## MEDITECH's Client/Server v5.66 Receives ONC-ACB Modular Certifications by Drummond Group

September 12, 2013 -- Canton, MA USA -- MEDITECH's Client/Server v5.66 has been tested and certified under the Drummond Group's Electronic Health Records Office of the National Coordinator Authorized Certification Body (ONC-ACB) program. This EHR software is compliant in accordance with the criteria adopted by the Secretary of the U.S. Department of Health and Human Services.

Drummond Group's ONC-ACB certification program certifies that EHRs meet the meaningful use criteria for either eligible provider or hospital technology. In turn, healthcare providers using the EHR systems of certified vendors are qualified to receive federal stimulus monies upon demonstrating meaningful use of the technology – a key component of the federal government's push to improve clinical care delivery through the adoption and effective use of EHRs by U.S. healthcare providers.

MEDITECH's Client/Server v5.66, which met the requirements for EHR Certification, is Modular EHR certified for:

- MEDITECH Client/Server Electronic Health Record Core HCIS v5.66
- MEDITECH Client/Server Data Repository v5.66
- MEDITECH Client/Server Emergency Department Management v5.66
- MEDITECH Client/Server Continuity of Care Interface (CCD) Suite v5.66
- MEDITECH Client/Server Electronic Laboratory Results to Ambulatory Providers Interface v5.66
- MEDITECH Client/Server Patient and Consumer Health Portal v5.66
- MEDITECH Client/Server Public Health Interfaces v5.66.

These Modular EHRs are 2014 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of the U.S. Department of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services or guarantee the receipt of incentive payments.

MEDITECH, 09/12/13, MEDITECH Client/Server Electronic Health Record						
Core HCIS v5.66, EHR Module is 2014 Edition compliant, Certificate No. 09122013-1815-1						
<b>Certification Criteria</b>	Clinical Quality	Additional software				
Tested	Measures Tested	used				
170.314(a)(1-17)	No Clinical Quality	DrFirst for e-prescribing				
170.314(b)(1, 3, 4, 5)	Measures tested					
170.314(d)(1-9)						
170.314(f)(1)						
170.314(g)(2, 3, 4)						
MEDITECH, 09/12/13,	MEDITECH Client/Server I	Data Repository v5.66,				
EHR Module is 2014 Edition compliant, Certificate No. 09122013-1816-1						
<b>Certification Criteria</b>	Clinical Quality	Additional software				
Tested	<b>Measures Tested</b>	used				
170.314(c)(1-3)	CMS30v2, CMS32v2,	MEDITECH Client/Server				
170.314(g)(2, 4)	CMS53v1, CMS55v1,	Electronic Health Record				
	CMS60v1, CMS71v2,	Core HCIS v5.66, MS SQL				
	CMS72v1, CMS73v1,	Server				
	CMS91v2, CMS100v1,					

170.314(f)(2, 3, 4) 170.314(g)(4)	No Clinical Quality Measures tested	MEDITECH Client/Server Electronic Health Record				
Certification Criteria Tested	Clinical Quality Measures Tested	Additional software used				
MEDITECH, 09/12/13, MEDITECH Client/Server Public Health Interfaces v5.66, EHR Module is 2014 Edition compliant, Certificate No. 09122013-1818-1						
		Core HCIS v5.66				
170.314(e)(1), 170.314(g)(2, 4)	No Clinical Quality Measures tested	MEDITECH Client/Server Electronic Health Record				
Certification Criteria Tested	Clinical Quality Measures Tested	Additional software used				
09122013-1817-1	R Module is 2014 Edition c					
	MEDITECH Client/Server P					
170.314(b)(6), 170.314(g)(2, 4)	No Clinical Quality Measures tested	MEDITECH Client/Server Electronic Health Record Core HCIS v5.66				
Certification Criteria Tested	Clinical Quality Measures Tested	used				
<b>Edition compliant, Certif</b>	icate No. 09122013-1813					
	MEDITECH Client/Server Eleroviders Interface v5.66,					
(3)( ) ,		Core HCIS v5.66				
170.314(b)(1, 2, 4, 7) 170.314(g)(2, 3, 4)	No Clinical Quality Measures tested	MEDITECH Client/Server Electronic Health Record				
Certification Criteria Tested	Clinical Quality Measures Tested	Additional software used				
Certificate No. 0912201	3-1814-1					
	MEDITECH Client/Server Co 5.66, EHR Module is 2014					
170.314(g)(2, 3, 4)		,				
170.314(d)(1-9) 170.314(f)(1)		Core HCIS v5.66, DrFirst for e-prescribing				
170.314(a)(1-17) (b)(1, 3, 4, 5)	No Clinical Quality Measures tested	MEDITECH Client/Server Electronic Health Record				
Tested	Measures Tested	used				
09122013-1819-1 Certification Criteria	Clinical Quality	Additional software				
MEDITECH, 09/12/13, MEDITECH Client/Server Emergency Department  Management v5.66, EHR Module is 2014 Edition compliant, Certificate No.						
MEDITECH 09/12/13 N	CMS114v1, CMS190v1	mergency Department				
	CMS105v1, CMS107v1, CMS108v1, CMS109v1, CMS110v1, CMS111v1,					
	CMS102v1, CMS104v1,					

