



Medicare Beneficiary Quality Improvement Project (MBQIP)

MBQIP 2025 Core Measure Set and Data Submission Deadlines (Updated April 2025)

Starting in calendar year 2025, critical access hospitals will collect data to report on the updated MBQIP core measure set as part of the Flex Program. Details on measure set submission/reporting deadlines for both the new MBQIP core measures and the existing MBQIP measure set are listed in the following tables. Measure descriptions, instructions for data submission, and links to measures specifications for all MBQIP Core measures can be found in the MBQIP Minnesota Quality Reporting Guide.

Hospitals will continue reporting the existing MBQIP core measure set listed on page three of this document. Hospitals are encouraged to start reporting on the new measures in the MBQIP 2025 Core Measure Set as soon as possible. At a minimum, hospitals need to start implementing processes to collect and report data on the new measures in 2025. The Minnesota Flex Program and Stratis Health are available to assist hospitals and health systems incorporate the new measures.

The 2025 MBQIP Core Measure Set was adopted by the Federal Office of Rural Health Policy (FORHP) after a process involving input from State Flex Programs, critical access hospitals, and the public via a public comment process. The measure set may be subject to change over time as needed to align with changes in federal and state health care quality programs as well the needs of rural hospitals and the communities they serve.

MBQIP 2025 Core Measure Set

Existing Measure						
New Measure						
Global Measures	Patient Safety	Patient Experience	Care Coordination	Emergency Department		
CAH Quality Infrastructure Implementation*	Healthcare Personnel Influenza Immunization* Antibiotic Stewardship Implementation*	Hospital Consumer Assessment of Healthcare	Hybrid All-Cause Readmissions*	Emergency Department Transfer Communication (EDTC)		
Implementation		Providers and Systems (HCAHPS)	Social Drivers of Health (SDOH) Screening*			
			SDOH Screen Positive*	OP-18 Time from Arrival to Departure		
	Safe Use of Opioids (eCQM)*			OP-22 Left without Being Seen*		

^{*}Annual Submission. Eight measures are reported once annually, three measures reported quarterly (HCAHPS, EDTC, OP-18). Note: Hospital Commitment to Health Equity has been removed as of March 14, 2025 per guidance from FOHRP.

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MBQIP 2025 - Measures Added to Core Set

Blue shading indicates the required measurement periods for the new measures reporting.

Submission Process and Deadlines ^{1,2}													
Measure 5		MBQIP Domain	Reported To	Encounter Period									
ID	Description			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 online survey	MBQIP 20 Measure so this measure due Dec	tarting with ement period	National CAH Quality Inventory and Assessment Due date: November 22, 2024				National CAH Quality Inventory and Assessment Due date TBD			
Safe Use of Opioids ³	Safe Use of Opioids	Patient Safety	HQR Secure Portal	Hospitals encouraged to report. Deadline Feb 29, 2024 (CY 2023 data) Hospitals encouraged Submission Deadline M (CY 2024 dat					t 25	MBQIP 2025 Core Measure starting with this measurement period Submission Deadline Feb 27, 2026 (CY 2025 data)			
Hybrid HWR	Hybrid Hospital- Wide Readmissions	Care Coordination	HQR Secure Portal	Hospitals encouraged to report Submission Deadline Sep 30, 2024 (Q3 2023 - Q2 2024 data)					Hospitals encouraged to report Submission Deadline Sep 30, 2025 (Q3 2024 - Q2 2025 data)				025 Core starting with ement period n Deadline: 0, 2026 - Q2 2026 tta)
SDOH-1	Social Drivers of Health (SDOH) Screening	Care Coordination	HQR Secure Portal	Hospitals en report. Data is availabl April 1 Deadline Ma (CY 202	submission le starting , 2024 ay 15, 2024	Hospitals encouraged to report Submission Deadline May 15, 2025 (CY 2024 data)				MBQIP 2025 Core Measure starting with this measurement period Submission Deadline May 15, 2026 (CY 2025 data)			
SDOH-2	Social Drivers of Health (SDOH) Screen Positive	Care Coordination	HQR Secure Portal	Hospitals en report. Data is availabl Apr 1, Deadline Ma (CY 202	submission le starting 2024 ay 15, 2024	Hospitals encouraged to report Submission Deadline May 15, 2025 (CY 2024 data)				MBQIP 2025 Core Measure starting with this measurement period Submission Deadline May 15, 2026 (CY 2025 data)			

^{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 measure is a required eCQM for the Medicare Promoting Interoperability Program.





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 ³	Influenza vaccination coverage among health care personnel	Patient Safety	NHSN	N/A	(Q4 2023	5, 2024 3 - Q1 2024 egate)	N/A	N/A	(Q4 202	15, 2025 4 - Q1 2025 regate)	N/A	N/A	May 15, 2026 (Q4 2025 - Q1 2026 aggregate)	
Antibiotic Steward- ship	CDC NHSN Annual Facility Survey	Patient Safety	NHSN	Mar 1, (CY 202		Mar 3, 2025 ⁴ (CY 2024 data)				Mar 2, 2026 ⁴ (CY 2025 data)				
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	Patient Experience	HQR via Vendor	Jan 3, 2024	Apr 3, 2024	Jul 3, 2024	Oct 2, 2024	Jan 2, 2025	Apr 2, 2025	Jul 2, 2025 anticipated	Oct 1, 2025 anticipated	Jan 7, 2026 anticipated	Apr 1, 2026 anticipated	
EDTC	Emergency Department Transfer Communication	Emergency Department	MN Hospital Association Portal	Oct 31, 2023	Jan 31, 2024	Apr 30, 2024	Jul 31, 2024	Oct 31, 2024	Jan 31, 2025	Apr 30, 2025	Jul 31, 2025	Oct 31, 2025	Jan 31, 2026	
OP-18	Median time from ED arrival to ED departure for discharged ED patients	Emergency Department	HQR Secure Portal	Feb 1, 2024	May 1, 2024	Aug 1, 2024	Nov 1, 2024	Feb 1, 2025	May 1, 2025	Aug 1, 2025	Nov 1, 2025	Feb 1, 2026	May 1, 2026	
OP-22	Patient left without being seen	Emergency Department	HQR Secure Portal	May 15 (CY 20) aggre	23 data	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 encounter period for HCP/IMM-3 is limited to Q4 and Q1.

^{4.} 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.