MedConnecthealth

2025 REAL WORLD TESTING RESULTS

BACKGROUND & INSTRUCTIONS

Under the ONC Health IT Certification Program (**Certification Program**), health IT developers are required to conduct Real World Testing of their certified health IT (45 CFR 170.405). The Office of the National Coordinator for Health Information Technology (ONC) issues Real World Testing resources to clarify health IT developers' responsibilities for conducting Real World Testing, to identify topics and specific elements of Real World Testing that ONC considers a priority, and to assist health IT developers in developing their Real World Testing plans.

Health IT developers have maximum flexibility to develop innovative plans and measures for Real World Testing. As developers are planning how they will execute Real World Testing, they should consider the overall complexity of the workflows and use cases within the care settings in which they market their certified health IT to determine the approaches they will take. This Real World Testing plan template was created to assist Health IT developers in organizing the required information that must be submitted for each element in their Real World Testing plan. While the use of this template is voluntary, health IT developers may find it useful in preparing their Real World Testing plans. Health IT developers must submit one plan for each year of Real World Testing (see resources listed below for specific timelines and due dates). ONC does not encourage updating plans outside the submission timeline and will not post updates on the Certified Health IT Product List (CHPL). If adjustments to approaches are made throughout Real World Testing, the health IT developer should reflect these adjustments in their Real World Testing results report. ONC expects that the Real World Testing results report will include a description of these types of changes, the reasons for them, and how intended outcomes were more efficiently met as a result. **While every effort has been made to ensure the accuracy of restatements of 45 CFR Part 170, this template is not a legal document. The official program requirements are contained in the relevant laws and regulations. This resource should be read and understood in conjunction with the following companion resources, which describe in detail many of the Program requirements referenced in this resource.**

- Real World Testing–What It Means for Health IT Developers – Fact Sheet
- Real World Testing Resource Guide
- Real World Testing Certification Companion Guide

Health IT Developers should also review the following regulatory materials, which establish the core requirements and responsibilities for Real World Testing under the Program.

- 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program final rule, 85 FR 25642 (May 1, 2020) (**ONC Cures Act Final Rule**)
  - ↳ *Section VII.B.5 — "Real World Testing"*
- Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing Final Rule, 89 FR 1192 (March 11, 2024) (**HTI-1 Final Rule**)
  - ↳ *Section III.E — "Real World Testing"*

GENERAL INFORMATION

- Plan Report ID Number: **[For ONC-Authorized Certification Body use only]**
- Developer Name: **MedConnect, Inc.**
- Product Name(s): **MedConnectHealth**
- Version Number(s): **3.0**
- Certified Health IT Product List (CHPL) ID(s): **15.04.04.1889.MedC.03.00.0.171212**
- Developer Real World Testing Page URL: **https://www.medconnecthealth.com/realworldtestplan/**

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Consistent with the ONC's recommendation that "Real World Testing verify that deployed Certified Health IT continues to *perform as intended by conducting and measuring observations of interoperability and data exchange*", this test plan focuses on capturing and documenting the number of instances that certified capability is successfully utilized in the real world. In instances where no evidence exists due to zero adoption of a certified capability or the inability to capture evidence of successful use for other reasons, we will demonstrate the required certified capability in a semi-controlled setting as close to a "real world" implementation as possible.

It is important to note that Real World Testing is only one component of the Health IT Certification program used to demonstrate compliance with the program requirements. Real World Testing should augment and support testing that was conducted prior to certification being granted. It is not intended to duplicate the methods or results previously demonstrated. Instead, this test plan was developed to demonstrate that the certified capabilities have been successfully deployed for providers to use at their discretion in live settings.

We are using a 3-fold approach to demonstrate successful real-world implementations.

- Adoption Rate
- Summative Testing
- Interactive Testing

Adoption rate will be used to determine if/when certified capability is being used in the real world and to help identify differences in care settings. Evidence of high rates of implementation and usage indicate (but don't by themselves prove) a certified capability's usefulness and practical value. Evidence of low rates of implementation and usage might indicate a potential problem, of which there could be several different causes. Note, it is not the goal of this exercise to identify the individual causes of why a given certified capability may have a high or low adoption rate, but rather to identify the users and care settings for which a given test is relevant.

Summative assessments will be used to measure which certified actions were performed at the conclusion of a given time period. These will be conducted by running reports and examining audit logs from within the certified health IT module to help demonstrate the frequency of actions within the given time frame, and where possible, whether those actions were successful or unsuccessful. High success rates should be an indicator of the successful implementation of a given certified capability in a real-world setting.

