

IPFQR Program: Understanding Reporting Periods vs. Fiscal Years

January 1, 2021 – December 31, 2024

Calendar Year and Fiscal Year

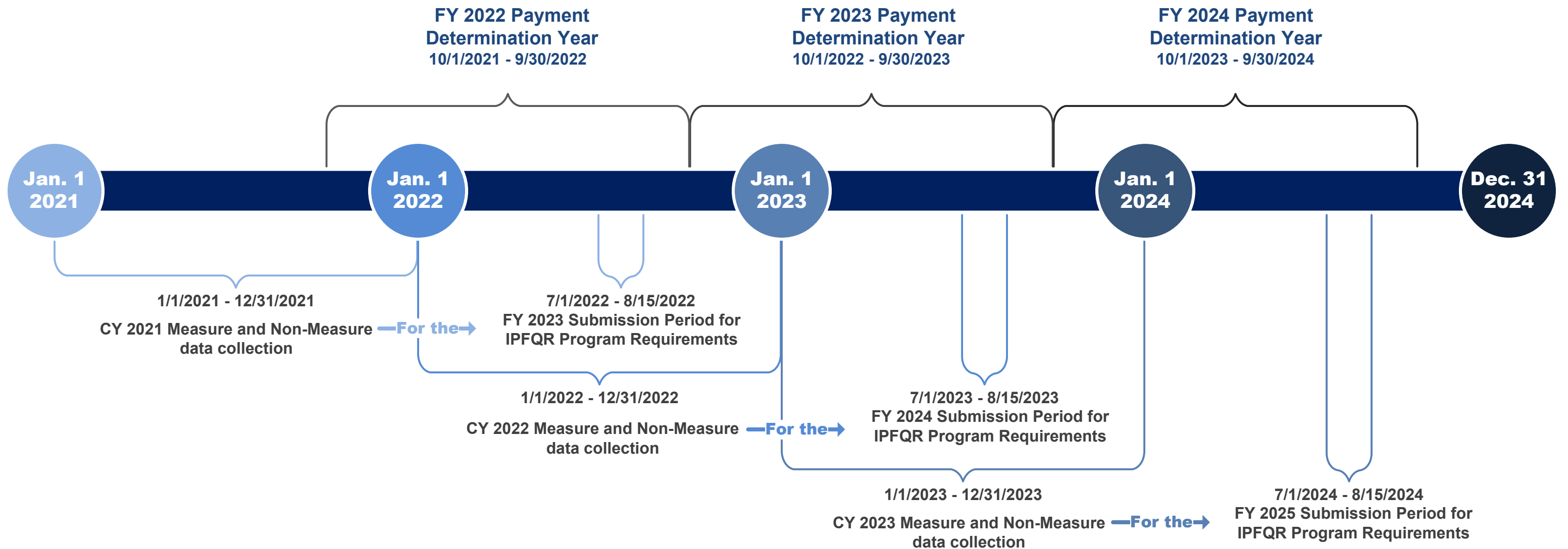
The Centers for Medicare & Medicaid Services (CMS) uses quality data **collected** by IPFs **during a reporting period** to make payment decisions for a future year.

- Reporting Period = Calendar Year (CY)
- Fiscal Year (FY) = Payment Year
- Annual Payment Update (APU) = the annual percentage increase that CMS applies to Medicare reimbursement for eligible IPFs

IPF Data → CMS APU Decisions

Submission of CY data is connected to payment in a future FY, as illustrated below.

- IPFs collect data for CY 2021 discharges.
- IPFs submit data to CMS in 2022.
- CMS makes preliminary FY 2023 APU decisions.
- CMS provides IPFs with an opportunity to request reconsiderations of FY 2023 APU decisions.
- CMS makes final FY 2023 APU decisions.



Exceptions

- Data used for claims-based measures (CBMs) are not usually from a single calendar year.
- Data for the IMM-2 measure are collected from October 1 through March 31 of the previous fiscal year. For example, IPFs will collect IMM-2 data from October 1, 2021–March 31, 2022 and submit the data in 2022 to impact the FY 2023 payment determination.
- Data for the COVID-19 Vaccination Coverage Among Health Care Personnel (COVID HCP) measure are collected and submitted to the National Healthcare Safety Network (NHSN) every quarter, starting with Q4 2021 data submitted by May 16, 2022. Refer to the CMS IPFQR Program Measures and Non-Measure Data paper tool on the QualityNet [IPFQR Program Resources](#) web page.