistically significant change in performance.

LOWER MEDICARE COST PER EPISODE

Medicare spend per beneficiary (MSPB) is the measure of the expenses associated with an admission episode, including three days prior through 30 days postadmission. Winning hospitals had an MSPB index 2 percentage points lower than nonwinning hospitals, -3% compared to -1%.

LOWER 30-DAY MORTALITY AND READMISSIONS RATES

Winning hospitals had lower 30-day readmission rates for heart attack, heart failure, pneumonia, hip/knee arthroplasty, COPD, and stroke patient groups. Mean 30-day mortality and readmission rates were lower at the winning hospitals than nonwinning hospitals, across all comparison groups.

HEALTHIER OPERATING MARGINS

Overall, winning hospitals had a median operating margin that was nearly 9 percentage points higher than nonwinning hospitals (12.6% vs 3.9%). This positive fiscal performance was the most dramatic in the medium and small community hospital groups, where winners had margins that were 16.5 and 11.5 percentage points higher than nonwinners, respectively. Major teaching hospital winners had the lowest median operating margin of any winning group at 5.5%.