

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

Electronic Prescribing Objective Fact Sheet

On August 2, 2018, the Centers for Medicare & Medicaid Services (CMS) released the [Fiscal Year 2019 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospitals and Long-term Care Hospital Prospective Payment System Final Rule](#). 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 [fact sheet](#).

The information included in this fact sheet pertains to the Electronic Prescribing objective for the Medicare Promoting Interoperability Program for the EHR reporting period in CY 2019.

Electronic Prescribing Objective: Generate and transmit permissible discharge prescriptions electronically.

Measures

Measure 1: E-Prescribing

- **Measure description:** For at least one hospital discharge, medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.
- **Exclusion:** Any eligible hospital or critical access hospital (CAH) that does not have an internal pharmacy that can accept electronic prescriptions **and** there are no pharmacies



that accept electronic prescriptions within 10 miles at the start of their EHR reporting period.

- **Maximum points available for this measure:** 10 points.

Measure 2: Query of Prescription Drug Monitoring Program (PDMP) – Bonus Measure

- **Measure description:** For at least one Schedule II opioid electronically prescribed using CEHRT during the EHR reporting period, the eligible hospital or CAH uses data from CEHRT to conduct a query of a PDMP for prescription drug history, except where prohibited and in accordance with applicable law.
- **Exclusion:** Not available for the EHR reporting period in 2019.
- **Maximum points available for this measure:** 5 points.
- **Note:** This measure will be required beginning with the EHR reporting period in CY 2020. The measure will be worth up to 5 points and will have an exclusion available.

Measure 3: Verify Opioid Treatment Agreement – Bonus Measure

- **Measure description:** For at least one unique patient for whom a Schedule II opioid was electronically prescribed by the eligible hospital or CAH using CEHRT during the EHR reporting period, if the total duration of the patient’s Schedule II opioid prescriptions is at least 30 cumulative days within a 6-month look-back period, the eligible hospital or CAH seeks to identify the existence of a signed opioid treatment agreement and incorporates it into the patient’s electronic health record using CEHRT.
- **Exclusion:** Not available for the EHR reporting period in 2019.
- **Maximum points available for this measure:** 5 points.
- **Note:** This measure will continue to be optional for the EHR reporting period in CY 2020.

Scoring

Objective	Measures	CY 2019 Exclusion Available	Maximum Points Available in CY 2019
Electronic Prescribing	e-Prescribing*	Yes	10
	Bonus: Query of Prescription Drug Monitoring Program (PDMP)	No	5
	Bonus: Verify Opioid Treatment Agreement	No	5

*If an exclusion is claimed for the e-Prescribing measure for the EHR reporting period in CY 2019, the 10 points for the e-Prescribing measure will be redistributed equally among the measures associated with the Health Information Exchange objective. Each of the two measures would be worth up to 25 points instead of 20.

Additional Resources

For more information on the Electronic Prescribing 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](#)