

The Deadline to Submit Your 2019 Registration and Attestation Information for the Medicare Promoting Interoperability Program is March 2

The deadline to submit 2019 data for the Centers for Medicare & Medicaid Services' (CMS) Medicare Promoting Interoperability Program is **March 2, 2020.**

As a reminder, in 2018, CMS transitioned to the <u>QualityNet System</u> (also known as CMS's Hospital Quality Reporting [HQR] system) for hospitals that attest to CMS for the Medicare Promoting Interoperability Program. By transitioning to one system, CMS continues in their effort to streamline data submission methods.

Specific submission details for each program are listed below.

- Medicare Eligible Hospitals and Critical Access Hospitals (CAHs) These participants must attest to CMS through the QualityNet Secure Portal.
- Medicaid Eligible Professionals (EPs), Eligible Hospitals, CAHs These participants should follow the requirements of their State Medicaid agencies to submit their meaningful use attestation.
- **Dual-Eligible Hospitals and CAHs** Those who qualify for both the Medicare and Medicaid Promoting Interoperability Programs are required to demonstrate meaningful use to CMS through the QualityNet Secure Portal (not their State Medicaid agency).

Registering on Behalf of a Medicaid EP?

An EP can designate a third party to register and attest on his or her behalf. To do so, users working on behalf of an EP must have an Identity and Access Management System (I&A) web user account (User ID/Password) and be associated with the EP's National Provider Identifier (NPI). If you are working on behalf of one or more EPs and do not have an I&A web user account, please visit I&A Security Check to create one.

Note: States and territories will not necessarily offer the same functionality for registration and attestation in the Medicaid Promoting Interoperability Program. Check with your state or territory's Promoting Interoperability Program to see what functionality is offered.

Additional Resources

QualityNet Secure Portal

- Eligible Hospital Information Webpage
- QualityNet Secure Portal Enrollment and Login User Guide

 $\begin{tabular}{ll} \begin{tabular}{ll} Visit the $\underline{$Registration$ and $Attestation$} \end{tabular} page on the $\underline{$CMS$ Promoting Interoperability $Programs$} \\ \underline{website}. \end{tabular}$



Learn More About Medicare Promoting Interoperability Program Requirements for 2020

In the Fiscal Year (FY) 2020 Medicare Hospital Inpatient Prospective Payment System (IPPS) for Acute Care Hospitals and the Long-term Care Hospital (LTCH) Prospective Payment System Final Rule, the Centers for Medicare & Medicaid (CMS) finalized changes to the Medicare Promoting Interoperability Program for eligible hospitals, critical access hospitals (CAHs), and dual-eligible hospitals attesting to CMS.

The final rule adopted policies that will continue the advancement of certified EHR technology (CEHRT) utilization, further reduce burden, and increase interoperability and patient access to their health information.

Changes for 2020 include:

- The Query of Prescription Drug Monitoring Program (PDMP) Measure will remain optional, be worth 5 bonus points, and will require a Yes/No attestation (retroactive to 2019).
- The Verify Opioid Treatment Agreement Measure has been removed.
- A reduction from 16 Clinical Quality Measures (CQMs) down to 8 total which are available to choose from, but participants must only report on 4 CQMs. The reporting period has also been changed to a self-selected calendar quarter.

The following requirements will continue unchanged as finalized in 2019:

- Minimum of a continuous 90-day EHR reporting period for new and returning program participants
- The requirement to use the 2015 Edition CEHRT
 - Note: The 2015 Edition functionality must be in place by the first day of the EHR reporting period and the product must be certified to the 2015 Edition criteria by the last day of the EHR reporting period. The eligible hospital or CAH must be using the 2015 Edition functionality for the full EHR reporting period. In many situations the product may be deployed, pending certification.
- A set of four required objectives:
 - Electronic Prescribing
 - Health Information Exchange

- o Provider to Patient Exchange
- o Public Health and Clinical Data Exchange
- A performance-based scoring methodology (including completion of the Security Risk Analysis)

For more information on the reporting requirements and additional <u>Promoting Interoperability Program</u> information, please visit the <u>2020 Medicare Promoting Interoperability Program Requirements</u> webpage.



