2022 Real World Testing Results

Greenway Health

January 30, 2023

Contents

Real World Testing & Reporting Program Overview

Under the ONC Health IT Certification Program (**Program**), Health IT Developers are required to conduct Real World Testing of their Certified Health IT (45 CFR 170.556 and 170.523(i)). The Office of the National Coordinator for Health Information Technology (ONC) issues Real World Testing resources to clarify Health IT Developers' responsibilities for conducting Real World Testing, to identify topics and specific elements of Real World Testing that ONC considers a priority, and to assist Health IT Developers to develop their Real-World Testing plans.

Health IT Developers have maximum flexibility to develop innovative plans and measures for Real World Testing. As developers are planning for how they will execute Real World Testing, they should consider the overall complexity of the workflows and use cases within the care settings in which they market their Certified Health IT to determine which approaches they will take. Health IT Developers must submit one plan for each year of Real-World Testing.

Certified Product Information

Developer Name: Greenway Health, LLC
Developer Real World Testing Page URL (Plans and Results):
https://www.greenwayhealth.com/about/awards-and-certifications

Product Name	Version Number	Certified Health IT Product List (CHPL) ID	Withdrawn
Prime Suite	18	15.04.04.2913.Gree.18.01.1.210830	December 31, 2022
Intergy	12	15.04.04.2913.Gree.12.03.0.210830	December 31, 2022
Prime Suite Reporting	2020	15.04.04.2913.Gree.20.02.1.200929	October 26, 2022
Greenway Insights	20	15.04.04.2913.GINS.20.00.1.210121	November 1, 2022

Withdrawn Products

List of products Greenway withdrew from the CHPL in the last year that were included in the 2022 Real World Testing plan:

Product Name	Version Number	Inclusion of Data in Results Report/Notes
Prime Suite	18	Withdrawn and replaced with Cures Updated version v21. Some clients selected for the results upgraded sometime in December, no impact to results is anticipated.
Intergy	12	Withdrawn and replaced with Cures Updated version v21. Some clients selected for the results upgraded sometime in December, no impact to results is anticipated.
Prime Suite Reporting	2020	Yes, this version of the software was withdrawn within the last year, however this version was active at the time the result data was collected (1/1/2022-3/31/2022).
Greenway Insights	20	Yes, this version of the software was withdrawn within the last year, however this version was active at the time the result data was collected (1/1/2022-3/31/2022).

Standards Updates (SVAP and USCDI)

Product Name	Standard (and version)	Updated certification Criteria	CHPL Product Number	Conformance Measure
Prime Suite	USCDI v1	B1,B2,B6, B9,E1,G6, G9	15.04.04.2913.Gree.21 .02.1.220831	Some clients selected for the results upgraded to a Cures version sometime in December, no impact to results is anticipated.
Intergy	USCDI v1	B1,B2,B6, B9,E1,G6, G9	15.04.04.2913.Gree.21 .04.0.220831	Some clients selected for the results upgraded to a Cures version sometime in December, no impact to results is anticipated.
Prime Suite Reporting	N/A	N/A	N/A	N/A
Greenway Insights	N/A	N/A	N/A	N/A

Changes to Original Plan

Criteria	Summary of Change	Reason	Impact
170.315(e)(1) for Prime Suite and Intergy	The measure for Transmit was expanded from a single measure for all transmits, to different measures for the Transmit actions – encrypted vs unencrypted and was implemented in production prior to the date range selected.	The change occurred due to a product improvement identified during the writing of the plan.	2 metrics were collected vs the single metric identified in the plan.
170.315(b)(3) for Prime Suite and Intergy	Reduced metric date range from 90 days to 2 months.	SureScripts console is limited to last 2 months, limiting the window for capturing the previous 60 days.	No impact to transaction data collected, as electronic prescribing is used at a very high rate.
170.315(b)(6) Prime Suite and Intergy	The 3 measures for the number of times the batch export utility run by number of patients was combined to a single measure.	The intent of the batch export utility is to export all patients that meet the selected utility criteria. The granular patient subset counts would not verify the adoption of the utility.	1 metric was collected vs the three metrics identified in the plan.
170.315(h)(1) Prime Suite	Removed measure for number of delivery notifications sent from received messages.	EHR audit log pull for the 3 other metrics were from a limited set of clients, the partner data was for all clients, so we were unable to reconcile this metric to messages received.	No impact, as 3 other metrics remain for criteria.

