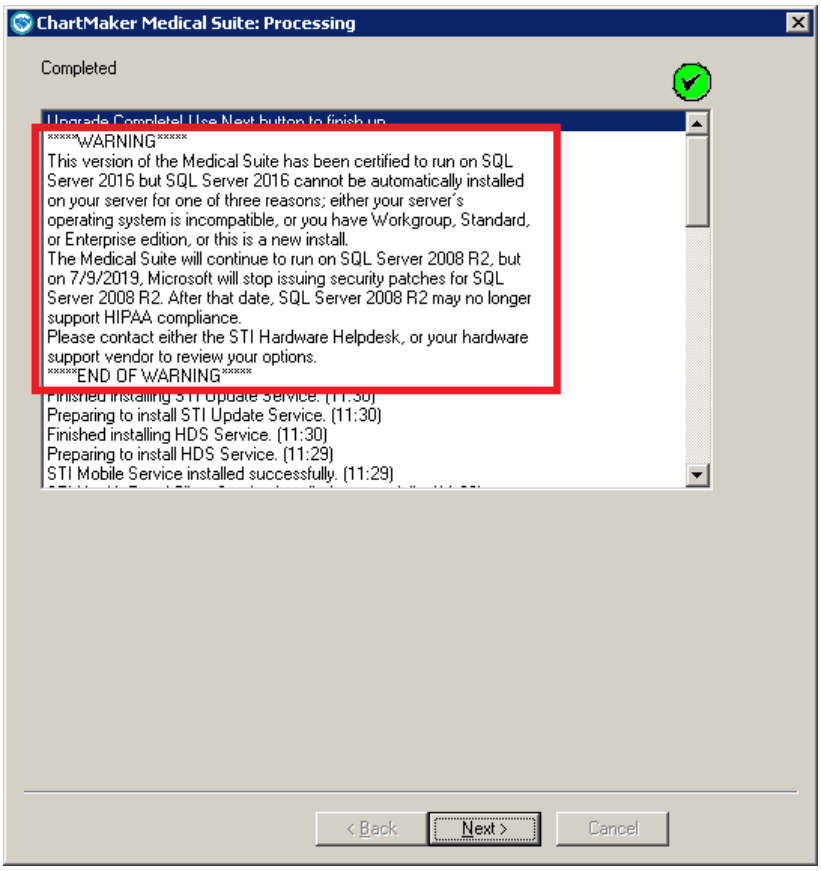
ChartMaker® Clinical Release Notes

ChartMaker® 2022.1 (fv6.7.4)

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

- **Export – Health Information Exchange –** In previous version, an issue could arise when exporting CDA data to HealtheLink that would result in an exception error being generated and the export not being completed. This issue has been corrected.

- **The ID Tab – Additional Info –** The Additional Patient Information dialog, accessed via the Additional Info button in the ID tab, has been updated with a **Pronouns** field, allowing you to configure the patient's pronouns. The Pronouns drop-down list will contain the standard pronouns based on LOINC code set (he/him/his/his/himself, she/her/her/hers/herself, they/them/their/theirs/themselves, ze/zir/zir/zirs/zirself, xie/hir ("here")/hir/hirs/hirself, co/co/cos/cos/coself, en/en/ens/ens/enself, ey/em/eir/eirs/emself, yo/yo/yos/yos/yoself, and ve/vis/ver/ver/verself). See Figure 1. When configured the pronouns will appear in the Title bar, next to Gender Identity, and in any configured lookup fields in chart notes and letters.

