

## Test Procedure for §170.314 (d)(2) Auditable events and tamper-resistance

This document describes the test procedure for evaluating conformance of Complete EHRs or EHR modules to the certification criteria defined in 45 CFR Part 170 Subpart C of the Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule. The document<sup>1</sup> is organized by test procedure and derived test requirements with traceability to the normative certification criteria as described in the Overview document located at [available when final]. The test procedures may be updated to reflect on-going feedback received during the certification activities.

The HHS/Office of the National Coordinator for Health Information Technology (ONC) has defined the standards, implementation guides and certification criteria used in this test procedure. Applicability and interpretation of the standards, implementation guides and certification criteria to EHR technology is determined by ONC. Testing of EHR technology in the Permanent Certification Program, henceforth referred to as the ONC HIT Certification Program<sup>2</sup>, is carried out by National Voluntary Laboratory Accreditation Program-Accredited Testing Laboratories (ATLs) as set forth in the final rule establishing the Permanent Certification Program (*Establishment of the Permanent Certification Program for Health Information Technology, 45 CFR Part 170; February 7, 2011.*)

Questions or concerns regarding the ONC HIT Certification Program should be directed to ONC at [ONC.Certification@hhs.gov](mailto:ONC.Certification@hhs.gov).

### CERTIFICATION CRITERIA

This certification criterion is from the Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule issued by the Department of Health and Human Services (HHS) on September 4, 2012.

§170.314(d)(2) Auditable events and tamper-resistance.

(i) Record actions. EHR technology must be able to:

- (A) Record actions related to electronic health information in accordance with the standard specified in § 170.210(e)(1);
- (B) Record the audit log status (enabled or disabled) in accordance with the standard specified in § 170.210(e)(2) unless it cannot be disabled by any user; and

<sup>1</sup> Disclaimer: Certain commercial products may be identified in this document. Such identification does not imply recommendation or endorsement by ONC.

<sup>2</sup> Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule

(C) Record the encryption status (enabled or disabled) of electronic health information locally stored on end-user devices by EHR technology in accordance with the standard specified in § 170.210(e)(3) unless the EHR technology prevents electronic health information from being locally stored on end-user devices (see 170.314(d)(7) of this section).

(ii) Default setting. EHR technology must be set by default to perform the capabilities specified in paragraph (d)(2)(i)(A) of this section and, where applicable, paragraphs (d)(2)(i)(B) or (d)(2)(i)(C), or both paragraphs (d)(2)(i)(B) and (C).

(iii) When disabling the audit log is permitted. For each capability specified in paragraphs (d)(2)(i)(A), (B), and (C) of this section that EHR technology permits to be disabled, the ability to do so must be restricted to a limited set of identified users.

(iv) Audit log protection. Actions and statuses recorded in accordance with paragraph (d)(2)(i) must not be capable of being changed, overwritten, or deleted by the EHR technology.

(v) Detection. EHR technology must be able to detect whether the audit log has been altered.

Per Section III.A of the preamble of the Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule, the 2014 Edition of this certification criterion is classified as revised from the 2011 Edition. This certification criterion meets at least one of the three factors of revised certification criteria: (1) the certification criterion includes changes to capabilities that were specified in the previously adopted certification criterion, (2) the certification criterion has a new mandatory capability that was not included in the previously adopted certification criterion, or (3) the certification criterion was previously adopted as “optional” for a particular setting and is subsequently adopted as “mandatory” for that setting.

Per Section III.A of the preamble of the Health Information Technology: Standards, Implementation Specifications, and certification criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule where the auditable events and tamper-resistance certification criterion is discussed:

- “...expansion included the specific capabilities that the audit log must be enabled by default (i.e., turned on), immutable (i.e., unable to be changed, overwritten, or deleted), and able to record not only which action(s) occurred, but more specifically the electronic health information to which the action applies.”
- “...the ability to enable and disable the recording of actions [should] be limited to an identified set of users (e.g., system administrator).”
- “...a revised standard at § 170.210(e)...require[s] that: 1) when the audit log is enabled or disabled, the date and time (in accordance with the standard specified at § 170.210(g) (synchronized clocks)), user identification, and the action(s) that occurred must be recorded; and 2) as applicable, when encryption for end-user devices managed by EHR technology is enabled or disabled, the date and time (in accordance with the standard specified at § 170.210(g) (synchronized clocks)), user identification, and the actions that occurred must be recorded.”

