Real World Testing Results

CareCloud PRIME

By

CareCloud

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This is the real world test report for CY 2025 for the CareCloud PRIME, certified EHR solution. It provides the real world test measurements and metrics that meet the intent and objectives of ONC's Condition of Certification and Maintenance of Certification requirement for real world testing (§ 170.405 Real world testing) to evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting which it is targeted for use.

General Information

Report Report ID Number: [For ONC-Authorized Certification Body use only]

Developer Name: CareCloud, Inc.

Product Name(s):   CareCloud PRIME Version Number(s): 2.0

Certified Health IT: 170.315(b)(1-3, 10); (c)(1-3); (e)(1); (f)(1-3); (g)(7, 9-10)

Product List (CHPL) ID(s):   15.04.04.2790.Talk.01.01.1.181217,
                                                       15.04.04.2790.Talk.01.01.1.181217

Developer Real World Testing Page URL:
https://www.carecloud.com/cc-prime/

Standards Updates (Including Standards Version Advancement Process (SVAP) and United States Core Data for Interoperability	
Standard (and version)	NA
Updated certification criteria and associated product	NA
Health IT Module CHPL ID	NA
Method used for standard update	NA
Date of ONC-ACB notification	NA
Date of customer notification (SVAP only)	NA
Conformance measure	NA
USCDI-updated certification criteria (and USCDI version)	NA

Developer Attestation

The Real World Testing report must include the following attestation signed by the health IT developer authorized representative.

Note: The report must be approved by a health IT developer authorized representative capable of binding the health IT developer for execution of the report and include the representative's contact information

This Real World Testing report is complete with all required elements, including measures that address all certification criteria and care settings. All information in this report is up to date and fully addresses the health IT developer's Real World Testing requirements.

Authorized Representative Name: Tahir Khan

Authorized Representative Email: tahirkhan2@carecloud.com

Authorized Representative Phone: (732) 336-1245

Authorized Representative Signature:

1/23/2026

Date   *Signature*

Justification for Real World Testing Approach

We use the following testing methodologies/approaches.

Reporting/Logging

This methodology uses the logging or reporting capabilities of the EHR to examine functionality performed in the system. A typical example of this is the measure reporting done for the automate measure calculation required in 315(g)(2), but it can also be aspects of the audit log or customized reports from the EHR. This methodology often provides historical measurement reports which can be accessed at different times of the year and evaluate interoperability of EHR functionality, and it can serve as a benchmark for evaluating real world testing over multiple time intervals.

Summative Testing

Summative assessments has used to measure which certified actions were performed at the conclusion of a given time period. These has conducted by running reports and examining audit logs from within the certified health IT module to help demonstrate the frequency of actions within the given time frame, and where possible, whether those actions were successful or unsuccessful. High success rates should be an indicator of a successful implementation of a given certified capability in a real-world setting.

§ 170.315(b)(3) Electronic prescribing

Measurement Description

This measure is tracking and counting how many NewRx electronic prescriptions were created and successfully sent from the EHR Module to a pharmacy destination over the course of a given interval.

Testing Methodology: Reporting/Logging

Relied Upon Software: Surescripts eRx

Testing Result:

Practices Queried: 3

Associated Certification Criteria

Metric

90-days period: (Oct 1, 2025 through Dec 30, 2025)
    1) Number of prescriptions created : 8896
    2) Number of prescriptions changed: 0
    3) Number of prescriptions canceled :14
    4) Number of prescriptions renewed :2745

Justification for Selected Measurement/Metric

Justification
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that the EHR can create the NewRx message and send over a production Surescripts network to a pharmacy. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

Relied Upon Software

SureScripts eRx

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health

	Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
  ☐ Technical Standards
  ☐ Vocabulary codes sets
 	
 ☒ Exchanging EHI
 ☐ EHI received by and used

We have test a minimum of two (2) client practice(s) for three months' period. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs. The measurement has produce numeric results. We have utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. We have use the measure count to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315(b)(1) Transition of Care Functionality

Measurement Description

This measure is tracking and counting how many C-CDAs(USCDI v1) are created and successfully sent from the EHR to a 3rd party during a transition of care event using Direct messaging during a transition of care event over a given interval.