Relied Upon Software Usage

The following relied upon software will be involved in the use of the software with these specific criteria and functional requirements:

Product	Criteria	Relied Upon Software Notes
Prime Suite	170.315(b)(1) 170.315(h)(1)	Updox provides the user interface for sending direct messages (to address, subject and body). Additionally, an API call is made by Updox back to the EHR to build the CCDA attachment for the message. This functionality will be used in testing the Send functionality.
Greenway Insights	170.315(c)(1)	Intergy is used for the record actions of clinical activity to capture the data needed to calculate the measures.
Prime Suite Reporting	170.315(c)(1) 170.315(c)(2) 170.315(c)(3)	• Able Health is the developer of the Prime Suite Reporting dashboard that Greenway white-labels for analytics calculations from the EHR and exports QRDA 1's & 3's. • Prime Suite is used for the record actions of C1 of clinical activity to capture the data needed to calculate the measures. • Greenway Insights is used for QRDA 1 import workflows.

Care Settings/Client Selection

Product	Care Settings Tested	Justification
Prime Suite & Prime Suite Reporting	**Primary Care** • Multi-Specialty • Family Medicine **Specialties** • Obstetrics/Gynecology • Pediatrics	• Prime Suite is marketed to a wide range of providers, primarily focusing on Ob-Gyn / Primary Care clients. • Functionality tested is the same across all care settings. • The care settings of the clients selected for testing account for 49% of the total client population.
Intergy & Greenway Insights	**Primary Care** • Multi-Specialty • Family Medicine • Community Health/CHC • FQHC • Tribal Health **Specialties** • Cardiology • Gastroenterology • Neurology • Obstetrics/Gynecology • Orthopedics • Pediatrics	• Intergy is marketed to a wide range of providers including, but not limited to: Primary Care, Cardiology, Orthopedics, Pediatrics, FQHC/CHCs, Tribal Health communities, Gastroenterology, Multi-Specialty groups, and Neurology. • Functionality tested is the same across all care settings. • The care settings of the clients selected for testing account for 55% of the total client population.

Summary Of Testing Methods

Consistent with the ONC's recommendation that "Real World Testing verify that deployed Certified Health IT continues to ***perform as intended by conducting and measuring observations of interoperability and data exchange***", our original test plan focused on capturing and documenting the number of instances that certified capability was successfully utilized in the real world. In instances where no evidence exists due to low or zero adoption of a certified capability or the inability to capture evidence of successful use for other reasons, we tested and demonstrated the required certified capability in a semi-controlled setting as close to a "real world" implementation as possible.
As per the test plan, we leveraged a 3-fold approach to demonstrate successful real-world implementations.

- Adoption Rate
- Summative Testing
- Interactive Testing

Adoption rate was used to determine if/when certified capability is being used in the real world and to help identify differences in care settings. Evidence of high rates of implementation and usage indicate (but don't by themselves prove) a certified capability's usefulness and practical value. Evidence of low rates of implementation and usage might be accounted for by patient volume, location or provider preference among other reasons. Note, it is not the goal of this exercise to identify the individual causes of why a given certified capability may have a high or low adoption rate, but rather to identify the users and care settings for which a given test is relevant.

Summative assessments were used to measure which certified actions were performed at the conclusion of a given time period where the time period was 90 days where possible. These results are typically obtained by generating reports and examining audit logs from within the certified health IT module to help demonstrate the frequency of actions within the given time frame, and where possible, whether those actions were successful or unsuccessful. High success rates should be an indicator of a successful implementation of a given certified capability in a real-world setting.

Interactive testing was used to demonstrate conformance to requirements where the adoption rate of a given certified capability is. The goal being to demonstrate the certified Health IT module being used in a way consistent within a practice or care setting.

- When adoption rates were expected to be zero per the plan, interactive tests were coordinated with clients and executed on their client production systems as opposed to examining historical usage statistics.
- When adoption rates were found to be zero during summative testing, interactive tests are executed on internal controlled/production like environments using the ONC provided test tools, procedures and patients.

