CY 2022 Real World Testing Plan for PDS MDsuite

Executive Summary

This is the real world test plan for CY 2022 for Professional Data Services (PDS) MDsuite certified EHR solution. 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) to evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting which it is targeted for use.

As ONC has stated in its rule, "The objective of real world testing is to verify the extent to which certified health IT deployed in operational production settings is demonstrating continued compliance to certification criteria and functioning with the intended use cases as part of the overall maintenance of a health IT's certification." We have worked toward this objective in designing our test plan and its subsequent real world testing measurements and metrics.

This document builds toward the final testing measurements and metrics we will use to evaluate our product interoperability within production settings. Within each measure, we document planned testing methodology, associated ONC criteria, justification for measurement, expected outcomes from the testing, care settings applied for this measure, and if applicable the number of clients to use our real world testing approach, including how our test cases were created, our selected methodology, the number of client/practice sites to use, and our general approach and justification for decisions.

We have included our timeline and milestones for completing the real world testing in CY 2022, and information about compliance with the Standards Version Advancement Process updates.

A table of contents with hyperlinks is provided later in the plan quick access to any document section, including the testing measurements and metrics found at the end of this document. Our signed attestation of compliance with the real world testing requirements is on the following page.

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.

Authorized Representative Name: Dan Ullrick

Authorized Representative Email: dullrick@pdsmed.com

Authorized Representative Phone: (620) 560-6331

Authorized Representative Signature:

DATE 12/02/2021

General Information

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

Developer Name: Professional Data Services

Product Name(s): PDS MDsuite

Version Numbers(s): 8

Certified Health IT Criteria: 315(b)(1)-(3), (6), (9); (c)(1)-(c)(4); (e)(1); (f)(1)-(2); (g)(7)-(9)

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

- 15.04.04.2216.PDSM.08.00.1.180202
- https://chpl.healthit.gov/#/listing/9347

Developer Real World Testing Page URL: http://pdsmed.com/costandlimitations

Timeline and Milestones for Real World Testing CY 2022

- 1Q-2022: Begin communication with clients to ask for their support and participation in real world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2022.
- 2Q-3Q 2022. During the 2nd and 3rd quarter of CY 2022, the real world testing with clients will be scheduled and performed. It is expected that a preparatory call will be done with clients to prepare them for testing activities. Results will be documented in the test results section of the test methods and ultimately used to build the test report. If any non-compliances are observed, we will notify the ONC-ACB of the findings and make the necessary changes required.
- 4Q-2022. During the last quarter of the year, the CY 2022 real world test plan will be completed according to ONC and ONC-ACB requirements and expectations. Test plan will be prepared for submission before the end of the year.

Standards Version Advancement Process (SVAP) Updates

For CY 2022, we are not planning to make any version updates on approved standards through the SVAP process. We plan on implementing USCDI v1 in our C-CDAs and API support during CY 2022, but we have not finalized an exact date for rollout.

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
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, 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.

Survey/Self-Test: This methodology evaluates interoperability and compliance of EHR Module capabilities through feedback from users or having users conduct the testing themselves. ONC has recognized that self-testing can be a viable method for evaluation and compliance, and 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 and Practice Settings Targeted

Our EHR is primarily targeted to general ambulatory practices, and our measures were design for 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.

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.

The interval for this measure will be for a minimum of one (1) consecutive month during the calendar year. This will ensure a sufficient time to gauge and measure interoperability.

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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

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.

The interval for this measure will be for a minimum of one (1) consecutive month during the calendar year. This will ensure a sufficient time to gauge and measure interoperability.

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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

RWT Measure #3.   Number of NewRx Prescriptions Messages Successfully Sent

Associated Criteria: 315(b)(3)

Testing Methodology: Reporting/Logging

Measurement Description

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

The interval for this measure will be for a minimum of one (1) consecutive month during the calendar year. This will ensure a sufficient time to gauge and measure interoperability.

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. Electronic prescriptions are critical to our customers, and they are commonly used. An increment to this measure indicates that the EHR can create a NewRx SCRIPT electronic prescription message and transmit it to a pharmacy, typically via the Surescripts Network.

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 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

RWT Measure #4.   Number of Patient Batch Exports Run

Associated Criteria: 315(b)(6)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many batch exports of C-CDAs were successfully performed by the EHR Module over the course of a given interval.

The interval for this measure will be three (3) months.

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 batch export of multiple C-CDA patient summary records.

Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs and other user reported outcomes to determine our measure count.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create a batch export of multiple C-CDA patient summary records, which can be used in means of health IT interoperability. 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 document any errors and investigate them as necessary.

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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #5.   Number of Care Plan C-CDA Created

Associated Criteria: 315(b)(9)

Testing Methodology: Reporting/Logging

Measurement Description

This is a measure to determine how many Care Plan document C-CDAs are created by the user.

Measurement Justification

This measure will determine real world interoperability and usability, specifically how often Care Plan document C-CDAs are created.

Care Plan documents are often required for specific programs, like CPC+, as well as useful in communicating specific patient care strategies with the patient and other providers. This measurement will indicate how often Care Plan C-CDAs are created, especially compared to other C-CDA document types.

