Promoting Interoperability
PROGRAMS

2020 Medicare Promoting Interoperability Program for Eligible Hospitals and CAHs

January 2020

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Topics

- Overview of the Promoting Interoperability Programs

- CY 2020 Requirements for Medicare Promoting Interoperability Program

  - Electronic Health Record (EHR) Reporting Requirements

  - Certified EHR Technology (CEHRT) Requirements

  - Objectives, Measures, and Scoring

  - Clinical Quality Measure (CQM) Changes

- Additional Resources

Overview of the Promoting Interoperability Programs

EHR Incentive Programs: 2011-2018

Introduced in 2011 as part of the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009

Encouraged eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) to adopt, implement, and upgrade (AIU) CEHRT to demonstrate meaningful use of health information technology (health IT)

Advanced in 3 stages:

1
STAGE 1:
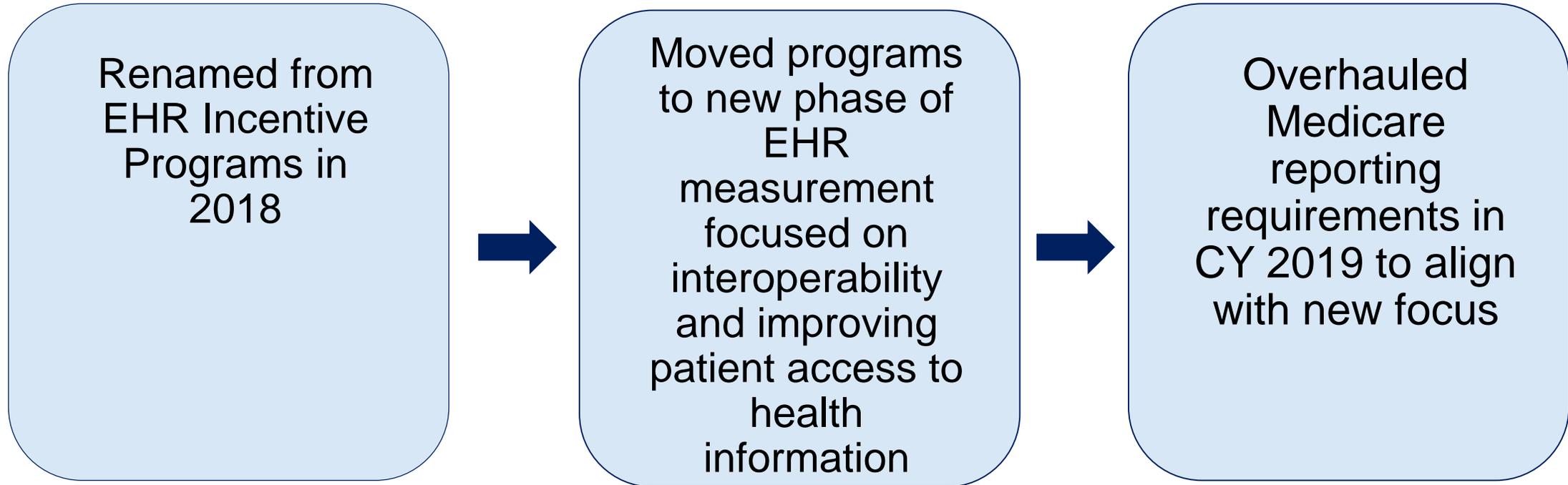Established requirements for the electronic capture of clinical data

2
STAGE 2:
Encouraged the use of CEHRT to meet key quality measures established by the agency

3
STAGE 3:
Focused on using CEHRT to advance health outcomes

CMS

Promoting Interoperability Programs: 2018-Present

Renamed from EHR Incentive Programs in 2018

→

Moved programs to new phase of EHR measurement focused on interoperability and improving patient access to health information

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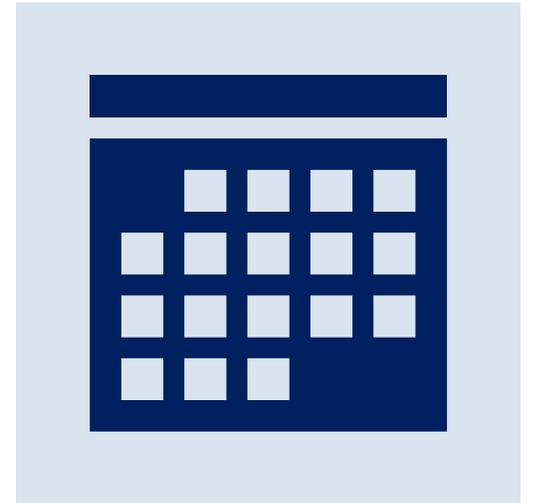Overhauled Medicare reporting requirements in CY 2019 to align with new focus

Promoting Interoperability Programs Overview

- Requires eligible hospitals and CAHs to report on objectives and measures to be considered a meaningful EHR user and avoid Medicare payment reduction

- Focuses on:
  - Advancement of CEHRT utilizations
  - Burden reduction
  - Advancing interoperability
  - Improving patient access to health information

CY 2020 Requirements for Medicare Promoting Interoperability Program for Eligible Hospitals and CAHs

EHR Reporting Period

- EHR reporting period of any consecutive 90-day period for new and returning participants in calendar year 2020 and 2021.

