

Agastha Certified Health IT
2023 Real World Testing Plan

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REPORT OVERVIEW

This document describes *Agastha's* approach for the calendar year 2023 Real World Testing Plan for the 2015 Edition and 2015 Cures Update Edition certification criteria subject to the Real World Testing Condition & Maintenance of Certification requirements at 45 CFR 170.405 which include § 170.315(b)(1) - (3), (b)(6), (c)(1) - (3), (e)(1), (f)(1), (f)(2), (f)(4), (f)(7), (g)(7) - (10).

Agastha is an Electronic Health Records(EHR) software that is certified under the Office of the National Coordinator (ONC) for Health Information Technology (HIT) Health IT Certification Program which requires health IT developers to conduct Real World Testing of their certified health IT (45 CFR 170.405).

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 it considers a priority, and to assist health IT developers in developing their Real World Testing plans.

Agastha offers the following product and services:

- Certified Health Information Technology
- Practice management
- Patient Portal
- Patient Kiosk
- Inventory management
- Health Information Exchange
- Revenue Cycle Management

INSTRUCTIONS

The following document 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 Agastha will address each required element in the Real World Testing approach.

GENERAL INFORMATION

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

Developer Name: *Agastha, Inc.*

Product Name: Enterprise Healthcare Software

Version Number: 20.1

Certified Health IT Product List (CHPL) ID(s): 15.04.04.1056.Agas.20.01.1.221228

Developer Real World Testing Page URL: <http://www.agastha.com/certifications.html>

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

We chose the methodology of tracking actual production activity across our U.S. client base as this reflects the actual real world use of the certified capabilities in the provision of healthcare for their intended purposes.

This is in stark contrast to testing of manufactured care scenarios in production environments or non-production environment activity and aligns closely with the Office of the National Coordinator for Health IT's (ONC) stated intent and purpose of Real World Testing. It also provides a direct view of active use of certified software on a day-to-day basis across all applicable live care settings to avoid exclusion of particular settings or implementations.

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

TIMELINE AND MILESTONES FOR REAL-WORLD TESTING CY 2023

| Key Milestone | Date/Timeframe |
|---|----------------------------------|
| Communication with clients to ask for their participation in real-world testing | Ongoing |
| Test Plan Submission to ONC-ACB | November 1, 2022 |
| Collection of submission data as laid out by the plan | January 1 – December 31, 2023 |
| Validation of Expected Outcomes | Quarterly |
| Monitor and review reports | Monthly |
| Analysis and Report Creation | January 1, 2024-February 1, 2024 |
| Submit Real World Testing report to ACB | February 1, 2024 |

STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) UPDATES

For CY 2023, 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 |

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 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: This methodology uses reporting capabilities of *Agastha* to examine functionality performed in the system.

Logging: This methodology uses the activity logs related to each tested and analyzed measure to test the performance of the system.

Survey: This methodology evaluates the interoperability and capabilities of *Agastha* through feedback from users. This methodology can provide insight into how clinicians employ and use a feature which reveals actual value and impact of interoperability of the EHR Module.

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 SETTINGS

Agastha Enterprise Healthcare Software EHR is primarily designed for ambulatory practices, and our measures were selected with 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.

CARE COORDINATION

RWT Measure #1. Transitions of Care

Associated Criteria: 170.315(b)(1)

Testing Methodology: Reporting/Survey

Measurement Description

Real World Testing of the Transitions of Care certified capabilities for *Agastha* is best performed by tracking the transmission of a conformant Consolidated Clinical Document Architecture (C-CDA) document between ambulatory providers. This is done by specifically tracking how many C-CDAs are created and successfully accessed by patients over the course of a given interval.

Measurement Justification

This metric will provide proof that the CCDA documents are accessed by the end users via the WCAG 2.0 patient portal. The activity logs will also indicate that proper credentials and security measures are applied as specified in the standards. The metrics will provide statistics on the number of views of CCDA documents in both raw format and human readable format, generate CCDA with time range options, download CCDA individually, and prove that the system can transmit the CCDA securely.

Measurement Expected Outcome

We will get reporting values on C-CDAs transmitted as well as the number of C-CDA errors by testing a sample of our user base. This test will be used to validate the proper operations and adherence to the standard guides in §170.315 (b)(1).

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.

Successfully completing this measure will mean that users have a general understanding of the EHR 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.

Relied Upon Software

Agastha uses PhiMail Web/ EMR Direct to demonstrate conformity with this certification criterion. Agastha will therefore include PhiMail in Real World Testing for this criterion.

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

RWT Measure #2. Clinical Information Reconciliation and Incorporation

Associated Criteria: 170.315(b)(2)

Testing Methodology: Survey

Measurement Description

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

Measurement Justification

This measure will survey 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.

A survey can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. This survey 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

The user will be asked the survey question of how often you are using the C-CDA incorporate and update feature and given the survey answer choices below:

- Frequently
- Occasionally
- Rarely
- Never
- Don't Know

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

This test will be used to validate the proper operations and adherence to the standard guides in §170.315 (b)(2).