Measurement Expected Outcome

Through working with our users and our EHR system and logs, we will determine how many Care Plan C-CDAs were created over a given interval.

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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #6. 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.

The interval for this measure will be for the reporting period for the CMS attestation.

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. This use case will reveal if users are using the CQM certified capabilities of CQM recording, calculation, and submission are working as expected. 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, or we may contact the user directly to self-report on their results if that is more efficient and effective method.

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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

RWT Measure #7.   Number of Patients Given Access to Portal

Associated Criteria: 315(e)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many patients are given login access to their patient portal account over the course of a given interval.

The interval for this measure will be for a minimum of one (1) consecutive month during the calendar year. This will ensure a sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide a numeric value to indicate how often this interoperability feature is being used. An increment to this measure indicates that the EHR can supply patient health data to the patient portal and provide an account for the patient to use in accessing this 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 the EHR can submit patient health data to the patient portal on a regular and consistent basis as well provide an account for the patient to use in accessing this 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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

RWT Measure #8.   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.

The interval for this measure will be for a minimum of one (1) consecutive month during the calendar year. This will ensure a sufficient time to gauge and measure interoperability.

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 and Number of Clients Site to Test

We designed this measure to test the general ambulatory practices that we support and target. We will test a minimum of three (3) client practice(s) as we believe this number provides a viable sample of existing practices to accurately evaluate interoperability.

RWT Measure #9.   Number of Syndromic Registries Connected with EHR

Associated Criteria: 315(f)(2)

Testing Methodology: Reporting

Measurement Description

This is a measure to determine the number of syndromic surveillance public health registries connected with our EHR.

Measurement Justification

This measure will determine real world interoperability and usability, specifically many different public health syndromic surveillance registries are used by the provider through the EHR.

This measure will identify number and if possible, the names of syndromic surveillance public health registries which are integrated with the EHR.

Measurement Expected Outcome

Through working with our users and our EHR system and logs, we will determine how many different syndromic surveillance systems have been integrated and in use with our EHR.

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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #10. Number of different applications/3rd party systems using API capabilities

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 the EHR via the API. It will give us a numeric metric associated with the different API client applications working with our EHR.

Measurement Justification

This measure will determine how many 3rd party systems or applications are integrated with or using the EHR's API interface. This will give a specific number of API applications which the user has registered for and approved access with their system. This will reveal the level of interoperability or interest in this feature at this time.

Measurement Expected Outcome

Through working with our users and our EHR system and logs, we will determine how many different API applications have been registered and authorized to use our API functionality.

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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability status of this criteria.

RWT Measure #11.   Do you often get errors in received C-CDAs and does the EHR detect them and notify you of them?

Associated Criteria: 315(b)(1)

Testing Methodology: Survey/Self-Test

Measurement Description
This is a survey measure to determine use and value of C-CDA error detection.

Measurement Justification
This measure will survey users to determine real world interoperability and usability, specifically how often C-CDAs received from 3rd parties contains errors as detected by the EHR.

A survey or self-testing 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 observing and utilizing the C-CDA error detection capabilities of their certified EHR which can help reduce data errors.

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

- Regularly
- Sporadically
- 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.

Care Settings and Number of Clients Site to Test
We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #12. How often do you incorporate/update medication list, problem list, allergy list from received C-CDAs?

Associated Criteria: 315(b)(2)

Testing Methodology: Survey/Self-Test

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 or self-testing 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 updated their patient's record with current or new information from another source.

Measurement Expected Outcome

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

- Regularly
- Sporadically
- 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #13.   Do you use eRx capabilities for controlled substances?

Associated Criteria: 315(b)(3)

Testing Methodology: Survey/Self-Test

Measurement Description

This is a survey measure to determine how often you are electronically prescribing controlled medications from the EHR.

Measurement Justification

This measure will survey users to determine real world interoperability and usability, specifically how often provider electronically prescribed controlled substance medications from their EHR.

A survey or self-testing can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. Controlled substances are not an explicit requirement of ONC certification, but the electronic prescribing features should support controlled substances if the provider and support health IT system have the other capabilities enabled for electronic prescribing of controlled substances.

Measurement Expected Outcome

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

- Regularly
- Sporadically
- Rarely
- Never
- Not allowed/eligible to electronic prescribe controlled substances
- 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.

RWT Measure #14.   Do you use the patient medication history query functionality of your EHR?

Associated Criteria: 315(b)(3)

Testing Methodology: Survey/Self-Test

Measurement Description
This is a survey measure to determine how often you are using the patient medication history query feature.

Measurement Justification
This measure will survey users to determine real world interoperability and usability, specifically how often providers query the patient's medication prescription history from the pharmacy or pharmacy benefit manager (PBM).

A survey or self-testing can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. Medication patient history can be useful in providing quality patient care and care coordination.

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

- Regularly
- Sporadically
- 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.

Care Settings and Number of Clients Site to Test
We designed this measure to test the general ambulatory care setting that we support and target. We will survey test a minimum of three (3) client practice(s) across different geographic locations to evaluate the interoperability of this measure.