- “We acknowledge that 2014 Edition EHR technology will need to be setup and configured at each practice or hospital in which EHR technology with this capability is installed. This certification criterion is not meant to prohibit such configuration...what this certification criterion expresses...is that in order to for the EHR technology to be certified it must be set by default to record the actions and information specified in the standards referenced by the certification criterion. Thus...at the point of installation or upgrade EHR technology certified to this 2014 Edition EHR certification criterion...will be set by default for an EP, EH, or CAH...”
- “... [We] believe that it is appropriate for actions made to electronic health information and recorded in the audit log to be identified at a categorical (or type) level – this is also consistent with the guidance included in ASTM E2147-01(2009).”
- “...we acknowledge that there is only so much that is within the control of EHR technology and that nothing is ever 100% impenetrable. Thus, we have revised this specific capability within the certification criterion to state that the audit log must not be capable of being changed, overwritten, or deleted by the EHR technology.”

Per Section III.D of the preamble of the Health Information Technology: Initial Set of Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, Final Rule where audit log certification criterion is discussed:

- “While we believe that in most cases a user will be a health care professional performing an action using Certified EHR Technology, it is also possible that a device or another software process or program could perform any one of these actions. We do not intend to preclude Complete EHR and EHR Module developers from including these and other types of specific features.”

## CHANGES FROM 2011 TO 2014 EDITION

Per Section III.A of the preamble of the Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule where the authentication, access control, and authorization certification criterion is discussed:

- “We proposed two revised certification criteria at § 170.314(d)(2) and (3) – one focused on the capability to record auditable events and another focused on the capability to create audit reports – in place of the single 2011 Edition EHR certification criterion for audit logs adopted at § 170.302(r).”
- “We also proposed to move the specific capability “detection” from the integrity certification criterion (§ 170.302(s)(3)) to the proposed auditable events and tamper-resistance certification criterion.”

- “We made these proposals based on HITSC recommendations as well as stakeholder feedback that indicated splitting the 2011 Edition certification criterion into two separate certification criteria would permit a wider variety of EHR technologies to be certified as EHR Modules.”
- “Thus, the standards we express now refer to the appropriate sections of ASTM E2147-01(2009), rather than an enumerated list.”

## INFORMATIVE TEST DESCRIPTION

This section provides an informative description of how the test procedure is organized and conducted. It is not intended to provide normative statements of the certification requirements.

This test procedure evaluates the capability for the EHR technology to:

- Be set by default to record actions related to electronic health information in an audit log, and record audit log status or encryption status
- Permit disabling of audit logs, audit log status, and encryption status to be restricted to a limited set of identified users
- Record actions related to electronic health information in an audit log. Information to be recorded for each action includes the date and time of the event, patient identification, user identification, type of action, and identification of the patient data that was accessed
- Protect actions and statuses related to recording of electronic health information, audit log status, and encryption status from being changed, overwritten, or deleted by the EHR technology
- Detect when the audit log has been altered

The test also verifies that when the audit log function records the date and time of an action related to electronic health information, that the EHR utilizes a system clock that has been synchronized following (RFC<sub>3</sub> 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4.

The Tester is encouraged to reuse the results of other related test procedures to gain efficiencies in the EHR technology test process.

The Vendor supplies the data for this test procedure.

This test procedure uses the term “audit log” to refer to the “record [of] actions related to electronic health information”. For example, “disabling audit logs” is meant to convey the action of disabling the recording of actions related to electronic health information.

