

REAL WORLD TESTING RESULTS REPORT

BACKGROUND & INSTRUCTIONS

Under the ONC Health IT Certification Program (Certification Program), health IT developers are required to conduct Real World Testing of their certified health IT (45 CFR 170.405). 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 in developing their Real World Testing plans and results reports.

[A Real World Testing plan template](#) was created to assist health IT developers in organizing the required information that must be submitted for each element in their Real World Testing plan. To accompany the plan template, ONC has also provided this results report template.

While the use of this template is voluntary, health IT developers may find it useful in preparing their Real World Testing results report(s). Health IT developers must submit one year of results to address the Real World Testing of eligible products as outlined in their previous year's Real World Testing plan(s). If adjustments to approaches are made throughout Real World Testing, the health IT developer should reflect these adjustments in their Real World Testing results report. ONC expects that the results report will include a list of these changes, the reasons for them, and how intended outcomes were more efficiently met as a result.

While every effort has been made to ensure the accuracy of restatements of 45 CFR Part 170, this template is not a legal document. The official program requirements are contained in the relevant laws and regulations. This resource should be read and understood in conjunction with the following companion resources, which describe in detail many of the Certification Program requirements referenced in this resource.

- [Real World Testing–What It Means for Health IT Developers – Fact Sheet](#)
- [Real World Testing Resource Guide](#)
- [Real World Testing Certification Companion Guide](#)

Health IT developers should also review the following regulatory materials, which establish the core requirements and responsibilities for Real World Testing under the Certification Program.

- 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program final rule, [85 FR 25642](#) (May 1, 2020) (**ONC Cures Act Final Rule**)
 - [Section VII.B.5](#) — “Real World Testing”

TEMPLATE INSTRUCTIONS

The following template is organized by elements required to be submitted in the Real World Testing results report. Each section provides a field for submitting responses and/or explanations for how the health IT developer addressed each required element in their Real World Testing approach. These fields serve as a foundation of information required for developing a Real World Testing results report and can be expanded with additional rows or columns to address the specific needs of the Real World Testing results being submitted.

GENERAL INFORMATION

Plan Report ID Number: [For ONC-Authorized Certification Body use only] Developer Name: Press

Ganey Associates LLC

Product Name(s):Quality Performer HeM (Hospital Electronic Measures) Module Version

Number(s): 1.5

Certified Health IT Product List (CHPL) Product Number(s): 15.04.04.2834.Qual.15.00.0.181231

Developer Real World Testing Plan Page URL: [Quality performer certification | Press Ganey](#)

Developer Real World Testing Results Report Page URL [if different from above]:

[OPTIONAL] CHANGES TO ORIGINAL PLAN

If a developer has made any changes to their approach for Real World Testing that differs from what was outlined in their plan, note these changes here.

Summary of Change [Summarize each element that changed between the plan and actual execution of Real World Testing]	Reason [Describe the reason this change occurred]	Impact [Describe what impact this change had on the execution of your Real World Testing activities]
A request to client to give us the Total population per eCQM for each Quarter for § 170.315(c)(2) Import from a client's EHR for Reporting purposes.	It was realized that for better Import comparison, the client's counts compared to Press Ganey Counts would be a better measure of success	A Press Ganey Advisor for the Client has worked with the Client to obtain these total population counts per Measure from the Client's Epic EHR system. However, the client cannot obtain these total population numbers from their EHR system. This comparison is not available currently.

[OPTIONAL] WITHDRAWN PRODUCTS

If a developer withdrew any products within the past year that were previously included in their Real World Testing plan, please provide the following information.

Product Name(s):	NA
Version Number(s):	NA
CHPL Product Number(s):	NA
Date(s) Withdrawn:	NA
Inclusion of Data in Results Report: [Provide a statement as to whether any data was captured on the withdrawn products. If so, this data should be identified in the results report.]	NA

SUMMARY OF TESTING METHODS AND KEY FINDINGS

Provide a summary of the Real World Testing methods deployed to demonstrate real-world interoperability, including any challenges or lessons learned from the chosen approach. Summarize how the results that will be shared in this report demonstrate real-world interoperability.

If any non-conformities were discovered and reported to the ONC-ACB during testing, outline these incidences and how they were addressed.

Note: A single Real World Testing results report may address multiple products and certification criteria for multiple care settings.

§ 170.315(c)(1) Record and Export

This use case tracks the ability to upload a client file, a QRDA I file, with accurate case counts when compared to the QRDA export file.

