



**ONC 21<sup>st</sup> Century Cures Certification  
§170.405 Real World Testing  
2022 Real World Test Results Report**

Compulink Healthcare Solutions, Inc  
CHPL ID 15.04.04.2701.Comp.12.00.1.171106  
Product Version 12  
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## COMPULINK HEALTHCARE SOLUTIONS CERTIFIED HEALTH IT 2022 REAL WORLD TESTING RESULTS REPORT

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## COMPULINK HEALTHCARE SOLUTIONS CERTIFIED HEALTH IT 2022 REAL WORLD TESTING RESULTS REPORT

### BACKGROUND AND INSTRUCTIONS

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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.

Real World Testing is a process by which health IT developers demonstrate interoperability and functionality of their certified health IT in real world settings and scenarios, rather than in a controlled test environment with an ONC-Authorized Testing Lab (ONC-ATL). Compulink's Real World Testing verifies that the deployed Advantage certified health IT continues to perform as intended by conducting and measuring observations of interoperability and data exchange.

These observations are described in this report which is based on the Compulink Healthcare Solutions 2022 Real World Test Plan. This report summarizes Compulink's 2022 Real World Testing process, metrics, and results, as measured, and demonstrated, for the fully executed and functional interoperability features in the Advantage product within the real world production environment of study participants representing all Compulink marketed specialties.

This report is based on the ONC Real World Test Results template, provided to accompany the [Real World Testing Plan Template](#) created to assist health IT developers in organizing the required information that must be submitted for each element in their Real World Testing plan.

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. This report will indicate there were no adjustments to approaches made throughout Compulink's Real World Testing. Results from all Real World Testing will be reflected in this Real World Testing results report.

This report is based on a review the following regulatory materials, which establish the core requirements and responsibilities for Real World Testing under the Certification Program. Relevant laws and regulations which detail the Certification Program requirements were utilized as a resource for Real World Testing and Real World Results Reporting.

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

## INTRODUCTION

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This document contains a report of the steps taken to conduct the annual Real World Testing requirements for ONC certification. The Results within this document were recorded in spreadsheets, video, and screenshots for their compliance with the criteria defined in the test plan. These artifacts will be maintained by the health IT developer for audit purposes or further requests.

## GENERAL INFORMATION

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Plan Report ID Number:	[For ONC-Authorized Certification Body use only]
Developer Name:	Compulink Healthcare Solutions, Inc.
Product Name(s):	Compulink Advantage
Version Number(s):	Version 12
Certified Health IT Product List (CHPL) ID(s):	15.04.04.2701.Comp.12.00.1.171106
Developer Real World Testing Page URL:	<a href="https://www.compulinkadvantage.com/cures-certification-rwt/">https://www.compulinkadvantage.com/cures-certification-rwt/</a>

## CHANGES TO ORIGINAL PLAN

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Compulink Healthcare Solutions had no deviations and made no changes to the elements of their approach for Real World Testing that differs from the information outlined in the Compulink Advantage 2022 Real World Test Plan. There was no indication or reason to make any changes to this plan and thus, there were no impacts on the execution of Real World Testing activities.

Summary of Change [Summary of each element that changed between the plan and actual execution of Real World Testing]	Reason [the reason this change occurred]	Impact [Impact this change had on the execution of Real World Testing activities]
Non-Applicable	Non-Applicable	Non-Applicable

## WITHDRAWN PRODUCTS

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Compulink Healthcare Solutions, Inc. has not withdrawn any products within the past year that were previously included in their Real World Testing plan.

## SUMMARY OF TESTING METHODS AND KEY FINDINGS

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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*”, Compulink’s original test plan focused on capturing and documenting the number of instances that certified capability was successfully utilized in the real world. To demonstrate real-world interoperability, Compulink applied the use of automated testing metrics to collect end-user data from real patients in a live production environment, to demonstrate the deployment interoperability works as intended in a real world environment. Compulink compiles end user data through calculated feedback automation, based on the number of instances a specific action is performed in the Advantage software. This approach provides high accuracy results while collecting data on end user interoperability workflows from real patients, in real time, while accessing a real world production environment. The end user is not required to be actively involved in testing resulting in minimal disruption to the user’s daily activities. The test coordinator has no effect on outcomes and results using this method.

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, Compulink leveraged a 3-fold approach to demonstrate successful real-world implementations. A single Real World Test Plan was used to address multiple care settings where workflows parallel similar paths to achieve measure outcomes.

