NextGen® Enterprise 2026 Real World Testing Plan



2026 NextGen ENTERPRISE REAL WORLD TESTING PLAN

GENERAL INFORMATION

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

Developer Name: NextGen Healthcare

Product Name(s), Version Number(s) and Certified Health IT Product List (CHPL) Product Number(s):

 NextGen Enterprise EHR
 6.2021.1 Cures
 15.04.04.2054.Next.60.10.1.220318

 NextGen Enterprise EHR
 Enterprise 8
 15.04.04.2054.Next.80.12.1.250602

Developer Real World Testing Plan Page URL:

https://www.nextgen.com/certifications-and-cost-disclosures

JUSTIFICATION FOR REAL WORLD TESTING APPROACH

- This plan will cover NextGen Healthcare's approach to Real World Testing for our ambulatory care client base.
- Data will be gathered primarily in an automated fashion using database queries and logs. Where that is not possible, we will engage clients to gather the data in a direct approach.
- Each criterion will have between one to two metrics defined to showcase how the criterion is being used in real clinical scenarios. The number of customers used for each criterion as well as applicable timeframe will be defined as part of each metric.
- The main care settings used throughout this testing is the ambulatory care setting including multispecialty practices, community health centers and primary care organizations.
- No supported specialty types will be excluded from data collection and metric calculation.
- Success will be defined by our ability to highlight how each of these criteria is being used by providers in real patient care. Some criteria, for example (b)(3) ePrescribing, will have a much higher volume of use than (f)(7) Healthcare Surveys due purely to the nature of the criterion and its use for daily patient care.



STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

Standard (and version)	2024 CMS QRDA Category III IG
Updated certification criteria and	NextGen Enterprise EHR 6.2021.1 Cures
associated product	NextGen Enterprise EHR Enterprise 8
OUDI De le (New)	15.04.04.2054.Next.60.10.1.220318
CHPL Product Number	15.04.04.2054.Next.80.12.1.250602
Method used for standard update	SVAP
Date of ONC ACB notification	9/4/2024
Date of customer notification (SVAP only)	9/3/2024
Conformance measure	Conformance was demonstrated through the CMS validation tool
	NextGen Enterprise EHR attestation to the ACB on 8/12/2025 that the
	criteria below were updated to USCDIv3.
	170.315(b)(1) Transitions of Care
	170.315(b)(2) Clinical Information Reconciliation and Incorporation
USCDI updated certification	170.315(b)(11) Decision Support Intervention
criteria (and USCDI version)	170.315(e)(1) View, Download, and Transmit to 3rd Party
Citteria (and 030Di Version)	170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting
	170.315(g)(6) Consolidated CDA creation performance
	170.315(g)(9) Application Access – All Data Request
	170.315(g)(10) Standardized API for patient and population services

MEASURES USED IN OVERALL APPROACH

Description of Measurement/Metric

§ 170.315(b)(1) Transitions of Care

Measurement/Metric	Description
Count of total imported/exported CCD and Referral Note type C-CDAs into the EHR using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe • Percentage of successfully exported C-CDAs	A requirement of § 170.315(b)(1) Transitions of Care is the sending/receiving of Transition of Care documents.

NextGen® Enterprise 2026 Real World Testing Plan



Associated Certification Criteria

§ 170.315(b)(1) Transitions of Care

Measurement/Metric	Associated Certification Criteria
Count of total imported/exported	§ 170.315(b)(1) Transitions of Care
CCD and Referral Note type C-CDAs	
into the EHR using either NextGen®	
Share or NextGen® Rosetta Interface	
Messenger within a 3-month	
timeframe	
 Percentage of successfully 	
exported C-CDAs	
 Percentage of validated imported 	
C-CDAs	

Justification for Selected Measurement/Metric

§ 170.315(b)(1) Transitions of Care

Measurement/Metric	Justification
Count of total imported/exported CCD and Referral Note type C-CDAs into the EHR using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe	§ 170.315(b)(1) Transitions of Care This demonstrates our Health IT's ability to send/receive correctly formatted Transition of Care C-CDA documents and incorporate those records into patient charts. This metric will also provide information on the frequency of use of these C-CDA types across other healthcare networks.
 Percentage of successfully exported C-CDAs Percentage of validated imported C-CDAs 	

Expected Outcomes

§ 170.315(b)(1) Transitions of Care

Measurement/Metric	Expected Outcomes
Count of total imported/exported CCD and Referral Note type C-CDAs into the EHR using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe • Percentage of successfully	§ 170.315(b)(1) Transitions of Care Count of imported/exported C-CDA documents with validation successes/failures. Errors in standard validations will be tracked and analyzed as part of this metric. Expected outcome to meet or exceed 80% successful validation.
exported C-CDAsPercentage of validated imported C-CDAs	



Description of Measurement/Metric

§ 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Measurement/Metric	Description
Percentage of C-CDA records received using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe where medications, allergies, and problems were reconciled	A requirement of § 170.315(b)(2) Clinical Reconciliation and Incorporation is to receive a Transition of Care or Referral summary (C-CDA) and reconcile the patient's active clinical data including their medication list, allergy history, and problem list within the EHR alongside the external content. We will use database records to count the number of C-CDA documents received for transitions of care or referrals during the specified timeframe and where reconciliation of clinical data occurred.

