

Costs and Limitations Disclosure
For Paragon®
2015 Edition
Certified Products

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General Costs and Limitations Disclosure

Paragon® offers EHR functionality for hospitals. Paragon® Release 14.1 is certified as 2015 Edition Health Information Technology, for the capabilities listed in the Detailed Disclosure section of this document.

General Costs

A one-time software license fee and annual maintenance fee are required for Paragon®. Additional third party fees may apply. Customers may purchase hardware from McKesson or a third party. Service fees apply to the initial implementation. There is a service fee for assistance in upgrading from a previous version of Paragon®. There is a one-time fee for comprehensive education and implementation services pertaining to Meaningful Use.

McKesson offers hosting for Paragon® or customers may self host or utilize a third party for hosting. McKesson hosting for Paragon® requires annual hosting service fees for the duration of the hosting agreement.

The Detailed Disclosure section in this document indicates if a specific capability requires additional costs.

Contractual Obligations

Contracts are required for purchasing Paragon® software and services. Software licenses are perpetual with a tiered pricing model based on the operating expense of the licensed healthcare facilities.

Technical or Practical Limitations

The Detailed Disclosure section in this document indicates if technical or practical limitations pertain to a specific capability.

Detailed Costs and Limitations Disclosure

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Computerized provider order entry (CPOE) – medications § 170.315(a)(1)	This functionality allows users to electronically record, change and access medication orders. The reason for the order may also be entered.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the Meaningful Use services is required.	None
Computerized Provider Order Entry – Laboratory §170.315(a)(2)	This functionality enables users to record, change, and access laboratory orders.	No additional fees apply.	No additional contracting is required.	None
Computerized provider order entry – diagnostic imaging. §170.315(a)(3)	This functionality enables users to record, change, and access diagnostic imaging orders.	No additional fees apply.	No additional contracting is required.	None
Drug-Drug, Drug-Allergy Interaction Checks for CPOE §170.315(a)(4)	This functionality allows users to perform drug-drug, drug-allergy interaction checks during CPOE.	No additional fees apply.	No additional contracting is required.	None
Demographics §170.315(a)(5)	This functionality enables users to record, change, and access patient demographic data including race, ethnicity, preferred language, sex, sexual orientation, gender identity, and date of birth. For inpatients it also provides the ability for users to record, change, and access the preliminary cause of death and date of death in the event of mortality.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the Meaningful Use services is required.	None

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Problem List §170.315(a)(6)	This functionality enables users to record, change, and access a patient's active problem list.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Medication List §170.315(a)(7)	This functionality enables users to record, change, and access a patient's active medication list as well as medication history.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Medication Allergy List §170.315(a)(8)	This functionality enables users to record, change, and access a patient's active medication allergy list as well as medication allergy history.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Clinical Decision Support §170.315(a)(9)	This functionality provides Clinical Decision Support interventions to users, ability to configure intervention and reference resources, evidence-based decision support interventions, linked referential Clinical Decision Support and ability to view source attributes.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. A one-time software license fee and annual maintenance fee for Microsoft® BizTalk® 2013 are required.	A contract for the comprehensive Meaningful Use services is required. Microsoft® BizTalk® 2013 also requires contracting.	None
Drug-formulary and preferred drug list checks § 170.315(a)(10)	This functionality automatically performs a check for a drug formulary for a given patient and medication. It also automatically checks whether a preferred drug list exists for a given patient and medication.	No additional fees apply.	No additional contracting is required.	None
Smoking Status § 170.315(a)(11)	This functionality enables users to record, change, and access the smoking status of a patient.	No additional fees apply.	No additional contracting is required.	None
Family Health History § 170.315(a)(12)	This functionality enables users to record, change, and access a patient's family health history.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None

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Patient-specific education resources § 170.315(a)(13)	This functionality enables users to electronically identify educational resources about a patient's problem or medication.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. A software license fee and annual maintenance fee for third party education content is required.	A contract for the comprehensive Meaningful Use services is required. Third party education content also requires contracting.	Education content from Truven Health Analytics is required.
Implantable device list § 170.315(a)(14)	This functionality allows users to record and access the Unique Device Identifiers, descriptions and attributes associated with a patient's Implantable Devices.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Transitions of care § 170.315(b)(1)	This functionality allows users to send transition of care/referral summaries; receive transition of care/referral summaries; and receive and make available the contents of an XDM package when using an SMTP-based edge protocol.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. Yearly OE based subscription cost is required for use of Direct Messaging.	A contract for the comprehensive Meaningful Use services and subscription for the exchange services are required.	XDR standard compliance is required. A server for NIST validation is required.
Clinical information reconciliation and incorporation § 170.315(b)(2)	This functionality provides the ability to match a transition of care/referral summary received to the correct patient. It also enables users to reconcile the patient's active medication list, medication allergy list, and problem list.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required	None
Electronic Prescribing § 170.315(b)(3)	This functionality enables users to perform all of the following prescription-related electronic transactions: Create new prescriptions (NEWRX); Change prescriptions (RXCHG, CHGRES); Cancel prescriptions (CANRX, CANRES); Refill prescriptions (REFREQ, REFRES); Receive fill status notifications (RXFILL); Request	This requires the Paragon EPCS functionality for which there is an annual subscription fee. Initial EPCS implementation requires a services fee.	A contract is required for the initial EPCS purchase.	None

