ChartMaker® Clinical Release Notes
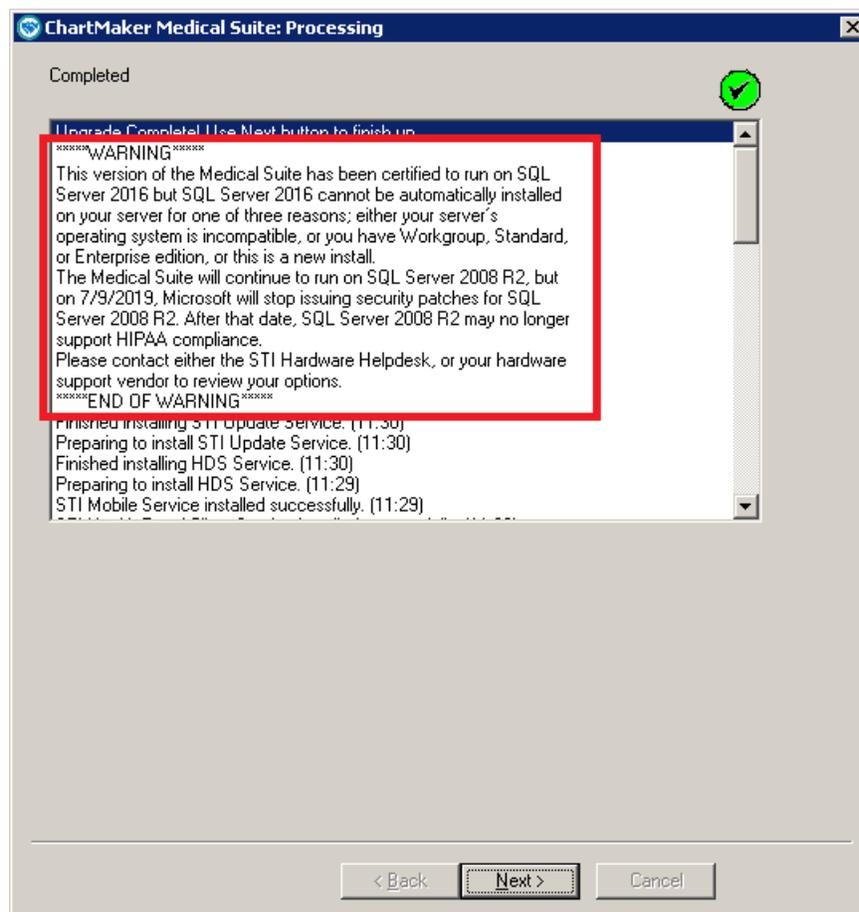
ChartMaker® 2018.2 (fv6.3.8)

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 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

- **Audit Trail –** The Audit Trail has been updated to track the areas (Medications, Diagnoses, and Allergies) that were reconciled in the Clinical Information Reconciliation (CIR) dialog whenever the dialog is closed via the **Done** button, or the **X** button in the top-right of the dialog. When an audit event occurs, the Audit Trail Description will display the **CIR Performed: [Any Area Reconciled]**; and the **Account ID**, **Note Header (Comment)**, **Note ID** and **Visit Date** will be listed in the Metadata column.

