



# MIPS 2020

## Promoting Interoperability Overview

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REPORTING MIPS 2020 THROUGH THE REG-ENT REGISTRY



# MIPS Introduction

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The Promoting Interoperability (PI) Category is one of the performance elements the Centers for Medicare and Medicaid Services requires Merit-based Incentive Payment System (MIPS) eligible providers to submit as part of their MIPS participation.

The PI Category is worth 25% of your MIPS final score. This has not changed from the 2019 MIPS performance period.

***The overview of the total weights are shown below:***



**Quality 45%**



**Promoting Interoperability 25%**



**Improvement Activities 15%**



**Cost 10% \*Calculated by CMS\***

# What is Promoting Interoperability?

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CMS defines PI as the, “use of technology to exchange and make use of information, makes communicating patient information less burdensome and improves outcomes”.

In order to obtain credit for PI you must have and use 2015 certified electronic health record technology (CEHRT). If you do not have CEHRT, you will automatically receive 0 points for the PI category.

## **The purpose of having 2015 CEHRT is to:**

- Patient access to their health information;
- The exchange of information between providers and pharmacies; and
- The systematic collection, analysis, and interpretation of healthcare data.

# What is NEW for 2020

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- Groups and virtual groups qualify for automatic reweighting of this performance category when more than 75% of the clinicians in the group or virtual group are hospital-based.
- The Verify Opioid Treatment Agreement measure has been removed.
- The optional Query of Prescription Drug Monitoring Program (PDMP) measure requires a yes/no response instead of a numerator and denominator **and is also available for five bonus points.**
- The PI data can be selected for auditing by Reg-ent and CMS. Please sure you document your performance accordingly to receive credit and avoid a penalty.
  - Please contact [reg-ent@entnet.org](mailto:reg-ent@entnet.org) if you have any questions regarding PI documentation.

# How do I get started with PI?

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It is important to ensure you have the 2015 CEHRT functionality available from the beginning of the 2020 Performance Period. However, the 2015 Edition of CEHRT does **not have to** be implemented on January 1, 2020, but it **must be provided by the last day of the 2020 reporting period OR by the end of your 90-day performance period**. For additional information on [Certified EHR Technology](#), please click [here](#).

In order to let CMS know you have a CEHRT, you will need to provide an identification code found by checking your EHR's CEHRT status using the [Certified Health IT Product List \(CHPL\)](#) and searching by EHR name and version number. Link to the CHPL website is located here: <https://chpl.healthit.gov/#/search>.

The PI category does require data to be collected for a minimum continuous 90-day period. An example of the 90-day timeline could be from October 3, 2020 to December 31, 2020. Groups and individuals can select any 90-day period however, the 2015 CEHRT Edition must be established by the end of 90-day period.

Please note, if your practice has multiple EHRs but not all of the EHRs are certified to the 2015 Edition, **you can only submit data for PI collected in the 2015 Edition CEHRT.**

# Does the PI category require more than just establishing the CEHRT?

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**Yes**, for the PI category there are a few more obligations the MIPS eligible groups and individuals must complete in order to receive the maximum points.

**Under the PI category there are four objective areas:**

- e-Prescribing
- Health Information Exchange
- Provider to Patient Exchange
- Public Health and Clinical Data Exchange.

Each objective area includes **measures and some attestations** that are **required** for groups and individual to submit data on. However, some measures can accommodate exclusions. If you qualify you may receive a point weight redistribution. You may find the PI measure specifications [here](#).

# Data Validation Audit Criteria

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Although you do not have to submit any supporting documentation for PI, **you must keep documentation records for up to six years** in case of an audit by CMS or Reg-ent.

CMS has provided examples of what would suffice as appropriate documentation for PI data. To review, please click the link [here](#).

# Reminder to perform a security risk analysis.

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Groups and Individuals **MUST** perform or review a security risk analysis on an annual basis and must be performed within the current performance period.

For additional guidance on how to conduct a security risk analysis, please click [here](#).



# Facts about **group** submissions to CMS

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For groups and virtual groups, you may submit **YES** for measures in the Public Health and Clinical Data Exchange objective as long as one MIPS eligible clinician is actively participating with a registry. Please click [here](#) to review the Public Health and Clinical Data Exchange Measures.

Groups **MUST** aggregate PI data (numerators and denominators) from all MIPS eligible clinicians and include it into the 2015 CEHRT.

Group reporters must include all providers under the TINs you are submitting MIPS data on.

# What is Information Blocking?

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## Highlights on the Preventing Information Blocking Attestation:

- MIPS eligible clinicians must attest that they did not willingly or knowingly restrict or disable the interoperability or compatibility of CEHRT.
- There is a current and defined process for how the CEHRT was implemented and ensuring individuals and groups did not redistrict access to the exchange of electronic health information.
- Responded in a timely manner to obtain or send electronic health information to patients, healthcare providers, and other persons (under safe and reasonable circumstances). We encourage you to contact QPP for additional clarification on the definition of reasonable circumstances.

For more information regarding [Data Blocking](https://www.healthit.gov/topic/data-blocking), visit the HealthIT.gov website at <https://www.healthit.gov/topic/information-blocking>.

# PI Check List



Collect your data in EHR technology with 2015 Edition functionality for a minimum of any continuous 90-day period.



Obtaining their PI Report from your EHR.



Submit a “yes” to the Prevention of Information Blocking Attestations



Submit a “yes” to the ONC Direct Review Attestation



Submit a “yes” that you have completed the Security Risk Analysis measure in 2020.



Report the six required measures or claim any exclusion(s) if applicable. Note: measures that require a numerator and denominator response must contain one in the numerator.



Provide your EHR’s CMS identification code from CHPL

# Hardship Exceptions

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Groups and individuals may submit hardship exceptions to CMS again for 2020 if they meet one of the following reasons below:

- MIPS eligible clinician in a small practice
- MIPS eligible clinician using decertified EHR technology
- Insufficient Internet connectivity
- Extreme and uncontrollable circumstances (e.g. COVID-19 public health emergency)
- Lack of control over the availability of CEHRT

However, applying for the hardship exception does not constitute as automatic approval. CMS will confirm your hardship application status directly.

If approved for a hardship exception, the PI category weight will be combined under the Quality category, raising the total Quality weight amount to 80%.

**For more information, please visit the link [here](#).**

# Additional Resources

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For questions specific to the PI Category requirements, please contact the CMS QPP Help Desk at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) or 1-866-288-8292 (TRS: 711).

For an overview of the PI category details, please visit <https://qpp.cms.gov/mips/promoting-interoperability>. It is recommended that you check into this website often as CMS frequently updates the contents of the page.

CMS COVID-19 Response Resources: <https://qpp.cms.gov/about/covid19?py=2020>

Register for the CMS QPP Listserv: [QPPUserResearch@cms.hhs.gov](mailto:QPPUserResearch@cms.hhs.gov) .

2020 Quality Measures: <https://www.entnet.org/2020-measures>

MIPS 2020 Reporting Information: <https://www.entnet.org/content/reg-ent-mips-2020-reporting>

Reg-ent Team: [reg-ent@entnet.org](mailto:reg-ent@entnet.org)

FIGmd Client Account Support Team: [aaohnscams@figmd.com](mailto:aaohnscams@figmd.com)