Promoting Interoperability

PROGRAMS

2019 MEDICARE PROMOTING INTEROPERABILITY PROGRAM FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

Provider to Patient Exchange Objective Fact Sheet

On August 2, 2018, the Centers for Medicare & Medicaid Services (CMS) released the <u>Fiscal Year</u> <u>2019 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospital and Long-term</u> <u>Care Hospital Prospective Payment System Final Rule</u>. In the rule, CMS overhauled the Medicare Promoting Interoperability Program to achieve the following:

- Advance certified electronic health record technology (CEHRT) utilization
- Reduce burden
- Improve interoperability and patient access to health information

The rule finalized a new performance-based scoring methodology with a smaller set of four objectives:

- 1. Electronic Prescribing
- 2. Health Information Exchange
- 3. Provider to Patient Exchange
- 4. Public Health and Clinical Data Exchange

CMS also reiterated that beginning with the EHR reporting period in calendar year (CY) 2019, participants in the Promoting Interoperability Programs are required to use the 2015 Edition of CEHRT. For more information on 2015 Edition CEHRT, review this <u>fact sheet</u>.

The information included in this fact sheet pertains to the Provider to Patient Exchange objective (formerly known as the Patient Electronic Access to Health Information objective) for the Medicare Promoting Interoperability Program in CY 2019.

Provider to Patient Exchange Objective: Provides patients timely electronic access to their health information.



Measures

Measure: Provide Patients Electronic Access to Their Health Information (formerly Provide Patient Access)

- **Measure description**: For at least one unique patient discharged from the eligible hospital or critical access hospital (CAH) inpatient or emergency department (POS 21 or 23):
 - The patient (or patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and
 - The eligible hospital or CAH ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the eligible hospital or CAH's CEHRT.
- Exclusion: Not available in 2019.
- Maximum points available for this measure: 40 points.

Scoring

Objective	Measures	CY 2019 Exclusion Available	Maximum Points Available in CY 2019
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	No	40

Additional Resources

For more information on the Provider to Patient Exchange objective and other Medicare program requirements for 2019, visit:

- Promoting Interoperability Programs Landing Page
- 2019 Medicare Program Requirements webpage
- Scoring, Payment Adjustment, and Hardship Information webpage
- FY 2019 IPPS and Medicare Promoting Interoperability Program Overview Fact Sheet
- 2019 Medicare Specification Sheets
- 2015 Edition CEHRT Fact Sheet