- **Clinical Information Reconciliation (CIR) –** The Clinical Information Reconciliation (CIR) dialog (when accessed via the Reconcile button after importing a CDA file via Direct Messaging, an HIE, or the Import Document dialog), has been updated to visually track your progress when reconciling each area (Medications, Diagnoses, and Allergies) within the dialog, helping to ensure you receive credit for the CIR Performance Measure for MIPS 2019, when applicable. Whenever you click the **Confirm** button in a tab, a green arrow will appear next to it in the upper-left of the screen to indicate that you have reconciled information for that area. See Figure 1. Also, to further track your progress, the Cancel button has been replaced with a **Done** button that tracks the number of tabs, out of the three, that have been reconciled.
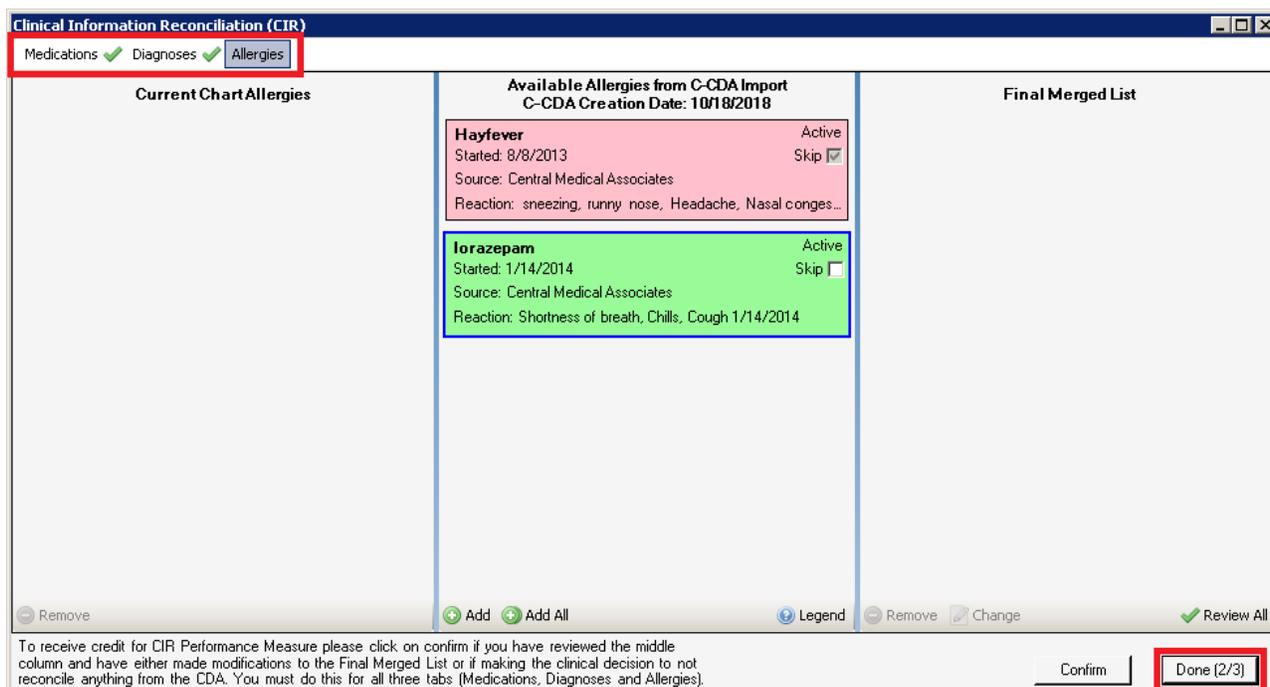

Figure 1 – Clinical Information Reconciliation (CIR)

Likewise, if you click the Done button, or attempt to close out of the dialog via the X button in the top-right of the dialog, before all three tabs have been confirmed, a Reconciliation Not Complete dialog will appear alerting you that all three areas when not reconciled and confirming you want to close the screen. See Figure 2.
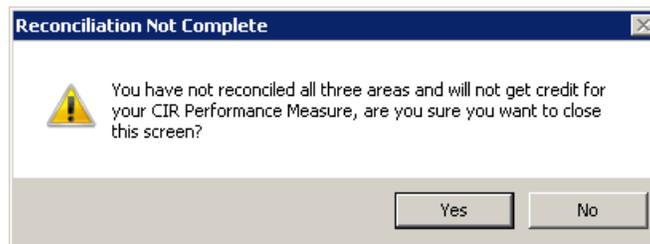

Figure 2 – ChartMaker Clinical – Pending E-Prescriptions

Added Features (continued)

- **Medications – Proxy Prescribing –** The proxy prescribing workflow has been improved to reduce the amount of time and clicks that the prescribing provider needs to successfully send prescriptions for a patient. Whenever a proxy prescriber enters and queues one or more electronic prescriptions, then sends them to the prescribing provider, **the queued status will remain active for that prescribing provider**, allowing them to easily send those queued medications without having to queue each individual medication again.

  Do note, that this workflow does not apply to control substances. Due to prescribing restrictions for controlled substances, that allows only one controlled substance medication to be prescribed and sent at a time, whenever a controlled substance is prescribed by a proxy prescriber, it will not be auto-queued for the prescribing provider. If a proxy enters a controlled substance along with other non-controlled substance medications, all the non-controlled substances medications will be auto-queued, but the controlled-substance(s) will not be.

  An updated warning message will appear when closing the patient's chart if a controlled substance is included in the pending e-prescriptions. See Figure 3.
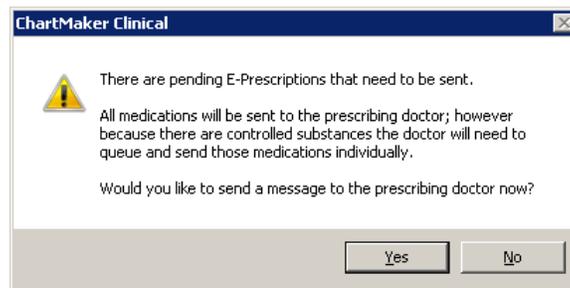

