

Medical Information Technology Real World Testing Results Report - 2025

Overview

MEDITECH, as an Electronic Health Record (EHR) vendor, continues our collaboration with many of our customers in facilitating the ongoing Real World Testing program established by the Assistant Secretary for Technology Policy (ASTP). Under the ASTP Health IT Certification Program, MEDITECH, as a Health IT developer, conducts Real World Testing, ensuring validation of patient access, exchange, and use of Electronic Health Information (EHI). Organizations work with us in validating the Real World Testing condition of certification, furthering MEDITECH's commitment to interoperability, and advancing health data exchange for our entire customer base.

This 2025 Real World Testing Results document outlines a quarterly data review, demonstrating interoperability across all associated care settings, with data aggregated across healthcare organizations and by product line, using existing performance monitoring tools to demonstrate compliance with the conditions of certification. The captured information is metric-based and contains no Protected Health Information (PHI).

The result reporting instances include verification outcomes for application programming interfaces (API)-related criteria based on recommendations from ASTP.

Expanse/6.1 Releases

Care Settings: Acute/Ambulatory/Emergency Department

Products and Certificate Numbers

Product Name(s): Expanse, 6.1

Version Number(s): 2.2, 2.1, 6.15, 6.1

Expanse 2.2

- MEDITECH Expanse Core HCIS v2.2c 15.04.04.2931.MEDI.CO.02.1.220630
- MEDITECH Expanse Emergency Department Management v2.2c 15.04.04.2931.MEDI.ED.03.1.220630
- MEDITECH Expanse Ambulatory v2.2c 15.04.04.2931.2931.02.03.1.220630

Expanse 2.1

- MEDITECH Expanse 2.1 Core HCIS v2.1c 15.04.04.2931.MEDI.CO.01.1.220630
- MEDITECH Expanse 2.1 Emergency Department Management v2.1c 15.04.04.2931.MEDI.16.02.1.220630
- MEDITECH Expanse 2.1 Ambulatory v2.1c 15.04.04.2931.2931.16.03.1.251231
- MEDITECH Expanse 2.1 Ambulatory v2.1c 15.04.04.2931.2931.16.02.1.220630 (withdrawn)

6.1

- MEDITECH 6.1 Electronic Health Record Core HCIS v6.15c 15.04.04.2931.MEDI.HC.01.1.220630
- MEDITECH 6.1 Emergency Department Management v6.15c 15.04.04.2931.MEDI.15.01.1.220630
- MEDITECH 6.1 Ambulatory Electronic Health Record 15.04.04.2931.MEDI.AM.02.1.251231

- MEDITECH 6.1 Ambulatory Electronic Health Record v6.15c 15.04.04.2931.MEDI.AM.01.1.220630 (withdrawn)

6.08 Release

Care Settings: Acute/Emergency Department

Products and Certificate Numbers

Product Name(s): 6.0

Version Number(s): v6.08

6.0

- MEDITECH 6.0 Electronic Health Record Core HCIS v6.08c 15.04.04.2931.MEDI.EH.01.1.220901
- MEDITECH 6.0 Emergency Department Management v6.08c 15.04.04.2931.MEDI.E6.01.1.220901

Client/Server and MAGIC Releases

Care Settings: Acute/Emergency Department

Products and Certificate Numbers

Product Name(s): Client/Server, MAGIC

Version Number(s): v5.67

Client/Server and MAGIC

- MEDITECH Client/Server Electronic Health Record Core HCIS v5.67c 15.04.04.2931.MEDI.MC.01.1.220915
- MEDITECH Client/Server Emergency Department v5.67c 15.04.04.2931.MEDI.CS.01.1.220916
- MEDITECH Client/Server Medical and Practice Management (MPM) Electronic Health v5.67c 15.04.04.2931.MEDI.PM.01.1.220915 (Withdrawn)
- MEDITECH MAGIC Electronic Health Record Core HCIS v5.67c 15.04.04.2931.MEDI.MM.01.1.220915
- MEDITECH MAGIC Emergency Department Management v5.67c: 15.04.04.2931.MEDI.EM.01.1.220915

MAGIC HCA Release

Care Setting: Acute/Emergency Department

Products and Certificate Numbers

MAGIC HCA

- MEDITECH MAGIC HCA Electronic Health Record Core HCIS (without PatientKeeper) v5.67c 15.04.04.2931.MEDI.56.02.1.221111

Care Settings

Real World Testing is demonstrated following typical physician workflow — providing care in Acute, Ambulatory, or Emergency Department care settings. Scenarios for metric capture incorporated certification criteria for testing purposes within the Care Coordination, Clinical Quality Measures, Patient Engagement, Public Health, and Health IT Design and Performance categories. Conversely, the 2025 Real World Testing result report includes outcomes for the API-related criteria within the Health IT Design category.

