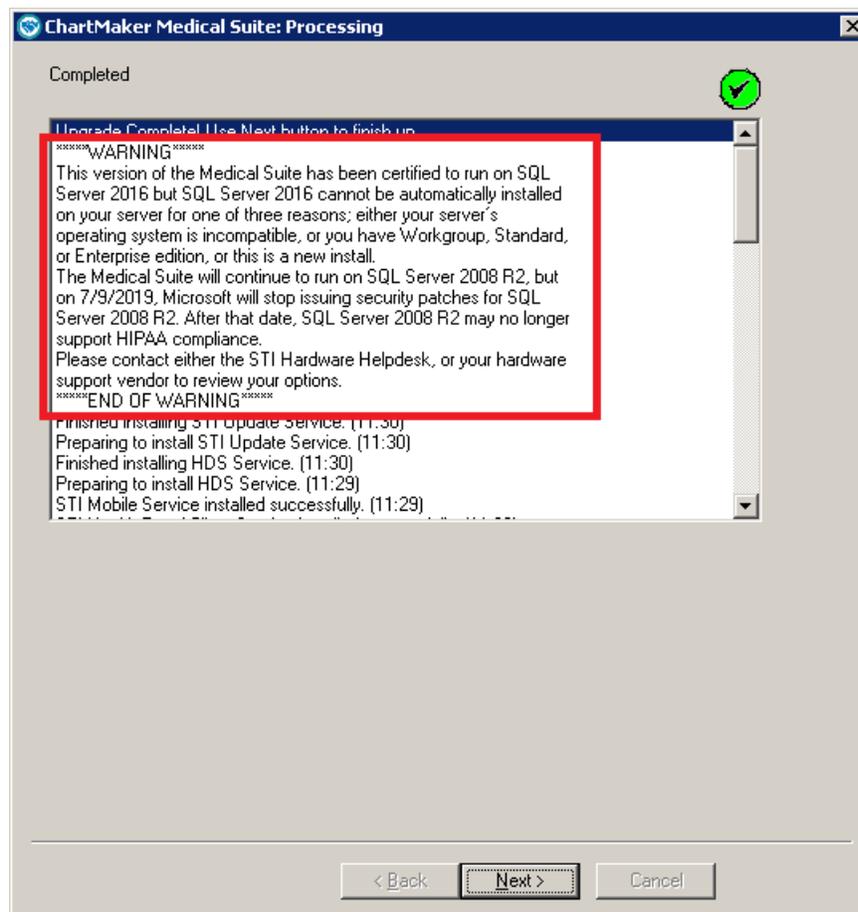


ChartMaker® Practice Manager Release Notes

ChartMaker® 2018.2 (fv6.4.2)

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

Administration

- **Administration – Diagnosis Search** – The ICD10 Search and Crosswalk areas of the Diagnosis Search dialog 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. See Figure 1.

