MANDATORY DISCLOSURES

June 2024

CONTENTS

1. Introduction

This document provides details about the eClinicalWorks® (eCW) software versions certified under the ONC Health IT Certification Program, along with a description of the certification criteria that eClinicalWorks certifies to and any additional types of costs or fees that a user may be required to pay to implement or use capabilities within the scope of certified criteria, in compliance with requirements set forth in 45 CFR 170.523(k)(1).

All eClinicalWorks certified software versions are certified to each criterion listed in this document, unless otherwise noted. eClinicalWorks provides functionality, features, and modules that fall outside the scope of certification functionality described in this document, which may require additional licenses, agreements, and fees.

2. EHR Contracts and Services

2.1. Types of EHR Contracts

2.1.1. License-Based

This type of eClinicalWorks Electronic Health Records (EHR) contract requires a one-time software license fee with a supplemental monthly support and maintenance fee. Customers may elect to have their data hosted by eClinicalWorks, which will result in an additional monthly fee per *Full-Time Equivalent* (FTE) implementation fees. Travel and airfare costs are billed separately. Support and maintenance may require a one-time setup cost and/or recurring cost.

2.1.2. Cloud-Based

This type of eClinicalWorks EHR contract applies when a customer chooses eClinicalWorks to host their data and requires a monthly fee per provider per month, or per *FTE* with the cost of hosting included in the monthly fee. Implementation fees, travel, and airfare costs are billed separately.

2.1.3. RCM with Cloud

This type of eClinicalWorks EHR contract applies when the Cloud-Based solution is chosen along with the addition of *Revenue Cycle Management* (RCM™) services.

In addition to the cloud-based fees, RCM includes one or more of:

- An additional monthly fee per *FTE* or provider.
- An additional monthly fee based upon claim count.

- A percentage of the total collected revenue, plus additional, optional fees, such as fees for patient statements. Implementation fees, travel, and airfare costs are billed separately. Support and maintenance may require a one-time setup cost and/or recurring cost.

2.2. Available Modalities

2.2.1. eClinicalWorks Application

The eClinicalWorks software application is available on the Google™ Chrome™ browser (hereafter Web [e.g., V12e]), which eClinicalWorks recommends be accessed via the Web app (i.e. plug-in)*. The software is designed for use with an eClinicalWorks-supported Microsoft® Windows® operating system. Please refer to hardware specifications available on the Product Documentation section of the my.eclinicalworks.com Customer Portal for current details.

While additional services or modalities may perform some certified functionalities, the full scope of certified functionality is only available on the main eClinicalWorks application.

2.2.2. eClinicalTouch

eClinicalTouch® is an app that leverages the Apple® iPad® and works in conjunction with the main application by combining the most-used features that a doctor, mid-level, nurse, etc., would use to complete documentation within a patient's Progress Notes. eClinicalTouch performs some certified functionalities, as specified in this document.

An iPad running eClinicalWorks-supported iPadOS® is required to use the eClinicalTouch app.

Use of eClinicalTouch requires a recurring cost per provider per month.

3. Certified EHR Software Versions

This Health IT Module is compliant with the ONC Certification Criteria for Health IT and has been certified by an 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.

ONC certification applies to the most recent iteration of the certified versions listed in this section. Customers should apply any available updates to the certified version in use to ensure access to the full scope of certified functionality.

*Version 11.52.305C is also available via a desktop executable (i.e. EXE).

3.1. Version 11.52.305C

Date Certified: December 12, 2022

ONC-ACB Certification ID: 15.04.04.2883.eCli.11.05.1.221212

Certificate of Compliance: Refer to the Certificate of Compliance attached in Appendix B

Certified Health IT Product Listing: https://chpl.healthit.gov/#/listing/11062

3.2. Version 12.0.1

Date Certified: November 16, 2022

ONC-ACB Certification ID: 15.04.04.2883.eCli.12.06.1.221116

Certificate of Compliance: Refer to the Certificate of Compliance attached in Appendix B

Certified Health IT Product Listing: https://chpl.healthit.gov/#/listing/11021

3.3. Version 12.0.2

Date Certified: June 13, 2023

ONC-ACB Certification ID: 15.04.04.2883.eCli.12.07.1.230613

Certificate of Compliance: Refer to the Certificate of Compliance attached in Appendix B

Certified Health IT Product Listing: https://chpl.healthit.gov/#/listing/11299

3.4. Version 12.0.3

Date Certified: March 22, 2024

ONC-ACB Certification ID: 15.04.04.2883.eCli.12.08.1.240322

Certificate of Compliance: Refer to the Certificate of Compliance attached in Appendix B

Certified Health IT Product Listing: https://chpl.healthit.gov/#/listing/11456

4. Certification Criteria

§170.315(a)(1) - Computerized Provider Order Entry of Medication Orders

Description of Capability:

Enables a user to record, change, and access medication orders.

Additional Details:

It is recommended that both the Medi-Span® and Multum® drug databases are updated to the latest version when available.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None

§170.315(a)(2) - Computerized Provider Order Entry of Laboratory Orders

Description of Capability:

Enables a user to record, change, and access laboratory orders.

Additional Details:

This functionality is also available on eClinicalTouch.

Costs and Fees:

A third-party vendor is not required to use this capability. However, if the practice elects to use an HL7 lab interface to transmit a laboratory order, there may be costs associated with the interface. A statement of work is required for an interface to be set up.

§170.315(a)(3) - Computerized Provider Order Entry of Diagnostic Imaging Orders

Description of Capability:

Enables a user to record, change, and access diagnostic imaging (DI) orders.

Additional Details:

This functionality is also available on eClinicalTouch.

