GENERAL INFORMATION

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

Developer Name: MD Synergy Solutions, LLC

Product Name(s): Althea Smart EHR Version 3.0

Version Number(s): Version 3.0

Certified Health IT: MD Synergy Solutions, LLC

Product List (CHPL) ID(s): 15.04.04.1821.Alth.03.02.1.221205

Developer Real World Testing Page URL: https://www.mdsynergy.com/Disclosure

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

At this time, the Certified Health IT Module is sold to Ambulatory care setting (Outpatient clinics). For this reason, the Real World Testing plan will apply to this care setting. We will test this in two types of settings. One will be a multi provider practice and the other will be a single provider practice.
Since the case management system works on all types of documents, there are several certification criteria that can be tested simultaneously. All criteria involving the Consolidated Clinical Document Architecture (C-CDA) documents will be tested, including
§ 170.315(b)(1) Transitions of care
§ 170.315(b)(2) Clinical information reconciliation and incorporation
170.315(b)(10) EHI Export
§ 170.315(c)(1) Clinical Quality Measures – Record and Export
§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate
§ 170.315(c)(3) Clinical Quality Measures - Report
§ 170.315(e)(1) View, download, and transmit to 3rd party
§ 170.315(g)(7) Application access— patient selection
§ 170.315(g)(9) Application access— all data request
§ 170.315(g)(10) Standardized API for patient and population services
§ 170.315(h)(1) Direct Project

This test plan will also cover the prescribing requirements as in
§ 170.315(b)(3) Electronic prescribing

Verification of the created patient record export does require interaction with a system external to the organization (and with a different vendor).

Standards Updates (including standards version advancement process (svap) and United States core data for interoperability (uscdi))

On Dec 5, 2023, Althea Version 3.0 was certified for C.1, C.2 and C.3

CARE SETTING(S)

Ambulatory Single Provider and multi provider Care Settings: The case management system supports the deployment and tracking of documentation within the Single Provider and multi provider care settings

OVERALL EXPECTED OUTCOMES

- Real World Testing will demonstrate that the Health IT Module is conformant to the following certification criteria
  § 170.315(b)(1) Transitions of care
  § 170.315(b)(2) Clinical information reconciliation and incorporation
  § 170.315(b)(10) EHI Export
  § 170.315(c)(1) Clinical Quality Measures – Record and Export
  § 170.315(c)(2) Clinical Quality Measures – Import and Calculate
  § 170.315(c)(3) Clinical Quality Measures – Report
  § 170.315(e)(1) View, download, and transmit to 3rd party
  § 170.315(g)(7) Application access— patient selection
  § 170.315(g)(9) Application access— all data request
  § 170.315(g)(10) Standardized API for patient and population services
  § 170.315(h)(1) Direct Project and

  § 170.315(b)(3) Electronic prescribing

- Real world testing will show that the Health IT Module completed the requirements with less than 1% error
- Real world testing will show that the Health IT Module will be able to share the CCDA with all technical standards being met.
- Real world testing will show that the Health IT Module that the authorized prescriber is able to perform all e prescribing requirements specified in 170.315(b)(3) Electronic prescribing
- Real World Testing will demonstrate that the Certified Health IT Developer's certified API technology can manage requirements specified in 170.315(g)(7), 170.315(g)(9) and 170.315(g)(10)
- Real World Testing will demonstrate that the Health IT module can submit Quality measures to CMS and calculate how many of them were submitted for how many providers/groups.

SCHEDULE OF KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Real world testing documentation to be provided to the authorized representatives and providers running the Althea Application. This will include specific instructions on what to look for, how to record issues encountered, and any Customer Agreements if applicable.	Single and Multiple Provider(s) clinic	November 1st 2024
Contact Practice in both settings to start collecting Data	Single and Multiple Provider(s) clinic	January 1st 2025
Meet with previously identified providers and authorized representatives to ensure that Real World Testing protocols are effective.	Single and Multiple Provider(s) clinic	February 2025
Follow-up with providers and authorized representatives to understand any issues arising with the data collection.	Single and Multiple Provider(s) clinic	Quarterly, 2025
Data collection and review.	Single and Multiple Provider(s) clinic	Quarterly, 2025
End of Real World Testing period/final collection of all data for analysis.	Single and Multiple Provider(s) clinic	January 2026
Analysis and report creation	Single and Multiple Provider(s) clinic	January 15, 2026
Submit Real World Testing report to ACB (per their instructions)	Single and Multiple Provider(s) clinic	February 1, 2026

