

2024 Real World Test Results

Tebra Technologies, Inc / Tebra EHR

Executive Summary

This is the test report for CY 2024 Real World Testing for versions 5.1 and 5.0 of our Tebra (Kareo) EHR solution. This is the companion document to our CY 2024 real world test plan that describes our approach for conducting real world testing in CY 2024 and the testing measures we employed.

We completed our testing using version 5.0 of our product as stated in our CY 2024 test plan, and our results show that the EHR is working in our production environment as it was certified. For each of our CY 2024 Real World Testing Measures, we have recorded our findings and provided some analysis of their interpretation. We did not discover any non-conformities or errors while testing.

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General Information

Plan Report ID Number: Tebra-RWT-2024

Developer Name: Tebra Technologies, Inc.

Product Name(s): Tebra (Kareo) EHR

Version Number(s): 5.0 and 5.1

Certified Health IT Criteria: 315(b)(1)-(3), (b)(10), (e)(1), (g)(7),(g)(9)-(10)

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

- Version 5.0
 - 15.04.04.2777.Tebr.05.02.1.221219
 - <https://chpl.healthit.gov/#/listing/11090>
- Version 5.1
 - 15.04.04.2777.Tebr.05.03.1.241219
 - <https://chpl.healthit.gov/#/listing/11557>

Developer Real World Testing Page URL: <http://www.tebra.com/macra>

Timeline and Milestones for CY 2024

- **First Quarter 2024:**
 - Health IT system is fully enabled for use in real world testing.
 - Status: MET
- **Second and Third Quarter 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
- **Fourth Quarter 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
- **First Quarter 2025:**
 - Submit RWT Test Report to ONC-ACB
 - Status: MET

Standards Version Advancement Process (SVAP) Updates

For CY 2024 RWT testing, we used all required ONC Certification Program standards, including USCDI v1. We did not do any SVAP updates.

Standard (and version)	USCDI v1
Updated certification criteria and associated product	315(b)(1), (2), (b)(6); (e)(1); (g)(9)-(10)
Health IT Module CHPL ID	15.04.04.2777.Kare.05.02.1.221219
Conformance Measure	Measure 1 for 315(b)(1) Measure 2 for 315(b)(2) Measure 4 for 315(b)(6)/(b)(10) Measures 5 and 6 for 315(e)(1) Measure 7 for 315(g)(7), (9), and (g)(10)

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

Associated Criteria 315(b)(1)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of C-CDAs created and successfully sent from the EHR Module to a 3rd party via Direct messaging during a transition of care event. We did not change this measure from our original test plan.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Clinics Surveyed:* 89
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of C-CDAs Successfully Sent
- *Total C-CDAs Sent for all Clinics:* 2725
- *C-CDAs by Top 5 Clinic Results:* 2129
- *Baseline (2023 Results):* 0

Analysis and Key Findings

We identified a representative sample of our custom sites for this testing. All of the practices selected have enabled our 3rd party additional software Updox (version 2016.1) for the Direct exchange capabilities.

Our results show that many of our customers do not send C-CDAs or do not send them very frequently, but rather the C-CDA usage is concentrated in a few practices. From our sample, our top 5 practices in terms of C-CDA transmission represent over 75% of the total C-CDAs sent from our testing. This aligns with information we have gathered from our customer discussions that they typically prefer to share data through eFax capabilities rather than C-CDA exchange. However, our results are up significantly compared to last year's 0 result.

We are not aware of any specific technical hindrances or interoperability issues preventing great C-CDA exchange use, but we believe it is related to providers' preferred choices and possibly established habits. However, our results show that a non-trivial number of our clients use and rely on C-CDAs in their regular workflow.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.

RWT Measure #2: Number of C-CDAs Received and/or Incorporated

Associated Criteria 315(b)(2)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of C-CDAs successfully received and/or incorporated upon receipt from a third party via Direct messaging during a transition of care event. We did not change this measure from our original test plan.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Clinics Reporting:* 1
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of C-CDAs Received
- *Total C-CDAs Received:* 445
- *Total Unique Patients with Incorporated Records:* 152
- *Incorporation per C-CDA Received:* $152/445 = 34\%$

Analysis and Key Findings

As noted above with RWT Measure #1, a low percentage of our customers send and receive the majority of our C-CDAs. We focused on practice from Measure #1 which had the most C-CDA exchanges, and we examined how many C-CDAs were received and then incorporated. This result also confirmed the working of our relied upon software HISP Updox (version 2016.1).

For this practice, they often received multiple C-CDAs for the same patient throughout the three-month measurement period as they reconciled their records from various other places of care.

This was informative in showing that our high-volume users often receive multiple C-CDAs per patient over a short period of time.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.

RWT Measure #3: Number of NewRx Prescription Messages Successfully Sent

Associated Criteria 315(b)(3)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of NewRx electronic prescriptions created and successfully sent from the EHR Module to a pharmacy destination. We did not change this measure from our original test plan.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Clinics Reporting:* 3
- *Providers Reporting:* 9
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of NewRx Messages Sent
- *Total New eRx for all Clinic:* 3201
- *Average NewRx/provider-per month:* $3201/(9 \times 3) = 118$ NewRx Sent Per Provider each Month

Analysis and Key Findings

Our ePrescribing feature is very popular and widely used in our EHR. Our total numbers are approximately the same as last year's results indicating a steady and consistent use. Our results included both controlled and non-controlled substances sent electronically, and over 10% of our New Prescription messages were controlled substances using EPCS ordering. Our testing also reveals our third-party relief upon software eRx Provider DrFirst Rcopia is fully integrated and working with our EHR.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.

