

## CY 2026/FY 2028 Hospital IQR Program Reporting Periods

The following table provides the FY 2028 measure reporting periods and collection notes for the Hospital IQR Program.

HCAHPS Survey and Population & Sampling for Clinical Measures		Clinical and HAI <sup>1</sup> Measures and eQMs <sup>2</sup>		Influenza HCP Measure		DACA, Web-Based <sup>3</sup> and Patient Safety Measures	Hybrid Measures	THA/TKA PRO-PM Measure
CY Discharge Quarter	CY Discharge Months	CY Discharge Quarter	CY Discharge Months	CY Discharge Quarter	CY Discharge Months	Collection Notes	Collection Notes	Collection Notes
Q1 2026	Jan-26	Q1 2026	Jan-26	Q4 2025	Oct-25	Reporting: April 1, 2027, through May 17, 2027, with respect to the data collection period of January 1, 2026, through December 31, 2026	Mandatory Performance Period: July 1, 2025, through June 30, 2026	Mandatory Reporting Procedure Period: July 1, 2024, through June 30, 2025, procedures
	Feb-26		Feb-26		Nov-25			
	Mar-26		Mar-26		Dec-25			
Q2 2026	Apr-26	Q2 2026	Apr-26		Jan-26			
	May-26		May-26		Feb-26			
	Jun-26		Jun-26		Mar-26			
Q3 2026	Jul-26	Q3 2026	Jul-26	Q1 2026	Jan-26			
	Aug-26		Aug-26		Feb-26			
	Sep-26		Sep-26		Mar-26			
Q4 2026	Oct-26	Q4 2026	Oct-26		Jan-26			
	Nov-26		Nov-26		Feb-26			
	Dec-26		Dec-26		Mar-26			

<sup>1</sup> The Healthcare-Associated Infection measures include the Catheter-Associated Urinary Tract Infection and Central Line-Associated Bloodstream Infection Oncology measures.

<sup>2</sup> For FY 2028, hospitals must successfully submit four quarters (Q1, Q2, Q3, and Q4) of 2026 data for three self-selected eQMs PLUS the Safe Use of Opioids-Concurrent Prescribing, Cesarean Birth, Severe Obstetrics Complications, Hospital Harm-Severe Hyperglycemia, and Hospital Harm-Severe Hypoglycemia eQMs.

<sup>3</sup> Web-based measures include Maternal Morbidity and Age Friendly Hospital measures.

**Note:** Data validation for FY 2028 includes Quarter (Q)1 2025 through Q4 2025 data for both chart-abstracted measures and eQMs.

Acronyms and Terms		
Clinical: Chart-Abstracted Clinical Process of Care Measures	FY: fiscal year	PRO-PM: Patient Reported Outcome Performance Measure
CMS: Centers for Medicare & Medicaid Service	HAI: Healthcare-Associated Infection	Q: Quarter
CY: calendar year	HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems	THA/TKA: Total Hip Arthroplasty/Total Knee Arthroplasty
DACA: Data Accuracy and Completeness Acknowledgement	HCP: healthcare personnel	
eCQM: electronic clinical quality measure	IQR: Inpatient Quality Reporting	