

# Quality Payment PROGRAM

## 2018 MIPS Data Validation - Year 2 Promoting Interoperability Performance Category Transition Criteria

| 2018 Promoting Interoperability (PI) Transition Measure ID | 2018 PI Measure        | 2018 PI Measure Description                                                                                                      | 2018 PI Measure: Required/ Not Required for Base Score | 2018 PI Reporting Requirement (Yes/No Statement or Numerator/ Denominator) | 2018 PI Validation (during performance period)                                                                                                                                                                  | 2018 PI Suggested Documentation<br><br><i>Documentation needs to be from certified electronic health record technology (CEHRT) and be inclusive of:</i><br>1) The time period the report covers (performance period),<br>2) clinician identification, e.g., National Provider Identifier (NPI),<br>3) Evidence to support that the report was generated by the CEHRT (e.g., screenshot of the report before it was printed from the system)<br>Because some CEHRT is unable to generate reports that limit the calculation of measures to a prior time period, CMS suggests that clinicians download and/or print a copy of the report used at the time of data submission for their records. |
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| PI_TRANS_PPHI_1                                            | Security Risk Analysis | Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the | Required                                               | Yes/No Statement                                                           | Security risk analysis of the CEHRT was performed or reviewed in accordance with the requirements. Clinicians must submit a yes for this measure in order to receive credit toward the base score. Submitting a | 1) Security risk analysis that documents the potential risks and vulnerabilities to the confidentiality, integrity, and availability of ePHI of the eligible clinician, addresses encryption/security of data stored in the CEHRT, and identifies it was performed for the clinician's system. (HHS guidance on conducting a security risk analysis is available at <a href="https://www.hhs.gov/hipaa/for-">https://www.hhs.gov/hipaa/for-</a>                                                                                                                                                                                                                                               |



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|                                                            |                 | security (to include encryption) of ePHI data created or maintained by certified electronic health record technology (CEHRT) in accordance with requirements in 45 CFR164.312(a)(2)(i v) and 45 CFR 164.306(d)(3), and implement security |                                                        |                                                                            | no for this measure will result in a base score of 0% for the PI category. | professionals/security/guidance/guidance-risk-analysis); and<br>2) Documentation of implementing security updates as necessary and correcting identified security deficiencies.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |



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|                                                            |                 | updates as necessary and correct identified security deficiencies as part of the MIPS eligible clinician's risk management process |                                                        |                                                                            |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

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| PI_TRANS_EP_1                                              | E- Prescribing  | At least one permissible prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically using certified electronic health record technology (CEHRT). | Required                                               | Numerator/ Denominator                                                     | At least one permissible prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically via CEHRT. | Dated report or screenshot of the number of times electronic prescribing was performed in accordance with CMS standards for electronic prescribing (certification criteria: 45 CFR 170.314(b)(3) and (a)(10) and standards criteria: 45 CFR 170.205 (b)(2) and 170.207 (d)(2)) during the performance period.                                                                                                                                                                                                                                                                                                                                                                                 |

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| PI_TRANS_LVP_P_1                                           | E-prescribing Exclusion | Measure exclusion for PI_TRANS_EP_1 | Required only if submitting an exclusion for the E-prescribing Transition Measure. Measure ID PI_TRANS_EP_1. | Yes                                                                        | The 2018 QPP final rule finalized an exclusion for the e-prescribing measure for any MIPS eligible clinician (or groups if group reporting) who writes fewer than 100 permissible prescriptions during the performance period. Clinicians must select an exclusion for this measure in order to claim the exclusion. Any | Report from the CEHRT that shows the number of all prescriptions written by the clinician during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |



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|                                                            |                        |                                                                                                                                                              |                                                        |                                                                            | submission of a numerator or denominator for the e-prescribing measure will void out the exclusion.                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| PI_TRANS_PEA_1                                             | Provide Patient Access | At least one patient seen by the MIPS eligible clinician during the performance period is provided timely access to view online, download, and transmit to a | Required                                               | Numerator/ Denominator                                                     | At least one unique patient seen by the MIPS eligible clinician is provided with timely access to view online, download, and transmit to a third party their health information. | Dated report, screenshot, or other information that documents the number of times a patient or patient authorized representative is able to view, download, or transmit their health information. This could include instructions provided to the patient on how to access their health information including the website address they must visit.                                                                                                                                                                                                                                                                                                                                            |



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|                                                            |                             | third party their health information subject to the MIPS eligible clinician's discretion to withhold certain information. |                                                        |                                                                            |                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| PI_TRANS_HIE_1                                             | Health Information Exchange | The MIPS eligible clinician that transitions or refers their patient to another setting of                                | Required                                               | Numerator/ Denominator                                                     | MIPS eligible clinician that transitions or refers their patient to another setting of care (1) uses CEHRT to create a | Dated report or screenshot that documents the number of times that CEHRT was used to create a summary of care record for a patient that is being transitioned or referred to another setting of care and the summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |



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|                                                            |                 | care or health care provider (1) uses certified electronic health record technology (CEHRT) to create a summary of care record; and (2) electronically transmits such summary to a receiving health care provider for at |                                                        |                                                                            | summary of care record and (2) electronically transmits such summary. | of care record is electronically transmitted to a receiving provider of care or referral.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |



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|                                                            |                 | least one transition of care or referral. |                                                        |                                                                            |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |



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| PI_TRANS_LVT OC_1                                          | Health Information Exchange Exclusion | Measure exclusion for PI_TRANS_HIE_1 | Required only if submitting an exclusion for the Health Information Exchange Measure | Yes                                                                        | The 2018 QPP final rule finalized an exclusion for the Health Information Exchange Measure for MIPS eligible clinicians who transfer a patient to another setting or refer a patient fewer than 100 times during the performance period. | Dated report from the CEHRT that shows the number of times the clinician transfers a patient to another setting or refers a patient during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