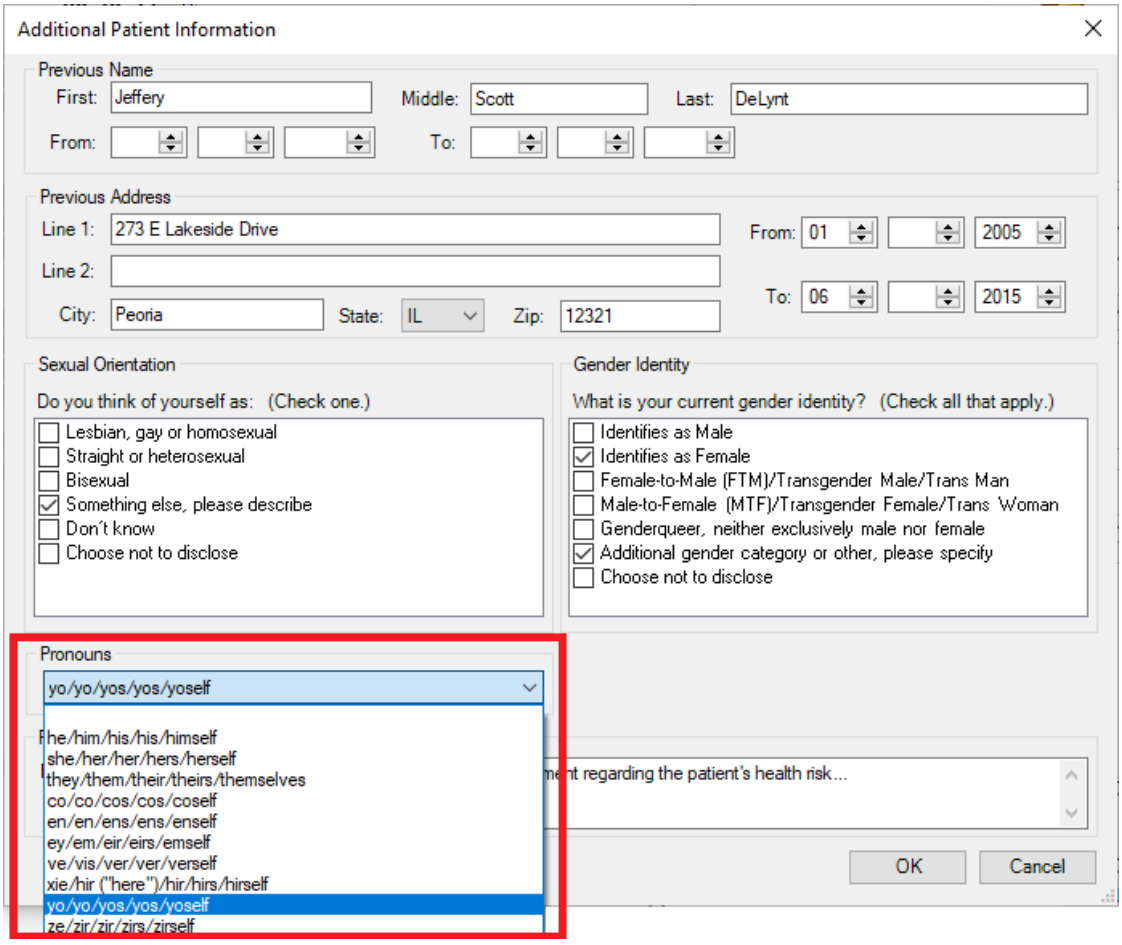


Figure 1 – ID Tab – Additional Patient Information

Added Features (continued)

- **Meaningful Use – CQM Import –** The CQM Import Dashboard (accessed via **Reports** > **Meaningful Use > CQM Import**), has been updated to process CQM data for the 2023 reporting year.

- **Meaningful Use – Dashboard – Stage 3 2023 –** The Meaningful Use Dashboard has been updated for the 2023 reporting period, and the Stage field has been updated with a Stage 3 2023 option. Likewise, all the Quality Measures for Meaningful Use Stage 3 2023 in the Meaningful Use Dashboard have been updated to the 2022 version for the 2023 reporting period, allowing you to select and run queries specific to the changes reflected in this stage for 2023, and provide accurate statistics for applicable attestation requirements. Also note that, for Stage 3 2023, this year (and every year) CMS has made changes to the requirements for the majority of the CQMs. Please be sure to check the CQMs you are reporting to determine if changes were made that may affect your reporting and adjust accordingly.

- **Meaningful Use – Dashboard – Stage 3 2022 – CQM Reporting –** The QRDA I and QRDA III file formats have been updated for the 2023 reporting period, allowing you to successfully submit files using the 2023 version of the eCQMs.

- **Medications – EPCS –NADEAN –** The system has been updated so that are no longer required to prescribe Buprenorphine medications for drug addiction (opioid) treatments. In the Consolidated Appropriations Act of 2023, the Drug Addiction Treatment Act (DATA) Waiver Program was eliminated. This program required prescribers to obtain a D.A.T.A. waiver number, also known as the Narcotics Addiction DEA Number (NADEAN), to prescribe medications for drug addiction treatment. Additionally, per a January 12, 2023 announcement from the DEA, a DATA-Waiver registration is not required to treat patients with buprenorphine for opioid use disorder; all prescriptions for buprenorphine only require a standard DEA registration number and the previously used DATA-Waiver registration numbers are not needed for any prescription; also, there are no limits or patient caps on the number of patients a prescriber may treat for opioid use disorder with buprenorphine.

  Therefore, when prescribing buprenorphine medications, this system will no longer require a NADEAN be configured in the NADEA Number field in the New Prescriber Location dialog via the Prescriber Setup dialog. This field is now optional and does not need to be configured to prescribe these types of medications.

Added Features (continued)

- **MIPS Dashboard –** The MIPS Dashboard has been updated to default to the 2023 view when initially accessed, and prior to selecting a Configuration. Likewise, the default percentages of the MIPS total score will be displayed for 2023: Quality at 30%, Promoting Interoperability at 25%, Improvement Activities at 15%, and Cost at 30%. See Figure 2. Do note, that once the configuration is selected for 2023 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 30% will be reallocated to the Quality category.

  Also, for 2023, 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 2023 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.

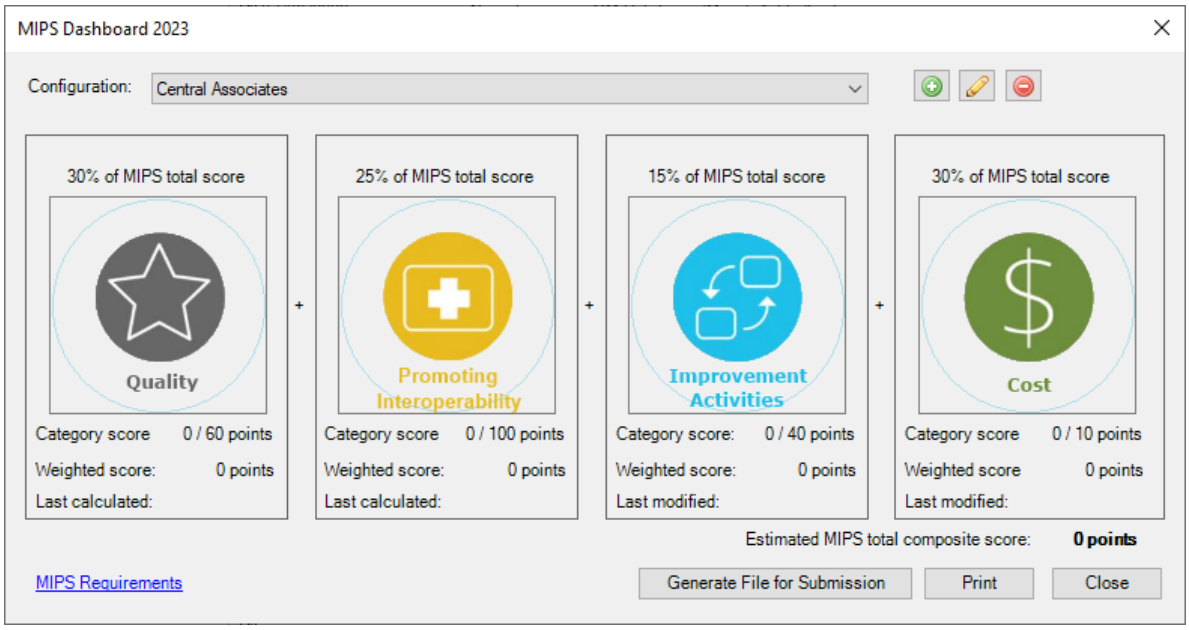


Figure 2 – MIPS Dashboard

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 2023 reporting period. See Figure 3.

