

METHODOLOGY

America's Best Physical Rehabilitation Centers 2026

Scope, Data Collection, Evaluation, and Results

statista 

Newsweek



Methodology – America's Best Physical Rehabilitation Centers 2026

Summary of the project

- The 7th edition of **America's Best Physical Rehabilitation Centers** ranking awards the leading inpatient physical rehabilitation facilities in the U.S.
- The ranking focuses on Inpatient Rehabilitation Facilities (IRFs), as defined by U.S. Centers for Medicare & Medicaid Services (CMS), including both free-standing rehabilitation hospitals and rehabilitation units in acute care hospitals⁽¹⁾.
- The 25 states with the most CMS-listed facilities were ranked individually; the remaining states were grouped into four regions: Northeast, Midwest, West, and South.
- The list is based on **four data pillars**:
 - **Quality metrics** data for IRFs published by CMS
 - **National online survey** from April to June 2026, an online survey among experts with knowledge of physical rehabilitation centers (physicians, physiotherapists, doctors, clinic managers and other health care professionals) was conducted in cooperation with Newsweek
 - **Quality designations** for physical rehabilitation centers provided by the Commission on Accreditation of Rehabilitation Facilities (CARF) and the Model Systems Knowledge Translation Center (MSKTC) program
 - **Google Reviews** were used as a proxy for patient experience
- Participants were also able to specify a standout program (Amputation, Brain Injury, Cancer Rehabilitation, Hip Rehabilitation, Joint Replacement Rehabilitation, Spinal Cord Injury, Stroke, Pediatric Rehabilitation) for the recommended physical rehabilitation center.
- Centers which exclusively offer outpatient physical rehabilitation services were excluded.

New features and changes in the 2026 edition

The following list provides a brief overview of the major changes in this year's edition compared to the America's Best Physical Rehabilitation Centers 2025 ranking:

- **Updated rehabilitation quality metrics weighting:** This year, the calculation of the quality metrics pillar has been revised and structured into five categories with differentiated weightings to better reflect key aspects of rehabilitation care (see slide 6).
- **Expansion of the ranking:** Due to increased data availability, the number of featured physical rehabilitation centers in this edition was increased to 330.
- **Addition of standout programs:** Hip Rehabilitation and Joint Replacement Rehabilitation were added as new standout programs to acknowledge the critical role of orthopedic rehabilitation in patient recovery.

Facility evaluation is based on four pillars, ranging from quality metrics and peer evaluations to Google reviews and quality designations

