

Developer Name: AllegianceMD Software, Inc

Product Name: Veracity

Version: 9.1

Product List (CHPL) 15.02.05.2672.ALLE.01.01.1.220117

Plan Report ID: 20241108a11

Real world Testing URL: <https://allegiancemd.com/real-world-testing>

### Justification for Real World Testing Approach

#### **Measure/Metric:**

The metric will represent the total percentage of successfully transmitted interoperability messages by analyzing data logs that compare the total number of initiated transmissions against the total number of successfully transmitted messages. This metric is updated for each individual criterion.

**Reason Measurement/metrics:** This type of measurement enables the identification of error rates attributable to the EHR system and external factors related to recipients. Additionally, it provides insights into the percentage of successfully transmitted interoperability messages.

Certification Criterias for which above Metrics are used.

Criteria ID	Description
*170.315(b)(1)	Transition of care
*170.315(b)(2)	Clinical information reconciliation and incorporation
*170.315(b)(3)	Electronic prescribing
*170.315(b)(10)	Electronic Health Information export
*170.315(e)(1)	View, download, and transmit to 3rd part
*170.315(c)(1)	Record and export
*170.315(c)(2)	Import and Calculate
*170.315(c)(3)	Report
* 170.315(h)(1)	Direct Project
* 170.315(f)(1)	Transmission to immunization registries
* 170.315(f)(5)	Transmission to public health agencies - electronic case reporting
* 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

**SVAP Standards:**

There are no voluntary SVAP standards updates

**Mile Stones/Timelines:**

Data base logs monitoring schedule:

Criteria ID	Description	Dates to capture the Data logs for Monitoring	Duration
170.315(g)(9)	Application access - all data request	07/01/2025 to 07/14/2025	14 days
170.315(g)(7)	Application access - patient selection	07/01/2025 to 07/14/2025	14 days
170.315(b)(1)	Transition of care		
170.315(b)(2)	Clinical information reconciliation and incorporation		
170.315(b)(10)	Electronic Health Information export		
170.315(e)(1)	View, download, and transmit to 3rd part		
170.315(f)(5)	Transmission to public health agencies - electronic case reporting		
170.315(h)(1)	Direct Project		
170.315(f)(1)	Transmission to immunization registries		
§170.315(g)(10)	Standardized API for patient and population services	07/01/2025 to 08/31/2025	2 months
170.315(b)(3)	Electronic prescribing	07/01/2025 to 07/14/2025	14 days
170.315(c)(1)	Record and export	07/01/2025 to 08/31/2025	2 months
170.315(c)(2)	Import and Calculate		
170.315(c)(3)	Report		

<b>Key Milestone</b>	<b>Document our CY 2025 test results</b>	<b>Time Frame</b>
	Document our CY 2025 test results	09/15/2025-11/30/2025
	Submit Real World Testing Report to ONC-ACB	Before January 31st 2026

**Measure:**

Sending: The total percentage of successful Transitions of Referral Summary through Direct Address

Denominator = Total no. of transitions of Referral Summary initiated in Veracity

Numerator = Total no. of successful transmissions delivered successfully

Total % of Successful Transmissions = (Numerator/Denominator) X 100

Receive: The total percentage of successful incoming CCDA

Denominator = Total no. of Incoming CCDA received with no error – Total no. of Invalid Incoming CCDA

Numerator = Total no. of Incoming CCDA from Denominator

**Description:** The data logs collected to calculate the total percentage of successfully transmitted referral summaries via Direct address or secure messaging include the Sending Denominator, which reflects the number of Transition of Care (TOC) events. This denominator excludes TOC events that failed due to data entry standard issues or recipient errors, as these are beyond the system's control.

Similarly, the total number of received or incoming CCDAs will demonstrate that Veracity has an operational module capable of accepting incoming CCDA files via direct messaging. The Receiving Numerator will indicate that the EHR system has a functional module allowing users to map valid incoming CCDA files to the patient chart.

**Justification:** The testing of this measure is conducted for both the sending and receiving capabilities of Veracity. The Sending Denominator for TOC (Transition of Care) events monitors Veracity's ability to transmit referral summaries to the Direct address of external providers or via secure messaging. In cases where the direct message is invalid or the recipient is unable to accept the message, the system will log the errors. This demonstrates that the EHR system is capable of both sending and receiving CCDA files.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected outcome:** Data base logs are noticed with zero standard based errors.

**Relied Software:** phiMail

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:**

Total % of Incoming CCDA files which are incorporated to chart and reconciled and TOC generated with incorporated data.

