

2025 Real World Testing Plan BroadStreet v1

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Introduction

The 21st Century Cures Act Final Rule requires certified health IT developers to assess the real-world interoperability of their systems based on the established Certification Criteria. In response, BroadStreet Health LLC has developed a robust Real World Testing plan to evaluate the interoperability and performance of its certified health IT system, BroadStreet v1.

Plan Report ID Number	20241114brd
Developer Name	BroadStreet Health LLC
Product Name(s)	BroadStreet
Version Number	v1
Certified Health IT Product List (CHPL) ID(s):	15.05.05.3161.BRDS.01.00.1.231222
Developer Real World Testing Plan Page URL:	https://broadstreetcare.com/onc-health-it-certification

Justification

BroadStreet Health LLC has developed a mobile physician platform tailored to support providers who care for elderly and psychosocially vulnerable individuals in skilled nursing facilities, assisted living facilities, residential care facilities, and home settings. We aim to facilitate seamless communication between multiple providers across diverse care environments, ensuring timely, appropriate, and efficient care for this complex patient population. Given the variety of care settings and product usage, our testing will focus on practices delivering mobile Primary Care and Psychiatric services, aligning with the corresponding criteria to demonstrate the success of our platform’s interoperability, functionality, and overall user experience. BroadStreet is certified to a wide variety of Real-World Testing (RWT) criteria. BroadStreet Health identified use cases and measures for the criteria the BroadStreet product is certified to which falls within the RWT scope.

The functionality and use cases included in this testing effort include all certification criteria under 45 C.F.R. §170.315(b)(1), (2), (b)(10), (c)(1), (2), (3), (e)(1), (g)(7), (g)(9), (g)(10), and (h)(1) to which is certified, specifically:

- (b)(1) Transitions of Care
- (b)(2) Clinical Information Reconciliation and Incorporation
- (b)(10) Electronic Health Information (EHI) export
- (c)(1) Clinical Quality Measures (CQMs) – Record and Export
- (c)(2) Clinical Quality Measures (CQMs) – Import and Calculate

- (c)(3) Clinical Quality Measures (CQMs) – Report
- (e)(1) View, Download, and Transmit to 3rd Party
- (g)(7) Application Access – Patient Selection
- (g)(9) Application Access – All Data Request
- (g)(10) Standardized API for Patient and Population Services
- (h)(1) Direct Project

Measures

Measure	Description	Certification Criteria
Ability and Accuracy of Sharing	This measure will assess the sharing and receiving of CCD health information, the accuracy of this information, and patients' ability to engage in the review of their health information.	§170.315 (b)(1) Transitions of Care §170.315 (e)(1) View, Download, and Transmit to 3rd Party
Ability and Accuracy of Response	This metric tracks the receipt of Clinical Information Reconciliation and Incorporation, ensuring it is properly matched to the correct patient and formatted according to standards. It also monitors the volume of reconciliation and incorporation.	§170.315 (b)(2) Clinical Information Reconciliation and Incorporation
Communication	This measure will assess the percentage of single-patient exports to EHI from the chosen practice	§170.315 (b)(10) Electronic Health Information (EHI) export §170.315 (h)(1) Direct Project
Clinical Quality	This measure will assess the utilization and accuracy of quality measures in recording, calculating, and reporting to the chosen practice.	§170.315 (c)(1) Clinical Quality Measures (CQMs) – Record and Export §170.315 (c)(2) Clinical Quality Measures (CQMs) – Import and Calculate §170.315 (c)(3) Clinical Quality Measures (CQMs) – Report
API Access	This measure will track the process of receiving a request, responding to API queries with sufficient information to accurately identify a single patient or multiple patients, and returning a token that enables an application to execute subsequent requests for that patient's data.	§170.315 (g)(7) Application Access – Patient Selection §170.315 (g)(9) Application Access – All Data Request §170.315 (g)(10) Standardized API for Patient and Population Services

SVAP Standards Updates

Standard (and version)	170.205(a)(5) HL7® CDA R2 Implementation Guide: C-CDA Templates for Clinical Notes R2.1 Companion Guide, Release 3-US Realm, May 2022
Updated certification criteria and associated product	b1, b2, e1, g9
Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A
Conformance method and measurement/metric(s)	b1: ONC Test Procedure; Version: V 1.4 b2: ONC Test Procedure; Version: V 1.3 e1: ONC Test Procedure; Version: V 1.5 g9: ONC Test Procedure; Version: V 1.4 ===== b1, e1: Ability and Accuracy of Sharing b2: Ability and Accuracy of Response g9: API Access
Standard (and version)	170.213 United States Core Data for Interoperability (USCDI), Version 2, July 2021
Updated certification criteria and associated product	b1, b2, e1, g9, g10
Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A