The Deadline to Submit Your 2019 Registration and Attestation Information for the Medicare Promoting Interoperability Program is March 2

The deadline to submit 2019 data for the Centers for Medicare & Medicaid Services (CMS) Medicare Promoting Interoperability Program using the QualityNet system is **March 2, 2020**.

Specific submission details for each program are listed below:

- Medicare Eligible Hospitals and Critical Access Hospitals (CAHs) must attest to CMS through the <u>QualityNet</u> Secure Portal.
- Medicaid Eligible Professionals (EPs), Eligible Hospitals, CAHs should follow the requirements of their State Medicaid agencies to submit their meaningful use attestation.
- Dual-Eligible Hospitals and CAHs who qualify for both the Medicare and Medicaid Promoting Interoperability Programs are required to demonstrate meaningful use to CMS through the <u>QualityNet</u> Secure Portal and not their State Medicaid agency.

Registering on Behalf of a Medicaid EP?

If you are registering on behalf of a Medicaid EP, you must have an Identity and Access Management System (I&A) web user account (User ID/Password) and be associated with the EP's National Provider Identifier (NPI). If you are working on behalf of one or more EPs and do not have an I&A web user account, please visit I&A Security Check to create one.

Note: States and territories will not necessarily offer the same functionality for registration and attestation in the Medicaid Promoting Interoperability Program. Check with your state or territory's Promoting Interoperability Program to see what functionality is offered.

Additional Resources

- QualityNet Secure Portal
- Eligible Hospital Information Webpage
- QualityNet Secure Portal Enrollment and Login User Guide

For More Information

Visit the <u>Registration and Attestation</u> page on the <u>CMS Promoting Interoperability Programs</u> website.

Medicare & dual-eligible hospitals participating in the Medicare & Medicaid Promoting Interoperability Programs may contact the QualityNet help desk for assistance at 1 (866) 288-8912 or qnetsupport@hcqis.org.



Critical Access Hospital Reconsideration Forms for the Medicare Promoting Interoperability Program 2018 Payment Adjustment Due March 6

The deadline for Medicare Promoting Interoperability Program critical access hospitals (CAHs) to submit a reconsideration form based on their 2018 <u>payment adjustment</u> is **March 6, 2020 at 11:59 p.m. EST**.

Please visit the Promoting Interoperability Programs <u>website</u> to find the <u>2018 Medicare</u> <u>Promoting Interoperability Program CAH Reconsideration Application</u>. **Only** complete this form if you're a CAH that received a Medicare payment adjustment for the 2018 payment year and believe that you were subject to a payment adjustment error.

Please **note** that if approved, this payment adjustment reconsideration is valid for 2018 payment adjustments only.

For More Information

For more information on payment adjustments, reporting requirements, and other details about the Promoting Interoperability Programs, please visit the <u>Promoting Interoperability Programs</u> website.



CMS is Now Accepting Proposals for New Measures for the Medicare Promoting Interoperability Program

The Centers for Medicare & Medicaid Services (CMS) <u>Annual Call for Measures</u> for eligible hospitals and critical access hospitals participating in the Medicare Promoting Interoperability Program is now open. Submit a measure proposal by **July 1, 2020**.

Proposals submitted by the deadline will be considered for inclusion in future rulemaking.

CMS is interested in adding measures that:

- Build on the advanced use of certified EHR technology (CEHRT) using 2015 Edition Certification Standards and Criteria;
- Promote interoperability and health information exchange;
- Improve program efficiency, effectiveness, and flexibility;
- Provide patient access to their health information;
- · Reduce clinician burden; and
- Align with MIPS Promoting Interoperability Performance Category.

Applicants should also consider the following when submitting their proposal:

- Health IT activities that may be attested to in lieu of traditional reporting;
- Potential new Opioid Use Disorder prevention and treatment related measures; and
- Measurable outcomes demonstrating greater efficiency in costs or resource use that can be linked to the use of health IT-enabled processes.

Submission Details

Proposals must be sent to CMSPICallforMeasures@ketchum.com. Applicants will receive email confirmations of their submission.

Submission forms must be complete to be considered. Proposals that do not provide information for every field/section in the form will not be evaluated for consideration. Any information/field not applicable to the measure proposal must state "N/A" or "not applicable" or the proposal will not be considered.

