

Quarter 3 (Q3) 2025 Hospital Inpatient Quality Reporting (IQR) Program Checklist		
Due	Task	✓
1/14/2026	<p><b>Checking Submission of Q3 2025 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Data</b></p> <p>HCAHPS Survey Data should display as “<b>Submitted</b>” for <i>July, August, and September</i> on the Submissions Requirements report. See below, under Checking Submission of Q3 2025 Inpatient Data, for guidance on how to run reports.</p>	<input type="checkbox"/>
2/2/2026	<p><b>Submitting Q3 2025 Inpatient Population and Sampling Counts Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted SEP-1 measure only)</b></p> <ol style="list-style-type: none"> <li><b>Click</b> Data Submissions from the navigation panel on the left side of the screen.</li> <li><b>Select</b> the Population and Sampling tab.</li> <li><b>Click</b> Data Form. Verify that that the Data Form shows IQR. <b>Click</b> on Launch Data Form.</li> <li>Verify that the Reporting Period is Q3 2025 (use the dropdown on the right) and <b>Click</b> on Enter.</li> </ol> <p><b>Submitting Q3 2025 Inpatient Population and Sampling XML Files Via Simple File Submissions Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted SEP-1 measure only)</b></p> <ol style="list-style-type: none"> <li><b>Click</b> Data Submissions from the navigation panel on the left side of the screen.</li> <li><b>Select</b> the Population and Sampling tab.</li> <li><b>Click</b> File Upload.</li> <li><b>Select</b> Production. Data submitted under Test will not be stored in the HQR system and will not count as meeting program requirements.</li> <li>Verify that the Reporting Period is Q3 2025, search for and upload files, and <b>Click</b> on Enter.</li> </ol>	<input type="checkbox"/>
2/17/2026	<p><b>Checking Submission of Q3 2025 Inpatient Data</b></p> <ol style="list-style-type: none"> <li><b>Log in</b> to the <i>Hospital Quality Reporting Secure Portal</i> using your HARP User ID and Password.</li> <li>The Dashboard will display. The Dashboard allows you to view the open submission periods and deadlines and the upcoming submission periods, when the submission period will open and the deadlines.</li> <li><b>Select</b> Program Reporting from the navigation panel on the left side of the screen to verify your data submission(s).</li> <li><b>Select</b> Submission Requirements from the dropdown. This is where you can run reports to check to see if your organization is meeting reporting requirements. Access is dependent upon permissions. From this page you can also view the Submission Requirements Dashboard.</li> </ol> <p>Submission Requirements Dashboard</p> <p>The submission requirements dashboard allows you to review program requirements and status, and export reports.</p> <ol style="list-style-type: none"> <li>Click the Submission requirements dashboard link</li> <li><b>Select</b> IQR from the Select a program dropdown.</li> <li>Verify that the Fiscal Year is 2027 (use the dropdown on the right).</li> <li><b>Select</b> the requirement(s) you wish to review.</li> <li><b>To export the dashboard data, select</b> Export then choose PDF and/or CSV reports.</li> </ol> <p>Submission Requirements report (formerly known as the Provider Participation Report)</p> <ol style="list-style-type: none"> <li><b>Select</b> IQR from the Program dropdown.</li> <li><b>Select</b> Q3 2025 from the Discharge Quarter dropdown.</li> <li><b>Click</b> Export CSV.</li> <li><b>View</b> the Submission Requirements for the following. <b>NOTE:</b> The column name, e.g. Column M, may be different depending on your HQR access and any updates that may have been made in the HQR system. <ul style="list-style-type: none"> <li><input type="checkbox"/> Column M “measure_set” (<i>Measure Set</i>): IQR-SEP</li> <li><input type="checkbox"/> Column Q “population” (<i>Total Patient Population</i>) and column P “sample” (<i>Total Sample Size</i>) case counts will display using Population and Sampling data. “<b>Not Submitted</b>” means Population and Sampling counts have not been submitted. If submitting, this must be done before the Population and Sampling deadline. Please see the Population and Sampling directions above.</li> <li><input type="checkbox"/> Column N “total-cases” (<i>Total Cases Accepted</i>) column should be ≥ your <i>Total Patient Population</i> and/or column O “total_claims” (<i>Total Medicare Claims</i>) unless you are electing to sample. If your hospital is sampling, ensure the <i>Total Cases Accepted</i> are ≥ the minimum sample requirement.</li> <li><input type="checkbox"/> HCAHPS Survey Data is located under columns X through Z.</li> </ul> </li> </ol>	<input type="checkbox"/>

For questions, contact the Inpatient and Outpatient Healthcare Quality Systems Development and Program Support at (844) 472-4477, (866) 800-8765, or via the Hospital Inpatient Questions and Answers tool at [https://cmsqualitysupport.servicenow.com/qnet\\_qa](https://cmsqualitysupport.servicenow.com/qnet_qa).