



StrateqEHR for Hospitals and Health Systems v5 2025 Real-World Testing Results

General Information

Results Report ID Number	20241111str
Developer Name	Strateq Health, Inc
Product Name(s)	StrateqEHR
Version Number(s)	V5
Certified Health IT Product List (CHPL) ID(s)	15.05.05.3097.STRQ.01.00.1.220105
Developer Real World Testing Plan Page URL	https://strateqhealth.com/product-certification/
Developer Real World Testing Results Page URL	https://strateqhealth.com/product-certification/

Justification for Real World Testing approach

In accordance with the ONC's requirement that **Real World Testing** be utilized to ensure Certified Health IT continues to perform as intended, Strateq Health conducted testing and measured observations of interoperability and data exchange. This test result focused on capturing and documenting the number of times that certified capability is successfully utilized in a real-world setting.

Real World Testing is designed to augment previous certification testing, ensuring that StrateqEHR continues to meet certification requirements in live settings without duplicating prior certification efforts.

Where no evidence of utilization exists, due to lack of adoption of certified capabilities, or inability to capture said data for other reasons, we will demonstrate the certified capabilities using a setting as close to real-world implementation as possible including synthetic testing.

We utilized a **single approach** to demonstrate successful real-world implementations. The approach used was Summative testing.

Summative testing methods were used to measure which certified actions were performed during a prescribed period. This was evaluated by running internal reports and reviewing audit logs within StrateqEHR to determine the frequency of actions performed during the testing period, as well as the success of these actions.

The testing period was completed in **Q3 2025**.

Standards Updates

StrateqEHR has no significant changes nor voluntary SVAP standards updates since our last certification.

Care Settings

StrateqEHR is marketed to small, rural Critical Access Hospitals, Small/Prospective Payment System Hospitals, as well as Free Standing Emergency Rooms.

Care Setting	Justification
Critical Access Hospitals	Critical Access Hospitals (CAHs) serve rural areas across the US – they must be designated as a CAH based on multiple criteria, including must be more than 35 miles from the nearest hospital facility, limited to inpatient stays less than 4 days, utilize a cost-based reimbursement for Medicare services (differing from non-CAH facilities). They frequently work closely with extended care facilities (LTAC). Due to the nature and location of these facilities, utilization and adoption of electronic health systems and interoperability functionality is often limited.
Prospective Payment System Hospitals	PPS (Prospective Payment System) hospitals are reimbursed on a fixed payment schedule, are not limited to shortened hospital stays or location. These facilities may utilize their EHRs more robustly than CAH or Free-Standing Emergency Room facilities.
Free-Standing Emergency Rooms	Free-Standing Emergency Rooms, are licensed facilities, structurally separate from a hospital and provide emergency care. These facilities do not fall under CAH or PPS guidelines and until COVID were not approved to bill Medicare/Medicaid. Most of these facilities do not utilize interoperability functionality, nor are they certified to participate in the Promoting Interoperability Medicare Program. Although our system supports the use of interoperability for these facilities, adoption and utilization is rarely used.

Measures used in Overall Approach

For the metric we described these elements:

- Description of metric
- Associated certification criteria
- Care setting addressed
- Expected Outcomes
- Challenges Encountered

Summative Assessment Metrics

The following metrics were measured by reviewing audit logs and reporting systems available to track the behavior of StrateqEHR during the defined timeframe. These metrics reflect the core elements of the criteria, demonstrating interoperability and the success of the certified capabilities.

When it was not possible to determine successful interoperability via confirmation from a receiving system, success was defined as transmission was made and no error message received from the receiving system.

Criterion	Metric	Relied Upon Software (if applicable)	Care Setting	Outcomes and Challenges Encountered
170.315(g)(7) Patient Selection, 170.315(g)(9) All Data Request, 170.315(g)(10) Standardized API for Patient and Population Services	<p>Over a 60-day defined period:</p> <p>Percent of successful API requests for patient and population services.</p> <p>Numerator: Number of successful API requests (including patient ID/token requests, Summary Record requests, and authorization for single/multiple patient data).</p> <p>Denominator: Total</p>	N/A	<p>Critical Access Hospitals</p> <p>Prospective Payment System Hospitals</p> <p>Free-Standing Emergency Rooms</p>	<p>DESCRIPTION/JUSTIFICATION</p> <p>Due to our current clientele, there was no usage of this API functionality during Q3 2025.</p> <p>However, simulated testing was completed by querying the FHIR server. This testing confirmed that the certified Health IT Module provides an API that allows authorized applications to retrieve unique patient identifiers, access all required USCDI data classes, and support both single-patient and multi-patient data access, meeting applicable federal interoperability requirements.</p>

	API requests attempted.			<p>BENCHMARK:</p> <p>The benchmark for successful API requests returning complete data as expected was set at 80% within the defined 60-day period.</p> <p>RESULTS:</p> <p>Testing results for the 60-day period were 10 successful simulated attempts out of 10 simulated requests. This resulted in 100% functionality of the API within the defined 60-day period.</p>
--	-------------------------	--	--	---

Schedule of Key Milestones

Real World test began in Q3 2025 – the 60-day reporting period was completed between July - September 30, 2025.

Key Milestone	Care Setting	Date/Timeframe
Identification of participating sites/users	<ul style="list-style-type: none"> ○ Critical Access Hospitals ○ Prospective Payment System Hospitals ○ Free-Standing Emergency Rooms 	Quarter 1-2 2025
Data Collection	<ul style="list-style-type: none"> ○ Critical Access Hospitals ○ Prospective Payment System Hospitals ○ Free-Standing Emergency Rooms 	60 days (actual dates TBD) during Q3 7/1/2025-9/30/2025.
Review/Collate data	<ul style="list-style-type: none"> ○ Critical Access Hospitals ○ Prospective Payment System Hospitals ○ Free-Standing Emergency Rooms 	October 15, 2025 – November 15, 2025

Write Report	<ul style="list-style-type: none"> ○ Critical Access Hospitals ○ Prospective Payment System Hospitals ○ Free-Standing Emergency Rooms 	November 16 – December 30, 2025
--------------	--	---------------------------------

Attestation

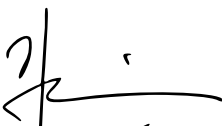
This Real-World Testing Results Report is complete with all required elements, including measures that address all certification criteria and care settings. All information in this results report is up to date and fully addresses the Health IT Developer's Real World Testing requirements.

Authorized Representative Name: CheeSiong Yee

Authorized Representative Email: cs.yee@stratqhealth.com

Authorized Representative Phone: (866) 920 7229

Authorized Representative Signature



Date: January 29, 2026