Data sources



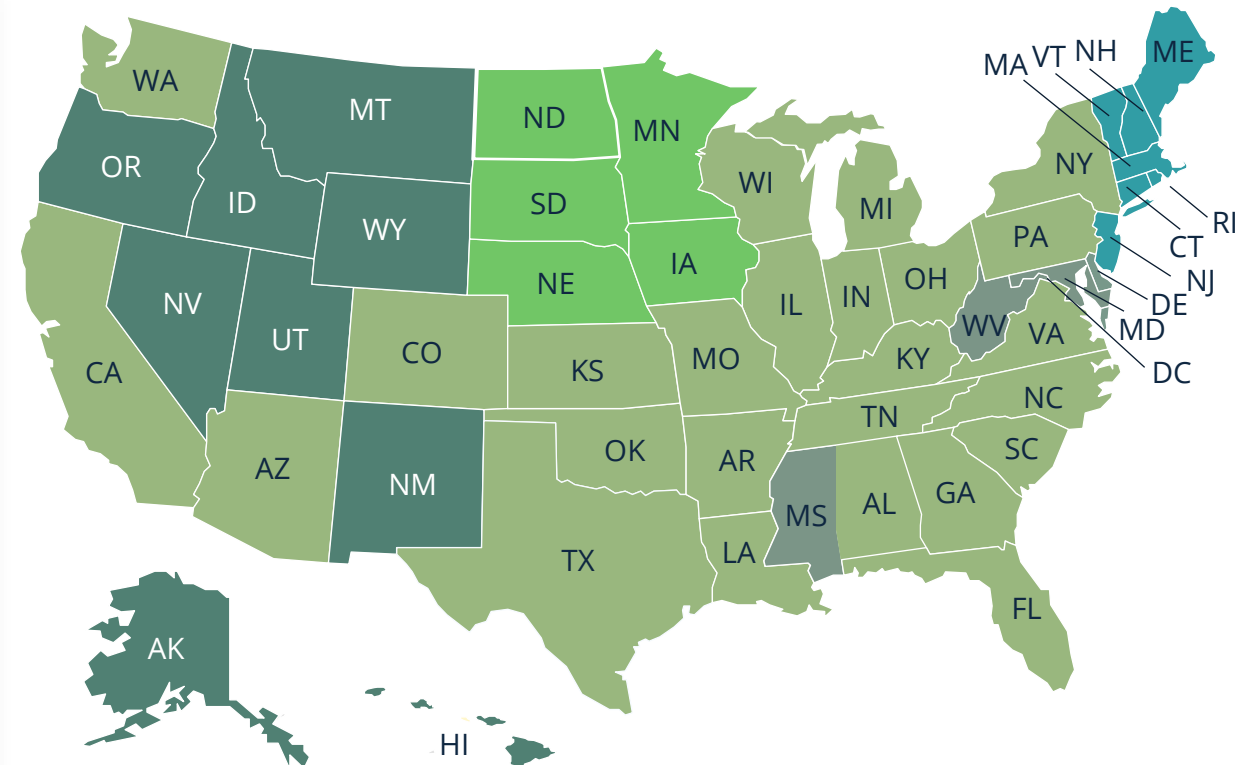
Physical rehabilitation centers from all U.S. states were eligible for the ranking

Geographical distribution

- Physical rehabilitation centers from the **25 states with the highest number of these centers⁽¹⁾** were included in the survey:

– Alabama	– Kansas	– Oklahoma
– Arizona	– Kentucky	– Pennsylvania
– Arkansas	– Louisiana	– South Carolina
– California	– Michigan	– Tennessee
– Colorado	– Missouri	– Texas
– Florida	– New York	– Virginia
– Georgia	– North Carolina	– Washington
– Illinois	– Ohio	– Wisconsin
– Indiana		

- All remaining states were divided into **4 regions** for the survey:
 - Northeast:** Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, Rhode Island, Vermont
 - Midwest:** Iowa, Minnesota, Nebraska, North Dakota, South Dakota
 - West:** Alaska, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Wyoming
 - South:** District of Columbia, Delaware, Maryland, Mississippi, West Virginia



A quality metrics score was calculated for each facility

Rehabilitation specific performance indicators



Quality metrics – Performance measures

- Quality metrics relevant for rehabilitation care provided by **CMS** were evaluated⁽¹⁾.
- These quality metrics are **risk-standardized quality measures**, allowing for a comparison of facilities regarding quality of treatment and medical conditions, even if the patient groups are varying.
- The indicators were grouped into five categories⁽²⁾ for the analysis:
 - Patient Safety & Infection Prevention (30%)
 - Patient Outcomes (30%)
 - Medication Management (20%)
 - Readmissions (15%)
 - Efficiency (5%)
- For each measure within a category, the top-performing facility received a sub-score of 100%. The **weighted sub-scores** were used to calculate the score per category. Each category is assigned a weight that determines its contribution to the overall quality metrics score.

THE QUALITY METRICS SCORE CONSTITUTES 55% OF THE TOTAL SCORE

Medical experts with knowledge about physical rehabilitation centers were surveyed about the best facilities in their state



Recommendations from peers

From April to June 2026, Statista conducted a nationwide online survey among medical professionals (e.g., physicians, therapists, nurses) and managers/administrators who work in physical rehabilitation centers⁽¹⁾. The survey was available to medical experts to participate on [Newsweek.com](https://www.newsweek.com). Additionally, participants were invited via e-mail.



