

2023 Qualifacts CareLogic Real World Testing Results Report

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RWT Results Report Summary

This document provides the Real-World Testing Results Report for Qualifacts CareLogic for the calendar year 2023. This document includes elements that allow reflection, direct results, and analysis of the process of conducting Real World Testing of our certified health IT (45 CFR § 170.405)

ONC has provided the guidance that Real World Testing intends to evaluate compliance with the certification criteria and interoperability of exchanging electronic health information (EHI) within the care and practice setting targeted for use. Our RWT plans are built toward final testing measurements and metrics to evaluate our product interoperability within production settings.

Attestation

This Real World Testing Results Report has all the required elements documented on the ONC Real World Testing Results Report Template. The information in this document is current and comprehensively addresses the health IT developer's Real World Testing Results Report requirements.

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Date of Attestation:	February 1, 2024
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General Information

Results Report based on 2023 RWT Report ID Number	CareLogic-RWT-2023
Developer Name:	Qualifacts Systems, LLC
Product Name:	CareLogic
Version Number:	Enterprise S3
Certified Health IT Product List (CHPL) ID:	ONC CHPL ID: 15.04.04.2237.Care.S3.00.1.181220, CHPL link
Developer Real World Testing Page URL:	https://www.qualifacts.com/onc-certification-and-costs/

Changes to the Original Plan

Summary of Change [Summarize each element that changed between the plan and the actual execution of Real World Testing]	Reason [Describe the reason this change occurred]	Impact [Describe what impact this change had on the execution of your Real World Testing activities]
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In 2023, Qualifacts CareLogic encountered no interest or engagement for measures where the testing methods were designed to interact with the customer. As such, we pivoted and utilized our quality metrics for reporting against real-world data to accommodate this shift in our intended design.

Withdrawn Products

ONC Guidance: If a developer withdrew any products within the past year that were previously included in their Real World Testing plan, please provide the following information.

Version Number(s):	<p>In CY2023, Qualifacts CareLogic software did not withdraw any products during the reporting year.</p>
Date(s) Withdrawn:	
Inclusion of Data in Results Report:	

Summary of Testing Methods and Key Findings

Qualifacts CareLogic focused on two distinct testing methods for our 2023 Real World Testing Plan:

- **Reporting/Logging:** This methodology uses the EHR's logging and reporting capabilities to evaluate system actions as part of users' production workflows. A typical example is the numerator recording and measure's calculation required by §170.315(g)(1) and §170.315(g)(2). It can also include reviews of the audit log and customized reports from the EHR. This methodology often provides historical measurement reports that can be accessed at different times of the year and evaluate the interoperability of EHR functionality. It can be a benchmark for assessing real-world testing over multiple time intervals.
- **Compliance and Tool:** This methodology uses inspection to evaluate if EHR complies with the ONC criteria. Assessment can be accomplished through 1-on-1 manual testing and various validation tools to assess compliance and interoperability. If an EHR module's technology is not widely used in production by current users, compliance inspection can ensure the functionality continues to meet the certification requirements.

"You can't connect the dots looking forward; you can only connect them looking backward. So you have to trust that the dots will somehow connect in your future."

–Steve Jobs

In this sophomore year of ONCs RWT, CareLogic (and presumably all health IT developers) continues to gain immeasurable and valuable insight into the vision, execution, and goal – including the "spirit" – behind Real World Testing. Objectively reviewing metrics throughout the year provided an opportunity for quality checkpoints, data analysis, and – as in 2022 – the privilege to grow, learn, explore, engage, and move the needle forward on the reachable goal of national interoperability.

Where appropriate in this RWT Results Report, a review of "year-over-year" data was noted and discussed. The beauty of these annual ONC results reports is the review of calendar year data not only for real-world application and use but also to see the trends of that use from one year to the next. The healthcare IT industry is nearing eight years since the passage of The 21st Century Cures Act – we continue to discover and explore the aims, ideals, and purpose of firmly creating a nationally interoperable, interchangeable foundation.

Standards Updates (SVAP)

Including Standards-Version Advancement Process (SVAP) and the United States Core Data for Interoperability (USCDI)

Standard (and version):	In 2023, Qualifacts CareLogic software and products did not include these voluntary standards.
Updated certification criteria and associated project:	
Health IT Module CHPL ID:	
Conformance Measure:	

Care Setting(s) Targeted

Qualifacts CareLogic software is targeted at behavioral healthcare and the human services industries. The testing methods utilized are at an enterprise level, and each care setting is included in the analysis, review, and reporting.