Figure 3 – ChartMaker Clinical – Pending E-Prescriptions

Also, the To-Do List message that is sent to the prescribing provider will relate this information whenever a controlled substance is entered by a proxy. See Figure 4.
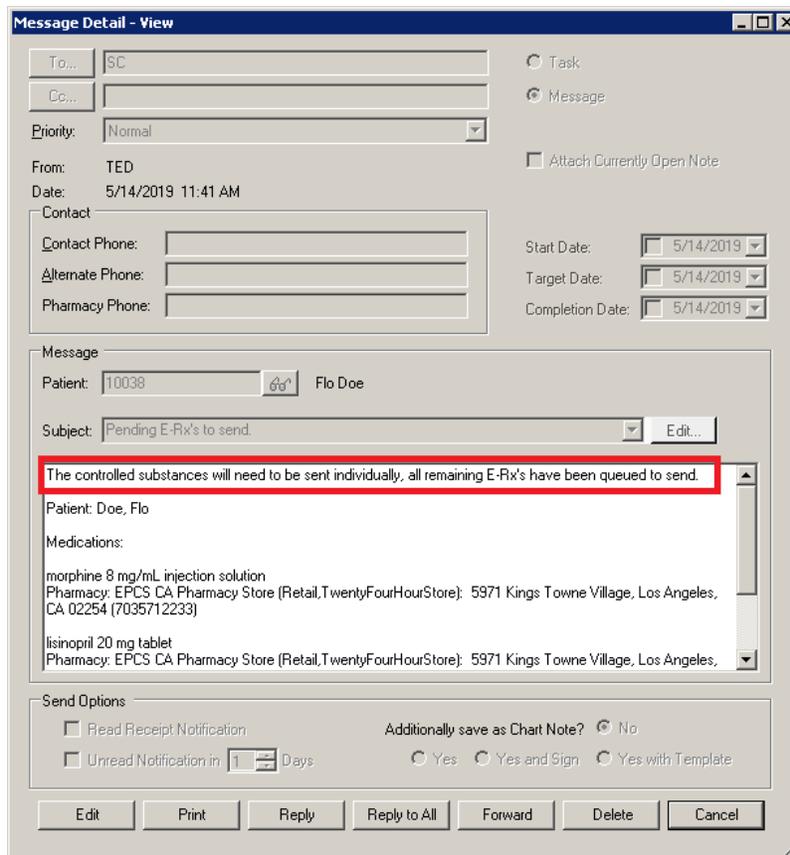

Figure 4 – Message Detail – Controlled Substances included

Added Features (continued)

Medications – Proxy Prescribing (continued)

Likewise, the message text has also been updated whenever medications are sent, but do not include a controlled substance. See Figure 5.

Figure 5 – Message Detail – No Controlled Substances

- **Meaningful Use Stage 3 2019 – Quality Measures –** All the Quality Measures for Meaningful Use Stage 3 2019 in the Meaningful Use Dashboard have been updated to the 2018 version for the 2019 reporting period, allowing you to select and run queries specific to the changes reflected in this stage for 2019, and provide accurate statistics for applicable attestation requirements. Do note that, for Stage 3 2019, this year (and every year) CMS has made changes to the requirements for the majority of the CQMs. In addition, the **NQF TBD – Hypertension: Improvement in Blood Pressure** CQM has been removed and are is no longer available for reporting. Please be sure to check the CQMs you are reporting to determine if changes were made that may affect your reporting and adjust accordingly.

Added Features (continued)

- **MIPS Dashboard –** The MIPS Dashboard has been updated to default to the 2019 view when initially accessed, and prior to selecting a Configuration. Likewise, the default percentages of the MIPS total score will be displayed for 2019: Quality at 45%, Promoting Interoperability at 25%, Improvement Activities at 15%, and Cost at 15%. See Figure 6. Do note, that once the configuration is selected for 2019 reporting period if you are exempt from the Promoting Interoperability category, the 25% will be reallocated to the Quality category; and if the Cost measures are not met, the 15% will be reallocated to the Quality category.

  Also, for 2019, the dashboard has been updated to calculate the estimated MIPS total composite score, as well as Print and Generate File for Submission that includes all categories.

