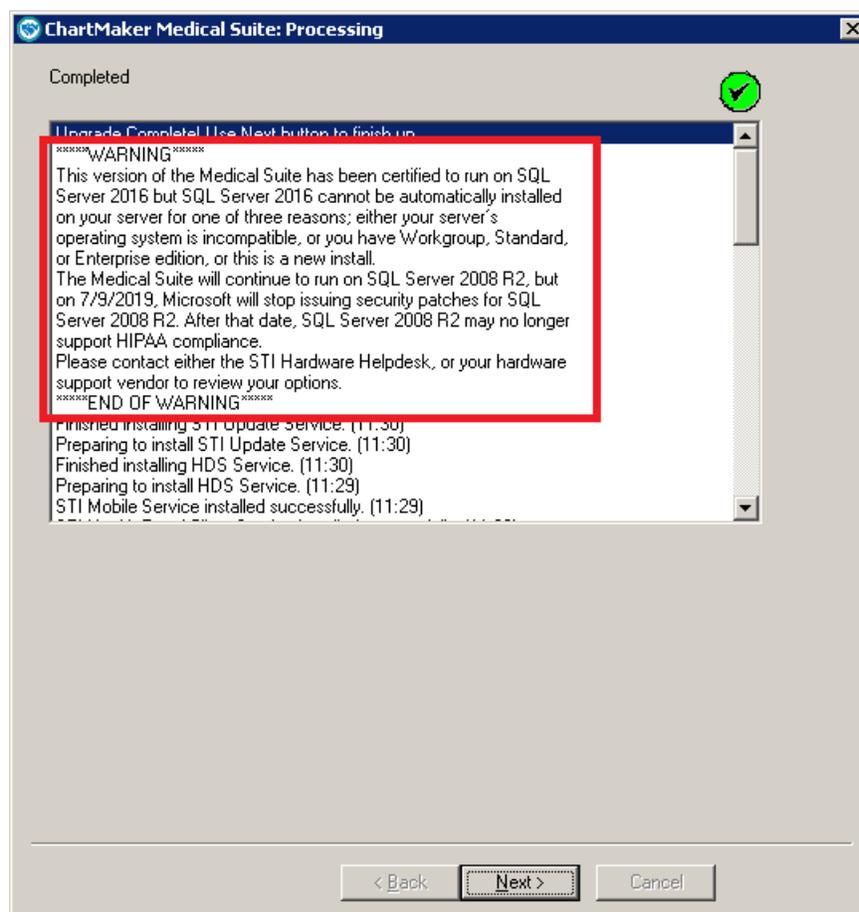


ChartMaker® Clinical Release Notes

ChartMaker® 2018.2 (fv6.3.6)

Important Notifications

- **Upgrade from Microsoft Server 2008 and Windows 7** – In January 2020, your Windows 7 workstations and Microsoft 2008 Servers will no longer be supported. Even with security patches, problems may still arise if you choose not to upgrade. In addition, your workstations will no longer be HIPAA compliant. To avoid potential issues in the future, contact our [Technical Services Department](#) today.
- **SQL Server 2016 & the ChartMaker 2018.2 (File Version 6.3.3) Upgrade** – Beginning with ChartMaker 2018.2 (File Version 6.3.3) Upgrade, a warning message will appear upon the completion of the upgrade regarding the transition of the ChartMaker Medical Suite to using SQL Server 2016, for those offices where an automated upgrade to SQL Server 2016 was not possible. See the figure below. If you are receiving this message, to avoid potential issues and to ensure your system remains HIPAA compliant, it is important to contact either STI Hardware Helpdesk, or your software vendor, to review your options.



ChartMaker Medical Suite SQL Server 2016 Warning

Added Features

- Direct Messaging – View Sent Messages** – The **User** field in the Direct Messages Sent dialog (accessed via **To-Do > Direct Messaging > View Sent Messages**), has been updated with an **<All Users>** option that allows you to view sent messages by all users in your system. See Figure 1. When the **<All Users>** option is selected, a User column will appear that will list the applicable user that sent the message. If a message was sent by a user that was deleted from the system, **<deleted>** will appear in the User column for that message.

