

CY 2024 Real World Testing Results for Abeo Solutions

General Information

Plan Report ID Number: Abeo-RWT-2023

Product Name(s): Crystal Practice Management

Version Numbers(s): 6.0

Certified Health IT Criteria: 315(b)(1), (2), (6); (c)(1)-(c)(3); (e)(1); (f)(1); (g)(7); (g)(9);

(g)(10)

Developer Real World Testing Page URL: http://crystalpm.com/certification/

Developer Name: Abeo Solutions

Product List (CHPL) ID(s) and Link(s):

https://chpl.healthit.gov/#/listing/10996

• 15.04.04.1030.Crys.06.01.1.221004



Summary of Testing Methods and Key Findings

We conducted Real World Testing using two distinct methods: automatically collected analytics and software based surveys. Both types of data were collected using just our software, Crystal Practice Management. Both types of of data are combined and uploaded once a month to our web database from every practice that's running Crystal Practice Management.



Standards Version Advancement Process (SVAP) Updates

For CY 2024, we were not planning to make any version updates on approved standards through the SVAP process. We have implemented USCDI v1 in our C-CDAs and API support.

Standard (and version)	USCDIv1
Updated certification criteria and associated product	170.315 (b)(1), 170.315 (b)(2), 170.315 (e)(1), 170.315 (g)(6), 170.315 (g)(9) for Crystal Practice Management 6.0
Health IT Module CHPL ID	15.04.04.1030.Crys.06.01.1.221004
Method used for standard update	Certification Attestation
Date of ONC-ACB notification	N/A
Date of customer notification (SVAP only)	N/A (only for SVAP)
Conformance measure	170.315 (b)(1) using ONC Test Procedure 1.1 and Edge Test Tool 2.3.48, 170.315 (b)(2) using ONC Test Procedure 1.2 and Edge Test Tool 2.3.48, 170.315 (e)(1) using ONC Test Procedure 1.4 and Edge Test Tool 2.3.48, 170.315 (g)(6) using ONC Test Procedure 1.1, 170.315 (g)(9) using ONC Test Procedure 1.2 and Edge Test Tool 2.3.48
USCDI-updated certification criteria (and USCDI version)	170.315 (b)(1), 170.315 (b)(2), 170.315 (e)(1), 170.315 (g)(6), 170.315 (g)(9) for USCDIv1



Care Settings

We conducted Real World Testing with practices that are optometry based.



Relied Upon Software

Rosetta Health HISP

In order to meet the certification criterion for electronic exchange of health information using the Direct Project protocol, we relied on the services of Rosetta as our HISP. Rosetta provided us with the necessary infrastructure to enable secure and reliable health information exchange between our EHR system and external recipients.

During the Real World Testing process, we used Rosetta's services to transmit Direct messages containing patient health information to external recipients, such as other healthcare providers or patients. We also received Direct messages from external sources, which were transmitted through Rosetta's infrastructure and securely integrated into our EHR system.



Metrics and Outcomes

Measurement / Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
RWT Measure #1: Number of Transition of Care C-CDAs successfully sent	315(b)(1), 315(h)(1)	Rosetta Health as HISP	For 2024, 2,842 practices submitted analytics, 16 practices sent transition of care C-CDAs, and those practices sent a total of 136 transition of care C-CDAs for 125 unique patients	
RWT Measure #2: Number of C-CDAs Received and/or Incorporated	315(b)(1), (b) (2), (h)(1)	Rosetta Health as HISP	For 2024, 2,842 practices submitted analytics, 12 practices received C-CDAs over Direct Messaging, and those practices received a total of 1,103 C-CDAs over Direct Messaging, 8 practices incorporated C-CDAs, and those practices incorporated a total of 34 C-CDAs	
RWT Measure #3:	315(e)(1)	Rosetta Health	For 2024, 2,878	



		Tractice manag		
Number of Patients Given Access to Portal		as HISP	practices submitted analytics, 1,674 of those practices gave patients access to the patient portal, and those practices gave 620,661 patients access to the patient portal, 51 practices gave patients' authorized users access to the patient portal, and those practices gave an authorized user patient portal access for 184 patients	
RWT Measure #4: Number of Direct Messages Successfully Sent	315(h)(1)	Rosetta Health as HISP	For 2024, 2,878 practices submitted analytics, 15 of those practices successfully sent Direct Messages, and those practices sent 658 Direct Messages	
RWT Measure #5: Number of Patient Batch Exports Run	315(b)(6)		For 2024, 34 practices submitted analytics for this measure because they performed a Patient Batch	



