ONC HIT Certification Program
Test Results Summary for 2014 Edition EHR Certification

Part 1: Product and Developer Information

1.1 Certified Product Information

Product Name:	AXEIUM
Product Version:	EHR
Domain:	Ambulatory
Test Type:	Complete

1.2 Developer/Vendor Information

Developer/Vendor Name:	Brilogy Corporation
Address:	PO Box 1800, Costa Mesa, CA 92628
Website:	AXEIUM.com
Email:	milton.allione@brilogy.com
Phone:	714.609.9900
Developer/Vendor Contact:	Milton Allione

Part 2: ONC-Authorized Certification Body Information
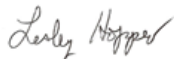
2.1 ONC-Authorized Certification Body Information

ONC-ACB Name:	SLI Compliance
Address:	4720 Independence St.
	Wheat Ridge, Colorado 80033
Website:	www.slicompliance.com
Email:	acb@slicompliance.com
Phone:	844-754-8683
ONC-ACB Contact:	Lesley Hoppert, Certification Manager

This test results summary is approved for public release by the following ONC-Authorized Certification Body Representative:

Lesley Hoppert	Certification Manager
ONC-ACB Authorized Representative	**Function/Title**

Lesley Hopper   3/20/2019

Signature and Date

2.2 Gap Certification

The following identifies criterion or criteria certified via gap certification

§170.314			
☐ (a)(1)	☐ (a)(17)	☐ (d)(5)	☐ (d)(9)
☐ (a)(6)	☐ (b)(5)*	☐ (d)(6)	☐ (f)(1)
☐ (a)(7)	☐ (d)(1)	☐ (d)(8)	

*Gap certification allowed for Inpatient setting only

☒ No gap certification

2.3 Inherited Certification

The following identifies criterion or criteria certified via inherited certification

§170.314			
☐ (a)(1)	☐ (a)(14)	☐ (c)(3)	☐ (f)(1)
☐ (a)(2)	☐ (a)(15)	☐ (d)(1)	☐ (f)(2)
☐ (a)(3)	☐ (a)(16) *Inpt. only*	☐ (d)(2)	☐ (f)(3)
☐ (a)(4)	☐ (a)(17) *Inpt. only*	☐ (d)(3)	☐ (f)(4) *Inpt. only*
☐ (a)(5)	☐ (b)(1)	☐ (d)(4)	☐ (f)(5) *Optional & Amb. only*
☐ (a)(6)	☐ (b)(2)	☐ (d)(5)	
☐ (a)(7)	☐ (b)(3)	☐ (d)(6)	☐ (f)(6) *Optional & Amb. only*
☐ (a)(8)	☐ (b)(4)	☐ (d)(7)	
☐ (a)(9)	☐ (b)(5)	☐ (d)(8)	☐ (g)(1)
☐ (a)(10)	☐ (b)(6) *Inpt. only*	☐ (d)(9) *Optional*	☐ (g)(2)
☐ (a)(11)	☐ (b)(7)	☐ (e)(1)	☐ (g)(3)
☐ (a)(12)	☐ (c)(1)	☐ (e)(2) *Amb. only*	☐ (g)(4)
☐ (a)(13)	☐ (c)(2)	☐ (e)(3) *Amb. only*	

☒ No inherited certification

Part 3: NVLAP-Accredited Testing Laboratory Information

Report Number: 60.2

Test Date(s): 03/16/2015-03/18/2015, 03/20/2015, 03/23/2015-03/24/2015

3.1 NVLAP-Accredited Testing Laboratory Information

ATL Name:	SLI Compliance
Accreditation Number:	200733-0
Address:	4720 Independence St Wheat Ridge, CO 80033 USA
Website:	http:// www.SLIcompliance.com
Email:	info@sliglobalsolutions.com
Phone:	303.215.5853
ATL Contact:	Dustin George

For more information on scope of accreditation, please reference
http://ts.nist.gov/standards/scopes/2007330.htm

Part 3 of this test results summary is approved for public release by the following Accredited Testing Laboratory Representative:

Dustin George	Health IT Test Lab Manager
ATL Authorized Representative	**Function/Title**
[signature] 3/14/2019	
Signature and Date	

3.2 Test Information

3.2.1 Additional Software Relied Upon for Certification

Additional Software	Applicable Criteria	Functionality provided by Additional Software
MDToolbox	B3	e-Prescribinh Web Services
MDToolbox	B1, B2	Direct Messaging Services
HealthVault	E3	Direct Messaging
MdToolbox HealthVault	E3	Direct Messaging (HV is sending; MDTB receiving)

☐ No additional software required

3.2.2 Test Tools

Test Tool		Version
☒	Cypress	2.6.0
☒	ePrescribing Validation Tool	1.0.5
☐	HL7 CDA Cancer Registry Reporting Validation Tool	
☐	HL7 v2 Electronic Laboratory Reporting (ELR) Validation Tool	
☒	HL7 v2 Immunization Information System (IIS) Reporting Validation Tool	1.8.2
☒	HL7 v2 Laboratory Results Interface (LRI) Validation Tool	1.7.2
☒	HL7 v2 Syndromic Surveillance Reporting Validation Tool	1.7.2
☒	Transport Testing Tool	180
☒	Direct Certificate Discovery Tool	3.0.3

☐ No test tools required

3.2.3 Test Data

☐ Alteration (customization) to the test data was necessary and is described in Appendix [*insert appendix letter*]

☒ No alteration (customization) to the test data was necessary

3.2.4 Standards

3.2.4.1 Multiple Standards Permitted

The following identifies the standard(s) that has been successfully tested where more than one standard is permitted

Criterion #	Standard Successfully Tested	
(a)(8)(ii)(A)(2)	x §170.204(b)(1) HL7 Version 3 Implementation Guide: URL-Based Implementations of the Context-Aware Information Retrieval (Infobutton) Domain	☐ §170.204(b)(2) HL7 Version 3 Implementation Guide: Context-Aware Knowledge Retrieval (Infobutton) Service-Oriented Architecture Implementation Guide
(a)(13)	☒ §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release	☐ §170.207(j) HL7 Version 3 Standard: Clinical Genomics; Pedigree

Criterion #	Standard Successfully Tested	
(a)(15)(i)	☒ §170.204(b)(1) HL7 Version 3 Implementation Guide: URL-Based Implementations of the Context-Aware Information Retrieval (Infobutton) Domain	☐ §170.204(b)(2) HL7 Version 3 Implementation Guide: Context-Aware Knowledge Retrieval (Infobutton) Service-Oriented Architecture Implementation Guide
(a)(16)(ii)	☐ §170.210(g) Network Time Protocol Version 3 (RFC 1305)	☐ §170. 210(g) Network Time Protocol Version 4 (RFC 5905)
(b)(2)(i)(A)	☐ §170.207(i) The code set specified at 45 CFR 162.1002(c)(2) (ICD-10-CM) for the indicated conditions	☒ §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release
(b)(7)(i)	☐ §170.207(i) The code set specified at 45 CFR 162.1002(c)(2) (ICD-10-CM) for the indicated conditions	☒ §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release
(e)(1)(i)	☒ Annex A of the FIPS Publication 140-2 • AES-256 • SHA-256	
(e)(1)(ii)(A)(2)	☒ §170.210(g) Network Time Protocol Version 3 (RFC 1305)	☐ §170. 210(g) Network Time Protocol Version 4 (RFC 5905)
(e)(3)(ii)	☒ Annex A of the FIPS Publication 140-2 • AES-256 • SHA-256	
Common MU Data Set (15)	☒ §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release	☐ §170.207(b)(2) The code set specified at 45 CFR 162.1002(a)(5) (HCPCS and CPT-4)

☐ None of the criteria and corresponding standards listed above are applicable

3.2.4.2 Newer Versions of Standards

The following identifies the newer version of a minimum standard(s) that has been successfully tested