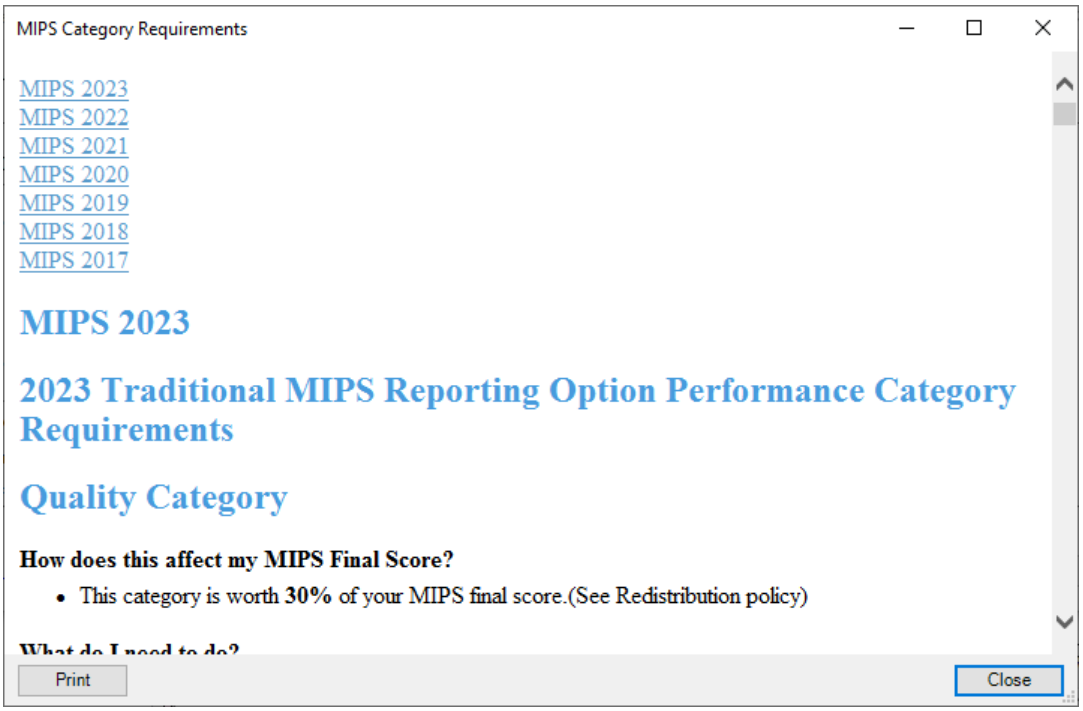


Figure 3 – MIPS Category Requirements

Added Features (continued)

- **MIPS Dashboard – Configuration–** The MIPS Dashboard Configuration dialog has been updated for the MIPS 2023 reporting period. See Figure 4.

  The **Qualifies for small practice bonus** option, in the **Quality Reporting** section, has been updated to also allow qualifying small practices to receive a 3-point minimum score when reporting quality measures in the Quality Measures area. For the 2023 reporting year, and subsequent years, there is no longer 3-point floor for practices that do not meet case minimum criteria when reporting a quality measure, except for qualifying small practices. When this option is checked, the system will add 6 bonus points to the Total Score in the Quality Measure dialog when at least one quality measure is selected and will now also give a 3-point minimum for each quality measure selected.

  In the **Promoting Interoperability Measure Selection** section, the **Query PDMP for at least one Schedule II Opioid electronically prescribed during the measurement period** option has been removed, as this measure is no longer an optional bonus for the 2023 reporting period but is a required measure unless a practice is excluded. See the new **Query of Prescription Drug Monitoring Program (PDMP)** exclusion in the **Promoting Interoperability Exclusions** section below.

  The **Promoting Interoperability Exclusions** section has been updated with a new **Query of Prescription Drug Monitoring Program (PDMP)** exclusion, a new **Electronic Case Reporting** exclusion, and a new **Immunization Registry Reporting** exclusion. Click the corresponding **Do I Qualify?** link for detailed information on determining whether you qualify for these exclusions. Do note when selecting exclusions, you can only exclude the Electronic Case Reporting or the Immunization Registry Reporting, but not both. When either of these options is selected the other exclusion will be disabled.