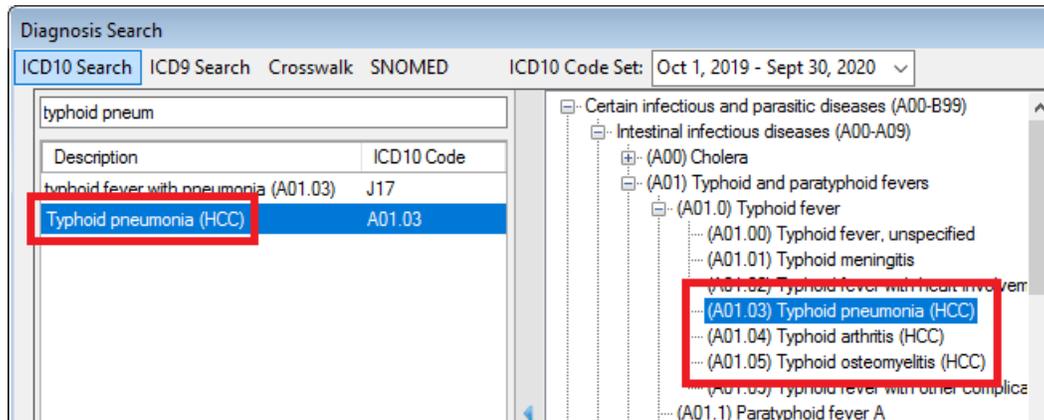


Figure 1 – Diagnosis Search

- **Administration – Preferences – System Level Preferences** – The **Patient Related** section, in the **Patient** tab of the Maintain System Default Preferences dialog, has been updated with an **Auto-populate Patient Reminder preferences** option. See Figure 2. When this option is checked, the system will default any **Email**, primary cell (**Primary number**), primary home (**Secondary number**), and primary work (**Tertiary number**) phone numbers, as well as check the **Phone calls allowed** and **Text messages allowed** options in the Patient Reminder Preferences dialog (accessed via the Patient Reminders button in the Patient screen) when the corresponding information is entered and saved for a new patient in the Patient screen. For an existing patient, if you modify any phone number or email information the Patient Reminder Preferences will be updated when saving. Likewise, if there is no Patient Reminder Preferences set for an existing patient, and you enter any phone number or email information, the system will populate this information in the Patient Reminder Preferences dialog, upon saving. Do note, if you use the Patient Reminder Module, please do not select this preference before contacting STI Support.

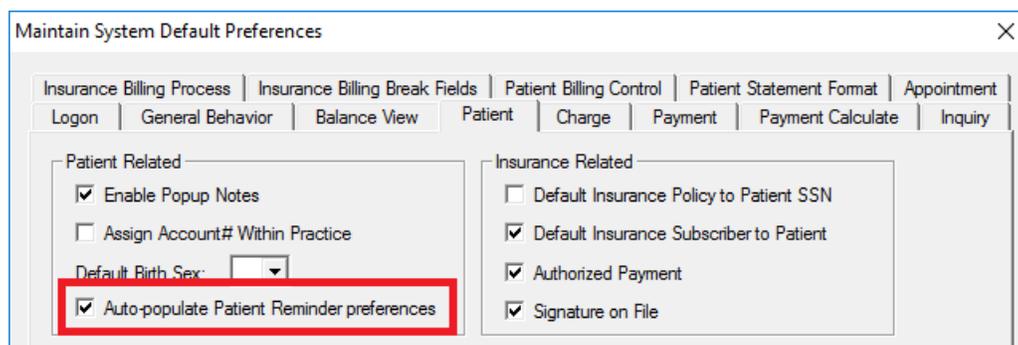


Figure 2 – Maintain System Default Preferences – Patient

Administration (continued)

- **Administration – Preferences – System Level Preferences** – The **Other Controls** section, in the **Patient Billing Control** tab of the Maintain System Default Preferences dialog, has been updated with a **Show Patient Credits** option. See Figure 3. When this option is checked, a **Credit** column will appear in the Statement Summary dialog (accessed via **Patient Billing > Reprint Patient Statement > View Patients** button), as well as in the **Batch Statement List** (accessed in the Statement Summary by clicking the **Print this List** button) that will show the type of credit a patient, or responsible party, has attached to their account, when applicable. Do note, that this functionality can be turned off, and on, at the practice level. See the Patient Billing section below for further details on this functionality works in the Statement Summary dialog.

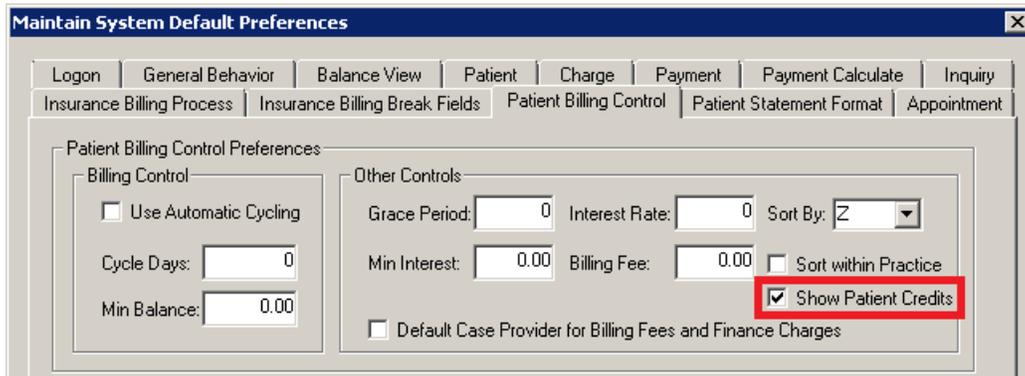


Figure 3 – Maintain System Default Preferences – Patient Billing Control

- **Administration – Preferences – System Level Preferences** – The **Payment Preferences** section, in the **Payment** tab of the Maintain System Default Preferences dialog, has been updated with a **Default Balance Due as Amount Paid for Secondary Insurance in Payments** option. See Figure 4. When this option is checked, the system will default any balance due amount into the Paid field, in the Payments > Make a Payment screen, when manually making a secondary insurance or patient payment, after the initial primary insurance payment has been entered.

