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Top Hospitals Have 27% Lower Mortality, Annual Study Finds

Hospital Quality Gap Persists, Resulting in 171,424 Preventable Deaths, According to HealthGrades' Sixth Annual Hospital Quality and Clinical Excellence Study

Distinguished Hospitals for Clinical Excellence Named; Free to Consumers at HealthGrades.com

GOLDEN, Colo. (January 31, 2008) – Patients treated at top-rated hospitals nationwide are nearly one-third less likely to die, on average, than those admitted to all other hospitals, according to a study released today by HealthGrades, the leading independent healthcare ratings organization. Patients who undergo surgery at these high-performing hospitals also have an average five percent lower risk of complications during their stay, researchers found.

The annual *HealthGrades Hospital Quality and Clinical Excellence* study, now in its sixth year, identifies hospitals in the top five percent nationally in terms of mortality and complication rates for 27 procedures and diagnoses, from bypass surgery to total knee replacement. Hospitals achieving this level of care are designated Distinguished Hospitals for Clinical Excellence™ by HealthGrades and are identified on the organization's consumer Web site, HealthGrades.com.

To name hospitals in the top five percent for clinical excellence, the HealthGrades' study analyzed nearly 41 million hospitalizations during the years 2004, 2005 and 2006 at all 4,971 of the nation's nonfederal hospitals.

Disparities in the hospitals care patients receive, based simply on where they choose to seek treatment, highlight a troubling phenomenon in the U.S. healthcare system: a persistent and preventable gap between high-quality hospitals and the rest of the field.

The 2008 study found that 171,424 lives may have been saved and 9,671 major complications avoided during the three years studied, had the quality of care at all hospitals matched the level of those in the top five percent.

In comparing hospitals in the top five percent, designated as Distinguished Hospitals for Clinical Excellence, with all other hospitals, the HealthGrades study found:

- On average, a 27 percent lower risk of in-hospital risk-adjusted mortality was experienced by Medicare patients at Distinguished Hospitals for Clinical Excellence in the following procedures and diagnoses: cardiac surgery, angioplasty and stent, heart attack, heart failure, atrial fibrillation, chronic obstructive pulmonary disease, community-acquired pneumonia, stroke, abdominal aortic aneurysm repair, bowel obstruction, gastrointestinal bleed, pancreatitis, diabetic acidosis and coma, pulmonary embolism and sepsis.

- For those same procedures and diagnoses, Distinguished Hospitals for Clinical excellence improved at a greater rate than other hospitals, lowering in-hospital risk-adjusted mortality rates over the years 2004, 2005 and 2006 by an average 15 percent.
- Medicare patients had, on average, a five percent lower risk of in-hospital post-operative complications at a Distinguished Hospital for Clinical Excellence for diagnoses and procedures that include orthopedic and neurosurgery, vascular surgery, prostate surgery and gall bladder surgery.
- For those same procedures and diagnoses, Distinguished Hospitals reduced in-hospital post-surgical complication rates by 2.35 percent from 2004 to 2006, more than twice as much improvement as all other hospitals.

“HealthGrades acknowledges the tremendous commitment of the select group of hospitals that have achieved consistent, high-quality care, not just in one or two specialties, but across the board, from orthopedic surgery to cardiac care,” said Samantha Collier, MD, HealthGrades chief medical officer. “However, the data in this year’s study clearly indicates that the gap between top-performing hospitals and others persists. This disparity in the quality of care at U.S. hospitals is disappointing. Distinguished Hospitals for Clinical Excellence have proven that consistently delivering top-notch medical care is possible and it is time for the rest to follow suit.”

Individuals can see how their local hospitals are rated, and if they have been designated Distinguished Hospitals for Clinical Excellence, for free at <http://www.healthgrades.com>.

Methodology

In its 2008 study, HealthGrades independently and objectively analyzed millions of patient records from the Centers for Medicare and Medicaid Services for fiscal years 2004, 2005 and 2006, for 27 medical procedures and diagnoses. To qualify for the list, hospitals were required to meet minimum thresholds in terms of patient volumes, quality ratings and the range of services provided. Prior to comparing the in-hospital mortality and complication rates of the nation’s hospitals, HealthGrades risk-adjusted the data, to compare on equal footing hospitals that treated sicker patients. Hospitals with risk-adjusted mortality and complication rates that scored in the top five percent or better nationally – which demonstrates superior overall clinical performance – were then recognized as Distinguished Hospitals for Clinical Excellence.

HealthGrades’ methodology can be found in the study and on the company’s Web site.

About HealthGrades

Health Grades, Inc. (Nasdaq: HGRD) is the leading healthcare ratings organization, providing ratings and profiles of hospitals, nursing homes and physicians. Millions of consumers and many of the nation’s largest employers, health plans and hospitals rely on HealthGrades’ independent ratings and decision-support resources to make healthcare decisions based on the quality of care. More information on the company can be found at <http://www.healthgrades.com>.

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Editor’s note: A full copy of the study is available at <http://www.healthgrades.com> or by contacting Scott Shapiro at sshapiro@healthgrades.com.