

Medicare Promoting Interoperability PROGRAM

2022 MEDICARE PROMOTING INTEROPERABILITY PROGRAM FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

Health Information Exchange Objective Fact Sheet

On August 13, 2021, the Centers for Medicare & Medicaid Services (CMS) published the [Fiscal Year 2022 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospitals and Long-term Care Hospital Prospective Payment System Final Rule](#). In the rule, CMS continued its focus on the advancement of certified electronic health record technology (CEHRT) utilization, and improving interoperability and patient access to health information for the Medicare Promoting Interoperability Program for eligible hospitals and critical access hospitals (CAHs). We finalized changes to the Public Health and Clinical Data Exchange objective.

The information included in this fact sheet pertains to the Health Information Exchange objective for the Medicare Promoting Interoperability Program in calendar year (CY) 2022.

Health Information Exchange (HIE) Objective: The eligible hospital or CAH provides a summary of care record when transitioning or referring their patient to another setting of care, receives or retrieves a summary of care record upon the receipt of a transition or referral or upon the first patient encounter with a new patient, and incorporates summary of care information from other providers into their electronic health record (EHR) using the functions of CEHRT.

Measures

Option 1

Measure 1: Support Electronic Referral Loops by Sending Health Information

- **Measure description:** For at least one transition of care or referral, the eligible hospital or CAH that transitions or refers their patient to another setting of care or provider of care: (1) Creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.
- **Exclusion:** Not available in 2022.
- **Maximum points available for this measure:** 20 points.



AND

Measure 2: Support Electronic Referral Loops by Receiving and Incorporating Health Information

- **Measure description:** For at least one electronic summary of care record received for patient encounters during the EHR reporting period for which an eligible hospital or CAH was the receiving party of a transition of care or referral, or for patient encounters during the EHR reporting period in which the eligible hospital or CAH has never before encountered the patient, the eligible hospital or CAH conducts clinical information reconciliation for medication, medication allergy, and current problem list.
- **Exclusion:** Not available in 2022.
- **Maximum points available for this measure:** 20 points.

Option 2

Measure 3: Engagement in Bi-Directional Exchange Through Health Information Exchange

- **Measure description:** The eligible hospital or CAH must attest that they engage in bidirectional exchange with an HIE to support transitions of care.
- **Exclusion:** Not available in 2022
- **Maximum points available for this measure:** 40 points.

Scoring

Objective	Measures	Maximum Points Available in CY 2022	CY 2022 Exclusion Available
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information	20 points	No
	Support Electronic Referral Loops by Receiving and Incorporating Health Information	20 points	No
	OR		

	Engagement in Bi-Directional Exchange Through Health Information Exchange	40 points	No
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Additional Resources

For more information on the Health Information Exchange objective and other Medicare program requirements for 2022, visit:

- [Promoting Interoperability Programs Landing page](#)
- [Scoring, Payment Adjustment, and Hardship Information webpage](#)
- [2022 Medicare Promoting Interoperability Program Specification Sheets](#)