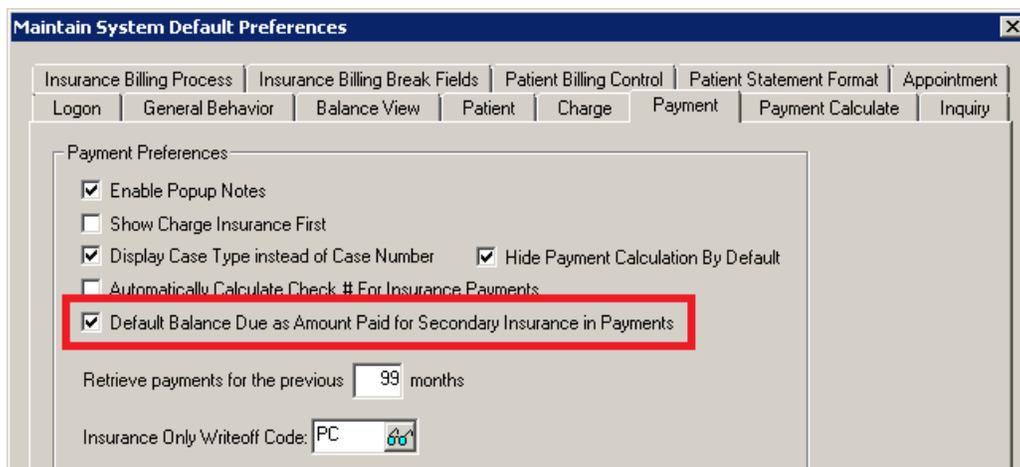


Figure 4 – Maintain System Default Preferences – Payment

Administration (continued)

- **Administration – Preferences – Practice Level Preferences** – The **Patient Related** section, in the **Patient** tab of the Maintain Practice Preferences dialog, has been updated with an **Auto-populate Patient Reminder preferences** option. See Figure 5. When this option is checked, the system will default any **Email**, primary cell (**Primary number**), primary home (**Secondary number**), and primary work (**Tertiary number**) phone numbers, as well as check the **Phone calls allowed** and **Text messages allowed** options in the Patient Reminder Preferences dialog (accessed via the Patient Reminders button in the Patient screen) when the corresponding information is entered and saved for a new patient in the Patient screen. For an existing patient, if you modify any phone number or email information the Patient Reminder Preferences will be updated when saving. Likewise, if there is no Patient Reminder Preferences set for an existing patient, and you enter any phone number or email information, the system will populate this information in the Patient Reminder Preferences dialog, upon saving. Do note, if you use the Patient Reminder Module, please do not select this preference before contacting STI Support.

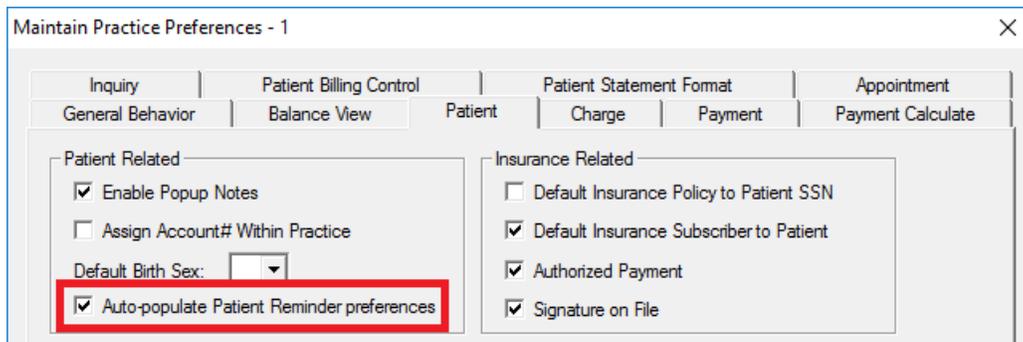


Figure 5 – Maintain Practice Preferences – Patient

- **Administration – Preferences – Practice Level Preferences** – The **Other Controls** section, in the **Patient Billing Control** tab of the Maintain Practice Preferences dialog, has been updated with a **Show Patient Credits** option. See Figure 6. When this option is checked, a **Credit** column will appear in the Statement Summary dialog (accessed via **Patient Billing > Reprint Patient Statement > View Patients** button), as well as in the **Batch Statement List** (accessed in the Statement Summary by clicking the **Print this List** button) that show the type of credit a patient, or responsible party, has attached to their account, when applicable. See the Patient Billing section below for further details on this functionality works in the Statement Summary dialog.

