

# Convergence Care v7 Real World Testing Plan 2025

Prepared for:

SLI

# Contents

GENERAL INFORMATION	3
JUSTIFICATION FOR REAL WORD TESTING APPROACH	3
STANDARDS UPDATES	3
MEASURES USED IN OVERALL APPROACH	4
Scenario 1: § 170.315(b)(1) Transitions of care	4
Scenario 2: § 170.315(b)(2) Clinical Information Reconciliation and Incorporation	4
Scenario 3: § 170.315(b)(7) Security Tags – Summary of Care – Send	5
Scenario 4: § 170.315(b)(8) Security Tags – Summary of Care – Receive	6
Scenario 5: § 170.315(b)(9) Care Plan	6
Scenario 6: § 170.315(b)(10) Electronic Health Information Export	7
SCHEDULE OF KEY MILESTONES	7
ATTESTATION	8

#### **GENERAL INFORMATION**

**Developer Name: Cantata Health Solutions** 

Product Name(s): Convergence Care

Version Number(s): 7

Certified Health IT Product List (CHPL) ID(s): 15.02.05.2022.CONT.01.00.1.211207

Developer Real World Testing Plan Page URL: https://cantatahealth.com/certifications

Plan ID #: 20241007can

#### JUSTIFICATION FOR REAL WORD TESTING APPROACH

This document outlines the test plan approach which Cantata Health will follow to demonstrate the successful use of its Convergence Care product in real world use of the certified health IT module(s). The modules will be tested in each marketed area for the certified criteria within the CHPL listings which are included within the Conditions and Maintenance of Certification: Real World Testing (170.405).

At this time, Convergence Care is marketed toward practitioner workflow in a behavioral health care specialty setting. For this reason, Convergence Care will apply its testing plan to behavioral health care.

This RWT plan incorporates ONC Certification Criteria for Health IT for the following Care Coordination criteria:

- § 170.315(b)(1) Transitions of care
- § 170.315(b)(2) Clinical information reconciliation and incorporation
- § 170.315(b)(7) Security Tags Summary of Care Send
- § 170.315(b)(8) Security Tags Summary of Care Receive
- § 170.315(b)(9) Care Plan
- § 170.315(b)(10) Electronic Health Information Export

If there is no record of client usage for any of these criteria, or we are unable to engage clients with such usage, then we will utilize internal testing systems to demonstrate the system's ability to perform those tasks.

## STANDARDS UPDATES

All standards versions are those specified in the ONC Certification Criteria for Health IT.

#### MEASURES USED IN OVERALL APPROACH

# Scenario 1: § 170.315(b)(1) Transitions of care

Description of Measurement/Metric: Convergence Care will demonstrate that both limited and full sets of data, as required by USCDI standards, are sent and received for Transition of Care (TOC) documentation. The documents will be transmitted/received via direct-messaging using third party Updox as the HISP (Health Information Service Provider).

The following metrics will demonstrate the ability to send and receive transitions of care/referral summaries to/from multiple external facilities.

- **TOC Sent**: Number of successful CCDs provided to external organizations within a period.
- TOC Received: Number of successful CCD retrievals from external organizations within a period.

Measurement/Metric	Certification Criteria	Third party software
TOC Sent	§ 170.315(b)(1)(i)(A) Send transition of care/referral summaries	Updox
TOC Received	§ 170.315(b)(1) (i)(B) Receive transition of care/referral summaries	Updox

Justification: Convergence Care settings include two capabilities for conformance: (1) Sending transition of care summaries and (2) Receiving transition of care summaries. Transition of care documents are shared using Edge protocols (e.g., SMTP, Direct). Seamless exchange of information ensures that providers have timely access to accurate data. The measurements selected demonstrate that TOC messages can successfully be exchanged with external organizations.

Test Methodology: Transaction logs will be reviewed to determine the frequency of providers sending and receiving transitions of care using Edge protocols. Logs obtained during real world testing will be used for analysis 1) to validate the proper operation of the transport system and 2) as input for the calculation of the above metrics.

Expected Outcome(s): We expect that the total number of CCDA documents generated and received will be counted for the Real World Test population of patients. The functionality for sending and receiving will provide a seamless transition into or out of the certified system, and providers will be able to share patient health data as needed. Success and error rates will be tracked over the period.

