



CY 2024 Real World Testing Report for Harris CareTracker

Executive Summary

This is the test report for CY 2024 real world testing for Harris CareTracker certified EHR solution. This is the companion document to our CY 2024 real world test plan that described our approach for conducting real world testing in CY 2024 and the testing measures we employed.

Our findings show that EHR is working as it was certified. For each our CY 2024 Real World Testing Measures, we have recorded our results and findings. If any non-conformities or errors were encountered, we noted them.

Our signed attestation of compliance with the real world testing requirements is on the following page.



Developer Attestation

This Real World Testing 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 Signature:

A handwritten signature in black ink, appearing to read "Jan Cook", written in a cursive style.

DATE: 1/30/2025



General Information

Plan Report ID Number: HarrisCareTracker-RWT-2024

Developer Name: Harris CareTracker, Inc

Product Name(s): Harris CareTracker

Version Numbers(s): 9

Certified Health IT Criteria: 315(b)(1)-(3), (b)(6); (c)(1)-(3); (e)(1); (f)(1), (f)(2); (g)(7), (g)(9)-(10); (h)(1)

Product List (CHPL) ID(s) and Link(s):

- 15.04.04.1569.Harr.09.00.1.180701
- <https://chpl.healthit.gov/#/listing/9589>

Developer Real World Testing Page URL: <https://amazingcharts.com/caretracker-real-world-testing/>



Timeline and Milestones for Real World Testing CY 2024

- Milestone 1Q-2024: 1Q-2024: Health IT system is fully enabled for use in real world testing.
 - STATUS: MET
- Milestone 3Q 2024. Begin making plans to collect data for RWT measures. If necessary, engage clients to ask for their support and participation in real world testing.
 - STATUS: MET
- Milestone 4Q-2024. During the last quarter of the year, the CY 2024 real world test plan will be completed according to ONC and ONC-ACB requirements and expectations. Test plan will be prepared for submission.
 - STATUS: MET
- Milestone 1Q-2025. Submit RWT Test Report to ONC-ACB.
 - STATUS: MET



Standards Version Advancement Process (SVAP) Updates

For CY 2024 RWT testing, we did not do any SVAP updates but used the current standards required in the certification criteria.

Standard (and version)	All standards versions are those specified in certification criteria.
Date of ONC-ACB notification (SVAP or USCDI)	N/A
Date of customer notification (SVAP only)	N/A
USCDI-updated certification criteria (and USCDI version)	The plan documents the support of all USCDI v1 data elements.



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

Associated Criteria: 315(b)(1) and 315(h)(1)

Testing Methodology: Reporting/Logging

Measurement Description

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

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: Number of C-CDA Successfully Sent

Average Result: 307

Analysis and Key Findings

While not excessively used, our testing does indicate C-CDAs are by some users, and the metric number is in line with last year's results showing steady use and up significantly from results two years ago. Testing also shows successful integration and working with our relied upon software phiMail Server.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



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.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: Number of C-CDA Successfully Received and Incorporated

Average Result: 0

We did not make any change to our original RWT Test Plan measure.

Analysis and Key Findings

Our clients do not regularly receive C-CDA files so we have no records of Direct exchange C-CDAs. In internal testing, we successfully incorporated a C-CDA to confirm our Health IT Module is working as expected.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



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 Health IT Module to a pharmacy destination over the course of a given interval.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: number of NewRx electronic prescriptions created and successfully sent to a pharmacy destination over the course of a given interval

Average Electronic Prescriptions / Provider: 17,432

Average Electronic Prescriptions: 34864 35994

Analysis and Key Findings

Our results show increased usage of ePrescribing compared to last year's findings with results nearly double. While the providers used for this year's testing are different than last year's participants making it an incomplete comparison, it does reveal the value of ePrescribing. Nearly 97% of all prescriptions by these providers were sent electronically. Testing revealed our Health IT Module functionality is working as expected and our relied upon software DrFirst is working correctly in production environment.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #4. 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 Health IT Module over the course of a given interval.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: number of batch export events performed over the course of a given interval

Average Result: 0

Analysis and Key Findings

Neither client who participated in the real world testing did any bulk export of C-CDAs, but our own internal testing indications that the Health IT Module is working as expected.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #5. Number of Quality Measures Successfully Reported on to CMS

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

Testing Methodology: Reporting/Logging

Measurement Description

This measure tracks and counts how many eCQM quality measures were successfully reported on by the Health IT Module to CMS during their submission period for MIPS Quality reporting.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Testing Metric/Measurement: how many eCQM quality measures were successfully reported to CMS over the course of a given interval.

