

EHR Your Way: Real World Testing Plan

Developer Name: Adaptamed, LLC

Product Name: EHR Your Way

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Real world Testing URL: <https://www.ehryourway.com/real-world-testing>

Justification for Real World Testing Approach

Measure/Metric:

The measure will display the total % of Interoperability messages transmitted successfully by collecting the data logs of total number of Interoperability messages initiated to transmit Vs. Data logs of Total no. of interoperability messages transmitted. The measure is updated for all the individual criteria.

Reason Measurement/metrics: This type of measurement helps to identify the percentage of errors due to EHR and uncontrolled errors received due to recipients. Also helps to understand how much percentage of successful Interoperability messages are transmitted.

EHR Your Way saves all the required data base logs for the certification criteria's. Based on which we can conclude if all the transmissions related to the certification criteria are successful or has any errors.

Certification Crieterias for which above Metrics are used.

Criteria ID	Description
170.315(g)(9)	Application access - all data request
170.315(g)(7)	Application access - patient selection
170.315(b)(1)	Transition of care
170.315(b)(2)	Clinical information reconciliation and incorporation
170.315(b)(3)	Electronic prescribing
170.315(b)(10)	Electronic Health Information (EHI) Export
170.315(e)(1)	View, download, and transmit to 3rd part
170.315(c)(1)	Record and export
170.315(c)(2)	Import and Calculate
170.315(c)(3)	Report
170.315(h)(1)	Direct Project
170.315(f)(5)	Transmission to public health agencies - electronic case reporting
170.315(f)(1)	Transmission to immunization registries
§170.315(g)(10)	Standardized API for patient and population services

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Mile Stones/Timelines:

Data base logs monitoring schedule:

Criteria ID	Description	Dates to capture the Data logs for Monitoring	Duration
170.315(g)(9)	Application access - all data request	02/01/2025 to 05/30/2025	5 Months
170.315(g)(7)	Application access - patient selection		
170.315(b)(1)	Transition of care		
170.315(b)(2)	Clinical information reconciliation and incorporation		
170.315(b)(10)	Electronic Health Information (EHI) Export		
170.315(e)(1)	View, download, and transmit to 3rd part		
170.315(f)(5)	Transmission to public health agencies - electronic case reporting		
170.315(h)(1)	Direct Project		
170.315(f)(1)	Transmission to immunization registries		
170.315(g)(10)	Standardized API for patient and population services	02/01/2025 to 05/30/2025	5 Months
170.315(b)(3)	Electronic prescribing	02/01/2025 to 06/30/2025	6 Months
170.315(c)(1)	Record and export	01/01/2025 to 03/31/2025	3 Months
170.315(c)(2)	Import and calculate		
170.315(c)(3)	Report		

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Associated Criteria ID: 170.315(g)(9): Application access - all data request

Measure: The total percentage of successful transmissions.

Denominator = (Total no. of requests for All Patient Data – Total no. of Invalid API requests)

Numerator = Total no. of successful responses given to requests in Denominator

Total % of Successful Transmissions = (Numerator/Denominator) X 100

Description: The data required for the Measure is collected for the duration of 5 days as mentioned in the schedule. Using the data logs we will collect below (a – f) mentioned data to calculate the accuracy and successful transmission percentage. This Criterion required EHR Your Way to give the functionality to users for requesting All patient Data as mentioned in §170.315(g)(9)(i)(A). The API data requests are considered valid and response is given only if the combination of User name, password and API Toke key are correct.

- a) Total no. of API requests received for All patient Data.
- b) Total no. of API invalid requests
- c) Total no. of API responses from EHR Your Way.
- d) Total no. of API responses failed due to Recipients network or other technical issues.
- e) Total no. of API Reponses failed due to EHR Your Way network or technical or improper message standards issues.
- f) Total no. of API responses failed due to Non standard data entry by users.