Resources

- Medicare Promoting Interoperability Program Call for Measures Submission Form
- Medicare Promoting Interoperability Program Call for Measures Fact Sheet

Visit the 2020 Call for Measures page on the Promoting Interoperability Programs website.



The Medicare Promoting Interoperability Program Hardship Exception Application for Eligible Hospitals and Critical Access Hospitals is Now Available

The Centers for Medicare & Medicaid Services (CMS) requires that all eligible hospitals and critical access hospitals (CAHs) use 2015 Edition certified electronic health record technology (CEHRT) to meet the requirements of the Promoting Interoperability Programs. As required by law, downward payment adjustments must be applied to eligible hospitals and CAHs that are not meaningful users of CEHRT.

Eligible hospitals and CAHs may be exempt from Medicare penalties if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be considered for an exemption, eligible hospitals and CAHs must complete a hardship exception application and provide proof of hardship. If approved, the hardship exception is valid for only one payment adjustment year. Eligible Hospitals and CAHs would need to submit a new application for subsequent years and in no case may an eligible hospital or CAH be granted an exception for more than five years.

The application for eligible hospitals and CAHs is available online via the *QualityNet Secure Portal* as a web-based application and can be found here. Previously registered users should already have account access, and new users can create an account by visiting QualityNet and selecting "Register".

Medicare Promoting Interoperability Program Hardship Exception Application Details

- You may now submit hardship applications electronically here.
- If an electronic submission is not possible, you may verbally submit your application over the phone by calling the QualityNet Help Desk at (866) 288-8912.
- The deadline for eligible hospitals to submit an application is **September 1**, **2020**. *Please note: This deadline has been extended from the original date of July 1*, 2020 due to COVID-19.
- The deadline for CAHs to submit an application is November 30, 2020.

For More Information

For more information about payment adjustments and hardship information, click here. For more information on the Promoting Interoperability Programs, visit the Promoting Interoperability Programs website.



CMS Accepting Proposals for New Measures for the Medicare Promoting Interoperability Program Until July 1

The Centers for Medicare & Medicaid Services (CMS) wants to remind eligible hospitals and critical access hospitals that the <u>Annual Call for Measures</u> for the Medicare Promoting Interoperability Program is still open. Submit a <u>measure proposal</u> by **July 1, 2020**.

Proposals submitted by the deadline will be considered for inclusion in future rulemaking.

CMS is interested in adding measures that:

- Build on the advanced use of CEHRT using 2015 Edition Certification Standards and Criteria:
- Promote interoperability and health information exchange;
- Improve program efficiency, effectiveness, and flexibility;
- Provide patient access to their health information;
- Reduce clinician burden; and
- Align with the MIPS Promoting Interoperability Performance Category.

Applicants should also consider the following when submitting their proposal:

- Health IT activities that may be attested to in lieu of traditional reporting;
- Potential new Opioid Use Disorder prevention and treatment related measures; and
- Measurable outcomes demonstrating greater efficiency in costs or resource use that can be linked to the use of health IT-enabled processes.

Submission Details

Proposals must be sent to CMSPICallforMeasures@ketchum.com. Applicants will receive email confirmations of their submission.

Submission forms must be complete to be considered. Proposals that do not provide information for every field/section in the form will not be evaluated for consideration. Any information/field not applicable to the measure proposal must state "N/A" or "not applicable" or the proposal will not be considered.

Resources

- Medicare Promoting Interoperability Program Call for Measures Submission Form
- Medicare Promoting Interoperability Program Call for Measures Fact Sheet

Visit the 2020 Call for Measures page on the Promoting Interoperability Programs website.



The Deadline for Eligible Hospitals to Submit their Medicare Promoting Interoperability Program Hardship Exception Application is Tuesday, September 1

The Centers for Medicare & Medicaid Services (CMS) requires that all eligible hospitals use 2015 Edition certified electronic health record technology (CEHRT) to meet the requirements of the Promoting Interoperability Programs. CMS mandates downward payment adjustments be applied to eligible hospitals that are not meaningful users of CEHRT.

Eligible hospitals may be exempt from Medicare penalties if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be considered for an exemption, eligible hospitals must complete a hardship exception application and provide proof of hardship. If approved, the hardship exception is valid for only one payment adjustment year. Eligible hospitals would need to submit a new application for subsequent years and in no case may an eligible hospital be granted an exception for more than five years.

