



# Real World Testing --- Result Report 2024

## Contents

GENERAL INFORMATION .....	3
CHANGES TO ORIGINAL PLAN .....	3
SUMMARY OF TESTING METHODS AND KEY FINDINGS .....	3
STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS(SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI).....	4
CARE SETTING(S) .....	6
METRICS AND OUTCOMES .....	7
ASSOCIATED CRITERION(A): §170.315 (B)(1) TRANSITIONS OF CARE .....	7
ASSOCIATED CRITERION(A): §170.315 (E)(1) VIEW, DOWNLOAD AND TRANSMIT TO 3RD PARTY.....	7
ASSOCIATED CRITERION(A): § 170.315(F)(1) TRANSMISSION TO IMMUNIZATION REGISTRIES .....	9
ASSOCIATED CRITERION (A): § 170.315(F)(2) TRANSMISSION TO PUBLIC HEALTH AGENCIES –SYNDROMIC SURVEILLANCE.....	9
ASSOCIATED CRITERION(A): §170.315(F)(7) TRANSMISSION TO PUBLIC HEALTH AGENCIES - HEALTH CARE SURVEYS.....	10
Challenges Encountered (if applicable).....	12
ASSOCIATED CRITERION(A): § 170.315(b)(3) ELECTRONIC PRESCRIBING .....	13
ASSOCIATED CRITERION(A): § 170.315(H)(1) DIRECT PROJECT.....	13
ASSOCIATED CRITERION(A): .....	14
§ 170.315 (G)(7) APPLICATION ACCESS - PATIENT SELECTION .....	14
§ 170.315 (G)(9) APPLICATION ACCESS - ALL DATA REQUEST .....	14
ASSOCIATED CRITERION(A): .....	15
§ 170.315 (G)(10) STANDARDIZED API FOR PATIENT AND POPULATION SERVICES .....	15
ASSOCIATED CRITERION(A): § 170.315(B)(2) CLINICAL INFORMATION RECONCILIATION AND INCORPORATION .....	15
KEY MILESTONES .....	17

## GENERAL INFORMATION

Report ID Number:	20231025doc
Developer Name:	DocToMe, Inc
Product Name(s):	ethizo EHR
Version Number(s):	2.0
Certified Health IT Product List (CHPL) Product Number:	15.05.05.3060.DOTM.01.00.1.200107
Developer Real World Testing Page URL	<a href="https://www.ethizo.com/real-world-testing/">https://www.ethizo.com/real-world-testing/</a>
Developer Real World Testing Results ReportPage URL [if different from above]:	

## CHANGES TO ORIGINAL PLAN

Summary of Change [Summarize each element that changed between the plan and actual execution of Real World Testing]	Reason [Describe the reason this change occurred]	Impact [Describe what impact this change had on the execution of your Real World Testing activities]
NA	NA	NA

## SUMMARY OF TESTING METHODS AND KEY FINDINGS

The 2024 Real World Testing of the Ethizo EHR was conducted across four diverse healthcare settings—Cardiology, Nephrology, Pediatrics, and Internal Medicine. These specialties were selected to comprehensively evaluate the certified functionality and validate the success of interoperability criteria across a variety of real-world clinical workflows.

To ensure comprehensive testing, certified criteria were made available to providers from the beginning of the year, allowing them to utilize the functionalities as needed within their daily operations. In addition to system availability, dedicated training sessions were conducted. This proactive approach aimed to support effective adoption and usage of the certified capabilities.

The testing process involved continuous monitoring through real-world testing logs and regular follow-ups with healthcare providers. These efforts helped track the frequency of function

utilization, identify any challenges encountered by users, and collect valuable feedback for further improvements.

**Key Findings:**

The testing results demonstrated a high level of interoperability success, with several certified criteria being widely adopted and seamlessly integrated into clinical workflows. However, varying levels of adoption were observed across different functionalities, with some criteria experiencing lower utilization. This was attributed to factors such as provider familiarity, workflow integration challenges, and the need to encourage broader adoption.

**Key observations from the testing include:**

**High Adoption Areas:** Core interoperability functions such as electronic data exchange, patient record sharing, and care coordination features were extensively used across all specialties, highlighting their effectiveness in real-world clinical practice.

**Areas Requiring Improvement:** Certain advanced functionalities, such as automated API access and Health agency surveillance, saw lower adoption rates, suggesting the need for enhanced user guidance and the need to encourage providers to utilize the functionalities.

**Challenges Identified:** Some providers reported initial difficulties in integrating new features into their established workflows, indicating a need for continuous education and hands-on support.

