

# Real World Testing Plan

talkEHR™

By

CareCloud

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This is the real world test plan for CY 2024 for the talkEHR, 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.

## **General Information**

**Plan Report ID Number:** [For ONC-Authorized Certification Body use only]  
**Developer Name:** CareCloud, Inc.  
**Product Name(s):** talkEHR Version Number(s): 1.0  
**Certified Health IT:** MU3 2015 Edition  
**Product List (CHPL) ID(s):** 15.04.04.2790.Talk.01.01.1.181217,  
 15.04.04.2790.Talk.01.01.1.181217

**Developer Real World Testing Page URL:**

<https://www.talkehr.com/rwt/CY-2022-RWT-Plan-talkEhr.pdf>

Standards Updates (Including Standards Version Advancement Process (SVAP) and United States Core Data for Interoperability)

Standard (and version)	NA
Updated certification criteria and associated product	NA
Health IT Module CHPL ID	NA
Method used for standard update	NA
Date of ONC-ACB notification	NA
Date of customer notification (SVAP only)	NA
Conformance measure	NA
USCDI-updated certification criteria (and USCDI version)	NA

## Developer Attestation

The Real World Testing plan must include the following attestation signed by the health IT developer authorized representative.

Note: The plan must be approved by a health IT developer authorized representative capable of binding the health IT developer for execution of the plan and include the representative's contact information

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.

**Authorized Representative Name:** Dr. Iram Fatima

**Authorized Representative Email:** iramfatima@carecloud.com

**Authorized Representative Phone:** (732) 336-1245

**Authorized Representative Signature:**

10/10/2023

Date



Signature

talkEHR™

## **Justification for Real World Testing Approach**

We use the following testing methodologies/approaches.

### **Reporting/Logging**

This methodology uses the logging or reporting capabilities of the EHR to examine functionality performed in the system. A typical example of this is the measure reporting done for the automate measure calculation required in 315(g)(2), but it can also be 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 and evaluate interoperability of EHR functionality, and it can serve as a benchmark for evaluating real world testing over multiple time intervals.

### **Summative Testing**

Summative assessments will be used to measure which certified actions were performed at the conclusion of a given time period. These will be conducted by running reports and examining audit logs from within the certified health IT module to help demonstrate the frequency of actions within the given time frame, and where possible, whether those actions were successful or unsuccessful. High success rates should be an indicator of a successful implementation of a given certified capability in a real-world setting.



## **§ 170.315(b)(3) Electronic prescribing**

### **Measurement Description**

This measure is tracking and counting how many NewRx electronic prescriptions were created and successfully sent from the EHR Module to a pharmacy destination over the course of a given interval.

### **Testing Methodology: Reporting/Logging**

#### **Associated Certification Criteria**

<b>Metric</b>
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1) Number of prescriptions created</li> <li>2) Number of prescriptions changed</li> <li>3) Number of prescriptions canceled</li> <li>4) Number of prescriptions renewed</li> </ol>

#### **Justification for Selected Measurement/Metric**

<b>Justification</b>
<p>A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the NewRx message and send over a production SureScripts network to a pharmacy. 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.</p>

#### **Relied Upon Software**

SureScripts eRx

#### **Care Setting(S)**

<b>Care Setting</b>	<b>Justification</b>
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul>

	Providers will use our software exclusively in the Outpatient/ambulatory setting.
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**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>We will test a minimum of two (2) client practice(s) for three months' period. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs. The measurement will produce numeric results. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. 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.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2 <sup>nd</sup> quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## **§ 170.315(b)(1) Transition of Care Functionality**

### **Measurement Description**

This measure is tracking and counting how many C-CDAs(USCDI v1) are created and successfully sent from the EHR to a 3rd party during a transition of care event using Direct messaging during a transition of care event over a given interval.

### **Testing Methodology: Reporting/Logging**

#### **Associated Certification Criteria**

<b>Metric</b>
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1. Number of CCDAs (USCDI v1) created</li> <li>2. Number of CCDAs (USCDI v1) sent via edge protocols</li> </ol>

#### **Justification for Selected Measurement/Metric**

<b>Justification</b>
<p>This criterion requires the ability of a certified Health IT module to take a CCDA received via an outside system and match it to the correct patient; reconcile the medication, allergy, and problem lists; and then incorporate the lists into the patient record. The expectation is each of these steps is done electronically within the certified Health IT module. While this certified capability is available to our users, most providers in the real world typically prefer to perform these steps manually and elect to save any outside received CCDAs as attachments to the patient record. Therefore, we intend to record the frequency that providers are electronically reconciling and incorporating CCDAs that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be low utilization by providers with a high success rate.</p>

#### **Relied Upon Software**

EMR Direct (Version 2017)

#### **Care Setting(S)**

<b>Care Setting</b>	<b>Justification</b>
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> </ul>

	<ul style="list-style-type: none"> <li>Behavioral health Providers will use our software exclusively in the Outpatient/ambulatory setting.</li> </ul>
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**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>Our expectation is that CCDAs are created and exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used.</p> <p>The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2 <sup>nd</sup> quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

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

### Measurement Description

This module enables to reconcile and incorporate information from C-CDAs formatted.

#### Testing Methodology: Reporting/Logging

##### Associated Certification Criteria

Metric
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1. Number of times a user reconciled medication list data from a received CCDA</li> <li>2. Number of times a user reconciled allergies and intolerance list data from a received CCDA</li> <li>3. Number of times a user reconciled problem list data from a received CCDA</li> </ol>

##### Justification for Selected Measurement/Metric

Justification
<p>A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can receive the C-CDA patient summary record, including record required clinical data elements. In receiving the C-CDA patient summary record, the EHR will demonstrate ability to confirm successful interoperability of an exchanged patient record with a 3<sup>rd</sup> 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.</p>

##### Care Setting(S)

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul>

	Providers will use our software exclusively in the Outpatient/ambulatory setting.
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**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>We intend to record the frequency that providers are electronically reconciling and incorporating CCDAs that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used.</p> <p>The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2 <sup>nd</sup> quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## § 170.315(b)(6) Batch Patient Data Export

### Measurement Description

Creates export summary documents formatted as a Continuity of Care (CCD) document template in accordance with the standard specified in § 170.205(a)(4) HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes, DSTU Release 2.1, including at minimum the following data elements:

Common Clinical Data Set (CCDS); Encounter diagnoses; Cognitive status; Functional status; Reason for referral, and referring or transitioning provider's name and office contact information

### Testing Methodology: Reporting

#### Associated Certification Criteria

Metric
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1. Number of times a data export was performed for a patient</li> <li>2. Number of times a data export was performed for multiple patients in a single transaction</li> <li>3. Number of times a data export was performed for all patients in a single transaction</li> </ol>

#### Justification for Selected Measurement/Metric

Justification
<p>This criterion requires the ability of a certified Health IT module to export a summary of a patient's record in CCD format according to specified standards and vocabulary code sets. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Therefore, we intend to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate.</p>

#### Care Setting(S)

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> </ul>

	<ul style="list-style-type: none"> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>
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**Expected Outcomes**

Expected outcomes
We intend to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024



## § 170.315(b)(7)(8)- Security tags - summary of care – send/received

### Measurement Description

This module enable user to securely send / received summary of care.

### Testing Methodology: Reporting/Logging

#### Associated Certification Criteria

Metric
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1. Number of CCDAs(USCDI v1) created</li> <li>2. Number of CCDAs (USCDI v1) sent via edge protocols</li> <li>3. Number of CCDAs (USCDI v1) received via edge protocols</li> </ol>

#### Justification for Selected Measurement/Metric

Justification
<p>A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can send the patient summary record, including record required clinical data elements securely. In sending patient summary record, the EHR will demonstrate ability to confirm successful interoperability, 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.</p>

#### Care Setting(S)

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>

**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>This measure will track number of summary of care files send/receive electronically via HISP.</p> <p>The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## § 170.315(b)(9)- Care Plan

### Measurement Description

This modules enable user can record, change, access, create, and receive care plan information according to the Care Plan document template in the HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes (US Realm), Draft Standard for Trial Use Release 2.1

### Testing Methodology: Reporting/Logging

#### Associated Certification Criteria

Metric
<b>90-days period:</b> <ol style="list-style-type: none"> <li>1. Number of Care Plan(USCDI v1) created</li> <li>2. Number of Care Plan(USCDI v1)sent</li> </ol>

#### Justification for Selected Measurement/Metric

Justification
A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create care plan, including record required clinical data elements and can send securely.

#### Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> Providers will use our software exclusively in the Outpatient/ambulatory setting.

#### Expected Outcomes

Expected outcomes
<b>Compliant with certification criteria</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> </ul>

<input checked="" type="checkbox"/> Exchanging EHI <input type="checkbox"/> EHI received by and used
We intend to demonstrate that EHR can record, change, access, create, and receive care plan information

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## § 170.315 C (1)(2)(3)(4) Clinical quality measures (CQMs) — record & export, report and Calculate and Repot

### Testing Methodology: Reporting

#### Associated Certification Criteria

Metric
This measure is tracking and counting eCQM quality measures reported successfully by the EHR Module to CMS during their submission period for Quality reporting.
This measure provide a 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. Because CQM criteria, 315 C (1) - (4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three. We are using the following Quality Measures for RWT. <ol style="list-style-type: none"> <li>1. CMS 138</li> <li>2. CMS 68</li> <li>3. CMS 69</li> <li>4. CMS 130</li> <li>5. CMS 122</li> </ol>

#### Justification for Selected Measurement/Metric

Justification
This measure will provide a 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. Because CQM criteria, 315 C (1)-C (4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three.

#### Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul>

	Providers will use our software exclusively in the Outpatient/ambulatory setting.
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**Expected Outcomes**

Expected outcomes
Exported CQMs contain data as expected QRDA files are able to be imported and calculations run as expected QRDA I and QRDA III reports are generated correctly

**Care Settings and Number of Clients Site 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 practice(s) for three months period. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## **Associated Criteria: 315(e)(1)- Patient Portal Use**

### **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.

### **Relied Upon Software**

- EMR Direct (Version 2017)
- Domain Time II (Version 5.2)

### **Testing Methodology: Reporting**

#### **Associated Certification Criteria**

<b>Metric</b>
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1. Number of views of health information by a patient or authorized representative</li> <li>2. Number of downloads of health information by a patient or authorized representative</li> <li>3. Number of transmissions of health information by a patient or authorized representative using unencrypted email</li> <li>4. Number of transmissions of health information by a patient or authorized representative using</li> </ol>

#### **Justification for Selected Measurement/Metric**

<b>Justification</b>
<p>The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.</p> <p>We will track the number of patients who logged into the portal, and contrast that with the patients seen by the respective providers during that same time.</p>

#### **Care Setting(S)**

<b>Care Setting</b>	<b>Justification</b>
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul>

	Providers will use our software exclusively in the Outpatient/ambulatory setting.
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### Expected Outcomes

<b>Expected outcomes</b>
<p>A successful measure increment indicates compliance to the underlying ONC criteria. It will show that patients can log into their patient portal to view, download, or transmit their health data. 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.</p> <p>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. We designed this measure to test general ambulatory sites that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.</p>

### Schedule of Key Milestones

<b>Key Milestones</b>	<b>Care Setting</b>	<b>Date/Timeframe</b>
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024



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

### Measurement Description

This measure is tracking and counting how many immunization messages are created and successfully sent from the EHR Module to an IIS/immunization registry over the course of a given interval.

### Testing Methodology: Reporting/Logging

#### Associated Certification Criteria

Metric
talkEHR will work with 3 customers in 3 different care settings to demonstrate that immunization messages can be sent to a registry and will collect immunization count sent to registry for 90 days period.

#### Justification for Selected Measurement/Metric

Justification
This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to 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, the EHR demonstrates successful interoperability with an IIS/immunization registry

#### Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> Providers will use our software exclusively in the Outpatient/ambulatory setting.

**Expected Outcomes**

Expected outcomes
<p>A successful measure increment indicates compliance to the underlying ONC criteria. It will show that patients can log into their patient portal to view, download, or transmit their health data. 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.</p> <p>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. We designed this measure to test general ambulatory sites that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## § 170.315(f)(2) Transmission to public health agencies –

### Syndromic Surveillance

#### Measurement Description

This measure is tracking and counting how many the source Syndromic surveillance content created and successfully sent from the EHR Module to registry over the course of a given interval.

#### Testing Methodology: Reporting/Logging

#### Associated Certification Criteria

Metric
TalkEHR will work with 2 customers in 2 different care settings as a representative sample of the care settings where talkEHR is deployed. TalkEHR will enter 3 test that have an encounter that meets the triggers for Syndromic Surveillance, and will demonstrate that the PHIN messages are sent as expected to the NIST tool when the triggers are met. The NIST HL7v2 Syndromic Surveillance test suite located at <a href="https://hl7v2-ss-r2-testing">https://hl7v2-ss-r2-testing</a>

#### Justification for Selected Measurement/Metric

Justification
Syndromic Surveillance is optional, some customers may be choosing not to participate in this program. Since it would require significant effort on the part of the customer to set up a connection to a test registry for Syndromic Surveillance testing, in order to reduce the burden on the customer, talkEHR will set up a test customer instance in their production environment and point it to the NIST Syndromic Surveillance tool to demonstrate that this functionality is available in the Real World in production and available for use as soon as a customer wants to use it

#### Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul>

	Providers will use our software exclusively in the Outpatient/ambulatory setting.
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**Expected Outcomes**

Expected outcomes
Syndromic Surveillance messages are triggered as expected once the patient encounter is finalized

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## **§ 170.315(f)(4) Transmission to cancer registry**

### **Measurement Description**

This measure is tracking and counting how many cancer case information are created and successfully sent from the EHR Module to registry over the course of a given interval.

### **Testing Methodology: Reporting/Logging**

#### **Associated Certification Criteria**

<b>Metric</b>
<p>TalKEHR will work with 2 customers in 2 different care settings as a representative sample of the care settings where talkEHR is deployed.</p> <p>TalKEHR will enter 3 test that have cancer case information for electronic transmission in accordance with the HL7® IG for CDA Release 2: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, DSTU Release 1.1.</p>

#### **Justification for Selected Measurement/Metric**

<b>Justification</b>
<p>EHR can create cancer case information for electronic transmission, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with an cancer registry</p>

#### **Care Setting(S)**

<b>Care Setting</b>	<b>Justification</b>
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>

**Expected Outcomes**

Expected outcomes
EHR can create cancer case information for electronic transmission,

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

**170.315(f)(6) Transmission to Public health agencies**

**(antimicrobial use and resistance reporting)**

**Measurement Description**

This measure is tracking that antimicrobial use and resistance reporting information is created and successfully sent from the EHR Module to registry over the course of a given interval.

**Testing Methodology: Reporting/Logging**

**Associated Certification Criteria**

<b>Metric</b>
<p>talkEHR will work with 2 customers in 2 different care settings as a representative sample of the care settings where talkEHR is deployed.</p> <p>talkEHR will enter 3 test that will demonstrate Antimicrobial use and resistance reporting information in accordance with the following sections of the standard specified at § 170.205®(1) HL7 Implementation Guide for CDA® Release 2.</p>

**Justification for Selected Measurement/Metric**

<b>Justification</b>
<p>EHR can create Antimicrobial use and resistance reporting information, and by sending the message, the EHR demonstrates successful interoperability.</p>

**Care Setting(S)**

<b>Care Setting</b>	<b>Justification</b>
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>

**Expected Outcomes**

<b>Expected outcomes</b>
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>We intend to demonstrate that EHR can record, change, access, create, and receive care plan information</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

**170.315(f) (7) Transmission to public health agencies — health care surveys**

**Testing Methodology: Reporting/Logging**

**Associated Certification Criteria**

Metric
<p>TalKEHR will create 3 test patients and their representative data in the production system.</p> <p>TalKEHR will create Health Care survey documents and manually download the Healthcare Survey documents. TalKEHR is will use the NIST healthcare surveys Release 1.2 validator found here: <a href="https://cdavalidation.nist.gov/cdavalidation/muNHCS12.html">https://cdavalidation.nist.gov/cdavalidation/muNHCS12.html</a> to confirm that the documents conform to expected standards.</p>



**Justification for Selected Measurement/Metric**

Justification
While this criterion has not been adopted by talkEHR customers at this time and therefore no usage statistics will be available, the functionality is out there and ready to be used! The goal of this test will be to demonstrate that the certified capability works in the Real World and is available for use.

**Care Setting(S)**

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> Providers will use our software exclusively in the Outpatient/ambulatory setting.

**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024

2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## **170.315(g)(7)-(g)(9)-Compliance of API Resource Query**

### **Support**

#### **Measurement Description**

This measure is tracking compliance of the EHR Module criteria functionality of support of API query of patient data resources.

#### **Testing Methodology: Reporting/Logging**

#### **Associated Certification Criteria**

<b>Metric</b>
<p>TalKEHR will work with 3 customers in 3 different care settings as a representative sample of the care settings where talkEHR is deployed. TalKEHR will work with these customers to run through the following high-level steps in the provider's deployment of the talkEHR API. Test patients will be used; they will be set up in each provider's EHR in advance. TalKEHR will build a test page to use as a mock app interface for a user to replicate requests sent by a patient that has been created in the Provider's EHR.</p> <p>The mock patient will use the test page to query the API for:</p> <ul style="list-style-type: none"> <li>- A patient token to be used to query for additional data</li> <li>- Their test results and prescriptions</li> <li>- Their USCDI v1 data</li> </ul> <p>We will count the average of the scores of scorecard based on EHR's API resources and queried patient clinical data (USCDI v1) through the API.</p>