Denominator: Total no. of valid CCDA imported and reconciled

Numerator: Total no. of patients in denominator for which TOC is imported and reconciled successfully.

**Description:** The denominator is determined by data logs that capture the total number of attempted CCDA file imports, including both CCDA release 2.1 and 1.1 standards. The numerator reflects the number of patients for whom the TOC (Transition of Care) was successfully imported and reconciled.

**Justification:** The measure requires the capability to map CCDA files to patient charts and perform reconciliation of the patient's problem list, allergies, and medications. Additionally, the EHR must be able to generate a referral summary after the reconciliation and incorporation processes. The denominator and numerator values, derived from the data logs, will provide the count of such records.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Relied Software:** None

**Expected outcome:**

- a) EHR will successfully accept at least one Incoming CCDA Messages and Map to Patient charts.
- b) For at least one patient Medication Reconciliation is performed for Medication allergies, Problem list and Medications.
- c) For at least one patient TOC is generated successfully for whom Reconciliation is performed.

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:**

**Denominator:** (Total no. of electronic prescriptions transmission - Data entry error)

Numerator: Total no. of successful electronic prescriptions transmission

**Description:** During the testing period, a report will be generated which tracks how many patients have received electronic prescriptions ordered by the provider over the course of a given interval.

**Justification:** We will report clearly in the denominator, the number of unique patients who had prescriptions transmitted electronic and in the numerator the successful transmission of said prescriptions.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** Zero prescriptions transmitted without 00's for the amounts less than 1. The successful electronic transmission of prescriptions must  $\geq 95\%$

**Relied Software:** None

**Standards Update:** Not applicable

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:**

Total % of Successful Data Exports

Denominator: (Total no. of Manual Data Exports + Total no. of Automated Data exports) – Total no. of Data exports failed due to wrong data entry by users.

Numerator: Total no. of successful Manual Data exports + Total no. of Successful Automated Data Exports completed without any errors.

**Description:** The data export criteria require the EHR to have the capability to export Electronic Health Information (EHI) for an individual patient without developer intervention and to provide the download via a public link. Data logs from manual exports will confirm that the export functionality is operating without errors. Additionally, data logs for scheduled automated exports will verify that the scheduled exports are functioning correctly and on time.

**Justification:** As mentioned in the certification criteria 170.315 (b)(10), Denominator will demonstrate that EHR can support automated export and sharing to a public link. The numerator count will demonstrate the total the total data exports which were successful.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs

**Expected Outcome:**

At least 95% of Successful Data exports is expected. Where one Data Export is equal to one patient data set.

**Relied Software:** None

**Standards Update:** Not applicable.

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** Total percentage of patient for whom CCDA is made available to view, download and transmit. Out of which Total percentage of patient who performed the actions view or download or transmit of CCDA files.

Denominator = Total no. patients who attempted to download or view or transmit CCDA.

Numerator = Total no. of patients from Denominator for whom CCDA is made accessible and actions like view or download or transmit is performed successfully.

Total Percentage =  $\frac{(\text{Numerator})}{(\text{Denominator})} * 100$

**Description:** The measure total percentage of patients for whom CCDA is made available to view, download and transmit will demonstrate that Veracity has a working module to CCDA view download and transmit to patient. The data logs of Denominator based on the appointment schedule will give us the count of patients for whom the CCDA is supposed to be made available. Data logs of patients from Denominator, for whom CCDA is viewed, downloaded or transmitted. This would give the combine count of patients who performed the actions of View, Download of CCDA and Transmission of CCDA using the data provided by Veracity.

**Justification:** As specified in 170.315 (e)(1)(i)(A-D), the data logs collected for calculating the percentage of patients for whom CCDA is made available will explain that EHR is having ability to provide CCDA to patient or authorized people. The data logs of View, Download and Transmit will help demonstrate how frequently user is using these functionalities.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** At least one patient out of Denominator must be able to perform actions of View or Download or transmit. Expected outcome is determined to be only one, because the numerator totally depends upon patients and clients who are using CCDA through their portal. Since we cannot predict or estimate any percentage of usage, we are considering it as success if one patient is able to perform the actions at a minimum.

**Relied Software:** Myportal.MD

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** Total % of successful exports of Valid QRDA 1

Denominator: Total no. of attempts to generate QRDA 1.

Numerator: Total no. of successful attempts to generate QRDA 1.

Total % of successful exports of Valid QRDA 1 = [Numerator/ Denominator]\* 100

**Description:** The data logs required for this measure are collected for the duration of 60 days. To ensure that EHR has ability to allow users to document all required data for QRDA 1 we collect the number of attempts to export QRDA1

Also to ensure that EHR has ability to validate the QRDA1 files before exporting we measure the percentage of successful exports by logging the information of total QRDA1 exports vs. total QRDA1 successful exports.