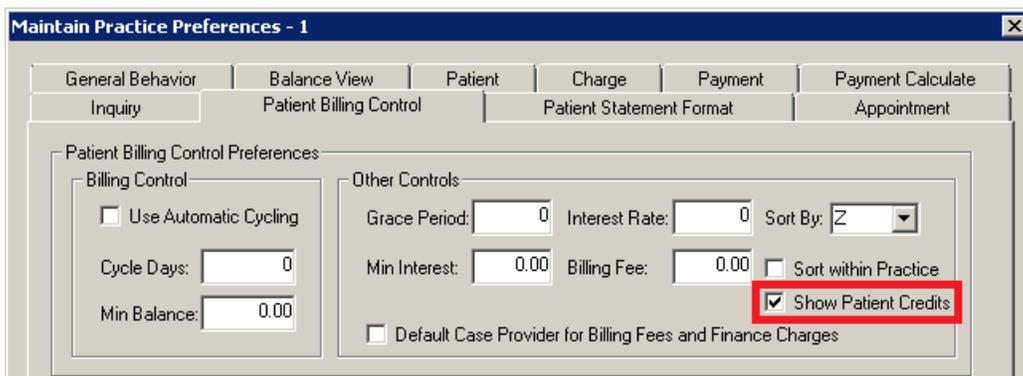


Figure 6 – Maintain Practice Preferences – Patient Billing Control

Administration (continued)

- **Administration – Preferences – Practice Level Preferences** – The Payment Preferences section, in the Payment tab of the Maintain Practice Preferences dialog, has been updated with a **Default Balance Due as Amount Paid for Secondary Insurance in Payments** option. See Figure 7. When this option is checked, the system to default any balance due amount into the Paid field, in the Payments > Make a Payment screen, when manually making a secondary insurance or patient payment, after the initial primary insurance payment has been entered.

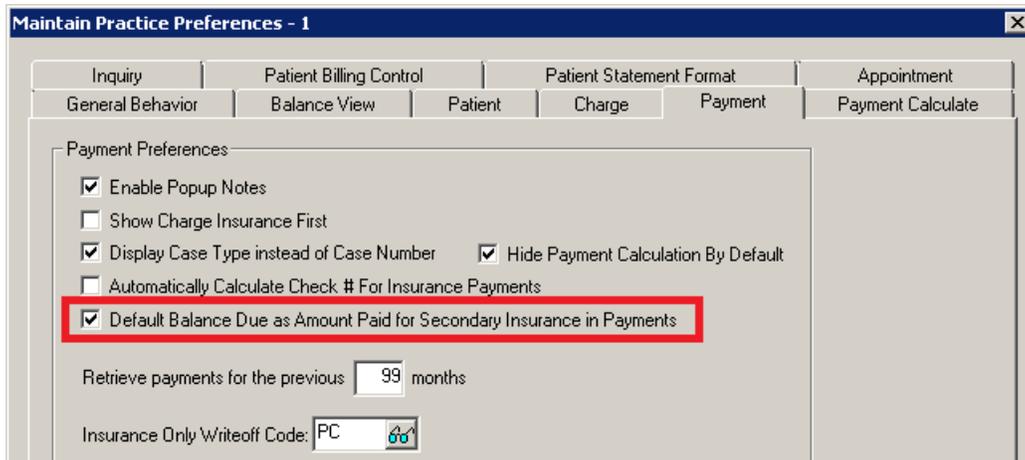


Figure 7 – Maintain Practice Preferences – Payment

Charge

- **Charge – Enter a Charge** – The ICD10 Search and Crosswalk areas of the Diagnosis Search dialog 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. See Figure 8.
- **Charge – Edit a Charge** – The ICD10 Search and Crosswalk areas of the Diagnosis Search dialog 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. See Figure 8.