- 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 minimum time period was 90 days and longer 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 zero and to demonstrate ongoing compliance with updated standards and code sets (SVAP). Interactive tests were live tested as opposed to examining historical usage statistics. The goal being to demonstrate the certified Health IT module being used in a way consistent within a practice or care setting.

This approach allowed for the successful testing and obtaining results for each criterion. Additional supporting data is detailed in the [Metrics and Outcomes](#) section of a Summative result(s) or Interactive test outcome for each certified criteria for **Compulink Healthcare Solutions Advantage Product**.

## 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. Compulink's Real World Testing plans include all certified health IT updated to newer versions of standards prior to August 31 of the year in which the updates were made.

Optional standards, via SVAP and/or USCDI, were not 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
N/A	N/A	N/A	N/A

## CARE SETTING(S)

Ongoing Maintenance of Certification requirements specify that Certified Health IT Developers must develop a plan and submit a results report for applicable certification criteria on an annual cycle for each of the setting types in which their Certified Health IT Module(s) are marketed. Health IT developers are not required to test their certified health IT in every setting in which it is marketed for use. Compulink's Real World Testing was conducted within each of the clinical setting types in which its Certified Health IT Module(s) are marketed. Compulink Healthcare Solutions currently markets to seventeen medical specialties. There were no changes to the care settings tested from the 2022 Real World Test Plan Care Settings. Each of these specialties have been bundled and included in the care settings indicated in the below table. One Real-World testing case scenario, interactive test plan and summative data file was used for all care settings to address the product interoperability.

Care Setting	Justification
Behavioral Health	This care setting comprises the third largest care setting among Compulink's user base. It includes behavioral health specialties including Psychology, Psychiatry, Addiction, and Pain Management. Behavioral health practices have stricter privacy rules than other specialties, which alters how providers implement certified Health IT modules.
Ophthalmic	This care setting comprises nearly 80% of Compulink's user base. It includes specialties comprising of, Ophthalmology, Ophthalmic Ambulatory Surgery Centers (ASC), and Optometry. This care setting was distinguished because it comprises such a large percentage of Compulink's user base.
Orthopedic	This care setting comprises the second largest care setting among Compulink's user base. It includes specialties encompassing Chiropractic, Orthopedics, Physical Therapy, and Podiatry. Several of the providers in this care setting are not permitted to issue prescriptions, so they oftentimes use fewer features than other care settings but differ from Otolaryngology in that they focus on different systems.
Otolaryngology	This care setting includes specialties comprising Audiology and Otolaryngology (ENTs). Several of the providers in this care setting are not permitted to issue prescriptions, so they oftentimes use fewer features than other care settings but differ from Orthopedics in that they focus on different systems.
Other Specialties	This care setting is comprised of all other specialties in Compulink's user base, including Dermatology, Gastroenterology, Primary Care, and Urology.



## TEST PARTICIPANTS AND OVERVIEW OF TESTING PROCESS

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Compulink participant selection criteria considered several factors in determining candidates for the Real World Testing program including consideration of each type of clinical settings for which Compulink Advantage is marketed:

- Size of the organizations that production systems support
- Type(s) and Specialty of organizations and setting(s)
- Number of patient records and users
- Production environment platform (e.g., cloud vs. on premise)
- System components and integrations
- Volume and types of data exchange in planning for Real World Testing

Compulink emailed an invitation for participation to active Advantage users representing each of the 17 specialty care settings and fitting the representative selection criteria. 30 organizations initially agreed to participate in the RWT program.

Once the organization(s) agreed to participate, Compulink enrolled each participant in the Real World testing program and collected the required Informed Consent and Data Sharing Agreement and Non-disclosure Agreement. Business Associate Agreements are retained on file for each Compulink client account.

RWT Participants are required to participate in an Introductory Session moderated by a Real World Test (RWT) Study Coordinator, where each participant is provided verbal and written instructions for the interactive use case scenarios and provided an overview of the process for summative data collection.

The RWT Study Coordinator installs an SQL file containing algorithms and functionality to calculate the frequency of specific interoperability actions within the organizations production software. Data log results were aggregated and analyzed across all RWT participants to assess specific data points corresponding with the measure criteria required for RWT. All data is de-identified to protect the privacy and security of the participating organizations. Interactive test sessions were conducted and recorded with corresponding screenshots to all required RWT criteria.

## RELIED UPON SOFTWARE

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Several of the Real World Test criteria require the use of relied upon software. All relied upon software is listed within the relevant criterion's section.