Family Practice physician: CMS22; CMS 68, CMS138; CMS139; CMS156; CMS165

Rheumatology physician: CMS2; CMS68; CMS138; CMS139; CMS154; CMS165

Analysis and Key Findings

For this year, both providers participated in MIPS and successfully submitted eQMs and did not report any errors with their eCQM reporting.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #6. Number of Patients Given Access to Portal

Associated Criteria: 315(e)(1)

Testing Methodology: Reporting/Logging

Measurement Description

The result is how many patients are given login access to their patient portal account over the course of a given interval.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: Number of Patients Given Access to the Portal

Average Result: 3,181 patients with access per provider

Analysis and Key Findings

Our results are in line with last year's findings, and they show that our providers are granting access and updating patient health data to the portal for over 97% of the patient they seen. Real world testing show that our Health IT Module functionality is working as expected and that our relied upon software phiMail Server is working too.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #7. Number of Patients Who Accessed/Logged in to Portal

Associated Criteria: 315(e)(1)

Testing Methodology: Reporting/Logging

Measurement Description

The result is how many patients are successfully logged into and accessed their patient portal account over the course of a given interval.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: Number of Patients Who Logged into/Used Portal

Average Result: 25 per practice

Analysis and Key Findings

In last year's report, our two selected providers did not have any patients utilize the portal, and we stated we would work to better promote its use. This year we saw a notable increase with both providers reporting some patients logging in to their portal. We are pleased to see this growth, and we will continue to encourage the user of our portal within our provider community.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #8. Engagement with IIS/Immunization Registries

Associated Criteria: 315(f)(1)

Testing Methodology: Reporting/Logging

Measurement Description

This measure tracks and counts how many immunization registries are connected and engaged with bi-directional exchange capabilities with the Health IT Module.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Reporting Interval: 6 months

Testing Metric/Measurement: Number of Immunization Registries Working with our EHR

Total Result: 1

Analysis and Key Findings

Our results reveal our Health IT Module functionality is working as expected with both the family practice and rheumatology practice connected to an immunization registry. Results do show that our relied upon software Hi-PaaS (Iron Bridge) is working correctly with our EHR integration in production environment.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



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 tracks compliance the Health IT Module criteria functionality of creating a C-CDA and measuring its C-CDA Scorecard average.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Practices Queried: 2 (one from family practice and one from rheumatology)

Testing Metric/Measurement: Tested C-CDAs using the C-CDA Scorecard - <https://site.healthit.gov/scorecard/>

Average Grade: 69

Analysis and Key Findings

The ONC's funded [C-CDA Scorecard](#) examines C-CDA best practice implementations to provide a grade result for C-CDA quantitative assessment. We selected C-CDAs from test different practices using test patients they created. We used this test to further compliment our previous C-CDA interoperability testing, and it does reveal our C-CDA is acceptable but also does have areas for potential improvement.

In our testing, we found some initial issues due to bad data documented from human entry, and we will take those into account into ways to potentially prevent the capture of incorrect data where possible.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities with our C-CDA generation. We did not make any changes to this measure from our original test plan.



RWT Measure #10. How many different syndromic surveillance registries do you connect with?

Associated Criteria: 315(f)(2)

Testing Methodology: Survey/Reporting

Measurement Description

This is a survey measure to determine how many different syndromic surveillance registries you are connected to and working with.

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.

Testing Results and Changes for this Measure from Original RWT Test Plan

Testing Metric/Measurement: How many different syndromic registries do you connect with?

All reported "Never" among options of Regularly, Sporadically, Rarely, Never, Don't know

Analysis and Key Findings

We currently have no customers connected to or actively using a syndromic surveillance registry. Our internal testing reveals our Health IT Module functionality is working as expected and lack of use is simply due to clients choosing not use it in their day-to-day work.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.



RWT Measure #11. Number of applications/3rd party systems using API capabilities

Associated Criteria: 315(g)(7), (g)(9)-(g)(10)

Testing Methodology: Reporting/Logging and Survey/Self-Test

Measurement Description

This measure determines how many 3rd party systems or applications are integrated and using the EHR's FHIR API interface. This measure will allow us to verify our certified API is working with 3rd party applications to access USCDI patient data.

Care Settings

We designed this measure to test the family practice, internal medicine, and pediatrics practices that we support and target.

Testing Results

Testing Metric/Measurement: Number of 3rd party applications using API capabilities of EHR

Result: 0 API applications

Analysis and Key Findings

Our results reveal our Health IT Module functionality is working as expected, although adoption of API access points is very low at the moment. We also used internal testing using the Postman API tool to confirm our FHIR server is fully functional and to confirm our relied upon software Interoperability Engine (EMR Direct) is working correctly with our EHR integration in production environment.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities. We did not make any changes to this measure from our original test plan.