Trinity EHR – Real World Testing - 2023

General Information

Developer: DataLink Software, LLC

Software Name & Version: Trinity 4.0

CHPL Product Number: 15.04.04.2895.Trin.03.00.1.190611

Real World Testing Link: https://datalinksoftware.com/solutions/trinity-ehr-version-information/

Real World Testing Strategy

We want to ensure that our Providers and their Patients always have access to their data. Our testing approach will consist of coordination between DataLink and one of our users of Trinity to ensure we not only meet certification criteria, but also their workflow needs. Our test plan was put together based on actual scenarios used within an Ambulatory care setting, focusing on Family Medicine, as that covers our current client base. The test strategy was developed to ensure all measures are accounted for with expected outcomes for all measures documented.

Real World Test Plan

Measure: 170.315(b)(1) – Transitions of Care
Measure: 170.315(b)(2) – Clinical Information Reconciliation & Incorporation
Measure: 170.315(e)(1) – View, Download, and Transmit to Third Party
Measure: 170.315(h)(1) – Direct Project

Standards Updates:
- All standards versions are those specified in USCDI v2
- SVAP – Not Applicable

Care Setting:
- Ambulatory – Family Medicine

Use Case: As a Healthcare Provider seeing my Patient before surgery, I need to be able to perform a pre-surgery exam and send the clinical details electronically to the outside Specialist performing the surgery, prior to my Patient's arrival at the Specialist office. Once my Patient has completed surgery, I need to be able to receive the clinical details electronically from the outside Specialist who performed the surgery to perform my post-surgery follow-up. I need to be able to view, reconcile the clinical information if I wish to do so, and then incorporate into my patient's chart.

Justification: Use case is in line with care setting for which Trinity is marketed. This use case outlines the most common use of meeting the following criterion – 170.315(b)(1), 170.315(b)(2), 170.315(e)(1), 170.315(h)(1).

Test Plan / Expected Outcome:

*Trinity allows for customizable templates so during template creation, a user will be guided to select the appropriate CCDA template type using proprietary "best fit" technology. *

1. Provider sees Patient and documents visit in SOAP note within Trinity
2. Provider will sign/complete the SOAP note within Trinity and CCDA is auto generated
3. Provider can pick the method they wish to transmit the CCD:
   a. Utilize EMR Direct phiMail software for Direct Messaging to send clinical data in CCD format to outside Specialist
   b. Download the CCD from Trinity and securely transmit to the outside Specialist
4. Outside Specialist receives the clinical data using either method (3a/3b) in CCD format
5. Outside Specialist sees Patient and documents visit within their EHR application
6. Outside Specialist will transmit the CCD to Trinity either via Direct Messaging or another agreed upon secure format
7. Provider receives CCD in agreed upon format
   a. If Direct Messaging, CCD will import directly into Trinity
      i. Provider will be notified when new direct message is available within Trinity
   b. If another secure method, CCD will need to be imported into Trinity
      i. *This can be done by the end user and does not require Developer involvement*
8. Provider can choose to:
   a. Import the CCD only from the outside Specialist into their Patient's Chart within Trinity
   b. Import & reconcile the CCD from the outside Specialist into their Patient's Chart within Trinity
9. Provider can reconcile Problems, clinical data from CCD using reconciliation tool within Trinity
   a. Allows Trinity Provider to choose which data to reconcile and incorporate into Patient's chart

Measure(s):
- "App Insights"
  o Tool will allow Health IT Developer & Users to deep dive into Application Statistics
  o Health IT Developers & Users will be able to:
    ▪ Track & report on transaction volume with pass/fail % rates for tracking useability
    ▪ Track & report on system downtime to ensure reliability of our application

Measure: 170.315(b)(6) – Data Export

Standards Updates:
- All standards versions are those specified in USCDI v2
- SVAP – Not Applicable

Care Setting:
- Ambulatory – Family Medicine

Use case: As a Healthcare Provider, with a patient that is moving out of state to a new Healthcare Provider, I need the ability to export my patient's electronic health records directly from the EHR so my patient can continue care with their new Healthcare Provider.

Use Case: As a Healthcare Provider, unfortunately several of my patients must begin seeing a different Healthcare Provider because their payer's network of Provider's is changing. However, so that continuity of care for my patients can continue, I will be exporting patient records to their new Healthcare Provider.

Justification: Use case(s) are in line with care setting for which Trinity is marketed. This use case outlines the most common use of meeting the following criterion – 170.315(b)(6)

Test Plan / Expected Outcome:

1. Provider can access the export module from within Trinity
   a. *Trinity requires specific rights/permissions to perform this function*
2. Provider can choose to perform the export now, or schedule for a later date with
3. Provider can choose to setup a recurring export
4. Provider can select to export electronic health records from one center or multiple centers at one time
5. Provider can select to export for one patient, a group of patients, or all patients
6. Provider can set a start & end date for the export
7. Exported file is downloaded & ready for transmission

Measure(s):
- "App Insights"
  - Tool will allow Health IT Developer & Users to deep dive into Application Statistics
  - Health IT Developers & Users will be able to:
    - Track & report on transaction volume with pass/fail % rates for tracking useability
    - Track & report on system downtime to ensure reliability of our application

Measure: 170.315(f)(1) – Transmission to Immunization Registries

Standards Updates:
- All standards versions are those specified in USCDI v2
- SVAP – Not Applicable

Care Setting:
- Ambulatory – Family Medicine

Use Case: As a Healthcare Provider, I need to keep my patient's immunization records up to date with the State Immunization Registry, as well as query the State Immunization Registry for any additional immunization details for my patient, not present currently in their chart.