## METRICS AND OUTCOMES

(From 85 FR 25766)

Within this section is a summary of the results collected from the Compulink Advantage V12 solution Real World Testing measures as defined in the Compulink 2022 Real World Test plan. Outcomes are listed as Pass, Pass with Exception, or Fail determined by the success of obtaining testing results. This determination was based on a thorough review by the Compulink team. A link is included within the Outcomes column in the table below to a subsequent Outcomes Details table. This second table matches each outcome with additional detailed information such as supporting resources and descriptions of the tests that were performed.

Key components include:

- Compulink created a comprehensive Test Results Report which details customer environment, patient data utilized for tests, locations of testing
- Compulink initiated both Summative and/or Interactive Testing
- Compulink collected audit logs to support spreadsheets and as necessary, screen shots that demonstrate proof of Interactive Testing for each criterion with “0” values in Summative Testing. These files are referenced and remain on file with Compulink Healthcare Solutions.

The following metrics were measured by viewing audit logs in the client’s (participant) live production system from June through December of this year (2022) whereby a lookback to 90 days of data was leveraged to calculate the Outcome Metrics for Summative Test Results. The Real-World Test enrolled participant base was comprised of approximately 1% of Compulink’s active clients and represented the clinical care setting groups marketed by Compulink and indicated in the RWT Plan. For each test, a screen shot was captured of the audit report criteria screen showing the auditing information being reported. The resultant report was then saved to show the usage (or lack thereof) of the criterion.

Associated Criterion(a)	Measurement/Metric	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
170.315(b)(1) Transitions of care	Over a 90-day period: 1) Number of CCDAs created 2) Number of CCDAs sent via edge protocols 3) Number of CCDAs received via edge protocols	Compulink requires the use of Updox as a relied upon third party software for Transitions of care.	<a href="#">Pass</a> 1) 14,248 2) 14,248 3) 876	There were no challenges encountered when testing and collecting data for these criteria.

170.315(b)(2) Clinical information reconciliation and incorporation	Over a 90-day period: 1) 1)Number of times a user reconciled medication list data from a received CCDA 2) 2)Number of times a user reconciled allergies and intolerance list data from a received CCDA 3) 3)Number of times a user reconciled problem list data from a received CCDA		<a href="#">Pass</a> 1) 71 2) 71 3) 71	There were no challenges encountered when testing and collecting data for these criteria.
170.315(b)(3) Electronic prescribing	Over a 90-day period: 1) Number of prescriptions created 2) Number of prescriptions changed 3) Number of prescriptions canceled 4) Number of prescriptions renewed	Compulink requires the use of Surescripts as a relied upon third party software for Electronic Prescribing.	<a href="#">Pass</a> 1) 425,558 2) 0 3) 427 4) 1,604	There were no challenges encountered when testing and collecting data for these criteria.
170.315(b)(6) Data export	Over a 90-day period: 1) Number of times a data export was performed for a patient 2) Number of times a data export was performed for multiple patients in a single transaction 3) Number of times a data export was performed for all patients in a single transaction		<a href="#">Pass</a> 1) 678,115 2) 106 3) 678,115	There were no challenges encountered when testing and collecting data for these criteria.

170.315(c)(1-3) Clinical quality measures (CQMs)	Over a 90-day period: 1) Number of measures recorded during the period 2) Number of QRDA Category 1 files exported 3) Number of QRDA Category 1 files imported (if applicable) 4) Number of QRDA Category 3 aggregate report(s) created over the period		<a href="#">Pass</a> 1) 5,825 2) 4,010 3) 0 4) 4,010	There were no challenges encountered when testing and collecting data for these criteria.
170.315(e)(1) View, download, and transmit to 3rd party	Over a 90-day period: 1) Number of views of health information by a patient or authorized representative 2) Number of downloads of health information by a patient or authorized representative 3) Number of transmissions of health information by a patient or authorized representative using unencrypted email 4) Number of transmissions of health information by a patient or authorized representative using encrypted method		<a href="#">Pass</a> 1) 1,659 2) 269 3) 0 4) 0	There were no challenges encountered when testing and collecting data for these criteria.

