

## TOP HOSPITALS

### I. A hospital must fully meet Leapfrog's standard for Preventing Medication Errors (CPOE)

Research estimates that more than one million serious medication errors occur each year in U.S. hospitals, with 7,000 deaths annually from adverse drug events (ADEs). In addition to the human price paid, each ADE adds \$2,000 on average to the cost of a hospitalization. This translates to more than \$7.5 billion per year nationwide in hospital costs alone. CPOE systems can reduce the number of ADEs by up to 88%, preventing three million serious medication errors in the U.S. each year.

Leapfrog's standard for Computerized Physician Order Entry (CPOE) measures the extent to which a hospital has adopted CPOE, and whether decision-support tools in the CPOE system are working effectively. To fully meet this standard, physicians must enter at least 75% of medication orders through a CPOE system; and demonstrate, via a test, that their inpatient CPOE system can alert physicians to at least 50% of common, serious prescribing errors.

### II. A hospital must fully meet Leapfrog's standard for ICU Physician Staffing (IPS)

Mortality rates are significantly lower in hospitals with ICUs managed exclusively by board-certified intensivists (physicians trained in critical care medicine). Research has shown that in ICUs where intensivists manage or co-manage all patients, there is a 30% reduction in overall hospital mortality and a 40% reduction in ICU mortality.

Hospitals fulfilling Leapfrog's standard for ICU Physician Staffing must operate adult and/or pediatric ICUs that are managed or co-managed by intensivists who: a) Are present during daytime hours and provide clinical care exclusively in the ICU and, b) When not present on site or via telemedicine, return pages at least 95% of the time, (i) within five minutes and (ii) arranges for a certified physician or physician extender to reach ICU patients within five minutes.

### III. A hospital must fully meet Leapfrog's standards for high-risk surgeries and procedures

*(Hospitals must achieve a score of "fully meets" for at least 50% of the surgeries or procedures that apply)*

Research indicates that a patient's risk of dying is reduced by approximately two to four times, depending on the high-risk procedure, if care is obtained in hospitals that meet Leapfrog's standards.<sup>i</sup>

Hospitals fulfilling Leapfrog's standards for high-risk surgeries and procedures (aortic valve replacement, abdominal aortic aneurism repair, esophagectomy, pancreatectomy, and high-risk newborn deliveries) have met Leapfrog's robust volume, processes of care, and outcomes standards. The Leapfrog website provides specific details about these performance measures and the scoring ([www.leapfroggroup.org](http://www.leapfroggroup.org)).

<sup>i</sup>[http://www.leapfroggroup.org/media/file/Lives\\_Saved\\_Leapfrog\\_Report\\_2008-Final\\_\(2\).pdf](http://www.leapfroggroup.org/media/file/Lives_Saved_Leapfrog_Report_2008-Final_(2).pdf)



**IV. A hospital must achieve a Value Score of 77 or better as calculated through Leapfrog’s Hospital Recognition Program (LHRP Value Score).**

The Leapfrog Hospital Recognition Program uses each standard from the Leapfrog Hospital Survey to calculate an overall value score for each hospital. The value score, which is a numerical value from 0 to 100, is a combination of quality and resource use, with quality weighted more heavily in the calculation. Hospitals with high value scores have demonstrated both high quality and appropriate resource use. For the purposes of Top Hospital, the value score must be based on a minimum of ten applicable measures. The Leapfrog website provides specific details about these calculations ([www.leapfroggroup.org/competitivebenchmarking](http://www.leapfroggroup.org/competitivebenchmarking)).

**V. Hospitals eligible for a [Hospital Safety Score](#)<sup>SM</sup> must receive an A on the letter grades publicly reported at the time of the Top Hospital public announcement**

The Hospital Safety Score grades hospitals on how safe they are for patients. Each A, B, C, D or F score comes from expert analysis of publicly available data consumers can now use to protect their families from harm or death during a hospital stay. Some hospitals are exempted from receiving a Hospital Safety Score, including specialty hospitals like children’s or surgical, Critical Access Hospitals, and hospitals in the state of Maryland. Hospitals that are eligible for a score, which includes general acute care hospitals in all other states, must receive an A on the current Hospital Safety Score (Fall 2015) in order to qualify for Top Hospitals.

