CY 2023 REAL WORLD TESTING PLAN

Keiser Computers Inc., Drs Enterprise

Contents

Executive Summary

This is the real world test (RWT) plan for CY 2023 for *Keiser Computers Inc., Drs Enterprise* CEHRT solution. We have one version certified, and we will be testing on the most current version which is deployed in our user community.

As ONC has stated in its rule, “The objective of real-world testing is to verify the extent to which certified health IT deployed in operational production settings is demonstrating continued compliance with certification criteria and functioning with the intended use cases as part of the overall maintenance of a health IT’s certification.” We have worked toward this objective in designing our test plan and its subsequent real world testing measurements and metrics.

This document builds toward the final testing measurements and metrics we will use to evaluate our product interoperability within production settings. Within each use case, we document planned testing methodology, associated ONC criteria, justification for measurement, expected outcomes from the testing, care settings applied for the respective measure, and if applicable the number of clients to use our real world testing approach, including how our test cases were created, our selected methodology, the number of client/practice sites to use, and our general approach and justification for decisions.

We have included our timeline and milestones for completing the real-world testing in CY 2023, and information about compliance with the Standards Version Advancement Process updates.

General Information

Plan Report ID Number: Drs Enterprise RWT Plan CY2023

Developer Name: *Keiser Computers, Inc.*

Product Name(s): *Drs Enterprise*

Version Numbers(s): 11

Certified Health IT Product List (CHPL) Product Number(s):

CHPL ID 15.04.04.1764.DrsE.11.00.1.191220
https://chpl.healthit.gov/#/listing/10217

Developer Real World Testing Plan Page URL:
https://www.drsdoc.com/rwt.htm

Justification for Real World Testing Approach

The approach will focus on production based end-to-end end-user-centric testing. This allows for appropriate conformity amongst the CEHRT client base reaching a spectrum of clinical and nonclinical end users. This end-to-end end-user centered approach will extend beyond the "developer's understanding" of feature and function usability related to the measures within this plan. This approach employs design and function assessment including user feedback and reporting of any non-conformities. Success will be defined by not just successful navigation and criteria specifications being met but at least one specific metric per measure being fulfilled and documented through RWT testing. This RWT approach requires a commitment to real end-users in the production environment. The factors considered in this approach go beyond RWT Federal Register requirements. They include user navigation, successful feature utilization, and collection of user-to-developer feedback in a structured format to better inform future cycles of RWT.

Standards Updates

Version Advancement Process (SVAP) Updates

United States Core Data for Interoperability (USCDI)

For CY 2023, we are not planning to make any version updates on approved standards through the SVAP process.

Standard (and version)	None
Updated certification criteria and associated product	N/A
CHPL Product Number	N/A
Method used for standard update	N/A
Date of ONC-ACB notification	N/A
Date of customer notification (SVAP only)	N/A
Conformance measure	N/A
USCDI-updated certification criteria (and USCDI version)	N/A

Real World Testing Measurements

The measurements for our real-world testing plan are described below. Each measurement contains:

- Associated ONC criteria
- Testing methodology used
- Description of the measurement/metric
- Justification for the measurement/metric
- Expected outcomes in testing for the measurement/metric
- Number of client sites to use in testing (if applicable)
- Care settings which are targeted with the measurement/metric

In each measurement evaluated, we elaborate specifically on our justification for choosing this measure and on the expected outcomes. All measurements were chosen to best evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the certified EHR.

Testing Methodologies

For each measurement, a testing methodology is used. For our test plan, we used the following methodologies:

> ***Reporting/Logging***: This methodology uses the logging or reporting capabilities of the EHR to examine functionality of the system. A typical example of this is the measure reporting done for the automated measure calculation (numerator and denominator required by 315(g)(2) It can also use aspects of the audit log or customized reports from the EHR. This methodology often provides historical measurement reports which can be accessed at different times of the year to evaluate interoperability of EHR functionality, and it can serve as a benchmark for evaluating real world testing over multiple time intervals.
>
> ***Survey***: This methodology evaluates interoperability and compliance of EHR Module capabilities through feedback from users. This methodology can provide insight into how clinicians employ and use a feature which reveals actual value and impact of interoperability of the EHR Module.
>
> ***Other***: Details provided within each respective measure section herein.

