

2025 Promoting Interoperability Measures

** Minium reporting requirement 180 consecutive days*

| Objective | Measure ID | Required for Score | Points | Measure Title | Description |
|--|-------------|---|---------------------------------|--|--|
| Questionnaire | PI_PPHI_1 | YES | N/A | Security Risk Analysis | Conduct a Security Risk Analysis during 2025 in accordance with the requirements in 45 CFR 164.308(a)(1), 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), identify security deficiencies and implement security updates as necessary NOTE: Free tool available at HealthIT.gov |
| Questionnaire | PI_PPHI_2 | YES | N/A | High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guide | Conduct a High Priority Practices Guide from the SAFER Guide during 2025 NOTE: Free tool available at HealthIT.gov |
| ePrescribing | PI_EP_1 | YES | Up to 10 | e-Prescribing | Percentage of prescriptions written by the MIPS eligible clinician and transmitted electronically using a certified electronic health record technology (CEHRT) during 2025 |
| ePrescribing | PI_EP_2 | YES | 10 | Query of Prescription Drug Monitoring Program (PDMP) | Percentage of Schedule II opioid, Schedule III or IV drugs electronically prescribed using certified electronic health record technology (CEHRT) during 2025 AND the MIPS eligible clinician uses data from CEHRT to conduct a query of a PDMP for drug history |
| Provider to Patient Exchange | PI_PEA_1 | YES | Up to 25 | Provide Patients Electronic Access to their Health Information | Percentage of patients seen by a MIPS eligible clinician in 2025 that is provided timely access to view, download and transmit their health information using any application of their choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the certified electronic health record technology (CEHRT) NOTE: Access to Patient Portal |
| Health Information Exchange | PI_HIE_1 | YES (3 Options, only need to report on 1) | Up to 15 | Option 1 Support Electronic Referral Loops by Sending Health Information | Percentage of patients seen by a MIPS eligible clinician in 2025 that transitions or refers the patient to another care setting or healthcare provider by creating a summary of care using certified electronic health record technology (CEHRT) AND electronically exchanges the summary of care record NOTE: eFax is not considered an electronic exchange |
| Health Information Exchange | PI_HIE_4 | YES (3 Options, only need to report on 1) | Up to 15 | Option 1 Support Electronic Referral Loops by Receiving and Reconciling Health Information | Percentage of summary of care records received by a MIPS eligible clinician in 2025 electronically in which clinical information for medication, allergies and current problem list is reconciled using certified electronic health record technology (CEHRT) NOTE: eFax is not considered an electronic exchange |
| Health Information Exchange | PI_HIE_5 | YES (3 Options, only need to report on 1) | 30 | Option 2 Health Information Exchange (HIE) Bi-Directional Exchange | MIPS eligible clinician or group must attest they engage in bi-directional exchange with an HIE to support transitions of care |
| Health Information Exchange | PI_HIE_6 | YES (3 Options, only need to report on 1) | 30 | Option 3 Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA) | MIPS eligible clinician or group must attest to enabling exchange under the Trusted Exchange Framework and Common Agreement (TEFCA) |
| Public Health and Clinical Data Exchange | PI_PHCDRR_1 | YES | 25 for both REQUIRED registries | Immunization Registry Reporting | MIPS eligible clinician or group must attest they are in active engagement with a public health agency to submit and receive immunization data in 2025 <ul style="list-style-type: none">• Option 1 – Pre-Production and Validation• Option 2 – Validated Data Production |
| Public Health and Clinical Data Exchange | PI_PHCDRR_3 | YES | 25 for both REQUIRED registries | Electronic Case Reporting | MIPS eligible clinician or group must attest they are in active engagement with a public health agency to electronically submit reporting of reportable conditions <ul style="list-style-type: none">• Option 1 – Pre-Production and Validation• Option 2 – Validated Data Production |
| Public Health and Clinical Data Exchange | PI_PHCDRR_2 | NO | Bonus | Syndromic Surveillance Reporting | MIPS eligible clinician or group must attest they are in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting <ul style="list-style-type: none">• Option 1 – Pre-Production and Validation• Option 2 – Validated Data Production |

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| Public Health and Clinical Data Exchange | PI_PHCDRR_4 | NO | Bonus | Public Health Registry Reporting | MIPS eligible clinician or group must attest they are in active engagement with a public health agency to submit data to public health registries <ul style="list-style-type: none"> • Option 1 – Pre-Production and Validation • Option 2 – Validated Data Production |
| Public Health and Clinical Data Exchange | PI_PHCDRR_5 | NO | Bonus | Clinical Data Registry Reporting | MIPS eligible clinician or group must attest they are in active engagement with a public health agency to submit data to a clinical data registry <ul style="list-style-type: none"> • Option 1 – Pre-Production and Validation • Option 2 – Validated Data Production |

Please see CMS supporting documents for full criteria

CMS supporting documents for Promoting Interoperability can be found at the following website:

<https://qpp.cms.gov/resources/education>