Testing Methodology: Reporting/Logging

Testing Result:
Practices Queried: 3

Associated Certification Criteria

Metric

90-days period: (Oct 1, 2025 through Dec 30, 2025)
    1. Number of CCDAs (USCDI v1) created : 1602
    2. Number of CCDAs (USCDI v1) sent via edge protocols :405

Justification for Selected Measurement/Metric

Justification
This criterion requires the ability of a certified Health IT module to take a USCDI V1 received via an outside system and match it to the correct patient; reconcile the medication, allergy, and problem lists; and then incorporate the lists into the patient record. The expectation is each of these steps is done electronically within the certified Health IT module. While this certified capability is available to our users, most providers in the real world typically prefer to perform these steps manually and elect to save any outside received USCDI v1 as attachments to the patient record. Therefore, we intend to record the frequency that providers are electronically reconciling and incorporating USCDI v1 that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there has low utilization by providers with a high success rate.

Relied Upon Software

EMR Direct (Version 2017)

Care Setting(S)

Care Setting	Justification

Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology

	• Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
  ☐ Technical Standards
  ☐ Vocabulary codes sets
 	
  ☒ Exchanging EHI
  ☐ EHI received by and used

Our expectation is that USCDI v1 are created and exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. The measurement has produce numeric results over a given interval. We have utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315(b)(2)-Clinical information reconciliation and incorporation

Measurement Description

This module enables to reconcile and incorporate information from USCDI V1 formatted.

Testing Result:

Practices Queried: 3

Testing Methodology: Reporting/Logging

Associated Certification Criteria

Metric

90-days period: (Oct 1, 2025 through Dec 30, 2025)
  1. Number of times a user reconciled medication list data from a received USCDI V1: 165
  2. Number of times a user reconciled allergies and intolerance list data from a received USCDI V1 :83
  3. Number of times a user reconciled problem list data from a received USCDI V1:0

Justification for Selected Measurement/Metric

Justification
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that the EHR can receive the C-CDA patient summary record, including record required clinical data elements. In receiving the C- CDA patient summary record, the EHR has demonstrate ability to confirm successful interoperability of an exchanged patient record with a 3rd party, including support for Direct Edge protocol in connecting to a HISP. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

Care Setting(S)

Care Setting	Justification

Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties:
	  • Podiatry
	  • Gynecology
	  • Behavioral health

	Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
    ☐ Technical Standards
    ☐ Vocabulary codes sets
 	
  ☒ Exchanging EHI
  ☐ EHI received by and used

We intend to record the frequency that providers are electronically reconciling and incorporating USCDI v1 that were received from outside providers to demonstrate the certified capability is available and effective, regardless of the frequency it is used. The measurement has produce numeric results over a given interval. We have utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§170.315(b)(10) Electronic Health Information (EHI) Export

Measurement Description

This is a survey measure to determine how often you are using the Electronic Health Information (EHI) Export.

Testing Result:

90-days period: (Oct 1, 2025 through Dec 30, 2025)

Practices Queried: 3
Number of CCDAs (USCDI v1) export: 1602

Testing Methodology: Survey/Self-Test

Associated Certification Criteria

EHI export formatted as a Continuity of Care (USCDI) document template in accordance with the standard specified in § 170.205(a)(4) HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes, DSTU Release 2.1.

Justification for Selected Measurement/Metric

Justification

A survey or self-testing can often provide more information on the impact and value of an interoperability element than a standard software test evaluation. Batch patient export can be used for various use cases, including support for loading a HIE or registry as well as quality and population health metrics.

The user has asked the survey question of how often you perform the batch patient export during the average month and given the survey answer choices below:

- Regularly
- Never
- Do not know

The answer has provide insight into how clinicians view both the use and value of this interoperability feature. For example, response may show that additional training is needed to better utilize the feature or that it is not currently utilized as currently designed. It has provide a benchmark for evaluate future surveys as well as to share insight into any new development for improvements or enhancements of the health IT system.