This approach allowed for the successful testing and obtaining results for each criterion.

Metrics and Outcomes – EHR – Intergy

170.315(b)(1) Transitions Of Care

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 – December 31, 2022
Clients Sampled:	56 – CCDA's created & Sent 749 – Direct Messages Received
Adoption Rate:	41% of Intergy EHR clients are licensed for Direct Messaging
Method:	Summative Testing from Audit Logs and SureScripts Transaction Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to create CCDAs according to specified standards and vocabulary code sets, as well as send and receive CCDAs via edge protocols. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Furthermore, it is not feasible to obtain copies of CCDA documents from "outside" developers or providers who have no incentive to participate in this exercise. Finally, we do not differentiate between Direct Messages that do or do not contain an attachment in CCDA format. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often CCDAs are created and sent to other systems and when Direct Messages are received to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs and SureScripts transaction logs for 90-day periods was performed for the 170.315(b)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of CCDAs created	585,425
Number of CCDAs sent via edge protocols	1,172
Number of Direct Messages received via edge protocols, whether with or without CCDAs attached	594,508

170.315(b)(2) Clinical Information Reconciliation and Incorporation

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 – December 31, 2022
Clients Sampled:	56
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to take a CCDA received via an outside system and match it to the correct patient; reconcile the medication, allergy, and problem lists; and then incorporate the lists into the patient record. The expectation is each of these steps is done electronically within the certified Health IT module. While this certified capability is available to our users, most providers in the real world typically prefer to perform these steps manually and elect to save any outside received CCDAs as attachments to the patient record. Therefore, we intend to record the frequency that providers are electronically reconciling and incorporating CCDAs that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(2) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- We found low utilization by the selected clients reconciled problems, medications or allergies from received CCDA's, which is lower than the expected moderate utilization.
- Contributing to the low number is that received CCDA's from 3rd parties contain CCDA validation errors and Intergy prevents reconciliation in those cases as the data cannot be relied upon. In this scenario, our providers are viewing the received CCDA and manually reconciling the CCDA content to the chart.
- Additionally, the high likelihood of the information already existing on the chart will reduce the use of this functionality.

Measure	Metric Value
Number of times a user reconciled medication list data from a received CCDA	6
Number of times a user reconciled allergies and intolerance list data from a received CCDA	6
Number of times a user reconciled problem list data from a received CCDA	7

170.315(b)(3) Electronic Prescribing

Product	Intergy EHR
Date Range of Metrics:	November 1, 2022 – December 31, 2022
Clients Sampled:	1,374
Adoption Rate:	75% of Intergy EHR clients are licensed for e-Prescribing
Method:	Summative Testing from SureScripts Transaction Logs & Message Dashboard

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to perform prescription-related electronic transactions (eRx) using required standards. However, it is not possible to demonstrate the correct standards were used because it is not feasible to obtain copies of eRx documents from "outside" companies or pharmacies who have no incentive to participate. Therefore, we intend to demonstrate the required certified capabilities are effective by demonstrating how often eRx transactions are performed by examining reports from our eRx partner. This will demonstrate that not only are the eRx transactions sent from the certified Health IT module, but that the transactions are successfully received by the eRx clearinghouse. Our expectation is there will be high utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for a 2 month was performed for the 170.315(b)(3) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- The SureScripts dashboard indicated a success rate of 99.8% for new prescriptions created, further demonstrating a compliant solution.

Measure	Metric Value
Number of prescriptions created (NewRx)	5,284,763
Number of prescriptions changed (RxChangeResponse)	35,579
Number of prescriptions canceled (CancelRx)	515,734
Number of prescriptions renewed (RxRenewalResponse)	1,104,883

170.315(b)(6) Data Export

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 – December 31, 2022
Clients Sampled:	56
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to export a summary of a patient's record in CCDA format according to specified standards and vocabulary code sets. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Therefore, we intend to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(6) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- We found low utilization by the selected clients running the batch export utility, as expected.

Measure	Metric Value
Number of times a data export was performed	5

170.315(b)(9) Care Plan

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 – December 31, 2022
Clients Sampled:	56
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to record, change, access, create, and receive care plan information according to the specified format. We intend to record the frequency that record, change, access, and create care plan information to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(9) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- As expected, we found low utilization by the selected clients with generating a Care Plan CCDA document type.