**Lessons Learned:**

Early engagement and training are critical to ensuring successful adoption of certified functionalities. Continuous monitoring and follow-ups with providers help identify gaps and address them proactively. Tailored support can significantly improve the usability of complex features.

**Non-Conformities and Resolutions:**

During the testing period, no significant non-conformities were identified that impacted the overall interoperability goals. Minor usability concerns, such as the need to enhance data visualization across different provider interfaces, were promptly addressed through targeted software updates and additional training initiatives.

In conclusion, the real-world testing results validate Ethizo EHR's compliance with interoperability requirements, demonstrating its ability to facilitate seamless data exchange across diverse care settings. Moving forward, the focus will remain on optimizing user engagement, enhancing training strategies, and refining system functionalities based on real-world insights.

**STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI)**

- ☒ Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.
- ☐ No, none of my products include these voluntary standards.

## USCDI STANDARDS UPDATES

Standard (and version)	USCDI v1
Updated certification criteria and associated product	b1,b2,e1,g9
Health IT Module CHPL ID	15.05.05.3060.DOTM.01.00.1.200107
Method used for standard update	Cures Update
Date of ONC-ACB notification	December 12, 2022
Date of customer notification (SVAP only)	N/A
Conformance measure	Measure 1 (Completeness of sharing) – b1,e1 Measure 3 (API access) – g9 Measure 4 (Completeness of response) – b2
USCDI-updated certification criteria (and USCDI version)	b1,b2,e1,g9 – USCDI v1

## Standards Updates

Standard (and version)	CMS Implementation Guide for Quality Reporting Document Architecture: Category I; Hospital Quality Reporting; Implementation Guide for 2020 CMS Implementation Guide for Quality Reporting Document Architecture: Category III; Eligible Clinicians and Eligible Professionals Programs; Implementation Guide for 2020
Updated certification criteria and associated product	C3
Health IT Module CHPL ID	15.05.05.3060.DOTM.01.00.1.200107
Conformance measure	Measure 2 (Clinical Quality) – c3

**CARE SETTING(S)**

The care setting which was tested are:

- Cardiology
- Nephrology
- Pediatric
- Internal Medicine

**METRICS AND OUTCOMES****ASSOCIATED CRITERION(A): §170.315 (B)(1) TRANSITIONS OF CARE**

**Measurement /Metric:** Measure 1: Completeness of sharing

**Relied Upon Software (if applicable):** HISP Direct (Health Information Service Provider) was utilized to facilitate the electronic exchange of CCDA (Consolidated Clinical Document Architecture) files, ensuring compliance with the certified criteria.

**Outcomes:** The real-world testing successfully demonstrated the product's compliance with the certification criteria by electronically exchanging 37 CCDA files via HISP Direct. The files were transmitted and received across multiple care settings, confirming the system's ability to support seamless interoperability. The participating healthcare providers were able to access and incorporate the shared Electronic Health Information (EHI) into their workflows without issues.

Testing was conducted across multiple sites over a defined period, with a 100% success rate in CCDA file exchanges. This indicates the reliability and effectiveness of the system in meeting the interoperability requirements. No transmission errors, data corruption, or accessibility issues were reported by users. The data collection periods covered various clinical scenarios to ensure comprehensive validation of the system's capabilities in real-world settings.

Overall, the testing results provide strong evidence that the product can consistently exchange health information as intended, supporting care coordination and enhancing provider workflows.

**Challenges Encountered (if applicable):** No significant challenges were encountered during the testing process. All transactions were completed successfully, and no corrective actions were required. However, ongoing monitoring and user feedback will be incorporated into future testing efforts to identify potential areas for further improvement and optimization.

**ASSOCIATED CRITERION(A): §170.315 (E)(1) VIEW, DOWNLOAD AND TRANSMIT TO 3RD PARTY**

**Measurement /Metric:** Measure 1: Completeness of sharing

**Relied Upon Software (if applicable):** N/A

**Outcomes:** The real-world testing successfully demonstrated the product's compliance with the certification criterion §170.315(e)(1), ensuring that patients have the capability to securely view, download, and transmit their electronic health information (EHI) to third parties.

During the data collection period, a total of 2,715 patients accessed their patient portal accounts to perform one or more of the following actions: viewing their health data, downloading records for personal use, or transmitting information to an external party. This data reflects the product's ability to support patient engagement and interoperability

across various healthcare settings.

The testing involved multiple healthcare providers, covering a diverse patient demographic across different practice settings. Data collection spanned a defined period, capturing login frequency, usage trends, and user behavior. The observed success rate in portal interactions suggests that patients were able to access their health data effectively, reinforcing compliance with regulatory requirements.

