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America's Best Maternity Hospitals 2025

– Methodology –

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1 Introduction

High-quality maternity care is essential to ensuring the long-term health and well-being of both mothers and newborns. From prenatal visits and childbirth to postpartum recovery, the support provided during this critical time plays a pivotal role in both immediate and future health outcomes (World Health Organization, n. d.). Recognizing the importance of exceptional maternity care, Statista and Newsweek have partnered for the fourth consecutive year to identify "America's Best Maternity Hospitals". This ranking highlights hospitals that excel in providing comprehensive and compassionate care to mothers and babies.

The current 2025 edition of the ranking is an extension and update of the annual America's Best Maternity Hospitals ranking, which was first published by Newsweek and Statista in March 2022. In the 2025 edition, the leading **444 hospitals in the field of maternity in the U.S. are featured in total.**

The America's Best Maternity Hospitals 2025 ranking is intended to be a resource to help patients make a more informed and data-driven decision when choosing a hospital for their medical needs, as well as to provide a composite benchmark for hospitals that is indicative of their relative performance when compared to their national peers.

2 Study design

The following sections provide an overview of the study design, and the underlying methodology used to determine the various rankings. First, the newly implemented features and changes in this year's edition will be described (see chapter 2.1). Second, the eligibility is outlined in chapter 2.2, followed by the general approach (see chapter 2.3) and the scoring model (see chapter 2.4).

2.1 New features and changes in the 2025 edition

The following list provides a brief overview of the major changes in this year's edition, compared to the America's Best Maternity Hospitals 2024 ranking:

- **Increased thresholds:** The threshold values for both categories were increased to incentivize improvement within maternity care (see chapter 2.4).
- **New data source: AHA Annual Survey of Hospitals Database 2022:** A key goal of this project is to increase the comprehensiveness of the ranking with more hospital data. The AHA Annual Survey Hospital Database contains data provided by more than 6,200 hospitals and 400 healthcare systems, featuring over 1,300 hospital data points (see chapter 2.3.1b).
- **Inclusion of additional hospital quality metrics data points:**
 - Data on hospital commitment to health equity from CMS (see chapter 2.3.1a).
 - Inclusion of the American Nurses Credentialing Center Magnet Recognition Program (see chapter 2.3.1c).
 - Inclusion of the WHO and UNICEF's Baby-Friendly Hospital USA (BFUSA) designation (see chapter 2.3.1c).
- **Inclusion of previous year's recommendation data:** To account for reputational continuity, recommendation data from last year was factored into the reputation pillar (see chapter 2.3.3a).

2.2 Eligibility

Hospitals that are not accessible to the public and/or are very small were excluded from the ranking, as they were very unlikely to receive enough recommendations to make the final list and are not comparable to hospitals in the range of services provided.

To be eligible for the analysis, maternity hospitals must report their performance data and receive at least a 2-star rating from CMS.

Additionally, the following minimum thresholds must be surpassed for all three pillars to be included in the evaluation (see chapter 2.4):

- Hospital quality metrics score > 70%
- Patient experience score > 70%
- Reputation score > 62%

2.3 General methodology

The 2025 America's Best Maternity Hospitals ranking is based on three pillars:

- **Hospital quality metrics** with a focus on indicators relevant to maternity care (see chapter 2.3.1).
- **Results from patient experience surveys** (see chapter 2.3.2).
- **Nationwide online survey** (doctors, hospital managers, healthcare professionals) (see chapter 2.3.3).



2.3.1 Hospital quality metrics

The hospital quality metrics score for the America's Best Maternity Hospitals ranking is derived from multiple data sources, detailed in the following section.

a. Centers for Medicare & Medicaid Services (CMS)

The dataset provided by the Centers for Medicare & Medicaid Services (CMS) is available for over 4,600 hospitals publicly reporting quality information on the Hospital Compare platform. It includes information on hospital characteristics, quality measures, patient satisfaction, performance metrics, and Medicare reimbursements (Centers for Medicare & Medicaid Services, 2025). The America's Best Maternity Hospitals ranking evaluates indicators relevant to maternity care.