170.315(g)(7) Application access — patient selection	<ol style="list-style-type: none"> <li>1) Number of requests for a patient ID or token</li> <li>2) Number of requests that provided sufficient information to provide a valid response</li> <li>3) Number of follow-up requests made using the provided patient ID or token</li> </ol>		<a href="#">Pass</a> 1) 0 2) 0 3) 0	There were no challenges encountered when testing and collecting data for these criteria.
170.315(g)(8) Application access — data category request	<ol style="list-style-type: none"> <li>1) Number of requests for a patient's data made by an application via a data category request using a valid patient ID or token</li> <li>2) Number of requests for a patient's data made by an application via a data category request using a valid patient ID or token for a specific date range</li> </ol>		<a href="#">Pass</a> 1) 0 2) 0	There were no challenges encountered when testing and collecting data for these criteria.
170.315(g)(9) Application access — all data request	<ol style="list-style-type: none"> <li>1) Number of requests for a patient's Summary Record made by an application via an all data category request using a valid patient ID or token</li> <li>2) Number of requests for a patient's Summary Record made by an application via an all data category request using a valid patient ID or token for a specific date range</li> </ol>		<a href="#">Pass</a> 1) 0 2) 0	There were no challenges encountered when testing and collecting data for these criteria.

170.315(h)(1) Direct Project	1) Number of Direct Messages sent 2) Number of Delivery Notifications received 3) Number of Direct Messages received 4) Number of Delivery Notifications sent	Compulink requires the use of Updox as a relied upon third party software.	<a href="#">Pass</a> 1) 14,456 2) 637 3) 637 4) 14,432	There were no challenges encountered when testing and collecting data for these criteria.
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## OUTCOME DETAILS

The following sections contain additional descriptions and test results supporting documentation to provide more context for the testing outcomes defined in the **Metrics and Outcomes** table above.

### 170.315(b)(1) Transitions of care

#### Summary Description

**Pass**

**Method:** Summative and Interactive Testing

The purpose of this test was to demonstrate in a Real-World production environment that CDA documents are able to be imported, matched to a patient, reconciled and new CDA documents created and exported.

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. In addition, Compulink also demonstrated the module function in their system as an interactive test demonstrating a compliant result.

#### Justification

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 CCDAs documents 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 CCDAs are created and exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Compulink’s expectation is there will be moderate utilization by providers with a high success rate.

#### Results Supporting Documents

Please Contact Compulink for any Results spreadsheets if needed.

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

### Summary Description

**Pass** **Method:** Summative and Interactive Testing

The purpose of this test was to demonstrate that CDA documents are able to be electronically received, imported, matched to a patient, reconciled for medication, allergy and problem information from an outside source, in addition to new CDA documents created and exported.

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. In addition, health IT developer also demonstrated the module function in their system as an interactive test demonstrating a compliant result.

### Justification

This criterion requires the ability of a certified Health IT module to take a CCDAs 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 Compulink's 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. Compulink's expectation is there will be low utilization by providers with a high success rate

### Results Supporting Documents

Please Contact Compulink for any Results spreadsheets if needed.

## 170.315(b)(3) Electronic Prescribing

### Summary Description

**Pass** **Method:** Summative Testing

The purpose of this test was to show that an active connection from EHR customer sites to an e-Prescribing solution was deployed and able to electronically communicate prescription information to a pharmacy. A query on historical audit logs for 90-day periods 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.

**Justification**

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 Compulink’s 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. Compulink’s expectation is there will be high utilization by providers with a high success rate.

**Results Supporting Documents**

Please Contact Compulink for any Results spreadsheets if needed.

**170.315(b)(6) Data Export****Summary Description**

**Pass**                      **Method:** Summative Testing

The purpose of this test was to demonstrate that clients have the capability to create, configure and generate export patient summaries from the Advantage EHR without any assistance from Compulink.

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.

**Justification**

This criterion requires the ability of a certified Health IT module to export a summary of a patient’s record in CCD 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 CCDs 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. Compulink’s expectation is there will be very low utilization by providers with a high success rate.

**Results Supporting Documents**

Please Contact Compulink for any Results spreadsheets if needed.



## 170.315(c)(1-3) Clinical Quality Measures (CQMs)

Summary Description	
<b>Pass</b>	<b>Method:</b> Summative and Interactive Testing  <p>The purpose of this test was to demonstrate that the EHR meets the QRDA reporting requirement for the designated care settings, as required for participation in CMS quality reporting programs.</p> <p>A query on historical audit logs for 90-day periods was performed for the 170.315(c)(1-3) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result. In addition, Compulink also demonstrated the module function in their system as an interactive test demonstrating a compliant result.</p>
Justification	
<p>These criteria will be tested together.</p> <ul style="list-style-type: none"> <li>• C1 requires a certified Health IT module to record required data, calculate CQMs from the recorded data, and export the data in QRDA Category 1 format.</li> <li>• C2 requires a certified Health IT module must be able to import data from a QRDA Category 1 formatted file and calculate the CQMs based on that data.</li> <li>• C3 requires a certified Health IT module must be able to create a QRDA Category 1 formatted file and a QRDA Category 3 aggregate report to be used for transmitting CQM data to CMS.</li> </ul> <p>We intend to record the frequency that CQM files are imported and/or exported by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Compulink's expectation is there will be moderate utilization by providers with a high success rate.</p>	
Results Supporting Documents	
Please Contact Compulink for any Results spreadsheets if needed.	