Newer Version	Applicable Criteria

☒ No newer version of a minimum standard was tested

3.2.5 Optional Functionality

Criterion #	Optional Functionality Successfully Tested
☐ (a)(4)(iii)	Plot and display growth charts
☐ (b)(1)(i)(B)	Receive summary care record using the standards specified at §170.202(a) and (b) (Direct and XDM Validation)
☐ (b)(1)(i)(C)	Receive summary care record using the standards specified at §170.202(b) and (c) (SOAP Protocols)
☐ (b)(2)(ii)(B)	Transmit health information to a Third Party using the standards specified at §170.202(a) and (b) (Direct and XDM Validation)
☐ (b)(2)(ii)(C)	Transmit health information to a Third Party using the standards specified at §170.202(b) and (c) (SOAP Protocols)
☐ (f)(3)	Ambulatory setting only – Create syndrome-based public health surveillance information for transmission using the standard specified at §170.205(d)(3) (urgent care visit scenario)
☐ Common MU Data Set (15)	Express Procedures according to the standard specified at §170.207(b)(3) (45 CFR162.1002(a)(4): Code on Dental Procedures and Nomenclature)
☐ Common MU Data Set (15)	Express Procedures according to the standard specified at §170.207(b)(4) (45 CFR162.1002(c)(3): ICD-10-PCS)

☒ No optional functionality tested

3.2.6 2014 Edition Certification Criteria* Successfully Tested

Criteria #	Version		Criteria #	Version	
	TP**	TD***		TP	TD
☒ (a)(1)	1.3	1.5	☒ (c)(3)	1.11	
☒ (a)(2)	1.2		☒ (d)(1)	1.2	
☒ (a)(3)	1.2	1.4	☒ (d)(2)	1.6	
☒ (a)(4)	1.4	1.3	☒ (d)(3)	1.3	
☒ (a)(5)	1.4	1.3	☒ (d)(4)	1.3	
☒ (a)(6)	1.3	1.4	☒ (d)(5)	1.2	
☒ (a)(7)	1.3	1.3	☒ (d)(6)	1.2	
☒ (a)(8)	1.2		☒ (d)(7)	1.2	
☒ (a)(9)	1.3	1.3	☒ (d)(8)	1.2	
☒ (a)(10)	1.2	1.4	☐ (d)(9) *Optional*		
☒ (a)(11)	1.3		☒ (e)(1)	1.9	1.5
☒ (a)(12)	1.3		☒ (e)(2) *Amb. only*	1.2	1.6
☒ (a)(13)	1.2		☒ (e)(3) *Amb. only*	1.3	
☒ (a)(14)	1.2		☒ (f)(1)	1.2	1.2
☒ (a)(15)	1.5		☒ (f)(2)	1.3	
☐ (a)(16) *Inpt. only*			☒ (f)(3)	1.3	
☐ (a)(17) *Inpt. only*			☐ (f)(4) *Inpt. only*		
☒ (b)(1)	1.7	1.4	☐ (f)(5) *Optional & Amb. only*		
☒ (b)(2)	1.4	1.6			
☒ (b)(3)	1.4		☐ (f)(6) *Optional & Amb. only*		
☒ (b)(4)	1.3	1.4			
☒ (b)(5)	1.4		☐ (g)(1)		
☐ (b)(6) *Inpt. only*			☒ (g)(2)	1.9	2.0
☒ (b)(7)	1.4	1.7	☒ (g)(3)	1.4	
☒ (c)(1)	1.11		☒ (g)(4)	1.2	
☒ (c)(2)	1.11				

*For a list of the 2014 Edition Certification Criteria, please reference
http://www.healthit.gov/certification (navigation: 2014 Edition Test Method)

**Indicates the version number for the Test Procedure (TP)

***Indicates the version number for the Test Data (TD)

3.2.7 2014 Clinical Quality Measures*

Type of Clinical Quality Measures Successfully Tested:

☒ Ambulatory

☐ Inpatient

☐ No CQMs tested

*For a list of the 2014 Clinical Quality Measures, please reference http://www.cms.gov (navigation: 2014 Clinical Quality Measures)

