



Part A: General Information

UID: HOSP706

1. Identification

Facility Name:

Emory University Hospital

County:

DeKalb

Street Address:

1364 Clifton Road, NE

City:

Atlanta

Zip:

30322

Mailing Address:

1364 Clifton Road, NE

Mailing City:

Atlanta

Mailing Zip:

30322

Medicare Provider Number:

110010

Medicaid Provider Number:

000000712A

3. Report Period

Report Data for the full twelve month period, January 1, 2025 - December 31, 2025 (365 days). Do not use a different report period

Check the box to the right if your facility was not operational for the entire year ☐

If your facility was not operational for the entire year, provide the dates the facility was operational

Part B: Survey Contact Information

Person authorized to respond to inquiries about the responses to this survey

Contact Name:

Sara May

Contact Title:

Sr. VP, Heart & Vascular Service Line Clinical Operations

Phone:

678-843-7447

Fax:

678-843-7339

Email:

sara.may@emoryhealthcare.org

Part C: Utilization Data

1. Open Heart Surgery Operations

Report the total number of open heart surgery operations performed during the report period by age and type of operation. Do not include any closed heart surgeries or cardiac catheterization procedures.(Use the blank line to specify another procedure type not included in the list.)

Type of Operation	Ages 0-14	Ages 15+	Total
Coronary bypass	0	139	139
Coronary bypass plus valves	0	36	36
Aortic valve replacement	0	41	41
Mitral valve replacement	0	21	21
Heart transplant	0	74	74
Atrial septal defect	0	1	1
Ventricular septal defect	0	3	3
Tetralogy of fallot	0	0	0
Aortic Aneurysm Repair	0	110	110
Insertion of Heart Assist in	0	195	195
Other	0	46	46
Total	0	666	666

2. Closed Heart Surgery Operations

Report the total number of closed heart surgery operations performed during the report period by age and type of operation. Do not include any open heart surgeries or procedures performed by cardiac catheterization.(Use the blank line to specify another procedure type not included in the list.)

Type of Operation	Ages 0-14	Ages 15+	Total
Coronary bypass	0	60	60
Coarctation of the aorta	0	0	0
Closure of patent ductus arteriosus, age>28 days, by CHS	0	0	0
Closure of patent ductus arteriosus, age<28 days, by CHS	0	0	0
Palliative shunts for cyanotic heart disease	0	0	0
Aortic Transcatheter Valve Repl	0	80	80
Mitral Valve Repair and Replace	0	6	6
Other	0	102	102
Total	0	248	248

3. Coronary Angioplasties Resulting in Emergency Open Heart Surgery Operations

Check box if estimated ☐

During the report period, how many coronary angioplasties performed at your hospital resulted in immediate emergency open heart surgery operations? (Estimate if necessary.)

4. Open Heart Surgery Patients by Race/Ethnicity

Please report the number of unduplicated open heart surgery patients your facility served during the report period using the following race and ethnicity categories.

Race/Ethnicity	Number of Patients
American Indian/Alaska Native	0
Asian	22
Black/African American	282
Hispanic/Latino	30
Pacific Islander/Hawaiian	0
White	303
Multi-Racial	25
Total	662

5. Open Heart Surgery Patients by Gender

Please report the number of open heart surgery patients by gender served during the report period

Gender	Number of Patients
Male	458
Female	204
Total	662

Part D: Financials and Average Charges

1. Average Total Charge and Average Actual Reimbursement

For the report period, report the average total hospital charge, length of stay and number of cases from admissions to discharge, excluding Medicare outliers, for each of the following MS-DRGs. Use the blank lines to specify other DRGs not included in the table.

