

REAL WORLD TESTING PLAN

GENERAL INFORMATION

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

Developer Name: NextGen Healthcare **Product Name:** NextGen® Office

Version Number: 5.0

Certified Health IT Product List (CHPL) ID: 15.04.04.2054.Medi.05.00.1.180220 Developer Real World Testing Page URL: https://www.nextgen.com/certifications

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Topic	Detail
Approach Summary	 This plan will cover NextGen Office's approach to Real World Testing for our ambulatory care client base. Data will be gathered primarily in an automated fashion using production database queries and logs. Where that is not possible, we will engage clients to gather the data in a direct approach. This analysis will quantify usage of certified workflows over time, as well as demonstrate conformance to standards. No confidential or protected health information will be exposed through this process. Success will be defined by our ability to highlight how each criterion is being used by providers. Some criteria, for example (b)(3) ePrescribing, are going to have a much higher volume of use than (g)(7-9) API due purely to the nature of the criterion and its use for daily patient care.
Types of Settings	 NextGen Office supports specialties in the ambulatory care setting. All specialties have access to a single web-based instance of the NextGen Office technology that allows for clinical documentation, reporting, and electronic interactions with third parties.
Usage Quantification	 The transactional history in the NextGen Office database is the source data. The data can be queried for events indicative of specific certified interoperability workflows. The results will be quantified and summarized.
Demonstrate Conformance	 Explicit validation: C-CDA files will be validated against an internally hosted Health IT C-CDA validation tool. Events will be quantified and reported. Implicit validation: Standards such as NCPDP (2017 eRx) have XML schema definitions that must be adhered to. A successful transmission and response from SureScripts will be an implied conformance. The QRDA files will also be implied as conformant due to the volume of export and successful submissions to Quality Payment Program during the attestation period of 2023. Event rates: C-CDA validation and other electronic transmission workflows will be quantified and reported accordingly.



STANDARDS UPDATES (INCLUDING Standards Version Advancement Process (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

(3VAI) AND UNITED STATES CON	E DATA FOR INTEROPERABILITY (USCDI))
Standard (and version)	2022 CMS QRDA Category III IG
Updated certification criteria and associated product	170.315 (c)(3), NextGen® Office
Health IT Module CHPL ID	15.04.04.2054.Medi.05.00.1.180220
Method used for standard update	SVAP
Date of ONC ACB notification	10/5/2022
Date of customer notification (SVAP only)	10/6/2022
Conformance measure	Proctor certification of the following criteria: 170.315 (g)(10) Internal walk-through of certification with regulatory team of the following criteria: 170.315(b)(1) 170.315 (b)(2) 170.315 (e)(1) 170.315 (g)(6) 170.315 (g)(9)
USCDI updated certification criteria (and USCDI version)	170.315 (g)(9) 170.315 (b)(1) 170.315 (e)(1) 170.315 (g)(6) 170.315 (g)(9) 170.315 (g)(10) USCDI v1

DESCRIPTION OF MEASUREMENT/METRIC

ID	Measurement/Metric	Description
1a	Count of Direct Messages SENT with C-CDA Attached / Count of Consults Orders Created	A requirement of 170.315(b)(1) is the sending of C-CDA files for transitions of care. These are triggered from a consult order for the sending of C-CDA files via Direct Message 170.315(h)(1) .
1b	Count of files with no unexpected validation events in SENT C-CDAs attached to Direct Messages from the ett.healthit.gov 2015 Edition Cures Update C-CDA R2.1 Validator tool / Number of C-CDAs validated	A random sampling of the C-CDAs sent,170.315(b)(1), will be performed for the practices identified in ID.1a and validated against the ett.healthit.gov tool to evaluate compliance with the C-CDA R2.1 standard and vocabulary code sets.



