

Promoting Interoperability (PI) 2025 MIPS Dashboard Reporting

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[Getting started with MIPS \(6 steps\)](#)

[2025 MIPS Reporting Resources](#)

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

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](#)

Please note: DrChrono does not directly export MIPS data to CMS. A 3rd-party registry is needed. MIPS reporting is performed through our partner [Healthmonix](#)

Promoting Interoperability consists of several required objectives and an optional bonus.

The required measures based on 2025 Performance Year Promoting Interoperability Requirements:

- [e-Prescribing](#)
- [e-Prescribing Including Controlled Prescriptions](#)
- [Query of Prescription Drug Monitoring Program \(PDMP\)](#)
- [Provide Patient Access](#)
- [Electronic Case Reporting](#)
- [Immunization Registry Reporting](#)
- [Clinical Data Registry Reporting](#)
- [Public Health Registry Reporting](#)
- [Syndromic Surveillance Reporting](#)
- [\(2024\) High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience \(SAFER\) Guides](#)
- [Security Risk Analysis](#)

Health Information Exchange

- [HIE Option 1: Sending Health Information](#)
- [HIE Option 1: Receiving & Reconciling Health Information](#)

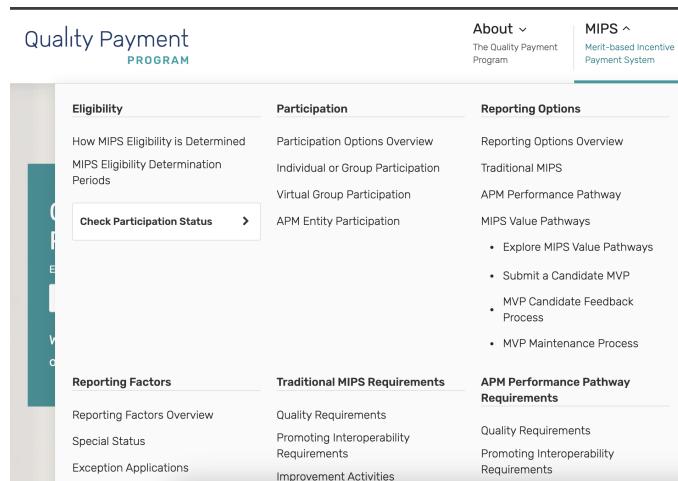
OR

- [HIE Option 2: Bi-Directional Exchange](#)

OR

- [HIE Option 3: Enabling Exchange Under the Trusted Exchange Framework and Common Agreement \(TEFCA\)](#)

Visit the [Quality Payment Program](#) (QPP) site for more information about MIPS eligibility, participation reporting options, and more.



The screenshot shows the Quality Payment Program website with the 'MIPS' tab selected. The main content area is divided into three columns: 'Eligibility', 'Participation', and 'Reporting Options'. The 'Eligibility' column includes links for 'How MIPS Eligibility is Determined' and 'MIPS Eligibility Determination Periods'. The 'Participation' column includes links for 'Participation Options Overview', 'Individual or Group Participation', 'Virtual Group Participation', and 'APM Entity Participation'. The 'Reporting Options' column includes links for 'Reporting Options Overview', 'Traditional MIPS', 'APM Performance Pathway', 'MIPS Value Pathways', and a bulleted list: 'Explore MIPS Value Pathways', 'Submit a Candidate MVP', 'MVP Candidate Feedback Process', and 'MVP Maintenance Process'. Below these columns are sections for 'Reporting Factors' and 'Traditional MIPS Requirements'.

