Quality Payment



MIPS Promoting Interoperability (PI) Performance Category Certified Electronic Health Record Technology (CEHRT) Frequently Asked Questions

Q1.

What is the Shared Savings Program requirement for demonstrating the meaningful use of CEHRT for performance years 2025 and subsequent performance years?

A1.

In the calendar year (CY) 2024 Physician Fee Schedule, the Shared Savings Program finalized the <u>requirement</u> that for performance years beginning on or after January 1, 2025, unless otherwise excluded, an ACO participant, ACO provider/supplier, and ACO professional that is a <u>MIPS eligible clinician</u>, <u>Qualifying APM Participant (QP)</u>, or <u>Partial Qualifying APM Participant (Partial QP)</u> must satisfy <u>all</u> of the following:

- 1. Report the MIPS Promoting Interoperability performance category measures and requirements to MIPS according to 42 CFR part 414 subpart O at the individual, group, virtual group, or APM entity level.
- **2.** Earn a performance category score for the MIPS Promoting Interoperability performance category at the individual, group, virtual group, or APM entity level.

This Shared Savings Program CEHRT requirement allows for certain exclusions, which include the following:

- 1. Low volume threshold
- 2. Eligible clinician who is not a MIPS eligible clinician
- 3. Reweighting of the MIPS Promoting Interoperability performance category to zero percent of the final score in accordance with <u>applicable policies</u>.

The applicable exclusions to the Shared Savings Program CEHRT requirement may differ from the ACO Participants, ACO providers/suppliers, and ACO professionals MIPS eligibility. For example, an ACO Participant, ACO provider/supplier, or ACO professional may not be excluded from the Shared Savings Program requirement based on QP or Partial QP status alone.

For performance year 2025 and subsequent performance years, ACOs will need to review eligibility for both the Shared Savings Program CEHRT requirement and MIPS eligibility.

Q2.

Do ACOs have to report and earn a score in the MIPS Promoting Interoperability performance category at the ACO-level to be compliant with the Shared Savings Program MIPS Promoting Interoperability reporting requirement?



A2.

No. ACOs can report and earn a score in the MIPS Promoting Interoperability performance category at the individual, group, virtual group, or APM entity level to comply with the Shared Savings Program MIPS Promoting Interoperability reporting requirement for performance year 2025 and subsequent years.

Q3.

How can my Accountable Care Organization (ACO) access the MIPS eligibility information for my ACO Participants, ACO providers/suppliers, and ACO professionals who are MIPS eligible clinicians, Qualifying APM Participants (QP), or Partial Qualifying APM Participants (Partial QP)?

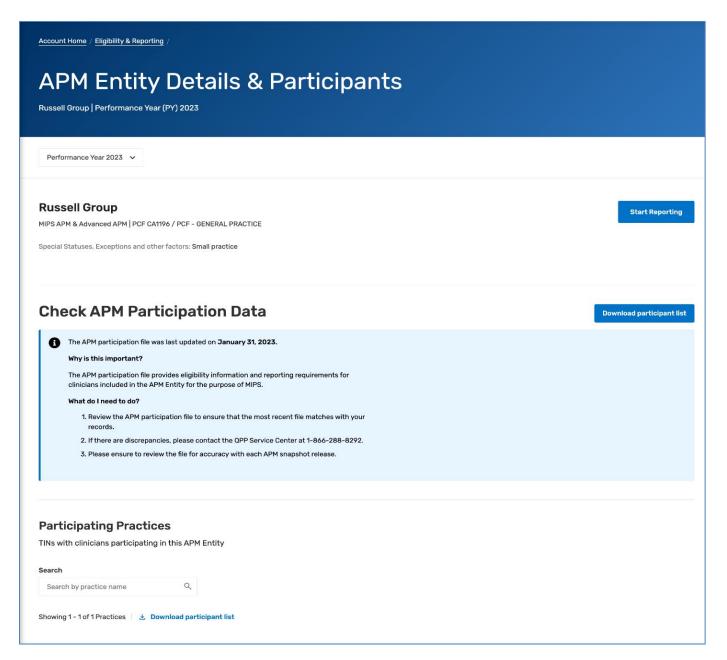
A3.

