1Q 2021 Clinical, HAI, and PC-01 Data Submission Deadline is August 16, 2021

The purpose of this email is to notify hospitals participating in the Centers for Medicare & Medicaid Services (CMS) Inpatient Quality Reporting (IQR) and Hospital Acquired-Condition (HAC) Reduction Programs that the data submission deadline for the following requirements is **August 16, 2021**, at 11:59 p.m. Pacific Time:

- First quarter (1Q) 2021 Chart-Abstracted Clinical measures (SEP-1)
- 1Q 2021 Perinatal Care (PC-01) measure
- 1Q 2021 Healthcare-Associated Infection (HAI) measures

By **August 16, 2021, at 11:59 p.m. Pacific Time**, IQR and HAC Reduction eligible hospitals are required to:

- **UPLOAD CLINICAL DATA** for 1Q 2021 via the *Hospital Quality Reporting Secure Portal*. **IMPORTANT NOTE:** Hospitals can update and correct their submitted clinical data until the IQR submission deadline. After the deadline, the warehouse will be locked, and no further data can be submitted.
- **COMPLETE THE PC-01 SUBMISSION** for 1Q 2021 using the Inpatient Web-Based Data Collection Tool via the *Hospital Quality Reporting Secure Portal*.
  IPPS MEASURE EXCEPTION FORM FOR PC-01 MEASURE: Hospitals that do not deliver babies can submit an IPPS Measure Exception Form. Otherwise, hospitals that do not deliver babies must enter a zero (0) for each of the data-entry fields for each discharge quarter. **PLEASE NOTE:** This form must be renewed annually. For hospitals submitting an IPPS Measure Exception Form for CY 2021, CMS must receive it as soon as possible, but no later than the **August 16, 2021** deadline.
- **SUBMIT HAI DATA** for 1Q 2021 through the National Healthcare Safety Network (NHSN) application.

  IPPS MEASURE EXCEPTION FORM FOR HAI MEASURES: Central Line-Associated Bloodstream Infection (CLABSI) and Catheter-Associated Urinary Tract Infection (CAUTI): Hospitals that do not have a qualifying intensive care unit and also have no adult or pediatric medical, surgical, or medical/surgical wards are **required** to submit an IPPS Measure Exception Form for the CLABSI and CAUTI measures at least annually.

  Surgical Site Infection (SSI): Hospitals that performed nine or fewer of any of the specified colon and abdominal hysterectomy procedures combined in the calendar year prior to the reporting year are eligible for the SSI measure exception; qualifying hospitals may submit an IPPS Measure Exception Form for SSI-Colon and SSI-Abdominal Hysterectomy at least annually. **If an exception is not requested, SSI data must be reported.**

  Qualifying hospitals can file an HAI measure exception using the IPPS Measure Exception Form. **PLEASE NOTE:** This form must be renewed annually. For hospitals submitting an IPPS Measure Exception Form for CY 2021, CMS must receive it as soon as possible, but no later than the **August 16, 2021** deadline.

TIMELY DATA REVIEW: Allow ample time before the deadline to review and, if necessary, correct your data. Data modified in NHSN after the submission deadline are not sent to CMS and will not be used in CMS pay-for-performance programs, including the Hospital Value-Based Purchasing (HVBP) Program and the HAC Reduction Program.

DATA SUBMISSION VERIFICATION: To verify the status of your clinical data submission, you can run your Provider Participation Report (PPR) and other applicable reports. To verify the status of your HAI data submission, you can run your Facility, State and National Report. To verify the status of your PC-01 submission, you can run your PPR or check your Inpatient Web-Based Measures summary screen. Please see the 1Q 2021 Hospital IQR Program Checklist for further information.

EXTRAORDINARY CIRCUMSTANCES EXCEPTIONS (ECE)

In the event that your hospital is unable to submit data or meet requirements due to an extraordinary circumstance, you may request an individual exception.

- For events impacting your submission of data the ECE must be submitted within 90 calendar days from when you determined that the extraordinary event occurred. The event may occur during the measurement period through the submission or reporting deadline.
- For events adversely impacting your performance, for the HVBP, HRRP, and HAC Reduction Programs, the ECE must be submitted within 90 days of the date of the extraordinary circumstance. At the latest, ECEs should be submitted no later than 90 days from the last date of the quarter requested. For example, the last day of Q1 2021 is March 31, 2021. The ECE should be submitted no later than 90 days after the end of Q1, which would have been **June 29, 2021**. The last day of Q2 2021 is June 30, 2021. The ECE should be submitted no later than 90 days after the end of Q2, which would be **September 28, 2021**.

Please refer to the HACRP, HVBP, HRRP, and IQR resources on *QualityNet* for further information.

HOSPITAL CONTACT INFORMATION: To ensure your hospital receives critical communications about meeting the requirements of the IQR Program (and other CMS quality reporting programs), including submission-deadline reminders and program updates, it is important that we have the complete contact information for the key roles at your hospital. Updates to your contact information can be submitted, if needed, using the Hospital Contact Change Form. This document is available on the *Quality Reporting Center* website (*www.qualityreportingcenter.com* > *Inpatient* > *Hospital IQR Program* > *Resources and Tools* > *Forms*).