Associated Certification Criteria

§ 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Measurement/Metric	Associated Certification Criteria
Percentage of C-CDA records received using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe where medications, allergies, and problems were reconciled	§ 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Justification for Selected Measurement/Metric

§ 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Measurement/Metric	Justification
Percentage of C-CDA records received using either NextGen® Share or NextGen® Rosetta Interface Messenger within a 3-month timeframe where medications, allergies, and problems were reconciled	This demonstrates our EHR's ability to receive and incorporate C-CDA documents in compliance with the § 170.315(b)(2) Clinical Information Reconciliation and Incorporation criterion. We will focus on C-CDA records received for transitions of care or referrals. This metric also quantifies how often reconciliation of clinical data occurs from C-CDA records received, although not all C-CDAs contain records with these three data elements.

Expected Outcomes

§ 170.315(b)(2) Clinical Information Reconciliation and Incorporation

Measurement/Metric	Expected Outcomes
Percentage of C-CDA records	Real World Testing will demonstrate the ability of organizations to receive
received using either NextGen® Share	and reconcile medications, allergies, and problems data within received C-
or NextGen® Rosetta Interface	CDAs in accordance with the § 170.315(b)(2) Clinical Information
Messenger within a 3-month	Reconciliation and Incorporation criterion. We will capture the
timeframe where medications,	percentages associated with incorporation of the clinical data elements
	received in C-CDA 1.1 and/or 2.1 format and made available for use within



allergies, and problems were	the EHR. The system workflow includes matching the received document
reconciled	with the correct patient, and then a user can simultaneously review the
	patient's data attributes in the EHR along with the data received in the C-
	CDA. The user can validate the codified data and choose to incorporate
	new or updated records as needed.
	We expect that the C-CDA Reconciliation rate will be low when only considering C-CDAs where all three data elements (medications, allergies, and problems)sections have been reconciled.

Description of Measurement/Metric

§ 170.315(b)(3) Electronic Prescribing

Measurement/Metric	Description
Calculation of the percentage of successful transactions for each supported message type over a 10-day timeframe, along with total counts for each transaction type.	The primary requirement of § 170.315(b)(3) Electronic Prescribing is to demonstrate compliance with sending and receiving specific prescription transactions electronically as per the NCPDP SCRIPT 2017071 standard. We will use database records to calculate the percentage of successful transactions for supported transaction types. Transaction types may include NewRx, CancelRxRequest and Response, Renewal Request and Response, RxChange Request and Response, RxFill Notification and Indicator change, & Medication History Request and Response.

Associated Certification Criteria

§ 170.315(b)(3) Electronic Prescribing

Measurement/Metric	Associated Certification Criteria
Calculation of the percentage of successful transactions for each supported message type over a 10-day timeframe, along with total counts for each transaction type.	§ 170.315(b)(3) Electronic Prescribing

Justification for Selected Measurement/Metric

§ 170.315(b)(3) Electronic Prescribing

Measurement/Metric	Justification
Calculation of the percentage of successful transactions for each supported message type over a 10-day timeframe, along with total counts for each transaction type.	This measurement will demonstrate our ability to generate and receive ePrescribing transactions in accordance with the § 170.315(b)(3) Electronic Prescribing standards. The volume of transactions in the 10-day timeframe will provide feedback on the frequency and volume of transactions in real world patient care.
	Note: A 10-day timeframe for data collection was identified for this criterion due to the volume of ePrescribing transactions seen daily. As part of this testing, we will analyze five random samples of each transaction type from different providers to ensure compliance with the 2017071 NCPDP SCRIPT format requirements. All our ePrescribing transactions are



transmitted to and from our EHR product through the Surescripts network,
and we use First Databank as our medication compendium data source.

§ 170.315(b)(3) Electronic Prescribing

Measurement/Metric	Expected Outcomes
Calculation of the percentage of successful transactions for each supported message type over a 10-day timeframe, along with total counts for each transaction type.	This measurement will demonstrate our EHR's conformance to the § 170.315(b)(3) Electronic Prescribing criterion. We anticipate at least a 90% overall success rate for supported transaction types as we have employed a rigorous process for message formatting and internal error handling, pharmacy, and intermediary downtime/connection issues. We anticipate that the majority of the transactions will pass message validation.
	Note: While we do anticipate a high success rate of transactions, there will be some transactions resulting in error as part of data validation implemented to ensure prescriptions are compliant with the network standards as well as low adoption of some transaction types by providers, pharmacies, partners, etc.

Description of Measurement/Metric

§ 170.315(b)(10) EHI Export

Measurement/Metric	Description
Count of single patient export files	A requirement of § 170.315(b)(10) Electronic Health Information export is
created during a 3-month	that a sub-set of users can create export file(s) of a single patient's
timeframe.	electronic health information (EHI) without developer assistance. We will
	use database records to count the number of single patient exports
	successfully completed during the specified timeframe.

