



OfficeEMR 2021 2015 Edition Cures Update Certified Health IT Costs

I. Certified EHR Vendor & Product Information

Vendor/Developer Organization Name:	iSALUS Healthcare
Product Name and Version:	OfficeEMR 2021
Product Certification Date:	06/06/2022
Unique Certification Number:	15.04.04.2629.Offi.21.02.1.220606
Modules Tested:	2015 Edition Cures Update: 170.315 (a)(1-5, 9, 12, 14); (b)(1-3, 10); (d)(1-9, 12-13); (e)(1, 3); (f)(1, 2, 5); (g)(2-7, 9-10); (h)(1)
CQM's Certified:	None
Relied Upon Software to Demonstrate Compliance with Certification Criteria:	<ul style="list-style-type: none">• EBSCOHealth DynaMed Plus• MyMedicalLocker 2019• NLM AccessGUDID API• Secure Exchange Solutions SES Direct• Secure Exchange Solutions SES HISP• WodCrypt DLL

II. Disclaimer

This EHR is 2015 Edition compliant to the criteria listed below and has been certified by an ONC Accredited Certifying Body (“ONC-ACB”) in accordance with the applicable certification criteria adopted by the Secretary of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services.

III. Costs Disclosure

170.315(a)(1): Computer Provider Order Entry (CPOE) - Medications

Allows a user to electronically record, change, and access a patient's medication orders.

- No additional costs.

170.315(a)(2): Computerized Provider Order Entry (CPOE) - Laboratory

Allows a user to electronically record, change, and access a patient's laboratory orders.

- No additional costs.



170.315(a)(3): Computerized Provider Order Entry (CPOE) - Diagnostic Imaging

Allows a user to electronically record, change, and access a patient's diagnostic imaging orders.

- **No additional costs.**

170.315(a)(4): Drug-Drug, Drug-Allergy Interaction Checks for CPOE

Allows for the indication and intervention of drug-drug and drug-allergy contraindications based on a patient's medication list and medication allergy list when placing orders, including the ability to manage the severity level of the interventions.

- **No additional costs.**

170.315(a)(5): Demographics

Allows a user to electronically record, change, and access a patient's demographic data, including race, ethnicity, preferred language, sex, sexual orientation, gender identity, and date of birth in accordance with defined standards.

- **No additional costs.**

170.315(a)(9): Clinical Decision Support (CDS)

Enables CDS interventions based on specified patient attributes.

- **In the event the practice wishes to optionally use InfoButton generated CDS interventions, the practice will need to purchase a subscription to EBSCOHealth's DynamedPlus CDS tools.**

170.315(a)(12): Family Health History

Allows a user to record, change, and access a patient's family health history in accordance with specified familial concepts or expressions.

- **No additional costs.**

170.315(a)(14): Implantable Device List

Allows a user to manage a patient's implantable devices, specifically through the recording of Unique Device Identifiers and descriptions and identifiers of such implantable devices, as well as the ability to retrieve relevant information from the Global Unique Device Identification Database ("GUDID").

- **No additional costs.**



170.315(b)(1): Transitions of Care

Allows a user to send, receive, validate, and display transitions of care and/or referral summaries in accordance with the HL7 Consolidated Clinical Document Architecture ("C-CDA") 2.1 standards.

- In order to send and receive DIRECT communications to meet the requirements of this module, providers must obtain a DIRECT E-mail address from Secure Exchange Solutions (SES). SES charges a flat yearly fee to host and maintain each DIRECT E-mail address the practice purchases.

170.315(b)(2): Clinical Information Reconciliation and Incorporation

Allows a user to complete clinical information reconciliation to validate and correctly match the correct patient to the received transition of care and/or referral summary.

- No additional costs.

170.315(b)(3): Electronic Prescribing

Allows a user to perform electronic prescribing transactions in accordance with the NCPDP SCRIPT Standard Implementation Guide, Version 10.6.

- Prescribers who wish to send Controlled Substance prescriptions electronically will need to complete an EPCS identity proofing process and setup an EPCS-compliant multi-factor authentication through our partner ID.me. (<https://officeemr.knowledgeowl.com/help/idme-identity-proofing-epcs-credentialing>) Prescribers pay a monthly fee to support their ID proofing and EPCS multi-factor authentication services.

170.315(b)(10): Electronic Health Information Export

Allows a user to create a single patient and practice level electronic health information export.

- No additional costs for using our standard patient and practice electronic health information export. Customers who wish to deviate from our standard export file format or delivery methods (<https://officeemr.knowledgeowl.com/help/ehi-export>) may be subject to additional 1-time export fees.

170.315(d)(1): Authentication, Access Control, Authorization

Allows for the verification of user access against unique identifiers for authentication and authorization of access.

- No additional costs.

170.315(d)(2): Auditable Events and Tamper-Resistance

Allows for the recording of actions, audit log status, and encryption status of electronic health information. Audit log actions cannot be overwritten, changed, or deleted by the technology, and the technology can detect when audit logs have been altered.

- No additional costs.



170.315(d)(3): Audit Report(s)

Allows a user to create an audit report based on specific time periods or entries.

- **No additional costs.**

170.315(d)(4): Amendments

Allows a user to select the record affected by a patient's request for amendment and amend or deny amendments to those records.