Relied Upon Software

Additional software relied upon to demonstrate compliance: Rcopia (DrFirst) for § 170.315(b)(3), Updox for § 170.315(e)(1), MaxMD DIRECT mdEmail for § 170.315(b)(1), § 170.315(e)(1), and § 170.315(h)(1), Dynamic Health IT CQMsolution for § 170.315(c)(1) to (c)(3), Ping Identity for § 170.315(g)(10).

Key Milestones

Key Milestone	Timeframe
<p>Within the year's first two quarters, CareLogic continually emphasized a collaborative team focused on product functionality, especially against functionality that is part of certification criteria.</p> <p>During this same time, reporting and data gathering for RWT methods were monitored toward the data output of Reporting/Logging. Throughout these quarters and the entire calendar year, the reports produced against certification criteria have been regularly monitored for completeness and analysis of trends.</p>	<p>Q1-Q2</p> <p>Care Settings: behavioral healthcare and human services</p>
<p>Much like the first half of the calendar year, the collaborative team emphasis continues, maintaining cohesion against certified functionality. In the latter quarters of the calendar year, CareLogic supported continuous quality checks on the data reporting for criteria marked with Reporting/Logging.</p>	<p>Q3-Q4</p> <p>Care Settings: behavioral healthcare and human services</p>

Metrics and Outcomes

Measurement and Associated Criteria (noting Relied Upon Software, if applicable)	Outcomes and Challenges																																																																	
Measure: Number of Transition of Care C-CDAs Successfully Sent § 170.315(b)(1) Transitions of care § 170.315(h)(1) Direct Project	Testing Method: Reporting/Logging																																																																	
<p>CareLogic used reporting across all live customer databases, where we gleaned the following metrics for these reporting results against the criteria:</p>																																																																		
<table border="1"> <thead> <tr> <th>Year-Month</th> <th>Direct messages received</th> <th>Partners receiving Direct</th> <th>Direct messages sent</th> <th>Direct messages sent successfully</th> </tr> </thead> <tbody> <tr><td>2023-01</td><td>781</td><td>6</td><td>73</td><td>73</td></tr> <tr><td>2023-02</td><td>612</td><td>7</td><td>38</td><td>38</td></tr> <tr><td>2023-03</td><td>850</td><td>6</td><td>28</td><td>28</td></tr> <tr><td>2023-04</td><td>624</td><td>6</td><td>34</td><td>34</td></tr> <tr><td>2023-05</td><td>481</td><td>6</td><td>86</td><td>86</td></tr> <tr><td>2023-06</td><td>424</td><td>6</td><td>27</td><td>27</td></tr> <tr><td>2023-07</td><td>377</td><td>6</td><td>11</td><td>11</td></tr> <tr><td>2023-08</td><td>420</td><td>6</td><td>10</td><td>10</td></tr> <tr><td>2023-09</td><td>374</td><td>6</td><td>9</td><td>9</td></tr> <tr><td>2023-10</td><td>398</td><td>5</td><td>9</td><td>9</td></tr> <tr><td>2023-11</td><td>360</td><td>4</td><td>2</td><td>2</td></tr> <tr><td>2023-12</td><td>410</td><td>4</td><td>4</td><td>4</td></tr> </tbody> </table>		Year-Month	Direct messages received	Partners receiving Direct	Direct messages sent	Direct messages sent successfully	2023-01	781	6	73	73	2023-02	612	7	38	38	2023-03	850	6	28	28	2023-04	624	6	34	34	2023-05	481	6	86	86	2023-06	424	6	27	27	2023-07	377	6	11	11	2023-08	420	6	10	10	2023-09	374	6	9	9	2023-10	398	5	9	9	2023-11	360	4	2	2	2023-12	410	4	4	4
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<p>While overall customer utilization is on the lower end, the percent successful is significantly positive, with an average success rate of 100%</p>																																																																		
<p>Conversely, when viewing the utilization of outgoing – or sent – Clinical Summary documents using Direct messages, the utilization dramatically reduces. The following metrics are reflective of the 2023 calendar year:</p>																																																																		

Year-Month	Partners sending Direct	Clinical Summary documents sent via Direct	Clinical Summary documents sent via Direct successfully	Clinical Summary documents sent via Direct Percent Successful	Unique Partners sending Clinical Summary documents via Direct
2023-01	3	48	48	100	1
2023-02	3	7	7	100	1
2023-03	3	9	9	100	2
2023-04	2	22	22	100	1
2023-05	2	64	64	100	1
2023-06	2	14	14	100	1
2023-07	4	4	4	100	2
2023-08	3	1	1	100	1
2023-09	3	2	2	100	1
2023-10	3	4	4	100	1
2023-11	2	1	1	100	1
2023-12	1	0	0	100	0

While customer utilization is relatively low, the overall success rate is high, with 100% successfully sent.

