

## **Amrita Ventures ONC Real World Testing Results-2025**

### **EXECUTIVE SUMMARY**

This is the test report for CY 2025 Real World Testing results for our inpatient EHR - Amrita HIS. This is the companion document to our CY 2025 Real World Test Plan that described our approach for conducting Real World testing in CY 2025 and the testing measures we employed.

All measures were tested in an Inpatient care setting of a Critical Access Hospital that is a long-time user of the Certified Amrita EHR software.

Our findings show that EHR is working as it was certified. Our testing shows that in the Critical Access Hospital inpatient care setting of our hospital customer, some certified functionality like patient portal and electronic prescription are widely used; while other features, such as C-CDA transmission, Care Plan and API usage are rarely or completely not used.

For each of our CY 2025 Real World Testing Measures, we have recorded our results and findings. If any non-conformities or errors were encountered, we noted them.

Our signed attestation of compliance with the Real World testing requirements is on the following page.

## ATTESTATION

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.

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Date: **February 6, 2026**

**GENERAL INFORMATION**

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

Developer Name: **Amrita Ventures, LLC**

Product Name(s): **Amrita HIS**

Version Number(s): **7.2**

Product List (CHPL) ID(s): **15.04.04.2678.Amri.AH.01.1.221228**

Developer Real World Testing Page URL: <https://amritamedical.com/testing/>

**KEY MILESTONES ACHIEVED**

Key Milestone	Date/Timeframe	STATUS
Inform the current Amrita Customer, and Scheduling and Logistics preparation.	Q4 2024 Initial discussion with the customer has occurred and permission granted to do RWT, to be followed in Q1 2025 with a detailed customer meeting reviewing the schedule and logistics.	This was completed in Q1 2025 as planned
Prepare Amrita HIS EHR for use in collecting data as per the RWT plan. This will include internal validation that system generated data used for testing measurements are functional. If we determine functional deficiencies that could result in not completing the RWT we will inform the ONC-ACB and correct the deficiency (s).	Q2 2025	This was met in Q2 2025 as planned
RWT Testing period and data collection.	Q3 2025	This was started in Q3 2025 and completed in Q4 2025.
Collect and collate all the data from the RWT.	Q4 2025	Met in Q4 2025
Writing Report after analyzing all the collected data and Submit the RWT Test Report before deadline.	Q1 2026	Met in Q1-2026

**CARE SETTING STATEMENT**

Amrita HIS is a complete Inpatient EHR. Amrita HIS is currently marketed to small Critical Access, Community or Specialty Hospitals. All measures were tested in an Inpatient care setting of a Critical Access Hospital that is a long-time user of the Certified Amrita EHR software.

**STANDARDS UPDATES)**

For CY 2025 RWT testing, we did not do any SVAP updates.

Standard (and version)	N/A
Updated certification criteria and associated product	N/A
Health IT Module CHPL ID	N/A
Method used for standard update	N/A
Date of ONC-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

**CHANGES TO TESTPLAN**

1. In the test plan, we had listed all the measures individually. However, while testing, it was more efficient to group similar criteria together and combine the test cases.

This change does not affect the outcome of the usability of the features of the criteria.

**MEASURES AND OUTCOMES**

MEASURE & CRITERION	RELIED UPON SOFTWARE	OUTCOME
<p><b><u>§ 170.315(b)(1) Transitions of care</u></b> <b><u>§ 170.315(h)(1) Direct Project</u></b></p>	<p>DataMotion (Version 6.1) MaxDirect (Version 3.0)</p>	<p>Only C-CDAs sent using the DIRECT protocol are included in this measure.</p> <p>During the testing period of Q3-2025, a total of 140 C-CDAs were sent from the hospital. All Of these were sent to the PCP of the patient at the facility clinics. For all the 140 C_CDAs sent to the hospital clinics there is confirmation of C-CDA being received by the clinic EHR.</p> <p>Hence this measure = 100%</p>
<p><b><u>§ 170.315(b)(2) Clinical information reconciliation and incorporation</u></b> <b><u>§ 170.315(h)(1) Direct Project</u></b></p>	<p>MaxDirect (Version 3.0)</p>	<p>Only C-CDA sent using the DIRECT protocol are included in this measure.</p> <p>The hospital receives CCDA from the hospital based physician clinics for patients seen there. Not all these patients get admitted into the hospital. These CCDA were not included in the count.</p> <p>During the testing period of Q3-2025, the facility received only 1 C-CDA for patients that were admitted in the hospital. This C-CDA were successfully incorporated into the patients' medical record.</p> <p>Hence this measure = 100%</p>
<p><b><u>§ 170.315(b)(3) Electronic prescribing</u></b></p>	<p>Nextech with NewCropRx</p>	<p>The hospital does ePrescription only for discharge medications.</p> <p>During the testing period of Q3-2025, a total of 177 electronic prescriptions were sent using NewCrop - the relied upon ePrescription software. No errors were reported by the hospital for these ePrescriptions sent.</p> <p>Hence this measure = 100%</p>
<p><b><u>§ 170.315(b)(7) Security tags - summary of care - send</u></b> <b><u>§ 170.315(b)(8) Security tags-summary of care- receive</u></b></p>	<p>None</p>	<p>The hospital is not using the Security tag feature. Hence none of the C-CDA sent had a security tag in them</p> <p>The hospital did not receive any CCDA with any security tags</p> <p>Hence we used a production like EHR test environment and tested this feature and verified functionality. For a single</p>