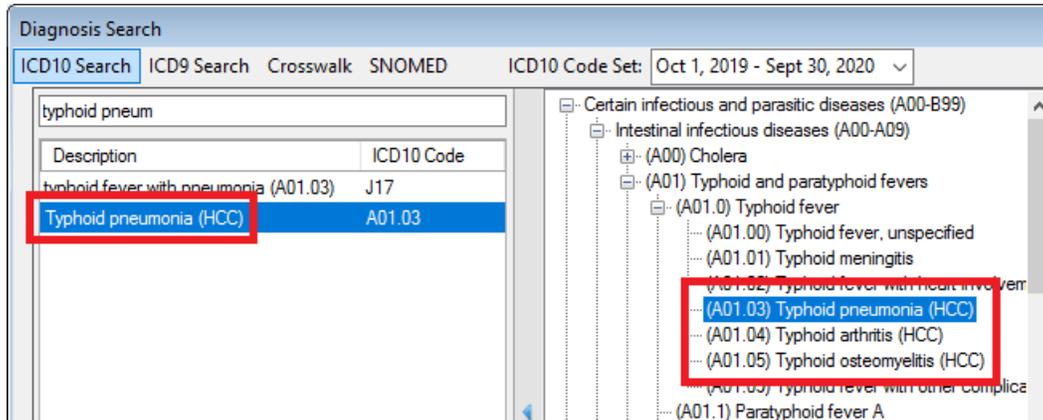


Figure 8 – Diagnosis Search

- **Charge – Edit a Charge** – The **Void or Adjustment** field, in the Void or Adjustment dialog (accessed via the **Void/Adjust** button in the Edit a Charge screen), has been updated with a **C Corrected** option that allows you to submit and print corrected claims. When the Corrected option is selected, the Charge Amount field will also be active, allowing you to edit the charge amount as needed. See Figure 9.

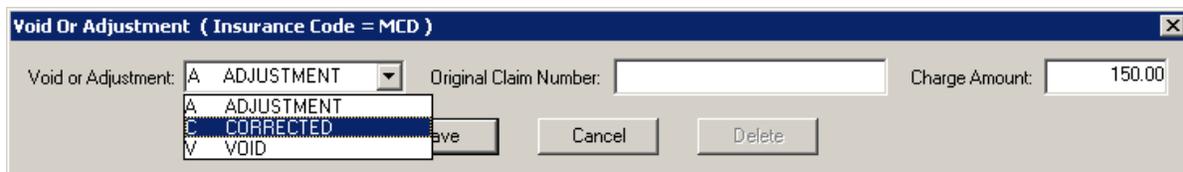


Figure 9 – Void or Adjustment

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.
- **Clinical – Immunization – Immunization Registry – CT WiZ** – The system has been updated so that the Connecticut Immunization Information System (CT WiZ) registry, in conjunction with the ChartMaker® Medical Suite, utilizes 2.5.1 v1.5 HL7 bidirectional messaging and exchange of vaccine (immunization) information. Once the system is set up, and you are enrolled with CT WiZ, immunization records will be automatically sent to the CT WiZ when the immunization record is saved (via the **Next Account** button) in the Immunization sub-tab of Clinical tab in Practice Manager, or when a chart note is saved or closed in the Clinical application.

Patient

- **Patient – Case – Diagnosis** – The ICD10 Search and Crosswalk areas of the Diagnosis Search dialog 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. See Figure 10.

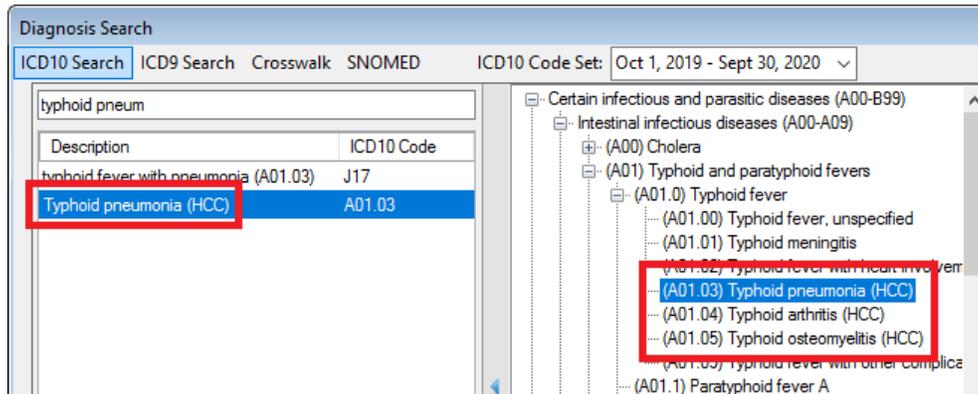


Figure 10 – Diagnosis Search

- **Patient – Patient Demographic Warning Message** – The Patient Demographic Warning message that appears when attempting to save or close a patient's chart when another user has updated the demographic information for the same patient, has been updated to provide clearer guidance on how to proceed. See Figure 11 for an example of this message with the updated verbiage.