- Actions in numerator and denominator of measures must be performed within self-selected, 90-day EHR reporting period in CY 2020.

CEHRT Requirements

CEHRT Requirements

- Utilize 2015 Edition CEHRT

- The functionality must be in place by the first day of the EHR reporting period and the product must be certified to the 2015 Edition criteria by the last day of the EHR reporting period

- The eligible hospital or CAH must be using the 2015 Edition functionality for the full EHR reporting period

Objectives & Measures

Electronic Prescribing Objective Overview

Electronic Prescribing Objective and Measures

e-Prescribing
- 10 points
- Numerator/ Denominator reporting
- Exclusion available

Query of PDMP
- Optional
- 5 bonus points
- Yes/No attestation
- No exclusion available

e-Prescribing Measure

Measure Name:	e-Prescribing
Measure Description	For at least one hospital discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT
Maximum Points Available	**10 points**
Numerator	The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically.
Denominator	The number of new or changed prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances for patients discharged during the EHR reporting period.
Exclusion Available?	**Yes** Any eligible hospital or CAH that does not have an internal pharmacy that can accept electronic prescriptions and there are no pharmacies that accept electronic prescriptions within 10 miles at the start of their EHR reporting period
If exclusion claimed, points re-distribution	10 points would be redistributed equally among the measures under the Health Information Exchange objective

Query of PDMP Measure

Measure Name:	Query of Prescription Drug Monitoring Program (PDMP)
Measure Description	For at least one Schedule II opioid electronically prescribed using CEHRT during the EHR reporting period, the eligible hospital or CAH uses data from CEHRT to conduct a query of a PDMP for prescription drug history is conducted, except where prohibited and in accordance with applicable law
Maximum Points Available	**5 points (*bonus*)**
Yes/No Attestation	The eligible hospital or CAH must attest YES to conducting a query of PDMP for prescription drug history.
Exclusion Available?	**No**

Health Information Exchange Objective Overview

Health Information Exchange Objective and Measures

Support Electronic Referral Loops by Sending Health Information

- Up to 20 points
- Numerator/ Denominator reporting
- No exclusion available

Support Electronic Referral Loops by Receiving and Incorporating Health Information

- Up to 20 points
- Numerator/ Denominator reporting
- No exclusion available

Support Electronic Referral Loops by Sending Health Information Measure

Measure Name:	Support Electronic Referral Loops by Sending Health Information
Measure Description	For at least one transition of care or referral, the eligible hospital or CAH that transitions or refers their patient to another setting of care or provider of care: (1) Creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.
Maximum Points Available	**20 points**
Numerator	The number of transitions of care and referrals in the denominator where a summary of care record was created and exchanged electronically using CEHRT.
Denominator	Number of transitions of care and referrals during the EHR reporting period for which the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) was the transitioning or referring provider to a provider of care other than an eligible hospital or CAH.
Exclusion Available?	**No**

Support Electronic Referral Loops by Receiving and Incorporating Health Information Measure

Measure Name:	**Support Electronic Referral Loops by Receiving and Incorporating Health Information**
Measure Description	For at least one electronic summary of care record received for patient encounters during the EHR reporting period for which an eligible hospital or CAH was the receiving party of a transition of care or referral, or for patient encounters during the EHR reporting period in which the eligible hospital or CAH has never before encountered the patient, the eligible hospital or CAH conducts clinical information reconciliation for medication, medication allergy, and current problem list
Maximum Points Available	**20 points**
Numerator	The number of electronic summary of care records in the denominator for which clinical information reconciliation is completed using CEHRT for the following three clinical information sets: (1) Medication – Review of the patient's medication, including the name, dosage, frequency, and route of each medication; (2) Medication allergy – Review of the patient's known medication allergies; and (3) Current Problem List – Review of the patient's current and active diagnoses.
Denominator	The number of electronic summary of care records received using CEHRT for patient encounters during the EHR reporting period for which an eligible hospital or CAH was the receiving party of a transition of care or referral, and for patient encounters during the EHR reporting period in which the eligible hospital or CAH has never before encountered the patient.
Exclusion Available?	**No**

