

Navigating the MIPS Dashboard (2025)

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The MIPS Dashboard allows customers to track the [MIPS Promoting Interoperability](#) measure for the 2025 reporting period.

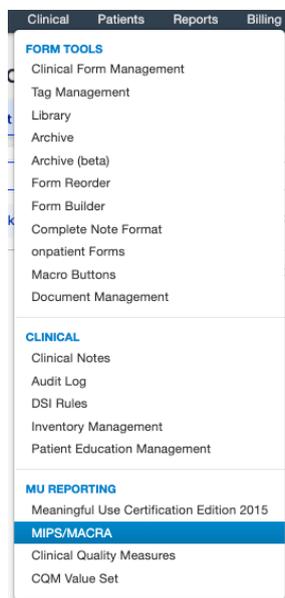
- The attestation reporting period is from the start of a year to the last day of the year (ex: 1/1/2025-12/31/25). Eligible Clinicians/Groups will **select a minimum 180-contiguous day reporting period** for the MIPS Promoting Interoperability performance category.
- Current year reporting impacts payments two years out (ex: 2023 reporting, will impact 2025 payment adjustments).
- The MIPS Dashboard can support multiple TIN reporting. For more information on setting up multiple TIN's, see [Adding Prescriber Information to an Office](#).

Updates for 2025 include:

- Reporting Period has been changed from 90 continuous days to 180 days. All MIPS reporting clinicians not eligible for a Promoting Interoperability re-weight must start their Promoting Interoperability performance category reporting period by July 4, 2025.
- Starting with the 2024 reporting period, customers must enable the DrChrono FHIR APIs. If your practice enabled these last year, no additional steps are necessary. If your practice has not enabled the FHIR API's, you must do so prior to starting your reporting period. Please see this article for the steps to complete the FHIR API setup. [Setting Up ConnectEHR for FHIR](#)

How to view the MIPS Dashboard in DrChrono

You can access your PI dashboard in your DrChrono account by going to [Clinical > MIPS/MACRA](#)



Select the date range, doctors, and offices (ex: 180-Day Period 2025).

Then click **Refresh**.

- The top portion of the dashboard contains information that the customer will use to provide to the Centers for Medicare/Medicaid Services (CMS).

MIPS Dashboard

DrChrono EHR v11.0
 CHPL Product Number: 15.02.04.2897.DRCH.11.03.1.220531
 CMS EHR Certification ID: 2025C11APSH7V4

Track your progress on all criteria with our MIPS Dashboard. No matter where you are in your reporting period, you can easily check on your progress and determine what actions need to be taken to meet the requirements.

180-Day Period 2025 Full Year 2025 90-Day Period 2024 90-Day Period 2023 Full Year 2022 Full Year 2021 Full Year 2020 Full Year 2019 Full Year 2018 Full Year 2017

Period: 01/01/2025 to 06/30/2025

Provider: Selected 0 providers Small, Underserved, or Rural Practice
 Refer to the [CMS reference](#) to determine if this applies to your practice.

Office: Selected 0 offices

Select a provider, an office, the date range and click on refresh above.

The table will populate with the data from your account. You can enter this data into your Healthmonix account.

Promoting Interoperability

Measures	MeasureID	Met Requirements	Gap	Score
e-Prescribing	PIEP_1	0 / 0	0	0 / 10
e-Prescribing Including Controlled Prescriptions	PIEP_1	0 / 0	0	0 / 10
Query of Prescription Drug Monitoring Program(PDMP)	PIEP_2	Not Met	Claim Met	0 / 10
Provide Patient Access	PIPEA_1	0 / 0	0	0 / 25
HIE Option 1: Send Health Information	PIHIE_1	0 / 0	0	0 / 15
HIE Option 1: Receive and Reconcile Health Information	PIHIE_4	0 / 0	0	0 / 15
HIE Option 2: Bi-Directional Exchange	PIHIE_5	Not Met	Claim Met	0 / 30
HIE Option 3: Enabling Exchange Under TEFCA	PIHIE_6	Not Met	Claim Met	0 / 30
Electronic Case Reporting	PLPHCDRR_3	Not Met	Claim Met	0 / 0
Immunization Registry Reporting	PLPHCDRR_1	Not Met	Claim Met	0 / 0
Clinical Data Registry Reporting	PLPHCDRR_5	Not Met	Claim Met	0 / 0
Public Health Registry Reporting	PLPHCDRR_4	Not Met	Claim Met	0 / 0
Syndromic Surveillance Reporting	PLPHCDRR_2	Not Met	Claim Met	0 / 0
High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guides	PLPPI_2	Not Met	Claim Met	0 / 0
Security Risk Analysis	PLPPI_1	Not Met	Claim Met	0 / 0

After logging into your Healthmonix MIPSpro account, select **Promoting Interoperability**.

