REAL WORLD TESTING RESULTS REPORT

GENERAL INFORMATION

Plan Report ID Number:	
Developer Name:	ezCaretech Co., Ltd.
Product Name(s):	BESTCare
Version Number(s):	2.0G & 2.0B
Certified Health IT Product List (CHPL) Product Number(s)	15.04.04.2610.BEST.02.00.1.200604 15.04.04.2610.BEST.02.00.1.180423
Developer Real World Testing Plan Page URL:	https://global.ezcaretech.com/onc/onc.html
Developer Real World Testing Results Report Page URL:	https://global.ezcaretech.com/onc/onc.html

SUMMARY OF TESTING METHODS AND KEY FINDINGS

The real-world testing has demonstrated that BESTCare 2.0G solution comply with the following criteria for which they are currently certified:

- 170.315(f)(2): Transmission to Public Health Agencies – Syndromic Surveillance
- 170.315(f)(4): Transmission to Cancer Registries

BESTCare 2.0B solution has demonstrated compliance with additional criteria through real-world testing, as follows:

- 170.315(b)(1): Transition of Care
- 170.315(c)(1): CQMs – Record and Export
- 170.315(c)(2): CQMs – Import and Calculate
- 170.315(c)(3): CQMs – Report
- 170.315(f)(1): Transmission to Immunization Registries
- 170.315(f)(2): Transmission to Public Health Agencies – Syndromic Surveillance
- 170.315(f)(3): Transmission to Public Health Agencies – Reportable Laboratory Tests and Value/Results
- 170.315(f)(4): Transmission to Cancer Registries
- 170.315(f)(5): Transmission to Public Health Agencies – Electronic Case Reporting
- 170.315(f)(6): Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting
- 170.315(f)(7): Transmission to Public Health Agencies – Health Care Surveys
- 170.315(g)(7): Application Access – Patient Selection
- 170.315(g)(8): Application Access – Data Category Request
- 170.315(g)(9): Application Access – All Data Request
- 170.315(g)(10): Standardized API for Patient and Population Services
- 170.315(h)(1): Direct Project

The testing demonstrated the following:

1. Regarding 170.315(b)(1) – Transition of Care:
    a. Providers utilizing the Transition of Care features in the production environment successfully generated CCDA documents.

2. Regarding 170.315(c)(1), (c)(2), (c)(3) – CQMs (Clinical Quality Measures):
   a. Providers using CQM features in the production environment were able to generate QRDA1 and/or QRDA3 files for CMS measures.
   b. Providers successfully uploaded QRDA1 files and downloaded QRDA1 and/or QRDA3 files.
3. Regarding 170.315(f)(1) – Transmission to Immunization Registries:
   a. Providers were able to generate the information required for transmission to IIS/Immunization registries.
4. Regarding 170.315(f)(2) – Syndromic Surveillance:
   a. Providers successfully generated the information required for transmission to Syndromic Surveillance registries.
5. Regarding 170.315(f)(3) – Reportable Laboratory Tests and Results:
   a. Providers were able to generate electronic reportable messages required for transmission to a public health registry.
6. Regarding 170.315(f)(4) – Cancer Registries:
   a. Providers successfully generated the information required for transmission to Cancer registries.
7. Regarding 170.315(f)(5) – Electronic Case Reporting:
   a. Providers generated electronic case reports required for transmission to a public health agency.
8. Regarding 170.315(f)(6) – Antimicrobial Use and Resistance Reporting:
   a. Providers were able to generate the required antimicrobial use and resistance reports for transmission to a public health agency.
9. Regarding 170.315(f)(7) – Health Care Surveys:
   a. Providers successfully generated the required health care survey data for transmission to a public health agency.
10. Regarding 170.315(g)(7), (g)(8), (g)(9), (g)(10) – API Access and Data Interoperability:
    a. Providers were able to register third-party applications with the EHR for API access.
    b. Providers successfully queried patients, data categories, or performed bulk exports to the EHR module using third-party APIs.
11. Regarding 170.315(h)(1) – Direct Project:
    a. While this criterion was part of the plan, it was not tested as it is not currently certified.