## 170.315(e)(1) View, Download, and Transmit to 3rd Party

Summary Description	
<b>Pass</b>	<b>Method:</b> Summative and Interactive Testing  <p>The purpose of this test was to demonstrate that the EHR provides patients access to a patient portal with the ability to view, download, and send their health care records to third parties for the designated care settings.</p> <p>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. In addition, Compulink also demonstrated the module function in their system as an interactive test demonstrating a compliant result.</p>

**Justification**

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 CCD 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. Compulink's 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.

**Results Supporting Documents**

Please Contact Compulink for any Results spreadsheets if needed.

**170.315(g)(7) Application Access — Patient Selection****Summary Description**

**Pass**                      **Method:** Interactive Testing

The purpose of this test was to demonstrate that the EHR is able to fulfill an API request that enables external applications to request a unique patient identifier from the certified Health IT module that can be used to request additional patient data.

A query on historical audit logs for 90-day periods was performed for the 170.315(g)(7) criterion. Due to low or zero adoption of this criteria, Compulink demonstrated the module function in their system as an interactive test demonstrating a compliant result.

**Justification**

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 from the certified Health IT module that can be used to request additional patient data. We intend to record the frequency that patient ID requests are received by providers via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Compulink's expectation is there will be low utilization by providers with a high success rate.

**Results Supporting Documents**

Please Contact Compulink for any Results spreadsheets if needed.

## 170.315(g)(8) Application Access — Data Category Request

Summary Description	
<b>Pass</b>	<b>Method:</b> Interactive Testing
<p>The purpose of this test was to demonstrate that the EHR is able to fulfill an API request that enables external applications to request patient data categories from the certified Health IT module.</p> <p>A query on historical audit logs for 90-day periods was performed for the 170.315(g)(8) criterion. Due to low or zero adoption of this criteria, health IT developer demonstrated the module function in their system as an interactive test demonstrating a compliant result.</p>	
Justification	
<p>This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request patient data by category from the certified Health IT module. We intend to record the frequency that patient data requests by category are received by providers and fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Compulink's expectation is there will be low utilization by providers with a high success rate.</p>	
Results Supporting Documents	
Please Contact Compulink for any Results spreadsheets if needed.	

## 170.315(g)(9) Application Access — All Data Request

Summary Description	
<b>Pass</b>	<b>Method:</b> Interactive Testing
<p>The purpose of this test was to demonstrate that the EHR is able to fulfill an API request that enables external applications to request all categories of patient data defined in the CCDS from the certified Health IT module.</p> <p>A query on historical audit logs for 90-day periods was performed for the 170.315(g)(9) criterion. Due to low or zero adoption of this criteria, health IT developer demonstrated the module function in their system as an interactive test demonstrating a compliant result.</p>	
Justification	
<p>This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request all categories of patient data defined in the CCDS from the certified Health IT module. We intend to record the frequency that patient data requests for all categories are received by providers and fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Compulink's expectation is there will be low utilization by providers with a high success rate.</p>	
Results Supporting Documents	
Please Contact Compulink for any Results spreadsheets if needed.	

## 170.315(h)(1) Direct Project

### Summary Description

**Pass**                      **Method:** Summative Testing

The purpose of this test was to show that the EHR is able to process Direct messages bi-directionally as well as track MDNs.

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.

### Justification

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. Compulink’s expectation is there will be moderate utilization by providers with a high success rate.

### Results Supporting Documents

Please Contact Compulink for any Results spreadsheets if needed.