This test procedure is organized into five sections:

- Record Default Setting—evaluates that the EHR technology has the capability to be set by default to record actions related to electronic health information and, where applicable, to record either audit log status or encryption status, or to record both audit log status and encryption status

- The Vendor identifies the EHR function(s) that specify default configuration settings for recording actions related to electronic health information in an audit log
  - Where applicable, the Vendor identifies the EHR function(s) that specify the default configuration settings of the audit log status (enabled or disabled)
  - Where applicable, the Vendor identifies the EHR function(s) that specify the default configuration settings of the encryption status (enabled or disabled) of electronic health information stored locally on end-user devices by EHR technology
  - The Tester examines the EHR technology setting that specifies default configuration settings for recording actions related to electronic health information and verifies that the function can be set to perform by default
  - Where applicable, the Tester examines the EHR technology setting that specifies default configuration settings for recording the audit log status and verifies that the function can be set to perform by default
  - Where applicable, the Tester examines the EHR technology setting that specifies default configuration for recording the encryption status of electronic health information stored locally on end-user devices and verifies that the function can be set to perform by default
- Permit Audit Log Disabling—evaluates the capability of the EHR technology, as applicable, to restrict disabling of audit logs, disabling of audit log status, and disabling of encryption status to a limited set of identified users

The test steps in each of the following sections of “Permit Audit Log Disabling” apply if the EHR technology allows a user to perform the disabling functions described. If the EHR technology itself is not capable of performing the described functions, but rather, uses a third party solution, the Tester may determine how the disabling functions are verified.

- Permit Disabling of Audit Logs:  
As the EHR technology permits,
  - The Vendor identifies the EHR function(s) that
    - allow a user to disable audit logs
    - enable specification of a limited set of identified users to disable audit logs
  - The Vendor sets up and identifies test user accounts which have and do not have permission to disable audit logs
  - The Tester reviews the Vendor-identified EHR function(s) that allow audit logs to be disabled and establishes that the user has permission to change the audit logs
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user without permission to disable audit logs and verifies that the user is not permitted to disable audit logs
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user with permission to disable audit logs and verifies that the audit logs can be disabled

- The Tester verifies that the date, time, and user identification related to disabling the are recorded in the audit log entry
- Permit Disabling of Audit Log Status  
As the EHR technology permits,
  - The Vendor identifies the EHR function(s) that allow a user to disable the audit log status (enabled or disabled)
  - The Vendor identifies the EHR function(s) that enable specification of a limited set of identified users to disable the audit log status
  - The Vendor identifies unique identifiers and authentication information that allow a user to access the EHR technology both with and without permissions to disable the audit log status
  - The Tester reviews the Vendor-identified EHR function(s) that allow the audit log status to be disabled and establishes that the identifier has permission to change the audit log status
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user without permission to disable the audit log status and verifies that the ability to disable the function is not allowed
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user with permission to disable the audit log status and verifies that the audit log status can be disabled
  - The Tester verifies that the date, time, and user identification related to disabling the audit log status are recorded in the audit log entry
- Permit Disabling of Encryption Status  
As the EHR technology permits,
  - The Vendor identifies the EHR function(s) that allow a user to disable the encryption status
  - The Vendor identifies the EHR function(s) that enable specification of a limited set of identified users to disable the encryption status
  - The Vendor identifies the EHR function(s) that are available to assign permission to disable the encryption status
  - The Vendor identifies unique identifiers and authentication information that allow a user to access the EHR technology both with and without permissions to disable the encryption status
  - The Tester reviews the Vendor-identified EHR function(s) that allow the encryption status to be disabled and establishes that the identifier has permission to change the encryption status
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user without permission to disable the encryption status and verifies that the ability to disable the function is not allowed
  - Using the Vendor-provided identifier and authentication information, the Tester accesses the EHR as a user with permission to disable the audit log status and verifies that the encryption status can be disabled



