


Care Coordination					
Passed					
<input type="checkbox"/>	§ 170.315(b)(1) Transitions of care				
<input type="checkbox"/>	§ 170.315(b)(2) Clinical information reconciliation and incorporation				
<input type="checkbox"/>	§ 170.315(b)(3) Electronic prescribing				
Clinical Quality Measures		Patient Engagement		Application Programming Interfaces	
Passed		Passed		Passed	
<input type="checkbox"/>	§ 170.315(c)(1) — record and export	<input type="checkbox"/>	§ 170.315(e)(1) View, download, and transmit to 3rd party	<input type="checkbox"/>	§ 170.315(g)(7) Application access— patient selection
<input type="checkbox"/>	§ 170.315(c)(2) — import and calculate			<input type="checkbox"/>	§ 170.315(g)(9) Application access— all data request
<input type="checkbox"/>	§ 170.315(c)(3) — report			<input type="checkbox"/>	§ 170.315(g)(10) Standardized API for patient and population services
Public Health			Electronic Exchange		
Passed			Passed		
<input type="checkbox"/>	§ 170.315(f)(1) Transmission to immunization registries		<input type="checkbox"/>	§ 170.315(h)(1) Direct Project	
<input type="checkbox"/>	§ 170.315(f)(2) Transmission to public health agencies — syndromic surveillance				
<input type="checkbox"/>	§ 170.315(f)(4) Transmission to cancer registries				
<input type="checkbox"/>	§ 170.315(f)(5) Transmission to public health agencies — electronic case reporting				
Real World Testing Plan ID		20231116ged			
Real World Testing Plan URL		https://www.geniusdoc.com/RealWorldTesting.php			
Authorized Representative Name		Bosco			
Authorized Representative Signature					

Care Setting		Measurement Period	Date	Key Milestones
Care Coordination				
§ 170.315(b)(1) Transitions of care § 170.315(b)(2) Clinical information reconciliation and incorporation § 170.315(h)(1) Direct Project: from the Electronic Exchange Category	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to send and receive clinical documents Confirm ability to reconcile and import clinical documents Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment
			June, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider selects recipient from directory of Direct addresses and initiates sending of Clinical Document. The user is able to create a C-CDA Release 2.1 that also includes the reason for referral, and the referring or transitioning provider's name and office contact information. C-CDA Care Referral or Referral Note is triggered to send via Direct Protocol Care provider reviews the Secure Message screen (under Sent menu - Track choice) to ensure Clinical Document was successfully transmitted.
			June, 2024	<input type="checkbox"/> Recipient uses scorecard to grade C-CDA
			July, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Tester uses Document Manager to locate Clinical Document. Care provider reviews the Secure Message screen (under Inbox).
			July, 2024	<input type="checkbox"/> Care provider selects a clinical document in Secure Message screen and initiates Reconciliation and Incorporation of Clinical data into patient chart
			August, 2024	<input type="checkbox"/> Calculate and compile metrics
§ 170.315(b)(3) Electronic prescribing	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to perform prescription related electronic transactions Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment
				<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able to create a new prescription with the required elements mandated by pharmacies Care provider is able to send prescription electronically to pharmacies via Surescripts Care provider reviews the eRx status screen to ensure the transmission is successful
			June, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able to receive Rx change request and submit the Rx change response electronically to the pharmacies via surescripts. Care provider reviews the eRx status screen to ensure the transmission is successful
			June, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able to cancel a prescription and receive the status electronically Care provider reviews the eRx status screen to ensure the transmission is successful
			July, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able to view the refill requests received from pharmacies and approve/deny the refill prescriptions electronically Care provider reviews the eRx status screen to ensure the transmission is successful
			July, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able to send a fill status request and get the status from the pharmacies Care provider reviews the eRx status screen to ensure the transmission is successful
			July, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Care provider is able send RXHREQ and receive the medication history information from surescripts Care provider reviews the eRx status screen to ensure the transmission is successful
Clinical Quality Measures				
§ 170.315(c)(1)—record and export § 170.315(c)(2)—import and calculate § 170.315(c)(3)—report	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to calculate and report eCQMs Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment
			July, 2024	<input type="checkbox"/> The file should upload and be accepted by the environment without error.
			July, 2024	<input type="checkbox"/> All populations of all measures should match.
			August, 2024	<input type="checkbox"/> Calculate and compile metrics
Patient Engagement				
§ 170.315(e)(1) View, download, and transmit to 3rd party	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to provide patients timely access to their ePHI Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment
			June, 2024	<input type="checkbox"/> Ensure patient received activation email or provide patient with Username and Password
			June, 2024	<input type="checkbox"/> Record validation in the audit log that patient has transmitted the C-CDA via DIRECT or email
			August, 2024	<input type="checkbox"/> <ul style="list-style-type: none"> Run Timely Access report in GeniusDoc and compare to patient visit report from EHR to determine percentage of patients who had access within 24 hours. Calculate average of survey responses.
Public Health				
§ 170.315(f)(1) Transmission to immunization registries	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> Identify or use an existing state immunization registry that is enabled for bi-directional send/receive of immunization data.
			June, 2024	<input type="checkbox"/> Validate that immunization interface is functioning as expected
			July, 2024	<input type="checkbox"/> Verify immunization data was received in registry for patient A
			July, 2024	<input type="checkbox"/> Verify immunization data was received in EHR for patient B
			August, 2024	<input type="checkbox"/> See above
§ 170.315(f)(2) Transmission to public health agencies — syndromic surveillance	Ambulatory	5/1/2024 - 8/31/2024	May, 2024	<input type="checkbox"/> Syndromic surveillance messages are successfully received and processed by public health agency or any test tool.
			June, 2024	<input type="checkbox"/> Functioning HL7 2.5.1 interface to public health agency or any test tool.