**Justification:** The successful attempts of exporting QRDA 1 will demonstrate that user can export this information without help of technical person. EHR validates the files which are getting exported and user will receive validations if required data is not recorded which are mandatory to generate respective files. The successful export of QRDA 1 proves Veracity has the functionality working as expected in this certification criteria.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** > = 95% of Successful QRDA 1 export.

QRDA 1 export logs must be reviewed and notice the successful export; if failure of export is noted it must be due to invalid data or Data validations.

**Relied Software:** None

**Standards Update:** Not Applicable.

**Milestones/Timelines:**

Data log monitoring Schedule: 03/01/2025 12.00 AM (PST) to 03/30/2025 11.59 PM (PST) Data Analysis

Schedule: 06/15/2025 to 06/25/2025

**Measure:** Total % of successful patients QRDA 1 files imported and calculated Denominator: Total no. of QRDA 1 patient files imported into EHR.

Numerator: Total no. of unique patients from Denominator who are considered for calculating

Total % of successful patients QRDA 1 files imported and calculated =  $[\text{Numerator} / \text{Denominator}] * 100$

**Description:** The data logs required for this measure are collected for the duration of 25 days. These data logs must have the list QRDA 1 file patient names whose data is imported into EHR. This will help demonstrate the ability of importing QRDA 1 files into EHR.

**Justification:** The total % of successful patients QRDA 1 files imported and calculated will demonstrate that user can import QRDA 1 without help of technical person. Also, the capability of calculating the imported data as per the standards mentioned in 170.315(c)(2).

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** > = 95% of QRDA 1 Patient files must be imported and used for calculation.

**Relied Software:** None

**Standards Update:** Not Applicable.

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 08/31/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 08/31/2025

**Measure:** Total % of successful QRDA III files generated and exported from EHR.

Denominator: Total no. of QRDA III files attempted to generate and export from EHR

Numerator: Total no. of Valid QRDA III files successfully generated and exported from EHR

Total % of successful QRDA III files generated and exported from EHR =  $[\text{Numerator} / \text{Denominator}] * 100$

**Description:** The data logs required for this measure are collected for the duration of 60 days. These data logs must have the list of attempts made to generate QRDA III and successful valid QRDA III files generated. Also the list of attempts which failed due to data entry errors.

**Justification:** The Total % of successful QRDA III files generated and exported from EHR will demonstrate that user QRDA III without help of technical person. This demonstrates that EHR has capability of generating QRDA III as standards mentioned in 170.315(c)(3). We do not support Inpatient settings so, we do not support generation of QRDA I required for Inpatients

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** > = 95% of QRDA III generation and export must be successful.

**Relied Software:** None

**Standards Update:** Not applicable

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 08/31/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 08/31/2025

**Measure:**

Outgoing: Total % of Successful outgoing and incoming transmissions of Clinical messages through Direct Address.

Denominator: Total no. of Outgoing and incoming Transmissions initiated from Veracity

Numerator: Total no. of Outgoing and incoming wrapped Transmissions was successful

Total % of Successful Outgoing and incoming Transmissions = [Numerator/Denominator] \* 100

**Description:** The data base logs of total outgoing and incoming clinical messages is collected to calculate the percentage of successful transmissions which proves EHR has this feature working in real time. This data is collected as per the scheduled data logging period of 14 days. The Denominator counts which show the count of Outgoing and Incoming transmissions. The numerator count will demonstrate that EHR is able to send and receive wrapped clinical messages through direct address.

**Justification:** When we log the data for Sending and Receiving we will collect the information of total messages which are initiated to send and also the count of messages received into the EHR data base for a specific direct address. While sending the clinical message the recipient may have issues due to which we will not receive a successful notification. Similarly for incoming clinical messages, we will collect the count of total incoming messages to a specific direct address as denominator.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** EHR must have > =95% of all clinical messages transmitted through direct address are successful. Only the messages which failed must be due to the issues from Recipient.

**Relied Software:** PHIMail

**Standards Update:** Not applicable

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Transmission to immunization registries Measure: 1:** Total percentage of Immunization messages transmitted to Immunization Registries

Denominator: Total no. of Vaccination information transmitted – Errors due to invalid data entry

Numerator: Total no. of Vaccination information transmitted successfully

Total %: [Numerator/Denominator] \* 100

**Transmission to immunization registries Measure 1: Description:** The data logs which are required for this measure must have the list of vaccines. As per the standards mentioned in 170.315 (f)(1)(i). To get the numerator count we need to the data log of total transmissions which are successful. These logs must also have the flag which differentiates Historic vaccine record and administered vaccine record.