**2014 Edition Pricing Transparency**MEDITECH Client/Server v5.66 Pricing Transparency Statement.

## **About MEDITECH**

MEDITECH has been the leader in the EHR industry since 1969. MEDITECH's applications

unify clinical, administrative, and financial information across a health care organization, including acute care, long-term care, home health care, and physician practices. Today, more than 2,300 institutions worldwide use MEDITECH's information systems. For additional information on MEDITECH products and services, visit <a href="http://home.meditech.com/en/d/home/">http://home.meditech.com/en/d/home/</a>.

## **About Drummond Group Inc.**

Drummond Group Inc. is a global software test and certification lab that serves a wide range of vertical industries. In healthcare, Drummond Group tests and certifies Controlled Substance Ordering Systems (CSOS), Electronic Prescription of Controlled Substances (EPCS) software and processes, and Electronic Health Records (EHRs) – designating the trusted test lab as the only third-party certifier of all three initiatives designed to move the industry toward a digital future. Founded in 1999, and accredited for the Office of the National Coordinator HIT Certification Program as an Authorized Certification Body (ACB) and an Authorized Test Lab (ATL), Drummond Group continues to build upon its deep experience and expertise necessary to deliver reliable and cost-effective services. For more information, please visit <a href="http://www.drummondgroup.com">http://www.drummondgroup.com</a> or email <a href="mailto:DGI@drummondgroup.com">DGI@drummondgroup.com</a>.

Legend

Criterion #	Certification Criterion Name
§170.314(a)(1)	Computerized provider order entry
§170.314(a)(10)	Drug-formulary checks
§170.314(a)(11)	Smoking status
§170.314(a)(12)	Image results
§170.314(a)(13)	Family health history
§170.314(a)(14)	Patient list creation
§170.314(a)(15)	Patient-specific education resources
§170.314(a)(16)	Electronic medication administration record
§170.314(a)(17)	Advance directives
§170.314(a)(2)	Drug-drug, drug-allergy interactions checks
§170.314(a)(3)	Demographics
§170.314(a)(4)	Vital signs, body mass index, and growth charts
§170.314(a)(5)	Problem list
§170.314(a)(6)	Medication list
§170.314(a)(7)	Medication allergy list
§170.314(a)(8)	Clinical decision support
§170.314(a)(9)	Electronic notes
§170.314(b)(1)	Transitions of care – receive, display and incorporate transition of care/referral summaries
§170.314(b)(2)	Transitions of care – create and transmit transition of care/referral summaries
§170.314(b)(3)	Electronic prescribing
§170.314(b)(4)	Clinical information reconciliation
§170.314(b)(7)	Data portability
§170.314(c)(1)	Clinical quality measures – capture and export

§170.314(c)(2)	Clinical quality measures – import and calculate
§170.314(c)(3)	Clinical quality measures – electronic submission
§170.314(d)(1)	Authentication, access, control, and authorization
§170.314(d)(2)	Auditable events and tamper-resistance
§170.314(d)(3)	Audit report(s)
§170.314(d)(4)	Amendments
§170.314(d)(5)	Automatic log-off
§170.314(d)(6)	Emergency access
§170.314(d)(7)	End-user device encryption
§170.314(d)(8)	Integrity
§170.314(d)(9)	Accounting of disclosures
§170.314(f)(1)	Immunization information
§170.314(f)(2)	Transmission to immunization registries
§170.314(f)(3)	Transmission to public health agencies – syndromic surveillance
§170.314(f)(4)	Transmission of reportable laboratory tests and values/results
§170.314(g)(1)	Automated numerator recording
§170.314(g)(2)	Automated measure calculation
§170.314(g)(3)	Safety-enhanced design
§170.314(g)(4)	Quality management system

