2025 OneConnect Real World Testing Plan

GENERAL INFORMATION

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

Developer Name: MedOne Healthcare Partners
Product Name(s): OneConnect
Version Number(s): 0
Certified Health IT Product List (CHPL) Product Number(s):
15.04.04.3182.Onec.00.00.1.231227
Developer Real World Testing Plan Page URL:
https://www.medonehp.com/realworldtesting/

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

OneConnect is a fully cloud-based solution, and our Real-World Testing plan is designed to align with this delivery model. Our cloud infrastructure enables us to monitor and test most certified technology requirements with minimal customer involvement in the testing process. This plan outlines OneConnect' s approach to Real-World Testing for our ambulatory care clients. The focus of this testing will be on ambulatory care settings, which include LTC, AL, SNF, and IL nursing facilities. MedOne Healthcare Partners will oversee the annual Real-World Testing, using metrics from our production environment, where customers actively manage real patient care. Data collection will primarily be automated through database queries and log analysis. If automation is not feasible, we will work directly with clients to gather the necessary data. Each criterion will have at least one metric defined to showcase how the criterion is being used in real clinical scenarios. The number of customers used for each criterion as well as applicable timeframe will be defined as part of each metric if applicable Success will be defined by our ability to highlight how each of these criteria is being used by providers in real patient care

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

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
CHPL Product Number	N/A
Method used for standard update	N/A
Date of ONC ACB notification	N/A
Date of customer notification (SVAP only)	N/A
Conformance measure	N/A
USCDI updated certification criteria (and USCDI version)	N/A

MEASURES USED IN OVERALL APPROACH

This Real-World Testing Plan includes at least one measurement/metric that addresses each applicable certification criterion in the MedOnehp.com EHR's scope of certification. The method for measuring how the approach(es) chosen to meet the intent and purpose of Real-World Testing are considered for each item.

For each measurement/metric, the following elements are described below:

✔ Description of the measurement/metric
✔ Associated certification criteria
✔ Justification for selected measurement/metric
✔ Care setting(s) that is addressed
✔ Expected outcomes

Applicable Criteria: Description of Measurement/Metric

Measurement/Metric	Description
170.315(b)(1) Transition of Care: Over a 90-day period: Count of total imported/exported CCD using EMR Direct Interoperability Engine • Number of successfully exported CCD • Number of validated imported CCD	A requirement of **170.315(b)(1) Transitions of Care** is the sending/receiving of Transition of Care documents.
170.315(b)(10) Electronic Health Information Export Over a 90-day period: • Number of single patient exports • Number of patient population exports	A requirement of **170.315(b)(10) Electronic Health Information export** is that a sub-set of users can create export file(s) of a single patient's electronic health information (EHI) without developer assistance. We will use database records to count the number of single patient exports successfully completed during the specified timeframe.
170.315(c)(1) Clinical Quality Measures (CQM) – Record and Export: Over a 90-day period: Count of exported QRDA Category (CAT) I files • Number of successfully exported QRDA CAT I files • Number of failed exported QRDA CAT I files	A requirement of **170.315(c)(1) Clinical Quality Measures – Record and Export** is to record clinical data in the EHR and export it in the QRDA CAT I format.
170.315(g)(7) Application Access – Patient Selection Over a 90-day period: • Number of requests for a patient ID or token • Number of requests that provided sufficient information to provide a valid response • Number of follow-up requests made using the provided patient ID or token	**170.315(g)(7) Application Access – Patient Selection** The requirement is for the certified Health IT module to provide an API and supporting documentation, enabling external applications to request a unique patient identifier from the module, which can then be used to request additional patient data
170.315(g)(9) Application Access – All Data Request Over a 90-day period: • 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 • 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	**170.315(g)(9) Application Access – All Data Request** The requirement is for 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.
170.315(g)(10) Standardized API for Patient and Population Services: Over a 90-day period: • Number of requests for developer access to the FHIR environment. • Number of calls to FHIR resources to access patients USCDI data.	The requirement of **170.315(g)(10) Standardized API for Patient and Population Services** is for the certified Health IT module to provide an API meeting FHIR requirements and supporting documentation that enable external applications to request patient data by category from the certified Health IT module.
170.315(h)(1) Direct Project: Over a 90-day period Collect the count of sent/received Direct messages using EMR Direct Interoperability Engine • Number of Successfully sent Direct Messages • Number of Failed to send Direct Messages	The requirement of **170.315(h)(1) Direct Project** Is for the certified Health IT module to track the frequency of Direct messages sent and received by providers,

