Real World Testing Plan Results Report 2023

GENERAL INFORMATION

Plan Report ID Number: EZDERM_2023_RWT_Plan_Results

Developer Name: EZDERM LLC

Product Name(s): EZDERM

Version Number(s): 4.0

Certified Health IT: 15.04.04.2987.EZDE.04.01.1.220602

Product List (CHPL) ID(s): 15.04.04.2987.EZDE.04.01.1.220602

Developer Real World Testing Page URL: https://www.ezderm.com/fully-certified

Developer Real World Testing Results Report Page URL: https://www.ezderm.com/fully-certified

CHANGES TO ORIGINAL PLAN

Summary of Change	Reason	Impact
Changed the testing timeframe/window	Difficulty finding end-users willing to participate in Real Word Testing with us	No quantitative impact on testing, final testing window was extended to make up for the change

SUMMARY OF TESTING METHODS AND KEY FINDINGS

EZDERM is a Dermatology-specific EHR most commonly utilized in single-provider and multi-provider private practices. EZDERM has established a plan to demonstrate interoperability and functionality of its certified module criteria in a real world setting with actual patient encounter data. By testing the methods described below, we will be able to demonstrate that all required testing criteria are being used by our users as designed and certified.

Real World Testing is meant to support testing that was conducted prior to certification being granted. It is not intended to duplicate the methods or results previously demonstrated. Instead, this test plan was developed to demonstrate that the certified capabilities have been successfully deployed for providers to use at their discretion in live settings.

EZDERM created and shared a document with the providers assisting with the testing in both of our Care Settings, that outlines step-by-step instructions on how to complete each necessary workflow in the system in an introductory call. We then tracked the number of successful workflow completions against failures during the testing window. An open channel for feedback was provided along the way.

Our users were able so successfully and easily complete most workflows without issue for criteria that are are part of their everyday workflow. Challenges lied in testing criteria that are not part of their everyday processes.

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

[   ] Yes, we have products certified with voluntary SVAP or USCDI standards.

[✔] No, none of our products include these voluntary standards.

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
CHPL Product Number	N/A

Conformance measure	N/A

CARE SETTING(S)

Care Setting	Justification
Single-provider private Dermatology practice	EZDERM is marketed to dermatologists exclusively as it is a dermatology-specific EHR, intended to be used only in this type of care setting. Single provider practices represent a significant portion of our user base, so we will want to test this setting.
Multi-provider private Dermatology practice	EZDERM is marketed to dermatologists exclusively as it is a dermatology-specific EHR, intended to be used only in this type of care setting. Multiple provider practices represent the other significant portion of our user base, so we will want to test this setting.

METRICS AND OUTCOMES

Measurement/Metric	Description
Care Coordination - Receiving C-CDA Encounter Summaries via Direct Messaging	Ability for users to go to their inbox to receive and view any Direct Messages that have been sent to them from outside sources which contain a C-CDA file.
Care Coordination - Importing/Reconciliation of Clinical Data into Patient Chart	Upon receipt of a C-CDA file, ability to match the document to the correct patient and subsequently import the clinical data into the patient chart.
Care Coordination - Reconciliation of Clinical Data Into Encounters	Once clinical information, received via C-CDA, has been imported into a patient chart, users then have the ability to reconcile clinical information within an encounter (Medications, Allergies, and Problems).

Clinical Documentation - Adding a Medication and Electronic Prescribing	User has the ability to check and address refill requests and add the desired medication and prescription details for a patient and send to a specified pharmacy electronically.
Clinical Documentation - Management of Electronic Prescriptions	Checking status of e-prescriptions to see if it was successfully sent, failed, or if an RX Change or Refill Request message has been transmitted by the pharmacy.
Care Coordination - Sending C-CDA Encounter Summaries via Direct Messaging	For any patient with the requisite clinical data entered into an encounter, users have the ability to generate a C-CDA document and send it to another physician via Direct Messaging.
Patient Engagement - Ability to Manage Health Information	Patient logs into the patient portal to view C-CDA file(s) generated from a given D.O.S. and can view, download, and transmit the document(s) directly from the portal.
Clinical Quality Measures - Record and Export	Ability for users to record data that would be necessary to calculate selected CQM's and export the information as a data file.
Public Health - Cancer Registry Reporting	For any patient with a reportable cancer diagnosis, the user has the ability to view, edit, and document necessary clinical information and generate a report that can be submitted to a cancer registry.
Care Coordination - Data Export	Ability for users to export patient data summaries formatted as a Continuity of Care Document.
API - Client Login and Access Token	External party queries the patient using the API and retrieves the patient record. The system will receive the request to uniquely identify the patient and generate a token.
API - Getting Patient Clinical Data by Category	Using a patient data token, third-party requests a specific data category for a specified date range to return the full Clinical Data Set for that data category.
API - Getting All Patient Clinical Data	Using a patient data token, third-party requests all data categories for a specified date range to return the full Clinical Data Set as a C-CDA file.

