

CY 2025 Real World Testing Plan for Patient First

Executive Summary

This is the real world test plan for CY 2025 for our Patient First certified EHR solution PAS. 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.

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: PAS_RWT_2025

Developer Name: Patient First

Product Name(s): PAS

Version Numbers(s): 2015.0.0.1

Certified Health IT Criteria: 315(b)(1)-(3), (b)(10); (c)(1)-(3); (e)(1); (f)(1), (f)(2); (g)(7), (9)

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

- 15.04.04.2140.PAS1.15.02.0.221212
- <https://chpl.healthit.gov/#/listing/11065>

Developer Real World Testing Page URL: <https://www.patientfirst.com/mandatory-disclosure-for-ehr>

Timeline and Milestones for Real World Testing CY 2025

- 1Q-2025: Health IT system is fully enabled for use in real world testing.
- 3Q-2025. Begin making plans to collect data for RWT measures. If necessary, engage clients to ask for their support and participation in real world testing.
- 4Q-2025. During the last quarter of the year, the CY 2025 real world test results will be captured according to our test plan. We also complete work for next year's Real World Test Plan and submit it by November 1, 2025.
- February 1, 2026. Real World Test Report will be completed and submitted according to ONC and ONC-ACB requirements and expectations.

Standards Version Advancement Process (SVAP) Updates

Currently, we are using all required [ONC Certification Program](#) standard version(s) unless noted differently below. Next year we will be updating our EHR to support the new standard versions according to the HTI-1 rule, including USCDI v3, and based on when we complete these updates, new SVAP version(s) may be captured in our CY 2025 RWT test results, and if so, we will note that in our CY 2025 RWT test report.

Standard (and version)	All standards versions including USCDI v1 are those specified in ONC Certification Program criteria.
Method used for standard update	N/A
Date of ONC-ACB notification	N/A
Date of customer notification (SVAP only)	N/A
USCDI-updated criteria	This plan documents the support of all USCDI v1 data elements.

For our eCQM submission to CMS, we will be updating to the newest CMS implementation guide before the end of CY 2024.

Standard (and version)	CMS Implementation Guide for Quality Reporting Document Architecture: Category III; Eligible Clinicians and Eligible Professionals Programs; Implementation Guide for 2024 (November 2023)
Method used for standard update	SVAP
Date of ONC-ACB notification	Before end of CY 2024
Date of customer notification (SVAP only)	Before end of CY 2024

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/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 to 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.

Care and Practice Settings Targeted

Our PAS EHR is self-developed solely for the use of our own providers in our Patient First urgent care centers. We provide both primary and urgent care. 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.

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

Associated Criteria: 315(b)(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 3rd party via Direct messaging during a transition of care event over the course of a given interval.

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 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.

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 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

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #2. 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.

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.

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

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #3. Number of Electronic Prescriptions Messages Successfully Sent – Controlled and Non-controlled Substances

Associated Criteria: 315(b)(3)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many electronic prescriptions were created and successfully sent from the EHR Module to a pharmacy destination over the course of a given interval.

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 an electronic prescription message and either transmit it to a pharmacy, typically via the Surescripts Network, or by our internal pharmacy center which providers often utilize.

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

Care Settings

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #4. Number of EHI Exports Run

Associated Criteria: 315(b)(10)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many patients requested and received EHI exports of their health information by the EHR Module as well as number of bulk patient exports over the course of a given interval.

Measurement Justification

Exporting patient EHI is necessary for patients to have a comprehensive view of their health information. This measure will provide a numeric value, include both success and errors, to indicate how often this interoperability feature is being used as well as its compliance to the requirement, namely that the EHR can create an export of patient EHI in a computable format.

Measurement Expected Outcome

The measurement will produce numeric results of attempted and completed EHI Export of Patient EHI, both success and error, by the EHR Module over a given interval. We will likely utilize a database report to determine our measure count.

We expect this test will be completed with few, if any, technical errors, although we may observe some user-driven errors unrelated to the functionality of the EHR software. We will examine results to evaluate the performance of the EHR Module.

A successful export indicates compliance with the underlying ONC criteria and that the EHR can create an export of all patient's EHI. 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. Any observed errors may indicate either lack of understanding by the user, configuration setup issues, or product errors, and we will investigate as necessary.

We will also track the bulk patient exports done. However, we expect the number to be zero because our EHR is self-developed and used exclusively by our own organization and providers, and we do envision needing a full patient population export.

If none of our chosen sites have records of any patient requested EHI Exports, we will substitute a test with synthetic patient data in an environment that mirrors production use.

Care Settings and Number of Clients Site to Test

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #5. Number of Quality Measures Successfully Reported on to CMS

Associated Criteria: 315(c)(1)-(c)(3)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many eCQM quality measures were successfully reported on by the EHR Module to CMS over the course of a given interval.

Measurement Justification

This measure will provide a count and list of electronic clinical quality measures (eCQMs) 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. Because CQM criteria, 315(c)(1)-(c)(3), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three.

Measurement Expected Outcome

The measurement will a count and list of eCQMs submitted to CMS over a given interval. We will utilize various reports and audit logs to determine our measure count.

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

Care Settings

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #6. Number of Patients Who Accessed/Logged in to Portal

Associated Criteria: 315(e)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many patients are successfully logged into and accessed their patient portal account over the course of a given interval.

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 patients can log into their patient portal to view, download, or transmit their health data.

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 successful measure increment indicates compliance to the underlying ONC criteria. It will show that patients can log into their patient portal to view, download, or transmit their health data. 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

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #7. Number of Immunization Messages Successfully Sent to IIS/Immunization Registries

Associated Criteria: 315(f)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many immunization messages are created and successfully sent from the EHR Module to an IIS/immunization registry over the course of a given interval.

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 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

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, 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 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

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #8. Number of Syndromic Surveillance Messages Successfully Sent

Associated Criteria: 315(f)(2)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many syndromic surveillance messages are created and successfully sent from the EHR Module to a syndromic registry over the course of a given interval.

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 syndromic surveillance message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with a public health registry.

Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, 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 HL7 syndromic surveillance message, including ability to record the required clinical data elements. In sending the syndromic surveillance message, the EHR will demonstrate ability to confirm successful interoperability of patient's immunization data to public health 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

We designed this measure to test our Patient First clinics treating both primary and urgent care.

RWT Measure #9. Number of applications/3rd party systems accessing our FHIR API server

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

Testing Methodology: Reporting/Logging

Measurement Description

This is a measure to determine how many different systems or applications are connecting to our EHR via the API. We will look over the course of a minimum of six (6) months to gauge registered applications and active use.

Measurement Justification

This measure will determine how many 3rd party systems or applications are integrated and using the EHR's FHIR API interface. This measure will allow us to verify our certified API is working with 3rd party applications to access USCDI patient data.

Measurement Expected Outcome

The measurement will provide a count of FHIR application applications which have registered with our server for patient access as well as applications actively connecting to our FHIR server. We will utilize our FHIR API form which developers use to request API access as well as additional reports and audit logs to determine the number of API applications enabled for our system.

If we determined a larger number of applications are registering and using our API services, we will look to add additional metrics such as queries made to better evaluate our API usage. However, our current adoption of FHIR API is at presently 0 applications.

The answer will provide insight into how both patients and clinicians view both the use and value of this interoperability feature.

Care Settings

We designed this measure to test our Patient First clinics treating both primary and urgent care. We will look across all of our practice sites to see how many FHIR applications are registered and in use.