Test Results

Real World Testing

Amit Borse
ADDISON HEALTH SYSTEMS INC.

Contents

1. General Information

Company Info	
Developer Name	Addison Health Systems, Inc.
Contact Name	Greg Winterkamp
Certified Product Name	WritePad EHR
List of Versions Certified	Writepad v10
Certified Health IT Product List (CHPL) ID	15.02.05.1043.ADDI.02.02.1.221219
Plan Report ID	20231117add
Developer Real World Testing Page URL	https://www.writepad.com/meaningful-use
E-Mail	gwinterkamp@writepad.com
Phone Number	972-392-7778 x 108
This Real-World testing result report is complete with all required elements, including measures that address all certification criteria and care settings. All information in this result report is up to date and fully addresses the health IT developer's Real World Testing requirements. I, Greg Winterkamp, attest that the statements in this document are complete and accurate.	
Name of Authorized Representative	*Greg Winterkamp*
Date	01/31/2025

Associated Certification Criteria for real World testing	
170.315.(b)(1)	Transition of Care (XDR / SMTP)
170.315.(b)(2)	Clinical Information Reconciliation
170.315.(e)(1)	View, Download & Transmit
170.315.(g)(7)	Application Access – Patient selection
170.315.(g)(9)	Application Access – All data request

2. CHANGES TO ORIGINAL PLAN

Summary of Change [Summarize each element that changed between the plan and actual execution of Real World Testing]	Reason [Describe the reason this change occurred]	Impact [Describe what impact this change had on the execution of your Real-World Testing activities]
B.1 Measure	We use 3rd party software called EMRdirect for direct messaging. There is an additional cost to purchase account with them. But none of our doctors want to purchase. So, we couldn't use EMR direct for direct messaging. But apart from that we did test b.1 measure where we import CCDA and show in Writepad.	We did not test direct messaging part but it's completely outside of Writepad because its 3rd party app.

3. Care Setting

We have chosen chiropractic and pain management care settings because application is widely used among these 2 care settings. We had onboarded 3 clients to test above certified measures with a real-world testing plan from Jan 1st, 2024. To start we had an onboarding webinar for clients so that they can understand the task around each measure.

4. Schedule of Key Milestones

Documentation for the Real-World Testing provided to authorized representatives and providers about transitions of care.	Dec 1st 2023
Began collection of information as laid out by the plan.	January 1, 2024
Met with previously identified providers and authorized representatives to ensure that Real World Testing protocols was effective.	February 2024
Data collected and reviewed.	Quarterly, 2024
End of Real-World Testing period/final collection of all data for analysis.	January 2025
Analysis and report.	January 15, 2025
Submit Real World Testing report to ACB (per their instructions)	January 29, 2025

5. SUMMARY OF TESTING METHODS AND KEY FINDINGS WITH METRIC

Addison Health Systems chose to test its (EHR) product, Writepad EHR. We selected the settings of care those are representative of Writepad clients. Writepad was intended to work in ambulatory settings with as a solo practitioner or with multiple providers. Participants to this testing will be selected based on the following:

- History of using Writepad EHR
- Allow permission to access and extract patient health information for testing purposes.
- Clients availability

All testing was done on the client's server or workstation. All testing participants allowed AHS to have full access to their system during the testing period. We educate participants about the testing procedure and explain about what information was taken from their system for testing purposes.

Our goal was to test the following measures and metrics outlined in this plan quarterly throughout the year. Testing Writepad EHR in real world situations quarterly has allowed us to collect enough data to provide evidence of interoperability.

We selected the measures based on what is required for certification in the real-world testing. The testing procedures were created with minimal interruption to client services and client workflow. Most data points were collected by the us and do not require the testing user's participation. We have included the use of test patients in our measures as many of our clients are smaller offices that may not want to include certain functionality in their workflow.

We closely monitor how our measures are performed, the data is collected, and the feedback we get from our customers. We didn't discover any non-conformities while collecting the data. All these items were reviewed to see if we are adequately capturing data that provides evidence of on-going interoperability with Writepad EHR.