Care Setting(S)

Care Setting	Justification
Ambulatory Care(We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain ambulatory specialties: • Podiatry • Rheumatology • Allergy/Immunology • Pain Management Providers has use our software exclusively in the outpatient/ ambulatory setting

Expected Outcomes

Expected outcomes
Compliant with Certification Criteria ☐ Technical Standards ☐ Vocabulary Code Sets ☒ Exchanging EHI ☐ EHI received by and used
The user has asked the survey question of how often they perform the batch patient export during the average month and given the survey answer choices below: • Regularly • Never • Do not know

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025: During the 2nd quarter of CY2025, the real world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
3Q-2025: Compile results and prepare report for submission	Ambulatory	3Q-2025
4Q-2025: Submit Result to Real World Test Report according to ONC and ONC-ACB requirements	Ambulatory	4Q-2025

§ 170.315(b)(7)(8)- Security tags - summary of care – send/received

Measurement Description

This module enable user to securely send / received summary of care.

Testing Methodology: Reporting/Logging

Testing Result:

Practices Queried: 3

Associated Certification Criteria

Metric

90-days period: (Oct 1, 2025 through Dec 30, 2025)
   1.   Number of CCDAs(USCDI v1) created :1107
   2.   Number of CCDAs (USCDI v1) sent via edge protocols : 355
   3.   Number of CCDAs (USCDI v1) received via edge protocols :61

Justification for Selected Measurement/Metric

Justification
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that the EHR can send the patient summary record, including record required clinical data elements securely. In sending patient summary record, the EHR has demonstrate ability to confirm successful interoperability, including support for Direct Edge protocol in connecting to a HISP. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.

Care Setting(S)

Care Setting	Justification

Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Compliant with certification criteria ☐ Technical Standards ☐ Vocabulary codes sets ☒ Exchanging EHI ☐ EHI received by and used
This measure has track number of summary of care files send/receive electronically via HISP. The measurement has produce numeric results over a given interval. We have utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315(b)(9)- Care Plan

Measurement Description

This modules enable user can record, change, access, create, and receive care plan information according to the Care Plan document template in the HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes (US Realm), Draft Standard for Trial Use Release 2.1

Testing Methodology: Reporting/Logging

Testing Result:
Practices Queried: 3

Associated Certification Criteria

Metric
90-days period: (Oct 1, 2025 through Dec 30, 2025) 1. Number of Care Plan(USCDI v1) created :1107 2. Number of Care Plan(USCDI v1)sent : 355

Justification for Selected Measurement/Metric

Justification
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that the EHR can create care plan, including record required clinical data elements and can send securely.

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Compliant with certification criteria ☐ Technical Standards ☐ Vocabulary codes sets

☒ Exchanging EHI	
☐ EHI received by and used	

We intend to demonstrate that EHR can record, change, access, create, and receive care plan information

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315 C (1)(2)(3)(4) Clinical quality measures (CQMs) — record & export, report and Calculate and Repot

Testing Methodology: Reporting

Testing Result:

Practices Queried: 3, Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025)

CQM Measures	Initial Population	Denominator	Numerator	Performance Rate
CMS 2 - Preventive Care and Screening: Screening for Depression and Follow- Up Plan	7385	7385	6015	81%
CMS 69 - Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	9652	9652	6925	71%
CMS 122 - Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	6521	6521	5225	80%
CMS 130 - Colorectal Cancer Screening	1243	1243	501	40%
CMS 138 - Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	8472	8472	7288	86%

Associated Certification Criteria

Metric
This measure is tracking and counting eCQM quality measures reported successfully by the EHR Module to CMS during their submission period for Quality reporting.

This measure provide a count and list of electronic clinical quality measures (eCQMs) which are calculated and submitted to CMS for a given program, like MIPS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize submission to CMS. Because CQM criteria, 315 C (1) - (4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three. We are using the following Quality Measures for RWT.

Justification for Selected Measurement/Metric

Justification
This measure has provide a count and list of electronic clinical quality measures (eCQMs) which are calculated and submitted to CMS for a given program, like MIPS. Clinical quality measures are only used for the respective CMS programs and any production measures should utilize submission to CMS. Because CQM criteria, 315 C (1)-C (4), all work collectively together in the eCQM functionality of the EHR Module, this measurement is used for all three.

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health

	Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Exported CQMs contain data as expected QRDA files are able to be imported and calculations run as expected QRDA I and QRDA III reports are generated correctly

Care Settings and Number of Clients Site to Test

We designed this measure to test general ambulatory sites that we support and target. We have test a minimum of three (3) client practice(s) for three months period. This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

Associated Criteria: 315(e)(1)- Patient Portal Use

Measurement Description

This use case is tracking and counting how patients are given access to their portal account over the course of a given interval.