Associated Certification Criteria

§ 170.315(b)(10) EHI Export

Measurement/Metric	Associated Certification Criteria
Count of single patient export files created during a 3-month timeframe.	§ 170.315(b)(10) EHI Export

Justification for Selected Measurement/Metric

§ 170.315(b)(10) EHI Export

Measurement/Metric	Justification
Count of single patient export files	This demonstrates our EHR's ability to export single patient files containing
created during a 3-month	all of their EHI. This metric will also provide information on the demand for
timeframe.	this capability.



§ 170.315(b)(10) EHI Export

Measurement/Metric	Justification
Count of single patient export files created during a 3-month timeframe.	Real World Testing will demonstrate the ability of organizations to create single patient EHI export files in accordance with the 170.315(b)(10) criterion. The expected outcome is that the count will be non-zero. However, we do expect low counts as we anticipate that organizations will continue to use their previously existing mechanisms for exporting single patient data, including interoperability methods or manual.

Description of Measurement/Metric

§ 170.315(c)(1) Clinical Quality Measures (CQM) – Record and Export

§ 170.315(c)(2) Clinical Quality Measures (CQM) – Import and Calculate

§ 170.315(c)(3) Clinical Quality Measures (CQM) – Report

Measurement/Metric	Description
Collect the count of imported/exported QRDA Category (CAT) I files using NextGen® HQM	The requirement of § 170.315(c)(1) Clinical Quality Measures – Record and Export is to record clinical data in the EHR and export it in the QRDA CAT I format.
during the reporting year:Number of successfully imported/exported QRDA CAT I	The requirement of § 170.315(c)(2) Clinical Quality Measures – Import and Calculate is the ability to import QRDA CAT I files and use the clinical data to calculate CQMs.
files • Number of failed to import/export QRDA CAT I files	Counting the QRDA CAT I files imported/exported will confirm that the above functionality is working in production.
Collect the count of exported QRDA CAT III files using NextGen® HQM during the reporting year:	The requirement of § 170.315(c)(3) Clinical Quality Measures – Report is the ability to export QRDA CAT III files containing calculated CQMs and successfully transmit them for quality reporting.
 Number of exported QRDA CAT III files with submission success Number of exported QRDA CAT III file failures 	Counting the QRDA CAT III files exported and validating successful submission will confirm that the above functionality is working in production.

Associated Certification Criteria

§ 170.315(c)(1) Clinical Quality Measures – Record and Export

§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate

§ 170.315(c)(3) Clinical Quality Measures – Report

Measurement/Metric	Associated Certification Criteria
Collect the count of exported QRDA CAT I files using NextGen® HQM during the reporting year:	§ 170.315(c)(1) Clinical Quality Measures – Record and Export



Number of successfully exported QRDA CAT I files Number of failed to export QRDA CAT I files	
Collect the count of imported QRDA CAT I files using NextGen® HQM during the reporting year:	§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate
Number of successfully imported QRDA CAT I files	
Number of failed to import QRDA CAT I files	
Collect the count of exported QRDA CAT III files using NextGen® HQM during the reporting year:	§ 170.315(c)(3) Clinical Quality Measures – Report
Number of exported QRDA CAT III files with submission success	
Number of exported QRDA CAT III files with submission failure	

Justification for Selected Measurement/Metric

§ 170.315(c)(1) Clinical Quality Measures – Record and Export

§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate

§ 170.315(c)(3) Clinical Quality Measures – Report

Measurement/Metric	Justification
Collect the count of exported QRDA CAT I files using NextGen® HQM during the reporting year: • Successfully exported • Failed to export	§ 170.315(c)(1) Clinical Quality Measures – Record and Export This demonstrates our Health IT's ability to export correctly formatted QRDA CAT I files. This metric will also provide information on the frequency of use of this functionality by ambulatory providers using NextGen Enterprise EHR.
Collect the count of imported QRDA CAT I files using NextGen® HQM during the reporting year: • Successfully imported • Failed to import	§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate This demonstrates our Health IT's ability to import correctly formatted QRDA CAT I files. This metric will also provide information on the frequency of use of this functionality by ambulatory providers using NextGen Enterprise EHR.
Collect the count of exported QRDA CAT III files using NextGen® HQM during the reporting year: • Successfully exported • Failed to export • Successfully transmitted • Failed to transmit	§ 170.315(c)(3) Clinical Quality Measures – Report This demonstrates our Health IT's ability to export correctly formatted QRDA CAT III files that users can successfully transmit for quality reporting. This metric will also provide information on the frequency of use of this functionality by ambulatory providers using NextGen Enterprise EHR.



