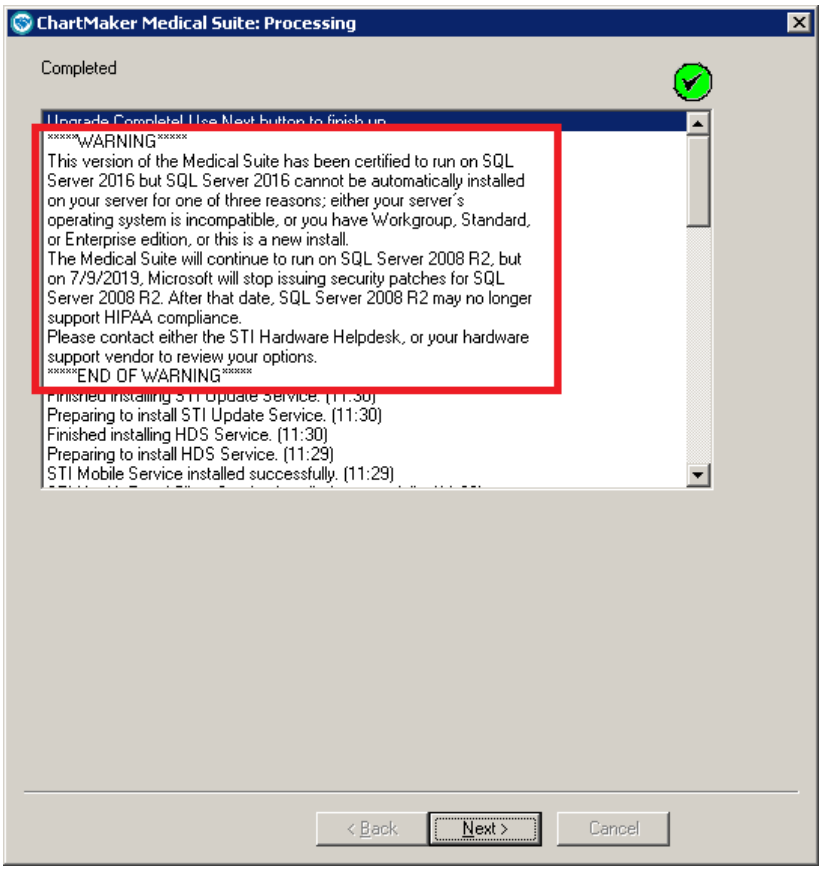
ChartMaker® Clinical Release Notes

ChartMaker® 2022.1 (fv6.8.1)

Important Notifications

- **Upgrade from Microsoft Server 2008/2012 and Windows 7/8 –** Since January 2020, your **Windows 7/8** workstations and **Microsoft 2008 Servers** are no longer supported. Likewise, support for **Windows 8.1** will end on January 10, 2023, and support for **Windows Server 2012/2012R2** will end on October 10, 2023. Even with security patches, **problems may still arise** if you choose not to upgrade. In addition, your workstations are not HIPAA compliant. To avoid these issues, 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 HIPPA 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

- **Facesheet — Appointment List –** The Appointment List, when the Facesheet is set for **Today's Appointments**, **Today's Appointments, time filtered**, **Tomorrow's Appointments**, or **Yesterday's Appointments**, has been updated with a **Message** field, underneath the Reason field, for each appointment that will display any message that was entered for the patient's appointment. See Figure 1.

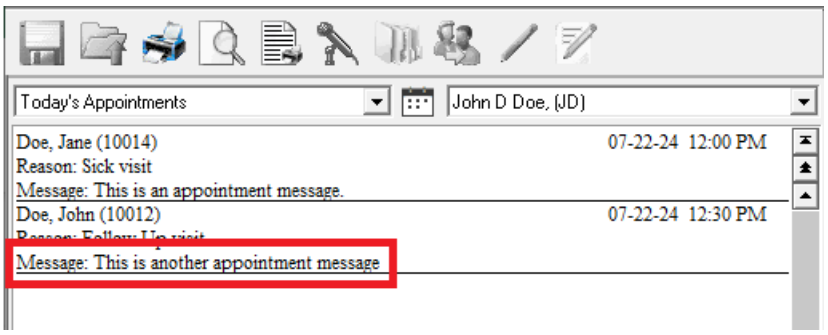


Figure 1 – Facesheet – Today's Appointments

Likewise, when viewing a patient's chart, the appointment message will also appear in the Next Appointment section underneath the appointment details, of the Facesheet, if a message was entered for that appointment. See Figure 2.

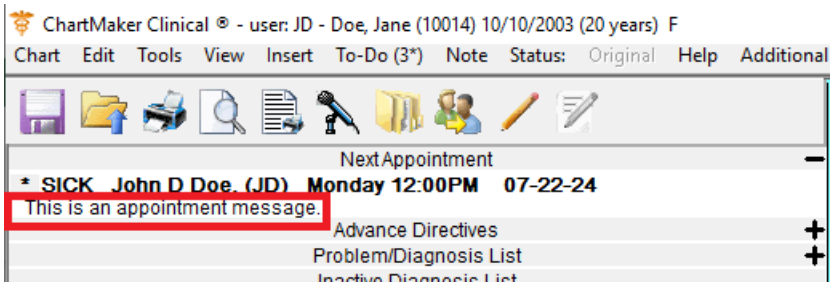


Figure 2 – Facesheet – Patient

- **The Note Tab – Diagnosis –** The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog when adding or editing a diagnosis in the chart note, the system will default to the code set based on the **Note Date** to ensure that the proper ICD codes for that date are selected.