Relied Upon Software

- EMR Direct (Version 2017)
- Domain Time II (Version 5.2)

Practices Queried: 3
Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025)

Testing Methodology: Reporting

Associated Certification Criteria

Metric
90-days period: 1. Number of views of health information by a patient or authorized representative : 2264 2. Number of downloads of health information by a patient or authorized representative : 1173 3. Number of transmissions of health information by a patient or authorized representative using unencrypted email : 945 4. Number of transmissions of health information by a patient or authorized representative using: 730

Justification for Selected Measurement/Metric

Justification
The measurement has produce numeric results over a given interval. We have utilize various reports and audit logs, including Automated Measure (315.g.2) reports, to determine our measure count. We have track the number of patients who logged into the portal, and contrast that with the patients seen by the respective providers during that same time.

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health

	Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that patients can log into their patient portal to view, download, or transmit their health data. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality.   We have use the measure result to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts.   We designed this measure to test general ambulatory sites that we support and target. We have test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

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

Measurement Description

This measure is tracking and counting how many immunization messages are created and successfully sent from the EHR Module to an IIS/immunization registry over the course of a given interval.

Testing Methodology: Reporting/Logging

Test Results:

Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025)

Practices Queried: 3

The immunization information created is successfully transmitted to the immunization: 1721

Associated Certification Criteria

Metric
CareCloud PRIME has work with 3 customers in 3 different care settings to demonstrate that immunization messages can be sent to a registry and has collect immunization count sent to registry for 90 days period.

Justification for Selected Measurement/Metric

Justification
This measure has provide a numeric value to indicate both the how often this interoperability feature is being used as well as its compliance to the requirement. An increment to this measure indicates that the EHR can create an immunization message, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with an IIS/immunization registry

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
A successful measure increment indicates compliance to the underlying ONC criteria. It has show that patients can log into their patient portal to view, download, or transmit their health data. Successfully completing this measure also implies users have a general understanding of the EHR functional operations for this EHR Module and an overall support for the user experience while not completing this measure may indicate lack of understanding or possibly lack of use or need for this functionality. We have use the measure result to establish a historic baseline of expected interoperability use so it can be used in subsequent real world testing efforts. We designed this measure to test general ambulatory sites that we support and target. We have test a minimum of three (3) client practice(s). This number covers a sufficient percentage of existing practices to provide a viable sample of users of the certified EHRs.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315(f)(2) Transmission to public health agencies –

Syndromic Surveillance

Measurement Description

This measure is tracking and counting how many the source Syndromic surveillance content created and successfully sent from the EHR Module to registry over the course of a given interval.

Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025)
Practices Queried: 3
The total count for capability to sending data to public health agencies is 0

Testing Methodology: Reporting/Logging

Associated Certification Criteria

Metric
CareCloud PRIME has work with 2 customers in 2 different care settings as a representative sample of the care settings where CareCloud PRIME is deployed. CareCloud PRIME has enter 3 test that have an encounter that meets the triggers for Syndromic Surveillance, and has demonstrate that the PHIN messages are sent as expected to the NIST tool when the triggers are met. The NIST HL7v2 Syndromic Surveillance test suite located at https://hl7v2-ss-r2- testing

Justification for Selected Measurement/Metric

Justification
Syndromic Surveillance is optional, some customers may be choosing not to participate in this program. Since it would require significant effort on the part of the customer to set up a connection to a test registry for Syndromic Surveillance testing, in order to reduce the burden on the customer, CareCloud PRIME has set up a test customer instance in their production environment and point it to the NIST Syndromic Surveillance tool to demonstrate that this functionality is available in the Real World in production and available for use as soon as a customer wants to use it

Care Setting(S)

Care Setting	Justification

Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health

	Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Syndromic Surveillance messages are triggered as expected once the patient encounter is finalized

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

§ 170.315(f)(4) Transmission to cancer registry

Measurement Description

This measure is tracking and counting how many cancer case information are created and successfully sent from the EHR Module to registry over the course of a given interval.

Testing Methodology: Reporting/Logging

Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025)
Practices Queried: 3
The total count for capability to sending data to public health agencies is 0

Associated Certification Criteria

Metric
CareCloud PRIME has work with 2 customers in 2 different care settings as a representative sample of the care settings where CareCloud PRIME is deployed. CareCloud PRIME has enter 3 test that have cancer case information for electronic transmission in accordance with the HL7® IG for CDA Release 2: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, DSTU Release 1.1.