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2a	Count of outside C-CDAs saved to a patient chart / Count of Direct Messages RECEIVED with C-CDA files attached	A requirement of 170.315(b)(1) is the receiving of transitions of care via direct messages, 170.315(h)(1), with C-CDAs attached. These C-CDAs should be matched to a patient chart, 170.315(b)(2) .
2b	Count of Imported C-CDAs	A requirement of 170.315(b)(2) is the outside C-CDA can be imported, and clinical information reconciled.
3a	Count of all Direct Messages SENT by Status	A requirement of 170.315(h)(1) is sending Direct messages. Direct messages are sent through our partner SureScripts.
4a	Count of Scheduled CCD Bulk Exports	A requirement of 170.315 (b)(6) is for users to create a schedule for exporting CCDs in bulk.
4b	Count of Created CCD Data Files	A requirement of 170.315 (b)(6) is for the scheduled CCDs (4a) to be created and available to download.
4c	Count files with no unexpected validation events in CCDs scheduled files, 4b, from the ett.healthit.gov C-CDA R2.1 Validator tool / Number of CCDs validated	A random sampling of the CCDs in the zip file from 4b will be performed and validated against the internal Health IT validation tool.
5a	Count of QRDA I Exports	A requirement of 170.315 (c)(1) is QRDA I files can be exported.
6a	Count of Patient Portal audit log of View, Download, and Transmit activity	Using the ONC2015 compliant audit log a quantification of View, Download, and Transmit (VDT) events will be performed.
6b	Count of files with no unexpected validation events in patient portal CCDs, 6a, from the Health IT C-CDA R2.1 Validator tool / Number of C-CDAs validated	A random sampling of the CCDs exported from the patient portal (6a) will be performed across all practices and validated against the internally hosted Health IT tool to evaluate compliance with the C-CDA R2.1 standard.
7a	Count of QRDA I Imports	A requirement of 170.315 (c)(2) is a QRDA I can be imported and included in eCQM evaluation.
8a	Count of QRDA III Exports	Clients from the 8b measure will be selected and the number of QRDA III exports will be quantified.
8b	Count Successful QRDA III Uploads to QPP	A random selection of clients will occur and contacted to validate the QRDA file was accepted by QPP.
9a	Count of eRx Message Type by Delivery Status / Response	Message types of NewRx, RxChangeRequest, RxChangeResponse, RxFill, CancelRx, CancelRxResponse, RxRenewalRequest, RxRenewalResponse will be counted by status.



9b	Count RxHistory Response / Count RxHistory Request	The message types of RxHistoryRequest, RxHistoryResponse will be counted. RxHistoryReponse is returned by our partner NewCrop.
10a	Count of Immunization messages SENT to registries	A requirement of 170.315 (f)(1) is to send messages to immunization registries.
	Count of Immunization History requests / Count of patients with Imported immunization records	A requirement of 170.315 (f)(1) is practices can request immunization histories and import to a patient chart.
11a	Count of API audit log events by resource type	Using the ONC 2015 compliant audit log, a quantification of FHIR API events will be performed.

ASSOCIATED CERTIFICATION CRITERIA

ID	Measurement/Metric	Associated Certification Criteria
1a	Count of Direct Messages SENT with C-CDA Attached / Count of Consults Orders Created	 170.315(b)(1) - Transitions of Care 170.315(h)(1) - Direct Message
1b	Count of files with no unexpected validation events in SENT C-CDAs attached to direct messages from the ett.healthit.gov 2015 Edition Cures Update C-CDA R2.1 Validator tool / Number of C-CDAs validated	• 170.315(b)(1) - Transitions of Care
2a	Count of outside C-CDAs saved to a patient chart / Count of Direct Messages RECEIVED with C-CDA files attached	 170.315(b)(1) - Transitions of Care 170.315(h)(1) - Direct Message 170.315(b)(2) - Clinical Information Reconciliation
2b	Count of Imported C-CDAs	• 170.315(b)(2) - Clinical Information Reconciliation
3a	Count of all Direct Messages SENT by Status	• 170.315(h)(1) - Direct Message
4a	Count of Scheduled CCD Bulk Exports	• 170.315(b)(6) - Data Export
4b	Count of Created CCD Data Files	• 170.315(b)(6) - Data Export
4c	Count files with no unexpected validation events in CCDs scheduled files, 4b, from the ett.healthit.gov C-CDA R2.1 Validator tool / Number of CCDs validated	• 170.315(b)(6) - Data Export
5a	Count of QRDA I Exports	• 170.315(c)(1) - Clinical Quality Measures - Record and Export



