# CY 2022 Real World Testing Plan for AmazingCharts

## Executive Summary

This is the real world test plan for CY 2022 for AmazingCharts certified EHR solution. It covers the certification of all versions, but we will focus our testing on our currently deployed version, 11.1.

As ONC has stated in its rule, "The objective of real world testing is to verify the extent to which certified health IT deployed in operational production settings is demonstrating continued compliance to certification criteria and functioning with the intended use cases as part of the overall maintenance of a health IT's certification." We have worked toward this objective in designing our test plan and its subsequent real world testing uses cases, measurements and metrics.

This document builds toward the final testing measurements and metrics we will use to evaluate our product interoperability within production settings. Within each measure, we document planned testing methodology, associated ONC criteria, justification for measurement, expected outcomes from the testing, care settings applied for this measure, and if applicable the number of clients to use the our real world testing approach, including how our test cases were created, our selected methodology, the number of client/practice sites to use, and our general approach and justification for decisions.

We have included our timeline and milestones for completing the real world testing in CY 2022, and information about compliance with the Standards Version Advancement Process updates.

A table of contents with hyperlinks is provided later in the plan quick access to any document section, including the testing measurements and metrics found at the end of this document. Our signed attestation of compliance with the real world testing requirements is on the following page.

# Developer 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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# General Information

Plan Report ID Number: AmazingCharts_RWT_2022

Developer Name: CareTracker, Inc.

Product Name(s): AmazingCharts

Certified Health IT Criteria: 315(b)(1)-(3), (b)(6), (c)(1)-(4), (f)(1), (g)(7)-(9)

Version Number(s), Product List (CHPL) ID(s) and Link(s):

- Vs. 11.1
  - 15.04.04.1206.Amaz.11.03.1.200202
  - https://chpl.healthit.gov/#/listing/10304
- Vs. 10.2
  - 15.04.04.1206.Amaz.10.02.1.190404
  - https://chpl.healthit.gov/#/listing/9991
- Vs. 10.1
  - 15.04.04.1206.Amaz.10.01.1.180801
  - https://chpl.healthit.gov/#/listing/9745
- Vs. 10
  - 15.04.04.1206.Amaz.10.00.1.180608
  - https://chpl.healthit.gov/#/listing/9543

Developer Real World Testing Page URL: http://amazingcharts.com/macra/meaningful-use/ehr-certification/

# Timeline and Milestones for Real World Testing CY 2022

- 1Q-2022: Begin communication with clients to ask for their support and participation in real world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2022.
- 2Q-3Q 2022. During the 2nd and 3rd quarter of CY 2022, the real world testing with clients will be scheduled and performed. 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 of the findings and make the necessary changes required.
- 4Q-2022. During the last quarter of the year, the CY 2023 real world test plan will be completed according to ONC and ONC-ACB requirements and expectations. Test plan will be prepared for submission before the end of the year.

# Standards Version Advancement Process (SVAP) Updates

For CY 2022, we are not planning to make any version updates on approved standards through the SVAP process. We plan on implementing USCDI v1 in our C-CDAs and API support during CY 2022, but we have not finalized an exact date for rollout.

| | |
|---|---|
| Standard (and version) | N/A |
| Updated certification criteria and associated product | N/A |
| Health IT Module CHPL ID | N/A |
| Method used for standard update | N/A |
| Date of ONC-ACB notification | N/A |
| Date of customer notification (SVAP only) | N/A |
| Conformance measure | N/A |
| USCDI-updated certification criteria (and USCDI version) | N/A |

# Real World Testing Measurements

The measurements for our real world testing plan are described below. Each measurement contains:

- Associated ONC criteria
- Testing Methodology used
- Description of the measurement/metric
- Justification for the measurement/metric
- Expected outcomes in testing for the measurement/metric
- Number of client sites to use in testing (if applicable)
- Care settings which are targeted with the measurement/metric

In each measurement evaluate, we elaborate specifically on our justification for choosing this measure and the expected outcomes. All measurements were chosen to best evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the certified EHR.

## Testing Methodologies

For each measurement, a testing methodology is used. For our test plan, we use the following methodologies.

