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:	gMed Connect
Product Version:	Version 4.56
Domain:	Ambulatory
Test Type:	Complete EHR

1.2 Developer/Vendor Information

Developer/Vendor Name:	gMed, Inc.
Address:	2125 North Commerce Parkway Weston FL 33327
Website:	www.gmed.com
Email:	marinas@gmed.com
Phone:	(954)659-9310
Developer/Vendor Contact:	Marina Simonian

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
Email:	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

_____11/21/2014
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			
[x] (a)(1)	[x] (a)(14)	[x] (c)(3)	[x] (f)(1)
[x] (a)(2)	[x] (a)(15)	[x] (d)(1)	[x] (f)(2)
[x] (a)(3)	[ ] (a)(16) *Inpt. only*	[x] (d)(2)	[x] (f)(3)
[x] (a)(4)	[ ] (a)(17) *Inpt. only*	[x] (d)(3)	[ ] (f)(4) *Inpt. only*
[x] (a)(5)	[x] (b)(1)	[x] (d)(4)	[ ] (f)(5) *Optional & Amb. only*
[x] (a)(6)	[x] (b)(2)	[x] (d)(5)	
[x] (a)(7)	[x] (b)(3)	[x] (d)(6)	[ ] (f)(6) *Optional & Amb. only*
[x] (a)(8)	[x] (b)(4)	[x] (d)(7)	
[x] (a)(9)	[x] (b)(5)	[x] (d)(8)	[ ] (g)(1)
[x] (a)(10)	[ ] (b)(6) *Inpt. only*	[ ] (d)(9) *Optional*	[x] (g)(2)
[x] (a)(11)	[x] (b)(7)	[x] (e)(1)	[x] (g)(3)
[x] (a)(12)	[x] (c)(1)	[x] (e)(2) *Amb. only*	[x] (g)(4)
[x] (a)(13)	[x] (c)(2)	[x] (e)(3) *Amb. only*	

[ ] No inherited certification

Part 3: NVLAP-Accredited Testing Laboratory Information

Report Number: SG-11172014-6827

Test Date(s): N/A

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
Email:	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:

Sonia Galvan	Test Proctor
ATL Authorized Representative	**Function/Title**

Sonia Galvan 11/21/2014	N/A
Signature and Date	**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
Secure Exchange Solutions	170.314.b.1, 2; 170.314.e.1	HISP
DrFirst Rcopia	170.314.b.3	E-prescribing vendor
Health Language	170.314.a.13; 170.314.b.5	Medical Content Provider
LDM Group	170.314.a.15	Patient Education Provider

☐ No additional software required

3.2.2 Test Tools

	Test Tool	Version
x	Cypress	2.4.1
x	ePrescribing Validation Tool	1.0.4
☐	HL7 CDA Cancer Registry Reporting Validation Tool	1.0.3
☐	HL7 v2 Electronic Laboratory Reporting (ELR) Validation Tool	1.8
x	HL7 v2 Immunization Information System (IIS) Reporting Validation Tool	1.8
x	HL7 v2 Laboratory Results Interface (LRI) Validation Tool	1.7
x	HL7 v2 Syndromic Surveillance Reporting Validation Tool	1.7
x	Transport Testing Tool	179
x	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)	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)	x §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)	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)(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	x §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	x §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 [*list encryption and hashing algorithms*] AES-256 SHA-256	
(e)(1)(ii)(A)(2)	☐ §170.210(g) Network Time Protocol Version 3 (RFC 1305)	x §170. 210(g) Network Time Protocol Version 4 (RFC 5905)
(e)(3)(ii)	Annex A of the FIPS Publication 140-2 [*list encryption and hashing algorithms*] AES-256 SHA-256	
Common MU Data Set (15)	x §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 TP**	Version TD***	Criteria #	Version TP	Version TD
☐ (a)(1)	1.2	1.5	☐ (c)(3)	1.6	1.6
☐ (a)(2)	1.2		☐ (d)(1)	1.2	
☐ (a)(3)	1.2	1.4	☐ (d)(2)	1.5	
☐ (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*	1.2	
☐ (a)(11)	1.3		☐ (e)(1)	1.8	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	1.7.1
☐ (a)(16) *Inpt. only*	1.3	1.2	☐ (f)(3)	1.3	1.7
☐ (a)(17) *Inpt. only*	1.2		☐ (f)(4) *Inpt. only*	1.3	1.7
☐ (b)(1)	1.7	1.4	☐ (f)(5) *Optional & Amb. only*	1.2	1.2
☐ (b)(2)	1.4	1.6			
☐ (b)(3)	1.4	1.2	☐ (f)(6) *Optional & Amb. only*	1.3	1.0.3
☐ (b)(4)	1.3	1.4			
☐ (b)(5)	1.4	1.7	☐ (g)(1)	1.7	1.9
☐ (b)(6) *Inpt. only*	1.3	1.7	☐ (g)(2)	1.7	1.9
☐ (b)(7)	1.4	1.6	☐ (g)(3)	1.3	
☐ (c)(1)	1.6	1.6	☐ (g)(4)	1.2	
☐ (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:

[x] 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		[ ] 90		[ ] 136		[ ] 155	
[ ] 22		[ ] 117		[ ] 137		[x] 156	v2
[x] 50	v2	[x] 122	v2	[ ] 138		[ ] 157	
[ ] 52		[ ] 123		[ ] 139		[ ] 158	
[ ] 56		[ ] 124		[ ] 140		[ ] 159	
[ ] 61		[ ] 125		[ ] 141		[ ] 160	
[x] 62	v2	[x] 126	v2	[ ] 142		[ ] 161	
[ ] 64		[ ] 127		[ ] 143		[x] 163	v2
[ ] 65		[ ] 128		[ ] 144		[x] 164	v2
[ ] 66		[ ] 129		[ ] 145		[x] 165	v2
[x] 68	v3	[x] 130	v2	[ ] 146		[ ] 166	
[x] 69	v2	[ ] 131		[ ] 147		[ ] 167	
[ ] 74		[ ] 132		[ ] 148		[ ] 169	
[ ] 75		[ ] 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			
[ ] 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 Measure Calculation 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*	A
☒ Quality Management System**	B
☒ 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