Costs and Fees:

A third-party vendor is not required to use this capability. However, if the practice elects to use an HL7 lab interface to transmit a diagnostic imaging order, there may be costs associated with the interface. A statement of work is required for an interface to be set up.

§170.315(a)(4) - Drug-Drug, Drug-Allergy Interaction Checks

Description of Capability:

Before a medication order is completed and acted upon during the Computerized Provider Order Entry (CPOE), interventions must automatically indicate to a user the *drug-drug* and *drug-allergy* contraindications based on a patient's medication list and medication allergy list. In addition, the user must be able to adjust the severity level of the interventions and be able to adjust the severities to a limited set of users, or as an administrative function.

Additional Details:

It is recommended that both the Medi-Span and Multum drug databases are updated to the latest version when available.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(a)(5) - Demographics

Description of Capability:

Enables a user to record, change, and access patient demographic data, including race, ethnicity, preferred language, sex, sexual orientation, gender identity, and date of birth.

Additional Details:

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(a)(9) - Clinical Decision Support

Description of Capability:

Enables the user to activate both the *Evidence-Based* and *Therapeutic Intervention CDS interactions*. Evidence-Based interventions are based on the patient's Problem List, Medication List, Medication Allergy List, Demographic (date of birth or sex), Laboratory Tests Ordered, and Vital Signs. Therapeutic Interventions are based on the patient's Problem List, Medication List, and one demographic (date of birth or sex).

Additional Details:

Data availability is based on the third-party vendor's web services. If these services are down, eClinicalWorks users may experience issues. The functionality and associated security settings must be configured in the main application.

This functionality is also available on eClinicalTouch.

Costs and Fees:

The Evidence-Based CDS Intervention capability does not require a third-party vendor or additional fees. The Therapeutic-Based CDS Intervention capability is available through the third-party vendor, DynaMed®. DynaMed requires a separate contract and additional fees for the use of this capability.

§170.315(a)(12) - Family Health History

Description of Capability:

Enables a user to record, change, and access a patient's family health history in accordance with the familial concepts or expressions included in, at a minimum, the version of the standard in §170.207(a)(4).

Additional Details:

This functionality is also available on eClinicalTouch, except for the creation and mapping of structured data.

Costs and Fees:

A third-party vendor is not required to use this capability. However, if the practice elects to use Intelligent Medical Objects (IMO®), there will be an additional cost.

§170.315(a)(14) - Implantable Device List

Description of Capability:

Enables a user to record, parse, and display implant information based on a *Unique Device Identifier.*

Additional Details:

Requires a contractual agreement with the Unified Medical Language System (UMLS), a database of medical code sets maintained by the United States National Library of Medicine (UMLS).

Data availability is based on the third-party vendor's web services. If these services are down, eClinicalWorks users may experience issues. The UMLS website will provide notification to end-users if there are any outages.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(a)(15) - Social, Psychological, and Behavioral Data

Description of Capability:

Enables a user to record, change, and access patient social, psychological, and behavioral data.

Additional Details:

This functionality is also available on eClinicalTouch, except for the creation and mapping of structured data.

Costs and Fees:

None.

§170.315(b)(1) - Transitions of Care

Description of Capability:

Enables a user to send and receive transitions of care via edge protocol, validate and display C-CDAs, and create transition of care/referral summaries.

Additional Details:

This functionality enables providers to connect to non-eCW providers on a Health Information Service Provider (HISP) that is part of the Accredited Trust Bundle. eClinicalWorks uses eClinicalDirect™, which is EHNAC privacy and security-accredited and Direct Trust HISP-accredited.

For outbound XDR messages, eClinicalWorks supports both full metadata and limited metadata, but the user must be configured to one in a single point in time.

eClinicalWorks P2P® is used for eClinicalWorks providers to connect directly with other eClinicalWorks providers. Providers can register for P2P using the eClinicalWorks EHR. To use the eClinicalDirect Plus service, the provider must create an individual eClinicalWorks Direct Plus account and complete the onboarding process.

The maximum allowable combined attachment size for C-CDA, and other documents in electronic referrals/records is 10 MB.

Costs and Fees:

eClinicalWorks P2P does not have any costs or fees. eClinicalDirect Plus requires a cost per provider per year, or per organization per year.

§170.315(b)(2) - Clinical Information Reconciliation and Incorporation

Description of Capability:

Enables a user to match an incoming Continuity of Care Document or referral note to the applicable patient, and reconcile and incorporate the Medications, Medication Allergies, and Problem List from the listed document templates based on criterion standards.

Additional Details:

Refer to §170.315(b)(1) - Transitions of Care for additional details.

Medications and medication allergies received as RxNorm must be matched manually to a medication within the Medi-Span or Multum databases as NDC, if not matched automatically. Problem Lists received as SNOMED® must be associated to an ICD-10-CM code using the mapping tool.

If a problem is received as an ICD-9, it cannot be imported into the patient's Progress Notes or Problem List.

Costs and Fees:

Refer to §170.315(b)(1) - Transitions of Care costs and fees.

§170.315(b)(3) - Electronic Prescribing

Description of Capability:

Enables a user to perform the following prescription-related electronic transactions: new prescriptions (NewRx), change prescriptions (RxChangeRequest, RxChangeResponse), cancel prescriptions (CancelRx, CancelRxResponse), renew prescriptions (RxRenewalRequest, RxRenewalResponse), receive fill status notifications (RxFill), request and receive medication history (RxHistoryRequest, RxHistoryResponse), relay acceptance of a transaction back to sender (Status), respond if there is a problem with a transaction (Error), respond that a transaction requesting a return receipt has been received (Verify), and send fill status notifications (RxFillIndicatorChange).