**Justification for Selected Measurement/Metric**

Justification
<p>Because our API is not actively being used by clients, we will conduct real world testing by verifying the functionality that is available in production is still compliant with ONC requirements.</p> <p>This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to connect to the EHR's API resources and query patient clinical data through the API. This measure will also query the patient's USCDI v1 through the API and evaluate it against the <a href="https://site.healthit.gov/scorecard/">https://site.healthit.gov/scorecard/</a>. The USCDI v1 scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 implementation guide and HL7 best practices</p>

**Care Setting(S)**

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>

**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>talkEHR expected that API functionality would be efficient to support transmission of patient data for a referral workflow.</p> <p>talkEHR is also expecting patients to use the API more to engage with their care</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

**170.315(g)(10) - Compliance of API Resource Query Support**

**Measurement Description**

This measure is tracking compliance of the EHR Module criteria functionality of support of API query of patient data resources.

**Testing Methodology: Reporting/Logging**

**Associated Certification Criteria**

Metric
<p>TalKEHR will work with 3 customers in 3 different care settings as a representative sample of the care settings where talkEHR is deployed. TalKEHR will work with these customers to run through the following high-level steps in the provider’s deployment of the talkEHR API. Test patients will be used; they will be set up in each provider’s EHR in advance. TalKEHR will build a test page to use as a mock app interface for a user to replicate requests sent by a patient that has been created in the Provider’s EHR.</p> <p>The mock patient will use the test page to query the API for:</p>

- A patient token to be used to query for additional data
- Their test results and prescriptions
- Their USCDI v1 data

We will count the average of the scores of USCDI v1 scorecard based on EHR's API resources and queried patient clinical data (USCDI v1) through the API.

**Justification for Selected Measurement/Metric**

Justification
<p>Because our API is not actively being used by clients, we will conduct real world testing by verifying the functionality that is available in production is still compliant with ONC requirements.</p> <p>This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to connect to the EHR's API resources and query patient clinical data through the API. This measure will also query the patient's C-CDA through the API and evaluate it against the <a href="https://site.healthit.gov/scorecard/">https://site.healthit.gov/scorecard/</a>. The scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 implementation guide and HL7 best practices</p>

**Care Setting(S)**

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>

**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> </ul>

<input checked="" type="checkbox"/> Exchanging EHI <input type="checkbox"/> EHI received by and used
<p>TalkEHR expected that API functionality would be efficient to support transmission of patient data for a referral workflow.</p> <p>TalkEHR is also expecting patients to use the API more to engage with their care.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2nd quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024

## **170.315(h)(1)—Direct Project**

### **Measurement Description**

This measure is tracking and counting how many Direct Messages are created and successfully sent from the EHR to a 3rd party during a transition of care event using Direct messaging during a transition of care event over a given interval.

### **Testing Methodology: Reporting/Logging**

#### Associated Certification Criteria

Metric
<p><b>90-days period:</b></p> <ol style="list-style-type: none"> <li>1) Number of Direct Messages sent</li> <li>2) Number of Delivery Notifications received</li> <li>3) Number of Direct Messages received</li> <li>4) Number of Delivery Notifications sent</li> </ol>

#### Justification for Selected Measurement/Metric

Justification
<p>This criterion requires the ability of a certified Health IT module to record the frequency that direct messages are sent and received by providers, along with how often MDNs are sent and received. Since not all systems respond with MDNs, we cannot reliably use that metric to define success. Furthermore, it is not feasible to obtain copies of Direct Messages from “outside” developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.</p>

#### Relied Upon Software

EMR Direct (Version 2017)

#### Care Setting(S)

Care Setting	Justification
<p>Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)</p>	<p>Our EMR is designed for general/family practice, as well as certain subspecialties:</p> <ul style="list-style-type: none"> <li>• Podiatry</li> </ul>

	<ul style="list-style-type: none"> <li>• Gynecology</li> <li>• Behavioral health</li> </ul> <p>Providers will use our software exclusively in the Outpatient/ambulatory setting.</p>
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**Expected Outcomes**

Expected outcomes
<p><b>Compliant with certification criteria</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Technical Standards</li> <li><input type="checkbox"/> Vocabulary codes sets</li> <li><input checked="" type="checkbox"/> Exchanging EHI</li> <li><input type="checkbox"/> EHI received by and used</li> </ul>
<p>We intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.</p>

**Schedule of Key Milestones**

Key Milestones	Care Setting	Date/Timeframe
1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2024	Ambulatory	1Q-2024
2Q-2024. During the 2 <sup>nd</sup> quarter of CY 2024, the real-world testing with clients will be scheduled and performed.	Ambulatory	2Q-2024
Collect Result	Ambulatory	3Q-2024
Submit Result to Real World Test Report	Ambulatory	December-2024