The most recent data, published February 2025, was used to determine the CMS quality score.¹

The following indicators from the respective datasets were used for the evaluation:

¹ CMS retired data collection for PC-01 beginning with CY 2023. Beginning with the January 2025 release, this measure has been removed from public reporting. Therefore, this indicator was evaluated using the October 2024 release maternal health dataset.

Maternal Health	
The rate of nulliparous women with a term, singleton baby in a vertex position delivered by C-section birth	ePC-02
Rate of any serious complications for mothers during delivery (per 10,000 deliveries)	ePC-07a
Percentage of mothers whose deliveries were scheduled too early (1-2 weeks early), when a scheduled delivery wasn't medically necessary	PC-01
Percentage of newborns that were exclusively fed breastmilk during the entire hospitalization	PC-05
Hospitals participates in a Statewide or National Perinatal Quality Improvement (QI) Collaborative Initiative / Maternal morbidity structural measure	SM-7
Healthcare Associated Infections	
Methicillin-resistant <i>Staphylococcus aureus</i> (or MRSA) blood laboratory-identified events (bloodstream infections)	HAI-5
<i>Clostridium difficile</i> (C.diff.) laboratory identified events (intestinal infections)	HAI-6
Timely and Effective Care	
Severe Sepsis and Septic Shock	SEP-1
Healthcare workers given influenza vaccination	IMM-3
Percentage of healthcare personnel who are up to date with COVID-19 vaccinations	HCP COVID-19
Patient Satisfaction	
Health Equity	
The number of domains (0-5) that the hospital can affirm they used to assess hospital commitment to health equity using a suite of equity-focused organizational competencies aimed at achieving health equity.	HCHE

Scores for each measure group were calculated using the following approach:

For the measure group of Maternal Health, indicators were compared to national percentiles (e.g., an exclusive breast-feeding rate which fell in the top 90th percentile nationwide for this indicator, received one point). Hospitals that are eligible for the Maternal morbidity structural measure also received one point.

Sepsis care and vaccination rate indicators were compared to the national percentiles, same as the approach for Maternal Health indicators.

For Healthcare Associated Infections measures, scores were assigned based on whether the measures were better than, the same as, or worse than the national average. A maximum of 1 point was allotted to individual measures that were better than the national average, 0.85 points to measures same as the national average, and 0.5 points to measures worse than the national average.

For the patient satisfaction measures, percentiles were calculated on a national level for each metric within the measure groups. In the next step, the scores of each metric were compared to the national percentiles and points were assigned according to where they fell in the percentiles. Patient Satisfaction indicators were included in the hospital quality metrics to capture all aspects of quality, similar to the CMS Star Rating approach.

Hospitals that participate in the health equity program received an additional score based on how many of the five domains of health equity are assessed in the hospital, again with a maximum score of 1.

Finally, the points of all measures within a measure group were averaged and weighted to build a single score for each facility.

Information on and the dataset can be found on the CMS website:

<https://www.medicare.gov/care-compare/>

b. American Hospital Association Data

The AHA Annual Survey of Hospitals Database was included in the scoring model. The database contains data provided by more than 6,200 hospitals and 400 health care systems featuring over 1,300 hospital data points.

Structural and organizational data of hospital facilities was included in the hospital quality metrics score. The following indicator groups of the AHA Annual Survey of Hospitals Database 2022, were used as part of the quality metrics score:

Maternity related indicators

- Closed unit - neonatal intensive care
- Women's health center/services
- Birthing room/LDR room/LDRP room
- Neonatal intensive & intermediate care
- Obstetrics care & Obstetric unit care level

General indicators

- Children's wellness program
- Hospital research & screening
- Patient education center
- Technological equipment
- Workforce strategic planning

Health equity

- Health equity goals
- DEI disaggregated data
- Health equity strategic plan

For each available indicator a hospital received one point as part of the hospital score.

For the indicator “obstetric unit care level” the following points were awarded:

- 0 = not available
- 1 = provides services for uncomplicated maternity and newborn cases
- 2 = provides service for all uncomplicated and most complicated cases
- 3 = provides services for all serious illnesses and abnormalities

The specific indicators considered can be found in the Appendix.

