REAL WORLD TESTING RESULTS REPORT

GENERAL INFORMATION

Report ID Number	20221116rmd
Developer Name	ReportingMD, Inc.
Product Name(s)	Total Outcomes Management (TOM)
Version Number(s)	9.8
Certified Health IT Product List (CHPL) ID(s)	15.02.05.2270.RPMD.01.02.0.210924
Developer Real World Testing PLAN Page URL	https://reportingmd.com/real-world-test-plan/
Developer Real World Testing RESULTS Page URL	https://reportingmd.com/real-world-test-plan/

CHANGES TO ORIGINAL PLAN

Summary of Change	Reason	Impact
QRDA Test Methodology indicated in the Testing Plan was that a randomized sample of no less than 3% of the TIN/NPI Combinations will be sampled. A random selection of 1 individual NPI/TIN combination was sampled instead.	ReportingMD currently has no active customers choosing to utilize QRDA submission. ReportingMD needs to ensure that QRDA files can be generated and accurate for submission should a customer choose to submit that pathway, so it was opted to choose 1 TIN/NPI random sample submitting another pathway to ensure accuracy, since there were no real world TIN/NPIs to select from submitting that pathway.	This has minimal to no impact on the execution of ReportingMDs Real World Testing Activities. ReportingMD was able to still create a valid QRDA Submission file with a 0.00% error rate when comparing to the source data.

WITHDRAWN PRODUCTS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):	N/A
Version Number(s):	N/A
CHPL ID(s):	N/A
Date(s) Withdrawn:	N/A
Inclusion of Data in Results Report: [Provide a statement as to whether any data was captured on the withdrawn products.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.]	N/A

SUMMARY OF TESTING METHODS AND KEY FINDINGS

1. **For § 170.315(c)(2)**, RMD utilized a randomized sampling to create a sample of care settings, providers, patients, and measures to validate for accuracy to meet conformity for ONC certification requirements. Random Sampling Methodology - TIN/NPI level sampling from any/all ambulatory care setting. A randomized sample of no less than 3% of the TIN/NPI customer combinations were sampled. The minimum sample size was 10 and a maximum sample size of 50 per TIN/NPI combination. Each record/event was reviewed for eligibility as well as numerator outcome for each measure the practice is tracking or reporting. The following online calculator was used to determine the actual size of the data set to be created: http://www.macorr.com/ss_calculator.htm. To create a simple random sample, RMD selected the number of records identified by the sample size calculator from the TIN/NPI population such that each record had an equal chance of being selected, i.e., the first record had the same chance as being selected as the 10th, 100th or 1000th record. Patient-Measure level sampling from any/all TIN/NPI combination used in above TIN/NPI level sampling: A random sample of 25% of unique patients from the 3% TIN/NPI provider sample, was reviewed for eligibility of each measure the practice is tracking or reporting.
   Auditing and Sampling of data and comparison of output of measures to the source data to confirm accuracy or identify any discrepancies in importing, calculating, or reporting the certified eCQMs. The expected outcome was to have a 0.00% error rate. If there was an error rate above 0.00% resulted, then an additional audit would take place after corrections are made by updating our measure engine.

   Results: Data validation to ensure compliance to 170.315 (c)(2) was completed on 31 different measures across 151 providers and 5,356 patients. A total of 148 practice/TIN combinations were validated. Zero non-conformities were discovered.

2. **For § 170.315(c)(3),** as part of the Real World Testing requirements for § 170.315(c)(3), the RWT will show that any QRDA file generated for any RMD client will include accurate TIN, NPI, and measure level and performance data, with a 0.00% error rate. Random Sampling Methodology - TIN/NPI level sampling from any/all ambulatory care setting. A randomized sample of 1 TIN to include all of their eCQM measures was sampled. Each record/event was reviewed for eligibility as well as numerator outcome for each measure the practice is tracking or reporting.
   Auditing and Sampling of data and comparison of output of measures to the source data would

confirm accuracy or identify any discrepancies in importing, calculating, or reporting the certified eCQMs. The expected outcome was to have a 0.00% error rate. If an error rate above 0.00% was resulted, then an additional audit would take place after corrections are made by updating our measure engine.

Results: Validation completed to ensure compliance to 170.315 (c)(3). QRDA 3 file was generated for 1 TIN with 11 eCQM measures included. Zero non-conformities were found.

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).
_X___ No, none of my products include these voluntary standards

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
Health IT Module CHPL ID	N/A
Conformance measure	N/A

Care Setting(s)

All types of ambulatory care settings, that report quality measures to CMS for MIPS and/or Alternative Payment Models.

Metrics and Outcomes

Measurement /Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
170.315 (c)(2)	170.315 (c)(2) - Clinical Quality Measures - Import and Calculate	N/A	Data validation to ensure compliance to 170.315 (c)(2) was completed on 31 different measures across 151 providers and 5,356 patients. A total of 148 practice/TIN combinations validated. Zero non-conformities were found.	
170.315 (c)(3)	170.315 (c)(3) - Clinical Quality Measures - Report (Cures Update)	N/A	Validation completed to ensure compliance to 170.315 (c)(3). QRDA 3 file was generated for 1 TIN. 11 eCQM measures included in the QRDA file that was generated	None

KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Quarter 1 Testing – Data validation completed included data on 27 different measures, 50 providers and 1,616 patients. Measures are updated annually to encompass annual value set, code, and logic.	Any Ambulatory care setting	April 2023 (Include data from Jan 1 – Mar 31)
Quarter 2 Testing – Data validation completed included data on 33 different measures, 50 providers and 1,841 patients. Measures are updated annually to encompass annual value set, code, and logic.	Any Ambulatory care setting	July 2023 (Include data from Jan 1 – June 30)
Quarter 3 Testing – Data validation completed included data on 39 different measures, 50 providers and 1,862 patients. Measures are updated annually to encompass annual value set, code, and logic.	Any Ambulatory care setting	October 2023 (Include data from Jan 1 – Sept 30)
Quarter 4 Testing – Data validation completed included data on 7 different measures, 1 provider and 37 patients. Measures are updated annually to encompass annual value set, code, and logic. Additional Data Validations are pending customer return.	Any Ambulatory care setting	Jan 2024 (Include data from Jan 1 – Dec 31)