The application for eligible hospitals is available online as a web-based application and can be found <u>here</u>. Previously registered users should already have account access, and new users can create an account by visiting <u>QualityNet</u> and selecting "**Register**".

Hardship Exception Application Details

- You may now submit hardship applications electronically here.
- If an electronic submission is not possible, you may verbally submit your application over the phone by calling the QualityNet Help Desk at (866) 288-8912.
- The deadline for eligible hospitals to submit an application is September 1,
 2020. Please note: This deadline has been extended from the original date of July 1,
 2020 due to COVID-19.

For More Information

For more information about payment adjustments and hardship information, click here. For more information on the Promoting Interoperability Programs, visit the Promoting Interoperability Programs website.



Don't Forget to Submit Proposals for New Measures for the Medicare Promoting Interoperability Program

The Centers for Medicare & Medicaid Services (CMS) wants to remind eligible hospitals and critical access hospitals that the <u>Annual Call for Measures</u> for the Medicare Promoting Interoperability Program closes this **Wednesday**, **July 1 at 11:59 p.m. ET.**

Proposals submitted by the deadline will be considered for inclusion in future rulemaking.

CMS is interested in adding measures that:

- Build on the advanced use of CEHRT using 2015 Edition Certification Standards and Criteria;
- Promote interoperability and health information exchange;
- Improve program efficiency, effectiveness, and flexibility;
- Provide patient access to their health information;
- · Reduce clinician burden; and
- Align with the MIPS Promoting Interoperability Performance Category.

Applicants should also consider the following when submitting their proposal:

- Health IT activities that may be attested to in lieu of traditional reporting;
- Potential new Opioid Use Disorder prevention and treatment related measures; and
- Measurable outcomes demonstrating greater efficiency in costs or resource use that can be linked to the use of health IT-enabled processes.

Submission Details

Proposals must be sent to CMSPICallforMeasures@ketchum.com. Applicants will receive email confirmations of their submission.

Submission forms must be complete to be considered. Proposals that do not provide information for every field/section in the form will not be evaluated for consideration. Any information/field not applicable to the measure proposal must state "N/A" or "not applicable" or the proposal will not be considered.

Resources

- Medicare Promoting Interoperability Program <u>Call for Measures Submission Form</u>
- Medicare Promoting Interoperability Program <u>Call for Measures Fact Sheet</u>

Visit the 2020 Call for Measures page on the Promoting Interoperability Programs website.



The Deadline for Eligible Hospitals to Submit their Medicare Promoting Interoperability Program Hardship Exception Application is Tuesday, September 1

The Centers for Medicare & Medicaid Services (CMS) requires that all eligible hospitals use 2015 Edition certified electronic health record technology (CEHRT) to meet the requirements of the Promoting Interoperability Programs. CMS mandates downward payment adjustments be applied to eligible hospitals that are not meaningful users of CEHRT.

Eligible hospitals may be exempt from Medicare penalties if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be considered for an exemption, eligible hospitals must complete a hardship exception application and provide proof of hardship. If approved, the hardship exception is valid for only one payment adjustment year. Eligible hospitals would need to submit a new application for subsequent years and in no case may an eligible hospital be granted an exception for more than five years.

The application for eligible hospitals is available online as a web-based application and can be found <u>here</u>. Previously registered users should already have account access, and new users can create an account by visiting <u>QualityNet</u> and selecting "**Register**".

Hardship Exception Application Details

- You may now submit hardship applications electronically here.
- If an electronic submission is not possible, you may verbally submit your application over the phone by calling the QualityNet Help Desk at (866) 288-8912.
- The deadline for eligible hospitals to submit an application is September 1,
 2020. Please note: This deadline has been extended from the original date of July 1,
 2020 due to COVID-19.

For More Information

For more information about payment adjustments and hardship information, click here. For more information on the Promoting Interoperability Programs, visit the Promoting Interoperability Programs website.



Learn More About 2020 Medicare Promoting Interoperability Program Requirements

In 2020, the Centers for Medicare & Medicaid Services (CMS) continued its overhaul of the Medicare Promoting Interoperability Program to continue the advancement of certified electronic health record technology (CEHRT) utilization, focusing on burden reduction, and improving interoperability and patient access to health information.