6a	Count of Patient Portal Audit Log of View, Download, and Transmit Activity	• 170.315(e)(1) - View, Download, and Transmit to 3rd Party
6b	Count of files with no unexpected validation events in patient portal CCDs, 6a, from the Health IT C-CDA R2.1 Validator tool / Number of C-CDAs validated	• 170.315 (e)(1) - View, Download, and Transmit to 3rd Party
7a	Count of QRDA I Imports	 170.315 (c)(2) - Clinical Quality Measures - Import and Calculate
8a	Count of QRDA III Exports	• 170.315 (c)(3) - Clinical Quality Measures - Report
8b	Count Successful QRDA III Uploads to QPP	• 170.315 (c)(3) - Clinical Quality Measures - Report
9a	Count of eRx Message Type by Delivery Status / Response	• 170.315(b)(3) - Electronic Prescribing
9b	Count RxHistory Response / Count Rx History Request	• 170.315(b)(3) - Electronic Prescribing
10a	Count of Immunization messages SENT to registries	 170.315 (f)(1) - Transmission to Immunization Registries
10b	Count of Immunization History requests / Count of patients with Imported immunization records	• 170.315 (f)(1) - Transmission to Immunization Registries
11a	Count of API audit log events by resource type	 170.315 (g)(7) - Application Access - Patient Selection 170.315(g)(8) - Application Access - Data Category Request 170.315(g)(9) - Application Access - All Data Request

JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

ID	Measurement/Metric	Justification
1a	Count of Direct Messages SENT with C-CDA Attached / Count of Consults Orders Created	Counting the number of consult orders created compared to the count of direct messages sent with C-CDAs attached will demonstrate compliance with real world interoperability.
1b	Count of files with no unexpected validation events in SENT C-CDAs attached to Direct Messages from the ett.healthit.gov 2015 Edition Cures Update C-CDA R2.1 Validator tool / Number of C-CDAs validated	Validating random C-CDAs sent will demonstrate compliance with C-CDA R2.1 standard and vocabulary code sets.
2a	Count of outside C-CDAs saved to a patient chart / Count of Direct Messages	Counting of Direct Messages received with C-CDAs attached, and saved to a chart, will prove EHI received is used in the product. Comparing these counts will validate the number of successful patient matches.



	RECEIVED with C-CDA	
	files attached	
2b	Count of Imported C-CDAs	Counting the imported C-CDAs will confirm EHI can be received and used in product.
3a	Count of all Direct Messages SENT by Status	Counting the number of Direct Messages sent by status will prove the number of successful messages and compliance with interoperability standards.
4a	Count of Scheduled CCD Bulk Exports	Counting the scheduled records will demonstrate compliance with certification requirements.
4b	Count of Created CCD Data Files	with certification requirements.
4c	Count files with no unexpected validation events in CCDs scheduled files, 4b, from the ett.healthit.gov C-CDA R2.1 Validator tool / Number of CCDs validated	Validating random CCDs from the Data Export (4b) will demonstrate compliance with C-CDA R2.1 standard and vocabulary code sets.
5a	Count of QRDA I Exports	Counting the number of exports will demonstrate compliance with the certification requirements.
6a	Count of Patient Portal Audit Log of View, Download, and Transmit Activity	Counting the number of VDT events will demonstrate compliance with real world interoperability.
6b	Count of files with no unexpected validation events in patient portal CCDs, 6a, from the Health IT C-CDA R2.1 Validator tool / Number of C-CDAs validated	Validating random CCDs will demonstrate compliance with C-CDA R2.1 standard and vocabulary code sets from the patient portal.
7a	Count of QRDA I Imports	Counting the number of imports will demonstrate compliance with import and calculate.
8a	Count of QRDA III Exports	Counting the number of exports will demonstrate compliance with certification requirements.
8b	Count successful QRDA III uploads to QPP	The ultimate success is knowing clients that have uploaded to QPP and attested with no issues.
9a	Count of eRx Message Type by Delivery Status / Response	Counting the message types by delivery status or response will demonstrate real world interoperability.
9b	Count RxHistory Response / Count Rx History Request	Counting RxHistory transactions will demonstrate success with real world interoperability.
10a	Count of Immunization messages SENT to registries	Counting immunization messages sent to registries will demonstrate compliance with real-world interoperability.
10b	Count of Immunization History requests / Count of	Counting immunization history requests sent comparative to the number of imports will demonstrate compliance with real-world interoperability.



