

# Sevocity, Real World Testing Results

SEV-RWTR-24.01

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## General Information

**Plan Report ID Number:** SEV-RWTR-24.01

**Developer Name:** Conceptual MindWorks, Inc.

Product Name	Certified Health IT Product List (CHPL) ID	Real World Testing URLs
Sevocity, Version 13.0	15.04.04.2324.Sevo.13.01.1.221230	<a href="https://www.sevocity.com/resources/onc-certifications-rwt/">https://www.sevocity.com/resources/onc-certifications-rwt/</a>

## Changes to Original Plan

Summary of Change	Reason	Impact
<p>The RWT Plan includes <b>170.315(b)(6) “Data Export”</b> in the scope of Applicable Real World Testing Certification Criteria.</p> <p>170.315(b)(6) is intentionally excluded from this RWT Results report.</p>	<p>This was an anticipated outcome as forecasted in the RWT Plan. Relevant excerpt below:</p> <p><i>170.315(b)(6) “Data export” is included in the criteria above as it is a certified and available service at the time of this writing, however it will be discontinued prior to 2024.</i></p>	None.

## Withdrawn Products

None.

## Summary of Testing Methods and Key Findings

### Executive Summary

The 2024 results of Real-World Testing (RWT) are consistent with the methodology and observations in the prior RWT period. Each RWT iteration continues to provide valuable insight into which specific services our customers find beneficial, as well as the specific services lagging in customer adoption.

Analyzing the objective metrics gathered during RWT also demonstrates the service offerings are highly reliable and readily available. Further, the metrics discussed in this report will also demonstrate the importance of the alerts and safeguards that are a vital part of the process for those inevitable instances when an anomalous issue may occur.

In summary, with a primary user base consisting of small to mid-sized clinics, adoption of the individual criterion varies widely. There remains opportunity to promote under-utilized services. These RWT

results, once again demonstrate that the offered services are readily fulfilling their objectives when customers engage.

### **Composition of 2024 Participants**

Sevocity's customer base consists of ambulatory clinics, with small to mid-sized practices composing the majority of constituents. These smaller practices tend to adapt more gradually to new services than larger practices with more available resources. Gradual adaptation also tends to occur on a service-by-service basis, rather than integrating all available services simultaneously.

A process improvement through prior iterations of RWT was a refinement to the selection of participants that was first implemented in the 2023 RWT process. Once again for the 2024 iteration, the participants were selected in consideration of each specific criterion, rather than a universal set of participants applied against all measures. For each Use Case in this report, each participant is noted with a unique identifier.

The selection of participants did not consider whether a participant's activity indicated any errors. The selection criterion was simply to pre-select up to five participants with previous activity applicable per criterion Use Case. If a participant's activity included errors, they will be documented and assessed in this report.

There are Use Cases where less than five participants had any utilization of the service; in these cases, only the limited qualifying participants were included. In other Use Cases, the Product Developer is documented in lieu of any eligible customer participants.

### **Participant Engagement and Metric Gathering**

Another RWT process improvement that is continued this year is to rely on programmatic metric gathering built into the application workflow. This significantly reduces the burden of user participation, as participants contribute meaningful metrics simply by performing their routine activity. Participants were in no way incentivized to engage in any activity simply for the sake of exercising a Use Case. It was our goal to observe only true real-world utilization of the pertinent services.

The programmatic tracking included indicators of attempts - both successful and unsuccessful. This methodology accounts for most of the metrics documented in this report, unless otherwise specified.

The collected metrics were useful as indicators of: (1) customer adoption and (2) service reliability.

### **Participant Reported Errors**

In instances where programmatically gathered metrics indicate unsuccessful attempts, an additional source of insight is an internal helpdesk system where customer-reported issues are documented contemporaneously. If an issue was reported by a participant, this qualitative data source is a valuable supplement to the quantitative metric data.