Changes to Original Plan

There are no modifications in testing methodologies from the original Real World Testing plan(s). Based on recommendations from ASTP, the result reporting instances include verification outcomes for application programming interfaces (API)-related criteria.

Test Method: Expanse, 6.08, Client/Server, MAGIC

Data has been aggregated from a number of healthcare organizations by product line, utilizing existing performance monitoring tools to demonstrate compliance with the conditions of certification. Instances have been tested for interoperability, universally of each care setting within the Certified Health IT Product List (CHPL) listings, for those criteria included within the Conditions and Maintenance of Certification: Real World Testing (170.405). The information captured is metric-based and contains no Protected Health Information (PHI) data. The following testing methods were utilized to demonstrate real-world interoperability:

- Quarterly execution of Application Programming Interface (API) conformance via Management Information System (MIS) logs for each release — conformance for the following categories:
 - Patient Selection
 - All Data
 - # Allergy Type
 - # Care Plan Type
 - # Condition Type
 - # Device Type
 - # Diagnostic Type
 - # Documentation Type
 - # Goal Type
 - # Immunization Type
 - # Medication Type
 - # Procedure Type
 - # Observation Type
 - API All Data Request
 - API Patient Selection
 - API Patient and Population
 - Patient and Population

Test Method: MAGIC HCA

An authorized user acting as the Health Care Organization's System Administrator registered the API User client application with the MEDITECH API platform to demonstrate the facilitation of Application Access requests for all Application Access requests. This test methodology tests the conformance of the implementation. Visual inspection of successful test data was tracked and analyzed.

Challenges included customer participation in setting up authorized users, generating synthetic patient data, and application review to validate all related criteria in each participating customer's production environment.

Measures: Scenarios and Testing Elements: Application Access

The Real World Testing scenario below demonstrates that MEDITECH's Health IT module conforms to the following certification criteria: §170.315(g)(7) Application Access - Patient Selection, §170.315(g)(9) Application Access - All Data Request, and §170.315(g)(10) Application Access - Standardized API for Patient and Population Services.

The chart below outlines the measures that have been identified to best demonstrate conformance to multiple certification criteria to validate Application Programming Interface (API) interoperability-specific application requests and responses.

Health IT Design and Performance: Application Access	Method
§170.315(g)(7) Application Access - Patient Selection	(g)(7)(i) The health IT can receive a request with sufficient information to uniquely identify a patient and return an ID or other token that can be used by an application to subsequently execute requests for that patient’s data.
§170.315(g)(9) Application Access - All Data Request	(g)(9)(i)(A) The API must be able to respond to requests for patient data (using an ID or other token) for all of the data categories specified in the United States Core Data for Interoperability Standard (USCDI) at one time in a summary record formatted according to the C-CDA Release 2.1 Continuity of Care Document (CCD) template.
§170.315(g)(10) Application Access - Standardized API for Patient and Population Services	(g)(10)(ii)(A) Respond to search requests for a single patient’s data consistent with the search criteria included in the implementation specification adopted in § 170.215(b)(1), specifically the mandatory capabilities described in “US Core Server Capability Statement”. (g)(10)(ii)(B) Respond to search requests for multiple patients' data consistent with the search criteria included in an implementation specification adopted in § 170.215(d).

Use Case

Interoperability Services (IOPS), an Application Programming Interface (API) platform installed alongside the RESTful API Infrastructure, provides the MEDITECH EHR with next-generation interoperability capabilities. The platform runs interoperability-specific applications (collections of APIs) — enabling the MEDITECH EHR to take advantage of more advanced features and integrations. The MEDITECH API platform is an extension of the MEDITECH Health Care Information System (HCIS), which enables client applications to interact with MEDITECH’s databases. Reporting logs track the register of API User clients with the MEDITECH API platform to demonstrate the facilitation of Application Access requests for all related criteria.

Test Methodology

Reporting logs were reviewed to capture the number of Application Access requests for patient selection, category, and population requests over a period of time. Logs obtained during Real World Testing were de-identified and used for analysis across several areas to validate API execution. This test methodology primarily tests the implementation's conformance.

Justification

MEDITECH remains at the forefront of the interoperability movement. With the expansion of our national data exchange network, Traverse Exchange, MEDITECH has provided our customers with an on-ramp to the wider Trusted Exchange Framework and Common Agreement (TEFCA) ecosystem. MEDITECH's FHIR-first approach delivers real-time data to clinicians at the point of care while empowering patients as active stewards of their own health information. We are committed to expanding our customers' data exchange avenues.