- **The Note Tab – Order Procedure – Immunizations –** The program has been updated to ensure that the latest CVX codes and CVX mappings, MVX codes and MVX mappings, Manufacturers, and NDC codes, per the latest CDC guidelines, are used for immunization procedures.

Added Features (continued)

- **Preferences — Appearance –** The **Appearance** tab, of the Preferences dialog, has been updated with a **Default History View** field that allows users to select the view that will default when accessing the **History** tab (**All**, **Allergies**, **Annotation/Miscellaneous**, **Diagnoses**, **Family History**, **Medications**, **Patient History**, **Procedures**, **Results**, **Surgical History**) for a patient. See Figure 3. Also, a new Appointments section has been created that contains the **Display in military time** option for if you want the appointment times to appear in military format. This latter option has been moved from the General tab. Additionally, the various sections in the Appearance tab have been rearranged to improve the display and appearance of the preferences.

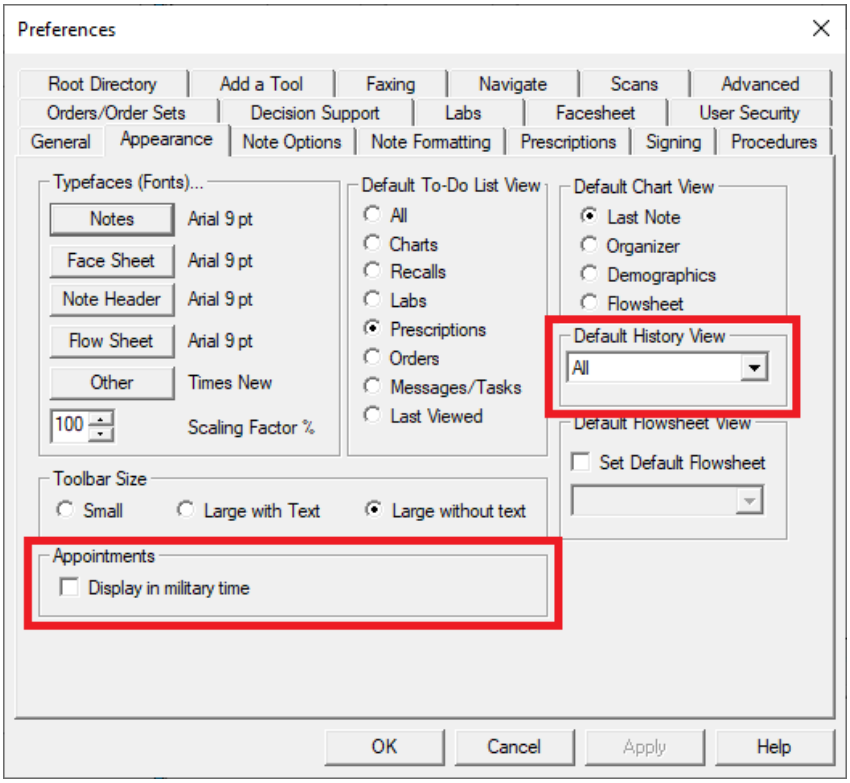


Figure 3 – Preferences – Appearance

Added Features (continued)

- **Preferences — General –** The **General** tab, of the Preferences dialog, has reorganized to improve how the various preference options are displayed. See Figure 4. Likewise, the **Apply Last Diagnosis Comment**, **Display unfilled Recalls when chart note is created**, and the **Display a warning when a SNOMED code is not selected** options have been removed from the General tab and moved to the **Note Options** tab. Likewise, the **Display appointments in military time** option has been removed from the General tab and moved to the **Appearance** tab.

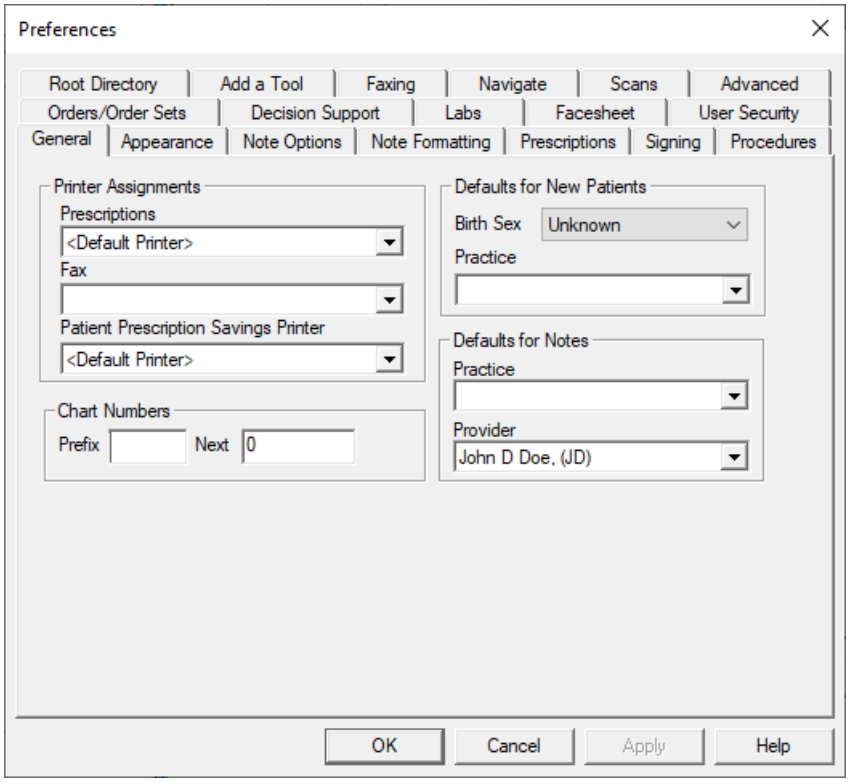


Figure 4 – Preferences – General

Added Features (continued)