Justification: The denominator count of this measure is the count of valid API requests. Meaning, if the user tries to request a patient data with invalid User name or password or API Token, the request will be considered as invalid. This would satisfy the requirement of providing access to the patient data through API. As a response to the request, the numerator count which is total no. of API responses from EHR Your way will have the total requests for which data is sent in CCD format within the date range mentioned in the request.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: Acceptable Successful Transmissions is > = 95%

Relied Software: None

Standard: USCDI v1

Standard Update: Not applicable

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Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(g)(7): Application access - patient selection

Measure: The total percentage of successful matching responses

Denominator = (Total no. of requests for All Patient Data along with username and an API token – Total no. of invalid API requests

Numerator = Total no. of successful matching responses given to requests in

Denominator Total % of Successful Transmissions = (Numerator/Denominator) X

100

Description: The data required for the measure is collected for the duration of 5 days as mentioned in the schedule. Using the data logs we collect information as mentioned below to calculate the accuracy and successful responses percentage. Using these logs we can monitor if EHR Your Way is able to accept the username and password and API key which belongs to a specific patient and give data of a patient who has the same user name mentioned in the health IT data base. This would satisfy the functional requirement mentioned in the (g)(7)(i).

- a) Total no. of API requests received for the patients.
- b) Total no. of invalid API requests for the patients.
- c) Total no. of successful API responses from EHR Your Way.

Justification: The denominator count of this measure is the no. of valid API requests. If the user tries to request data of a patient with invalid user name or password or API token, these requests will be considered as invalid API requests. These invalid requests will not be considered in Denominator. Ability of identifying the invalid requests will demonstrate the functional requirement in (g)(7)(i). As a response to the valid requests, the numerator count which is total no. of Successful API responses from EHR Your Way will have the total no. of valid requests for which data is sent in CCD format for the patients.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: All the Data logs for API show successful transmission; also denies the requests which are invalid or unauthorized.

Relied Software: None

Standards Update: Not Applicable

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(b)(1): Transition of care

Measure:

Sending: The total percentage of successful Transitions of Referral Summary through Direct Address

Denominator = Total no. of transitions of Referral Summary initiated in EHR Your Way - (Total no. of transitions failed due to Data entry of users without following standards + Total no. of transitions failed due to recipient issues)

Numerator = Total no. of successful transmissions delivered successfully and received confirmation

Total % of Successful Transmissions = (Numerator/Denominator) X 100

Receive: The total percentage of successful incoming CCDA which are mapped to patient chart

Denominator = Total no. of Incoming CCDA – Total no. of Invalid Incoming CCDA

Numerator = Total no. of Incoming CCDA from Denominator matching to patient chart and imported successfully

Description: The data logs which are collected for calculating the Total percentage of successfully transmitted referral summaries through Direct address, Sending Denominator will give the count of TOC transition and total no. of TOC which were not transferred due to data entry standard issues or recipient issues. Since, the data entry standard issue or recipient issues are uncontrolled we exclude those messages from denominator. Similarly, Total no. of receiving or incoming CCDA will demonstrate that EHR Your way is having a working module of accepting incoming CCDA files through direct message. Receiving Numerator count will explain that EHR has a functioning module which allows users to map the valid incoming CCDA files to patient chart.

Justification: The Testing of this measure is done for both Sending and Receiving capabilities of EHR Your Way. Denominator of Sending TOC helps to monitor if EHR Your Way is able to transmit Referral summary to Direct address of external providers. If the direct message is invalid or recipient is unable to accept the message system will record the errors. This explains that EHR has the capability of sending only valid referral summary to direct address. Similarly, Receiving Denominator and Numerator explains that EHR Your way can receive any CCDA file

and match it with patients and has capability to link those messages to charts. EHR will also validate and restrict the users to map the files to the chart which are invalid.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected outcome: Data base logs are noticed with zero standard based errors. Only valid CCDA files are allowed to be transmitted to external direct address and invalid CCDA files are not allowed to be transmitted from EHR. Similarly valid incoming CCDA files are allowed to be linked to patient charts and invalid are not allowed to be linked to patient charts.

