## **Hospital Quality Reporting Important Dates and Deadlines**

(All dates are subject to change.)



Hospital IQR Program					<b>HAC Reduction Program</b>
Discharge Quarter	HCAHPS Submission	Population & Sampling Submission (Required for chart-abstracted measures only)	Clinical Submission	COVID-19 HCP Submission	HAI Submission
Q1 2024	07-03-2024	08-01-2024	08-15-2024	08-15-2024	08-15-2024
Q2 2024	10-02-2024	11-04-2024 <sup>1</sup>	11-18-2024 <sup>1</sup>	11-18-2024 <sup>1</sup>	11-18-2024 <sup>1</sup>
Q3 2024	01-02-2025 <sup>1</sup>	02-03-2025 <sup>1</sup>	02-18-2025 <sup>1</sup>	02-18-2025 <sup>1</sup>	02-18-2025 <sup>1</sup>
Q4 2024	04-02-2025	05-01-2025	05-15-2025	05-15-2025	05-15-2025
Discharge Q	Validation				
		HAI Validation Templates	Estimated CDAC Record Request	Estimated Date Records Due to CDAC	
Q3 2023	Rando	m: 02-15-2024 Targeted: 05-20-2024	Random: 02-28-2024 Targeted: 06-07-2024	Random: 03-30-2024 Targeted: 07-08-2024	
Q4 2023	Rando	m: 05-15-2024 Targeted: 06-06-2024	Random: 06-01-2024 Targeted: 07-09-2024	Random: 07-01-2024 Targeted: 08-07-2024	
Q1 2024	Rai	ndom: 08-15-2024 Targeted: TBD	Random: 08-23-2024 Targeted: TBD	Random: 09-23-2024 Targeted: TBD	
Q2 2024	Rai	ndom: 11-18-2024 Targeted: TBD	Random: 12-11-2024 Targeted: TBD	Random: 01-09-2025 Targeted: TBD	
Q3 2024	Rai	ndom: 02-18-2025 Targeted: TBD	Random: 02-28-2025 Targeted: TBD	Random: 03-31-2025 Targeted: TBD	
Q4 2024	Ra	ndom: 05-15-2025 Targeted: TBD	Random: 06-02-2025 Targeted: TBD	Random: 07-01-2025 Targeted: TBD	
			eCQM Validation		
Fiscal Year (FY)/Calendar Year (CY)			Estimated CDAC Record Request	Estimated Date Records Due to CDAC	
FY 2027/CY 2024			Spring 2025	Spring 2025	
			FY 2026 APU		
Measure/Requirement			Reporting Period	Submission Deadline/Period	
Hybrid Measures <sup>2</sup>			July 1, 2023–June 30, 2024	October 1, 2024	
eCQMs <sup>3</sup>			4 Quarters of Data (Q1 2024, Q2 2024, Q3 2024, Q4 2024)	February 28, 2025	
Web-Based Structural/Process Measures <sup>4</sup>			January 1, 2024–December 31, 2024	April 1, 2024–May 15, 2025	
DACA (Data Accuracy and Completeness Acknowledgement)			January 1 2024–December 31, 2024	April 1, 2025–May 15, 2025	
			FY 2027 APU		
Measure/Requirement			Reporting Period	Submission Deadline/Period	
Influenza HCP Vaccination		nza HCP Vaccination	October 1, 2024–March 31, 2025	May 15, 2025	
	Total Hip	Arthroplasty/Total Knee Arthroplasty	Patient-Reported Outcome-Based Performance Mea	sure Voluntary F	Reporting
FY			Reporting Period	Submission Deadline/Period	
2025 Voluntary Reporting			Procedure Performed: January 1, 2023–June 30, 2023 Post-op Data: Oct 28, 2023–August 28, 2024	Post-op Data: September 30, 2024	
2026 Voluntary Reporting			Procedure Performed: July 1, 2023–June 30, 2024 Pre-op Data: April 2, 2023–June 30, 2024 Post-op Data: April 26, 2024–August 29, 2025	Pre-op Data: September 30, 2024 Post-op Data: September 30, 2025	

<sup>&</sup>lt;sup>1</sup> Submission deadline falls on a weekend or holiday and is moved to the next business day.

- Q3 2023 (Jul 1-Sep 30); Q4 2023 (Oct 1-Dec 31); Q1 2024 (Jan 1-Mar 31); Q2 2024 (Apr 1-June 30); Q3 2024 (July 1- Sep 30); Q4 2024 (Oct 1-Dec 31)
- Generally, data must be submitted no later than 11:59 p.m. Pacific Time on the submission deadline except for HCAHPS. HCAHPS must be submitted by 11:59 p.m. Central Time.
- Data for clinical measures, eCQMs, structural measures, population and sampling, DACA, hybrid measures, and the THA/TKA PRO-PM are transmitted within the *HQR Secure Portal*.
- HAI Validation Template data are transmitted within the *HQR Secure Portal* via Managed File Transfer.
- HAI, COVID-19 HCP, and Influenza HCP measure data are submitted to the CDC through the NHSN.

<sup>&</sup>lt;sup>2</sup> Hybrid includes the Hospital-Wide Readmission (HWR) and Hospital-Wide Mortality (HWM) measures.

<sup>&</sup>lt;sup>3</sup> Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For FY 2026, hospitals must report three self-selected eCQMs <u>plus</u> the Safe Use of Opioids-Concurrent Prescribing, Cesarean Birth (PC-02), and Severe Obstetrics Complications (PC-07) eCQMs from each quarter in CY 2024. The eCQMs must be the same across all quarters.

<sup>&</sup>lt;sup>4</sup> Web-based structural/process measures include the mandatory reporting of Maternal Morbidity, Hospital Commitment to Health Equity, and Social Drivers of Health structural measures.