		<p>patient, we generated a CCDAs with security tag and also imported a CCDAs with security tag. There were no errors. Hence this measure = 100%</p>
<p><b><u>§ 170.315(b)(9) Care plan</u></b></p>	<p>None</p>	<p>During testing we found that the hospital is not using the Care Plan feature that is certified for this measure.</p> <p>We used a production like test environment and tested the Care Plan feature and verified functionality for a single patient. There were no errors.</p> <p>Hence this measure = 100%</p>
<p><b><u>§ 170.315(c)(1)—record and export</u></b>  <b><u>§ 170.315(c)(2)—import and calculate</u></b>  <b><u>§ 170.315(c)(3)—report</u></b></p>	<p>None</p>	<p>We support the 2025 versions for all fifteen (15) Inpatient hospital clinical quality measures. The hospital was able to calculate and run the quality measures for Q4-2025 and view the results of the relevant measures in the Clinical Quality Measure dashboard.</p> <p>The hospital does not import QRDA 1 files and hence this could not be tested at the hospital in production. We tested this feature in a production like environment by using the Cypress tool and was able to successfully import the file and generate the QRDA1 files.</p> <p>The Export functionality is only being used partially by the hospital to report to the Agency. The hospital is manually reporting the numbers. The hospital was able to generate the QRDA 1 files for the CMS506v7 Safe Use of Opioid Measure and successfully upload the same to the HQR reporting portal. For Q3 reporting, a total of 9 QRDA1 CMS506v7 files were generated and successfully uploaded.</p> <p>There were no errors. Hence this measure = 100%.</p>
<p><b><u>§ 170.315(e)(1) View, download, and transmit to 3rd party</u></b></p>	<p>None</p>	<p>Total unique patients with Inpatient discharges in Q3-2025 period = 122</p> <p>All 124 Patients were given access to their health information through the patient portal. Measure = 100%</p> <p>Total patients who have logged into the portal and accessed their health information in Q3 2025 as per audit logs = 157. We provide access to the laboratory and radiology reports for ALL patients and not only Inpatients.</p>
<p><b><u>§ 170.315(f)(1) Transmission to immunization registries</u></b></p>	<p>None</p>	<p>The hospital setup the immunization interface with the State Immunization Registry in Q4 2025. The hospital is in Stage 3 of Immunization Registry on-boarding. Live Immunization data is being sent to the State Registry.</p>

		<p>In Q4-2025, six (6) immunizations were recorded in the EHR. For all these immunizations, the VXU HL7 messages were successfully generated and sent to the Immunization Registry without errors . Hence this measure = 100%</p>
<p><b><u>§ 170.315(f)(2)</u></b> <b><u>Transmission to public health agencies — syndromic surveillance.</u></b> <b><u>§ 170.315(f)(3)</u></b> <b><u>Transmission to public health agencies — reportable laboratory tests and value/results</u></b></p>	<p>None</p>	<p>Currently the hospital has not yet enabled or operationalized all the public health interfaces listed. The hospital and Amrita are in active engagement with public health agencies to develop some of these interfaces. Hence, we considered the messages that were sent from the hospital to the local HIE. Total patients admitted as Inpatient to the hospital during the Q3-2025 period = 130 For each of these admissions, A01 message was generated.</p> <p>Total Inpatients patients discharged from the hospital during the Q3-2025 period = 136 For each of these discharges, A03 message was generated.</p> <p>During the Q3-2025 period, a total of 1107 A08 messages were generated.</p> <p>During the Q3-2025 period, a total of 203975 ORM Laboratory results messages were sent out. These include laboratory results for all patients.</p> <p>No errors were reported for these messages. Hence this measure = 100%</p>
<p><b><u>§ 170.315(f)(6)</u></b> <b><u>Transmission to public health agencies — antimicrobial use and resistance reporting</u></b>  <b><u>§ 170.315(f)(7)</u></b> <b><u>Transmission to public health agencies — health care surveys</u></b></p>	<p>None</p>	<p>In 2025, the hospital had not yet enabled or operationalized its health care surveys public health interface. The hospital and Amrita are in active engagement with public health agencies to develop some of these interfaces. We are using the Health Level 7 (HL7®) Implementation Guide for CDA® Release 2 to generate the HCS messages for each inpatient discharge.</p> <p>Total Inpatients patients discharged from the hospital during the Q3-2025 period = 135 Total CCDA generated for these discharges = 134</p> <p>Hence this measure = 99.26%</p>

<p><b><u>§170.315(b)(10) Electronic Health Information Export</u></b></p> <p><b><u>§ 170.315(g)(7) Application access— patient selection</u></b></p> <p><b><u>§ 170.315(g)(9) Application access— all data request</u></b></p> <p><b><u>§170.315(g)(10) Application Access - Standardized API for Patient and Population Services</u></b></p>	<p>MeldRx Version 2</p>	<p>For each inpatient discharged from the hospital, the EHR is sending CCDAs with USCDI v1 Data set to the MeldRx FHIR Server. For Q3, there were a total of 135 patients that were discharged from the Inpatient facility. CCDAs for 134 patients were successfully uploaded to the FHIR server. However, there is no real interest in the EHI export capability from the hospital's patients and providers, so we used a production-like EHR and MeldRx test environment and tested this feature and verified functionality. We were able to demonstrate the functionality to respond to specific date range requests for single and bulk patient data containing data categories specified in the USCDI v1 Data set. Hence this measure = 99.26%</p> <p>No patient is using any 3<sup>rd</sup> party application for API production. Hence, we used a production-like test environment and tested this feature using the Postman software and verified functionality.</p> <p>For ONE patient, the testing demonstrated that the clinician has the ability 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.</p> <p>There were no errors. Hence this measure = 100%</p>
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