No failures or issues were reported during data collection, indicating a smooth and reliable user experience. These results demonstrate that the system effectively facilitates patient access to their health information in a secure and user-friendly manner.

**Challenges Encountered (if applicable):** No significant challenges were encountered during testing. Patients were able to access and utilize portal functionalities without reported technical difficulties. However, continued monitoring will be conducted to assess ongoing user engagement and identify potential areas for enhancement in usability and accessibility.



**ASSOCIATED CRITERION(A): § 170.315(F)(1) TRANSMISSION TO IMMUNIZATION REGISTRIES**

**Measurement /Metric: Measure 1:** Completeness of sharing

**Relied Upon Software (if applicable):** N/A

**Outcomes:** The real-world testing successfully demonstrated compliance with the certification criterion §170.315(f)(1) by verifying the system's ability to electronically transmit immunization data to Immunization Information Systems (IIS)/registries in various healthcare settings.

During the data collection period, a total of **17,889** immunization records were successfully transmitted to immunization registries across multiple healthcare facilities. The participating providers included pediatric, family medicine, and internal medicine practices, ensuring diverse clinical scenarios.

The data exchange was conducted securely and in accordance with HL7 standards, ensuring that transmitted information met interoperability requirements and regulatory guidelines. The system maintained a high success rate in transmitting data without any significant failures or data loss. Regular monitoring and logging confirmed that the transmitted immunization data were received and processed by the registries without issues.

The test results indicate that the product effectively supports immunization data exchange workflows in the intended care settings, with consistent system performance throughout the testing period. The collected data covered a period of six months, demonstrating the system's reliability and alignment with public health reporting requirements.

**Challenges Encountered (if applicable):** No significant challenges were encountered during the testing process. However, minor discrepancies were noted due to variations in registry-specific data format requirements. These issues were resolved by applying minor configuration adjustments to ensure compliance with state-specific IIS guidelines. Continuous engagement with public health agencies is recommended to further streamline and optimize data submission processes.

**ASSOCIATED CRITERION (A): § 170.315(F)(2) TRANSMISSION TO PUBLIC HEALTH AGENCIES – SYNDROMIC SURVEILLANCE**

**Measurement /Metric: Measure 1:** Completeness of sharing

**Relied Upon Software (if applicable):** N/A

**Outcomes:** The product successfully demonstrated compliance with the certification criterion §170.315(f)(2) through controlled testing of its ability to transmit syndromic surveillance data to public health agencies. During testing, the system was able to generate and transmit relevant syndromic data, adhering to the required formats and standards specified for public health reporting.

While the functionality was tested in a controlled environment and confirmed to be operational, there was no active usage of this feature in real-world settings during the testing period. The outcome reflects that, while the capability exists and operates successfully in a testing environment, no clients utilized this feature for data transmission to public health agencies during the reporting period. Given that no live transactions were performed, this result does not impact the product's overall compliance with the criterion. Future testing or adoption by clients may provide further insights into its effectiveness in live settings.

**Challenges Encountered (if applicable):** There were no significant challenges encountered during the testing phase. However, since the feature was not actively used by clients, this limited the ability to capture real-world performance data. This could indicate that more provider engagement or education might be necessary to encourage the use of syndromic surveillance data transmission in practice settings. Additionally, while the feature performed as expected in the test environment, it is recommended to continue working with clients to ensure their workflows and needs to align with the use of this functionality for public health reporting.

#### **ASSOCIATED CRITERION(A): §170.315(F)(7) TRANSMISSION TO PUBLIC HEALTH AGENCIES - HEALTH CARE SURVEYS**

**Measurement /Metric: Measure 1:** Completeness of sharing

**Relied Upon Software (if applicable):** NA

**Outcomes:** The product successfully demonstrated its ability to transmit health care survey data to public health agencies, in accordance with the requirements of §170.315(f)(7), during controlled testing. The feature was fully tested in the test environment, and the system was able to generate and transmit the necessary data for health care surveys to the designated public health entities. Despite successful testing, no clients utilized this functionality for actual data transmission during the testing period. The total number of transmissions to public health agencies for healthcare surveys was recorded as zero. This indicates that while the product's capability to meet the certification criterion is operational, there was no real-world use of this feature by clients in the tested period. This outcome does not suggest any failure of the system but highlights the need for further adoption and engagement with the feature by end-users to realize its full potential in practice.

**Challenges Encountered (if applicable):** No significant challenges were encountered during the testing of this functionality. However, the lack of real-world usage data points to a potential need for greater user adoption. It's possible that clients did not engage with this feature due to a lack of familiarity, workflow integration, or awareness of the health care survey requirements.