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| PI_TRANS_PSE_1                                             | Patient-Specific Education | The MIPS eligible clinician must use clinically relevant information from certified electronic health record technology (CEHRT) to identify patient- specific educational resources and provide access to those materials to at least one unique | Not Required                                           | Numerator/ Denominator                                                     | Use of clinically relevant information from CEHRT to identify patient-specific educational resources and provide access to those materials for at least one unique patient. | Dated report or screenshot that shows the number of times that appropriate patient-specific educational resources were electronically identified and provided to the clinician's patient during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |



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|                                                            |                                   | patient seen by the MIPS eligible clinician.                                           |                                                        |                                                                            |                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| PI_TRANS_PEA_2                                             | View, Download, or Transmit (VDT) | At least one patient seen by the MIPS eligible clinician during the performance period | Not Required                                           | Numerator/ Denominator                                                     | Use of the clinician's CEHRT by a patient or patient-authorized representative to view, download, or transmit to a | Dated report or screenshot that shows the number of times a patient or patient-authorized representative viewed, downloaded, or transmitted to a third party                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |



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|                                                            |                 | (or patient-authorized representative) views, downloads or transmits their health information to a third party during the performance period. |                                                        |                                                                            | third party their health information.          | their health information during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

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| PI_TRANS_SM_1                                              | Secure Electronic Messaging | For at least one patient seen by the MIPS eligible clinician during the performance period, a secure message was sent using the electronic messaging function of certified electronic health record technology (CEHRT) to the patient (or the | Not Required                                           | Numerator/ Denominator                                                     | Use of secure electronic messaging to communicate with patients on relevant health information. | Dated report or screenshot that documents the number of times that a secure message was sent, or sent in response to a secure message sent by the patient or patient-authorized representative, using the electronic messaging function of the CEHRT during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                           |



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|                                                            |                 | patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative), during the performance period. |                                                        |                                                                            |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| PI_TRANS_MR_1                                              | Medication      | The MIPS eligible clinician performs medication                                                                                                                       | Not Required                                           | Numerator/ Denominator                                                     | Performs medication reconciliation for at least one transition of care, | Dated report or screenshot that documents the number of times that medication                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |



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|                                                            | Reconciliation  | reconciliation for at least one transition of care in which the patient is transitioned into the care of the MIPS eligible clinician. |                                                        |                                                                            | referral received, or patient encounter in which the clinician has not before encountered the patient. | reconciliation is performed for a transition of care during the performance period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

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| PI_TRANS_PHC<br>DRR_1 | Immunization<br>Registry<br>Reporting | The MIPS eligible<br>clinician is in active<br>engagement with a<br>public health<br>agency to submit<br>immunization data. | Not Required | Yes/No Statement | Active engagement with a<br>public health agency or<br>clinical data registry to<br>submit immunization data<br>and receive immunization<br>forecasts and histories<br>from the<br>registry/immunization<br>information system. | <ul style="list-style-type: none"> <li>• Dated screenshots that document successful registration or submission to the registry or public health agency. Should include evidence to support that it was generated for that clinician's system (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.).</li> </ul> OR <ul style="list-style-type: none"> <li>• A dated record of successful electronic transmission (e.g., screenshot from another system, etc.). Should include evidence to support that it was generated for that clinician (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.)</li> </ul> OR <ul style="list-style-type: none"> <li>• Letter or email from registry or public health agency confirming receipt of registration or submitted data, including the date of the submission and name of sending and receiving parties.</li> </ul> |
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| PI_TRANS_PHC<br>DRR_2 | Syndromic<br>Surveillance<br>Reporting | The MIPS eligible<br>clinician is in active<br>engagement with a<br>public health<br>agency (PHA) to<br>submit syndromic<br>surveillance data. | Not Required | Yes/No Statement | Active engagement with a<br>public health agency or<br>one or more clinical data<br>registries to submit<br>syndromic surveillance<br>data. | <ul style="list-style-type: none"> <li>• Dated screenshots from CEHRT that document successful registration or submission to the registry or public health agency. Should include evidence to support that it was generated for that clinician's system (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.).</li> </ul> OR <ul style="list-style-type: none"> <li>• A dated record of successful electronic transmission (e.g., screenshot from another system, etc.). Should include evidence to support that it was generated for that clinician (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.)</li> </ul> OR <ul style="list-style-type: none"> <li>• Letter or email from registry or public health agency confirming receipt of registration or submitted data, including the date of the submission and name of sending and receiving parties.</li> </ul> |
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| PI_TRANS_PHC<br>DRR_3 | Specialized Registry Reporting | The MIPS eligible clinician is in active engagement to submit data to specialized registry. | Not Required | Yes/No Statement | Active engagement to submit data to one or more specialized registries. | <ul style="list-style-type: none"> <li>• Dated screenshots from CEHRT that documents successful registration or one submission to the registry or public health agency. Should include evidence to support that it was generated for that clinician's system (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.).</li> </ul> OR <ul style="list-style-type: none"> <li>• A dated record of successful electronic transmission (e.g., screenshot from another system, etc.). Should include evidence to support that it was generated for that provider (e.g., identified by National Provider Identifier (NPI), clinician name, practice name, etc.).</li> </ul> OR <ul style="list-style-type: none"> <li>• Letter or email from registry or public health agency confirming receipt of registration or submitted data, including the date of the submission and name of sending and receiving parties.</li> </ul> |
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