§ 170.315(c)(1) Clinical Quality Measures – Record and Export

§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate

§ 170.315(c)(3) Clinical Quality Measures – Report

Measurement/Metric	Expected Outcomes
Collect the count of exported QRDA CAT I files using NextGen® HQM during the reporting year: • Percentage of successfully exported QRDA CAT I files.	§ 170.315(c)(1) Clinical Quality Measures – Record and Export Count of exported QRDA CAT I files with a success/failed status. Errors will be tracked and analyzed as part of this metric. Expected outcome to meet or exceed 80% success rate.
Percentage of failed to export QRDA CAT I.	
Collect the count of imported QRDA	§ 170.315(c)(2) Clinical Quality Measures – Import and Calculate
CAT I files using NextGen® HQM during the reporting year:	Count of imported QRDA CAT I files with a success/failed status. Errors will be tracked and analyzed as part of this metric.
Percentage of successfully	Expected outcome to meet or exceed 80% success rate.
imported QRDA CAT I files.	In the event that no QRDA CAT I files were imported, we will test import
 Percentage of failed to import QRDA CAT I. 	using a file generated by Cypress.
Collect the count of exported QRDA	§ 170.315(c)(3) Clinical Quality Measures – Report
CAT III files using NextGen® HQM during the reporting year:	Count of exported QRDA CAT III file successes/failures and confirmation of successful transmission of files. Errors in standard exports will be tracked
Percentage of QRDA CAT III export	and analyzed as part of this metric.
successes/failures	Expected outcome to meet or exceed 80% success rate.
Percentage of exported QRDA CAT III files successfully transmitted	Clients who exported QRDA CAT III files will be contacted to validate that their QRDA CAT III files were successfully transmitted.
	Expected outcome to meet or exceed 80% successful transmission.

Description of Measurement/Metric

§ 170.315(e)(1) View, Download, and Transmit to 3rd Party

Measurement/Metric	Description
Patients can successfully	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd
View a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	Party is that patients (and their authorized representative) must be able to use Health IT to View the C-CDA.
% of errors compared to success over a 1-month timeframe	By querying the system to capture views attempted and the percentage of successful attempts, we will confirm that this functionality is available for the patient population.
Patients can successfully	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd
Download a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	Party is that patients (and their authorized representative) must be able to use Health IT to Download the C-CDA.
% of errors compared to success over a 1-month timeframe	By querying the system to capture downloads attempted and the percentage of successful attempts versus failures, we will confirm that this functionality is available for the patient population.



Patients can successfully	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd
Transmit a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	Party is that patients (and their authorized representative) must be able to use Health IT to Transmit the C-CDA.
% of errors compared to success over a 1-month timeframe	By querying the system to capture transmissions attempted and the percentage of successful attempts versus failures, we will confirm that this functionality is available for the patient population.

Associated Certification Criteria

§ 170.315(e)(1) View, Download, and Transmit to 3rd Party

Measurement/Metric	Associated Certification Criteria
Patients can successfully	§ 170.315(e)(1) View, Download, and Transmit to 3rd Party
View a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	
% of errors compared to success over a 1-month timeframe	
Patients can successfully	§ 170.315(e)(1) View, Download, and Transmit to 3rd Party
Download a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	
% of errors compared to success over a 1-month timeframe	
Patients can successfully	§ 170.315(e)(1) View, Download, and Transmit to 3rd Party
Transmit a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	
% of errors compared to success over a 1-month timeframe	

Justification for Selected Measurement/Metric

§ 170.315(e)(1) View, Download, and Transmit to 3rd Party

Measurement/Metric	Justification
Patients can successfully View a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd Party is that patients (and their authorized representative) must be able to use Health IT to View the C-CDA. We will use database records to count the number of C-CDA Views of the Patient Portal during the specified timeframe. By showing the number of successful C-CDA Views for those patients who have activated their accounts we will confirm that patients can do so successfully with a minor margin of error.
% of errors compared to success over	
Patients can successfully	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd
Download a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	Party is that patients (and their authorized representative) must be able to use Health IT to Download the C-CDA.
% of errors compared to success over a 1-month timeframe	We will use database records to count the number of the C-CDA Downloads from the Patient Portal during the specified timeframe. By showing that for those patients who have activated their accounts and are



	now attempting to Download , they can do so successfully with a minor margin of error.
Patients can successfully	A requirement of § 170.315(e)(1) View, Download, and Transmit to 3 rd
Transmit a C-CDA using Medfusion Patient Portal (NextGen® PxP Portal)	Party is that patients (and their authorized representative) must be able to use Health IT to Transmit the C-CDA.
% of errors compared to success over a 1-month timeframe	We will use database records to count the number of C-CDA Transmissions from the Patient Portal during the specified timeframe. By showing that for those patients who have activated their accounts and are now attempting to Transmit , they can do so successfully with a minor margin of error.

