

Hospital Quality Reporting Important Dates and Deadlines

(All dates are subject to change.)



Hospital IQR Program					HAC Reduction Program	
Discharge Quarter	HCAHPS Submission	Population & Sampling Submission (Required for chart-abstracted measures only)	Clinical Submission		COVID-19 HCP Submission	HAI Submission
Q3 2024	01-02-2025 ¹	02-03-2025 ¹	02-18-2025 ¹		02-18-2025 ¹	02-18-2025 ¹
Q4 2024	04-02-2025	05-01-2025	05-15-2025		05-15-2025	05-15-2025
Q1 2025	07-01-2025	08-04-2025 ¹	08-18-2025 ¹		08-18-2025 ¹	08-18-2025 ¹
Q2 2025	10-01-2025	11-03-2025 ¹	11/17/2025 ¹		11/17/2025 ¹	11/17/2025 ¹
Discharge Quarter	Validation					
	HAI Validation Templates		Estimated CDAC Record Request		Estimated Date Records Due to CDAC	
Q1 2024	Random: 08-15-2024 Targeted: TBD		Random: 08-23-2024 Targeted: TBD		Random: 09-23-2024 Targeted: TBD	
Q2 2024	Random: 11-18-2024 Targeted: TBD		Random: 12-11-2024 Targeted: TBD		Random: 01-09-2025 Targeted: TBD	
Q3 2024	Random: 02-18-2025 Targeted: TBD		Random: 02-28-2025 Targeted: TBD		Random: 03-31-2025 Targeted: TBD	
Q4 2024	Random: 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	
eCQMs ²			4 Quarters of Data (Q1 2024, Q2 2024, Q3 2024, Q4 2024)		February 28, 2025	
Web-Based Structural/Process Measures ⁴			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			October 1, 2024–March 31, 2025		May 15, 2025	
Total Hip Arthroplasty/Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure Reporting						
FY			Reporting Period		Submission Deadline/Period	
2026 Voluntary Reporting			Procedure Performed: July 1, 2023–June 30, 2024 Post-op Data: April 26, 2024–August 29, 2025		Post-op Data: September 30, 2025	
2027 Mandatory Reporting			Procedure Performed: July 1, 2024–June 30, 2025 Pre-op Data: April 2, 2024–June 30, 2025		Pre-op Data: September 30, 2025	

¹ Submission deadline falls on a weekend or holiday and is moved to the next business day.

² Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For FY 2026, hospitals must report three self-selected eCQMs **plus** 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.

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

- Q3 2024 (July 1- Sep 30); Q4 2024 (Oct 1-Dec 31); Q1 2025 (Jan 1-March31); Q2 2025 (April 1-June 30)
- 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.