REAL WORLD TESTING PLAN 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.

Health IT developers have maximum flexibility to develop innovative plans and measures for Real World Testing. As developers are planning how they will execute Real World Testing, they should consider the overall complexity of the workflows and use cases within the care settings in which they market their certified health IT to determine the approaches they will take. This 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. While the use of this template is voluntary, health IT developers may find it useful in preparing their Real World Testing plans. Health IT developers must submit one plan for each year of Real World Testing (see resources listed below for specific timelines and due dates). ONC does not encourage updating plans outside the submission timeline and will not post updates on the Certified Health IT Product List (CHPL). 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 Real World Testing results report will include a description of these types of 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 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"
- Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing Final Rule, 89 FR 1192 (March 11, 2024) (**HTI-1 Final Rule**)
  - Section III.E — "Real World Testing"

TEMPLATE INSTRUCTIONS

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

GENERAL INFORMATION

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

Developer Name:

Product Name(s):

Version Number(s):

Certified Health IT Product List (CHPL) ID(s):

Developer Real World Testing Plan Page URL:

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Provide an explanation for the overall approach to Real World Testing, including an outline of the approach and how data will be used to demonstrate successful Real World Testing..[i]

All measures should reasonably align with the elements within a Real World Testing plan, the scope of the certification, the types of settings in which the certified health IT is marketed, and other factors relevant to the implementation of the certified Health IT Module(s). The justification should reflect how each element within the plan is relevant to the developer's overall strategy for meeting the Real World Testing Condition and Maintenance of Certification requirements.

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

STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) STANDARDS UPDATES

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.

Describe approach(es) for demonstrating conformance to all certification requirements using each standard to which the health IT is certified. List each version of a given standard separately. For each version of a standard submit the following:

- ✓ *Identify standard versions*
- ✓ *Indicate what certification criteria in which product(s) has been updated*
- ✓ *If reporting for multiple products, identify the certification criteria that were affected by the update for each of the associated products*
- ✓ *CHPL ID for each Health IT Module*
- ✓ *Date notification sent to ONC-ACB*
- ✓ *Date notification sent to customers*
- ✓ *Method used to demonstrate conformance with updated standard(s)*
- ✓ *Measurement(s)/metric(s) associated with Real World Testing*

Standard (and version)	
Updated certification criteria and associated product	
Health IT Module CHPL ID	
Date of ONC ACB notification	
Date of customer notification	
Conformance method and measurement/metric(s)	

MEASUREMENT(S)/METRIC(S) USED IN OVERALL APPROACH

Each plan must include at least one measurement/metric that addresses each applicable certification criterion in the Health IT Module's scope of certification. Describe the method for measuring how the approach(es) chosen meet the intent and purpose of Real World Testing.

For each measurement/metric, describe the elements below:

- ✓ Description of the measurement/metric
- ✓ Associated certification criteria
- ✓ Justification for selected measurement/metric
- ✓ Care setting(s) that is addressed
- ✓ Expected outcomes

Description of Measurement/Metric

Describe the measurement(s)/metric(s) that will be used to support the overall approach to Real World Testing.

Measurement/Metric	Description

Associated Certification Criteria

List certification criteria associated with the measurement/metric. If conformance to the criteria depends on any Relied Upon Software, this should be noted in your Real World Testing plan for any metrics that would involve use of that software in testing.

Measurement/Metric	Associated Certification Criteria	Relied Upon Software (if applicable)

Justification for Selected Measurement/Metric

Provide an explanation for the measurement/metric selected to conduct Real World Testing.

Measurement/Metric	Justification

Care Setting(s)

The expectation is that a developer's Real World Testing plan will address 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. Developers should address their choice of care and/or practice settings to test and provide a justification for the chosen approach.

Note: Health IT developers may bundle products by care setting, criteria, etc. and design one plan to address each, or they may submit any combination of multiple plans that collectively address their products and the care settings in which they are marketed

List each care setting which is covered by the measure and an explanation for why it is included.

Care Setting	Justification

Expected Outcomes

Health IT developers should detail how the approaches chosen will 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)

Not all of the expected outcomes listed above will be applicable to every certified Health IT Module, and health IT developers may add an additional description of how their measurement approach best addresses the ongoing interoperability functionality of their product(s). Health IT developers could also detail outcomes that should 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 expected results. Expected outcomes and specific measures do not necessarily have to include performance targets or benchmarks, but health IT developers should provide context for why specific measures were selected and how the metrics demonstrate individual criterion functionality, EHI exchange, and/or use of EHI within certified health IT, as appropriate.

