

Medicare Beneficiary Quality Improvement Project (MBQIP) Data Submission Deadlines^{1,2}

MBQIP 2025 Core Measure Set

Starting in calendar year 2025, hospitals will collect data to report on the updated MBQIP core measure set as part of the Flex Program. Details on the new MBQIP core measure set submission/reporting deadlines along with those measures continuing from the current MBQIP measure set are depicted in the following tables.

During calendar years 2023 and 2024, hospitals should continue reporting the existing MBQIP core measure set. In addition, hospitals are encouraged to start reporting on the measures that will be new in MBQIP 2025 measures as soon as they are able. At a minimum, hospitals need to put processes in place so they can collect and report data from the 2025 calendar year. During this time, State Flex Programs and the RQITA team are available to assist hospitals and health systems with the transition.

This 2025 Core Measure Set has been adopted after a process involving State Flex Programs, Critical Access Hospitals, FORHP staff, and the general public via a public comment process. It has been finalized but is subject to change as necessary to respond to changes in federal and state health care quality programs as well as to the needs of rural hospitals and the communities they serve.

MBQIP 2025 – Measures Being Added to Core Set

Submission Process and Deadlines ^{1,2}													
Measure ID	Description	MBQIP Domain	Reported To	Encounter Period									
				Q3 / 2023 Jul - Sep	Q4 / 2023 Oct - Dec	Q1 / 2024 Jan - Mar	Q2 / 2024 Apr - Jun	Q3 / 2024 Jul - Sep	Q4 / 2024 Oct - Dec	Q1 / 2025 Jan - Mar	Q2 / 2025 Apr - Jun	Q3 / 2025 Jul - Sep	Q4 / 2025 Oct - Dec
TBD	CAH Quality Infrastructure	Global Measures	FMT via Qualtrics	<u>MBQIP 2025 Core Measure starting with this measurement period</u> due Dec 15, 2023		National CAH Inventory and Assessment Continues Due date TBD				National CAH Inventory and Assessment Continues Due date TBD			
HCHE	Hospital Commitment to Health Equity	Global Measures	HQR Secure Portal	Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data)		Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data)				<u>MBQIP 2025 Core Measure starting with this measurement period</u> Submission Deadline May 15, 2026 (CY 2025 data)			
Safe Use of Opioids	Safe Use of Opioids-Concurrent Prescribing	Patient Safety	HQR Secure Portal	Hospitals may choose to report to CMS ³ . Deadline February 29, 2024 (CY 2023 data)		Hospitals may choose to report to CMS ³ Submission Deadline February 28, 2025 (CY 2024 data)				<u>MBQIP 2025 Core Measure starting with this measurement period</u> ³ Submission Deadline February 27, 2026 (CY 2025 data)			
Hybrid HWR	Hybrid Hospital-Wide Readmission	Care Coordination	HQR Secure Portal	Hospitals may choose to report to CMS Submission Deadline September 30, 2024 (Q3 2023 - Q2 2024 data)				<u>MBQIP 2025 Core Measure starting with this measurement period</u> Submission Deadline September 30, 2025 (Q3 2024 - Q2 2025 data)				Submission Deadline September 30, 2026 (Q3 2025 - Q2 2026 data)	
SDOH-1	Social Drivers of Health (SDOH) Screening	Care Coordination	HQR Secure Portal	Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data)		Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data)				<u>MBQIP 2025 Core Measure starting with this measurement period</u> Submission Deadline May 15, 2026 (CY 2025 data)			
SDOH-2	Screen Positive for Social Drivers of Health (SDOH)	Care Coordination	HQR Secure Portal	Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data)		Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data)				<u>MBQIP 2025 Core Measure starting with this measurement period</u> Submission Deadline May 15, 2026 (CY 2025 data)			

MBQIP 2025 – Measures Continuing in Core Set from Prior Years

Submission Process and Deadlines ^{1,2}													
Measure ID	Description	MBQIP Domain	Reported To	Encounter Period									
				Q3 / 2023 Jul - Sep	Q4 / 2023 Oct - Dec	Q1 / 2024 Jan - Mar	Q2 / 2024 Apr - Jun	Q3 / 2024 Jul - Sep	Q4 / 2024 Oct - Dec	Q1 / 2025 Jan - Mar	Q2 / 2025 Apr - Jun	Q3 / 2025 Jul - Sep	Q4 / 2025 Oct - Dec
HCP/IMM-3 ⁴	Influenza vaccination coverage among health care personnel	Patient Safety	NHSN	N/A	May 15, 2024 (Q4 2023 - Q1 2024 aggregate)		N/A	N/A	May 15, 2025 (Q4 2024 - Q1 2025 aggregate)		N/A	N/A	May 15, 2026 (Q4 2025 - Q1 2026 aggregate)
Antibiotic Stewardship	CDC NHSN Annual Facility Survey	Patient Safety	NHSN	March 1, 2024 ⁵ (CY 2023 data)			March 3, 2025 ⁵ (CY 2024 data)				March 2, 2026 ⁵ (CY 2025 data)		
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	Patient Experience	HQR via Vendor	January 3, 2024	April 3, 2024	July 3, 2024	October 2, 2024	January 2, 2025	April 2, 2025	July 2, 2025 anticipated	October 1, 2025 anticipated	January 7, 2026 anticipated	April 1, 2026 anticipated
EDTC ⁶	Emergency Department Transfer Communication	Emergency Department	Submission process directed by state Flex Program	October 31, 2023	January 31, 2024	April 30, 2024	July 31, 2024	October 31, 2024	January 31, 2025	April 30, 2025	July 31, 2025	October 31, 2025	January 31, 2026
OP-18	Median time from ED arrival to ED departure for discharged ED patients	Emergency Department	HQR via Outpatient CART/ Vendor	February 1, 2024	May 1, 2024	August 1, 2024	November 1, 2024	February 1, 2025	May 1, 2025	August 1, 2025	November 1, 2025	February 1, 2026	May 1, 2026
OP-22	Patient left without being seen	Emergency Department	HQR Secure Portal	May 15, 2024 (CY 2023 data aggregate)		May 15, 2025 (CY 2024 data aggregate)				May 15, 2026 (CY 2025 data aggregate)			

1. Based on currently available information. Submissions dates are subject to change.
2. Data submission deadlines on a federal holiday or weekend (Saturday or Sunday) will default to the first business day thereafter in this document where applicable.
3. The Safe Use of Opioids-Concurrent Prescribing measure is required as part of the Promoting Interoperability Program.
4. The encounter period for HCP/IMM-3 is limited to Q4 and Q1.
5. Hospitals are strongly encouraged to complete the NHSN Annual Facility Survey by March 1 of each year but may submit or update survey responses throughout the year.
6. State Flex Programs must submit data to FMT by the 10th day of the month following the hospital deadline (e.g. Q3 2023 data due to FMT by Nov 10, 2023).