NextGen® Office Real World Test Plan 2022

General Information

Topic	Detail
Plan Report ID Number:	
Developer Name:	NextGen® Healthcare
Product Name(s):	NextGen® Office
Version Number(s):	Version 5.0
Certified Health IT Product List (CHPL) ID(s):	15.04.04.2054.Medi.05.00.1.180220 Active
Developer Real World Testing Page URL:	https://www.nextgen.com/certifications

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Topic	Detail
Approach Summary	• This plan will cover NextGen Office's approach to real world testing for our ambulatory care client base. • Data will be gathered primarily in an automated fashion using production database queries and logs. Where that is not possible, we will engage clients to gather the data in a direct approach. • This analysis will quantify usage of certified workflows over time, as well as demonstrate conformance to standards. No confidential or protected health information will be exposed through this process. • Success will be defined by our ability to highlight how each of these criterion is being used by providers in real patient care. Some criterion, for example (b)(3) ePrescribing, are going to have a much higher volume of use than (g)(7-9) API due purely to the nature of the criterion and its use for daily patient care.
Types of Settings	• NextGen Office supports specialties in ambulatory care. All specialties have access to the single web based instance of the NextGen Office technology that allows for clinical documentation, reporting, and electronic interactions with third parties.
Usage Quantification	• The transactional history in the NextGen Office database is the source data. The data can be queried for events indicative of specific certified workflows that occurred over a time between 2 weeks and 3 months depending on the measure and usage. The results will be quantified and summarized.
Demonstrate Conformance	• **Explicit validation**: C-CDA files will be validated against an internally hosted validation tool. Errors will be quantified and reported. • **Implicit validation**: Standards such as NCPDP (2017 eRx) have XML schema definitions that must be adhered to. A successful transmission and response from Sure Scripts will be an implied conformance. The QRDA files will also be implied as conformant due to the volume of export and successful submissions to Quality Payment Program during the attestation period of 2022. • **Error rates**: Failures in C-CDA validation and other electronic transmission workflows will be quantified and reported accordingly.

Standard Updates

Topic	Detail
Standard (and version)	Not Applicable
Updated certification criteria and associated product	Not Applicable
Health IT Module CHPL ID	Not Applicable
Method used for standard update	Not Applicable
Date of ONC ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	Not Applicable
USCDI updated certification criteria (and USCDI version)	Not Applicable

Justification and Description of Measurement/Metric for Associated Certification Criteria

ID	Measurement/Metric	Description and Justification	Certification Criteria
1a	(Count of Direct Messages **SENT** with C-CDA Attached) / (Count of Consults Orders Created)	A requirement of 170.315(b)(1) is the **sending** of Transitions of Care. In the EHR these will always be triggered from a Consult order for the sending of C-CDAs. Counting the number of Consult Orders created compared to the count of Direct Messages 170.315(h)(1) sent with C-CDAs attached will prove that this functionality is being used in production.	• 170.315(b)(1) - Transitions of Care • 170.315(h)(1) - Direct Message
1b	(Count of errors in **SENT** C-CDAs attached to direct messages from the ett.healthit.gov 2015 Edition Cures Update C-CDA R2.1 Validator tool) / (Number of C-CDAs validated)	A random sampling of the C-CDAs **sent ,**170.315(b)(1), will be performed for the practices identified in **ID.1a** and validated against the ett.healthit.gov tool to evaluate compliance with the C-CDA R2.1 standards. Validating random C-CDAs sent will prove we are compliant with C-CDA R2.1 standards.	• 170.315(b)(1) - Transitions of Care
2a	(Count of outside C-CDAs saved to a patient chart) / (Count of Direct Messages **RECEIVED** with C-CDA files attached)	A requirement of 170.315(b)(1) is the **receiving** of Transitions of Care. Received C-CDAs will come from Direct Messages 170.315(h)(1) with C-CDAs attached. Counting of direct messages received with C-CDAs attached will prove that this functionality is being used in production. 170.315(b)(2) takes the received C-CDA file and attaches it to the appropriate chart. Comparing these counts will validate the number of successful patient matches.	• 170.315(b)(1) - Transitions of Care • 170.315(h)(1) - Direct Message • 170.315(b)(2) - Clinical Information Reconciliation