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	and receive medication history information (RXHREQ, RXHRES).			
Common Clinical Data Set summary record – create § 170.315(b)(4)	This functionality enables users to create a transition of care/referral summary using the Continuity of Care CDA, Referral Note CDA, and (for inpatient setting only) Discharge Summary CDA document templates.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Common Clinical Data Set summary record – receive § 170.315(b)(5)	This functionality enables users to receive a transition of care/referral summary using the Continuity of Care CDA, Referral Note CDA, and (for inpatient setting only) Discharge Summary CDA document templates.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Data Export § 170.315(b)(6)	This functionality enables users to create export summaries using the Continuity of Care CDA. This includes the ability to set configuration options when creating an export summary. It also provides the ability to limit the ability of users who can create export summaries.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Authentication, access control, authorization § 170.315(d)(1)	This functionality verifies against a unique identifier(s) (e.g., username or number) that a user seeking access to electronic health information is the one claimed. It also establishes the type of access to electronic health information a user is permitted based on the unique identifier(s),	No additional fees apply.	No additional contracting is required.	None

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Auditable events and tamper-resistance § 170.315(d)(2)	This functionality records actions related to electronic health information; records the audit log status (enabled or disabled) unless it cannot be disabled by any user; It also provides audit log protection as well as the ability to detect whether the audit log has been altered. Since the product does not allow local storage of electronic health information the recording of the encryption status (enabled or disabled) of electronic health information locally stored on end-user devices by technology does not apply.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	None
Audit report(s) § 170.315(d)(3)	This functionality enables users to create an audit report for a specific time period and to sort entries in the audit log for actions related to electronic health information, audit log status and encryption of end user devices.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. Hardware upgrades of the Audit server require a fee for technical assistance.	A contract for the comprehensive Meaningful Use services is required. If a hardware upgrade for the Audit server is needed then a contract for technical services is required.	An Audit server is required.
Amendments § 170.315(d)(4)	This functionality enables users to select the record affected by a patient's request for amendment and append the amendment if accepted, or append the request and denial if denied	No additional fees apply.	No additional contracting is required.	None
Automatic access time-out § 170.315(d)(5)	This functionality automatically stops user access to health information after a predetermined period of inactivity. It requires user authentication in order to resume or regain access.	No additional fees apply.	No additional contracting is required.	None

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Emergency access § 170.315(d)(6)	This functionality permits an identified set of users to access electronic health information during an emergency.	No additional fees apply.	No additional contracting is required.	None
End-user device encryption § 170.315(d)(7)	This functionality encrypts electronic health information stored locally on end-user devices.	No additional fees apply.	No additional contracting is required.	None
Integrity § 170.315(d)(8)	This functionality provides integrity protection controls for data received during an exchange.	No additional fees apply.	No additional contracting is required.	None
Trusted connection § 170.315(d)(9)	This functionality provides the ability to establish a trusted connection.	No additional fees apply.	No additional contracting is required.	None
Accounting of disclosures § 170.315(d)(11)	This functionality records disclosures made for treatment, payment, and health care operations.	No additional fees apply.	No additional contracting is required.	None
View, download, and transmit to 3rd party § 170.315(e)(1)	This functionality allows patients (and their authorized representatives) to use internet-based technology to view, download, and transmit their health information to a 3rd party.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. Yearly OE based subscription cost is required for use of Direct Messaging.	A contract for the comprehensive Meaningful Use services and subscription for the exchange services are required.	XDR standard compliance is required.
Secure messaging § 170.315(e)(2)	This functionality enables users to send messages to, and receive messages from, a patient in a secure manner.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. Yearly OE based subscription cost is required for use of Direct Messaging.	A contract for the comprehensive Meaningful Use services and subscription for the exchange services are required.	XDR standard compliance is required.