Ambulatory CQMs							
CMS ID	Version	CMS ID	Version	CMS ID	Version	CMS ID	Version
☒ 2	4	☐ 90		☐ 136		☐ 155	
☐ 22		☒ 117	3	☐ 137		☐ 156	
☐ 50		☒ 122	3	☐ 138		☐ 157	
☐ 52		☐ 123		☐ 139		☐ 158	
☐ 56		☒ 124	3	☐ 140		☐ 159	
☐ 61		☒ 125	3	☐ 141		☐ 160	
☐ 62		☐ 126		☐ 142		☐ 161	
☐ 64		☐ 127		☐ 143		☐ 163	
☒ 65	4	☐ 128		☐ 144		☐ 164	
☐ 66		☐ 129		☐ 145		☒ 165	3
☒ 68	4	☐ 130		☐ 146		☒ 166	4
☒ 69	3	☐ 131		☐ 147		☐ 167	
☐ 74		☐ 132		☐ 148		☐ 169	
☒ 75	3	☐ 133		☐ 149		☐ 177	
☐ 77		☐ 134		☐ 153		☐ 179	
☐ 82		☐ 135		☐ 154		☐ 182	

Inpatient CQMs							
CMS ID	Version	CMS ID	Version	CMS ID	Version	CMS ID	Version
☐ 9		☐ 71		☐ 107		☐ 172	
☐ 26		☐ 72		☐ 108		☐ 178	
☐ 30		☐ 73		☐ 109		☐ 185	
☐ 31		☐ 91		☐ 110		☐ 188	
☐ 32		☐ 100		☐ 111		☐ 190	
☐ 53		☐ 102		☐ 113			
☐ 55		☐ 104		☐ 114			

Inpatient CQMs							
CMS ID	Version	CMS ID	Version	CMS ID	Version	CMS ID	Version
☐ 60		☐ 105		☐ 171			

3.2.8 Automated Numerator Recording and Measure Calculation

3.2.8.1 Automated Numerator Recording

Automated Numerator Recording Successfully Tested			
☐ (a)(1)	☐ (a)(9)	☐ (a)(16)	☐ (b)(6)
☐ (a)(3)	☐ (a)(11)	☐ (a)(17)	☐ (e)(1)
☐ (a)(4)	☐ (a)(12)	☐ (b)(2)	☐ (e)(2)
☐ (a)(5)	☐ (a)(13)	☐ (b)(3)	☐ (e)(3)
☐ (a)(6)	☐ (a)(14)	☐ (b)(4)	
☐ (a)(7)	☐ (a)(15)	☐ (b)(5)	

☒ Automated Numerator Recording was not tested

3.2.8.2 Automated Measure Calculation

Automated Numerator Recording Successfully Tested			
☒ (a)(1)	☒ (a)(9)	☐ (a)(16)	☐ (b)(6)
☒ (a)(3)	☒ (a)(11)	☐ (a)(17)	☒ (e)(1)
☒ (a)(4)	☒ (a)(12)	☒ (b)(2)	☒ (e)(2)
☒ (a)(5)	☒ (a)(13)	☒ (b)(3)	☒ (e)(3)
☒ (a)(6)	☒ (a)(14)	☒ (b)(4)	
☒ (a)(7)	☒ (a)(15)	☒ (b)(5)	

☐ Automated Measure Calculation was not tested

3.2.9 Attestation

Attestation Forms (as applicable)	Appendix
☐ Safety-Enhanced Design*	B
☐ Quality Management System**	C
☐ Privacy and Security	D

Attestation Forms (as applicable)	Appendix

*Required if any of the following were tested: (a)(1), (a)(2), (a)(6), (a)(7), (a)(8), (a)(16), (b)(3), (b)(4)

**Required for every EHR product

3.3 Appendices

Appendix A: Test Data Alterations

The following deviations from the ONC-approved Test Data were utilized during certification testing:

- N/A

Appendix B: Safety-Enhanced Design Attestation

1	170.314(g)(3) Safety-enhanced design	
1.1	Identify which of the following criteria are scheduled to be tested or inherited for certification.	
1.1.1	170.314(a)(1) Computerized provider order entry	☒
1.1.2	170.314(a)(2) Drug-drug, drug-allergy interactions checks	☒
1.1.3	170.314(a)(6) Medication list	☒
1.1.4	170.314(a)(7) Medication allergy list	☒
1.1.5	170.314(a)(8) Clinical decision support	☒
1.1.6	170.314(a)(16) Electronic medication administration record (inpatient setting only)	☐
1.1.7	170.314(b)(3) Electronic prescribing	☒
1.1.8	170.314(b)(4) Clinical information reconciliation	☒

1.2	Document the applied user-centered design (UCD) processes for each applicable EHR technology capability submitted for testing. Provide the name, description, and citation for all UCD processes used.
	• If a single UCD process was used for applicable capabilities, it would only need to be identified once.
	• If different UCD processes were applied to specific capabilities, be sure to indicate the criterion or criteria to which each UCD process applies.
	• If a modified UCD process was used for any of the applicable capabilities, an outline and short description of the UCD process must be provided. The description must also include identifying any industry-standard UCD process upon which the modified UCD process was based.
	A single UCD process was utilized.
	A usability test of AXEIUM EHR was conducted on the referenced date and location. The purpose of this test was to test and validate the usability of the current user interface, and provide evidence of usability in the EHR Under Test (EHRUT).
	During the usability test, healthcare providers, clinical and managerial staff matching the target demographic criteria served as participants and used the EHR in actual tasks. This study collected data on tasks typically conducted on an EHR relevant to the module and feature being tested.
1.3	Submit a **Usability Test Report** for each criterion you selected in Question 1.1.
	• Attach the Usability Test Report in a separate document.
	• Identify the name of the report(s) and any other supporting documentation materials in the field below. If more than one report is submitted, specify which report applies to which criteria.
	• Reports may be supplied in any format, though they must include the necessary information for all of the certification criteria submitted for testing and conform to the content and completion requirements of the Customized Common Industry Format Template for Electronic Health Record Usability Testing per NISTIR 7742. Failure to include all required elements will constitute automatic failure of the SED Attestation.
	• The official NISTIR 7742 report template can be located at http://www.nist.gov/itl/hit/upload/LowryNISTIR-7742Customized_CIF_Template_for_EHR_Usability_Testing_Publicationl_Version-doc.pdf
	See attached '170.314(g)(3) AXEIUM EHRUT.pdf'

Appendix C: Quality Management System Attestation

1	170.314(g)(4) Quality management system
1.1	If an industry standard QMS was used during the development, testing, implementation or maintenance of the EHR technology for any of the certification criteria, specify it/them by name (e.g. ISO 9001, IEC 62304, ISO 13485, 21 CFR Part 820, etc.). If an industry standard QMS was not used, please skip to Question 1.2.
	EUP was utilized during the development process. See attached documentation '170.314(g)(4) 1.01 EUP Enterprise Unified Process'
1.2	If a modified or "home-grown" QMS was used during the development, testing, implementation or maintenance of the EHR technology for any of the certification criteria, include an outline and short description of the QMS, which could include identifying any industry-standard QMS upon which it was based and modifications to that standard. If a modified or "home-grown" QMS was not used, please skip to Question 1.3.
1.3	If no QMS was used during the development, testing, implementation or maintenance of the EHR technology for any of the certification criteria, please state that.

Appendix D: Privacy & Security

1	Privacy & Security
1.1	AXEIUM EHR utilized AES-256 and SHA-256 for encrypting and hashing of patient information.

Test Results Summary Document History

Version	Description of Change	Date
1.0	Original	
2.0	Updated: address & logo for SLI Compliance, ACB information, Standard Successfully Tested section (a)(8)(ii)(A)(2) §170.204(b)(1) URL-Based (Infobutton)	03/13/2019 Georgia Fortun

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