Conformance method and measurement/metric(s)	<p>b1: ONC Test Procedure; Version: V 1.4 b2: ONC Test Procedure; Version: V 1.3 e1: ONC Test Procedure; Version: V 1.5 g9: ONC Test Procedure; Version: V 1.4 g10: ONC Test Procedure; Version: V 2.4 ===== b1, e1: Ability and Accuracy of Sharing b2: Ability and Accuracy of Response g9, g10: API Access</p>
Standard (and version)	170.204(a)(1) Web Content Accessibility Guidelines (WCAG) 2.1, June 05, 2018 (Level A Conformance)
Updated certification criteria and associated product	e1
Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A
Conformance method and measurement/metric(s)	<p>ONC Test Procedure; Version: V 1.5 ===== Ability and Accuracy of Sharing</p>
Standard (and version)	170.205(h)(2) "HL7 CDA® R2 Implementation Guide: Quality Reporting Document Architecture - Category I (QRDA I); Release 1, DSTU Release 5.3 with errata (US Realm), Volume 1 - Introductory Material, December 2022"
Updated certification criteria and associated product	c1, c2
Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A

Conformance method and measurement/metric(s)	c1: ONC Test Procedure; Version: V 1.8 c2: ONC Test Procedure; Version: V 1.4 ===== Clinical Quality
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Standard (and version)	170.205(h)(3) 2023 "CMS Implementation Guide for Quality Reporting Document Architecture: Category I; Hospital Quality Reporting; Implementation Guide for 2023 CMS Implementation Guide for Quality Reporting Document Architecture: Category I; Hospital Quality Reporting; Implementation Guide for 2023" 170.205(k)(3) 2023 "CMS Implementation Guide for Quality Reporting Document Architecture: Category III; Eligible Clinicians and Eligible Professionals Programs; Implementation Guide for 2023"
Updated certification criteria and associated product	c3
Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A
Conformance method and measurement/metric(s)	ONC Test Procedure; Version: V 1.5 ===== Clinical Quality

Standard (and version)	170.215(b)(1)(i) 5.0.1 HL7® FHIR® US Core Implementation Guide STU 5.0.1, June 2022 170.215(c)(2) HL7® FHIR® SMART Application Launch Framework Implementation Guide Release 2.0.0, November 26, 2021 170.215(d)(1) HL7® FHIR® Bulk Data Access (Flat FHIR®) (v2.0.0: STU 2), November 26, 2021
Updated certification criteria and associated product	g10

Health IT Module CHPL ID	15.05.05.3161.BRDS.01.00.1.231222
Date of ONC ACB notification	Dec 22, 2023
Date of customer notification	N/A
Conformance method and measurement/metric(s)	ONC Test Procedure; Version: V 2.4 ===== API Access

Test Case 1 (b)(1)

Certification Criteria	§170.315 (b)(1) Transitions of Care
Measure/Metric	Ability and Accuracy of Sharing
Care Settings	Post Acute and Long Term Care Settings
Relied Upon Software	EMR Direct Interoperability Engine
Justification	The selected measurement demonstrates that referral messages can be successfully exchanged with external organizations using BroadStreet CCDA "Send" and "Receive" functionality.
Test Methodology	We will analyze log data to determine the number of CCDAs sent, created, received, and reconciled across our user base.
Expected Outcomes	Based on database evaluation, we expect CCDAs to be sent and received without error for the assessed population over time. Successful CCDA exchanges automatically trigger several backend processes, including compliance with Direct Edge Protocols, HL7 standards, and USCDI requirements, depending on the certified modality. Logs will be assessed to confirm that CCDAs are incorporated and reconciled upon receipt, with incorporation occurring simultaneously. The number of CCDAs sent and received should be closely aligned, and the system will automatically handle these processes in accordance with the certified standards. Error rates will be tracked and trended over time.

Test Case 2 (b)(2)

Certification Criteria	§170.315 (b)(2) Clinical Information Reconciliation and Incorporation
Measure/Metric	Ability and Accuracy of Response
Care Settings	On-Site Primary Care at Residential Care Facility
Justification	This measure will quantify the frequency of interoperability feature use and compliance. Each increment indicates the EHR's ability to receive and incorporate a CCDA patient summary, demonstrating successful or unsuccessful interoperability of problems, medications, and allergies.
Test Methodology	The tester will identify a user who has received and incorporated a transition of care/referral summary into BroadStreet. The tester will visually confirm that the document was matched to the correct patient and that the user successfully reconciled and merged data into the Medication List, Medication Allergy List, and Problem List. BroadStreet logs will then be analyzed to assess the system's success-to-failure ratio.
Expected Outcomes	The measurement will generate numeric results over a set time frame, using reports and audit logs to determine counts. Data will be collected over at least three months to provide an accurate sample of real-world interoperability. A successful measure indicates compliance with ONC criteria, showing that the EHR can receive and incorporate a CCDA patient summary and demonstrate the interoperability of problems, medications, and allergies. Error rates for failed reconciliations will be tracked over time, and the measure count will establish a baseline for future testing.