	Care Setting	Measurement Period	Date		Key Milestones
agencies — syndromic surveillance				August, 2024	<input type="checkbox"/> • Calculate and compile metrics
§ 170.315(f)(4) Transmission to cancer registries	Ambulatory	5/1/2024	-	8/31/2024	May, 2024 <input type="checkbox"/> • Identify state Cancer registry / Test Tool that is enabled for receiving Cancer Case Information.
					July, 2024 <input type="checkbox"/> Verify Cancer data was received in registry / test tool for patient A
					August, 2024 <input type="checkbox"/> See above
§ 170.315(f)(5) Transmission to public healthagencies — electronic case reporting	Ambulatory	5/1/2024	-	8/31/2024	May, 2024 <input type="checkbox"/> eCR messages are successfully received and processed by public health agency.
					June, 2024 <input type="checkbox"/> Functioning eCR interface to public health agency
					September, 2024 <input type="checkbox"/> • Calculate and compile metrics
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	Ambulatory	5/1/2024	-	8/31/2024	May, 2024 <input type="checkbox"/> • Partner with PHR or identify existing PHR that can receive patient clinical data as described in this RWT plan. • Ensure that PHR has functionality to access the GeniusDoc FHIR API, as described here. • Partner with EHR that is integrated the GeniusDoc FHIR API and Patient modules of GeniusDoc EHR
					June, 2024 <input type="checkbox"/> Encounter is created and visually confirmed
					July, 2024 <input type="checkbox"/> • GeniusDoc FHIR API has transformed C-CDA into FHIR resources. • PHR app consumes FHIR resources populate EHR data.
					May, 2024 <input type="checkbox"/> • Partner with a provider-centric app for improved patient care (e.g. growth charts, clinical decision support, patient charting). • Ensure that app has functionality to access the GeniusDoc FHIR API, as described here. • Partner with EHR that is integrated with the GeniusDoc FHIR API module of GeniusDoc EHR.
					June, 2024 <input type="checkbox"/> • Data is rendered correctly. Provider compares patient data in app to patient data in EHR and notes any discrepancies.
					May, 2024 <input type="checkbox"/> • Partner with a provider-centric app that requires periodic bulk data downloads. • Ensure that app has functionality to access the GeniusDoc FHIR API, as described here. • Partner with EHR that is integrated with the GeniusDoc FHIR API module of GeniusDoc EHR.
					June, 2024 <input type="checkbox"/> • Data is rendered correctly : Provider compares patient data in app to patient data in EHR and notes any discrepancies.
					August, 2024 <input type="checkbox"/> • Calculate and compile metrics
Electronic Exchange					
§ 170.315(h)(1) Direct Project (Included with (b)(1) in the CareCoordination Category)	Ambulatory	5/1/2024	-	8/31/2024	SEE CARE COORDINATION

Justification for overall approach

GeniusDoc EHR is used by providers in various specialties, only in the outpatient clinics. Therefore, the Real World Testing plan will apply to this care setting.

Our Real World Testing approach consists of the following categories:

- A. Care Coordination
- B. Population Health
- C. Patient Engagement
- D. Electronic Exchange
- E. Public Health
- F. API

The certification criteria can be tested simultaneously in some cases therefore we bundled criteria in our testing approach. Our quantitative approach captures measurements of each bundle which demonstrate functional usage.

USCDI Standards	
Standard (and version)	USCDI V1
Updated certification criteria and associated product	b(1), b(2), e(1), f(5), g(9)
CHPL Product Number	15.02.05.1529.GDOC.01.01.1.211209
Method used for standard update	Cures Update
Date of ONC ACB notification	12/12/2022
Date of customer notification (SVAP only)	N/A
Conformance measure	§ 170.315(b)(1) Transitions of care § 170.315(b)(2) Clinical information reconciliation and incorporation § 170.315(e)(1) View, download, and transmit to 3rd party § 170.315(f)(5) Transmission to public health agencies — electronic case reporting § 170.315(g)(9) Application access— all data request
USCDI updated certification criteria (and USCDI version)	b(1), b(2), e(1), f(5), g(9) — USCDI V1

