



2024 Real World Test Results

iMedicWare R8-V3

Lora Woltz

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Revision History

The Revision History table below provides a record of all revisions made to this document throughout its life cycle. Updates are tracked by date the revisions were made, the version number, a brief description of the changes made and reason, as well as the name of the reviser and the approver.

Effective Date	Version #	Change Description/ Reason	Created/Revised by	Reviewed by	Approved by
01/08/2025	2024	2024 Report	Lora Woltz	Lora Woltz	Lora Woltz

Product Information

Product Information	
Plan Report ID Number:	2024RWTP_IMWvR8V3
Developer Name	iMedicWare, LLC
Product Name	iMedicWare
Version Number(s)	R8-V3
Certified Health IT	ONC Certification Criteria for Health IT
Product List CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Developer Real World Testing Page URL	https://sightview.com/about-sightview/onc-certification/

Introduction

This report describes the steps and results of Real World Testing for the following Sightview Software, LLC CEHRT software platform for calendar year 2024

Platform	Version	Criterion to be Tested
iMedicWare	R8-V3	(b)(1), (b)(2), (b)(3), (c)(1), (e)(1), (g)(7), (g)(9)

Note: 170.315(b)(11) Electronic Health Information Export was certified 12/20/2023 and therefore was not included in the 2024 test plan and was not subject to testing during the 2024 calendar year.

Standards Updates and USCDI

Both required and voluntary standards updates must be addressed in the Real-World Testing plan, including SVAP (Standards Version Advancement Process) and USCDI (United States Core Data for Interoperability). Real World Testing plans

must include all certified health IT updated to newer versions of standards prior to August 31 of the year in which the updates were made.

[] Yes, I have products certified with voluntary SVAP or USCDI standards.

[x] No, none of my products include these voluntary standards.

Standard (and version)	All Standards included in C-CDA R2.1
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(b)(1) Transitions of Care
USCDI-updated certification criteria (and USCDI version)	Version 1

Standard (and version)	All Standards included in C-CDA R2.1
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(b)(2) Clinical Information Reconciliation and Incorporation

USCDI-updated certification criteria (and USCDI version)	Version 1
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Standard (and version)	SCRIPT 2017071
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(b)(3) ePrescribing
USCDI-updated certification criteria (and USCDI version)	N/A

Standard (and version)	All Standards included in C-CDA R2.1
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(b)(11) EHI Export
USCDI-updated certification criteria (and USCDI version)	Version 1

Standard (and version)	QRDA I STU 5.3 with errata
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219

Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(c)(1) Clinical Quality Measurement - Record and Export
USCDI-updated certification criteria (and USCDI version)	None

Standard (and version)	All Standards included in C-CDA R2.1
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(e)(1) View Download and Transmit
USCDI-updated certification criteria (and USCDI version)	None

Standard (and version)	All Standards included in C-CDA R2.1
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable

Conformance measure	170.315(g)(7) Application Access – Patient Selection
USCDI-updated certification criteria (and USCDI version)	None

Standard (and version)	All Standards included in C-CDA R2.1
Updated certification criteria and associated product	None
Health IT Module CHPL ID	15.04.04.2998.iMed.R8.02.1.221219
Health IT Module Product ID	Not Applicable
Method used for standard update	Minimum Standard Code Sets
Date of ONC-ACB notification	Not Applicable
Date of customer notification (SVAP only)	Not Applicable
Conformance measure	170.315(g)(9) Application Access – All Data Request
USCDI-updated certification criteria (and USCDI version)	None

Care Settings

All Sightview Software, LLC CEHRT platforms are considered to be an **Ambulatory Specialty Care Practice** type care setting for use in ophthalmology practices.

Changes to Plan

This section documents any deviations from the previously submitted 2024 real world test plan on file.

