REAL WORLD TESTING PLAN

PracticeSuite’s 2024 Real World Testing Plan

Abstract

This Real-World Testing plan is to verify the extent to which PracticeSuite deployed in operational production settings is demonstrating continued compliance to certification criteria and functioning with the intended use cases as part of the overall maintenance of a health IT’s certification.

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EXECUTIVE SUMMARY

This is the real-world test plan for 2024 for **PracticeSuite** certified EHR solution. It provides the real-world test measurements and metrics that meet the intent and objectives of ONC's Condition of Certification and Maintenance of Certification requirement for real world testing (§ 170.405 Real world testing) to evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting which it is targeted for use.

PracticeSuite shall conduct a Real-World Testing with existing customers that use our CEHRT to meet the Quality Payment Program. **PracticeSuite** strives to commit to this plan as much as possible, but execution of this plan is dependent on PracticeSuite's customer participation in the Real-World Testing activity throughout the year 2024, which is beyond PracticeSuite's control. For criteria that has less adoptions by the industry and customer base and in instances where no evidence exists due to zero adoption of a certified capability or the inability to capture evidence of successful use for other reasons, we will demonstrate the required certified capability in a semi-controlled setting as close to a "real world" implementation as possible.

REAL WORLD TESTING PLAN

GENERAL INFORMATION

PracticeSuite

Plan Report ID Number: **20231103ps1**
Developer Name: **PracticeSuite, Inc**
Product Name(s): **PracticeSuite**
Version Number(s): **EHR-18.0.0**
Product List (CHPL) ID(s): **15.02.05.2198.PRAS.01.01.1.220113**
Developer Real World Testing Page URL: https://practicesuite.com/ehr-onc-certification/

FreeChiro

Plan Report ID Number: **20231103ps2**
Developer Name: **PracticeSuite, Inc**
Product Name(s): **FreeChiro**
Version Number(s): **EHR-18.0.0**
Product List (CHPL) ID(s): **15.02.05.2198.FREC.01.02.1.220113**
Developer Real World Testing Page URL: https://freechiro.com/onc-certification-stage-3/

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Simulated real world patient-focused scenarios and use cases will be utilized that exercise the features and functionalities of the EHR required by the certification criteria. In some cases, real world patient data will be used to confirm compliance with things such as successful transmission statuses for some interoperability certification criteria requirements. Interactive testing will be used to demonstrate conformance to requirements where the adoption rate of a given certified capability is zero and to demonstrate ongoing compliance with updated standards and code sets (SVAP).

Testing Methods

"Any and all of the following test methodologies will be used to accomplish complete testing of conformance with the certification criteria requirements.

- Reporting/Logging: This methodology uses the logging or reporting capabilities of the EHR to examine functionality performed in the system.
- Screenshots of manually entered synthetic data and log files
- Testing with ONC-approved testing tools, when appropriate

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

Standard (and version)	USCDI Version 1.0
Updated certification criteria and associated product	(b)(1), (b)(2), (e)(1), (g)(9)
Health IT Module CHPL ID	PracticeSuite: 15.02.05.2198.PRAS.01.01.1.220113 Free Chiro: 15.02.05.2198.FREC.01.02.1.220113
Method used for standard update	Cures Update
Date of ONC ACB notification	12/23/2022
Date of customer notification (SVAP only)	NA
Conformance measure	Measure 1 for b1, b2, e1 Measure 5 for g9
USCDI-updated certification criteria (and USCDI version)	USCDI v1 for b1, b2, e1, g9

RELIED UPON SOFTWARES

Product	Criteria	Relied Upon Software Notes
EMR DIRECT	§ 170.315(b)(1) § 170.315(b)(2) § 170.315(e)(1) § 170.315(h)(1)	The Product utilize EMR Direct interface as the relied upon software for Direct Message transmission and reception.
NEWCROP	§ 170.315(b)(3)	The Product utilize NewCrop for Electronic Prescribing functionality.
HELLO HEALTH	§ 170.315(e)(1)	The Product utilize Hello Health as Patient Engagement Platform which includes CCDA Transmission, Download and View.