## KEY MILESTONES

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Compulink initiated the Real World Test Plan and Case Scenario activities for each care setting beginning January 2022 with the following activities:

- RWT Planning and Preparation
  - RWT Testing Team Meetings and Review RWT Project Plan
  - Established RWT timeline, activities and expected results
  - Developed and tested Summative Data Extraction SQL routine.
  - Developed and tested Live Interactive Test Protocol, User Stories, Test Coordinator Setup Instructions and Participant Test Training and Instructions.
- Participant Outreach
  - Identification and enrollment of RWT Participants representative of a cross section of Compulink client base and other factors, including practice specialty, size, and platform (cloud hosted vs. onsite server).
  - Completion and collection of Participant Informed Consent, Non-Disclosure (NDA) and Business Associates (BAA) Agreements.
  - Schedule of Participant Test Sessions.
  - Participant Introductory Call to review RWT Protocol and setup RWT Test Patient(s) in clients' live test environment.
- Test Data Collection
  - Conduct RWT activities through Live Interactive and Summative Testing methods
  - Capture screenshots and data recordings.
  - Compile, review and analyze data outcomes.
- Validation of expected outcomes.
- Results Submission

The Process of Interactive and Summative data collection began on June 1, 2022 and completed data collection and analysis by December 30, 2022. A 90 day activity cycle within this range was utilized for reporting metrics.

As mentioned previously, the RWT enrolled participants comprised approximately 1% of Compulink's active client base and represents the clinical care setting groups marketed by Compulink as indicated in the 2022 RWT Plan.

Key Milestone	Care Setting	Date/Timeframe
Scheduling and logistics	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	January 1 – April 30, 2022,
Data collection	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	June 1 – December 30, 2022
Review and collate data	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	October - December 30, 2022
Writing report	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	October - December 30, 2022,

<p>Compulink executed interactive testing to show that the criterion is functional. The following metrics were tested interactively as detailed in the outcomes section above:</p> <ul style="list-style-type: none"> <li>• 170.315 (b)(1) Transitions of care</li> <li>• 170.315 (b)(2) Clinical Information Reconciliation and Incorporation</li> <li>• 170.315 (c)(1-3) Clinical Quality Measures (CQMs)</li> <li>• 170.315 (e)(1) View, Download, and Transmit to 3rd Party</li> <li>• 170.315 (f)(1) Transmission to immunization registries</li> <li>• 170.315 (f)(2) Transmission to public health agencies — syndromic surveillance</li> <li>• 170.315 (f)(7) Transmission to public health agencies — health care surveys</li> <li>• 170.315(g)(7) Application access—patient selection</li> <li>• 170.315(g)(8) Application access—data category request</li> <li>• 170.315(g)(9) Application access—all data request</li> </ul>	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	<p>Interactive testing occurred at various sites between June 1 – December 30, 2022.</p>
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<p>Compulink executed summative testing to show that the criteria are functional. The following metrics were pulled from transaction logs as detailed in the outcomes section above:</p> <ul style="list-style-type: none"> <li>• 170.315 (b)(1) Transitions of care</li> <li>• 170.315 (b)(2) Clinical Information Reconciliation and Incorporation</li> <li>• 170.315 (b)(3) Electronic Prescribing</li> <li>• 170.315 (b)(6) Data Export</li> <li>• 170.315 (c)(1-3) Clinical Quality Measures (CQMs)</li> <li>• 170.315 (e)(1) View, Download, and Transmit to 3rd Party</li> <li>• 170.315 (f)(1) Transmission to immunization registries</li> <li>• 170.315 (f)(2) Transmission to public health agencies — syndromic surveillance</li> <li>• 170.315 (f)(7) Transmission to public health agencies — health care surveys</li> <li>• 170.315(g)(7) Application access—patient selection</li> <li>• 170.315(g)(8) Application access—data category request</li> <li>• 170.315(g)(9) Application access—all data request</li> <li>• 170.315 (h)(1) Direct Project</li> </ul>	<ul style="list-style-type: none"> <li>• Behavioral Health</li> <li>• Ophthalmic</li> <li>• Orthopedic</li> <li>• Otolaryngology</li> <li>• Other Specialties</li> </ul>	<p>90 day lookbacks occurred between June 1 – December 30, 2022.</p>
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## ATTESTATION

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The following is an attestation of Compulink Healthcare Solutions, Inc. 2022 Real World Testing Results Report by an authorized representative capable of binding the Health IT Developer for execution of the plan.

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 plan is up to date and fully addresses the Health IT Developer's Real World Testing requirements.

Authorized Representative Name: Karen Perry, OD FAAO

Authorized Representative Email: KFP@Compulinkadvantage.com

Authorized Representative Phone: (800) 888-8075

Authorized Representative Signature: *Karen Perry*

Date: January 06, 2023