



# **PCHQR Program: Preparing for August 2024 Submissions**

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Quality Reporting (PCHQR) Program  
Inpatient and Outpatient Healthcare Quality Systems Development and  
Program Support

**July 22, 2024**

# Webinar Questions

- Please email any questions related to this webinar to [WebinarQuestions@hsag.com](mailto:WebinarQuestions@hsag.com).
  - Write “PCHQR Program: Preparing for August 2024 Submissions” in the subject line.
  - Include your question and the applicable slide number in the body of the email.
- For questions unrelated to the webinar topic, use the [QualityNet Question and Answer Tool](#).

# Acronyms and Abbreviations

<b>CAUTI</b>	catheter-associated urinary tract infection	<b>HCP</b>	healthcare personnel
<b>CDC</b>	Centers for Disease Control and Prevention	<b>HQR</b>	Hospital Quality Reporting
<b>CDI</b>	<i>Clostridioides difficile</i> infection	<b>MRSA</b>	Methicillin-resistant <i>Staphylococcus aureus</i>
<b>CLABSI</b>	Central line-associated bloodstream infection	<b>NHSN</b>	National Healthcare Safety Network
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>PCH</b>	Prospective Payment System-exempt Cancer Hospital
<b>CY</b>	calendar year	<b>PCHQR</b>	Prospective Payment System-Exempt Cancer Hospital Quality Reporting
<b>DACA</b>	Data Accuracy and Completeness Acknowledgement	<b>PPS</b>	Prospective Payment System
<b>FY</b>	fiscal year	<b>Q</b>	quarter
<b>HAI</b>	healthcare-associated infection	<b>SAMS</b>	Secure Access Management Services
<b>HCAHPS</b>	Hospital Consumer Assessment of Healthcare Providers and Systems	<b>SSI</b>	Surgical Site Infection

# Purpose

This presentation will review information to successfully submit the following:

- Quarter (Q)1 2024 healthcare-associated infection (HAI) and COVID-19 Vaccination Among Healthcare Personnel (HCP) measure data via the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN)
- Fiscal year (FY) 2025 Data Accuracy and Completeness Acknowledgment (DACA) via the *Hospital Quality Reporting (HQR) Secure Portal*

# Objectives

Participants will be able to demonstrate an understanding of the PCHQR Program's submission methods and requirements, as evidenced by successfully submitting the HAI and COVID-19 HCP measure data and FY 2025 DACA.

# Summary of Submissions

- The data submission period is July 1–August 15, 2024.
- The following measures are due by August 15, 2024:
  - Q1 2024 HAI measure data
  - Q1 2024 COVID-19 HCP measure data
- The FY 2025 DACA is due by September 3, 2024.

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## **HAI and COVID-19 HCP Measure Data**

# HAI and COVID-19 HCP Measure Data Submissions

Submit the following Q1 2024 measure data via NHSN:

- HAI
  - Catheter-associated urinary tract infection (CAUTI)
  - Central line-associated bloodstream infection (CLABSI)
  - *Clostridioides difficile* infections (CDI)
  - Methicillin-resistant *Staphylococcus aureus* (MRSA)
  - Surgical Site Infections (SSI) – colon and abdominal hysterectomy
- COVID-19 HCP



# Submitting HAI and COVID-19 HCP Data

- HAI and COVID-19 HCP data are submitted to the CDC's NHSN.
  - The CDC transmits the data to CMS immediately following the quarterly submission deadline for use in the PCHQR Program and CDC surveillance programs.
- PCHs must collect and submit HAI data at least quarterly prior to each quarterly submission deadline.
  - PCHs must collect numerator and denominator values for CAUTI, CLABSI, CDI, MRSA, SSI-colon, and SSI-abdominal hysterectomy events among all inpatients in the facility.

# Submitting HAI and COVID-19 HCP Data

PCHs must collect and submit COVID-19 HCP data at least quarterly prior to each quarterly submission deadline:

- PCHs must collect the numerator and denominator for at least one self-selected week during each month of the reporting quarter.
- In NHSN, a week belongs to the month in which the week ends. NHSN will not send a hospital's Q1 2024 COVID-19 HCP measure data to CMS unless there is at least one week of data that ends in January, one week of data that ends in February, and one week of data that ends in March.

