

iSalus Healthcare 2022 Real World Test Results

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General Information

Plan Report ID Number: OfficeEMR.RWTR.2022

Developer Name: *iSALUS Healthcare*

Product Name(s): <u>OfficeEMR</u>

Version Number(s): 2021

Certified Health IT Product List (CHPL) ID(s): <u>15.04.04.2629.0ffi.21.02.1.220606</u>

Developer Real World Testing Page URL: <u>https://officeemr.knowledgeowl.com/help/real-world-test-plans</u>

Attestation

This Real-World Testing Report 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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2/3/2023

X Tara Cox

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VP Product Management Signed by: 6a7d0a26-9e6e-4b0e-ae9a-a072d165c989

Authorized Representative Signature:

Date: 2/3/2022



Changes to Original Plan

Scenario 1.B was modified to also include the reconciliation and incorporation of problem list items as this is required per the 170.315(b)(2) ONC criterion. Modifications to the test scenario are highlighted in yellow below. These changes did not significantly impact testing, they merely expanded the scope.

Scenario 1.B - Review clinical care summary and incorporate medication/allergy changes from the CCDA (170.315(b)(2) Clinical Information reconciliation and incorporation)

- <u>Description</u>: Review clinical care summary and incorporate medication/allergy changes from the CCDA
- <u>Associated Certification Criteria</u>: 170.315(b)(2) Clinical Information reconciliation and incorporation
- <u>Justification</u>: The use case will describe the case in which a provider receives a transition of care summary (CCDA) from a referring provider then subsequently associates the CCDA with a patient record in OfficeEMR. When the provider loads the chart that the CCDA was linked to, the user should be prompted to reconcile medications, problems and allergies from the CCDA with the medications, problems and allergies on files in the patient chart. Users will be able to manually see the comparison of medications, problems and allergies along with suggested changes. Once reconciled, we can use audit trails and manual verification to ensure the patient chart is correctly updated with the reconciled information.
- <u>Testing Method</u>: Manual Verification and Audit Trail Review
- <u>Expected Outcomes</u>:
 - a. Audit trail verification of a new DIRECT E-Mail received for the desired user. The count of audit records should increase by 1 following the successful receipt.
 - b. Manual verification of the CCDA Reconciliation Process should reveal medications, problems and allergies supplied in the CCDA and medication, problems and allergies stored on the patient record. For each new record merged into the chart, the count of rows in the audit table should increase by 1.
 - c. Following the successful reconciliation of data, the audit trail and manual chart review should show the addition of added medications, problems or allergies or the status change of medication, problem or allergy.
- <u>Care Settings and Number of Clients Site to Test:</u> 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 EHR.



Withdrawn Products Product Name(s): OfficeEMR

Version Number(s): 2020

Certified Health IT Product List (CHPL) ID(s): 15.04.04.2629.0ffi.20.01.1.191204

Date Withdrawn: June 29, 2022

Inclusion of Data in Results Report: *All data captured in this report, was captured using the current version OfficeEMR v 2021 CHPL ID 15.04.04.2629.0ffi.21.02.1.220606.*

Summary of Testing Methods and Key Findings

iSalus was please to find 100% conformance/success rates during our real-world testing of our interoperable modules. We used the following methodologies for our testing:

- Audit Trail/ Reporting: This methodology uses the audit logging or various reporting capabilities of the application to examine tasks performed in the system. This methodology often provides historical measurement reports which can be accessed at different times of the year to evaluate interoperability. It can serve as a benchmark for evaluating real-world testing over multiple time intervals.
- Third-Party Software Confirmation or Attestation: This methodology leverages industry-standard or industry-required technology and services to evaluate data sharing. By way of example, when submitting an electronic prescription in the 20170701 SCRIPT standard to Surescripts, it may be necessary to review logs stored in the Surescripts Admin Console to verify receipt and accuracy of data provided. Other third-party software may be used as well to simulate or confirm activities when another option is not available. It may also be necessary to receive attestation reports from third-party applications to verify the receipt and accuracy of data when access to the third-party system is unavailable or prohibited.
- **Manual Chart Review:** This methodology leverages human intervention to visually review and confirm changes to data as expected. When data is shared to the application that may cause a change to a patient's medical chart, it may be necessary for a human to review the expected change and sign-off that the update occurred as expected.
- **User 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 that reveals the actual value and impact of interoperability of the EHR Module.



Standards Version Advancement Process (SVAP)

For CY 2022, iSalus Healthcare did not make any version updates on approved standards through the SVAP process. This applies to all test scenarios described within.

Care Settings

iSalus Healthcare performed real world testing in 2022 for the following care settings:

- Nephrology
- Urology
- Family Practice/Medicine
- Internal Medicine
- Pediatrics

Metrics and Outcomes

Scenario 1.A - Receive a clinical summary for an upcoming visit from an alternate provider via DIRECT Email (170.315(h)(1) Direct Project)

Expected Outcome	Results	Challenges Encountered
Audit trail verification of a new DIRECT E-Mail received for desired user. The audit trail should accurately reflect the count of records to increase by 1 following a successful transmission.	100% success rate	None
Manual verification of a DIRCT E-Mail received in OfficeEMR Communications Inbox should review 1 new record in the inbox.	100% success rate	None
Successful validation of the CCDA via CCDA Validation in OfficeEMR with an error rate less than 10%.	100% success rate	None

Scenario 1.B - Review clinical care summary and incorporate medication/allergy changes from the CCDA (170.315(b)(2) Clinical Information reconciliation and incorporation)

Expected Outcome	Results	Challenges Encountered
Audit trail verification of a new DIRECT E-Mail received for the desired user. The count of audit records should increase by 1 following the successful receipt.	100% success rate	None
Manual verification of the CCDA Reconciliation Process should reveal medications, problems and allergies supplied in the CCDA and medication, problems and allergies stored on the patient record. For each new record merged into the chart, the count of rows in the audit table should increase by 1.	100% success rate	None
Following the successful reconciliation of data, the audit trail and manual chart review should show the addition of added medications, problems or allergies or the status change of medication, problem or allergy.	100% success rate	None

Scenario 1.C – Request and reconcile immunization history records from a state immunization registry (170.315(f)(1) Transmission to immunization registries)

Expected Outcome	Results	Challenges Encountered
Audit trail records and a manual chart review should reveal new immunizations being added to the patient chart following reconciliation. For each new record added, the count of audit trail records should increase accordingly.	100% success rate	None
Manual review of the immunization history response should reveal a successful request to the registry by displaying the immunization history records within the OfficeEMR application.	100% success rate	None
Third-Party Attestation from the state registry would need to be obtained confirming the successful receipt of the request and verification that the data displayed matches the data sent.	iSalus Worked with 2 state immunization registries, Florida Shots and Indiana Department of Health across 3 different care settings to perform testing	None

Scenario 2.A - Capture and electronically prescribe medications (170.315(b)(3) Electronic Prescribing)

Expected Outcome	Results	Challenges Encountered
Audit trail should reveal a new medication successfully saved to the patient record. The audit trail count should increase by 1 for each new record sent electronically.	100% success rate	None
Audit trail should reveal a NewRx transmission to Surescripts and 0 errors should be reported.	100% success rate	None
Manual review of the patient chart should reveal the new medication successfully added and displayed in the medication history.	100% success rate	None
Audit trail should reveal the NewRx being generated in the 20170701 SCRIPT version.	100% success rate	None
Third-Party Application (Surescripts Admin Console) should display the receipt of a NewRx message from OfficeEMR in the 20170701 SCRIPT version with 0 errors.	100% success rate	None

Scenario 2.B- Capture and electronically transmit immunization to an immunization registry (170.315(f)(1) Transmission to immunization registries)

Expected Outcome	Results	Challenges Encountered
Audit trail should reveal a new immunization successfully saved to the patient record. For each new immunization added, the audit trail record count should increase by 1.	100% success rate	None
Manual review of the immunization export history should show a successful transmission to a connected state registry with 0 errors.	100% success rate	None
Third-Party Attestation from the state registry would need to be obtained confirming the successful receipt of the immunization record into their application.	iSalus Worked with 2 state immunization registries, Florida Shots and Indiana Department of Health across 3 different care settings to perform testing	N/A



Scenario 2.C - Refer a patient to a different provider for additional care (§170.315(b)(1) Transitions of care)

Expected Outcome	Results	Challenges Encountered
Audit trail should reveal a new transition of care summary being sent via DIRECT Email. For each new record sent, the audit trail record count should increase by 1.	100% success rate	None
Third-Party Attestation from the provider that the DIRECT Email was sent to should be obtained with 0 errors.	Receipt of DIRECT messages confirmed by receiving partners.	None

Scenario 3.A - Patient obtains access to their clinical summary following a medical visit (170.315(e)(1) View, download, and transmit to 3rd party)

Expected Outcome	Results	Challenges Encountered
Audit trail should reveal a new summary of care document being generated for a patient upon completion of the visit. For each new CCDA generated, the audit trail should increase by 1.	100% success rate	None
Audit trail should reveal a successful connection by the patient to the Patient Portal.	100% success rate	None
Audit trail should reveal a successful view or download of the CCDA by the patient via the patient portal. Each time the record is accessed, the audit trail records should increase by a count of 1.	100% success rate	None



