REAL WORLD TESTING RESULTS REPORT 2024

Integra Connect

INTRODUCTION

This document contains a list of the steps taken to conduct the annual Real World Testing requirements for ONC certification. The Results within this document were reviewed as Screenshots and spreadsheets for their compliance with the criteria defined in the test plan. These artifacts will be maintained by the health IT developer for audit purposes or further requests.

GENERAL INFORMATION

Plan Report ID Number:

[For ONC-Authorized Certification Body use only] Developer Name: **Integra Connect Newco, LLC**

Product Name(s): **IntegraCloud EHR**

Version Number(s): **20.28.9**

Certified Health IT Product List (CHPL) Product Number(s): **15.05.05.3133.CHTS.01.00.1**

SUMMARY OF TESTING METHODS AND KEY FINDINGS

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***", our original test plan focused on capturing and documenting the number of instances that certified capability was successfully utilized in the real world. In instances where no evidence exists due to low or zero adoption of a certified capability or the inability to capture evidence of successful use for other reasons, we tested and demonstrated the required certified capability in a semi-controlled setting as close to a "real world" implementation as possible.

As per the test plan, we leveraged a 3-fold approach to demonstrate successful real-world implementations.

- Adoption Rate
- Summative Testing
- Interactive Testing

Adoption rate was 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 do not by themselves prove) a certified capability's usefulness and practical value. Evidence of low rates of implementation and usage might be accounted for by patient volume, location, or provider preference among other reasons. 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 were used to measure which certified actions were performed at the conclusion of a given time where the minimum time was 90 days and longer where possible. These results are typically obtained by generating reports and examining audit logs from within the certified health IT module to help demonstrate the frequency of actions within the given time, 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.

Interactive testing was used to demonstrate conformance to requirements where the adoption rate of a given

certified capability is zero and to demonstrate ongoing compliance with updated standards and code sets (SVAP). Interactive tests were live tested as opposed to examining historical usage statistics. The goal being to demonstrate the certified Health IT module being used in a way consistent within a practice or care setting.

This approach allowed for successful testing and obtaining results for each criterion. Detailed below in the **Metrics and Outcomes** section the reader will find evidential data in the form of a Summative result(s) or Interactive test outcome for each certified criterion for Integra Cloud EHR v20.28.9

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

Indicates whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of the 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.

Care Setting(s)

Each care setting was tested.

Care Setting	Justification
Oncology	IntegraCloud EHR is marketed exclusively to outpatient and ambulatory Oncology clinics.

Metrics and Outcomes

Within this section is a list of the results collected from the IntegraCloud EHR 20.28.9. Real World Testing measures as defined in their Real World Test plan. Outcomes are listed as Pass, Pass with Exception, or Fail determined by the success of obtaining testing results. This determination was based on a thorough review by the Integra Connect team. A link is included within the **Outcomes** column in the table below to a subsequent **Outcomes Details** table. This second table matches each outcome with additional detailed information such as supporting resources and descriptions of the tests that were performed.

Key components include:

- Customer created a comprehensive Test Results Report which details customer environment, patient data utilized for tests, locations of testing
- Customer attempted Summative and/or Interactive Testing
- Customer collected audit logs to support spreadsheets and as necessary, screen shots that demonstrate proof of Interactive Testing for each criteria with “0” values in Summative Testing. These files are referenced and remain on file with Integra Connect.

The following metrics were measured by viewing audit logs in the client’s live production system for the first 1 quarter of the current year. For each test, a screen shot was taken of the audit report criteria screen showing the auditing information being reported. The resultant report was then saved to show the usage

(or lack thereof) of the criterion. Reports were generated using data from January 1, 2024- March 31, 2024.

Associated Criterion(a)	Measurement/Metric	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
170.315(b)(1) Transitions of care	Over a 90-day period: 1) Number of CCDAs created 2) Number of CCDAs sent via edge protocols 3) Number of CCDAs received via edge protocols	EMR Direct (Version 2017)	1) 4 2) 1* 3) 2760	* Synthetic data was used to validate this function is working because we found providers are creating CCD- but not transition of care CCD documents. They are not sending transition of care documents- Being an oncology EHR- they are not transitioning care to another provider.
170.315(b)(2) Clinical information reconciliation and incorporation	Over a 90-day period: 1) Number of times a user reconciled medication list data from a received CCDA 2) Number of times a user reconciled allergies and intolerance list data from a received CCDA 3) Number of times a user reconciled problem list data from a received CCDA	EMR Direct (Version 2017)	1) 2760 2) 1517 3) 1*	* Synthetic data was used to validate this function is working because we found providers are not reconciling data directly into the EHR.
170.315(b)(3) Electronic prescribing	Over a 90-day period: 1) Number of prescriptions created 2) Number of prescriptions changed 3) Number of prescriptions canceled 4) Number of prescriptions renewed	Dr. First (Version 4)	1) 43715 2) 59 3) 697 4) 7355	N/A
170.315(b)(6) Data export	This was not tested			*This measure was retired 12/31/2023 and was not tested in 2024

