

REAL WORLD TESTING RESULTS REPORT TEMPLATE

BACKGROUND & INSTRUCTIONS

Under the ONC Health IT Certification Program (Certification Program), health IT developers are required to conduct Real World Testing of their certified health IT (45 CFR 170.405). The Office of the National Coordinator for Health Information Technology (ONC) issues Real World Testing resources to clarify health IT developers' responsibilities for conducting Real World Testing, to identify topics and specific elements of Real World Testing that ONC considers a priority, and to assist health IT developers in developing their Real World Testing plans and results reports.

[A Real World Testing plan template](#) was created to assist health IT developers in organizing the required information that must be submitted for each element in their Real World Testing plan. To accompany the plan template, ONC has also provided this results report template.

While the use of this template is voluntary, health IT developers may find it useful in preparing their Real World Testing results report(s). Health IT developers must submit one year of results to address the Real World Testing of eligible products as outlined in their previous year's Real World Testing plan(s). If adjustments to approaches are made throughout Real World Testing, the health IT developer should reflect these adjustments in their Real World Testing results report. ONC expects that the results report will include a list of these changes, the reasons for them, and how intended outcomes were more efficiently met as a result.

While every effort has been made to ensure the accuracy of restatements of 45 CFR Part 170, this template is not a legal document. The official program requirements are contained in the relevant laws and regulations. This resource should be read and understood in conjunction with the following companion resources, which describe in detail many of the Certification Program requirements referenced in this resource.

- [Real World Testing—What It Means for Health IT Developers – Fact Sheet](#)
- [Real World Testing Resource Guide](#)
- [Real World Testing Certification Companion Guide](#)

Health IT developers should also review the following regulatory materials, which establish the core requirements and responsibilities for Real World testing under the Certification Program.

- 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program final rule, [85 FR 25642](#) (May 1, 2020) (**ONC Cures Act Final Rule**)
 - [Section VII.B.5](#)— “Real World Testing”

TEMPLATE INSTRUCTIONS

The following template is organized by elements required to be submitted in the Real World Testing results report. Each section provides a field for submitting responses and/or explanations for how the health IT developer addressed each required element in their Real World Testing approach. These fields serve as a foundation of information required for developing a Real World Testing results report and can be expanded with additional rows or columns to address the specific needs of the Real World Testing results being submitted.

GENERAL INFORMATION

Plan Report ID Number: [For ONC-Authorized Certification Body use only]

Developer Name: **Payoda Technology Inc.**

Product Name(s): **HealthViewX**

Version Number(s): **2.0.85**

Certified Health IT Product List (CHPL) Product Number(s): **15.04.04.3054.Heal.02.00.1.19100**

Developer Real World Testing Plan Page URL: <https://www.healthviewx.com/certification-disclosure/>

Developer Real World Testing Results Report Page URL [if different from above]: NA

[OPTIONAL] CHANGES TO ORIGINAL PLAN

If a developer has made any changes to their approach for Real World Testing that differs from what was outlined in their plan, note these changes here.

| Summary of Change [Summarize each element that changed between the plan and actual execution of Real World Testing] | Reason [Describe the reason this change occurred] | Impact [Describe what impact this change had on the execution of your Real World Testing activities] |
|---|---|--|
| Not Applicable | Not Applicable | Not Applicable |

[OPTIONAL] WITHDRAWN PRODUCTS

If a developer withdrew any products within the past year that were previously included in their Real World Testing plan, please provide the following information.

| | |
|--|-----------------------|
| Product Name(s): | Not Applicable |
| Version Number(s): | Not Applicable |
| CHPL Product Number(s): | Not Applicable |
| Date(s) Withdrawn: | Not Applicable |
| Inclusion of Data in Results Report: [Provide a statement as to whether any data was captured on the withdrawn products. If so, this data should be identified in the results report.] | Not Applicable |

SUMMARY OF TESTING METHODS AND KEY FINDINGS

Provide a summary of the Real World Testing methods deployed to demonstrate real-world interoperability, including any challenges or lessons learned from the chosen approach. Summarize how the results that will be shared in this report demonstrate real-world interoperability.

If any non-conformities were discovered and reported to the ONC-ACB during testing, outline these incidences and how they were addressed.

Note: A single Real World Testing results report may address multiple products and certification criteria for multiple care settings.

Overview:

HealthViewX Referral Management App provides end-to-end referral life-cycle management with bi-directional EMR integration and also automates insurance prior authorization process. The Platform allows secure online referral communication and coordination between referring and receiving providers with real-time referral status tracking and EMR sync. This also enables transfer of CCDA document fetched from EMR and sent via Direct Message to Receiving Provider/Specialist Office in a secure way there by adhering to (b.1) Transition of Care criterion and captures parameters required for MU reporting such as TOC Sent, TOC Sent Electronically and Acknowledgement Received information. The app also calculates and displays the Performance Percentage, Provider wise for MU Credits Reporting Purpose.

Use Case 1 Implemented/Tested: Transition of Care (TOC Sent Electronically) – In order to test the real world interoperability the HealthViewX application integrated with the NextGen EMR and also with the third party Direct Message vendor that enabled the DM component within the system. Whenever a Referral Order is sent to the specialist office, the application also fetched the recent CCDA file from NextGen EMR and transferred the consolidated data to the specialist office via Direct Message through HISP Direct Messaging service. Recipients were able to view the Referral Order and the CCDA file in their inbox wherever their DM is configured for e.g. in the destination EMR or the DM inbox directly. This also incremented the “TOC Sent

electronically” data within the HealthViewX application.