Outcomes - Care Setting: Single-provider private Dermatology practice

Measurement/ Metric	Associated Certification Criteria	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered
Care Coordination - Receiving C-CDA Encounter Summaries via Direct Messaging	170.315 (b)(1) - Transitions of Care 170.315 (h)(1) - Direct Project	EMR Direct Version 2017	We tested our user base to get reporting values on C-CDAs received. We reported the numbers of C-CDAs received over the testing period as follows: 8 total C-CDA Encounter Summaries received at the practice. In all cases the patient summary record arrived from an outside source and documented/displayed the required clinical data elements.	
Care Coordination - Importing/Reconciliation of Clinical Data into Patient Chart	170.315 (b)(2) - Clinical Info Reconciliation and Incorporation	N/A	Users were able to choose to import clinical data transmitted by C-CDA into a patient's chart. We report the numbers of C-CDA documents reconciled into patient charts over the testing period as follows: Walked the office through how to manually reconcile the information for at least 1 CCDA received and the workflow was completed with no errors recorded.	
Care Coordination - Reconciliation of Clinical Data Into Encounters	170.315 (b)(2) - Clinical Info Reconciliation and Incorporation	N/A	Users were able to reconcile imported clinical data into a patient's encounter. We reported the number of C-CDA documents reconciled within patient encounters over the testing period as follows: Walked the office through how to manually reconcile the information for at least 1 CCDA received and the workflow was completed with no errors recorded.	
Clinical Documentation - Adding a Medication and	170.315 (b)(3) - Electronic Prescribing	N/A	Users were able to create new prescriptions per patient and send them electronically to a specified pharmacy. We tested to get	

Electronic Prescribing			reporting values on NewRx electronic prescriptions sent. We reported the number of NewRx electronic prescriptions that are successfully sent over the reporting period as follows: 343 successful submissions, 1 failed submission.	
Clinical Documentation - Management of Electronic Prescriptions	170.315 (b)(3) – Electronic Prescribing	N/A	Users were able to manage prescriptions per patient and review outgoing and incoming RX-related messages. We tested our user base to get reporting values on the management of different actions available to our users within the EZDERM Prescriptions module including, but not limited to, change and refill requests. We reported the numbers for these actions as follows: Total Refill Requests - 48, Approved Refill Requests - 12, Denied Refill Requests - 6, Canceled Rx - 0, Change Rx Requests - 15, Approved Change Rx Request - 2, Denied Change Rx Request - 1	
Care Coordination - Sending C-CDA Encounter Summaries via Direct Messaging	170.315 (b)(1) – Transitions of Care 170.315 (h)(1) – Direct Project	EMR Direct Version 2017	Users were able to generate a C-CDA file for any given patient and choose to send the file to an external provider via Direct Messaging. We tested a sample of our user base to get reporting values on C-CDAs sent as well as track C-CDA error occurrences. We reported the numbers of C-CDAs sent over the testing period as follows: 0 sent CCDAs.	Direct Messaging is not the primary method with which the user sends patient information via transitions of care, these were done via fax or efax.
Patient Engagement - Ability to Manage Health Information	170.315 (e)(1) – View, Download, and Transmit to 3rd Party	N/A	Clinical documentation is accessible to patients via the patient portal, where they can select the desired date range and generate their health information in the appropriate format and can transmit the data. We recorded	Patients unwilling to go through some of these workflows as part of a government mandated testing process.

