

## I. Disclaimer for 2015 Edition Products

This Health IT Module is 2015 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services."

## II. Certified Product Information

Developer Name	Indian Health Service
Product Name	Resource and Patient Management System Electronic Clinical Quality Measure (ecqm) reporting tool
Version	1.0
Certification number	IG-2419-18-0031
Certification Date	August 31, 2018
Certification Criteria	170.315(c)1-3; 170.315(d)1-3,5; 170.315(g)4-5
CQMs Certified	CMS156v6 Use of High-Risk Medications in the Elderly CMS165v6 Controlling High Blood Pressure CMS122v6 Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) CMS134v6 Diabetes: Medical Attention for Nephropathy CMS32v7 Median Time from ED Arrival to ED Departure for Discharged ED Patients CMS55v6 Median Time from ED Arrival to ED Departure for Admitted ED Patients CMS111v6 Median Admit Decision Time to ED Departure Time for Admitted Patients CMS131v6 Diabetes: Eye Exam CMS127v6 Pneumococcal Vaccination Status for Older Adults CMS139v6 Falls: Screening for Future Fall Risk CMS9v6 Exclusive Breast Milk Feeding CMS31v6 Hearing Screening Prior To Hospital Discharge CMS113v6 Elective Delivery CMS71v7 Anticoagulation Therapy for Atrial Fibrillation/Flutter CMS72v6 Antithrombotic Therapy By End of Hospital Day 2 CMS102v6 Assessed for Rehabilitation CMS104v6 Discharged on Antithrombotic Therapy CMS105v6 Discharged on Statin Medication CMS107v6 Stroke Education CMS108v6 Venous Thromboembolism Prophylaxis CMS190v6 Intensive Care Unit Venous Thromboembolism Prophylaxis

## III. Additional types of costs

There are no additional costs.

## IV. Contractual Limitations

RPMS is classified as public domain software.

## V. Technical Limitations

There are no technical limitations that could prevent or impair successful implementation and use of the system.

## I. Disclaimer for 2014 Edition Products

This Complete EHR is 2014 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services.

## II. Certified EHR Vendor & Product Information

Vendor/Developer	Indian Health Service
Certified EHR Name	Resource and Patient Management System
Certified EHR Version	RPMS Suite (BCER) v2.0
InfoGard Certification#	Ambulatory: IG-2419-14-0020 Inpatient: IG-2419-14-0021
Certification Date	8/27/2014
Certification Criteria	Complete EHR
<p><b>Ambulatory Clinical Quality Measures</b></p> <p>CMS2v4 Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan            CMS50v3 Closing the Referral Loop: Receipt of Specialist Report            CMS68v4 Documentation of Current Medications in the Medical Record            CMS69v3 Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan            CMS75v3 Children Who Have Dental Decay or Cavities            CMS90v4 Functional Status Assessment for Complex Chronic Conditions            CMS117v3 Childhood Immunization Status            CMS126v3 Use of Appropriate Medications for Asthma            CMS136v4 ADHD: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication            CMS138v3 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention            CMS146v3 Appropriate Testing for Children with Pharyngitis            CMS153v3 Chlamydia Screening for Women            CMS154v3 Appropriate Treatment for Children with Upper Respiratory Infection (URI)            CMS155v3 Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents            CMS156v3 Use of High-Risk Medications in the Elderly            CMS165v3 Controlling High Blood Pressure            CMS166v4 Use of Imaging Studies for Low Back Pain</p>	
<p><b>Inpatient Clinical Quality Measures</b></p> <p>CMS9v3 Exclusive Breast Milk Feeding            CMS26v2 Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver            CMS30v4 Statin Prescribed at Discharge            CMS31v3 Hearing Screening Prior To Hospital Discharge            CMS32v4 Median Time from ED Arrival to ED Departure for Discharged ED Patients            CMS55v3 Median Time from ED Arrival to ED Departure for Admitted ED Patients            CMS60v3 Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival            CMS71v4 Anticoagulation Therapy for Atrial Fibrillation/Flutter            CMS72v3 Antithrombotic Therapy By End of Hospital Day 2            CMS73v3 Venous Thromboembolism Patients with Anticoagulation Overlap Therapy            CMS91v4 Thrombolytic Therapy            CMS104v3 Discharged on Antithrombotic Therapy            CMS107v3 Stroke Education            CMS111v3 Median Admit Decision Time to ED Departure Time for Admitted Patients            CMS110v3 Venous Thromboembolism Discharge Instructions            CMS 185v3 Healthy Term Newborn</p>	

Additional Software Required	Encryption Software (Symantec Endpoint Encryption, 7Zip, or Credent2Go), InterSystems Ensemble, Microsoft Windows 7, Texas Children’s Hospital Forecaster, and VueCentric.
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**III. Transparency and Disclosures**

(A) Additional types of costs that a user may be required to pay include:

RPMS is classified as public domain software. Nationally released applications (non-restricted) can be downloaded at <ftp://ftp.ihs.gov/RPMS/patches/>. Additional types of costs excluded from the public domain license include software mentioned in Section II “Additional Software” and licenses for applicable standardized terminologies. For Tribal and Urban Programs who wish to subscribe to the RPMS Network, reimbursement provisions are described in the Multi-Purpose Agreement (MPA) and the MPA Joinder Agreement which can be found at: <https://www.ihs.gov/meaningfuluse/>

(B) Limitations that a user may encounter in the course of implementing and using the Complete EHR or Health IT Module’s capabilities include:

In order to demonstrate Meaningful Use for Secure Messaging, Summary of Care and Patient Electronic Access (View/Download/Transmit), Federal, Tribal and Urban programs for the Indian Health System must subscribe to the RPMS Network. Query based exchange will be supported through the IHS Health Information Exchange. Transmission of secure protected health information is supported through RPMS Direct, however, users can only exchange messages with other DirectTrust accredited Trust anchor bundle members.