Table of Contents Associated Certification Criteria: § 170.315(b)(1) Transition of Care § 170.315(b)(2) Clinical information reconciliation and incorporation § 170.315(h)(1) Direct Project						
Measure Description: Send and receive Transition of Care (TOC) messages with other providers to close the referral loop. The patient's ePHI will be exchanged using a C-CDA 2.1 Care Referral or Referral Note and DIRECT secure messaging for data transport.		Justification: We chose to concentrate on the aspects of this criterion that would: 1) showcase GeniusDoc's streamlined approach to provider-to-provider patient referrals and transitions of care with the ultimate goal being higher quality patient care 2) eliminate as much risk of data entry errors as possible by transmitting patient data securely and electronically rather than relying on manual data entry for referrals 3) reduce the overall time burden of manual data entry 4) ensure private and secure transmission of patients' PHI 5) result in increased interoperability between disparate HIT systems. 6) showcase GeniusDoc's ability to identify the patient received in transition of care/referral summary (CCDA). 7) showcase GeniusDoc's ability to Reconcile and Incorporate CCDA in a straight forward fashion				
Metric Description: 1) 100 percent of outbound TOC's successfully received by HISP 2) Average C-CDA grade from scorecard for C-CDAs generated from GeniusDoc is a "C" or better 3) 75 percent of trading partner's TOC C-CDAs successfully received by GeniusDoc. 4) 75 percent of trading partner's TOC C-CDAs are validated and incorporated in GeniusDoc						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182 Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		Product Info: Product Name: GeniusDoc Product Version: 12.0 CHPL ID: 15.02.05.1529.GDOC. 01.01.1.211209		Methods Use to Demonstrate Interoperability: 1) Surescripts 2) HTTPS requests		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
1	Identify Trading Partner (TP) and coordinate with TP for sending/receiving clinical documents and also reconcile/Import using production data as described in this RWT plan.	<ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to send and receive clinical documents Confirm ability to reconcile and import clinical documents Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment 	May, 2024	<input type="checkbox"/>		
2	Patient A has encounter with care provider and data is captured in EHR	<ul style="list-style-type: none"> USCDiv1 data elements captured in EHR (system under test) Care provider selects Clinical Document to be transmitted. Care provider is able to create a C-CDA Release 2.1 that also includes the reason for referral, and the referring or transitioning provider's name and office contact information. 				
3	Care provider initiates TOC to TP EHR in EHR	<ul style="list-style-type: none"> Care provider selects recipient from directory of Direct addresses and initiates sending of Clinical Document. The user is able to create a C-CDA Release 2.1 that also includes the reason for referral, and the referring or transitioning provider's name and office contact information. C-CDA Care Referral or Referral Note is triggered to send via Direct Protocol Care provider reviews the Secure Message screen (under Sent menu - Track choice) to ensure Clinical Document was successfully transmitted. 	June, 2024	<input type="checkbox"/>		
*	Next steps take place in trading partner's EHR.					


4	Validate that C-CDA for Patient A contains USCDIV1 data elements.	Recipient uses scorecard to grade C-CDA	June, 2024	<input type="checkbox"/>		
5	Trading partner refers Patient B from TP EHR to system under test by generating C-CDA Clinical Document or Referral Note.	• Care provider selects recipient from directory of Direct addresses and initiates sending of Clinical Document.				
6	In system under test, tester acknowledges receipt of valid Clinical Document.	• Tester uses Document Manager to locate Clinical Document. • Care provider reviews the Secure Message screen (under Inbox).	July, 2024	<input type="checkbox"/>		
*	Reconciliation and Incorporation			<input type="checkbox"/>		
7	Care provider initiates Reconciliation and Incorporation in EHR	• Care provider selects a clinical document in Secure Message screen and initiates Reconciliation and Incorporation of Clinical data into patient chart	July, 2024	<input type="checkbox"/>		
8	In system under test, tester identifies the patient of valid Clinical Document.	• Tester uses Secure Message screen to identify and map the patient		<input type="checkbox"/>		
9	In system under test, tester reconciles the USCDIV1 elements received in the Clinical Document	• Tester uses reconciliation screen to view the USCDIV1 elements (Medications, Allergies and Problems) • Tester verifies the USCDIV1 elements with existing data		<input type="checkbox"/>		
10	In system under test, tester incorporates the USCDIV1 elements into EHR	• Tester uses merge option in reconciliation screen to incorporate the USCDIV1 elements into the patient chart		<input type="checkbox"/>		
11	Calculate and compile metrics	• Calculate and compile metrics	August, 2024	<input type="checkbox"/>		
<p>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.</p>						
Authorized Representative Name:		Bosco				
Authorized Representative Email:		bosco@geniusdoc.com, support@geniusdoc.com				
Authorized Representative Phone:		(310) 752-7772				
Authorized Representative Signature:						
Date:		10/25/2023				

