

# CY 2023 Real World Testing Plan for WellSky Hospice & Palliative

## Executive Summary

This is the real-world test plan for CY 2023 for WellSky Hospice & Palliative certified EHR solution. It is virtually the same as last year's approved real world test plan with only minor alterations and updates.

As with last year's plan, it provides the real world test measurements and metrics that meet the intent and objectives of ONC's Condition of Certification and Maintenance of Certification requirement for real world testing (§ 170.405 Real world testing). We believe these test methods will be appropriate and value in accessing certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting of customers.

We have included our timeline and milestones for completing the real world testing in CY 2023, and information about compliance with the USCDI v1 and SVAP updates.

## Developer Attestation

This Real-World Testing plan is complete with all required elements, including measures that address all certification criteria and care settings. All information in this plan is up to date and fully addresses the health IT developer's Real World Testing requirements.

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## General Information

Plan Report ID Number: WellSky-RWT-2023

Developer Name: WellSky

Product Name(s): WellSky

Version Numbers(s): 5

Certified Health IT Criteria: 315(b)(1)-(2), (e)(1), (f)(1), (f)(7), (g)(7)-(9), (h)(1)

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

- 15.04.04.1164.Well.05.00.1.201231
- <https://chpl.healthit.gov/#/listing/10514>

Developer Real World Testing Page URL: <https://wellsky.com/hospice-software/>

## Timeline and Milestones for Real World Testing CY 2023

- 1Q-2023: Begin communication with clients to ask for their support and participation in real world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2023.
- 2Q-3Q 2023. During the 2<sup>nd</sup> and 3<sup>rd</sup> quarter of CY 2023, 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 non-compliances are observed, we will notify the ONC-ACB of the findings and make the necessary changes required.
- 4Q-2023. 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.
- 1Q-2024. Submit RWT Test Report to ONC-ACB.

## Standards Updates (SVAP and USCDI)

|  |   |
|--|---|
| Standard (and version)                                   | All standards versions are those specified in USCDI v1.       |
| Date of ONC-ACB notification (SVAP or USCDI)             | N/A   |
| Date of customer notification (SVAP only)                | N/A   |
| USCDI-updated certification criteria (and USCDI version) | The plan documents the support of all USCDI v1 data elements. |

## Real World Testing Measurements

The measurements for our real-world testing plan are described below. Each measurement contains:

- Associated ONC criteria
- Testing Methodology used
- Description of the measurement/metric
- Justification for the measurement/metric
- Expected outcomes in testing for the measurement/metric
- Number of client sites to use in testing (if applicable)
- Care settings which are targeted with the measurement/metric

In each measurement evaluation, we elaborate specifically on our justification for choosing this measure and the expected outcomes. All measurements were chosen to best evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the certified EHR.

### Testing Methodologies

For each measurement, a testing methodology is used. For our test plan, we use the following methodologies.

**Reporting/Logging:** This methodology uses the logging or reporting capabilities of the EHR to examine functionality performed in the system. A typical example of this is the measure reporting done for the 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.

**Compliance and/or Tool:** This methodology uses inspection to evaluate if EHR is compliant with the ONC criteria requirements. It can be done through 1-v-1 inspection testing or utilize various tools to measure or evaluate compliance and interoperability. If an EHR Module capabilities is not widely used in production by current users, compliance inspection can provide assurance criteria is working as previously certified.

### 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 Targeted

WellSky Hospice & Palliative EHR is designed for hospice and palliative care, and our measure use cases were design for this setting in mind.



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

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

Testing Methodology: Reporting/Logging

### Measurement Description

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

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

### Measurement Justification

This measure will provide a numeric value 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 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 3<sup>rd</sup> party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission.

### Measurement Expected Outcome

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. We will record successful C-CDA transmissions to a 3<sup>rd</sup> party through our Kno2 partner and also document if the logging indicates error or failure in the exchange delivery and investigate accordingly.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the C-CDA patient summary record, including record 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 3<sup>rd</sup> 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 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 the hospice and palliative care setting that we support and target. We will test a minimum of two (2) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #2. Number of Different Destinations C-CDAs Successfully Sent

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

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many different outbound destinations the EHR successfully sent C-CDAs via Direct messaging during a transition of care event over the course of a given interval.

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

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its breadth of its distribution across different partners. This measure provides assurance of interoperability of this EHR Module in production. Also, it provides information on the different destination count which can reveal how concentrated are the partners connecting with a given provider and be valuable in showing ways how health IT interoperability is utilized by an average provider.

### Measurement Expected Outcome

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.

A higher number indicates the interoperability feature is utilized across a wide range of different partners while a smaller number indicates a more focused distribution.