  In addition, the title bar will display the reporting year, defaulting to 2019 if no configuration is selected. Once a configuration is selected, the reporting year will be dependent on the period configured for the selected configuration. Also, when accessing individual category dialogs (Quality Measures, Promoting Interoperability, Improvement Activities, and Cost) the reporting year will also appear in those title bars following the configuration name.
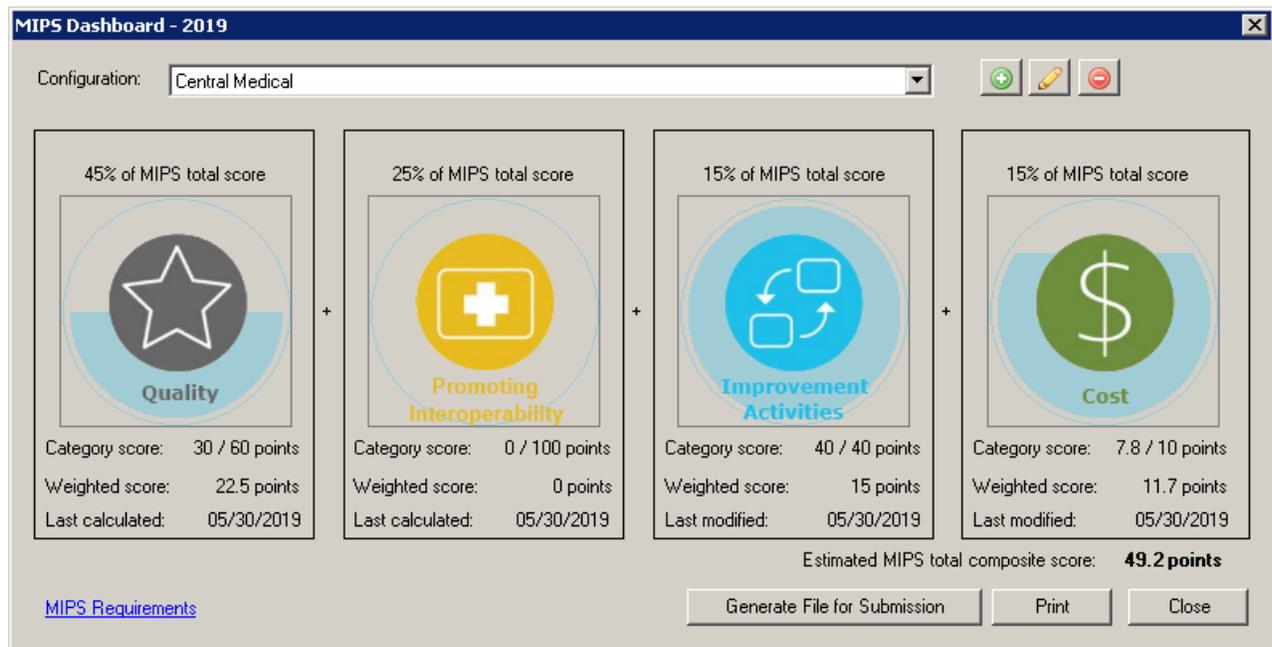

Figure 6 – MIPS Dashboard

Added Features (continued)

- **MIPS Dashboard – Quality –** All the Quality Measures for MIPS 2019 in the Quality Measure dialog have been updated to the 2018 version for the 2019 reporting period, and for the 2019 performance period will be 45% of the MIPS Total Score (unless PI and Cost categories are reallocated to Quality category). See Figure 7. Do note that, for 2019, this year (and every year) CMS has made changes to the requirements for the majority of the CQMs. In addition, the **CMS 65v7 – Hypertension: Improvement in Blood Pressure** has been removed and are is no longer available for reporting. Please be sure to check the CQMs you are reporting to determine if changes were made that may affect your reporting and adjust accordingly.

Figure 7 – Quality Measures – 2019

Added Features (continued)

- **The Note Tab – Vitals –** The Options dialog for BMI (accessed via the **Options** button in the Vital Signs Entry dialog) has been updated with a **BMI not done for medical reason** option that will appear, along with the **BMI refused by patient** option, whenever the BMI is not calculated for the patient (when the Height/Length, Weight, or both fields are left blank). See Figure 8. When the **BMI not done for medical reason** option is selected, the system will link it to the applicable SNOMED and LOINC codes and it will be used to calculate an exception for the Preventative Care and Screening: BMI Screening and Followup quality measure for Meaningful Use Stage 3 2019 and MIPS 2019.
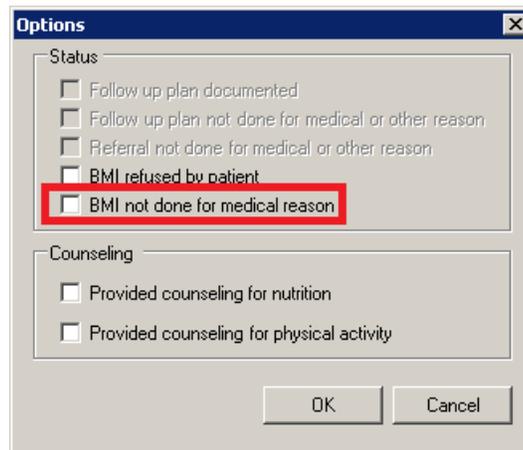

Figure 8 – Vital Signs Entry – BMI – Options