Table of Contents § 170.315(b)(3) Electronic prescribing						
Measure Description: Perform the following Prescription-related electronic transactions: Create, Change, Cancel, Renew, Fill Status, Medication History including Status, Errors and Verification.		Justification: We chose to concentrate on the aspects of this criterion that would: 1) Showcase GeniusDoc ability to create, change and cancel a prescription electronically 2) Showcase GeniusDoc ability to Renew a prescription electronically 3) Showcase GeniusDoc ability to request prescription Fill Status and history electronically 4) Showcase GeniusDoc ability to Verify and track errors				
Metric Description: 1) 90 percent of prescriptions are documented and sent electronically 2) 95 percent of prescriptions are received by pharmacies						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182 Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		Product Info: Product Name: GeniusDoc Product Version: 12.0 CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209		Methods Use to Demonstrate Interoperability: 1) Surescripts prescription network 2) HTTPS requests 3) SFTP 4) Best Sync		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestones Date:	Key Milestone:	Outcomes:	Comments:
1	Identify Trading Partner (TP) and coordinate with TP for prescription related electronic transactions using production data as described in this RWT plan.	<ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to perform prescription related electronic transactions Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment 	May, 2024	<input type="checkbox"/>		
2	Create a new prescription	<ul style="list-style-type: none"> Care provider is able to create a new prescription with the required elements mandated by pharmacies Care provider is able to send prescription electronically to pharmacies via Surescripts Care provider reviews the eRx status screen to ensure the transmission is successful 		<input type="checkbox"/>		
3	Change a prescription	<ul style="list-style-type: none"> Care provider is able to receive Rx change request and submit the Rx change response electronically to the pharmacies via surescripts. Care provider reviews the eRx status screen to ensure the transmission is successful 	June, 2024	<input type="checkbox"/>		
4	Cancel a prescription	<ul style="list-style-type: none"> Care provider is able to cancel a prescription and receive the status electronically Care provider reviews the eRx status screen to ensure the transmission is successful 	June, 2024	<input type="checkbox"/>		
5	Refill a prescription	<ul style="list-style-type: none"> Care provider is able to view the refill requests received from pharmacies and approve/deny the refill prescriptions electronically Care provider reviews the eRx status screen to ensure the transmission is successful 	July, 2024	<input type="checkbox"/>		
6	Receive a fill status notifications	<ul style="list-style-type: none"> Care provider is able to send a fill status request and get the status from the pharmacies Care provider reviews the eRx status screen to ensure the transmission is successful 	July, 2024	<input type="checkbox"/>		
7	Request and receive medication history information	<ul style="list-style-type: none"> Care provider is able send RXHREQ and receive the medication history information from surescripts Care provider reviews the eRx status screen to ensure the transmission is successful 	July, 2024	<input type="checkbox"/>		
8	Calculate and compile metrics	<ul style="list-style-type: none"> Calculate and compile metrics 	August, 2024	<input type="checkbox"/>		
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.						
Authorized Representative Name:		Bosco				
Authorized Representative Email:		bosco@geniusdoc.com, support@geniusdoc.com				
Authorized Representative Phone:		(310) 752-7772				

	Authorized Representative Signature:				
	Date:	10/25/2023			

Associated Certification Criteria: § 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						
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Measure Description: <ul style="list-style-type: none"> • Capture and record electronic clinical quality measure (eCQM) data in EHR (or trading partner’s EHR) for calculating eCQMs. • Electronically create a data file for transmission of CQM data in accordance with the CMS QRDA Category I IG and CMS QRDA Category III IG for ambulatory measures. 		Justification: We chose to concentrate on the aspects of this criterion that would closely follow the actual activities of GeniusDoc users with respect to eCQM calculation and output: 1) Run quality measure reports and display results on Dashboard to compare with industry-standard benchmarks and with prior/expected performance. 2) Generate QRDA III and ensure that it can be successfully uploaded to the submission environment.				
Metric Description: 1) 100 percent matching calculation results in GeniusDoc vs submission environment 2) 0 percent of files uploaded to submission environment result in errors						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182 Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		Product Info: Product Name: GeniusDoc Product Version: 12.0 CHPL ID: 15.02.05.1529.GDOC. 01.01.1.211209		Methods Use to Demonstrate Interoperability: <ul style="list-style-type: none"> • Visual inspection and matching of QRDA I data to EHR data • Matching of calculation results from GeniusDoc to CMS • API Sandbox testing with CMS for file acceptance 		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcome:	Comments
1	Identify Trading Partner (TP) and coordinate with TP for calculating and reporting electronic clinical quality measures (eCQMs) using production data as described in this RWT plan.	<ul style="list-style-type: none"> • Confirm Trading Partner • Confirm ability to calculate and report eCQMs • Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment 	May, 2024	<input type="checkbox"/>		
2	Identify one or more EP (Eligible Professional) eCQMs for RWT.	Based on historical data, select the most popular eCQMs.				
3	Identify a one calendar year reporting period with adequate patient data for reporting.	Admins with sufficient familiarity with the physician practice’s clinical activities should be able to choose a period with an appropriate amount of quality data.				
4	Capture and record clinical quality measure (CQM) data in Trading Partner’s (TP) EHR	Data ready for report generation.				
5	Correctly calculate numerator, denominator, exclusion and exception values for selected eCQMs.	The GeniusDoc report should complete with no errors.				
6	Spot-check few patients for each measure, ensuring that some are in the denominator only, some are in the numerator and denominator and, if possible, some are exclusions or exceptions.	Use Patient List to check which categories Initial Patient Population (IPP), Denominator (Den), Exclusions (Excl), Numerator (Num) or Exceptions (Excp) each patient falls into.				
7	Upload the generated MIPS QRDA III file to QPP.	The file should upload and be accepted by the environment without error.	July, 2024	<input type="checkbox"/>		