MEASURES USED

The following outlines the measures that have been identified to best demonstrate conformance to multiple certification criteria concerning the sharing of EHI

§ 170.315(b)(1) Transitions of care
§ 170.315(b)(2) Clinical information reconciliation and incorporation
§ 170.315(b)(10) EHI Export
§ 170.315(c)(1) Clinical Quality Measures – Record and Export
§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate
§ 170.315(c)(3) Clinical Quality Measures - Report
§ 170.315(e)(1) View, download, and transmit to 3rd party
§ 170.315(g)(7) Application access— patient selection
§ 170.315(g)(9) Application access— all data request
§ 170.315(g)(10) Standardized API for patient and population services
§ 170.315(h)(1) Direct Project.

ASSOCIATED CERTIFICATION CRITERIA

Measure 1:

Certification Criteria	Requirement
§ 170.315(b)(1) Transitions of care	(i)(B) – Receive Using Edge Protocol for SMTP (i)(A) – Send Using Edge Protocol for SMTP
§ 170.315(h)(1) Direct Project.	(1)(i) Applicability Statement for Secure Health Transport (Direct) - Send (1)(i) Applicability Statement for Secure Health Transport (Direct) – Receive (1)(ii) Delivery Notification In Direct – Receive
Number of messages and CCDA that were sent or received by the Physicians/authorized users using the Health IT module	This measure will test the frequency of usage by the Providers for Transition of care and Direct Project (Surescripts Clinical Direct Messaging). Email logs will be reviewed to see the number of messages and CCDA documents that were sent or received by the Provider.
Relied upon software	Surescripts Clinical Direct Messaging

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

Measurement/Metric	Justification

§ 170.315(b)(1) Transitions of care	This measure will test two main functionalities. Sending a referral CCDA document and receiving a referral CCDA document. The user can send using the encrypted messaging system to external EHR providers or external recipients. The documents can be shared to the patient via the patient portal This metric will help us verify how transition of care documents (CCDA) are shared between parties.
§ 170.315(h)(1) Direct Project.	This measure will test how using Surescripts Clinical Direct Messaging information is shared between parties in a secure way

TEST METHODOLOGY

The testing methodology will include the authorized representatives or providers of the Health IT system to send and receive Transition of care documents. When a transition care of document is sent the system will log the details of when it was sent. These logs will be reviewed to determine the frequency of usage and validate proper operation of this measure.

The Test methodology will test the conformance of this measure

Verification of the created patient record export does require interaction with a system external to the organization (and with a different vendor).

EXPECTED OUTCOME

At the end of this test the testing, the user should be able to send a Transition of care CCDA document over to the recipient and should able to receive the CCDA from another user into the system

Error logs and email logs will be maintained, reviewed, and trended over time for usage.

Measure 2:

Certification Criteria	Requirement
§ 170.315(b)(2) Clinical information reconciliation and incorporation	(b)(2) Clinical Information Reconciliation
Number of messages reconciled by the Physicians/authorized users using the Health IT module	This measure will test the frequency of messages that came for reconciliation and how many were reconciled by the Provider.

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

Measurement/Metric	Justification
§ 170.315(b)(2) Clinical information reconciliation and incorporation	This measure will test what the authorized user can do once a CCDA is received. The authorized user should have the option to reconcile Current Medication, Allergies and Problems The measure will demonstrate how the EHI is reconciled into the Health IT Module

TEST METHODOLOGY

When a transition care of document is received, the authorized user will be given the ability to reconcile. After successful reconciliation the appropriate medication, allergy or problem is updated into the patient's chart. The authorized user will confirm the information sent in the CCDA was reconciled successfully by comparing the data.

Audit logs will be analyzed to make sure there were no errors while reconciling the data and successful reconciled data is visible in the Health IT Module. Audit logs will be trended over time for usage.

The Test methodology will test the conformance of this measure.

EXPECTED OUTCOME

At the end of this test the testing, the authorized user will be able to update and reconcile the patients medications, allergies and problems in the Health IT Module
Error logs will be maintained and reviewed
Error rates will tracked and trended over time for usage.