Measure: Number of Different Destinations C-CDAs Successfully Sent

§ 170.315(b)(1) Transitions of care
 § 170.315(h)(1) Direct Project

Testing Method:
 Reporting/Logging

CareLogic used reporting across all live customer databases, where we gleaned the following metrics for these reporting results against the criteria:

Year-Month	Live Partner Count	Unique destinations for all Direct messages sent	Unique destinations for Direct messages containing a Clinical Summary
2023-01	425	48	44
2023-02	428	10	8
2023-03	428	11	9
2023-04	429	16	14
2023-05	430	45	43
2023-06	433	16	12
2023-07	436	7	4
2023-08	443	5	1
2023-09	443	4	2
2023-10	447	7	4
2023-11	447	1	0
2023-12	447	1	0

Overall utilization remains low, yet there is a high correlation between the use of C-CDA documents contained in the Direct Message. Reviewing the average for the calendar year, 14.25 Direct Messages were sent monthly; on average, 11.75 of those messages contained a C-CDA.

Measure: Number of C-CDAs Received and (or) Incorporated

§ 170.315(b)(1) Transitions of care
 § 170.315(b)(2) Clinical information reconciliation and incorporation

Testing Methods:
 Reporting/Logging

Measure: Compliance of Problem List/Medication/Medication Allergy Reconciliation and Incorporation from C-CDA

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

CareLogic used reporting across all live customer databases, where we collected the following metrics for these reporting results against the criteria:

Year-Month	Live Partner Count	Number of Clinical Summary documents imported in the month	Patient seen with Medication Incorporated	Patient seen with Medication Allergy Incorporated	Patient seen with Problem Incorporated
2023-01	425	403	0	0	0
2023-02	428	334	0	0	0
2023-03	428	450	0	0	0
2023-04	429	325	0	0	0
2023-05	430	246	0	0	0
2023-06	433	249	0	0	0
2023-07	436	224	0	0	0
2023-08	443	226	0	0	0
2023-09	443	221	0	0	0
2023-10	447	229	0	0	0
2023-11	447	201	0	0	0
2023-12	447	257	0	0	0

This powerful interoperability option is clearly less utilized for client continuity of care across providers and specialties. Where functionality is available and positive, the additional functionality to reconcile the information is entirely void of use. While the functionality is powerful for care coordination, higher utilization may be lacking due to lagging behavioral healthcare industry changes. The functionality and error reduction are well documented ([NIH/PubMed](#)). Yet, the onus for use lies directly with the provider -- between the Cures Act and movements like OpenNotes, placing consumers directly in control of their healthcare ecosystem; accurate and accessible data (though CCD use and reconciliation) is likely only to be enhanced and promoted.

Measure: Electronic Prescribing {NewRx, RxChangeRequest, RxChangeResponse, RxFill}
 § 170.315(b)(3) Electronic prescribing

Testing Method:
 Reporting/Logging

CareLogic used reporting across all live customer databases, where we gleaned the following metrics for these reporting results against the criteria:

NewRx

Year-Month	Live Partner Count	Customers sending NewRx	NewRx sent	NewRx sent successfully	Percent NewRx sent successfully
2023-03	428	303	329,626	328,108	99.54%
2023-04	429	302	526,957	524,058	99.45%
2023-05	430	299	584,919	581,864	99.48%
2023-06	433	303	564,343	561,454	99.49%
2023-07	436	301	528,164	524,061	99.22%
2023-08	443	302	617,213	606,315	98.23%
2023-09	443	300	537,425	535,001	99.55%
2023-10	447	300	582,984	580,413	99.56%
2023-11	447	304	547,901	543,554	99.21%
2023-12	447	303	518,226	515,896	99.55%

RxChangeRequest / RxChangeResponse

Year-Month	Live Partner Count	Customers sending RxChangeResponse	RxChangeResponse sent	RxChangeResponse sent successfully	Percent RxChangeResponse sent successfully
2023-03	428	81	461	304	65.94%
2023-04	429	111	747	580	77.64%
2023-05	430	112	945	665	70.37%
2023-06	433	112	818	595	72.74%
2023-07	436	105	883	646	73.16%
2023-08	443	115	1,055	716	67.87%
2023-09	443	112	883	614	69.54%
2023-10	447	116	1,489	1,196	80.32%
2023-11	447	120	1,600	1,119	69.94%
2023-12	447	109	1,298	933	71.88%