Reporting/Logging: This methodology uses the logging or reporting capabilities of the EHR to examine functionality performed in the system. A typical example of this is the measure reporting done for the automate measure calculation required in 315(g)(2), but it can also be aspects of the audit log or customized reports from the EHR. This methodology often provides historical measurement reports which can be accessed at different times of the year and evaluate interoperability of EHR functionality, and it can serve as a benchmark for evaluating real world testing over multiple time intervals.

Compliance and/or Tool: This methodology uses inspection to evaluate if EHR is compliant to the ONC criteria requirements. It can be done through 1-v-1 inspection testing or utilize various tools to measure or evaluate compliance and interoperability. If an EHR Module capabilities is not widely used in production by current users, compliance inspection can provide assurance criteria is working as previously certified.

Survey/Self-Test: This methodology evaluates interoperability and compliance of EHR Module capabilities through feedback from users. ONC has recognized that self-testing can be a viable method for evaluation and compliance, and this methodology can provide insight into how clinicians employ and use a feature which reveals actual value and impact of interoperability of the EHR Module.

## Number of Clients Sites

Within each measure, we note the minimum number of clients or client sites we plan to use for this measure evaluation. The numbers vary depending on the methodology as well as overall use of the associated EHR Module criteria by our users. For criteria that are not widely used by our customer base, we may test the respective measure in our own production-sandbox environment given lack of customer experience with the criteria functionality.

## Care and Practice Settings Targeted

Our EHR is primarily targeted to general ambulatory practices of family practice, internal medicine, and pediatrics, and our measures were design for these settings in mind. In each measure, we do also address the care settings targeted and note any necessary adjustment or specific factor to consider with this specific measure.

## RWT Measure #1. Number of Transition of Care C-CDAs Successfully Sent

Associated Criteria: 315(b)(1)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many C-CDAs are created and successfully sent from the EHR Module to a 3rd party via Direct messaging during a transition of care event over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create a C-CDA patient summary record, including ability to record all clinical data elements, and by sending the C-CDA patient summary record, the EHR demonstrates successful interoperability of an exchanged patient record with a 3rd party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the C-CDA patient summary record, including record required clinical data elements. In sending the C-CDA patient summary record, the EHR will demonstrate ability to confirm successful interoperability of an exchanged patient record with a 3rd party, including support for Direct Edge protocol in connecting to a HISP. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

## Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #2. Number of C-CDAs Received and/or Incorporated

Associated Criteria: 315(b)(2)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many C-CDAs are successfully received and/or incorporated upon receipt from a 3rd party via Direct messaging during a transition of care event over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can receive a C-CDA patient summary record, and by incorporating the C-CDA patient summary record, the EHR demonstrates successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party. This measurement shows support for Direct Edge protocol in connecting to a HISP for successful transmission.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the EHR can receive a C-CDA patient summary record. In incorporating the C-CDA patient summary record, the EHR will demonstrate successful interoperability of problems, medications, and medication allergies of patient record with a 3rd party, including support for Direct Edge protocol in connecting to a HISP. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

## Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #3. Number of NewRx Prescriptions Messages Successfully Sent

Associated Criteria: 315(b)(3)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many NewRx electronic prescriptions were created and successfully sent from the EHR Module to a pharmacy destination over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create a NewRx SCRIPT electronic prescription message and transmit it to a pharmacy, typically via the Surescripts Network.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the NewRx message and send over a production network, like the Surescripts Network, to a pharmacy. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #4. eRx capabilities for controlled substances

Associated Criteria: 315(b)(3)

Testing Methodology: Reporting

### Measurement Description

This is a measure to determine how often providers are electronically prescribing controlled medications from the EHR.

### Measurement Justification

This measure will evaluate how often provider electronically prescribed controlled substance medications from their EHR.

Controlled substances are not an explicit requirement of ONC certification, but the electronic prescribing features should support controlled substances if the provider and support health IT system have the other capabilities enabled for electronic prescribing of controlled substances.