Navigating the MIPS Dashboard

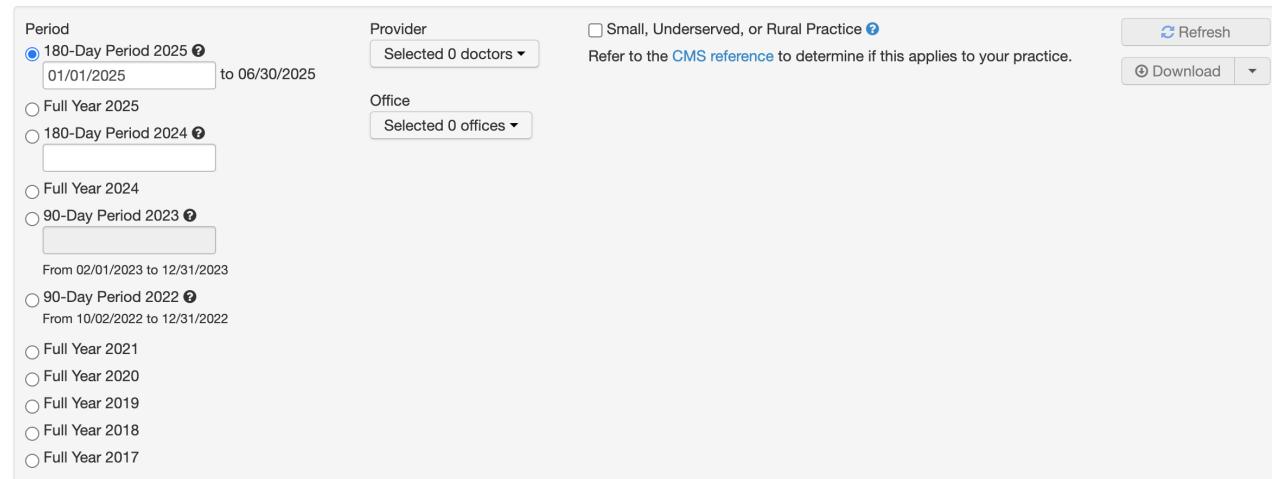
- You can access your PI dashboard in your DrChrono account by going to Clinical > MIPS/MACRA
- Select the date range, doctors, and offices (ex: 180-Day Period 2025).
- Then click **Refresh**.

MIPS Dashboard



The screenshot shows the DrChrono MIPS Dashboard header. It includes the text 'DrChrono EHR v11.0', 'CHPL Product Number: 15.02.04.2897.DRCH.11.03.1.220531', and 'CMS EHR Certification ID: 0015E0PHQ1JGR1Q'.

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.



The screenshot shows the search and filter section of the MIPS Dashboard. It includes a 'Period' section with a radio button for '180-Day Period 2025' (selected) and a date range from '01/01/2025' to '06/30/2025'. There are also radio buttons for 'Full Year 2025', '180-Day Period 2024', 'Full Year 2024', '90-Day Period 2023', '90-Day Period 2022', 'Full Year 2021', 'Full Year 2020', 'Full Year 2019', 'Full Year 2018', and 'Full Year 2017'. A 'Provider' section shows 'Selected 0 doctors' and a checkbox for 'Small, Underserved, or Rural Practice' (unchecked). A 'Refer to the CMS reference to determine if this applies to your practice.' link is provided. An 'Office' section shows 'Selected 0 offices'. On the right, there are 'Refresh' and 'Download' buttons.

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 ?	PI_EP_1	0 / 0	0	Required 0 / 10
e-Prescribing Including Controlled Prescriptions ?	PI_EP_1	0 / 0	0	Required 0 / 10
Query of Prescription Drug Monitoring Program(PDMP) ?	PI_EP_2	Not Met	Claim Met	Required 0 / 10
Provide Patient Access ?	PI_PEA_1	0 / 0	0	Required 0 / 25
HIE Option 1: Send Health Information ?	PI_HIE_1	0 / 0	0	Required 0 / 15
HIE Option 1: Receive and Reconcile Health Information ?	PI_HIE_4	0 / 0	0	Required 0 / 15
HIE Option 2: Bi-Directional Exchange ?	PI_HIE_5	Not Met	Claim Met	Required 0 / 30
HIE Option 3: Enabling Exchange Under TEFCA ?	PI_HIE_6	Not Met	Claim Met	Required 0 / 30
Electronic Case Reporting ?	PI_PHCDRR_3	Not Met	Claim Met	Required 0 / 0
Immunization Registry Reporting ?	PI_PHCDRR_1	Not Met	Claim Met	Required 0 / 0
Clinical Data Registry Reporting ?	PI_PHCDRR_5	Not Met	Claim Met	0 / 0
Public Health Registry Reporting ?	PI_PHCDRR_4	Not Met	Claim Met	0 / 0
Syndromic Surveillance Reporting ?	PI_PHCDRR_2	Not Met	Claim Met	0 / 0
High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guides ?	PI_PPHI_2	Not Met	Claim Met	Required 0 / 0
Security Risk Analysis ?	PI_PPHI_1	Not Met	Claim Met	Required 0 / 0

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.

Additional information to know...