Date	To	From	Subject	Attachments	Size of message	Status	User
01/23/19	Mark.Green@sticomputer.cert.direct-ci.com	Ben.Davidson@sticomputer.cert.direct-ci.com	Patient Referral	1	85.83 KB	Pending	CRAIG
10/31/18	Ben.Davidson@sticomputer.cert.direct-ci.co...	Ben.Davidson@sticomputer.cert.direct-ci.com	kjhlkj	1	90.25 KB	Pending	CRAIG
08/09/18	kbabula.trunktest@sticomputer.cert.direct-ci...	kbabula.trunktest@sticomputer.cert.direct-ci...	test	0	1.53 KB	Pending	KB
08/09/18	Mark.Green@sticomputer.cert.direct-ci.com	kbabula.trunktest@sticomputer.cert.direct-ci...	adfasdfasdf	0	1.63 KB	Pending	KB
07/26/18	Deidre.Longshot@sticomputer.cert.direct-ci...	Ben.Davidson@sticomputer.cert.direct-ci.com	Patient Referral	1	55.67 KB	Pending	SYSADMIN
07/24/18	Deidre.Longshot@sticomputer.cert.direct-ci...	FictionalPhysicians.Main@sticomputer.cert....	Referral	1	44.11 KB	Pending	SYSADMIN
06/25/18	kbabula.devhp@sticomputer.cert.direct-ci.c...	Ben.Davidson@sticomputer.cert.direct-ci.com	test	1	783.99 KB	Error	CRAIG
06/25/18	FictionalPhysicians.Main@sticomputer.cert....	Ben.Davidson@sticomputer.cert.direct-ci.com	RE: Enter a subject h...	0	2.86 KB	Error	CRAIG
06/25/18	kbabula.devhp@sticomputer.cert.direct-ci.c...	Ben.Davidson@sticomputer.cert.direct-ci.com	test	1	783.99 KB	Error	CRAIG
06/20/18	kbabula.trunktest@sticomputer.cert.direct-ci...	FictionalPhysicians.Main@sticomputer.cert....	Enter a subject here...	1	53.52 KB	Delivered	CRAIG
05/22/18	kbabula.trunktest@sticomputer.cert.direct-ci...	Ben.Davidson@sticomputer.cert.direct-ci.com	CCDA - Patient referral	1	68.20 KB	Error	CRAIG
05/18/18	FictionalPhysicians.Main@sticomputer.cert....	Ben.Davidson@sticomputer.cert.direct-ci.com	Test	0	1.54 KB	Error	paul
05/07/18	kbabula.trunktest@sticomputer.cert.direct-ci...	kbabula.trunktest@sticomputer.cert.direct-ci...	test	1	20.15 KB	Delivered	KB

Figure 1 – Direct Messages Sent

- Medications – Prescribe Medications** – The Prescribe Medication, whether accessed when adding or renewing a medication, has been updated with a **PDMP queried** checkbox to indicate whether a Prescription Drug Monitoring Program (PDMP) system was queried prior to prescribing, or renewing, a Schedule II narcotic (Opioid) medication. See Figure 2. This field will automatically become checked if the **PDMP Report** button has been accessed but can also be manually checked or unchecked as needed. When the prescription is confirmed and saved, and the PDMP queried option was checked, the system will track that the PDMP was queried in the metadata of the audit event for the medication. Likewise, a record will be saved to the system to record that PDMP was queried for this narcotic so that numerator fulfillment can be calculated for the **Query of Prescription Drug Monitoring Program (PDMP)** performance measure for Promoting Interoperability for MIPS 2019.

