



Hospital Quality Reporting Important Dates and Deadlines

Hospital Inpatient Quality Reporting (IQR) Program						Hospital-Acquired Condition (HAC) Reporting Program	
Discharge Quarter(Q)	HCAHPS Submission	Population & Sampling Submission ¹	Clinical Submission ^{2,3}	PC-01 Web-Based Submission	COVID-19 Submission ⁶	HAI Submission ^{2,3}	
Q4 2020 Oct 1-Dec 31	04-07-2021	05-03-2021 ⁴	05-17-2021 ⁴	04-01-2021-05-17-2021 ⁴	N/A	05-17-2021 ⁴	
Q1 2021 Jan 1-Mar 31	06-30-2021	08-02-2021 ⁴	08-16-2021 ⁴	07-01-2021-08-16-2021 ⁴	N/A	08-16-2021 ⁴	
Q2 2021 Apr 1-Jun 30	10-06-2021	11-01-2021	11-15-2021	10-01-2021-11-15-2021	N/A	11-15-2021	
Q3 2021 Jul 1-Sep 30	01-05-2022	02-01-2022	02-15-2022	01-01-2022-02-15-2022	N/A	02-15-2022	
Q4 2021 Oct 1-Dec 31	04-06-2022	05-02-2022 ⁴	05-16-2022 ⁴	04-01-2022-05-16-2022 ⁴	05-16-2022 ⁴	05-16-2022 ⁴	
Discharge Q	Validation						
	HAI Validation Templates ^{2,3}		Estimated CDAC Record Request ^{2,3}		Est. Date Records Due to CDAC ^{2,3}		
Q4 2020	Random: 05-03-2021 Targeted: 8-16-21		Random: 06-01-2021 Targeted: 09-03-2021		Random: 07-01-2021 Targeted: 10-04-2021		
Q1 2021	Random: 08-16-2021 Targeted: TBD		Random: 09-03-2021 Targeted: TBD		Random: 10-04-2021 Targeted: TBD		
Q2 2021	Random: 11-15-2021 Targeted: TBD		Random: 12-01-2021 Targeted: TBD		Random: 12-30-2021 Targeted: TBD		
Q3 2021	Random: 2-15-2022 Targeted: TBD		Random: 03-01-2022 Targeted: TBD		Random: 03-30-2022 Targeted: TBD		
Q4 2021	Random: 5-16-2022 Targeted: TBD		Random: 07-01-2022 Targeted: TBD		Random: 08-01-2022 Targeted: TBD		
Fiscal Year (FY) 2023 Annual Payment Update (APU)							
Measures/Requirement		Quarters/Dates Included			Submission Deadline/Period		
eCQMs ⁵		2 self-selected quarters of data (1Q 2021, 2Q 2021, 3Q 2021, 4Q 2021)			February 28, 2022		
Influenza Vaccination Among Healthcare Personnel (HCP)		October 1, 2020-March 31, 2021			May 17, 2021 ⁴		
Maternal Morbidity Structural Measure ⁶		Quarter 4, 2021 (October 1, 2021-December 31, 2021)			April 1, 2022-May 16, 2022 ⁴		
DACA (Data Accuracy and Completeness Acknowledgement)		January 1, 2021-December 31, 2021			April 1, 2022-May 16, 2022 ⁴		
Measures/Requirement		Quarters/Dates Included			Est. CDAC Request	Date Records Due to CDAC	
eCQM Validation		One quarter of data from calendar year (CY) 2020			Early 2022	To Be Determined (TBD)	

¹ Required for chart-abstracted measures only.

² Starting with discharge quarter Q1 2020, the Healthcare-Associated Infection (HAI) measures will no longer be collected, validated, or reported under the Hospital IQR Program. The HAI measures will still occur under the HAC Reporting Program and Hospital Value-Based Purchasing (VBP) Program.

³ Chart-abstracted data validation for FY 2023 includes only two quarters: Q3 2020 and Q4 2020.

⁴ Deadline extended due to original deadline falling on a weekend and/or holiday.

⁵ Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For the IQR Program in FY 2023, hospitals must report at least four electronic clinical quality measures (eCQMs) from each of the two self-selected quarters.

⁶ Required new measures beginning with Q4 2021 (October 1, 2021-December 31, 2021) data.

- All dates are subject to change.
- Generally, data must be submitted no later than 11:59 p.m. Pacific Time on the submission deadline with the exception of Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS). HCAHPS must be submitted by 11:59 p.m. Central Time.
- Validation medical records must be received by Clinical Data Abstraction Center (CDAC) no later than 4:30 p.m. Eastern Time. Medical records are submitted to the CDAC according to coversheet instructions.
- Data for clinical measures, eCQMs, population and sampling, DACA, and Perinatal Care (PC)-01 are transmitted within the *Hospital Quality Reporting (HQR) Secure Portal*.
- HAI Validation Template data are transmitted within the *HQR Secure Portal* via Managed File Transfer. HAI measure data are submitted to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN).