

CY 2024 Real World Testing Plan for ChartPath

Executive Summary

This is the real world test plan for CY 2024 for our certified EHR solution ChartPath. It is virtually the same as last year's approved real world test plan with only minor alterations and updates.

As with last year's plan, 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). We believe these test methods will be appropriate and valuable in accessing certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting of customers.

We have included our timeline and milestones for completing the real world testing in CY 2024, and information about compliance with the USCDI v1 and SVAP updates.



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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General Information

Plan Report ID Number: ChartPath_RWT_2024

Developer Name: ChartPath, LLC

Product Name(s): ChartPath
Version Numbers(s): 1.29

Certified Health IT Criteria: 315(b)(1)-(2), (b)(6), (c)(1)-(3), (f)(7), (g)(7), (9) (10), (h)(1)

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

• 15.04.04.2996.Char.12.01.1.191227

https://chpl.healthit.gov/#/listing/10258

Developer Real World Testing Page URL: http://ChartPath.com/2015-cehrt



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 Updates (SVAP and USCDI)

Currently, we are using all required 2015 Edition Cures Update standards. The RWT measures listed in this plan are based on those standards, and any SVAP updates are explicitly noted below. 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)	All standards versions are those specified in USCDI v1.
Date of ONC-ACB notification	N/A
(SVAP or USCDI)	
Date of customer notification	N/A
(SVAP only)	
USCDI-updated certification	None
criteria (and USCDI version)	



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 evaluation, 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.

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 automated 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.

Care and Practice Settings Targeted

Our EHR is primarily targeted at long-term and post-acute care (LTPAC) practices, and our measures were designed with this setting in mind.



RWT Measure #1. Number of Transition of Care C-CDAs Successfully Sent

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

Testing Methodology: Reporting/Logging

Measurement Description

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

The interval for capturing this metric will be a minimum of one (1) month for the sites chosen for testing.

Measurement Justification

This measure will provide a numeric value, both successful exchanges and errors, to indicate how often this interoperability feature is being used as well as its compliance to the requirement. A success measure increment indicates that the EHR can create a C-CDA patient summary record, including 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 3rd party. An error may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

This use case provides interoperability insight for both the Transition of Care (315.b.1) criteria as well as the Direct Messaging (315.h.1) criteria as it indicates the ability to connect to our UpDox HISP to complete a successful transmission to a 3rd party.

Measurement Expected Outcome

The measurement will produce numeric results, both success and errors, over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

A successful exchange indicates compliance to the underlying ONC criteria. It will show that the EHR and our relied upon software HISP, Updox Direct 2014, can create the C-CDA patient summary record, including record required clinical data elements and successfully deliver it. In sending the C-CDA patient summary record, the EHR will demonstrate ability to confirm successful interoperability of an exchanged patient record with a 3rd 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 errors may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.



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



RWT Measure #2. Number of C-CDAs Received and/or Incorporated

Associated Criteria: 315(b)(2)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many C-CDAs are successfully received and/or incorporated upon receipt from a 3rd party via Direct messaging during a transition of care event over the course of a given interval.

The interval for capturing this metric will be a minimum of one (1) month for the sites chosen for testing.

Measurement Justification

This measure will provide a numeric value, both successful exchanges and errors, to indicate how often this interoperability feature is being used as well as its compliance to the requirement. A success measure increment to this measure indicates that the EHR can receive a C-CDA patient summary record, and by incorporating the C-CDA patient summary record, the EHR demonstrates successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission. An error may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

Measurement Expected Outcome

The measurement will produce numeric results, both success and errors, over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

A successful exchange indicates compliance to the underlying ONC criteria. It will show that the EHR can receive a C-CDA patient summary record. In incorporating the C-CDA patient summary record, the EHR will demonstrate successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party, including support for Direct Edge protocol in connecting to a HISP, specifically our primarily HISP Updox.

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 errors may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

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



RWT Measure #3. Number of Patient Batch Exports Run

Associated Criteria: 315(b)(6)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many batch exports of C-CDAs were successfully performed by the EHR Module over the course of a given interval.

The interval for capturing this metric will be a minimum of one (1) month for the sites chosen for testing.

Measurement Justification

Batch exporting can be a useful function for interoperability to allow providers to share large volumes of patient data. This measure will provide a numeric value, both success and errors, to indicate how often this interoperability feature is being used as well as its compliance to the requirement, namely that the EHR can create a batch export of multiple C-CDA patient summary records.

Measurement Expected Outcome

The measurement will produce numeric results, both success and errors, over a given interval. We will likely utilize a database report to determine our measure count.

A successful export indicates compliance to the underlying ONC criteria. It will show that the EHR can create a batch export of multiple C-CDA patient summary records, which can be used in means of health IT interoperability. 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 errors may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

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



RWT Measure #4. Number of applications/3rd party systems accessing FHIR API server

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

Testing Methodology: Reporting/Logging

Measurement Description

This is a measure to determine how many different systems or applications are connecting to our EHR via the API. We will look over the course of a minimum of six (6) months to gauge registered applications and active use.

Measurement Justification

This measure will determine how many 3rd party systems or applications are integrated and using the EHR's FHIR API interface. This measure will allow us to verify our certified API is working with 3rd party applications to access USCDI patient data.

Measurement Expected Outcome

The measurement will provide a count of FHIR application applications which have registered with our server for patient access as well as applications actively connecting to our FHIR server. We will utilize our FHIR API form 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.

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

Care Settings



RWT Measure #5. Number of Direct Messages Successfully Sent

Associated Criteria: 315(h)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many Direct messages were successfully sent from the EHR Module to a 3rd party over the course of a given interval.

The interval for capturing this metric will be a minimum of one (1) month for the sites chosen for testing.

Measurement Justification

This measure will provide numeric results for both successful exchanges and errors, to indicate how often this interoperability feature is being used as well as its compliance to the requirement. This measure will also ensure our customers are properly integrated with our primarily HISP provider, Updox. A successful Direct message exchange indicates that the EHR can create a Direct message and demonstrates successful interoperability of an exchanged message with a 3rd party.

Measurement Expected Outcome

The measurement will produce numeric results, both success exchanges and errors, over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

A successful exchange increment indicates compliance to the underlying ONC criteria. It will show that the EHR can be authenticated with DirectTrust, create a Direct message, and demonstrate interoperability of an exchanged message with a 3rd party. 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 errors may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

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



RWT Measure #6. Number of Quality Measures Successfully Reported on to CMS

Associated Criteria: 315(c)(1)-(c)(3)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many eCQM quality measures were successfully reported on by the EHR Module to CMS over the course of a given interval.

The interval for this measure will be twelve (12) months.

Measurement 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)(3), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three.

Measurement Expected Outcome

The measurement will a count and list of eCQMs submitted to CMS over a given interval. We will utilize various reports and audit logs and other sources to determine our measure count.

A successful measure submission indicates compliance to the underlying ONC criteria. It will show that the EHR can do calculations on the eCQM 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

Care Settings

We designed this measure to test the LTPAC providers that we support.



RWT Measure #7. Number of Health Care Survey Messages Successfully Sent

Associated Criteria: 315(f)(7)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many health care survey messages are created and successfully sent from the EHR Module to a public health registry over the course of a given interval.

The interval for this measure will be three (3) months.

Measurement Justification

This measure will provide a numeric value, both successful exchanges and errors, 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 a health care survey 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 numeric results over a given interval. We will utilize various reports and audit logs and other methods to determine our measure count.

A successful metric increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the HL7 health care survey message, including ability to record the required clinical data elements. In sending the health care survey message, the EHR will demonstrate ability to confirm successful interoperability with 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 while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality. Any errors may indicate lack of understanding or configuration errors or product errors which we will investigate as necessary.

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

We designed this measure to test the LTPAC providers that we support.