### Measurement Expected Outcome

We will access our NewCrop eRx system to run detailed reports on providers who use EPCS. We will count the controlled substances successfully electronically prescribed. If we observe any errors, we will investigate and address accordingly.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. During the year, we will examine the log information for all providers for a minimum period of one (1) month to determine how many controlled substances our system electronically prescribes for our provider community.

## RWT Measure #5. Number of Patient Batch Exports Run

Associated Criteria: 315(b)(6)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many batch exports of C-CDAs were successfully performed by the EHR Module over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create a batch export of multiple C-CDA patient summary records.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and audit logs to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create a batch export of multiple C-CDA patient summary records, which can be used in means of health IT interoperability. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #6. Number of Quality Measures Successfully Reported on to CMS

Associated Criteria: 315(c)(1)-(c)(4)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many eCQM quality measures were successfully reported on by the EHR Module to CMS during their submission period for MIPS Quality reporting.

### Measurement Justification

This measure will provide a count and list of electronic clinical quality measures (eCQMs) which are calculated and submitted to CMS for a given program, like MIPS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize submission to CMS. Because CQM criteria, 315(c)(1)-(c)(4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three.

### Measurement Expected Outcome

The measurement will a count and list of eCQMs submitted to CMS over a given interval. We will utilize our population health tool to determine our measure count.

A successful measure submission indicates compliance to the underlying ONC criteria. It will show that the EHR can do calculations on the eCQM and that they are accepted by CMS. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure result to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #7. Number of Immunization Messages Successfully Sent to IIS/Immunization Registries

Associated Criteria: 315(f)(1)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many immunization messages are created and successfully sent from the EHR Module to an IIS/immunization registry over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create an immunization message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with an IIS/immunization registry.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and IIS transaction logs to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the HL7 immunization record, including ability to record the required clinical data elements. In sending the immunization message, the EHR will demonstrate ability to confirm successful interoperability of patient's immunization data to an IIS/immunization registry. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This

number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

## RWT Measure #8. Number of Patient Immunization History Queries Sent

Associated Criteria: 315(f)(1)

Testing Methodology: Reporting/Logging

### Measurement Description

This measure is tracking and counting how many patient immunization history queries are created and successfully sent from the EHR Module to an IIS/immunization registry over the course of a given interval.

### Measurement Justification

This measure will provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create a patient immunization history query message, and by sending the message, the EHR demonstrates successful interoperability with an IIS/immunization registry.

### Measurement Expected Outcome

The measurement will produce numeric results over a given interval. We will utilize various reports and IIS transaction logs to determine our measure count. During the year, we will examine the log information for a minimum period of three (3) months to determine an appropriate sample of this measurement.

A successful measure increment indicates compliance to the underlying ONC criteria. It will show that the EHR can create the HL7 immunization history query of a patient. In sending the immunization message, the EHR will demonstrate ability to confirm successful interoperability with an IIS/immunization registry. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

We will use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test a minimum of five (5) client practice(s). This

number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

# RWT Measure #9. Compliance of C-CDA Creation and C-CDA Scorecard Average

Associated Criteria: 315(b)(1)

## Testing Methodology: Compliance and Tool

### Measurement Description

This measure is tracking compliance the EHR Module criteria functionality of creating a C-CDA and measuring its C-CDA Scorecard average.

### Measurement Justification

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to create a C-CDA and evaluate it against the ONC C-CDA Scorecard tool. The C-CDA scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 C-CDA implementation guide and HL7 best practices.

The Scorecard will both indicate any C-CDA errors as well provide a numeric scoring result to indicate how well our C-CDA complies with certification requirements and supports interoperability within production setting.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

Once a year, we will conduct this use case to confirm this functionality is working as expected.

The user will have the EHR create C-CDA from a patient record containing clinical data elements required in the criteria. We will run C-CDA through the Scorecard tool to obtain a result. We will also confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production as in a controlled test environment.

A high score from the Scorecard indicates strong support for interoperability, and a lower score indicates opportunity for improvement. We will use this measure to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test this capability in production-type system

either with a physician client who is able to participate or use internal resources, but either way this will verify certified functionality is working for end users.