§ 170.315(e)(1) View, Download, and Transmit to 3rd Party

Measurement/Metric	Expected Outcomes
Patients can successfully	This will show that patients who have activated their accounts and are now
View a C-CDA using Medfusion	attempting to View can do so successfully with a small margin of error.
Patient Portal (NextGen® PxP Portal)	Expected outcome = greater than 75% success rate
% of errors compared to success over a 1-month timeframe	
Patients can successfully	This will show that patients who have activated their accounts and are now
Download a C-CDA using Medfusion	attempting to Download can do so successfully with a small margin of
Patient Portal (NextGen® PxP Portal)	error.
% of errors compared to success over	Expected outcome = greater than 75% success rate.
a 1-month timeframe	
Patients can successfully	This will show that patients who have activated their accounts and are now
Transmit a C-CDA using Medfusion	attempting to Transmit can do so successfully with a small margin of error.
Patient Portal (NextGen® PxP Portal)	Expected outcome = greater 75% success rate.
% of errors compared to success over	
a 1-month timeframe	

Description of Measurement/Metric

§ 170.315(f)(1) Transmission to Immunization Registries

Measurement/Metric	Description
Count of Immunization orders (VXU)	A requirement of § 170.315(f)(1) Transmission to Immunization Registries
reported to Registries NextGen	is to create immunization orders for patients for transmission to
Rosetta Interface Messenger in a 1-	immunization registries using proper code sets for both newly
month timeframe	administered and historical vaccines. We will use database records to
	count the number of immunization orders sent during the specified
	timeframe to demonstrate our ability to support this transmission of public
	health data.
Count of Immunization queries and	A requirement of § 170.315(f)(1) Transmission to Immunization Registries
responses (QBP) received from	is to request immunization history and forecast information for a patient
Registries NextGen Rosetta Interface	from an immunization registry, where that information can then be
Messenger in a 1-month timeframe	displayed and access within the EHR. We will use database records to count



the number of immunization query and response messages seen during the
specified timeframe to demonstrate our ability to support this type of
transaction.

Associated Certification Criteria

§ 170.315(f)(1) Transmission to Immunization Registries

Measurement/Metric	Associated Certification Criteria
Count of Immunization orders (VXU) reported to Registries NextGen Rosetta Interface Messenger in a 1-month timeframe	§ 170.315(f)(1) Transmission to Immunization Registries
Count of Immunization queries and responses (QBP) received from Registries NextGen Rosetta Interface Messenger in a 1-month timeframe	§ 170.315(f)(1) Transmission to Immunization Registries

Justification for Selected Measurement/Metric

§ 170.315(f)(1) Transmission to Immunization Registries

Measurement/Metric	Justification
Count of Immunization orders reported to Registries NextGen Rosetta Interface Messenger in a 1-month timeframe	This demonstrates our Health IT's ability to generate appropriately formatted immunization transmission messages for incorporation by different Immunization Registries across the country.
Count of Immunization queries and responses received from Registries NextGen Rosetta Interface Messenger in a 1-month timeframe	This demonstrates our Health IT's ability to generate appropriately formatted immunization history and forecast request messages for different Immunization Registries across the country and receive their response messages and content.

Expected Outcomes

§ 170.315(f)(1) Transmission to Immunization Registries

Measurement/Metric	Expected Outcomes
Count of Immunization orders reported to Registries NextGen Rosetta Interface Messenger in a 1-month timeframe	Real World Testing will demonstrate the ability of organizations to generate and send immunization order transmissions following the format specified in the IG IM release 1.5 and the July 2015 addendum in accordance with the § 170.315(f)(1) Transmission to Immunization Registries criterion. Transmissions can be for one or multiple vaccines at a time, codified using the NDC and CVX when the vaccine is administered by the organization, and the CVX at a minimum when reporting as a historical vaccination record.
	We anticipate a significant number of transactions will be seen during this timeframe as many of our care settings administer vaccines and report to their city and/or state registries using HL7.



	Success percentage of transactions sent will also be reported. Note that some registries have a transmission format that may not guarantee our ability to ascertain full success of the transaction. There are known challenges throughout the IIS and EHR community where streamlined error handling is not fully integrated by both sides of the network. Error percentages are expected to be less than 10%.
Count of Immunization queries and responses (QBP) received from Registries NextGen Rosetta Interface Messenger in a one-month timeframe	Real World Testing will demonstrate the ability of organizations to query and receive immunization history and forecast transmissions using the HL7 2.5.1 standard, IG IM release 1.5 and July 2015 addendum, in accordance with § 170.315(f)(1) Transmission to Immunization Registries criterion. We anticipate a lower volume of this transaction due to lower adoption of bi-directional capabilities across the state registry(s) technology and in our care setting, but this should increase year over year.
	Note that some registries have a transmission format that may not guarantee our ability to ascertain full success of the transaction. There are known challenges throughout the IIS and EHR community where streamlined error handling is not fully supported by both sides of the network. Error percentages are expected to be less than 10%.

Description of Measurement/Metric

§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic Surveillance

Measurement/Metric	Description
Count of Syndromic Surveillance	A requirement of § 170.315(f)(2) Transmission to Public Health Agencies
Reports generated using NextGen	- Syndromic Surveillance is to electronically transmit patient syndrome-
Rosetta Interface Messenger over a 3-	based health surveillance information using the specified standards. We
month timeframe	will use database records to count the number of Syndromic Surveillance
	reports generated during the specified time frame.