(Schedule II) morphine 8 mg/mL injection solution (Rx, Generic)

PDMP queried PDMP Report Medication History Consent: Yes Medication Eligibility Medication History

Prescription
 Route: [inj] Medication: [morphine 8 mg/mL injection solution] Action: [Take] Dose: [1] Dose Units: [vial (mL)] Frequency: [As Needed] Dispense: [5] Add'l SIG: [] Refills: [0] Substitution OK: Days Supply: [5] Notes to Pharmacist: [Do not include clinical information in this field]

Formulary
 Current Drug Selection

Payer	Medication	Status	Coverage	Copay	Copay Info
----	morphine	Unknown	N/A	N/A	

 Drug Alternatives (* = Payer Specified)

Payer	Medication	Status	Coverage	Copay	Copay Info

Payer: [] Transmission: [E-Prescribe] Diagnosis: [] Expiration Date: [2/28/2019] Print patient prescription savings materials:

Started: [2/28/2019] Ended: [2/28/2019] Earliest Fill Date: [2/28/2019]

SIG: [] Initial order created outside of Clinical: ePA status pending... [Override?] [Cancel] [Back] [Next]

Figure 2 – Prescribe Medication – PDMP Queried

Added Features (continued)

- **MIPS Dashboard – Configuration**– The MIPS Dashboard Configuration dialog has been redesigned to better accommodate the size of the dialog, thereby making viewing and selecting options easier within the dialog. Figure 7. Do note, there may be some slight screen resizing based on the performance year selected.
- **MIPS Dashboard – Configuration**– The MIPS Dashboard Configuration dialog has been updated with a new **Quality Reporting** option for MIPS 2019: **Reporting through a combination of the EHR and STI Quality Reporting Registry**. See Figure 3. This option, which is only available for MIPS 2019 and subsequent years, allows you choose multiple collection types (i.e., submission types) for Quality Reporting. When this option is selected, the **Number of measures reported** field will activate allowing you to enter the number of measures you are reporting via the STI Quality Reporting Registry. You must enter a value for this field before you can save the configuration information and exit the dialog.

The screenshot shows the 'MIPS Dashboard Configuration' dialog box. It is divided into several sections:

- Configuration name:** Central Medical 2019
- Performance period:** 1/ 1/2019 to 7/ 1/2019
- Eligible clinicians (NPI):** A list of five clinicians with checkboxes: Dodosine, Janet A (1726969666), Doe, Alex (1232324232), Doe, John D (1231231231), Doe, Maximilian R (1312312), and Doe, Tomas E (9876543431). A 'Select all' button is present.
- Practice (TIN):** Fictional Physicians (1234567890)
- Facility:** STI Computer Services, Inc
- CPC+ Identifier:** (empty field)
- Quality Reporting:** Radio buttons for 'Reporting through the EHR', 'Reporting through the STI Quality Reporting Registry', and 'Reporting through a combination of the EHR and STI Quality Reporting Registry'. The 'Number of measures reported' field is set to 25.
- Promoting Interoperability Exemption:** Radio buttons for 'Not exempt from reporting' and 'Exempt from reporting'. A 'Do I qualify?' link is present.
- Improvement Activity Adjustments:** Radio buttons for 'None', 'Small practice, rural area, or non-patient facing clinician', 'Patient Centered Medical Home or equivalent', and 'Other approved Alternative Payment Model'. A 'Do I qualify?' link is present.
- Cost Case Minimums:** Radio buttons for 'The case minimums were not met' and 'The case minimums were met'. A 'Do I qualify?' link is present.

At the bottom right, there are 'OK' and 'Cancel' buttons.

Figure 3 – MIPS Dashboard Configuration

Added Features (continued)

- **MIPS Dashboard – Cost**– The Cost category has been updated for MIPS 2019, and for the 2019 performance period will be 15% of the MIPS Total Score. Do note, as in the previous year, the Cost category will be disabled when **The case minimums were not met** option is selected in the **Cost Case Minimums** section of the MIPS Dashboard Configuration dialog.

After the Cost option has been clicked in the MIPS Dashboard, a Cost dialog will. See Figure 4. You can then manually enter the applicable **Cost Score** in the corresponding field, and then click the **OK** button. The Category score and Weighted score for the Cost category will then be displayed in the MIPS Dashboard.