## RWT Measure #10. Compliance of C-CDA Error Detection

Associated Criteria: 315(b)(1)

Testing Methodology: Compliance

### Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of detecting errors within a received or imported C-CDA.

### Measurement Justification

This measure will provide assurance of compliance to the EHR Module criteria, specifically ability to detect any conformance or vocabulary standard errors of a received or imported in C-CDA.

C-CDA error detection provides assurance to the user of the validity of received or imported in C-CDAs which is both a certification requirement and supports interoperability within production setting.

To avoid disclosing PHI, we will only work with test patients from the actual production environment or an appropriately production-mirrored environments to best evaluate production capabilities available to end users.

### Measurement Expected Outcome

The user will import in, either through upload or inbound messages, C-CDAs with different known errors. The user will use the EHR functions to parse the C-CDA document and perform errors detection which will be reviewed by the user. We will confirm the process and steps done by the user meet the criteria requirements of the EHR Module and works as expected in production-type environment.

### Care Settings and Number of Clients Site to Test

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target. We will test this capability in production-type system either with a physician client who is able to participate or use internal resources, but either way this will verify certified functionality is working for end users.

## RWT Measure #11. Do you use batch patient data export to export large volumes of patient data?

Associated Criteria: 315(b)(6)

Testing Methodology: Survey/Self-Test

### Measurement Description

This is a survey measure to determine how often you are using the batch patient data export feature.

### Measurement Justification

This measure will survey users to determine real world interoperability and usability, specifically how often do clinicians use the batch patient export feature.

A survey or self-testing can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. Batch patient export can be used for various use cases, including supporting working a local HIE or registry as well as quality and population health metrics.

### Measurement Expected Outcome

The user will be asked the survey question and given the survey answer choices below:

- Regularly
- Sporadically
- Rarely
- Never
- Don't Know

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

### Care Settings and Number of Clients Site to Test

We will survey a sample of our client community targeting family practice, internal medicine, and pediatrics practices to obtain our survey results.

## RWT Measure #12. Do you successfully record, calculate, and submit clinical quality measures to CMS using the EHR and if so, which CQMs were submitted?

Associated Criteria: 315(c)(1)-(c)(3)

Testing Methodology: Survey/Self-Test

### Measurement Description

This is a survey/self-test measure to determine if users were able to successfully submit CQMs to CMS using EHR CEHRT functionality.

### Measurement Justification

This measure will survey users to which of their CQMs they were able to successfully calculate and submit to CMS using their EHR's functionality.

CQMS submission is done by the user so a survey/self-test report is the best way to document this interoperability feature. It will reveal if users are using the CQM certified capabilities of CQM recording, calculation, and submission are working as expected. This measure covers all four of the CQM criteria (315(c)(1)-(c)(4)).

### Measurement Expected Outcome

The user will be asked the survey question and given the survey answer choices below:

- Numeric answer to the question, and if willing, the CQMs submitted.

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

### Care Settings and Number of Clients Site to Test

We will survey a sample of our client community targeting family practice, internal medicine, and pediatrics practices to obtain our survey results.

## RWT Measure #13. How many different applications/3rd party systems are using your API capabilities?

Associated Criteria: 315(g)(7)-(g)(9)

Testing Methodology: Survey/Self-Test

### Measurement Description

This is a survey measure to determine how many different systems or applications are connecting to your EHR via the API.

### Measurement Justification

This measure will survey users to determine real world interoperability and usability, specifically many 3rd party systems or applications are integrated and using the EHR's API interface.

We do not believe many of our clients are using API capabilities and therefore do no believe a measurement metric will be sufficient. Instead, we believe best means to do real world testing in this initial year of the program is to survey users to determine API usage and then factor that information into future real world testing efforts.

A survey or self-testing can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. API capabilities are an important component of the modern health IT system, and utilization of API resources will help improve patient care and care coordination.

### Measurement Expected Outcome

The user will be asked the survey question and given the survey answer choices below:

- Numeric answer to the question, and if willing, the names of the other systems.

The answer will provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It will provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

### Care Settings and Number of Clients Site to Test

We will survey a sample of our client community targeting family practice, internal medicine, and pediatrics practices to obtain our survey results.