170.315(b)(10) Electronic Health Information Export	Over a 90 day period: 1) Number of times a data export was performed	MPHRx (Minerva)	1) 1*	We had challenges with our publicly facing website that required fixing and updates by our third-party vendor to remain in compliance. This was rectified in August 2024. This is available but to date no one has used this feature. We did a demonstration review to ensure the product is working properly.
170.315(c)(1-3) Clinical quality measures (CQMs-CMS68 v10-NQF0419E) -- Medication Reconciliation	Over a 90-day period: 1) Number of measures recorded during the period 2) Number of QRDA Category 1 files exported 3) Number of category 3 files exported 4) Number of QRDA Category 3 aggregate report(s) created of the time period		1) 1* 2) 1* 3) 1* 4) 1*	* Synthetic data was used to validate this function is working because we found providers use a third party to calculate Clinical Quality measures.
170.315(e)(1) View, download, and transmit to 3rd party	Over a 90-day period: 1) Number of views of health information by a patient or authorized representative 2) Number of downloads of health information by a patient or authorized representative 3) Number of transmissions of health information by a patient or authorized representative using unencrypted email 4) Number of transmissions of health information by a patient or authorized representative using	EMR Direct (Version 2017)	1) 1159 2) 555 3) 12 4) 1*	* Synthetic data was used to validate this function is working because we found our patients are accessing and viewing their health information, but they are not transmitting via encrypted e-mail

	encrypted method			
170.315(f)(1) Transmission to immunization registries	We are not certified for this feature, and this was not tested.			This was a new Feature we were looking at adding- however this was not completed. We are not certified for bi-directional immunization registries and therefore did not test this.
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 3) Number of follow-up requests made using the provided patient ID or token	N/A	1*	* Synthetic data was used to validate this function is working
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 2) 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 for a specific date range	N/A	1*	* Synthetic data was used to validate this function is working
170.315(g)(10) Application access — all data request	1) Number of requests for a single patient's data made by an application via an all data category request	MPHRx (Minerva)	1*	* Synthetic data was used to validate this function is working

	using a valid patient ID or token via FHIR API 2) Number of requests for multiple patient records made by an application via an all data category request using a valid patient ID or token via FHIR API 3) Number of records provided for a patient's record via FHIR Protocol to appropriate requesting entity. 4) Number of records provided for multiple patient's record via FHIR Protocol to appropriate requesting entity.			
170.315(h)(1) Direct Project	1) Number of Direct Messages sent 2) Number of Delivery Notifications received 3) Number of Direct Messages received 4) Number of Delivery Notifications sent	EMR Direct (Version 2017)	1) 2 2) 1* 3) 2701 4) 1*	* Synthetic data was used to validate this function is working because we found clients have not turned notification functionality on

Outcome Details

The following sections contain additional descriptions and test results supporting documentation to provide more context for the testing outcomes defined in the **Metrics and Outcomes** table above.

170.315(b)(1) Transitions of care

Summary Description
Pass Method: Summative and Interactive Testing The purpose of this test was to show that CDA documents can be created and exported. A query on historical audit logs for 90-day periods was performed for the 170.315(b)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result. In addition, Providers are not creating and sending transition of care CCD's. Due to no utilization, Integra demonstrated the module functions in their system with an interactive test utilizing synthetic data.
Justification

This criterion requires the ability of a certified Health IT module to create CCDAs according to specified standards and vocabulary code sets, as well as send and receive CCDAs via edge protocols. However, it is not possible to consistently and reliably demonstrate that all required standards and code sets were used because not all CCDAs created in a real-world setting contain all the necessary data elements. Furthermore, it is not feasible to obtain copies of CCDA documents from "outside" developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often CCDAs are created and exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers
with a high success rate.

Results Supporting Documents

Please Contact Integra Connect for any Results spreadsheets if needed.

170.315(b)(2) Clinical Information Reconciliation and Incorporation

Summary Description

Pass Method: Summative and Interactive Testing

The purpose of this test was to show that CDA documents can be imported, matched to a patient, reconciled and new CDA documents created and exported.

A query on historical audit logs for 90-day periods was performed for the 170.315(b)(2) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result. In addition, Providers are not reconciling CDA documents. Due to no utilization, Integra demonstrated the module functions in their system with an interactive test utilizing synthetic data.

