Developer Name: Community Computer Service, Inc.

Product Name: MEDENT

Version Number(s): v23.5, v23.7

Certified Health IT Product List (CHPL) ID(s):

v23.5 – 15.04.04.1840.MEDE.23.01.1.210413

v23.7 – 15.04.04.1840.MEDE.23.02.1.230918

Developer Real World Testing Page URL: https://www.medent.com/onc/

Justification for Real World Testing Approach

- Our Real World testing approach will use a combination of reports, surveillance of customer data, and screenshots. We will be able to gauge how and if clients are using the certified functionality. We will determine if programming adjustments are needed to help clients succeed or if a programming error has been introduced that needs to be fixed to maintain certification.

Standards Updates

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
Health IT Module CHPL ID	N/A
Method used for standard update	N/A
Date of ONC ACB notification	N/A
Date of customer notification (SVAP only)	N/A
N/A	N/A
USCDI updated certification criteria (and USCDI version)	N/A

Key Milestones

- Submission of Real World Testing Plan to ONC-ACB — November 2023
- Data collection and analysis — Quarterly throughout 2024
- Final review of collected data — January 2025
- Submission of Real World Testing Results to ONC-ACB — February 2025

Care Settings

- Ambulatory – MEDENT is an EMR system designed for use in ambulatory settings. All criteria are programmed and certified for ambulatory practices. For each measure we will test a minimum of 3 client sites.

Care Coordination

§ 170.315(b)(1) Transitions of care

Testing Methodologies

- MEDENT will review the Surescripts Medent_MessageAuditReport at regularly scheduled intervals.
- MEDENT will run the MIPS Sending Health Information report at regularly scheduled intervals.

Expected Outcome

- Reporting to show C-CDA documents to and from MEDENT, using our HISP to support successful transmission and support for Direct Edge Protocols.

Justification

- Using the reporting mechanisms we have in place allows us to track how many C-CDAs are successfully sent from MEDENT to our HISP using Direct messaging, as well as how many C-CDAs are successfully received by MEDENT.
- We will be able to measure the volume of CCDs that a practice is sending out, and the frequency with which they are using Direct.

§ 170.315(b)(2) Clinical information reconciliation and incorporation

Testing Methodologies

- Run the MIPS 2022 Clinical Information Reconciliations report at regularly scheduled intervals.

Expected Outcome

- Using system reporting functions, demonstrate that client is receiving Transition of Care/Referral Summary documents and which patients had reconciliation performed. The number of Transition of Care/Referral Summary documents and subsequent data reconciliations should increase during the testing period.

Justification

- Using the reporting we have in place allows us to ensure practices are receiving summary of care documents without issue, and are able to successfully perform reconciliations. We will be able to measure the volume of summary of care documents that a practice is receiving, and the frequency with which they are successfully reconciling problems, medications, and allergies.

§ 170.315(b)(3) Electronic prescribing

Testing Methodologies

- **Spot Checking:** Every quarter, MEDENT will review client systems. We will review the Raw View of Transactions screen which contains every message to/from the client for transaction types except for RxHistoryRequest and RxHistoryResponse. If there is an error, "SendError" will be noted. The raw XML message shows what was sent and what was returned.
  For RxHistoryRequest/RxHistoryResponse, MEDENT will review the Surescripts Workbench and search for these message types sent by the client(s) and look for errors.
- **Surescripts Reporting:** When there are errors or misinformation in any of these messages, Surescripts will create a case with us to investigate the issue.
- **Client Reporting:** When there are errors or issues with any of these message types, MEDENT will display the error to the user. The client will then report this error to MEDENT.
- **MIPS Reporting:** Reviewing the MEDENT eRx report will help us identify if clients are able to successfully e-prescribe, or are sending via print or fax.

Expected Outcome

- MEDENT will verify that e-prescribing transactions are being handled appropriately and without error.
- If there is an issue with the programming, a request will be submitted to our programming department to fix the issue. Otherwise, a team member will take appropriate action to resolve the issue.
- MEDENT will track all reported errors and report their outcome.

Justification

- A combination of reporting and observation will allow us to measure the volume of medications that are e-prescribed, as well as our error rates.

§ 170.315(b)(6) Data export

Testing Methodologies

- Gather screen shots of report configuration options, report running options, report storage location options, send package configuration options, setup options for Data Export Configuration, and security privileges setup.
- Run the following reports to gather data: Patient Information Reports, Data Export Configuration, Create Send Package/HIE Export.
- Report the volume of data export packages that are created and sent by practices. This will include the number of successful exports vs. unsuccessful.