Measure	Metric Value
Number of care plans recorded	447
Number of care plans changed	1,530
Number of care plans accessed	2,310
Number of care plans created	7

170.315(e)(1) View, Download & Transmit to Third Party

Product	Intergy EHR
Date Range of Metrics:	October 2, 2022-December 31, 2022
Clients Sampled:	55
Adoption Rate:	54% of Intergy EHR clients are onboarded to the Greenway Patient Portal
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to provide patients access to a patient portal with the ability to view, download, and send their health care records to other providers via encrypted or unencrypted transmission methods in CCDA format. We intend to record the frequency that patients are viewing, downloading, and transmitting their records from the portal using the certified capabilities to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by patients for view and lower utilization for download and transmit with a high success rate for all certified capabilities.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(e)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of views of health information by a patient or authorized representative	266,722
Number of downloads of health information by a patient or authorized representative	6,059
Number of transmissions of health information by a patient or authorized representative, using unencrypted email	455
Number of transmissions of health information by a patient or authorized representative, using encrypted(Direct) method	98

170.315(f)(1) Transmission to Immunization Registries

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 - December 31, 2022
Clients Sampled:	7
Adoption Rate:	20% of Intergy EHR clients have elected to connect to a registry
Method:	Summative Testing from Transmission Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to transmit immunization data to a registry using a specified format. We intend to record the frequency that immunization data is submitted to registries by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be low utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(f)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of immunization records submitted to the immunization registry	30,241

170.315(g)(7) Application Access-Patient selection
170.315(g)(8) Application Access-All Category Request
170.315(g)(9) Application Access-All Data Request

Product	Intergy EHR
Date Range of Metrics:	Interactive testing run on January 24, 2023
Clients Sampled:	1
Adoption Rate:	100% as functionality included in base software
Method:	Interactive Testing from Client Live Training Environment

Testing Justification and Expected Outcome:
This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request a unique patient identifier, patient data by category and patient data defined in the CCDS from the certified Health IT module that can be used to request additional patient data. We intend to record the frequency that patient token requests are received by providers via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be zero adoption of this certified capability by our users, so we have added interactive testing methodology for these capabilities to the test plan below to demonstrate the feature is available and functions as expected should any users elect to begin using this feature.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(g)(7), 170.315(g)(8) and 170.315(g)(9) criterion. Due to zero adoption of this criteria, interactive testing was performed on a client live training environment.
- The API calls were executed against 2 mock patients. The results of the interactive testing verified the functionality works as designed in a production environment.

Criteria	Measure	Metric Value
170.315(g)(7)	Number of requests for a patient token	2
170.315(g)(8)	Number of requests for a patient's data made by an application via a data category request using a valid patient token	2
170.315(g)(9)	Number of requests for a patient's Summary Record made by an application via an all-data category request using a valid patient token	2

170.315(h)(1) Direct Project

Product	Intergy EHR
Date Range of Metrics:	October 1, 2022 – December 31, 2022
Clients Sampled:	749
Adoption Rate:	41% of Intergy EHR clients are licensed for Direct Messaging
Method:	Summative Testing from SureScripts Transaction Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to record the frequency that direct messages are sent and received by providers, along with how often MDNs are sent and received. Since not all systems respond with MDNs, we cannot reliably use that metric to define success. Furthermore, it is not feasible to obtain copies of Direct Messages from "outside" developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(h)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of Direct Messages sent	84,069
Number of Delivery Notifications received	77,069
Number of Direct Messages received	594,508
Number of Delivery Notifications sent	490,471

Metrics and Outcomes - EHR - Prime Suite

170.315(b)(1) Transitions Of Care

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 – December 31, 2022
Clients Sampled:	10
Adoption Rate:	37% of Prime Suite EHR clients are licensed for Direct Messaging
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to create CCDAs according to specified standards and vocabulary code sets, as well as send and receive CCDAs via edge protocols. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Furthermore, it is not feasible to obtain copies of CCDA documents from "outside" developers or providers who have no incentive to participate in this exercise. Finally, we do not differentiate between Direct Messages that do or do not contain an attachment in CCDA format. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often CCDAs are created and sent to other systems to and when Direct Messages are received to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(b)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of CCDAs created	382,735
Number of CCDAs sent via edge protocols	917
Number of Direct Messages received via edge protocols, whether with or without CCDAs attached	7,215