Selected DRGs	Average Total Hospital Charge	Average Length of Stay	Number of Cases Included in Calculation of Averages	Actual Hospital Total Cases
Heart Transplant (MS-DRG 001 & 002)	1,203,685	40	92	183
Cardiac valve with cardiac catheterization (MS-DRG 216, 217, & 218)	389,851	14	18	35
Cardiac valve without cardiac catheterization (MS-DRG 219, 220, & 221)	290,696	8	180	282
Coronary bypass with PTCA (MS-DRG 231 & 232)	209,642	5	22	23
Major cardiovascular procedures with CC (MS-DRG 268-272)	379,890	14	15	36
Major cardiovascular procedures without CC (MS-DRG 268-272)	135,405	7	3	3
Other cardiothoracic procedures (MS-DRG 228, 229 & 230)	210,364	6	9	13
ECMO or Trach w M	1,220,559	33	14	44
Other Heart Assist S	0	0	0	1
Coronary Bypass w	247,457	8	14	22
Coronary Bypass w/	223,907	7	104	150
Other	182,493	6	90	122

2. Heart Surgery Patients and Operations by Primary Payment Source

Please report the total number of unduplicated open heart surgery patients and operations by primary payment source. Report Peachcare for Kids patients under Third-Party.

	Medicare	Medicaid	Third Party (Including Peachcare)	Self- Pay
Number of Open Heart Surgery Patients	277	49	312	24
Number of Operations	277	50	314	25

3. Total Charges and Actual Reimbursement for Open Heart Surgeries

Please report the total charges for open heart surgeries provided during the report period. Also, report the actual reimbursement received for charges for open heart surgeries provided during the report period.

Total Charges:

Actual Reimbursement:

4. Total Uncompensated Charges and Total Uncompensated Patients

Please report the total uncompensated charges for open heart surgeries provided to patients that qualified as indigent or charity care cases. Also, report the number of patients.

Total Uncompensated Charges:

Total Uncompensated Patients:

5. Adjusted Gross Revenue

Also report the adjusted gross revenue for open heart surgery services provided during the report period.

Adjusted Gross Revenue:

260,545,659

Part E: Peer Review

1. Participation in Peer Review

Check the box to the right if your program/facility participates in an external or national peer review and outcomes reporting system



If you indicated yes above, please provide the name(s) of the peer review/outcomes reporting organization(s) below

Vizient; Society of Thoracic Surgeons; Adult Cardiac Surgery Registry; Intermacs for VADS

2. Community Education Programs

How many community education programs did your program/facility participate in during the reporting period?

0

Part F: Patient Origin 2025

1. Patient Origin 2025

Please report the number of open heart surgery patients by county and age category. The total number of patients reported here must balance to the totals reported in Part C, Questions 4 and 5. To add a row press the button. To delete a row press the minus button at the end of the row.

County	Patients Ages 0-14	Patients Ages 15+	Total
Alabama	0	22	22
Appling	0	0	0
Atkinson	0	0	0
Bacon	0	0	0
Baker	0	1	1
Baldwin	0	2	2
Banks	0	0	0
Barrow	0	3	3
Bartow	0	2	2
Ben Hill	0	2	2
Berrien	0	3	3
Bibb	0	11	11
Bleckley	0	4	4
Brantley	0	0	0
Brooks	0	1	1
Bryan	0	1	1
Bulloch	0	3	3
Burke	0	0	0
Butts	0	4	4
Calhoun	0	0	0
Camden	0	0	0
Candler	0	1	1
Carroll	0	14	14
Catoosa	0	3	3
Charlton	0	0	0
Chatham	0	13	13
Chattahoochee	0	0	0

Chattooga	0	0	0
Cherokee	0	8	8
Clarke	0	4	4
Clay	0	0	0
Clayton	0	21	21
Clinch	0	2	2
Cobb	0	16	16
Coffee	0	7	7
Colquitt	0	1	1
Columbia	0	7	7
Cook	0	2	2
Coweta	0	2	2
Crawford	0	1	1
Crisp	0	4	4
Dade	0	0	0
Dawson	0	0	0
Decatur	0	2	2
DeKalb	0	92	92
Dodge	0	3	3
Dooly	0	1	1
Dougherty	0	5	5
Douglas	0	3	3
Early	0	0	0
Effingham	0	4	4
Elbert	0	3	3
Emanuel	0	2	2
Evans	0	2	2