- The Tester verifies that the date, time, and user identification related to disabling the encryption status are recorded in the audit log entry
- Record Actions—evaluates the capability of the EHR technology audit log function to record information related to an action that is made in respect to electronic health information while the EHR technology is in use
  - The Vendor identifies the EHR function(s) that are available for a user to perform actions (additions, deletions changes, queries, print and copy) related to electronic health information
  - The Vendor identifies EHR function(s) that are available to record actions (these will be automatic functions used to create audit log entries) related to electronic health information
  - The Vendor provides an identifier and authentication information that allow a user to access the EHR technology
  - The Vendor identifies a patient with an existing record in the EHR to be used for this test and a set of electronic health test data for the patient
  - The Tester uses Vendor-identified EHR function(s) to perform the following actions and verify that the actions were performed successfully:
    - Addition
    - Deletion
    - Change
    - Query
    - Print
    - Copy
  - The Tester verifies that an audit log entry related to each action taken has been generated correctly
  - The Tester verifies that the EHR technology audit log function records data elements related to each action listed above, including:
    - Date and time of event
    - Patient identification
    - User identification
    - Type of action (additions, deletions, changes, queries, print, copy)
    - Identification of the patient data that is accessed
  - Note: While section 7.7 of the audit log content standard, “Identification of the Patient Data that is Accessed (optional)” is specified as optional in the context of the standard, it is a data element that is required to be recorded by the audit log function as part of certification criterion §170.314.d.2.i.A, in accordance with §170.210.e.1
- Protect Audit Log—evaluates the capability of the EHR technology to prevent audit logs from being changed, overwritten or deleted by the EHR technology, including recording of actions related to electronic health information, recording of audit log status, and recording of encryption status
  - The Vendor identifies the EHR function(s) that are available to assign permissions to a user
  - Using the Vendor-identified EHR function(s), the Tester reviews the actions the user is permitted to perform with the EHR technology

- The Tester accesses the EHR using the unique identifier and authentication information
  - The Tester performs an action authorized by the assigned permissions
  - The Tester verifies that the performed action was recorded in the audit log (i.e. audit log event)
  - The Tester attempts to change the audit log event and verifies that the attempt was unsuccessful
  - The Tester attempts to overwrite the audit log event and verifies that the attempt was unsuccessful
  - The Tester attempts to delete the audit log event and verifies that the attempt was unsuccessful
- **Detect Audit Log Alteration**—evaluates the capability of the EHR technology to detect whether the audit log has been altered
    - The Vendor identifies the EHR function(s) that are available to create and read hash values of the audit log
    - Using the Vendor-identified EHR function(s), the Tester creates a hash value for the audit log (i.e. original audit log)
    - The Tester performs a new action related to electronic health information and verifies that the action was recorded in the audit log (i.e. audit log event)
    - Using the Vendor-identified EHR function(s), the Tester creates a hash value for the audit log that includes the new audit log event (i.e. changed audit log)
    - The Tester outputs and stores the hash values for comparison
    - The Tester compares the hash values for the original audit log and the changed audit log that includes the new audit log event
    - The Tester compares the two hash values created to verify that the EHR technology was able to detect that the audit log has been altered

## REFERENCED STANDARDS

§ 170.210 Standards for health information technology to protect electronic health information created, maintained, and exchanged.

Regulatory Referenced Standard

The Secretary adopts the following standards to protect electronic health information created, maintained, and exchanged:

(e)(1) Record actions related to electronic health information, audit log status, and encryption of end-user devices. (i) The audit log must record the information specified in sections 7.2 through 7.4, 7.6, and 7.7 of the standard specified at § 170.210(h) when EHR technology is in use. (ii) The date and time must be recorded in accordance with the standard specified at § 170.210(g).



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(e)(2) (i) The audit log must record the information specified in sections 7.2 and 7.4 of the standard specified at § 170.210(h) when the audit log status is changed. (ii) The date and time each action occurs in accordance with the standard specified at § 170.210(g).

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(e)(3) The audit log must record the information specified in sections 7.2 and 7.4 of the standard specified at § 170.210(h) when the encryption status of electronic health information locally stored by EHR technology on end-user devices is changed. The date and time each action occurs in accordance with the standard specified at § 170.210(g).

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170.210(g) Synchronized clocks. The date and time recorded utilize a system clock that has been synchronized following (RFC 1305) Network Time Protocol, (incorporated by reference in § 170.299) or (RFC 5905) Network Time Protocol Version 4, (incorporated by reference in § 170.299).

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170.210(h) Audit log content. ASTM E2147-01 (Reapproved 2009), (incorporated by reference in § 170.299)

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## NORMATIVE TEST PROCEDURES

### Network Time Protocol (NTP) Test

The test steps below must be performed by the Vendor and the results validated by the Tester prior to beginning the test steps in the Derived Test Requirements.