Number of Client Sites

Within each measure, we note the minimum number of clients or client sites we plan to use for this measure evaluation. The numbers vary depending on the methodology as well as overall use of the associated EHR Module criteria by our users.

Care and Practice Settings Targeted

Within each measure, we note the care setting and/or line of service targeted. With respect to the purpose of RWT, our organization is targeting settings that are consistent with its user base and also representative of the measures' functional use. Drs Enterprise primarily targets specialty ambulatory practices, and our measures were designed with this setting in mind. In each measure, we also address the care settings targeted and note any necessary adjustments or specific factors to consider with such specific measure.

Care Coordination

§ 170.315(b)(1) Transitions of care

Testing Methodology: Reporting/Survey

Measurement Description

This use case is about tracking how many C-CDAs are successfully created and sent from the EHR Module to a third party during a transition of care event using direct messaging over the course of a given interval.

Measurement Justification

This use case has two measures to capture. It will provide a numeric value to indicate both how often this interoperability feature is being used as well as its compliance with the requirement. The creation of the C-CDA in part one indicates that the EHR can generate the patient summary record, including the ability to record all clinical data elements, and by sending the C-CDA patient summary record, the EHR demonstrates successful interoperability of an exchanged patient record with a third party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission which reveals compliance with the associated criteria listed above.

Measurement Expected Outcome

We will test a sample of our user base to get reporting values on C-CDAs sent as well as performance of C-CDA error detection.

Metric #1: Report the numbers of C-CDAs sent over a three (3) month period.

This metric can come from system reports. A successful measure increment indicates compliance with the underlying ONC criteria, including successful creation of the C-CDA patient summary record and recording the required clinical data elements. In sending the C-CDA patient summary record, the EHR will demonstrate ability to confirm successful interoperability of an exchanged patient record with a third party, including support for Direct Edge protocol in connecting to a HISP.

Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience; not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Metric #2: Confirm the successful creation of two unique CCDAs by each practice without failure.

This metric will track and report a user's ability to successfully generate a CCDA in the production environment. Any failures or non-conformities will be documented. The outcome will be tracked using line-item reporting by practice.

Care Coordination

§ 170.315(b)(2) Clinical information reconciliation and incorporation

Testing Methodology: Survey/Reporting

Measurement Description

This is a survey and reporting measure to determine how often a practice uses the C-CDA and includes and validates successful functioning of the reconciliation and incorporation features.

Measurement Justification

This measure will survey users to determine real world interoperability and usability, specifically how often C-CDAs are received from third parties and incorporated into the patient record, and then updating the patient's problem list, medication list, and medication allergy list with the clinical data contained in the C-CDA.

A survey will provide information on the frequency of the reconciliation occurrence(s) better than a standard software test evaluation. This survey measure will reveal if users are using the C-CDA incorporate and update feature of their EHR to update their patient's record with current or new information from another source. Through this means of testing, we can determine compliance with the associated criteria listed above in real world use.

Measurement Expected Outcome

As well as the numerator/denominator report, as applicable, the user will be asked the survey question of how often you are using the C-CDA incorporate and update feature and will be given the survey answer choices below:

- Regularly
- Sporadically
- Rarely
- Never
- Don't Know

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark to evaluate future surveys as well as to share insight into any new developments for improvements or enhancements of the health IT system.

In regard to functional use, we will also expect to see successful use of reconciliation and record incorporation across each practice tested.