Moving forward, additional training or promotional efforts could be necessary to encourage the use of this functionality, particularly for users who may be unfamiliar with its importance or operational processes. Additionally, ongoing support and communication with providers may improve the feature's practical adoption.

and usage in future testing periods.

**Associated Criterion(a):**

**§170.315 (C)(1) – Clinical Quality Measures (CQMs) – Record and Export**

**§170.315 (C)(2) – Clinical Quality Measures (CQMs) – Import and Calculate**

**§170.315 (C)(3) – Clinical Quality Measures (CQMs) – Report**

**Measurement/Metric: Measure 2: Clinical Quality**

**Relied Upon Software (if applicable): N/A**

**Outcomes:** The real-world testing of the Clinical Quality Measures (CQMs) functionality successfully demonstrated compliance with the certification criteria for recording, exporting, importing, calculating, and reporting CQMs. The following is a summary of the data reported for each CQM tested:

CQM Measures	Initial Population	Denominator	Numerator	Performance Rate
CMS 2 - Preventive Care and Screening: Screening for Depression and Follow-Up Plan	33,495	33,495	25,759	72%
CMS 69 - Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	29,046	29,046	20,427	77%
CMS 117 - Childhood Immunization Status	399	399	34	13%
CMS 122 - Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	5,304	5,304	1,443	27%
CMS 124 - Cervical Cancer Screening	15,266	15,266	7,838	51%
CMS 125 - Breast Cancer Screening	5,860	5,860	2,900	54%
CMS 130 - Colorectal Cancer Screening	12,268	12,268	4,316	31%
CMS 138 - Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	29,055	29,055	20,219	74%

CMS 155 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	9,088	9,088	8,180	92%
CMS 159 - Depression Remission at Twelve Months	1,360	1,360	660	56%
CMS 164 - Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	139	139	68	55%
CMS 165 - Controlling High Blood Pressure	10,298	10,298	5,824	58%
CMS 347 - Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	6,257	6,257	4,017	68%
CMS 349 - HIV Screening	27,771	27,771	18,434	61%
CMS 68	12,358	12,358	11,137	90%

These results demonstrate that the product supports the full CQM functionality, including recording and calculating metrics, as well as successfully generating performance rates for a variety of preventive and chronic care measures

### Challenges Encountered (if applicable)

While the product supports a broad range of Clinical Quality Measures (CQMs), it was observed that nearly all clients utilized MIPS CQM measures for reporting MIPS Quality data. In contrast, eCQM measures were less widely adopted. Specifically, only two clients used this functionality. This suggests that while the product is capable of handling both MIPS CQM and eCQM measures, there is a limited use of eCQM measures among clients. Further education or client support may be needed to increase the adoption of eCQM reporting functionality in practice settings.

**ASSOCIATED CRITERION(A): § 170.315(b)(3) ELECTRONIC PRESCRIBING**

Measurement /Metric: Measure 3: Communication

**Relied Upon Software (if applicable):** DrFirst v4

**Outcomes:** The testing outcomes successfully demonstrate compliance with the certification criteria for electronic prescribing. Below is a summary of the data collected:

- Number of electronic prescriptions transmitted: 176,121
- Number of prescriptions cancelled: 109

These results reflect the product's capacity to transmit electronic prescriptions and manage prescription cancellations, fulfilling the requirements for electronic prescribing as outlined in the certification criteria. The data collected from real-world usage of the product supports its ability to exchange electronic health information (EHI) in clinical settings, enabling the efficient transmission of prescriptions and proper management of cancellations.

**Challenges Encountered (if applicable):** There were no challenges encountered during testing. The electronic prescribing functionality worked as expected, with no significant issues affecting the transmission or cancellation of prescriptions.

**ASSOCIATED CRITERION(A): § 170.315(H)(1) DIRECT PROJECT**

Measurement /Metric: Measure 3: Communication

**Relied Upon Software (if applicable):** HISP Direct

**Outcomes:** The outcomes demonstrate compliance with the certification criteria for sending and receiving health information through the Direct Project. The data collected indicates:

- **Total count of transactions for sending and receiving health information: 88**

This data highlights the system's functionality in enabling secure exchange of electronic health information (EHI) between different healthcare entities, as required by the certification criteria. These transactions demonstrate the product's ability to engage in Direct Project communication in real-world healthcare settings, ensuring the exchange of EHI in a secure and reliable manner.

**Challenges Encountered (if applicable):** No challenges were encountered during the testing process. The Direct Project functionality worked as expected, with all transactions executed successfully without any issues or delays.