NTP170.314.a.16 – 1.01: The Vendor shall choose a time server from the list below, used by the NIST Internet Time Service (ITS), and shall add it to their NTP software configuration

**Note: All users should ensure that their software NEVER queries a server more frequently than once every 4 seconds. Systems that exceed this rate will be refused service. In extreme cases, systems that exceed this limit may be considered as attempting a denial-of-service attack.**

Name	IP Address	Location
nist1-ny.ustiming.org	64.90.182.55	New York City, NY
nist1-nj.ustiming.org	96.47.67.105	Bridgewater, NJ
nist1-pa.ustiming.org	206.246.122.250	Hatfield, PA
time-a.nist.gov	129.6.15.28	NIST, Gaithersburg, Maryland
time-b.nist.gov	129.6.15.29	NIST, Gaithersburg, Maryland

nist1.aol-va.symmetricom.com	64.236.96.53	Reston, Virginia
nist1.columbiacountyga.gov	216.119.63.113	Columbia County, Georgia
nist1-atl.ustiming.org	64.250.177.145	Atlanta, Georgia
nist1-chi.ustiming.org	216.171.120.36	Chicago, Illinois
nist-chicago (No DNS)	38.106.177.10	Chicago, Illinois
nist.time.nosc.us	96.226.123.117	Carrollton, Texas
nist.expertsmi.com	50.77.217.185	Monroe, Michigan
nist.netservicesgroup.com	64.113.32.5	Southfield, Michigan
nisttime.carsoncity.k12.mi.us	66.219.116.140	Carson City, Michigan
nist1-lnk.binary.net	216.229.0.179	Lincoln, Nebraska
www.nist.gov	24.56.178.140	WWV, Fort Collins, Colorado
time-a.timefreq.blrdoc.gov	132.163.4.101	NIST, Boulder, Colorado
time-b.timefreq.blrdoc.gov	132.163.4.102	NIST, Boulder, Colorado
time-c.timefreq.blrdoc.gov	132.163.4.103	NIST, Boulder, Colorado
time.nist.gov	global address for all servers	Multiple locations
utcnist.colorado.edu	128.138.140.44	University of Colorado, Boulder
utcnist2.colorado.edu	128.138.141.172	University of Colorado, Boulder
ntp-nist.ldsbc.edu	198.60.73.8	LDSBC, Salt Lake City, Utah
nist1-lv.ustiming.org	64.250.229.100	Las Vegas, Nevada
time-nw.nist.gov	131.107.13.100	Microsoft, Redmond, Washington
nist-time-server.eoni.com	216.228.192.69	La Grande, Oregon
nist1.aol-ca.symmetricom.com	207.200.81.113	Mountain View, California
nist1.symmetricom.com	69.25.96.13	San Jose, California
nist1-sj.ustiming.org	216.171.124.36	San Jose, California
nist1-la.ustiming.org	64.147.116.229	Los Angeles, California

- NTP170.314.a.16 – 1.02: After configuring NTP, the Vendor shall wait 15 minutes to ensure synchronization occurs
- NTP170.314.a.16 – 1.03: Using the NTP logs, the Vendor and Tester shall verify that the system time is within one-second accuracy of the NIST time server chosen in NTP170.314.a.16 – 1.01
- NTP170.314.a.16 – 1.04: The Vendor shall construct or use an existing display in the EHR system that shows the time from the system clock and the EHR time for comparison (these times should be synchronized to within one second)
- NTP170.314.a.16 – 1.05: The Tester shall verify, via the NTP logs, that the system time is synchronized to the NIST time server to within one second; and then the Tester shall verify, via the EHR display, that the EHR time is synchronized to the system time to within one second

### **Derived Test Requirements**

- DTR170.314.d.2 – 1: Default Setting
- DTR170.314.d.2 – 2: Permit Audit Log Disabling
- DTR170.314.d.2 – 3: Record Actions
- DTR170.314.d.2 – 4: Audit Log Protection
- DTR170.314.d.2 – 5: Detection of Audit Log Alteration