Measure 3:

Certification Criteria	Requirement
170.315(b)(10) EHI Export	EHI Export
Number of files exported by the Physicians/authorized users using the Health IT module	This measure will assess the frequency of usage. This will provide a metric on usage of Data export done by the user using the Health IT module.

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

Measurement/Metric	Justification
§ 170.315(b)(10) EHI Export	This measure will test how an authorized user can export data in CCDA or FHIR standards format. This will also test how the authorized user can do a single patient export and all patient export. This is another way to share EHI information with 3rd parties This export functionality is used only by authorized credentialed users in the Health IT Module

TEST METHODOLOGY

This will have two use cases. One is for single patient and the other is for all patients. The authorized user can choose a single patient or choose to export all patients. The testing methodology will test both use cases
Audit logs will be reviewed for errors. Exported files will be checked for conformance and trended over time for frequency of usage.

The Test methodology will test the conformance of this measure

EXPECTED OUTCOME

At the end of the test the recipient will receive the exported file by a public URL with the zip file. This zip will contain the exported json files for all requested patients.

Error logs will be maintained, reviewed, and trended over time for usage

Verification of the created patient record export does require interaction with a system external to the organization (and with a different vendor).

Measure 4:

Certification Criteria	Requirement
§ 170.315(e)(1) View, download, and transmit to 3rd party	(i)(A) – View, (i)(B) – Download (VDT)(i)(C) – Transmit to Third Party, (ii) – Activity History Log (i)(D) - Timeframe Selection
Frequency Usage by the authorized patients of Providers using the Health IT module	This measure will test the frequency of usage by the Patients of Providers. Email logs will be reviewed to see the number of times the patient accessed the View, Download, Transmit functionality.
Relied upon software	Surescripts Clinical Direct Messaging

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

Measurement/Metric	Justification
§ 170.315(e)(1) View, download, and transmit to 3rd party	This measure will validate how the patient can view, download, Transmit the CCDA that was received from the provider Audit log has to be maintained for every action taken by the patient.

TEST METHODOLOGY

The test methodology will include the authorized provider to send the CCDA to the patient. Once the patient receives the CCDA document the patient will be able to view the CCDA, Download the CCDA to the local computer, and Transmit the CCDA to an external party using secured encrypted email

Audit logs will be maintained for all actions taken in the portal by the patient. These audit logs will be analyzed and review to check the conformance of this measure and trended over time for frequency of usage.

The Test methodology will test the conformance of this measure

Files will be checked for conformance

EXPECTED OUTCOME

At the end of the test the patient would be successfully able to view, download and transmit CCDA. The CCDA will contain all required elements as per the standards

Measure 5:

Certification Criteria	Requirement
170.315(g)(7) Application access— patient selection	(g)(7) Patient Selection- Ability to select a patient based on an API request
170.315(g)(9) Application access— all data request	(g)(9) all category request – Ability to generate CCD based on API request for a specific patient and date range
§ 170.315(g)(10) Standardized API for patient and population services	(g)(10) – ability to generate all required USCDI elements in FHIR standards
Frequency of Usage by the authorized users to access the API	This measure will trend over time to see how many attempts were made to access the APIs and results were given. This will give insight on which APIs were called most and trending over time.

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

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Measurement/Metric	Justification
170.315(g)(7) Application access— patient selection	This measure will validate how API request can successfully authorize the API request and identify the patient which is being requested
170.315(g)(9) Application access— all data request	This measure will validate that based on the selected patient how a CCDA can be generated by the API request

§ 170.315(g)(10) Standardized API for patient and population services	This measure will validate how the patient data can be exported in R4 FHIR standard format

TEST METHODOLOGY

The test methodology will include the ability to request an API call that will be authenticated result the patient data that is being requested. The CCDA and a specific data category data will be reviewed and analyzed for conformance of this measure
Audit logs will be maintained for all actions taken. These audit logs will be analyzed and review to check the conformance of this measure and also trended over time for frequency of usage.
API results will be checked for conformance

The Test methodology will test the conformance of this measure

EXPECTED OUTCOME

At the end of the test the API requests will successfully return the data requested
The CCDA will contain all required elements as per the standards