As a reminder, below are detailed requirements for the 2020 Medicare Promoting Interoperability Program to ensure program participants continue to have a successful reporting period:

- The EHR reporting period for new and returning participants is a minimum of any continuous 90-day period from January 1, 2020 through December 31, 2020.
- Participants are required to use 2015 Edition CEHRT.
 - The 2015 Edition CEHRT did not have to be implemented on January 1, 2020, but the functionality must be in place by the first day of the EHR reporting period.
 - Eligible hospitals or critical access hospitals must use the 2015 Edition functionality for the full EHR reporting period, in many situations the product may be deployed, but pending certification.
- Requires reporting on the following objectives and measures:
 - Electronic Prescribing
 - Health Information Exchange
 - Provider to Patient Exchange
 - Public Health and Clinical Data Exchange
- Report on four of the eight available electronic clinical quality measures in a selfselected quarter of 2020.
- Performance-based scoring methodology for a total score of up to 100 possible points.
- Submit a "yes" to the Prevention of Information Blocking Attestation.
- Submit a "yes" for the Security Risk Analysis measure.

For More Information

For more information on these reporting requirements and additional <u>Promoting Interoperability Programs</u> information, please review:

- 2020 Medicare Promoting Interoperability Program Requirements
- 2020 Medicare Hospital Specification Sheets
- 2020 Medicare Promoting Interoperability Program Overview Fact Sheet
- 2020 Security Risk Analysis Fact Sheet



The Deadline for Eligible Hospitals to Submit their Medicare Promoting Interoperability Program Hardship Exception Application is Tuesday, September 1

The Centers for Medicare & Medicaid Services (CMS) requires that all eligible hospitals use 2015 Edition certified electronic health record technology (CEHRT) to meet the requirements of the Promoting Interoperability Programs. CMS mandates downward payment adjustments be applied to eligible hospitals that are not meaningful users of CEHRT.

Eligible hospitals may be exempt from Medicare penalties if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be considered for an exemption, eligible hospitals must complete a hardship exception application and provide proof of hardship. If approved, the hardship exception is valid for only one payment adjustment year. Eligible hospitals would need to submit a new application for subsequent years and in no case may an eligible hospital be granted an exception for more than five years.

The application for eligible hospitals is available online as a web-based application and can be found <u>here</u>. Previously registered users should already have account access, and new users can create an account by visiting <u>QualityNet</u> and selecting "**Register**".

Hardship Exception Application Details

- You may now submit hardship applications electronically here.
- If an electronic submission is not possible, you may verbally submit your application over the phone by calling the QualityNet Help Desk at (866) 288-8912.
- The deadline for eligible hospitals to submit an application is **tomorrow**, **September 1**, **2020 at 11:59 p.m. ET**. *Please note: This deadline has been extended from the original date of July 1, 2020 due to COVID-19*.

For More Information

For more information about payment adjustments and hardship information, click <u>here</u>. For more information on the Promoting Interoperability Programs, visit the <u>Promoting Interoperability Programs website</u>.



Learn More About the Similarities and Differences Between the Medicare Promoting Interoperability Program and MIPS Promoting Interoperability Performance Category

The Centers for Medicare & Medicaid Services (CMS) has made significant strides in relieving regulatory burdens for providers; supporting the patient-doctor relationship in healthcare; and promoting transparency, flexibility, and innovation in the delivery of care.

In recent years, to continue their commitment to promoting and prioritizing interoperability, CMS has made updates to their quality reporting programs to align with these goals. These changes included renaming the EHR Incentive Programs to the Promoting Interoperability Programs and renaming the Advancing Care Information performance category of the Merit-based Incentive Payment System (MIPS) to the Promoting Interoperability performance category.

To better understand the similarities and differences between the Medicare Promoting Interoperability Program and the Promoting Interoperability performance category of MIPS, detailed criteria is listed below:

Who is eligible to participate in each program?

- Only eligible hospitals and critical access hospitals can participate in the Medicare Promoting Interoperability Program
- Only Medicare eligible clinicians can participate in MIPS which is one of two ways to participate in the Quality Payment Program

What criteria is specific to the Medicare Promoting Interoperability Program?