Associated Certification Criteria

Measurement/Metric	Associated Certification Criteria	Relied Upon Software (if applicable)
170.315(b)(1) Transition of Care: Over a 90-day period: Count of total imported/exported CCD using EMR Direct Interoperability Engine • Number of successfully exported CCD • Number of validated imported CCD imported CCD	170.315(b)(1) Transitions of Care	EMR Direct Interoperability Engine
170.315(b)(10) Electronic Health Information Export: Over a 90-day period: Count of single patient export files created.	170.315(b)(10) EHI Export	N/A
170.315(c)(1) Clinical Quality Measures (CQM) – Record and Export: Over a 90-day period: Count of exported QRDA Category (CAT) I files • Number of successfully exported QRDA CAT I files • Number of failed exported QRDA CAT I files	170.315(c)(1) Clinical Quality Measures – Record and Export	N/A
170.315(g)(7) Application Access – Patient Selection: Over a 90-day period: • Number of requests for a patient ID or token • Number of requests that provided sufficient information to provide a valid response • Number of follow-up requests made using the provided patient ID or token	170.315(g)(7) Application Access Patient Selection	N/A
170.315(g)(9) Application Access – All Data Request: Over a 90-day period: • 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 • 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	170.315(g)(9) Application Access – All Data Request	N/A
170.315(g)(10) Standardized API for Patient and Population Services: Over a 90-day period: • Number of requests for developer access to the FHIR environment. • Number of calls to FHIR resources to access patients USCDI data.	170.315(g)(10) Standardized API for Patient and Population Services	N/A
170.315(h)(1) Direct Project: Over a 90-day period Collect the count of sent/received Direct messages using EMR Direct Interoperability Engine • Number of Successfully sent Direct Messages • Number of Failed to send Direct Messages	170.315(h)(1) Direct Project	EMR Direct Interoperability Engine

Applicable Criteria: Justification for Selected Measurement/Metric

Measurement/Metric	Justification
170.315(b)(1) Transition of Care: Over a 90-day period: Count of total imported/exported CCD using EMR Direct Interoperability Engine • Number of successfully exported CCD • Number of validated imported CCD	**170.315(b)(1) Transitions of Care**- This demonstrates our Health IT's ability to send formatted Transition of Care C-CDA documents and incorporate those records into patient charts.
170.315(b)(10) Electronic Health Information Export Over a 90-day period: • Number of single patient exports • Number of patient population exports	**170.315(b)(10) Electronic Health Information Export**-This demonstrates our Health IT's ability to export single patient exports and patient population exports containing all their EHI. This metric will also provide information on the demand for this capability.
170.315(c)(1) Clinical Quality Measures (CQM) – Record and Export: Over a 90-day period: Count of exported QRDA Category (CAT) I files • Number of successfully exported QRDA CAT I file • Number of failed exported QRDA CAT I files	**170.315(c)(1) Clinical Quality Measures - Record and Export**-This demonstrates our Health IT's ability to export correctly formatted QRDA CAT I file. This metric will also provide information on the frequency of use of this functionality
170.315(g)(7) Application Access – Patient Selection: Over a 90-day period: • Number of requests for a patient ID or token • Number of requests that provided sufficient information to provide a valid response • Number of follow-up requests made using the provided patient ID or token	**170.315(g)(7) Application Access – Patient Selection** This demonstrates our intent to track the frequency of patient ID requests received by providers via API to confirm that the certified capability is available and effective, regardless of usage frequency.
170.315(g)(9) Application Access – All Data Request Over a 90-day period: • 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 • 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	**170.315(g)(9) Application Access – All Data Request**. This demonstrates our intent 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.
170.315(g)(10) Standardized API for Patient and Population Services: Over a 90-day period: • Number of requests for developer access to the FHIR environment. • Number of calls to FHIR resources to access patients USCDI data.	**170.315(g)(10) Standardized API for Patient and Population Services**-This demonstrates our intent to record the frequency that patient data requests for USCDI data are fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used.
170.315(h)(1) Direct Project: Over a 90-day period Collect the count of sent/received Direct messages using EMR Direct Interoperability Engine • Number of Successfully sent Direct Messages • Number of Failed to send Direct Messages	**170.315(h)(1) Direct Project-** This demonstrates our Health IT's ability to send/receive correctly formatted Direct Messages. This metric will also provide information on the frequency of use.