Measurement/Metric	Expected Outcomes

SCHEDULE OF KEY MILESTONES

Include steps within the Real World Testing plan that establish milestones within the process. Include details on how and when the developer will implement measures and collect data. Key milestones should be relevant and directly related to expected outcomes discussed in the next section.

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

Key Milestone	Care Setting	Date/Timeframe

ATTESTATION

The Real World Testing plan must include the following attestation signed by the health IT developer authorized representative.

Note: The plan must be approved by a health IT developer authorized representative capable of binding the health IT developer for execution of the plan and include the representative's contact information.ii

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: Jeffrey Rockett, VP of Application Services

Authorized Representative Email: jrockett@healogics.com

Authorized Representative Phone: 904-446-3437

Authorized Representative Signature: 

Date: 1/31/2025

[i] Certified health IT continues to be compliant with the certification criteria, including the required technical standards and vocabulary codes sets; certified health IT is exchanging EHI in the care and practice settings for which it is marketed for use; and EHI is received by and used in the certified health IT. (85 FR 25766)

[ii] https://www.federalregister.gov/d/2020-07419/p-3582

Healogics i-heal® 2.0 Real-World Test Plan

Executive Summary

This is the real-world test plan for Healogics i-heal 2.0 ONC certified EHR. i-heal 2.0 is certified under the ONC 2015 Edition, certification ID: 15.04.04.1575.ihea.02.00.1.191007.

As ONC has stated in its rule, "The objective of real-world testing (RWT) is to verify the extent to which certified health IT deployed in operational production settings is demonstrating continued compliance to certification criteria and functioning with the intended use cases as part of the overall maintenance of a health IT's certification." We have worked toward this objective in designing our test plan and its subsequent real world testing measurements and metrics.

This document builds toward the final testing measurements and metrics we will use to evaluate our product interoperability within production settings. Within each use case, we document planned testing methodology, associated ONC criteria, justification for measurement, expected outcomes from the testing, care settings applied for the respective measure, and if applicable the number of clients to use our real-world testing approach, including how our test cases were created, our selected methodology, the number of client/practice sites to use, and our general approach and justification for decisions.

We have included our timeline and milestones for completing the real-world testing in CY 2024, and information about compliance with the Standards Version Advancement Process 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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Representative Signature: 

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General Information

Developer Name: Healogics

Product Name(s): i-heal

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Version Numbers: 2.0

Certified Health IT Criteria: 315(b)(1), (2), (3)(10); (c)(1)-(c)(3); (d)(1)-(d)(9); (e)(1)-(e)(3); (g)(2)-(9)(10); (h)(1)

Product List (CHPL) ID and Link:

CHPL Product Number: 15.04.04.1575.ihea.02.00.1.191007

ONC-ACB Certification ID: 15.04.04.1575.ihea.02.00.1.191007

Link to ONC Certification: https://chpl.healthit.gov/#/listing/10140

Real-World Testing Approach

- 1Q-2024: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have enough clients committed for real world testing by the end of 1Q-2024.
- 2Q-3Q 2024. During the 2nd and 3rd quarter of CY 2024, the real-world testing with clients will be scheduled and performed. It is expected that a preparatory call will be done with clients to prepare them for testing activities. Results will be documented in the test results section of the test methods and ultimately used to build the test report. If any noncompliances are observed, we will notify the ONC-ACB of the findings and make the necessary changes required.
- 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 before the end of the year.
- February 2025. Document our CY 2024 test results into our RWT Test Report and submit to our ONC-ACB.

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Standards Version Assessment Process (2024) Updates

For CY 2024, we are not planning to make any version updates on approved standards through the SVAP process.

Standard (and version)	None
Updated certification criteria and associated product	N/A
Health IT Module CHPL ID	N/A
Method used for standard update	N/A
Date of ONC-ACB notification	N/A
Date of customer notification (SVAP only)	N/A
Conformance measure	N/A
USCDI-updated certification criteria (and USCDI version)	N/A

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

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- 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 evaluate, 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 automate 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.

Number of Clients Sites

Within each measure, we note the minimum number of clients or client sites we plan to use for this measure evaluation. The numbers vary depending on the methodology as well as overall use of the associated EHR Module criteria by our users. For criteria that are not widely used by our customer base, we may test the respective measure in our own production-sandbox environment given lack of customer experience with the criteria functionality.