Inpatient Clinical Quality Measures Measure	Domain	NQF#
riedsuie		1191 #
CMS9 Exclusive Breast Milk Feeding	Process/Effectiveness	
CMS26 Home Management Plan of Care (HMPC)  Document Given to Patient/Caregiver	Patient & Family Engagement	NQF 0338
CMS30 AMI-10 Statin Prescribed at Discharge	Clinical Process/Effectiveness	NQF 0639
CMS31 EHDI-1a - Hearing screening prior to hospital discharge	Clinical Process/Effectiveness	NQF 1354
CMS32 ED-3-Median time from ED arrival to ED departure for discharged ED patients.	Care Coordination	NQF 0496
CMS53 AMI-8a- Primary PCI Received Within 90 Minutes of Hospital Arrival	Clinical Process/Effectiveness	NQF 0163
CMS55 Emergency Department (ED)-1 Emergency Department Throughput – Median time from ED arrival to ED departure for admitted ED patients	Patient & Family Engagement	NQF 0495
CMS60 AMI-7a- Fibrinolytic Therapy Received Within 30 minutes of Hospital Arrival	Clinical Process/Effectiveness	NQF 0164
CMS71 Stroke-3 Ischemic stroke – Anticoagulation Therapy for Atrial Fibrillation/Flutter	Clinical Process/Effectiveness	NQF 0436
CMS72 Stroke-5 Ischemic stroke – Antithrombotic therapy by end of hospital day	Clinical Process/Effectiveness	NQF 0438

two		
CMS73 VTE-3 VTE Patients with Anticoagulation	Clinical	NQF 0373
OverlapTherapy	Process/Effectiveness	1101 0373
CMS91 Stroke-4 Ischemic stroke – Thrombolytic	Clinical	NQF 0437
	Process/Effectiveness	
CMS100 AMI-2-Aspirin Prescribed at Discharge		NQF 0142
for AMI	Process/Effectiveness	
CMS102 Stroke-10 Ischemic or hemorrhagic	Care Coordination	NQF 0441
stroke - Assessed for Rehabilitation		
CMS104 Stroke-2 Ischemic stroke – Discharged	Clinical	NQF 0435
on anti-thrombotic therapy	Process/Effectiveness	
CMS105 Stroke-6 Ischemic stroke – Discharged	Clinical	NQF 0439
on Statin Medication	Process/Effectiveness	
CMS107 Stroke-8 Ischemic or hemorrhagic	Patient & Family	NQF 0440
stroke – Stroke education	Engagement	
CMS108 Venous Thromboembolism (VTE)-1 VTE	Patient Safety	NQF 0371
prophylaxis		
CMS109 VTE-4 VTE Patients Receiving		NQF 0374
Unfractionated Heparin (UFH) with	Process/Effectiveness	
Dosages/Platelet Count Monitoring by Protocol		
(or Nomogram)		
CMS110 VTE-5 VTE discharge instructions	Patient & Family	NQF 0375
	Engagement	
- · ·	Patient & Family	NQF 0497
Throughput – admitted patients – Admit decision	Engagement	
time to ED departure time for admitted patients		
CMS113 PC-01 Elective Delivery Prior to 39		NQF 0469
Completed Weeks Gestation	Process/Effectiveness	
CMS114 VTE-6 Incidence of potentially	Patient Safety	NQF 0376
preventable VTE	D .: C . C .	NOE 0507
	Patient Safety	NQF 0527
Received within 1 Hour Prior to Surgical Incision	-cc:	NOT 0500
CMS172 SCIP-INF-2-Prophylactic Antibiotic		NQF 0528
Selection for Surgical Patients	Healthcare Resources	NOE 04E2
	Patient Safety	NQF 0453
on Postoperative Day 1 (POD1) or Postoperative		
Day 2 (POD2) with day of surgery being day		
Zero.	Dationt Cafety	NOE 0716
,	Patient Safety	NQF 0716
CMS188 PN-6- Initial Antibiotic Selection for	Efficient Use of	NQF 0147
Community-Acquired Pneumonia (CAP) in	Healthcare Resources	
Immunocompetent Patients		
CMS190 VTE-2 Intensive Care Unit (ICU) VTE	Patient Safety	NQF 0372
prophylaxis		