Information on the AHA database can be found here:

<https://www.ahadata.com/aha-annual-survey-database>

c. Accreditations and specialized programs

Additionally, several accreditations and specialized program enrollments were included in the hospital quality metrics score, reflecting the commitment to excellence in maternal and child healthcare.

These included **The Joint Commission's Perinatal Advanced Care Certification**, which recognizes hospitals providing high-quality perinatal care, and the **Maternal Levels of Care designation**, which categorizes hospitals based on their capabilities to care for pregnant patients and newborns. Additionally, hospitals' participation in programs under the **Health Resources and Services Administration (HRSA)** related to maternal and child health was factored into the evaluation. For the first time, the scoring also includes **ANCC Magnet accreditation**, a prestigious recognition for nursing excellence and high-quality patient care, as well as the WHO and UNICEFs **Baby-Friendly designation**, which emphasizes breastfeeding support and mother-infant bonding.

The list of Joint Commission accredited institutions can be found here:

<https://www.jointcommission.org/>

The list of Health Resources & Services Administration participating institutions can be found here:

<https://www.hrsa.gov/>

The list of American Nurses Credentialing Center accredited institutions can be found here:

<https://www.nursingworld.org/ancc/>

The list of WHO and UNICEFs Baby-Friendly Hospital Initiative designated institutions can be found here:

<https://www.babyfriendlyusa.org/>

2.3.2 Patient experience

Publicly available data from existing patient surveys were used to analyze patient experience. The patient experience score is based on Medicare HCAHPS data. The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey is a standardized survey of hospital patients in the USA regarding their experiences during a recent inpatient hospital stay. The most recent dataset available is the February 2025 edition and is based on surveys from patients discharged in 2023. Based on the collected survey data, the CMS reports 11 HCAHPS Star Ratings on Hospital Compare, 10 for the publicly reported HCAHPS measures, as well as an HCAHPS Summary Star Rating. The specific measures are derived from certain items in the HCAHPS survey as shown below:

HCAHPS Composite Measures		Questions
1.	Communication with Nurses	1, 2, 3
2.	Communication with Doctors	5, 6, 7
3.	Responsiveness of Hospital Staff	4, 11
4.	Communication about Medicines	13, 14
5.	Discharge Information	16, 17
6.	Care Transition	20, 21, 22
HCAHPS Individual Items		Questions
7.	Cleanliness of Hospital Environment	8
8.	Quietness of Hospital Environment	9
HCAHPS Global Items		Questions
9.	Hospital Rating	18
10.	Recommend the Hospital	19

Hospitals had to have at least 100 completed HCAHPS surveys over a given four-quarter period to receive a Star Rating.

The HCAHPS Summary Star Rating is the average of the Star Ratings. It is constructed from the Star Ratings from the six HCAHPS Composite Measures, a single Star Rating for the two HCAHPS Individual Items listed above, and a single Star Rating for the two HCAHPS Global Items (also listed above). The Star Ratings for the HCAHPS Individual Items and HCAHPS Global Items are constructed by calculating the average of the Star Rating for the two individual items contained in these composite measures. The resulting eight Star Ratings are combined into a simple average and rounded using standard rounding rules:

HCAHPS Summary Star Rating	Rounded Star Rating
≥ 1.00 and < 1.50	1 Star
≥ 1.50 and < 2.50	2 Stars
≥ 2.50 and < 3.50	3 Stars
≥ 3.50 and < 4.50	4 Stars
≥ 4.50 and ≤ 5.00	5 Stars

To avoid the loss of information on the individual measures, the America's Best Maternity Hospitals patient experience score is based on the more precise individual measures described above rather than the simple Summary Star Rating. This approach also allows for a more precise differentiation of hospitals that are at the upper or lower boundaries of their respective Summary Star Rating category.