8	<p>Check the submission environment's measure calculation results and compare them to GeniusDoc's calculation results.</p> <p><i>Both settings</i></p>	<p>All populations of all measures should match.</p>	<p>July, 2024</p>	<input type="checkbox"/>		
9	<p>Calculate and compile metrics</p>	<ul style="list-style-type: none"> Calculate and compile metrics 	<p>August, 2024</p>	<input type="checkbox"/>		
<p>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.</p>						
<p>Authorized Representative Name:</p>		<p>Bosco</p>				
<p>Authorized Representative Email:</p>		<p>bosco@geniusdoc.com, support@geniusdoc.com</p>				
<p>Authorized Representative Phone:</p>		<p>(310) 752-7772</p>				
<p>Authorized Representative Signature:</p>						
<p>Date:</p>		<p>10/25/2023</p>				

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Associated Certification Criteria: 170.315(e)(1) View, Download, and Transmit to 3rd Party						
<p>Measure Description: Provide patient (and their authorized representatives) user friendly, secure Portal access to their PHI in C-CDA 2.1 HL7 Standard format. Allowing patient to download a summary in both a human readable format and using the CCD document template of the Consolidated CDA Release 2.1 containing: • The USCDIV1 Data Elements • The provider’s name and office contact information • Laboratory test report(s) • Diagnostic image report(s)</p>		<p>Justification: We chose to concentrate on the aspects of this criterion that would empower patients with timely electronic access to comprehensive, useful ePHI.</p>				
<p>Metric Description: 1) 90 percent of unique patient with encounters in the review period are provided timely access (within 24 hours of their encounter) to health information to view online, download, and transmit to a third party. 2) Average score between 1 and 2 (1=Easy to use, 5=Unable to access) for patients or Authorized Representatives who tried to access the patient portal and responded to survey questions. 3) Average score between 1 and 2 (1=Easy to download/transmit, 5=Unable to download/transmit) for patients or Authorized Representatives who accessed the patient portal and tried to download or transmit a C-CDA.</p>						
<p>Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182</p> <p>Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.</p>		<p>Product Info: Product Name: GeniusDoc Product Version: 12.0</p> <p>CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209</p>	<p>Methods Use to Demonstrate Interoperability: 1) Direct Protocol Send Functionality 2) SMTP Email Send Functionality 3) HTTPS via secure portal Access for patient from any browser 4) Ability for Portal to be accessed via a Smartphone or Tablet</p>			
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comment(s)
1	Identify Trading Partner (TP) and coordinate with TP for providing patients timely access to their ePHI using production data as described in this RWT plan.	<ul style="list-style-type: none"> Confirm Trading Partner Confirm ability to provide patients timely access to their ePHI Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment 	May, 2024	<input type="checkbox"/>		
2	For a period of time (3 months), monitor the system as the below steps (3-12) take place continuously.	Many patient visits will occur during the period of time, generating a sufficient amount of data for calculating the metrics at the end of testing.				
3	Patient arrives for a visit	Patient demographics are captured in the EHR				
4	Provider documents the Patients health status	USCDIV1 data elements are recorded in EHR				
5	Provider Signoff the visit	Trigger is provided to create C-CDA or C-CDA is dropped to GeniusDoc				
6	EHR system generates CCD including all provided USCDIV1 data	<ul style="list-style-type: none"> Validate that a C-CDA has been triggered. Ensure patient is mapped to the right provider and practice. Visually verify USCDIV1 data sections exist with accurate information Validate code systems and format with ScoreCard or ETT tool for schema validation. 				
7	Patient activates Portal	<ul style="list-style-type: none"> Ensure patient received activation email or provide patient with Username and Password 	June, 2024	<input type="checkbox"/>		
8	Patient or authorized representative logs into Portal	<ul style="list-style-type: none"> URL is provided to patient in an email or the Patient is provided the URL while in the physician’s office. Record validation in the audit log that URL is functional 				


9	Patient or authorized representative views C-CDA or chooses a date range of CCDs to view	<ul style="list-style-type: none"> Record validation in the audit log that patient has viewed C-CDA Validate NTP by comparing Portal timestamp with GeniusDoc timestamp 				
10	Patient or authorized representative downloads C-CDA their choice of xml or pdf	Record validation in the audit log that patient has downloaded C-CDA				
11	Patient or authorized representative transmits:	Record validation in the audit log that patient has transmitted the C-CDA via DIRECT or email	June, 2024	<input type="checkbox"/>		
a	C-CDA via Direct Protocol to a provider					
b	C-CDA via email to others					
12	Request survey response on Patient Portal ease of use and accessibility.	Patient or authorized representative provides a score from 1 (easy) to 5 (unable) on the following criteria: <ul style="list-style-type: none"> accessing the portal downloading and/or transmitting ePHI 				
13	Calculate and compile metrics	<ul style="list-style-type: none"> Run Timely Access report in GeniusDoc and compare to patient visit report from EHR to determine percentage of patients who had access within 24 hours. Calculate average of survey responses. 	August, 2024	<input type="checkbox"/>		
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.						
Authorized Representative Name:		Bosco				
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Date:		10/25/2023				