Provider-to-Patient Exchange Objective Overview

Provider-to-Patient Exchange Objective and Measure

- Up to 40 points

- Numerator/Denominator reporting

- No exclusion available

Provide Patients Electronic Access to Their Health Information Measure

Measure Name:	Provide Patients Electronic Access to Their Health Information
Measure Description	For at least one unique patient discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) the patient (or patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and the eligible hospital or CAH ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the application programming interfaces (API) in the eligible hospital or CAH's CEHRT.
Maximum Points Available	40 points
Numerator	The number of patients in the denominator (or patient authorized representative) who are provided timely access to health information to view online, download and transmit to a third party and to access using an application of their choice that is configured to meet the technical specifications of the API in the provider's CEHRT.
Denominator	The number of unique patients discharged from an eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.
Exclusion Available?	No

Public Health and Clinical Data Exchange Objective Overview

Public Health and Clinical Data Exchange Objective and Measures

- Up to 10 points

- Yes/No attestation on any 2 of 6 measures available

- Exclusions available

Public Health and Clinical Data Exchange Measures

Report on **two (2)** of the **six (6)** measures

Syndromic Surveillance Reporting

Immunization Registry Reporting

Electronic Case Reporting

Public Health Registry Reporting

Clinical Data Registry Reporting

Electronic Reportable Laboratory Result Reporting

Syndromic Surveillance Reporting Measure

Measure Name:	Syndromic Surveillance Reporting
Measure Description	The eligible hospital or CAH is in active engagement with a public health agency (PHA) to submit syndromic surveillance data from an urgent care setting.
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** • Does not have an emergency or urgent care department; • Operates in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the electronic health record (EHR) reporting period; or • Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Immunization Registry Reporting Measure

Measure Name:	Immunization Registry Reporting
Measure Description	The eligible hospital or CAH is in active engagement with a PHA to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH: • Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or IIS during the electronic health record (EHR) reporting period; • Operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Electronic Case Reporting Measure

Measure Name:	Electronic Case Reporting
Measure Description	The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions.
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the case reporting measure if the eligible hospital or CAH: • Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction's reportable disease system during the electronic health record (EHR) reporting period; • Operates in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Public Health Registry Reporting Measure

Measure Name:	Public Health Registry Reporting
Measure Description	The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries.
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the eligible hospital or CAH: • Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the electronic health record (EHR) reporting period; • Operates in a jurisdiction for which no PHA is capable of accepting electronic registry transactions in the specific standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no public health registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Clinical Data Registry Reporting Measure

Measure Name:	Clinical Data Registry Reporting
Measure Description	The eligible hospital or CAH is in active engagement to submit data to a clinical data registry (CDR).
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the CDR reporting measure if the eligible hospital or CAH: • Does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the electronic health record (EHR) reporting period; • Operates in a jurisdiction for which no CDR is capable of accepting electronic registry transactions in the specific standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no CDR for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Electronic Reportable Laboratory Result Reporting Measure

Measure Name:	Electronic Reportable Laboratory Result Reporting
Measure Description	The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.
Maximum Points Available	**10 points**
Yes/No Attestation	Yes/No Attest to two measures under the Public Health and Clinical Data Exchange objective
Exclusion Available?	**Yes** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the ELR result reporting measure if the eligible hospital or CAH: • Does not perform or order laboratory tests that are reportable in their jurisdiction during the electronic health record (EHR) reporting period; • Operates in a jurisdiction for which no PHA is capable of accepting the specific ELR standards required to meet the certified electronic health record technology (CEHRT) definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no PHA has declared readiness to receive ELR results from an eligible hospital or CAH as of six months prior to the start of the EHR reporting period.
If exclusion claimed, points re-distribution	• If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective. • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.

Additional Attestation Requirement: Security Risk Analysis

- The Security Risk Analysis aims to protect electronic protected health information created or maintained by CEHRT through the implementation of appropriate technical capabilities

- It remains a requirement of the Medicare Promoting Interoperability Program, but is not scored

- A Yes/No attestation is required

Scoring Methodology for the Medicare Promoting Interoperability Program for Eligible Hospitals and CAHs

Scoring Methodology

Scoring Methodology

- Performance-based scoring

- Can receive up to 100 total points

- Must earn a minimum of 50 points in order to satisfy the requirement to report on the objectives and measures of meaningful use

- Must submit a complete numerator/denominator or Yes/No data for all required measures