- **Preferences — Note Formatting –** The Note Details tab, of the Preferences dialog, has been renamed to **Note Formatting**. See Figure 5. Also, the **Automatically carry forward to free text section on mismatch** option has been removed from the Note Formatting tab and moved to the **Note Options** tab.

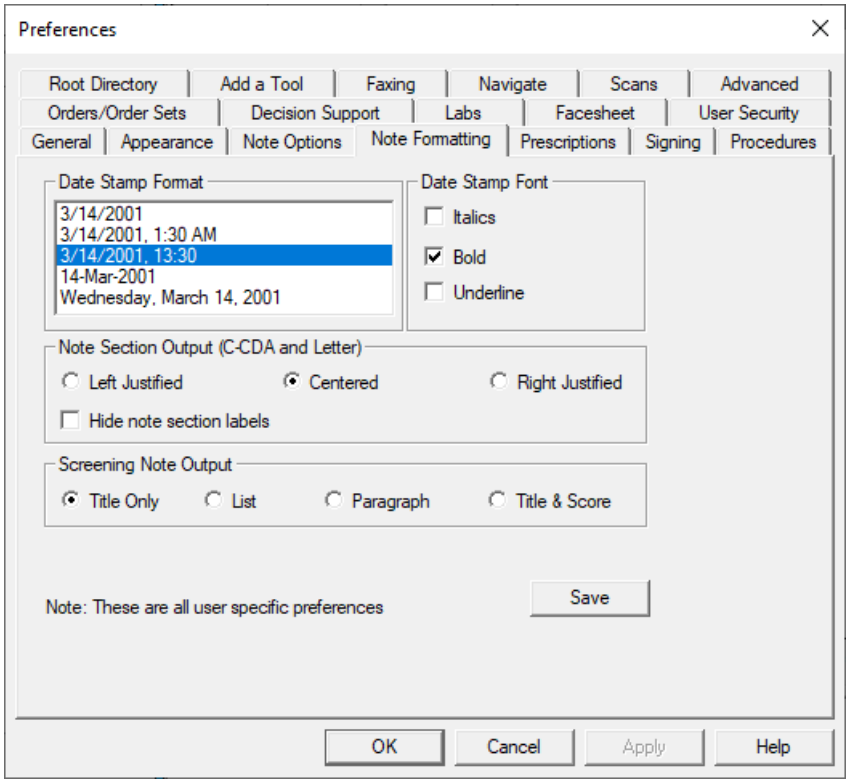


Figure 5 – Preferences – Note Formatting

Added Features (continued)

- **Preferences — Note Options –** The Show Codes tab, of the Preferences dialog, has been renamed to **Note Options**. See Figure 6.

  Likewise, the Notes Options tab has been updated with a **Recalls & Reminders** section that contains the **Display unfilled recalls when chart note is created** and **Display unfilled physician reminders when chart note is created** options. These options were moved from the General tab, and the functionality remains the same.

  The Notes Options tab has also been updated with a **Findings Checklist** section that contains the **Automatically carry forward selected checklist items into free text area of checklist when template mismatch error is encountered** option. This option was moved from the Notes Details tab and renamed from the Automatically carry forward to free text section on mismatch option in previous versions. The functionality of this option remains the same.

  Additionally, the **Diagnosis Checklist** section has moved to the center of the screen, and contains the Rename "Show SNOMED" to **Display SNOMED Codes** (renamed from Show SNOMED), **Search for diagnoses by SNOMED code** (renamed from Search by SNOMED), Display a warning when a SNOMED code is not selected (moved from the General tab), and **Include diagnosis comment from previous note** (renamed from Apply Last Diagnosis Comment that was previously in the General tab). The functionality of these option remains the same.

  And lastly, the Codes section has been relabeled **Display Codes**, while the options in this section have been renamed to **Diagnosis ICD10** (from ICD9/ICD10) and **Procedure CPT** (from Proc).