Relied Software: None

Standard: USCDI v1

Standard Update: Not applicable

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(b)(2): Clinical information reconciliation and incorporation

Measure:

Total % of Incoming CCDA files which are incorporated to chart and reconciled and TOC generated with incorporated data.

Denominator: Total no. of valid CCDA received + total no. of files linked to patient chart and reconciled.

Numerator: Total no. of patients in denominator for which TOC is generated and transmitted successfully.

Description: The denominator count is based on data log which gives the count of total incoming CCDA files (both CCDA release 2.1 and 1.1 standards) and total of CCDA files which are linked to patient chart and reconciled. The numerator count is about the count patients for which TOC is generated with reconciled data. The data required for attaining the total % is collected from EHR data base between the data log monitoring schedule of 5 days.

Justification: The measure needs capabilities of mapping CCDA files to patient chart and performing reconciliation of patient problem list, allergies and medications. Also, EHR must be able to generate

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Referral summary after reconciliation and incorporation. The denominator and numerator counts which are pulled from data log will give the count of such records.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Relied Software: None

Standard: USCDI v1

Standard Update: Not applicable

Expected outcome:

- a) EHR will successfully accept at least one Incoming CCDA Messages and Map to Patient charts.**
- b) For at least one patient Medication Reconciliation is performed for Medication allergies, Problem list and Medications.**
- c) For at least one patient TOC is generated successfully for whom Reconciliation is performed.**

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(b)(10): Electronic Health Information (EHI) Export

Measure:

Total % of Successful Electronic Health Information Exports

Denominator: (Total no. of Manual EHI Exports + Total no. of Automated Data exports) – Total no. of Data exports failed due to wrong data entry by users.

Numerator: Total no. of successful EHI Exports + Total no. of Successful Automated Data Exports completed without any errors.

Description: The data export criteria needs EHR to have capability to export CCDA for multiple patients manually and also through a software which exports data to a location. The data logs of manual export will confirm that the Data export is working without errors. The data logs for Schedule automated data export will prove that scheduled data export is working as per schedule and CCDA files are exported accordingly. The manual data export performed by the

user and automated data export data logs are collected as per the schedule and monitored to ensure EHR has a functioning Data Export module.

Justification: As mentioned in the certification criteria 170.315 (b)(10), Denominator will demonstrate that EHR can support Manual and automated Electronic Health Information Exports. The numerator count will demonstrate the total manual and automated EHI exports which were successful. Similarly, EHR provides software to schedule EHI exports to a storage location. Using this software user can schedule the EHI export of multiple patients on to a storage location. The denominator and numerator of Scheduled automated EHI export will demonstrate the scheduled EHI export requirement. All the files which are getting exported will undergo a validation and holds the patient data if it user documentation is not a valid entry or does not follow the required standards for documentation.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs

Expected Outcome:

At least 95% of Successful EHI exports is expected. Where one EHI Export is equal to one patient data set.

Relied Software: None

Standards Update: Not applicable.

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(e)(1): View, download, and transmit to 3rd part

Measure: Total percentage of patient for whom CCDA is made available to view, download and transmit. Out of which Total percentage of patient who performed the actions view or download or transmit of CCDA files.

Denominator = Total no. of patient visits during the Data log monitoring schedule period.

Numerator = Total no. of patients from Denominator for whom CCDA is made accessible and actions like view or download or transmit is performed.

Total Percentage = [(Numerator)\(Denominator)]*100

Description: The measure total percentage of patients for whom CCDA is made available to view, download and transmit will demonstrate that EHR Your way has a working module to

CCDA view download and transmit to patient. The data logs of Denominator based on the appointment schedule will give us the count of patients for whom the CCDA is supposed to be made available. Data logs of patients from Denominator, for whom CCDA is viewed, downloaded or transmitted. This would give the combine count of patients who performed the actions of View, Download of CCDA and Transmission of CCDA using the data provided by EHR Your Way.

