iPatientCare
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iPatientCare 18.0

Real World Test Results

Last updated: January 25, 2023

Contents

CY 2022 Real World Testing Result for iPatientCare

Executive Summary

This is the real world test results for CY 2022 for iPatientCare 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 have used to evaluate our product interoperability within production settings. Within each use case, we have documented our testing methodology for the measure/metric we have employed.

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 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 Result 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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01/25/2023

General Information

Plan Report ID Number: iPatientCare-RWT-2022

Developer Name: Assurecare, LLC

Product Name(s): iPatientCare

Version Numbers(s): 18.0

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

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

- 15.04.04.2627.iPat.18.00.1.171201
- https://chpl.healthit.gov/#/listing/8970

Developer Real World Testing Page URL: https://ipatientcare.com/onc-acb-certified-2015-edition/

Changes to the Original Plan

Summary of Change	Reason	Impact
RWT Measure #8 Number of Patient Batch Exports Run: This measure was changed to No. of CCDAs created via the batch export functionality.	Our Client practices utilize the batch export functionality to create and send the batches of visit notes created and signed throughout the day to the HIEs they are associated with. Since the batches are created for visits notes signed in 5-minute intervals, we modified the measure from no. of exports initiated to no. of CCDAs exported to make it more meaningful.	It gives clearer picture on the success ratio of the CCDAs generated through batch export.

Timeline and Milestones for Real World Testing CY 2022

- 1Q-2022: Began communication with clients to ask for their support and participation in real world testing.
- 2Q-4Q 2022. During the 2nd ,3rd and 4th quarter of CY 2022, the real-world testing with clients and/or their systems was scheduled and performed.
- 4Q-2022. The CY 2023 real world test plan was completed according to ONC and ONC-ACB requirements and expectations.

Standards Version Advancement Process (SVAP) Updates

For CY 2022, we have made version updates on approved standards through the SVAP process for (c)(3) Clinical Quality Measures Reporting. We have also implemented USCDI v1 in our C-CDAs and API support during CY 2022.

Standard (and version)	CMS Implementation Guide for Quality Reporting Document Architecture: Category III; Eligible Clinicians and Eligible Professionals Programs; Implementation Guide for 2022 (Dec 2021)
Updated certification criteria and associated product	170.315(c)(3) - Clinical quality measures (CQMs) — report
Health IT Module CHPL ID	15.04.04.2627.iPat.18.00.1.171201
Conformance measure	We validated the QRDA Cat III against the Cypress QRDA Validator Tool

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
- Outcomes of the 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 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.

1. Testing Methodologies

For each measurement, a testing methodology is used. For our test plan, we used 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.

2. Number of Clients Sites

Within each measure, we have noted the number of client sites we have used for this measure evaluation.

3. 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), 315(h)(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. We utilize 3rd party HISP Updox Direct 2016 (Version 2016.0) for Direct messaging.

This measure is calculated as follows:

Denominator: No. of transition of care events initiated.

Numerator: No. of transition of care where the C-CDA was transmitted through Direct Edge Protocol.

The interval for this measure is three (3) months.

Measurement Justification

This measure provides 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we have collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	Denominator	Numerator	Percentage
Practice 1	7/1/2022-9/30/2022	670	66	9.85
Practice 2	4/1/2022-6/30/2022	98	7	7.14
Practice 3	10/1/2022-12/31/2022	647	27	4.17

The results 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 demonstrates 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.

Challenges Encountered

From the data collected, we inferred that our providers are not using the direct messaging feature extensively. After discussing with them, we came to know that they do not have the direct address of providers they refer their patients to, hence the adoption is low.

RWT Measure #2. Number of C-CDAs Received and/or Incorporated

Associated Criteria: 315(b)(2), 315(h)(1)

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. We utilize 3rd party HISP Updox Direct 2016 (Version 2016.0) for Direct messaging.

This measure is calculated as follows:

Denominator: No. of C-CDAs received through the Direct Edge Protocol.