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 the hospice and palliative care setting that we support and target. We will test a minimum of two (2) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #3. Number of C-CDAs Received and/or Incorporated

Associated Criteria: 315(b)(2)

Testing Methodology: Reporting/Logging

### Measurement Description

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

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

### Measurement Justification

This 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 receive a C-CDA patient summary record, and by incorporating the C-CDA patient summary record, the EHR demonstrates successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission.

### Measurement Expected Outcome

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. We will record successful C-CDA receipts and incorporations into the patient record and also document if the logging indicates error or failure with incorporation and investigate accordingly.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the EHR can receive a C-CDA patient summary record. In incorporating the C-CDA patient summary record, the EHR will demonstrate successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party, including support for Direct Edge protocol in connecting to a HISP. 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 the hospice and palliative care setting that we support and target. We will test a minimum of two (2) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #4. Compliance of Portal Download and Email Transmit Capabilities and C-CDA Scorecard Average

Associated Criteria: 315(e)(1)

Testing Methodology: Compliance and Tool

### Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of ability to download and transmit a C-CDA from the patient portal and measuring its C-CDA Scorecard average.

### Measurement Justification

Currently, we have very few, if any, providers using our patient portal, but we expect it to grow in adoption in coming years. To give us confidence the portal is ready for future patient adoption, we will conduct this RWT use case focused on compliance of C-CDA download capabilities and C-CDA validation.

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability for a patient to download and transmit their patient data as a C-CDA from the patient portal and evaluate it against the [ONC C-CDA Scorecard tool](#). The C-CDA scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 C-CDA implementation guide and HL7 best practices.

The Scorecard will both indicate any C-CDA errors as well provide a numeric scoring result to indicate how well our C-CDA complies with certification requirements and supports interoperability within production setting.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

The user will use the EHR functions to download a C-CDA containing clinical data elements required in the criteria from the patient account in the portal and to transmit over email the patient's C-CDA using the portal's email transmission capabilities. We will run C-CDA through the Scorecard tool to obtain a result. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

A high score from the Scorecard indicates strong support for interoperability, and a lower score indicates opportunity for improvement. We will use this measure 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 the hospice and palliative care setting that we support and target. We will test either with one client practice or an internal resource in a production-type environment.

## RWT Measure #5. Compliance of Immunization Message

Associated Criteria: 315(f)(1)

Testing Methodology: Compliance

### Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of creating an immunization message.

### Measurement Justification

Currently, we have very few, if any, providers using our immunization functionality, but we expect it to grow in adoption in coming years. To give us confidence it is ready for future adoption, we will conduct this RWT use case focused on compliance of documenting an administrative immunization and created an immunization message which can be sent to a registry.

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to record immunization admission information on a patient and create an immunization message which can be delivered to a public health registry.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

The user will use the EHR functions to document immunization information typical to their workflow including vaccination name, dosage amount, lot number, manufacturer name, and any other required elements. Then, the user will use the EHR functions to produce the HL7 VXU immunization message according the ONC standards. We will inspect the message to confirm compliance with the required standard. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the hospice and palliative care setting that we support and target. We will test either with one client practice or an internal resource in a production-type environment.



## RWT Measure #6. Compliance of Health Care Surveys Message

Associated Criteria: 315(f)(7)

Testing Methodology: Compliance

### Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of creating a health care surveys message.

### Measurement Justification

None of our clients have been invited to participate in a health care survey at this time so we will measure compliance via a usability test or new client training. We will conduct this RWT use case focused on compliance of documenting clinical information for a health care survey and creating a health care survey message which can be sent to a registry.

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to record patient clinical information and create a health care survey message which can be delivered to a public health registry.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

The user will use the EHR functions to document clinical data which produce an electronic case message typical to the user's workflow and clinical documentation (e.g., influenza). After completing the encounter, the EHR will create the HL7 Health Care Survey CDA message using the patient's information which would be sent to the public health registry. We will inspect the message to confirm compliance with the required standard. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the hospice and palliative care setting that we support and target. We will test either with one client practice or an internal resource in a production-type environment.

## RWT Measure #7. Compliance of API Resource Query Support

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

Testing Methodology: Compliance and Tool

### Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of support of API query of patient data resources.

### Measurement Justification

Currently, we have very few, if any, providers or patients using our API capabilities, but we expect it to grow in adoption in coming years. To give us confidence the API is ready for future adoption, we will conduct this RWT use case focused on compliance of patient clinical data access via the API.

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to connect to the EHR's API resources and query patient clinical data through the API. Because API criteria, 315(g)(7)-(g)(9), all work collectively together in the API functionality of the EHR Module, this measurement is used for all three.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

The user connects to the EHR through a client application via the API and is prompted for credentials and authentication according to the EHR's publicly available API documented specification. After supplying the correct credentials, the EHR returns a valid ID or token for the API Client to access the patient data. The user will query the patient clinical data resources via the API and receive access to them through the client application. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the hospice and palliative care setting that we support and target. We will test either with one client practice or an internal resource in a production-type environment.