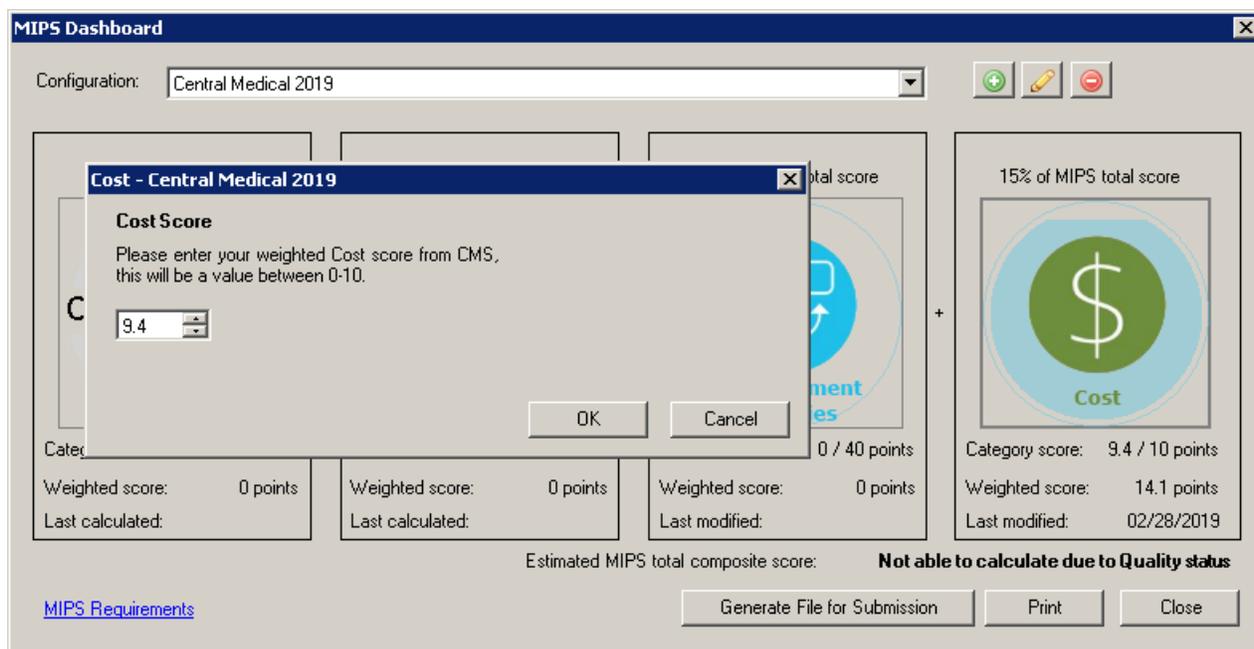


Figure 4 – MIPS Dashboard –Cost

Added Features (continued)

- **MIPS Dashboard – Improvement Activities** – The Improvement Activities dialog has been updated with new and revised improvement activities for MIPS 2019, and for the 2019 performance period will be 15% of the MIPS Total Score. These are broken up into *two* sub-categories (**High Weighted** and **Medium Weighted**). See Figure 5. As in previous versions, for each entry you can click the corresponding **More Info?** link to view further details regarding the activity.

Activity	More info?	Dropdown
Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record	More info?	Yes
Participation in Systematic Anticoagulation Program	More info?	No
Anticoagulant Management Improvements	More info?	No
RHC, IHS or FQHC quality improvement activities	More info?	No
Glycemic management services	More info?	No
Use of QCDR for feedback reports that incorporate population health	More info?	No
TCPI Participation	More info?	No
Patient Navigator Program	More info?	No
Collection and follow-up on patient experience and satisfaction data on beneficiary engagement	More info?	No
Engage Patients and Families to Guide Improvement in the System of Care	More info?	No
Consultation of the Prescription Drug Monitoring Program	More info?	No
Participation in CAHPS or other supplemental questionnaire	More info?	No
CDC Training on CDC's Guideline for Prescribing Opioids for Chronic Pain	More info?	No
Completion of CDC Training on Antibiotic Stewardship	More info?	No
Consulting AUC Using Clinical Decision Support when Ordering Advanced	More info?	No
PCI Bleeding Campaign	More info?	No

Total score: **40 points**

Print OK Cancel

Figure 5 – Improvement Activities

Added Features (continued)

- MIPS Dashboard – MIPS Requirements** – The MIPS Category Requirements dialog, accessed via the **MIPS Requirements** link in the MIPS Dashboard, has been updated to reflect the new category requirements for the 2019 reporting period. See Figure 6.