Associated Certification Criteria

§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic Surveillance

Measurement/Metric	Associated Certification Criteria
Count of Syndromic Surveillance Reports generated using NextGen Rosetta Interface Messenger over a 3- month timeframe	§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic Surveillance

Justification for Selected Measurement/Metric

§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic Surveillance

Measurement/Metric	Justification
Count of Syndromic Surveillance	§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic
Reports generated using NextGen	Surveillance This demonstrates our Health IT's ability to generate
Rosetta Interface Messenger over a 3-month timeframe	Syndromic Surveillance Reports. This metric will also provide information



on the frequency of use of this report type. Errors in file generation will
be counted if identified during the data collection period.

§ 170.315(f)(2) Transmission to Public Health Agencies – Syndromic Surveillance

Measurement/Metric	Expected Outcomes
Count of Syndromic Surveillance	Real World Testing will demonstrate the ability of urgent care
Reports generated using NextGen	organizations to generate syndrome-based public health Syndromic
Rosetta Interface Messenger over a 3-	Surveillance reports for electronic transmission using the HL7 2.5.1
month timeframe	standard, the PHIN messaging guide, and the corresponding August 2015
	erratum, in accordance with § 170.315(f)(2) Transmission to Public
	Health Agencies – Syndromic Surveillance criterion. There will likely be a
	low volume of reports generated due to this criterion not applying to the
	whole ambulatory care setting. We may need to demonstrate
	transmission of this report using mock-production data.

Description of Measurement/Metric

§ 170.315(f)(4) Transmission to Cancer Registries

Measurement/Metric	Description
Count of Cancer registry reports	The Real World Testing of § 170.315(f)(4) Transmission to Cancer
generated using NextGen Rosetta	Registries demonstrates our Health IT's ability to generate Cancer registry
Interface Messenger over a 3-month	report documents. This metric will also provide information on the
timeframe	frequency of use of this report type. Errors in file generation will
	be counted if identified during the data collection period.

Associated Certification Criteria

§ 170.315(f)(4) Transmission to Cancer Registries

Measurement/Metric	Associated Certification Criteria
Count of Cancer registry reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	§ 170.315(f)(4) Transmission to Cancer Registries

Justification for Selected Measurement/Metric

§ 170.315(f)(4) Transmission to Cancer Registries

Measurement/Metric	Justification
Count of Cancer registry reports	This demonstrates our Health IT's ability to generate Cancer registry
generated using NextGen Rosetta	report documents. This metric will also provide information on the
Interface Messenger over a 3-month	frequency of use of this report type. Errors in file generation will
timeframe	be counted if identified during the data collection period.



§ 170.315(f)(4) Transmission to Cancer Registries

Measurement/Metric	Expected Outcomes
Count of Cancer registry reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	Real World Testing will demonstrate the ability of organizations to generate cancer case information for sending via electronic transmission using the HL7 IG for CDA release 2, DSTU release 1.1, in accordance with § 170.315(f)(4) Transmission to Cancer Registries criterion using the specified code sets for SNOMED CT and LOINC. There will likely be a low volume of reports generated due to limited adoption of this functionality across our care setting.

Description of Measurement/Metric

§ 170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting

Measurement/Metric	Description
Count of Electronic Case Reports generated using NextGen Rosetta Interface Messenger AND NextGen Share over a 3-month timeframe	A requirement of § 170.315(f)(5) Transmission to Public Health Agencies - Electronic Case Reporting is to generate a case report based on designated trigger codes for electronic transmission. We will use database records to count the number of Electronic Case Reports generated during
	the specified timeframe containing the specified code sets.

Associated Certification Criteria

§ 170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting

Measurement/Metric	Associated Certification Criteria
Count of Electronic Case Reports generated NextGen Rosetta Interface Messenger AND NextGen Share over a 3-month timeframe	§ 170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting

Justification for Selected Measurement/Metric

§ 170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting

Measurement/Metric	Justification
Count of Electronic Case Reports generated NextGen Rosetta Interface Messenger AND NextGen Share over a 3-month timeframe	This demonstrates our Health IT's ability to generate Electronic Case Report documents in accordance with § 170.315(f)(5) Transmission to Public Health Agencies - Electronic Case Reporting. This metric will also provide information on the frequency of use of this electronic report type.



§ 170.315(f)(5) Transmission to Public Health Agencies – Electronic Case Reporting

Measurement/Metric	Expected Outcomes
Count of Electronic Case Reports NextGen Rosetta Interface Messenger AND NextGen Share generated over a 3-month timeframe	Real World Testing will demonstrate the ability of organizations to generate and send Electronic Case Reports using the specified code sets in accordance with § 170.315(f)(5) Transmission to Public Health Agencies - Electronic Case Reporting criterion. These reports are generated based on a matched value from a patient visit or encounter to a trigger code table that is maintained based on definition from public health authorities.
	There will likely be a low volume of reports generated due to the limited adoption of this functionality across our care setting.