We did not observe any non-conformities or challenges during the testing.

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

Both required and voluntary standards updates must be addressed in the Real World Testing plan. 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.

Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).

[ ] Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.

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

Standard (and version)	

Updated certification criteria and associated product	
CHPL Product Number	
Conformance measure	

Care Setting(s)

The expectation is that a developer's Real World Testing is conducted within each type of clinical setting in which their certified health IT is marketed. Health IT developers are not required to test their certified health IT in every setting in which it is marketed for use.

List each care setting that was tested.

BESTCare modules is supporting ambulatory outpatient clinic settings and inpatient hospitalized settings.

Metrics and Outcomes

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(b)(1)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B's Transitions of Care (ToC) functionality was evaluated by monitoring the transmission and receipt of Continuity of Care Documents (CCDs) via the ToC Viewer application. Throughout the evaluation period: • All transmitted and received messages were successfully processed by the ToC Viewer. • No transmission or receipt failures were reported. • 50 out of 50 trials conducted using the 2.0B version of the product resulted in the accurate transmission and display of patient information, including problems, medications, and allergies. Based on these results, the Transitions of Care capability is considered to have achieved a 100% success rate.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Success or failure rates	170.315(b)(1)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to create and transmit Consolidated Clinical Document Architecture (CCDA) documents as part of the Transitions of Care functionality. Key findings: • The number of CCDAs created matched the number of CCDAs transmitted, confirming no loss or failure in document generation or delivery processes. • 50 out of 50 trials were successfully completed without errors during the evaluation period. Based on these results, the system demonstrated 100% success in creating and sending CCDAs.	None
Data driven from network server and test tools	170.315(c)(1) 170.315(c)(2) 170.315(c)(3)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to accurately record and populate Clinical Quality Measures (CQMs) in client reports. Key findings: • A review of client-generated reports confirmed that CQM data was accurately populated during the evaluation period. • 14 out of 14 trials resulted in the correct recording and population of the targeted CQM measures without errors. Based on these results, the system demonstrated 100% success in recording and exporting CQM data.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Success or failure rates	170.315(c)(1) 170.315(c)(2) 170.315(c)(3)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to generate and export Quality Reporting Document Architecture (QRDA) files as part of Clinical Quality Measure (CQM) functionality. Key findings: • The system successfully generated and exported QRDA files based on information recorded. • All QRDA files were extracted without error during the evaluation period. • 14 out of 14 trials completed successfully with no errors detected. Based on these results, the system demonstrated 100% success in generating and exporting QRDA files.	None
Data driven from network server and test tools	170.315(f)(1)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to transmit immunization data to state and local Immunization Information Systems (IIS). Key findings: • Connectivity with the IIS was maintained successfully, with no blocked or failed messages reported during the evaluation period. • 20 out of 20 transmission trials were completed without errors. Based on these results, the system demonstrated 100% success in transmitting immunization data to registries.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Success or failure rates	170.315(f)(1)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to generate and store HL7 messages as part of immunization data workflows. Key findings: • HL7 messages were successfully generated and stored within the interface engine. • 20 out of 20 HL7 messages were extracted and verified without errors during the evaluation period. Based on these results, the system demonstrated 100% success in generating, storing, and managing HL7 messages.	None
Data driven from network server and test tools	170.315(f)(2)	None	Both the version 2.0G and 2.0B's ability to transmit syndromic surveillance data to Public Health Agencies (PHAs) was evaluated during two testing periods: • July 1, 2024 to July 31, 2024 for version 2.0G • December 1, 2024 to December 31, 2024 for version 2.0B Key findings: • Connectivity to syndromic surveillance registries was successfully established and maintained for both product versions. • No blocked, failed, or delayed messages were observed during either evaluation period. • 11 out of 11 transmission trials for both 2.0G and 2.0B completed successfully without errors. Based on these results, the system demonstrated 100% success in transmitting syndromic surveillance data.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Success or failure rates	170.315(f)(2)	None	The version 2.0G and 2.0B's ability to generate and transmit HL7 messages as part of syndromic surveillance data workflows was evaluated during the following periods: • July 1, 2024 to July 31, 2024 for version 2.0G • December 1, 2024 to December 31, 2024 for version 2.0B Key findings: • HL7 messages were successfully generated from clinical data captured within the system. • 11 out of 11 HL7 messages were extracted from the interface engine with no generation or transport issues, confirming full message creation and handling functionality. • During validation using a test tool, 2 messages triggered errors due to a discrepancy in coding standards: both versions 2.0G and 2.0B correctly used ICD-10, while the tool was configured to assess messages using ICD-9. This mismatch was due to the tool's configuration and did not reflect any failure in the certified product's performance, data accuracy, or compliance. Based on clinical and technical assessment, the system fulfilled the requirements of this certification criterion. This testing cycle is therefore considered a 100% success.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(f)(3)	None	During the testing period from December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to transmit data to public health registries. Key findings: • Connectivity to the designated public health registry was successfully maintained. • No messages were blocked, delayed, or failed during the testing period. • 27 out of 27 transmission trials completed without error. Based on these results, the system demonstrated 100% success in transmitting data to public health registries.	None
