

Support Electronic Referral Loops by Sending Health Information

07/24/2024 9:26 pm EDT

The denominator is determined by the total number of referrals you have sent with e-fax and direct messaging. The numerator is the number of referrals sent via [Direct Messaging](#).

Description

For at least one transition of care or referral, the MIPS-eligible clinician that transitions or refers their patient to another setting of care or health care provider:

1. Creates a summary of care record using certified electronic health record technology (CEHRT); and
2. Electronically exchanges the summary of care record

Numerator - The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically.

Denominator - Number of transitions of care and referrals during the performance period for which the MIPS-eligible clinician was the transferring or referring clinician.

Exclusions - Any MIPS-eligible clinician who transfers a patient to another setting or refers a patient fewer than 100 times during the performance period.

Definition of Terms & Additional Information

Transition of Care – The movement of a patient from one setting of care (hospital, ambulatory primary care practice, ambulatory, specialty care practice, long-term care, home health, rehabilitation facility) to another. At a minimum, this includes all transitions of care and referrals that are ordered by the MIPS-eligible clinician.

Referral – Cases where one provider refers a patient to another, but the referring provider maintains his or her care of the patient as well.

Summary of Care Record – All summary of care documents used to meet this objective must include the following information if the MIPS-eligible clinician knows it:

- Patient name
- Demographic information (preferred language, sex, race, ethnicity, date of birth)
- Smoking status
- Current problem list (eligible clinicians may also include historical problems at their discretion)*
- Current medication list*
- Current medication allergy list*
- Laboratory test(s)
- Laboratory value(s)/result(s)
- Vital signs (height, weight, blood pressure, BMI)
- Procedures
- Care team member(s) (including the primary care provider of record and any additional known care team members beyond the referring or transitioning clinician and the receiving clinician)*
- Immunizations

- Unique device identifier(s) for a patient's implantable device(s)
- Care plan, including goals, health concerns, and assessment and plan of treatment
- Referring or transitioning clinician's name and office contact information
- Encounter diagnosis
- Functional status, including activities of daily living, cognitive and disability status
- Reason for referral

***Note:** A MIPS eligible clinician must verify that the fields for current problem list, current medication list, and current medication allergy list are not blank and include the most recent information known by the MIPS eligible clinician as of the time of generating the summary of care document or include a notation of no current problem, medication and/or medication allergies.

Current problem lists – At a minimum a list of current and active diagnoses.

Active/current medication list – A list of medications that a given patient is currently taking.

Active/current medication allergy list – A list of medications to which a given patient has known allergies.

Allergy – An exaggerated immune response or reaction to substances that are generally not harmful.

You can enter your data in your Healthmonix MIPSpro account and **Save**.

Support Electronic Referral Loops by Receiving and Reconciling Health Information (PI_HIE_4)

Complete:	Measure Details						
<p>1. <input type="radio"/> This group receives fewer than 100 transitions of care or referrals or has fewer than 100 encounters with patients never before encountered during the performance period in 2022 MIPS.</p> <p><input checked="" type="radio"/> None of the above</p> <p>2. Numerator: Enter the number of electronic summary of care records in the denominator for which clinical information reconciliation is completed using CEHRT for the following three clinical information sets: (1) Medication – Review of the patient's medication, including the name, dosage, frequency, and route of each medication; (2) Medication allergy – Review of the patient's known medication allergies; and (3) Current Problem List – Review of the patient's current and active diagnoses.</p> <p>Denominator: Enter the number of electronic summary of care records received using CEHRT for patient encounters during the performance period for which a MIPS eligible clinician was the receiving party of a transition of care or referral, and for patient encounters during the performance period in which the MIPS eligible clinician has never before encountered the patient.</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Numerator</th> <th>Denominator</th> </tr> </thead> <tbody> <tr> <td>Group Total:</td> <td><input type="text" value="0"/></td> <td><input type="text" value="0"/></td> </tr> </tbody> </table>		Numerator	Denominator	Group Total:	<input type="text" value="0"/>	<input type="text" value="0"/>	<p>Measure Title: Support Electronic Referral Loops by Receiving and Reconciling Health Information</p> <p>Measure ID: PI_HIE_4</p> <p>Objective: Health Information Exchange</p> <p>Description</p> <p>For at least one electronic summary of care record received for patient encounters during the performance period for which a MIPS eligible clinician was the receiving party of a transition of care or referral, or for patient encounters during the performance period in which the MIPS eligible clinician has never before encountered the patient, the MIPS eligible clinician conducts clinical information reconciliation for medication, medication allergy, and current problem list.</p> <p>Definitions</p> <p>Transition of Care - The movement of a patient from one setting of care (hospital, ambulatory primary care practice, ambulatory, specialty care practice, long-term care, home health, rehabilitation facility) to another. At a minimum this includes all transitions of care and referrals that are ordered by the MIPS eligible clinician.</p> <p>Referral - Cases where one provider refers a patient to another, but the referring provider maintains his or her care of the patient as well.</p> <p>Current problem lists - At a minimum a list of current and active diagnoses.</p> <p>Active/current medication list - A list of medications that a given patient is currently taking.</p> <p>Active/current medication allergy list - A list of medications to which a given patient has known allergies.</p> <p>Allergy - An exaggerated immune response or reaction to substances that are generally not harmful.</p>
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<p>Cancel Save</p>							