### **DTR170.314.d.2 – 1: Default Setting**

#### Required Vendor Information

- VE170.314.d.2 – 1.01: The Vendor shall identify the EHR function(s) that specify default configuration settings for recording actions related to electronic health information
- VE170.314.d.2 – 1.02: Where applicable, the Vendor shall identify the EHR function(s) that specify default configuration settings for recording the audit log status (enabled or disabled)
- VE170.314.d.2 – 1.03: Where applicable, the Vendor shall identify the EHR function(s) that specify the default configuration settings for recording the encryption status (enabled or disabled) of electronic health information stored locally on end-user devices by EHR technology
- VE170.314.d.2 – 1.04: The Vendor shall identify a patient with an existing record in the EHR to be used for this test and a set of electronic health test data for the patient

#### Required Test Procedures

- TE170.314.d.2 – 1.01: The Tester shall determine that the EHR technology has a default audit log setting to record actions related to electronic health information
- TE170.314.d.2 – 1.02: Where applicable, the Tester shall determine that the EHR technology has a default audit log setting to record the audit log status (enabled or disabled)

TE170.314.d.2 – 1.03: Where applicable, the Tester shall determine that the EHR technology has a default audit log setting to record the encryption status (enabled or disabled) of electronic health information locally stored on end-user devices by EHR technology

#### Inspection Test Guide

IN170.314.d.2 – 1.01: Where applicable, the Tester shall verify that the default setting for audit logs is enabled

IN170.314.d.2 – 1.02: Where applicable, the Tester shall verify that the default setting for recording audit log status is enabled

IN170.314.d.2 – 1.03: Where applicable, the Tester shall verify that the default audit log setting for recording the encryption status (enabled or disabled) of electronic health information locally stored on end-user devices by EHR technology is enabled

#### **DTR170.314.d.2 – 2: Permit Audit Log Disabling**

##### Require Vendor Information

VE170.314.d.2 – 2.01: As the EHR technology permits, the Vendor shall identify the EHR function(s) that are available for a user to disable 1) audit logs, 2) the audit log status, or 3) the encryption status

VE170.314.d.2 – 2.02: As the EHR technology permits, the Vendor shall identify the EHR function(s) that enable specification of a limited set of identified users to disable: 1) the audit log, 2) the audit log status, or 3) the encryption status

VE170.314.d.2 – 2.03: Where applicable, the Vendor shall provide user account and associated authentication information for a user authorized to disable: 1) audit logs, 2) the audit log status, or 3) the encryption status

VE170.314.d.2 – 2.04: Where applicable, the Vendor shall provide user account and associated authentication information for users who are not authorized to make changes to 1) audit logs, 2) the audit log status, or 3) the encryption status

##### Required Test Procedures

- If the EHR technology allows a user to disable audit logs, the Tester shall perform the test steps below

TE170.314.d.2 – 2.01: The Tester shall access the EHR using a Vendor-provided account that does not authorize disabling audit logs

TE170.314.d.2 – 2.02: The Tester shall attempt to disable audit logs and verify inability to disable audit logs

TE170.314.d.2 – 2.03: The Tester shall access the EHR using a Vendor-provided account that authorizes disabling audit logs

TE170.314.d.2 – 2.04: The Tester shall attempt to disable audit logs and verify ability to successfully disable audit logs

- If the EHR technology allows a user to disable the audit log status, the Tester shall perform the test steps below
  - TE170.314.d.2 – 2.05: The Tester shall access the EHR using a Vendor-provided account that does not authorize disabling of the audit log status
  - TE170.314.d.2 – 2.06: The Tester shall attempt to disable recording of the audit log status and the EHR using a Vendor-provided account that authorizes disabling of the audit log status
  - TE170.314.d.2 – 2.07: The Tester shall access the EHR using a Vendor-provided account that authorizes disabling of the audit log status
  - TE170.314.d.2 – 2.08: The Tester shall attempt to disable the audit log status and verify ability to disable audit log status
- If the EHR technology allows a user to disable the encryption status, the Tester shall perform the test steps below
  - TE170.314.d.2 – 2.09: The Tester shall access the EHR using a Vendor-provided account that does not authorize disabling of the encryption status
  - TE170.314.d.2 – 2.10: The Tester shall attempt to disable recording of the encryption status and verify failure
  - TE170.314.d.2 – 2.11: The Tester shall access the EHR using a Vendor-provided account that authorizes disabling of the encryption status
  - TE170.314.d.2 – 2.12: The Tester shall attempt to disable the encryption status and verify ability to disable encryption status

