Costs of Certified Health IT		
Capability	Description of Capability	Costs or Fees Types of costs or fees that a user may be required to pay to purchase, license, implement, maintain, upgrade, use, or otherwise enable and support the use of the implementation or use of the capability -OR- in connection with the data generated in the course using the capability
License-based Solution EHR Contract	MDnet EHR with all basic functionality for aprovider including erx.	Monthly EHR subscription per provider, additional cost may apply based on the functions enabled .
§170.315(a)(1)- CPOE-Medications	Enable user to record, change and access Medications electronically and paper order	No additional costs
§170.315(a)(2) - Computerized Provider Order Entry of Laboratory Orders	Enables a user to record, change, and access laboratory orders both electron- ically and paper orders.	No additional costs
§170.315(a)(3) - Computerized Provider Order Entry of Diagnostic Imaging Orders	Enables a user to record, change, and access diagnostic imaging (DI) orders both electronically and paper orders.	No additional costs
§170.315(a)(4) - Drug-Drug, Drug- Allergy Interac- tion Checks	Before a medication order is completed and acted upon during computerized provider order entry (CPOE), interven- tions must automatically indicate to a user's drug-drug interaction and drug-allergy contraindications based on a patient's active medication list and active medication allergy list. In addition, the user must be able to adjust the severity level of the interventions as well as the limit the ability to adjust the severities to a limited set of users or as a administrative function.	No additional costs
§170.315(a)(5) - De- mographics	Enables a user to record, change, and access patient demographic data including race, ethnicity, preferred lan- guage, sex, sexual orientation, gender identity, and date of birth.	No additional costs
§170.315(a)(6) - Prob- lem List	Enables a user to record, change, and access a patient's active problem list.	No additional costs

§170.315(a)(7) - Medi- cation List	Enables a user to record, change, and access a patient's active medication list and medication history.	No additional costs
§170.315(a)(8) - Medication Allergy List	Enables a user to record, change, and access a patient's active medica- tion allergy list as well as medication allergy history.	No additional costs
	Based on the Risk Analysis Setup , Physician can identify the risk catego- ries of patients along with associated plans (Completed/Pending) and thera- peutic treatment summary	No additional costs
§170.315(a)(9) - Clinical Decision Support	Enables the ability to automati- cally check whether a drug formulary exists for a given patient and medication.	No additional costs
§170.315(a)(10) - Drug		
Formulary		
§170.315(a)(11) - Smoking Status	Enables a user to record, change, and access the smoking status of a patient.	No additional costs
§170.315(a)(12) - Fami- ly Health History	Enables a user to record, change, and access a patient's family health history.	No additional costs

		No additional costs
		No additional costs
§170.315(a)(13) - Pa- tient Education	Enables a user to identify patient- specific education resources on data included in the patient's problem list and medication list. We have Real Info and Local Info buttons where online and local saved education ma- terials can be transferred to the pa- tients.	
§170.315(a)(14) - Implantable Device List	Enables a user to record, parse, and display implant information based on an Unique Device Identifier.	
§170.315(b)(1) - Transitions of Care	Enables a user to send and receive transitions of care via edge protocol, validate and display C-CDAs, and create transition of care/referral summaries.	A Yearly fee is associated with Direct Messaging per provider. The fee will be paid to EHI
§170.315(b)(2) - Clinical Information Reconciliation and Incorporation	Enables a user to match an incoming Continuity of Care Document or Refer- ral note to the applicable patient and reconcile and incorporate the Medica- tions, Medication Allergies, and Problem List from the listed document tem- plates based on criterion standards.	No additional costs
§170.315(b)(3) - Electronic Prescribing	Enables a user to perform the follow- ing prescription- related electronic transactions: new prescription (NEWRX), cancel prescriptions (CANRX, CANRES), Refill prescrip- tions (REFREQ, REFRES), Receive fill status notifications (RXFILL), re-	No additional costs
	quest and receive electronic medication history information (RXHREQ, RXHRES).	