Reporting logs reflect the number of successful transactions in which one or more API routines respond and return the full set of data for each data category from the USCDI for the unique patient identified by the ID or token.

Final Outcome(s)

Reporting logs reflect the number of patient access (g7), full dataset (g9), and single/multiple patient (g10) requests returning full sets of data for each data category from the USCDI for the unique patient identified by the ID or token. Visual inspection of successful metrics was tracked and analyzed.

To ensure the ongoing interoperability of our §170.315(g)(10) Standardized API criteria, MEDITECH conducts quarterly reviews of the FHIR Service Base URLs we publish, as required by the API Condition of Certification. This ongoing maintenance ensures that third-party applications can reliably discover and connect to our production endpoints, as documented in our Real World Testing results.

Measurement/Metric Findings - Expanse

A review of reports for Application Access data for the successful capture of API collections was evaluated for a sample of Expanse/6.1 customers (combined annual totals):

- §170.315(g)(7) Application Access - Patient Selection - patient identifier 11,148,985 (total # of patient events for the given ImplementationID)
- §170.315(g)(9) Application Access - All Data Request 4,705,071 (total # of events for the given ImplementationID specifically for (CDA))
- §170.315(g)(10) Application Access - Standardized API for Patient and Population Services 4,917,518 (total # of Globally Unique Identifiers (GUID) with events in more than 1 category for the given ImplementationID)

Measurement/Metric Findings - 6.08

A review of reports for Application Access data for the successful capture of API collections was evaluated for a sample of 6.08 customers (combined annual totals):

- §170.315(g)(7) Application Access - Patient Selection - patient identifier 2,983 (total # of patient events for the given ImplementationID)
- §170.315(g)(9) Application Access - All Data Request 41,302 (total # of events for the given ImplementationID specifically for (CDA))
- §170.315(g)(10) Application Access - Standardized API for Patient and Population Services 1,698 (total # of Globally Unique Identifiers (GUID) with events in more than 1 category for the given ImplementationID)

Measurement/Metric Findings - Client/Server/MAGIC

A review of reports for Application Access data for the successful capture of API collections was evaluated for a sample of legacy platform customers (combined annual totals):

- §170.315(g)(7) Application Access - Patient Selection - patient identifier 308,879 (total # of patient events for the given ImplementationID)

- §170.315(g)(9) Application Access - All Data Request 826,322 (total # of events for the given ImplementationID specifically for (CDA))
- §170.315(g)(10) Application Access - Standardized API for Patient and Population Services 179,593 (total # of Globally Unique Identifiers (GUID) with events in more than 1 category for the given ImplementationID)

Measurement/Metric Findings - MAGIC HCA

A review of reports for Application Access data for the successful capture of API collections was evaluated for a sample of testing patients (combined annual totals):

- §170.315(g)(7) Application Access - Patient Selection - patient identifier 2921 (total # of patient events for the given ImplementationID)
- §170.315(g)(9) Application Access - All Data Request 1539 (total # of events for the given ImplementationID specifically for (CDA))
- §170.315(g)(10) Application Access - Standardized API for Patient and Population Services 29 (total # of Globally Unique Identifiers (GUID) with events in more than 1 category for the given ImplementationID)

Relied-Upon Software	
Real World Testing Criteria	Relied-Upon Software
§170.315(g)(7) Application Access - Patient Selection §170.315(g)(9) Application Access - All Data Request §170.315(g)(10) Application Access - Standardized API for Patient and Population Services	For Core HCIS (g)(10) <ul style="list-style-type: none"> ● PostgreSQL For Ambulatory, Emergency Department Management <ul style="list-style-type: none"> ● MEDITECH Expanse 2.2 Core HCIS (Version v2.2c) OR ● MEDITECH Expanse 2.1 Core HCIS (Version v2.1c) OR ● MEDITECH 6.1 Electronic Health Record Core HCIS (Version v6.15c) ● MEDITECH 6.0 Electronic Health Record Core HCIS (Version v6.08c) ● MEDITECH Client/Server Electronic Health Record Core HCIS (Version v5.67c) OR ● MEDITECH MAGIC Electronic Health Record Core HCIS (Version v5.67c)

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))	
Standard (and version)	Quality Reporting Document Architecture Category I