RxFill

Year-Month	Live Partner Count	Customers receiving RxFill	RxFill received
2023-03	428	203	10,337
2023-04	429	218	16,676
2023-05	430	213	18,697
2023-06	433	214	18,565
2023-07	436	226	21,130
2023-08	443	226	32,552
2023-09	443	231	27,707
2023-10	447	226	30,129
2023-11	447	236	28,446
2023-12	447	237	26,256

Overall, there is a high utilization of e-prescribing across all customer domains, highlighting the great need and strength of this data interoperability. NewRx volume remains highly utilized year over year. The newer metrics in this year’s results report of viewing change requests/responses and RxFill provide greater insight into the full use of e-prescribing. Both newer metrics showcase broad utilization. However, we are also mindful that success with change requests and responses can additionally be attributed to various factors, with provider choice being the strongest.

At Qualifacts, we wholeheartedly continue to support [CMS' statement](#), "Adopting the standards to facilitate e-prescribing is one of the key action items in the Federal government's plan to expedite the adoption of electronic medical records and build a national electronic health information infrastructure in the United States."

We look forward to the continued enhancements of USCDI elements in the [Medication](#) class and, eventually, the inclusion of robust, applicable data standards (such as NDPDP standards) to enhance use and interoperability.

Measure: Clinical Quality Measure Successful Creation, Aggregate, and Report

§ 170.315(c)(1)—record and export
 § 170.315(c)(2)—import and calculate
 § 170.315(c)(3)—report

Testing Method:
 Reporting/Logging

CareLogic used reporting across all live customer databases, where we gleaned the following metrics for these reporting results against the criteria:

Year-Month	Live Partner Count	Total number of CQM reports	Partners creating CQM reports
2023-01	425	19	12
2023-02	428	14	2
2023-03	428	27	9
2023-04	429	7	1
2023-05	430	8	3
2023-06	433	7	2
2023-07	436	0	0
2023-08	443	4	3
2023-09	443	1	1
2023-10	447	10	2
2023-11	447	3	3
2023-12	447	0	0

CareLogic relies on the CQM Solution from Dynamic Health IT as our long-standing trusted partner for Clinical Quality Measures and associated criteria for this measure. However, we have seen less and less participation in using CQM measures due to factors such as:

- The use of the MIPS Extreme and Uncontrollable Circumstances (EUC) exception for MIPS/APM under the Quality Payment Program due to COVID-19 continued into PY2022 (<https://qpp.cms.gov/mips/exception-applications?py=2022>).

- The 2022 report from the [JAMA Health Forum](#) highlighted that psychiatrists (the primary care setting for CareLogic) performed significantly lower and received more significant penalties in QPP's MIPS program. This report has been widely cited as the reason for low participation, with headlines reporting the "pinch of MIPS" to "low MIPS system scores" as the reason for this trend.

JAMA relayed in their study: "In this cross-sectional study comparing psychiatrists with other outpatient physicians in the 2020 Medicare MIPS, psychiatrists had significantly lower performance scores and, consequently, were more likely to be penalized and less likely to receive bonus payments than their peers. These performance disparities were driven primarily by lower scores in the quality and promoting interoperability domains. In particular, psychiatrists performed more poorly on technology-dependent measures, such as participation in health information exchanges; care coordination measures, such as documentation of patient medications in medical records; and preventive care measures unrelated to psychiatry, such as cancer screening."

CareLogic provides a robust, interoperable solution for value-based reporting across our customer base—however, utilization waxes and wanes depending on incentive-based programming overall.

The concluding statement from the JAMA research provides excellent clarity into the overall landscape: "In this national cross-sectional study of Medicare psychiatrists and other outpatient physicians participating in the 2020 MIPS, psychiatrists received significantly lower performance scores, were penalized more frequently, and received fewer bonus payments than other outpatient physicians. CMS may want to reconsider the use of many current MIPS measures for assessing the performance of psychiatrists."

<p>Measure: Compliance of C-CDA Creation and C-CDA Scorecard Average § 170.315(b)(1) Transitions of care</p>	<p>Testing Methods: Compliance and Tool</p>
<p>Measure: Compliance with C-CDA Error Detection § 170.315(b)(1) Transitions of care</p>	
<p>Measure: Compliance of Data Export C-CDA and C-CDA Scorecard Average § 170.315(b)(6) Data export</p>	

CareLogic's RWT Plan indicated this measure to be coordinated with a customer, yet as shown in this results report, CareLogic did not achieve diverse and robust participation as initially expected.