Fannin	0	0	0
Fayette	0	4	4
Florida	0	3	3
Floyd	0	3	3
Forsyth	0	9	9
Franklin	0	0	0
Fulton	0	60	60
Gilmer	0	1	1
Glascokc	0	0	0
Glynn	0	3	3
Gordon	0	2	2
Grady	0	2	2
Greene	0	0	0
Gwinnett	0	56	56
Habersham	0	2	2
Hall	0	4	4
Hancock	0	1	1
Haralson	0	1	1
Harris	0	5	5
Hart	0	2	2
Heard	0	1	1
Henry	0	15	15
Houston	0	30	30
Irwin	0	1	1
Jackson	0	1	1
Jasper	0	1	1
Jefferson	0	0	0
John D...	0	0	0

Jeff Davis	0	0	0
Jenkins	0	1	1
Johnson	0	0	0
Jones	0	2	2
Lamar	0	0	0
Lanier	0	0	0
Laurens	0	1	1
Lee	0	2	2
Liberty	0	2	2
Lincoln	0	0	0
Long	0	2	2
Lowndes	0	9	9
Lumpkin	0	0	0
Macon	0	1	1
Madison	0	1	1
Marion	0	1	1
McDuffie	0	1	1
McIntosh	0	0	0
Meriwether	0	3	3
Miller	0	0	0
Mitchell	0	2	2
Monroe	0	3	3
Montgomery	0	0	0
Morgan	0	1	1
Murray	0	2	2
Muscogee	0	24	24
Newton	0	3	3
North Carolina	0	4	4

Oconee	0	1	1
Oglethorpe	0	1	1
Other Out of State	0	8	8
Paulding	0	3	3
Peach	0	5	5
Pickens	0	0	0
Pierce	0	0	0
Pike	0	0	0
Polk	0	1	1
Pulaski	0	1	1
Putnam	0	0	0
Quitman	0	0	0
Rabun	0	0	0
Randolph	0	1	1
Richmond	0	7	7
Rockdale	0	3	3
Schley	0	1	1
Screven	0	1	1
Seminole	0	0	0
South Carolina	0	12	12
Spalding	0	3	3
Stephens	0	1	1
Stewart	0	0	0
Sumter	0	3	3
Talbot	0	2	2
Tattnall	0	2	2
Taylor	0	0	0

Taylor	0	0	0
Telfair	0	1	1
Tennessee	0	7	7
Terrell	0	1	1
Thomas	0	2	2
Tift	0	11	11
Toombs	0	1	1
Towns	0	0	0
Treutlen	0	0	0
Troup	0	2	2
Turner	0	3	3
Twiggs	0	0	0
Union	0	0	0
Upson	0	1	1
Walker	0	2	2
Walton	0	4	4
Ware	0	2	2
Warren	0	0	0
Washington	0	2	2
Wayne	0	1	1
Webster	0	3	3
Wheeler	0	0	0
White	0	0	0
Whitfield	0	2	2
Wilcox	0	3	3
Wilkes	0	1	1
Wilkinson	0	1	1
Worth	0	2	2

Totals	0	662	662
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Please note that the survey WILL NOT BE ACCEPTED without the authorized signature of the Chief Executive Officer or Executive Director (principal officer) of the facility. The signature can be completed only AFTER all survey data has been finalized. By law, the signatory is attesting under penalty of law that the information is accurate and complete. I state, certify and attest that to the best of my knowledge upon conducting due diligence to assure the accuracy and completeness of all data, and based upon my affirmative review of the entire completed survey, this completed survey contains no untrue statement, or inaccurate data, nor omits requested material information or data. I further state, certify and attest that I have reviewed the entire contents of the completed survey with all appropriate staff of the facility. I further understand that inaccurate, incomplete or omitted data could lead to sanctions against me or my facility. I further understand that a typed version of my name is being accepted as my original signature pursuant to the Georgia Electronic Records and Signature Act. **Do not sign until you are ready to submit. Signed surveys will be locked to prevent post-validation revisions that could throw the survey out of balance. If you sign the survey, you will need to contact us to unlock it for revision.**

Authorized Signature

Angel Leon, MD

Date

08/05/2026



Title

Chief Operating Officer, EUH

Comments