- **No additional costs.**

170.315(d)(5): Automatic Access Time-out

Automatically stops user access to health information after predetermined amounts of time, and requires user authentication to resume or regain access.

- **No additional costs.**

170.315(d)(6): Emergency Access

Allows an assigned set of users to access electronic health information during an emergency.

- **No additional costs.**

170.315(d)(7): End-User Device Encryption

Ensures that technology is designed not to locally store electronic health information on end-user devices.

- **No additional costs.**

170.315(d)(8): Integrity

Allows for the creation of a message digest in accordance with SHA-2 standard and the verification upon receipt of electronically exchanged health information that such information has not been altered.

- **No additional costs.**

170.315(d)(9): Trusted Connection

Allows for the establishment of trusted connections, encryption, and integrity at the message level and the transport level.

- **No additional costs.**

170.315(d)(12): Encrypt Authentication Credentials

Allows for the encryption of authentication credentials.

- **No additional costs.**

170.315(d)(13): Multi-factor Authentication

Allows for multi-factor authentication to access Health IT Module.

- **No additional costs.**



170.315(e)(1): View, Download, and Transmit to 3rd Party

Allows for a user and/or their authorized representative to view, download, and transmit their electronic health information, including but not limited to the common clinical data set, provider name/office contact, lab test reports, and diagnostic image reports, to a third party in accordance with specified standards. Also allows for users to select data associated with specific dates or identified date ranges, and access a history log of actions related to these features.

- **No additional costs.**

170.315(e)(3): Patient Health Information Capture

Allows for a user to identify, record, and access information directly and electronically shared by a patient or their authorized representative, and reference and link to patient health information documents.

- **No additional costs.**

170.315(f)(1): Transmission to Immunization Registries

Allows for the creation of immunization information for electronic transmission and enables a user to request, access, display evaluated patient immunization history and the immunization forecast from an immunization registry in accordance with the HL7 immunization standard.

- **Standard interfaces are developed as part of the OfficeEMR service at no additional charge. Custom Integrations are not included in the OfficeEMR Service Fee and are subject to additional fees.**

170.315(f)(2): Transmission to Public Health Agencies - Syndromic Surveillance

Allows for the creation of syndromic-based public health surveillance information for electronic transmission in accordance with the HL7 PHIN Messaging Guide for Syndromic Surveillance standards.

- **Standard interfaces are developed as part of the OfficeEMR service at no additional charge. Custom Integrations are not included in the OfficeEMR Service Fee and are subject to additional fees.**

170.315(f)(5): Transmission to Public Health Agencies – Electronic Case Reporting (Cures Update)

Allows for the consumption of trigger codes; matching of patient encounters to trigger codes; and the creation of eICR CCDA electronic case reports based on triggered data for electronic transmission.

- **Standard interfaces are developed as part of the OfficeEMR service at no additional charge. Custom Integrations are not included in the OfficeEMR Service Fee and are subject to additional fees.**



170.315(g)(2): Automated Measure Calculation

Allows for the recording of numerators and denominators, and the creation of reports including the numerator, denominator, and resulting percentage associated with each applicable measure.

- **No additional costs.**

170.315(g)(3): Safety-Enhanced Design

Defines the user-centered design processes that must be applied to certain certified capabilities within the product's scope.

- **No additional costs.**

170.315(g)(4): Quality Management System

Requires the use of a quality management system (QSM) in the development, testing, implementation, and maintenance of certified capabilities within the product's scope.

- **No additional costs.**

170.315(g)(5): Accessibility-Centered Design

Requires the use of a Health IT accessibility-centered design standard or law in the development, testing, implementation, and maintenance of certified capabilities within the product's scope.

- **No additional costs.**

170.315(g)(6): Consolidated CDA Creation (Cures Update)

Outlines the technical and performance outcomes that must be demonstrated related to Consolidated Clinical Data Architecture (CDA) creation, including reference C-CDA match, document-template conformance, vocabulary conformance, and completeness verification.

- **No additional costs.**

170.315(g)(7): Application Access - Patient Selection

Outlines the technical outcomes and conditions that must be met through the demonstration of an application programming interface for patient selection, including functional requirements and documentation.

- **Third-party developers may incur a one-time setup fee plus monthly, recurring fees based on transaction volume.**

170.315(g)(9): Application Access - All Data Request (Cures Update)

Outlines the technical outcomes and conditions that must be met through the demonstration of an application programming interface for all data requests, including functional requirements and documentation.

- **Third-party developers may incur a one-time setup fee plus monthly, recurring fees based on transaction volume.**



170.315(g)(10): Standardized API for Patient and Population Services (Cures Update)

Outlines the technical outcomes and conditions that must be met through the demonstration of a standardized application programming interface for patient and population services.

- Customers may incur an annual one-time setup/maintenance fee. Third-party developers may incur a one-time setup fee plus monthly, recurring fees based on transaction volume.

170.315(h)(1): Direct Project

Enables the sending and receiving of health information in accordance with the specified ONC standards.

- In order to send and receive DIRECT communications, providers must obtain a DIRECT E-mail address from Secure Exchange Solutions (SES). SES charges a flat yearly fee to host and maintain each DIRECT E-mail address the practice purchases.