Data logs like:

- a) Total no. of patients visited during Data logging schedule.
- b) Total no. of patients for whom CCDA is made accessible
- c) Total no. of patients who performed CCDA View action.
- d) Total no. of patients who performed CCDA downloads action.
- e) Total no. of patients who performed CCDA transmission action.

*Note: Even if patient performs all 3 actions view, download and transmission it will be counted only as 1 for numerator. The collection of above logs is to prove that EHR is having a functioning module.

Justification: As specified in 170.315 (e)(1)(i)(A-D), the data logs collected for calculating the percentage of patients for whom CCDA is made available will explain that EHR is having ability to provide CCDA to patient or authorized people. The data logs of View, Download and Transmit will help demonstrate how frequently user is using these functionalities.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: At least one patient out of Denominator must be able to perform actions of View or Download or transmit. Expected outcome is determined to be only one, because the numerator totally depends upon patients and clients who are using CCDA through their portal. Since we cannot predict or estimate any percentage of usage, we are considering it as success if one patient is able to perform the actions at a minimum.

Relied Software: None
Standard: USCDI v1
Standard Update: Not applicable

Milestones/Timelines:
Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)
Data Analysis Schedule: 06/10/2025 to 06/15/2025

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Associated Criteria ID: 170.315(c)(1) CQM - Record and Export

Measure: Total % of successful exports of Valid QRDA 1

Denominator: Total no. of patients for who required data is documented to generate QRDA 1.

Numerator: Total no. of successful patients files for whom valid QRDA 1 is generated.

Total % of successful exports of Valid QRDA 1 = [Numerator/ Denominator]* 100

Description: The data logs required for this measure are collected for the duration of 20 days. These data logs must have the list of patients for who required data for QRDA 1 is documented. To ensure that EHR has ability to allow users to document all required data for QRDA 1 we collect the data logs of patients who has at least one Data entry done per QRDA 1 Component.

Also to ensure that EHR has ability to validate the QRDA1 files before exporting we measure the percentage of successful exports by logging the information of total QRDA1 exports vs. total QRDA1 successful exports. In production providers do not actually use import functionality, so there is no scope of testing for this function. Generation of valid QRDA 1 proves EHR has ability to export the files based on specifications mentioned in 170.315 (c) (1)

Justification: The successful attempts of exporting QRDA 1 will demonstrate that user can export this information without help of technical person. EHR validates the files which are getting exported and user will receive validations if required data is not recorded which are mandatory to generate respective files. The successful export of QRDA 1 proves EHR Your Way has the functionality working as expected in this certification criteria.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: > = 95% of Successful QRDA 1 export.

QRDA 1 export logs must be reviewed and notice the successful export; if failure of export is noted it must be due to invalid data or Data validations.

Relied Software: None

Standards Update: Not Applicable.

Milestones/Timelines:

Data log monitoring Schedule: 01/01/2025 To 03/31/2025 (3 months)

Data Analysis Schedule: 04/10/2025 to 04/15/2025

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Associated Criteria ID: 170.315(c)(2) CQM – Import and Calculate

Measure: Total % of successful patients QRDA 1 files imported and calculated

Denominator: Total no. of QRDA 1 patient files imported into EHR.

Numerator: Total no. of unique patients from Denominator who are considered for calculating

**Total % of successful patients QRDA 1 files imported and calculated = [Numerator/ Denominator]*
100**

Description: The data logs required for this measure are collected for the duration of 25 days. These data logs must have the list QRDA 1 file patient names whose data is imported into EHR. This will help demonstrate the ability of importing QRDA 1 files into EHR.

Justification: The total % of successful patients QRDA 1 files imported and calculated will demonstrate that user can import QRDA 1 without help of technical person. Also, the capability of calculating the imported data as per the standards mentioned in 170.315(c)(2).

