



## 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:** BlueStrata EMR  
**Product Version:** 1.6.9  
**Domain:** Inpatient  
**Test Type:** Modular EHR

#### 1.2 Developer/Vendor Information

**Developer/Vendor Name:** BlueStrata EMR  
**Address:** 11477 Olde Cabin Road #450 St. Louis MO 63141  
**Website:** <http://www.bluestrataemr.com>  
**Email:** [tom.siepman@bluestrataemr.com](mailto:tom.siepman@bluestrataemr.com)  
**Phone:** 888-538-4604  
**Developer/Vendor Contact:** Tom Siepman



## Part 2: ONC-Authorized Certification Body Information


### 2.1 ONC-Authorized Certification Body Information

**ONC-ACB Name:** Drummond Group  
**Address:** 13359 North Hwy 183, Ste B-406-238, Austin, TX 78750  
**Website:** [www.drummondgroup.com](http://www.drummondgroup.com)  
**Email:** [ehr@drummondgroup.com](mailto:ehr@drummondgroup.com)  
**Phone:** 817-294-7339  
**ONC-ACB Contact:** Bill Smith

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

Bill Smith  
**ONC-ACB Authorized Representative**

Certification Committee Chair  
**Function/Title**

  
9/12/2014  
**Signature and Date**

### 2.2 Gap Certification

The following identifies criterion or criteria certified via gap certification

§170.314			
<input type="checkbox"/> (a)(1)	<input type="checkbox"/> (a)(17)	<input type="checkbox"/> (d)(5)	<input type="checkbox"/> (d)(9)
<input type="checkbox"/> (a)(6)	<input type="checkbox"/> (b)(5)*	<input type="checkbox"/> (d)(6)	<input type="checkbox"/> (f)(1)
<input type="checkbox"/> (a)(7)	<input type="checkbox"/> (d)(1)	<input type="checkbox"/> (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			
<input type="checkbox"/> (a)(1)	<input type="checkbox"/> (a)(14)	<input type="checkbox"/> (c)(3)	<input type="checkbox"/> (f)(1)
<input type="checkbox"/> (a)(2)	<input type="checkbox"/> (a)(15)	<input type="checkbox"/> (d)(1)	<input type="checkbox"/> (f)(2)
<input type="checkbox"/> (a)(3)	<input type="checkbox"/> (a)(16) <i>Inpt. only</i>	<input type="checkbox"/> (d)(2)	<input type="checkbox"/> (f)(3)
<input type="checkbox"/> (a)(4)	<input type="checkbox"/> (a)(17) <i>Inpt. only</i>	<input type="checkbox"/> (d)(3)	<input type="checkbox"/> (f)(4) <i>Inpt. only</i>
<input type="checkbox"/> (a)(5)	<input type="checkbox"/> (b)(1)	<input type="checkbox"/> (d)(4)	<input type="checkbox"/> (f)(5) <i>Optional &amp; Amb. only</i>
<input type="checkbox"/> (a)(6)	<input type="checkbox"/> (b)(2)	<input type="checkbox"/> (d)(5)	
<input type="checkbox"/> (a)(7)	<input type="checkbox"/> (b)(3)	<input type="checkbox"/> (d)(6)	<input type="checkbox"/> (f)(6) <i>Optional &amp; Amb. only</i>
<input type="checkbox"/> (a)(8)	<input type="checkbox"/> (b)(4)	<input type="checkbox"/> (d)(7)	
<input type="checkbox"/> (a)(9)	<input type="checkbox"/> (b)(5)	<input type="checkbox"/> (d)(8)	<input type="checkbox"/> (g)(1)
<input type="checkbox"/> (a)(10)	<input type="checkbox"/> (b)(6) <i>Inpt. only</i>	<input type="checkbox"/> (d)(9) <i>Optional</i>	<input type="checkbox"/> (g)(2)
<input type="checkbox"/> (a)(11)	<input type="checkbox"/> (b)(7)	<input type="checkbox"/> (e)(1)	<input type="checkbox"/> (g)(3)
<input type="checkbox"/> (a)(12)	<input type="checkbox"/> (c)(1)	<input type="checkbox"/> (e)(2) <i>Amb. only</i>	<input type="checkbox"/> (g)(4)
<input type="checkbox"/> (a)(13)	<input type="checkbox"/> (c)(2)	<input type="checkbox"/> (e)(3) <i>Amb. only</i>	