# NHSN Resources

- COVID-19 HCP:  
<https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>
- CMS – PPS-Exempt Cancer Hospitals:  
<https://www.cdc.gov/nhsn/cms/pps.html>

# NHSN Questions

- Please use **NHSN-ServiceNow** to submit questions to the NHSN Help Desk. Locate the portal website here: [nhsn\\_csp - NHSN Customer Service](#) (cdc.gov).
  - ServiceNow should be used instead of [nhsn@cdc.gov](#), [nhsntrain@cdc.gov](#), and [nhsndua@cdc.gov](#).
- ServiceNow will help the NHSN team respond to your questions faster. Users will be authenticated using CDC's Secure Access Management Services (SAMS), the same way you access NHSN. If you do not have a SAMS login, or you are unable to access ServiceNow, you can still email the NHSN Help Desk at [nhsn@cdc.gov](#).

# Submission Reports

- Generate a PCH Facility Report via the HQR System:
  - FY 2025 for calendar year (CY) 2024 CAUTI and CLABSI measure data
  - FY 2026 for CY 2024 CDI, MRSA, SSIs and COVID-19 HCP measure data
- You may also generate your facility's NHSN-Analysis-CMS Reports.
  - For instructions to generate these reports visit <https://www.cdc.gov/nhsn/ps-analysis-resources/reference-guides.html>.

# HQR Log In

- Access the HQR home page: <https://hqr.cms.gov/hqrng/login>
- Enter your Health Care Quality Information Systems Access Roles and Profile credentials.
- Select Log In.

CMS.gov | Hospital Quality Reporting Sign up

Welcome to  
**CMS.gov** | Hospital Quality Reporting

**Log in**  
Enter your HARP user ID and password

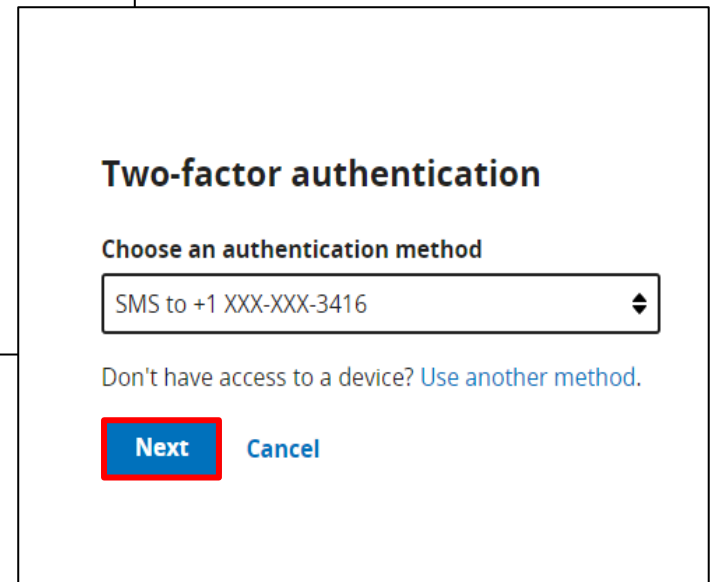
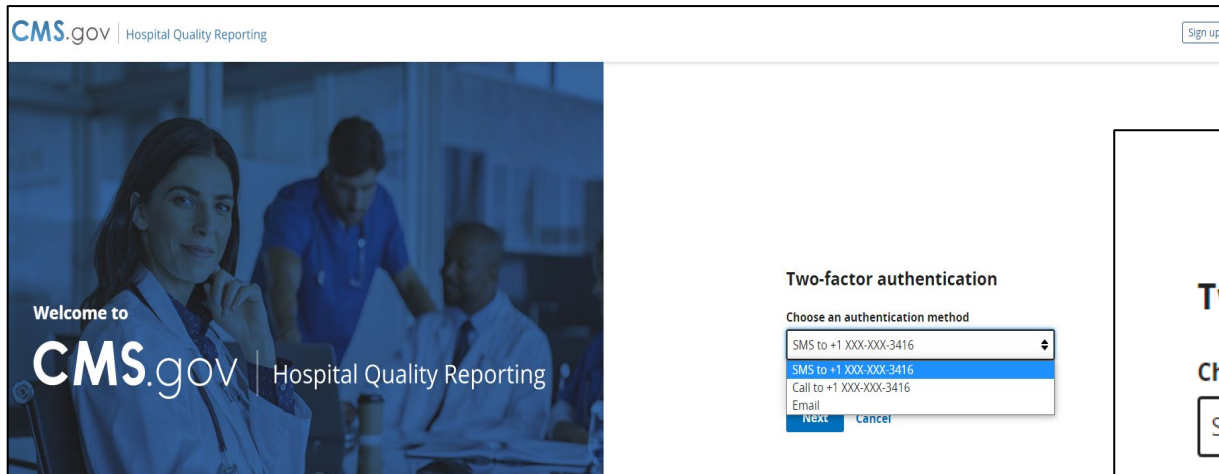
**User ID**

