

CY 2025 Real World Testing Plan for SRS EHR

Executive Summary

This is the real-world test plan for CY 2025 for SRS EHR certified EHR (Electronic Health Record) solution, and we will be testing on our most current certified version which has been CURES-certified as of Dec 02, 2022. 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 the 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 2025, and information about compliance with the Standards Version Advancement Process updates.

A table of contents with hyperlinks is provided later in the plan for 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 (RWT) 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 RWT requirements.

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General Information

Plan Report ID Number: SRSEHR_RWTPlan_2025

Developer Name: Nextech

Product Name(s): SRS EHR

Version Numbers(s): 12

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

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

- *SRS EHR Cures Update Version*
- SRS EHR Version 12
 - ONC-ACB Certification ID: 15.04.04.2051.SRSE.12.03.1.221202
 - <https://chpl.healthit.gov/#/listing/11040>

Developer Real World Testing Page URL: <https://www.nextech.com/compliance/onc-health-it/SRS EHR>

Relied-Upon Software

Health IT Module	Relied-Upon Software	Testing Measure	Associated Criteria
SRS EHR	Surescripts	RWT Measure #1 – Number of Transition of Care C-CDAs Successfully Sent	315(b)(1)

Timeline and Milestones for Real World Testing CY 2025

Our current proposed timeline for real-world testing is described below. As we will complete development work and rollout of our Cures criteria updates, we will review our RWT dates to adjust for these changes.

- Q1-2025: 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 Q1-2025.
- Q2-Q4 2025. Between the 2nd and 4th quarters of CY 2025, 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.
- Q4-2025. During the last quarter of the year, the CY 2025 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 2025, we are planning to make version updates on approved standards through the SVAP process. We plan on implementing USCDI v3 in our EHI export, C-CDAs and API support during CY 2025, but we have not finalized an exact date for rollout. This is in conjunction with the HTI-1 proposed rule which proposes to update the minimum required USCDI version from USCDI v1 to USCDI v3.

Standard (and version)	USCDI v3
Updated certification criteria and associated product	TBD
Health IT Module CHPL ID	TBD
Method used for standard update	TBD
Date of ONC-ACB notification	TBD
Date of customer notification (SVAP only)	TBD
Conformance measure	TBD
USCDI-updated certification criteria (and USCDI version)	B1, b2, b10, e1, g9, g10

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 evaluated, 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 automated 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 capability is not widely used in production by current users, compliance inspection can provide assurance criteria is working as previously certified.

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

SRS EHR targets general ambulatory practices of different sizes, and our measures were designed to collectively address this care setting.

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 three (3) consecutive months during the calendar year. This will ensure sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide 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 create a C-CDA patient summary record, including the ability to record all required 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real world 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 three (3) consecutive months during the calendar year. This will ensure sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide 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.

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 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real-world interoperability.

RWT Measure #3. Number of EHI Exports Completed

Associated Criteria: 315(b)(10)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many single patient and patient populating EHI exports are created and successfully exported from the EHR Module over the course of a given interval.

The interval for this measure will be for a minimum of three (3) consecutive months during the calendar year. This will ensure sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide 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 generate an EXHI export, including ability to record all required clinical data elements. This measurement shows support for both single patient and full patient population exports, and will distinguish between the two types of exports.

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 generate EHI exports, including record required clinical data elements. 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 Sites to Test

We designed this measure to test a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real-world interoperability.

RWT Measure #4. 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 three (3) consecutive months during the calendar year. This will ensure 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real-world interoperability.

RWT Measure #5. 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 three (3) consecutive months during the calendar year. This will ensure sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide 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 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 the ability to record the required clinical data elements. In sending the immunization message, the EHR will demonstrate the 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient

percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real world interoperability.

RWT Measure #6. Number of Direct Messages Successfully Sent

Associated Criteria: 315(h)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many direct messages were successfully sent from the EHR Module to a 3rd party over the course of a given interval.

The interval for this measure will be for a minimum of three (3) consecutive months during the calendar year. This will ensure sufficient time to gauge and measure interoperability.

Measurement Justification

This measure will provide 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 create a direct message and demonstrates successful interoperability of an exchanged message with a 3rd party.

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 be authenticated with DirectTrust, create a direct message, and demonstrate interoperability of an exchanged message with a 3rd party. 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real world interoperability.

RWT Measure #7. 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 based on CMS submission window.

Measurement Justification

This measure will provide a count and list of electronic clinical quality measures (eQMs) 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 eCQM 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 include a count and list of eQMs 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 document any errors and investigate them as necessary.

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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real world interoperability.

RWT Measure #8. Number of API Client Applications Successfully Connected to our API Service

Associated Criteria: 315(g)(7)

Testing Methodology: Reporting/Logging

Measurement Description

This measure is tracking and counting how many successful 3rd party API client applications can access patient data elements via our API over the course of a given interval.

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

Measurement Justification

This measure is counting how many API applications can be registered, authenticated, and actively working with our EHR. The metric will provide 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 a 3rd party application can be registered and authenticated with our EHR and then can successfully query the clinical resources of the patient health record via the API interface and thus demonstrate API interoperability.

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 a 3rd party client can be authenticated, that the patient record can be properly identified and selected, and that the EHR can make patient data accessible via its API interface. Successfully completing this measure also implies the public API documentation is accurate and sufficient for 3rd parties to connect and use the API 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 a general ambulatory care setting that we support and target. We will test a minimum of three (3) customer practice sites. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs to demonstrate real world interoperability.