

2020 MIPS Promoting Interoperability (PI) 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 for nurse practitioners, clinical nurse practitioners and physician assistants OR:	CRNAs who voluntarily participate in PI must meet the following requirements:
<ul style="list-style-type: none"> Have a small practice 	<ul style="list-style-type: none"> MIPS-eligible clinicians must use 2015 edition CEHRT to report PI measure data
<ul style="list-style-type: none"> Lack of access to a Certified Electronic Health Record System (CEHRT) or use of decertified technology 	<ul style="list-style-type: none"> Collect data for all required measures for the same minimum 90-day period during the 2020 calendar year.
<ul style="list-style-type: none"> Lack control over availability of CEHRT 	<ul style="list-style-type: none"> Perform or review a security risk analysis on your 2015 edition CEHRT

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 control over certified EHR

2020 MIPS Promoting Interoperability (PI) Measures

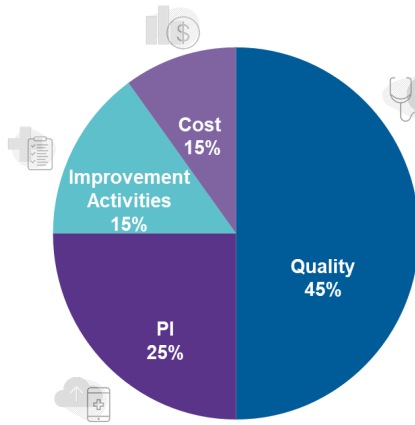
2020 Electronic Measures (2015 edition CEHRT)	Required for PI Category Score
1) Security Risk Analysis	Yes - Measure will not contribute to performance measure category scoring
2) E-Prescribing	Yes - Query of Prescription Drug Monitoring (PDMP) is an optional measure and is eligible for 5 bonus points
3) Provide Patients Electronic Access to Their Health Information	Yes
4) Support Electronic Referral Loops by Sending Health Information	Yes
5) Support Electronic Referral Loops by Receiving Health Information	Yes
6) Immunization Registry Reporting	Yes
7) Syndromic Surveillance Reporting	Yes
8) Electronic Case Reporting	Yes - Must select at least two of the five Public Health and Clinical Data Exchange measures
9) Public Health Registry Reporting	Yes - Must select at least two of the five Public Health and Clinical Data Exchange measures
10) Clinical Data Registry Reporting	Yes



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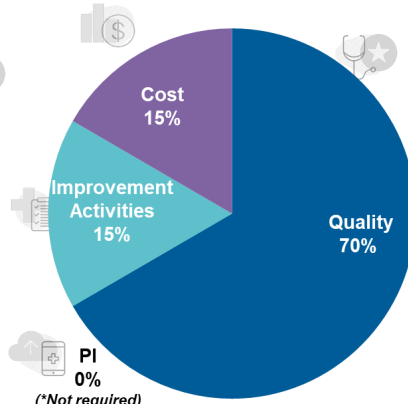


2020 MIPS PI Performance Category Weight for CRNAs:



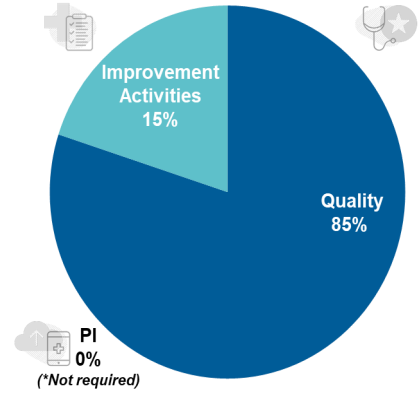
25% final Score

(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, a Qualified Registry, or by attestation.	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, attestation or a Qualified Registry	Groups with CRNAs qualify for automatic reweighting when >75% of the clinicians in the group are hospital-based.



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