Description of Measurement/Metric

§ 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys

Measurement/Metric	Description
Count of Healthcare Survey reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	A requirement of § 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys is to create health care survey data for electronic transmission to the CDC following the mandatory elements and requirements of the specific C-CDA guide. We will use database records to count the number of Healthcare Survey reports generated during the specified timeframe.

Associated Certification Criteria

§ 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys

Measurement/Metric	Associated Certification Criteria
Count of Healthcare Survey reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	§ 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys

Justification for Selected Measurement/Metric

§ 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys

Measurement/Metric	Justification
Count of Healthcare Survey reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	This demonstrates our Health IT's ability to generate Healthcare Survey report documents in any of the NHCS IG versions (1.0-1.2). This metric will also provide information on the frequency of use of this report type. Errors in file generation will be counted if identified during the data collection period.



§ 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys

Measurement/Metric	Expected Outcomes
Count of Healthcare Survey reports generated using NextGen Rosetta Interface Messenger over a 3-month timeframe	Real World Testing will demonstrate the ability of organizations to generate Healthcare Survey reports in compliance with all mandatory elements and requirements of the HL7 IG for CDA R2 Health Care Surveys Release 1 in accordance with § 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys criterion. There will likely be a low volume of reports (if any) generated due to limited adoption of this functionality across our care setting. We may need to demonstrate transmission of this report using mock-production data.

Description of Measurement/Metric

- § 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

Measurement/Metric	Description
Query the API to successfully match a patient, generate an access token and report the number of successes vs failures over a 90-day timeframe to determine the success/failure rate.	The requirements of § 170.315(g)(7) Application Access – Patient Selection is to demonstrate the ability of a patient to authenticate to the API to retrieve data from the Certified EHR. The following Relied Upon Software is needed to demonstrate these criteria: NextGen® Patient Access API, Medfusion Patient Portal (NextGen® PxP Portal).
Using ONC's Edge Testing Tool (ETT), validate a C-CDA R2.1 compliant document retrieved from NextGen Enterprise EHR and report the number of successes vs failures over a 90-day timeframe to determine a success/failure rate.	The requirements of § 170.315(g)(9) Application Access – All Data Request are to demonstrate the ability of a patient to retrieve from the Certified EHR individual categories of USCDI v3 data as well as retrieval of a compliant C-CDA R2.1 document. The following Relied Upon Software is needed to demonstrate these criteria: NextGen® Patient Access API.
Using the Inferno Test Tool demonstrate single and multi-patient API access as well as an NextGen Enterprise EHR launched practitioner-based app over a 90-day timeframe to determine a success/failure rate.	The requirement of § 170.315(g)(10) Standardized API for Patient and Population Services is to demonstrate standalone patient app access in both full and limited scopes, demonstrate an API practitioner-based app within the EHR workflow, demonstrate a single patient's access via the API, and demonstrate multi-patient authorization and API access. The following Relied Upon Software is needed to demonstrate these criteria: NextGen® FHIR API.



Associated Certification Criteria

§ 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

Measurement/Metric	Associated Certification Criteria
Query the API to successfully match a patient, generate an access token and report the number of successes vs. failures over a 90-day timeframe to determine the success/failure rate.	A requirement of § 170.315(g)(7) Application Access – Patient Selection and (g)(9) Application Access – All Data Request is to demonstrate the ability for the API to successfully match a patient in the EHR and generate an access token.
Using ONC's Edge Testing Tool (ETT), validate a C-CDA R2.1 compliant document retrieved from NextGen Enterprise EHR and report the number of successes vs failures over a 90-day timeframe to determine a success/failure rate.	A requirement of (g)(9) Application Access – All Data Request is to demonstrate the ability of the EHR to retrieve a compliant C-CDA R2.1 document.
Using the Inferno Test Tool demonstrate single and multi-patient API access as well as a NextGen Enterprise EHR launched practitioner-based app over a 90-day timeframe to determine a success/failure rate.	A requirement of § 170.315(g)(10) Standardized API for Patient and Population Services is to demonstrate the ability of the EHR to launch a practitioner-based app, as well has validate patient access in both single and multi-patient scenarios.

Justification for Selected Measurement/Metric

§ 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

Measurement/Metric	Justification
Query the API to successfully match a patient, generate an access token and report the number of successes vs. failures over a 90-day timeframe to determine the success/failure rate.	§ 170.315(g)(7) Application Access – Patient Selection and (g)(9) Application Access – All Data Request Demonstrates how the API can successfully match a patient's identity in the EHR and receive an access token.
Using ONC's Edge Testing Tool (ETT), validate a C-CDA R2.1 compliant document retrieved from NextGen Enterprise EHR and report the number of successes vs failures over a 90-day timeframe to determine a success/failure rate.	§ 170.315(g)(9) Application Access – All Data Request Demonstrates that the EHR can successfully retrieve a C-CDA R2.1 compliant document from the EHR.
Using the Inferno Test Tool demonstrate single and multi-patient API access as well as a NextGen Enterprise EHR launched practitioner-	§ 170.315(g)(10) Standardized API for Patient and Population Services Demonstrates single and multi-patient API access as well as an EHR launched practitioner-based app.



based app over a 90-day timeframe to	
determine a success/failure rate.	