CareLogic tested ten (10) sample C-CDA XML files through the HealthIT "C-CDA Scorecard 2.0" Edge Test Tool.

Area	Zero Errors	A+	A-	B+	B-	C	D
IG Errors	10						
Cures Act Errors	10						
Letter Grade					1	7	2
Miscellaneous		10					
Patient		10					
Problems				8	1		1
Immunizations							7
Encounters							
Vital Signs							8
Allergies				7	1		2
Lab Results							6
Medications				2			8
Procedures							5
Social History				8	1		

Comparatively, during the 2022 testing, only one sample file was uploaded (Grade = C). The shift to a more thorough overview by sampling files provided a systematic review and allowed excellent insight and understanding toward use and areas of improvement. While the overall grade remained moderately the same year over year, CareLogic’s data analysis has grown, providing a wealth of knowledge for continual quality improvement.

Measure: Compliance of QRDA Cat III with Cypress Validation Utility

§ 170.315(c)(1)—record and export
 § 170.315(c)(2)—import and calculate
 § 170.315(c)(3)—report

Testing Method: Compliance and Tool

CareLogic’s RWT Plan indicated this measure to be coordinated with a customer, yet as shown in this results report, CareLogic did not achieve diverse and robust participation as initially expected.

# of QRDA III Created	# Measures	# Zero Conformance	Percent Conforming	# Correctly Calculated	Percent Calculated
1	16	0	100	16	100

In the 2023 RWT Plans, CareLogic chose the outcomes listed to ensure compliance with the criteria, specifically the ability to calculate electronic clinical quality measures (eCQMs) and create a valid QRDA Category III XML file containing the calculation results. CareLogic used the Cat III XML file to validate against compliance using the Cypress Validation Utility (CVU). CareLogic achieved 100% conformance, zero errors, and completely accurate calculations in the results shown.

CareLogic attested to using ONC Test Procedure Version 1.4 and using Test Tool and Version Cypress 7.0.2. CareLogic uses Dynamic Health IT as our additional 3rd party partner for CQM reporting, using their CQM Solution.

Measure: Compliance of Portal Download and Email Transmit Capabilities and C-CDA Scorecard Average

§ 170.315(e)(1) View, download, and transmit to 3rd party

Testing Method: Compliance and Tool

CareLogic regularly reviews functionality as part of our continuous quality improvement and uses test clients in production/live environments to review the criteria and requirements. For this measure, we examined two specific outcomes:

- The number of clinical summaries sent from the portal to a direct address
- The number of clinical summaries sent from the portal to an email address

Year-Month	Live Partner Count	Via Direct	Via Email
2023-01	425	1	0
2023-02	428	0	0
2023-03	428	0	0
2023-04	429	0	0
2023-05	430	0	0
2023-06	433	0	0
2023-07	436	0	0
2023-08	443	0	0
2023-09	443	0	0
2023-10	447	0	0
2023-11	447	0	0
2023-12	447	0	0

The data showcases a yin and yang moment: the functionality is available, but use is low to none.

Patient engagement has long been a topic for discussion and dissection for many years in the healthcare IT ecosystem. ONC created the [Patient Engagement Playbook](#) quite some time ago, and it remains the industry-leading robust resource with regular updates. How do the benefits of an engaged patient benefit their care *and* the practice? ONC relays, simply, "Patient engagement can have big benefits for your practice and your patients: better communication, better care, and better outcomes. Health information technology (health IT) is a powerful tool to help you get there — so learn how to make it work for you."

The [OpenNotes](#) movement echoes these benefits and effects and takes the conversation even one step further:

"Patients who read notes report that they:

- have improved understanding of their health and medical conditions
- recall their care plan more accurately
- are better prepared for visits
- feel more in control of their care
- take better care of themselves
- take their medications as prescribed more frequently
- have more successful conversations and stronger relationships with their doctors."

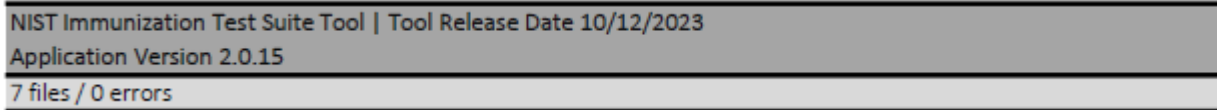
The benefits are overwhelmingly clear: engaging through portals provides positive care and outcomes, engagement and relationships, and overall understanding. The challenge, as these numbers show, is the leap for an engaged national patient population to use and participate with the information readily available.