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Associated Certification Criteria: §170.315(f)(1) Transmission to immunization registries						
Measure Description: Create and transmit immunization information. Enable a user to request, access, and display a patient's evaluated immunization history and the immunization forecast from an immunization registry		Justification: We chose to concentrate on the aspects of this criterion that would provide the most patient care value in an actual setting. Immunization registries can be very helpful in directing and informing patient care and in cost control through identification of needed immunizations and elimination of redundant immunizations.				
Metric Description: 1) 100 percent correct immunization records successfully posted to registry confirmed by visual validation. 2) 100 percent correct immunization history records successfully received in EHR confirmed by visual validation. 3) Successful Transmission to Public Health Registry will be reviewed for ACK & NAK to ensure 100% successful transmission.						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182 Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		Product Info: Product Name: GeniusDoc Product Version: 12.0 CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209		Methods Use to Demonstrate Interoperability: 1) SFTP 2) TCP/IP 3) Webservice 4) HL7 Standard Code Set CVX – Vaccine AdministeredOID: 2.16.840.1.113883.12.292 5) National Drug Code Directory OID: 2.16.840.1.113883.6.69 6) SOAP-based standard for transport of immunization data		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
1	Identify Trading Partner (TP) and coordinate with TP for transmitting immunization records using production data as described in this RWT plan.	<ul style="list-style-type: none"> Identify or use an existing state immunization registry that is enabled for bi-directional send/receive of immunization data. 	May, 2024	<input type="checkbox"/>		
2	Implement bi-directional immunization interface (if interface not already in place)	Validate that immunization interface is functioning as expected	June, 2024	<input type="checkbox"/>		
3	Determine whether test or production interface will be used.	If production, determine whether an actual patient or a test patient will be used.				
4	Create a new immunization record	<ul style="list-style-type: none"> Register a patient or create a new patient "A" in Client EHR and create a current patient encounter. Record an immunization in Client EHR. 				
5	Create a new query	<ul style="list-style-type: none"> Select a patient or create a new patient "B" in Client EHR and create a current patient encounter. Request immunization record in Client EHR. 				
6	Run immunization process to send/receive from registry (assuming process is batch, rather than real-time).	Confirm send/received functionality				
7	Access registry to verify that immunization data was received for patient A.	Verify immunization data was received in registry for patient A	July, 2024	<input type="checkbox"/>		
8	Access EHR to verify that immunization data was received for patient B.	Verify immunization data was received in EHR for patient B	July, 2024	<input type="checkbox"/>		
9	Calculate and compile metrics	See above	August, 2024	<input type="checkbox"/>		
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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Table of Contents Associated Certification Criteria: §170.315(f)(2) Transmission to public health agencies — syndromic surveillance						
<p>Measure Description: Create syndromic surveillance messages and transmit to public health agencies.</p>		<p>Justification: We chose to concentrate on the aspects of this criterion that would: 1) Ensure all patients flagged will have health data sent for surveillance 2) Allow for health threats to be reported faster. 3) Provide information to the CDC or other registries to identify illness clusters early, before diagnoses are confirmed and reported to public health agencies, and to mobilize a rapid response, thereby reducing morbidity and mortality.</p>				
<p>Metric Description: 1) 100 percent of HL7 Syndromic Surveillance messages successfully sent and acknowledged (via HL7 ACK) by public health agency 2) 100 percent of syndromic surveillance messages successfully received and processed by public health agency based on either: a) Logging into agency web site and validating, or b) Using a report provided by agency</p>						
<p>Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182</p> <p>Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.</p>		<p>Product Info: Product Name: GeniusDoc Product Version: 12.0</p> <p>CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209</p>		<p>Methods Use to Demonstrate Interoperability: 1) ICD-10-CM 2) SNOMED CT® 3) SFTP 4) TCP/IP 5) Webservice</p>		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
1	<p>Identify GeniusDoc Client who either:</p> <ul style="list-style-type: none"> Has a public health agency that can receive Syndromic Surveillance data Already has a functional Syndromic Surveillance interface or would like to implement one to their public health agency and the agency willing to share metrics of syndromic surveillance messages successfully received. If none of the state health agency are accepting syndromic surveillance data for Ambulatory care, sandbox testing will be used 	<p>Syndromic surveillance messages are successfully received and processed by public health agency or any test tool.</p>	May, 2024	<input type="checkbox"/>		
2	<p>Implement send-only public health interface (if interface not already in place).</p> <ul style="list-style-type: none"> Determine whether test or production interface will be used If production, determine whether an actual patient or a test patient will be used 	<p>Functioning HL7 2.5.1 interface to public health agency or any test tool.</p>	June, 2024	<input type="checkbox"/>		
3	<p>Create a new patient encounter.</p> <ul style="list-style-type: none"> Register a patient or create a new patient "A" in Client EHR and create a current patient encounter Enter one or more ICD-10 diagnosis codes present in the Trigger Events table that lists reportable Syndromic Surveillance diagnoses 	<p>Patient registered and queued for interface</p>				
4	<p>Run Syndromic Surveillance process to send to public health agency or test tool (assuming process is batch, rather than real-time).</p>	<ul style="list-style-type: none"> Ensure messages are de-identified per CDC PHIN Messaging Guide requirements Messages sent to public health agency or any test tool 				
5	<p>Check whether HL7 messages ACKed by agency or in the test tool</p>	<p>HL7 messages are successfully received and ACKed</p>				
6	<p>Query agency to verify that public health data was received for patient A or Obtain logs from the test tool to verify that the data was received for patient A</p>	<p>Public health successfully processed by agency or test tool</p>				
7	<p>Calculate and compile metrics</p>	<ul style="list-style-type: none"> Calculate and compile metrics 	August, 2024	<input type="checkbox"/>		
<p>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.</p>						

