11/17/2024

Test Plan

Real World Testing
Plan ID # 20241122add



Amit Borse
ADDISION HEALTH SYSTEMS INC.

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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							
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 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.								

I, Greg Winterkamp, attest that the statements in this document are complete and accurate.

Greg Winterkamp	
Date	11/17/2024

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.(b)(10)	Electronic Health Information Export							
170.315.(e)(1)	View, Download & Transmit							
170.315.(g)(7)	Application Access – Patient selection							
170.315.(g)(9)	Application Access – All data request							

Standards Updates	
Standard (and version)	N/A
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

2. Justification for Approach

While designing the test plan we have designed a real-world scenario for each measure. And those scenarios are nothing but use cases. Each use case will cover one certification criteria. Some of the measures have more than one use case. For each use case we can calculate the number of times that user successfully completes it. We will be collecting data quarterly for each certified measure for each client who will be testing with us.

Our product is marked to chiropractic and pain management care settings because application is widely used among these 2 care settings. We will be onboarding 3 clients to test above certified measures with a real-world testing plan from Jan 1st, 2025. To start we will have an onboarding webinar for clients so that they can understand the task around each measure.

3. MEASURES USED IN OVERALL APPROACH

3.1 170.315. (b)(1) Transitions of care

Details: -

In this measure EHR should be able to send and receive transition of care (ToC)/referral summaries using one of the four edge protocols in the ONC Implementation Guide for Direct Edge Protocols. Health IT can detect valid and invalid ToC/referral summaries upon receipt of CCDA documents. Health IT can display a human-readable C-CDA to a user. Health IT 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. The health IT can create a C-CDA (formatted to Release 2.1) that includes USCDI and certain data to assist with patient matching. For this measure we have updated CCDA import and export according to **USCDI v 1.0** standards.

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.

3.1.1 Care Setting(s)

We will test this measure in either of the following setting.

Pain management Specialty Care Setting: EHR is sold to Pain management clinic which helps them to track visit data for each patient.

Chiropractic Specialty Care Setting: EHR is sold to Chiropractic clinics which helps them to track visit data for each patient.

3.1.2 Schedule of Key Milestones

Release of documentation for the Real-World Testing to be provided to authorized representatives and providers about transitions of	
care.	
Begin collection of information as laid out by the	January 1, 2025
plan.	

Meet with previously identified providers and	February 2025
authorized representatives to ensure that Real	
World Testing protocols are effective.	
Follow-up with providers and authorized	Quarterly, 2025
representatives to understand any issues arising	
with the data collection.	
Data collection and review.	Quarterly, 2025
End of Real-World Testing period/final collection of	January 2026
all data for analysis.	·
Analysis and report creation.	January 1, 2026
Submit Real World Testing report to ACB (per their	January 15, 2026
instructions)	

3.1.3 Use case

The following use case provides an example of a Real-World Testing plan for a single certification. Criterion, 170.315.(b)(1) Transitions of care. We have only a one-use case which will cover the complete criteria.

In this use case, a patient has been referred to the Writepad clinic from another clinic. Both providers use direct email for exchange Health information. So other Writepad providers send a request to other provider to share a CCDA file for patient via direct email. Once Writepad provider receives CCDA file in direct email, he downloads that file. Then records the info into Writepad when file requested received and downloaded. Then he can search for that patient in Writepad and open that CCDA file. Users can see the CCDA file and arrange the CCDA section as per his priority.

Once the Visit is complete for patient Writepad provider sends back updated patient data (CCDA) via direct email to another provider for record.

3.1.3.1 Justification

While referring a patient from one provider to another, the most challenging part is to get patient history and input in EHR. But with this feature exchange of health info is made easy. Users can see all old data for that patient from another provider and arrange section while looking at CCDAfile. And before importing into Writepad users can compare both EHR list and CCDA and reconciled list. If needed, the provider can export the CCDA with a reconciled list. The goal of this approach is to demonstrate that 170.315.(b)(1) Transitions of care with the requirements.