### **Customer Rate of Adoption**

RWT metrics, and general usage data, are assessed year-round to identify trends. Customer outreach initiatives are discussed for interoperability measures identified as lagging in adoption. Efforts thus far have produced modest statistical improvement - largely in line with the prior year - but optimism

remains for long term success as new approaches are considered. The Sevocity team remains committed to promoting interoperability features as opportunities for customers to benefit their workflow.

### Standards Updates (including SVAP and USCDI)

The product evaluated in the 2024 Real-World Testing period did **not** include voluntary standards updates.

### Care Settings

The four clinical settings of care represented in the 2024 Real-World Testing results are: Family Practice, Specialist/Surgical, Geriatrics, and Obstetrics & Gynecology. The table below indicates which care settings were considered per measure.

	Family Practice	Specialist/Surgical	Geriatrics	OB/Gyn
<b>170.315(b)(1) Transitions of Care</b>	X	X	X	X
<b>170.315(b)(2) Clinical information reconciliation and incorporation</b>	X	X	X	X
<b>170.315(b)(10) EHI Export</b>	X	X	X	X
<b>170.315(c)(1) Clinical quality measures (CQMs) — record and export</b>	X	X	X	X
<b>170.315(c)(2) Clinical quality measures (CQMs) — import and calculate</b>				
<b>170.315(c)(3) Clinical quality measures (CQMs) — report</b>				
<b>170.315(e)(1) View, download, and transmit to 3rd party (View, download, transmit and view logs in the portal)</b>	X	X	X	X
<b>170.315(f)(1) Transmission to immunization registries</b>	X	X	X	No RWT
<b>170.315(f)(2) Transmission to public health agencies – syndromic surveillance</b>	X	No RWT	No RWT	No RWT

	Family Practice	Specialist/Surgical	Geriatrics	OB/Gyn
<b>170.315(g)(7) Application access – patient selection (API)</b>	X	No RWT	No RWT	No RWT
<b>170.315(g)(9) Application access – all data request (API)</b>				
<b>170.315(g)(10) Standardized API for patient and population services – Query patient data</b>	X	X	X	X

### Applicable Real World Testing Certification Criteria and Relied Upon Software

Certification Criteria	Relied Upon Software, if applicable
<b>170.315(b)(1) Transitions of Care</b>	DrFirst – Rcopia, SES Direct
<b>170.315(b)(2) Clinical information reconciliation and incorporation</b>	DrFirst - Rcopia
<b>170.315(b)(10) EHI Export</b>	
<b>170.315(c)(1) Clinical quality measures (CQMs) – record and export</b>	
<b>170.315(c)(2) Clinical quality measures (CQMs) – import and calculate</b>	
<b>170.315(c)(3) Clinical quality measures (CQMs) – report</b>	
<b>170.315(e)(1) View, download, and transmit to 3rd party (View, download, transmit and view logs in the portal)</b>	SES Direct, SMTP2Go, DrFirst - Rcopia
<b>170.315(f)(1) Transmission to immunization registries</b>	
<b>170.315(f)(2) Transmission to public health agencies – syndromic surveillance</b>	
<b>170.315(g)(7) Application access – patient selection (API)</b>	Google Authenticator
<b>170.315(g)(9) Application access – all data request (API)</b>	
<b>170.315(g)(10) Standardized API for patient and population services – Query patient data</b>	

## Metrics and Outcomes

### 170.315(b)(1) Transitions of care

#### Use Case 1: Create Patient Data (CCD format)

##### Use Case 1 - Create Patient Data (CCD format): Collected Results

	Participants	Number of times a CCD was exported	Number of errors logged during a CCD export	Error-free Rate of CCD Exports
1	SEVGHC	4	0	100%
2	SEVNWC	4	0	100%
3	SEVWH	3	0	100%
4	SEVHRCI	2	0	100%
5	SEVPCP	1	0	100%
<b>TOTAL</b>		<b>14</b>	<b>0</b>	<b>100%</b>

##### Use Case 1 - Create Patient Data (CCD format): Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.

This year's results are statistically lower than the year prior, however the previous iteration was influenced by two single clinics heavily utilizing this feature for a period. The more general and representative observation is that this measure remains widely underutilized by customers.