Additional Details:

Users must have a connection to the Surescripts® network as well as the eClinicalWorks eRx Cloud. Prescriptions are sent one at a time.

This functionality is also available on eClinicalTouch.

Costs and Fees:

Costs may or may not be included in the initial EHR contract. If not, an additional cost per provider per year is added. If *Electronic Prescribing of Controlled Substances* (EPCS) is required, an additional cost per provider per year is added. Providers must enter into an agreement with Surescripts and receive an SPI in order to begin e-prescribing.

§170.315(b)(10) - Electronic Health Information Export

Description of Capability:

Enables a defined set of users to create an export of all Electronic Health Information (EHI) stored in the eClinicalWorks EHR for a single patient, or to initiate a request for the export of all EHI stored in the eClinicalWorks EHR for an entire patient population.

Additional Details:

Single Patient EHI Export:

A single patient EHI export is downloaded to a designated user's local computer in comma-separated values (csv) format via the eClinicalWorks EHI Export Utility, available on the Microsoft app store. Documentation of the export format is available at ehi.eclinicalworks.com. Prior to generating an export, the EHI Export Utility app must be installed on a computer connected to the customer's EHR. For more information, refer to the EHI Export User Guide, available on the my.eclinicalworks.com Customer Portal.

RCM customers must perform a separate export for RCM data. Each export will download to the user's computer as a separate zip file.

Patient Population EHI Export:

A patient population EHI export must be initiated by opening a support case on the my.eclinicalworks.com Customer Portal. Documentation of the export formats is available at ehi.eclinicalworks.com. Because it is part of a database backup, the patient population EHI export includes content in addition to the EHI defined in the export format documentation.

Note: Additional methods of patient data export or extraction beyond certified functionality are also available, including self-service single and multi-patient C-CDA export (no cost) and focused data extraction in a human readable format (fees apply). Open a support case on the my.eclinicalworks.com Customer Portal for more information.

Costs and Fees:

None.

§170.315(c)(1-3) - Clinical Quality Measures - Record and Export, Import and Calculate, and Report

Description of Capability:

Enables a user to import a QRDA I data file in accordance with the standard specified at § 170.205(h)(2) for one or multiple patients and use the data to calculate each clinical quality measure. A user must be able to execute this capability at any time the user chooses, and without subsequent developer assistance. The criterion also requires that a user is able to create a QRDA III (aggregate) data file for submission of quality reporting data.

Additional Details:

Users are required to request computation and the data should be available on the MIPS Dashboard prior to requesting QRDA III file generation.

Files are processed/generated after hours through a scheduled job. The scheduled job takes 24-48 hours to process the files. This time may increase due to the quantity of providers and quantity of patients per provider.

The export QRDA feature can only process 250 provider records per batch to ensure optimal system performance. The QRDA I export files, which contain clinical data, are downloaded by the user, and saved on the user's local drive.

Auto-Practice Upgrade (APU) connectivity and an internet connection is required for a successful extraction to occur.

If a re-computation of the data is performed after a QRDA III file generation request is made, that file becomes invalid, and a new request must be placed.

MIPS Individual is the program supported for QRDA III.

Costs and Fees:

A contractual agreement is required, as well as acceptance of terms and conditions. Generating a QRDA file required for participation in payer quality initiatives/programs may require one-time file generation costs, multi-file generation costs, and/or consulting fees.

Cost is on a per provider basis for individual reporting. Any dummy provider activated for this feature will also incur a cost.

§170.315(d)(1) - Authentication, Access Control, and Authorization

Description of Capability:

Limits access to patient EHI to users who have valid credentials and only enables credentialed users to access the types of information permitted.

Additional Details:

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

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

Description of Capability:

This criterion requires that by default, actions related to health information are recorded, such as who has accessed a patient's information, and when, where, and how that access occurred. This capability (coupled with other Privacy and Security criteria such as *Audit Reports* and *Auditing Actions on Health Information*) enables a practice to review audit logs to regularly monitor access to patient information and detect unauthorized access. This criterion also confirms that health IT can prevent such audit logs from being changed, overwritten, or deleted.

Additional Details:

For tamper-resistance, eClinicalWorks does not allow the deletion of records retained in the audit log at a minimum, and in some instances does not allow the updating of these logs.

This functionality is also partially available on eClinicalTouch, where logging is performed but not viewable on the iPad.

Costs and Fees:

None.

§170.315(d)(3) - Audit Reports

Description of Capability:

Audit reports enable a user to create reports of events recorded in audit trails and audit logs. For more information, refer to §170.315(d)(2) - Auditable Events and Tamper-Resistance.

Additional Details:

Some of the reports used to meet this requirement are created from logs that are parsed nightly but can be parsed on-demand if needed.

Costs and Fees:

None.

§170.315(d)(4) - Amendments

Description of Capability:

Enables a user to select the record affected by a patient's request for amendment, and the ability to accept or deny amendments.

Additional Details:

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(5) - Automatic Access Time-Out

Description of Capability:

Enables an automatic stop for users to access health information after a predetermined amount of inactivity and requires authentication in order to resume or regain access.

Additional Details:

Auto time-out settings must be configured by the practice.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(6) - Emergency Access

Description of Capability:

Enables administrators to permit an identified set of users to access EHI during an emergency.

Additional Details:

When setting up a user account, an administrator can select the Emergency Access User check box to set a time limit for the user's access to the application. This facilitates application access in emergency situations that will expire after a specified time period.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(7) - End-user Device Encryption

Description of Capability:

Technology designed to prevent health information from being locally stored on end-user devices after use of the technology on the devices stops.