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS-SVAP AND USCDI)

All criteria listed in the MedconnectHealth Real-World Test Plan will follow the standards referenced in the 2015 Edition Cures Update.

CARE SETTINGS

MedConnectHealth is marketed primarily to primary care providers. The overwhelming majority of our users are comprised of family medicine, internal medicine, and pediatrics.

Care Setting	Justification
Primary Care	Primary care providers make up close to 95% of our customer base. We do not market to any particular care setting or specialty.

MEASURES USED IN OVERALL APPROACH

For each measurement/metric, describe the elements below:

- ✓ Description of the measurement/metric.
- ✓ Associated certification criteria.
- ✓ Relied Upon Software (if applicable).
- ✓ Justification for selected measurement/metric.
- ✓ Expected Outcomes.

ADOPTION RATES

The following metrics are applicable to all criteria and all care settings. These metrics will not be used directly to demonstrate interoperability or conformance to certification criteria. Instead, they will primarily be used to help determine the participants that will be in scope for this evaluation. They can also aid with the justification for other metrics by providing additional context (i.e., extremely low adoption rates for certain certified capabilities will necessitate a different approach to testing).

Metric	Description
Number of licensed installs/users of EHR • The definition of a "license" is dependent upon the model used (e.g., total number of systems, total number of seats per license, etc.)	Identify the total number of licensed installs/users of the certified Health IT module, regardless of care setting, participation in incentive programs, or use of certified capabilities.
Number of active installs/users of EHR	Identify the total number of *active* installs and/or users of the certified Health IT module, regardless of care setting, participation in incentive programs, or use of certified capabilities.

The following metrics are applicable to all criteria that are licensed separately from the base license and all care settings.

Metric	Description
Certified capabilities that are licensed separately	Identify which certified capabilities are licensed separately from the base EHR license. Examples may include eRx, CQMs, public health, etc.
Number of installs/users who licensed a certified capability	Where applicable, identify the number of licensed installs/users of a given certified capability.
Number of installs/users that have used the certified capability in the preceding 365 days	Where applicable, identify the number of *active* installs/users of a given certified capability.

SUMMATIVE ASSESSMENT METRICS

The following metrics will be measured by viewing audit logs and reporting systems available to track the behavior of the certified Health IT module during a given time frame. All metrics are designed to reflect the core elements of the criteria, demonstrate interoperability, and demonstrate the success rate of the certified capability being used. In most cases we elected to record these metrics over a 90-day period to reflect the reporting periods typically required for compliance with the federal incentive programs.

The continued measurable use of certified capabilities will provide implicit evidence of successful implementation of the required certified capability. This is especially meaningful in cases where interoperability with outside systems is demonstrated. In cases where it is not possible to determine "success" via an explicit confirmation by a receiving system, success will be defined as a transmission was made where no error was received from the destination system or its intermediaries. Additionally, we will review internal customer and vendor issue tracking systems for reports of failures or unsatisfactory performance in the field.

Criterion	Metric	Relied Upon Software (if applicable)	Justification and Expected Outcome
170.315(g)(7) Application access — patient selection	1. Number of requests for a patient ID or token 2. Number of requests that provided sufficient information to provide a valid response.	*Relied Upon Software:* Dynamic Health IT ConnectEHR +BulkFHIR (Version FHIR4-B)	1) 50 2) 50
170.315(g)(9) Application access — all data request	1. Number of requests for a patient's Summary Record made by an application via an all-data category request using a valid patient ID or token.	*Relied Upon Software:* Dynamic Health IT ConnectEHR +BulkFHIR (Version FHIR4-B)	1) 50
170.315(g)(10) Standardized API for patient and population services	1. Number of authorized Patient Applications. 2. Number of authorized Provider Applications. 3. Number of authorized Bulk Applications. 4. Number of patient data requests.	*Relied Upon Software:* Dynamic Health IT ConnectEHR +BulkFHIR (Version FHIR4-B)	1) 10 2) 3 3) 7 4) 8,459

SCHEDULE OF KEY MILESTONES

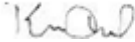| Key Milestone	Date/Timeframe
Data Collection (will vary per measure)	August 2025 - December 2025
Analysis of Data Collected (will vary per measure)	August 2025 - December 2025
Design 2025 Real World Testing Results Report.	February 2026
Submit Final 2025 Real World Testing Results to Drummond Group	February 2026
Post approved Real World Testing Results to External URL	February 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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Date: *February 1, 2026*