3.1.3.2 Testing Methodology

- Request date for CCDA file will be tracked.
- Date to CCDA file received and download once clinical summary received.
- Date of import CCDA will be tracked.
- Date of CCDA send will be tracked.
- User Log can be checked during Real World Testing. We will be collecting the numbers quarterly for providers who are testing with us.

In case of necessity, we can obtain logs from EMRdirect. Logs can be checked during Real World Testing. We will be collecting the numbers quarterly for providers who are testing with us.

3.1.3.3 Test Results

Test Results will be reported in this format.

Duration	Number	of	Patients	Number	of	Referral	Number	of	CCDA
	Referred in			summary	/TOC		Imported		
				received.					

3.1.3.4 Expected Outcome(s)

We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we go and collect 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. Error rates will be tracked and trended over time.

- Real World Testing will demonstrate that the Health IT Module is conformant to § 170.315.(b)(1) Transitions of care certification criterion.
- Real World Testing will demonstrate that the Health IT Module is able to send and receive transition of care (ToC)/referral summaries using one of the four edge protocols in the ONC Implementation Guide for Direct Edge Protocols. In this case EMR direct.
- Real World Testing will demonstrate that the Health IT Module is able to display, a humanreadable C-CDA to a user.
- Real World Testing will demonstrate 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.
- Real World Testing will demonstrate that the Writepad user is able to send CCDA file using EMRdirect.

3.2. 170.315.(b)(2) Clinical-information-reconciliation-and-incorporation

Details:-

In this measure EHR should be able to match a received Transition of Care (TOC)/Referral Summary to the correct patient. While doing that a user can simultaneously display a patient's active data, andits attributes, from at least two of the following sources: a patient's medication list, allergies and intolerances list, and problem list. Displayed data attributes must include the source and the last modification date. And then he can review, validate, and incorporate a patient's medication, allergies, and problem list. Users create a C-CDA document should be able to that includes the reconciled and incorporated data. For this measure we have updated CCDA document according to **USCDI v1.0** standards.

3.2.1 Care Setting(s)

We will test this measure in either of the following setting.

Pain management Specialty Care Setting: EHR is sold to Pain management clinic which helps them to track visit data for each patient.

Chiropractic Specialty Care Setting: EHR is sold to Chiropractic clinic which helps them to track visit data for each patient.

3.2.2 Schedule of Key Milestones

Release	of	docume	ntation	for	the	Real	World	December 1 st , 2024
Testing	to	be be	provide	ed	to	aut	horized	

representatives and providers about how to do clinical reconciliation and export reconciled list.	
Begin collection of information as laid out by the plan.	January 1, 2025
Meet with previously identified providers and authorized representatives to ensure that Real World Testing protocols are effective.	February 2025
Follow-up with providers and authorized representatives to understand any issues arising with the data collection.	Quarterly, 2025
Data collection and review.	Quarterly, 2025
End of Real-World Testing period/final collection of all data for analysis.	January 2026
Analysis and report creation.	January 1, 2026
Submit Real World Testing report to ACB (per their instructions)	January 15, 2026

3.3.3 Measures Used

Following use case provides an example of a Real-World Testing plan for a single certification criterion, 170.315.(b)(2) Clinical-information-reconciliation-and-incorporation. We have only one- use case which will cover the complete criteria.

Use case

In this use case, a patient has been referred to the Writepad provider. And the patient gives referral summary in the form CCDA document to provider from his old doctor. So, the provider must search thename for that patient and then log date when he receives the referral summary. He has view medication, allergy, and problem list data from Writepad and CCDA received at a time. And create a reconciled list from both source and export another CCDA document with reconciled list so that patient will have updated CCDA document.

3.3.4.1 Justification

While referring a patient from one provider to another most challenging part is to get patient history and input that in EHR. But with this feature referred patient medication, problem list and allergies can be imported in Writepad from CCDA. And before importing into Writepad users can compare both EHR list and CCDA and reconciled list. If needed provider can export the CCDA with reconciled list. The goal of this approach is to demonstrate that Clinical-information-reconciliation-and-incorporation with the requirements of the § 170.315(b)(2) certification criterion.