### Scenario 2: § 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Description of Measurement/Metric: Convergence Care will demonstrate that external medication orders, allergies and problem lists are available for provider review and may be incorporated into the patient's current chart, as needed. The metric will demonstrate the certified product's ability to capture, reconcile and incorporate clinical information from external sources within the patient's record.

Reconciliation: Number of Clinical Reconciliations completed with data from external sources

Measurement/Metric	Certification Criteria	Requirement
Reconciliation	§ 170.315 (b)(2) Clinical	(b)(2)(ii) transition of care summary/referral
	information and	summary Consolidated-Clinical Document
	reconciliation and	Architecture (C-CDA) document can be
	incorporation	

properly matched to a patient in the Health IT
Module (automatically or manually).
(b)(2)(iii)(B) user creates a single, reconciled
list using the data reviewed from the multiple
medications, problems, or medication allergies
(b)(2)(iii)(D) user accepts the reconciled list

Justification: The metric confirms the ability for providers to perform accurate clinical information reconciliation. It shows the ability of the provider to review and maintain accurate medication, allergy, and problem lists for a patient — enabling clinicians to make informed care decisions.

Test Methodology: Transaction logs will be evaluated to validate the proper operation of reconciliation transactions, and to count the number of reconciliations performed with imported data sources.

Expected Outcome(s): We expect that a total number of clinical information reconciliations will be counted over a period for the Real World Test population of patients. This will include medication, allergy and problem list reconciliation, each of which is captured separately in the certified product. The very use of the reconciliation features in the system will give us data to count, and will thereby demonstrate and confirm the customer's ability to create a single, reconciled list including data from imported CCDA documents.

### Scenario 3: § 170.315(b)(7) Security Tags – Summary of Care – Send

Description of Measurement/Metric: Convergence Care will demonstrate that a user can create a summary record that is tagged as restricted and subject to restrictions on re-disclosure. The metrics will demonstrate the user's ability to document privacy information, tag it appropriately with restrictions on disclosure, and then create a CCD document containing all privacy markings.

- Restrictions Documented: Number of Privacy Restrictions documented
- Restrictions Sent: Number of CCDs created with privacy restrictions documented within the document

Measurement/Metric	Certification Criteria	Requirement
Restrictions Documented	§ 170.315(b)(7) Security	(i) Document, section, and entry (data
Restrictions Sent	Tags – Summary of Care – Send	element) level

Justification: The measurements selected demonstrate that a user can document privacy information and tag it appropriately with restrictions on redisclosure. They further demonstrate the ability to export a transition of care document that is tagged appropriately with document, section and/or entry-level restrictions.

Test Methodology: The system records when privacy restrictions are placed on individual elements (e.g. a single problem) or a whole section (e.g. all medications) of a patient's chart. These can be used to count the number of restrictions placed over a period. Database tables within the certified product application contain a record of all CCD documents generated, with the ability to determine whether those documents contain restricted elements. This data will allow calculation of metrics to confirm the ability for customers to mark document, section and entry level restrictions in the patient record and create a CCD document with those restrictions for export.

Expected Outcome(s): We expect that a total number of privacy settings and a total number of CCDAs containing privacy information will be counted for the Real World Test population of patients. The very use of these features in the system will give us data to count, and will thereby demonstrate and confirm the customer's ability to mark restrictions in the patient's record and the ability to create a transition of care document that is tagged with those restrictions and ready for export.

### Scenario 4: § 170.315(b)(8) Security Tags – Summary of Care – Receive

Description of Measurement/Metric: Convergence Care will demonstrate that a user can receive a summary record with document, section or entry level restrictions that is tagged as restricted and subject to restrictions on re-disclosure. The metrics will demonstrate the user's ability to receive and review the document (with appropriate rights) and can then incorporate the restricted data into the patient's chart, if needed.

- Restrictions Received: Number of CCDA documents received with privacy restrictions
- Restrictions Retained: Number of privacy restrictions saved from reconciliation processes

Measurement/Metric	Certification Criteria	Requirement
Restrictions Received	§ 170.315(b)(8) Security Tags	(b)(8)(i) Security Tags Document,
Restrictions Retained	<ul> <li>Summary of Care – Receive</li> </ul>	section and entry (data element)
		level

Justification: The measurements selected demonstrate that a user can review a document with document-, sectionand/or entry-level restrictions, and incorporate that data into the patient's chart, if needed, while maintaining the privacy restriction.