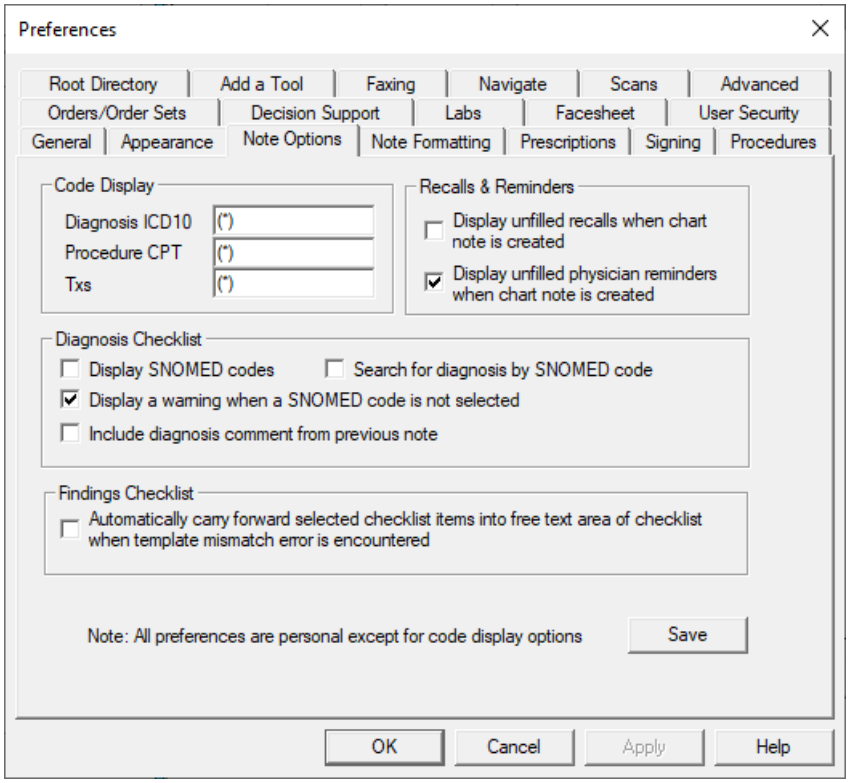


Figure 6 – Preferences – Note Options

Added Features (continued)

- **Preferences — Signing –** The **Patient Access** section, of the Signing tab of the Preferences dialog, has been updated with a **Do not automatically send inter-office messages to Patient Portal** option. See Figure 7. When this option is active (checked), whenever the **Yes and Sign** is selected for the **Save as Chart Note?** option, from inside a patient's chart, the inter-office message will not automatically be sent to the Patient Portal. Likewise, the **Release to Patient** option in the Note Header will be unchecked when the message is saved to the chart (whether the note is being signed or not). When this option is modified it will be tracked in the Audit Trail.

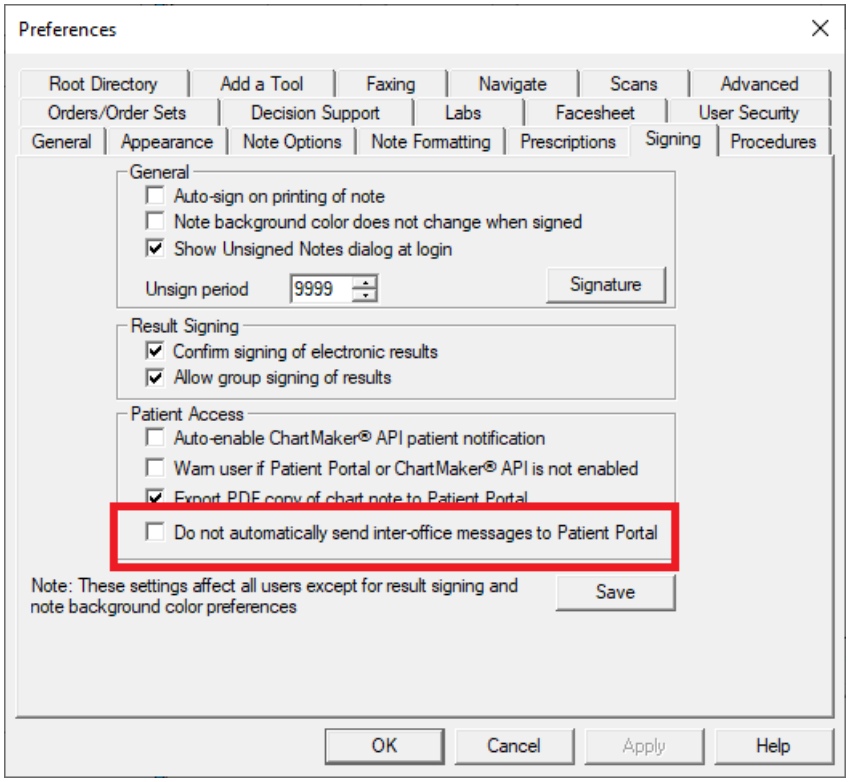


Figure 7 – Preferences – Signing

Added Features (continued)

- **Reports — NCQA Diversity Requirements –** The system has been updated so that you can now access the **NCQA Diversity Requirements** report in Clinical via **Report** > **NCQA Diversity Requirements**. The report functionality is the same as in Practice Manager and will display encounter counts and percentages of the total patient population for each facility, broken down by the patient demographic categories of Race, Ethnicity, Language, Sexual Orientation, Gender Identity, and Zip Code. See Figure 8. This report can be filtered by a **From** and **To** date range, as well as by **Facility**, and/or **Provider** via the corresponding drop-down fields, allowing you to choose a single, multiple, or all facilities and/or providers, as needed. After running the report via the **Run Report** button, you can also save the report as a PDF via the **Save Report** button. Likewise, when saving the report, a patient reconciliation report will also be generated as a .CVS file. This reconciliation file will automatically be saved in the same directory as the NCQA report and will display any patient account numbers did not have Ethnicity, Gender Identity, Language, Race, Sexual Orientation, and Zip Code configured for each of the facilities.

