

Hospital Reporting Calendar

															20	025													
	1st Quarter										2n	d Quart	er			3rd Quarter							4th Quarter						
		JAN	_		FEB			ARCH		APF			MAY		JUNE			LY		AUG		SEPT	_	ОСТ		NO\			DEC
Hospital Einanaial Transparancy (HET)	1	15	31	1	15	28/29	1	15	30 1	15	30	1	15	31 1	15	30	1 15	5 31	1	15	30 1	15	30 1	15	31 1	15	30	1	15 3
Hospital Financial Transparency (HFT) 1st Quarter _ FY																D												4	
2nd Quarter _ FY	-															ע							D						
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3rd Quarter _ FY	-			-																									0
4th Quarter_FY	-								D																				
Annual Report FY 3/31 *Q1 is Exempted	4			ļļ.															D										
Annual Report FY 6/30 *Q2 is Exempted																									D				
Annual Report FY 10/31 *Q3 is Exempted	4						D																						
Annual Report FY 12/31 *Q4 is Exempted												D			-														
Hospital Community Benefit Accountability (HCBA)																													
HCBA Annual Reporting																	D												
Hospital Transformation Program																												_	
•																												-	
Hospital Self Reported Performance Measure Data for Quarter 1 Interim Activity and CHNE report Quarters 1&3 - January (1-31)			D																										
& July(1-31) each year			D															D											
Milestone & CHNE reporting Quarters 2 & 4 - April (1-30) & October (1-31) each year											1	D													D				
Hospital Quality Incentive Payment (HQIP)																													
Hospital Quality Incentive Payment														D															
Hospital Discounted Care Program		Ħ		Н																									
Annual Reporting (SFY basis)																					D								
CHASE Hospital Data Reports																													
Confirmation of contacts/portal users due from hospitals			D																										
Surveys and supporting documents due from hospitals	-			1			D																						
Hospital responses to Hospital Data Reports due from hospitals													D																
DSH Audit Report																													
Web Portal Contact Confirmation Information				D																								-	-
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DSH Documentation		+								D									++									++	++
Expanded Procedures Documentation Informal Review											D		D																
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Hospital Price Transparency																													
* Hospitals are not required to report. Data is collected two times per year*																													
D: Due Every Year																													
For more information places visit https://boof.selerade.gov/for_sur_has_itale																													#
For more information please visit: https://hcpf.colorado.gov/for-our-hospitals																													