- Performance-based scoring methodology comprised of 100 total points available with a required minimum of 50 points
- Report on 4 of 8 available electronic clinical quality measures
- Attest through the CMS Hospital Quality Reporting System (also referred to as the QualityNet Secure Portal)
- Hardship exception applications are available after the data submission period has ended

What criteria is specific to the Promoting Interoperability Performance Category of MIPS?

- 1 of 4 performance categories
- 25% of total MIPS score
- Ability to submit data manually or through a file upload on qpp.cms.gov or through a third-party vendor
- Hardship exception applications are available prior to the data submission period

What criteria must both the Medicare Promoting Interoperability Program and Promoting Interoperability Performance Category follow?

- Minimum of a continuous 90-day required reporting period
- Required use of 2015 Edition CEHRT
- · Report on 4 objectives
- Must submit a "Yes" to:
 - o The Prevention of Information Blocking Attestation
 - The ONC Direct Review Attestation
 - The Security Risk Analysis measure

Resources

For more information, view the <u>Medicare Promoting Interoperability Program vs. MIPS</u>

<u>Promoting Interoperability Performance Category Fact Sheet</u>. Additionally, visit the Promoting Interoperability Programs <u>website</u> and the Quality Payment Program <u>website</u> for additional resources.



October 3 is the Last Start Date for the Medicare Promoting Interoperability Program EHR Reporting Period

The Centers for Medicare & Medicaid Services (CMS) wants to remind Medicare Promoting Interoperability Program participants that **Saturday**, **October 3**, is the last day to begin the program's 90-day electronic health record (EHR) reporting period.

The Medicare Promoting Interoperability Program requires new and returning eligible hospitals, dual-eligible hospitals, and critical access hospitals to report for at least 90 consecutive days during calendar year 2020 (through December 31, 2020). Participants who cannot demonstrate over the course of the 90-day EHR reporting period that they are meaningful EHR users will receive a negative payment adjustment.

In addition to a continuous 90-day EHR reporting period and other program requirements, Medicare Promoting Interoperability Program participants must:

- Use 2015 Edition Certified EHR Technology (CEHRT) for a minimum of any continuous 90-day period
 - Note: The 2015 Edition CEHRT did not have to be implemented on January 1, 2020, but the functionality must be in place by the first day of the EHR reporting period
- Submit a "yes" to the Prevention of Information Blocking Attestations
- Submit a "yes" to the Office of the National Coordinator for Health Information Technology Direct Review Attestation
- Submit a "yes" for the Security Risk Analysis measure
- Report the required numerator and denominator or yes/no measures from each of the 4 objectives or claim their exclusion(s)
- Earn a minimum total score of 50 points (out of 100 possible points)
- Report on 4 self-selected eCQMs from the set of 8 available

For More Information

To learn more about these requirements, please review the:

2020 Medicare Promoting Interoperability Program Requirements

• FY 2020 Medicare Promoting Interoperability Program Overview Fact Sheet

For more information on the Promoting Interoperability Programs, visit the <u>Promoting Interoperability Programs</u> website.



The Deadline for Critical Access Hospitals to Submit their Medicare Promoting Interoperability Program Hardship Exception Application is Monday, November 30

The Centers for Medicare & Medicaid Services (CMS) requires that all critical access hospitals (CAHs) use 2015 Edition certified electronic health record technology (CEHRT) to meet the requirements of the Promoting Interoperability Programs. CMS mandates downward payment adjustments be applied to CAHs that are not meaningful users of CEHRT.

CAHs may be exempt from Medicare penalties if they can show that compliance with the requirement for being a meaningful EHR user would result in a significant hardship. To be considered for an exemption, CAHs must complete a hardship exception application and provide proof of hardship. If approved, the hardship exception is valid for only one payment adjustment year. CAHs would need to submit a new application for subsequent years and in no case may a CAH be granted an exception for more than five years.

The application for CAHs is available online as a web-based application and can be found here. Previously registered users should already have account access, and new users can create an account by visiting QualityNet and selecting "Register".

Hardship Exception Application Details

- You may now submit hardship applications electronically here.
- If an electronic submission is not possible, you may verbally submit your application over the phone by calling the QualityNet Help Desk at (866) 288-8912.
- The deadline for CAHs to submit an application is November 30, 2020.

For More Information

For more information about payment adjustments and hardship information, click here. For more information on the Promoting Interoperability Programs, visit the Promoting Interoperability Programs website.