Ankhos Oncology Software

Real World Testing Results Report CY 2022

General Information

Plan Report ID Number: 20111130ank Developer Name: Ankhos Oncology Software, LLC Product Name(s):Ankhos Version Number(s): 4.0 Certified Health IT Product List (CHPL) Product Number(s): 15.05.05.2959.ANKH.01.00.0.210111 Developer Real World Testing Plan Page URL: <u>https://www.ankhos.com/real-world-testing</u> Developer Real World Testing Results Report Page URL: <u>https://www.ankhos.com/real-world-testing</u>

Changes to Original Plan

No changes were made to the original test plan

Withdrawn Products

None

Summary of Testing Methods and Key Findings

Testing experience

There were multiple key findings from obtained while conducting Ankhos RWT. Results were obtained with a combination of queries, as well as visual validation of those queries. For some tests, manual document validation was required.

Challenges and lessons learned

We found a higher variability in CCDA receipts than expected. Real world testing revealed that some incoming Direct messages did not include data in CCDA format, which accounted for some of the drop-off of readability and importability. We did find that users were able to import those CCDA files correctly once filtered for computability.

There were many Direct messages that contained .rtf files or unsolicited HL7v2 content.

In the future, It may be necessary to differentiate between all Direct messages and just Direct messages that contain CCDA documents.

Even with these challenges in mind, we did demonstrate that users are actively using the CCDA import functionality as a consistent percentage of CCDA documents were being imported and integrated into the medical record.

Non-conformance

No non-conformities were identified during testing.

Standards Updates (SVAP and USCDI)

No, none of the included products includes these voluntary standards.

Care Settings

All real-world data are observed from outpatient clinical oncology practices.

Metrics and Outcomes by measure

Below are utilization numbers by quarter for each metric. Conclusions and observations are listed below.

Metric	Q1 2022	Q2 2022	Q3 2022	Q4 2022
B2.1 CCDA	224	167	241	206
documents				
received				
B2.2 CCDA	62% (141)	83% (139)	73% (178)	84% (173)
documents				
successfully				
parsed				
B2.3 CCDA	58% (130)	74% (124)	67% (162)	79% (164)
documents				
imported				
C1.1 QRDA	None, sample	None, sample	None, sample	None, sample
documents	QRDA File	QRDA File	QRDA File	QRDA File
exported	Validated	Validated	Validated	Validated
F4.1 Cancer	None, sample	None, sample	None, sample	None, sample
cases exported	Cancer case file	Cancer case file	Cancer case file	Cancer case file
	generated	generated	generated	generated

B2 observations and conclusions

Key Metrics:

- B2.1 CCDA documents received
- B2.2 CCDA documents successfully parsed
- B2.3 CCDA documents imported

Associated Criteria: B2

Relied upon software: None

Outcomes:

Customers are successfully receiving and incorporating CCDA R2.1 files via Direct messaging. In some cases, incoming Direct messages did not include CCDA files. Some included .RTF files, some contained HL7V2 files.

Further, in some cases, incoming files did not match new or existing patients and were archived.

No invalid CCDA files were encounter during RWT compilation.

Challenges: It was necessary to differentiate between Direct messages that did and did not contain CCDA files. All messages that did contain CCDA files were able to be parsed.

C1 Observations and Conclusions:

Key Metrics:

• C1.1 QRDA documents exported

Associated Criteria: C1

Relied upon software: None

Outcomes:

No practices manually exported QRDA files for the testing periods. Sample QRDA files were generated successfully.

Challenges: None

F4 Observations and Conclusions

Key Metrics:

• F4.1 Cancer cases exported

Associated Criteria: F4

Relied upon software: None

Outcomes:

No practices submitted cancer case files during the testing periods. Test Cancer submission files were generated successfully.

Challenges: None

Key Milestones

Data were compiled for each calendar quarter in 2022. In all cases, the setting was in the context of outpatient medical oncology.