For performance year (PY) 2023, Alternative Payment Models (APMs), like ACOs that participate in the Medicare Shared Savings Program (Shared Savings Program), can review and download the MIPS eligibility information for all clinicians in the APM by signing into the <u>Quality Payment Program website</u> and reviewing "Eligibility and Reporting" for Performance Year 2023. Step-by-step instructions for how to access "Eligibility and Reporting" can be found in the <u>PY 2023 MIPS Eligibility and Participation User Guide (PDF, 1MB)</u>.

APM specific screenshots are below:

Russell Group MIPS APM & Advanced APM PCF CA1196 / PCF - GENERAL PRACTICE Special Statuses, Exceptions and other factors: Small practice	Start Reporting
	View APM entity details & participant eligibility >





Q4.

Should my ACO review MIPS eligibility information for the ACO Participants, ACO providers/suppliers, and ACO professionals who are MIPS eligible clinicians, QPs, or Partial QPs at the <u>individual</u> or group level?

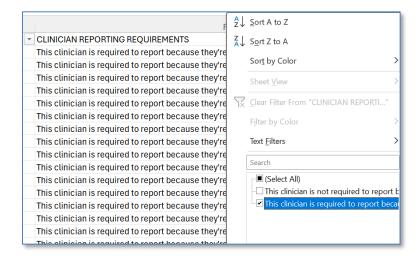
A4.

It is important for the ACO to review their ACO Participants, ACO providers/suppliers, and ACO professionals MIPS eligibility at the <u>individual</u> level in order to get an accurate number of individuals for which the ACO must report MIPS PI. Group reporting is voluntary under MIPS If the ACO does not report the MIPS Promoting Interoperability performance category at APM entity level, the ACO's APM entity MIPS Promoting Interoperability performance category score would be calculated as a weighted average of the ACO's individual and group MIPS Promoting Interoperability performance category scores. This is called the "PI roll up." Scoring



contributions to the PI roll up are at the TIN/NPI level and are the higher of a MIPS eligible clinician's individual or group score. ACO Participants, ACO providers/suppliers, and ACO professionals with MIPS eligibility at the <u>individual</u> level that do not report the MIPS Promoting Interoperability performance category would be included as a zero in the ACO's PI roll up score.

To identify your clinicians who are individually eligible, filter the APM participant list (from A1 above) on column F ("Clinician Reporting Requirements") and then filter to only show the clinicians with this value: "This clinician is required to report because they're a MIPS eligible clinician type, enrolled in Medicare before the performance year, and exceed the individual low-volume threshold."



Q5.

What QP snapshot should my ACO use to reconcile our MIPS eligibility information for my ACO Participants, ACO providers/suppliers, and ACO professionals MIPS eligibility for the performance year?

A5.

ACOs should use the 3rd snapshot (August 31st) data to reconcile their ACO Participants, ACO providers/suppliers, and ACO professionals MIPS eligibility.

Q6.

Are all clinicians that bill under an ACO Participant TIN eligible to receive the APM Entity's final score?

A6.

No, there may be clinicians billing under an ACO Participant TIN who aren't eligible to receive the APM Entity's final score. This can happen when the provider is part of an APM entity during one of the snapshots but leaves the APM entity in a subsequent snapshot. Please refer to pages 7 – 11 of the 2023 APP Data Submission User Guide (PDF, 3MB) for information about 1) the MIPS scoring implications for these clinicians if an ACO Participant TIN reports Promoting Interoperability data as a group for the "PI rollup", and 2) step-by-step instructions for identifying these clinicians.



Q7.

My ACO plans to report the MIPS Promoting Interoperability performance category at the APM entity level. How can my ACO generate a Certified Electronic Health Record Technology (CEHRT) ID for the APM entity level reporting.

A7.

ACOs that report the MIPS Promoting Interoperability performance category at the APM entity level must generate one CEHRT ID using the "ONC Chpl" tool at https://chpl.healthit.gov/#/search. The "ONC Chpl" enables ACOs to generate one CMS ID by inputting all their Participant's CEHRT IDs. For details on how ACOs can obtain a CMS EHR Certification ID number, please reference:

https://www.healthit.gov/sites/default/files/policy/chplcmsehrcertidinstructionsv41.pdf.

Q8.

Which EHR systems and modules are certified for the Merit-based Incentive Payment System (MIPS) Promoting Interoperability performance category?

A8.