- No Deviations from the submitted 2024 test plan are noted

Summary of Test Method

This section describes the test methodology used to complete real world testing. Test documentation types are anticipated to include:

- Test Plans Document
- Test Case Documents
- Test Results Matrix Template
- Non-conformity logs

Every requirement must have a minimum of one test case. It is likely that each requirement will have more than one test case in order to fully evaluate possible workflow variations and outcomes. Actual results will be listed as Pass or Fail. A description of events will be included when a test case fails. Use of synthetic data will be declared, where appropriate. To retain the privacy of the participating clients, an alpha-numeric identifier will be used to reference any test result information that may be specific to a client.

iMedicWare R8-V3 was tested using client production environments for both cloud and local servers.

Test Results

170.315(b)(1) Transitions of Care

Health IT Module:	iMedicWare	Version:	R8 V3
Regulation Text Citation	170.315(b)(1)	Criterion Description:	Transitions of Care
Date Range From:	12/01/2024	Date Range To:	12/31/2024
Test Case Description	Send: Software can export a CCDA to the intended recipient. Receive: Software can display the received transition of care in human readable format		
Relied Upon Software?	Yes - Updox	Relied Upon Software Role	HISP reports

Data Analysis – Number of times a user successfully sent a CCDA electronically to the intended recipient.						
Test source	Client	Test Source Description	Total # of Sent Attempted	Total # of Sent Successful	Criteria	Synthetic Data Used?
HISP Report	58 Practices	Review of HISP generated Report for Sent CCDA	364	344	(i) (A)	No

		across 58 clients				
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Data Analysis – Number of CCDA received by the EHR / Received CCDA						
Test source	Client	Test Source Description	Total # of Received Attempted	Total # of Received Successful	Criteria	Synthetic Data Used?
HISP Report	58 Practices	Review of HISP generated Report for Received CCDA across 58 Practices	1983	1906	(i)(B)	No

Data Analysis – 2024 Performance Year PI Dash Examples - variable date ranges						
Test source	Client	Test Source Description	Total # of Attempted Referral Sent	Total # of Successful Electronic Referrals	Criteria	Synthetic Data Used?
PI dash PI_HIE_1	Practice 1 Group	MIPS PI Dashboard numerator / Denominator	10	3	(i)(A)	No
PI dash PI_HIE_1	Practice 2 Group	MIPS PI Dashboard numerator / Denominator	0	0	(i)(A)	No
PI dash PI_HIE_1	Practice 3 Group	MIPS PI Dashboard numerator / Denominator	4	0	(i)(A)	No
PI dash PI_HIE_1	Practice 9 Group	MIPS PI Dashboard numerator / Denominator	3	0	(i)(A)	No

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result
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				(Pass / Fail)
non found				

Notes:

Message failures were reviewed with the following causes documented:

Not Dispatched

Timeout

Failed

A success rate of 94.5% for sent DM and 96.11% for received DM indicates that the functionality is working as expected across all iMedicWare clients using Direct Messaging in December 2024.

HIE_1 anti-numerator counts attributed to workflow errors, DM address issues.

Tested by:	HISP/LW	Approved By	LW	Date:	01/13/2025
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170.315(b)(2) Clinical Information Reconciliation and Incorporation

Health IT Module:	iMedicWare	Version:	R8-V3
Regulation Text Citation	170.315(b)(2)	Criterion Description:	Clinical Information Reconciliation and Incorporation
Date Range From:	10/01/2024	Date Range To:	12/31/2024
Test Case Description	Software can properly match a received Transition of Care/ Referral Summary to the correct patient; User can review, validate and incorporate a patient's medication list, allergies and problem list; software can create a C-CDA document that includes the reconciled and incorporated data		
Relied Upon Software?	Yes – Updox	Relied Upon Software Role	HISP Report

Data Analysis – Number of times a user reconciled the medication list from the electronically received and incorporated CCDA.

It is permissible to create synthetic patient data to emulate the action of Clinical Information Incorporation and Reconciliation if there is not enough naturally occurring referral activity for the chosen RWT practice.

