Advancing Care Information (ACI) Measure ID	ACI Measure	Description	ACI Measures - Required/Not Required for Base Score	Reporting Requirement: Yes/No or Numerator/Denominator	Validation (during reporting period)	Suggested Documentation Documentation needs to be from certified Electronic Health Record technology(CEHRT) and be inclusive of 1) The time period the report covers(reporting period), 2) clinician identification, e.g., National Provider Identifier (NPI) 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) 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.
ACI_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 security (to include encryption) of ePHI data created or maintained by certified EHR technology in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the MIPS eligible clinician's risk management process.		Yes/No	Security risk analysis of the certified EHR technology was performed or reviewed prior to the date of attestation on an annual basis and for the certified EHR technology used during the EHR reporting period. • It is acceptable for the security risk analysis to be conducted outside the MIPS performance period; however, it must be conducted within the calendar year of the MIPS performance period (January 1st – December 31st).	Report that documents the procedures performed during the analysis and the results. Report should be dated within the calendar year of the MIPS performance period and should include evidence to support that it was generated for that clinician's system (e.g., identified by National Provider Identifier (NPI), CMS Certification Number (CCN), clinician name, practice name, etc.). Note: The measure requires clinicians to address encryption/security of data stored in CEHRT. At minimum, clinicians should be able to show a plan for correcting or mitigating deficiencies and that steps are being taken to implement that plan.
ACI_EP_1	E-prescribing	At least one permissible permissible prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically using certified EHR technology.	Required	Numerator/Denominator	At least one permissable perscription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically via CEHRT	Report or screenshot of patient prescription/record that indicates the number of times where electronic prescribing was performed in accordance with CMS standards for electronic prescribing (45 CFR 423.160(b))
ACI_LVPP_1	Proposed E- prescribing Exclusion		Required	Yes	The 2018 NPRM proposed an exclusion for the eprescribing measure for any MIPS eligible clinician who writes fewer than 100 permissible prescriptions during the performance period. In order to submit an exclusion for this measure, clinicians must select an exclusion for this measure. Any submission of a numerator or denominator for the eprescribing measure will void out the exclusion.	Report from the CEHRT that showsthe number of times that the clinician e-prescribes.

ACI_PEA_1	Provide Patient Access	For at least one unique patient seen by the MIPS eligible clinician: (1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or he health information; and (2) The MIPS eligible clinician ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications	Required	Numerator/Denominator	Availability for the patient or patient-authorized representative of the patient's health information using any application of the clinician's choice meeting the technical specifications of the application programming interface of the clinician's certified EHR	Dated report, screenshot, or other information that documents the number of times a patient or patient authorized representative is given access 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, the patient's unique and registered username or password, and a record of the patient logging on to show that the patient can use any application of their choice to access the information and meet the API technical specifications
		of the Application Programing Interface (API) in the MIPS eligible clinician's certified EHR technology.				
ACI_PEA_2	Send a Summary of Care	For at least one transition of care or referral, the MIPS eligible clinician that transitions or refers their patient to another setting of care or health care provider-(1) creates a summary of care record using certified EHR technology, and (2) electronically exchanges the summary of care record.	Required	Numerator/Denominator	A summary care record is electronically created and sent when a patient is transitioned or referred to another setting or provider of care	Dated report that indicates the number of summary of care records that were created for transitions of care or referrals to another setting of care or health care provider using the CEHRT and that were electronically exchanged
ACI_LVOTC_1	Proposed Send a Summary of Care Exclusion		Required only if submitting an exclusion for theSend a Summary of Care Measure		The 2018 NPRM proposed an exclusion for the Summary of Care measure for any MIPS eligible clinician who transfers a patient to another setting or refers a patient thework than 100 times during the performance period.	Dated report from the CEHRT that shows the number of times that the clincian transfers of refers patients to another setting of care during the performance period.