Relied Upon Software

Agastha uses PhiMail Web/ EMR Direct to demonstrate conformity with this certification criterion. Agastha will therefore include PhiMail in Real World Testing for this criterion.

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

RWT Measure #3. Electronic Prescribing

Associated Criteria: 170.315(b)(3)

Testing Methodology: Reporting/Survey

Measurement Description

This test will determine the frequency of usage of electronic prescribing in the system.

This use case is tracking and counting the number of eRx messages transmitted through Surescripts network to a pharmacy destination over the course of a given interval.

Measurement Justification

The metric will indicate the frequency of usage of the Electronic Prescribing functionality in the system.

This test will provide proof that the EHR can create a NewRx 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.

Measurement Expected Outcome

We will test a sample of our user base to get reporting values on NewRx electronic prescriptions sent as well as controlled substance usage.

Measure #1: Report the number of NewRx electronic prescriptions sent 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.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the NewRx 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.

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.

This test will be used to validate the proper operations and adherence to the standard guides in §170.315 (b)(3).

Relied Upon Software

Agastha uses Surescripts to demonstrate conformity with this certification criterion. Agastha will therefore include Surescripts in Real World Testing for this criterion.

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

RWT Measure #4. Data Export

Associated Criteria: 170.315(b)(6)

Testing Methodology: Survey/Self-Test

Measurement Description

The test approach will use performance analysis of the functionalities of the system to determine how often users are using the batch patient data export feature.

Measurement Justification

This measure will survey users to determine real-world interoperability and usability, specifically how often do clinicians use the batch patient export feature.

The metrics will illustrate that the end users can grant access to selected users of the export report function. The method will also be used to demonstrate that end users can generate reports with various configurations and filtering options, and can review patients included in the export as well as download CCDA in bulk.

Measurement Expected Outcome

The user will be asked the survey question of how often do you perform the batch patient export during the average month and given the survey answer choices below:

- Frequently
- Occasionally
- Rarely
- Never
- Don't Know

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. It will provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

This test will be used to validate the proper operations and adherence to the standard guides in §170.315 (b)(6).

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

CLINICAL QUALITY MEASURES(CQMs)

RWT Measure #5. Clinical Quality Measures

Associated Criteria: 170.315(c)(1) - (3)

Testing Methodology: Reporting/Survey

Measurement Description

This measure is tracking and counting how many CQM quality measures were successfully reported on by *Agastha* to CMS during the submission period for MIPS Quality reporting.

Measurement Justification

This measure will provide a count and list of clinical quality measures (CQMs) which are calculated and submitted to CMS for a given program, like MIPS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize submission to CMS. The metrics derived from the system logs will prove that end users of *Agastha* can use the reporting function to calculate and report on their CQM.

Measurement Expected Outcome

It is expected that practices will be able to capture clinical data points and list of CQMs submitted to CMS over a given interval. It is expected that the metrics collected from the reports on the usage of the system will give an insight into the number CQMs clients successfully reported to CMS.

A successful measure submission indicates compliance to the underlying ONC criteria. It will show that the EHR can do calculations on the CQM 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.

This test will be used to validate the proper operations and adherence to the standard guides in §170.315 (c)(1) - (3).

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

PATIENT ENGAGEMENT

RWT Measure #6. View, Download, and Transmit to 3rd Party

Associated Criteria: 170.315(e)(1)

Testing Methodology: Reporting/Survey

Measurement Description

To perform Real World Testing for the View, Download, and Transmit to 3rd Party (VDT) criterion, *Agastha* will track real world use of the patient portal by patients credentialed for access to their health information. This use case will track and count how patients are given access to their patient portal account over the course of a given interval.

Measurement Justification

The use case measure will reflect the activity and interaction of *Agastha* users across our client base by indicating how often the VDT capabilities and interoperability features are 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 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.

A successful measure increment indicates compliance to the underlying ONC criteria list above(170.315(e)(1)).

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

PUBLIC HEALTH

RWT Measure #7. Transmission to Public Health Agencies

Associated Criteria: **170.315(f)(1), 170.315(f)(2), 170.315(f)(4), 170.315(f)(7)**

| Certification Criteria | Requirement |
|---|---|
| 170.315 (f)(1) Transmission to immunization registries | Create immunization information for electronic transmission |
| 170.315(f)(2) Transmission to public health agencies – syndromic surveillance | Create syndrome-based public health surveillance information |
| 170.315(f)(4) Transmission to Cancer Registries | Create cancer case information for electronic transmission in accordance with the HL7® IG for CDA Release 2: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, DSTU Release 1.1. |
| 170.315(f)(7) Transmission to public health agencies | Create health care surveys Create health care survey information for electronic transmission |

Measure 1: Immunization Messages

Associated Criteria: 170.315(f)(1)

This is a reporting measure to determine the number of immunization messages sent to public health registries.

Testing Methodology: Reporting. System logs will be used to determine the number of successful messages generated and sent.