Test Methodology: Database tables within the certified product application contain a record of all CCD documents received, with the ability to determine whether those documents contain restricted elements. In addition, the system records when privacy restrictions are placed into the patient's chart from a reconciliation process. This data will allow calculation of metrics to confirm the ability for users to review a document and retain any privacy settings into the patient record.

Expected Outcome(s): We expect that a total number of CCDAs received containing privacy information and a total number of privacy settings set during reconciliation will be counted for the Real World Test population of patients. The very use of these features in the system will give us data to count, which will demonstrate and confirm the customer's ability to receive private patient health care data, and the provider's ability to review and retain that private PHI in the patient's chart.

#### Scenario 5: § 170.315(b)(9) Care Plan

Description of Measurement/Metric: Convergence Care will demonstrate that Care Plan information can be sent to external sources and received from an external source.

The following metrics will demonstrate the ability to send and receive Care Plan CCDA:

- Care Plans Sent: Number of successful Care Plans provided to external organizations within a period.
- Care Plans Received: Number of successful Care Plan retrievals from external organizations within a period.

Measurement/Metric	Certification Criteria	Third party
		software

Care Plans Sent	§ 170.315(b)(9) Care Plan	(b)(9)(i) - Enable a User to	
Care Plans Received		Record, Change, Access, Create,	
		and Receive Care Plan	

Justification: The measurements selected demonstrate that Care Plan documents can successfully be created and exchanged with external organizations. Seamless exchange of information ensures that providers have timely access to accurate data across care settings.

Test Methodology: Transaction logs will be reviewed to determine the frequency of providers sending and receiving Care Plans. Logs obtained during real world testing will be used for analysis 1) to validate the proper operation of the transport system and 2) as input for the calculation of the above metrics.

Expected Outcome(s): We expect that the total number of Care Plan documents generated and received will be counted for the Real World Test population of patients. The functionality for sending and receiving will provide a seamless transition into or out of the certified system, and providers will be able to share patient health data as needed. Success and error rates will be tracked and over the period.

# Scenario 6: § 170.315(b)(10) Electronic Health Information Export

Description of Measurement/Metric: Convergence Care will demonstrate that a user with appropriate security rights can gather electronic health information (EHI) for export for a single patient or for a selected patient population in a timely fashion. The following metrics will demonstrate that data can be collected for a single patient or a patient population:

- Single EHI Export: Number of times a single patient's EHI data is collected for export
- Multiple EHI Export: Number of times a selected patient population's EHI data is collected for export

Measurement/Metric	Certification Criteria	Requirement
Single EHI Export	§ 170.315(b)(10) Electronic	(i) Single patient EHI export
	Health Information export	
Multiple EHI Export		(ii) Patient population EHI export (All)

Justification: The measurement selected demonstrates that customers are able to generate a batch of CCDAs (continuity of care, summary, referral and care plan per patient to cover all EHI) for a single patient or for a subset of their client population. The intent of this feature is to provide data research to analyze specific trends in the patient population. The data metrics associated with the criteria in the above scenario confirm the ability for customers to generate such information.

Test Methodology: Log files will provide an audit of all batches generated. Database tables within the certified product application contain a record of all scheduled jobs created.

Expected Outcome(s): We expect that a total number of patients or groups of patients for whom EHI data was collected for export will be counted. The very use of these features in the system will give us data to count, which will demonstrate and confirm the ability of the user to generate such reports.

## SCHEDULE OF KEY MILESTONES

Key Milestone Timeframe
-------------------------

Deadline to submit Real World Testing Plan documentation to SLI	Oct 15, 2024
Develop list of candidates to help with testing	Jan, Feb 2025
Confirm candidates for testing	Feb-March 2025
Collection of information as laid out by plan	2 <sup>nd</sup> or 3 <sup>rd</sup> Quarter,
	2025
Validation of data collected to date	2 <sup>nd</sup> or 3 <sup>rd</sup> Quarter,
	2025
Adjustment to plan, as need per validation results	2 <sup>nd</sup> or 3 <sup>rd</sup> Quarter,
	2025
Collection of Final Data	Nov-Dec, 2025
Compilation and validation of data	Nov-Dec, 2025
Report creation	Jan, 2026
Submit RWT report to ACB per their timeline	Feb 1, 2026

### **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.

Gul 60-

Authorized Representative Name: Gail Saidlower

Authorized Representative Email: gail.saidlower@cantatahealth.com

Authorized Representative Phone: (516) 286-9102

Authorized Representative Signature:

Date: September 21, 2024