Numerator: No. of C-CDAs received where Allergy, Medication and Problem reconciliation was performed.

The interval for this measure is three (3) months.

Measurement Justification

This measure provides a numeric value to indicate both 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	Denominator	Numerator	Percentage
Practice 1	7/1/2022-9/30/2022	232	59	25.43
Practice 2	1/1/2022-3/31/2022	39	26	66.66

Practice 3	10/1/2022-12/31/2022	53	33	61.11

The results show that the EHR can receive a C-CDA patient summary record. In 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, 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.

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.

Challenges Encountered

From the data collected, we inferred that the providers are not using this feature extensively. Upon investigation, we learnt that that they do not receive referrals via direct messaging.

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.

This measure is calculated as follows:

Denominator: No. of prescriptions written (including controlled substances).

Numerator: No. of prescriptions transmitted electronically.

The interval for this measure is 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 NewRx SCRIPT electronic prescription message and transmit it to a pharmacy, typically via the Surescripts Network.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	Denominator	Numerator	Percentage
Practice 1	01/01/2022-03/31/2022	18442	13746	74.54
Practice 2	01/01/2022-03/31/2022	10730	9889	92.16
Practice 3	01/01/2022-03/31/2022	8907	8584	96.37

The results 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.

Challenges Encountered

No challenges were encountered for this measure.

RWT Measure #4. Number of Quality Measures Successfully Reported on to CMS

Associated Criteria: 315(c)(1)-(c)(4)

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 is twelve (12) months.

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)(4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all four.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

Following eCQMs have been submitted for CY2022 to CMS from the 3 client practices:

eCQM	Practice 1	Practice 2	Practice 3
CMS 139 Fall Screening	Y	Y	Y
CMS 68 Current Medications Documented	Y	Y	Y
CMS 69 BMI Screening	Y		Y
CMS 122 HgbA1c poor control	Y	Y	Y
CMS 134 Diabetes Urine Protein	Y	Y	Y
CMS 165 Controlling Hypertension	Y	Y	Y
CMS 127 Pneumovax	Y		

CMS 125 Breast Cancer screening		Y	
CMS 147 Flu vaccine		Y	
CMS 2 Depression Screening			Y

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.

Challenges Encountered

No challenges encountered for this measure.

RWT Measure #5. 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.

This measure is calculated as follows:

Denominator: No. of active patients i.e. patients with at least 1 office visit in the past 12 months.

Numerator: No. of active patients provided access to patient portal.

We have captured this number at the end of CY 2022.

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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	Denominator	Numerator	Percentage
Practice 1	01/01/2022-12/31/2022	6954	6524	93.81
Practice 2	01/01/2022-12/31/2022	3569	3549	99.43
Practice 3	01/01/2022-12/31/2022	1644	1595	97.01

The results 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.

Challenges Encountered

No challenges encountered for this measure.

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.

This measure is calculated as follows:

Denominator: No. of active patients provided access to patient portal.

Numerator: No. of patients who logged in the patient portal or opted out.

We have captured this number at the end of CY 2022.

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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we have collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	Denominator	Numerator	Percentage
Practice 1	01/01/2022-12/31/2022	6524	2620	40.15
Practice 2	01/01/2022-12/31/2022	3549	422	11.89
Practice 3	01/01/2022-12/31/2022	1595	798	50.03

The results 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.

Challenges Encountered

No challenges encountered for this measure.

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.

The interval for this measure is 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 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	No. of immunization messages sent to the immunization registry
Practice 1	01/01/2022-3/31/2022	5053
Practice 2	01/01/2022-3/31/2022	1318
Practice 3	01/01/2022-3/31/2022	194

The results 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 demonstrates

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.

Challenges Encountered

No challenges encountered for this measure.

RWT Measure #8. Number of Patient Batch Exports Run

Associated Criteria: 315(b)(6)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is modified from the original Plan from "tracking and counting how many batch exports of C-CDAs were successfully performed" to "tracking and counting how many CCDAs were created using the batch export functionality" by the EHR Module over the course of a given interval.

