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

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

CHANGES TO ORIGINAL PLAN

Although we have provided our end users with all the tools, registration and training needed to meet these requirements and use these tools in their office, they have yet to perceive the value of the features enough to alter their current workflow. To that end, we conducted the RWT in simulated environments with real deidentified test patient data. In the past year, several offices have gone through enrollment with MeldRx to have FHIR access for their patients, however not one has opted a patient in for the sake of using it or even testing it. We will continue to provide the features and education to our und users to allow them to modify their workflow under the requirements of the new Cures Act when they are ready to do so.

Summary of Change	Reason	Impact
No end users tested as planned – see notes above. All testing was done internally	*See above, no end users utilize the areas of the program that are required to be tested in their live site.*	*Lower volume of results was returned than expected*

SUMMARY OF TESTING METHODS AND KEY FINDINGS

As mentioned above under the Changes to Original Plan section, we do not have any clients using the areas to be tested and therefore we conducted the RWT in simulated environments with real deidentified test patient data.

For testing b1 and b2, we set up 2 test databases on our internal network and asked multiple employees to test sending a CCDA through direct messaging to a user in the other practice and had that user import the CCDA into their practice. Sometimes the patients existed in the second practice and reconciliation of items was required and performed. Sometimes the patient did not exist, and the EHR had to create that patient. This process was performed by several employees between the 2 fictitious practices over a month time span and errors received and inaccurate info were logged by a staff member overseeing and witnessing the process.

For testing g7 and g9 we set up a test database connection to the MeldRx program and provided login information to staff members within the company. We asked those employees over the course of a month to log into MeldRx with the credentials created for them and perform the following. Verify you can log in successfully as the "patient" and only see your patient information, view all the information you would want to see in your medical record, verify you can pick sections of the medical record to view as well. Also verify you can download your CCDA and save it locally. They were asked to then log into the EHR as an "employee" and verify the data that was viewed was accurate and matches the data in the EHR. This process was performed by several employees over a month time span and errors received and inaccurate info were logged by a staff member overseeing and witnessing the process.

The only challenge was finding live customers to test the scenarios as they do not use these features of the EHR in their practices currently.

The lesson learned remains the same as well. The MeldRx user interface, though simple to use is not being used in any live sites as providers are not seeing the benefit and patients are not asking for their data to be delivered in new ways such as FHIR portals. Providers tell us their patients are fine with taking a copy of a paper chart by hand or fax. Most of our clients have enrolled in the program but have not opted in any patients wanting to use it.

The results of the testing did meet the requirements of demonstrating interoperability, as we were able to show how patient information can be sent, received, and incorporated from one practice to another, even though we were unable to have any live client sites participate in this testing.

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

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

[x] No, none of my products include these voluntary standards.

CARE SETTING

Although we have provided our end users with all the tools, registration and training needed to meet these requirements and use these tools in their office, they have yet to perceive the value of the features enough to alter their current workflow. To that end, we conducted the RWT in simulated environments with real deidentified test patient data. In the past year, several offices have gone through enrollment with MeldRx to have FHIR access for their patients, however not one has opted a patient in for the sake of using it or even testing it. We will continue to provide the features and education to our und users to allow them to modify their workflow under the requirements of the new Cures Act when they are ready to do so.

With that said, our internal testing simulated a primary care office, however as noted in our test plan "all specialties follow the same workflow for the 4 criteria tested" so only one care setting was to be tested (ambulatory practice).

METRICS AND OUTCOMES

Measurement /Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
% of error free requests	*b1, b2*	*Updox for sending and receiving*	*96% error free* *48/50 trials returned no error*	*Twice the user matched wrong patient with importing patient when trying to reconcile so error let user know name and DOB did not match and verified wanted to input. Choosing the correct patient removed all errors.*
% of accuracy in info	*b1, b2*	*Updox for sending and receiving*	*100% accurate info* *50/50 trials had accurate info*	
% of error free requests	*g7, g9*	*MeldRx*	*94% error free* *47/50 trials returned no errors*	*Errors encountered were due to issues logging into the MeldRx program due to user mistakes*
% of accuracy in info	*g7, g9*	*MeldRx*	*100% accurate info*	

			50/50 trials had accurate info	

KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Evaluate clients to include in Real World Testing	*All*	*Attempted but never succeeded February-May 2024*
Create staging environment to be used in testing	*All*	*February 2024*
Obtain agreement from customers to participate in Real World Testing	*All*	*Never*
Customers to collect data during 6 month testing period	*All*	*Never*
** unplanned milestone ** *CHS internal testing of items in Real World Test Plan*	*All*	*October 2024*
Evaluate provided results from customers ** Edited milestone – Evaluate internal testing results*	*All*	*December 2024*
Prepare final results report	*All*	*January 2025*

ATTESTATION

This Real World Test Results report 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: 1/17/2025