			1
		Export, and those practices performed one Patient Batch Export 64 times in total	
RWT Measure #6: Number of Quality Measures Successfully Reported on to CMS	315(c)(1)-(c) (3)	For 2024, based on our analytics and surveys, 64 practices exported a QRDA Cat 3 CCD and attested for MIPS with it. The following number of practices attested using the following measures:	
		Cqm50: 62	
		Cqm138: 62	
		Cqm68: 64	
		Cqm131: 64	
		Cqm142: 62	
		Cqm143: 63	
		Cqm165: 36	
		Cqm69: 16	
		Cqm122: 8	
		Cqm155: 14	
RWT Measure #7: Number of IIS/Immunization Registries Connected with our EHR	315(f)(1)	During production testing, 341 offices responded, and	Addressed in "Deviations From Original RWT Plan"
		2 indicated that	



	N I	rractice management	
		they were	
		connected with	
		an immunization	
		registry. In	
		synthetic	
		testing, we	
		created 10	
		immunization	
		messages using	
		synthetic patient	
		data from 2	
		mock offices. All	
		10 messages	
		were	
		successfully	
		validated using	
		the NIST HL7 v2	
		Immunization	
		Test Suite	
		(version 1.9.13)	
		to confirm they	
		met the	
		required format	
		and data	
		standards.	
RWT Measure #8.	315(g)(7),	During	Addressed in
Number of 3rd	(g)(9), (g)(10)	production	"Deviations
Party Applications Registered and		testing, 341 offices	From Original RWT Plan"
Authorized to use		responded to	RWIPIAN
FHIR API to Access		our survey, and	
Patient Data		none indicated	
		that they were	
		using or had	
		registered a	
		third-party	
		application with	
		the FHIR API. To	



			address this, we conducted synthetic testing using the ONC Certification (g) (10) Standardized API Test Kit, Inferno (version 7.0.3). We registered two mock third-party applications with the FHIR API. Both applications successfully authenticated and retrieved synthetic patient data, demonstrating that the FHIR API meets the required functionality and interoperability standards, even in the absence of real-world usage.	
RWT Measure #9: How many different HIEs/HINs are connected with our EHR	315(h)(1)	Rosetta Health as HISP	6 practices are integrated with KHIE (Kentucky), 14 practices are integrated with OneHealthPort (Washington State)	



Deviations From Original RWT Plan

RWT Measure #7: Number of IIS/Immunization Registries Connected with our HER – 315(f)(1)

During Real World Testing, we found that our system couldn't automatically track which users were connecting to immunization registries due to missing telemetry features in Crystal Practice Management. Instead, we used a customer survey to estimate how often this functionality was being used.

To back up the survey results, we also ran synthetic tests in a mirrored production environment. In these tests, we created a mock immunization registry and submitted 10 test messages from 2 simulated offices. All 10 messages were successfully processed without any issues.

While this approach differs from our original plan, which relied on automated tracking, the synthetic testing allows us to provide meaningful results and confirm compliance with the requirements for 315(f)(1).

RWT Measure #8. Number of 3rd Party Applications Registered and Authorized to use FHIR API to Access Patient Data -315(g)(7), (g)(9), and (g)(10)

During the Real World Testing process, we identified an issue with the telemetry functionality in our FHIR API application, which was used for criteria g.7, g.9, and g.10. While we could determine which customers were using the FHIR API, the system did not include telemetry to track whether those customers were integrating with third-party applications or transmitting data through the API.

As a result, we were unable to rely on reporting or logging to collect usage metrics for these criteria. To address this, we conducted synthetic testing to evaluate the FHIR API's functionality. In these tests, we registered two mock third-party applications, which successfully authenticated and retrieved synthetic patient data, confirming that the FHIR API supports integration and data exchange as required.

While this approach deviates from our original plan, it ensures compliance with criteria g.7, g.9, and g.10 and demonstrates the FHIR API's interoperability capabilities in the absence of detailed telemetry data.



Key Milestones

Key Milestone	Care Setting	Date/Timeframe
Submitted 2024 Real World Test Plan to Drummond Group (ACB)		October31 st , 2023
Began collecting data automatically with background tasks and manually through customer surveys in the Crystal Practice Management software	Ambulatory – Optometry	December 2023 – January 9th, 2025
Submitted 2024 Real World Test results to Drummond Group (ACB)		January 9th, 2025