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Table of Contents § 170.315(f)(4) Transmission to cancer registries						
Measure Description: Create cancer case information for electronic transmission		Justification: We chose to concentrate on the aspects of this criterion that would provide the most patient care value in an actual setting. Cancer registries can be helpful to define and monitor cancer incidence at the local, state, and national levels. It is used to plan and evaluate cancer prevention and control interventions.				
Metric Description: 1) 90 percent correct cancer case information successfully posted to registry/sandbox confirmed by visual validation. 2) Successful Transmission to Public Health Registry/Sandbox will be reviewed for ACK to ensure 100% successful transmission.						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182		Product Info: Product Name: GeniuDoc Product Version: 12.0		Methods Use to Demonstrate Interoperability: 1) ICD-10-CM 2) SNOMED CT® 3) LOINC® 4) SFTP, TCP/IP, Webservice, HTTPS		
Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209				
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
1	Identify Trading Partner (TP) and coordinate with TP for transmitting Cacer Case Information using production data as described in this RWT plan.	• Identify state Cancer registry / Test Tool that is enabled for receiving Cancer Case Information.	May, 2024	<input type="checkbox"/>		
2	Determine whether test or production interface will be used.	If production, determine whether an actual patient or a test patient will be used.				
3	Create a new Cancer Case Record	• Register a patient or create a new patient "A" in Client EHR and create a current patient encounter • Record a Cancer diagnosis and treatment information in Client EHR.				
4	Run process to send information to registry / test tool	Confirm send functionality				
5	Access registry / test tool to verify that Cancer data was received for patient A	Verify Cancer data was received in registry / test tool for patient A	July, 2024	<input type="checkbox"/>		
6	Calculate and compile metrics	See above	August, 2024	<input type="checkbox"/>		
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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Table of Contents § 170.315(f)(5) Transmission to public health agencies — electronic case reporting						
<p>Measure Description: Create Electronic Case Reports (eCR) for transmission to public health agency based on a specific LOINC, ICD-10 and SNOMED codes entered in a patient's encounter. eCR functionality looks up the patient's codes in the table and, if appropriate, sends an eCR message to the health agency.</p>		<p>Justification: We chose to concentrate on aspects of this criterion that would provide the most patient care value in an actual setting. Public health registries can be very helpful to patient care, epidemiologists and government for identifying disease outbreaks, epidemics and even pandemics.</p>				
<p>Metric Description: 1) 100 percent of electronic case reporting messages successfully received and processed by public health agency based on either: a) Logging into agency web site and validating, or b) Using a report provided by agency</p>						
<p>Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182</p> <p>Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.</p>		<p>Product Info: Product Name: GeniusDoc Product Version: 12.0</p> <p>CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209</p>		<p>Methods Use to Demonstrate Interoperability: 1) Table of Trigger Events based on LOINC, ICD-10 and SNOMED codes. 2) Use of USCDI</p>		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
1	Identify GeniusDoc Client who either: • Has a public health agency that can receive eCR data. • Already has a functional eCR interface or would like to implement one to their public health agency and the agency willing to share metrics of eCR messages successfully received.	eCR messages are successfully received and processed by public health agency.	May, 2024	<input type="checkbox"/>		
2	Implement send-only public health interface (if interface not already in place). • Determine whether test or production interface will be used. • If production, determine whether an actual patient or a test patient will be used.	Functioning eCR interface to public health agency	June, 2024	<input type="checkbox"/>		
3	Create a patient encounters. • Register patients or create new patients in Client EHR and create a current patient encounter. • Enter one or more SNOMED Codes or ICD-10 diagnosis codes present in the Trigger Events table that lists reportable eCR diagnoses.	Patient registered and queued for interface	July, 2024			
4	Enter Lab results through EHR or Lab interface. Make sure LOINC codes correspond to codes present in the Trigger Events table that lists reportable LOINC codes.	Patient queued for interface	July, 2024			
5	Run eCR process to send to public health agency (assuming process is batch, rather than real-time).	Messages sent to public health agency	July, 2024			
6	Query agency to verify that public health data was received for patients from steps 3 and 4.	Public health successfully processed by agency	August, 2024			
7	Calculate and compile metrics	• Calculate and compile metrics	September, 2024			
<p>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.</p>						
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Associated Certification Criteria: § 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						
Measure Description: Provide a standardized FHIR-based API that supports bulk data requests to provide patients, providers and niche specialty applications to consume patient data enabling improved interoperability, improved patient care and better overall population health.		Justification: We chose to concentrate on the aspects of this criterion that would empower clinicians with flexibility in choosing new and innovative healthcare technology. Historically, it has been difficult for builders of niche applications to access necessary patient demographic and clinical data for smooth seamless use of their applications.				
Metric Description: 1) 100 percent of encounters where Patient is able to retrieve FHIR API data from PHR app. 2) 100 percent of encounters from Step #1 where Patient's PHR data matches data from EHR. This will be done by visual validation of the following FHIR resources. a. Demographics b. Problems c. Medications d. Allergies 3) 100 percent of encounters where Provider is able to retrieve FHIR API data from app. 4) 100 percent of encounters from Step #3 where data for randomly-selected patients as presented in app matches data from EHR. This will be done by visual validation of the following FHIR resources. a. Demographics b. Problems c. Medications d. Allergies						
Developer Info: GeniusDoc Inc. 11407 Wistful Vista way Porter Ranch, CA 91326 4182 Ambulatory Care Setting: The functionality for the criteria is the same regardless of the care setting.		Product Info: Product Name: GeniusDoc Product Version: 12.0 CHPL ID: 15.02.05.1529.GDOC.01.01.1.211209		Methods Use to Demonstrate Interoperability: 1) USCore FHIR resources 2) SMART Patient Launch 3) SMART EHR Launch 4) Backend Services Authorization 5) Visual validation		
Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcomes:	Comments:
These test steps provide single patient API access						
1	Identify Trading Partner (TP) and coordinate with TP for providing patients timely access to their ePHI using production data as described in this RWT plan.	<ul style="list-style-type: none"> Partner with PHR or identify existing PHR that can receive patient clinical data as described in this RWT plan. Ensure that PHR has functionality to access the GeniusDoc FHIR API, as described here. Partner with EHR that is integrated the GeniusDoc FHIR API and Patient modules of GeniusDoc EHR 	May, 2024	<input type="checkbox"/>		
2	Patient A has encounter with care provider who uses EHR described above.	Encounter is created and visually confirmed	June, 2024	<input type="checkbox"/>		
3	Provider captures USCDIV1 data elements in EHR	USCDIV1 data elements are validated in the system	June, 2024			
4	Provider manually generates Care/Referral Summary C-CDA post-visit or ensures that the EHR generates one automatically.	C-CDA is confirmed for the specified patient	June, 2024			
5	Patient A uses GeniusDoc Patient Portal login to view clinical information	<ul style="list-style-type: none"> Patient Portal automatically sends email reminder that Patient A has a new clinical document available. Email reminder has a URL/hyperlink to the patient portal. If patient hasn't already activated their portal account, portal account can be activated via Welcome Email or by an Administrator user 	June, 2024			
6	Patient A uses portal login credentials to log into PHR app	Specific patient ID and token are returned for authentication and data requests	June, 2024			
7	PHR app displays full set of data for each data category	<ul style="list-style-type: none"> GeniusDoc FHIR API has transformed C-CDA into FHIR resources. PHR app consumes FHIR resources populate EHR data. 	July, 2024	<input type="checkbox"/>		

