

Promoting Interoperability Requirements for MIPS 2022 Performance Period

Measures at a Glance	Maximum Points and *Scoring	Exclusions/ Redistribution
 In addition to submitting measures, participants must submit a "yes" to: The Prevention of Information Blocking Attestation, The ONC Direct Review Attestation, Safety Factors for EHR Resilience (SAFER) Guides, High Priority Practices (yes or no attestation), and; The security risk analysis measure. Must use 2015 Edition Certified EHR. Further information is available at https://qpp.cms.gov .	0	No exclusions
E-prescribing At least one prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically using CEHRT.	10 Numerator/ Denominator	Exclusion: <100 e-prescriptions during reporting period Redistribution: Points split between two HIE measures
Query of PDMP Prior to transmission of at least one Schedule II opioid electronic prescription, query the Prescription Drug Monitoring Program (PDMP) for prescription drug history.	10 Yes/No Statement	N/A Optional / bonus
Support Electronic Referral Loops by Sending Health Information Electronically transmit summary of care to a receiving health care clinician when transitioning or referring patient to another care setting.	20 Numerator/ Denominator	Exclusion: <100 transitions or referrals during reporting period Redistribution: Points assigned to patient electronic access
Support Electronic Referral Loops by Receiving and Incorporating Health Information For at least one transition of care, referral received or patient encounter (of patient never seen before) receive or retrieve and incorporate into the patient's record an electronic summary of care document; AND perform clinical information reconciliation of patient information.	20 Numerator/ Denominator	Exclusion: <100 transitions during reporting period Redistribution: Points assigned to support e-referral loops by sending health info.
Health Information Exchange Bi-Directional Exchange Alternative to other two health information exchange measures related to sending and receiving health information. Must attest to participating in an HIE that is capable of bi-directional exchange of health information for every patient encounter, transition, or referral.	40 Yes/No Statement	No exclusions. If this measure cannot be met, go back to the other two HIE measures that do have exclusions
Provide Patients Electronic Access to Their Health Information Patients provided timely access (four business days) to view/download/transmit (VDT) their health information.	40 Numerator/ Denominator	No exclusion
Report the following two measures • Immunization Registry Reporting: https://dshs.texas.gov/immunize/ImmTrac/ • Electronic Case Reporting (eCR): Texas DSHS working to initiate eCR	10 Yes/No Statement	Exclusions: Various exclusions available based on jurisdiction, treatment, and readiness Redistribution: Points assigned to patient electronic access
Public Health Registry Reporting: https://www.dshs.texas.gov/tcr/reporting.aspx (Texas Cancer Registry) Clinical Data Registry Reporting: Check with your specialty society for clinical data registries applicable to your specialty. Syndromic Surveillance Reporting: https://www.dshs.texas.gov/txs2/ DSHS is only accepting syndromic surveillance reporting registrations from hospitals, and professionals in urgent care centers or free-standing emergency centers at this time.	5 Yes/No Statement	N/A Optional / bonus

*Example of scoring:

A numerator of 200 and denominator of 250 (200/250) yields a performance rate of 80%.

Performance rate * total possible measure points = points towards goal (.08 * 10 = 8)

Fractions are rounded to nearest whole number. If performance rate = <0.5, as long as one patient is reported, a score of 1 is awarded.