The interval for this measure is three 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	No. of CCDAs created though batch export	No. of CCDAs successfully exported	No. of CCDAs where export failed	Success Ratio
Practice 1	01/01/2022 – 03/31/2022	4692	4692	0	100%
Practice 2	10/01/2022 – 12/31/2022	4169	4169	0	100%
Practice 3	10/01/2022 – 12/31/2022	1699	1699	0	100%

The results 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.

Challenges Encountered

Our Client practices utilize the batch export functionality to create and send the batches of visit notes created and signed throughout the day to the HIEs they are associated with. Since the batches are created for visits notes signed in 5-minute intervals, we modified the measure from no. of exports initiated to no. of CCDAs exported to make it more meaningful.

RWT Measure #9. Number of Care Plan C-CDAs Successfully Created

Associated Criteria: 315(b)(9)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many Care Plan C-CDAs are created and successfully sent from the EHR Module to a 3rd party over the course of a given interval.

The interval for this measure is 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 Care Plan C-CDA document of a patient record, which represents a patient's and care team members' prioritized concerns, goals, and planned interventions.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we collected data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

We have used the audit logs to determine the measure count. The results observed is as under:

Client Site	Interval	No. of Care Plans Created	No. of Care Plans Exported
Practice 1	10/01/2022-12/31/2022	80	0
Practice 2	10/01/2022-12/31/2022	119	0
Practice 3	-	-	-

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

The results show that the EHR can create a C-CDA Care Plan document, including ability to record health status, outcomes, and interventions. 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.

Challenges Encountered

Only 2 of our practices use Care Plan, hence could not get data from 3 client sites. Also, they do not export the care plan and share it with the external care team members of the patient.

RWT Measure #10. 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.

The interval for this measure is 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 an 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.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we planned collect data from a minimum of three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

None of our clients report data to syndromic surveillance registries electronically, hence data for this measure could not be collected.

Challenges Encountered

All our customers claim exclusion for this MIPS Performance Improvement Measure as they do not serve the patient population that qualify for syndromic Surveillance reporting.

RWT Measure #11. Number of Electronic Reportable Lab Messages Successfully Sent

Associated Criteria: 315(f)(3)

Testing Methodology: Reporting/Logging

Measurement Description

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

The interval for this measure is 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 an electronic reportable lab message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with a public health registry.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we planned collect data from a minimum of three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

None of our clients report reportable labs data to public health registries electronically, hence data for this measure could not be collected.

Challenges Encountered

All our customers claim exclusion for this MIPS Performance Improvement Measure as they do not serve the patient population that qualify for electronic reportable lab reporting.

RWT Measure #12. Number of Cancer Case Messages Successfully Sent

Associated Criteria: 315(f)(4)

Testing Methodology: Reporting/Logging

Measurement Description

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

The interval for this measure is 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 cancer case message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with a public health registry.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we planned collect data from a minimum of three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

None of our clients report data to cancer registries electronically, hence data for this measure could not be collected.

Challenges Encountered

All our customers claim exclusion for this MIPS Performance Improvement Measure as they do not serve the patient population that qualify for cancer case reporting.

RWT Measure #13. Number of API Queries Made with Data Element Results Successfully Returned

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

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many successful API queries of patient data elements from the EHR Module to a 3rd party via API over the course of a given interval.

The interval for this measure is 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 a 3rd party can query the clinical resources of the patient health record via the API interface and thus demonstrate API interoperability.

Care Settings and Number of Clients Site to Test

We designed this measure to test the small practice, ambulatory care settings that we support and target. For reporting purpose, we planned data from three (3) client practices after their consent. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Measurement Outcome

None of our clients use any 3rd party application that connects to our EHR using the public APIs, hence data for this measure could not be collected.

Challenges Encountered

We have published our APIs as well as implemented them in production for all our customers as per the ONC requirements, however, we don't' have any applications that access data from our api. We have not been contacted by any 3d Party App developer requesting to connect to our APIs,