Use Case 2 Implemented: Meaningful Use Stage 3 Report (for Referral MU Credits) – In addition to the feature of capturing the Transition of Care information, HealthViewX also captured the Acknowledgement Received status for the TOC Sent Orders and calculated the performance percentage of each Ordering Provider/Practice with the formula (mentioned below) and displays the MU Stage 3 report for the selected duration. The MU Stage 3 report is calculated with the below formula automatically which is then presented by the practices to the MU audit team for MU credits.

$$\frac{\text{TOC Sent Electronically (Numerator)}}{\text{Total Referral Orders (Denominator)}} \times 100 = \text{Performance \%}$$

Sample Real Time MU Report:

MU3 Report

| Provider | TIN | Total Referrals (Denominator) | TOC Sent | TOC Sent Electronically (Numerator) | Acknowledgement Received | Performance % |
|--------------------------|-----|-------------------------------|----------|-------------------------------------|--------------------------|---------------|
| Christina Barba Pech | - | 36 | 13 | 13 | 1 | 36.11 |
| Rachel Szatkowski | - | 9 | 0 | 0 | 0 | 0.00 |
| Andrew Mitchell | - | 77 | 25 | 25 | 2 | 32.47 |
| Rosa Maria Pascual | - | 9 | 1 | 1 | 0 | 11.11 |
| Peter Kamal Soliman | - | 52 | 10 | 10 | 6 | 19.23 |
| Yasaman Sakhakorn | - | 8 | 6 | 6 | 0 | 75.00 |
| Megan A Leeper | - | 65 | 10 | 10 | 1 | 15.38 |
| Amy Jo Gowan | - | 55 | 3 | 3 | 2 | 5.45 |
| Todd Monroe | - | 6 | 1 | 1 | 1 | 16.67 |
| Christine Marie Johnston | - | 39 | 15 | 15 | 0 | 38.46 |
| Nasr Anees | - | 65 | 26 | 26 | 0 | 40.00 |

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STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

Both required and voluntary standards updates must be addressed in the Real World Testing plan. Real World Testing plans must include all certified health IT updated to newer versions of standards prior to August 31 of the year in which the updates were made.

Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).

Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.

No, none of my products include these voluntary standards.

| | |
|--|--|
| Standard (and version) | All standard versions are those specified in USCDI v1 |
| Updated certification criteria and associated product | 170.315 (b)(1): Transitions of Care, HealthViewX Referral Management V2.0.85 |
| CHPL Product Number | 15.04.04.3054.Heal.02.00.1.191002 |
| Conformance measure | Not Applicable |

Care Setting(s)

The expectation is that a developer's Real World Testing is conducted within each type of clinical setting in which their certified health IT is marketed. Health IT developers are not required to test their certified health IT in every setting in which it is marketed for use.

List each care setting that was tested.

The Real World Testing is conducted / implemented for a California based FQHC where the use case mentioned within the Real World Test Plan "Community Hospitals can place clinical referrals within the HealthViewX application and transfer CCDAs documents to specialist offices via Direct Message which will be counted for Transition of Care criteria (b(1))" is executed.

Metrics and Outcomes

Health IT developers should detail outcomes from their testing that successfully demonstrate that the certified health IT:

1. is compliant with the certification criteria, including the required technical standards and vocabulary codes sets;
2. is exchanging electronic health information (EHI) in the care and practice settings for which it is marketed for use; and/or,
3. EHI is received by and used in the certified health IT.

(From 85 FR 25766)

Health IT developers could also detail outcomes that did not result from their measurement approach if that better describes their efforts.

Within this section, health IT developers should also describe how the specific data collected from their Real World Testing measures demonstrate their results. Where possible, context should be provided to the measures and results to understand the number of sites/users/transactions tested for the specified measures (i.e., the denominator for comparison to the reported results). If applicable, any Relied upon Software that is used to meet a criterion's requirements should be included in this section.

| Measurement /Metric | Associated Criterion(a) | Relied Upon Software (if applicable) | Outcomes | Challenges Encountered (if applicable) |
|---------------------------------|--------------------------------------|--------------------------------------|---|--|
| Total Referral Orders | 170.315(b)(1) Transitions of care | Not Applicable | System automatically captured the total number of Referral Orders or Transactions that are performed for the selected reporting durations | Not Applicable |
| TOC Sent | 170.315(b)(1) Transitions of care | MaxMD Direct Messaging System | System captured whether the Transition of Care Document Sent or Not Sent along with the Patient Record/Referral Order | Not Applicable |
| TOC Sent Electronically | 170.315(b)(1) Transitions of care | MaxMD Direct Messaging System | System automatically captured the mode by which the Transition of Care Document Sent (Electronically or by any other Means) | Not Applicable |
| Acknowledgement Received | 170.315(b)(1) Transitions of care | Not Applicable | System captured the acknowledgement for the TOC Sent Electronically from the recipient and recorded. | Not Applicable |
| Performance (%) | 170.315(b)(1) Transitions of care | Not Applicable | Automatically calculated the performance percentage of each facility/ordering provider and present the data in MU Stage 3 Report | Not Applicable |

KEY MILESTONES

Include a list of key milestones that were met during the Real World Testing process. Include details on how and when the developer implemented measures and collected data. Key milestones should be relevant and directly related to outcomes discussed.

For each key milestone, describe when Real World Testing began in specific care settings and the date/timeframe during which data was collected.

| Key Milestone | Care Setting | Date/Timeframe |
|---|--------------|----------------|
| Capture the required parameters such as Total Referral Orders, TOC Sent, TOC Sent Electronically and Acknowledgement Received for each Referral Order Transaction | FQHCs | Jan 2022 |
| Calculate the Performance Percentage and display the data for the chosen duration and Ordering Provider/Practice | FQHCs | Jan 2022 |