Scenario 4.A - Upon completion of a visit, the clinical summary will be automatically downloaded and transmitted to a third-party registry that can receive CCDA files (170.315(b)(6) Data export)

Expected Outcome	Results	Challenges Encountered
Audit trail should reveal a new CCDA being queued up for download. For each new CCDA generated, 1 new record should be added to the audit trail.	100% success rate	None
Audit trail should reveal the CCDA was successfully downloaded at the designated timeframe. Once the record is download, the audit trail should update to reflect the fact that 1 new record was obtained.	100% success rate	None
Third-Party Attestation from the provider that the CCDA is stored as expected in the folder they had configured. A screenshot of the folder should reveal 1 new record downloaded for each visit.	3 separate practice vendors confirmed successful exports	None



Scenario 5.A: Application access - patient selection (170.315(g)(7))

Expected Outcome	Results	Challenges Encountered
Third Party Application (Web service Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetPatient method. When passing in a valid API token and section name (Demographics, Social History, Problems, Allergies, Medications, Diagnostic Results, Vital Signs, Procedures, Care Team Members, Immunizations, Unique Device Identifiers, Assessment and Plan of Treatment, Goals, or Health Concerns), the API should return the various sections and the individual data elements for those sections. The response from the API call should match the API documentation. 0 errors should be returned when a valid call is executed.	100% success rate	None
Manual verification of the data elements in the patient chart should match the data returned in the API response.	100% success rate	None
Third Party Application (Webservice Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetPatient method. When passing in a mis-matched API token and section name, an appropriate error message should be returned. 1 error should be returned when an invalid call is executed.	100% success rate	None



Scenario 5.B: Application access - data category request 170.315(g)(8)

Expected Outcome	Results	Challenges Encountered
Third Party Application (Webservice Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetCCD method. When passing in a valid API token the API should return the complete CCDA document for the patient. The response from the API call should match the API documentation. 0 errors should be returned when a valid call is executed.	100% success rate	None
Manual verification of the data elements in the patient chart should match the data returned in the API response.	100% success rate	None
Third Party Application (Webservice Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetCCD method. When passing in a mis-matched API token an appropriate error message should be returned. 1 error should be returned when an invalid call is executed.	100% success rate	None



Scenario 5.C: Application access – all data request 170.315(g)(9)

Expected Outcome	Results	Challenges Encountered
Third-Party Application (Web service Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetCCD method. When passing in a valid API token the API should return the complete CCDA document for the patient. The response from the API call should match the API documentation.	100% success rate	None
Manual verification of the data elements in the patient chart should match the data returned in the API response.	100% success rate	None
Third-Party Application (Web service Test Suite) is able to make a call to our production endpoint (https://www.officemd.net/officemobile/screens/webservice s.htm) utilizing the ONC.GetCCD method. When passing in a mismatched API token an appropriate error message should be returned.	100% success rate	None

Scenario 6.A: Transmission to public health agencies - syndromic surveillance (170.315(f)(2))

Expected Outcome	Results	Challenges Encountered
Manual verification of the syndromic surveillance file being downloaded upon request. A screenshot of the download location should reveal 1 new file added to the directory.	100% success rate	None



Key Milestones

Key Milestone	Care Setting	Date/Timeframe
Scenario 1.A; 1.B; 2C Real World Test Clients Identified	Family Medicine, Urology	November 2022
Scenario 1.A; 1.B; 2C Real World Testing Completed	Family Medicine, Urology	December 29, 2022
Scenario 1.C; 2B Real World Test Clients and State Immunization Registries Identified	Family Practice, Internal Medicine, Pediatrics	October 2022
Scenario 1.C; 2B Real World Testing Completed	Family Practice, Internal Medicine, Pediatrics	November 18, 2022
Scenario 2.A Real World Test Clients Identified	Nephrology, Urology	November 2022
Scenario 2.A Real World Testing Completed	Nephrology, Urology	December 29, 2022
Scenario 3.A Real World Test Clients Identified	Urology, Nephrology, Family Medicine	November 2022
Scenario 3.A Real World Testing Completed	Urology, Nephrology, Family Medicine	December 28, 2022
Scenario 4.A Clients Identified	Urology	October 2022
Scenario 4.A Real World Testing Completed	Urology	October 17, 2022 - November 4, 2022
Scenario 5.A; 5.B; 5C Test Clients Identified	Family Practice	October 2022
Scenario 5.A; 5.B; 5C Real World Testing Completed	Family Practice	November 21, 2022 - November 30, 2022
Scenario 6.A Test Clients Identified	Family Practice	October 2022
Scenario 6.A Real World Testing Completed	Family Practice	November 30, 2022