CY 2024 Real World Testing Plan for The Echo Group

Executive Summary

This is the real world test plan for CY 2024 for The Echo Group certified EHR solution, Visual Health Record. 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.

We have included our timeline and milestones for completing the real world testing in CY 2024, and information about compliance with the Standards Version Advancement Process updates.

A table of contents is provided later in the plan quick access to any document section, including the testing measurements and metrics found at the end of this document. Our signed attestation of compliance with the real world testing requirements is on the following page.

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.

Authorized Representative Name:

Travis Soule

Authorized Representative Signature:

12/4/2023

General Information

Plan Report ID Number: Echo-RWT-2024

Developer Name: The Echo Group

Product Name(s): Visual Health Record

Version Numbers: Vs 13

Certified Health IT Criteria: 315(b)(1), (b)(6), (g)(7), (9), (10), (h)(1)

Product List (CHPL) ID(s) and Link(s):

- 15.04.04.2425.Visu.13.02.1.221227
- https://chpl.healthit.gov/#/listing/11129

Developer Real World Testing Page URL: https://www.echobh.com/meaningful-use-certification/

Timeline and Milestones for Real World Testing CY 2024

- 1Q-2024: Health IT system is fully enabled for use in real world testing.
- 3Q-2024. Begin making plans to collect data for RWT measures. If necessary, engage clients to ask for their support and participation in real world testing.
- 4Q-2024. 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.

Standards Version Advancement Process (SVAP) Updates

Currently, we are using all required 2015 Edition Cures Update standards. The previous SVAP updates we made are noted here: https://www.echobh.com/wp-content/uploads/2022/12/Standards-Version-Updates-122122-1.pdf

The RWT measures listed in this plan are based on those standards. We are awaiting the updated requirements in the HTI-1 rule which has not yet been released. Based on the standards stipulated by this future ruling, we will update our standards and implementation guide as needed, and these changes may be captured in our CY 2024 RWT test results.

No SVAP update planned at this time.

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
Health IT Module CHPL ID	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 evaluate, we elaborate specifically on our justification for choosing this measure and 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 use the following methodologies.

> Compliance and/or Tool: This methodology uses inspection to evaluate if EHR is compliant to the ONC criteria requirements. It can be done through 1-v-1 inspection testing or utilize various tools to measure or evaluate compliance and interoperability. If an EHR Module capabilities is not widely used in production by current users, compliance inspection can provide assurance criteria is working as previously certified.
>
> User Reported/Survey: This methodology evaluates interoperability and compliance of EHR Module capabilities through feedback from users. ONC has recognized that user reporting or self-testing can be a viable method for evaluation and compliance, and 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.

Care and Practice Settings Targeted

Our EHR is primarily targeted to behavioral health care, and our measures were design for this setting in mind.

RWT Measure #1. Compliance of C-CDA Creation and C-CDA Scorecard Average

Associated Criteria: 315(b)(1) and 315(h)(1)

Testing Methodology: Compliance and Tool

Measurement Description

This measure is tracking compliance the EHR Module criteria functionality of creating a C-CDA and measuring its C-CDA Scorecard average. Measure will also test ability to exchange messages via Direct messaging.

Measurement Justification

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to create a C-CDA and evaluate it against the ONC C-CDA Scorecard tool. The C-CDA scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 C-CDA implementation guide and HL7 best practices.

The Scorecard will both indicate any C-CDA errors as well provide a numeric scoring result to indicate how well our C-CDA complies with certification requirements and supports interoperability within production setting.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

Measurement Expected Outcome

The user will have the EHR and our relied upon software, EMR Direct Interoperability Engine 2017, create C-CDA from a patient record containing clinical data elements required in the criteria. We will run C-CDA through the Scorecard tool to obtain a result. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

A high score from the Scorecard indicates strong support for interoperability, and a lower score indicates opportunity for improvement. We will use this measure to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Care Settings

We designed this measure to test the behavioral health setting that we support and target.

RWT Measure #2. Compliance of Data Export C-CDA Export and C-CDA Scorecard Average Score

Associated Criteria: 315(b)(6)

Testing Methodology: Compliance and Tool

Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of creating a batch export of C-CDAs and measuring its C-CDA Scorecard average.

Measurement Justification

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to create a batch export of C-CDA patient records and evaluate it against the ONC C-CDA Scorecard tool. The C-CDA scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 C-CDA implementation guide and HL7 best practices.

The Scorecard will both indicate any C-CDA errors as well provide a numeric scoring result to indicate how well our C-CDA complies with certification requirements and supports interoperability within production setting.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

Measurement Expected Outcome

The user with special access rights, like an admin, selects batch patient option to export all selected record as CCD C-CDA. The user must be able to do this without any developer assistance. The user selects a timeframe period to export patient summaries and a location for the export file to be saved. The EHR will create the batch export of C-CDA files. We will run some C-CDAs through the Scorecard tool to obtain a result. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

A high score from the Scorecard indicates strong support for interoperability, and a lower score indicates opportunity for improvement. We will use this measure to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Care Settings

We designed this measure to test the behavioral health setting that we support and target.

RWT Measure #3. Number of Different applications/3rd party systems using your API capabilities

Associated Criteria: 315(g)(7), (g)(9), (g)(10)

Testing Methodology: Reporting/Logging

Measurement Description

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

Measurement Justification

This measure determines real world interoperability and usability, specifically many 3rd party systems or applications are integrated and using the EHR's API interface.

We will utilize our FHIR API from which developers use to request API access as well as additional reports and audit logs to determine the number of API applications enabled for our system. We will also query users to determine the API applications they have approved for use on their system.

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 measurement will provide a count of FHIR applications which have registered with our FHIR service.

The answer will provide insight into how agencies view both the use and value of this interoperability feature.

Care Settings

We designed this measure to test the behavioral health setting that we support and target.