Online survey by state among medical professionals and managers/administrators working in physical rehabilitation centers.



Participants were asked to recommend the Top 10 of physical rehabilitation centers **from their respective state**. Recommendations for own employer were not allowed.



The order of the recommendations is important for the weighting of the recommendations. Additionally, the professional experience of the participant was taken into account. A **score was assigned to each facility** based on the number of weighted recommendations.

A quality score was calculated for each recommended physical rehabilitation center

Quality score based on quality dimensions

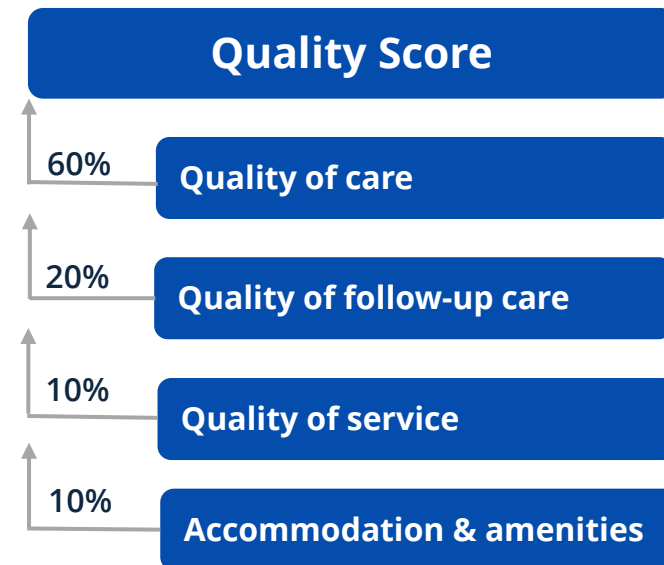


Calculation of Quality Score

- For each recommended physical rehabilitation center participants were asked to assess **four quality dimensions** on a scale from 1 ("Poor") to 10 ("Excellent"):
 - Quality of care** (e.g., treatments/therapies, consultation with doctor/therapist)
 - Quality of follow-up care** (e.g., outpatient therapies)
 - Quality of service** (e.g., meals, leisure activities)
 - Accommodation & amenities** (e.g., size of room, quality of furnishing)
- A quality score was assigned to each facility based on the **weighted average** of these ratings.



Quality Score Weights



THE QUALITY SCORE CONSTITUTES 20% OF THE REPUTATION SCORE

A quality designation pillar was used as an additional element of the scoring model

Accreditation and Model Systems



CARF Accreditations

- **CARF International⁽¹⁾** (Commission on Accreditation of Rehabilitation Facilities) is a nonprofit organization assigning voluntary accreditation for US inpatient rehabilitation facilities
- To receive an accreditation, facilities must commit to quality improvement, focus on the unique needs of each person the provider serves and monitor service outcomes
- The following specialty programs were included in the scoring model: **Amputation, Brain Injury, Cancer Rehabilitation, Spinal Cord Injury, Stroke, Pediatric Rehabilitation**
- The accreditation score consists of the general accreditation as well as the accreditations for the specialty programs



Model Systems

- The **Model Systems** are funded by the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)⁽²⁾
- These specialized programs of care are available in the areas of **Spinal Cord Injury (SCI), Traumatic Brain Injury (TBI) and Burn Injury (Burn)**
- The aim is to provide high quality research and patient care to improve the health and overall quality of life of people with TBI, SCI and burn injuries
- Facilities are eligible for the Model systems score if they have **one or more model system designations** awarded by NIDILRR