170.315(b)(2) Clinical Information Reconciliation and Incorporation

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 – December 31, 2022
Clients Sampled:	10
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs Interactive Testing where Summative resulted in 0 adoption

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to take a CCDA received via an outside system and match it to the correct patient; reconcile the medication, allergy, and problem lists; and then incorporate the lists into the patient record. The expectation is each of these steps is done electronically within the certified Health IT module. While this certified capability is available to our users, most providers in the real world typically prefer to perform these steps manually and elect to save any outside received CCDAs as attachments to the patient record. Therefore, we intend to record the frequency that providers are electronically reconciling and incorporating CCDAs that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(2) criterion.
- We found none of the selected clients reconciled problems, medications or allergies from received CCDA's.
    - Greenway performed interactive testing on internal controlled/production like environments using the ONC provided test procedures and patients associated with 170.315(b)(2). No issues were found, affirming compliance with the requirements.
- Contributing to the low number is that received CCDA's from 3rd parties contain CCDA validation errors and Prime Suite prevents reconciliation in those cases as the data cannot be relied upon. In this scenario, our providers are viewing the received CCDA and manually reconciling the CCDA content to the chart.
- Additionally, the high likelihood of the information already existing on the chart will reduce the use of this functionality.

Measure	Metric Value
Number of times a user reconciled medication list data from a received CCDA	0
Number of times a user reconciled allergies and intolerance list data from a received CCDA	0

Number of times a user reconciled problem list data from a received CCDA	0

170.315(b)(3) Electronic Prescribing

Product	Prime Suite EHR
Date Range of Metrics:	November 1, 2022 – December 31, 2022
Clients Sampled:	1,118
Adoption Rate:	97% of Prime Suite EHR clients are licensed for e-Prescribing
Method:	Summative Testing from SureScripts Transaction Logs & Message Dashboard

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to perform prescription-related electronic transactions (eRx) using required standards. However, it is not possible to demonstrate the correct standards were used because it is not feasible to obtain copies of eRx documents from "outside" companies or pharmacies who have no incentive to participate. Therefore, we intend to demonstrate the required certified capabilities are effective by demonstrating how often eRx transactions are performed by examining reports from our eRx partner. This will demonstrate that not only are the eRx transactions sent from the certified Health IT module, but that the transactions are successfully received by the eRx clearinghouse. Our expectation is there will be high utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for a 2 month was performed for the 170.315(b)(3) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- The SureScripts dashboard indicated a success rate of 99.4% for new prescriptions created, further demonstrating a compliant solution.

Measure	Metric Value
Number of prescriptions created (NewRx)	3,007,728
Number of prescriptions changed (RxChangeResponse)	477
Number of prescriptions canceled (CancelRx)	348,239
Number of prescriptions renewed (RxRenewalResponse)	460,755

170.315(b)(6) Data Export

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 – December 31, 2022
Clients Sampled:	10
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs Interactive Testing where Summative resulted in 0 adoption

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to export a summary of a patient's record in CCDA format according to specified standards and vocabulary code sets. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Therefore, we intend to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(6) criterion.
- We found none of the selected clients utilized the batch export functionality.
    - Greenway performed interactive testing on internal controlled/production like environments using the ONC provided test procedures associated with 170.315(b)(6). No issues were found, affirming compliance with the requirements.

Measure	Metric Value
Number of times a data export was performed	0

170.315(b)(9) Care Plan

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 – December 31, 2022
Clients Sampled:	10
Adoption Rate:	100% as functionality included in base software
Method:	Summative Testing from Audit Logs Interactive Testing where Summative resulted in 0 adoption

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to record, change, access, create, and receive care plan information according to the specified format. We intend to record the frequency that record, change, access, and create care plan information to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be very low utilization by providers with a high success rate.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(b)(9) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.
- We found none of the selected clients created a Care Plan CCDA document type.
    - Greenway performed interactive testing on internal controlled/production like environments using the ONC provided test procedures and patients associated with 170.315(b)(9). No issues were found, affirming compliance with the requirements.