The full methodology for the HCAHPS Star Rating is published at:

<https://hcahpsonline.org/en/hcahps-star-ratings/>

2.3.3 Reputation score

The reputation score is calculated from the weighted number of recommendations and the respective quality assessment from peers. The details of the calculation are explained in the section below.

a. Hospital recommendations from peers

From January to February 2025, Statista conducted an online survey among hospital managers and medical professionals with expertise in maternity care. The survey was accessible to participants via Newsweek.com, and invitations were also sent through email. This nationwide survey targeted neonatal and perinatal healthcare professionals, as well as hospital managers, asking them to recommend and rate maternity hospitals in key areas such as perinatal care, operative obstetrics, patient education & counseling, accommodation & service, and nurse & midwife staffing. The recommendations provided by participants were weighted based on their order of preference, and the professional

experience of each participant was also taken into account. The reputation score for each hospital was determined by the total number of weighted recommendations received. The hospital with the highest number of weighted recommendations received a recommendation score of 100%. The next best hospitals, in general, received a score relative to the number of weighted recommendations (e.g., when hospital A received the most votes with 100, hospital B with 80 votes received a score of $\frac{80}{100} = 80\%$).

This year, the recommendations from the past year were taken into account. Recommendations from the 2024 survey period were given less weight compared to those from 2025.

b. Quality assessment (as part of the reputation score)

For each recommended maternity hospital, participants were asked to assess the quality of:

- Operative obstetrics
- Perinatal care
- Patient education & counseling
- Accommodation & service
- Nurse & midwife staffing

The quality scale ranged from 1 ("Poor") to 10 ("Excellent").

A quality dimensions weight was assigned based on participant-reported importance.

A quality score was assigned to each hospital based on the weighted average of these ratings as follows:

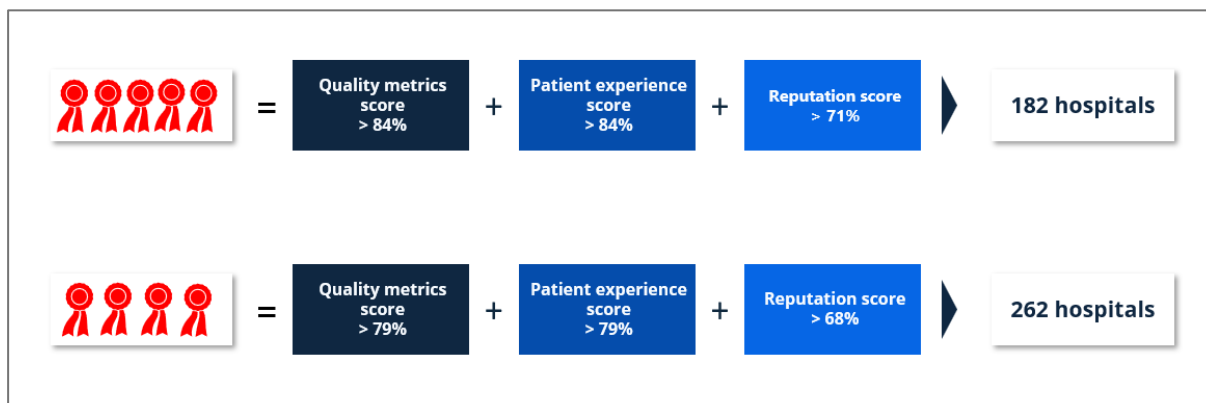
Quality Score	
40%	Operative obstetrics
30%	Perinatal care
15%	Patient education & counseling
7.5%	Accommodation & service
7.5%	Nurse & midwife staffing

2.4 Scoring model

The scoring model is based on the national recommendation score, the patient experience score, and the hospital quality metrics score. Maternity hospitals were

categorized based on data thresholds. To be included in the ranking, hospitals must meet predefined thresholds for all pillars.

The predefined thresholds for all pillars are shown in this overview:



As shown above, hospitals are grouped into the 5-ribbon category, if the following predefined thresholds are met:

- Hospital quality metrics score > 84%
- Patient experience score > 84%
- Reputation score > 71%

Hospitals are grouped into the 4-ribbon category, if the following predefined thresholds are met:

- Hospital quality metrics score > 79%
- Patient experience score > 79%
- Reputation score > 68%

Hospitals are assigned to the category for which they met all required thresholds. For example, if the reputation score and patient satisfaction score are above the 5-ribbon thresholds, but hospital quality metrics score is above the 4-ribbon threshold but below 5-ribbons, the hospital is awarded within the 4-ribbon category. Hospitals demonstrating very good performance across all evaluated criteria receive 4 ribbons by surpassing the eligibility and 4-ribbon thresholds. Hospitals demonstrating outstanding performance across all evaluated criteria receive 5 ribbons by surpassing the highest thresholds in all three categories.

