

Medicare Promoting Interoperability PROGRAM

Medicare Promoting Interoperability Program Call for Measures Submission Form

Stakeholders must use this form to propose new measures for eligible hospitals and critical access hospitals (CAHs) participating in the Medicare Promoting Interoperability Program.

The submission deadline is July 1, 2023. Proposals submitted by the deadline will be considered for inclusion in future rulemaking.

Proposals must be sent to CMSPICallforMeasures@ketchum.com.

CMS requests that stakeholders consider the following priority areas when submitting measures. We are seeking measures that:

- Build on the advanced use of CEHRT using the 2015 Edition Cures Update Certification Standards and Criteria;
- Promote interoperability and health information exchange;
- Improve program efficiency, effectiveness, and flexibility;
- Provide patients access to their health information;
- Reduce clinician and administrative burden; and
- Align with the Promoting Interoperability Performance Category for eligible clinicians participating in the Merit-based Incentive Payment System (MIPS), as applicable.

Section 1: Stakeholder Information

Provide the following information for the individual, group, or association proposing a new measure for the Medicare Promoting Interoperability Program. All required fields are indicated with an asterisk (*). This information will be used to contact the stakeholder(s) if necessary and apprise them of determinations made for their proposed measure(s).

Submitter First Name*	Middle Initial	Submitter Last Name*	Credentials (MD, DO, etc.)
Name of Organization (if applicable)*:			



Address Line 1 (Street Name and Number – <u>Not</u> a Post Office Box or Practice Name)*		
Address Line 2 (Suite, Room, etc.)		
City/Town*	State (2 character code)*	Zip Code (5 digits)*
Email Address* (This is how we will communicate with you)		
Business Telephone Number (include Area Code)		Extension

Section 2: Considerations When Proposing Measures

When preparing proposals, please consider whether the new measure:

- Highlights better beneficiary health outcomes and provides access to their health information
- Promotes interoperability and health information exchange
- Facilitates improvement in patient care practices, reduces reporting burden, or includes an emerging certified health IT functionality or capability
- Aligns with the Promoting Interoperability Performance Category for eligible clinicians participating in MIPS.
- Builds on the advanced use of CEHRT using 2015 Edition Cures Update Criteria
- Does not duplicate existing objectives and measures
- Is feasible to implement
- Is able to be validated by the CMS

All comments are welcome, but CMS is seeking submissions specifically on:

- Health IT measures that are performance-based rather than attestation-based
- Potential new Opioid Use Disorder prevention and treatment, and other related measures

Section 3: Required Information for Measure Proposals

Please note N/A or “not applicable” if a field does not apply to the measure you’re proposing. If you do not provide information for every applicable field/section in the form, CMS will not evaluate your proposal.

MEASURE DESCRIPTION (Provide a detailed description of the measure to be considered, including the intent of the measure, and its relevance to the Medicare Promoting Interoperability Program with regard to the considerations listed above):

Description:

Program Relevance:

How does this measure build on the advanced use of CEHRT?:



How does this measure promote interoperability and health information exchange?:

Does this measure support the efforts of opioid prevention and treatment, and other related measures? If so, how?:

Does this measure align with or complement the MIPS Promoting Interoperability Performance Category?:

What is an indication of high performance for this measure?:

Is this measure applicable for physician or non-physician clinical staff? Or both?

REPORTING REQUIREMENT (Numerator/Denominator or Yes/No Statement):

Indicate whether the measure should include as a reporting requirement: 1) the numerator and denominator, threshold (if applicable) and exclusion criteria (if applicable) or 2) a yes/no statement and exclusion criteria (if applicable)

YES/NO STATEMENT

Exclusion Criteria (If applicable and rationale for exclusion proposal, otherwise state N/A):

OR

Denominator Language:

Numerator Language:

Measurable Criteria for Numerator Action (The clinical action must be tied to the numerator proposed language. For example: e-Prescribing Measure: At least one permissible prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically using CEHRT):

- At least one (e.g., patient or clinical action)
- Recommended percentage (please state – for example: 5 percent):

Rationale:



CEHRT FUNCTIONALITIES REQUIRED FOR PROPOSED MEASURE

Describe CEHRT functionalities that are needed to attest successfully to this proposed measure, if applicable. If you do not believe certain functionalities are required (such as an application programming interface, or API) please use N/A.

Functionality type (e.g., API):

Optional (Additional Information, suggestions and/or comments related to the Call for Measures):