Test Source	Client	Source Description	Total # of received referrals	Successful Incorporation	Successful Reconciliation	Pass/Fail	Syn Da Use
DM Dashboard / PI Dashboard	Practice 1	Review of users DM dash for Incoming CCDA to reconcile	2	1 attempted natural	1	Pass	No
DM Dashboard / PI S	Practice 2	Review of users DM dash for Incoming CCDA to reconcile	88	0 attempted natural, 3 attempted under test	3 under test	Pass	No
DM Dashboard / PI Dashboard	Practice 3	Review of users DM dash for Incoming CCDA to reconcile	21	0 attempted natural, 3 attempted under test	3 under test	Pass	No
DM Dashboard / PI Dashboard	Practice 9	Review of users DM dash for Incoming CCDA to reconcile	17	1 attempted natural	1	Pass	No

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result (Pass / Fail)
None Found				

Notes:

07/01/2024 - 12/31/2024 date range tested for Practice 2 due to number of providers

Practice 1: Vetted late in year for DM. Plans to increase DM usage in 2025

Practice 2: Has not widely adopted functionality.

Practice 3: Has not widely adopted functionality.

Tested by:	HISP/LW	Approved By	LW	Date:	01/13/2025
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170.315(b)(3) ePrescribing

Health IT Module:	myCare iMedicWare	Version:	R8 V3
Regulation Text Citation	170.315(b)(3)	Criterion Description:	ePrescribing
Date Range From:	10/01/2024	Date Range To:	12/31/2024
Test Case Description	Software can send specified prescription transactions electronically.		
Relied Upon Software	Change Healthcare or Dr First	Relied Upon Software Role	170.315(b)(3) e Prescribing

Data Analysis - Number of times the created a medication prescription electronically to the pharmacy						
Test source	Client	Test Source Description	Total # of Prescriptions completed	Criteria	ERX Vendor	Synthetic Data Used?
Rcopia Report	Practice 1/Provider 1	MIPS N/D report	195/196	B3	Dr First	No
Rcopia Report	Practice 1/Provider 2	MIPS N/D report	20/21	B3	Dr First	No
Rcopia Report	Practice 1/Provider 3	MIPS N/D report	176/184	B3	Dr First	No
Rcopia Report	Practice 1/Provider 4	MIPS N/D report	56/56	B3	Dr First	No
Rcopia Report	Practice 2/Provider 1	MIPS N/D report	82/82	B3	Dr First	No
Rcopia Report	Practice 2/ Provider 1	MIPS N/D report	256/257	B3	Dr First	No
Rcopia Report	Practice 2/Provider 2	MIPS N/D report	24/26	B3	Dr First	No

Rcopia Report	Practice 3/ Provider 1	MIPS N/D report	236/249	B3	Dr First	No
Audit Report	practice 3 / 3 providers	Medications Audit Report	401/451	B3	Change Healthcare	No

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result (Pass / Fail)
None Found				

Notes:

Change Healthcare usage among practices is reduced from previous years as practices are migrating to Dr First for eprescribing. Numerator / denominator difference indicates OTC orders that were documented but not sent to a pharmacy (example: Artificial Tears)

Tested by:	LW	Approved By	LW	Date:	01/31/2024
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170.315(c)(1) Clinical Quality Measures - Record and Export

Health IT Module:	myCare iMedicWare	Version:	R8-V3
Regulation Text Citation	170.315(c)(1)	Criterion Description:	Clinical Quality Measure – Record and Export
Date Range From:	10/31/2024	Date Range To:	12/31/2024
Test Case Description	capture specific certified clinical quality measures for QRDA I file creation and export to a designated destination file or URL		
Relied Upon Software?	No	Relied Upon Software Role	N/A

Data Analysis - EHR is able to create QRDA I report for Clinical Quality Measures

Test Source	Client	Source Description	Number of QRDA files generated during test range	Ability to export to chosen URL	Pass/Fail	Synthetic Data Used?
QRDA1 Report Q4	Practice 1/ Provider 1	eCQM eligible population	477 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 1/ Provider 2	eCQM eligible population	264 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 1 / Provider 3	eCQM eligible population	1605 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 1 / Provider 4	eCQM eligible population	1909 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 2 / Provider 1	eCQM eligible population	550 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 2 / Provider 2	eCQM eligible population	28 across 9 measures	Yes	Pass	No
QRDA1 Report Q4	Practice 1 / Provider 1	eCQM eligible population	2224 across 9 measures	Yes	Pass	No