Justification for Selected Measurement/Metric

Justification
EHR can create cancer case information for electronic transmission, including ability to record all clinical data elements, and by sending the message, the EHR demonstrates successful interoperability with an cancer registry

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
EHR can create cancer case information for electronic transmission,

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

170.315(f)(6) Transmission to Public health agencies (antimicrobial use and resistance reporting)

Measurement Description

This measure is tracking that antimicrobial use and resistance reporting information is created and successfully sent from the EHR Module to registry over the course of a given interval.

Testing Methodology: Reporting/Logging

Associated Certification Criteria

Metric
CareCloud PRIME has work with 2 customers in 2 different care settings as a representative sample of the care settings where CareCloud PRIME is deployed. CareCloud PRIME has enter 3 test that has demonstrate Antimicrobial use and resistance reporting information in accordance with the following sections of the standard specified at § 170.205®(1) HL7 Implementation Guide for CDA® Release 2.

Justification for Selected Measurement/Metric

Justification
EHR can create Antimicrobial use and resistance reporting information, and by sending the message, the EHR demonstrates successful interoperability.

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
    ☐ Technical Standards
    ☐ Vocabulary codes sets
 	
☒ Exchanging EHI
☐ EHI received by and used

We intend to demonstrate that EHR can record, change, access, create, and receive care report information

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

170.315(f)(7) Transmission to public health agencies — health care surveys

Testing Methodology: Reporting/Logging

Associated Certification Criteria

Metric
CareCloud PRIME has create 3 test patients and their representative data in the production system. CareCloud PRIME has create Health Care survey documents and manually download the Healthcare Survey documents. CareCloud PRIME is has use the NIST healthcare surveys Release 1.2 validator found here: https://cdavalidation.nist.gov/cdavalidation/muNHCS12.html to confirm that the documents conform to expected standards.

Justification for Selected Measurement/Metric

Justification
While this criterion has not been adopted by CareCloud PRIME customers at this time and therefore no usage statistics has available, the functionality is out there and ready to be used! The goal of this test has to demonstrate that the certified capability works in the Real World and is available for use.

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
    ☐ Technical Standards
    ☐ Vocabulary codes sets
 	
☒ Exchanging EHI
☐ EHI received by and used

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025

2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

170.315(g)(7)-(g)(9)-Compliance of API Resource Query Support

Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of support of API query of patient data resources.

Testing Methodology: Reporting/Logging

90-days period: (Oct 1, 2025 through December 31, 2025)

Practices Queried: 3

Metric	Result
Number of API Calls	7
Data Exchanged Successfully	Yes
Errors Encountered	0

Associated Certification Criteria

Metric

CareCloud PRIME has work with 3 customers in 3 different care settings as a representative sample of the care settings where CareCloud PRIME is deployed. CareCloud PRIME has work with these customers to run through the following high-level steps in the provider's deployment of the CareCloud PRIME API. Test patients has used; they has set up in each provider's EHR in advance. CareCloud PRIME has built a test page to use as a mock app interface for a user to replicate requests sent by a patient created in the provider's EHR.

The mock patient has use the test page to query the API for:
- A patient token to be used to query for additional data
- Their test results and prescriptions
- Their USCDI v1 data

We have count the average of the scores of scorecard based on EHR's API resources and queried patient clinical data (USCDI v1) through the API.

Justification for Selected Measurement/Metric

Justification
Because our API is not actively being used by clients, We have conduct real world testing by verifying the functionality that is available in production is still compliant with ONC requirements. This measure has provide assurance of compliance to the EHR Module criteria, specifically ability to connect to the EHR's API resources and query patient clinical data through the API. This measure has also query the patient's USCDI v1 through the API and evaluate it against the https://site.healthit.gov/scorecard/. The USCDI v1 scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 implementation guide and HL7 best practices

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes

Compliant with certification criteria
    ☐ Technical Standards
    ☐ Vocabulary codes sets
 	
☒ Exchanging EHI
☐ EHI received by and used

CareCloud PRIME expected that API functionality would be efficient to support transmission of patient data for a referral workflow. CareCloud PRIME is also expecting patients to use the API more to engage with their care

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

170.315(g)(10) - Compliance of API Resource Query Support

Measurement Description

This measure is tracking compliance of the EHR Module criteria functionality of support of API query of patient data resources.

