Hospital Inpatient Quality Reporting (IQR) Program and Medicare Promoting Interoperability Program

Calendar Year (CY) 2027 Preparation Checklist for Electronic Clinical Quality Measure (eCQM) Reporting Quality Reporting Document Architecture (QRDA) Category I Test or Production File(s) Submission Instructions for the Hospital Quality Reporting (HQR) System

Due	Task
1/1/2027 through 12/31/2027	To successfully submit CY 2027 eCQM data, hospitals participating in the Hospital IQR Program* and the Medicare Promoting Interoperability Program** must: ☐ **Submit** four (4) quarters of CY 2027 data by the submission deadline of Monday, February 28, 2028, 11:59 p.m. Pacific Time (PT), for the following eCQMs: • Six (6) CMS-selected eCQMs: Safe Use of Opioids-Concurrent Prescribing, Cesarean Birth (Perinatal Care [PC]-02), Severe Obstetric Complications (PC-07), Hospital Harm-Severe Hypoglycemia (HH-HYPO), Hospital Harm-Severe Hyperglycemia (HH-HYPER); and Hospital Harm-Opioid-Related Adverse Events (HH-ORAE) **AND** • Three (3) self-selected eCQMs from the CY 2027 Available eCQMs Table. Each quarter must contain the same nine (9) eCQMs: three (3) self-selected eCQMs, plus all six (6) of the CMS-selected eCQMs. ☐ **Report** data using the Office of the National Coordinator Health Information Technology certification criteria to meet the certified electronic health record technology requirement. ☐ **Confirm** the QRDA Category I file(s) are constructed per the most current CY 2027 requirements, such as the CMS QRDA Category I HQR Implementation Guide and the associated Schematrons and sample files posted on the eCQI Resource Center. • CMS is expecting one QRDA Category I file per patient, per quarter, with all episodes of care and applicable measures associated with that reporting period. • The maximum individual file size is 10 MB. A ZIP file can have a maximum of 14,999 files. • Verify your ZIP file does not contain other ZIP files.
System Opens Fall 2027 **Deadline: 2/28/2028 11:59 p.m. Pacific Time**	☐ **Visit** the HQR system log in page and sign into the HQR system using your Health Care Quality Information Systems Access Roles and Profile account. • Complete two-factor authentication. Enter the security code. ☐ **Review** Navigation Menu on the landing page to perform actions in the HQR system. ☐ **Go to** the dashboard menu to complete the steps on the next page. **Tip: Sign up on the QualityNet website for EHR Notify listserv notifications to receive timely alerts on HQR system openings, submission deadlines, and other eCQM reporting updates.**

*The submission of CY 2027 eCQM data will affect the fiscal year (FY) 2029 payment determination.

**The submission of CY 2027 eCQM data will affect the FY 2029 payment determination for eligible hospitals and the FY 2027 payment determination for critical access hospitals.

Note: The eCQM reporting requirement is an aligned requirement for hospitals participating in the Hospital IQR Program and the Medicare Promoting Interoperability Program. The successful submission of eCQM data will meet the eCQM reporting requirement for both programs. In addition to eCQM reporting, there are other requirements to meet for both the Hospital IQR Program and the Medicare Promoting Interoperability Program. Contact Inpatient and Outpatient Healthcare Quality Development and Program Support at (844) 472-4477 or the Quality Question and Answer Tool for information about the Hospital IQR Program, its Extraordinary Circumstances Exceptions request process, the Medicare Promoting Interoperability Program, and its Hardship Exception Process.

CY 2027 Preparation Checklist for eCQM Reporting

QRDA Category I Test or Production File(s) Submission Instructions for the HQR System

Submission Deadline: 2/28/2028 11:59 p.m. PT

☐ **Upload Test and Production QRDA Category I files.**

1. Click Data Submissions. Locate the eCQM tab. Click on File Upload. Select Test or Production.
2. Click on Select Files to locate the QRDA Category I batch files on your computer to upload.
3. Select IQR/PI and click on Continue.
4. Once the files load and the HQR system has processed them, you will receive a confirmation email.

☐ **Review the processing status of the QRDA Category I files.**

1. From the main menu, click on Data Results**.** Then, click on eCQM.
2. Click on the Files tab to review your file submissions.
3. Select IQR/PI. Select Test or Production. Click on Select. Click Change Selection to refresh the page.
4. Once the uploaded file status says Ready, download errors for each batch as a CSV report.

☐ **Review the Submission Accuracy tab. Locate rejected files for revision and resubmission.**

1. Click on the Accuracy tab. Select IQR/PI. Select Test or Production. Select 2027. Click on Select. Click on Change Selection to refresh the page.
2. A blue box will display the production submission file status for total files, accepted files, rejected files, and deleted files. (A grey box indicates test file submissions). In the dark blue box under File Status, select from the drop-down options for a closer review of the files located in the table below.
3. You can click on Export Results to download the results as a CSV report.

☐ **Review Outcomes Submission Results to determine how the episodes of care were evaluated.**

1. Click on the Outcomes tab. Select IQR/PI. Select Test or Production. Select 2027. Select a specific measure or all measures. Click on Select. Click Change Selection to refresh the page. **The HQR system will default to the Q1 2027 tab.**
2. In the dark blue box under Outcome, search options for a closer review of the evaluated episodes for each patient file in the table below, which you can export as a CSV report.
3. Click the asterisk next to the patient file to view measure logic details for test and/or production files.
4. The performance score calculation will display for test and production files. To view the performance summary for all measures, click on View Summary. You can export this summary by quarter or year as a CSV report.

☐ **Generate the Submission Requirements Report(s).**
CMS retired the Program Credit Report, but you can still access historical data.

1. From the main menu, click on Program Reporting. Then, click on Submission requirements.
2. Click on the Submission requirements dashboard box. Then, select IQR or PI. **The HQR System will default to the current fiscal or program year.**
3. Scroll to eCQMs. Click on the arrow to review, by quarter, the measures successfully submitted and the date of the last submission update. Export the report(s), towards the upper right, for your records
   - A green check indicates successful submission was achieved for the reporting year.
   - A yellow check indicates successful submission was not achieved for the reporting year.

☐ **Enter Denominator Declarations if they apply. The HQR system will default to Q4 2027.**

1. Click on Data Submissions. Under the eCQM tab, click on Data Form. Launch the IQR/PI Denominator Declaration Data Form.
2. Select the Discharge Quarter. Enter the declarations for case threshold or for zero denominator for each applicable measure. Click on I'm Ready to Submit. Repeat the steps for each applicable quarter. **File submissions will overwrite denominator declarations.**

☐ **Re-generate the Submission Requirements Report(s).**

This "snapshot in time" indicates if submissions were successful for each reporting quarter. If the reporting changes in any way (files are resubmitted or deleted; denominator declarations are modified), re-generate the Submission Requirements Report for the most current status. If the report is not available after 24 hours, contact the Center for Clinical Standards and Quality Service Center.