Measure: Compliance of Immunization Message
 § 170.315(f)(1) Transmission to immunization registries

Testing Method: Compliance and Tool

CareLogic’s RWT Plan indicated this measure to be coordinated with a customer, yet as shown in this results report, CareLogic did not achieve diverse and robust participation as initially expected.

CareLogic created a sample of immunization VXU messages and utilized the NIST Immunization Test Suite tool for the following results:



The 2023 RWT Plans anticipated that +/- 75% of VXU messages created will have zero errors. As shown in the table above, a 100% error-free success rate was achieved.

Creation and transmission of VXU messages are vital components to overall interoperability and coordinated client care. It is unlikely that reporting on a large volume of immunization data will be achievable in care settings that CareLogic supports (behavioral healthcare and human services agencies) as they are not traditional settings for ongoing immunizations.

Measure: Compliance of Health Care Surveys
 § 170.315(f)(7) Transmission to public health agencies – Health Care Surveys

Testing Method: Compliance and Tool

CareLogic’s RWT Plan indicated this measure to be coordinated with a customer, yet as shown in this results report, CareLogic did not achieve diverse and robust participation as initially expected.

The 2023 RWT plans indicated "document clinical data which produce a Health Care Survey's message typical to the user's workflow and clinical documentation (e.g., influenza). After completing the encounter, the EHR will create the HL7 Electronic Case CDA message regarding the patient's information, which will be sent to the public health registry."

Where healthcare survey events were absent from any data events during the 2023 reporting period, similar to 2022, the ability to generate reports towards the criteria of this measure is available for use.

Measure: Compliance of API Resource Query Support

§ 170.315(g)(7) Application access—patient selection
 § 170.315(g)(9) Application access—all data request
 § 170.315(g)(10) Standardized API for patient and population services

Testing Method: Compliance and Tool

CareLogic’s RWT Plan indicated this measure to be coordinated with a customer, yet as shown in this results report, CareLogic did not achieve diverse and robust participation as initially expected.

This measure testing provided assurances toward the ability to connect to the EHR's API resources and query patient clinical data through the API. We anticipated that these metrics would show a shift toward using FHIR API -- and they mildly do just that -- but adoption has proven to be minimal in the behavioral healthcare and human services care settings, as shown in the following tables.

We look forward to a healthcare IT ecosystem where FHIR API provides ONC's goals – innovation, solution, and low cost.

"A nationwide ecosystem of standard FHIR APIs will enable more innovation and solutions developed by industry and reduce one-off interfaces, resulting in lower interoperability costs in the future."

[On the Road to Cures Update: Certified API Technology](#) | Avinash Shanbhag and Rob Anthony, August 19, 2022, HealthITbuzz

Count of registered applications (sandbox)

Year-Month	Live Partner Count	Sandbox Requested	Request Completed
2023-01	425	0	0
2023-02	428	0	0
2023-03	428	0	0
2023-04	429	0	0
2023-05	430	2	0
2023-06	433	0	0
2023-07	436	0	0
2023-08	443	2	2
2023-09	443	0	0
2023-10	447	0	0
2023-11	447	0	0
2023-12	447	0	0

Count of registered applications (production)

Year-Month	Live Partner Count	Production Requested	Request Completed	API Calls	API Calls w/o error
2023-01	425	0	0	0	n/a
2023-02	428	0	0	0	n/a
2023-03	428	0	0	0	n/a
2023-04	429	0	0	0	n/a
2023-05	430	0	0	0	n/a
2023-06	433	0	0	0	n/a
2023-07	436	0	0	0	n/a
2023-08	443	0	0	0	n/a
2023-09	443	0	0	0	n/a
2023-10	447	0	0	0	n/a
2023-11	447	0	0	0	n/a
2023-12	447	0	0	0	n/a

Count of Client Access Keys created

Year-Month	Live Partner Count	Total Number of Keys Created	Partners Creating Access Keys
2023-01	425	0	0
2023-02	428	0	0
2023-03	428	0	0
2023-04	429	0	0
2023-05	430	4	1
2023-06	433	0	0
2023-07	436	0	0
2023-08	443	1	1
2023-09	443	1	0
2023-10	447	0	0
2023-11	447	0	0
2023-12	447	0	0