RWT Measure #4: Number of EHI Patient Exports Run

Associated Criteria 315(b)(10)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of exports of patient EHI, including C-CDAs and other patient documents, that the EHR Module successfully performed during a given interval.

This is a modification from our initial measurement in our test plan. We had previously identified a measure for 315(b)(6) Patient Batch Export, but we have substituted it for the broader 315(b)(10) EHI Export which has been in place for the entire 2024 calendar year.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Providers Tested:* 755
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of Patient Batch Exports Run
- *Total EHI Exports:* 3931
- *Total Practices Performing Exports:* 790
- *Exports Per Practice (Average):* $3931/790 = 4.98$ Exports per Practice

Analysis and Key Findings

All EHI Export actions were completed without issue. Our EHI Export functionality allows providers to select a date range for filtering the patients included in the export. Most exports contained less than 100 patients as providers were looking for shorter encounter date ranges, but larger numbers from wider date ranges were also observed. However, the majority of exports contained ten or fewer patients reveals the primary use of the EHI Export functionality was targeting a single-day or two-day range selection.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities related to the certified functionality.

RWT Measure #5: Number of Patients Given Access to Portal

Associated Criteria 315(e)(1)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of patients given login access to their patient portal account throughout a given interval. We did not change this measure from our original test plan.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Providers Reporting:* 6 Providers
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of Patients Given Access to their Portal
- *Total Patients Given Portal Access:* 34
- *Portal Access Per Provider:* $34/6 = 5.67$ new portal access per provider

Analysis and Key Findings

Existing patients who already have access to their portal account were not included in these results as the test is focused on new patients seen by the provider. Portal access requires the provider to initiate the setup, so some providers may choose not to do this, which impacts our results. Compared to last year's results, this number is smaller, but we believe this is due to the patient populations used for these providers having fewer new patients compared to last year and not a reflection of actual portal functionality. This result also confirmed our relied-upon software Updox (version 2016.1) is working and supporting our portal functionality.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.

RWT Measure #6: Number of Patients Who Accessed/Logged into Portal

Associated Criteria 315(e)(1)

Testing Methodology Reporting/Logging

Measurement Description

This measure tracks and counts the number of patients who successfully logged into and accessed their patient portal account throughout a given interval. We did not change this measure from our original test plan.

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Providers Reporting:* 6 Providers
- *Reporting Interval:* 3 months (April-June 2024)
- *Testing Metric/Measurement:* Number of Patients who Accessed Portal
- *Total New Patients Logging into Portal:* 8
- *Total New Patients Granted Portal Access:* 34
- *Percentage Access Portal:* $8/34 = 23.5\%$

Analysis and Key Findings

Looking at the new patients who were granted access in Measure #5, we evaluated how many of them followed through and utilized their portal access. While we did not discover any portal access errors, the number of patients who accessed their patient portal was relatively low at around 25% access rate. We will look to work with the provider community on how to encourage more portal access to their patient population. As noted in Measure #5, this result also confirmed our relied-upon software Updox (version 2016.1) is working and supporting our portal functionality.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.

RWT Measure #7: Number of Third Party applications connecting to Tebra EHR

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

Testing Methodology Reporting/Logging

Measurement Description

This measure use case will document the number of third-party applications that connect to our EHR using our API functionality with our sampled client users. Because we did not have any FHIR applications registered for use in production, we supplemented this with testing additional inspection

Care Settings

This measure was tested with small, ambulatory practices that are the primary customers of Tebra EHR.

Testing Results

- *Reporting Interval:* 12 months (full calendar year)
- *Apps Fully Registered for Providers:* 0
- *Apps In Onboarding Process but Not Registered:* 1

Analysis and Key Findings

Based on our testing, our customers' patients are not yet using the FHIR API for their data access as we had no applications registered for API access. We did not have a FHIR client application registered with our production server for production use as we have not had any requests from providers or patients for FHIR access.

We have some potential 3rd party developers interested in using our FHIR service, and we have done some preliminary work with them and our relied upon software partner SmileCDR to prepare for this eventual onboarding. We have onboarded one of them in our QA environment which fully simulates our production FHIR server and successfully exchanged data through the FHIR API. This FHIR app is a well-known and widely used patient access application that enables patients to retrieve data from their providers via FHIR.

Using that 3rd party FHIR client's test sandbox, we connected and retrieved various USCDI data from five different test patients we established in our testing environment. This FHIR application accesses 11 different USCDI data elements (problems, medications, labs, vitals, allergies, procedures, immunizations, implantable devices, smoking status, clinical notes,

and demographics. Using the FHIR client features, we queried all 11 of those USCDI v1 data elements, and all were successfully retrieved from our FHIR server. The final results are:

Total Patients Tested: 5

USCDI Data Elements Queried/Retrieved via FHIR: 11/11

This successful testing with a widely used FHIR application provides us with confidence the system is working as intended. Our results reveal this certified EHR module and our relied-upon software SmileCDR are working as certified without any non-compliance errors.

Non-Conformities or Errors Discovered

During our testing, we did not discover any errors or criteria non-conformities.