Expected Outcome

- Practices are able to successfully set up the data export without MEDENT intervention. We will observe that the appropriate options are available for the practice to export their desired data.

Justification

- Observing client systems will allow us to see the frequency with which practices are setting up the Data Export module and if they are able to successfully do so on their own, without MEDENT intervention.

§ 170.315(b)(9) Care plan

Testing Methodologies

- Observe the setup on client systems of the Care Plan C-CDA structured document.
- Run reports on client systems of any Care Plan C-CDA structured documents received and sent.

Expected Outcome

- Report the volume of structured Care Plan CDA documents created and received using the MEDENT software.
- Report the success rates of transmission.

Justification

- A combination of reporting and observation will allow us to measure the volume of Care Plan C-CDA structured documents that are received and sent, as well as review the practice setup and determine that all appropriate areas are set up to transmit successfully.

Clinical Quality Measures

§ 170.315(c)(1)—record and export

§ 170.315(c)(2)—import and calculate

§ 170.315(c)(3)—report

Testing Methodologies

- Run quarterly CQM reports on client systems for all providers for all CQMs for which MEDENT is certified.
- Use system reports and logs to show that QRDA I files are being created for transmission to the registry.
- Use system reports to show final measure calculations and export of QRDA III files for purposes of reporting to CMS.

Expected Outcome

- CQM reports will show all applicable measures contain patients in the denominator. Numerator, exceptions, and exclusions will be populated based on all available data in a client system.
- Successfully create and export files using the QRDA I standard for transmission to the QRDA I data registry the client is reporting to.
- Successful submission of QRDA III file(s) to CMS.

Justification

- Regular running and review of CQM Reports in the EMR based on client data will show that the reports align with documented processes for inclusion in certified CQMs and that the reports can display the expected report populations based on patient chart level data. We will also be able to report the number of times QRDA I and III files are generated.

Patient Engagement

§ 170.315(e)(1) View, download, and transmit to 3rd party

Testing Methodologies

- Run a document report at regular intervals to look for document code CCD-PORTAL. This code represents any C-CDA CCD created from a patient's portal account.
- Spot check portal activity logs at regular intervals.

Expected Outcome

- Patients with an active portal account are able to access the required clinical data elements and have viewed, downloaded, or sent their health information to a third party.

Justification

- This measure is contingent on patients using the MEDENT patient portal. By reviewing portal activity logs and running reports we will be able to report the volume of structured documents patients are creating and review the error rate of transmission.

Public Health

§ 170.315(f)(1) Transmission to immunization registries

Testing Methodologies

- Run report of immunizations sent to the registry.
- Show queries and responses from the registry.

Expected Outcome

- Will demonstrate that practices are successfully creating immunization records using CVX and NDC codes appropriately, and sending to the State immunization registry.
- Will demonstrate that practices using MEDENT are successfully able to query and receive responses from the State immunization registry.

Justification

- This method was determined to be appropriate as the State immunization registries require the correct CVX and NDC codes for historical and newly administered vaccines, in order for successful submission.
- We will be able to determine the volume of records successfully transmitted to the registry.

§ 170.315(f)(2) Transmission to public health agencies — syndromic surveillance

Testing Methodologies

- Run an internal report to determine if any MEDENT practice has enabled the interface.
- Review client systems to see if any documents or transmissions have been submitted.
- If there are any documents/transmissions, confirm they were submitted using certified the standards.
- If there are no documents/transmissions, we will test a sample number of patients to ensure successful transmission is able to occur.

Expected Outcome

- If any documents have been created, practices are successfully able to transmit them, we will work with them to get them set up properly.

Justification

- We have not had any clients contact us to turn on this interface. We will do a review of client systems to determine if any practices are attempting to do this on their own, without configuration by MEDENT.
- We will be able to report the number of successful transmissions to the public health agency or determine if we need to perform transmission on a sample of patients.

§ 170.315(f)(4) Transmission to cancer registries

Testing Methodologies

- Report the number of Cancer CDAs created on client systems.

Expected Outcome

- Will demonstrate the successful creation of the cancer case information according to the CDA Release 2: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, DSTU Release 1.1.

