GENERAL INFORMATION

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

Developer Name: Community Computer Service, Inc.

Product Name(s): MEDENT

Version Number(s): v23.7

Certified Health IT Product List (CHPL) Product Number(s):

v23.7 – 15.04.04.1840.MEDE.23.02.1.230918

Developer Real World Testing Plan Page URL:

https://www.medent.com/onc/

CHANGES TO ORIGINAL PLAN

None

WITHDRAWN PRODUCTS

None

SUMMARY OF TESTING METHODS AND KEY FINDINGS

Our Real-World Testing involved a combination of running reports and reviewing customer data. Using these methods allowed us to determine that all certified functionality is working as expected for those clients who have chosen to use it. The results of our testing will be broken down by measure, with an explanation of the testing methods and outcomes for each. No non-conformities were discovered during testing.

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

☒ No, none of my products include these voluntary standards

CARE SETTING(S)

MEDENT is an EMR system designed for use in ambulatory settings. Therefore, all Real-World Testing was conducted using ambulatory client data.

METRICS AND OUTCOMES

Transitions of Care

Associated Criteria: § 170.315(b)(1) Transitions of care

Relied upon software: Surescripts Clinical Direct Messaging

Outcomes: We reviewed the MIPS Sending Health Information report quarterly to ensure clients were able to send and receive C-CDA documents without issue. The report indicated clients were achieving an average of 26% towards sending C-CDA documents via Direct. Several factors played into the percentage, including whether the receiving entity was setup for Direct or the client was including acceptable data in the C-CDA. In the instances where the appropriate C-CDA was sent, we confirmed that clients were successfully sending a high volume of C-CDAs via Direct when a Direct address was available to send to.

Challenges Encountered: N/A

Clinical Information Reconciliation and Incorporation

Associated Criteria: § 170.315(b)(2) Clinical information reconciliation and incorporation

Relied upon software: N/A

Outcomes: We reviewed the Clinical Information Reconciliation report quarterly to confirm practices were successfully receiving summary of care documents and performing clinical data reconciliation. The volume of CCD-A documents clients received for reconciliation did increase each quarter. On average clients received a summary of care document and incorporated the information for 25% of patients.

Challenges Encountered: N/A

Electronic Prescribing

Associated Criteria: § 170.315(b)(3) Electronic prescribing

Relied upon software: Surescripts ePrescribing

Outcomes: Relying on our clients and their staff to report issues as they arise proved to be the best way for us to find and fix issues and errors. We performed spot checking and reviewed the Surescripts console but as in previous years, the majority of errors we found had already been reported by the client. There was an average error rate of 0.007% based on the number of e-prescribing messages sent, and those that returned an error by Surescripts. Running the MIPS erx reports revealed that on average, 97.18% of prescriptions were submitted electronically.

Challenges Encountered: N/A

Data Export

Associated Criteria: § 170.315(b)(6) Data export

Relied upon software: N/A

Outcomes: The data export configuration in MEDENT was reviewed to determine the frequency with which clients were creating data export packages. We determined clients were not using this feature, as no one had the configuration setup. We confirmed that the functionality was available and working correctly, but based on the lack of setup there was no volume to report.

Challenges Encountered:

Care Plan

Associated Criteria: § 170.315(b)(9) Care plan

Relied upon software: N/A

Outcomes: The structured care plan document report was reviewed to determine the frequency with which clients were sending and receiving structured care plans. 16 care plans were created successfully.

Challenges Encountered: N/A

Clinical Quality Measures

Associated Criteria:

§ 170.315(c)(1)—record and export

§ 170.315(c)(2)—import and calculate

§ 170.315(c)(3)—report

Relied upon software: N/A

Outcomes: Reports were run to confirm that all associated criteria are being met. Determined that measures specifications are being met and reports are being created and exported at expected times. Clients sampled were shown to be successfully submitting QRDA I files to the registry. The total volume of files for the sample was 235,553. QRDA III files were tested for each quarter and for the full year in 2024 for each testing partner client. 10 QRDA III files were validated using the Cypress validation tool. All files were found to be valid for submission.

Challenges Encountered: N/A

View, Download, and Transmit to 3rd Party

Associated Criteria: § 170.315(e)(1) View, download, and transmit to 3rd party

Relied upon software: Surescripts Clinical Direct Messaging

Outcomes: Running a report to look for the CCD-PORTAL document code on patient charts confirmed that patients with active portal accounts are successfully viewing, downloading, and transmitting their health information from the patient portal. There was no data indicating any errors in transmission. For the clients we reviewed we noticed a wide range of patients using this feature, some clients had a high volume of patients viewing their health information, e.g., 8782 patients viewed, downloaded, or transmitted their data, and some clients had a low volume of patients, e.g., 97 patients.