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Patient health information capture § 170.315(e)(3)	This functionality enables users to identify, record, and access information directly and electronically shared by a patient (or authorized representative). Enable a user to reference and link to patient health information documents.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required.	
Transmission to Immunization Registries § 170.315(f)(1)	This functionality allows users to submit patient immunization data to public health registries. It also provides the ability to request, access and display a patient's evaluated immunization history and forecast from an immunization registry.	This requires a one-time fee to implement the 2015 Edition interface with an immunization registry. This applies to first-time implementations with an immunization registry as well as migrations from the 2014 Edition interface since the 2015 Edition adds a query to the registry.	A contract for the one-time implementation service is required.	Supported transport protocols are TCP/IP and SOAP web services. If a registry requires a different transport method then the use of an interface engine or a third party service may be required.
Transmission to public health agencies – syndromic surveillance § 170.315(f)(2)	This functionality allows users to create and transmit syndrome-based public health surveillance information to public health agencies.	This requires a one-time fee to implement the 2015 Edition interface with a public health agency. This applies to first-time implementations with a public health agency. The one-time Meaningful Use services fee includes assistance when migrating from the 2014 Edition interface.	A contract for the one-time implementation service is required. When migrating from the 2014 Edition interface, a contract for the comprehensive Meaningful Use services is required.	Supported transport protocols are TCP/IP and FTP. If a registry requires a different transport method then the use of an interface engine or a third party service may be required.
Transmission to public health agencies – reportable laboratory tests and value/results § 170.315(f)(3)	This functionality allows users to submit reportable lab tests and results to public health agencies.	This requires a one-time fee to implement the interface with a public health agency. This applies only to first-time implementations with a public health agency because the standards for 2015 Edition did not change from 2014 Edition.	A contract for the one-time implementation service is required.	Supported transport protocols are TCP/IP and FTP. If a registry requires a different transport method then the use of an interface engine or a third party service may be required. This requires the Paragon Laboratory module.

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Transmission to public health agencies – antimicrobial use and resistance reporting § 170.315(f)(6)	This functionality allows users to create and transmit antimicrobial use and resistance CDAs to the CDC’s NHSN system based on NHSN reporting criteria and requirements. Supported transport protocol is Direct Messaging per NHSN’s requirements.	This requires a one-time fee to implement the interface with the CDC’s NHSN system.	A contract for the one-time implementation service is required.	This requires the Paragon Laboratory and Microbiology modules.
Automated measure calculation § 170.315(g)(2)	This functionality records the numerator and denominator and creates a report including the numerator, denominator, and resulting percentage associated with each applicable EHR Incentive Program percentage-based measure.	None	Meaningful Use Reports are included in base Paragon software	None
Safety-enhanced design § 170.315(g)(3)	User-centered design processes were applied to: § 170.315 (a)(1) Computerized Provider Order Entry (CPOE) – medication § 170.315 (a)(2) CPOE – laboratory § 170.315 (a)(3) CPOE – diagnostic imaging § 170.315 (a)(4) Drug-drug, Drug-allergy Interaction Checks for CPOE § 170.315 (a)(5) Demographics § 170.315 (a)(6) Problem List § 170.315 (a)(7) Medication List § 170.315 (a)(8) Medication Allergy List § 170.315 (a)(9) Clinical Decision Support § 170.315 (a)(14) Implantable Device List § 170.315 (b)(2) Clinical Information Reconciliation and Incorporation	None	None	None

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	§ 170.315 (b)(3) Electronic Prescribing			
Quality system management § 170.315(g)(4)	A Quality Management System was used in the development, testing, implementation, and maintenance of the capabilities included in this document.	None	None	None
Accessibility-centered design § 170.315(g)(5)	For each capability that a Health IT Module includes and for which that capability's certification is sought, the use of a health IT accessibility-centered design standard or law in the development, testing, implementation and maintenance of that capability must be identified.	None	None	None
Consolidated CDA creation performance § 170.315(g)(6)	This functionality provides the ability to generate C-CDAs for the Continuity of Care, Discharge Summary and Referral Note document templates, in accordance with the HL7 C-CDA Release 2.1 Implementation Guide. These C-CDAs match the gold standard reference data files and use the required vocabulary standards and value sets. They include all of the data in the Common Clinical Data Set.	The one-time Meaningful Use services fee includes assistance in implementing this functionality.	A contract for the comprehensive Meaningful Use services is required	None
Application access – patient selection § 170.315(g)(7)	This functionality provides the ability to receive a request with sufficient information to uniquely identify a patient and return an ID or other token that can be used by an application to	A subscription fee for exchange services applies.	A contract for the comprehensive Meaningful Use services and subscription for exchange services are required.	FHIR standard is supported

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	subsequently execute requests for that patient's data.			
Application access – data category request § 170.315(g)(8)	This functionality provides the ability via a FHIR-based API to respond to requests for and return patient data for each category in the Common Clinical Data Set.	A subscription fee for exchange services applies.	A contract for the comprehensive Meaningful Use services and subscription for exchange services are required.	FHIR standard is supported
Application access – all data request § 170.315(g)(9)	This functionality provides the ability via a FHIR-based API to respond to requests for and return at one time patient data for all categories in the Common Clinical Data Set.	A subscription fee for exchange services applies.	A contract for the comprehensive Meaningful Use services and subscription for exchange services are required.	FHIR standard is supported
Direct Project § 170.315(h)(1)	This functionality provides the ability to send and receive health information in accordance with the Direct standards defined by the Applicability Statement for Secure Health Transport version 1.2.	The one-time Meaningful Use services fee includes assistance in implementing this functionality. Yearly OE based subscription cost is required for use of Direct Messaging. (Refer to 170.315(e)(1).)	A contract for the comprehensive Meaningful Use services and subscription for exchange services are required.	XDR standard compliance is required.