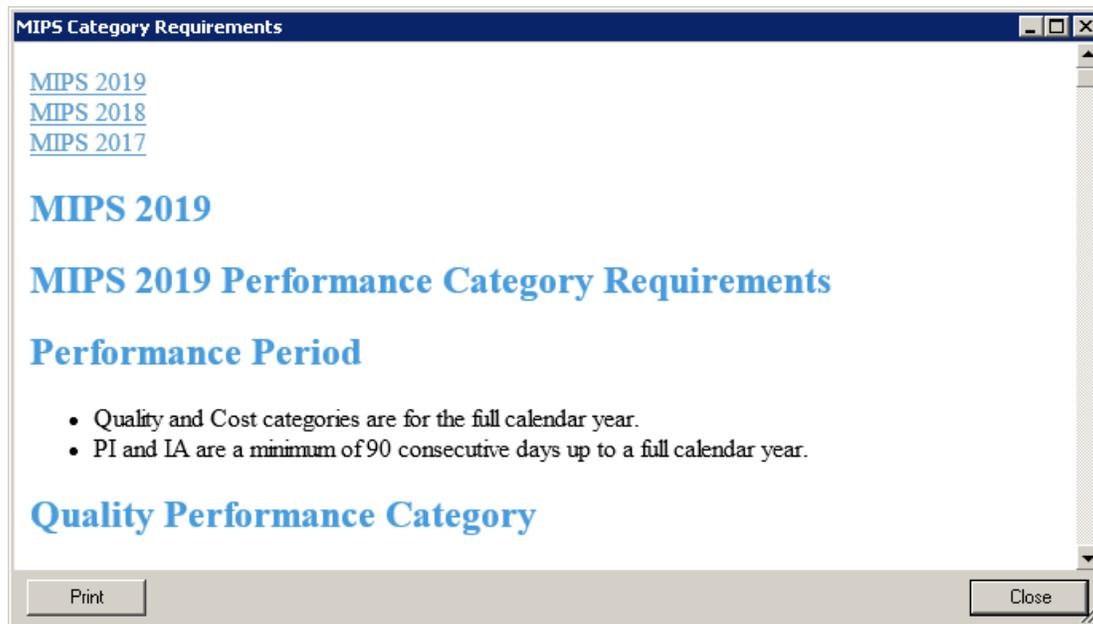


Figure 6 – MIPS Category Requirements

- MIPS Dashboard – Quality** – The Quality Measures dialog has been disabled for MIPS 2019 as we continue working to update the various CQMs for the 2019 performance period. In the MIPS Dashboard, whenever the configuration is set for 2019, the Quality card will display a **Coming Soon!** message over the top and will be disabled. See Figure 7. Do note that all the other areas (**Promoting Interoperability**, **Improvement Activities**, and **Cost**) are active for 2019 and can be calculated and configured as needed. However, the system will not be able to calculate an estimated total composite score for 2019, as the Quality status is yet to be active.