To learn which EHR systems and modules are certified for the Merit-based Incentive Payment System (MIPS) Promoting Interoperability performance category, please visit the Certified Health IT Product List (CHPL) on the Office of the National Coordinator for Health Information Technology (ONC) website. For more information, please see the Merit-based Incentive Payment System (MIPS) Promoting Interoperability Performance Category Fact Sheet, PY2023, PY2024.

Q9.

Where can my ACO access information on the MIPS Promoting Interoperability performance category measures and attestations for PY 2024?

A9.

ACOs should review the following resources on the QPP Resource Library to report the MIPS Promoting Interoperability performance category for performance year 2024 and further updates will be provided for subsequent performance years:

• 2024 Promoting Interoperability Quick Start Guide

Q10.

In PY 2025 and subsequent performance years, will my ACO have to demonstrate 100% CEHRT use?

A10.

No. The Shared Savings Program requirement for ACO Participants, ACO providers/suppliers, and ACO professionals that are MIPS eligible clinicians, QPs, or Partial QPs s to report MIPS PIhttps://www.ecfr.gov/current/title-42/part-414/section-414.1415 does not require 100% use of CEHRT. We noted in the CY 2024 final rule, summarized here, that any exceptions to CEHRT use should be based on clinical



appropriateness, rather than on generalized application of percentages (88 FR 79410). Please refer to A1 of this FAQ for details on the applicable exclusions for the Shared Savings Program MIPS Promoting Interoperability reporting requirement.

Q11.

How will my ACO demonstrate compliance with the Shared Savings Program MIPS Promoting Interoperability reporting requirement for PY 2025 and subsequent performance years?

A11.

In PY 2025 and subsequent performance years, the ACO must publicly report on the ACO's public reporting website the total number of ACO participants, ACO providers/suppliers, and ACO professionals that are MIPS eligible clinicians, QPs, or Partial QPs that earn a MIPS performance category score for the MIPS Promoting Interoperability performance category as set forth in § 425.507 that is comprised of the following:

- 1. The number of ACO participants, ACO providers/suppliers, and ACO professionals that meet the requirements and are not excluded for the applicable performance year; and
- 2. The number of ACO participants, ACO providers/suppliers, and ACO professionals that are <u>excluded</u> that voluntarily reported and received a MIPS Promoting Interoperability performance category score for the applicable performance year.

ACOs do not need to publicly report scoring or exclusion details on their public reporting website.

Q12.

What happens if an ACO Participant, ACO provider/supplier, or ACO professional who is a MIPS eligible clinician, QP or Partial QP in my ACO is not compliant with the Shared Savings Program MIPS Promoting Interoperability reporting requirement in PY 2025 or subsequent performance years?

A12.

ACO Participants, ACO providers/suppliers, or ACO professionals who are a MIPS eligible clinician, QP or Partial QP and are not otherwise exempt from the Shared Savings Program MIPS Promoting Interoperability reporting requirement (as detailed at 42 CFR 425.507(b)) will be required to report the MIPS Promoting Interoperability performance category and earn a score in PY 2025 and subsequent performance years (as detailed at 42 CFR 425.507(a)). An ACO participant, ACO provider/supplier, or ACO professional cannot be excluded from the required reporting and earning of a score for the MIPS Promoting Interoperability performance category solely on the basis of being a QP or Partial QP.

ACOs are required to manage their ACO participant and ACO provider/ supplier lists. To address noncompliance with the requirements of the Shared Savings Program and other program integrity issues, including those identified by CMS, participant agreements must permit the ACO to take remedial action against the ACO participant, and must require the ACO participant to take remedial action against its ACO providers/suppliers, including imposition of a corrective action plan, denial of incentive payments, and termination of the ACO participant agreement as detailed at § 425.116(a)(7).

Beginning in PY 2025 and subsequent performance years, if an ACO fails to meet the requirements of the Shared Savings Program MIPS Promoting Interoperability reporting requirement, CMS may take remedial action up to termination for noncompliance as described at 42 CFR 425.216, which includes providing a warning notice, requesting a corrective action plan (CAP) from the ACO, or placing the ACO on a special monitoring plan.



Version History

Date	Change Description
05/08/2024	Revised the texted in Q9 to state, "PY 2024" and the text in A10 to read, "Please refer to A1"
04/26/2024	Original version