**Password**

[Having trouble logging in?](#)

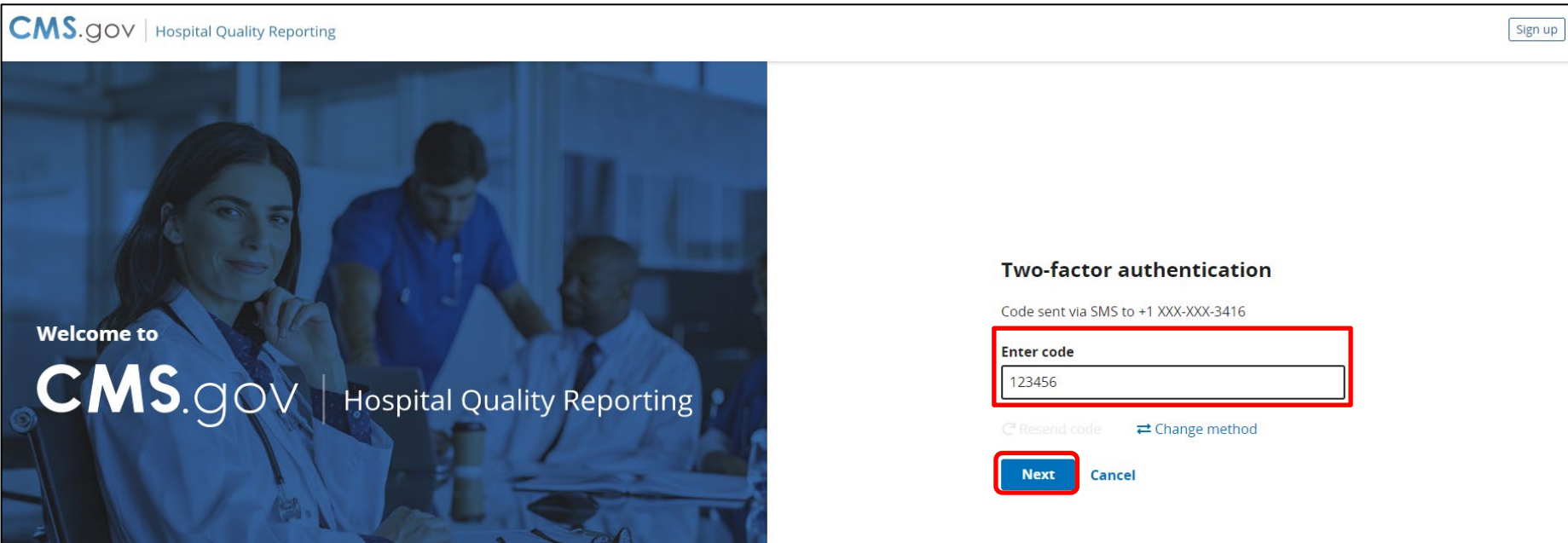
By logging in, you agree to the [Terms & Conditions](#).