**ASSOCIATED CRITERION(A):****§ 170.315 (G)(7) APPLICATION ACCESS - PATIENT SELECTION****§ 170.315 (G)(9) APPLICATION ACCESS - ALL DATA REQUEST****Measurement /Metric: Measure 4: API access****Relied Upon Software (if applicable): N/A**

**Outcomes:** The testing conducted to evaluate the API functionality in compliance with the specified criteria produced the following results:

- **Active API Interfaces: 0**

While the API functionality was fully tested in a production system using test patient data, no active interfaces were utilized during real-world usage. This testing was applied across all targeted practice settings, and the results were consistent for all sites. The method used to confirm that the certified functionality was working involved testing with created test patients, ensuring that the API features operated as required for end users. Despite the functionality being available, it was not commonly used by clients in real-world scenarios, as indicated by the lack of active API interfaces.

**Challenges Encountered (if applicable):** No challenges were encountered during the testing process. The API functionality worked as expected during the test, and no issues were identified in the production system.

**ASSOCIATED CRITERION(A):****§ 170.315 (G)(10) STANDARDIZED API FOR PATIENT AND POPULATION SERVICES**

**Measurement /Metric: Measure 4: API access**

**Relied Upon Software (if applicable):** N/A

**Outcomes:** Real-world testing confirmed the successful functionality of the standardized API in compliance with ONC certification requirements. During the testing period, the API processed a total of **3,010 requests**, with **54 failed requests**, reflecting a high success rate of data exchange and interoperability. Testing was conducted in a production environment, where the system's ability to support electronic health information (EHI) exchange was validated through simulated patient data. The API's performance demonstrated that it could reliably handle request volumes and maintain compliance with interoperability standards.

**Challenges Encountered (if applicable):** No challenges were encountered during testing. The system operated as expected, and all test cases were completed successfully without any deviations from the original testing plan.

**ASSOCIATED CRITERION(A): § 170.315(B)(2) CLINICAL INFORMATION RECONCILIATION AND INCORPORATION**

**Measurement /Metric: Measure 5: Completeness of response**

**Relied Upon Software (if applicable):** N/A

**Outcomes:** In real-world testing, a total of 13,854 instances of successful reconciliation of problems, medications, and medication allergies were recorded. This demonstrated the ability of the system to reconcile clinical information effectively, meeting the criteria for the certification requirement. The reconciliation process was tested across a range of patient scenarios, verifying that the data was successfully incorporated into the clinical record as required.

- **Denominator:** The total number of reconciliations performed during testing was used to assess the success rate.
- **Success Rate:** The reconciliation process was successfully completed in 13,854 cases, which supports compliance with the certification criteria.

The testing results confirm that the system is capable of ensuring the completeness and accuracy of clinical information reconciliation within practice settings.

**Challenges Encountered (if applicable):** There were no challenges encountered during the testing

process. The system performed as expected, and the reconciliation process was successfully executed without issues.



**KEY MILESTONES**

Key Milestone	Care Setting	Date/ Timeframe	Status
Documentation for the Real World Testing was released and submitted to SLI Compliance.	Cardiology, Nephrology, Pediatric and Internal Medicine	October 15, 2023	MET
Started collecting information as laid out by the plan.	Cardiology, Nephrology, Pediatric and Internal Medicine	January 1, 2024	MET
On boarded selected providers/organizations to facilitate the Real World Testing plan.	Cardiology, Nephrology, Pediatric and Internal Medicine	2 <sup>nd</sup> Quarter 2024	MET
Followed up with providers and authorized representatives to understand any issues that arose with the use of functionality.	Cardiology, Nephrology, Pediatric and Internal Medicine	2 <sup>nd</sup> Quarter, 2024	MET
Data collection and reviews were conducted.	Cardiology, Nephrology, Pediatric and Internal Medicine	3 <sup>rd</sup> Quarter, 2024	MET
End of Real World Testing period/final collection of all data for analysis has concluded.	Cardiology, Nephrology, Pediatric and Internal Medicine	January 1, 2025	MET
Analysis and report creation were concluded.	Cardiology, Nephrology, Pediatric and Internal Medicine	January 2025	MET
Submitted Real World Testing report	Cardiology, Nephrology, Pediatric and Internal Medicine	January 2025	MET

**ATTESTATION**

This Real World Testing results report is complete with all required elements, including measures that address all certification criteria and care settings. All information in this results report is up to date and fully addresses the health IT developer's Real WorldTesting requirements.

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A handwritten signature in black ink that reads "ZACKT".

Date: January 23<sup>rd</sup>, 2025