ACCREDITATIONS & MODEL SYSTEMS EACH CONTRIBUTE 5% TOWARDS OVERALL SCORE

Patient perspectives were incorporated into the ranking

Google review score



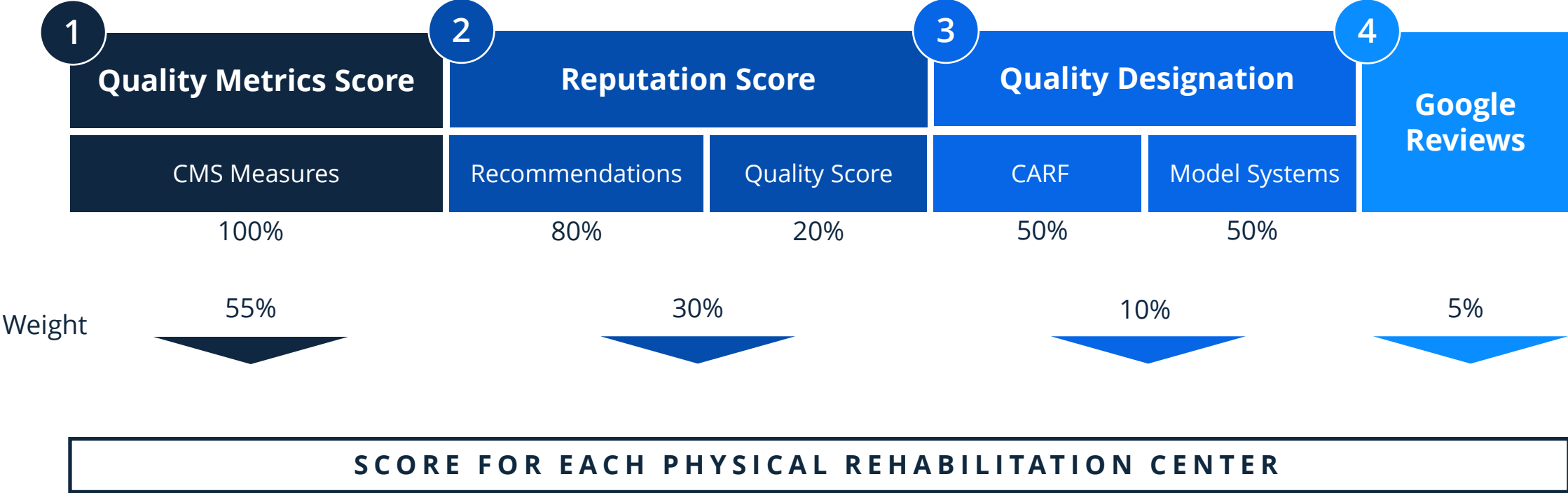
Google Reviews

- With no comprehensive patient experience data available for rehabilitation facilities in the United States, Google reviews serve as a proxy in the scoring model
- Based on the publicly available data, each facility was assigned an experience rating score on a scale from 0 to 5 stars
 - To receive a score for the Google reviews pillar, the facility must have met a minimum threshold of at least 10 published reviews
 - To enable comparability across facilities with differing review volumes, facility scores were adjusted using a Bayesian weighted scoring approach that accounts for variation in the number of reviews

GOOGLE REVIEWS CONTRIBUTE 5% TOWARDS OVERALL SCORE

A score was calculated for each physical rehabilitation center

Scoring model



As a result, 330 physical rehabilitation centers were awarded

Final physical rehabilitation centers

California

Rank	Facility	City	Standout Treatment
1	Sutter Health - California Pacific Regional Rehabilitation Center at CPMC	San Francisco	Amputee
2	California Rehabilitation Institute	Los Angeles	Brain Injury, Spinal Cord Injury, Stroke
3	Loma Linda University Medical Center	Loma Linda	
4	Sutter Health - Alta Bates Summit Medical Center	Oakland	
5	Rancho Los Amigos National Rehabilitation Center	Downey	Spinal Cord Injury

[...]

Florida

Rank	Facility	City	Standout Treatment
1	Jackson Memorial Hospital - Christine E. Lynn Rehabilitation Center	Miami	Brain Injury, Pediatric, Spinal Cord Injury, Stroke
2	Memorial Regional Hospital South	Hollywood	
3	Brooks Rehabilitation Hospital	Jacksonville	Brain Injury, Spinal Cord Injury, Stroke
4	Encompass Health Rehabilitation Hospital of Miami	Miami	
5	Advent Health - Daytona Beach	Daytona Beach	Amputee

[...]

