



## 2026 Merit-based Incentive Payment System (MIPS) Promoting Interoperability Performance Category: Office of the National Coordinator for Health Information Technology (ONC)-Authorized Certification Bodies (ACB) Surveillance Attestation (optional) Fact Sheet

### Overview

To ensure that certified health information technology (IT) meets the requirements of certification in a controlled testing environment and continues to do so when implemented and used in a production environment (“in-the-field”), the MIPS Promoting Interoperability performance category provides MIPS eligible clinicians with the option to engage in continuous surveillance with an ONC-ACB. ONC-ACBs must conduct surveillance to assess whether developers of certified health IT comply with other requirements (i.e., mandatory disclosure of all known material types of costs, proper use of the ONC Certified Health IT Certification and Design Mark) under the ONC Health IT Certification Program.

### What is ONC-ACB Surveillance?

A MIPS eligible clinician has the option to work in good faith with ONC-ACBs to provide continuous surveillance of their electronic health record (EHR) technology (CEHRT) to ensure that the CEHRT meets ONC certification requirements, and assess whether developers of certified health IT comply with other requirements (i.e., mandatory disclosure of all known material types of costs, proper use of the ONC Certified Health IT Certification and Design Mark) for the MIPS Promoting Interoperability performance category.

### Is an Attestation Required?

No, a MIPS eligible clinician who reports on the MIPS Promoting Interoperability performance category has **the option** to attest to the ONC-ACB Surveillance attestation statement.

If reporting as a group, virtual group, or Alternative Payment Model (APM) Entity, the response for the ONC-ACB Surveillance attestation made by the group, virtual group, or APM Entity applies to all MIPS eligible clinicians within the group, virtual group, or APM Entity.

## What Actions Are Required?

If choosing to attest to the ONC-ACB Surveillance attestation, reporting a **“Yes”** response won’t affect the total number of points earned for the MIPS Promoting Interoperability performance category. Attesting to the ONC-ACB Surveillance attestation statement is not required to satisfy the requirements to earn a MIPS Promoting Interoperability performance category score.

## What Is Being Attested to?

A MIPS eligible clinician is attesting to the following statements:

(1) Acknowledgement of the option to cooperate in good faith with ONC-ACB surveillance of his or her health information technology certified under the ONC Health IT Certification Program if a request to assist in ONC-ACB surveillance is received.

(2) If requested, cooperation in good faith with ONC-ACB surveillance of the MIPS eligible clinician’s health information technology certified under the ONC Health IT Certification Program as authorized by 45 CFR part 170, subpart E, to the extent that such technology meet, or can be used to meet, the definition of CEHRT, including by permitting timely access to such technology and demonstrating its capabilities as implemented and used by the MIPS eligible clinician in the field.

## Does a MIPS Eligible Clinician Need to Provide Any Documentation to Attest?

A MIPS eligible clinician doesn’t have to provide any documentation showing that they’ll act in good faith to cooperate with the ONC-ACB surveillance activities.

## What Are the Other MIPS Promoting Interoperability Requirements?

A MIPS eligible clinician must use technology certified to the ONC Certification Criteria for Health IT ([45 CFR 170.315](#)) necessary to meet the CEHRT definition ([42 CFR 414.1305\(2\)](#)), and meet the following requirements to earn a score greater than zero for the MIPS Promoting Interoperability performance category:

- Provide their CMS EHR Certification ID from the [Certified Health IT Product List \(CHPL\)](#);
- Submit data for a minimum of 180 consecutive days within the calendar year;
- Submit 2 “Yes” attestations for completing both components of the Security Risk Analysis measure during the calendar year in which the performance period occurs;
- Submit a “Yes” attestation for the High Priority Practices Safety Assurance Factors for EHR Resilience (SAFER) Guide measure confirming the completion of an annual self-assessment using the 2025 High Priority Practices SAFER Guide during the calendar year in which the performance period occurs;
- Submit a “Yes” response for the ONC Direct Review attestation;
- Submit a “Yes” response for the Actions to Limit or Restrict Compatibility or Interoperability of CEHRT attestation;
- Submit their complete count of numerators (report at least a “1” for all required measures with a numerator) and denominators or “Yes” response (for attestation measures) for all required measures (or claim an exclusion, if available and applicable); and
- Submit their level of active engagement for the required measures under the Public Health and Clinical Data Exchange objective.

## Need Assistance?

Contact the Quality Payment Program (QPP) Service Center by emailing [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov), creating a [QPP Service Center ticket](#), or calling 1-866-288-8292 (Monday through Friday 8 a.m. – 8 p.m. ET). Please consider calling during non-peak hours, before 10 a.m. and after 2 p.m. ET. People who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Visit the [Quality Payment Program website](#) for other [help and support](#) information, to learn more about [MIPS](#), and to check out the resources available in the [Quality Payment Program Resource Library](#).

## Additional Resources

The [Quality Payment Program Resource Library](#) houses fact sheets, specialty guides, technical guides, user guides, helpful videos, and more.

## Version History

If we need to update this document, changes will be identified here.

Date	Change Description
12/15/2025	Original version