CARE SETTING(S)

Primary Care, Family Practice, Obstetrics and gynecology, Mental Health, Cardiology and Surgery/Vascular Surgery: PracticeSuite markets its certified product in multiple care settings. The EHR system supports the deployment and tracking of documentation within and outside of the mentioned specialty settings. This Real-World testing plan is intended to be tested in the above-mentioned care settings as representative of multiple care settings of varied clinical workflow.

MEASURES USED IN OVERALL APPROACH

RWT MEASURE #1. INTEROPERABILITY USING C-CDA

The Certified Heal IT Module is sold to multiple specialty care settings. For this reason, the Real-World Testing plan specific to interoperability scenario applies to multiple care settings like Primary Care, Family Practice, Cardiology, Emergency Medicine, and Vascular Surgery. Since the EHR/patient portal system works on all types of documents, there are several certification criteria that can be tested simultaneously. All criteria involving the Consolidated Clinical Document Architecture (C-CDA) documents will be tested, including § 170.315(b)(1) Transitions of care, § 170.315(b)(2) Clinical information reconciliation and incorporation, § 170.315(h)(1) Direct Project and § 170.315(e)(1) View, download, and transmit to 3rd party. Verification of the transmitted patient record does require interaction with a system external to the organization.

DESCRIPTION OF MEASUREMENT/METRIC

The following outlines the measures that have been identified to best demonstrate conformance to multiple certification criteria concerning the sharing of EHI across two use cases demonstrated (single patient and data export).

Use Case 1 (Single Patient) Metrics: As part of the Real-World Testing requirements for § 170.315(b)(1), § 170.315(b)(2), § 170.315(e)(1), and § 170.315(h)(1), the developer has developed the following metrics for their testing plan:

Measure 1: Sharing. This measure will catalogue the use of CCD standard document conformant, and the transport mechanisms used to share transitions of care documents and EHI, as well as track usage of the various transport mechanisms. Associated certification criteria for the EHR system in a multi-specialty care setting include:

Certification Criteria	Requirement
§ 170.315(b)(1) Transitions of care	*(i)(A) Send transition of care/referral summaries using Edge Protocol*
	(i)(B) Receive transition of care/referral summaries using Edge Protocol.
§ 170.315(b)(2) Clinical information reconciliation and incorporation	*(2)(i) Able to reconcile and incorporate information from C-CDAs*
	(2)(ii) Match a received Transition of Care/referral Summary to the correct patient.
§ 170.315(e)(1) View, download and transmit	*(i)(A)(2) view ambulatory summary or inpatient summary using CCD Template.*
	(i)(B)(2) Download ambulatory summary or inpatient summary using CCD Template.
	(i)(B)(3) (inpatient setting only) Download of transition of care/referral summaries.
	(i)(C)(1) Transmit to third party.
	(i)(C)(2) (inpatient setting only) Transmit transition of care/referral summaries.
§ 170.315(h)(1) Direct Project	*(1)(i) Send and receive health information including formatted only as a "wrapped" message.*
	(1)(ii) Send and receive health information using Direct.

- **Justification**: The EHR system includes two functionalities of interest: (A) Send transition of care/referral summaries and (B) Receive transition of care referral summaries. Transitions of care documents are shared using Edge protocols (e.g., SMTP, Direct) while other EHI may be shared through the patient portal using downloads and encrypted or unencrypted transmissions. This metric will provide information on the types of transmissions deployed (e.g., what types of Edge protocols, downloads and unencrypted vs. encrypted transmission) and the frequency of usages. While the received CCDA is also reconciled, this matric will also provide reconciliation process (e.g., The population of CCDAs where a reconciliation is performed).

- **Test methodology**: We utilize ***EMR Direct*** interface as the relied upon software for Direct Message transmission and reception. EHR management logs, Interface logs, and email logs will be reviewed to determine the frequency and the transport mechanism used by providers for sending/receiving transitions of care using Edge protocols and downloading or transmitting EHI by patients using the patient portal. Log files and reports obtained during Real World Testing will be de-identified and used for analysis in several areas to validate the proper operation of the transport mechanisms and input for the calculation of the metric on the specific types of transport mechanisms used. Testing with ONC-approved testing tools, when appropriate. This test methodology will primarily test the conformant of the implementation.