**VI. Hospitals must satisfy the Top Hospital Selection Committee that in general the hospital embodies the highest standards of excellence worthy of the Leapfrog Top Hospital designation**

Hospitals that satisfy the quantitative criteria outlined above must also meet the Leapfrog Committee qualitative requirements for overall excellence, which includes a review of Centers for Medicare and Medicaid Services (CMS) and other information publicly available on the hospital. Hospitals that perform worse than the national average on CMS’ mortality measures for heart attack, heart failure or pneumonia according to CMS are excluded from receiving a Top Hospital award.



## TOP CHILDREN'S HOSPITALS

### **I. A children's hospital must achieve a Quality Score of 90 or better as calculated through Leapfrog's Hospital Recognition Program**

The Leapfrog Hospital Recognition Program uses standards from the Leapfrog Hospital Survey to calculate an overall quality score for each children's hospital. The quality score, which is a numerical value from 0 to 100, includes Leapfrog's standards for preventing medication errors (CPOE), ICU Physician Staffing, Safe Practices, Never Events, and in some cases preventing hospital-acquired conditions such as infections. Hospitals with high quality scores have demonstrated strict adherence to Leapfrog's safety and quality standards. For the purposes of Top Hospital, the Quality Score must be based on a minimum of three applicable measures. The Leapfrog website provides specific details about these calculations ([www.leapfroggroup.org/competitivebenchmarking](http://www.leapfroggroup.org/competitivebenchmarking)).



## TOP RURAL HOSPITALS

### **I. A hospital must fully meet Leapfrog's standard for Preventing Medication Errors (CPOE)**

Research estimates that more than one million serious medication errors occur each year in U.S. hospitals, with 7,000 deaths annually from adverse drug events (ADEs). In addition to the human price paid, each ADE adds \$2,000 on average to the cost of a hospitalization. This translates to more than \$7.5 billion per year nationwide in hospital costs alone. CPOE systems can reduce the number of ADEs by up to 88%, preventing three million serious medication errors in the U.S. each year.

Leapfrog's standard for Computerized Physician Order Entry (CPOE) measures the extent to which a hospital has adopted CPOE, and whether decision-support tools in the CPOE system are working effectively. To fully meet this standard, physicians must enter at least 75% of medication orders through a CPOE system; and demonstrate, via a test, that their inpatient CPOE system can alert physicians to at least 50% of common, serious prescribing errors.

### **II. A rural hospital must achieve a Value Score of 77 or better as calculated through Leapfrog's Hospital Recognition Program**

The Leapfrog Hospital Recognition Program uses each standard from the Leapfrog Hospital Survey to calculate an overall value score for each hospital. The value score, which is a numerical value from 0 to 100, is a combination of quality and resource use, with quality weighted more heavily in the calculation. Hospitals with high efficiency scores have demonstrated both high quality and appropriate resource use. For the purposes of Top Hospital, the value score must be based on a minimum of five applicable measures. The Leapfrog website provides specific details about these calculations ([www.leapfroggroup.org/competitivebenchmarking](http://www.leapfroggroup.org/competitivebenchmarking)).

### **III. Hospitals eligible for a [Hospital Safety Score](#)<sup>SM</sup> must receive an A on the letter grades publicly reported at the time of the Top Hospital public announcement**

The Hospital Safety Score grades hospitals on how safe they are for patients. Each A, B, C, D or F score comes from expert analysis of publicly available data consumers can now use to protect their families from harm or death during a hospital stay. Some hospitals are exempted from receiving a Hospital Safety Score, including specialty hospitals like children's or surgical, Critical Access Hospitals, and hospitals in the state of Maryland. Hospitals that are eligible for a score, which includes general acute care hospitals in all other states, must receive an A on the current Hospital Safety Score (Fall 2015) in order to qualify for Top Hospitals.

### **IV. Hospitals must satisfy the Top Hospital Selection Committee that in general the hospital embodies the highest standards of excellence worthy of the Leapfrog Top Hospital designation**

Hospitals that satisfy the quantitative criteria outlined above must also meet the Leapfrog Committee qualitative requirements for overall excellence, which includes a review of Centers for Medicare and Medicaid Services (CMS) and other information publicly available on the hospital. Hospitals that have



higher than expected mortality for heart attack, heart failure or pneumonia according to CMS are excluded from receiving a Top Hospital award.