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: > = 95% of QRDA 1 Patient files must be imported and used for calculation.

Relied Software: None

Standards Update: Not Applicable.

Milestones/Timelines:

Data log monitoring Schedule: 01/01/2025 To 03/31/2025 (3 months)

Data Analysis Schedule: 04/10/2025 to 04/15/2025

Associated Criteria ID: 170.315(c)(3) CQM – Report

Measure: Total % of successful QRDA III files generated and exported from EHR.

Denominator: Total no. of QRDA III files attempted to generate and export from EHR – Total no. of QRDA III files failed to generate showing validations or data entry errors.

Numerator: Total no. of Valid QRDA III files successfully generated and exported from EHR

Total % of successful QRDA III files generated and exported from EHR = [Numerator/Denominator]* 100

Description: The data logs required for this measure are collected for the duration of 25 days. These data logs must have the list of attempts made to generate QRDA III and successful valid QRDA III files generated. Also the list of attempts which failed due to data entry errors.

Justification: The Total % of successful QRDA III files generated and exported from EHR will demonstrate that user QRDA III without help of technical person. Also, the capability of validating a QRDA III file before it is exported or transmitted from EHR. This demonstrates that EHR has capability of generating QRDA III as standards mentioned in 170.315(c)(3). We do not support Inpatient settings so, we do not support generation of QRDA I required for Inpatients

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: > = 95% of QRDA III generation and export must be successful.

Relied Software: None

Standards Update: Not applicable

Milestones/Timelines:

Data log monitoring Schedule: 01/01/2025 To 03/31/2025 (3 months)

Data Analysis Schedule: 04/10/2025 to 04/15/2025

Associated Criteria ID: 170.315(h)(1) Direct Project

Measure:

Outgoing: Total % of Successful outgoing and incoming transmissions of Clinical messages through Direct Address.

Denominator: Total no. of Outgoing and incoming Transmissions initiated from EHR Your Way

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Numerator: Total no. of Outgoing and incoming wrapped Transmissions was successful

Total % of Successful Outgoing and incoming Transmissions = [Numerator/Denominator] * 100

Description: The data base logs of total outgoing and incoming clinical messages is collected to calculate the percentage of successful transmissions which proves EHR has this feature working in real time. This data is collected as per the scheduled data logging period of 5 days. The Denominator counts which show the count of Outgoing and Incoming transmissions. The numerator count will demonstrate that EHR is able to send and receive wrapped clinical messages through direct address.

Justification: When we log the data for Sending and Receiving we will collect the information of total messages which are initiated to send and also the count of messages received into the EHR data base for a specific direct address. While sending the clinical message the recipient may have issues due to which we will not receive a successful notification. Similarly for incoming clinical messages, we will collect the count of total incoming messages to a specific direct address as denominator, EHR must be able to show all the incoming messages to the users and there will be a flag in data logs which will get updated as soon as it is displayed for user.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: EHR must have > =95% of all clinical messages transmitted through direct address are successful. Only the messages which failed must be due to the issues from Recipient.

Relied Software: None

Standards Update: Not applicable

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(f)(5): Transmission to public health agencies - electronic case reporting

Measure: Total percentage of electronic case reports generated and transmitted.

Denominator: Total no. of encounters which meets the Trigger requirement for Generating Electronic Case report.

Numerator1: Total no. of encounters from Denominator for which Electronic case report is generated.

Numerator2: Total no. of encounters from Denominator for which Electronic Case report is transmitted to Public health Agencies.

Total percentage of electronic case reports generated and Transmitted = $[\text{Numerator 1} + \text{Numerator 2}] / \text{Denominator} * 100$

Description: The data logs of encounters which meet the Triggers required for Electronic case reporting is collected for the duration of 5 days as per the data log schedule. The denominator count will prove that EHR has capability of generating Triggers based on the Trigger codes table. The numerator 1 will demonstrate that EHR has capability of generating electronic case report based on trigger. Then numerator 2 is collected for the practices which have established connectivity with a public health agency. This is the count of Electronic case reports which are transmitted to public health agencies.

