

**GENERAL INFORMATION**

<b>Report ID Number</b>	20231211ens
<b>Developer Name</b>	EnSoftek, Inc.
<b>Product Name(s)</b>	DrCloudEHR
<b>Version Number(s)</b>	2025
<b>Certified Health IT Product List (CHPL) ID(s)</b>	DrCloudEHR 15.02.05. 1434.ENST.01.01.1.220218
<b>Developer Real World Testing PLAN Page URL</b>	<a href="https://drcloudehr.com/faq/dr-cloud-ehr-onc-compliant-real-world-testing/">https://drcloudehr.com/faq/dr-cloud-ehr-onc-compliant-real-world-testing/</a>
<b>Developer Real World Testing RESULTS Page URL</b>	<a href="https://drcloudehr.com/faq/dr-cloud-ehr-onc-compliant-real-world-testing/">https://drcloudehr.com/faq/dr-cloud-ehr-onc-compliant-real-world-testing/</a>

**[OPTIONAL] CHANGES TO ORIGINAL PLAN**

*If a developer has made any changes to their approach for Real World Testing that differs from what was outlined in their plan, note these changes here.*

<b>Summary of Change</b> [Summarize each element that changed between the plan and actual execution of Real-World Testing]	<b>Reason</b> [Describe the reason this change occurred]	<b>Impact</b> [Describe what impact this change had on the execution of your Real-World Testing activities]

**[OPTIONAL] WITHDRAWN PRODUCTS**

*If a developer withdrew any products within the past year that were previously included in their Real-World Testing plan, please provide the following information.*

<b>Product Name(s):</b>	
<b>Version Number(s):</b>	
<b>CHPL ID(s):</b>	
<b>Date(s) Withdrawn:</b>	
<b>Inclusion of Data in Results Report:</b> [Provide a statement as to whether any data was captured on the withdrawn products. If so, this data should be identified in the results report.]	

## SUMMARY OF TESTING METHODS AND KEY FINDINGS

DrCloudEHR is marketed to behavioral health and human services in the public and private sector all over the US. For this reason, the Real-World Testing plan had been applied to this specialty care setting. Agencies that use DrCloudEHR provide mental health counseling, behavioral health counseling and substance use disorder treatment services.

Our approach to testing was focused on making sure the system was usable for clinical, medical, billing, and reporting purposes by the agencies using DrCloudEHR. A major element of focus on application design was to promote interoperability and sharing of information between agencies and EHRs using industry standard protocols and mechanisms compliant with ONCHIT compliant certification. We worked with selected partner agencies and staff to test the applicable criteria for which DrCloudEHR was certified.

All required data elements compliant with certification were ensured by exporting data in formats we are certified for, and any information that was exchanged was tested to make sure it complied with certification requirements.

The following criteria were tested:

### Care Coordination

- 170.315(b)(1) Transitions of care.
- 170.315(b)(2) Clinical information reconciliation and incorporation.
- 170.315(b)(3) Electronic prescribing - DrFirst.
- 170.315(b)(10) Electronic Health Information export.

### Applicable clinical quality measures

- 170.315(c)(1)-(3)

### Supported patient engagement criteria

- 170.315(e)(1) View, download, and transmit to 3rd party.

### Following public health criteria

- 170.315(f)(1) Transmission to immunization registries.
- 170.315(f)(2) Transmission to public health agencies — syndromic surveillance.

### Included measures for the following Application Programming Interfaces (APIs) criteria

- 170.315(g)(7) Application access — patient selection.
- 170.315(g)(9) Application access — all data request and the electronic exchange criteria.
- 170.315(g)(10) Standardized API for patient and population services.
- 170.315(h)(1) Direct project.

As noted in the Metrics and Outcomes section, users were able to generate, transmit, CCDAs via API requests and using Direct Messages. One practice reported issues with Direct Messages consumption which were data issues that were fixed so the client was able to read CCDAs sent via Direct Messaging. Both demonstrated real-world interoperability. It is expected that more agencies will share data in this manner as their interoperability needs increase.

**STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))**

*Both required and voluntary standards updates must be addressed in the Real-World Testing plan. Real World Testing plans must include all certified health IT updated to newer versions of standards prior to August 31 of the year in which the updates were made.*

*Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).*

☒ Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below).

☐ No, none of my products include these voluntary standards

Standard (and version)	USCDI v1
Updated certification criteria and associated product	b1, b2, e1, g9
Health IT Module CHPL ID	15.02.05.1434.ENST.01.01.1.220218
Method used for standard update	Cures Update
Date of ONC-ACB notification	12/30/2022
Date of customer notification (SVAP only)	N/A
Conformance measure	Usability Test for b1, b2, e1 Audit Log Review for g9
USCDI-updated certification criteria (and USCDI version)	b1, b2, e1, g9—USCDI v1