Measure	Metric Value
Number of care plans recorded	90
Number of care plans changed	286
Number of care plans accessed	388
Number of care plans created	0

170.315(e)(1) View, Download & Transmit to Third Party

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 - December 31, 2022
Clients Sampled:	32
Adoption Rate:	58% of Prime Suite EHR clients are onboarded to the Greenway Patient Portal
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to provide patients access to a patient portal with the ability to view, download, and send their health care records to other providers via encrypted or unencrypted transmission methods in CCDA format. We intend to record the frequency that patients are viewing, downloading, and transmitting their records from the portal using the certified capabilities to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by patients for view and lower utilization for download and transmit with a high success rate for all certified capabilities.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(f)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of views of health information by a patient or authorized representative	189,528
Number of downloads of health information by a patient or authorized representative	2,122
Number of transmissions of health information by a patient or authorized representative, using unencrypted email	157
Number of transmissions of health information by a patient or authorized representative, using encrypted(Direct) method	54

170.315(f)(1) Transmission to Immunization Registries

Product	Prime Suite EHR
Date Range of Metrics:	October 1, 2022 - December 31, 2022
Clients Sampled:	7
Adoption Rate:	20% of Prime Suite EHR clients have elected to connect to a registry
Method:	Summative Testing from Transmission Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to transmit immunization data to a registry using a specified format. We intend to record the frequency that immunization data is submitted to registries by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be low utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(e)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of immunization records submitted to the immunization registry	14,089

170.315(g)(7) Application Access-Patient selection
170.315(g)(8) Application Access-All Category Request
170.315(g)(9) Application Access-All Data Request

Product	Prime Suite EHR
Date Range of Metrics:	Interactive testing run on January 23, 2023
Clients Sampled:	1
Adoption Rate:	100% as functionality included in base software
Method:	Interactive Testing from Client Live Training Environment

Testing Justification and Expected Outcome:
This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request a unique patient identifier, patient data by category and patient data defined in the CCDS from the certified Health IT module that can be used to request additional patient data. We intend to record the frequency that patient token requests are received by providers via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be zero adoption of this certified capability by our users, so we have added interactive testing methodology for these capabilities to the test plan below to demonstrate the feature is available and functions as expected should any users elect to begin using this feature.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(g)(7), 170.315(g)(8) and 170.315(g)(9) criterion. Due to zero adoption of this criteria, interactive testing was performed on a client live training environment.
- The API calls were executed against 2 mock patients. The results of the interactive testing verified the functionality works as designed in a production environment.

Criteria	Measure	Metric Value
170.315(g)(7)	Number of requests for a patient token	2
170.315(g)(8)	Number of requests for a patient's data made by an application via a data category request using a valid patient token	2
170.315(g)(9)	Number of requests for a patient's Summary Record made by an application via an all-data category request using a valid patient token	2

170.315(h)(1) Direct Project

Product	Prime Suite EHR
Date Range of Metrics:	October 2, 2022 – December 31, 2022
Clients Sampled:	10
Adoption Rate:	37% of Prime Suite EHR clients are licensed for Direct Messaging
Method:	Summative Testing from Audit Logs

Testing Justification and Expected Outcome:
This criterion requires the ability of a certified Health IT module to record the frequency that direct messages are sent and received by providers, along with how often MDNs are sent and received. Since not all systems respond with MDNs, we cannot reliably use that metric to define success. Furthermore, it is not feasible to obtain copies of Direct Messages from "outside" developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Testing Summary:
A query on historical audit logs for 90-day periods was performed for the 170.315(h)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Measure	Metric Value
Number of Direct Messages sent	914
Number of Delivery Notifications received	2,365
Number of Direct Messages received	7,215

Metrics and Outcomes – Analytics – Greenway Insights

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

Product	Greenway Insights (Regulatory Reporting tool for Intergy EHR)
Date Range of Metrics:	January 1, 2022 – March 31, 2022
Clients Sampled:	22
Adoption Rate:	47% of Intergy EHR clients are onboarded to the regulatory reporting dashboard
Method:	Summative Testing from Audit Logs Interactive Testing where Summative resulted in 0 adoption

