

## Merit-Based Incentive Payment System (MIPS) Promoting Interoperability Performance Category Measure 2022 Performance Period

|                              |   |
|------------------------------|---|
| <b><u>Objective:</u></b>     | e-Prescribing   |
| <b><u>Bonus Measure:</u></b> | <b>Query of Prescription Drug Monitoring Program (PDMP)</b><br>For at least one Schedule II opioid electronically prescribed using CEHRT during the performance period, the MIPS eligible clinician uses data from CEHRT to conduct a query of a PDMP for prescription drug history, except where prohibited and in accordance with applicable law. |
| <b><u>Measure ID:</u></b>    | PI_EP_2   |

### Definition of Terms

**Prescription** – The authorization by a MIPS eligible clinician to a pharmacist to dispense a drug that the pharmacist would not dispense to the patient without such authorization.

**Permissible Prescriptions** – All drugs meeting the current definition of a prescription as the authorization by a clinician to dispense a drug that would not be dispensed without such authorization and may include electronic prescriptions of controlled substances where creation of an electronic prescription for the medication is feasible using CEHRT and where allowable by state and local law.

**Opioids** – Opioids listed as Schedule II controlled substances under 21 CFR 1308.12.

**PDMP** – an electronic database that tracks prescriptions of controlled substances at the State level.

## Reporting Requirements

### YES/NO

The MIPS eligible clinician must attest YES to conducting a query of a PDMP for at least one Schedule II opioid electronically prescribed using CEHRT to earn the bonus points.

## Scoring Information

- Required for Promoting Interoperability Performance Category Score: **No**
- Measure Score: **N/A**
- Eligible for Bonus Score: **Yes, 10 points**

**Note:** In order to earn a score greater than zero for the Promoting Interoperability performance category, MIPS eligible clinicians must:

- Complete the activities required by the Security Risk Analysis and High Priority Practices SAFER Guide<sup>1</sup>, submit their complete numerator and denominator or Yes/No data for all required measures, and attest to the Actions to limit or restrict compatibility or interoperability of CEHRT statement.
- Failure to report at least a “1” in all required measures with a numerator or reporting a “No” for a Yes/No response measure (except for the SAFER Guides measure<sup>2</sup>) will result in a total score of 0 points for the Promoting Interoperability performance category.

## Additional Information

- In 2022, MIPS eligible clinicians may use certified technology meeting the existing 2015 Edition certification criteria, updated to the 2015 Edition Cures Update, or a combination of the two, to meet the CEHRT definition. (85 FR 84472)
- To learn more about the 2015 Edition Cures Update and the changes to 2015 Edition certification criteria finalized in the 21<sup>st</sup> Century Cures Act final rule (85 FR 25642), we encourage MIPS eligible clinicians to visit <https://www.healthit.gov/curesrule/final-rule-policy/2015-edition-cures-update>.

---

<sup>1</sup> The SAFER, or Safety Assurance Factors for EHR Resilience, Guides measure was added in the CY 2022 Physician Fee Schedule Final Rule but will not affect Promoting Interoperability performance category participants' scores in 2022.

<sup>2</sup> In 2022, eligible clinicians will be required to submit one “yes/no” attestation statement for completing an annual self-assessment of the High Priority Practices SAFER Guide, but the “yes” or “no” attestation response will not affect the Promoting Interoperability performance category score.

- To check whether a health IT product has been certified to criteria updated for the 2015 Edition Cures Update, visit the Certified Health IT Product List (CHPL) at <https://chpl.healthit.gov/>.
- 2015 Edition or 2015 Edition Cures Update functionality must be used as needed for a measure action to count in the numerator during a performance period. However, in some situations the product may be deployed during the performance period, but pending certification. In such cases, the product must be certified to the 2015 Edition or the 2015 Edition Cures Update by the last day of the performance period.
- MIPS eligible clinicians must query the PDMP and report a “yes” in order to earn a 10 point bonus.
- Actions must occur within the performance period.
- Query of the PDMP for prescription drug history must be conducted prior to the electronic transmission of the Schedule II opioid prescription.
- MIPS eligible clinicians have flexibility to query the PDMP using data from CEHRT in any manner allowed under their State law.
- Includes all permissible prescriptions and dispensing of Schedule II opioids regardless of the amount prescribed during an encounter.
- When MIPS eligible clinicians choose to report as a group, data should be aggregated for all MIPS eligible clinicians under one Taxpayer Identification Number (TIN). This includes those MIPS eligible clinicians who may qualify for reweighting through an approved Promoting Interoperability hardship exception, hospital or ASC-based status, or in a specialty which is not required to report data to the Promoting Interoperability performance category.

## Regulatory References

- For further discussion, please see the 2022 Physician Fee Schedule final rule – Quality Payment Program final rule: [86 FR 64996](#).
- In order to meet this measure, MIPS eligible clinicians must use technology certified to the criterion at 45 CFR 170.315 (b)(3).

## Certification Criteria

Below are the corresponding certification criteria for electronic health record technology that support this measure.

### Certification Criteria

[§170.315\(b\)\(3\) Electronic Prescribing](#)