Success or failure rates	170.315(f)(3)	None	The version 2.0B was evaluated for its ability to generate and store electronic reportable laboratory results messages during the testing period of December 1, 2024 to December 31, 2024. Key findings: • Laboratory result messages were successfully generated based on clinical activity within the EMR system. • All messages were stored correctly within the interface engine. • 27 out of 27 messages were successfully extracted and verified without error. Based on these results, the system demonstrated 100% success in transmitting data to public health registries.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(f)(4)	None	The version 2.0G was evaluated for its ability to generate CDA documents for cancer registry reporting during the testing period of July 1, 2024 to July 31, 2024. Key findings: • CDA documents were successfully generated using the cancer registry functionality as part of routine EMR operations. • 5 out of 5 CDA documents were generated and verified without errors. • No failures were observed during the testing period. Based on these results, the system demonstrated 100% success in supporting cancer registry reporting.	None
Success or failure rates	170.315(f)(4)	None	During the testing period from July 1, 2024 to July 31, 2024, the version 2.0G was further evaluated for its ability to generate and transmit CDA documents to cancer registries. Key findings: • The number of CDAs created (5) matched exactly the number of CDAs transmitted (5) during the evaluation period. • No failures or discrepancies were observed between document creation and transmission activities. Based on these results, the system demonstrated 100% success in generating and transmitting cancer registry CDAs.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(f)(5)	None	The version **2.0B** was evaluated for its ability to transmit electronic case reports to public health agencies during the testing period of December 1, 2024 to December 31, 2024. Key findings: • Connectivity with public health agencies for electronic case reporting was successfully maintained. • No messages were blocked, delayed, or failed during transmission. • 3 out of 3 electronic case reporting trials were completed successfully without errors. Based on these results, the system demonstrated 100% success in supporting electronic case reporting.	None
Success or failure rates	170.315(f)(5)	None	During the testing period of December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to generate and store electronic case report documents within the EMR and interface engine. Key findings: • eCR documents were successfully generated based on clinical activity within the EMR system. • All documents were correctly stored within the engine and were accessible for transmission. • 3 out of 3 eCR documents were generated and extracted without error. Based on these results, the system demonstrated 100% success in the generation and handling of electronic case report documents.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(f)(6)	None	The version 2.0B was evaluated for its ability to transmit AUR, ARO, AUP reports to public health agencies during the testing period of December 1, 2024 to December 31, 2024. Key findings: • Connectivity with public health agencies for reporting was successfully established and maintained. • No blocked, delayed, or failed messages were observed during the evaluation period. • 18 out of 18 transmission trials (6 AUR, 6 ARO, 6 AUP) were completed successfully. Based on these results, the system demonstrated 100% success in supporting antimicrobial use and resistance reporting.	None
Success or failure rates	170.315(f)(6)	None	During the testing period of December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to generate and store antimicrobial use and resistance reports within the EMR system and interface engine. Key findings: • AUR, ARO, AUP reports were successfully generated based on clinical data recorded within the EMR system. • All reports were stored appropriately within the interface engine for further transmission to public health agencies. • 18 out of 18 reports (6 AUR, 6 ARO, 6 AUP) were successfully generated and extracted without errors. Based on these results, the system demonstrated 100% success in generating and managing antimicrobial use and resistance reporting.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(f)(7)	None	The version 2.0B was evaluated for its ability to transmit healthcare survey data to public health agencies during the testing period of December 1, 2024 to December 31, 2024. Key findings: • Connectivity with public health agencies for healthcare survey transmission was successfully established and maintained. • No blocked, delayed, or failed messages occurred during the evaluation period. • 4 out of 4 transmission trials were completed successfully. Based on these results, the system demonstrated 100% success in transmitting healthcare survey data.	None
Success or failure rates	170.315(f)(7)	None	During the testing period of December 1, 2024 to December 31, 2024, the version 2.0B was evaluated for its ability to generate and store healthcare survey data within the EMR system and interface engine. Key findings: • Healthcare survey data was successfully generated based on clinical information recorded in the EMR. • All survey records were correctly stored within the interface engine. • 4 out of 4 healthcare survey documents were successfully generated and extracted without errors. Based on these results, the system demonstrated 100% success in generating and managing healthcare survey data.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Data driven from network server and test tools	170.315(g)(7), 170.315(g)(9), 170.315(g)(10)	None	The version 2.0B was evaluated for its API connectivity and ability to support standardized patient and population services during the testing period of December 1, 2024 to December 31, 2024. Key findings: • None of the active clients during the evaluation period utilized third-party applications connecting to the certified APIs in production environments; therefore, no live client data could be collected for this criterion. • To validate functionality, queries were successfully executed against the API endpoints using Postman for a test patient. • The test confirmed that third-party applications can connect to the certified APIs and successfully query clinical resources (e.g., patient demographics, allergies, medications). Based on these results, the system demonstrated operational compliance with the criteria under real-world testing conditions, with no blocked access observed.	None

