Merit-Based Incentive Payment System (MIPS) Promoting Interoperability Performance Category Measure
2023 Performance Period

Objective:	**e-Prescribing**
Measure:	**Query of Prescription Drug Monitoring Program (PDMP)** For at least one Schedule II opioid or Schedule III or IV drug 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.
Measure ID:	**PI_EP_2**
Exclusions:	Any MIPS eligible clinician meeting one or more of the following criteria may be excluded from the PDMP measure if the MIPS eligible clinician; 1. Is unable to electronically prescribe Schedule II opioids and Schedule III and IV drugs in accordance with applicable law during the performance period. 2. Writes fewer than 100 permissible prescriptions during the performance period. 3. Querying a PDMP would impose an excessive workflow or cost burden prior to the start of the performance period they select in CY 2023.
Measure Exclusion IDs:	1. **PI_EP_2_EX_1** 2. **PI_EP_2_EX_2** 3. **PI_EP_2_EX_3**

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 or Schedule III or IV drug electronically prescribed using CEHRT .

Scoring Information

- Required for Promoting Interoperability Performance Category Score: **Yes**
- Measure Score: **10**
- Eligible for Bonus Score: **No**

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

- o Complete the Security Risk Analysis measure
- o Review the High Priority Practices SAFER Guide[1]
- o Complete the ONC Direct Review attestation
- o Attest to the Actions to limit or restrict compatibility or interoperability of CEHRT statement

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[1] The SAFER, or Safety Assurance Factors for EHR Resilience, Guides measure was added in the CY 2022 Physician Fee Schedule Final Rule.

- Submit their complete numerator and denominator or Yes/No data for all required measures
- Submit their CMS certification identification number
- Submit their level of active engagement for the Public Health and Clinical Data Exchange measures
- 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[2]) will result in a total score of 0 points for the Promoting Interoperability performance category.

Additional Information

- In 2023, MIPS eligible clinicians must use technology certified to the 2015 Edition of health IT certification criteria and updated to the 2015 Edition Cures Update 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 21st 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.
- 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/.
- Certified 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 by the last day of the performance period.
- Actions must occur within the performance period.
- If an exclusion is claimed, the ten points are redistributed to the e-Prescribing measure.
- Query of the PDMP for prescription drug history must be conducted prior to the electronic transmission of the Schedule II opioid prescription, Schedule III drug or Schedule IV drug.
- 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 as well as Schedule III and IV drugs 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.

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[2] In 2023, 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 fulfill the measure.

Regulatory References

- For further discussion, please see the 2023 Physician Fee Schedule final rule – Quality Payment Program final rule: 87 FR 70061 through 70067.

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