

# MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

## 2024 Final Document versus 2025 Final Document

**Burden impact:** The changes in this guide don't reflect policies in the CY 2026 Physician Fee Scheduled (PFS) proposed rule for the Quality Payment Program. There is no impact to burden as a result of the changes reflected in this crosswalk.

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**Change #1:**

**Location:**

2024 – Page 1

2025 – Page 1

**Reason for Change:**

Alignment with current program year.

**2024 Final Document text:**

**Title:** 2024 MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

**2025 Final Document text:**

**Title:** 2025 MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

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**Change #2:**

**Location:**

2025 – Page 6

**Reason for Change:**

New addition regarding where Medicare Shared Savings Program ACOs can submit Promoting Interoperability Performance Category Hardship Exception applications.

**2025 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception Application Overview

**Content:** Where

- *Representatives of Medicare Shared Savings Program ACOs with a QPP Security Official or QPP Staff User role in the ACO Management System (ACO-MS) can access the QPP website using their ACO-MS Username and Password.*

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**Change #3:**

**Location:**

2024 – Page 6

2025 – Page 6

**Reason for Change:**

Updated dates for new performance year.

**2024 Final Document text:**

Section: MIPS Promoting Interoperability Performance Category Hardship Exception  
Application Overview

Content: When

- The Promoting Interoperability Hardship Exception application will close at 8 p.m. ET on *December 31, 2024*.

**2025 Final Document text:**

Section: MIPS Promoting Interoperability Performance Category Hardship Exception  
Application Overview

Content: When

- The MIPS Promoting Interoperability Hardship Exception application will close at 8 p.m. ET on *December 31, 2025*.

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**Change #4:**

**Location:**

2024 – Page 9

2025 – Page 9

**Reason for Change:**

Updated title of linked document to align with current performance year.

**2024 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception  
Information

**Content:** See *our 2024 MIPS Data Validation Criteria (ZIP, 2MB)* for details on the data  
validation process.

**2025 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception  
Information

**Content:** See *the 2025 MIPS Data Validation Criteria (ZIP, 2MB)* for details on the data  
validation process.

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**Change #5:****Location:**

2025 – Page 12

**Reason for Change:**

Updated to account for new policy related to the Medicare Shared Savings Program.

**2025 Final Document text:****Section:** MIPS Promoting Interoperability Performance Category Hardship Exception Information**Content:** Medicare Shared Savings Program.

Unless excluded, for performance years beginning on or after January 1, 2025, an ACO participant, ACO provider/supplier, and ACO professional that is a MIPS eligible clinician, Qualifying APM Participant (QP), or Partial Qualifying APM Participant (Partial QP) must:

- Report the MIPS Promoting Interoperability performance category measures and requirements to MIPS at the individual, group, virtual group, or APM Entity level (i.e., ACO reports on behalf of its clinicians); and
- Earn a performance category score for the MIPS Promoting Interoperability performance category at the individual, group, virtual group, or APM Entity level.

This requirement applies regardless of the Shared Savings Program track in which the ACO participant, ACO provider/supplier, or ACO professional participates. For more information, please refer to the [Frequently Asked Questions on the Shared Savings Program Requirement to Report Objectives and Measures for the MIPS Promoting Interoperability Performance Category](#).

**These ACO participants, ACO providers/suppliers, and ACO professionals can apply for hardship exceptions and qualify for automatic reweighting just like other MIPS eligible clinicians.**

**NOTE:** APM Entities, including ACOs, can't submit an application at the **APM Entity level**. You can complete the MIPS Promoting Interoperability Hardship Exception application as an individual or group. If approved, the MIPS eligible clinician will receive the APM Entity's score, but will be excluded from the calculation when we create an average Promoting Interoperability performance category score for the APM Entity.

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**Change #6****Location:**

2025 – Page 13

**Reason for Change:**

Updated to account for new policy related to the Medicare Shared Savings Program.

**2025 Final Document text:****Section:** MIPS Promoting Interoperability Performance Category Hardship Exception Information**Content:** Medicare Shared Savings Program (continued)

An ACO participant, ACO provider/supplier, or ACO professional is excluded from the Shared Savings Program's requirement to report the MIPS Promoting Interoperability performance category if they meet applicable requirements for an eligible clinician to be excluded or exempt from reporting the MIPS Promoting Interoperability performance

category as set forth in the regulations at 42 CFR part 414, subpart O. Applicable exclusions include:

- Not exceeding the low volume threshold as set forth in 42 CFR 414.1310(b)(1)(iii).
- An eligible clinician (as defined in 42 CFR 414.1305) who is not a MIPS eligible clinician as set forth in 42 CFR 414.1310(b)(2).
- Reweighting of the MIPS Promoting Interoperability performance category in accordance with 42 CFR 414.1380(c)(2)(i)(C) granted by CMS based on a significant hardship or other type of exception for a specific performance year. Bases for reweighting include being, as defined in 42 CFR 414.1305:
  - A non-patient facing clinician;
  - A hospital-based clinician;
  - An Ambulatory Surgery Center (ASC)-based clinician; or
  - In a small practice.

An ACO participant, ACO provider/supplier, or ACO professional cannot be excluded from the Shared Savings Program's requirement to report the MIPS Promoting Interoperability performance category solely on the basis of being a QP or Partial QP. If a QP or Partial QP meets an exclusion noted above, or is not an eligible clinician, the QP or Partial QP would not be required to report.

