

EXECUTIVE SUMMARY
InteliChart is proud to be recognized as a participant in the Assistant Secretary for Technology Policy (ASTP) and the Office of the
National Coordinator (ONC) for Health Information Technology (HIT) Certification Program. Our robust software solutions continue to meet the certification criteria for the 2015 and 2015 Cures Updates, as outlined in the Real World Testing Condition
and Maintenance Certification requirements in 45 CFR 170.405.
The Real World Testing Results are structed in alignment with the 2015 and 2015 Cures Updates certification criteria, with clear
identification of each Certified Health IT Module under which the criteria are certified. These criteria are published on the ONC''s
Certified Health IT Certification Program List (CHPL). InteliChart has streamlined its test plans to include consolidated scenarios for enhanced productivity and compliance across multiple Certified Health IT Modules where applicable.
In accordance with the Health Insurance Portability
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Last updated: February 14, 2025



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GENERAL INFORMATION

ONC-ACB CERTIFICATION ID: 15.04.04.1722.Inte.35.00.1.170921

DEVELOPER NAME: <u>InteliChart LLC</u>

PRODUCT NAME(S): InteliChart Patient Portal

InteliChart on FHIR

VERSION NUMBER(S): 3.5

1.0

CERTIFIED HEALTH IT PRODUCT LIST (CHLP)

PRODUCT NUMBER(S):

15.04.04.1722.Inte.35.00.1.170921

DEVELOPER REAL WORLD TESTING PLAN URL: https://www.intelichart.com/regulatory-and-compliance-

requirements



JUSTIFICATION FOR REAL-WORLD TESTING RESULTS APPROACH

The Certified Health IT Module 170.315(e)(1) View, Download, and Transmit to a 3rd party in marketed to various care settings, including pediatric, orthopedic, neurosurgery, ophthalmology, and hospital environments. The Real World Testing Plan will encompass these specialties for this reason. All criteria for § 170.315(e)(1) related to the View, Download, and Transmit to 3rd Parties feature will be applied uniformly across all care settings. A thorough evaluation of all criteria for § 170.315(e)(1) will be conducted.

Additionally, our product supports external API access to patient data for authorized third-party applications. The Application API can process requests that include sufficient information to uniquely identify a patient and respond with patient data for each category listed in the Common Clinical Data Set (CCDS). This data is returned in a computable format, in adherence to the required data standards.

The goal is to demonstrate that the API functionality aligns with the certification criteria of 170.315(g)(7) Application Access-Patient Selection; 170.315(g)(9) Application Access - All Data Requests; and 170.315(g)(10) Standardized API for Patient and Population Services. This will be validated through the test scenarios outlined in the plan, which will show the successful access of patient data via the APIs.

The inclusion of external API access for authorized third-party applications is a strong feature, enabling seamless data sharing while maintaining patient confidentiality. Demonstrating compliance with the certification criteria for 170.315 (b)(10), (e)(1), (g)(7), (g)(9), and (g)(10) through well-defined test scenarios is crucial for validating the functionality of these APIs.



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

Standard (and version)	3.5, USCDI V1						
Updated certification criteria	170.315(e)(1): View, Download, and Transmit to 3 rd Party						
and associated product	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						
	InteliChart Patient Portal						
	InteliChart on FHIR V1.0, 170.315 (g)(10)						
CHPL Product Number	15.04.04177.Inte.35.001.170921						
Method used for standard update	170.315(e)(1) ONC Test procedure V1.4						
	170.315(g)(7) Attestation						
	170.315(g)(9) ONC Test procedure V1.3						
	170.315 (g)(10) ONC Test procedure V2.1						
Date on ONC ACB notification	Not Applicable						
Date of customer notification	Not Applicable						
(SVAP only)							
Conformance measure	170.315(e)(1) Edge Testing Tool, V2.3.47						
	170.315(g)(7) Attestation						
	170.315(g)(9) Edge Testing Tool V2.3.47						
	170.315(g)(10) Inferno V2.2.2						
USCDI updated certification	All are applicable for USCDI V1						
criteria (and USCDI version)	170.315(e)(1) Cures Update						
	170.315(g)(7) Attestation						
	170.315(g)(9)						
	170.315(g)(10) ONC Test procedure V2.1						



MEASURES USED IN OVERALL APPROACH

REAL WORLD TESTING RESULTS FOR 170.315(e)(1)

Measurement / Metric SHARING EHI	DESCRIPTION
Patient Engagement	Validate the adoption of View, Downland and Transmit functionality as defined by <u>HealthIT.gov</u> using Approach 1.