Dashboard for DrChrono Test

Total MIPS Score **0 / 100**

Note: All category level scores are estimates, and depend on the accuracy of special statuses and category exemptions

2024 Details

Profile System

Patients

You have a Low Score

Avoid the Penalty - Your current MIPS score estimate would result in a 4% payment adjustment.

Purchase **Consulting Services or Account Management** to improve performance.

	Quality Enter clinical data to measure and report health care processes, outcomes, and patient care experiences.	<input type="button" value="Continue"/>	0 / 30
	Promoting Interoperability Using certified electronic health record technology (CEHRT), track PI objectives and measures.	<input type="button" value="Continue"/>	0 / 25
	Improvement Activities Assess and improve your care processes, patient engagement in care, and access to care.	<input type="button" value="Begin"/>	0 / 15
	Cost Track measures related to Medicare payments for the care provided to patients.	<input type="button" value="Purchase"/>	
	Complex Patient Bonus Enter your and related Complex Patient Bonus to better estimate your final score.	<input type="button" value="Begin"/>	0 / 10

Select **Data Entry** and then **Go To Page**.

Measures **Data Entry** Requirements Ready To Submit

With the "Measures" tab completed, you can now enter PI measure data.

Track Measures
Enter data for selected PI measures and view results [Go To Page](#)

Data Integration
Upload files and review process details [Go To Page](#)

Enter your date range for reporting and click **Update** next to each measure to enter the data. For each measure, you will need to enter the data or attest to the measure.

Track 2024 PI Measures

Enter data for each measure and review the results.

Measure ID	Measure	Performance	Points Earned/Total	Status	Data Entry
PI_PPHL1	Security Risk Analysis	0%	Incomplete	Required	Update
PI_PPHL2	High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guides	0%	Incomplete	Required	Update
PI_EP_1	e-Prescribing	0%	Incomplete	Required	Update
PI_EP_2	Query of Prescription Drug Monitoring Program (PDMP)	0%	Incomplete	Required	Update
PI_HE_1	Support Electronic Referral Loops by Sending Health Information	0%	Incomplete	Required	Update
PI_HE_4	Support Electronic Referral Loops by Receiving and Reconciling Health Information	0%	Incomplete	Required	Update
PI_PEA_1	Provide Patients Electronic Access to Their Health Information	0%	Incomplete	Required	Update
PI_PHQDR_1	Immunization Registry Reporting	0%	Incomplete	Required	Update
PI_PHQDR_3	Electronic Case Reporting	0%	Incomplete	Required	Update
PI_PHQDR_5	Clinical Data Registry Reporting	0%	0 / 5	Bonus	Update

Required Measures
⚠️ **Incomplete**

PI Points
0 / 100

PI Score
⚠️ PI score will not be awarded and the component cannot be submitted until all required measures are complete.

PI Reporting Date Range

The reporting date range for PI must be within the 2023 reporting year. The default range is 1/1/2023-12/31/2023, but any 90 day or greater range within the year is valid for 2023.

The selected date range will be applied to all PI measures. The data entered for these measures should only fall within the following date range.

PI Start Date:

PI End Date:

[Update](#)

[Checklist](#)

Quality Improvement Activities

For Quality and Improvement Activities scores, DrChrono has integrated with MIPSpro by Healthmonix to streamline reporting and expand the number of available quality measures.

For your 2025 MIPS Reporting submission, MIPSpro will pull relevant clinical data from your documentation and coding within your DrChrono account and provide a quality measure dashboard complete with insights and calculations for you to review and submit.

Within the MIPSpro dashboard, you can also attest to Improvement Activities that you completed during the 2025 MIPS Reporting year.

Please follow [this link](#) to get your MIPSpro account set up.

While DrChrono provides this report as a tool to assist with participation in MIPS, providers must still independently: (1) confirm that the underlying information was properly entered into DrChrono, (2) review all reporting information for its accuracy and applicability to their particular practice(s), and (3) retain documentation that supports the data reported for their participation in MIPS, as required by CMS retention policies.