Applicable Criteria: Expected Outcomes for Selected Measurement/Metric

Measurement/Metric	Expected Outcomes
170.315(b)(1) Transition of Care: Over a 90-day period: Count of total imported/exported CCD using EMR Direct Interoperability Engine • Number of successfully exported CCD • Number of validated imported CCD	**170.315(b)(1) Transitions of Care** Count of imported/exported CCDA documents with validation successes/failures. Errors in standard validations will be tracked and analyzed as part of this metric. Our expected outcome is there will be low utilization with a high success rate
170.315(b)(10) Electronic Health Information Export: Over a 90-day period: • Number of single patient exports • Number of patient population exports	**170.315(b)(10) Electronic Health Information Export** Count of single patient exports conducted by a designated user and patient population exports for all EHI. Our goal is to document and report the frequency of single patient EHI exports and overall patient population exports to demonstrate availability and compliance. Our expected outcome is there will be low utilization with a high success rate
170.315(c)(1) Clinical Quality Measures (CQM) – Record and Export: Over a 90-day period: Count of exported QRDA Category (CAT) I files • Number of successfully exported QRDA CAT I files • Number of failed exported QRDA CAT I files	**170.315(c)(1) Clinical Quality Measures – Record and Export** Count of exported QRDA CAT I files with a success/failed status. Errors will be tracked and analyzed as part of this metric. Our expected outcome is there will be low utilization with a high success rate.
170.315(g)(7) Application Access – Patient Selection: Over a 90-day period: • Number of requests for a patient ID or token • Number of requests that provided sufficient information to provide a valid response • Number of follow-up requests made using the provided patient ID or token	**170.315(g)(7) Application Access – Patient Selection** This demonstrates our intent to track the frequency of patient ID requests received by providers via API to confirm that the certified capability is available and effective, regardless of usage frequency. Our expected outcome is there will be low utilization with a high success rate
170.315(g)(9) Application Access – All Data Request: Over a 90-day period: • 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 • 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	**170.315(g)(9) Application Access – All Data Request** This demonstrates our intent 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 expected outcome is there will be low utilization with a high success rate
170.315(g)(10) Standardized API for Patient and Population Services: Over a 90-day period: • Number of requests for developer access to the FHIR environment. • Number of calls to FHIR resources to access patients USCDI data.	**170.315(g)(10) Standardized API for Patient and Population Services** This demonstrates our intent to record the frequency that patient data requests for USCDI data are fulfilled via API to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expected outcome is there will be low utilization with a high success rate.
170.315(h)(1) Direct Project: Over a 90-day period Collect the count of sent/received Direct messages using EMR Direct Interoperability Engine • Number of Successfully sent Direct Messages • Number of Failed to send Direct Messages	**170.315(h)(1) Direct Project** Count of sent/received messages with a success/failed status. Errors in transmission will be tracked and analyzed as part of this metric Our expectation is there will be low utilization with a high success rate.

CARE SETTINGS

Care Setting	Justification
Ambulatory	OneConnect is a documentation tool specifically designed for Post Acute, LTC, SNF, AL and IL Primary Care, Wound and PMR specialties in an Ambulatory care setting. It provides the specialties with access to clinical documentation, care coordination, and integration with third-party applications.

SCHEDULE OF KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Finalize Real World Test Plan and Submit to the ONC-ACB (Drummond).	Ambulatory	Q1 2025
Identify clients for participation where applicable for data gathering and obtaining data. The queries that will be used are developed and validated with internal data in our production environment	Ambulatory	Q2 and Q3 2025
Analyze data and begin report generation	Ambulatory	Q4 2025
Submit Real World Testing report to ONC ACB.	Ambulatory	Q1 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.

Authorized Representative Name: Mathina Evans
Authorized Representative Email: mevans@medonehp.com
Authorized Representative Phone: 614-255-6932
Authorized Representative Signature: *Mathina Evans*
Date: 11/12/2024

i. Certified health IT continues to be compliant with the certification criteria, including the required technical standards and vocabulary codes sets; certified health IT is exchanging EHI in the care and practice settings for which it is marketed for use; and EHI is received by and used in the certified health IT. (85 FR 25766)

ii. https://www.federalregister.gov/d/2020-07419/p-3582