ACI_CCTPE_1	Request/Accept Summary of Care	For at least one transition of care or referral received or patient encounter in which the MIPS eligible clinician has never before encountered the patient, the MIPS eligible clinician receives or retrieves and incorporates into the patient's record an electronic summary of care document.		Numerator/Denominator	Receives or retrieves and incorporates an electronic summary care record into the EHR when a patient is transitioned or referred to the clinician	Dated report or screenshot that shows the number of times the clinician electronically received and recorded a summary of care into the CEHRT for a transition of care, referral received, or patient encounter in which the clinician has never before encountered the patient
ACI_LVITC_1	Proposed Request/Accept Summary of Care Exclusion		Required only if submitting an exclusion for the Request/Accept Summary of Care Measure	Yes	The 2018 NPRM proposed an exclusion for the Request/Accept Summary of Care measure for clinicians for whom the total of transitions or referrals received and patient encounters in which the clinician has never before encountered the patient, is fewer than 100 during the performance period	Dated report from the CEHRT that shows the number of times the clinician transitions or refers or has patient encounters in which the clinician has never before encountered the patient.

ACI_CCTPE_2						
	Patient-Specific	The MIPS eligible	Not Required	Numerator/Denominator	Use of certified EHR technology	Dated report or screenshot that shows the number of times that
	Education	clinician must use			to identify and provide those	appropriate patient-specific educational resources were
İ		clinically relevant			patient-specific education	electronically identified and provided to the clinician's patient
		information from			· ·	creationically lacriatica and provided to the chilician's patient
					resources, if appropriate in	
		certified EHR			section 170.204(b)(1) or (2) and	
		technology to identify			by any means other that the	
		patient-specific			method specified in paragraph	
		educational resources			(a)15(i)	
		and provide electronic			(0)25(1)	
		access to those				
		materials to at least				
		one unique patient				
		seen by the MIPS				
		eligible clinician.				
ACI_CCTPE_3	View, Download,	During the	Not Required	Numerator/Denominator	Use of the clinician's patient	Dated report or screenshot that shows the number of times a
	Transmit (VDT)	performance period, at			certified EHR technology by a	patient or patient-authorized representative is granted timely
		least one unique			patient or patient-authorized	access to view, download, or transmit to a third party their health
		patient (or patient-			representative to view,	information or accessed their health information through the use
		authorized			download, or transmit to a third	of an API or both.
		representatives) seen			party their health information	
		by the MIPS eligible				
1	Ī	clinician actively			1	
1	Ī				1	
1	Ī	engages with the EHR			1	
ĺ		made accessible by the			1	
1	Ī	MIPS eligible clinician.			1	
ĺ		An MIPS eligible			1	
1	Ī				1	
1	Ī	clinician may meet the			1	
		measure by either-(1)				
		view, download or				
		transmit to a third				
		party their health				
		information; or (2)				
		access their health				
		information through				
		the use of an API that				
		can be used by				
		applications chosen by				
		the patient and				
		configured to the API				
		in the MIPS eligible				
		clinician's certified EHR				
		technology; or (3) a				
		combination of (1) and				
		(2).				
ACI_HIE_1	Secure Messaging	For at least one unique	Not Required	Numerator/Denominator	Use of secure electronic	Dated report or screenshot that documents the number of times
		patient seen by the			messaging to communicate with	that a secure message was sent, or sent in response to a secure
ĺ		MIPS eligible clinician			patients on relevant health	message sent by the patient or patient-authorized representative
1	Ī	during the			information	using the electronic messaging function of the CEHRT.
1	Ī	performance period, a			1	
1	Ī	secure message was			1	
1	Ī	sent using the			1	
1	Ī				1	
I	I	electronic messaging		İ		
		function of certified				
		EHR technology to the				
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		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient authorized representative).				