	Quality Reporting Document Architecture: Category III
Updated certification criteria and associated product	170.315(c)(3) - Clinical quality measures (CQMs) — report
Health IT Module CHPL ID	<p>MEDITECH Expanse 2.2 Ambulatory v2.2c</p> <p>MEDITECH Expanse 2.2 Core HCIS v2.2c</p> <p>MEDITECH Expanse 2.2 Emergency Department Management v2.2c</p> <p>MEDITECH Expanse 2.1 Ambulatory v2.1c</p> <p>MEDITECH Expanse 2.1 Core HCIS v2.1c</p> <p>MEDITECH Expanse Emergency Department Management v2.1c</p> <p>MEDITECH 6.1 Electronic Health Record Core HCIS v6.15c</p> <p>MEDITECH 6.1 Emergency Department Management v6.15c</p> <p>MEDITECH 6.1 Ambulatory Electronic Health Record v6.15c</p> <p>MEDITECH 6.0 Electronic Health Record Core HCIS v6.08c</p> <p>MEDITECH 6.0 Emergency Department Management v6.08c</p> <p>MEDITECH Client/Server Electronic Health Record Core HCIS v5.67c</p> <p>MEDITECH Client/Server Emergency Department Management v5.67c</p> <p>MEDITECH MAGIC Electronic Health Record Core HCIS v5.67c</p> <p>MEDITECH MAGIC Emergency Department Management v5.67c</p>
Method used for standard update	Certification Attestation
Date of ASTP-ACB notification	N/A
Date of customer notification (SVAP only)	N/A

Conformance measure	N/A
USCDI-updated certification criteria (and USCDI version)	N/A

Care Settings	
Acute	MEDITECH's fully web-based Inpatient solution is an integrated component of MEDITECH's enterprise-wide EHR consisting of advanced patient management via Registration capturing details for public health interfaces and EHI export. Clinical workflows incorporate medication reconciliation and list medications, problems, and allergies. Inpatient EHI Export Exchange routines export single patient and/or bulk patient data files for continuity of care documents, discharge summaries, referral notes, and care plans.
Ambulatory	<p>MEDITECH's Ambulatory solution is device-and browser-agnostic, specifically designed for use with touchscreen devices to provide more efficient patient care. Clinical functionality within MEDITECH's Ambulatory solution is optimized with over 40 tailorable specialty-specific workflows, including anesthesiology, behavioral health, general surgery, obstetrics and gynecology, orthopedics, and pediatrics.</p> <p>In the Ambulatory system, users can review and reconcile a patient's enterprise-wide allergy list via the Allergy/Adverse Reaction screen. The patient's active problem list can be reviewed in the Problems widget within the patient's chart, highlighted via a visual indicator. The External Data Available flag is displayed to reconcile the data for this patient. The patient's existing Problems, Medications, and Allergies are easily compared with those available from another source, and entries are reconciled.</p>
Emergency Department	MEDITECH's Emergency Department Management solution assists ED staff with the critical task of treating patients quickly and efficiently. As an integrated component of MEDITECH's EHR, Emergency Department Management supports the seamless exchange of patient information between the acute care, ambulatory, and ED settings, expediting care and providing all clinicians with the complete information they need to make safer, more informed decisions.

Schedule of Key Milestones

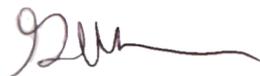
MEDITECH, following change control approval procedures, connected to a number of predetermined customer directories, dedicated internal environments, and internal reporting tools, gathering data for a specific period each quarter beginning in January 2025 and throughout the year to capture metrics for each criterion. These statistics substantiate the demonstration of interoperability and functionality of our Certified Health IT in the care settings and scenarios for the 2025 test plan as described in the above scenarios. As criteria tests have been conducted, authorized MEDITECH representatives analyzed the result outcomes.

The execution of the testing process and capturing data on a quarterly basis was completed in December 2025 for an analysis of success rates over a period of time for submission of reporting results due by February 2026.

Key Milestone	Care Setting	Timeframes
Initial development of 2025 the Real World Testing plan designed by platform combination.	Acute Ambulatory Emergency	August - October 2024
Preparing reporting utilities to gather data for analysis.	Acute Ambulatory Emergency	August - October 2024
Submit 2025 final Real World Testing plan to Drummond Group.	Acute Ambulatory Emergency	September 5, 2024
Approved 2025 Real World Testing plan (previous post) to external URL.		November 15, 2024
MEDITECH Initiated a collection of metrics for each group of criteria based on the reporting tools and utilities noted.	Acute Ambulatory	Quarterly - March, June, September, and December 2025
Design 2025 Real World Testing Results Report	Acute Ambulatory	December 2025 - January 2026
Complete 2025 metric analysis and Real World Testing report.	Acute Ambulatory	January 2026
Submit 2025 Real World Testing report to Drummond Group.	Acute Ambulatory	By February 1, 2026

ATTESTATION

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MEDITECH Proprietary:

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