Measurement /Metric	Associated Criterion(a)	Relied Upon Software	Outcomes	Challenges Encountered
Success or failure rates	170.315(g)(7), 170.315(g)(9), 170.315(g)(10)	None	The version 2.0B was evaluated for its API connectivity and support for standardized access to patient and population services during the testing period of December 1, 2024 to December 31, 2024. Key findings: • None of the clients in the production environment during the evaluation period utilized third-party applications to connect to the certified APIs; therefore, real-world client data collection was not applicable for this measure. • To validate API functionality, successful queries were executed using Postman against a test patient dataset. • The testing confirmed that third-party applications can connect to the certified APIs and retrieve clinical resources such as patient demographics, allergies, and medications as specified by ONC requirements. Based on these results, the system demonstrated 100% success in supporting third-party API access, fully compliant with certification criteria.	None

KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Apply based on the implementation guides	BESTCare2.0G Ambulatory & Inpatient Settings	~5/31/2024
Prepare real world testing	BESTCare2.0G Ambulatory & Inpatient Settings	~6/30/2024
Proceed real world testing	BESTCare2.0G Ambulatory & Inpatient Settings	~7/31/2024
Apply based on the implementation guides	BESTCare2.0B Ambulatory & Inpatient Settings	~10/31/2024

Key Milestone	Care Setting	Date/Timeframe
Prepare real world testing	BESTCare2.0B Ambulatory & Inpatient Settings	~11/30/2024
Proceed real world testing	BESTCare2.0B Ambulatory & Inpatient Settings	~12/31/2024