The client uploaded Q1, Q2 and Q3 Data to a production facility (10231) set up for this testing. The Measures included: eOPI-1, eSTK-2, eSTK-5, eSTK-6
QRDA files uploaded without errors, based on the counts of cases on the Data Upload HeM page
The number of QRDA files uploaded each Quarter for each Measure vs the number of cases seen in the HeM Application:

Measures Uploaded Q1 2022 Data 8/6/2022	Number of Client Patients in each eMeasure Files Uploaded- 1344 Total	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	102 in Pop 18 Not in Pop	0	119/120
eSTK-5 (CMS72)	Unable to obtain	102 in Pop 18 Not in Population	0	119/120
eSTK-6 (CMS105)	Unable to obtain	102 in Population 18 Not in Population	0	119/120
eOPI-1 (CMS506)	Unable to obtain	1244 In Population	0	1159/1244

Measures Uploaded Q2 2022 Data	Number of Client QRDA Files Uploaded-1390 Total	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	130 in Population 35 Not in Population	0	162/165
eSTK-5 (CMS72)	Unable to obtain	130 in Population 35 Not in Population	0	162/165
eSTK-6 (CMS105)	Unable to obtain	130 in Population 35 Not in Population	0	162/165
eOPI-1 (CMS506)	Unable to obtain	1252 in Population	0	1173/1252

Measures Uploaded Q3 2022 Data	Number of Client QRDA Files Uploaded -1453 Total	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	133 in Population 17 Not in Population	0	149/150
eSTK-5 (CMS72)	Unable to obtain	133 in Population 17 Not in Population	0	149/150
eSTK-6 (CMS105)	Unable to obtain	133 in Population 17 Not in Population	0	149/150
eOPI-1 (CMS506)	Unable to obtain	1357	0	1238/1357

§ 170.315(c)(2) Import from a client's EHR

This case count verifies that the number of cases imported is equal to the number of cases that will be evaluated for the eCQM Initial Patient Population, Denominator, Denominator Exclusion, Numerator and Denominator Exception case results. The case counts evaluated can fall into multiple measures or not qualify for any Measure.

Measures Uploaded Q1 2022 Data	Total Population per eMeasure per Quarter in Epic	Number of Cases Total in IPP-Z + Denominator-D + Denominator Exclusion-B + Numerator-E + Denominator Exceptions-O	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	120	NA
eSTK-5 (CMS72)	Unable to obtain	120	NA
eSTK-6 (CMS105)	Unable to obtain	120	NA
eOPI-1 (CMS506)	Unable to obtain	1244	NA

Measures Uploaded Q2 2022 Data	Total Population per eMeasure per Quarter in Epic	Number of Cases Total in IPP-Z + Denominator-D + Denominator Exclusion-B + Numerator-E + Denominator Exceptions-O	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	165	NA
eSTK-5 (CMS72)	Unable to obtain	165	NA
eSTK-6 (CMS105)	Unable to obtain	165	NA
eOPI-1 (CMS506)	Unable to obtain	1252	NA

Measures Uploaded Q3 2022 Data	Total Population per eMeasure per Quarter in Epic	Number of Cases Total in IPP-Z + Denominator-D + Denominator Exclusion-B + Numerator-E + Denominator Exceptions-O	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	150	NA
eSTK-5 (CMS72)	Unable to obtain	150	NA
eSTK-6 (CMS105)	Unable to obtain	150	NA
eOPI-1 (CMS506)	Unable to obtain	1357	NA

§ 170.315(c)(3) Report

The CMS Report verifies the success of transmission/reporting and any issues (QRDA I is not missing any required data elements).

Q1 Report Summary

Measure Category	In Population Case Count	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS - eSTK-2	120	1	54	47	0
PG - eSTK-2	120	1	54	47	0
CMS - eSTK-5	120	8	20	72	2
PG - eSTK-5	120	8	20	72	2
CMS - eSTK-6	120	1	54	42	5
PG - eSTK-6	120	1	54	42	5
CMS - eOPI-1	1244	759	339	146	NA
PG - eOPI-1	1244	759	339	146	NA

Q2 Report Summary

Measure Category	In Population Case Count	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS - eSTK-2	165	0	58	72	0
PG - eSTK-2	165	0	58	72	0
CMS - eSTK-5	165	5	26	97	2
PG - eSTK-5	165	5	26	97	2
CMS - eSTK-6	165	0	58	70	2
PG - eSTK-6	165	0	58	70	2
CMS - eOPI-1	1252	774	328	150	NA
PG - eOPI-1	1252	774	328	150	NA

Q3 Report Summary

Measure Category	In Population Case Count	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS - eSTK-2	150	0	65	68	0
PG - eSTK-2	150	0	65	68	0
CMS - eSTK-5	150	10	18	103	2
PG - eSTK-5	150	10	18	103	2
CMS - eSTK-6	150	0	65	61	7
PG - eSTK-6	150	0	65	61	7
CMS - eOPI-1	1357	881	323	153	NA
PG - eOPI-1	1357	881	323	153	NA

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

Both required and voluntary standards updates must be addressed in the Real World Testing plan. Real World Testing plans must include all certified health IT updated to newer versions of standards prior to August 31 of the year in which the updates were made.

Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).

Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.

No, none of my products include these voluntary standards.

Standard (and version)	
Updated certification criteria and associated product	
CHPL Product Number	
Conformance measure	

Care Setting(s)

The expectation is that a developer's Real World Testing is conducted within each type of clinical setting in which their certified health IT is marketed. Health IT developers are not required to test their certified health IT in every setting in which it is marketed for use.

List each care setting that was tested.

The HeM Module contains both inpatient and emergency department patient data. The use of the Module, however, is not within the physical inpatient and emergency department care settings. The HeM Module is used by the Quality Department and/or the Information Technology Department in their physical space. Often the two departments work together to upload files, evaluate the HeM Module data and performance results.

Metrics and Outcomes

Health IT developers should detail outcomes from their testing that successfully demonstrate that the certified health IT:

1. is compliant with the certification criteria, including the required technical standards and vocabulary codes sets;
2. is exchanging electronic health information (EHI) in the care and practice settings for which it is marketed for use; and/or,
3. EHI is received by and used in the certified health IT.

(from 85 FR 25766)

Health IT developers could also detail outcomes that did not result from their measurement approach if that better describes their efforts.

Within this section, health IT developers should also describe how the specific data collected from their Real World Testing measures demonstrate their results. Where possible, context should be provided to the measures and results to understand the number of sites/users/transactions tested for the specified measures (i.e., the denominator for comparison to the reported results). If applicable, any Relied Upon Software that is used to meet a criterion's requirements should be included in this section.

Measurement /Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
Record and Export	§ 170.315(c)(1)	Quality Performer Hospital eMeasures Module v1.5	QRDA files and Case Counts are comparable, more than one case per patient file results in a slightly higher case count	Finding the specific files with more than one episode of care per QRDA file.
Import from a client's EHR	§ 170.315(c)(2)	Quality Performer Hospital eMeasures Module v1.5	Client confirms that Quality Performer counts are what they use and are correct	Having a baseline from the client Electronic Health Record for an exact comparison. Not available per client.
Report	§ 170.315(c)(3)	Quality Performer Hospital eMeasures Module v1.5 CMS Data Submission Portal	Quality Performer HeM Module Case counts for each Measure/Measure Category Assignment matched the CMS Outcomes Report	None

KEY MILESTONES

Include a list of key milestones that were met during the Real World Testing process. Include details on how and when the developer implemented measures and collected data. Key milestones should be relevant and directly related to outcomes discussed.

For each key milestone, describe when Real World Testing began in specific care settings and the date/timeframe during which data was collected.

Key Milestone	Care Setting	Date/Timeframe
1Q-2022: Begin communication with a client and a backup client to ask for their support and participation in real-world testing. The goal is to have clients committed for real world	Quality and IT Departments	1/21/2022 12:00 One hour webinar Written Instructions Provided: 8/1/2022



<p>testing by the end of 1Q-2022.</p>		
<p>2Q-3Q 2022: During the 2nd , 3rd and 4th quarter of CY 2022, clients can upload their data files to the HeM Module. During this time clients work with Press Ganey Clinical Advisors to evaluate their performance data, the quality of their electronic file, and work with their EHR (Electronic Health Record) vendor to identify any corrections needed if the EHR vendor’s QRDA (Quality Reporting Document Architecture) output file is the one being sent to Press Ganey for evaluation. It is expected that a preparatory call will be done with clients to prepare them for testing activities. Results will be documented in the test results section of the test methods and ultimately used to build the test report. If any non-compliances are observed, we will notify the ONC-ACB (Office of the National Coordinator – Authorized Certification Bodies) of the findings and make the necessary changes required.</p>	<p>Quality and IT Departments</p>	<p>First Upload of Q1 2022 Data: 8/5/2022 Q2 and Q3 Data loaded 12/6/2022 into Test Production Environment Facility 10231. Reloading Q1 Data after clearing original load 12/6/2022</p>
<p>4Q-2022: During the last quarter of the year, the CMS (Centers for Medicare & Medicaid Services) test environment opens to allow submission of HeM data. Results, such as file rejection, and issues with the file are published in a report. Press Ganey downloads this report. The Clinical Advisor reviews the results with the client. File corrections are made and another upload, or cycles of file corrections and uploads to the CMS test environment occur until the client is satisfied and there are no rejections or file missing data elements. The RWT Report will be prepared for submission after the Transmission testing has occurred.</p>	<p>Press Ganey Transmissions Team with CMS Test Environment</p>	<p>Some transmission testing started in Q4 2022 and continues into CMS Test Environment into Q1 2023. Last done on 1/11/2023</p>
<p>February of 2023: Document our CY 2022 test results into our RWT Report and submit them to our ONC-ACB.</p>		