

2019 MIPS Promoting Interoperability Performance Category Fact Sheet



Full Participation Requirements for MIPS-Eligible CRNAs:

CRNAs are NOT required to participate in PI because they are included in the automatic reweight and also for the following reasons:	For CRNAs who <i>voluntarily choose</i> to participate in PI the following changes were made to the category for 2019:
<ul style="list-style-type: none"> Lack of access to a certified Electronic Health Record System (CEHRT) or use of decertified CEHRT 	<ul style="list-style-type: none"> The base score required for the category was discontinued
<ul style="list-style-type: none"> Lack of applicable electronic measures 	<ul style="list-style-type: none"> MIPS-eligible clinicians must use 2015 to report PI measure data
<ul style="list-style-type: none"> Non-patient facing status 	<ul style="list-style-type: none"> The Improvement Activities (IA) related to the use of CEHRT is now scored under the PI category

Place of Service Exceptions and Clinicians who qualify for Hardship Exemption

Are Also **NOT** Required to Participate in PI

Place of Service Exceptions. CRNAs furnishing 75% or more of their professional services in sites identified by Place of Service (POS) codes 19 (off –campus outpatient), 21 (inpatient hospital), 22 (on-campus outpatient hospital), 23 (emergency room), 24 (ambulatory surgery center).

Hardship exemption: includes insufficient Internet connectivity; extreme and uncontrollable circumstance; lack of

2019 MIPS Promoting Interoperability (PI) Measures

Electronic Measures (2015 edition CEHRT)	2019 Updates to Measures
1) Security Risk Analysis	Measure will not contribute to performance measure category scoring
2) E-Prescribing*	Reweighting measure score from 10 points to 5 points
3) Provide Patients Electronic Access to Their Health Information	Measure title changed from Provide Patient Access
4) Verify Opioid Treatment Agreement	Reporting is optional for 2019 Performance Period
5) Support Electronic Referral Loops by Sending Health Information	Measure titled changed from Send Summary of Care
6) Support Electronic Referral Loops by Receiving Health Information	New measure for 2019
7) Immunization Registry Reporting**	-
8) Syndromic Surveillance Reporting**	-
9) Electronic Case Reporting**	-
10) Public Health Reporting**	-
11) Clinical Data Registry Reporting**	A clinical data registry for PI is not required to be CMS certified and is not limited to reporting MIPS measures

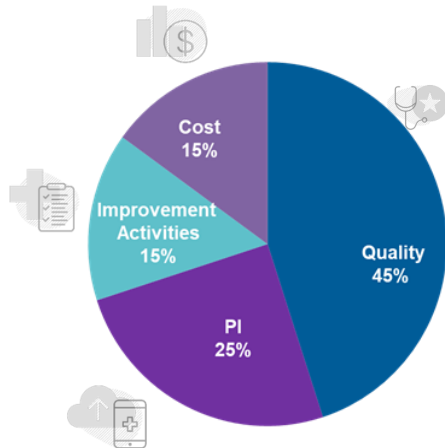
*Bonus points for reporting during 2019 Performance Period

** More than one methodology available for participating in this measure

2019 MIPS Promoting Interoperability Performance Category Fact Sheet

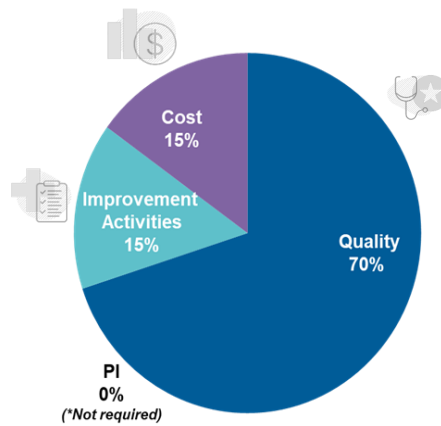


2019 MIPS PI Performance Category Weight for CRNAs:



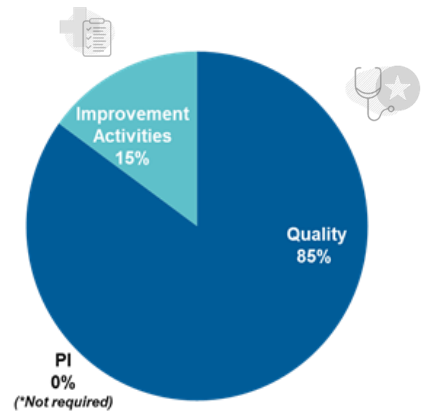
25% final Score

(for CRNAs reporting PI with applicable Cost Measures)



0% final Score

(for CRNAs NOT reporting PI but with applicable Cost Measures)



0% of final score

(for CRNAs NOT reporting PI with NO applicable Cost Measures)

CRNA Voluntary Participation in PI

Individual Clinicians	Groups	
Individual MIPS-eligible clinicians (ECs) under a NPI/TIN can submit data through a reporting method such as CEHRT, a QCDR, direct attestation to CMS, or a Qualified Registry	A group made up of two or more clinicians tied to a single TIN that includes a MIPS EC, can also report data using CEHRT, a QCDR, direct attestation to CMS, or a Qualified Registry	CRNAs who are part of a group (25 or more clinicians), that includes MIPS ECs can submit data through an additional reporting method, the CMS Web Interface



AMERICAN ASSOCIATION OF NURSE ANESTHETISTS