

DRUMMOND CERTIFICATION FOR EHR MODULE (ECM 5.3 SP2)

Streamline Health has a current Certificate of EHR Compliance from Drummond Group for the EHR Module (Inpatient) for our Streamline Health® ECM™ 5.3 SP2 program. Along with the rest of our Streamline Health® Enterprise Content Management (ECM) solutions, this program can be purchased on either a perpetual software license model (with term maintenance), term/subscription software license model or term-based SaaS/hosted solution model. The solution is licensed based on number of instances/databases/environments, in-scope client facilities and the number and types of workflow modules. Interfaces, communication lines, historic data storage, data extract assistance and hardware (along with any implementation, training or similar such assistance) are not included in the standard solution pricing. The EHR Module (Inpatient) is a functionality module that operates off the base ECM solution and is licensed for a separate fee (on the same model as the base

[View a copy of the current Drummond Group Certificate of EHR Compliance for EHR Module \(Inpatient\) here.](#)

Additional disclosures about the specific functionalities certified are listed below.

Capability Requirement	Functionality Description	Additional Cost or Fees	Additional Contractual Limitations	Technical Limitations
§170.314(a)(17) Advance directives – inpatient setting (Enable a user to electronically record whether a patient has an advance directive.)	The system has a separate document type of advance directives (i.e. the system lets a user see that an advance directive is on file by looking at a summary or similar page for a given patient). Users can use the existence of that document type or not to determine if an advance directive is on file.	No (standard functionality)	No	No
§170.314(d)(1) Authentication, access control, and authorization (Verify against a unique identifier(s) (that is, username or number) that a person seeking access to electronic health information is the one claimed; and establish the type of access to electronic health information a user is permitted based on the unique identifier(s) provided in paragraph (d)(1)(i) of this section, and the actions the user is permitted to perform with the EHR technology.)	The system uses unique usernames for each user with individual passwords. The system has the following features related to user access limitations: strong password requirements, role segregation and separation, multi-factor authentication and prevention of recycling user names.	No (standard functionality)	No	Clients are responsible for establishing role segregation rights.
§170.314(d)(5) Automatic log-off (Prevent a user from gaining further access to an electronic session after a predetermined time of inactivity.)	This is standard functionality with a default of 60 minutes.	No (standard functionality)	No	Clients have some configuration capability here to increase or decrease the time period.
§170.314(d)(6) Emergency access (Permit an identified set of users to access electronic health information during an emergency.)	Users are able to access the system 24x7. The administrative user account has full access rights.	No (standard functionality)	No	No

<p>§170.314(d)(8) Integrity (Create a message digest in accordance with the standard specified in §170.210(c). Verify in accordance with the standard specified in §170.210(c) upon receipt of electronically exchanged health information that such information has not been altered.)</p>	<p>All changes in the system are automatically logged. The administrative user can generate a report showing changes that have occurred. Messages are handled in accordance with international HL7 standards. Messages exchanged use SHA-1 or stronger hashing algorithms.</p>	<p>No (standard functionality)</p>	<p>No</p>	<p>No</p>
<p>§170.314(g)(1) Automated numerator recording (For each meaningful use objective with a percentage based measure, EHR technology must be able to create a report or file that enables a user to review the patients or actions that would make the patient or action eligible to be included in the measure's numerator. The information in the report or file created must be of sufficient detail such that it enables a user to match those patients or actions to meet the measure's denominator limitations when necessary to generate an accurate percentage.)</p>	<p>All records are maintained on a per-patient basis. The system has a standard report that allows activity within a patient's account to be displayed (along with general use of the system across all patients). This would allow validation of numerator and denominator activity accordingly.</p>	<p>No (standard functionality)</p>	<p>No</p>	<p>No</p>
<p>§170.314(g)(4) Quality management system (For each capability that an EHR technology includes and for which that capability's certification is sought, the use of a Quality Management System (QMS) in the development, testing, implementation and maintenance of that capability must be identified. (i) If a single QMS was used for applicable capabilities, it would only need to be identified once. (ii) If different QMS were applied to specific capabilities, each QMS applied would need to be identified. This would include the application of a QMS to some capabilities and none to others (iii) If no QMS was applied to all applicable capabilities such a response is acceptable to satisfy this certification criterion.)</p>	<p>Streamline Health has a review protocol developed for the release of all solution aspects.</p>	<p>No (standard functionality)</p>	<p>Clients must be active on maintenance (or on a SaaS/subscription model) to receive patches, fixes, etc.</p>	<p>Clients who run the solution in-house are responsible for testing and deployment of the solution in their environment. The update/patch/fix is tested generally before release as part of the release process.</p>