- § 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

Measurement/Metric	Expected Outcomes
Query the API to successfully match a patient, generate an access token and report the number of successes vs. failures over a 90-day timeframe to determine the success/failure rate.	§ 170.315(g)(7) Application Access – Patient Selection and (g)(9) Application Access – All Data Request The query from random client databases will have sufficient information to match the intended patient and return an access token/ID to be able to perform subsequent data calls on the matched patient. We expect a 95% or greater success rate.
Using ONC's Edge Testing Tool (ETT), validate a C-CDA R2.1 compliant document retrieved from NextGen Enterprise EHR and report the number of successes vs failures over a 90-day timeframe to determine a success/failure rate.	§ 170.315(g)(9) Application Access – All Data Request Successfully respond to requests for a C-CDA R2.1 document (all data or data range specific) containing all elements of USCDI v3. Validate an EHR C-CDA R2.1 document using ONC's Inferno Test Tool for 3 random practices and report the success/error rate. We expect a 95% or greater success rate.
Using the Inferno Test Tool demonstrate single and multi-patient API access as well as a NextGen Enterprise EHR launched practitioner-based app over a 90-day timeframe to determine a success/failure rate.	§ 170.315(g)(10) Standardized API for Patient and Population Services Standalone patient access in both a full and limited permission scenario to return full USCDI v3 data in FHIR format. Successfully demonstrate an EHR based practitioner application registration and launch in the provider's workflow. Successfully demonstrate multi-patient authorization with refresh tokens using the API for a predetermined list of patients and scopes. We expect a 95% or greater success rate.

Description of Measurement/Metric

§ 170.315(h)(1) Direct Project

Measurement/Metric	Description
Collect the count of sent/received Direct messages using NextGen® Share within a 3-month timeframe:	Counting the Transition of Care C-CDA documents sent/received compared to the count of § 170.315(h)(1) Direct Project - Direct Messages sent/received with C-CDAs attached will confirm that this
Number of Successfully sent Direct Messages	functionality is working in production.
Number of Failed to send Direct Messages	



Associated Certification Criteria

§ 170.315(h)(1) Direct Project

Measurement/Metric	Associated Certification Criteria	
Collect the count of sent/received Direct messages using NextGen® Share within a 3-month timeframe:	§ 170.315(h)(1) Direct Project	
Number of Successfully sent Direct Messages		
Number of Failed to send Direct Messages		

Justification for Selected Measurement/Metric

§ 170.315(h)(1) Direct Project

Measurement/Metric	Justification
Collect the count of sent/received Direct messages using NextGen® Share within a 3-month timeframe: • Number of Successfully sent Direct	§ 170.315(h)(1) Direct Project This demonstrates our Health IT's ability to send/receive correctly formatted Direct Messages. This metric will also provide information on the frequency of use of this protocol by ambulatory providers using NextGen Enterprise EHR.
Messages	
 Number of Failed to send Direct Messages 	

Expected Outcomes

§ 170.315(h)(1) Direct Project

Measurement/Metric	Expected Outcomes
Collect the count of sent/received Direct messages using NextGen® Share within a 3-month timeframe:	§ 170.315(h)(1) Direct Project Count of sent/received messages with a success/failed status. Errors in transmission will be tracked and analyzed as part of this metric.
Number of Successfully sent Direct Messages	Expected outcome to meet or exceed 80% success rate.
Number of Failed to send Direct Messages	

Care Setting(s)

Care Setting	Justification	
Ambulatory	NextGen Enterprise EHR supports most specialties in ambulatory care. All specialties have access to NextGen Enterprise EHR technology that allows for clinical documentation, care coordination, external reporting, transmission to public health agencies, and electronic interactions with third parties.	

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NextGen® Enterprise 2026 Real World Testing Plan

SCHEDULE OF KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
Finalize Real World Test Plan and Submit to the ONC-ACB (Drummond)	Ambulatory	Q4 2025
Identify Clients for Participation where applicable	Ambulatory	Q1 2026
The queries that will be used are developed and validated with internal data, client systems and/or transactions	Ambulatory	Q1 2026
Data collection and/or observation from client systems	Ambulatory	Q2 2026
Validation and analysis of data and metrics created	Ambulatory	Q2 2026
Report created and submitted to ONC-ACB (Drummond)	Ambulatory	Q1 2027

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NextGen® Enterprise 2026 Real World Testing Plan

ATTESTATION

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

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Authorized Representative Signature:

Date: 8/28/2025

i Certified health IT continues to be compliant with the certification criteria, including the required technical standards and vocabulary codes sets; certified health IT is exchanging EHI in the care and practice settings for which it is marketed for use; and EHI is received by and used in the certified health IT. (85 FR 25766) ii https://www.federalregister.gov/d/2020-07419/p-3582