Care Coordination

§ 170.315(b)(6) Data export

Testing Methodology: Survey/Self-Test

Measurement Description

This is a survey measure to determine the successful generation of data to be exported and how often practices are using the batch patient data export feature.

Measurement Justification

We do not know how many of our customers are actually using the batch patient data export feature, so we believe the best means to evaluate real world interoperability is to survey them on use of this criterion. This measure will survey users to determine real-world interoperability and usability, specifically how often clinicians use the batch patient data export feature.

A survey or self-test will provide information on the practical and successful function of the export as well as the impact and value of an interoperability element better than a standard software test evaluation. Batch patient data export can be used for various use cases, including supporting a local HIE or registry as well as quality and population health metrics.

Measurement Expected Outcome

The user will be asked to create an export to gauge the successful creation of the export. The user will also be asked a survey question of how often they perform the batch patient data export during an average month and will be given the survey answer choices below:

- Regularly
- Sporadically
- Rarely
- Never
- Don’t Know

The answer will provide insight into how clinicians generate and export patient data and view the value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark to evaluate future surveys as well as to share insight into any new developments for improvements or enhancements of the health IT system.

Clinical Quality Measures

§ 170.315(c)(1)—record and export

Testing Methodology: Reporting/Survey

Measurement Description

This measure tracks and counts how many eCQM quality measures were successfully counted and reported on by the EHR Module to CMS during their submission period for MIPS Quality reporting.

Measurement Justification

This measure will provide a successful count and list of electronic clinical quality measures (eCQMs) which are calculated and submitted to CMS for a given program, like MIPS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize submission to CMS.

Measurement Expected Outcome

The measurement will be considered complete and successful regardless of the count and list of practice specific eCQMs submitted to CMS over a given interval. We will ask our customer users to report on the number of eCQMs they successfully reported to CMS which reveals compliance with the associated criteria listed above.

A successful measure submission indicates compliance with the underlying ONC criteria. It will show that the EHR can do calculations on the eCQMs and that they are accepted by CMS. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience; not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure result to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Patient Engagement

§ 170.315(e)(1) View, download, and transmit to 3rd party

Testing Methodology: Reporting/Survey

Measurement Description

This use case is tracking and counting how patients are given access to their portal account over the course of a given interval. This measure will also ensure an end user can view, download, and initiate transmission outside of the CEHRT and/or enterprise portal to a third party.

Measurement Justification

This use case measure will provide a numeric value and reporting documentation to indicate both how often this interoperability feature is being used as well as its compliance with the requirement. An increment to this measure indicates that the EHR can create CCDAs and give the patient access to it for successful visibility, download, and third-party transmission.
The patient portal is intended to support patient engagement with their health records. The ability to transmit their patient data, as a C-CDA or human readable copy, can be a useful feature.

Measurement Expected Outcome

We will contact a sample of our user base to get reporting values on patient portal access as well as patients' use of the portal's interoperability features.

Report the number of patients CCDAs created over a three (3) month period. Separately this measure will also examine or enroll a patient and confirm that the patient (or respective proxy) can see, download and initiate transmission outside of the CEHRT.
The measurement will produce a numeric result and a line-item report of patient usability congruent with the measure. We will utilize various reports and audit logs to determine our measure count.

A successful measure increment indicates compliance with the underlying ONC criteria listed above. Line-item reporting for successful access to view, download and transmit confirms real world use of this function.

Public Health

§ 170.315(f)(1) Transmission to immunization registries

Testing Methodology: Reporting Measurement

Measure Description

This is a reporting measure to determine the number of successful immunization messages generated and/or sent to public health registries.

Measurement Justification

This measure will be used to determine real world interoperability and usability, specifically how many successful immunization messages were sent to an immunization information system (IIS) or public health immunization registries by the provider.

This measure will provide a numeric value to indicate both how often this interoperability feature is being used as well as its compliance with the requirement. An increment to this measure indicates that the EHR can create an immunization message, including ability to record all clinical data elements, and by sending the message (where applicable by practice need), the EHR demonstrates successful interoperability with an IIS/immunization registry.

