UnifiMD 2025 Real World Test Plan 10/25/2024

GENERAL INFORMATION

Plan Report ID Number: [For ONC-Authorized Certification Body use only]

Developer Name: Complete HealthCare Solutions, Inc.

Product Name(s): UnifiMD®

Version Number(s): 2.0

Certified Health IT Product List (CHPL) Product Number(s): 15.04.04.2648.Unif.02.01.1.221205

Developer Real World Testing Plan Page URL: https://unifimd.com/certifications

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

Our approach to Real World Testing for the required certification criteria of b1 and b2 is to request one end user export a CCDA from their practice, use direct messaging to send that to another practice and have the receiving end user import it into their database. We plan to have some test patients be new to Practice B and other test patients be current patients to demonstrate reconciliation as well.

Our approach to Real World Testing for the required certification criteria of g7 and g9 is to request the office gather information from patients who use a third party app of their choice to request their entire clinical summary for a given visit.

For the above criteria we will ask the practice (and patient through the practice) to report back to us the accuracy of the information provided as well as any errors encountered in the process. This information will later be analyzed and organized into the final test results report.

We will test the §170.315 (b)(10) criteria separately. The testing of (b)(10) will cover both single and bulk data requests for all criteria

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

N/A – we have not participated in a voluntary SVAP program nor updated to USCDI yet

MEASURES USED IN OVERALL APPROACH

Description of Measurement/Metric

The Measure/Metrics and the Descriptions listed below regarding the individually tested §170.315 (b)(10) and the simultaneous and seamless use of the functionality of certified measures. The RWT for (b)(10) will be witnessed via a Zoom session with the participants using a production environment and real patient data. Upon completion, we will observe the successful conformance of the certified technology to be able to Export the EHI data for (b)(10)

Measurement/Metric	Description
% of error free requests	*Record and report # of attempts with and without error for each task (retrieving clinical summary from third party app, importing CCDA from another practice, reconciling information to current patient)*
% of accuracy of info	*Visually verify information being imported has the expected data in the fields requested. Visually verify the information being accessed through the third party app is accurate, and report back % of accuracy.*
(b)(10) Export USCDIv1 clinical data for a population of patients for use in a different health information technology product or a third-party system. This export can be used for many purposes, including data portability when a physician practice switches to a new EHR platform.	*We chose to concentrate on the aspects of this criterion that would: 1) Demonstrate an EHR's ability to export batches of patient data in a straightforward fashion 2) Facilitate interoperability by providing the exported data in the form of valid C-CDA files that conform to the HL7 standards as described in the HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes (US Realm). Additionally, it includes a publicly accessible hyperlink to the export's format.*

Associated Certification Criteria

Measurement/Metric	Associated Certification Criteria	Relied Upon Software (if applicable)
% of error free requests	*b1, b2*	*Updox version 2022.0 for sending of direct messages*
% of error free requests	*g7, g9*	*MeldRx version 2.0*
% of accuracy of info	*b1, b2*	*Updox version 2022.0 for sending of direct messages*
% of accuracy of info	*g7, g9*	*MeldRx version 2.0*
Export USCDIv1 clinical data for a population of patients for use in a different health information technology product or a third-party	*b10*	*MeldRx version 2.0*

system. This export can be used for many purposes, including data portability when a physician practice switches to a new EHR platform.		

Justification for Selected Measurement/Metric

Measurement/Metric	Justification
(b)(1), (b)(2), (g)(7) and (g)(9) *% of error free requests*	*To ensure that offices / patients who implement these features in their office can be sure they will work without error the majority of the time and feel confident in using it / referring their patients to use it*
(b)(1), (b)(2), (g)(7) and (g)(9) *% of accuracy of info*	*To ensure that the end user is able to verify the patient information is accurately being importing into their EHR and that patients who want to access their information can be confident it is accurate*
(b)(10) *Count of single patient export files created during a 3-month timeframe. This demonstrates the ability to export single patient files containing all their EHI.*	*Count of single patient export files created during a 3-month timeframe. This demonstrates the ability to export single patient files containing all their EHI. This metric will also provide information on the demand for this capability.*

Care Setting(s)

Care Setting	Justification
Ambulatory practices, primary care or specialists	*Only tested a single care setting, as all specialties and end users follow the same workflow for the 3 certification criteria tested in this plan*

Expected Outcomes

Measurement/Metric	Expected Outcomes
(b)(1), (b)(2), (g)(7) and (g)(9) % of error free requests	*End users are satisfied with the ability to use the features being tested without errors. Error free percentage should be over 90%*
(b)(1), (b)(2), (g)(7) and (g)(9) % of accuracy of info	*End users should see all problems, meds, allergies, etc in human readable format both upon import and reconciliation as well as when using the third party app. Accuracy % should be over 90%*
(b)(10)	*The number of single-patient export files generated over a 3-month period will be tracked. Real-world testing will demonstrate an organization's ability to create single-patient EHI export files in compliance with the 170.315(b)(10) criterion. The expected outcome is a non-zero count, though we anticipate low numbers since many organizations may continue using their existing methods for exporting single-patient data, such as interoperability tools or manual processes.*

SCHEDULE OF KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Prepare UnifiMD application for testing for end users	Ambulatory Setting	December 2024
Identify the user practices that will participate in the test plan	Ambulatory Setting Multiple Specialties	December 2024 & January 2025
Confirm that the Real-World Test Plan participants can log into their accounts	Ambulatory Setting Multiple Specialties	January 2025
Follow up with the Real-World Test Plan participants on a regular basis (minimum, once a quarter) to obtain feedback on their progress and or if there are any issues to address	Ambulatory Setting Multiple Specialties	Quarterly 2025
End the Real-World Test to coincide with the end of the MIPS 2025 Performance Year.	Ambulatory Setting Multiple Specialties	January 2026
Real-World Test analysis and generation of the report	Ambulatory Setting Multiple Specialties	January 2026
Submit Real-World Test Report to ACB before established deadline	Ambulatory Setting Multiple Specialties	January 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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