**Transmission to immunization registries Measure 1 Justification:**

As mentioned in 170.315 (f)(1)(i) the measure 1 will demonstrate that EHR has capability to document Vaccine historic information using CVX codes and Vaccine Administration details using NDC codes. All the messages generated from EHR are based on HL7 2.5.1 Implementation Guide (IG) for Immunization Messaging (IM), Release 1.5. This would satisfy the requirement of these test criteria.

**Transmission to immunization registries Measure 1 Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Transmission to immunization registries Measure 1 Expected Outcome:** The report of all immunization messages transmitted to registry must show zero errors. If an error is observed it is expected to be error from recipient. No standard related errors are expected.

**Transmission to immunization registries Measure 1 Relied Software:** None

**Transmission to immunization registries Measure 1 Standards Update:** Not applicable

**Transmission to immunization registries Measure 1 Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Vaccine Hx and Vaccine Forecast Measure: 2:** Total percentage of successful requests executed to get Vaccine history and Vaccine forecast.

Denominator: Total no. of Vaccine History and vaccine forecast requests initiated in EHR  
Numerator: Total no. of Vaccine History responses received from Immunization Registry and vaccine forecast responses displayed.

Total %: [ Total no. of Vaccine History responses received from Immunization Registry and vaccine forecast responses displayed / no. of Vaccine History and vaccine forecast requests initiated in EHR] \* 100

**Vaccine Hx and Vaccine Forecast Measure: 2: Description:** The data logs of Vaccine hx requests and responses, vaccine forecast requests and response are collected during the data logging schedule of 14 days. This data will prove that EHR has the real time working modules to send vaccination information to registry, request vaccine hx and receive response; request vaccine forecast and receive response from Immunization registries. Currently we don't have providers who have requested historical or forecast integration. This test will be done in a testing environment.

**Vaccine Hx and Vaccine Forecast Measure: 2: Justification:** The data logs collected will demonstrate the capability of getting Vaccine hx and vaccine forecast of patients as per the standards mentioned in 170.315 (f)(1)(ii). All the messages generated from EHR are based on HL7 2.5.1 Implementation Guide (IG) for Immunization Messaging (IM), Release 1.5. This would satisfy the requirement of these test criteria.

**Vaccine Hx and Vaccine Forecast Measure: 2 Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs

Vaccine Hx and Vaccine Forecast Measure: 2

**Expected Outcome:** Total percentage of successful requests executed is expected to be  $\geq 95\%$ . If an error is observed it is expected to be error from registry who supplies data to EHR. No standard related errors are expected.

**Transmission to immunization registries Measure 2 Relied Software:** None **Transmission to**

**immunization registries Measure 2 Standards Update:** Not applicable **Transmission to**

**immunization registries Measure 2 Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** Total percentage of electronic case reports generated and transmitted.

Denominator: Total no. of encounters which meets the Trigger requirement for Generating Electronic Case report.

Numerator1: Total no. of encounters from Denominator for which Electronic case report is generated.

Numerator2: Total no. of encounters from Denominator for which Electronic Case report is transmitted to Public health Agencies.

Total percentage of electronic case reports generated and Transmitted =  $[\text{Numerator 1} + \text{Numerator 2}] / \text{Denominator} * 100$

**Description:** The data logs of encounters which meet the Triggers required for Electronic case reporting is collected for the duration of 14 days as per the data log schedule. The denominator count will prove that EHR has capability of generating Triggers based on the Trigger codes table. The numerator 1 will demonstrate that EHR has capability of generating electronic case report based on trigger. Then numerator 2 is collected for the practices which have established connectivity with a public health agency. This is the count of Electronic case reports which are transmitted to public health agencies.

**Justification:** The requirements of Electronic case reporting are to attain the capability of maintain the Table for Trigger codes, identify the encounters which meet the trigger, generate the electronic case report and transmit it to public health agencies. We do not have clients or providers who requested integration with health agencies for electronic transmission. Due to which, we consider export of electronic case report from EHR for Numerator 2. According to this requirement the logs are collected and total percentage of successful electronic case reports generated and transmitted are calculated.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** The visits recorded in denominator must be based on Trigger table and EHR must be able to generate Electronic case report ready for transmission for all encounters which are considered in denominator. At least for one patient encounter must be triggered and electronic case report must be exported or transmitted.