Measurement Expected Outcome

As the clinician user submits immunization messages in their normal workflow and clinical activities, we will obtain their messaging metrics to evaluate real world interoperability. To capture this information, we will either use a special report to gather this information from our system or have the clinician user obtain the usage report from the registry.

A successful measure increment indicates compliance with the underlying ONC criteria. It will show that the EHR can create the HL7 immunization record, including ability to record the required clinical data elements. In sending the immunization message, the EHR will demonstrate ability to confirm successful interoperability of patient's immunization data to an IIS/immunization registry. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience; not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

In the event a practice is sampled that does not send to a local or state immunization registry or a practice that does this cannot be identified, the file generation itself will also be considered a successful outcome.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Public Health

§ 170.315(f)(2)Transmission to public health agencies syndromic surveillance

Testing Methodology: Reporting Measurement

Measure Description
This is a survey measure to determine the number of successful syndromic surveillance registries in use.

Measurement Justification
This measure will provide a numeric value to indicate both how often this interoperability feature is being successfully used as well as its compliance with the requirement. An increment to this measure indicates that the EHR can create a syndromic surveillance message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with a public health registry.

Measurement Expected Outcome
The measurement will produce validated, successful, numeric results over a given interval. We will utilize various reports and audit logs to determine our measure count.

A successful measure increment indicates compliance with the underlying ONC criteria. It will show that the EHR can create the HL7 syndromic surveillance message, including ability to record the required clinical data elements. In sending the syndromic surveillance message, the EHR will demonstrate ability to confirm successful interoperability of patient's immunization data to a public health registry.

Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience; not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

In the event a practice is sampled that does not send to a local or state public health agency, or a practice that does this cannot be identified, the generation of a syndromic surveillance file itself will be considered a successful measure outcome.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Care Settings and Number of Client Sites to Test
We designed this measure to test general ambulatory sites that we support and target. We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHR.

Application Programming Interfaces

§ 170.315(g)(7) Application access— patient selection
§ 170.315(g)(8) Application access— data category request
§ 170.315(g)(9) Application access— all data request

Testing Methodology: Survey

Measurement Description

This is a survey measure to determine how many different systems or applications are connecting to the EHR via the API.

Measurement Justification

We do not know how many of our customers are actually using the API functionality. So we believe the best means to evaluate real world interoperability is to survey them on use of these criteria. This measure will survey users to determine real world interoperability and usability, specifically how many third party systems or applications are integrated and using the EHR's API interface.

A survey can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. API capabilities are an important component of the modern health IT system, and utilization of API resources will help improve patient care and care coordination.

Measurement Expected Outcome

The user will be asked the survey question below:

- How many clients or software systems are connected to your EHR via the API?

The answer to this question and the names of the other systems leveraging the API will be documented.

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, responses may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark to evaluate future surveys as well as to share insight into any new developments for improvements or enhancements of the health IT system.

Timeline and Milestones for Real-World Testing CY 2023

- 1st Quarter 2023: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have enough clients committed for real world testing by the end of 1Q-2023.
- February 2023: We will document our CY 2022 test results into our RWT Test Report and submit to our ONC-ACB.
- 2nd and 3rd Quarter 2023: Real world testing with clients will be scheduled and performed. It is expected that a preparatory call will be done with clients to prepare them for testing activities.
    - Results will be documented in the test results section of the test plan and ultimately used to build the test report. If any non-compliance is observed, we will notify the ONC-ACB of the findings and make the necessary changes required.
- 4th Quarter 2022: During the last quarter of the year, the CY 2024 real-world test plan will be completed according to ONC and ONC-ACB requirements and expectations. Test plan will be prepared for submission before the end of the year.
- February 2024: We will document our CY 2023 test results into our RWT Test Report and submit to our ONC-ACB.

Developer 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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