

| <b>Quarter 3 (Q3) 2026 Hospital Inpatient Quality Reporting (IQR) Program Checklist</b><br><b>NOTE: The directions provided below are current at the time of posting. The HQR displays may be different depending upon your role and access.</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |
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| Due                                                                                                                                                                                                                                              | Task                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ✓                        |
|                                                                                                                                                                                                                                                  | <b>Accessing the <i>Hospital Quality Reporting (HQR) Secure Portal</i></b><br>1. <b>Log in</b> to the <a href="#">HQR Secure Portal</a> using your HARP User ID and Password.<br>2. Go to the navigation panel on the left side of the screen.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |
| 01/13/2027                                                                                                                                                                                                                                       | <b>Checking Submission of Q3 2026 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Data</b><br><i>HCAHPS Survey Data</i> should display as “ <b>Submitted</b> ” for <i>July, August, and September</i> on the Submission Requirements report. For instructions on running reports, see the “Checking Submission of Q3 2026 Inpatient Data” section below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> |
| 02/01/2027                                                                                                                                                                                                                                       | <b>Submitting Q3 2026 Inpatient Population and Sampling Counts Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted measures only)</b><br>1. <b>Select</b> Data Submissions from the navigation panel on the left side of the screen.<br>2. <b>Select</b> the Population and Sampling tab.<br>3. <b>Select</b> Data Form, then select IQR Launch Data Form.<br>4. Verify that the Reporting Period is Q3 2026 in the upper-right corner of the page, then <b>select</b> Enter.<br><br><b>Submitting Q3 2026 Inpatient Population and Sampling XML Files Via Simple File Submissions Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted measures only)</b><br>1. <b>Select</b> Data Submissions from the navigation panel on the left side of the screen.<br>2. <b>Select</b> the Population and Sampling tab.<br>3. <b>Click</b> File Upload.<br>4. <b>Select</b> Production. Data submitted under Test is not stored in the HQR system and does not count toward program requirements.<br>5. Choose Select Files to browse your computer or drag and drop the files into the highlighted area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> |
| 02/16/2027                                                                                                                                                                                                                                       | <b>Submitting Q3 2026 CAUTI-Onc and CLABSI-Onc Measures</b><br><b>Data is entered in the <a href="#">National Healthcare Safety Network (NHSN)</a>.</b><br><b>NOTE:</b> Hospitals that do not have any oncology locations to map to must submit the IPPS Measure Exception form by May 17, 2027.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> |
| 02/16/2027                                                                                                                                                                                                                                       | <b>Checking Submission of Q3 2026 Inpatient Data</b><br>1. <b>Log in</b> to the <i>Hospital Quality Reporting Secure Portal</i> using your HARP User ID and Password. The Dashboard displays open submission periods, deadlines, and upcoming submission periods, including when each period opens and closes.<br>2. <b>Select</b> Program Reporting from the navigation panel on the left side of the screen to verify your data submissions.<br>3. <b>Select</b> Submission Requirements from the dropdown menu, then select the Submission Requirements Dashboard navigation card.<br><br><b>Submission Requirements Dashboard and Reports</b><br>The Submission Requirements dashboard allows you to review program requirements and submission status and export reports.<br>1. Under Select a Program, <b>select</b> IQR. This opens the program’s Submission Requirements page.<br>2. From the Fiscal Year dropdown menu on the right side of the screen, <b>select</b> FY 2028. This view shows the current submission status for measures and program requirements; it does not confirm that a facility is eligible or has met all requirements.<br>3. To expand a section and view its contents, <b>select</b> the down arrow to the right of the section title. Each section provides details by discharge quarter, reporting period, performance period, or year. Expand and review each section to confirm data submission for each measure before exporting the information on this page.<br>4. To meet Q3 2026 IQR requirements, the following items should display a rate, met, and/or as submitted: <ol style="list-style-type: none"> <li>Population and Sampling</li> <li>Chart-abstracted SEP-1</li> <li>HAI CAUTI-Onc and CLABSI-Onc</li> <li>HCAHPS</li> </ol> | <input type="checkbox"/> |

## Quarter 3 (Q3) 2026 Hospital Inpatient Quality Reporting (IQR) Program Checklist

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| Due | Task                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ✓ |
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|     | <p>5. Go to the Export button at the top of the page, then <b>select</b> PDF or CSV to download the report.</p> <p><b>Performance Reports</b></p> <p>Performance reports allow facilities to review submitted quality measures, track clinical metrics in real time, validate data, and compare performance with state and national benchmarks.</p> <ol style="list-style-type: none"><li>1. From the navigation menu on the left side of the screen, <b>select</b> Program Reporting from the menu.</li><li>2. <b>Select</b> Performance Reports. You can now <b>select</b> the Performance Report Dashboard navigation card and continue to the next screen.</li><li>3. Under Select a Program, <b>select</b> the IQR navigation card. This brings you to the program's Performance Report page.</li><li>4. From the Fiscal Year dropdown menu on the right side of the screen, <b>select</b> 2028. Note: State and national rates displayed on the page are updated continuously while the submission period remains open. Each section provides facility, state, and national details by quarter, reporting period, performance period, or year. Use this dashboard to verify submissions, validate data, and compare facility results with state and national benchmarks.</li><li>5. To expand each section and view its contents, <b>select</b> the down arrow to the right of the section title. Please expand each individual section and review your data.</li><li>6. To export the information on this page, go to the Export button at the top right of the page, then <b>select</b> PDF or CSV to download.</li></ol> |   |

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/gnet\\_qa](https://cmsqualitysupport.servicenowservices.com/gnet_qa).