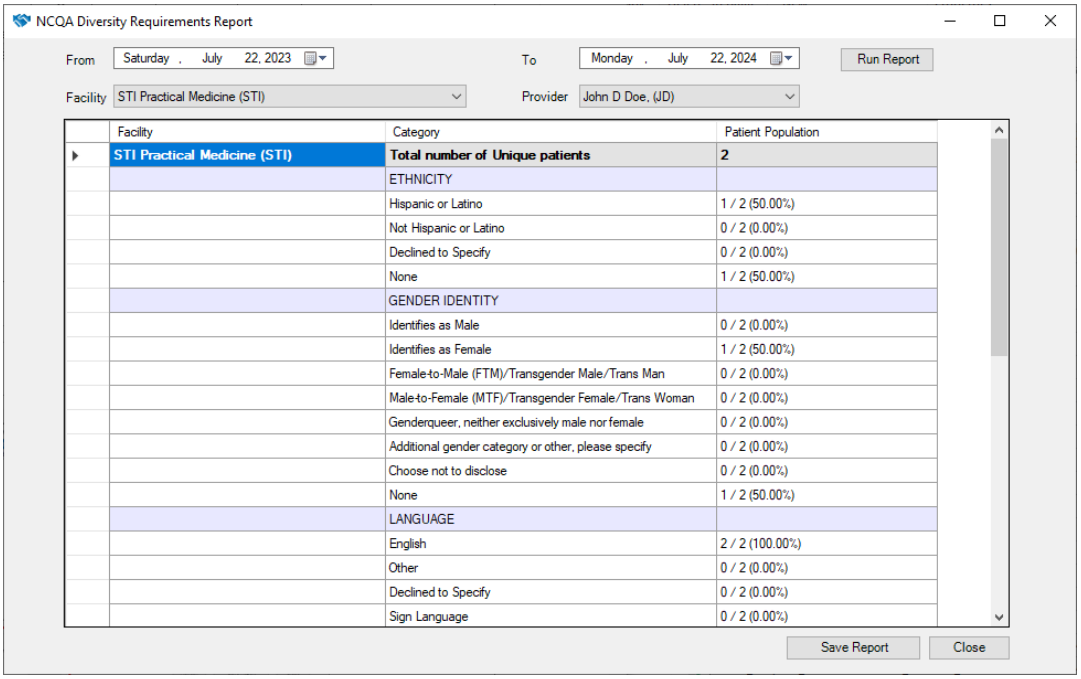


Figure 2 – NCQA Diversity Requirements Report

- **System Tables – Diagnosis Search –** The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog via the **Edit** > **System Tables** menu, the system will default to the code set based on the current day's date.

Some icons are from the Silk icon set by Mark James (http://www.famfamfam.com/). All rights reserved. Licensed under a Creative Commons Attribution 2.5 License (http://creativecommons.org/licenses/by/2.5/).

Some icons are from the Fugue icon set by Yusuke Kamiyamane (http://p.yusukekamiyamane.com/). All rights reserved. Licensed under a Creative Commons Attribution 3.0 License (http://creativecommons.org/licenses/by/3.0/).

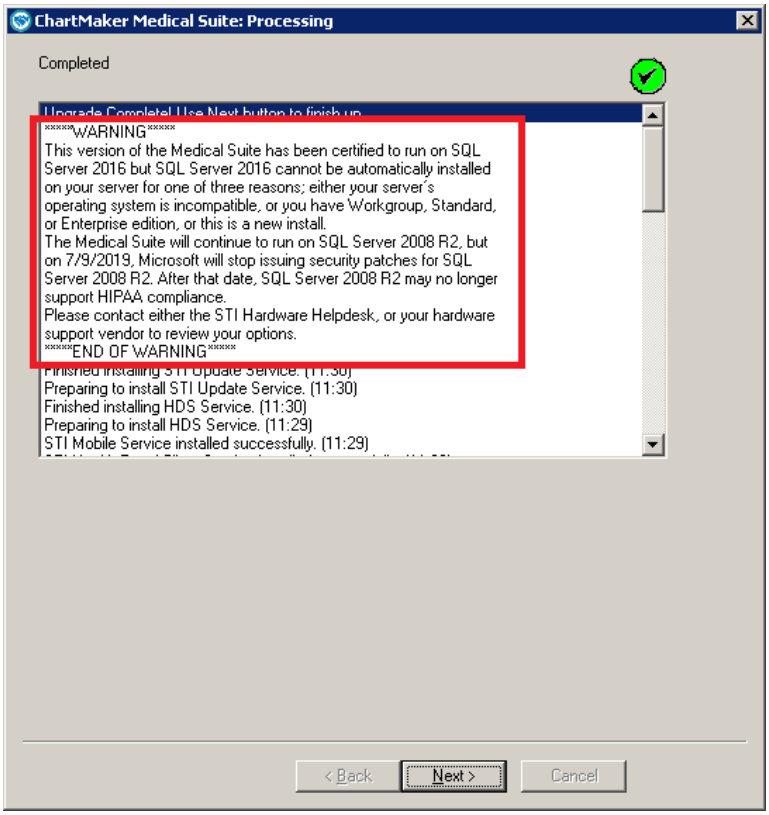
ChartMaker® Practice Manager Release Notes

ChartMaker® 2022.1 (fv6.8.1)

Important Notifications

- **Upgrade from Microsoft Server 2008/2012 and Windows 7/8 –** Since January 2020, your **Windows 7/8** workstations and **Microsoft 2008 Servers** are no longer supported. Likewise, support for **Windows 8.1** will end on January 10, 2023, and support for **Windows Server 2012/2012R2** will end on October 10, 2023. Even with security patches, **problems may still arise** if you choose not to upgrade. In addition, your workstations are not HIPAA compliant. To avoid these issues, 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 HIPPA 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

Add- Ins

- **Reports – NCQA Diversity Requirements –** The NCQA Diversity Requirements Report has been updated so that the From and To date fields, to configure an encounter date range for the report, as well as the Run Report button, have been moved so they are now above the Facility And Provider fields. See Figure 1.