Test Case 3 (e)1

Certification Criteria	§170.315 (e)(1) View, Download, and Transmit to 3rd Party
Measure/Metric	Ability and Accuracy of Sharing
Care Settings	On-Site Primary Care at Assisted Living Facility
Justification	The total incident of portal utilization for review by a patient, allowed family member, or caregiver/caretaker over a set testing period. This care setting is characterized by a relatively healthier elderly population which may be more technically astute in monitoring their health status as well as a probable higher number of family caregivers/caretakers invested in the patient's care and needing the ability to view the patient's health status. Reviewing the database and logs will allow BroadStreet Health to identify any errors in patients' attempts to view, download, or transmit their health information.

Test Methodology	The tester will identify a customer who has provided BroadStreet PHR access to patients and determine how many patients accessed the portal to view, download, or transmit their health information. The tester will also verify that the EHR logs each action appropriately.
Expected Outcomes	BroadStreet reports and logs will be reviewed to determine usage frequency. De-identified logs from Real World Testing will be analyzed to validate proper export functionality, with error rates tracked and trended over time to ensure performance without errors.

Test Case 4 (b)(10)

Certification Criteria	§170.315 (b)(10)
Measure/Metric	Communication
Care Settings	On-Site Primary Care at Assisted Living Facility
Justification	The total number of export incidents to an Electronic Health Information (EHI) will be quantified by review of BroadStreet logs during an established testing period. This care setting utilizes this capability the most frequently out of the marketed settings currently utilizing the BroadStreet system. By measuring the most frequent user's incidents, an overall usage of the ability to export clinical data to the EHI will be established.
Test Methodology	Testing will be conducted in a production environment using real patient data. Logs will be reviewed to track the frequency and completion times of export requests. Test cases will simulate both individual and population-level EHI exports. Count of distinct patient views and downloads of their health data via patient portal will be reviewed from the logs / database to determine usage over time. Compatibility will be verified by importing the exported data into external systems to ensure compliance with data exchange standards. If low adoption of any certified criteria is detected, compliance will be further evaluated using synthetic data and ONC-approved testing tools, in conjunction with real-world data.
Expected Outcomes	The system will consistently generate and export EHI for both individual patients and populations, ensuring the data is complete, accurate, and properly formatted to meet interoperability standards. It will support multiple specialties across Post Acute, Long Term Care, and community-based settings, showcasing versatility in EHI export functionality. Logs will reflect consistent, reliable performance with minimal errors or delays in data generation. Error rates will be tracked and trended over time.

Test Case 5 (c)(1),(2),(3)

Certification Criteria	§170.315(c)(1) Clinical Quality Measures - Record and export §170.315(c)(2) Clinical quality measures - import and calculate §170.315(c)(3) Clinical quality measures– report
Measure/Metric	Clinical Quality Care
Care Settings	On-Site Psychiatric Care at Skilled Nursing Facility
Justification	We are using CMS139v11: Falls: Screening for Future Fall Risk as a Quality Measure for Real World Testing (RWT). This measure will provide a count and list of electronic clinical quality measures (eCQMs) calculated and submitted to CMS for programs like MIPS. eCQMs are used solely for CMS programs, and production measures should be submitted accordingly. Since CQM criteria §170.315(c)(1), (c)(2), (c)(3) function together in the eCQM capability of the EHR Module, this measure applies to all three.
Test Methodology	The tester will evaluate QRDA I and III reports generated by real-world users, identifying the measures used and the number of files generated for each. The (c)(1), (c)(2), and (c)(3) measures will track clinicians' actions and system responses during the recording, importing, calculating, and exporting of CQM data.
Expected Outcomes	This measure will count and list eCQMs submitted to CMS over a given period. We will ask customers to report the number of successfully and unsuccessfully submitted eCQMs, indicating compliance with the relevant criteria. Successful submissions show the EHR's ability to calculate and submit eCQMs to CMS, while unsuccessful submissions will highlight system errors, which will be tracked over time. One challenge is that a majority of our practices participate in Value Based Programs which has differing requirements from the eCQM program by CMS. If low adoption of any certified criteria is detected, compliance will be further evaluated using synthetic data and ONC-approved testing tools, in conjunction with real-world data.