Justification: The requirements of Electronic case reporting are to attain the capability of maintain the Table for Trigger codes, identify the encounters which meet the trigger, generate the electronic case report and transmit it to public health agencies. We do not have clients or providers who requested integration with health agencies for electronic transmission. Due to which, we consider export of electronic case report from EHR for Numerator 2. According to this requirement the logs are collected and total percentage of successful electronic case reports generated and transmitted are calculated.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: The visits recorded in denominator must be based on Trigger table and EHR must be able to generate Electronic case report ready for transmission for all encounters which are considered in denominator. At least for one patient encounter must be triggered and electronic case report must be exported or transmitted.

Relied Software: None

Standard: USCDI v1

Standard Update: Not applicable

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

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**Associated Criteria ID: 170.315(f)(1) Transmission to immunization registries
Transmission to immunization registries Measure: 1: Total percentage of Immunization messages transmitted to Immunization Registries**

Denominator: Total no. of Historic Vaccination information recorded with CVX + Total no. of Administrated vaccines documented with NDC in EHR

Numerator: Total no. of Successful Historic Vaccination information transmitted successfully + Total no. of Administrated vaccines transmitted successfully Immunization Registries. Total %: [Numerator/Denominator] * 100

Transmission to immunization registries Measure 1: Description: The data logs which are required for this measure must have the list of historic vaccine with CVX codes and the list of vaccines administered with NDC codes. As per the standards mentioned in 170.315 (f)(1)(i). To get the numerator count we need to the data log of total transmissions which are successful. These logs must also have the flag which differentiates Historic vaccine record and administered vaccine record.

Transmission to immunization registries Measure 1 Justification:

As mentioned in 170.315 (f)(1)(i) the measure 1 will demonstrate that EHR has capability to document Vaccine historic information using CVX codes and Vaccine Administration details using NDC codes. All the messages generated from EHR are based on HL7 2.5.1 Implementation Guide (IG) for Immunization Messaging (IM), Release 1.5. This would satisfy the requirement of these test criteria.

Transmission to immunization registries Measure 1 Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Transmission to immunization registries Measure 1 Expected Outcome: The report of all immunization messages transmitted to registry must show zero errors. If an error is observed it is expected to be error from recipient. No standard related errors are expected.

Transmission to immunization registries Measure 1 Relied Software: None

Transmission to immunization registries Measure 1 Standards Update: Not

applicable Transmission to immunization registries Measure 1

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Vaccine Hx and Vaccine Forecast Measure: 2: Total percentage of successful requests executed to get Vaccine history and Vaccine forecast.

Denominator: Total no. of Vaccine History and vaccine forecast requests initiated in EHR

Numerator: Total no. of Vaccine History responses received from Immunization Registry and vaccine forecast responses displayed.

Total %: [: Total no. of Vaccine History responses received from Immunization Registry and vaccine forecast responses displayed / no. of Vaccine History and vaccine forecast requests initiated in EHR] * 100

Vaccine Hx and Vaccine Forecast Measure: 2: Description: The data logs of Vaccine hx requests and responses, vaccine forecast requests and response are collected during the data logging schedule of 5 days. This data will prove that EHR has the real time working modules to send vaccination information to registry, request vaccine hx and receive response; request vaccine forecast and receive response from Immunization registries.

Vaccine Hx and Vaccine Forecast Measure: 2: Justification: The data logs collected will demonstrate the capability of getting Vaccine hx and vaccine forecast of patients as per the standards mentioned in

170.315 (f)(1)(ii). All the messages generated from EHR are based on HL7 2.5.1 Implementation Guide (IG) for Immunization Messaging (IM), Release 1.5. This would satisfy the requirement of these test criteria.