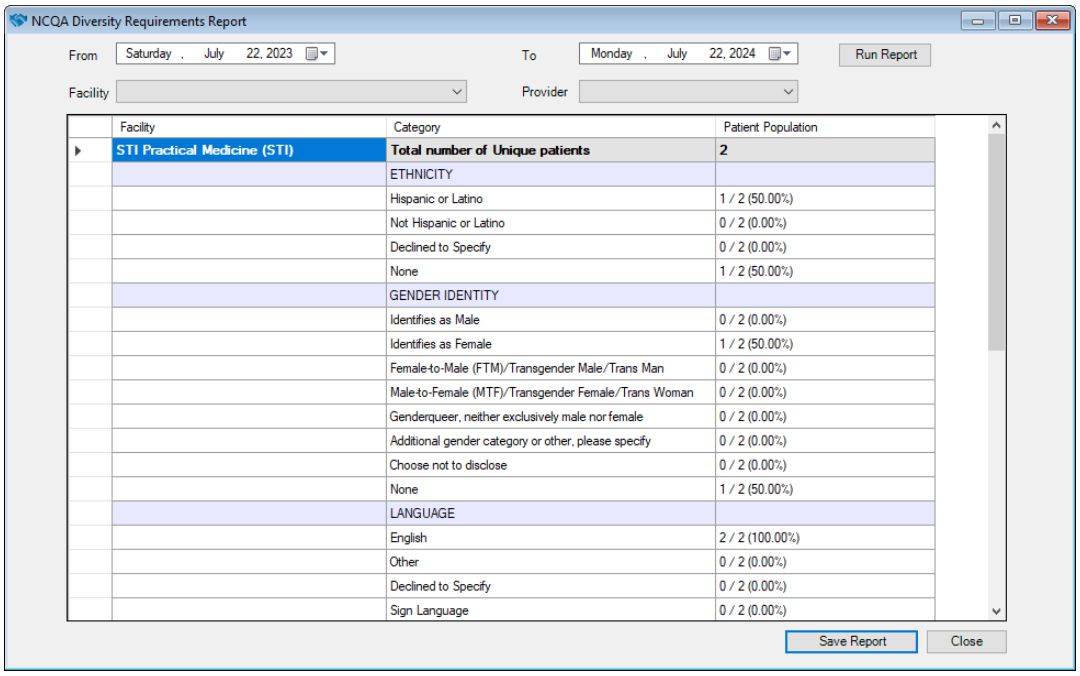


Figure 1 – NCQA Diversity Requirements Report

Also, the report functionality has been updated so that when Saving the report, in addition to saving the report as a PDF file, a patient reconciliation report will also be generated as a .CVS file. This reconciliation file will automatically be saved in the same directory as the NCQA report and will display any patient account numbers did not have Ethnicity, Gender Identity, Language, Race, Sexual Orientation, and Zip Code configured for each of the facilities. See Figure 2.

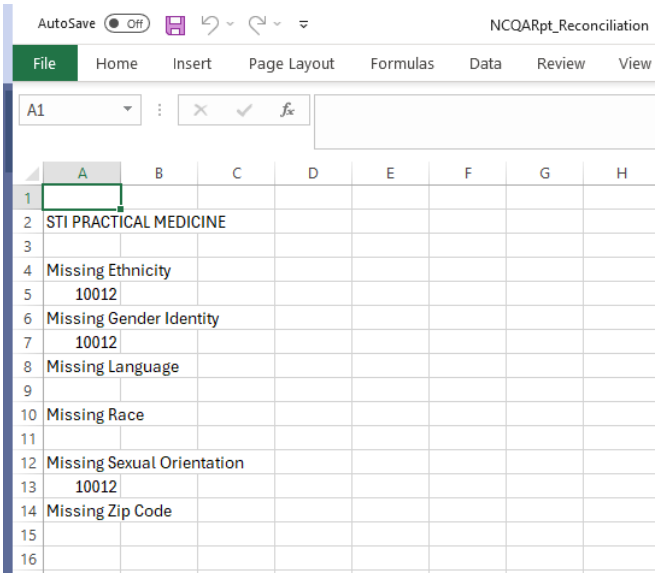


Figure 2 – NCQA Diversity Requirements Reconciliation Report

Administration

- **Administration – Diagnosis Search –** The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog via the **Administration** menu, the system will default to the code set based on the current day's date.

Charge

- **Charge – Enter a Charge –** The Review Insurance popout, when clicking the **Review Ins** button in the Charge Insurance section, has been updated with **Policy #** column that will display the applicable policy number for each insurance associated with the selected case. See Figure 3.

