Hospital Quality Reporting Important Dates and Deadlines



(All dates are subject to change.)

	Hospital IQR Program					HAC Reduction Program	
Discharge Quarter(Q)	HCAHPS Submission	Population & Sampling Submission (Required for chart-abstracted measures only)	Clinical Submission	PC-01 Web- Based Submission	COVID-19 HCP Submission	HAI Submission	
Q3 2022	01-04-2023	02-01-2023	02-15-2023	01-01-2023-02-15-2023	02-15-2023	02-15-2023	
Q4 2022	04-05-2023	05-01-2023	05-15-2023	04-01-2023-05-15-2023	05-15-2023	05-15-2023	
Q1 2023	07-05-2023	08-01-2023	08-15-2023	07-01-2023-08-15-2023	08-15-2023	08-15-2023	
Q2 2023	10-04-2023	11-01-2023	11-15-2023	10-01-2023-11-15-2023	11-15-2023	11-15-2023	
Q3 2023	01-03-2024	02-01-2024	02-15-2024	01-01-2024-02-15-2024	02-15-2024	02-15-2024	
Q4 2023	04-03-2024	05-01-2024	05-15-2024	04-01-2024-05-15-2024	05-15-2024	05-15-2024	
Discharge Q	Validation						
	HAI Validation Templates Estimate		Estimated CDAC	Record Request	Estimated Date Records Due to CDAC		
Q1 2022	Rando	om: 08-15-2022 Targeted: 03-28-2023	Random: 08-25-2022 T	andom: 08-25-2022 Targeted: 04-10-2023		Random: 09-26-2022 Targeted: 05-09-2023	
Q2 2022	Rando	om: 11-15-2022 Targeted: 04-17-2023	Random: 12-12-2022 T	argeted: 05-09-2023	Random: 12-30-2	andom: 12-30-2022 Targeted: 06-08-2023	
Q3 2022		om: 02-15-2023 Targeted: 05-08-2023	Random: 03-01-2023 T	Random: 03-01-2023 Targeted: 06-08-2023		Random: 03-30-2023 Targeted: 07-10-2023	
Q4 2022	Rando	om: 05-15-2023 Targeted: 05-25-2023	Random: 06-01-2023 Targeted: 07-10-2023		Random: 06-30-2023 Targeted: 08-08-2023		
eCQM Validation							
Fiscal Year (FY)/Calendar Year (CY)			Estimated CDAC Record Request		Estimated Date Records Due to CDAC		
FY 2025/CY 2022			Spring 2023		Spring 2023		
Fiscal Year (FY) 2024 Annual Payment Update (APU)							
Measures/Requirement			Quarters/Dates Included		Submission Deadline/Period		
eCQMs ¹			3 self-selected quarters of data (1Q 2022, 2Q 2022, 3Q 2022, 4Q 2022)		February 28, 2023		
Maternal Morbidity Structural Measure			January 1, 2022–December 31, 2022		April 1, 2023–May 15, 2023		
DACA (Data Accuracy and Completeness Acknowledgement)			January 1, 2022–December 31, 2022		April 1, 2023–May 15, 2023		
Fiscal Year (FY) 2025 Annual Payment Update (APU)							
Measures/Requirement			Quarters/Dates Included		Submission Deadline/Period		
Influenza Among Healthcare Personnel (HCP)			October 1, 2022–March 31, 2023		May 15, 2023		
2024 Voluntary Reporting of Hybrid Measures ²			July 1, 2022–June 30, 2023		October 2, 2023		
2025 Voluntary Reporting of THA/TKA PRO-PM Measure ²			Procedure Performed: January 1, 2023–June 30, 2023 Pre-op Data: Oct 3, 2022–June 30, 2023 Post-op Data: Oct 28, 2023–August 28, 2024		Pre-op Data: October 2, 2023 Post-op Data: September 30, 2024		
eCQMs ³			4 quarters of data (1Q 2023, 2Q 2023, 3Q 2023, 4Q 2023)		February 28, 2024		
Structural Measures			January 1, 2023–December 31, 2023		April 1, 2024-May 15, 2024		
DACA (Data Accuracy and Completeness Acknowledgement)			January 1, 2023–December 31, 2023		April 1, 2024-May 15, 2024		

¹ Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For FY 2024, hospitals must report three self-selected electronic clinical quality measures (eCQMs) plus the Safe Use of Opioids-Concurrent Prescribing eCQM from each of the three self-selected quarters in CY 2022. The eCQMs must be the same across quarters.

- Q2 2022 (Apr 1–Jun 30); Q3 2022 (Jul 1–Sep 30); Q4 2022 (Oct 1–Dec 31); Q1 2023 (Jan 1–Mar 31); Q2 2023 (Apr 1–Jun 30); Q3 2023 (Jul 1–Sep 30); Q4 2023 (Oct 1–Dec 31)
- Generally, data must be submitted no later than 11:59 p.m. Pacific Time on the submission deadline with the exception of HCAHPS). HCAHPS must be submitted by 11:59 p.m. Central Time.
- Data for clinical, PC-01, eCQMs, structural measures, population and sampling, DACA, voluntary hybrid and THA/TKA PRO-PM measures are transmitted within the HQR Secure Portal.
- HAI Validation Template data are transmitted within the HQR Secure Portal via Managed File Transfer.
- HAI, COVID-19 HCP, and Influenza HCP measure data are submitted to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN).

² Hybrid measures include the Hybrid Hospital-Wide All-Cause Readmission (HWR) measure and the Hybrid Hospital-Wide All-Cause Standardized Mortality (HWM) measure. The 2024 reporting period is voluntary. It will not impact the FY 2025 payment determination.

³ Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For FY 2025, hospitals must report three self-selected electronic clinical quality measures (eCQMs) plus the Safe Use of Opioids-Concurrent Prescribing eCQM from each quarter in CY 2023. The eCQMs must be the same across quarters.