No inherited certification



### Part 3: NVLAP-Accredited Testing Laboratory Information

Report Number: [TEB-09112014-2957](#)

Test Date(s): [9/5/2014, 9/11/2014](#)

#### 3.1 NVLAP-Accredited Testing Laboratory Information

**ATL Name:** Drummond Group EHR Test Lab  
**Accreditation Number:** [NVLAP Lab Code 200979-0](#)  
**Address:** 13359 North Hwy 183, Ste B-406-238, Austin, TX 78750  
**Website:** [www.drummondgroup.com](http://www.drummondgroup.com)  
**Email:** [ehr@drummondgroup.com](mailto:ehr@drummondgroup.com)  
**Phone:** 512-335-5606  
**ATL Contact:** Beth Morrow

For more information on scope of accreditation, please reference [NVLAP Lab Code 200979-0](#).

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

[Timothy Bennett](#)

ATL Authorized Representative

9/12/2014

Signature and Date

Test Proctor

Function/Title

[Nashville, TN](#)

Location Where Test Conducted

#### 3.2 Test Information

##### 3.2.1 Additional Software Relied Upon for Certification

Additional Software	Applicable Criteria	Functionality provided by Additional Software

Additional Software	Applicable Criteria	Functionality provided by Additional Software
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No additional software required

### 3.2.2 Test Tools

Test Tool	Version
<input type="checkbox"/> Cypress	2.4.1
<input type="checkbox"/> ePrescribing Validation Tool	1.0.4
<input type="checkbox"/> HL7 CDA Cancer Registry Reporting Validation Tool	1.0.3
<input type="checkbox"/> HL7 v2 Electronic Laboratory Reporting (ELR) Validation Tool	1.8
<input type="checkbox"/> HL7 v2 Immunization Information System (IIS) Reporting Validation Tool	1.8
<input type="checkbox"/> HL7 v2 Laboratory Results Interface (LRI) Validation Tool	1.7
<input type="checkbox"/> HL7 v2 Syndromic Surveillance Reporting Validation Tool	1.7
<input type="checkbox"/> Transport Testing Tool	179
<input type="checkbox"/> Direct Certificate Discovery Tool	3.0.2

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)	<input type="checkbox"/> §170.204(b)(1) HL7 Version 3 Implementation Guide: URL-Based Implementations of the Context-Aware Information Retrieval (Infobutton) Domain	<input type="checkbox"/> §170.204(b)(2) HL7 Version 3 Implementation Guide: Context-Aware Knowledge Retrieval (Infobutton) Service-Oriented Architecture Implementation Guide