LEADING PHYSICAL REHABILITATION CENTERS WERE AWARDED

America's Best Physical Rehabilitation Centers partner network

Overview of involved parties

The Newsweek logo, featuring the word "Newsweek" in white, bold, sans-serif font on a red rectangular background.

About Newsweek

Newsweek is a premier news magazine and website that has been bringing high-quality journalism to readers around the globe for over 80 years.

Newsweek provides the latest news, in-depth analysis and ideas about international issues, technology, business, culture and politics. In addition to its online and mobile presence, Newsweek publishes weekly English print editions in the United States, Europe/Middle East/Africa and Asia as well as editions in Japanese, Korean, Polish, Serbian and Spanish.

[newsweek.com](https://www.newsweek.com)

The Statista R logo, featuring the word "statista" in a dark blue, sans-serif font, followed by a stylized orange "R" inside a circle.

About Statista R

Statista R is a world leader in the creation of company, brand, and product rankings and top lists, based on comprehensive market research and data analysis: Statista R recognizes the best. With a team of over 100 expert analysts and in cooperation with more than 40 high profile media brands across all continents, Statista R creates transparency for consumers and business decision makers and helps companies build trust and recognition across a plethora of industries and product categories. Visit r.statista.com for further information about Statista R and our rankings.

Statista R is a division of Statista. The leading data and business intelligence portal provides an extensive collection of statistics, reports, and insights on over 80,000 topics from 22,500 sources in 170 industries. Find out more at [statista.com](https://www.statista.com).

Disclaimer

The rankings are comprised exclusively of physical rehabilitation centers that are eligible regarding the scope described in this document. A mention in the ranking is a positive recognition based on peer recommendations and accreditations. The ranking is the result of an elaborate process which, due to the interval of data-collection and analysis, reflects the last 12 months only.

Furthermore, any events preceding or following the period July 9th, 2025 – July 9th, 2026, 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 physical rehabilitation centers or, if possible, accompanied by a visit to a facility. The quality of physical rehabilitation centers that are not included in the rankings is not disputed.

Appendix

Rehabilitation quality metrics used

Patient Safety & Infection Prevention

- Catheter-associated urinary tract infections (CAUTI) - Standardized infection ratio (SIR) (A/B)
- Percentage of IRF patients who experience one or more falls with major injury during their IRF stay - Facility rate
- Clostridium difficile Infection (CDI) - Standardized infection ratio (SIR) (A/B)
- Percentage of healthcare personnel who got a flu shot for the current season - Rate of flu vaccination
- Percentage of patients with pressure ulcers/injuries that are new or worsened - Facility risk-adjusted rate

Patient Outcomes

- Percentage of patients who are at or above an expected ability to care for themselves at discharge - Facility rate
- Percentage of patients who are at or above an expected ability to move around at discharge - Facility rate
- Rate of successful return to home and community from an IRF - Risk-standardized discharge to community rate
- Percentage of patients who are at or above an expected ability to care for themselves and move around at discharge - Facility rate

Medication Management

- Percentage of patients whose medications were reviewed and who received follow-up care when medication issues were identified - Facility rate
- Percentage of patients where the IRF provided a current medication list to the next healthcare setting - Facility rate
- Percentage of patients where the IRF provided a current medication list to the patient, family, and/or caregiver at final discharge - Facility rate

Readmissions

- Rate of potentially preventable hospital readmissions 30 days after discharge from an IRF - Risk-standardized potentially preventable readmission Rate (RSRR)
- Rate of potentially preventable hospital readmissions during the IRF stay - Risk-standardized potentially preventable readmission Rate (RSRR)

Efficiency

- Medicare Spending Per Beneficiary (MSPB) in IRFs - MSPB Score