

## General Information:

Plan Report ID Number: 20231206lig

Developer Name: Lille Group, Inc

Product Name(s): eScribeHOST

Version Number(s): 7

Certified Health IT

Product List (CHPL) ID(s): 15.02.05.3058.LILG.01.01.1.220214

Developer Real World Testing Page URL: <https://www.escribe.com/transparency-esh.html>

Certification Criteria to be tested: 170.351(b)(1), (b)(2), (b)(3)

## Justification for Real World Testing Approach:

EscribeHost will be evaluated by a third party tester in the role of a real world user for ability to view, add and edit patient information through the testing of multiple patients in our test environment. Each selected patient's data is to be assessed for availability to access, presence of all required data, and completeness of data in sets. The tester will use an automated script to assess these criteria on an ongoing basis according to the test plan. The script is to work by editing the following fields: patient name, goal(s), health concerns, health status, interventions. The script will insert randomized data to show the fields are present and can be accessed and edited on an ongoing basis.

A script will also be used to test ongoing ability to export documents. This will include a care plan with the following sections: patient name, goal(s), health concerns, health status, interventions. The successful sending of ToC documents will demonstrate compliance with criterion (b)(1) and (b)(2). To demonstrate compliance with (b)(2)(ii), said documents will be parsed for active medications, allergies and problems along with the last modification date of these fields, which can all be viewed simultaneously. This will be tested at various, arbitrary times to demonstrate accordance with criterion which species the data export should be available at at anytime to users with appropriate permissions and access.

Using the same scripting processes run by a third party tester, criterion (b)(3) will be verified by the system's ability to respond to prescription requests and prescription change requests (RxFill, RxChangeRequest, RxChangeResponse). Using the script will demonstrate ongoing functionality of the app and timely communication with pharmacies and Surescripts verification. The tester will additionally test for cancel requests and cancel responses, errors and verifications per (b)(3)(ii)(A)(1-9).

Scripts will be used for testing to demonstrate continuity in function and avoid biases and specificity of point in time testing. This provides real world insight into the certified product by extending past the limits of typical working hours, pre-release testing and consumer feedback.

Standards Updates (Including standards version advancement process-svap and uscdi):

eScribeHOST v7

Certification Date: Feb 14, 2022

Certificate Number: 15.02.05.3058.LILG.01.01.1.220214

Standards Updates:

Standard (and version)	USCDI v1
Updated certification criteria and associated product	b1, b2
Health IT Module CHPL ID	15.02.05.3058.LILG.01.01.1.220214
Method Used for standards update	Cures Update
Date of ONC ACB notification	12/21/2022
Date of customer notification (SVAP only)	N/A
Conformance Measure(s)	Rate of Success for: b1, b2
USCDI Updated certification criteria (and USCDI version)	b1, b2 - USCDI v1

Measures Used in Overall Approach:

Rate of Success

The third party tester will perform tests and gather data using various scripts that perform automated actions to test patients on a regular basis. The tester will perform data analysis simply by providing the result in Rate of Success: percentage of successful attempts out of total number of attempts by the scripts.

For (b)(1) and (b)(2), a script will export a care plan with the following sections: patient name, goal(s), health concerns, health status, interventions. To demonstrate compliance with (b)(2)(ii), said documents will be parsed for active medications, allergies and problems along with the last modification date of these fields, which can all be viewed simultaneously. This will be tested at various, arbitrary times.

For criterion (b)(3), the script will verify the system's ability to respond to prescription requests and prescription change requests (RxFill, RxChangeRequest, RxChangeResponse). Using the script will demonstrate ongoing functionality of the app and timely communication with pharmacies and Surescripts verification. The tester will additionally test for cancel requests and cancel responses, errors and verifications per (b)(3)(ii)(A)(1-9).

All results are to be reported in Rate of Success percentage as a standard metric.

### Description of Measurement/Metric:

Rate of success will be reported as the percentage of successful attempts to perform actions defined above out of total attempts to perform actions defined above. All attempts will be defined as successful if performed completely and in accordance with all specifications within a reasonable time, hereby defined as one day (24 hours), or one working day (24 hours discounting weekends and holidays) for criteria relying on outside parties who do not operate on a constant basis (pharmacies, etc).