Criterion #	Standard Successfully Tested	
(a)(13)	<input type="checkbox"/> §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release	<input type="checkbox"/> §170.207(j) HL7 Version 3 Standard: Clinical Genomics; Pedigree
(a)(15)(i)	<input type="checkbox"/> §170.204(b)(1) HL7 Version 3 Implementation Guide: URL-Based Implementations of the Context-Aware Information Retrieval (Infobutton) Domain	<input type="checkbox"/> §170.204(b)(2) HL7 Version 3 Implementation Guide: Context-Aware Knowledge Retrieval (Infobutton) Service-Oriented Architecture Implementation Guide
(a)(16)(ii)	<input type="checkbox"/> §170.210(g) Network Time Protocol Version 3 (RFC 1305)	<input type="checkbox"/> §170.210(g) Network Time Protocol Version 4 (RFC 5905)
(b)(2)(i)(A)	<input type="checkbox"/> §170.207(i) The code set specified at 45 CFR 162.1002(c)(2) (ICD-10-CM) for the indicated conditions	<input type="checkbox"/> §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release
(b)(7)(i)	<input type="checkbox"/> §170.207(i) The code set specified at 45 CFR 162.1002(c)(2) (ICD-10-CM) for the indicated conditions	<input type="checkbox"/> §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 <i>[list encryption and hashing algorithms]</i> <input type="text"/> <input type="text"/>	
(e)(1)(ii)(A)(2)	<input type="checkbox"/> §170.210(g) Network Time Protocol Version 3 (RFC 1305)	<input type="checkbox"/> §170.210(g) Network Time Protocol Version 4 (RFC 5905)
(e)(3)(ii)	Annex A of the FIPS Publication 140-2 <i>[list encryption and hashing algorithms]</i> <input type="text"/> <input type="text"/>	
Common MU Data Set (15)	<input type="checkbox"/> §170.207(a)(3) IHTSDO SNOMED CT® International Release July 2012 and US Extension to SNOMED CT® March 2012 Release	<input type="checkbox"/> §170.207(b)(2) The code set specified at 45 CFR 162.1002(a)(5) (HCPCS and CPT-4)



Criterion #	Standard Successfully Tested
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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
<input type="checkbox"/> (a)(4)(iii)	Plot and display growth charts
<input type="checkbox"/> (b)(1)(i)(B)	Receive summary care record using the standards specified at §170.202(a) and (b) (Direct and XDM Validation)
<input type="checkbox"/> (b)(1)(i)(C)	Receive summary care record using the standards specified at §170.202(b) and (c) (SOAP Protocols)
<input type="checkbox"/> (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)
<input type="checkbox"/> (b)(2)(ii)(C)	Transmit health information to a Third Party using the standards specified at §170.202(b) and (c) (SOAP Protocols)
<input type="checkbox"/> (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)
<input type="checkbox"/> 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)
<input type="checkbox"/> 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
<input type="checkbox"/> (a)(1)	1.2	1.5	<input type="checkbox"/> (c)(3)	1.6	1.6
<input type="checkbox"/> (a)(2)	1.2		<input checked="" type="checkbox"/> (d)(1)	1.2	
<input type="checkbox"/> (a)(3)	1.2	1.4	<input type="checkbox"/> (d)(2)	1.5	
<input type="checkbox"/> (a)(4)	1.4	1.3	<input type="checkbox"/> (d)(3)	1.3	
<input type="checkbox"/> (a)(5)	1.4	1.3	<input type="checkbox"/> (d)(4)	1.3	
<input type="checkbox"/> (a)(6)	1.3	1.4	<input checked="" type="checkbox"/> (d)(5)	1.2	
<input type="checkbox"/> (a)(7)	1.3	1.3	<input checked="" type="checkbox"/> (d)(6)	1.2	
<input type="checkbox"/> (a)(8)	1.2		<input type="checkbox"/> (d)(7)	1.2	
<input type="checkbox"/> (a)(9)	1.3	1.3	<input checked="" type="checkbox"/> (d)(8)	1.2	
<input type="checkbox"/> (a)(10)	1.2	1.4	<input type="checkbox"/> (d)(9) <i>Optional</i>	1.2	
<input type="checkbox"/> (a)(11)	1.3		<input type="checkbox"/> (e)(1)	1.8	1.5
<input type="checkbox"/> (a)(12)	1.3		<input type="checkbox"/> (e)(2) <i>Amb. only</i>	1.2	1.6
<input type="checkbox"/> (a)(13)	1.2		<input type="checkbox"/> (e)(3) <i>Amb. only</i>	1.3	
<input type="checkbox"/> (a)(14)	1.2		<input type="checkbox"/> (f)(1)	1.2	1.2
<input type="checkbox"/> (a)(15)	1.5		<input type="checkbox"/> (f)(2)	1.3	1.7.1
<input type="checkbox"/> (a)(16) <i>Inpt. only</i>	1.3	1.2	<input type="checkbox"/> (f)(3)	1.3	1.7
<input type="checkbox"/> (a)(17) <i>Inpt. only</i>	1.2		<input type="checkbox"/> (f)(4) <i>Inpt. only</i>	1.3	1.7
<input type="checkbox"/> (b)(1)	1.7	1.4	<input type="checkbox"/> (f)(5) <i>Optional &amp; Amb. only</i>	1.2	1.2
<input type="checkbox"/> (b)(2)	1.4	1.6	<input type="checkbox"/> (f)(6) <i>Optional &amp; Amb. only</i>	1.3	1.0.3
<input type="checkbox"/> (b)(3)	1.4	1.2	<input type="checkbox"/> (g)(1)	1.7	1.9
<input type="checkbox"/> (b)(4)	1.3	1.4	<input type="checkbox"/> (g)(2)	1.7	1.9
<input type="checkbox"/> (b)(5)	1.4	1.7	<input type="checkbox"/> (g)(3)	1.3	
<input type="checkbox"/> (b)(6) <i>Inpt. only</i>	1.3	1.7	<input checked="" type="checkbox"/> (g)(4)	1.2	
<input type="checkbox"/> (b)(7)	1.4	1.6			
<input type="checkbox"/> (c)(1)	1.6	1.6			
<input type="checkbox"/> (c)(2)	1.6	1.6			