When utilized, the results confirm that this service fulfills its purpose, with no exceptions observed or reported.

#### Use Case 2: Send Patient Data via Direct

##### Use Case 2 - Send Patient Data via Direct: Collected Results

	Participants	Number of Clinical Summaries Transmitted	Number of Undeliverable Summary Transmissions	Number of Referrals Transmitted	Number of Undeliverable Referrals	Percentage of Deliverable Transmissions
1	SEVWFPUCC	0	N/A	75	0	100%
2	SEVHTALUG	1	0	0	0	100%
3						
4						
5						
<b>TOTAL</b>		<b>1</b>	<b>0</b>	<b>75</b>	<b>0</b>	<b>100%</b>

##### Use Case 2 - Send Patient Data via Direct: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.



Except for a single clinic, software adoption for this specific Use Case is non-existent. This is not due to a lack of availability, as a Direct Messaging account and service is integrated into the Sevocity EHR. This is not due to a lack of reliability, as indicated by the flawless success rate of each interaction.

Reviewing contemporaneous usage beyond this specific criterion indicates customers utilized Direct Messaging primarily to receive messages, but for little sending activity of any nature.

The gathered metrics – along with routine automated testing - confirm that this service fulfills its purpose when utilized, with no exceptions observed.

### 170.315(b)(2) Clinical Information Reconciliation and Incorporation

#### Use Case 1: Reconcile and incorporate patient data

##### Use Case 1 – Reconcile and incorporate patient data: Collected Results

	<b>Participants</b>	<b>Number of CCDA Reconciliations Performed</b>	<b>Number of Errors Logged</b>	<b>Percentage of Error-free Reconciliations</b>
1	SEVZLALA	5	0	100%
2	SEVZPMJRJ	1	0	100%
3				
4				
5				
<b>TOTAL</b>		<b>6</b>	<b>0</b>	<b>100%</b>

##### Use Case 1 - Reconcile and incorporate patient data: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.

The results reveal extremely low customer adoption of this service. The results of this evaluation period are consistent with the results of the prior year. This measure needs closer analysis to determine if the low adoption rate is due to a lack of perceived applicability, awareness, or training.

Albeit limited data, the results confirm that this service fulfills its purpose when utilized, with no exceptions. The lack of adoption is not due to service availability or performance.

### 170.315(b)(10) EHI Export

#### Use Case 1: Export single patient EHI

Use Case 1 – Export single patient EHI: Collected Results

	Participants	Number Attempted	Number of Attempts without Logged Completions	Percentage of Error-free Exports
1	SEVMP	30	2	93.3%
2	SEVPCP	22	1	95.5%
3	VARN SMP	18	0	100%
4	SEVCHC	10	0	100%
5	SEVSM	6	0	100%
<b>TOTAL</b>		<b>86</b>	<b>3</b>	<b>96.5%</b>

Use Case 1 – Export single patient EHI: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.

There is no prior period of recorded activity for this Use Case, as this is its initial inclusion in RWT. That being the case, the first-year results indicate an awareness and usage of this feature. Subsequent tracking and observation will further define customer adoption.

The results also indicate a highly reliable service. The several attempts recorded without a corresponding completion event logged appear to be outliers. Further review did not indicate corresponding system errors, nor were there any outreach attempts by the customer to report any issues. Since the customer did not request assistance or intervention, it is probable that they successfully obtained the data either on a reattempt or that the “completion” event was simply interrupted by an intermittent issue before capture.

Use Case 2 – Export patient population EHI: Collected Results

	Participants	Number Requested	Number of Re-runs required	Percentage of Error-free Initial Requests
1	Multiple	15	1	93.3%
2				
3				
4				
5				
<b>TOTAL</b>		<b>15</b>	<b>1</b>	<b>93.3%</b>

Use Case 2 – Export patient population EHI: Summary

The metrics documented for this use case were gathered by reviewing activity logs over a period covering December 2024.

