

Medicare Promoting Interoperability Program Specifications Manual Release Notes

For Manual Version: 2.0

Guidelines for Using Release Notes

The Release Notes provide modifications to the CMS Specifications Manual for Eligible Hospitals and Critical Access Hospitals Participating in the Medicare Promoting Interoperability Program for the Electronic Health Record Reporting Period in Calendar Year 2026, Version 2.0. The information in this document is to be used as a reference. Please refer to the CMS Specifications Manual for Eligible Hospitals and Critical Access Hospitals Participating in the Medicare Promoting Interoperability Program for the Electronic Health Record Reporting Period in Calendar Year 2026 for the complete and current measure specifications and data collection requirements and guidelines.

Please note that extensive changes will not be identified individually within these Release Notes. Instead, refer to the applicable sections of the specification manual for details about these changes.

The notes are organized to follow the order of the Table of Contents. The **implementation date is 01/01/2026**, unless otherwise specified. The headings are described below:

- **Impacts** - used to identify the impacted portion(s) of the Manual Section, e.g., General Information, Objective and Measure Information, Technical Specifications, and Certification Criteria.
- **Rationale** - provided for the change being made.
- **Description of Changes** - used to identify the section within the document where the change occurs, e.g., Definition, Exclusions, Numerator/Denominator, and Reporting Requirements.

NOTE: In addition to being called out specifically in the Release Notes document, additions are **yellow highlighted** in the corresponding documents within the specification manual.

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The content below is organized to follow the Table of Contents in the specification manual.

Table of Contents

Impacts:

Table of Contents

Rationale: Updated to reflect the current requirements.

Description of Changes:

Table 1

Change from:

CY 2025 Performance-Based Scoring Methodology for EHR Reporting Period

To:

Scoring Methodology for the EHR Reporting Period in CY 2026

Table 2

Change from:

CY 2025 Summary of Exclusion Redistribution for EHR Reporting Period

To:

Exclusion Redistribution for EHR Reporting Period in CY 2026

Add the new measure name under the Public Health and Clinical Data Exchange Objective:
Public Health Reporting Using TEFCA®

Table 4

Change from:

ONC Health IT Certification Criteria for the EHR Reporting Period in CY 2025

To:

ONC Health IT Certification Criteria for the EHR Reporting Period in CY 2026

Introduction

Impacts:

Introduction

Rationale: Revised language for clarification.

Description of Changes:

See Introduction for changes.

Using this Manual

Impacts:

Introduction

Rationale: Revised language for clarification.

Description of Changes:

See Using This Manual for changes.

Impacts:

Section 1: General Reporting Requirements

Rationale: Added guidance about the CMS-approved system used for data submission.

Description of Changes:

Add the last sentence at the end of the first paragraph:

The [Hospital Quality Reporting \(HQR\) system](#) is a secure portal allowing users to safely submit clinical data to CMS.

Impacts:

Section 5: Certification Criteria

Rationale: Updated guidance on the U.S. Department of Health and Human Services (HHS) reversed 2024 reorganization that dually titled the Office of the National Coordinator for Health Information Technology (ONC) as Assistant Secretary for Technology Policy (ASTP)/ONC.

Description of Changes:

Remove the reference to the Assistant Secretary for Technology Policy.

Add the hyperlink for the Office of the National Coordinator for Health IT (<https://healthit.gov/>).

Section 1: General Reporting Requirements

Impacts:

All Measures

Rationale: Added additional guidance on CEHRT.

Description of Changes:

Add the following sentences to the first bullet:

A new CMS EHR Certification ID is required each year using the annual year-based syntax. For additional details, refer to Section 5: Certification Criteria in this manual.

Remove the fourth bullet:

In some situations, a health IT product may be deployed during the EHR reporting period but pending certification. In these cases, the product must be certified by the last day of the EHR reporting period.

Impacts:

All Measures

Rationale: Added guidance about the CMS-approved system used for data submission.

Description of Changes:

Add the fourth bullet:

Data must be submitted on the CMS Hospital Quality Reporting (HQR) system by the annual deadline by logging into the *HQR Secure Portal* at <https://hqr.cms.gov/hqrng/login>.

Impacts:

Public Health and Clinical Data Exchange Objective

Rationale: Updated to reflect the current requirements.

Description of Changes:

Change from:

Two optional (bonus) measures

To:

Three optional (bonus) measures

Add the Public Health Reporting Using TEFCA measure to the Bonus Measures column.

Section 2: General Scoring Information

Impacts:

Bonus Points

Rationale: Updated to reflect the current requirements.

Description of Changes:

Add the Public Health Reporting Using TEFCA measure.

Table 1: Scoring Methodology for the EHR Reporting Period in CY 2026

Impacts:

Table 1

Rationale: Updated to reflect the current requirements.

Description of Changes:

Change from:

CY 2025 Performance-Based Scoring Methodology for EHR Reporting Period

To:

Scoring Methodology for the EHR Reporting Period in CY 2026

Add the new bonus measure name under the Public Health and Clinical Data Exchange Objective:

Public Health Reporting Using TEFCA

Add footnote1:

The eCR measure will not be suppressed for the EHR Reporting Period in CY 2026.

Table 2: Exclusion Redistribution for the EHR Reporting Period in CY 2026

Impacts:

Table 2

Rationale: Updated to reflect the current requirements.

Description of Changes:

Change from:

CY 2025 Summary of Exclusion Redistribution for EHR Reporting Period

To:

Exclusion Redistribution for EHR Reporting Period in CY 2026

Section 3: Objective and Measure Information**Objective: Electronic Prescribing (e-Prescribing) (No Updates)**

Measure Name: e-Prescribing (No Updates)

Measure Name: Query of Prescription Drug Monitoring Program (PDMP) (No Updates)

Objective: Health Information Exchange

Measure Name: Support Electronic Referral Loops by Sending Health Information

Impacts:

Additional Information

Rationale: Updated to provide clarification.**Description of Changes:**

See Additional Information for changes.