#### Inspection Test Guide

- IN170.314.d.2 – 2.01: If TE170.314.d.2 – 2.01 – 2.04 were performed, the Tester shall verify that the date, time (utilizing a system clock that has been synchronized following the (RFC 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4), and user identification related to the action of disabling audit logs are recorded in the audit log entry
- IN170.314.d.2 – 2.02: If TE170.314.d.2 – 2.04 – 2.08 were performed, the Tester shall verify that the date, time (utilizing a system clock that has been synchronized following the (RFC 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4), and user identification related to the action of disabling the audit log status are recorded in the audit log entry
- IN170.314.d.2 – 2.03: If TE170.314.d.2 – 2.09 – 2.12 were performed, the Tester shall verify that the date, time (utilizing a system clock that has been synchronized following the (RFC 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4), and user identification related to the action of disabling the encryption status recorded in the audit log entry

### **DTR170.314.d.2 – 3: Record Actions**

#### Required Vendor Information

VE170.314.d.2 – 3.01: The Vendor shall identify the EHR function(s) that are available for a user to perform actions (additions, deletions changes, queries, print and copy) related to electronic health information

VE170.314.d.2 – 3.02: The Vendor shall identify the EHR function(s) that are available to record actions related to electronic health information. (These will be automatic functions used to create audit log entries.)

VE170.314.d.2 – 3.03: The Vendor shall identify a patient with an existing record in the EHR to be used for this test and a set of electronic health test data for the patient

VE170.314.d.2 – 3.04: The Vendor shall identify the EHR function(s) that are available to enable a user to verify that an audit log that has data elements including:

- Date and time of event
- Patient identification
- User identification
- Type of action (additions, deletions, changes, queries, print, copy)
- Identification of the patient data that is accessed

#### Required Test Procedures

TE170.314.d.2 – 3.01: Using the EHR function(s) and test data identified by the Vendor, the Tester shall make an addition to electronic health information in the patient record provided by the Vendor

TE170.314.d.2 – 3.02: Using the EHR function(s) and test data identified by the Vendor, the Tester shall make a deletion to electronic health information in the patient record provided by the Vendor

TE170.314.d.2 – 3.03: Using the EHR function(s) and test data identified by the Vendor, the Tester shall make a change to electronic health information in the patient record provided by the Vendor

TE170.314.d.2 – 3.04: Using the EHR function(s) and test data identified by the Vendor, the Tester shall make a query about electronic health information in the patient record provided by the Vendor

TE170.314.d.2 – 3.05: Using the EHR function(s) and test data identified by the Vendor, the Tester shall print electronic health information in the patient record provided by the Vendor

TE170.314.d.2 – 3.06: Using the EHR function(s) and test data identified by the Vendor, the Tester shall copy electronic health information in the patient record provided by the Vendor

#### Inspection Test Guide

IN170.314.d.2 – 3.01: For each action performed in TE170.314.d.2 – 3.01 through TE170.314.d.2 – 3.06, the Tester shall verify that the action was recorded in the audit log



IN170.314.d.2 – 3.02: Tester shall verify that the following data elements were recorded by the audit log for each action performed in TE170.314.d.2 – 3.01 through TE170.314.d.2 – 3.06

- Date and time (utilizing a system clock that has been synchronized following the (RFC 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4)
- Patient identification
- User identification
- The action(s) taken

IN170.314.d.2 – 3.03: As the EHR technology permits, the Tester shall verify whether the encryption status can or cannot be disabled

IN170.314.d.2 – 3.04: The Tester shall verify that the log in attempt was successful

IN170.314.d.2 – 3.05: The Tester shall verify that the EHR technology allows a user with permission to change the encryption status to enable or disable the encryption status

IN170.314.d.2 – 3.06: The Tester shall verify that the encryption status change is recorded in the audit log

IN170.314.d.2 – 3.07: The Tester shall verify that the audit log records the identification of the user that implemented the encryption status change