ASSOCIATED CERTIFICATION CRITERIA (2015 CURES UPDATE)

Measurement / Metric	Associated Certification Criteria	Relied Upon Software (If applicable)
170.315(e)(1) View, Download	170.315(e)(1) Validate the adoption	Not Applicable
and Transmit to Third-Party	of View, Download and Transmit to	
	Third-Party functionality.	

JUSTIFICATION FOR SELECTED MEASUREMENT / METRIC

Measurement / Metric	Description
170.315(e)(1) View, Download and	EHI may be shared through the Patient Portal for viewing, downloads and
Transmit to Third-Party	encrypted or unencrypted transmissions. This metric will provide information on the
	types of transmissions deployed, viewing EHI, downloads and unencrypted vs.
	encrypted transmission and the frequency of usages.
	Privacy and security of products as defined by the ONC
	Patients (and their authorized representatives) can view, download, and transmit
	their health information to a third party via internet-based technology consistent
	with one of the WCAG 2.0 Levels A or AA.



TESTING METHODOLOGY				
Measurement / Metric	Description			
170.315(e)(1) View, Download and	Patient Portal utilization logs, for patients of each care setting, will be			
Transmit to Third-Party	captured on a monthly frequency to determine the volume of patient views,			
	downloads and transmits of EHI that were attempted and successfully			
	completed during each month during the year under test. Any failed attempts will also			
	be recorded for each monthly period. Data collected from the monthly testing will be			
	deidentified and used to determine monthly			
	utilization, volume, and error rates of the implementation. This test			
	methodology will primarily evaluate the conformance of the implementation and			
	identify any problems with utilization.			

CARE SETTING(S) Care Setting Justification Pediatric EHI may be shared through the patient portal for viewing, downloads and encrypted or unencrypted transmissions. this metric will provide information on the types of transmissions deployed, viewing EHI, downloads and unencrypted vs. encrypted transmission and the frequency of usages. Orthopedic EHI may be shared through the Patient Portal for viewing, downloads and encrypted or unencrypted transmissions. This metric will provide information on the types of transmissions deployed, viewing EHI, downloads and unencrypted vs, encrypted transmission, and the frequency of usages. Neurosurgery EHI may be shared through the Patient Portal for viewing, downloads and encrypted or unencrypted transmissions. This metric will provide information on the types of transmissions deployed, viewing EHI, downloads and unencrypted vs, encrypted transmission, and the frequency of usages. Ophthalmology EHI may be shared through the Patient Portal for viewing, downloads and encrypted or unencrypted transmissions. This metric will provide information on the types of transmissions deployed, viewing EHI, downloads and unencrypted vs, encrypted transmission, and the frequency of usages. EHI may be shared through the Patient Portal for viewing, downloads and encrypted Hospital or unencrypted transmissions. This metric will provide information on the types of transmissions deployed, viewing EHI, downloads and unencrypted vs, encrypted transmission, and the frequency of usages.



EXPECTED OUTCOMES				
Measurement/Metric	Description			
170.315(e)(1) View, Download and Transmit to Third-Party	By capturing and analyzing utilization rates, volume counts and error rates monthly during this testing period, it is expected that the resultant data will verify that patients (or their authorized representatives) are able to successfully view, download, and share EHI on a consistent basis throughout the testing period, using the production implementation, across each of the sample care settings included in the test.			

2024 Results

	PracticeCount	LocationCount	CcdaViewsByPatientLastMonth	${\sf CcdaDownloadsByPatientLastMonth}$	${\sf CcdaTransmitsByPatientLastMonth}$	CcdaTransmitsByStaffLastMonth	CcdaViewsByPatientTotal	Ccda Downloads By Patient Total	CcdaTransmitsByPatientTotal	CcdaTransmitsByStaffTotal
Hospital Care Setting	10	40	28	1	0	0	99,149	8,460	634	20
Neurosurgeon Care Setting	1	14	377	40	22	0	41,323	4,111	1,728	0
Pediatric Care Setting	1	6	4	0	0	0	236	14	9	0
Orthopedic Care Setting	1	18	2,343	491	27	0	67,286	23,714	1,253	0
Opthamology Care Setting	1	0	2	1	0	0	15,640	904	56	0

MEASURES USED IN OVERALL APPROACHES

REAL WORLD TESTING RESULTS FOR 170.315(g)(7), (g)(9) and (g)(10)

Measurement / Metric	Description
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Interoperability and Data Exchanges	These multiple measures will be evaluated together to validate interoperability and
	the API capabilities to exchange patient data from our product to a third-party
	application.