Justification

This criterion requires the ability of a certified Health IT module to take a CCDA received via an outside system and match it to the correct patient; reconcile the medication, allergy, and problem lists; and then incorporate the lists into the patient record. The expectation is that each of these steps is done electronically within the certified Health IT module. While this certified capability is available to our users, most providers in the real world typically prefer to perform these steps manually and elect to save any outside received CCDAs as attachments to the patient record. Therefore, we intend to record the frequency that providers are electronically reconciling and incorporating CCDAs that were received from outside providers to demonstrate the certified capability is available and effective,
regardless of the frequency it is used. Our expectation is there will be low utilization by providers with a high success rate

Results Supporting Documents

Please Contact Integra Connect for any Results spreadsheets and screenshots if needed.

170.315(b)(3) Electronic Prescribing

Summary Description

Pass Method: Summative Testing

The purpose of this test was to show that an active connection from EHR customer sites to an ePrescribing solution was deployed.

A query on historical audit logs for 90-day periods was performed for the 170.315(b)(3) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result.

Justification

This criterion requires the ability of a certified Health IT module to perform prescription-related electronic transactions (eRx) using required standards. However, it is not possible to demonstrate the correct standards were used because it is not feasible to obtain copies of eRx documents from "outside" companies or pharmacies who have no incentive to participate. Therefore, we intend to demonstrate the required certified capabilities are effective by demonstrating how often eRx transactions are performed by examining reports from our eRx partner. This will demonstrate that not only are the eRx transactions sent from the certified Health IT module, but that the transactions are successfully received by the eRx clearinghouse. Our expectation is there will be high utilization by
providers with a high success rate.

Results Supporting Documents

Please Contact Integra Connect for any Results spreadsheets if needed.

170.315(b)(6) Data Export

Summary Description

This measure was left in the 2024 RWT plan but this measure was discontinued Dec 31, 2023 and therefore was not tested in 2024.

170.315(c)(1-3) Clinical Quality Measures (CQMs)

Summary Description

Pass Method: Interactive Testing

The purpose of this test was to show that the EHR meets the QRDA reporting requirement for the designated care settings. Integraconnect supports 1 CQM measure- CMS68v10- NQF0419e - Documentation of current medications in the medical record.
A query on historical audit logs for 90-day periods was performed for the 170.315(c)(1-3) criterion. Due to no utilization as clients rely on third-party vendors for this functionality, Integra demonstrated the module functions in their system with an interactive test utilizing synthetic data.

Justification

These criteria will be tested together. C1 requires a certified Health IT module to record required data, calculate CQMs from the recorded data, and export the data in QRDA Category 1 format. C2 requires a certified Health IT module must be able to import data from a QRDA Category 1 formatted file and calculate the CQMs based on that data. C3 requires a certified Health IT module must be able to create a QRDA Category 1 formatted file and a QRDA Category 3 aggregate report to be used for transmitting CQM data to CMS. We intend to record the frequency that CQM files are imported and/or exported by providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.

Results Supporting Documents

Please Contact Integra Connect for any Results spreadsheets and screenshots if needed.

170.315(e)(1) View, Download, and Transmit to 3rd Party

Summary Description

Pass Method: Summative and Interactive Testing

The purpose of this test was to show that the EHR provides patients access to a patient portal with the ability to view, download, and send their health care records for the designated care settings.

A query on historical audit logs for 90-day periods was performed for the 170.315(e)(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result. Due to no utilization of the transmission function by patients who are accessing and viewing their health information online, Integra demonstrated the encrypted transmission module functions in their system with an

interactive test utilizing synthetic data.

Justification

This criterion requires the ability of a certified Health IT module to provide patients access to a patient portal with the ability to view, download, and send their health care records to other providers via encrypted or unencrypted transmission methods in CCDA format. We intend to record the frequency that patients are viewing, downloading, and transmitting their records from the portal using the certified capabilities to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization
by patients for view and lower utilization for download and transmit with a high success rate for all certified capabilities.

Results Supporting Documents

Please Contact Integra Connect for any Results spreadsheets if needed.

170.315(g)(7) Application Access — Patient Selection

Summary Description

Pass Method: Interactive Testing

The purpose of this test was to show that the EHR is able to fulfill an API request that enables external applications to request a unique patient identifier from the certified Health IT module that can be used to request additional patient data.

A query on historical audit logs for 90-day periods was performed for the 170.315(g)(7) criterion. Due to low or zero adoption of this criteria, Integra demonstrated the module function in their system as an interactive test demonstrating a compliant result.

Justification

This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request a unique patient identifier from the certified Health IT module that can be used to request additional patient data. We intend to record the frequency that patient ID requests are received by providers via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be zero adoption of this certified capability by our users, so we have added interactive testing methodology using synthetic data for these capabilities to the test plan below to demonstrate the feature is available and functions as expected should any users elect to begin using this feature.

Results Supporting Documents

Please Contact Integra Connect for any Results screenshots if needed.