2b	(Count of Imported C-CDAs)	A requirement of 170.315(b)(2) is the outside C-CDA can be imported and incorporated to the patient's chart. Counting the imported C-CDAs will confirm the interoperability standard is compliant.	• 170.315(b)(2) - Clinical Information Reconciliation
3a	Count of all Direct Messages **SENT** by Status	Counting the number of direct messages **sent** by status will prove the number of successful messages and compliance with the standards.	• 170.315(h)(1) - Direct Message
4a	Count of Scheduled C-CDAs	Counting of the scheduled C-CDAs will prove compliance with certification requirements.	• 170.315 (b)(6) - Data Export
4b	Count of Created C-CDA Data Files	Counting of the created C-CDAs zip files will prove compliance with certification requirements.	• 170.315 (b)(6) - Data Export
4c	(Count of errors in C-CDAs attached to direct messages from the ett.healthit.gov C-CDA R2.1 Validator tool) / (Number of C-CDAs validated)	A random sampling of the C-CDAs in the zip file from 4b will be performed across all practices and validated against the ett.healthit.gov tool to evaluate compliance with the C-CDA R2.1 standards. Validating random C-CDAs from the Data Export will prove we are compliant with C-CDA R2.1 standards with this export method.	• 170.315 (b)(6) - Data Export
5a	Count of QRDA I Exports	Counting the number of exports will prove the feature is working in production.	• 170.315 (c)(1) - Clinical Quality Measures - Record and Export

6b	(Count of errors in C-CDAs attached to direct messages from the ett.healthit.gov C-CDA R2.1 Validator tool) / (Number of C-CDAs validated)	A random sampling of the C-CDAs exported from the patient portal (6a) will be performed across all practices and validated against the ett.healthit.gov tool to evaluate compliance with the C-CDA R2.1 standards. Validating random C-CDAs will prove we are compliant with C-CDA R2.1 standards from the patient portal.	• 170.315 (e)(1) - View, Download, and Transmit to 3rd Party
7a	Count of QRDA I Imports	Counting the number of imports will confirm the feature is working in production.	• 170.315 (c)(2) - Clinical Quality Measures - Import and Calculate
8a	Count of QRDA III Exports	Counting the number of exports will confirm the feature is working in production.	• 170.315 (c)(3) - Clinical Quality Measures - Report
8b	Count Successful QRDA III Uploads to QPP	A random selection of clients will occur and contacted to validate the QRDA file was accepted by QPP. The ultimate success is knowing clients that have attested with no issues.	• 170.315 (c)(3) - Clinical Quality Measures - Report

9a	Count of eRx Message Type by Delivery Status/Response	Message types of NewRx, RxChangeRequest, RxChangeResponse, RxFill, CancelRx, CancelRxResponse, RxRenewalRequest, RxRenewalResponse will be counted. The status messages come from our eRx partner NewCrop via Surescripts thus validating successful delivery or import of applicable each message type. Counting the message types by delivery status or response will calculate the success rates and prove the functionality is compliant.	• 170.315(b)(3) - Electronic Prescribing
9b	Count Rx History Request and Response transactions	The message types of RxHistoryRequest, RxHistoryResponse will be counted. RxHistoryReponse is returned by our partner Surescripts. Counting these transactions will calculate the success rate and prove the functionality is compliant.	• 170.315(b)(3) - Electronic Prescribing
10a	Count of Immunization messages sent to registries by response status	Counting immunization messages sent to registries by response status will validate our messages are successfully sent and compliant.	• 170.315 (f)(1) - Transmission to Immunization Registries
10b	Count of immunization history requests / Count of patients with Imported immunization records	Counting number of immunization history requests sent comparative to the number of imports will demonstrate compliance.	• 170.315 (f)(1) - Transmission to Immunization Registries

11a	Count of API audit log activity	FHIR API standards were implemented to comply with g7-g9 functionality. Counting audit activities will validate the token exchange occurred (g7) and quantify the types of transactions performed. Audit log includes category requests (g8) and CCD requests (g9). This method will demonstrate compliance and adoption in production.	• 170.315 (g)(7) - Application Access - Patient Selection • 170.315(g)(8) - Application Access - Data Category Request • 170.315(g)(9) - Application Access – All Data Request

Care Setting

Care Setting	Justification
Ambulatory	NextGen Office supports specialties in ambulatory care. All specialties have access to the single web based instance of the NextGen Office technology that allows for clinical documentation, reporting, and electronic interactions with third parties.

Key Milestones

Key Milestones	Care Setting	Date/Timeframe
Finalize Real World Test Plan and Submit to the ONC- ACB (Drummond)	N/A	Q4 2021
Identify Clients for Participations where applicable	N/A	Q4 2021
The queries that will be used are developed and validated with internal data, Client Systems and/or Transaction	Ambulatory Setting	Q1-Q2 2022
Data collection and or observation from client systems	Ambulatory Setting	Q2-Q3 2022
Validation and analysis of data and metrics created	Ambulatory Setting	Q3 2022
Report created and submitted to ONC-ACB (Drummond)	Ambulatory Setting	Q1 2023

ATTESTATION

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

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