Additional Details:

The programmed storage of information is ceased upon termination of sessions.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(8) - Integrity

Description of Capability:

Enables the ability to create a message digest and verify upon receipt of electronically exchanged health information that such information has not been altered according to the specified standard.

Additional Details:

SSL/HTTPS configuration for any services directly hosted by the customer is the responsibility of that customer.

Costs and Fees:

None.

§170.315(d)(9) - Trusted Connection

Description of Capability:

Enables the ability to create a trusted connection according to specified standards.

Additional Details:

SSL/HTTPS configuration for any services directly hosted by the customer is the responsibility of that customer.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(11) - Accounting of Disclosures

Description of Capability:

This criterion ensures that health IT can record disclosures made for treatment, payment, and health care operations in accordance with the specified standards.

Additional Details:

None.

Costs and Fees:

None.

§170.315(d)(12) - Encrypt Authentication Credentials

Description of Capability:

The Encrypt Authentication Credentials criterion serves to identify whether certified health IT supports encrypting stored authentication credentials within the database of the certified health IT module, in accordance with specified industry standards.

Additional Details:

All health IT developers of a certified health IT product are required to attest either “yes” or “no” in compliance with this criterion. eClinicalWorks attested “yes” to the (d)(12) Encrypt Authentication Credentials criterion in accordance with the standards adopted in 170.210(a)(2). eClinicalWorks uses cryptographic hashing (SHA-2 and bcrypt) for the storage of passwords only.

This functionality is also available on eClinicalTouch.

Costs and Fees:

None.

§170.315(d)(13) - Multi-Factor Authentication

Description of Capability:

The Multi-Factor Authentication criterion serves to identify whether a certified health IT product supports multi-factor authentication of a user's identity upon accessing the EHR, in accordance with specified standards.

Additional Details:

All health IT developers of a certified health IT product are required to attest either “yes” or “no” in compliance with this criterion. eClinicalWorks attested “yes” to the (d)(13) Multi-Factor Authentication (MFA) criterion. This feature is a practice-configurable setting located within Admin > Login Settings. There are two components of the MFA functionality within eClinicalWorks V11 that uses a one-time password (OTP) to authenticate a user’s identity: OTP Type and OTP Configuration.

When configuring the OTP Type setting, the MFA setting can be activated in three different ways:

- App-based authentication, using an app such as Google Authenticator or Authy®
- Messenger/SMS
- Email

When configuring the OTP Configuration setting, the MFA setting can be enabled to run every time a user logs in to the EHR or, alternatively, every time there is a change in the device/location of where the login occurred.

This functionality is also available on eClinicalTouch. eClinicalTouch only supports app-based authentication. It does not support email or SMS.

Costs and Fees:

None.

§170.315(e)(1) - View, Download, and Transmit to Third-Party

Description of Capability:

Enables the ability for patients to use internet-based technology to view, download, and transmit their health information to a third-party in the specified manner.

Additional Details:

All sections of the certified capability Visit Summary are enabled by default in the EHR. Users can change, or uncheck the default settings. Problems, medications, allergies, immunizations, and implant lists are patient-centric data and always display regardless of date range filtering.

Patients can use eClinicalWorks Patient Portal™, healow® iOS® and Android™ applications, and healow.com to view, download, and transmit their health information to a third party.

Costs and Fees:

eClinicalWorks offers both a free and paid model of the Patient Portal. The free model has all required certification capabilities.

§170.315(e)(3) - Patient Health Information Capture

Description of Capability:

Enables a user to identify, record, and access information directly and electronically shared by a patient (or authorized representative) and reference and link to patient health information documents.

Additional Details:

Trackers, if used, must be activated, and configured by the healow/Patient Portal user.

The healow iOS and Android applications and healow.com were demonstrated during certification and can be used for measure calculation. To complete a questionnaire on the healow application, the patient must have scheduled a healow TeleVisits™ appointment.

Patient Portal, healow iOS application, and healow.com can be considered for numerator credit for the VDT and Patient-Generated Health Data Measures.

Patients can use eClinicalWorks Patient Portal, healow iOS and Android applications, and healow.com to submit patient-generated health data to their clinicians.

Costs and Fees:

A third-party vendor (CHADIS®) is not required to use this capability and incurs an additional cost.

§170.315(f)(1) - Transmission to Immunization Registries

Description of Capability:

Enables the ability to create immunization information for electronic transmission in accordance with specified standards, and enables users to request, access, and display a patient's immunization history and the immunization forecast from an immunization registry in accordance with specified standards.

Additional Details:

Select value sets are supported. During implementation of the interface, eClinicalWorks will work with registries on what value set data needs to be available in the transmission.

Costs and Fees:

None.

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

Description of Capability:

Enables the ability to create syndrome-based public health surveillance information for electronic transmission in accordance with specified standards.

Additional Details:

Select value sets are supported. During implementation of the interface, eClinicalWorks will work with registries on what value set data needs to be available in the transmission.

Race and diagnosis are sent in the order they are entered in the Progress Notes.

The data is submitted nightly to state agencies.

Costs and Fees:

None.

§170.315(f)(5) - Transmission to Public Health Agencies - Electronic Case Reporting

Description of Capability:

Electronic case reporting (eCR) is an automated generation and transmission of case reports (based on reportable conditions data) from healthcare providers to Public Health Agencies (PHAs) for review and action. It provides additional clinical information to specified PHAs beyond the data found in electronic laboratory reporting. Further automating the reporting process can improve the timeliness and quality of reports and reduce under-reporting.