Care and Practice Settings Target

Healogics i-heal 2.0 EHR is primarily targeted to ambulatory wound care practices, and our measures were design for this setting in mind. In each measure, we do also address the care settings targeted and note any necessary adjustment or specific factor to consider with this specific measure.

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RWT Measure #1 Transition of Care C-CDA

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

Testing Methodology: Reporting/Logging

Measurement Description: This use case is tracking how many C-CDAs are created and successfully sent from the EHR Module to a 3rd party during a transition of care event using Direct messaging over the course of a given interval.

Measurement Justification:
This use case has one measure capture. It will provide a numeric value to indicate both how often this interoperability feature is being used as well as its compliance to the requirement. This measure 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. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission which reveals compliance to the associated criteria listed above.

Measurement Expected Outcome:
We will test a sample of our user base to get reporting values on C-CDAs sent as well as performance of C-CDA error detection.

Measure #1: Report the numbers of C-CDAs sent over a three (3) month period.

This metric can come from different reports, including Automated Measure (315.g.2) reports. A successful measure increment indicates compliance to the underlying ONC criteria, including successful creation of the C-CDA patient summary record and recording the required clinical data elements. 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 not

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completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

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 and Number of Clients Site to Test

We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Results Measure 1: From 04/1/2024 to 07/1/2024 our providers successfully sent 0 - C-CDA documents. We will continue to educate our end-users on the availability and purpose of the functionality.

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RWT Measure #2 Incorporating Problem List, Medications, Allergies

Associated Criteria: 315(b)(2)

Testing Methodology: Reporting/Logging

Measurement Description: This is a measure to determine how often you are using the C-CDA incorporate and update feature.

Measurement Justification:
This measure will validate, through reporting, users to determine real world interoperability and usability, specifically how often are C-CDAs received from 3rd parties incorporated into the patient record and then updating the patient's problem list, medication list, and medication allergy list with the clinical data contained in the C-CDA.

The use of reporting can often provide more information on the impact and value of an interoperability element than a standard software test evaluation without incorporating individual user bias. This reporting measure will reveal if users are using the C-CDA incorporate feature of their EHR to update their patient's record with current or new information from another source. Through this means of testing, we can determine compliance to the associated criteria listed above in real world use.

Measurement Expected Outcome:
This metric can come from different a direct query of the database regarding the number of C-CDA documents have been imported into a patient record. A successful measure increment indicates compliance to the underlying ONC criteria, including successful import of the C-CDA patient summary record and recording the required clinical data elements. In incorporating 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.

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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.

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 and Number of Clients Site to Test

We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified HE

Results Measure 2: During calendar year 2024 our providers successfully received 0 - C-CDA documents. We will continue to educate our end-users on the availability and purpose of the functionality as well as referring providers on the availability of this feature to ensure proper continuity of care.

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RWT Measure #3 Electronic Prescriptions

Associated Criteria: 315(b)(3)

Testing Methodology: Reporting/Logging

Measurement Description: This use case is tracking and counting how many New Rx electronic prescriptions were created and successfully sent from the EHR Module to a pharmacy destination over the course of a given interval.

Measurement Justification:
This use case measure will provide a numeric value 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 New Rx Script electronic prescription message and transmit it to a pharmacy, typically via the Surescripts Network. This use case will also show successful integration with our ePrescribing partner Surescripts and through its completion will reveal compliance to the associated criteria listed above.

Measurement Expected Outcome:
We will test a sample of our user base to get reporting values on New Rx electronic prescriptions sent as well as controlled substance usage.

Measure #1: Report the number of New Rx electronic prescriptions sent over a three (3) month period. The measurement will produce numeric results over a given interval which can be derived from a direct query of the database. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

A successful ePrescription indicates compliance to the underlying ONC criteria. It will show that the EHR can create the New Rx message and send over a production network, like the Surescripts Network, to a pharmacy. 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.

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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 and Number of Clients Site to Test

We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHR.

Results Measure 3: From 3/1/2024 to 6/1/2024 our end-users successfully sent 28,417 new e-prescriptions. This indicates high usage and confirms users understand the prescription module functionality.

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RWT Measure #4 Quality Measures

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

Testing Methodology: Reporting/Logging

Measurement Description: This measure is tracking and counting how many Quality Measures (eCQMs) were successfully reported on by the EHR Module to CMS during their submission period for MIPS Quality reporting.

Measurement Justification:
This measure will provide a count and list of electronic clinical quality measures (eCQMs) which are calculated and submitted to CMS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize the submission to CMS. CQM measures 315(c)(1)-(c)(3) all work collectively together in the eCQM functionality of the EHR module, justifying combining this measurement for all three measures.