Test Case 6 (g)(7),(9)

Certification Criteria	§170.315 (g)(7) Application Access – Patient Selection §170.315 (g)(9) Application Access – All Data Request
Measure/Metric	API Access
Care Settings	On-site Primary Care at an Assisted Living Facility
Justification	To ensure secure and authorized access to individual patients' Electronic Health Information (EHI) via the BroadStreet API, this measure will track and monitor the usage of the API by third-party developers. The focus will be on patient selection and data access, whether targeting specific data categories or the complete patient record.
Test Methodology	BroadStreet will maintain detailed logs of all incoming API requests for patient data access, along with the corresponding responses. These logs will be de-identified and analyzed to evaluate various factors, including requester authentication, API endpoint utilization, and response accuracy. This analysis ensures the proper functioning of the APIs. If low adoption of any certified criteria is detected, compliance will be further evaluated using synthetic data and ONC-approved testing tools, in conjunction with real-world data.
Expected Outcomes	We anticipate minimal data access issues, as the functions outlined in the criteria are expected to operate smoothly. However, if a third party encounters ongoing challenges due to its technology stack, we offer extensive support to help improve data transmission and ensure seamless integration. Error rates will be tracked and trended over time.

Test Case 7 (h)(1)

Certification Criteria	§170.315 (h)(1) Direct Project
Measure/Metric	Communication
Care Settings	Post Acute and Long Term Care Settings
Relied Upon Software	EHR Direct
Justification	This measure will track Direct communication for sending and receiving, providing data on the number of messages sent and received, total patients involved, and frequency of use.

Test Methodology	BroadStreet database transactions will be reviewed continuously to determine usage frequency. De-identified logs from Real World Testing will be analyzed to validate the proper operation of sending and receiving functions. This test methodology focuses on assessing the implementation's conformance. If low adoption of any certified criteria is detected, compliance will be further evaluated using synthetic data and ONC-approved testing tools, in conjunction with real-world data.
Expected Outcomes	BroadStreet is expected to meet the requirements of §170.315(h)(1) Direct Project, allowing users to securely exchange EHI with trusted providers. Success and failure logs will be maintained to track the performance of the implemented measure. Error rates will be tracked and trended over time.

Test Case 8 (g)(10)


Certification Criteria	§170.315 (g)(10) Standardized API for patient and population services
Measure/Metric	API Access
Care Settings	Post Acute and Long Term Care Settings
Justification	BroadStreet provides access to patient data via FHIR® interfaces, enabling a metric on FHIR® API usage. Credentialing is tested indirectly, as only authorized users can access patient data, which will be verified through log file reviews.
Test Methodology	De-identified log files collected during Real World Testing will be analyzed to certify the proper functioning of §170.315(g)(10) "Standardized API for patient and population services." For FHIR® APIs, this will ensure appropriate credentialing and verify that all required USCDI data elements are fully supported. If low adoption of any certified criteria is detected, compliance will be further evaluated using synthetic data and ONC-approved testing tools, in conjunction with real-world data.
Expected Outcomes	The API will successfully handle patient and population-level data requests, ensuring that data exported is accurate, complete, and provided in a timely manner. The system will demonstrate consistent performance with reliable response times and low error rates, while also driving increased engagement from patients and third-party applications through API access. Additionally, the system will meet regulatory standards for performance, security, and data standardization. This testing will confirm the API's ability to effectively support patient and population services, ensuring full interoperability across healthcare systems. Error rates will be tracked and trended over time.

Key Milestones

Key Milestone	Care Setting	Date/Timeframe
Release of documentation for the Real World Testing and submitted to SLI Compliance	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	October 15, 2024
Begin collection of information as laid out by the plan.	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	January 1, 2025
Onboarding selected providers/organizations to facilitate Real World Testing plan.	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	2nd Quarter, 2025
Follow-up with providers and authorized representatives to understand any issues arising with the use of functionality.	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	2nd Quarter, 2025
Data collection and review	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	3rd Quarter, 2025
End of Real World Testing period/final collection of all data for analysis.	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	January 1, 2026
Analysis and report creation.	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	January 5, 2026
Submit Real World Testing report	Post Acute and Long Term Care Settings, On-site Primary Care at an Assisted Living Facility, On-Site Primary Care at Residential Care Facility, On-Site Psychiatric Care at Skilled Nursing Facility	January 10, 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.

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