Additional Details:

eClinicalWorks offers eCR services through collaboration with the Association of Public Health Laboratories (APHL) and its Informatics Messaging Services (AIMS) platform, the Council of State and Territorial Epidemiologists (CSTE), the Centers for Disease Control and Prevention (CDC), and the Reportable Condition Knowledge Management System (RCKMS). These platforms use a single, all-condition, all-jurisdiction eCR standard that gives healthcare providers a single place to send reports. Reports are then processed to ensure they meet applicable conditions of reporting and routed to the appropriate jurisdiction(s).

Note that eClinicalWorks only triggers an eCR when a Diagnosis (SNOMED, ICD-10CM), Lab Result Test Name (LOINC®), or Lab Order (LOINC) with a trigger code is encountered.

Costs and Fees:

eCR is enabled through the Product Activation feature. An End User License Agreement contract addendum is required. eCR incurs an annual fee based on the number of providers at the practice.

§170.315(f)(7) - Transmission to Public Health Agencies - Health Care Surveys

Description of Capability:

Enables users to create health care survey information for electronic transmission in accordance with specified standards.

Additional Details:

Files generated via this functionality do not include:

- P.S.A.C.-enabled facilities, providers, patients, visit types, and encounters
- Non-billable appointments based on visit type, e.g., cancelled, rescheduled, no show, etc.

This functionality is configured to run nightly starting at 9 PM server time to 8 AM server time the following day and process up to 5,000 files per evening. Users can customize the date and time period for this batch process between 9 PM and 8 AM.

This functionality is limited to users with the Administration Security Setting and those who have access to the Report Console.

When a file is generated, medications that have been reconciled or prescribed during an encounter will be included.

Users are limited to entries that are a maximum of 30 days apart.

When documenting the same vital multiples times in an encounter, use the pop-up option or a comma to separate the entries.

Costs and Fees:

None.

§170.315(g)(2) - Automated Measure Calculation

Description of Capability:

For each Promoting Interoperability Programs percentage-based measure that is supported by a capability included in the technology, enables the ability to record the numerator and denominator and create a report that includes the numerator, denominator, and resulting percentage associated with each applicable measure.

Additional Details:

- MIPS Dashboard: eCW Provider Licenses should be active in the reporting period for setup and calculations
- APU connectivity and internet connection is required
- MIPS dashboards are scheduled to run data computations on a biweekly basis

MAQ dashboards are refreshed through on-demand requests from the client. The dashboard extraction process typically takes 24-48 hours to process the files. This time may increase due to the quantity of providers and quantity of patients per provider.

For the VDT and Patient-Generated Health Data Measures, Patient Portal, healow iOS application, and healow.com can be considered for numerator credit.

Costs and Fees:

MIPS PI and MAQ Dashboard do not have a cost or fee. MIPS Quality and Claims Data Submission Mechanism do not have a cost or fee but will require *Practice Management* services for which there is an additional cost.

MIPS eCQM reporting requires a recurring annual cost per provider or FTE. Consultation services can be added at an additional cost.

§170.315(g)(3-5) - Safety-Enhanced Design, Quality Management System, and Accessibility-Centered Design

Description of Capability:

- Safety Enhanced Design (SED): User-centered design processes must be applied to each capability
- Quality Management System (QMS): The use of a Quality Management System in the development, testing, implementation, and maintenance
- Accessibility-Centered Design (ACD): For each capability that a certified health IT module includes, and for which that capability's certification is sought, the use of a health IT accessibility-centered design standard or law in the development, testing, implementation, and maintenance of that capability must be identified

Additional Details:

None.

Costs and Fees:

None.

§170.315(g)(6) - Consolidated CDA Creation Performance

Description of Capability:

Enables the ability to create Consolidated CDA based on specified standards.

Additional Details:

Some fields in the certification test cases are designated as optional. At eClinicalWorks discretion, optional items were not populated in the test cases for certification:

1. Patient Demographics:

   Full middle name not transmitted, only first initial.

2. Medical Allergies:

   eClinicalWorks uses NDC codes in order to receive RxNorm. If there is no match for an NDC code which may be discontinued, an RxNorm code will not be associated. If a Medication Allergy has multiple ingredients, all ingredient level RxCUIs will be sent.

3. Medications:

   The eCW drug database uses NDC codes. During certification, eClinicalWorks was given the option to choose different medications than those listed in the supplied test cases. This decision was made because the medications supplied in the test case have discontinued NDC codes which could not return an RxNorm code in the NLM database.

4. Problems:

   Documented in the Problem List; user is asked to verify and save the mapped SNOMED code when using the classic search feature. The code is assigned automatically but is not considered saved until the user verifies it. Regardless of whether the user verifies/maps the code, it will be present in the Problem List section in the C-CDA document via the ICD to SNOMED Cloud Mapping Application Programming Interface (API).

5. Vitals units of measure:

   a. Height: Inches [in_i]

   b. Weight: Pounds [lb_av]

   c. Blood pressure diastolic [Hg]

   d. Blood pressure systolic [Hg]

   e. Heart: Rate/min

   f. O2% BldC Oximetry %

   g. Inhaled Oxygen Concentration (FIO2) %

   h. Body Temperature: Fahrenheit [degF]

i. Respiratory: Rate/min

6. Smoking Status: Sent as a SNOMED code.
7. Encounter Diagnosis: Sent as ICD-10.
8. Immunizations: Sent as CVX.
9. Procedures: Sent as Current Procedural Terminology (CPT®)* Completed orders must be marked as received and reviewed.
10. Laboratory Test: Sent as LOINC codes - completed orders must be marked as received and reviewed.
11. Laboratory Results: Sent as LOINC codes - completed orders must be marked as received and reviewed.
12. UDI: Device code is sent.
13. Care Team: Includes all appointment provider data.
14. Assessment and Plan of Treatment: Assessment notes - the notes section of an ICD in the Assessment section.
15. Plan of Treatment: Future/pending orders (Lab/DI/Procedures), Medications prescribed, follow up visit scheduled, and Treatment notes.
16. Goals: Structured data set up and mapped by user.
17. Health Concerns: Structured data setup and mapped by user.
18. Reason for referral: Entered in the reason section of a referral.
19. Functional Status: Structured data setup and mapped by user.
20. Cognitive Status: Structured data setup and mapped by user.