Each of the 15 customers participating in this Use Case are internally known and fully documented. To make these metrics more meaningful, all EHI patient population exports that occurred during the observation period are presented in the aggregate metrics – since it is typical that each customer would only have 1 qualifying request per period, the Use Case didn’t benefit from considering only the most active 5 participants. Given this broader view, the results indicate real-world usage of this Use Case.

The results also indicate a highly reliable system. There was one re-run required to complete one of the EHI patient population exports. This was proactively identified through built-in quality control of the EHI patient population process and resolved prior to the customer receiving the completed EHI patient population export. The exact cause of this re-run was to account for several patient records that did not process during the initial attempt but were successfully re-run without issue. The EHI patient population export is a lengthy system intensive process. It is designed to be fault tolerant and capable of resuming with minimal impact while generating alerts when appropriate. The activity during this reporting period is a real-world example of the process in action.

### 170.315(c)(1)(2)(3) Clinical quality measures (CQMs)

#### Use Case 1: eCQM Execution

##### Use Case 1 - eCQM Execution: Collected Results

	<b>Participants</b>	<b>Number of eCQM executions attempted</b>	<b>Number of Unsuccessful Attempts Logged</b>	<b>Percentage of successful eCQM executions logged</b>
1	SEVGTCPHC	201	0	100%
2	SEVZPMCFHC	33	0	100%
3	VARNSCLHPCC	28	0	100%
4	SEVZPMNRHP	20	0	100%
5	VARNSLEWA	20	0	100%
<b>TOTAL</b>		<b>302</b>	<b>0</b>	<b>100%</b>

##### Use Case 1 - eCQM Execution: Summary

The metrics documented for this Use Case were programmatically tracked over a period of 30 days starting in February 2024. If an eCQM report was initiated multiple times, each distinct attempt was counted in the metrics.

The results indicate customer interest and utilization of the eCQM offerings maintains in the Sevocity EHR. This continues a trend from the prior RWT period.

This iteration’s 100% success rate delivers on a commitment to high quality. It is also a notable improvement over the prior RWT period which was weighed by an anomaly affecting a single high-usage participant.

Use Case 2: QRDA File Exports

Use Case 2 - QRDA File Exports: Collected Results

	Participants	Number of QRDA Exports Attempted	Number of QRDA Exports Successfully Completed	Percentage of Successful QRDA exports
1	SEVZPMWIEP	7	7	100%
2	SEVCPIN	6	6	100%
3	VARNSLEWA	4	4	100%
4	VARNSBEGS	3	3	100%
5	SEVZPMCFHC	3	3	100%
<b>TOTAL</b>		<b>23</b>	<b>23</b>	<b>100%</b>

Use Case 2 - QRDA File Exports: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days starting in February 2024.

The results indicate that this Use Case was utilized during the RWT observation period. For context, the Sevocity EHR produces certified QRDA data. The submission process of the generated QRDA data is not integrated into the application and cannot be programmatically tracked. It is the participants responsibility to submit the QRDA for its intended purpose

The results confirm that this service reliably fulfills its purpose when utilized, with no exceptions.

Use Case 3: Import and Calculate

Use Case 3 - Import and Calculate: Collected Results

	Participants	Number of Imports Executed	Number of Errors Encountered	Success Rate of Imports Executed
1	Product Developer	23	0	100%

Use Case 3 - Import and Calculate: Summary

This Use Case required the following software external to the Sevocity EHR application:

- QRDA Import Utility
- Cypress Test Tool

This Use Case was not applicable to any existing customer workflows. Therefore, the Product Developer executed this Use Case directly. The exercise was performed with the production application using synthetic data in a production-like environment. All attempts completed without issue.