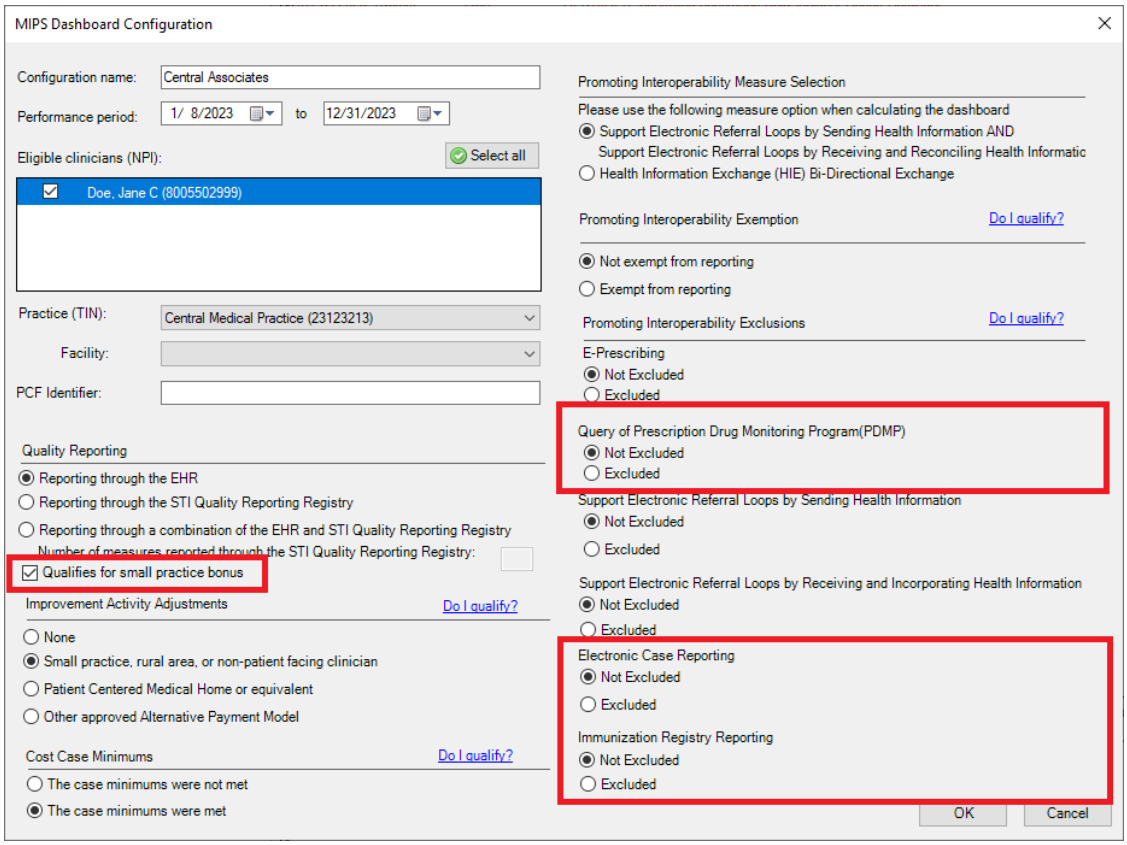


Figure 4 – MIPS Dashboard Configuration

Added Features (continued)

- **MIPS Dashboard – Quality –** All the Quality Measures for MIPS 2023 in the Quality Measure dialog have been updated to the 2022 version for the 2023 reporting period, and for the 2023 performance period will be 30% of the MIPS Total Score (unless PI and Cost categories are reallocated to Quality category). Likewise, all the associated benchmarks for each CQM have been updated to the 2023 version, which can be accessed by double-clicking each individual measure in the right pane.

  Two CQMs have been removed for the 2023 reporting period: **CMS 75 Children Who Have Dental Decay or Cavities** has been removed from the Other Measures section; and **CMS 134 Diabetes: Medical Attention for Nephropathy** has been removed from the Other Measures section. See Figure 5. Also note that, for MIPS 2023, this year (and every year) CMS has made changes to the requirements for the majority of the CQMs. Please be sure to check the CQMs you are reporting to determine if changes were made that may affect your reporting and adjust accordingly.

  In addition, the QRDA III file format that is generated via the **Generate File for Submission** button, has been updated for the 2023 reporting period, allowing you to successfully submit files using the 2023 version of the eCQMs.

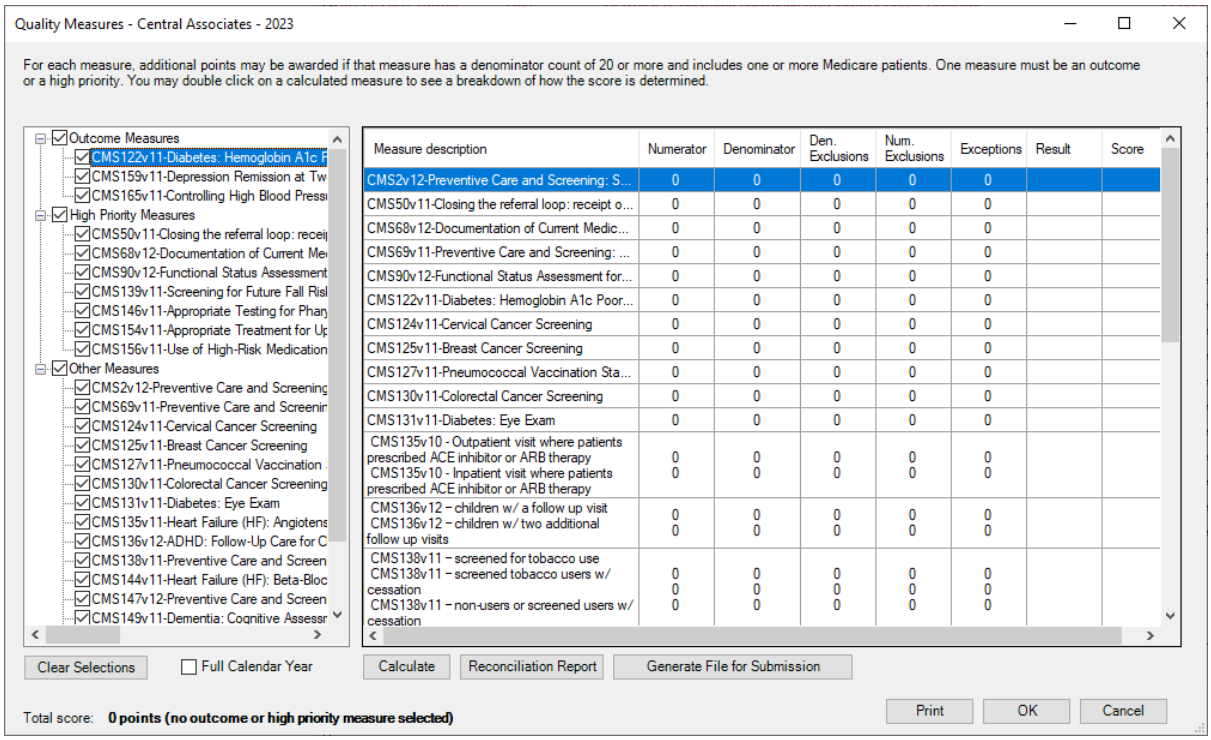


Figure 5 – Quality Measures – 2023

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 2023, and for the 2023 performance period will be 25% of the MIPS Total Score.