Measurement Justification

This measure will be used to determine real world interoperability and usability, specifically how many immunization messages were sent to an immunization information system (IIS) or public health immunization registries by the provider.

The use case measure will reflect the activity and interaction of *Agastha* users across our client base by showing the number of syndromic surveillance message successfully generated as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create an immunization message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with an IIS/immunization registry.

Measurement Expected Outcome

As the clinician user submits immunization messages in their normal workflow and clinical activities, it is expected that we will obtain their messaging metrics to evaluate real world interoperability. To capture this information, we will either use a special report to gather this information from our system or have the clinician user obtain the usage report from the registry.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the HL7 immunization record, including ability to record the required clinical data elements. In sending the immunization message, the EHR will demonstrate ability to confirm successful interoperability of patient's immunization data to an IIS/immunization registry. 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 for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

Measure 2: Transmission to public health agencies – syndromic surveillance

Associated Criteria: 170.315(f)(2)

This is a reporting measure to provide evidence of the successful and conformant reporting of syndromic surveillance information to target public health agencies from *Agastha*.

Testing Methodology: Reporting. System logs will be used to determine the number of successful messages generated and sent.

Measurement Justification

This measure will be used to provide evidence of successful creation and transmission of the required PHIN Messaging Guide for Syndromic Surveillance to public health agencies.

The use case measure will reflect the activity and interaction of *Agastha* users across our client base by showing the number of syndromic surveillance message successfully generated as well as its compliance to the requirement for a period of 30 days.

Measurement Expected Outcome

As the clinician user submits immunization messages in their normal workflow and clinical activities, it is expected that we will obtain their messaging metrics to evaluate real world interoperability. To capture this information, we will either use a special report to gather this information from our system or have the clinician user obtain the usage report from the registry.

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 for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

Measure 3: Transmission to Cancer Registries

Associated Criteria: 170.315(f)(4)

This is a reporting measure to determine the number of cancer case information sent to cancer registries.

Testing Methodology: Reporting. System logs will be used to determine the number of successful messages generated and sent.

Measurement Justification

This measure will be used to determine real world interoperability and usability, specifically how many messages were sent to cancer registries by the provider.

The use case measure will reflect the activity and interaction of *Agastha* users across our client base by showing the number of messages successfully generated as well as its compliance to the requirement.

Measurement Expected Outcome

As the clinician user submits cancer registry messages in their normal workflow and clinical activities, it is expected that we will obtain their messaging metrics to evaluate real world interoperability. To capture this information, we will either use a special report to gather this information from our system or have the clinician user obtain the usage report from the registry.

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 for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

Measure 4: Transmission to public health agencies – health care surveys

Associated Criteria: 170.315(f)(7)

This is a reporting measure to assess the ability of *Agastha* to generate conformant healthcare survey CCDA documents in the ambulatory setting.

Testing Methodology: Reporting. System logs will be used to determine the number of successful messages generated and sent.

Measurement Justification

This measure will be used to determine real world interoperability and usability, specifically how many CCDA documents were generated and successfully sent to public health agencies by the provider.

The use case measure will reflect the activity and interaction of *Agastha* users across our client base by showing the number of messages successfully generated as well as its compliance to the requirement.

Measurement Expected Outcome

As the clinician user generates and sends CCDA documents in their normal workflow and clinical activities, it is expected that we will obtain their messaging metrics to evaluate real world interoperability. To capture this information, we will either use a special report to gather this information from our system or have the clinician user obtain the usage report from the registry.

A successful measure increment indicates compliance to the underlying ONC criteria.

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 for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

APPLICATION PROGRAMMING INTERFACES

RWT Measure #8. API Access

Associated Criteria: 170.315(g)(7) - (10)

Testing Methodology: Survey

Measurement Description

This is a survey measure to determine how many different systems or applications are connecting to *Agastha* via the API. The activity logs will be used to examine the details of the API responses for full data requests made by patients in the system. The logs will also be used for checking if there are errors and status of the API responses.

Measurement Justification

The test approach includes the examination and assessment of the activity logs and review of API documentations to ensure that the API services of *Agastha* conforms to the operational standards. We do not know how many of our customers are actually using the API functionality so we believe the best way to evaluate real world interoperability is to survey them on this criterion. This measure will survey users to determine real world interoperability and usability.

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

The user will be asked the survey question and given the survey answer choices below:

- How many patients or software systems are connected to your EHR via the API?
- If applicable, what are the names of the other systems?

The answers will provide insight into how clinicians view both the use and value of this interoperability feature. This measure will use the dashboard metrics showing access, request and response activities, number of authorized requests and origins, successful patient retrieval, data category requested, and response statuses.

Care Settings for Real World Testing

- **Ambulatory**

We will test a minimum of three (3) client practices. This number covers a sufficient percentage of existing practices to provide a viable sample of users of *Agastha*.

DEVELOPER ATTESTATION

Agastha affirms that 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 *Agastha's* Real World Testing requirements.

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