			the instances of patient portal access by reporting the number of new patient accounts created, health information Viewed, Downloaded,, and Transmitted over the reporting period as follows: New patient portal accounts - 7, View Health Information - 1, Download Health Information - 0, Transmit Health Information - 0	
Clinical Quality Measures - Record and Export	170.315(c)(1) - Clinical Quality Measures (CQMs) — Record and Export	N/A	Users were able to capture the required elements for the selected CQMs and report the data in the proper data format. The measurement counted and listed the CQMs tracked and reported for over the reporting period as follows: Number of reported measures - 0, Number of files - 0	Users infrequently use the CQM section of the system as EZDERM offers a dedicated MACRA/MIPS reporting module.
Public Health - Cancer Registry Reporting	170.315 (f)(4) - Transmission to Cancer Registries	N/A	Users were able to generate cancer case data for patients with applicable diagnoses and generate a report that can be uploaded to state registries. We recorded the report(s) generated and transmitted by our users during the reporting period as follows: 0 Cancer Registry Report generated.	
Care Coordination - Data Export	170.315 (b)(6) - Data Export	N/A	Users were able to set up and export summaries for patients whose information is stored in the technology per the desired timeframe and frequency. We tracked and reported the frequency with which users utilize the Data Export functionality as follows: 1 Data Export requested	
API - Client Login and Access Token	170.315 (g)(7) - Application Access - Patient Selection	N/A	A patient can use their desired application and device and call the API, and then a token will be generated, upon authentication, for use in subsequent measures. We will track for any errors	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a

			detected during the retrieval and displaying of results. Errors encountered during the testing period: 0	test patient in the Care Setting account to ensure proper functionality via Postman
API - Getting Patient Clinical Data by Category	170.315 (g)(8) – Application Access - Data Category Request	N/A	Using the API and previously generated token, specific data categories will be able to be selected to generate the relevant clinical data for the selected timeframe. We will track for any errors detected during the retrieval and displaying of results. Errors encountered during the testing period: 0	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a test patient in the Care Setting account to ensure proper functionality via Postman
API - Getting All Patient Clinical Data	170.315 (g)(9) – Application Access - All Data Request	N/A	Using the API and previously generated token, information from all data categories will be generated into a complete C-CDA for the selected timeframe. We will track for any errors detected during the retrieval and displaying of results. Errors encountered during the testing period: 0	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a test patient in the Care Setting account to ensure proper functionality via Postman

Outcomes - Care Setting: Multi-provider private Dermatology practice

Measurement/ Metric	Associated Certification Criteria	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered
Care Coordination - Receiving C-CDA Encounter Summaries via	170.315 (b)(1) – Transitions of Care 170.315 (h)(1) – Direct Project	EMR Direct Version 2017	We tested our user base to get reporting values on C-CDAs received. We reported the numbers of C-CDAs received over the testing period as follows: 3 C-CDA Encounter Summaries received.	These users do not use Direct Messaging as primary communication

Direct Messaging				with other providers.
Care Coordination - Importing/Reconciliation of Clinical Data into Patient Chart	170.315 (b)(2) – Clinical Info Reconciliation and Incorporation	N/A	Users were able to choose to import clinical data transmitted by C-CDA into a patient's chart. We report the numbers of C-CDA documents reconciled into patient charts over the testing period as follows: 0 total reconciliations.	These users do not use Direct Messaging as primary communication with other providers.
Care Coordination - Reconciliation of Clinical Data Into Encounters	170.315 (b)(2) – Clinical Info Reconciliation and Incorporation	N/A	Users were able to reconcile imported clinical data into a patient's encounter. We reported the number of C-CDA documents reconciled within patient encounters over the testing period as follows: 0 total reconciliations	These users do not use Direct Messaging as primary communication with other providers.
Clinical Documentation - Adding a Medication and Electronic Prescribing	170.315 (b)(3) – Electronic Prescribing	N/A	Users were able to create new prescriptions per patient and send them electronically to a specified pharmacy. We tested to get reporting values on NewRx electronic prescriptions sent. We reported the number of NewRx electronic prescriptions that are successfully sent over the reporting period as follows: 497 successful submissions across 3 prescribers, 0 failed submissions.	
Clinical Documentation - Management of Electronic Prescriptions	170.315 (b)(3) – Electronic Prescribing	N/A	Users were able to manage prescriptions per patient and review outgoing and incoming RX-related messages. We tested our user base to get reporting values on the management of different actions available to our users within the EZDERM Prescriptions module including, but not limited to, change and refill requests. We reported the numbers for these actions as follows across 3 prescribers: Total Refill Requests - 56, Approved Refill Requests - 15, Denied Refill Requests - 20, Canceled Rx - 0, Change Rx Requests - 9, Approved	