**Relied Software:** None

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** The total percentage of successful matching responses

Denominator = (Total no. of requests for All Patient Data along with username and an API token – Total no. of invalid API requests)

Numerator = Total no. of successful matching responses given to requests in Denominator Total % of

Successful Transmissions = (Numerator/Denominator) X 100

**Description:** The data required for the measure is collected for the duration of 14 days as mentioned in the schedule. Using the data logs we collect information as mentioned below to calculate the accuracy and successful responses percentage. Using these logs we can monitor if Veracity is able to accept the username and password and API key which belongs to a specific patient and give data of a patient who has the same user name mentioned in the health IT data base. This would satisfy the functional requirement mentioned in the (g)(7)(i).

- a) Total no. of API requests received for the patients.
- b) Total no. of invalid API requests for the patients.
- c) Total no. of successful API responses from Veracity.

**Justification:** The denominator count of this measure is the no. of valid API requests. If the user tries to request data of a patient with invalid user name or password or API token, these requests will be considered as invalid API requests. These invalid requests will not be considered in Denominator. Ability of identifying the invalid requests will demonstrate the functional requirement in (g)(7)(i). As a response to the valid requests, the numerator count which is total no. of Successful API responses from Veracity will have the total no. of valid requests for which patient ID is returned.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** All the Data logs for API show successful transmission; also denies the requests which are invalid or unauthorized.

**Relied Software:** None

**Standards Update:** Not Applicable.

Milestones/Timelines:

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** The total percentage of successful transmissions.

Denominator = (Total no. of requests for All Patient Data – Total no. of Invalid API requests) Numerator =

Total no. of successful responses given to requests in Denominator

Total % of Successful Transmissions = (Numerator/Denominator) X 100

**Description:** The data required for the Measure is collected for the duration of 14 days as mentioned in the schedule. Using the data logs we will collect below (a – c) mentioned data to calculate the accuracy and successful transmission percentage. This Criterion required Veracity to give the functionality to users for requesting All patient Data as mentioned in §170.315(g)(9)(i)(A). The API data requests are considered valid and response is given only if the combination of User name, password and API Toke key are correct.

- b) Total no. of API requests received for All patient Data.
- b) Total no. of API responses from Veracity.
- c) Total no. of API responses failed due to veracity server error.

**Justification:** The denominator count of this measure is the count of valid API requests. Meaning, if the user tries to request a patient data with invalid User name or password or API Token, the request will be considered as invalid. This would satisfy the requirement of providing access to the patient data through API. As a response to the request, the numerator count which is total no. of API responses from Veracity will have the total requests for which data is sent in CCD format within the date range mentioned in the request.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** Acceptable Successful Transmissions is > = 95%

Relied Software: None

Milestones/Timelines:

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 07/14/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 07/14/2025

**Measure:** Total percentage of successful responses given to API requests.

Denominator: Total no. of Successful API requests from Client Applications.

Denominator Exclusion: Total no. of invalid API requests from Client Applications. This includes the requests with wrong passwords or invalid OAuth Tokens.

Numerator: Total no. of successful responses from Veracity

Total %:  $[\text{Total no. of Successful API requests from Client Applications} - \text{Total no. of invalid API requests from Client Applications} / \text{Total no. of successful responses from Veracity}] * 100$

**Description:** The data logs of API requests and responses are collected during the data logging schedule of 60 days. This data will prove that EHR has the real time working modules to receive and respond to API requests in FHIR format.

**Justification:** The measure demonstrates the no. of API requests and successful responses. Since, we are having Denominator exclusion; it will demonstrate that EHR is able to decline the invalid API requests with error.

**Care Setting:** Testing is focused on Ambulatory Settings. Our entire client base is Eligible Providers who treat outpatients. Our clients include Internal Medication, GI, OBGYN, Pediatrics, Psychiatric and Cardiology settings. These settings will be used for collecting required data logs.

**Expected Outcome:** The report will explain that EHR is capable of receiving and responding to the API request with OAuth token. Total % of successful responses is expected to be  $\geq 95\%$

**Relied Software:** None

**Standards Update:** Not Applicable.

**Milestones/Timelines:**

Data log monitoring Schedule: 07/01/2025 12:00 AM UTC to 08/31/2025 11:59 AM UTC

Data Analysis Schedule: 07/01/2025 to 08/31/2025

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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: Mohamed Elmawi

Authorized Representative Email: melmawi@allegiancemd.com

Authorized Representative Phone: 918-200-9441

Authorized Representative Signature: Mohamed Elmawi

Date: 10/11/2025

Signature

*Mohamed Elmawi*