  Upon entering the Promoting Interoperability dialog for 2023, you will notice the **Performance Category Measures** section that is like the Promoting Interoperability dialog for 2022. The functionality remains like 2022 except for a new **Performed PDMP query for at least one Schedule II Opioid or Schedule III or IV drug electronically prescribed during the measurement period** option, that is a self-assessed attestation requirement. When this option is checked, a **Yes** will appear in the Results column for the Querying the Prescription Drug Monitoring Program (PDMP) measure, in the Promoting Interoperability grid, and 10 points will be given for attesting that you queried the PDMP for at least one prescription. When this option is not checked, a **NO** will appear in the Results column for the Querying the Prescription Drug Monitoring Program (PDMP) measure, and 0 bonus points will be given for this measure. See Figure 6.

  Below the Performance Category Measures grid, a new **Public Health and Clinical Data Exchange Objective** section allows you to self-attest whether you are actively engaged with **Immunization Registry Reporting** and/or **Electronic Case Reporting**. The options are dependent on how the exclusion options are configured in the MIPS Dashboard Configuration screen and allow up 25 points when selected. Likewise, for the **Submitted data to one additional public health agency or clinical data registry (5-point max bonus)** option, you can select up to a reporting agency for a total of 5 points, if applicable. Once an option is selected for the 5 points, the other options will be grayed out.

  Only after the **Performed a security risk analysis** and **Performed an annual assessment of the High Priority Guide (SAFER Guides)** options have 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.

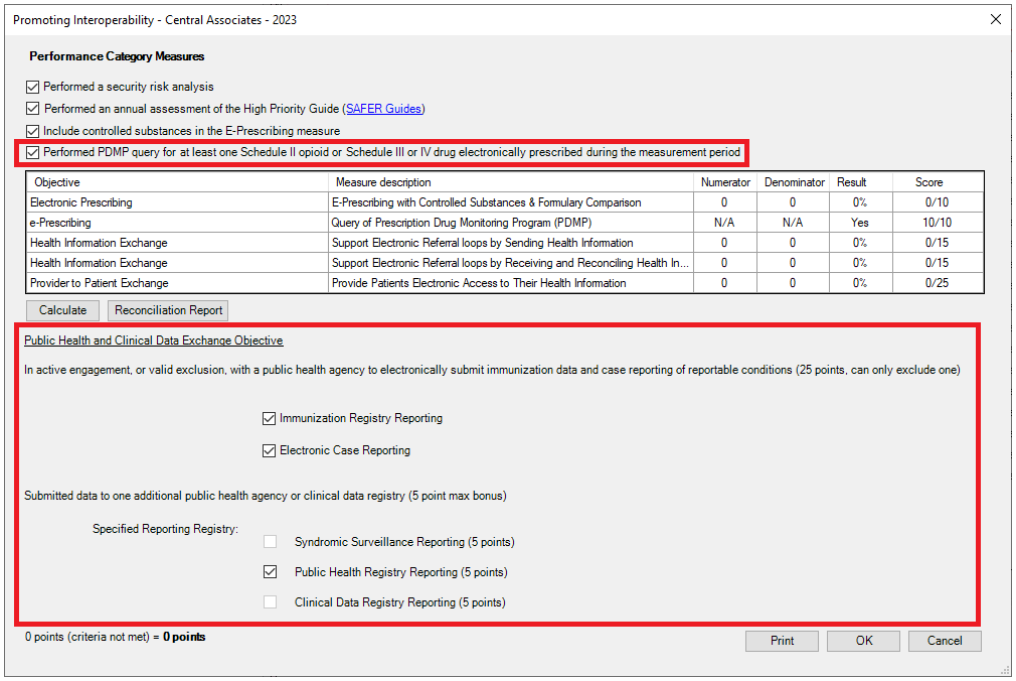


Figure 6 – Promoting Interoperability – 2023

- **MIPS Dashboard – Promoting Interoperability –** In previous versions, an issue could arise when reporting the Support Electronic referral loops by Sending Health Information measure where the numerator was not calculating correctly for open referrals. This issue has been corrected.

Added Features (continued)

- **MIPS Dashboard – Improvement Activities –** The Improvement Activities dialog has been updated with revised improvement activities for MIPS 2023, and for the 2023 performance period will be 15% of the MIPS Total Score. These are broken up into ***two*** sub-categories (**High Weighted** and **Medium Weighted**). As in previous versions, for each entry you can click the corresponding **More Info?** link to view further details regarding the activity. See Figure 7.

  For 2023, the following Improvement Activities have been added to the High Weighted tab: Create and Implement a Plan to Improve Care for Lesbian, Gay, Bisexual, Transgender, and Queer Patients, and Create and Implement a Language Access Plan. And, for 2022, the following have been added to the Medium Weighted tab: Adopt Certified Health Information Technology for Security Tags for Electronic Health Record Data, COVID-19 Vaccine Achievement for Practice Staff, and Obtain or Renew an Approved Waiver for Provision of Buprenorphine as Medication - Assisted Treatment for Opioid Use Disorder.

  The following Improvement Activities from 2022 have been removed for 2023: Participation in a QCDR, that promotes use of patient engagement tools, Participation in a QCDR, that promotes collaborative learning network opportunities that are interactive, Use of QCDR for feedback reports that incorporate population health, Consultation of the Prescription Drug Monitoring program, Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes, and PCI Bleeding Campaign.

  And the following Improvement Activities have been modified for 2022: Practice Improvements to Align with OpenNotes, Practice Improvements that Engage Community Resources to Address Drivers of Health, Use of QCDR data for ongoing practice assessment and improvements, and Implementation of formal quality improvement methods, practice changes, or other practice improvement processes.

