

Hospital Quality Reporting Important Dates and Deadlines

(All dates are subject to change.)



Hospital IQR Program				IQR & HAC Reduction Programs	
Discharge Quarter	HCAHPS Submission	Population & Sampling Submission (Required for chart-abstracted measures only)	Clinical Submission (SEP-1)	NHSN HAI Submission	
				IQR: CAUTI- & CLABSI- Onc	HACRP: HAI ³
Q3 2025	01-14-2026 ¹	02-02-2026 ²	02-17-2026 ²	NA	02-17-2026 ²
Q4 2025	04-08-2026 ¹	05-04-2026 ²	05-18-2026 ²	NA	05-18-2026 ²
Q1 2026	07-08-2026 ¹	08-03-2026 ²	08-17-2026 ²	08-17-2026 ²	08-17-2026 ²
Q2 2026	10-14-2026 ¹	11-02-2026 ²	11-16-2026 ²	11-16-2026 ²	11-16-2026 ²
Discharge Quarter	Validation				
	HACRP HAI Validation Templates		Estimated CDAC Record Request	Estimated Date Records Due to CDAC	
Q1 2025	Targeted: 03-30-2026		Targeted: 04-06-2026	Targeted: 05-05-2026	
Q2 2025	Targeted: 04-20-2026		Targeted: 05-05-2026	Targeted: 06-03-2026	
Q3 2025	Random: 02-17-2026 Targeted: 05-20-2026		Random: 02-28-2026 Targeted: 06-30-2026	Random: 03-27-2026 Targeted: 07-02-2026	
Q4 2025	Random: 05-15-2026 Targeted: 06-03-2026		Random: 05-25-2026 Targeted: 07-02-2026	Random: 06-23-2026 Targeted: 07-31-2026	
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			Reporting Period	Submission Deadline/Period	
Web-Based Structural/Process Measures ⁴			January 1, 2025–December 31, 2025	April 1, 2026–May 18, 2026	
DACA (Data Accuracy and 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 ²	
FY 2028 APU					
Measure/Requirement			Reporting Period	Submission Deadline/Period	
Influenza HCP Vaccination			October 1, 2025–March 31, 2026	May 18, 2026	
Hybrid Hospital-Wide Mortality and Hybrid Hospital-Wide Readmission			July 1, 2025-June 30, 2026	October 1, 2026	
Total Hip Arthroplasty/Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure Reporting					
FY			Reporting Period	Submission Deadline/Period	
2028 Mandatory Reporting			Procedure Performed: July 1, 2024-June 30, 2025 Post-op Data: April 27, 2025-August 29, 2026	Post-op Data: September 30, 2026	
2029 Mandatory Reporting			Procedure Performed: July 1, 2025-June 30, 2026 Pre-op Data: April 2, 2026-June 30, 2026	Pre-op Data: September 30, 2026	

¹ The HCAHPS deadline has been extended by one week due to the new survey being implemented beginning with CY 2025 discharges.

² Submission deadline falls on a weekend or holiday and is moved to the next business day.

³ Hospital-Acquired Condition (HAC) Reduction Program Healthcare-Associated Infection (HAI) measures include Catheter-Associated Urinary Tract Infection (CAUTI), Central Line-Associated Bloodstream Infection (CLABSI), Colon and Abdominal Hysterectomy Surgical Site Infection (SSI), Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteremia, and *Clostridium difficile* Infection (CDI).

⁴ Web-based structural/process measures include the mandatory reporting of Maternal Morbidity, Age Friendly, and Patient Safety, structural measures.

• Q1 (Jan 1–March 31); Q2 (April 1–June 30); Q3 (July 1–September 30); Q4 (October 1–December 31)

Hospital Quality Reporting Important Dates and Deadlines

(All dates are subject to change.)



- 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, eQMs, hybrid core clinical data elements, 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, CAUTI-Onc, CLABSI-Onc, Influenza HCP, and Patient Safety Structural measure data are submitted to the CDC through the NHSN.