

Inpatient Quality Reporting (IQR) Program Important Dates and Deadlines									
Discharge	HCAHPS	Population 8	&	Clinical and HAI	PC-01 Web-Based	HAI Validation	Estimated CDAC	Estimated Date	
Quarter (Q)	Submission	Sampling Submis	ssion ¹	Submission ^{2,3}	Submission	Templates ^{2,3}	Record Request ^{2,3}	Records Due to CDAC ^{2,3}	
3Q 2019	01-02-2020	02-03-20204	1 02-18-20204	02-18-2020 ⁴	01-01-2020-	Random: 03-05-2020	Random: 03-13-2020	Random: 04-13-2020	
Jul 1-Sep 30	01-02-2020	02-03-2020		02-10-2020	02-18-2020 ⁴	Targeted: 08-03-2020	Targeted: 08-14-2020	Targeted: 09-14-2020	
4Q 2019	04-01-2020	05-04-2020 ⁴	05-18-20204		04-01-2020-	Random: 05-04-2020	Random: 06-08-2020	Random: 07-08-2020	
Oct 1–Dec 31	04-01-2020	05-04-2020	03-18-2020	05-18-2020 ⁴	Targeted: 08-20-2020	Targeted: 09-01-2020	Targeted: 10-01-2020		
1Q 2020	07-01-2020	08-03-2020 ⁴	08-17-20204	07-01-2020-	Will not be requested	Random: 09-01-2020	Random: 10-01-2020		
Jan 1-Mar 31	07-01-2020	00-03-2020		08-17-2020 ⁴		Targeted: 10-01-2020	Targeted: 11-02-2020		
2Q 2020	10-07-2020	11-02-2020 ⁴	4	11-16-2020 ⁴	10-01-2020-	Will not be requested	Random: 12-01-2020	Random: 01-04-2021	
Apr 1–Jun 30	10-07-2020	11-02-2020		11-10-2020	11-16-2020 ⁴	vviii flot be requested	Targeted: 11-02-2020	Targeted: 12-02-2020	
3Q 2020	01-06-2021	02-01-2021	02.15.20	02-15-2021	01-01-2021-	Random: TBD	Random: TBD	Random: TBD	
Jul 1-Sep 30	01-00-2021	02-01-2021		02-15-2021	02-15-2021	Targeted: TBD	Targeted: TBD	Targeted: TBD	
4Q 2020	04-07-2021	05-03-2021 ⁴	4	05-17-20214	04-01-2021-	Random: TBD	Random: TBD	Random: TBD	
Oct 1-Dec 31	04-07-2021	03-03-2021		05-17-2021	05-17-20214	Targeted: TBD	Targeted: TBD	Targeted: TBD	
Fiscal Year (FY) 2021 Annual Payment Update (APU)									
Measures/Requirement			Quarters/Dates Included				Submission Deadline/Period		
eCQMs ⁶			One self-selected quarter of data (1Q 2019, 2Q 2019, 3Q 2019, or 4Q 2019)				March 2, 2020 ⁴		
DACA			January 1, 2019-December 31, 2019				April 1, 2020–May 18, 2020 ⁴		
FY 2022 APU									
	Requirement		Quarters Included				Estimated CDAC	Date Records	
	Requirement						Record Request	Due to CDAC	
eCQM Validation ⁵				One quarter of data from Calendar Year (CY) 2019				07-05-2020	
Meas	sures/Requiren	nent	Quarters/Dates Included				Submission Deadline/Period		
Influenza Vaccin	ation Coverage	Among HCP	October 1, 2019–March 31, 2020				May	May 18, 2020 ⁴	
eCQMs ⁶	eCQMs ⁶			One self-selected quarter of data (1Q 2020, 2Q 2020, 3Q 2020, or 4Q 2020)					
Acronyms									
CDAC: Clinical Da	ta Abstraction Co	enter H	HAI: Healthcare-Associated Infection				NHSN: National Hea	NHSN: National Healthcare Safety Network	
CDC: Centers for I	Disease Control	and Prevention F					s PC: Perinatal Care	PC: Perinatal Care	
eCQM: electronic of	clinical quality me	easure F	HCP: Healthcare Personnel				TBD: To Be Determined		

¹ Required for chart-abstracted measures only.

NOTES

- 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 HCAHPS. HCAHPS must be submitted by 11:59 p.m. Central Time.
- Validation medical records must be received by CDAC no later than 4:30 p.m. Eastern Time.
- Data for clinical measures, eCQMs, population and sampling, Data Accuracy and Completeness Acknowledgement (DACA), and PC-01 are transmitted within the QualityNet Secure Portal.
- Data for HAI Validation Templates are transmitted within the QualityNet Secure Portal via Secure File Transfer. Data for HAI and HCP measures are submitted to the CDC through the NHSN.
- Medical records are submitted to the CDAC according to coversheet instructions.

² Starting with discharge quarter 1Q 2020 the HAI measures will no longer be collected, validated, or reported under the Hospital IQR Program. The HAI measures will still occur under the Hospital-Acquired Condition (HAC) Reporting Program and Hospital Value-Based Purchasing (VBP) Program.

³ Chart-abstracted data validation for FY 2021 includes 3Q 2018, 4Q 2018, 1Q 2019, and 2Q 2019. Chart-abstracted validation for FY 2022 includes 3Q 2019, 4Q 2019, 1Q 2020, and 2Q 2020.

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

⁵eCQM validation for FY 2021 includes one quarter of CY 2018 data. eCQM validation for FY 2022 includes one quarter of CY 2019 data.

⁶ Hospital IQR Program alignment with Promoting Interoperability Program. For the Hospital IQR Program in FY 2021, hospitals must report at least four eCQMs from the same quarter.