	Quarter 2 (Q2) 2025 Hospital Inpatient Quality Reporting (IQR) Program Checklist	
Due	Task	√
10/8/2025	Checking Submission of Q2 2025 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Data	
	HCAHPS Survey Data should display as "Submitted" for April, May, and June on the Submissions Requirements report. See below, under Checking Submission of Q2 2025 Inpatient Data, for guidance on how to run reports.	
11/3/2025	Submitting Q2 2025 Inpatient Population and Sampling Counts Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted SEP-1 measure only)	
	 Click Data Submissions from the navigation on the left-hand side of the screen. Select the Population and Sampling tab. 	
	 Click Data Form. Verify that that the Data Form shows IQR. Click on Launch Data Form. Verify that the Reporting Period is Q2 2025 and Click on Enter. 	
	Submitting Q2 2025 Inpatient Population and Sampling XML Files Via Simple File Submissions Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted SEP-1 measure only)	
	 Click Data Submissions from the navigation on the left-hand side of the screen. Select the Population and Sampling tab. 	
	 Click File Upload. Select Production. Data submitted under Test will not be stored in the HQR system and will not count as meeting program requirements. 	
	 Verify that the Reporting Period is Q2 2025 and Click on Enter. 	
11/17/2025	Checking Submission of Q2 2025 Inpatient Data	
	1. Log in to the Hospital Quality Reporting Secure Portal using your HARP User ID and Password.	
	2. Go to the Dashboard located on the left-hand side of the screen.	
	 Select Program Reporting from the navigation on the left-hand side of the screen. Select Submission Requirements from the dropdown. This is where you check to see if your organization is meeting reporting requirements. Access is dependent upon permissions. From this page you can also 	
	view the Submission Requirements Dashboard. To verify Submission Requirements (formerly known as the Provider Participation Report)	
	 Select IQR from the Program dropdown. Select Q2 2025 from the Discharge Quarter dropdown. 	
	3. Click Export CSV.	
	4. View the Submission Requirements for the following:☐ Column M "measure_set" (<i>Measure Set</i>): IQR-SEP	
	Column Q "population" (<i>Total Patient Population</i>) and column P "sample" (<i>Total Sample Size</i>) case counts will display using Population and Sampling data. " Not Submitted " means Population and Sampling counts have not been submitted. If submitting, this must be done before the Population and	
	Sampling deadline. Please see the Population and Sampling directions above. ☐ Column N "total-cases" (<i>Total Cases Accepted</i>) column should be ≥ your <i>Total Patient Population</i> and/or column O "total_claims" (<i>Total Medicare</i> Claims) unless you are electing to sample. If your hospital is sampling, ensure the <i>Total Cases Accepted</i> are ≥ the minimum sample requirement.	
	☐ HCAHPS Survey Data is located under columns X through Z.	
	Submission Requirements Dashboard The submission requirements dashboard allows you to review program requirements and status, and export	
	reports.	
	Select IQR from the Select a program dropdown.	
	 Verify that the Fiscal Year is 2027 Select the requirement(s) you wish to review. 	
	4. Select Export to export PDF reports.	

For questions, contact the Inpatient and Outpatient Healthcare Quality Systems Development and Program Support at (844) 472-4477, (866) 800-8765, or via the Hospital Inpatient Questions and Answers tool at https://cmsqualitysupport.servicenowservices.com/qnet_qa.