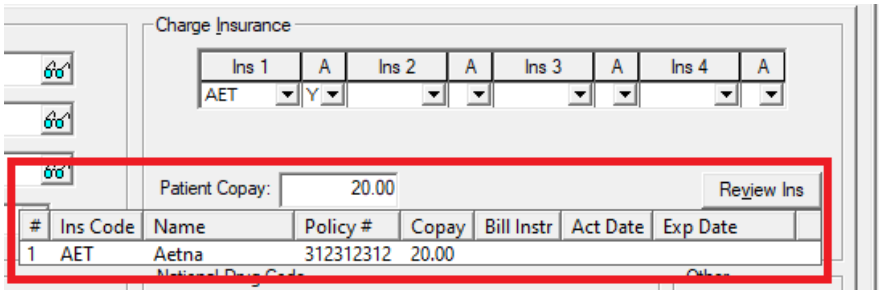


Figure 3 – Charge – Enter a Charge – Charge Insurance

- **Charge – Enter a Charge** – The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog when entering charges, the system will default to the code set based on the service **Start Date** to ensure that the proper ICD codes for that date are selected.

Charge (continued)

- **Charge – Edit a Charge** – The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog when editing charges, the system will default to the code set based on the service **Start Date** to ensure that the proper ICD codes for that date are selected.

Clinical

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

Patient

- **Patient – Case – Diagnosis –** The **ICD10 Code Set** field, in the ICD10 Search and Crosswalk areas of the Diagnosis Search dialog, has been updated with an **October 1, 2024 – Sept 30, 2025** code set when searching for diagnosis codes or using the crosswalk functionality. In addition, the ICD10 Search and Crosswalk areas for this new code set have been updated so that whenever a diagnosis is mapped to an HCC (Hierarchical Condition Categories) code, an **(HCC)** indicator will appear after the diagnosis description to easily identify these diagnosis codes. You can toggle between the Oct 1, 2014 – Sept 30, 2016 code set, the Oct 1, 2016 – Sept 30, 2017 code set, the Oct 1, 2017 – Sept 30, 2018 code set, the Oct 1, 2018 – Sept 30, 2019 code set, October 1, 2019 – Sept 30, 2020 code set, October 1, 2020 – Sept 30, 2021 code set, October 1, 2021 – Sept 30, 2022 code set, October 1, 2022 – Sept 30, 2023 code set, October 1, 2023 – Sept 30, 2024 code set, and All ICD10 Codes, in addition to this new code set. This allows you to easily search for the applicable ICD10 codes that are active, as outlined by the CDC, for the applicable date ranges. When accessing the Diagnosis Search dialog when entering or editing patient information, the system will default to the code set based on the current day's date.

Payer Inquiries

- **Payer Inquiries – Eligibility –** The system has been updated so that the Eligibility functionality in Practice Manager will work in conjunction with the Waystar Clearinghouse, allowing you to submit eligibility requests and receive responses for single patients or a group of patients based on an Appointment List. This functionality works as it did in previous versions.

  To support this functionality, the drop-down list in the Waystar Credentials dialog (**Add-Ins** > **Insurance Billing** > **Other Configurations** > **Waystar Clearinghouse** > **Credentials**) has been updated with Waystar API (Eligibility) option that allows you to configure your Waystar credentials. See Figure 4. You can configure credentials for all practices, or for individual practices, as needed. Likewise, before Eligibility is fully functional, additional setups may be needed in the Payer Inquiry dialog (Administration > Transaction Tables > Payer Inquiry).