Vaccine Hx and Vaccine Forecast Measure: 2 Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs

Vaccine Hx and Vaccine Forecast Measure: 2 Expected Outcome: Total percentage of successful requests executed is expected to be > = 95%. If an error is observed it is expected to be error from registry who supplies data to EHR. No standard related errors are expected.

Transmission to immunization registries Measure 2 Relied Software: None

Transmission to immunization registries Measure 2 Standards Update: Not

applicable Transmission to immunization registries Measure 2

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

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Associated Criteria ID: 170.315(g)(10) Standardized API for patient and population services
Measure: Total percentage of successful responses given to API requests.

Denominator: Total no. of Successful API requests from Client Applications.

Denominator Exclusion: Total no. of invalid API requests from Client Applications. This includes the requests with wrong passwords or invalid OAuth Tokens. Numerator: Total no. of successful responses from EHR Your Way

Total %: [Total no. of Successful API requests from Client Applications - Total no. of invalid API requests from Client Applications. / Total no. of successful responses from EHR Your Way] * 100

Description: The data logs of API requests and responses are collected during the data logging schedule of 40 days. This data will prove that EHR has the real time working modules to receive and respond to API requests in FHIR format.

Justification: The measure demonstrates the no. of API requests and successful responses. Since, we are having Denominator exclusion; it will demonstrate that EHR is able to decline the invalid API requests with error.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: The report will explain that EHR is capable of receiving and responding to the API request with OAuth token. Total % of successful responses is expected to be > = 95%

Relied Software: None

Standards Update: Not Applicable.

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 05/30/2024 (5 months)

Data Analysis Schedule: 06/10/2025 to 06/15/2025

Associated Criteria ID: 170.315(b)(3): Electronic prescribing

Measure:

Transmit ERx : Total % of New Oral liquid Electronic Prescriptions with "Diagnosis" element in Medication segment and mL in units.

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Denominator: Total no. of New Oral Liquid Electronic Prescription Orders in EHR with Diagnosis – No .of prescriptions having zeros before decimal.

Numerator: Total no. of Prescriptions in Denominator which were transmitted successfully with Diagnosis element in Medication segment and mL in units.

Description: All the prescriptions with route as oral and form as liquid and diagnosis mentioned are tracked to measure. The data logs must contain the list of medications prescribed with route Oral, drug form Liquid and Diagnosis mentioned. The electronic transmission status of these medication records must be tracked.

Justification: The functional expectations of 170.315 (b)(3)(ii)(A); (b)(3)(ii)(C);(b)(3)(ii)(E) needs to transmit electronic prescriptions with latest standards NCPDP SCRIPT Standard Implementation Guide Version 2017071. Also all oral liquid prescriptions must have ml as unit; diagnosis element for all applicable medications. This measure helps to review if the prescriptions transmitted electronically; with oral liquids have ml as unit; and diagnosis element for applicable transmissions. All the prescriptions must not have any zeros before decimal.

Care Setting: Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

Expected Outcome: Zero prescriptions transmitted without 00's for the amounts less than 1.

The successful electronic transmission of prescriptions must > = 95%

Relied Software: None

Standards Update: Not applicable

Milestones/Timelines:

Data log monitoring Schedule: 02/01/2025 To 06/30/2024 (6 months)

Data Analysis Schedule: 07/10/2025 to 07/15/2025

EHR Your Way: Real World Testing Plan

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

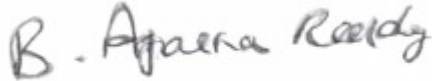
IT developer’s Real World testing requirements.”

Authorized Representative Name: Aparna Reddy

Authorized Representative Email: aparna.reddy@ehyourway.com

Authorized Representative Phone: 619-922-0666

Authorized Representative Signature:

A handwritten signature in black ink that reads "B. Aparna Reddy". The signature is written in a cursive style with a large initial "B" and a period following it.

Date: 10/04/2024