Merit-Based Incentive Payment System (MIPS) Promoting Interoperability Performance Category Measure
2023 Performance Period

Objective:	Health Information Exchange
Measure:	**Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA)** The MIPS eligible clinician or group must attest to the following: • Participating as a signatory to a Framework Agreement (as that term is defined by the Common Agreement for Nationwide Health Information Interoperability as published in the Federal Register and on ONC's website) in good standing (that is, not suspended) and enabling secure, bi-directional exchange of information to occur, in production, for every patient encounter, transition or referral, and record stored or maintained in the EHR during the performance period, in accordance with applicable law and policy. • Using the functions of CEHRT to support bi-directional exchange of patient information, in production, under this Framework Agreement.
Measure ID:	**PI_HIE_6**

Definition of Terms

Health Information Exchange: "HIE" broadly refers to arrangements that facilitate the exchange of health information, and may include arrangements commonly denoted as exchange "frameworks," "networks," or using other terms.

Reporting Requirements

YES/NO

The MIPS eligible clinician must attest YES to the following:

- I participate as a signatory to a Framework Agreement (as that term is defined by the Common Agreement for Nationwide Health Information Interoperability as published in the Federal Register and on ONC's website) in good standing (that is, not suspended) and enable secure, bidirectional exchange of information to occur, in production, for every patient encounter, transition or referral, and record stored or maintained in the EHR during the performance period, in accordance with applicable law and policy.
- Using the functions of CEHRT to support bi-directional exchange of patient information, in production, under this Framework Agreement.

Scoring Information

- Required for Promoting Interoperability Performance Category Score: **Yes, if submitting as an alternative to the Support Electronic Referral Loops by Sending Health Information and the Support Electronic Referral Loops by Receiving and Reconciling measures (PI_HIE_1 and PI_HIE_4) or an alternative to the HIE Bi-Directional Exchange measure (PI_HIE_5)**
- Measure Score: **30 points**
- Eligible for Bonus Score: **No**

Note: In order to earn a score greater than zero for the Promoting Interoperability performance category, MIPS eligible clinicians must:

- o Complete the Security Risk Analysis measure
- o Review the High Priority Practices SAFER Guide[1]
- o Complete the ONC Direct Review attestation
- o Attest to the Actions to limit or restrict compatibility or interoperability of CEHRT statement
- o Submit their complete numerator and denominator or Yes/No data for all required measures
- o Submit their CMS certification identification number
- o Submit their level of active engagement for the Public Health and Clinical Data Exchange measures
- o Failure to report at least a "1" in all required measures with a numerator or reporting a "No" for a Yes/No response measure (except for the SAFER Guides measure[2]) will result in a total score of 0 points for the Promoting Interoperability performance category.

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[1] The SAFER, or Safety Assurance Factors for EHR Resilience, Guides measure was added in the CY 2022 Physician Fee Schedule Final Rule.
[2] In 2023, eligible clinicians will be required to submit one "yes/no" attestation statement for completing an annual self-assessment of the High Priority Practices SAFER Guide, but the "yes" or "no" attestation response will fulfill the measure.

Additional Information

- In 2023, MIPS eligible clinicians must use technology certified to the 2015 Edition of health IT certification criteria and updated to the 2015 Edition Cures Update to meet the CEHRT definition. (85 FR 84472)
- To learn more about the 2015 Edition Cures Update and the changes to 2015 Edition certification criteria finalized in the 21st Century Cures Act final rule (85 FR 25642), we encourage MIPS eligible clinicians to visit https://www.healthit.gov/curesrule/final-rule-policy/2015-edition-cures-update.
- To check whether a health IT product has been certified to criteria updated for the 2015 Edition Cures Update, visit the Certified Health IT Product List (CHPL) at https://chpl.healthit.gov/.
- Certified functionality must be used as needed for a measure action to count in the numerator during a performance period. However, in some situations the product may be deployed during the performance period, but pending certification. In such cases, the product must be certified by the last day of the performance period.
- When MIPS eligible clinicians choose to report as a group, data should be aggregated for all MIPS eligible clinicians under one Taxpayer Identification Number (TIN). This includes those MIPS eligible clinicians who may qualify for reweighting such through an approved Promoting Interoperability hardship exception, hospital or ASC-based status, or in a specialty which is not required to report data to the Promoting Interoperability performance category. If these MIPS eligible clinicians choose to report as a part of a group practice, they will be scored on the Promoting Interoperability performance category like all other MIPS eligible clinicians.
- For more information about TEFCA, visit https://www.healthit.gov/topic/interoperability/policy/trusted-exchange-framework-and-common-agreement-tefca.

Regulatory References

- For further discussion, please see the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) final rule: 81 FR 77228 and 81 FR 77229.
- For additional discussion, please see the 2023 Physician Fee Schedule final rule: 877 FR 70069 through 70071.
- Examples of certified health IT capabilities to support the actions of this measure may include but are not limited to technology certified to the criteria at 45 CFR 170.315 (b)(1), (b)(2), (g)(7), (g)(9), and (g)(10).

Certification Criteria

Below are the corresponding certification criteria for EHR technology that support this measure.

Certification Criteria
§170.315(b)(1) Transitions of Care
§170.315(b)(2) Clinical Information Reconciliation and Incorporation
§170.315(g)(7) Application access — Patient Selection
§170.315(g)(9) Application access — All Data Request
§170.315(g)(10) Application access — Standardized API for Patient and Population Services