Testing Justification and Expected Outcome:
C1 requires a certified Health IT module to record required data, calculate CQMs from the recorded data, and export the data in a QRDA 1. C2 requires a certified Health IT module must be able to import data from a QRDA 1 and calculate the CQMs based on that data. C3 requires a must be able to create a QRDA 1 and a QRDA 3 to be used for transmitting CQM data to CMS. We intend to record the frequency that QRDA files are imported and/or exported by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be high utilization of QRDA 3 exports by providers with a high success rate. Additionally, our expectation is there will be low utilization of QRDA 1 exports and imports in the ambulatory space.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(c)(1-3) criterion.
- QRDA 1&3 exports were as expected with number of clients selected.
- QRDA III exports are likely lower due to available exceptions with regulatory reporting program as well as additional collection types available for regulatory reporting that do not require the use of QRDA III.
- QRDA 1 imports, as noted in our test plan, utilization in the ambulatory market was expected to be low. We found none of the selected clients imported QRDA 1's during the selected date range.
    - Greenway performed interactive testing on internal controlled/production like environments using the ONC provided Cypress tool. No issues were found, affirming compliance with the requirements.

Criteria	Measure	Metric Value
170.315(c)(1)	Number of measures recorded during the period	30
170.315(c)(1)	Number of QRDA Category 1 files exported	6
170.315(c)(2)	Number of QRDA Category 1 files imported	0
170.315(c)(3)	Number of QRDA Category 3 aggregate report(s) created over the period	16

Metrics and Outcomes – Analytics – Prime Suite Reporting

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

Product	Prime Suite Reporting (Regulatory Reporting tool for Prime Suite EHR)
Date Range of Metrics:	January 1, 2022 – March 31, 2022
Clients Sampled:	7
Adoption Rate:	84% of Prime Suite EHR clients are onboarded to the Regulatory Reporting dashboard
Method:	Summative Testing from Audit Logs Interactive Testing where Summative resulted in 0 adoption

Testing Justification and Expected Outcome:
C1 requires a certified Health IT module to record required data, calculate CQMs from the recorded data, and export the data in a QRDA 1. C2 requires a certified Health IT module must be able to import data from a QRDA 1 and calculate the CQMs based on that data. C3 requires a must be able to create a QRDA 1 and a QRDA 3 to be used for transmitting CQM data to CMS. We intend to record the frequency that QRDA files are imported and/or exported by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be high utilization of QRDA 3 exports by providers with a high success rate. Additionally, our expectation is there will be low utilization of QRDA 1 exports and imports in the ambulatory space.

Testing Summary:

- A query on historical audit logs for 90-day periods was performed for the 170.315(c)(1-3) criterion.
- QRDA 1&3 exports were as expected with number of clients selected.
- QRDA III exports are likely lower due to available exceptions with regulatory reporting program as well as additional collection types available for regulatory reporting that do not require the use of QRDA III.
- QRDA 1 imports, as noted in our test plan, utilization in the ambulatory market was expected to be low. We found none of the selected clients imported QRDA 1's.
    - Greenway performed interactive testing on internal controlled/production like environments using the ONC provided Cypress tool. No issues were found, affirming compliance with the requirements.

Criteria	Measure	Metric Value
170.315(c)(1)	Number of measures recorded during the period	16
170.315(c)(1)	Number of QRDA Category 1 files exported	190
170.315(c)(2)	Number of QRDA Category 1 files imported	0
170.315(c)(3)	Number of QRDA Category 3 aggregate report(s) created over the period	12

Key Milestones

Key Milestones	Date/Timeframe
Implemented audit logging changes identified during plan creation	November 2021-April 2022
Scheduling and logistics	January 2022
Executed Summative Testing	December 2022 -January 2023
Executed Interactive Testing	January 2023
Review and Collate Data from Adoption Rates, Summative Assessment and Interactive Testing	January 2023
Writing Report	January 2023

Attestation

- This Real-World Testing Results Report is complete with all required elements, including measures that address all certification criteria and care settings. All information in this results report is up to date and fully addresses the Health IT Developer's Real World Testing requirements.
- No ONC non-conformities were found during the execution of the plan and analyzing the results.

Authorized Representative:

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Title	Chief Product & Technology Officer
Email	david.cohen@greenwayhealth.com
Date	January 30, 2023
Signature