			Change Rx Request - 8, Denied Change Rx Request - 1	
Care Coordination - Sending C-CDA Encounter Summaries via Direct Messaging	170.315 (b)(1) - Transitions of Care 170.315 (h)(1) - Direct Project	EMR Direct Version 2017	Users were able to generate a C-CDA file for any given patient and choose to send the file to an external provider via Direct Messaging. We tested a sample of our user base to get reporting values on C-CDAs sent as well as track C-CDA error occurrences. We reported the numbers of C-CDAs sent over the testing period as follows: 0 sent CCDAs.	Direct Messaging is not the primary method with which the user sends patient information via transitions of care, these were done via fax or efax.
Patient Engagement - Ability to Manage Health Information	170.315 (e)(1) - View, Download, and Transmit to 3rd Party	N/A	Clinical documentation is accessible to patients via the patient portal, where they can select the desired date range and generate their health information in the appropriate format and can transmit the data. We recorded the instances of patient portal access by reporting the number of new patient accounts created, health information Viewed, Downloaded,, and Transmitted over the reporting period as follows: New patient portal accounts - 31, View Health Information - 0, Download Health Information - 0, Transmit Health Information - 0	Patients unwilling to go through some of these workflows as part of a government mandated testing process.
Clinical Quality Measures - Record and Export	170.315(c)(1) - Clinical Quality Measures (CQMs) — Record and Export	N/A	Users were able to capture the required elements for the selected CQMs and report the data in the proper data format. The measurement counted and listed the CQMs tracked and reported for over the reporting period as follows: Number of reported measures - 0, Number of files - 0	Users did not use the CQM section of the system as EZDERM offers a dedicated MACRA/MIPS reporting module which they focused on.
Public Health - Cancer Registry Reporting	170.315 (f)(4) - Transmission to Cancer Registries	N/A	Users were able to generate cancer case data for patients with applicable diagnoses and generate a report that can be uploaded to state registries. We recorded the report(s) generated and transmitted	Users typically use this functionality during the 90-day period when gathering

			by our users during the reporting period as follows: 0 Cancer Registry Report generated.	data to be submitted as an optional part of the MIPS Promoting Interoperability Category. These users did not plan to submit for this category for the 2023 reporting year, meaning no report was generated during our testing. .
Care Coordination - Data Export	170.315 (b)(6) - Data Export	N/A	Users were able to set up and export summaries for patients whose information is stored in the technology per the desired timeframe and frequency. We tracked and reported the frequency with which users utilize the Data Export functionality as follows: 1 Data Export requested	
API - Client Login and Access Token	170.315 (g)(7) - Application Access - Patient Selection	N/A	A patient can use their desired application and device and call the API, and then a token will be generated, upon authentication, for use in subsequent measures. We will track for any errors detected during the retrieval and displaying of results. Errors encountered during the testing period: 0	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a test patient in the Care Setting account to ensure proper functionality via Postman
API - Getting Patient Clinical Data by Category	170.315 (g)(8) - Application Access - Data Category Request	N/A	Using the API and previously generated token, specific data categories will be able to be selected to generate the relevant clinical data for the selected timeframe. We will track for any errors detected during the retrieval and displaying of results. Errors	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a test patient in the Care Setting

			encountered during the testing period: 0	account to ensure proper functionality via Postman
API - Getting All Patient Clinical Data	170.315 (g)(9) – Application Access - All Data Request	N/A	Using the API and previously generated token, information from all data categories will be generated into a complete C-CDA for the selected timeframe. We will track for any errors detected during the retrieval and displaying of results. Errors encountered during the testing period: 0	Patients unwilling to use API to take to a third pary for generation of Application Access. Used a test patient in the Care Setting account to ensure proper functionality via Postman

KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Identified the user practices that will participate in the test plan.	Single-provider and multi-provider private Dermatology practice	Q1/Q2 2023
Confirmed that the Real World Test Plan participants are able to log into their accounts and are ready to start the testing.	Single-provider and multi-provider private Dermatology practice	Q3 2023
Initiated and conducted Real World Testing with participants	Single-provider and multi-provider private Dermatology practice	Q4 2023
Ended the Real World Test to coincide with the end of the 2023 calendar year.	Single-provider and multi-provider private Dermatology practice	December 2023

Real World Test analysis and generation of the report.	Single-provider and multi-provider private Dermatology practice	January 2024
Submitted Real World Test Report to ACB before established deadline.	Single-provider and multi-provider private Dermatology practice	January 2024

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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Date: 01/19/2024