Justification: Use case is in line with care setting for which Trinity is marketed. This use case outlines the most common use of meeting the following criterion – 170.315(f)(1)

Test Plan / Expected Outcome:

1. Provider captures Immunization administration details in Trinity
2. Provider can upload one or multiple HL7 Immunization files to their State Immunization Registry
    a. *Requires an Immunization Registry connection*
3. Provider can review the acknowledgment (ACK) for the HL7 Immunization file(s) to ensure it was received with no errors
    a. If there are errors, you will be able to correct and then upload the corrected HL7 Immunization file
4. Provider can query their State Immunization Registry for patient Immunizations not currently captured in Trinity, by downloading the query from their State Immunization Registry and viewing the results within Trinity.

Measure(s):
- "App Insights"
    - Tool will allow Health IT Developer & Users to deep dive into Application Statistics
    - Health IT Developers & Users will be able to:
        - Track & report on transaction volume with pass/fail % rates for tracking useability
        - Track & report on system downtime to ensure reliability of our application

Measure: 170.315(g)(7) – Application Access – patient selection

Measure: 170.315(g)(8) – Application Access – data category request

Measure: 170.315(g)(9) – Application Access – all data request

Standards Updates:
- All standards versions are those specified in USCDI v1
- SVAP – Not Applicable

Care Setting:
- Ambulatory – Family Medicine

Use Case: As a Patient or Authorized Representative for a patient, that does not have access to Trinity, having publicly accessible APIs allows me to request my own patient data, or request data on behalf of a patient as an authorized representative.

Use Case: As a Third-Party application developer, having publicly accessible APIs available from my clients EHR, allows me to integrate faster and more seamlessly.

Justification: Use case(s) are in line with care setting for which Trinity is marketed. This use case outlines the most common use of meeting the following criterion – 170.315(g)(7),170.315(g)(8),170.315(g)(9)

Test Plan / Expected Outcome:

1. Navigate to https://datalinksoftware.com/solutions/evokeehr-api-documentation/
   a. In order to access patient information, any patient or patient authorized representative should first be registered to the DataLink Patient Portal at. Upon account setup a username and password will be created that will be used to access the DataLink PDAPI.
   b. The DataLink PDAPI validates the login credentials and access to patient information. The API returns a limited time Bearer token which should be used for subsequent API calls.
2. Patient Selection API: DataLink PDAPI provides an API that receives a request with identifying information about a patient and returns a unique token specific to that patient. The unique patient token can be used as a parameter when calling the data access API endpoints. The account must be setup to have access to the patient requested.
3. Data Category Request API: DataLink PDAPI provides access to patient clinical data based on different CCDA data categories. This API responds to requests for patient data for each of the individual data categories specified in the API documentation and returns the full set of data for that data category. The API also responds to requests for patient data associated with a specific date as well as requests for patient data within a specified date range.
4. All Data Request API: DataLink PDAPI provides access to all patient clinical data. This API responds to requests for patient data for all the data categories specified in the API documentation. The API also responds to requests for patient data associated with a specific date as well as requests for patient data within a specified date range.

Measure(s):
- "App Insights"
  - Tool will allow Health IT Developer & Users to deep dive into Application Statistics
  - Health IT Developers & Users will be able to:
    - Track & report on transaction volume with pass/fail % rates for tracking useability
    - Track & report on system downtime to ensure reliability of our application

Measure: 170.315(g)(10) – Standardized API for Patient and Population Services

Standards Updates:
- All standards versions are those specified in USCDI v1
- SVAP – Not Applicable

Care Setting:
- Ambulatory – Family Medicine

Use Case: As a user of Trinity, being able to launch a SMART on FHIR application from within my EHR, that has been registered and authorized, allows me to take advantage of app technology that can allow insight into more specific data points for individual patients or a population of my patients.

Use Case: As a Patient whose Provider utilizes Trinity, I have access to a web application with FHIR API technology which gives me flexibility to view and limit or share my healthcare data with registered and authorized SMART on FHIR applications.

Justification: Use case is in line with care setting for which Trinity is marketed. This use case outlines the most common use of meeting the following criterion – 170.315(g)(10)

Test Plan / Expected Outcome:

1. All smart applications must be registered by DataLink's FHIR API Registration Service prior to data exchange.
2. EHR Launch allows a user of Trinity, with the correct user rights, to access the "FHIR Launch" from within the admin section, select appropriate parameters, and launch FHIR API calls to registered smart applications. Authentication is handled within Trinity during initial sign on to the application.
3. Standalone Launch allows persons that do not have access to the EHR, to also launch FHIR API calls to registered smart applications. Our web-based application allows an authenticated patient or third party to request registration of a SMART on FHIR application. Standalone application will allow for limited or full scope data usage, based on the authenticated users' preferences.

Measure(s):
- "App Insights"
  - Tool will allow Health IT Developer & Users to deep dive into Application Statistics

- o Health IT Developers & Users will be able to:
  - Track & report on transaction volume with pass/fail % rates for tracking useability
  - Track & report on system downtime to ensure reliability of our application

2023 Key Milestones

1. Deploy App Insights for FHIR Services – Q1
2. Review & Implement additional USCDI elements – Q1-Q4
3. Complete updates required for (b)(10) certification – Q1-Q3

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.

Authorized Representative:

Name: Charles Stewart

Email: Charles.Stewart@datalinksoftware.com

Phone: (813) 903-1091

Signature: _____

Date: 10/26/2022