- **Expected outcome(s):** It is expected that providers and patients (or their authorized representatives) will be able to share EHI using the transmission mechanisms provided. Provider will be able to reconcile clinical document. Error rates will be tracked and trended over time. Documentation evidencing send/receive of C-CDA's via Direct Messaging and reconciliation of C-CDA's into in to the EHR.

EXPECTED OUTCOMES

- *Real World Testing will demonstrate that the Health IT Module is conformant to the following certification criteria: § 170.315(b)(1) Transitions of care, § 170.315(e)(1) View, download, and transmit to 3rd party and.*
- *Real World Testing will demonstrate the ability of the system to perform § 170.315(b)(2) Clinical information reconciliation and incorporation and send or receive CCDA documents using 170.315(h)(1) Direct Project.*

RWT MEASURE #2. ELECTRONIC PRESCRIBING

The following table lists the measures that have been identified to best demonstrate conformance to certification criteria concerning the electronic prescription.

Use Case 1 (ePrescription): As part of the Real-World Testing requirements for § 170.315(b)(3) the developer has developed the following metrics for their testing plan:

Measure 1: This measure will demonstrate the electronic transmission of all prescription related transactions. Associated certification criteria for the EHR system in a multi-specialty care setting include:

Certification Criteria	Requirement
§ 170.315(b)(3): Electronic prescribing	*(ii)(A) Send and Receive prescription transactions electronically per the NCPD SCRIPT Standard and using RxNorm codes.*

	(ii)(C) Send the reason for prescription using diagnosis elements along with prescription.

- **Justification:** The EHR system includes all prescription related electronic transactions like creation, update, cancellation, and refill in accordance with the National Council for Prescription Drug Programs (NCPDP) SCRIPT standard version 10.6. system also have the provision to send the reason for prescription as diagnosis elements while prescribing. The population of prescription data and the transmission/receipt acknowledgement will be reviewed using system logs and activity data. Multiple care settings data will be analysed to ensure that it is working in multi care settings. We will also engage our partner ***NewCrop*** to verify the conformances of NCPD standards and transmission statistics.

- **Test methodology:** Querying of Data files, activity table and reviewing of Log files obtained during Real World Testing will be de-identified and used for analysis of prescription data. We will engage our eRx partner to get the matrix of standard conformance and transmission matrix. A combination of the above reports and logs will be reviewed to test the conformance of the criteria.

- **Expected outcome(s):** It is expected that a user can create prescription and transmit electronically per the standard. Errors in transmission will be tracked and analysed.

EXPECTED OUTCOMES

- *Real World Testing will demonstrate the following for § 170.315(b)(3): Electronic prescribing:*
  - *Electronic prescriptions can be created, edited, cancelled, and refilled.*
  - *Reason for prescription can be send along with prescription as diagnosis elements.*

RWT MEASURE #3. CLINICAL QUALITY MEASURES (CQM)

The following table lists the measures that have been identified to best demonstrate conformance to multiple certification criteria concerning the Clinical Quality Measures.

Use Case 1 (CQM): As part of the Real-World Testing requirements for § 170.315(c)(1), § 170.315(c)(2) and § 170.315(c)(3), the developer has developed the following metrics for their testing plan:

Measure 1: This measure will demonstrate the Clinical Quality Measure Reporting system that calculates and generate the aggregate report in both human readable and QRDA III file format for each CQM's based on the deduplicated clinical data that recorded in the EHR system and that imported to the system in QRDA I format. Also, system allows to export the CQM data in QRDA I file format. Associated certification criteria for the EHR system in a multi-specialty care setting include:

Certification Criteria	Requirement
§ 170.315(c)(1): Clinical Quality Measures (CQMs) - Record and Export	*(C)(1)(i) Record all necessary data to calculate CQMs*
	(C)(1)(ii) Export CQM data file in QRDA I format for one or more patients that includes all necessary data recorded for report calculation.
§ 170.315(c)(2): Clinical quality measures (CQMs) - Import and Calculate	*(C)(2)(i) Import a CQM data file in QRDA I format for one or more patients that includes all necessary data for calculating an aggregate report.*
	(C)(2)(ii) Calculates aggregate report for each CQM's based on the data recorded and received on the system
§ 170.315(c)(3): Clinical quality	*(C)(3)(i) Electronically create a CQM data file for transmission of clinical*