The functionality of data capture for the listed elements is also available on eClinicalTouch.

Electronic transmission and reception via C-CDA document is only available on the main application.

Patients can view, download, and transmit the C-CDA document from the eClinicalWorks Patient Portal, healow iOS and Android applications, healow.com, and approved third-party applications via a Fast Healthcare Interoperability Resources (FHIR) API. Please note that C-CDA documents generated by eEHX® do not adhere to the USCDI Version 1 standard.

Costs and Fees:

None.

* CPT copyright 2023 American Medical Association. All rights reserved.

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

Description of Capability:

Enables the ability to receive a request with enough information to uniquely identify a patient and return an ID or other token that can be used by an application to subsequently execute requests for patient data.

Additional Details:

FHIR DSTU3 technical documentation is available at: https://connect.healow.com/apps/jsp/dev/fhirClinicalDocumentation.jsp.

FHIR DSTU3 terms of service are available at: https://connect.healow.com/apps/jsp/dev/healowDeveloperAgreementClinicalOpen.jsp.

To use FHIR APIs, the customer must have Patient Portal and Interoperability Hub-FHIR enabled from Product Activation.

This capability requires use of healow.

Costs and Fees:

None.

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

Description of Capability:

Enables the ability to respond to requests for patient data for all the data categories specified in the Common Clinical Data Set at one time and return such data in a summary record formatted according to the specified standards and respond to requests for patient data associated with a specific date as well as requests for patient data within a specific date range.

Additional Details:

FHIR DSTU3 technical documentation is available at: https://connect.healow.com/apps/jsp/dev/fhirClinicalDocumentation.jsp.

FHIR DSTU3 terms of service are available at: https://connect.healow.com/apps/jsp/dev/healowDeveloperAgreementClinicalOpen.jsp.

To use FHIR APIs, the customer must have Patient Portal and Interoperability Hub FHIR-enabled from Product Activation.

This capability requires use of healow.

Costs and Fees:

None.

§170.315(g)(10) - Standardized API for Patient and Population Services

Description of Capability:

(g)(10): Enables the ability to respond to requests for single or multiple patient data and support third-party apps launched from the EHR as described in the specified standards.

Additional Details:

For technical and business documentation, visit the healow Developer Portal at https://connect4.healow.com/apps/jsp/dev/r4/fhirClinicalDocumentation.jsp and the eClinicalWorks Developer Portal at https://fhir.eclinicalworks.com/ecwopendev/documentation.

Costs and Fees:

Refer to https://www.eclinicalworks.com/resources/certified-ehr-technology/ for current information regarding any applicable fees.

§170.315(h)(1) - Direct Project

Description of Capability:

The ability to send and receive health information in accordance with the standards specified in § 170.202(a)(2), including information formatted only as a wrapped message.

Additional Details:

In order to successfully process an inbound or outbound message, the vendor HISP Trust Anchor must be bound to the domains supported by eClinicalWorks HISP. For outbound messages, a valid clinical summary document conforming to C-CDA format must be attached to the message. There is a default size limit of 5 MB per transaction which can be increased based on requirements.

Costs and Fees:

Refer to §170.315(b)(1) - Transitions of Care for costs and fees.

5. Appendix A: Abbreviations

The following table lists the abbreviations in this document:

Abbreviation	Definition
ACB	Authorized Certification Body
ACD	Accessibility-Centered Design
API	Application Programming Interface
APU	Auto-Practice Upgrade
CDA	Clinical Document Architecture
CDS	Clinical Decision Support
CHADIS	Child Health and Development Interactive System
CPOE	Computerized Provider Order Entry
CPT*	Current Procedural Terminology
CQM	Clinical Quality Measure
DI	Diagnostic Imaging
EHNAC	Electronic Healthcare Network Accreditation Commission
EHR	Electronic Health Record
FHIR	Fast Healthcare Interoperability Resources
FTE	Full-Time Equivalent
HISP	Health Information Service Provider
HL7	Health Level Seven
ICD	International Classification of Diseases
IT	Information Technology
MAQ	Meaningful Use, Adoption, Quality
MIPS	Merit-based Incentive Payment System
NDC	National Drug Code
NEWRX	New Prescription Request

Abbreviation	Definition
NLM	National Library of Medicine
ONC	Office of the National Coordinator for Health Information Technology
OS	Operating System
P.S.A.C.	Patient Security Access Control
P2P	Provider to Provider
QMS	Quality Management System
QRDA	Quality Reporting Document Architecture
RCM	Revenue Cycle Management
RXFILL	Receive Fill Status Notification
SED	Safety-Enhanced Design
SNOMED-CT	Systematized Nomenclature of Medicine Clinical Terms
SSL	Secure Socket Layer
UDI	Unique Device Identifier
UMLS	Unified Medical Language System

6. Appendix B: Certificates of Compliance

6.1. Version 11.52.305C

DRUMMOND

Certificate of Health IT Compliance

This is to certify that:

eClinicalWorks Version 11.52.305C

From:
eClinicalWorks, LLC
http://www.eclinicalworks.com
2 Technology Drive
Westborough, MA 01581

Completed Certification of the Following Health IT Modules:

ONC Certified HealthIT

DRUMMOND CERTIFIED ONC HEALTH IT

Criteria Tested:	170.315 (a)(1-5, 9, 12, 14-15); (b)(1-3, 10); (c)(1-3); (d)(1-9, 11-13); (e)(1, 3); (f)(1-2, 5, 7); (g)(2-7, 9-10); (h)(1)
Clinical Quality Measures Tested:	2v8, 22v7, 50v7, 56v7, 68v8, 69v7, 74v6, 75v5, 90v8, 117v7, 122v5, 124v5, 129v8, 130v5, 131v6, 133v7, 137v5, 138v6, 139v5, 142v7, 143v7, 145v7, 146v7, 149v5, 153v7, 154v7, 155v7, 156v6, 157v7, 159v7, 165v6, 177v7, 347v1, 349v2, 645v2
Additional Software Used:	Healow Application, Association of Public Health Laboratories (APHL), Informatics Messaging Services (AIMS) platform, Healow

This Health IT Module is compliant with the ONC Certification Criteria for Health IT and has been certified by an 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. Drummond Group is accredited by ANSI and approved by ONC for the ONC Health IT Certification Program to certify Health IT Module(s) and Certification of other types of Health IT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR.

Holds Certificate No: 15.04.04.2883.eCli.11.05.1.221212
Date Certified: 12/12/2022

For and on behalf of the Drummond Group:

Heather Kelty

Heather Kelty, Certification Program Director

ANAB
ANSI National Accreditation Board
ACCREDITED
ISO/IEC 17065
PRODUCT CERTIFICATION BODY

ISO/IEC 17065
Product Certification Body #1045

This certificate remains the property of Drummond Group and shall be returned immediately upon request.
To be read in conjunction with the scope above or any attached appendix.

EHR CB-063a Rev 26Mar2024
www.drummondgroup.com

3622 Lyckan Parkway Suite 3003 Durham NC 27707

6.2. Version 12.0.1

DRUMMOND

Certificate of Health IT Compliance

This is to certify that:

eClinicalWorks Version 12.0.1

From:
eClinicalWorks, LLC
http://www.eclinicalworks.com
2 Technology Drive
Westborough, MA 01581

Completed Certification of the Following Health IT Modules:

ONC Certified HealthIT

DRUMMOND CERTIFIED ONC HEALTH IT

Criteria Tested:	170.315 (a)(1-5, 9, 12, 14-15); (b)(1-3, 10); (c)(1-3); (d)(1-9, 11-13); (e)(1, 3); (f)(1-2, 5, 7); (g)(2-7, 9-10); (h)(1)
Clinical Quality Measures Tested:	2v8, 22v7, 50v7, 56v7, 68v8, 69v7, 74v6, 75v5, 90v8, 117v7, 122v5, 124v5, 129v8, 130v5, 131v6, 133v7, 137v5, 138v6, 139v5, 142v7, 143v7, 145v7, 146v7, 149v5, 153v7, 154v7, 155v7, 156v6, 157v7, 159v7, 165v6, 177v7, 347v1, 349v2, 645v2
Additional Software Used:	Healow Application, Association of Public Health Laboratories (APHL), Informatics Messaging Services (AIMS) platform, Healow

This Health IT Module is compliant with the ONC Certification Criteria for Health IT and has been certified by an 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. Drummond Group is accredited by ANSI and approved by ONC for the ONC Health IT Certification Program to certify Health IT Module(s) and Certification of other types of Health IT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR.

Holds Certificate No: 15.04.04.2883.eCli.12.06.1.221116
Date Certified: 11/16/2022

For and on behalf of the Drummond Group:

Heather Kelty

ANAB ANSI National Accreditation Board ACCREDITED ISO/IEC 17065 PRODUCT CERTIFICATION BODY

Heather Kelty, Certification Program Director

ISO/IEC 17065
Product Certification Body #1045

This certificate remains the property of Drummond Group and shall be returned immediately upon request.
To be read in conjunction with the scope above or any attached appendix.

EHR CB-063a Rev 26Mar2024
www.drummondgroup.com

3622 Lyckan Parkway Suite 3003 Durham NC 27707

6.3. Version 12.0.2

DRUMMOND

Certificate of Health IT Compliance

This is to certify that:

eClinicalWorks Version 12.0.2

From:
eClinicalWorks, LLC
http://www.eclinicalworks.com
2 Technology Drive
Westborough, MA 01581

Completed Certification of the Following Health IT Modules:

ONC Certified HealthIT

DRUMMOND CERTIFIED ONC HEALTH IT

Criteria Tested:	170.315 (a)(1-5, 9, 12, 14-15); (b)(1-3, 10); (c)(1-3); (d)(1-9, 11-13); (e)(1, 3); (f)(1-2, 5, 7); (g)(2-7, 9-10); (h)(1)
Clinical Quality Measures Tested:	2v8, 22v7, 50v7, 56v7, 68v8, 69v7, 74v6, 75v5, 90v8, 117v7, 122v5, 124v5, 129v8, 130v5, 131v6, 133v7, 137v5, 138v6, 139v5, 142v7, 143v7, 145v7, 146v7, 149v5, 153v7, 154v7, 155v7, 156v6, 157v7, 159v7, 165v6, 177v7, 347v1, 349v2, 645v2
Additional Software Used:	Healow Application, Association of Public Health Laboratories (APHL), Informatics Messaging Services (AIMS) platform, Healow

This Health IT Module is compliant with the ONC Certification Criteria for Health IT and has been certified by an 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. Drummond Group is accredited by ANSI and approved by ONC for the ONC Health IT Certification Program to certify Health IT Module(s) and Certification of other types of Health IT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR.