8	PHR app returns full set of data for a given category	PHR app will display and all data to be displayed for each data category	July, 2024			
9	PHR app returns data in a computable format using specified standards.	Data is confirmed to be in XML or JSON format	July, 2024			
10	PHR app returns full and accurate data for a specific date and specific date range	<ul style="list-style-type: none"> Step 10 is optional, if PHR app has the capability to filter by date range. Filtering data by a specific date returns data accurately and as expect. Filtering data by a specific date range returns data accurately and as expected. 	July, 2024			
11	Via visual inspection, the data is verified to include Assessment, Plan of Treatment and Health concerns are specified as narrative text	Visually validate Assessment, Plan of Treatment and Health Concerns narrative text.	July, 2024			
These test steps cover Care Coordination via third party App						
1a	Identify Trading Partner (TP) and coordinate with TP for providing patients timely access to their ePHI using production data as described in this RWT plan.	<ul style="list-style-type: none"> Partner with a provider-centric app for improved patient care (e.g. growth charts, clinical decision support, patient charting). Ensure that app has functionality to access the GeniusDoc FHIR API, as described here. Partner with EHR that is integrated with the GeniusDoc FHIR API module of GeniusDoc EHR. 	May, 2024	<input type="checkbox"/>		
2a	Provider logs into app and triggers FHIR API data retrieval.	<ul style="list-style-type: none"> The app connects to the FHIR API server and pulls down the specific FHIR resources from the EHR. 	June, 2024			
3a	Provider views and validates data in app.	<ul style="list-style-type: none"> Data is rendered correctly. Provider compares patient data in app to patient data in EHR and notes any discrepancies. 	June, 2024	<input type="checkbox"/>		
These Test Steps Cover Bulk Data for Care Coordination						
1b	Identify Trading Partner (TP) and coordinate with TP for providing patients timely access to their ePHI using production data as described in this RWT plan.	<ul style="list-style-type: none"> Partner with a provider-centric app that requires periodic bulk data downloads. Ensure that app has functionality to access the GeniusDoc FHIR API, as described here. Partner with EHR that is integrated with the GeniusDoc FHIR API module of GeniusDoc EHR. 	May, 2024	<input type="checkbox"/>		
2b	Provider logs into app and views patient data.	<ul style="list-style-type: none"> The app connects to the FHIR API server and pulls down the specific FHIR resources from the EHR 	June, 2024			
3b	Provider validates data in app.	<ul style="list-style-type: none"> Data is rendered correctly : Provider compares patient data in app to patient data in EHR and notes any discrepancies. 	June, 2024	<input type="checkbox"/>		
12	Calculate and compile metrics.	<ul style="list-style-type: none"> Calculate and compile metrics 	August, 2024	<input type="checkbox"/>		
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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