

EHR Vendor Fact Sheet

The Quality Payment Program

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) replaced three programs (the Medicare Electronic Health Record (EHR) Incentive program, the Physician Quality Reporting System (PQRS), and the Value-Based Payment Modifier) with the Quality Payment Program. This one program will give Medicare Physicians and Clinicians a chance to be paid more for giving better care. There are two ways to take part in this program:

- Merit-based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (APMs)

Under MIPS, there are four connected pillars that affect how you will be paid by Medicare – Quality, Clinical Practice Improvement Activities (referred to as “Improvement Activities”), Certified EHR Technology (referred to as “Advancing Care Information”), and Resource Use (referred to as “Cost”). At its core, the Quality Payment Program is about improving the quality of patient care.

Health IT Vendors and Third Party Intermediaries

As a health IT vendor or third party intermediary, you have the ability to support data submission on behalf of clinicians for participation in the Quality Payment Program.

This document outlines the steps for EHR Vendors participating in the Quality Payment Program.

Certified EHR Technology

An eligible clinician participating in MIPS is required to use a certified EHR for the Advancing Care Information category, as well as for clinical quality measure (CQM) reporting if they are seeking the electronic reporting bonus in the Quality category. Participants who are seeking to participate in this way may submit their MIPS data using their EHR either directly or through a third party intermediary, such as a health IT vendor.

The Office of the National Coordinator for Health Information Technology (ONC) certification process has established standards and other criteria for structured data that EHRs must use. We will maintain this certification process, and these standards, and require EHR-based data submission (whether transmitted

directly from the EHR or from a data intermediary) to be certified to either the 2014 or 2015 Edition certification criteria to submit Quality measures, Advancing Care Information, and Improvement Activities data for MIPS. In addition, a health IT vendor that obtains data from a clinician's certified EHR technology, like other third party intermediaries, would have to meet the submission requirements established by CMS for all MIPS categories in order to support eligible clinicians participating in MIPS.

Submitting on Behalf of the MIPS Eligible Clinicians

We have expanded the health IT vendors' capabilities by allowing health IT vendors to submit on a MIPS eligible clinician's behalf on the Quality, Advancing Care information, and Improvement Activities performance categories. This will alleviate the need for individual MIPS eligible clinicians and groups to use a separate mechanism to report data for these performance categories. We encourage health IT vendors to design systems that are able to accept new types of data (for example, Improvement Activities) from MIPS eligible clinicians and groups. Health IT vendors must be able to do the following:

- For measures, activities, and objectives under the Quality, Improvement Activities, and Advancing Care Information performance categories respectively, if the data is derived from certified EHR technology, the health IT vendor must be able to indicate this data source.
- Either transmit data from the certified EHR technology or through a data intermediary in the CMS-specified form and manner, or have the ability for the individual MIPS eligible clinician and group to be able to submit data directly from their certified EHR technology, in the CMS-specified form and manner.

For MIPS eligible clinicians who choose to electronically submit Quality, Advancing Care Information, and Improvement Activities data extracted from their certified EHR technology to an intermediary, the intermediary would then submit the measure and activity data to CMS in a CMS-specified form and manner on the MIPS eligible clinician's behalf for the respective performance period. In addition to meeting the appropriate data submission criteria for the performance categories, MIPS eligible clinicians who choose to participate in the Advancing Care Information performance category and to report electronic clinical quality measures would be required to have certified EHR technology meeting the definition at § 414.1305.

EHR Vendor Workgroup

Vendors providing [Certified Electronic Health Record Technology](#) who are interested in receiving program updates from CMS and ONC can sign up to be a part of the eHealth Vendor Workgroup.

Led by CMS and ONC program experts, this workgroup features regular webinars and Q&A sessions designed to provide technical assistance for vendors and answer any program related questions or

Quality Payment Program

concerns. To join, send an email to CMSQualityTeam@ketchum.com and include your name, company, title, email, phone, address, and the health IT products you manage.

Resources

[Quality Payment Program Website](#)