Measure 6:

Certification Criteria	Requirement
§ 170.315(c)(1) Clinical Quality Measures – Record and Export	§ 170.315(c)(1) Clinical Quality Measures – Ability to record and export QRDA I
§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate	§ 170.315(c)(2) Clinical Quality Measures – Ability to import QRDA I files and calculate
§ 170.315(c)(3) Clinical Quality Measures - Report	§ 170.315(c)(3) Clinical Quality Measures – Ability to export QRDA III
Tracking and counting of how many measures were recorded and exported Tracking and counting of how many times QRDA I file were imported from another system	This measure will collect data on how many measures were selected and reported for each provider/group. Collection of data is required for at least 12 months of performance period and is applicable to MIPS reporting clinicians only
Relied upon software	Surescripts e-Prescribing, Medispan drug database

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

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Measurement/Metric	Justification
§ 170.315(c)(1) Clinical Quality Measures – Record and Export	This measure will validate how the system can be used to input all the records needed to meet a particular Quality measure. When needed, these entries can be exported to QRDA I file
§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate	This measure will validate how the system can be used to import an external QRDA I file and calculate the denominators and numerators for a measure.
§ 170.315(c)(3) Clinical Quality Measures - Report	This measure will validate how the measures are calculated and exported to QRDA III and submitted to CMS when needed

Metric:

The total number of eCQM measures recorded per practice by the end of reporting period

Total number of practices importing QRDA I files by the end of reporting period

Total number of practices exporting QRDA III files at the end of reporting period

TEST METHODOLOGY

The test methodology will include looking at error logs of export and import and verify there were no errors. The test methodology will use internal dashboards to verify the recorded data is used and calculated for each measure

The Test methodology will test the conformance of this measure

EXPECTED OUTCOME

Data is recorded and saved the required reporting period
QRDA III files are exported at the end of reporting period for all measures selected by the clinician
The import of QRDA I files from external system should be imported without any errors

Measures USED

§ 170.315(b)(3) Electronic prescribing

Measure 1:

Certification Criteria	Requirement
§ 170.315(b)(3) Electronic prescribing	- Create new prescriptions (NEWRX) - Change prescriptions (RXCHG, CHGRES) - Cancel prescriptions (CANRX, CANRES) - Refill prescriptions (REFREQ, REFRES) - Receive fill status notifications (RXFILL) - Request and receive medication history information (RXHREQ, RXHRES) -
Number of prescriptions that were prescribed/refilled/changed/cancelled by the authorized patients of Providers using the Health IT module	This measure will test the frequency of usage of electronic prescriptions by the Provider. This measure will give us an insight on how often the prescriber is prescribing electronically and how often he/she is using other functionalities like Change, Refill, Cancel or med history
Relied Upon software	Surescripts ePrescribing

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

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Measurement/Metric	Justification
§ 170.315(b)(3) Electronic prescribing	This measure will validate how an authorized provider will be able to prescribe medications, refill them. The system will also validate how refill and change requests will come from Surescripts that will be fulfilled by the authorized provider System will also have the ability to do medication history reconciliation

TEST METHODOLOGY

The test methodology will include the authorized provider to do the following

- Create new prescriptions (NEWRX)
- Change prescriptions (RXCHG, CHGRES)
- Cancel prescriptions (CANRX, CANRES)
- Refill prescriptions (REFREQ, REFRES)
- Receive fill status notifications (RXFILL)

- Request and receive medication history information (RXHREQ, RXHRES)

Audit logs will be maintained for all actions taken by the authorized representation or provider of certified Health IT Module
Audit logs will be reviewed for errors. Surescripts portal will also be checked for conformance of this measure also trended over time for frequency of usage.

The Test methodology will test the conformance of this measure

EXPECTED OUTCOME

At the end of the test prescriber will be able o perform all actions in conformance to the measure
Prescriber will be able fill new medications, refill, cancel or change prescriptions.
Audit logs has to be maintained for all actions and errors will be tracked and frequency of usage is trended over time.

ATTESTATION

Authorized Representative Name: Pushpa Thillai
Authorized Representative Email: pthillai@mdsynergy.com
Authorized Representative Phone: 818-914-3456
Authorized Representative Signature:
Date: 09/11/2024