Challenges Encountered: N/A

Transmission to Immunization Registries

Associated Criteria: § 170.315(f)(1) Transmission to immunization registries

Relied upon software: N/A

Outcomes: Running a report for immunizations sent to the registry confirmed that immunization records are being created using CVX and NDC codes and are being successfully sent to the state immunization registries. As expected, there was a wide range of use. Some practices averaged a high of 11,000 submissions, some an average of 4100. Searching for queries and responses from the registries also confirmed that MEDENT practices are successfully querying and receiving responses from the state immunization registries. The clients we reviewed showed on average there were almost 84,000 queries in 2024, with a response average rate of more than 52,000. No failures were found.

Challenges Encountered: The issue we identified last year with the logging of Responses from the IIS systems being purged in 90-day intervals was fixed during the first quarter of 2024.

Syndromic Surveillance

Associated Criteria: § 170.315(f)(2) Transmission to public health agencies — syndromic surveillance

Relied upon software: N/A

Outcomes: Based on review of client systems, we do not have any practices using this interface. We created sample files for 10 patients to ensure functionality was still compliant, using different variations.

Challenges Encountered: N/A

Cancer Registries

Associated Criteria: § 170.315(f)(4) Transmission to cancer registries

Relied upon software: N/A

Outcomes: Running a report for cancer CDAs confirmed that clients who are participating in a cancer registry are able to create and submit these documents successfully. While there was not a high volume of transmission, total patient submissions were 83 for the clients we reviewed, no failures were reported.

Challenges Encountered: N/A

Electronic Case Reporting

Associated Criteria: § 170.315(f)(5) Transmission to public health agencies — electronic case reporting

Relied upon software: N/A

Outcomes: We do not have any practices submitting Electronic Case Reporting at this time. We created test cases for 12 test patients to ensure functionality was still complaint.

Challenges Encountered: N/A

Health Care Surveys

Associated Criteria: § 170.315(f)(7) Transmission to public health agencies — health care surveys

Relied upon software: Surescripts Clinical Direct Messaging

Outcomes: Successful transmission of Health Care Surveys are being sent to the CDC. We have two clients submitting to the CDC. The total patient submissions were 87,028, no failures were reported.

Challenges Encountered: The expectation is for a Healthcare Survey to be sent upon the closure of each e-superbill for the selected locations. Additional logging was applied to address a discrepancy between the number of closed encounters and the number of surveys sent to the CDC. Testing and review is ongoing.

Application Programming Interfaces

Associated Criteria:

§ 170.315(g)(7) Application access— patient selection

§ 170.315(g)(9) Application access— all data request

§170.315(g)(7) - (g)(10) Application Programming Interface

Relied upon software: N/A

Outcomes: We were able to verify that new applications were able to register for the SMART on FHIR and MEDENT API platforms. This was seen through both new registration alerts that were created when these were completed by third parties and verified using our live links ourselves.

For the MEDENT API platform, internal tests of our live Practice List, Patient Token, and Data retrieval steps were functioning as expected when tested quarterly. Internal testing including full registration of a test app, issuing of the Patient Token and data retrieval for one test patient. We were able to verify that for this one test patient a full structured Continuity of Care Document could be retrieved.

We did not have any third-party contacts reach out to us for any additional troubleshooting steps after initial registration. There were 17 unique registrations from 3rd party vendors against our API.

For the SMART on FHIR API, review of applications who registered for access included verifying they submitted valid registration information and could be verified via contact information or website information. We had 7 unique SMART on FHIR application registrations for the different supported launches.

Internal testing for the SMART on FHIR API included using the ONC Infero Test Kit to validate data element support and rejecting invalid launches or token requests.

As field testing was done with registered sites and application vendors, changes made to help facilitate the connections were done urgently and if necessary, updates to the documentation published on the MEDENT website: onc | MEDENT were completed.

Challenges Encountered: As we worked on the SMART on FHIR Launches, we did have to make adjustments to ensure applications were only able to register with supported scopes and that the connections did not have any issues. We are seeing a need to coordinate at times with some launches that traffic is allowed between all the necessary servers and the vendor platform. To address this, we are working with our networking team or looping in the appropriate practice IT contacts.

Direct Project

Associated Criteria: § 170.315(h)(1) Direct Project

Relied upon software: Surescripts

Outcomes: Review of total Inbound and Outbound Direct traffic for MEDENT practices using the HISP-generated reports showed the following metrics:

Average Inbound Messages per Month in 2024: 468015.
Average Outbound Messages per Month in 2024: 319475
Average Error % for Inbound Messages per Month in 2024: 5.41%
Average Error % for Outbound Messages Per Month in 2024: 3.76%

This shows that we did have successful use of the Direct Protocol in the vast majority of cases and will continue to monitor for any changes in volume or increase in errors. We did see a general increase in volume of traffic in both direction but overall decrease in error percentages compared to 2023.

Challenges Encountered: N/A

KEY MILESTONES

- Data was collected and analyzed for each metric at the end of every quarter throughout 2024, and for the full year.
- All data was reviewed and analyzed collectively in January 2025 in order to determine the outcomes for each measure.