5.1 170.315. (b)(1) Transitions of care

In this measure we have showed providers that how they can import CCDA document if they have received via direct message or by any other way. That CCDA document they can view in Writepad. For viewing purpose CCDA sections can be re-arranged as well. Also, they can generate CCDA document for patient(s) and send document via direct message. We use EMRDirect for direct messaging. Its 3rd party company.

Relied Upon Software:

Writepad uses 3rd party tool called **EMRDirect** for direct messaging. When we send/receive direct email with CCDA document provider records that info in Writepad.

5.1.1 Testing Methodology

       In Writepad we have tracked
- Request date for CCDA file.
- Date to CCDA file received and download once clinical summary received.
- Date on which CCDA imported.
- Date on which CCDA was sent.
- We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we collected data manually from the application. Dashboard is designed in such a way that we can collect information for specific/all providers or clinics or date range. We have asked clients to report error(s) if they got. We have checked our Error logs to track errors.

5.1.2 Challenges Faced
- Educate clients about how to exchange information using direct messaging. And none of our doctors were interested in it because there is an extra cost for this.

5.1.3 Test Results

Test Results are reported in this format. Data is collected from 3 different clinics.

Duration	Number of Patients Referred in	Number of Referral summary/TOC received.	Number of CCDA Imported
Jan 1st 2024 till Dec 31st 2024	0	0	0

Jan 1st 2024 till Dec 31st 2024	0	0	0
Jan 1st 2024 till Dec 31st 2024	3	3	3

5.1.3 Outcome(s)

Real World Testing demonstrated that the Health IT Module is conformant to § 170.315.(b)(1) Transitions of care certification criterion expect Direct Messaging. Any direct messaging was done outside of Writepad by EMRdirect. We did partial test without EMRdirect.

- Real World Testing demonstrated that the Health IT Module is able to display, a human-readable C-CDA to a user.
- CCDA document has minimum USCDI information.
- Real World Testing demonstrated that the Health IT Module is able to allows a user to choose to display only the data within a particular C-CDA section, set a preference for the section display order, and set the initial number of sections to be displayed.

5.2. 170.315.(b)(2) Clinical-information-reconciliation-and-incorporation

In this measure we have shown providers how to reconcile CCDA documents in Writepad. And provider can create reconciled list of drugs, medications and allergies and save that in Writepad. If provider wants, he can export CCDA with reconciled list as well. For result we have tracked data by following method:

5.2.1 Testing Methodology

In Writepad we have tracked following,
- Date to CCDA file received once patient gives clinical summary to provider or authorized person.
- Date on which CCDA is imported.
- Date on which reconciled CCDA is exported.
- We have collected the number of clinical reconciliations done for each period by each user. We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we collected data manually from the application. Dashboard is designed in such a way that we can collect information for specific/all providers or clinics or date range. We have asked clients to report error(s) if they got. We have checked our Error logs to track errors.

5.2.2 Test Results

Test Results are reported in this format. Data is collected from 3 different clinics.

Duration	Number of Referral summary/TOC received.	Number of Clinical reconciliations performed successfully	Number of CCDA Exported after reconciliation
Jan 1st 2024 till Dec 31st 2024	0	0	0
Jan 1st 2024 till Dec 31st 2024	0	0	0
Jan 1st 2024 till Dec 31st 2024	3	2	2

5.2.3 Outcome(s)

Real World Testing demonstrated that the Health IT Module is conformant to § 170.315(b)(2) for the "Clinical-information-reconciliation-and-incorporation" certification criterion.

- Real World Testing demonstrated that Writepad should be able to match a received Transition of Care (TOC)/Referral Summary to the correct patient.
- Real World Testing demonstrated that Writepad can simultaneously display a patient's active data, and its attributes, from at least two of the following sources: a patient's medication list, allergies and problem list. Displayed data attributes must include the source and the last modification date.
- Real World Testing demonstrated that user can review, validate, and incorporate a patient's medication, allergies and problem list.
- Real World Testing demonstrated that Writepad created a C-CDA document should be able to that includes the reconciled and incorporated data.