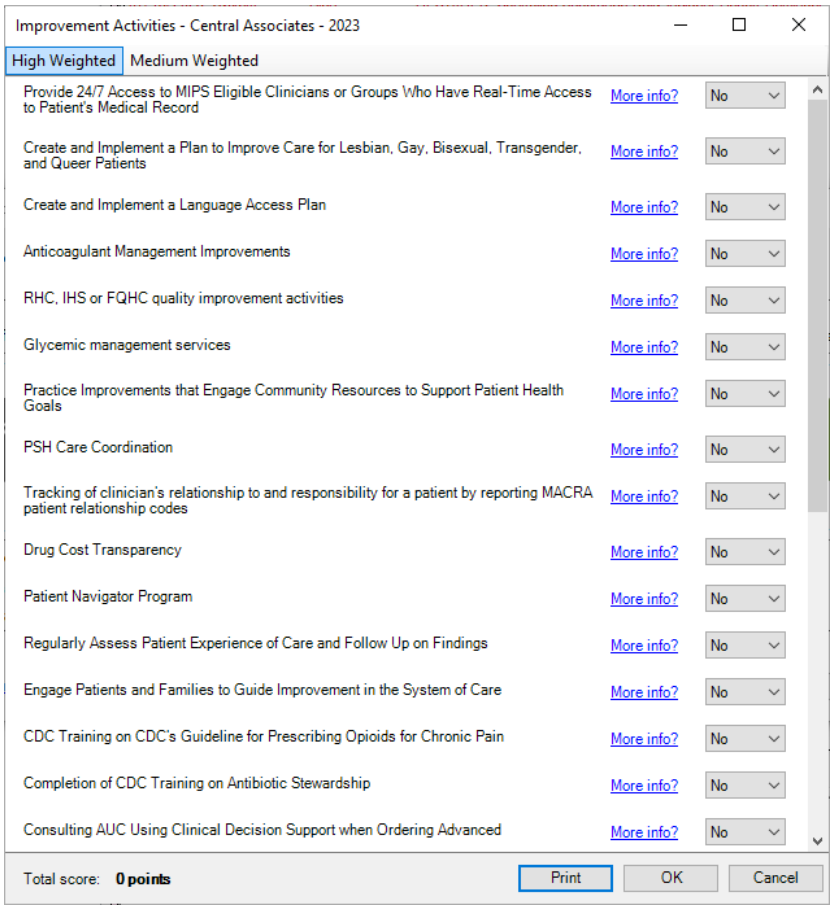


Figure 7 – Improvement Activities

Added Features (continued)

- **MIPS Dashboard – Cost –** The Cost dialog has been updated for MIPS 2023, and for the 2023 performance period will be 30% of the MIPS Total Score. The functionality remains the same as in 2022.

- **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.

- **The Note Tab – Print Immunizations and Vitals Report –** In previous versions, an issue could arise when printing the Immunizations and Vitals Report where procedures that were marked as Procedure Note Performed with a Comment of Patient Denied, would still appear on the report. This issue has been corrected.

- **Preferences — Fax –** The **Fax** tab has been updated with a new **Updox Cover Sheet** section that has a new **Include facilities in cover sheet header selection** option allowing you to determine whether the facilities in the system will appear in the **Header** field of Updox Faxing dialog. See Figure 8.

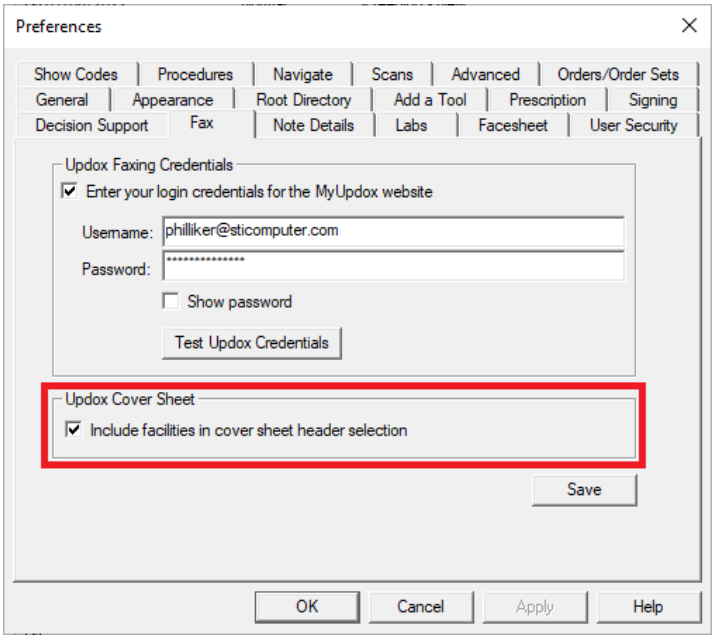


Figure 8 – Preferences – Fax

When this option is selected, all active facilities in the system will appear, along with their configured address, in the Header drop-down list, allowing you to select a specific facility to appear in the header for the Updox Faxing cover sheet. See Figure 9.

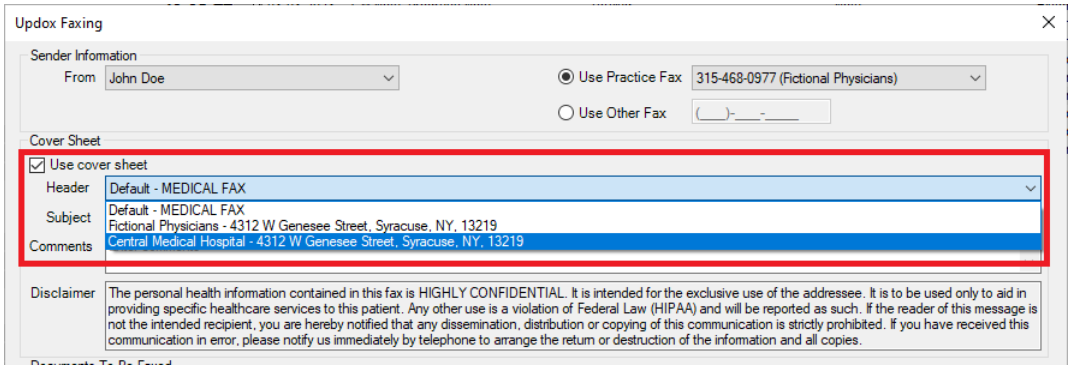


Figure 9 – Updox Faxing – Header

Added Features (continued)

- **Preferences — Signing –** The **General** section of the **Signing** tab has been updated with a Show Unsigned Notes dialog at login preference. See Figure 10. This preference has been moved from the General tab and has been relabeled from, Show Dialog for Unsigned Notes, in previous versions. The functionality of this preference remains the same as it was in previous versions.