3.3.4.2 Testing Methodology

- Date to CCDA file received once patient gives clinical summary to provider or authorized person.
- Date of import CCDA will be tracked.
- Date of export reconciled CCDA will be tracked.
- We will collect the number of clinical reconciliations done for each period by each user. UserLogs
 can be checked during Real World Testing. We will be collecting the numbers quarterly for
 providers who are testing with us.

3.3.4.3 Test Results

Test Results will be reported in this format.

Duration	Number of Referral summary/TOC received.	Number of Clinical reconciliations performed successfully	

3.3.4.4 Expected Outcome(s)

We have built a dashboard within the application which tracks the above information. So at the end of the quarter, we go and collect 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. Error rates will be tracked and trended over time.

- Real World Testing will demonstrate that the Health IT Module is conformant to § 170.315(b)(2) for the "Clinical-information-reconciliation-and-incorporation" certification criterion.
- Real World Testing will demonstrate that Writepad should be able to match a received Transition of Care (TOC)/Referral Summary to the correct patient.
- Real World Testing will demonstrate 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 will demonstrate that user can review, validate, and incorporate a patient's medication, allergies and problem list.
- Real World Testing will demonstrate that Writepad create a C-CDA document should be able to that includes the reconciled and incorporated data.

3.4 170.315 (b)(10) Electronic Health Information export

Details: -

This Health IT Module ensures users capability to perform an EHI export for a single or multiple patients at any time the user chooses without any involvement of developer or specialized personnel. This module also has the functionality to export all electronic health information for the patient population. The users must have access / ability to perform the export task, otherwise the system administrator(s) can run the EHI export functionality for them. System administrator should be able to restrict user to export file.

3.4.1 Care Setting(s)

We will test this measure in either of the following settings.

Pain management Specialty Care Setting: EHR is sold to Pain management clinics which helps them to track visit data for each patient. Both Specialty are Ambulatory settings.

Chiropractic Specialty Care Setting: EHR is sold to Chiropractic clinics which helps them to track visit data for each patient.

3.4.2 Schedule of Key Milestones

Release	of	docume	ntation	for	the	Real-World	December 1, 2024
Testing	to	be	provide	ed	to	authorized	
represen	itativ	ves and	provider	s abo	out h	ow to export	
EHI for o	ne c	r multipl	le patien	ts.			

Begin collection of information as laid out by the plan.	January 1, 2025
Meet with the previously identified providers and authorized representatives to ensure that Real World Testing protocols are effective.	February 2025
Follow-up with providers and authorized representatives to understand any issues arising with the data collection.	Quarterly, 2025
Data collection and review.	Quarterly, 2025
End of Real-World Testing period/final collection of all data for analysis.	January 2026
Analysis and report creation.	January 1, 2026
Submit Real World Testing report to ACB (as per their instructions)	January 15, 2026

3.4.3 Measures Used

The following use case provides an example of a Real-World Testing plan for a single certification criterion, 170.315.(b)(10) Electronic Health Information Export. We have only one use case which will cover the complete criteria.

Use case

In this use case, the provider will ask one of his staff members who has access, to export the EHI. Provider will make sure if only the allowed user is able to export EHI for two patients. Staff person searches and selects both patients and exports clinical summary for both patients.

3.4.3.1 Justification

This is the most common scenario, where provider asks his staff to export EHI for one or multiple patients.

3.4.3.2 Testing Methodology

To test this measure, we will track a number of patients whose EHI will be exported from EHR.

3.4.3.3 Test Results

Test Results will be reported in this format.

Duration	Number sent	of	EHI exports	Username

3.4.3.4 Expected Outcome(s)

We have built a dashboard within the application which tracks the following information. So at the end of the quarter, we go and collect data manually from application. Dashboard is designed in such way that we can collect information for specific/all provider or clinic or date range. Error rates will be tracked and trended over time.