# Two-Factor Authentication



# Enter Code

CMS.gov | Hospital Quality Reporting Sign up



Welcome to  
**CMS.gov** | Hospital Quality Reporting

### Two-factor authentication

Code sent via SMS to +1 XXX-XXX-3416

**Enter code**  
123456

[Resend code](#) [Change method](#)

**Next** Cancel



# HQR Landing Page

The screenshot shows the HQR landing page for a PPS-Exempt Cancer Hospital. At the top left is the CMS.gov logo and QualityNet. At the top right, it says "PPS-EXEMPT CANCER HOSPITAL" and "Your Name" with a dropdown arrow. Below this is a dark blue header with the text "PPS-Exempt Cancer Hospital". On the left side, there is a vertical navigation menu with icons for a grid, a cloud, a checkmark, a list, and a folder. The main content area has two light blue informational boxes. The first box contains an information icon, the text "My Tasks page is still available for PRS. Thank you for your patience as we make changes to HQR. PRS is still on the My Tasks page.", and a blue button labeled "My Tasks". The second box contains an information icon, the text "Are you expecting to receive facility-specific or claims-detail reports in Managed File Transfer (MFT)? Users who historically received these reports through their AutoRoute Inbox in Secure File Transfer may need to request permissions in the Hospital Quality Reporting system to continue to receive these reports for their facilities. Refer to the [Important: Request Access to Managed File Transfer \(MFT\) & Auto-Route Now to Ensure You Receive Your Reports](#) notification to learn more about requesting permissions to access your reports!". Below these boxes is a section titled "The New HQR is Coming" with a paragraph: "We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence." This is followed by a sub-section "New! Check out the navigation on the left:" and two bullet points: "← All features and functions are now available in the navigation" and "← Tasks are clearly divided - move from one to another with ease". To the right of the text is an illustration of a computer monitor displaying a medical interface with a plus sign, a heart, and a person icon, surrounded by various medical and data-related icons like a stethoscope, pills, and a keyboard.

CMS.gov | QualityNet

PPS-EXEMPT CANCER HOSPITAL | Your Name

## PPS-Exempt Cancer Hospital

**i** My Tasks page is still available for PRS.  
Thank you for your patience as we make changes to HQR. PRS is still on the My Tasks page.

**My Tasks**

**i** Are you expecting to receive facility-specific or claims-detail reports in Managed File Transfer (MFT)? Users who historically received these reports through their AutoRoute Inbox in Secure File Transfer may need to request permissions in the Hospital Quality Reporting system to continue to receive these reports for their facilities. Refer to the [Important: Request Access to Managed File Transfer \(MFT\) & Auto-Route Now to Ensure You Receive Your Reports](#) notification to learn more about requesting permissions to access your reports!

## The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

**New! Check out the navigation on the left:**

- ← All features and functions are now available in the navigation
- ← Tasks are clearly divided - move from one to another with ease

# HQR PCH Facility Report

The screenshot shows a dashboard with a left-hand navigation menu and a main content area. The navigation menu includes: Dashboard, Submissions, Program Reporting (highlighted with a red box), Reporting Requirements, Performance Reports (circled in red), Public Reporting, Validation, and Administration. The main content area features a light blue notification box with an information icon stating: "My Tasks page is being retired. Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Resource System are still on the My Tasks page." Below this is a blue button labeled "My Tasks". The main heading is "The New HQR is Coming", followed by a paragraph: "We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence." Below this is a sub-heading "New! Check out the navigation on the left:" and two bullet points: "← All features and functions are now available in the navigation" and "← Tasks are clearly divided - move from one to another with ease". On the right side of the main content area, there is a 3D-style illustration of a computer monitor, keyboard, mouse, and various data-related icons.

