

## Medicare Beneficiary Quality Improvement Project (MBQIP) Data Submission Deadlines<sup>1,2</sup>

### 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.

The Federal Office of Rural Health Policy (FORHP), at the Health Resources and Services Administration (HRSA), selected the 2025 MBQIP Core Measure Set, based on alignment with CMS and CDC national quality measure standards. This 2025 MBQIP Core Measure Set, has been adopted after a process involving FORHP staff, State Flex Programs, Critical Access Hospitals, and public comment input. Though these measures are finalized, they are always subject to change as necessary, to respond to changes in federal and state health care quality programs, as well as to support the needs of rural hospitals and the communities they serve.

## MBQIP 2025 – Measures Being Added to Core Set

Submission Process and Deadlines <sup>1,2</sup>										
Measure ID	Description	MBQIP Domain	Reported To	Encounter Period						
				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	<a href="#">CAH Quality Infrastructure</a>	Global Measures	FMT via Qualtrics	National CAH Inventory and Assessment Continues Submission window September 16, 2024-November 22, 2024			National CAH Inventory and Assessment Continues Due date TBD			
HCHE	<a href="#">Hospital Commitment to Health Equity</a>	Global Measures	HQR Secure Portal	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	<a href="#">Safe Use of Opioids- Concurrent Prescribing</a>	Patient Safety	HQR Secure Portal	Hospitals may choose to report to CMS <sup>3</sup> Submission Deadline February 28, 2025 (CY 2024 data)			<u>MBQIP 2025 Core Measure starting with this measurement period<sup>3</sup></u> Submission Deadline February 28, 2026 (CY 2025 data)			
Hybrid HWR	<a href="#">Hybrid Hospital-Wide Readmission</a>	Care Coordination	HQR Secure Portal	Hospitals may choose to report to CMS Submission Deadline October 1, 2024 (Q3 2023 - Q2 2024 data)	Hospitals may choose to report to CMS Submission Deadline October 1, 2025 (Q3 2024 - Q2 2025 data)			<u>MBQIP 2025 Core Measure starting with this measurement period</u> Submission Deadline October 1, 2026 (Q3 2025 - Q2 2026 data)		
SDOH-1	<a href="#">Social Drivers of Health (SDOH) Screening</a>	Care Coordination	HQR Secure Portal	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	<a href="#">Screen Positive Rate for Social Drivers of Health (SDOH)</a>	Care Coordination	HQR Secure Portal	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 <sup>1,2</sup>										
Measure ID	Description	MBQIP Domain	Reported To	Encounter Period						
				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 <sup>4</sup>	<a href="#">Influenza vaccination coverage among health care personnel</a>	Patient Safety	NHSN	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	<a href="#">CDC NHSN Annual Facility Survey</a>	Patient Safety	NHSN	March 1, 2025 <sup>5</sup> (CY 2024 data)			March 1, 2026 <sup>5</sup> (CY 2025 data)			
HCAHPS	<a href="#">Hospital Consumer Assessment of Healthcare Providers and Systems</a>	Patient Experience	HQR via Vendor	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 <sup>6</sup>	<a href="#">Emergency Department Transfer Communication</a>	Emergency Department	Submission process directed by state Flex Program	July 31, 2024	October 31, 2024	January 31, 2025	April 30, 2025	July 31, 2025	October 31, 2025	January 31, 2026
OP-18	<a href="#">Median time from ED arrival to ED departure for discharged ED patients</a>	Emergency Department	HQR via Outpatient CART/ Vendor	November 1, 2024	February 3, 2025	May 1, 2025	August 1, 2025	November 1, 2025	February 1, 2026	May 1, 2026
OP-22	<a href="#">Patient left without being seen</a>	Emergency Department	HQR Secure Portal	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 except for Antibiotic Stewardship which will remain March 1 regardless of when that date occurs.
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 must complete the NHSN Annual Facility Survey by March 1 of each year for NHSN and MBQIP data reporting.
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).