	Allow user to export single patient or population export through	No additional costs
§170.315(b)(10) - EHI Export	EMR. Note: Population export can be requested only by Authorized users	ivo additional costs
§170.315(c)(1-3) - Clinical Quality Measures - Record and export, Import and calculate, and Report.	Enable a user to import a data file in accordance with the standard specified for one or multiple patients and use such data to perform the capability to calculate each and every clinical quali- ty measure for which it is presented for certification. A user must be able to execute this capability at any time the user chooses and without subsequent developer assistance to operate.	Exporting QRDA file require a Yearly fees per provider
§170.315(d)(1) - Au- thentication, Access Control, Authorization	Enables the ability to verify against a unique identifier(s) that a user seeking access to electronical health infor- mation is one claimed, and establish the type of access to electronic health information a user is permitted based on the unique identifier(s) and the actions the user is permitted to perform	No additional costs
§170.315(d)(2) - Au- ditable Events and Tamper-resistance	Enables the ability to record actions related to electronic health information, record the audit log status, record en- cryption status, have a default setting, restrictions on disabling audit logs when permitted, audit log protection, and alteration detection all per criterion specified standards	No additional costs
§170.315(d)(3) - Audit Reports	Enables a user to create an audit report for a specific time period and to sort entries in the audit log according criterion specified standards.	No additional costs
§170.315(d)(4) - Amendments	Enables a user to select the record affected by a patient's request for amendment and the ability to accept or deny amendments.	No additional costs
§170.315(d)(5) - Auto- matic Access Time- out	Enables an automatic stop to user's access to health information after a predetermined amount of inactivity and requires authentication in order to resume or regain the access that was stopped.	No additional costs

§170.315(d)(6) - Emergency Access	Enables the ability to permit an identi- fied set of users to access electronic health information during an emergen- cy.	No additional costs
§170.315(d)(7) - End-user Device Encryption	Technology designed to prevent health information from being locally stored on end-user devices after use of the technology on those devices stops.	No additional costs
§170.315(d)(8) - Integrity	Enables the ability to create a mes- sage digest and verify upon receipt of electronically exchanged health infor- mation that such information has not been altered according to the criterion specified standard.	No additional costs
§170.315(d)(9) - Trust- ed Connection	Enables the ability to create a trusted connection according the criterion specified standards.	No additional costs
§170.315(d)(11) - Accounting of Disclosures	The recording of disclosures made for treatment, payment, and health care operations in accordance with the crite- rion specified standards.	No additional costs
§170.315(e)(1) - View, Download and Transmit to third-	Enables the ability for patients to use internet-based technology (patient Portal) to view, download, and trans-	No additional costs
party	mit their health information to a third- party in the criterion specified manner.	
§170.315(e)(2) - Se- cure Messaging	Enables users to send messages and to receive messages from a patient to physician and vice versa in a secured manner.	No additional costs
§170.315(e)(3)	Enables a user to identify, record, and access information directly and electronically shared by a patient (or authorized representative) and reference and link to patient health information documents.	No additional costs
- Patient Health Infor- mation Cap- ture		

Enables the ability to create immuniza- tion information for electronic	No additional costs
transmis- sion in accordance with criterion standards and enables users to re- quest, access, and display a patient's evaluation immunization history and the immunization forecast from an immunization registry in accordance with criterion standards.	No additional costs
	No additional costs
Enables the ability to create syn- drome-based public health sur-	
veillance information for electronic transmissions in accordance with criterion standards.	
For each EHR Incentive Programs percentage-based measure that is supported by a capability included in a technology, it enables the ability to	No additional costs
record the numerator and denominator and create a report including numera- tor, denominator, and resulting total percentage associated with each ap- plicable measure and the compliance benchmark against each measure.	
SED as Per NIST standard, refer SED file on ONC Website	No additional costs
	No additional costs
API for access patient data se- curely by patient, patient author- ized rep and care team.	A setup, implementation and maintenance fee will be charged for API access to third party vendors
	users to re- quest, access, and display a patient's evaluation immunization history and the immunization forecast from an immunization registry in accordance with criterion standards. Enables the ability to create syn- drome-based public health surveillance information for electronic transmissions in accordance with criterion standards. For each EHR Incentive Programs percentage-based measure that is supported by a capability included in a technology, it enables the ability to record the numerator and denominator and create a report including numera- tor, denominator, and resulting total percentage associated with each ap- plicable measure and the compliance benchmark against each measure. SED as Per NIST standard, refer SED file on ONC Website

§170.315(h)(1) - Direct Project	Direct Messaging enable user to have direct mailing capabilities send and receive.	Direct Messaging is a yearly subscription per provider paid to EHI
§170.315(g)(10)- Application Access: Standardized API for Patient and Population Services	API for access patient data se- curely by patient, patient author- ized rep and care team.	A setup, implementation and maintenance fee will be charged for API access to third party vendors