- Real World Testing will demonstrate that the Health IT Module is conformant to 170.315.(b)(10) Electronic Health Information Export certification criterion.
- Real World Testing will demonstrate that Writepad has the capability to perform an EHI export for patients without any involvement of developer or specialized personnel.
- Real World Testing will demonstrate that administrators have ability to run the EHI export functionality within EHR.

- We expect that the EHI report will be generated successfully for a single patient or for the patient population without any errors.
- We expect little to no complaints from the clients regarding the EHI Export module. Any patient not showing up in the EHI report is likely because of user error rather than system error. However, the error rates will be tracked and trended over time.

3.5 170.315. (e)(1) View, Download & Transmit

Details: -

Patients (and their authorized representatives) can view, download, and transmit their health information to a 3rd party via internet-based technology. Information should have min **USCDI v1.0 standard**, the provider's name, office contact information, laboratory test report(s), and diagnostic image reports etc.

We use our own portal called "WriteTouch" to send clinical summary to patient.

3.5.1 Care Setting(s)

Pain management Specialty Care Setting: EHR is sold to Pain management clinic which helps them to track visit data for each patient. Both Specialty are Ambulatory settings.

Chiropractic Specialty Care Setting: EHR is sold to Chiropractic clinic which helps them to track visit data for each patient.

3.5.2 Schedule of Key Milestones

Release of documentation for the Real-World Testing to be provided to authorized representatives and providers about how toachieve	December 1, 2024
measure view, download and transmit.	
Begin collection of information as laid out by the plan.	January 1, 2025
Meet with previously identified providers and authorized representatives to ensure that Real World Testing protocols are effective.	February 2025
Follow-up with providers and authorized representatives to understand any issues arising with the data collection.	Quarterly, 2025
Data collection and review.	Quarterly, 2025
End of Real-World Testing period/final collection of all data for analysis.	January 2026
Analysis and report creation.	January 1, 2026
Submit Real World Testing report to ACB (per their instructions)	January 15, 2026

3.5.3 Measures Used

The following use case provides an example of a Real-World Testing plan for a single certification criterion, 170.315.(e)(1) Transitions of care. We have only a one-use case which will cover the complete criteria.

Use case

In this use case, the patient requests his clinic summary after doctor visit. The provider accepts the request and sends CCDA document within 2 business days. Patient receives an email with link to register on Write touch portal. Once he registers from that link, he can see that summary on portal. He wanted to review that, so he downloaded summary from portal and viewed it. Once he views that

he decides to forward to medical emergency contact on their email. He goes back to Portal and clicks on the upload and send button. Send the download file to his emergency contact email address.

3.5.3.1 Justification

This is the most common scenario, where patient request his medical history after the visit so that patient will have his updated info and she/he wants to send to their medical emergency contact. The goal of this approach is to demonstrate that view download and transmit with the requirements of the § 170.315(e)(1) certification criterion.

3.5.1.2 Testing Methodology

To test this measure, we will have a number of patients who clinical summary will be sent within 2 days after visit. Once the patient receives it will keep the record of number of people who viewed and download clinical summary. We will keep track of number if patient sends clinical summary from Writetouch patient portal.

3.5.1.3 Test Results

Test Results will be reported in this format.

Duration	Number	of	clinical	Number	of	clir	nical	Number	of	clinic	:al
	summaries	sent		summaries	vie	ew	or	summari	es	sent	by
				downloaded by patient			patient				

3.5.1.4 Expected Outcome(s)

We have built a dashboard within an application which tracks the following information. So at the endof quarter, we go and collect data manually from application. Dashboard is designed in such way that we can collect information for specific/all provider or clinic or date range. Error rates will be tracked and trended over time.