Justification

- Tracking of the Cancer CDA on a client system will allow MEDENT to verify that the structured document is created as expected on patient charts and available for automatic submission where possible, or generated to allow the practice to manually submit the file.
- We will be able to determine the volume of records successfully transmitted to the registry.

§ 170.315(f)(5) Transmission to public health agencies — electronic case reporting

Testing Methodologies

- Run an internal report to determine if any MEDENT practice has enabled the interface.
- Review client systems to see if any documents or transmissions have been submitted.
- If there are any documents/transmissions, confirm they were submitted using certified the standards.
- If there are no documents/transmissions, we will test a sample number of patients to ensure successful transmission is able to occur.

Expected Outcome

- If any documents have been created, practices are successfully able to transmit them, we will work with them to get them set up properly.

Justification

- We have not had any clients contact us to turn on this interface. We will do a review of client systems to determine if any practices are attempting to do this on their own, without configuration by MEDENT.
- We will be able to report the number of successful transmissions to the public health agency or determine if we need to perform transmission on a sample of patients.

§ 170.315(f)(7) Transmission to public health agencies — health care surveys

Testing Methodologies

- Report the number of Health Care Surveys created on client systems. If there are none, we will test a sample number of patients to ensure successful transmission is able to occur.
- If there are any documents/transmissions, confirm they were submitted using certified the standards.
- If there are no documents/transmissions, we will test a sample number of patients to ensure successful transmission is able to occur.

Expected Outcome

- Will demonstrate the successful creation of National Health Care Survey documents according to the CDA Release 2: National Health Care Surveys (NHCS), Release 1 – US Realm, Draft Standard for Trial Use, December 2014, along with successful submission to the CDC.

Justification

- Tracking of the NHCS document on a client system will allow MEDENT to verify that the structured document is created as expected on patient charts and available for automatic submission.
- We will be able to determine the volume of records successfully transmitted to the CDC.

Application Programming Interfaces

§ 170.315(g)(7) Application access— Patient Selection

§ 170.315(g)(9) Application access— All Data Request

§ 170.315(g)(10) Standardized API for Patient and Population Services

Testing Methodologies

- Review of registered apps to count number of third-party applications attempting to retrieve data Maintenance of MEDENT API Documentation provided on https://www.medent.com/onc/ [MEDENT API > "MEDENT API Terms of Service" and "MEDENT API Documentation"].
- Use of Live FHIR Authorization server to mimic third party app registration for Standalone Patient Access, EHR Practitioner App, and Multi-Patient API use cases and retrieval of Patient Data. At minimum quarterly testing using Inferno Standardized API Test Kit to validate the ability to:
    - Demonstrate support for "mandatory" and "must support" data elements.
    - Reject invalid AUD Launches and invalid token requests.
- Verification of Token validity time frames using Inferno Standardized API Test Kit and API Platforms such as Postman.
- Maintenance of MEDENT API Documentation and Service Base URL Information on this accessible webpage: https://www.medent.com/onc/ [Standardized API – FHIR Documentation > "FHIR API Documentation" and "FHIR Service Base URL Information"]
- Review of AuditEvent Logs on MEDENT client systems if any third party or practice-reported issues with data or connections

Expected Outcome

- Third party applications will be able to successfully register to access appropriate patient data without special effort.
- The use of FHIR APIs and SMART on FHIR launches will increase as more applications become available to practices, providers, and patient users.

Justification

- The Inferno Standardized API Test Kit will allow MEDENT to verify our system ability to support the measure criteria in Production environments.
- Reports on practice systems will indicate the outcome of a transaction such as Errors or Completed Requests and will allow for us to troubleshoot if any reported issues.

Electronic Exchange

§ 170.315(h)(1) Direct Project

Testing Methodologies

- We will export and review the Surescripts Medent_MessageAuditReport at regularly scheduled intervals.

Expected Outcome

- Reporting to show successful receipt and transmission of Direct messages in MEDENT, via our HISP.

Justification

- The HISP provided report includes the Inbound and Outbound traffic for MEDENT Direct endpoints over a given month, as well as the Error and Verified status of an individual transmission. By reviewing this audit log, we can determine over time the usage of Direct messages we send and receive, as well as monitor for any unexpected changes in overall volume of calls or failed transactions.
- We will be able to report the volume of Direct Messages that have been received and transmitted.

Attestation

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Authorized Representative Signature: Christina L. Tomasso

Electronically signed by Christina Tomasso

Date: 10/16/2023