How does hospital region affect Medicare and Medicaid hospital quality, and what can this reveal about improving U.S. healthcare outcomes?

The Centers for Medicare & Medicaid Services (CMS) created Care Compare to help the public evaluate the quality of care across over 4,000 Medicare-certified hospitals.



Medicare & Medicaid Services KPI

1.64
Average Hospital Rating
Total Number of Mortality
Cases
Outcomes better than expected outcomes worse than expected

These national-level KPIs provide context for comparing hospital performance.

With 15,498 total mortality cases and an average hospital rating of just 1.64 out of 5, most hospitals fall below expected standards. Only 613 hospitals outperformed national mortality expectations, while 352 underperformed. These figures emphasize the need to explore how region and ownership influence outcomes.

Filter Map & KPI by U.S Region

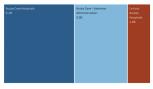




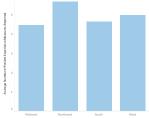


Average Hospital Rating for Selected Region

Hospitals in the United States include acute care hospitals for urgent treatment, critical access hospitals in rural areas, children's hospitals for polatric care, Veterans Health Administration medical centers for veterans, Department of Defense hospitals for military members, and hospital outpatient departments for same-day procedures.



Northeast Hospitals Report the Most Patient Experience Data



1. More data means more complete CMS evaluations.

Hospitals that report more survey categories give CMS a clearer picture of their

quality, which help issout helio reveal stores when performance is good.

2. Stronger data collection and patient engagement.

This suggests that Northeast hospitals are more preactive in collecting
feedback or patients are more willing to respond.

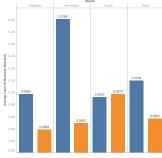
2. Office more of surapsency and per formations.

More sendinger data as allows 450 to ecogists high-performing hospitals more
accurately, feeding to better ratings.

Bottom Line
Hospitals in the Northeast have higher ratings because they consistently report more complete patient experience data which allows them to be scored more favorably by CMS.

1. Voluntary non-profit hospitals report the most patient survey data. They have the highest average count of patient surveys and the highest overall hospital relay aross all ownership types.
2. Non-profit hospitals prioritize patient engagement and transparency.
2. Non-profit hospitals prioritize patient engagement and transparency, these lospitals are of them sistend oriven, focusing on care over profit, which likely drives them to collect more feedback and improve services.
3. Righer patient involvement can boost borsplot railings.
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Clarifying MORT Scores: MORT Better: Lower-than-expected death rate MORT Worse: Higher-than-expected death rate

n better and worse scores, while the

NAME WORKE Higher-Chain-epockes death rate

1. The Northeast Assows the stronges throught performance.
It has the highest average count of better than-expected mortality
measures, reflecting superior patient survival outcomes.
2. Fewer worse scores reinforc consistency.
The Northeast also perior to lever "Molty" (overa" outcomes, meaning
fewer hospitals underperformed on survival.
The Northeast also also believe the reinforce of the contraction o

Bottom Line:
The Northeast outperforms other regions in mortality outcomes, aligning with its higher ratings and stronger patient feedback. This suggests a more consistent, transparent, and higher-quality healthcare environment.

Mortality Cases That Get Better
Mortality Cases That Get Worse

Most hospitals score poorly. Over half fall in the lowest CMS rating tier (0-1), showing major quality gaps.

 $\label{eq:more surveys} \ = \ higher ratings.$ Hospitals that collect more patient feedback consistently receive better CMS scores. Voluntary non-profits lead in care quality.

They report the most survey data, have the highest average ratings, and outperform in mortality outcomes

The Northeast leads in patient experience and survival. It ranks highest in survey volume and better-than-expected mortality scores.

The South shows inconsistent care.

Nearly equal rates of better and worse mortality outcomes suggest uneven hospital performance

To improve care quality, hospitals must strengthen data reporting, patient feedback, and outcome tracking. Proprietary and government-run facilities, which lag behind voluntary non-profits, should receive targeted support to close performance gaps and advance health quity nationwide.