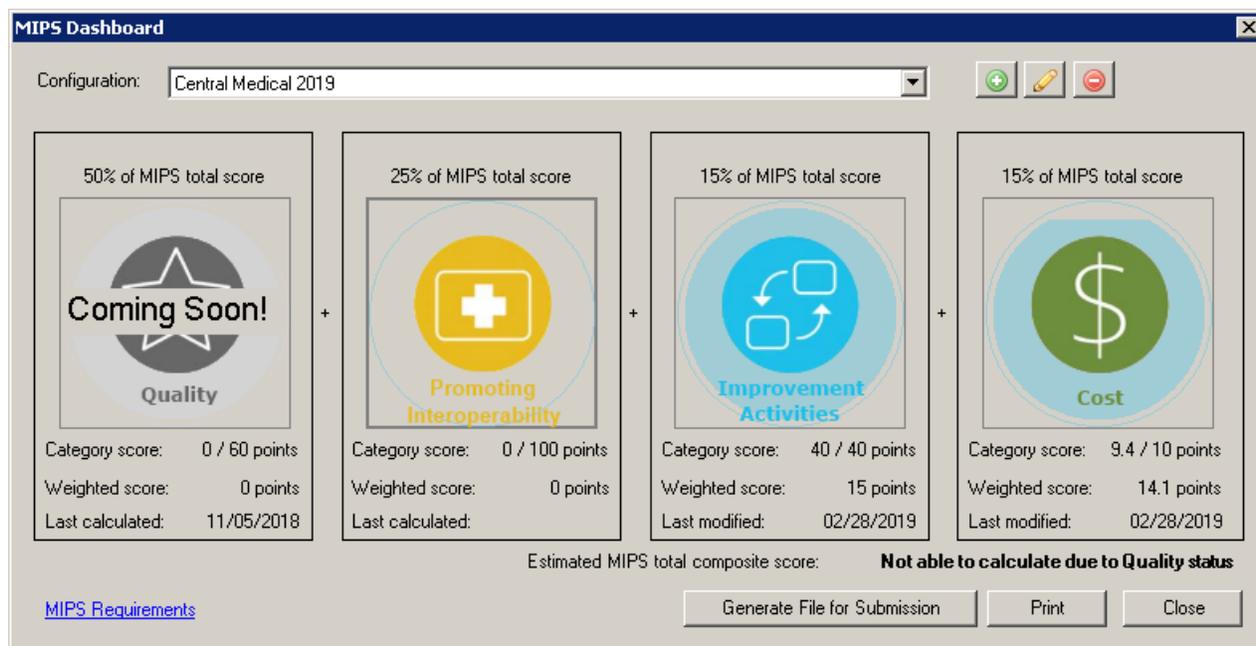


Figure 7 – MIPS Dashboard

Added Features (continued)

- MIPS Dashboard – Promoting Interoperability** – The Promoting Interoperability dialog has been updated with new and revised performance category measures and registry options for MIPS 2019, and for the 2019 performance period will be 25% of the MIPS Total Score.

Upon entering the Promoting Interoperability dialog for 2019, you will notice a single **Performance Category Measures** section, instead of the Base, Performance, and Bonus sections from previous years. Although the functionality is quite similar. See Figure 8.

You will need to check the **Performed a security risk analysis** option before the Promoting Interoperability Score will be calculated. Likewise, the **Submitted data to one or more public health agency or clinical data registry** option will not be activated unless the **Performed a security risk analysis** option is selected, and performance measures, except for the PDMP and Opioid Treatment bonus measures, have been calculated and contain numerator and denominator information. Performance measures can be calculated, and reconciliation reports can be run for selected measures via the corresponding buttons.

After the **Submitted data to one or more public health agency or clinical data registry** option becomes active and is checked, the various registry options will become available. You can select up to a total of 10 points, or a single registry (5 points) and an exclusion, if applicable. Once a total of 10 points is selected, the other options will be grayed out. Likewise, the Exclusions checkboxes will become available for the registries after a single registry is selected, but not for the selected registry.

Only after the **Performed a security risk analysis** option has been selected, the performance measures have been calculated, and the registry information has been selected as applicable, will the Promoting Interoperability Score be calculated. This score will then be displayed on the Promoting Interoperability card in the MIPS Dashboard.

For more information on Promoting Interoperability for MIPS 2019, as well as information for achieving the category measures, see the [Promoting Interoperability 2019 Objectives](#) page on our [website](#).

Promoting Interoperability - 2019 year

Performance Category Measures

Performed a security risk analysis

Include controlled substances in the E-Prescribing measure

Objective	Measure description	Numerator	Denominator	Result	Score
Electronic Prescribing	E-Prescribing with Controlled Substances & Formulary Comparison	3	6	50%	5/10
e-Prescribing	Query of Prescription Drug Monitoring Program (PDMP) - BONUS	5	5	100%	5/5
e-Prescribing	Verify Opioid Treatment Agreement - BONUS	5	5	100%	5/5
Health Information Exchange	Support Electronic Referral loops by Sending Health Information	1	8	13%	3/20
Health Information Exchange	Support Electronic Referral loops by Receiving and Incorporating Health I...	1	1	100%	20/20
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	1	5	20%	8/40