measures (CQMs) - Report	*quality measurement data in QRDA III format.*

- **Justification**: The EHR system can calculate and generate the report for various Clinical Quality Measures based on the clinical data recorded on the EHR system. Also, system have the functionality to Import and Export Clinical Quality Measure in QRDA I file format. The report is generated in both human readable and QRDA III file format based on both clinical data recorded on the EHR system as well as that received/imported to the system. While the record of all necessary data required for CQM's are recorded automatically during user input (during charting, user input etc), it is the time when a user generates QRDA import the system we will be able to determine the format and performance test. The generated QRDA samples collected during the testing process is verified against the conformant standards.

- **Test methodology**: EHR management logs, system logs, and activity logs, sample QRDA collected will be reviewed to determine the frequency used by providers for generating reports and sending/receiving CQM data files. The Cypress Test Tool will be used to export, and the result obtained will be matched. Ability of the system to generate QRDA 1 and QRDA3 files and complies with the CMS QRDA implementation Guide will be verified.

- **Expected outcome(s)**: It is expected that providers will be able to Record, Import, Export, Calculate and Generate the CQM reports without any developer assistance. Documentation evidencing the ability of the EHR to export. Error rates will be tracked and trended over time.

EXPECTED OUTCOMES

- *Real World Testing will demonstrate the ability of the EHR system to record necessary data required to calculate the CQM's and to export CQM date in QRDA I format [§ 170.315(c)(1)]*
- *Real World Testing will demonstrate the ability of the system to import CQM data in QRDA I format. [§ 170.315(c)(2)]*
  Real World Testing will demonstrate the ability to calculate and generate the CQM report electronically in QRDA III file format. [§ 170.315(c)(3)]

RWT MEASURE #4. TRANSMIT TO IMMUNIZATION REGISTERIES & PUBLIC HEALTH AGENCIES

The following list of measures has been identified to best demonstrate conformance to multiple certification criteria concerning the transmission to public registries.

Use Case: As part of the Real-World Testing requirements for §170.315(f)(1) and §170.315(f)(2), the developer has developed the following metrics for their testing plan.

Measure 1: *Transmission to immunization registries. This measure will catalogue the use of HL7 V2 standard document conformant, and the ability of the system to transmit to state immunization registry. The associated certification criterion is to be tested in the primary care and pediatrics care setting.*

Certification Criteria	Requirements
§170.315(f)(1) Transmission to immunization registries	i) *Create immunization information according to the IG) IM Release 1.5, and the July 2015 Addendum, using CVX codes for historical vaccines and NDC codes for newly administered vaccines.*
	ii) *Transmit the immunization message to the connected organization.*

Measure 2: *Transmission to public health agencies — syndromic surveillance. This measure will assess the conformance of the certified syndromic surveillance transmission using the PracticeSuite Application to any of the public agencies. The associated certification criterion in the pediatric care setting listed below.*

Certification Criteria	Requirements
§170.315(f)(2) Transmission to public health agencies — syndromic surveillance	*i) Create syndrome-based public health surveillance information for electronic transmission according to the HL7 2.5.1 standard.*
	ii) Transmit the syndrome-based public health surveillance message to the connected agencies.

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

- **Justification**: This immunization registry test is targeted in certain care settings like Primary Care, Pediatrics providers who are intends to report on to meet Objective 8: Public Health and Clinical Data Registry Reporting. Neurology care settings is used to test syndromic surveillance. It is a known fact that each state has their own way of submission of data. While the periodicity of the submission and transport standard requirement are not set by ONC, it will be difficult to find out the registry settings practices might be submitting. As the health IT developer our intention in this real-world testing scenario is to check if immunization and syndromic files are generated in the system and are formatted according to the adopted standards referenced by the certification criteria. This will be verified through the review of the data tables, activity tables and log files.

- **Test methodology**: Querying of Data files, activity table and reviewing of Log files obtained during Real World Testing will be de-identified and used for analysis of the output files generated. The HL7 samples collected will also be tested with a validation tool for conformance of standards. This test methodology will primarily test the conformance of the implementation.

- **Expected outcome(s)**: Documentation evidencing the ability to generate Syndromic surveillance message and VXU message for an administered immunization as well as the successful transmission of both the transactions to public health agency via HL7 2.5.1. Error rates will be tracked and trended over time.