- Real World Testing will demonstrate that the Health IT Module is conformant to 170.315.(e)(1) View, Download & Transmit certification criterion.
- Real World Testing will demonstrate that Writepad is able to send clinical summary with minimum USCDI v1.0 info and provider name and address.
- Real World Testing will demonstrate that Patient can view or download CCDA file from Writetouch Portal.
- Real World Testing will demonstrate that patients can transmit their health information to a 3rd party via email or encrypted email.

3.6 Combine Scenario for g.7 and g.9

Details:

This Scenario provides an example of a Real-World Testing plan for several certification criteria:

- 170.315.(g)(7) Application Access Patient selection
- 170.315 .(g)(9) Application Access All data request

Any 3rd party application needs to contact AHS Support to setup API. Writepad will provide authorization token to 3rd party app.

3.6.1. Care Setting(s)

We will test this measure in either of the following setting.

Pain management Specialty Care Setting: EHR is sold to Pain management clinic which helps them totrack

visit data for each patient. Both Specialty are Ambulatory settings.

Chiropractic Specialty Care Setting: EHR is sold to Chiropractic clinic which helps them to track visit data for each patient.

3.6.2 Schedule of Key Milestones

CC

CCS	
Release of documentation for the Real-World	December 1, 2024
Testing to be provided to authorized	
representatives and providers about how to do set	
up Writepad API for 3 rd party company. identify	
patient and get data for that patient.	
Begin collection of information as laid out by the	January 1, 2025
plan.	
Meet with previously identified providers and	February 2025
authorized representatives to ensure that Real	
World Testing protocols are effective.	
Follow-up with providers and authorized	Quarterly, 2025
representatives to understand any issues arising	
with the data collection.	
Data collection and review.	Quarterly, 2025
End of Real-World Testing period/final collection of	January 2026
all data for analysis.	
Analysis and report creation.	January 1, 2026
Submit Real World Testing report to ACB (per their instructions)	January 15, 2026

3.6.3 Measures Used

Use case

In this use case, Clinic has decided to use the 3rd party billing company like use case 1. But in some cases, 3rd party billing company requires more info than procedure and diagnosis to support the claim. But clinic does not want to give access to 3rd party person to complete Writepad. So, we can create a standalone application where 3rd party person can query and get USCDI v1.0 info using Writepad API. In this case standalone will use the single API call to get complete USCDI v1.0 info.

Billing person will pass first name (required), last name(required), Hone Phone(required), DOB (required), Zip(required) and in response API will return the patient chart number. That chart number they can use to get USCDI v1.0 info. And person can see the USCDI v1.0 info on standalone app.

3.6.3.1 Justification

This is the most common scenario where EHR pass their info to billing company for billing purpose. Writepad API will be perfect case for this. This gives a comfort to clinic because they don't need to provide complete access to Writepad. Billing software hits the API with patient details, and they can pull the Patient USCDI v1.0 info.

When standalone app passes the patient details and todays date to API, it will identity patient in Writepad and in response sends back the patient chart for further use. Once patient is identified then standalone app can use patient chart and date to get USCDI v1.0 info. This demonstrates the requirement for 170.315.(g)(9) Application Access – All data request.

3.6.3.2 Testing Methodology

Log data can be obtained during Real World Testing will be de-identified and used for analysis in several areas to validate the proper operation of 170.315.(g)(9) Application Access – All data request.

3.6.3.3 Test Results

Test Results will be reported in this format.

Duration	Number of API hit for patient identification	Number of API hit for patient data fetching the complete USCDI Info

3.6.3.4 Expected Outcome(s)

We have built a dashboard within application which tracks the following information. So at the end of quarter, we go and collect data manually from application. Dashboard is designed in such way that we can collect information for specific/all provider or clinic or date range. Error rates will be tracked and trended over time.

- Real World Testing will demonstrate that the Health IT Module is conformant to 170.315.(g)(9) Application Access All data request.
- Real World Testing will demonstrate that Writepad API able to identity the patient correctlyfrom the info provided by 3rd party.
- Real World Testing will demonstrate that Writepad API able to send complete USCDI v1.0 PatientData with combination of date.