# Select Program

## Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

<b>Program</b>	<b>Report</b>	<b>Fiscal Year</b>	<a href="#">Export CSV</a>
<input type="text" value="PCHQR"/>	<input type="text" value="Select Report"/>	<input type="text" value="Select Year"/>	
<ul style="list-style-type: none"><li>Select Program</li><li>HVBP</li><li>IQR</li><li><b>PCHQR</b></li></ul>	<input type="text"/>	<input type="text"/>	

# Select Report

## Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

<b>Program</b> PCHQR	<b>Report</b> Select Report Select Report PCH Facility	<b>Fiscal Year</b> Select Year
<b>Provider(s)</b> Search Provider(s)		

Export CSV

# Select Fiscal Year

**Performance Reports**

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

**Program**: PCHQR

**Report**: PCH Facility

**Fiscal Year**: 2022, 2023, 2024, 2025, 2026

[Export CSV](#)

# Export Comma-Separated Value

## Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

Program

PCHQR

Report

PCH Facility

Fiscal Year

2026

Export CSV

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## **FY 2025 DACA**

# Select DACA

The screenshot shows a navigation menu on the left side of a web application. The menu items are: Dashboard, Data Submissions, Data Results, Program Reporting, Administration, DACA, Vendor Management, Notice of Participation, and PI Registration. The 'Administration' item is highlighted with a red border, and a red arrow points to the 'DACA' item. The background of the application is dimmed, showing a message about PRS and a section titled 'HQR is Coming'.

page is still available for PRS.  
for your patience as we make changes to HQR. PRS is still on the My Tasks page.

Administration

DACA

Vendor Management

Notice of Participation

PI Registration

HQR is Coming



# Review and Sign

< Data Submission

## Data Accuracy and Completeness Acknowledgement (DACA)

The DACA is an annual requirement for providers participating in the Hospital IQR, IPFQR, and PCHQR Programs to electronically acknowledge that the data submitted to these programs by or on behalf of the providers are accurate and complete to the best of their knowledge.

Fiscal Year: 2025

PCHQR

### Data Accuracy and Completeness Acknowledgement (DACA)

To the best of my knowledge, at the time of submission of this form, all of the information reported for this hospital for participation in the PCHQR Program is accurate and complete. This acknowledgement is for information submitted since the completion of the Fiscal Year (FY) 2024 DACA signed in Calendar Year 2023. This information includes the following:

- Measure data, as defined for the PCHQR Program
- All Program requirements, as defined for the PCHQR Program (e.g., where applicable, chart abstraction and/or sampling)
- Current Notice of Participation

I understand this acknowledgement covers all PCHQR information reported by this hospital (and any data or survey information reported by vendor(s) acting as agents on behalf of this hospital) to the Centers for Medicare & Medicaid Services (CMS) and its contractors. The data submitted in the time frame covered by this DACA are required for purposes of meeting the requirements for FYs 2024, 2025, and 2026 as specified in the Final Rules governing the PCHQR Program.

To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for reporting quality of care and patient assessment of care to the public.

Submission Period: 07/01/2024 - 09/03/2024

With Respect to Reporting Period: 09/01/2023 - 09/03/2024

Last Updated: 07/11/2024 12:00 PM

**Position**  
Ex. Administrator, Director, etc.

I confirm that the information I have submitted is accurate and complete, to the best of my knowledge.

**Sign** **Cancel**

# Submission Confirmation

< Data Submission

## Data Accuracy and Completeness Acknowledgement (DACA)

The DACA is an annual requirement for providers participating in the Hospital IQR, IPFQR, and PCHQR Programs to electronically acknowledge that the data submitted to these programs by or on behalf of the providers are accurate and complete to the best of their knowledge.

Fiscal Year: 2025

PCHQR

### Data Accuracy and Completeness Acknowledgement (DACA)

To the best of my knowledge, at the time of submission of this form, all of the information reported for this hospital for participation in the PCHQR Program is accurate and complete. This acknowledgement is for information submitted since the completion of the Fiscal Year (FY) 2024. DACA signed in Calendar Year 2023. This information includes the following:

- Measure data, as defined for the PCHQR Program
- All Program requirements, as defined for the PCHQR Program (e.g., where applicable, chart abstraction and/or sampling)
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I understand this acknowledgement covers all PCHQR information reported by this hospital (and any data or survey information reported by vendor(s) acting as agents on behalf of this hospital) to the Centers for Medicare & Medicaid Services (CMS) and its contractors. The data submitted in the time frame covered by this DACA are required for purposes of meeting the requirements for FYs 2024, 2025, and 2026 as specified in the Final Rules governing the PCHQR Program.