ASSOCIATED CERTIFICATION CRITERIA

Measurement/Metric	Associate Certification Criteria
170.315(g)(7)	Application Access – Patient Selection
170.315 (g)(9)	Application Access - All Data Request (Cures Update) replaced (g)(8) which has been retired
170.315(g)(10)	Standardized API for Patient and Population Services (Cures Update)

JUSTIFICATION FOR SELECTED MEASUREMENT / METRIC

Measurement/Metric	Justification
170.315(g)(7)	There are no clients actively using this certified functionality in the real world; testing
170.315 (g)(9)	will be performed against the production installation of the Open-API and synthetic
170.315(g)(10)	data from a production installation of the Patient Portal. The same Production API
	installation services all Care settings equally, then the artificial testing will be assumed
	to be applicable to all Care settings who may elect to utilize the capability in the future.

TESTING METHODOLOGY

Measurement/Metric	Testing Methodology
170.315(g)(7) 170.315 (g)(9) 170.315(g)(10)	In the absence of any real-world usage of the production implementation of the Open-API, manual testing will be performed quarterly against the production installation of the Open-API, to verify the successful authentication, request, and delivery of EHI for both a single encounter and for a date range of encounters, using a representative test harness (Simulated Third-Party application) and artificial test data. Success or failure of each API method called in the sequence of credentialing will be recorded, and manual validation will be performed to verify that the expected single encounter and the expected date range of encounters are returned as asked. Results and any errors will be recorded quarterly for each API method and summarized at the end of the test period.

CARE SETTING(S)



Care Setting	Justification
Pediatric	There are no clients actively using this certified functionality in the real world; testing
	will be performed against the production installation of the Open-API and synthetic
	data from a production installation of the Patient Portal. The same Production API
	installation services all Care settings equally, then the artificial testing will be assumed
	to apply to all Care settings who may elect to utilize the capability in the future.

EXPECTED OUTCOMES

Measurement / Metric	Expected Outcomes
170.315(g)(7) 170.315 (g)(9) 170.315(g)(10)	By manually stressing each method of the production implementation of the Open-API on a quarterly basis, it is expected that the testing will validate and verify that the Open-API and each of its applicable methods are available and functioning as expected throughout the test period, for any real Third-Party application vendors who may elect to utilize it in real world application of data interoperability as required by 170.315(g)(7), 170.315(g)(9) and 170.315(g)(10), at any time during the test period.
170.315(g)(7) 170.315 (g)(9) 170.315(g)(10)	2024 Results (g)(7) – 6 requests, 4 successes (g)(9) – 36 requests, 26 successes (g)(10) – 80 requests, 80 successes

SCHEDULED KEY MILESTONES

Kev Milestones	Care Settings	Due Dates



Submitted Real- World Test Plan to ACB	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	October 23, 2024
Real- World Test Results Begins	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	December 1, 2024
Submit (b)(11) Decision Support Interventions Attestation	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	December 1, 2024
Determine testing partners	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	December 15, 2024
Publish customers service base URL information (FHIR Endpoints) according to specific adopted standards.	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	December 31, 2024*
Quarterly Attestation	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	January Q1 2025
Data collection will begin with each partner	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	January 3, 2025
End of Real-World Testing period /final collection	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	Quarterly 2025
Analysis and report creation	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	January 11, 2025
Submit Real-World Testing Results Report to ACB	pediatric, orthopedic, neurosurgery, ophthalmology, and hospital care	February 1, 2025
Submit Q1 Attestation	ACB	April 1, 2025
Submit Semi-Annual Attestation	CHLP	April 15, 2025
Submit Q2 Attestation	ACB	July 1, 2025
Submit Q3 Attestations	ACB	October 7, 2025
Submit Semi-Annual Attestation	CHLP	October 15, 2025
Submit Real-World Test Plans Report to ACB	ACB	November 1, 2025, for 2026
USCDI v3 Implementation	ACB	January 1, 2026

ATTESTATION



The Real-World Testing Results for 2024 is finalized and includes all essential components, with measures that fully address the Cures certification criteria across the required care settings. All information in this plan is current and aligns with the health IT developer's requirements for our Real-World Testing Results for 2024.

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