  Also, the Signing tab has been updated with a **Signature** button. In previous versions this button was labeled, Signature Edit, and was found in the General tab. The functionality remains the same as in previous versions.

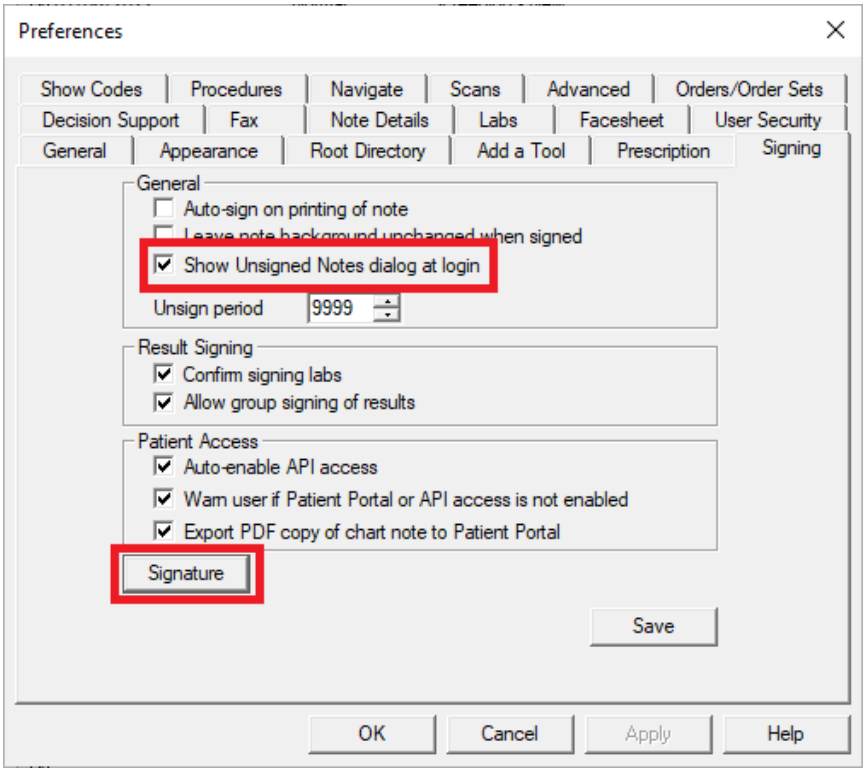


Figure 10 – Preferences – Signing

- **System Tables – User Management –** The System Tables menu (**Edit** > **System Tables**) has been updated with a new **User Management** option, that contains two options: **Users** and **Co-signature Requirements**. The Users option accesses the **Users** dialog where you can add and modify user information and configure privileges for users. In previous versions this was accessed via **Edit** > **System Tables** > **Users**. This functionality remains the same as before.

  The **Co-signature Requirements** option allows access to the new Co-signature Requirements dialog where you can determine what type of documents and notes need to be cosigned for users that have a **Charts** privilege of **Sign w/ Co-Sign**. See Figure 11. You can configure these requirements for either a global **Default** for all users or for an individual **User**. Once the applicable option is selected in the Profile section, you can check or uncheck the types of documents that a co-signature is not required for from the list below. When the User option is selected, you can select applicable users in the drop-down list and then determine whether they should user the default setting, **Use default profile**, or uncheck this option and configure the **Co-signature not required for:** options for that individual user. Any changes made in this dialog is tracked in the Audit Trail.

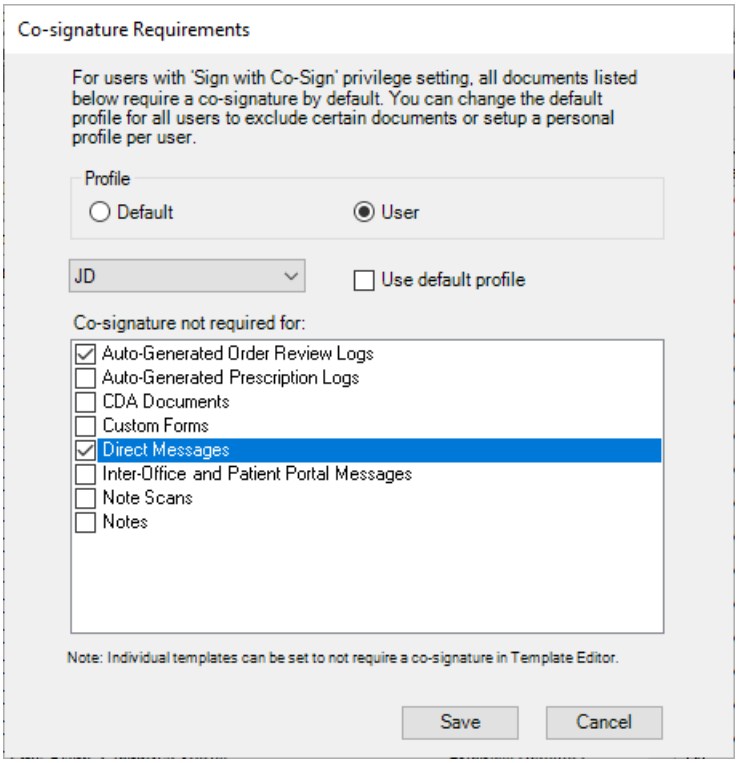


Figure 11 – System Tables – User – To-Do List Access Restrictions Privilege

Added Features (continued)

- **Template Editing – Template Editor** – The Template Editor has been updated with a **Co-Signature required** option that allows you to determine whether notes generated from that template need to be cosigned for users that have a **Charts** privilege of **Sign w/ Co-Sign**. See Figure 12. All templates will default to having this option checked, and when active the signing process will work the same as it has in previous versions where the co-signatory signs the note and then it must be signed by a user with full signing privileges before that note can be finalized (fully signed). When this option is unchecked, and inactive, the chart note just needs the initial user, with the Charts privilege of Sign w/ Co-Sign, to sign the note for it to be finalized. The system will track all modifications of this option in the Audit Trail.