ACI_HIE_2	Patient-Generated	EHR technology to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized	Not Required	Numerator/Denominator	Incorporation of patient-	Dated report or screenshot that documents the number of times
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated	Not Required	Numerator/Denominator		
ACI_HIE_2	Patient-Generated Health Data	EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated health data or data	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data,
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient authorized representative).  Patient-generated health data or data from a non-clinical	Not Required	Numerator/Denominator		that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient (or the patient authorized representative). Patient-generated health data or data from a non-clinical setting is incorporated	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data,
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient authorized representative).  Patient-generated health data or data from a non-clinical	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative).  Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient (or the patientauthorized representative), or in response to a secure message sent by the patient (or the patient authorized representative).  Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least one unique patient	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least one unique patient seen by the MIPS	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient (or the patientauthorized representative), or in response to a secure message sent by the patient (or the patient authorized representative).  Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least one unique patient	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIF_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least one unique patient seen by the MIPS	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health
ACI_HIE_2		EHR technology to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative). Patient-generated health data or data from a non-clinical setting is incorporated into the certified EHR technology for at least one unique patient seen by the MIPS eligible clinician during	Not Required	Numerator/Denominator	generated health data into the	that patient generated health data including a copy of the data, e.g., social service data, advance directives, or home health

ACI_HIE_3	Clinical Information Reconciliation	For at least one transition of care or referral received or patient encounter in which the MIPS eligible clinician has never before encountered the patient, the MIPS eligible clinician performs clinical information reconciliation. The MIPS eligible clinician must implement clinical information reconciliation for the following three clinical information remails information reconciliation. Review of the patient's medication, including the name, dosage, frequency, and route of each medication. (2) Medication allergy. Review of the patient's known medication allergies. (3) Current Problem list. Review of the patient's unrouted the properties of the patient's known medication allergies. (3) Current Problem list. Review of the patient's unrouted the patient the patient that the patient that the patient the patient that the patient that the pati	Not Required	Numerator/Denominator	Performs medication, medication allergies, and current problem list review and reconciliation for at least one transition of care, referral received, or patient encounter in which the clinician has not before encountered the patient	Dated report or screenshot that documents the number of times that the clinician performed clinical reconciliation for 1) medication reconciliation including the name, dosage, frequency, and route of each medication, 2) medication allergies, and 3) current problem list review and reconciliation.
ACI_PHCDRR_1	Immunization Registry Reporting	the patient's current The MIPS eligible clinician is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).	Not Required	Yes/No Statement	Active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the registry/immunization information system	Dated screenshots from the that document successful 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.). Or 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.)Or Letter or email from registry or public health agency confirming receipt of submitted data, including the date of the submission and name of sending and receiving parties.
ACI_PHCDRR_2	Syndromic Surveillance Reporting	The MIPS eligible clinician is in active engagement with a public health agency to submit syndromic surveillance data from a non-urgent care ambulatory setting where the jurisdiction accepts syndromic data from such settings and the standards are clearly defined.	Not Required	Yes/No Statement	Active engagement with a public health agency or one or more clinical data registries to submit syndromic surveillance data from an urgent care ambulatory setting where the jurisdiction accepts syndromic data from such settings and the standards are clearly defined	Dated screenshots from CEHRT that document successful 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.). OR     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.)Or     Letter or email from registry or public health agency confirming receipt of submitted data, including the date of the submission and name of sending and receiving parties.
ACI_PHCDRR_3	Electronic Case Reporting	The MIPS eligible clinician is in active engagement with a public health agency to electronically submit case reporting of reportable conditions.	Not Required	Yes/No Statement	Active engagement with a public health agency or one or more clinical data registries to electronically submit case reporting of reportable conditions	Dated screenshots from CEHRT that document successful 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.) Or 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.) Or Letter or email from registry or public health agency confirming receipt of submitted data, including the date of the submission and name of sending and receiving parties.
ACI_PHCDRR_4	Public Health Registry Reporting	The MIPS eligible clinician is in active engagement with a public health agency to submit data to public health registries.	Not Required	Yes/No Statement	Active engagement with a public health agency or one or more clinical data registries to electronically submit data to public health registries	Dated screenshots from CEHRT that document successful 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.). Or     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.). Or     Letter or email from registry or public health agency confirming receipt of submitted data, including the date of the submission and name of sending and receiving parties.

ACI_PHCDRR_5	Clinical Data	The MIPS eligible	Not Required	Yes/No Statement	Active engagement with a one	Dated screenshots from the CEHRT that document successful
	Registry Reporting	clinician is in active			or more clinical data registries to	submission to the registry or public health agency. Should include
		engagement to submit			electronically submit clinical	evidence to support that it was generated for that clinician's
		data to a clinical data			data.	system (e.g., identified by National Provider Identifier (NPI),
		registry.				clinician name, practice name, etc.). Or
						<ul> <li>A dated record of successful electronic transmission (e.g.,</li> </ul>
						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.). Or
						Letter or email from registry or public health agency confirming
						receipt of submitted data, including the date of the submission
						and name of sending and receiving parties.