CY 2027/FY 2029 Hospital IQR Program Reporting Periods

The following table provides the FY 2029 measure reporting periods and collection notes for the Hospital IQR Program.

<table>
<tr><th colspan="2">HCAHPS Survey and Population & Sampling for Clinical Measures</th><th colspan="2">Clinical and HAI[1] Measures and eCQMs[2]</th><th colspan="2">Influenza HCP Measure</th><th>DACA, Web-Based[3] and Patient Safety Measures</th><th>Hybrid Measures</th><th>THA/TKA PRO-PM Measure</th></tr>
<tr><th>CY Discharge Quarter</th><th>CY Discharge Months</th><th>CY Discharge Quarter</th><th>CY Discharge Months</th><th>CY Discharge Quarter</th><th>CY Discharge Months</th><th>Collection Notes</th><th>Collection Notes</th><th>Collection Notes</th></tr>
<tr><td rowspan="3">Q1 2027</td><td>Jan-27</td><td rowspan="3">Q1 2027</td><td>Jan-27</td><td rowspan="6">Q4 2026</td><td>Oct-26</td><td rowspan="12">Reporting:
April 1, 2028, through
May 17, 2028 with respect to the data collection period of
January 1, 2027, through
December 31, 2027</td><td rowspan="12">Mandatory Performance Period:
July 1, 2026, through
June 30, 2027</td><td rowspan="12">Mandatory Reporting Procedure Period:
July 1, 2025, through
June 30, 2026, procedures</td></tr>
<tr><td>Feb-27</td><td>Feb-27</td><td rowspan="2">Nov-26</td></tr>
<tr><td>Mar-27</td><td>Mar-27</td></tr>
<tr><td rowspan="3">Q2 2027</td><td>Apr-27</td><td rowspan="3">Q2 2027</td><td>Apr-27</td></tr>
<tr><td>May-27</td><td>May-27</td><td rowspan="2">Dec-26</td></tr>
<tr><td>Jun-27</td><td>Jun-27</td></tr>
<tr><td rowspan="3">Q3 2027</td><td>Jul-27</td><td rowspan="3">Q3 2027</td><td>Jul-27</td><td rowspan="6">Q1 2027</td><td>Jan-27</td></tr>
<tr><td>Aug-27</td><td>Aug-27</td><td>Feb-27</td></tr>
<tr><td>Sep-27</td><td>Sep-27</td><td rowspan="2">Mar-27</td></tr>
<tr><td rowspan="3">Q4 2027</td><td>Oct-27</td><td rowspan="3">Q4 2027</td><td>Oct-27</td></tr>
<tr><td>Nov-27</td><td>Nov-27</td></tr>
<tr><td>Dec-27</td><td>Dec-27</td></tr>
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[1] HAI measures include the Catheter-Associated Urinary Tract Infection-Oncology and Central Line-Associated Bloodstream Infection-Oncology measures.

[2] For FY 2029, hospitals must successfully submit four quarters (Q1, Q2, Q3, and Q4) of 2027 data for three self-selected eCQMs PLUS the Safe Use of Opioids-Concurrent Prescribing, Cesarean Birth, Severe Obstetrics Complications, Hospital-Harm – Opioid-Related Adverse Events, Hospital Harm – Severe Hyperglycemia, and Hospital Harm – Severe Hypoglycemia eCQMs.

[3] Web-based measures include Maternal Morbidity and Age Friendly Hospital measures.

Note: Data validation for FY 2029 includes Q1 2026 through Q4 2026 data for both chart-abstracted measures and eCQMs.

Acronyms and Terms					
Clinical	Chart-Abstracted Clinical Process of Care Measures	**FY**	fiscal year	**IQR**	Inpatient Quality Reporting
CMS	Centers for Medicare & Medicaid Services	**HAI**	Healthcare-Associated Infection	**PRO-PM**	Patient Reported Outcome Performance Measure
CY	calendar year	**HCAHPS**	Hospital Consumer Assessment of Healthcare Providers and Systems	**Q**	Quarter
DACA	Data Accuracy and Completeness Acknowledgement	**HCP**	healthcare personnel	**THA/TKA**	Total Hip Arthroplasty/ Total Knee Arthroplasty
eCQM	electronic clinical quality measure				