170.315(g)(9) Application Access — All Data Request

Summary Description

Pass Method: Interactive Testing

The purpose of this test was to show that the EHR is able to fulfill an API request that enables external applications to request all categories of patient data defined in the CCDS from the certified Health IT module.

A query on historical audit logs for 90-day periods was performed for the 170.315(g)(9) criterion. Due to low or zero adoption of this criteria, Integra demonstrated the module function in their system as an interactive test demonstrating a compliant result.

Justification

This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request all categories of patient data defined in the CCDS from the certified Health IT module. We intend to record the frequency that patient data requests for all categories are received by providers and fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be zero adoption of this certified capability by our users, so we have added interactive testing methodology using synthetic data for these capabilities to the test plan below to demonstrate the feature is available and functions as expected should any users elect to begin using this feature.

Results Supporting Documents

Please Contact Integra Connect for any Results screenshots if needed.

170.315(g)(10) Standardized API for patient and population services

Summary Description

Pass Method: Interactive Testing

The purpose of this test was to show that the EHR is able to fulfill the functionality of a standardized API for patients and populations through an API request that enables external applications to request all categories of patient data defined in the US Core Server Capability Statement from the certified Health IT module.

A query on historical audit logs for 90-day periods was performed for the 170.315(g)(10) criterion. Due to low or zero adoption of this criteria, Integra demonstrated the module function in their system as an interactive test demonstrating a compliant result.

Justification

This criterion requires the certified Health IT module to provide an API and supporting documentation that enable external applications to request all categories of patient data defined in the CCDS from the certified Health IT module. We intend to record the frequency that patient data requests for all categories are received by providers and fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be zero adoption of this certified capability by our users, so we have added interactive testing methodology using synthetic data for these capabilities to the test plan below to demonstrate the feature is available and functions as expected should any users elect to begin using this feature.

Results Supporting Documents

Please Contact Integra Connect for any Results screenshots if needed.

170.315(h)(1) Direct Project

Summary Description
Pass Method: Summative and Interactive Testing The purpose of this test was to show that the EHR is able to process requests and provide a single patient's data and multiple patient's data per "US Core Server Capabilities" via Standardized FHIR API A query on historical audit logs for 90-day periods was performed for the 170.315()(1) criterion. The resulting totals show that this module was active throughout the period and therefore demonstrates a compliant result. Due to no utilization of the notification function by clients, Integra demonstrated the module functions in their system with an interactive test utilizing synthetic data.
Justification
This criterion requires the ability of a certified Health IT module to record the frequency that direct messages are sent and received by providers, along with how often MDNs are sent and received. Since not all systems respond with MDNs, we cannot reliably use that metric to define success. Furthermore, it is not feasible to obtain copies of Direct Messages from "outside" developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there will be moderate utilization by providers with a high success rate.
Results Supporting Documents
Please Contact Integra Connect for any Results spreadsheets if needed.

KEY MILESTONES

Includes a list of key milestones that were met during the Real World Testing process. Includes details on how and when Vision Works implemented measures and collected data.

Key Milestone	Care Setting	Date/Timeframe
Integra Connect executed summative testing to show that the criteria are functional. The following metrics were pulled from transaction logs as detailed in the outcomes section above: • 170.315 (b)(1) Transitions of care • 170.315 (b)(2) Clinical Information Reconciliation and Incorporation • 170.315 (b)(3) Electronic Prescribing • 170.315 (e)(1) View, Download, and Transmit to 3rd Party • 170.315 (h)(1) Direct Project • 170.315(g)(7) Application access—patient selection • 170.315(g)(10) Standardized API for patient and population services	Oncology	01/01/2024-03/31/2024

Integra Connect executed interactive testing to show that the criterion are functional. The following metrics were tested interactively as detailed in the outcomes section above: • 170.315 (b)(1) Transitions of care • 170.315 (b)(2) Clinical Information Reconciliation and Incorporation • 170.315(c)(1) Clinical Quality Measures (CQMs) - QRDA file testing • 170.315 (e)(1) View, Download, and Transmit to 3rd Party • 170.315(g)(7) Application access—patient selection • 170.315(g)(9) Application access- all data request • 170.315(g)(10) Standardized API for patient and population services • 170.315 (h)(1) Direct Project	Oncology	04/01/2024-08/01/2024

ATTESTATION

The Real World Testing Results Template must include the following attestation signed by the Health IT Developer Authorized representative.

Note: The Results must be approved by a Health IT Developer authorized representative capable of binding the Health IT Developer for execution of the plan and include the representative's contact information.[i]

This Real World Testing 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.

Authorized Representative Name: Joshua Boxer, Chief Compliance and Privacy Officer

Authorized Representative Email:_joshua.boxer@integraconnect.com

Authorized Representative Phone: 561.354.5395

Authorized Representative Signature: s/Joshua Boxer

Date: December 5, 2024

[i] https://www.federalregister.gov/d/2020-07419/p-3582