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result (Pass / Fail)
None Found				

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Notes:

Notes: Report generated during RWT

Practice 1: Does not use functionality in natural workflow

Practice 2: Does not use functionality in natural workflow

Practice 3: Does not use functionality in natural workflow

Tested by:	IMW	Approved By	LWoltz	Date:	01/31/2025
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170.315(e)(1) View, Download and Transmit

Health IT Module:	myCare iMedicWare	Version:	R8-V2
Regulation Text Citation	170.315(e)(1)	Criterion Description:	View, Download and Transmit
Date Range From: Unless otherwise indicated	10/01/2024	Date Range To:	12/31/2024
Test Case Description	CCDA is available in human readable format on the portal		
Relied Upon Software	Updax	Relied Upon Software Role	170.315(e)(1) View Download Transmit

Test source	Test Clinic	Description of Analysis	Total # of CCDA Sent and Received by Portal	Pass / Fail	Synthetic Data Used?
PI Dash PI_PEA_1 Q3 and Q4	Practice 1 / multiple Providers	PI Dash for PI_PEA_1	14935/14968 CCDA Sent Via EHR and Received by Portal in readable format	Pass	NO
PI Dash PI_PEA_1 Q3 and Q4	Practice 2 / Multiple Providers	PI Dash for PI_PEA_1	14529/14606 CCDA Sent Via EHR and Received by Portal in readable format	Pass	NO
PI Dash PI_PEA_1	Practice 3/ Multiple Providers	PI Dash for PI_PEA_1	5248/5271 CCDA Sent Via EHR and	Pass	NO

			Received by Portal in readable format		
PI Dash PI_PEA_1 Dec 2024	Practice 9 / multiple	PI Dash for PI_PEA_1	5439/5561 CCDA Sent Via EHR and Received by Portal in readable format	Pass	NO

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result (Pass / Fail)
None Found				

Notes:

Patient access audit logs are specific to the patient. Logs were sampled for 15 randomly selected patients. Of the patients selected, all were provided credentials but none had logged into the portal.

Tested by:	Product Compliance Officer	Approved By	Lwoltz	Date:	01/31/2024
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Application Access 170.315 (g)(7,9)

Health IT Module:	iMedicWare	Version:	R8-V3
Regulation Text Citation	170.315(g)(7),(9)	Criterion Description:	Application Access - g7, g9
Date Range From:	10/01/2024	Date Range To:	12/31/2024
Test Case Description	Performance will pertain to token creation and the ability of the API to pull category data for the chosen date or date range.		
Relied Upon Software	No	Relied Upon Software Role	N/A

Data Analysis – CEHRT is able to create an active token for a unique patient and then access the PHI data for all categories through the API.

The API feature is not normally used in day-to-day practice. It is permissible to perform the workflow to initiate the API call for the purposes of demonstrating functionality for the use of RWT.

Test source	Client	Test Source Description	Total # of API token calls (natural)	Able to perform under test	Pass / Fail	Synthetic Data Used?
Review of System	58 Practices reviewed for API call history	Demonstrate ability to perform API token creation and All Data Request	0	See non-conformity report	Fail	Yes

Non-Conformities

Non-Conformity Description	Expected Results	Mitigation Strategy	Retest Date	Retest Result (Pass / Fail)
CCDA Validation Error via ETT	Able to perform API call and CCDA creation - CCDA validation should pass thru Edge Test Tool	Resolve ETT Errors, and update the UAT environment. Update to occur in IMW version 4.0 release	02/10/2025	Pending

Notes:

0/58 Tested Practices performed API - Application Access All Data Request calls in naturally occurring workflows.

Tested by:	Product Manager	Approved By	LWOLTZ	Date:	01/31/2024
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