

Medicare Promoting Interoperability PROGRAM

ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS OBJECTIVES AND MEASURES FOR THE 2024 EHR REPORTING PERIOD

The following information is for eligible hospitals and critical access hospitals (CAHs) attesting to CMS for their participation in the Medicare Promoting Interoperability Program in calendar year (CY) 2024.

Objective	Health Information Exchange
Measure	<p>Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA):</p> <p>The eligible hospital or CAH must attest to the following:</p> <ol style="list-style-type: none">Participating as a signatory to a Framework Agreement (as that term is defined by the Common Agreement for Nationwide Health Information Interoperability as published in the Federal Register and on ONC's website) in good standing (that is not suspended) and enabling secure, bi-directional exchange of information to occur, in production, for all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (Place of Service [POS] 21 or 23), and all unique patient records stored or maintained in the electronic health record (EHR) for these departments, during the EHR reporting period in accordance with applicable law and policy; ANDUsing the functions of certified EHR technology (CEHRT) to support bi-directional exchange of patient information, in production, under this Framework Agreement.

Definition of Terms

Health Information Exchange: "HIE" broadly refers to arrangements that facilitate the exchange of health information and may include arrangements commonly denoted as exchange "frameworks," "networks," or using other terms.

Reporting Requirements

- YES/NO Attestation – The eligible hospital or CAH must attest YES to the following:
 - Participating as a signatory to a Framework Agreement (as that term is defined by the Common Agreement for Nationwide Health Information Interoperability as published in the



- Federal Register and on ONC's website) (in good standing, that is, not suspended) and enabling secure, bi-directional exchange of information to occur, in production, for all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (Place of Service [POS] 21 or 23), and all unique patient records stored or maintained in the EHR for these departments, during the EHR reporting period in accordance with applicable law and policy.
- Using the functions of CEHRT to support bi-directional exchange of patient information, in production, under this Framework Agreement.
 - The EHR reporting period in 2024 for attesting to CMS is a minimum of any continuous 180-day period within the calendar year.
 - Eligible hospitals and CAHs now have three reporting options for meeting the Health Information Exchange Objective:
 1. Report on both the Support Electronic Referral Loops by Sending Health Information measure AND Support Electronic Referral Loops by Receiving and Reconciling Health Information measure, OR
 2. Report on the HIE Bi-Directional Exchange measure, OR
 3. Report on the Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA) measure.

Scoring Information

- Total points available for this measure: 30 points.
- 100 total points will be available for the required objectives and measures of the Medicare Promoting Interoperability Program.
- Failure to report at least a "1" for all required measures with a numerator or reporting a "No" for a Yes/No response measure will result in a total score of 0 points for the Medicare Promoting Interoperability Program. Such eligible hospitals or CAHs who fail to achieve a minimum total score of 60 points are not considered meaningful users and may be subject to a downward payment adjustment.
- *Rounding:* When calculating the performance rates and measure and objective scores, scores will be rounded to the nearest whole number.
- *Reminder:* In order to earn a score greater than zero, an eligible hospital or CAH must complete the activities required by the Security Risk Analysis and SAFER Guides measures, submit their complete numerator and denominator or Yes/No data for all required measures, submit their level of engagement for the Public Health and Clinical Exchange measures, attest to the Actions to limit or restrict the compatibility or interoperability of CEHRT statement, and the ONC Direct Review attestation, as well as report on the required electronic clinical quality measure data.

Additional Information

- For an EHR reporting period in CY 2024, eligible hospitals and CAHs must use technology certified to the ONC Certification Criteria for Health IT necessary to meet the CEHRT definition (88 FR 79307).
- To learn more about the [ONC](#) Certification Criteria for Health IT finalized in the ONC “Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing” final rule (89 FR 1205), we encourage hospitals to visit <https://www.crowell.com/en/insights/client-alerts/onc-releases-final-rule-on-information-blocking-and-health-it-certification-program-updates-including-requirements-related-to-ai>
- To check whether a health IT product that has been certified to the ONC Certification Criteria for Health IT, 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 an EHR reporting period. However, in some situations the product may be deployed during the EHR reporting period but pending certification. In such cases, the product must be certified by the last day of the EHR reporting period.
- For more information about the Trusted Exchange Framework and Common Agreement (TEFCA), visit <https://www.healthit.gov/topic/interoperability/policy/trusted-exchange-framework-and-common-agreement-tefca>.

Regulatory References

- For further discussion, please see [83 FR 41634 through 41677](#).
- Examples of certified health IT capabilities to support the actions of this measure may include but are not limited to technology certified to the criteria at 45 CFR 170.315 (b)(1), (b)(2), (g)(7), (g)(9), and (g)(10).

Certification Criteria

Below are the corresponding certification criteria for EHR technology that support this measure.

Certification Criteria

[§170.315 \(b\)\(1\) Transitions of care](#)

[§170.315 \(b\)\(2\) Clinical information reconciliation and incorporation](#)

[§170.315 \(g\)\(7\) Application Access – Patient Selection](#)

[§170.315 \(g\)\(9\) Application Access – All Data Request](#)

[§170.315 \(g\)\(10\) Application Access – Standardized API for Patient and Population Services](#)