**NOTE:** An ACO participant, ACO provider/supplier, or ACO professional that meets any of these exclusions DOES NOT need to submit a MIPS Promoting Interoperability Hardship Exception application. ACOs, including their ACO participants, ACO providers/suppliers, and ACO professionals that are MIPS eligible clinicians, QPs, or Partial QPs should know their status before submitting a hardship exception application, which cannot be granted because they are already excluded from reporting the MIPS Promoting Interoperability performance category.

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**Change #7:**

**Location:**

2024 – Page 16

2025 – Page 18

**Reason for Change:**

Updated dates for new performance year.

**2024 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

**Content:** Step 2: Navigate to Your Exception Applications

- You can create and submit a new exception request until 8 p.m. ET on *December 31, 2024*.

**2025 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

**Content:** Step 2: Navigate to Exceptions Application

- You can create and submit a new exception request until 8 p.m. ET on *December 31, 2025*.

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**Change #8:**

**Location:**

2024 – Page 22

2025 – Page 24

**Reason for Change:**

Updated title of linked document to align with current performance year.

**2024 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

**Content:** See *our 2024* MIPS Data Validation Criteria (ZIP, 2MB) for details on the data validation process.

**2025 Final Document text:**

**Section:** MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

**Content:** See *the 2025* MIPS Data Validation Criteria (ZIP, 2MB) for details on the data validation process.

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**Change #9:**

**Location:**

2024 – Page 34

2025 – Page 36

**Reason for Change:**

Updated information to align with program changes.

**2024 Final Document text:**

**Section:** Appendices

**Content:** You're the following clinician type or have one of these Special Statuses:

- *Clinical Social Worker*
- Small Practice;
- Ambulatory Surgical Center (ASC)-based;
- Hospital-based; or
- Non-patient facing

**2025 Final Document text:**

**Section:** Appendices

**Content:** You have one of these Special Statuses:

- Small Practice;
- Ambulatory Surgical Center (ASC)-based;
- Hospital-based; or
- Non-patient facing

**Change #10:****Location:**

2024 – Page 35

2025 – Page 37

**Reason for Change:**

Updated performance year references to align with current performance year.

**2024 Final Document text:****Section:** Appendices**Content:** Appendix B. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2024 Performance Year: Individual Clinicians, Groups, and Virtual Groups

The table below illustrates the 2024 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting via traditional MIPS or MVPs.

**Important Reminders:**

- Individual Clinicians, Groups, Virtual Groups: If fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group, or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2026 payment year.

**2025 Final Document text:****Section:** Appendices**Content:** Appendix B. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2025 Performance Year: Individual Clinicians, Groups, and Virtual Groups

The table below illustrates the 2025 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting via traditional MIPS or MVPs.

**Important Reminders:**

- Individual Clinicians, Groups, Virtual Groups: If fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group, or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2027 payment year.

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**Change #11:**

**Location:**

2024 – Page 36 (repeated on page 37)

2025 – Page 38 (repeated on page 39)

**Reason for Change:**

Updated title and performance year references to align with current performance year.

**2024 Final Document text:**

**Section:** Appendices

**Content:** IPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2024 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

**2025 Final Document text:**

**Section:** Appendices

**Content:** MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2025 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

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**Change #12:**

**Location:**

2024 – Page 38

2025 – Page 40

**Reason for Change:**

Updated title and performance year references to align with current performance year.

**2023 Final Document text:**

**Section:** Appendices

**Content:** Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2024 Performance Year: Small Practices

The table below illustrates the 2024 performance category weights and reweighting policies that CMS will apply to small practices.

**2024 Final Document text:**

**Section:** Appendices

**Content:** Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2025 Performance Year: Small Practices

The table below illustrates the 2025 performance category weights and reweighting policies that CMS will apply to small practices.

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**Change #13:**

**Location:**

2024 – Page 39

2025 – Page 41

**Reason for Change:**

Updated title performance year reference to align with current performance year.

**2024 Final Document text:**

**Section:** Appendices

**Content:** Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2024 Performance Year: Small Practice

**2025 Final Document text:**

**Section:** Appendices

**Content:** Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2025 Performance Year: Small Practices

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**Change #14:**

**Location:**

2023 – Page 40

2024 – Page 42

**Reason for Change:**

Updated title performance year reference to align with current performance year.

**2024 Final Document text:**

**Section:** Appendices

**Content:** Appendix D. MIPS Performance Category Weight Redistribution Policies for APM Entities and the APP Finalized for the 2024 Performance Year

**2025 Final Document text:**

**Section:** Appendices

**Content:** Appendix D. MIPS Performance Category Weight Redistribution Policies for APM Entities and the APP Finalized for the 2025 Performance Year

According to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.), no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1314 (Expiration date: 2/28/2027). This information collection is the tool to request that MIPS Promoting Interoperability Hardship Exception applications allow you to request that your MIPS Promoting Interoperability performance category be reweighted to 0%. The time required to complete this information collection is estimated to average 0.25 hours per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is voluntary and all information collected will be kept private in accordance with regulations at 45 CFR 155.260, Privacy and Security of Personally Identifiable Information. Pursuant to this regulation, CMS may only use or disclose personally identifiable information to the extent that such information is necessary to carry out their statutory and regulatory mandated functions. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, MD 21244-1850. If you have questions or concerns regarding where to submit your documents, please contact QPP at [qpp@cms.hhs.gov](mailto:qpp@cms.hhs.gov).

Under the Privacy Act of 1974 (5 U.S.C. 552a) any personally identifying information obtained will be kept private to the extent of the law.