

170.315(b)(3) – Electronic Prescribing

Real World Testing 2021

GENERAL INFORMATION

Plan Report ID Number: 2021v1_B3

Developer Name: Systemedx, Inc.

Product Name(s): Systemedx Clinical Navigator

Version Number(s): 2019.10

Certified Health IT

CHPL Product Number: 15.04.04.2857.Syst.19.01.1.191208

ONC-ACB Certification ID: 15.04.04.2857.Syst.19.01.1.191208

Developer Real World Testing Page URL: <https://www.systemedx.com/mipssolutions.html>

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Having access to stored data, we will be monitoring over time the specified metrics for each applicable measure via database queries. This will allow us to easily confirm utilization as well as see trends over time for the measures for different care settings.

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS-SVAP AND USCDI)

No updates concerning this measure for Systemedx Clinical Navigator version 2019.10

MEASURES USED IN OVERALL APPROACH

DESCRIPTION OF MEASUREMENT/METRIC

The percentage of patients that had successful electronic prescriptions successfully transmit as indicated by the status messages returned from partner Surescripts.

ASSOCIATED CERTIFICATION CRITERIA

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JUSTIFICATION FOR SELECTED MEASUREMENT/METRIC

Percentage of successful transmissions gives a indication of successful continued engagement with providing patients with secure prescriptions delivered to their pharmacies.

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CARE SETTING(S)

List each care setting which is covered by the measure and an explanation for why it is included.

Care Setting	Justification
Ambulatory Internal/Family Medicine	All care settings have access to utilize this functionality.
Ambulatory Orthopedics	All care settings have access to utilize this functionality.
Ambulatory Allergy Clinics	All care settings have access to utilize this functionality.

EXPECTED OUTCOMES

The expected outcome for this measure is that there will be a greater than 95% success rate of prescription transmission.

The methodology and ability to perform actions related to e-prescribing should be present and uniform across all care settings.

The results of the metrics provided should demonstrate this over time.

SCHEDULE OF KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
First Quarter: Observed data over a period of time	Internal Medicine Orthopedics Allergy	Jan - March
Second Quarter: Observed data over a period of time	Internal Medicine Orthopedics Allergy	March - June
Third Quarter: Observed data over a period of time	Internal Medicine Orthopedics	July - Sept

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	Allergy	
Fourth Quarter: Observed data over a period of time	Internal Medicine Orthopedics Allergy	Oct - Dec

ATTESTATION

The Real World Testing plan must include the following attestation signed by the Health IT Developer Authorized representative.

Note: The plan must be approved by a Health IT Developer authorized representative capable of binding the Health IT Developer for execution of the plan and include the representative's contact information.ⁱ

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.

Authorized Representative Name: Jacob Nelson

Authorized Representative Email: jnelson@systemedx.com

Authorized Representative Phone: 256-739-1398

Authorized Representative Signature: *Jacob Nelson*

Date: 10/11/2021

ⁱ <https://www.federalregister.gov/d/2020-07419/p-3582>