## **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 (SEP-1)	HAI Submission
Q1 2025	07-09-2025 <sup>1</sup>	08-04-2025 <sup>2</sup>	08-18-2025 <sup>2</sup>	08-18-2025 <sup>2</sup>
Q2 2025	10-08-2025 <sup>1</sup>	11-03-2025 <sup>2</sup>	11-17-2025 <sup>2</sup>	11-17-2025 <sup>2</sup>
Q3 2025	01-14-2026 <sup>1</sup>	02-02-2026 <sup>2</sup>	02-17-2026 <sup>2</sup>	02-17-2026 <sup>2</sup>
Q4 2025	04-08-2026 <sup>1</sup>	05-04-2026 <sup>2</sup>	05-18-2026 <sup>2</sup>	05-18-2026 <sup>2</sup>
Discharge Quarter	Validation			
	HAI Validation Templates		Estimated CDAC Record Request	<b>Estimated Date Records Due to CDAC</b>
Q1 2025	Random: 08-15-2025 Targeted: TBD		Random: 08-25-2025 Targeted: TBD	Random: 09-23-2025 Targeted: TBD
Q2 2025	Random: 11-17-2025 Targeted: TBD		Random: 12-10-2025 Targeted: TBD	Random: 01-08-2026 Targeted: TBD
Q3 2025	Random: 02-17-2026 Targeted: TBD		Random: 02-28-2026 Targeted: TBD	Random: 03-27-2026 Targeted: TBD
Q4 2025	Random: 05-15-2026 Targeted: TBD		Random: 05-25-2026 Targeted: TBD	Random: 06-23-2026 Targeted: TBD
			eCQM Validation	
Fiscal Year (FY)/Calendar Year (CY)			Estimated CDAC Record Request	Estimated Date Records Due to CDAC
CY 2025/FY 2028			Spring 2026	Spring 2026
FY 2027 APU				
Measure/Requirement		ure/Requirement	Reporting Period	Submission Deadline/Period
Web-Based Structural/Process Measures <sup>3</sup>			January 1, 2025–December 31, 2025	April 1, 2026–May 18, 2026
DACA (Data Accuracy and Completeness Acknowledgement)		nd Completeness Acknowledgement)	January 1, 2025–December 31, 2025	April 1, 2026–May 18, 2026
eCQMs (Electronic Clinical Quality Measures)			January 1, 2025-December 31, 2025	March 2, 2026 <sup>2</sup>
			FY 2028 APU	
Measure/Requirement			Reporting Period	Submission Deadline/Period
Influenza HCP Vaccination			October 1, 2025–March 31, 2026	May 15, 2026
Total Hip Arthroplasty/Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure Reporting				
FY			Reporting Period	Submission Deadline/Period
	2027 V	oluntary Reporting	Procedure Performed: July 1, 2023–June 30, 2024 Post-op Data: April 26, 2024–August 29, 2025	Post-op Data: September 30, 2025
2028 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

<sup>&</sup>lt;sup>1</sup> The HCAHPS deadline has been extended by one week due to the new survey being implemented beginning with CY 2025 discharges.

- Q1 2025 (Jan 1-March31); Q2 2025 (April 1-June 30); Q3 2025 (July 1-September 30); Q4 2025 (October 1-December 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, 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 Unified File Management (UFM)/Managed File Transfer (MFT).
- HAI, Influenza HCP, and Patient Safety Structural measure data are submitted to the CDC through the NHSN.

<sup>&</sup>lt;sup>2</sup> Submission deadline falls on a weekend or holiday and is moved to the next business day.

<sup>&</sup>lt;sup>3</sup> Web-based structural/process measures include the mandatory reporting of Maternal Morbidity, Age Friendly, and Patient Safety, structural measures.