Calculate Reconciliation Report

Submitted data to one or more public health agency or clinical data registry (5 points each with 10 points max)

Specified Reporting Registry: Immunization Registry Reporting (More than 1) (10 points)

OR

Immunization Registry Reporting (Single) (5 points)

Syndromic Surveillance Reporting (5 points)

Public Health Registry Reporting (5 points)

Clinical Data Registry Reporting (5 points)

Exclusions:

Promoting Interoperability Score = **56 points**

Print OK Cancel

Figure 8 – Promoting Interoperability

Added Features (continued)

- **The Note Tab – Opioid Treatment Agreement** – The program has been updated with the ability to enter and capture opioid treatment agreement information for patients to ensure that the **Verify Opioid Treatment Agreement** performance measure is calculated correctly for Promoting Interoperability for MIPS 2019 via the **Opioid Treatment Agreement** button. See Figure 9.

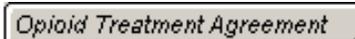
Opioid Treatment Agreement: 

Figure 9 – Opioid Treatment Agreement Button

Once the **Opioid Treatment Agreement** button has been clicked the Opioid Treatment Agreement dialog will appear allowing you to answer questions regarding whether the patient has had a Schedule II opioid prescription for at least 30 cumulative days as identified in the patient's medication history request and response transactions during a 6-month look-back period, and whether they have a signed opioid treatment agreement that has been incorporated in the chart. See Figure 10. Likewise, you can access their medication history by clicking the **Medication History** button.

When the first question is answered in the affirmative (**Yes**), the system will place this patient into the denominator count for the Verify Opioid Treatment Agreement performance measure. Likewise, answering Yes to the first question will also activate the Yes and No options in the second question. If **Not Asked** or **No** is selected, then the patient will not be included in the denominator.

When the second question is answered in the affirmative (**Yes**), the system will place this patient in numerator count for the Verify Opioid Treatment Agreement performance measure. If **Not Asked** or **No** is selected, then the patient will not be included in the numerator.

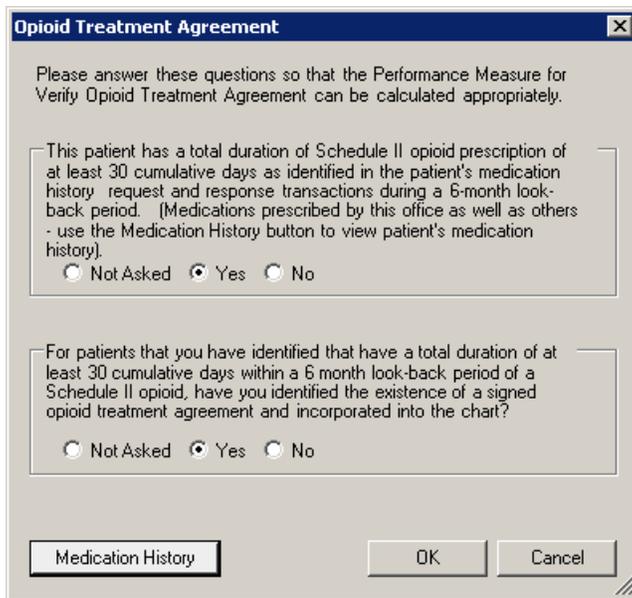


Figure 10 – Opioid Treatment Agreement

Added Features (continued)

- **System Icons** – The system icons (specifically desktop icons, but also applicable menu and window icons) have been redesigned and updated to better reflect, and be consistent with, our current corporate logo and branding. See Figure 11.



Figure 11 – Clinical, Practice Manager, PM Administration Tool Desktop Icons

- **Template Editing – Opioid Treatment Agreement** – The Template Editor has been updated with the ability to add an **Opioid Treatment Agreement** button to a template. The Opioid Treatment Agreement button lets you to track patients that have had a Schedule II opioid prescription for at least 30 cumulative days as identified in the patient's medication history request and response transactions during a 6-month look-back period, and whether they have a signed opioid treatment agreement, to ensure that the **Verify Opioid Treatment Agreement** performance measure is calculated correctly for Promoting Interoperability for MIPS 2019. See Figure 12.