- Must complete activities required by the Security Risk Analysis measure

Medicare Promoting Interoperability Program Scoring Methodology

OBJECTIVES

Electronic Prescribing	Health Information Exchange	Provider to Patient Exchange	Public Health and Clinical Data Exchange

MEASURES

e-Prescribing **(10 points)**	Support Electronic Referral Loops by Sending Health Information **(20 points)**	Provide Patients Electronic Access to Their Health Information **(40 points)**	**CHOOSE 2:** • Syndromic Surveillance Reporting • Immunization Registry Reporting • Electronic Case Reporting • Public Health Registry Reporting • Clinical Data Registry—Reporting • Electronic Reportable Laboratory Result Reporting **(10 points)**
Bonus: Query of Prescription Drug Monitoring Program (PDMP) **(5 bonus points)**	Support Electronic Referral Loops by Receiving and Incorporating Health Information **(20 points)**		

CMS

Electronic Prescribing Scoring

OBJECTIVES	MEASURE	MAXIMUM POINTS
Electronic Prescribing	e-Prescribing	10 points
	Bonus: Query of PDMP	5 **bonus** points

CMS

Health Information Exchange Scoring

OBJECTIVES	MEASURE	MAXIMUM POINTS
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information	20 points
	Support Electronic Referral Loops by Receiving and Incorporating Health Information	20 points

Provider-to-Patient Exchange Scoring

OBJECTIVES	MEASURE	MAXIMUM POINTS
Provider-to-Patient Exchange	Provide Patients Electronic Access to Their Health Information	40 points

Public Health and Clinical Data Exchange Scoring

OBJECTIVES	MEASURE	MAXIMUM POINTS
Public Health and Clinical Data Exchange	Immunization Registry Reporting Syndromic Surveillance Reporting Electronic Case Reporting Public Health Registry Reporting Clinical Data Registry Reporting Electronic Reportable Laboratory Result Reporting	10 points (for choosing any 2 of the available measures)

Scoring Example

Objectives	Measures	Numerator/ Denominator	Performance Rate	Max. Points Available	Score
Electronic Prescribing	e-Prescribing	200/250	80%	10 points	8 points
	Bonus: Query of PDMP	Yes	N/A	5 bonus points	5 bonus points
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information	135/185	73%	20 points	15 points
	Support Electronic Referral Loops by Receiving and Incorporating Health Information	145/175	83%	20 points	17 points
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	350/500	70%	40 points	28 points
Public Health and Clinical Data Exchange	<u>Choose any two of the following:</u> Syndromic Surveillance Reporting Immunization Registry Reporting Electronic Case Reporting Public Health Registry Reporting Clinical Data Registry Reporting Electronic Reportable Laboratory Result Reporting	Yes	N/A	10 points	10 points
Total Score					**83 points**

CQM Changes

CY 2020—CQM Changes

CQM Requirements

- Reduced the number of CQMs available from 16 to 8 (participants must report on 4 CQMs)

- Reporting period is one, self-selected calendar quarter of CY 2020

- If electronic reporting is not feasible, an eligible hospital or CAH may report via attestation

  - The reporting period for attestation would require data from the full CY 2019 (consisting of four quarterly data reporting periods)

Additional Resources

2020 EHR Reporting Timeline

Reporting Year — **Attest** — **Hardship Exception** — **Payment Adjustments**

2020
- Begins January 1, 2020
- Ends December 31, 2020

February 26, 2021
- February 26, 2021 Deadline
- Must attest using QualityNet

2021
- Eligible Hospitals can submit Hardship Exception Application no later than– July 1
- CAHs can submit Hardship Exception Application no later than – November 30

2020- 2022
- Eligible Hospitals (first year) 2021 and 2022
- Eligible Hospital (returning) 2022
- CAHs 2020

2020 Participation Checklist

✓Report on measures for 4 objectives for any self-selected, 90-day (consecutive) EHR reporting period in CY 2020

✓Use 2015 Edition CEHRT

✓Report on 4 of the 8 available CQMs during one, self-selected calendar quarter of CY 2020

✓Submit a "Yes" to the Prevention of Information Blocking Attestation

✓Submit a "Yes" to the Office of the National Coordinator for Health Information Technology (ONC) Direct Review Attestation

✓Submit a "Yes" for the Security Risk Analysis measure

Additional Resources

For more information on final changes to the Medicare Promoting Interoperability Program in CY 2020:

- Review [fact sheet](#) on final rule (CMS-1716-F)

- View final rule (CMS-1716-F) on [Federal Register](#)

- Review [2020 program requirements](#)

- Review the [2020 Medicare Promoting Interoperability Program Specification Sheets](#)

- Visit [CMS website](#) and subscribe to [CMS Promoting Interoperability listserv](#)