### Associated Certification Criteria:

170.351(b)(1), (b)(2), (b)(3)

### Justification for Selected Measurement/Metric:

Rate of success will describe the overall functionality of eScribeHost by including any potential downtime or bugs. The testing periods will be arbitrary and will include software releases and peak usage hours, should those occur within the testing timeframes.

Rate of success creates a robust picture eScribeHost's conformance with the identified criteria. With use of a script, no human error is expected or accounted for. This provides a clear measure of the software's function.

### Care Setting(s):

Care Setting	Justification
Cardiology Office	EscribeHost is primarily marketed to cardiology practices. The care setting where patient information should be accessed, added, changed and exchanged is in the office among only professionals with appropriate

	permissions.
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**Expected Outcomes:**

- (1) The third party tester will evaluate metrics of ongoing sending ToC documents (b)(1) for sample patient(s) by assessing daily success logs of script results. The tester will assess this data for percentage of successful data exports compared to total attempts. Planned application downtime will be considered an accepted failure and not counted towards the overall percentage. The results are an expected success rate of over 90%. All statistics will be reported in the final documentation.
- (2) The third party tester will evaluate metrics of ongoing access and editability of care plan documentation and fields (b)(2) for sample patient(s) by assessing daily success logs of script results. The tester will assess this data for percentage of successful data exports compared to total attempts. Planned application downtime will be considered an accepted failure and not counted towards the overall percentage. The results are an expected success rate of over 90%. All statistics will be reported in the final documentation.
- (3) The third party tester will evaluate metrics of ongoing functionality of medication functions (b)(3) by assessing daily logs of script results. The tester will assess this data for percentage of successful data exports compared to total attempts. Planned application downtime will be considered an accepted failure and not counted towards the overall percentage. Non-working days will not be considered failures and will not be counted towards the rate of success percentage. The results are an expected success rate of over 90%. All statistics will be reported in the final documentation.
- (4) The third party tester will evaluate the success of privacy criteria by confirming failure to access PHI without required permissions on an ongoing basis. The expected failure rate for a user without appropriate access is 100%. The expected successful access rate for a user with appropriate permissions is expected to be over 98%, with planned downtime discounted.

**Schedule of Key Milestones:**

Key Milestone	Care Setting	Date/Timeframe
Write Scripts	Cardiology Office	January 2024

Patient Groups	Cardiology Office	January 2024
Test Group 1	Cardiology Office	February 3, 2024 - April 27, 2024
Record Results	Cardiology Office	April 27, 2024 - April 30, 2024
Test Group 2	Cardiology Office	May 2, 2024 - July 14, 2024
Record Results	Cardiology Office	July 14, 2024- July 17, 2024
Test Group 3	Cardiology Office	July 20, 2024 - October 5, 2024
Record Results	Cardiology Office	October 5, 2024 - October 8, 2024
Asses Results	Cardiology Office	November 2024
Create Report	Cardiology Office	November 2024 - December 2024
Submit Results	Cardiology Office	February 1, 2025

Explanation of Milestones:

Write Scripts: create scripts that will test for all specified criteria and provide measurable data according to this plan.

Patient Groups: create groupings of patients to be used for testing. Use a randomizer to select between 3-5 distinct patients to be enrolled in each of the 3 groups.

Test Group: the time frame each test group will be used for daily testing.

Record Results: the time dedicated to collecting data from each round of testing.

Asses Results: check results for inconsistencies, compare results of groups, account for any planned downtime.

Create Report: report all results with explanation of testing, explanation of planned or unplanned errors, detail how process was run. Report any found bugs or unexpected errors with documentation of how these errors were resolved. All code used for testing will be reported for full transparency. Patient data is not to be included unless necessary for explanation and screened for PHI.

Submit Results: make Real World Testing results available per certification requirement. Report submission to ACB.

Attestation:

This Real World Testing plan is complete with all required elements, including measures that address all certification criteria and care settings. All information in this plan is up to date and fully addresses the Health IT Developer's Real World Testing requirements.

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