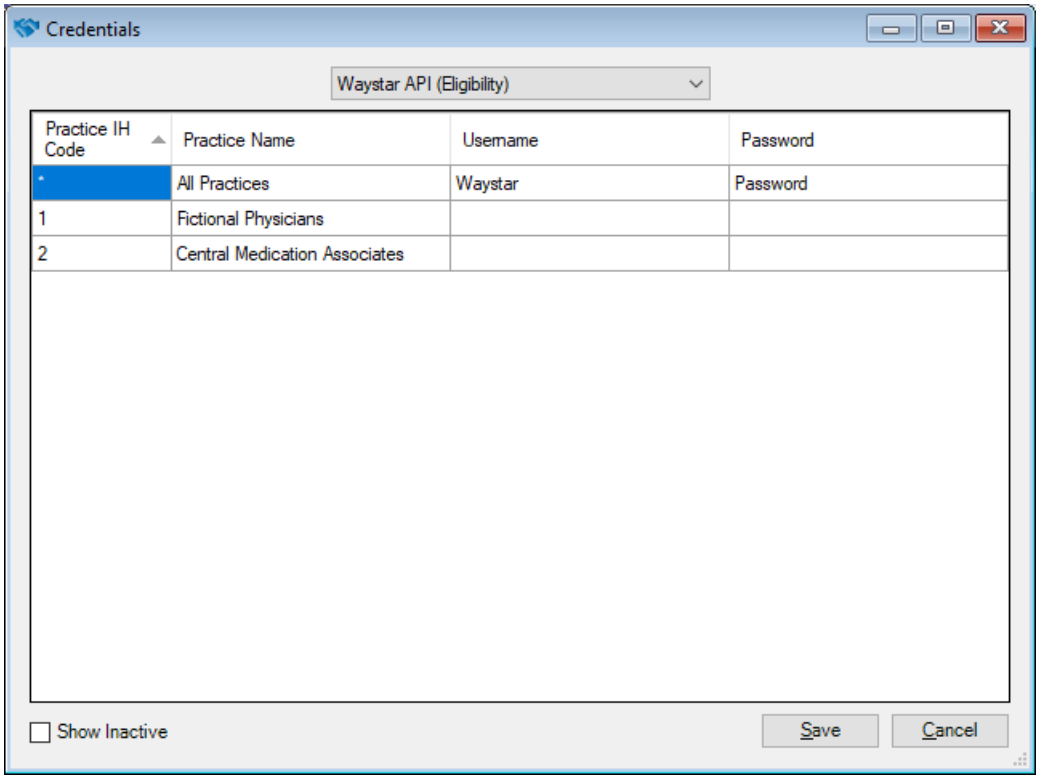


Figure 4 – Credentials

Some icons are from the Silk icon set by Mark James (http://www.famfamfam.com/). All rights reserved. Licensed under a Creative Commons Attribution 2.5 License (http://creativecommons.org/licenses/by/2.5/).

Some icons are from the Fugue icon set by Yusuke Kamiyamane (http://p.yusukekamiyamane.com/). All rights reserved. Licensed under a Creative Commons Attribution 3.0 License (http://creativecommons.org/licenses/by/3.0/).

ChartMaker® PatientPortal Release Notes

ChartMaker® 2022.1 (fv6.8.1) (Deployed 07/18/2024)

Added Features

- **PatientPortal – Messages – Reply –** The PatientPortal has been updated with the ability to directly reply to messages received from the practice, instead of having to create a new message, via the Send a Message, when replying, as in previous versions. When viewing a message in the Inbox, a **Reply** option will appear to the left of the Open option. See Figure 1.

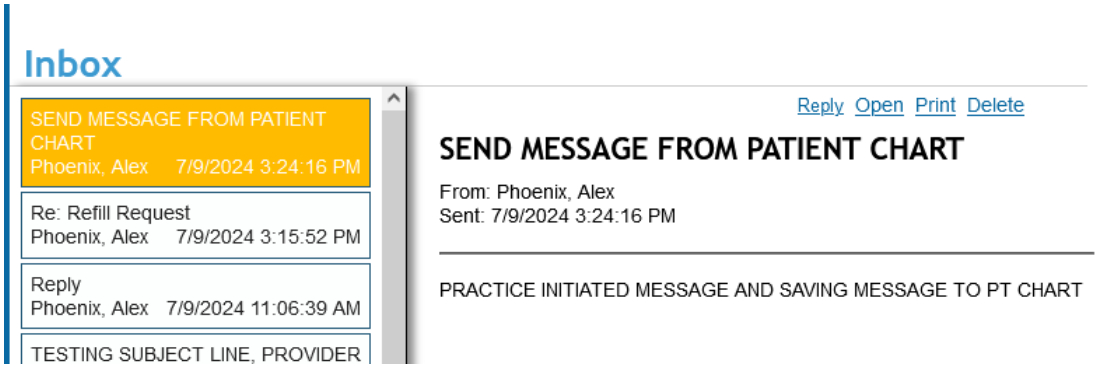


Figure 1 – Messages – Inbox

To reply to a message, click **Reply**. A Send a Reply window will appear allowing you to enter the reply and send. The person that sent the message will appear in the provider drop-down field, and the phone number will default if a primary phone number is entered on the patient's profile page. These items can be modified, if needed. See Figure 2. After the message is sent it will then appear in the To-Do List for the selected person, as well as the recipients of the applicable Patient Portal distribution list.

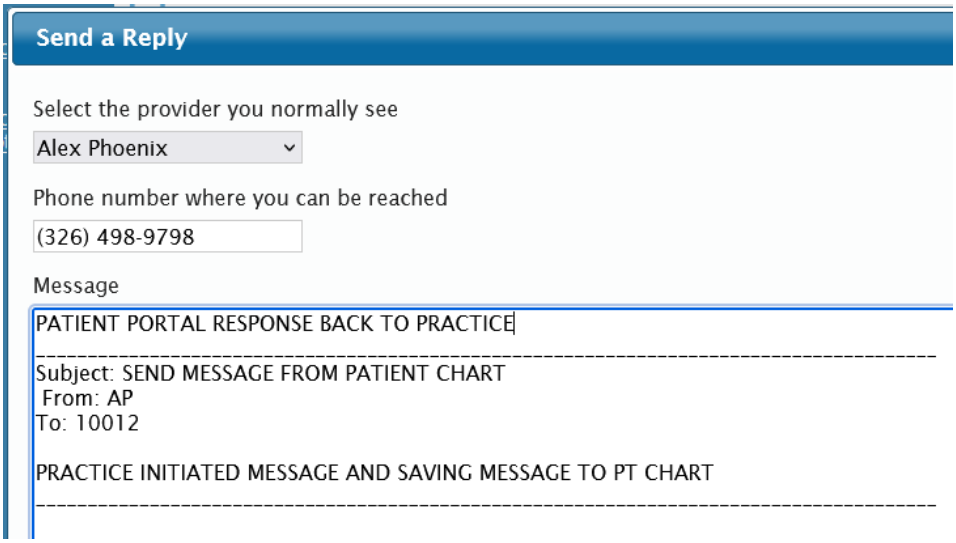


Figure 2 – Messages – Send a Reply