No criteria tested

\*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
<input type="checkbox"/> 2		<input type="checkbox"/> 90		<input type="checkbox"/> 136		<input type="checkbox"/> 155	
<input type="checkbox"/> 22		<input type="checkbox"/> 117		<input type="checkbox"/> 137		<input type="checkbox"/> 156	
<input type="checkbox"/> 50		<input type="checkbox"/> 122		<input type="checkbox"/> 138		<input type="checkbox"/> 157	
<input type="checkbox"/> 52		<input type="checkbox"/> 123		<input type="checkbox"/> 139		<input type="checkbox"/> 158	
<input type="checkbox"/> 56		<input type="checkbox"/> 124		<input type="checkbox"/> 140		<input type="checkbox"/> 159	
<input type="checkbox"/> 61		<input type="checkbox"/> 125		<input type="checkbox"/> 141		<input type="checkbox"/> 160	
<input type="checkbox"/> 62		<input type="checkbox"/> 126		<input type="checkbox"/> 142		<input type="checkbox"/> 161	
<input type="checkbox"/> 64		<input type="checkbox"/> 127		<input type="checkbox"/> 143		<input type="checkbox"/> 163	
<input type="checkbox"/> 65		<input type="checkbox"/> 128		<input type="checkbox"/> 144		<input type="checkbox"/> 164	
<input type="checkbox"/> 66		<input type="checkbox"/> 129		<input type="checkbox"/> 145		<input type="checkbox"/> 165	
<input type="checkbox"/> 68		<input type="checkbox"/> 130		<input type="checkbox"/> 146		<input type="checkbox"/> 166	
<input type="checkbox"/> 69		<input type="checkbox"/> 131		<input type="checkbox"/> 147		<input type="checkbox"/> 167	
<input type="checkbox"/> 74		<input type="checkbox"/> 132		<input type="checkbox"/> 148		<input type="checkbox"/> 169	
<input type="checkbox"/> 75		<input type="checkbox"/> 133		<input type="checkbox"/> 149		<input type="checkbox"/> 177	
<input type="checkbox"/> 77		<input type="checkbox"/> 134		<input type="checkbox"/> 153		<input type="checkbox"/> 179	
<input type="checkbox"/> 82		<input type="checkbox"/> 135		<input type="checkbox"/> 154		<input type="checkbox"/> 182	