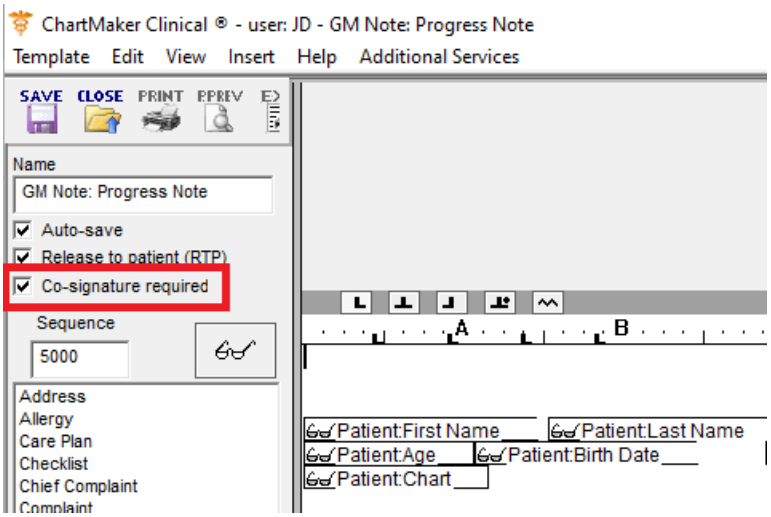


Figure 12 – Template Editor

Additionally, the Template List has been updated with a **Co-sig** column that will display whether the template is not configured with the **Co-signature required** option checked. See Figure 13. Whenever the **Co-signature required** option is inactive and unchecked for a template, a **No** will appear in the Co-sig column. Whenever the **Co-signature required** option is active and checked for a template, the Co-sig column will be empty, and nothing will display in the column. Likewise, the Search Column drop-down list now contains a Co-sig option, allowing you to search for templates that have the **Co-signature required** option as inactive (No in search field).

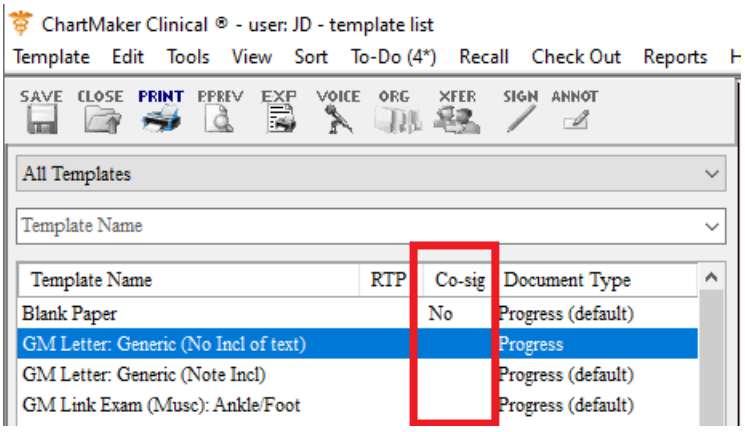


Figure 13 – Document Type

Added Features (continued)

- **Template Editing – Lookup –** The Lookup Properties dialog has been updated with a new **Email** option in the Fields list when the Source is **Patient**. This option allows you to insert the patient's email information into chart notes and letters as needed. See Figure 14. When displaying the email in the chart note, the email will appear in when an email is configured for the patient. However, if the **No Email Available** option is selected in the ID tab for the patient, the note will display, "Email not provided by patient," regardless of whether an email is entered or not.

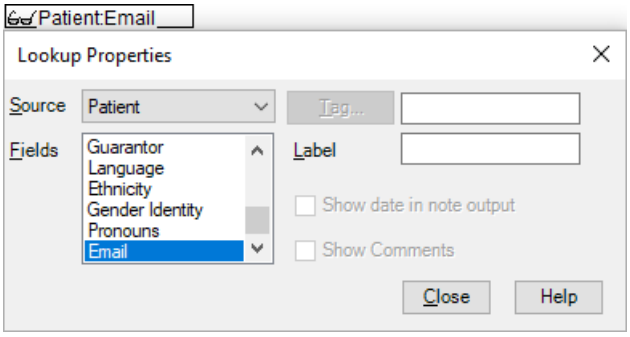


Figure 14 – Template Editor – Lookup Properties

- **Template Editing – Lookup –** The Lookup Properties dialog has been updated with a new **Pronouns** option in the Fields list when the Source is **Patient**. This option allows you to insert the patient's pronouns into chart notes and letters as needed. See Figure 15.

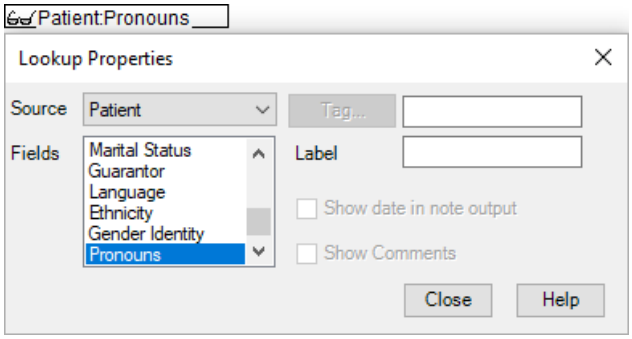


Figure 15 – Template Editor – Lookup Properties

- **Title Bar –** The title bar in Clinical has been updated so that when a patient's chart is open, their **Pronouns** will appear next to their Gender Identity. See Figure 16.



Figure 16 – Title Bar

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