EXPECTED OUTCOMES

- *Real World Testing will demonstrate that the Health IT Module is conformant to the certification criteria "§170.315(f)(1) Transmission to immunization registries" and "§170.315(f)(2) - Transmission to public health agencies — syndromic surveillance"*
- *Real World Testing will demonstrate the ability of the system to generate and transmit electronically to the government and public health agencies according to the HL7 2.5.1 standard.*

RWT MEASURE #5. APPLICATION ACCESS AND STANDARDIZED API

The following outlines the measures that have been identified to best demonstrate conformance to multiple criteria concerning the sharing of EHI using API.

Use Case (Application Access): As part of the Real-World Testing requirements for "Application Access § 170.315(g)(7), § 170.315(g)(9) and §170.315(g)(10) the developer has developed the following metrics for their testing plan:

Measure 1: This measure will test the conformance of access of the patient identifier using the PracticeSuite Application through a published API. This API will accept sufficient information to uniquely identify a patient and return the patient ID to the external system. The associated certification criterion in the selected care setting is listed below. Since API access is independent of any care settings, this functionality is applicable to all care settings where this is marketed. Associated certification criteria includes the following:

Certification Criteria	Requirements
§170.315(g)(7) Application access — patient selection	**(i)** The health IT can 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 subsequently execute requests for that patient's data.
§170.315(g)(9) Application access — *all data request*	**(i)(A)** The API must be able to respond to requests for patient data (using an ID or other token) for all the data categories specified in the United States Core Data for Interoperability Standard (USCDI) at one time in a summary record formatted according to the Consolidated CDA Release 2.1 Continuity of Care Document (CCD) template.
§170.315(g)(10) Standardized API for patient and population services	**(i)(A)** The API must be able to respond to requests for patient data (using an ID or other token) for each of the individual categories listed in the Common Clinical Data Set and return the full set of data for that category, according to the required data standards in a computable format.

- **Justification**: PracticeSuite application has a centralized API interface services that caters for the access to patient data. This will provide a metric on the use of APIs to access patient data. Additionally, credentialling requirements will be tested indirectly, as only authorized users will have access to the patient data. Each practice setting also has the access log which logs request and the requester

information. This the metric will be further verified through the review of the log files and by the audit tables.

- **Test methodology**: Spot check of evidence in production environment API log will be checked. This test methodology will primarily test the conformance of the implementation.

- **Expected outcome(s)**: Documentation evidencing a patient's ability to request and retrieve a C-CDA from the EHR's FHIR R2 API into a 3rd party application. It is expected that PracticeSuite will be conformant to application access criteria for §170.315(g)(7), §170.315(g)(9) and §170.315(g)(10). Error rates will be tracked and trended over time.

EXPECTED OUTCOMES

- *Real World Testing will demonstrate that the Health IT Module is conformant to the certification criteria "§170.315(g)(7) Application access — patient selection", "§170.315(g)(9) Application access — all data request and §170.315(g)(10) Standardized API for patient and population services".*
- *Real World Testing will demonstrate the ability of the system to accept the external request through an API and respond with the patient data formatted according to the Consolidated CDA Release 2.1 Continuity of Care Document (CCD) template.*

SCHEDULE OF KEY MILESTONES

Key Milestone	Date/Timeframe
Release of documentation for the Real-World Testing to be provided to authorized representatives and providers. This includes surveys, specific instructions on what to look for, how to record issues encountered, and Customer Agreements.	Jan 31, 2024
Collection of information as laid out by the plan for the period.	January 15, 2024
Meet with previously identified providers and authorized representatives to ensure that Real World Testing protocols are effective.	Mar 2024
Follow-up with providers and authorized representatives on a regular basis to understand any issues arising with the data collection.	Quarterly, 2024
End of Real-World Testing period/final collection of all data for analysis.	Sept 30, 2024
Analysis and report creation.	Nov 30, 2024
Submit Real World Testing report to ACB (per their instructions)	Dec 29, 2024

ATTESTATION

This Real-World Testing plan is complete with all required elements, including measures that address all certification criteria and care settings. All information in this plan is up to date and fully addresses the health IT developer's Real World Testing requirements.

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