To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for reporting quality of care and patient assessment of care to the public.

**Success:** Congratulations! You have successfully acknowledged and signed DACA for PCHQR for this fiscal year.

**Signature**  
Your name

**Position**  
Your position/title

**Date**  
07/01/2024

Submission Period: 07/01/2024 - 09/03/2024

With Respect to Reporting Period: 09/01/2023 - 09/03/2024

Last Updated: 07/11/2024 12:00 PM

Re-Sign | **Export Signed DACA PDF**

# For Your Records

## Data Accuracy and Completeness Acknowledgement (DACA)

To the best of my knowledge, at the time of submission of this form, all of the information reported for this hospital for participation in the PCHQR Program is accurate and complete. This acknowledgement is for information submitted since the completion of the Fiscal Year (FY) 2024 DACA signed in Calendar Year 2023. This information includes the following:

- \* Measure data, as defined for the PCHQR Program
- \* All Program requirements, as defined for the PCHQR Program (e.g., where applicable, chart abstraction and/or sampling)
- \* Current Notice of Participation

I understand this acknowledgement covers all PCHQR information reported by this hospital (and any data or survey information reported by vendor(s) acting as agents on behalf of this hospital) to the Centers for Medicare & Medicaid Services (CMS) and its contractors. The data submitted in the time frame covered by this DACA are required for purposes of meeting the requirements for FYs 2024, 2025, and 2026 as specified in the Final Rules governing the PCHQR Program.

To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for reporting quality of care and patient assessment of care to the public.

**Congratulations! You have successfully acknowledged and signed DACA for PCHQR for this fiscal year.**

**Signature**

Your name

**Position**

Your position/title

**Date**

07/01/2024

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## **Key Dates and Resources**

# Upcoming Data Submission Deadlines

- **August 15, 2024**

- Q1 2024 HAI measure data
- Q1 2024 COVID-19 HCP measure data
- Measure exception form for CY 2024:  
[QualityNet PCHQR Program Resources–Forms](#)

- **September 3, 2024**

- FY 2025 DACA

- **October 2, 2024**

- Q2 2024 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey Data

# Public Reporting

## July 2024 Provider Data Catalog Release

- Q4 2022–Q3 2023 HCAHPS Survey data
- Q4 2022–Q3 2023 HAI measure data
- Q3 2023 COVID-19 HCP measure data
- Q3 2022–Q2 2023 (FY 2025) Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy claims-based measure data
- Q3 2022–Q2 2023 (FY 2025) End of Life claims-based measure data **\*NEW\***
- Q3 2021–Q3 2022 (FY 2025) Surgical Treatment Complications for Localized Prostate Cancer claims-based measure data **\*NEW\***

# PCHQR Program Resources

## [QualityNet PCHQR Program Resources Page](#)

- FAQs: COVID-19 HCP Measure
- PCHQR Program Manual (Spring 2024)
- PCHQR Program Measure Submission Deadlines by Due Dates
- PCHQR Program Relationship Matrix

# Additional PCHQR Program Resources

## QualityNet

- [PCHQR Program Overview page](#)
- [PCH Claims-based Measure Sets page](#)
- [PCHQR Program Data Collection page](#)

## Quality Reporting Center

- [Resources and Tools page](#)
- [Webinar: COVID-19 HCP Measure Updates](#)