**Care Setting(s)**

Behavioral Healthcare, Integrated Care, Coordination of Care
--

**Metrics and Outcomes**

Measurement /Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
Usability Test Metric 1: Number of CCDAs sent/Received for a 90-day period	§ 170.315(b)(1) Transitions of care	EMRDirect	Only 1 of the 10 users created CCDAs, sent/received CCDAs into DrCloudEHR	Only 1 practice used the feature, none of the others did, and due to its low adoption, a

			using XDR/XDM direct messages from 03/01/2024 to 05/29/2024, None of the others did.	testing server demonstrated the capability successfully. We expect other practices to start using the feature in the future.
Metric 2: Number of Clinical Reconciliations completed /Number of unique patients for which the reconciliation was completed for a period of 12 months	§170.315(b)(2) Clinical information reconciliation and incorporation	DrCloudEHR used DrFirst for electronic prescribing and med reconciliation	Out of the 20 Users all users were able to import CCDAs documents into DrCloudEHR, reconcile and incorporate health information as defined by the criteria for 100% of the sites tested from 01/15/2024 to 12/30/2024	Overall, we have very few agencies that use the capability in general, and if they do its for a very brief period of time.
Metric 3: Number of Prescriptions written and queued for a drug formulary check for a period of 12 months	§ 170.315(b)(3) Electronic prescribing - DrFirst	DrCloudEHR used DrFirst for electronic prescribing and med reconciliation	Out of the 10 test users all the users were able to successfully create and send over a 100 new prescriptions electronically, check for drug allergic data, reconcile meds and incorporate the data within DrCloudEHR 100% of the time from 01/10/2024 to 12/25/2024	No challenges reported
Metric 4: Number of patients used to View/Download /Transmit the data	§ 170.315(e)(1) View, download, and transmit to 3rd party	The DrCloudEHR Patient Portal interface with EMR Direct is used to transmit data via the Direct Project or Direct Trust network to meet	Out of the 8 users, all of them were able to view/download and transmit the data via EMR Direct 100% of the time from 01/15/2024 to 12/30/2024	No Challenges reported.

		these criteria.		
Metric 5: Number of distinct immunization records that were sent to the immunization registry	§ 170.315(f)(1) Transmission to immunization registries		Over 3000 records were sent to immunization registry during a 12-month reporting of 1/1/2024 to 12/31/2024	No challenges reported
Metric 6: Number of distinct syndromic surveillance records sent to the public health agency	§ 170.315(f)(2) Transmission to public health agencies — syndromic surveillance		(0) Zero records were sent to the Public Health Agency during the 12-month reporting period 1/1/2024-12/31/2024 During our internal testing, out of 10 users, all the users were able to transmit records.	No challenges reported
Metric 7: Number of Patient searches conducted using the FHIR R4 Patient endpoint during a 90-day window.	§ 170.315(g)(7) Application access — patient selection		0 (zero) searches were conducted for patients, so a testing environment was used to verify the functionality. DrCloudEHR was launched on a test environment and using the POSTMAN the APIs were run to perform the patient search.	Overall, we have very few agencies that understand the capability in general.
Metric 8: Number of XDR/XDM direct messages sent and received by type within a 90-day period.	§ 170.315(h)(1) Direct Project	DrCloudEHR EMRDirect Interface	Direct Messages were successfully received bidirectionally 100% of the time from 09/01/2024 to 11/30/2024	One practice had issues processing messages from a particular provider due to data issues which were fixed, but overall, very few of our agencies use the function.
<b>Audit Log Review</b>	§170.315(b)(10) Electronic Health		None of the agencies/users	In the BH space this is not common

		Information export		exported information per our review. During Our internal testing, out of the 10 users, all the users were able to export the patient information	practice.
Metric 10: Number of successful CCD retrievals using either the certified CCD or the FHIR R4 Document Reference endpoints within a 90-day period.		§ 170.315(g)(9) Application access — all data request		0(zero) CCD retrievals were done during the reporting period 09/01/2024 to 11/30/2024. DrCloudEHR was launched in a test environment and using the POSTMAN, the APIs were run to retrieve the CCDA information.	No challenges reported
Metric 11: Utilization of the FHIR API with refresh tokens can store the refresh token in a secure manner similar to the requirements of storing a secret for confidential apps.		§170.315(g)(10) Standardized API for patient and population services		While APIs are available, they were not utilized by any of the agencies/users. DrCloudEHR was launched on a test environment and using the POSTMAN the APIs were run to generate fresh tokens and store in a secure manner.	
Data Review Metric 12: Number of QRDA imports		§170.315(c)(1) Record and export § 170.315(c)(2) Import and calculate § 170.315(c)(3) Report		0 (zero) imports and exports were done during the reporting period 1/1/2024 to 12/31/2024. During our internal testing, out of the 15 users, all of them were able to import and generate the QRDA	Our customers don't use this function

**KEY MILESTONES**

Key Milestone	Care Setting	Date/Timeframe	Milestone Met
Identify users to be part of testing	Behavioral Healthcare, Integrated Care, Coordination of Care	Q2 2024	MET
Conduct testing	Behavioral Healthcare, Integrated Care, Coordination of Care	Q3 2024	MET
Publish results of Testing	Behavioral Healthcare, Integrated Care, Coordination of Care	03/04/2025	MET
Submitted Report to ACB	Behavioral Healthcare, Integrated Care, Coordination of Care	03/05/2025	MET