Measure Name: Support Electronic Referral Loops by Receiving and Reconciling Health Information (No Updates)

Measure Name: Health Information Exchange (HIE) Bi-Directional Exchange (No Updates)

Measure Name: Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA) (No Updates)

Objective: Provider to Patient Exchange (No Updates)

Measure Name: Provide Patients Electronic Access to Their Health Information (No Updates)

Objective: Public Health and Clinical Data Exchange

Measure Name: Immunization Registry Reporting (No Updates)

Measure Name: Syndromic Surveillance Reporting (No Updates)

Measure Name: Electronic Case Reporting (eCR)

Impacts:

Additional Information

Rationale: Updated to provide clarification.**Description of Changes:****Add** phrase to the first bullet:

To receive and process eCR data in order

Change the last bullet from:

45 CFR 170.315(f)(5)

To:

45 CFR 170.315(f)(5)(i)

Measure Name: Electronic Laboratory Reporting (ELR) (No Updates)

Measure Name: Antimicrobial Use (AU) Surveillance (No Updates)

Measure Name: Antimicrobial Resistance (AR) Surveillance (No Updates)

Measure Name: Public Health Registry Reporting

Impacts:

Scoring Information

Rationale: Updated to provide clarification.

Description of Changes:

See Scoring Information for changes.

Impacts:

Additional Information

Rationale: Updated to broaden this to any standards in 45 CFR 170 to include 170.215 where the FHIR standards are.

Description of Changes:

Change the first bullet from:

45 CFR 170.205

To:

45 CFR 170

Measure Name: Clinical Data Registry Reporting

Impacts:

Scoring Information

Rationale: Updated to provide clarification.

Description of Changes:

See Scoring Information for changes.

Impacts:

Additional Information

Rationale: Updated to broaden this to any standards in 45 CFR 170 to include 170.215 where the FHIR standards are.

Description of Changes:

Change the second bullet from:

45 CFR 170.205

To:

45 CFR 170

Measure Name: Public Health Reporting Using TEFCA®

Impacts:

Public Health and Clinical Data Exchange Objective

Rationale: Added the new bonus measure, Public Health Reporting Using TEFCA, to reflect the current requirements.

Description of Changes:

See the new individual specification for the Public Health Reporting Using the Trusted Exchange Framework and Common Agreement™ (TEFCA®) measure.

Objective: Protect Patient Health Information

Measure Name: Security Risk Analysis

Impacts:

Definition

Rationale: Added the second component for this measure, security risk management activities, to reflect the current requirements.

Description of Changes:

See Definition for additional changes.

Measure Name: Safety Assurance Factors for EHR Resilience (SAFER) Guides

Impacts:

Definition

Additional Information

Rationale: Updated to using all eight of the 2025 SAFER Guides beginning with the EHR reporting period in CY 2026 and subsequent years, to reflect the current requirements.

Description of Changes:

See Definition and Additional Information for changes.

Section 4: Technical Specifications and Resources for eCQM Reporting (No Updates)**Section 5: Certification Criteria****Impacts:**

Certification Criteria

Rationale: Added description of the CEHRT definition.

Description of Changes:

Add the first bullet:

- The CEHRT definition (42 CFR 495.4) requires use of EHR technology (which could include multiple technologies) certified under the ONC Health IT Certification Program. This includes:
 - EHR technology certified to the criteria in the Base EHR definition (as defined by ONC at 45 CFR 170.102). For a list of criteria currently included in the Base EHR Definition, see <https://healthit.gov/certification-health-it/certification-criteria/base-electronic-health-record-definition/>.
 - EHR technology certified to other ONC health IT certification criteria, as adopted and updated in 45 CFR 170.315, including:
 - Family health history (45 CFR 170.315(a)(12)).
 - Patient health information capture (45 CFR 170.315(e)(3)).
 - Applicable measure calculation certification criterion at 45 CFR 170.315(g)(1) or (2) for all certification criteria that support a meaningful use objective with a percentage-based measure.
 - Clinical quality measure certification criteria that support the calculation and reporting of clinical quality measures at 45 CFR 170.315(c)(2) and (c)(3), and can be electronically accepted by CMS.

Impacts:

Certification Criteria

Rationale: Provided additional CEHRT information.

Description of Changes:

Add the second bullet:

Criteria for EHR technology necessary to be a Meaningful EHR User is found at 42 CFR 495.4. Criteria required to meet the objectives and measures of the Promoting Interoperability Program are specified in Table 4.

Add the third bullet:

In some situations, a health IT product may be deployed during the EHR reporting period but pending certification. In these cases, the product must be certified by the last day of the EHR reporting period.

Add the fourth bullet:

ONC rulemaking actions for the ONC Health IT Certification Program can be found here: <https://healthit.gov/regulations/onc-regulatory-activities/>.

Section 6: Glossary of Terms (No Updates)

Section 7: Resources

Impacts:

Medicare Promoting Interoperability Program Listserv

Rationale: Updated the listserv information.

Description of Changes:

See Medicare Promoting Interoperability Program Listserv for changes.

Section 8: Acronyms

Impacts:

ASTP

Rationale: Updated guidance on the U.S. Department of Health and Human Services (HHS) reversed 2024 reorganization that dually titled the Office of the National Coordinator for Health Information Technology (ONC) as Assistant Secretary for Technology Policy (ASTP)/ONC.

Description of Changes:

Remove ASTP