Inpatient CQMs							
CMS ID	Version	CMS ID	Version	CMS ID	Version	CMS ID	Version
<input type="checkbox"/> 9		<input type="checkbox"/> 71		<input type="checkbox"/> 107		<input type="checkbox"/> 172	
<input type="checkbox"/> 26		<input type="checkbox"/> 72		<input type="checkbox"/> 108		<input type="checkbox"/> 178	
<input type="checkbox"/> 30		<input type="checkbox"/> 73		<input type="checkbox"/> 109		<input type="checkbox"/> 185	
<input type="checkbox"/> 31		<input type="checkbox"/> 91		<input type="checkbox"/> 110		<input type="checkbox"/> 188	
<input type="checkbox"/> 32		<input type="checkbox"/> 100		<input type="checkbox"/> 111		<input type="checkbox"/> 190	
<input type="checkbox"/> 53		<input type="checkbox"/> 102		<input type="checkbox"/> 113			
<input type="checkbox"/> 55		<input type="checkbox"/> 104		<input type="checkbox"/> 114			
<input type="checkbox"/> 60		<input type="checkbox"/> 105		<input type="checkbox"/> 171			



### 3.2.8 Automated Numerator Recording and Measure Calculation

#### 3.2.8.1 Automated Numerator Recording

Automated Numerator Recording Successfully Tested			
<input type="checkbox"/> (a)(1)	<input type="checkbox"/> (a)(9)	<input type="checkbox"/> (a)(16)	<input type="checkbox"/> (b)(6)
<input type="checkbox"/> (a)(3)	<input type="checkbox"/> (a)(11)	<input type="checkbox"/> (a)(17)	<input type="checkbox"/> (e)(1)
<input type="checkbox"/> (a)(4)	<input type="checkbox"/> (a)(12)	<input type="checkbox"/> (b)(2)	<input type="checkbox"/> (e)(2)
<input type="checkbox"/> (a)(5)	<input type="checkbox"/> (a)(13)	<input type="checkbox"/> (b)(3)	<input type="checkbox"/> (e)(3)
<input type="checkbox"/> (a)(6)	<input type="checkbox"/> (a)(14)	<input type="checkbox"/> (b)(4)	
<input type="checkbox"/> (a)(7)	<input type="checkbox"/> (a)(15)	<input type="checkbox"/> (b)(5)	

Automated Numerator Recording was not tested

#### 3.2.8.2 Automated Measure Calculation

Automated Measure Calculation Successfully Tested			
<input type="checkbox"/> (a)(1)	<input type="checkbox"/> (a)(9)	<input type="checkbox"/> (a)(16)	<input type="checkbox"/> (b)(6)
<input type="checkbox"/> (a)(3)	<input type="checkbox"/> (a)(11)	<input type="checkbox"/> (a)(17)	<input type="checkbox"/> (e)(1)
<input type="checkbox"/> (a)(4)	<input type="checkbox"/> (a)(12)	<input type="checkbox"/> (b)(2)	<input type="checkbox"/> (e)(2)
<input type="checkbox"/> (a)(5)	<input type="checkbox"/> (a)(13)	<input type="checkbox"/> (b)(3)	<input type="checkbox"/> (e)(3)
<input type="checkbox"/> (a)(6)	<input type="checkbox"/> (a)(14)	<input type="checkbox"/> (b)(4)	
<input type="checkbox"/> (a)(7)	<input type="checkbox"/> (a)(15)	<input type="checkbox"/> (b)(5)	

Automated Measure Calculation was not tested

#### 3.2.9 Attestation

Attestation Forms (as applicable)	Appendix
<input type="checkbox"/> Safety-Enhanced Design*	A
<input checked="" type="checkbox"/> Quality Management System**	B
<input type="checkbox"/> Privacy and Security	C

\*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

Attached below.



### Test Results Summary Change History

Test Report ID	Description of Change	Date

## 2014 Edition Test Report Summary

Sept 5, 2014

Drummond Group  
13359 North Hwy 183  
Ste B-406-238  
Austin, TX 78750

Re: Quality Management System

The BlueStrata team makes a commitment to tracking new product features and quality issues in our electronic issue management & project tracking system. All customer issues are prioritized by our internal staff by using end-user input as a guide before engaging in design and development work. Our new product features are iteratively designed utilizing customer feedback and successively developed using AGILE methodologies. The final product undergoes unit, functional, regression and system testing throughout the software development lifecycle.