	patients with Imported	
	immunization records	
11a	Count of API audit log	Counting audit activities will validate the token exchange occurred
	events by resource type	(g7) and quantify the types of transactions performed. Audit log
		includes category requests (g8) and CCD requests (g9). This method
		will demonstrate compliance with interoperability standards

EXPECTED OUTCOMES

	Messure met/Metric	Evenated Outcome
ID	Measurement/Metric	Expected Outcome
1a	Count of Direct Messages SENT with C-CDA Attached / Count of Consults Orders Created	Greater than 60% of clients queried will have Direct Messages with C-CDA attached for consult orders created
1b	Count of files with no unexpected validation events in SENT C-CDAs attached to direct messages from the ett.healthit.gov 2015 Edition Cures Update C-CDA R2.1 Validator tool / Number of C-CDAs validated	100% - No unexpected validation events.
2a	Count of outside C-CDAs saved to a patient chart / Count of Direct Messages RECEIVED with C-CDA files attached	Greater than Greater than 1.2% of received Direct Messages will be saved to a patient chart.
2b	Count of Imported C-CDAs	Greater than 51.
3a	Count of all Direct Messages SENT by Status	Greater than 90% of Direct Messages will be successful.
4a	Count of Scheduled CCD Bulk Exports	Less than 100 recurring schedules will be created.
4b	Files	Less than 200 zip files will be created from the recurring schedules.
4c	Count files with no unexpected validation events in CCDs scheduled files, 4b, from the ett.healthit.gov C-CDA R2.1 Validator tool / Number of CCDs validated	100% - No unexpected validation events
5a	Count of QRDA I Exports	Less than 300 QRDA I files will be exported.



6a	Count of Patient Portal Audit Log of View, Download, and Transmit Activity	Download = less than 300, Transmit = less than 20, View = greater than 15,000.
6b	Count of files with no unexpected validation events in patient portal CCDs, 6a, from the Health IT C-CDA R2.1 Validator tool / Number of C-CDAs validated	100% - No unexpected validation events.
7a	Count of QRDA I Imports	Successful demonstration of import and aggregation in eCQM evaluation
8a	Count of QRDA III Exports	Successful exports will be reported.
8b	Count Successful QRDA III Uploads to QPP	Successful attestations will be reported.
9a	Count of acknowledgement of eRx Message Type by Delivery Status	Quantification of sent eRx messages with >90% successful acknowledgment status response rate for applicable message
9b	Count of Acknowledgement of RxHistory Response / Count Rx History Request	Quantification of requests and >90% successful
10a	Count of Immunization messages SENT to registries	Successful quantification of real-world interoperability with immunization registries.
10b	Count of Immunization History requests / Count of patients with Imported immunization records	Successful quantification of real-world interoperability with immunization history requests.
11a	Count of API audit log events by resource type	Successful quantification of interoperability events.

CARE SETTING

Care Setting	Justification
Ambulatory	NextGen Office supports specialties in ambulatory care. All specialties have access to the single web-based instance of the NextGen Office technology that allows for clinical documentation, reporting, and electronic interactions with third parties.

KEY MILESTONES

Key Milestones	Care Setting	Date/Timeframe
Finalize Real World Test Plan and Submit to the ONC- ACB (Drummond)	Ambulatory Setting	October 2022
Identify Clients for Participations where applicable	Ambulatory Setting	Q1 2023
Data collection and or observation from client systems	Ambulatory Setting	Q1-Q3 2023
Validation and analysis of data and metrics created	Ambulatory Setting	Q3 2023



Report created and submitted to ONC-ACB (Drummond)	Ambulatory Setting	Q4 2023
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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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