5.3 170.315. (e)(1) View, Download & Transmit

To test this measure, we have shown providers that they can send clinical summary to the patients in Writetouch portal. We have also shown to clinic that once patient receives clinical summary they can view and download it. Patient can send clinical summary to another person via email in encrypted and unencrypted format.

5.3.1 Testing Methodology

In Writepad we have tracked following,

- Number of clinical summaries sent by provider.
- Number of clinical summaries view or downloaded by patient in Writetouch.
- Number of clinical summaries sent by patient from Writetouch.
- We have collected the number of clinical reconciliations done for each period by each user. We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we collected data manually from the application. Dashboard is designed in such a way that we can collect information for specific/all providers or clinics or date range. We have asked clients to report error(s) if they got. We have checked our Error logs to track errors.

5.3.2 Test Results

Test Results are reported in this format. Data is collected from 3 different clinics.

Duration	Number of clinical summaries sent	Number of clinical summaries view or downloaded by patient	Number of clinical summaries sent by patient
Jan 1st 2024 till Dec 31st 2024	65	10	0

Jan 1st 2024 till Dec 31st 2024	0	0	0
Jan 1st 2024 till Dec 31st 2024	1	1	1

5.3.3 Outcome(s)

Real World Testing demonstrated that the Health IT Module is conformant to 170.315.(e)(1) View, Download & Transmit certification criterion.

- Real World Testing demonstrated that Writepad was able to send clinical summary with minimum USCDI info and provider name and address.
- Real World Testing demonstrated that Patient can view or download CCDA file from Writetouch Portal.
- Real World Testing demonstrated that patient can transmit their health information to a 3rd party via email or encrypted email.

Challenges Faced

- We have educated providers but we were not sure how much that has been conveyed to the patient about Writetouch portal.

5.4 Combine Scenario for 170.315. g.7 and g.9

In this measure we have showed client that they can use Writepad API to identify patient and return patient id which they use for later reference. With that Patient ID 3rd party company called API services which returned USCDI info. For demo purpose we have built an application which consumed our API. Our clients used that to test API.

5.4.1 Testing Methodology

In Writepad we have tracked following,

- Number of API hit for patient identification.
- Number of API hit for patient data fetching the complete USCDI info.
- We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we collected data manually from the application. Dashboard is designed in such a way that we can collect information for specific/all providers or clinics or date range. We have asked clients to report error(s) if they got. We have checked our Error logs to track errors.

5.4.2 Test Results

Test Results will be reported in this format. Data is collected from 3 different clinics.

Duration	Number of API hit for patient identification	Number of API hit for patient data fetching the complete USCDI info
Jan 1st 2024 till Dec 31st 2024	0	0
Jan 1st 2024 till Dec 31st 2024	0	0
Jan 1st 2024 till Dec 31st 2024	6	4

5.4.3 Outcome(s)

- Real World Testing demonstrated that the Health IT Module is conformant to
  170.315.(g)(7)   Application Access – Patient selection
  170.315.(g)(9)   Application Access – – All data request.
- Real World Testing demonstrated that Writepad API able to identity the patient correctly from the info provided by 3rd party.
- Real World Testing demonstrated that Writepad API was able to send complete USCDI Patient Data with combination of date.

5.4.4 Challenges Faced

We have no apps using the Writepad API.

6. STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT)

Standards updates	
Standard (and version)	USCDI v1.0
Updated certification criteria and associated product	b1, b2, e1, g9
Health IT Module CHPL ID	15.02.05.1043.ADDI.02.02.1.221219
Method used for standard update	Cures Update
Date of ONC ACB notification	09/01/2022
Date of customer notification (SVAP only)	N/A
Conformance measure	170.315. (b)(1) Transitions of care 170.315.(b)(2)Clinical-information reconciliation and incorporation 170.315. (e)(1) View, Download & Transmit 170.315.(g)(9) - Combine Scenario for g.7 and g.9
USCDI updated certification. criteria (and USCDI version)	b1, b2, e1, g9—USCDI v1.0