Measurement Expected Outcome:
The measurement will a count and list of eCQMs submitted to CMS over a given interval. We will ask our customer users to report on the number eCQMs they successfully reported on to CMS which reveals compliance to the associated criteria listed above.

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.

We will use the measure result to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

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Care Settings and Number of Clients Site to Test

We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Results Measure 4: In 2024, we will have 45 providers use our system to successfully report data to CMS, totaling 315 individual measures. At this time our providers have not reported to CMS but the anticipation is that over 45 will complete this reporting to CMS. This confirms our users h ave a general understanding of the eCQM module functionality.

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RWT Measure #5 Patient Portal Use

Associated Criteria: 315(e)(1)

Testing Methodology: Reporting/Logging

Measurement Description: This use case is tracking and counting how patients are given access to their portal account over the course of a given interval.

Measurement Justification:
This use case measure will provide a numeric value 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 new patient portal account and give the patient access to it.

The use of reporting can often provide more information on the impact and value of the patient portal element than a standard software test evaluation without incorporating individual user bias. The patient portal is intended to support patient engagement with their health records, and the ability to transmit their patient data, as a C-CDA or human readable copy, can be a useful feature.

Measurement Expected Outcome:
We will contact a sample of our user base to get reporting values on patient portal access as well as patients use of the portal's interoperability features.

Measure #1: Report the number of new patient accounts created over a three (3) month period.

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

Care Settings and Number of Clients Site to Test
We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

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Results Measure 5: From 5/1/2024 to 8/30/2024 we had a total of 71 patients who successfully created a patient portal measure. This indicates successful interoperability.

RWT Measure #6 API Access

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

Testing Methodology: Reporting/Logging

Measurement Description: This is a reporting measure to determine how many different systems or applications are connecting to your EHR via the API.

Measurement Justification
We do not know how many of our customers are using the API functionality, so we believe the best means to evaluate real world interoperability is to utilize logging/reporting to determine this criteria's use. This measure will verify through reports/logs to determine real world interoperability and usability, specifically how many 3rd party systems or applications are integrated and using the EHR's API interface.

Utilizing reporting/logging can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. API capabilities are an important component of the modern health IT system, and utilization of API resources will help improve patient care and care coordination.

Measurement Expected Outcome:
Applications will be able to successfully utilize API's that are developed by Healogics for the consumption of external applications. The measurement will a count and list all applications who have or are connecting to i-heal API's in a given period of time, defined as a 3 month period. The count of distinct applications connecting to i-heal via API will derived from database reporting.

A successful test of this measure indicates compliance to the underlying ONC criteria. It will show that the EHR has external API available to and that they are able to successfully retrieve data. Successfully completing this measure also implies that applications can utilize the API's. A result of no applications connecting to these available API's will not indicate a failure of this measure in a

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real-world setting, it will simply indicate that no external applications have chosen to utilize these API's despite the availability of these API's.

Care Settings and Number of Clients Site to Test:
We designed this measure to test the ability of external applications to connect to i-heal API's. We will test a minimum of three months of database reporting. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Results Measure 6: From 8/1/2024 to 12/1/2024 we had over 11,000,000 API calls from our external vendor partners. This indicates successful interoperability.

RWT Measure #7 EHI Export

Associated Criteria: 315(b)(10)

Testing Methodology: Reporting/Logging

Measurement Description: This is a reporting measure to determine the utilization of the EHI Export feature within the i-heal 2.0 application.

Measurement Justification
This is a new feature, so we believe the best means to evaluate real world interoperability is to utilize logging/reporting to determine this criteria's use. This measure will verify through reports/logs to determine real world interoperability and usability, specifically how frequently the data is being requested.

Utilizing reporting/logging can often provide more information on the impact and value of an interoperability element than a standard software test evaluation without incorporating individual user bias.

Measurement Expected Outcome:

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Report the number of EHI Exports completed over a three (3) month period. The measurement will produce numeric results over a given interval which can be derived from a direct query of the database.

A successful EHI Export indicates compliance to the underlying ONC criteria. It will show that the EHR can successfully export all patient health information within the i-heal application for a patient or a subset of patients. 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.

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 and Number of Clients Site to Test:
We designed this measure to test ambulatory wound care practices that we support and target. We will test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHR

Results Measure 7:
From 4/1/2024 to 7/31/2024 our providers successfully performed 10 EHI Exports. We will continue to educate users on the benefits and technical uses of this feature.

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