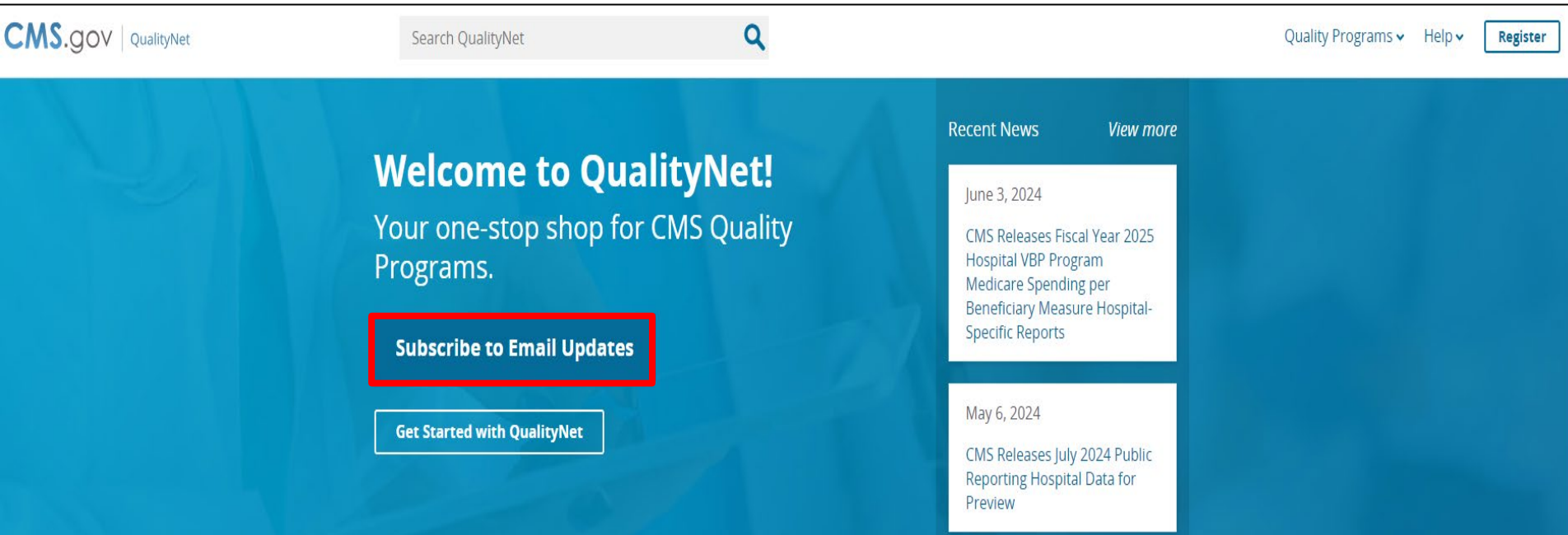
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## **QualityNet PCHQR Program Notifications and Question and Answer Tool**

# Subscribe to Program Notifications

## [QualityNet Home Page](#)



The screenshot shows the QualityNet Home Page. At the top left is the CMS.gov logo and QualityNet text. A search bar with the placeholder 'Search QualityNet' and a magnifying glass icon is in the top center. On the top right, there are links for 'Quality Programs' and 'Help', and a 'Register' button. The main content area has a blue background with a white text box on the left that says 'Welcome to QualityNet! Your one-stop shop for CMS Quality Programs.' Below this is a red-bordered button labeled 'Subscribe to Email Updates' and a white-bordered button labeled 'Get Started with QualityNet'. On the right side, there is a 'Recent News' section with a 'View more' link. It contains two news items: one dated June 3, 2024, about CMS releasing fiscal year 2025 hospital VBP program Medicare spending data, and another dated May 6, 2024, about CMS releasing July 2024 public reporting hospital data for preview.

CMS.gov | QualityNet

Search QualityNet

Quality Programs ▾ Help ▾ [Register](#)

### Welcome to QualityNet!

Your one-stop shop for CMS Quality Programs.

[Subscribe to Email Updates](#)

[Get Started with QualityNet](#)

#### Recent News [View more](#)

June 3, 2024

CMS Releases Fiscal Year 2025 Hospital VBP Program Medicare Spending per Beneficiary Measure Hospital-Specific Reports

May 6, 2024

CMS Releases July 2024 Public Reporting Hospital Data for Preview

# User Information

## Sign Up for Email Updates

**Step 1:** Enter your name and email address

**Step 2:** Select the lists you would like to join (at least one must be selected).

**Step 3:** Click the "Sign Up" button. You will receive an email requesting your confirmation for each subscription submission, and private lists will require approval from the list administrator prior to confirmation.