## 170.315(e)(1) View, download, and transmit to 3<sup>rd</sup> party

### Use Case 1: View, Download, and Transmit

#### Use Case 1 - View, Download, and Transmit: Collected Results

	<b>Participants</b>	<b>Number of Times Patients Viewed, Downloaded, and/or Transmitted Their Health Data</b>	<b>Number of Attempts w/o Logged Completions</b>	<b>Percentage of Error-free Health Data Requests</b>	
1	SEVNORTHOAKS	286	0	100%	
2	SEVGEORGIAWOMENS	268	157	63.1%	
3	SEVLFC	251	1	99.6%	
4	SEVGOLDTRI	170	11	93.9%	
5	SEVCUMC2	159	9	94.6%	
<b>TOTAL</b>		<b>1,134</b>	<b>178</b>	<b>86.4%</b>	

#### Use Case 1 - Request, View, Download, and Transmit: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.

The results indicate patients are taking advantage of the offered online services to obtain their health records via the Sevocity Patient Portal.

The results indicate the service is reliable, but one of the participants warrants closer consideration as their logged successful completions fall below expectations. There were no systemic issues during the observation period that would account for the lack of logged completions primarily affecting one site. Excluding that one site, the other participants record a collective 97.6% success rate with the most active site overall recording a perfect success rate. A closer inspection of the anomalous data reveals that 8 users accounted for the activity recorded as unsuccessful; of the 8 users, half of them also have recorded success within the observation period. The participant did not report any known problems to the Support team regarding patient portal activity during this period. Currently, the underlying cause of the localized exceptions is undetermined. However, these results will serve as the impetus for further refinement of our collection methods to collect more detailed exception information going forward.

## 170.315(f)(1) Transmission to immunization registries

### Use Case 1: Enter and send immunization data to registries

Use Case 1 - Enter and send immunization data to registries: Collected Results

	Participants	Number of Immunization Registry Messages Transmitted	Number of Immunization Registry Messages Rejected	Success Rate of Messages Delivered to Registries
1	VARNSJAIT	374	0	100%
2	SEVWH	366	73	80.1%
3	SEVPA	354	0	100%
4	VARNSBP	341	0	100%
5	SEVTORRES	338	0	100%
<b>TOTAL</b>		<b>1,773</b>	<b>73</b>	<b>95.9%</b>

Use Case 1 - Enter and send immunization data to registries: Summary

The metrics documented for this use case were gathered from system logs covering November 2024. Not all immunization registries return a message upon rejection. Therefore, participants considered for this Use Case utilize registries that do programmatically respond when/if a message was rejected.

The results indicate customers are actively sharing data with immunization registries.

The results indicate the service is highly reliable, but one of the participants did encounter rejected messages during the observation period. Though a 100% initial success rate is the goal, this scenario demonstrates the real-world value of capturing the acceptance status from the registry. In this specific instance the underlying issue was identified (the registry updated their requirements for a specific demographic field) and addressed. The affected data was then re-transmitted for a successful delivery; the above “rejected” metrics do not imply a final status. The timely rejected notifications facilitated corrective actions.

Use Case 2: History/Forecast

Use Case 2 - History/Forecast: Collected Results

	Participants	Number of Hx/Forecast Attempts	Number of Errors logged	Success Rate of Hx/Forecast Display
1	SEVZPMAPRC	17	0	100%
2				
3				
4				
5				
<b>TOTAL</b>		<b>17</b>	<b>0</b>	<b>100%</b>

Use Case 2 - History/Forecast: Summary

The metrics documented for this use case were programmatically tracked over a period of 30 days covering April 2024.

## Sevocity, Real World Testing Results

Like last year, the results indicate near zero customer adoption of this available service.

The limited data indicates that the service is reliable and readily available when utilized.

The results invite closer analysis to determine if the low adoption rate is due to a lack of perceived applicability, awareness, interest, or training.