Holds Certificate No: 15.04.04.2883.eCli.12.07.1.230613
Date Certified: 06/13/2023

For and on behalf of the Drummond Group:

Heather Kelty

ANAB ANSI National Accreditation Board ACCREDITED ISO/IEC 17065 PRODUCT CERTIFICATION BODY

Heather Kelty, Certification Program Director

ISO/IEC 17065
Product Certification Body #1045

This certificate remains the property of Drummond Group and shall be returned immediately upon request.
To be read in conjunction with the scope above or any attached appendix.

EHR CB-063a Rev 26Mar2024
www.drummondgroup.com

3622 Lyckan Parkway Suite 3003 Durham NC 27707

6.4. Version 12.0.3

DRUMMOND

Certificate of Health IT Compliance

This is to certify that:

eClinicalWorks Version 12.0.3

From:
eClinicalWorks, LLC
http://www.eclinicalworks.com
2 Technology Drive
Westborough, MA 01581

Completed Certification of the Following Health IT Modules:

ONC Certified HealthIT

DRUMMOND CERTIFIED ONC HEALTH IT

Criteria Tested:	170.315 (a)(1-5, 9, 12, 14-15); (b)(1-3, 10); (c)(1-3); (d)(1-9, 11-13); (e)(1, 3); (f)(1-2, 5, 7); (g)(2-7, 9-10); (h)(1)
Clinical Quality Measures Tested:	2v8, 22v7, 50v7, 56v7, 68v8, 69v7, 74v6, 75v5, 90v8, 117v7, 122v5, 124v5, 129v8, 130v5, 131v6, 133v7, 137v5, 138v6, 139v5, 142v7, 143v7, 145v7, 146v7, 149v5, 153v7, 154v7, 155v7, 156v6, 157v7, 159v7, 165v6, 177v7, 347v1, 349v2, 645v2
Additional Software Used:	Healow Application, Association of Public Health Laboratories (APHL), Informatics Messaging Services (AIMS) platform, Healow

This Health IT Module is compliant with the ONC Certification Criteria for Health IT and has been certified by an 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. Drummond Group is accredited by ANSI and approved by ONC for the ONC Health IT Certification Program to certify Health IT Module(s) and Certification of other types of Health IT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR.

Holds Certificate No: 15.04.04.2883.eCli.12.08.1.240322
Date Certified: 03/22/2024

For and on behalf of the Drummond Group:

Heather Kelty

ANAB ANSI National Accreditation Board ACCREDITED ISO/IEC 17065 PRODUCT CERTIFICATION BODY

Heather Kelty, Certification Program Director

ISO/IEC 17065
Product Certification Body #1045

This certificate remains the property of Drummond Group and shall be returned immediately upon request.
To be read in conjunction with the scope above or any attached appendix.

EHR CB-063a Rev 26Mar2024
www.drummondgroup.com

3622 Lyckan Parkway Suite 3003 Durham NC 27707

7. Appendix C: Documentation Terms and Conditions

Documentation: This document contains information that is confidential and proprietary to eClinicalWorks, LLC and is intended for use solely by its authorized licensees ("Authorized Entities"). In accordance with these conditions and contractual agreements by the user, this document may not be copied, displayed, distributed, published, or otherwise reproduced, otherwise used, transmitted, or in any form or otherwise made available or used by anyone other than the authorized client to whom this document was originally delivered without the prior written consent of eClinicalWorks, LLC. Pursuant to its agreement, Authorized Entities may receive copies of or access to certain written technical support or explanatory documents regarding eClinicalWorks' software; eClinicalWorks' services; and/or eClinicalWorks' internal policies and procedures (collectively, "Documentation").

The examples, images, and scenarios presented in this documentation are solely for explanatory use of the software and its functionality and should not be construed as directives for clinical or medical decisions; the user is ultimately and completely responsible for clinical and/or medical decisions made regarding patient care.

eClinicalWorks documentation may contain hyperlinks to external sites and/or third-party vendors for functional, informational, or instructional purposes. Use of these external links is at the user's and licensee's risk.

eClinicalWorks assumes no responsibility for errors or omissions that may appear in this publication and reserves the right to change this publication at any time without notice. *All users are instructed to consult the latest version of the Documentation at my.eclinicalworks.com for the latest updates to the Documentation at all times.*

Once obtained, the distribution or posting this proprietary document on the Internet for public and/or private use is strictly prohibited. This restriction includes Internet websites, forums, blogs, private or public portals, or any other electronic means of sharing beyond the intended, licensed user.

8. Appendix D: Notices

The following appendix lists the trademark and copyright information for this document.

8.1. Trademarks

eClinicalWorks®

eClinicalDirect™

eClinicalTouch®

eClinicalWorks P2P®

eClinicalWorks Patient Portal™

eEHX®

RCM™

eClinicalWorks, eClinicalDirect, eClinicalTouch, eClinicalWorks P2P, eClinicalWorks Patient Portal, eEHX, and RCM are trademarks or registered trademarks of eClinicalWorks, LLC.

healow®

healow TeleVisits™

healow and healow TeleVisits are trademarks or registered trademarks of healow, LLC (and are used with permission).

All other trademarks or service marks contained herein are the property of their respective owners.

LOINC®

LOINC is a registered trademark of Regenstrief Institute, Inc.

8.2. Copyright

CPT®* Copyright Notice

CPT copyright 2023 American Medical Association. All rights reserved.

Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

LOINC® Copyright Notice

This material contains content from LOINC (http://loinc.org). LOINC is copyright © 1995-2023, Regenstrief Institute, Inc. and the Logical Observation Identifiers Names and Codes (LOINC) Committee and is available at no cost under the license at http://loinc.org/license.

* CPT copyright 2023 American Medical Association. All rights reserved.