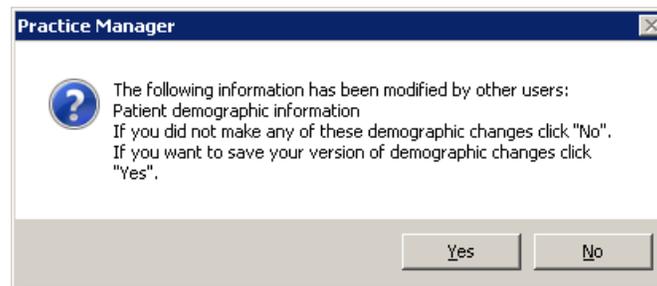


Figure 11 – Patient Demographic Warning Message

Patient Billing

- **Patient Billing – Reprint Patient Statement – View Patients** – The system has been updated so that when the **Show Patient Credits** option is selected in the **Other Controls** section of the **Patient Billing Control** tab of the Maintain Practice Preferences dialog, the Statement Summary dialog will display a **Credit** column that will show the type of credit a patient, or responsible party, has attached to their account, when applicable. See Figure 12. When a patient or responsible party has a credit attached to their account, the Credit column will display a **P** (for a Patient credit), **I** (for an Insurance credit), **S** (for a System credit), or **C** (for a Copay credit). When there are multiple credits types they will be separated by commas. If you click the **Print this List** button, the **Batch Statement List** will also contain a Credit column and will display the credits in the same manner as the Statement Summary dialog.

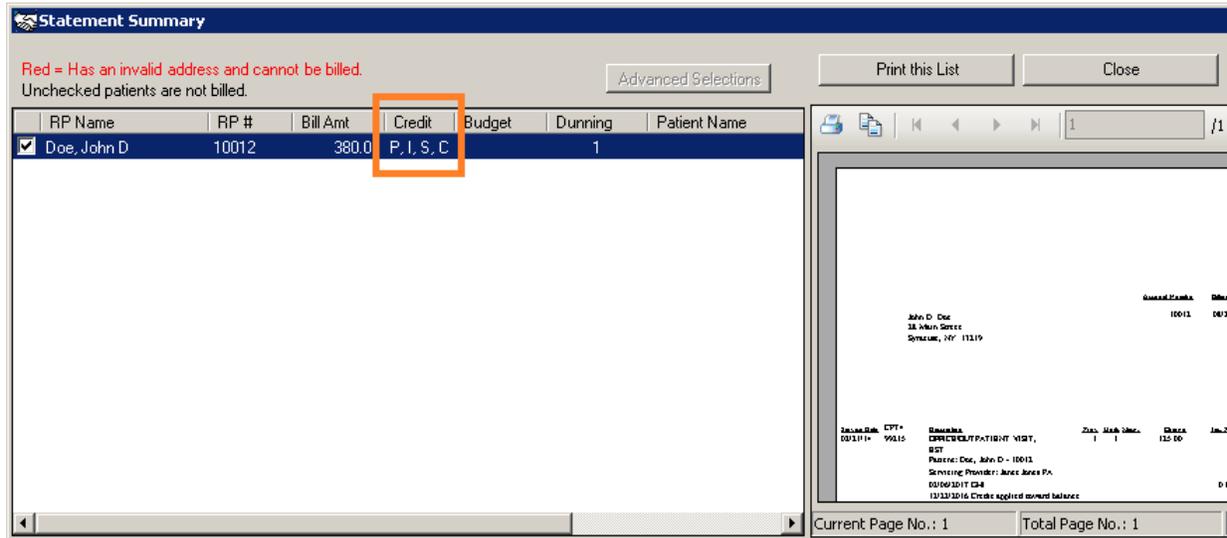


Figure 12 – Statement Summary

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