- 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: 0015E0PHQ1JGR1Q

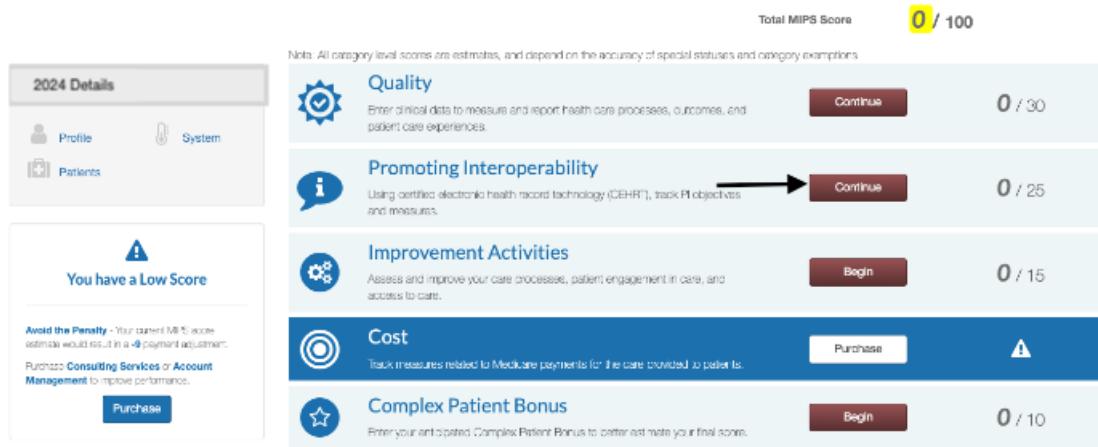
- The attestation reporting period is from the start of a year to the last day of the year (ex: 1/1/2025-

12/31/25).

- Current year reporting impacts payments two years out (ex: 2023 reporting, will impact 2025 payment adjustments).
- The MIPS Dashboard can support multiple 10 reporting, which is based on [Adding Prescriber Information to an Office](#)

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.

Category	Score
Quality	0 / 30
Promoting Interoperability	0 / 25
Improvement Activities	0 / 15
Cost	0 / 10
Complex Patient Bonus	0 / 10

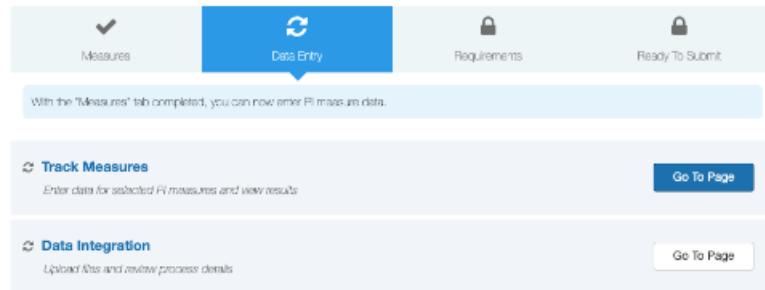
You have a Low Score

Avoid the Penalty - Your current MIPS score estimate would result in a -8 payment adjustment.

Purchase [Consulting Services](#) or [Account Management](#) to improve performance.

Purchase

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



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_PPHL_1	Security Risk Analysis	0%	Incomplete	Required	<button>Update</button>
PI_PPHL_2	High Priority Practice Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guide	0%	Incomplete	Required	<button>Update</button>
PI_EP_1	e-Prescribing	0%	Incomplete	Required	<button>Update</button>
PI_EP_2	Query of Prescription Drug Monitoring Program (PDMP)	0%	Incomplete	Required	<button>Update</button>
PI_HIE_1	Support Electronic Referral Loops by Sending Health Information	0%	Incomplete	Required	<button>Update</button>
PI_HIE_4	Support Electronic Referral Loops by Receiving and Reconciling Health Information	0%	Incomplete	Required	<button>Update</button>
PI_PEA_1	Provide Patients Electronic Access to Their Health Information	0%	Incomplete	Required	<button>Update</button>
PI_PHODR_1	Immunization Registry Reporting	0%	Incomplete	Required	<button>Update</button>
PI_PHODR_3	Electronic Case Reporting	0%	Incomplete	Required	<button>Update</button>
PI_PHODR_5	Clinical Data Registry Reporting	0%	0 / 5	Bonus	<button>Update</button>

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: Select

PI End Date: Select

Update

[Checklist](#)