Testing Methodology: Reporting/Logging

Reporting Interval: 90-days period (Oct 1, 2025 through Dec 30, 2025) Practices Queried: 3

Associated Certification Criteria

Metric

CareCloud PRIME has work with 3 customers in 3 different care settings as a representative sample of the care settings where CareCloud PRIME is deployed. CareCloud PRIME has work with these customers to run through the following high-level steps in the provider's deployment of the CareCloud PRIME API. Test patients has used; they has set up in each provider's EHR in advance. CareCloud PRIME has build a test page to use as a mock app interface for a user to replicate requests sent by a patient that has been created in the Provider's EHR.

The mock patient has use the test page to query the API for:

> - A patient token to be used to query for additional data
> - Their test results and prescriptions
> - Their USCDI v1 data
>
> We have count the average of the scores of USCDI v1 scorecard based on EHR's API resources and queried patient clinical data (USCDI v1) through the API.

Justification for Selected Measurement/Metric

Justification
Because our API is not actively being used by clients, We have conduct real world testing by verifying the functionality that is available in production is still compliant with ONC requirements. This measure has provide assurance of compliance to the EHR Module criteria, specifically ability to connect to the EHR's API resources and query patient clinical data through the API. This measure has also query the patient's C-CDA through the API and evaluate it against the https://site.healthit.gov/scorecard/. The scorecard is designed for production use and measures how artifacts created by health IT compare against the HL7 implementation guide and HL7 best practices

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: • Podiatry • Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Compliant with certification criteria ☐ Technical Standards ☐ Vocabulary codes sets

☒ Exchanging EHI ☐ EHI received by and used	

CareCloud PRIME expected that API functionality would be efficient to support transmission of patient data for a referral workflow.

CareCloud PRIME is also expecting patients to use the API more to engage with their care.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025

170.315(h)(1)—Direct Project

Measurement Description

This measure is tracking and counting how many Direct Messages are created and successfully sent from the EHR to a 3rd party during a transition of care event using Direct messaging during a transition of care event over a given interval.

Testing Methodology: Reporting/Logging

Associated Certification Criteria

Metric
90-days period: (Oct 1, 2025 through December 31, 2025) 　　1) Number of Direct Messages sent :340 　　2) Number of Delivery Notifications received : 220 　　3) Number of Direct Messages received : 535 　　4) Number of Delivery Notifications sent : 540

Justification for Selected Measurement/Metric

Justification
This criterion requires the ability of a certified Health IT module to record the frequency that direct messages are sent and received by providers, along with how often MDNs are sent and received. Since not all systems respond with MDNs, we cannot reliably use that metric to define success. Furthermore, it is not feasible to obtain copies of Direct Messages from "outside" developers or providers who have no incentive to participate in this exercise. Therefore, we intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there has moderate utilization by providers with a high success rate.

Relied Upon Software

EMR Direct (Version 2017)

Care Setting(S)

Care Setting	Justification
Ambulatory Care (We designed this measure to test general ambulatory sites that we support and target.)	Our EMR is designed for general/family practice, as well as certain subspecialties: 　• Podiatry

	• Gynecology • Behavioral health Providers has use our software exclusively in the Outpatient/ambulatory setting.

Expected Outcomes

Expected outcomes
Compliant with certification criteria ☐ Technical Standards ☐ Vocabulary codes sets ☒ Exchanging EHI ☐ EHI received by and used
We intend to demonstrate the required certified capabilities by demonstrating how often Direct Messages are exchanged with other systems to demonstrate the certified capability is available and effective, regardless of the frequency it is used. Our expectation is there has moderate utilization by providers with a high success rate.

Schedule of Key Milestones

Key Milestones	Care Setting	Date/Timeframe
1Q-2025: Begin communication with clients to ask for their support and participation in real-world testing. The goal is to have a sufficient number of clients committed for real world testing by the end of 1Q-2025	Ambulatory	1Q-2025
2Q-2025. During the 2nd quarter of CY 2025, the real-world testing with clients has scheduled and performed.	Ambulatory	2Q-2025
Collect Result	Ambulatory	3Q-2025
Submit Result to Real World Test Report	Ambulatory	December-2025