Figure 12 – Opioid Treatment Agreement Button

When the **Opioid Treatment Agreement** button is added to the template you can access the Opioid Treatment Agreement Tracking dialog that allows you to add a **Heading** that will be displayed prior to the **Opioid Treatment Agreement** button. See Figure 13.



Figure 13 – Opioid Treatment Agreement

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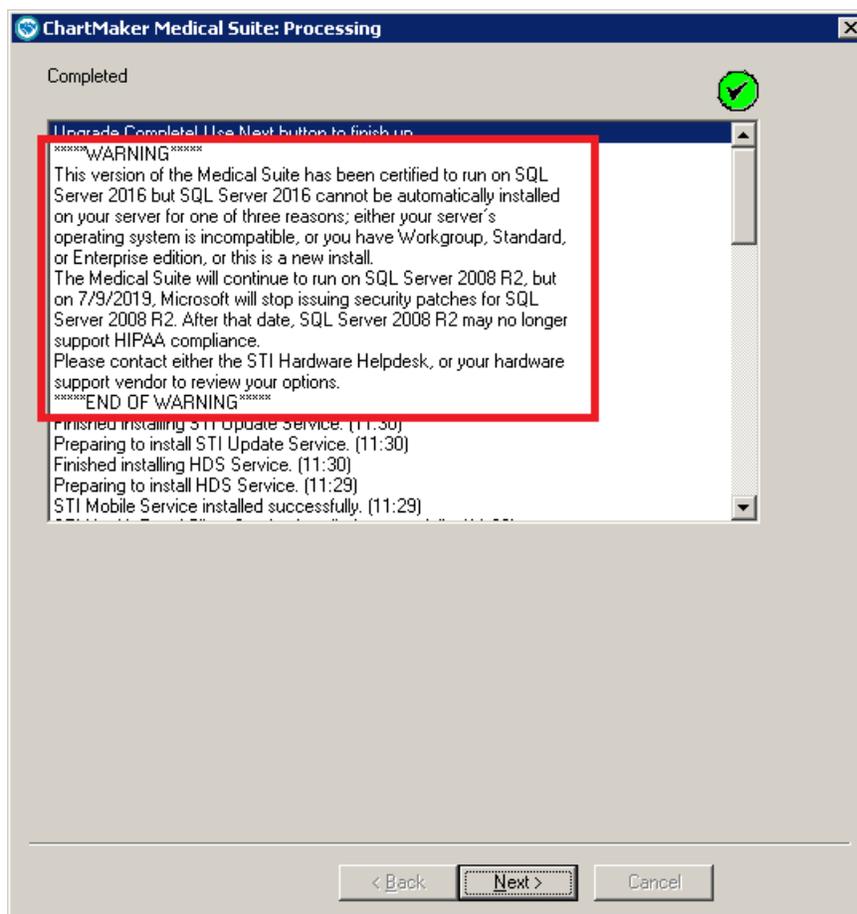
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ChartMaker® Practice Manager Release Notes

ChartMaker® 2018.2 (fv6.3.6)

Important Notifications

- **Upgrade from Microsoft Server 2008 and Windows 7** – In January 2020, your Windows 7 workstations and Microsoft 2008 Servers will no longer be supported. Even with security patches, **problems may still arise** if you choose not to upgrade. In addition, your workstations will no longer be HIPAA compliant. To avoid potential issues in the future, contact our [Technical Services Department](#) today.
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ChartMaker Medical Suite SQL Server 2016 Warning

General

- **System Icons** – The system icons (specifically desktop icons, but also applicable menu and window icons) have been redesigned and updated to better reflect, and be consistent with, our current corporate logo and branding. See Figure 1.



Figure 1 – Clinical, Practice Manager, PM Administration Tool Desktop Icons

Clinical

- **Clinical – Immunization** – The program has been updated to ensure that the latest MVX codes and MVX mappings, and Manufacturers, per the latest CDC guidelines, are used for immunization procedures.

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