IN170.314.d.2 – 3.08: The Tester shall verify that the audit log records the date and time (utilizing a system clock that has been synchronized following the (RFC 1305) Network Time Protocol, or (RFC 5905) Network Time Protocol Version 4) the encryption status change occurs

#### **DTR170.314.d.2 – 4: Protect Audit Log**

##### Required Vendor Information

VE170.314.d.2 – 4.01: The Vendor shall identify the EHR function(s) that are available to protect the audit log from being changed, overwritten or deleted, including: recording actions related to electronic health information, the audit log, and the encryption status of electronic health information stored locally on end-user devices by EHR technology

VE170.314.d.2 – 4.02: The Vendor shall identify the EHR function(s) that are available to assign permissions to a user account

VE170.314.d.2 – 4.03: The Vendor shall identify an identifier (e.g., username or number) and authentication information (e.g. password) that will allow a user access to the EHR technology

##### Required Test Procedures

TE170.314.d.2 – 4.01: The Tester shall log in to the EHR using the unique identifier and authentication information and verify the type of access the user is permitted to perform with the EHR technology

TE170.314.d.2 – 4.02: The Tester shall perform an action authorized by the assigned user permissions

TE170.314.d.2 – 4.03: The Tester shall attempt to change an action that was recorded in the audit log

TE170.314.d.2 – 4.04: The Tester shall attempt to overwrite an action that was recorded in the audit log

TE170.314.d.2 – 4.05: The Tester shall attempt to delete an action that was recorded in the audit log

#### Inspection Test Guide

IN170.314.d.2 – 4.01: The Tester shall verify that accessing the EHR using the Vendor-identified login credentials was successful

IN170.314.d.2 – 4.02: The Tester shall verify that the performed action was recorded in the audit log

IN170.314.d.2 – 4.03: The Tester shall verify that the attempt to change the record of the action in the audit log was unsuccessful

IN170.312.d.2 – 4.04: The Tester shall verify that the attempt to overwrite the record of the action in the audit log was unsuccessful

IN170.314.d.2 – 4.05: The Tester shall verify that the attempt to delete the record of the action in the audit log was unsuccessful

#### **DTR170.314.d.2 – 5: Detection of Audit Log Alteration**

##### Required Vendor Information

VE170.314.d.2 – 5.01: The Vendor shall identify the EHR function(s) that are available to create and read hash values of the audit log

##### Required Test Procedures

TE170.314.d.2 – 5.01: Using the Vendor-identified EHR function(s), the Tester shall create a hash value for the audit log (original audit log)

TE170.314.d.2 – 5.02: The Tester shall perform a new action related to electronic health information

TE170.314.d.2 – 5.03: Using the Vendor identified EHR function(s), the Tester shall create a hash value for the audit log that includes the new action related to electronic health information (changed audit log)

TE170.314.d.2 – 5.04: The Tester shall output and store the hash values for comparison

TE170.314.d.2 – 5.05: The Tester shall compare the hash values for the original audit log and the changed audit log that includes the new action related to electronic health information

TE170.314.d.2 – 5.06: The Tester shall compare the two hash values created to verify whether the EHR technology was able to detect that the audit log has been altered

#### Inspection Test Guide

IN170.314.d.2 – 5.01: The Tester shall verify that a hash value for the audit log (original) was successfully created

IN170.314.d.2 – 5.02: The Tester shall verify that the newly performed action was recorded in the audit log

IN170.314.d.2 – 5.03: The Tester shall verify that a has value for the new audit log was successfully created

IN170.314.d.2 – 5.04: The Tester shall verify that the EHR technology is capable of detecting when the audit log has been altered

## TEST DATA

This test procedure requires the vendor to supply the test data. The Tester shall address the following:

- Vendor-supplied test data shall ensure that the functional requirements identified in the criterion can be adequately evaluated for conformance
- Vendor-supplied test data shall strictly focus on meeting the basic capabilities required of an EHR relative to the certification criterion rather than exercising the full breadth/depth of capability that an installed EHR might be expected to support
- Tester shall record as part of the test documentation the specific Vendor-supplied test data that was utilized for testing

## CONFORMANCE TEST TOOLS

None

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## Document History

Version Number	Description	Date Published
1.0	Released for public comment	September 28, 2012

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