As a result, the 444 best maternity hospitals in the US were awarded. Hospitals within their category are sorted alphabetically:

Ribbons	Hospital	City	State
	AdventHealth Avista	Louisville	CO
	AdventHealth Littleton	Littleton	CO
	AdventHealth Orlando	Orlando	FL
	AdventHealth Shawnee Mission	Merriam	KS
	AdventHealth Winter Park	Winter Park	FL
[...]			

Disclaimer

The rankings are comprised exclusively of hospitals that are eligible regarding the scope described in this document. A mention in the ranking is a positive recognition based on peer recommendations and publicly available data sources at the time. The ranking is the result of an elaborate process which, due to the interval of data collection and analysis, is a reflection of the last calendar year. Furthermore, events preceding or following the period 02/25/2024-02/25/2025 and/or pertaining to individual persons affiliated/associated to the facilities were not included in the metrics. As such, the results of this ranking should not be used as the sole source of information for future deliberations. The information provided in this ranking should be considered in conjunction with other available information about hospitals or, if possible, accompanied by a visit to a facility. Due to the focus on uncomplicated pregnancies, no conclusions towards high-risk pregnancies and specialized obstetrics care pertaining to these situations can be drawn from this ranking. Please note that data are subject to change and may be affected by continuing differences among states in abortion and child-birth complications. The quality of hospitals that are not included in the rankings is not disputed.

Literature

American Hospital Association (2024): *AHA Hospital Statistics 2024*, available online: <https://www.aha.org/statistics/fast-facts-us-hospitals> (accessed March 6th, 2025)

Centers for Medicare & Medicaid Services (2025): CMS Provider Characteristics & Initiatives, available online: <https://data.cms.gov/> (accessed March 4th, 2025)

HCAHPS (2024): *HCAHPS Star Ratings Technical Notes. Hospital Consumer Assessment of Healthcare Providers and Systems*, available online: <https://hcahpsonline.org/en/hcahps-star-ratings/> (accessed: March 3rd, 2025)

World Health Organization (n.d.): *Prioritizing quality of care in maternal health*, available online: <https://www.who.int/activities/prioritizing-quality-of-care-in-maternal-health> (accessed: March 4th, 2025)

Appendix

The following 2022 AHA Annual Survey indicators were used within the ranking:

1. Total hospital beds (calculated)²
2. Accountable for meeting health equity goals – CEO
3. Accountable for meeting health equity goals - committee or task force
4. Accountable for meeting health equity goals - designated senior executive
5. Accountable for meeting health equity goals - division/department leaders
6. Birthing room/LDR room/LDRP room – hospital
7. Children's wellness program - hospital
8. Closed unit - neonatal intensive care
9. DEI disaggregated data to inform decisions - patient outcomes
10. DEI disaggregated data to inform decisions - professional development
11. DEI disaggregated data to inform decisions – training
12. Health equity strategic planning - diverse representation in hospital and HCS governance
13. Health equity strategic planning - diverse representation in hospital and HCS leadership
14. Health equity strategic planning - equitable and inclusive organizational policies
15. Health equity strategic planning - systematic and shared accountability for health equity
16. Health research – hospital
17. Health screenings – hospital
18. Imaging centers
19. Incorporating workforce as part of strategic planning - conduct needs assessment
20. Incorporating workforce as part of strategic planning - recruitment & retention planning
21. Incorporating workforce as part of strategic planning - talent development plan
22. Magnetic resonance imaging (MRI) – hospital
23. Neonatal intensive care – hospital
24. Neonatal intermediate care – hospital
25. Obstetric unit care level
26. Obstetrics care – hospital
27. Patient education center – hospital
28. Ultrasound – hospital
29. Women's health center/services – hospital

² The number of beds was used as a feasibility check and had no impact on the scoring model