All fields marked with an asterisk (\*) are required.

### User Information

Name \*

Email \*

# Program Selection and Sign Up

▼ Quality Reporting

**PCHQR Notify: PPS-Exempt Cancer Hospitals Quality Reporting (PCHQR) Program Notifications**  
News, information, announcements, and educational offerings/events regarding the PPS-Exempt Cancer Hospitals Quality Reporting Program.

«« « 1 2 3 » »»

[Sign Up](#) ←

# Accessing the QualityNet Question and Answer Tool

The screenshot shows the CMS.gov QualityNet website interface. At the top left is the CMS.gov logo and 'QualityNet'. A search bar contains 'Search QualityNet' and a magnifying glass icon. On the right, there are links for 'Quality Programs', 'Help', 'Log into Secure Portal', and 'Register'. A dropdown menu is open, displaying three main categories: 'Getting Started', 'Known Issues & Maintenance', and 'Question & Answer Tools'. Under 'Question & Answer Tools', the link 'PPS-Exempt Cancer Hospitals' is highlighted with a red box. A 'Close' button is located in the top right corner of the dropdown menu.

**Getting Started**

- Registration
- Sign In Instructions
- Security Statement & Policy
- Password Rules

**Training & Guides**

- QualityNet Training
- QualityNet Secure Portal
- Secure File Transfer
- QualityNet Events Center

**Known Issues & Maintenance**

- Known Issues
- System Maintenance

**QualityNet Support**

- QualityNet Support

**Question & Answer Tools**

- Hospitals - Inpatient
- Hospitals - Outpatient
- PPS-Exempt Cancer Hospitals
- Ambulatory Surgical Centers
- ESRD Facilities
- Inpatient Psychiatric Facilities

Close

# Ask a Question

## QualityNet Question and Answer Tool

The screenshot shows the CMS.gov QualityNet website. At the top left, it says "CMS.gov | QualityNet". Below that is a navigation bar with links for "Quality Q&A Tool", "Ask a Question", "Browse Program Articles", and "My Questions". On the top right, there is a link for "How to Use this Tool". The main content area has a blue background with the title "Quality Question and Answer Tool" and the subtitle "Your one-stop shop for CMS Quality Answers". Below this is a search bar with the placeholder text "Search for the answer to your question" and a search icon. At the bottom, there are three white boxes with icons and text: "Browse" (with a document icon) and "View existing articles"; "My Questions" (with a database icon) and "Both Old & New Q&A tools"; and "Ask a Question" (with a question mark icon) and "Submit a Question to CMS". The "Ask a Question" box is highlighted with a red border.

# Submit a Question

QualityNet Question and Answer Site

**Submit a Question to Our Support Team** \*Indicate required field

**WARNING:** Individually identifiable health information in this system is subject to the Health Information Portability and Accountability Act of 1996 and the Privacy Act of 1974. Submission of questions to the QIO and Hospital Q&A System that contains Protected Health Information (PHI) is a violation of these Acts. **Questions containing PHI will be deleted from the system and not processed.** For detailed information regarding transmitting or receiving healthcare information or data read the [QualityNet System Security Policy \(PDF\)](#).

**Tell us about yourself.**

First Name* <input type="text" value="Limit 75 chars"/>	Last Name* <input type="text" value="Limit 75 chars"/>
Email Address* <input type="text" value="e.g. joe@domain.com"/>	Confirm Email Address* <input type="text"/>
Phone Number <input type="text" value="(XXX)XXX-XXXX"/>	Extension <input type="text" value="XXXXXXX"/>


**Question Details**

Program\*

Topic\*

Subject\*

Please describe your question\*

I'm not a robot   
reCAPTCHA Privacy - Terms

**SUBMIT QUESTION**

PCHQR Program: Preparing for August 2024 Submissions

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## **Closing Remarks**



# Disclaimer

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