### 170.315(f)(2) Transmission to public health agencies – syndromic surveillance

#### Use Case 1: Syndromic Surveillance Registration and Discharge Data

##### Use Case 1 - Syndromic Surveillance Registration and Discharge Data: Collected Results

	<b>Participants</b>	<b>Number of Syndromic Surveillance Registration Exports</b>	<b>Number of Syndromic Surveillance Discharge Exports</b>	<b>Number of Errors Logged During the Exports</b>	<b>Percentage of Error-free Syndromic Surveillance Exports</b>
1	Product Developer	5	5	0	100%

##### Use Case 1 - Syndromic Surveillance Registration and Discharge Data: Summary

This Use Case was not applicable to any existing customer workflows. Therefore, the Product Developer executed this Use Case directly. The exercise was performed with the production application using synthetic data in a production environment.

The available service performed as expected with no issues encountered.

### 170.315(g)(7)(9)(Cures Update) Application access

#### Use Case 1: Query Patient Data

##### Use Case 1 - Query Patient Data: Collected Results

	<b>Participants</b>	<b>Number of Data Requests Invoked</b>	<b>Number of Errors Encountered</b>	<b>Success Rate of Data Requests Executions</b>
1	Product Developer	9	0	100%

##### Use Case 1 - Query Patient Data: Summary

This Use Case required the following software external to the Sevocity EHR application:

- API Test Harness

This Use Case was not applicable to any existing customer workflows. Therefore, the Product Developer executed this Use Case directly. The exercise was performed using synthetic data in a production-like environment.

The available service performed as expected with no issues encountered.

## 170.315(g)(10)(Cures Update) Standardized API for patient and population services

### Use Case 1: Query Patient Data

#### Use Case 1 - Query Patient Data: Collected Results

	Participants	Number of Data Requests Invoked	Number of Errors Encountered	Success Rate of Data Requests Executions
1	SEVDROU	4,696	0	100%
2	SEVDRHW	2,251	4	99.8%
3				
4				
5				
<b>TOTAL</b>		<b>6,947</b>	<b>4</b>	<b>99.9%</b>

#### Use Case 1 - Query Patient Data: Summary

The metrics documented for this use case were collected from system logs covering a period of 30 days in November 2024. The participants represent actual customers utilizing the standardized API service for specialty purposes. Each call to the API requesting a specific FHIR resource was counted as a distinct data request.

This is one of the newest certified service offerings and is currently utilized by only a small number of customers. However, the results indicate the select participants utilize the service at a high frequency. Further, there are additional customers/vendors that have expressed some level of interest that may lead to fruition in future reporting periods.

The results confirm that the service is readily available and highly reliable.

### Key Milestones

Key Milestone	Projected Timeframe	Achieved
Submit 2024 RWT Plan to ONC-ACB for completeness review	NLT November 1, 2024	Yes
ONC-ACB publishes 2024 RWT Plan to CHPL	NLT December 15, 2024	Yes
Revision of scripts/tools to gather 2024 metrics	2024, Q1	Yes



Key Milestone	Projected Timeframe	Achieved
<b>Identification of the RWT environment (production when practical, or production-like settings otherwise) for 2024 RWT evaluation</b>	2024, Q1	Yes
<b>2024 RWT production usage period</b>	2024, Q2  Except for 170.315(c)(1)(2), 170.315(c)(Cures Update): 2024, Q1	All metrics were gathered, but the schedule varied for some criterion.  All metrics gathered via programmatic methods were collected during the projected timeframe.  Use Cases that either (1) received no customer usage or (2) late customer usage or (3) required manual log reviews were delayed until Q4 to allow as much time as possible for potential customer adoption.
<b>Gather and analyze 2024 RWT production usage data</b>	2024, Q3 – Q4	Yes
<b>Submit 2024 RWT Results Report to ONC-ACB for review</b>	2025, Q1	Yes
<b>ONC-ACB publishes 2024 RWT Results in CHPL</b>	NLT March 15, 2025	On Track