

General Requirements:

To be considered a meaningful user and to avoid a downward payment adjustment, the following is required for eligible hospitals* and critical access hospitals** participating in the Medicare Promoting Interoperability Program.

Submit data based on the CMS required reporting period.	Report data using the ONC Health IT certification criteria to meet the CEHRT requirement.	Report data using CMS approved CY 2025 measure specifications.	Earn a minimum total program score of 70 points.	Successfully submit data to the HQR Secure Portal by the submission deadline:
<ul style="list-style-type: none"> For eCQM reporting, submit four quarters of CY 2025 data (Q1, Q2, Q3, and Q4). The EHR Reporting Period is a minimum of any continuous, self-selected 180-day period within CY 2025. ◇ Last day to begin 180-day reporting requirement is July 5, 2025. 	<ul style="list-style-type: none"> The CMS EHR Certification ID is required to submit data in the HQR Secure Portal. For information, visit the Certified Health IT Product List website. Use the ONC health IT certification criteria functionality as needed for a measure action to count in the numerator during the EHR reporting period. 	<ul style="list-style-type: none"> For eCQM specifications, use the CMS Annual Update published in 2024 and any applicable addenda for the CY 2025 reporting period, available on the eCQI Resource Center. For objective and measure specifications, use the CY 2025 Specifications. 	<ul style="list-style-type: none"> A total score up to 100 points includes scores of individual measures added together. A score of 0 in the numerator or an objective will result in a program failure. Scores will be rounded to the nearest whole number during measure calculation for performance rates and objective/measure scores. 	<p>⇒ Monday, March 2, 2026, at 11:59 p.m. PT</p>

SCORED REQUIREMENTS

The total program score must be at least 70 points.

Electronic Prescribing

- e-Prescribing (10 points) (Numerator/Denominator Required)
- Query of PDMP (10 points) (Yes/No Attestation Required)

Health Information Exchange: Must select 1 of the 3 reporting options below.

- Support Electronic Referral Loops by Sending Health Information (15 points)
- AND** Support Electronic Referral Loops by Receiving and Reconciling Health Information (15 points) (Numerator/Denominator Required)
- OR**
- Health Information Exchange Bi-Directional Exchange (30 points) (Yes/No Attestation Required)
- OR**
- Enabling Exchange under TECCA (30 points) (Yes/No Attestation Required)

Provider to Patient Exchange

- Provide Patients Electronic Access to Their Health Information (25 points) (Numerator/Denominator Required)

Public Health and Clinical Data Exchange (25 points)

- An Option 2 active engagement level is required for each measure below.
- Syndromic Surveillance Reporting (Yes/No Attestation Required)
- Immunization Registry Reporting (Yes/No Attestation Required)
- Electronic Case Reporting (Yes/No Attestation Required)
- Electronic Reportable Laboratory Result Reporting (Yes/No Attestation Required)
- A level of active engagement is required for each measure below.
- Antimicrobial Use (AU) Surveillance measure (Yes/No Attestation Required)
- Antimicrobial Resistance (AR) Surveillance measure (Yes/No Attestation Required)

eCQM REPORTING REQUIREMENTS

Submit four calendar quarters of data for a total of six eCQMs. Each quarter must contain the same six eCQMs.

Submit data for the following eCQMs:

- Three CMS-selected (mandatory) eCQMs:
 - Safe Use of Opioids – Concurrent Prescribing
 - Cesarean Birth (PC-02)
 - Severe Obstetric Complications (PC-07)

AND

Three self-selected eCQMs from the [CY 2025 Available eCQMs Table](#)

Submit eCQM data as any combination of the following:

- QRDA Category I files with patients meeting the IPP of the applicable measure(s)
- Zero denominator declarations
- Case threshold exemptions

Refer to the [CY 2025 eCQM Submission Overview](#) and [CY 2025 QRDA Category I Submission Checklist](#) on the QualityNet and Quality Reporting Center websites.

*The submission of CY 2025 data will affect the FY 2027 payment determination.
 **The submission of CY 2025 data will affect the FY 2025 payment determination.

UNSCORED REQUIREMENTS

An attestation of Yes is required.

Protect Patient Health Information

- SAFER Guides
- Security Risk Analysis Measure

Acting to Limit or Restrict the Compatibility or Interoperability of CEHRT

ONC Direct Review

Bonus

OPTIONAL MEASURES/REQUIREMENTS

Public Health and Clinical Data Exchange Report only one for 5 bonus points:

- Public Health Registry Reporting (Yes/No Attestation Required)
- Clinical Data Registry Reporting (Yes/No Attestation Required)

ONC ACB Surveillance (Yes/No/NA Attestation):

This is an optional attestation.

No bonus points will be provided.

ACB	Authorized Certification Body	HQR	Hospital Quality Reporting
AR	Antimicrobial Resistance	ID	identification
AU	Antimicrobial Use	IPP	Initial Patient Population
CEHRT	Certified EHR Technology	IT	information technology
CMS	Centers for Medicare & Medicaid Services	ONC	Office of the National Coordinator
CY	calendar year	PC	Perinatal Care
eCQI	Electronic Clinical Quality Improvement	PDMP	Prescription Drug Monitoring Program
eCQM	electronic clinical quality measure	Q	quarter
EHR	electronic health record	QRDA	Quality Reporting Document Architecture
FY	fiscal year	SAFER	Safety Assurance Factors for EHR Resilience
HQR	Hospital Quality Reporting	TEFCA	Trusted Exchange Framework and Common Agreement™