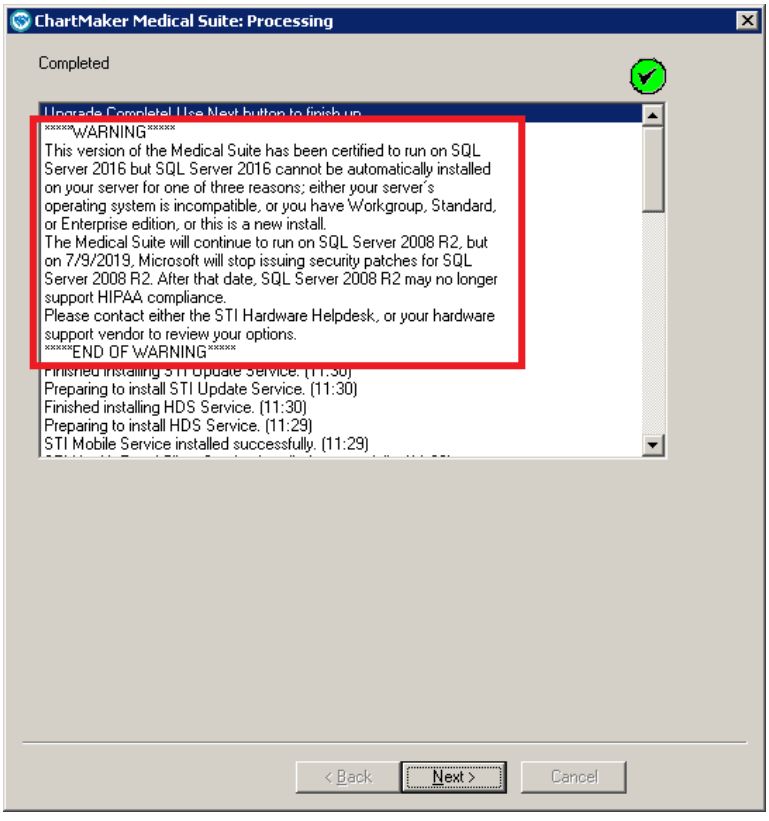
ChartMaker® Practice Manager Release Notes

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.

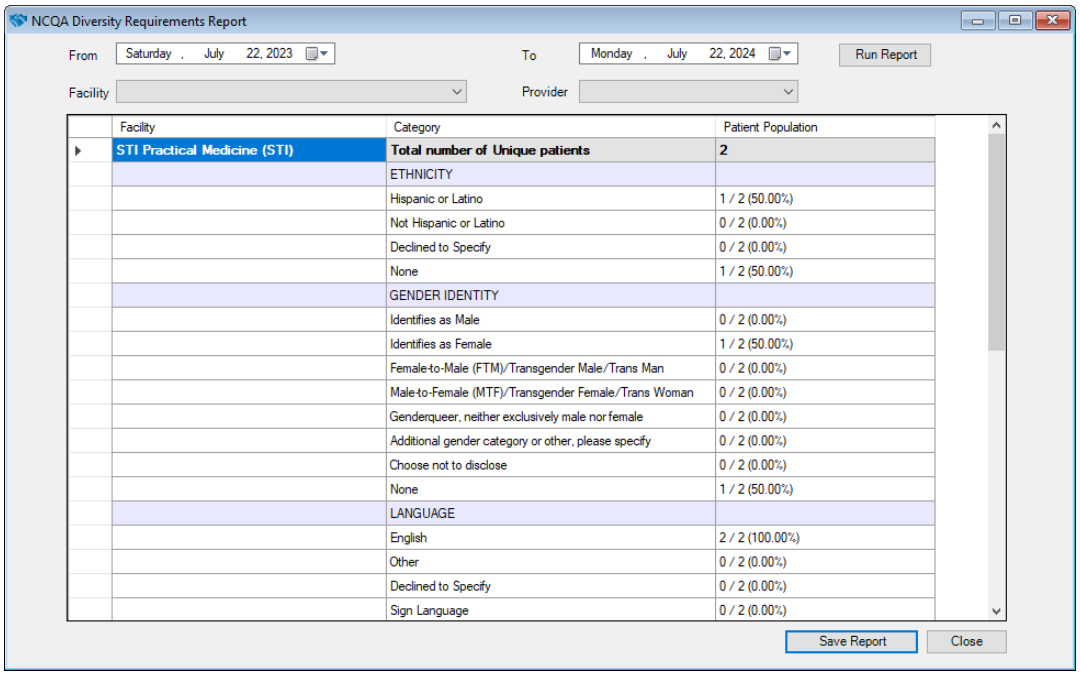


Figure 1 – NCQA Diversity Requirements Report

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.

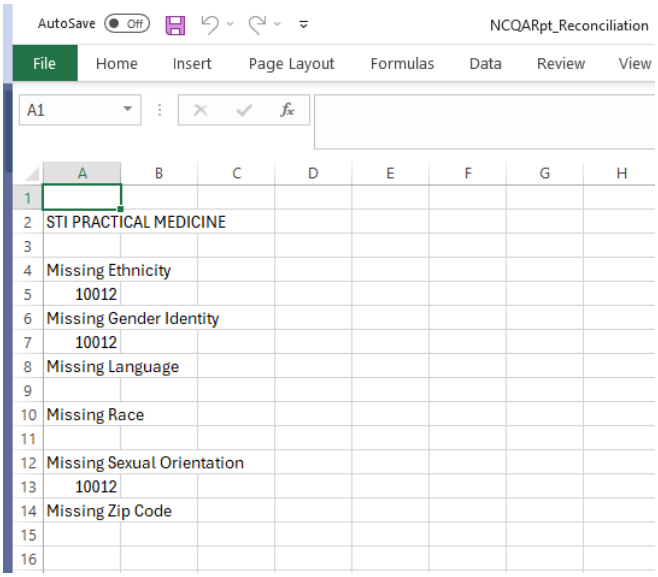


Figure 2 – NCQA Diversity Requirements Reconciliation Report

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.

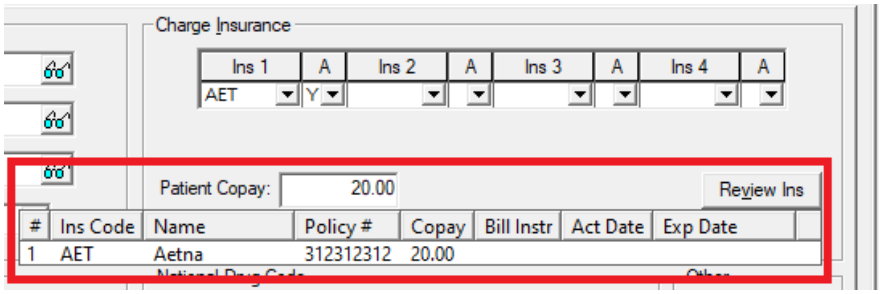


Figure 3 – Charge – Enter a Charge – Charge Insurance

- **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).

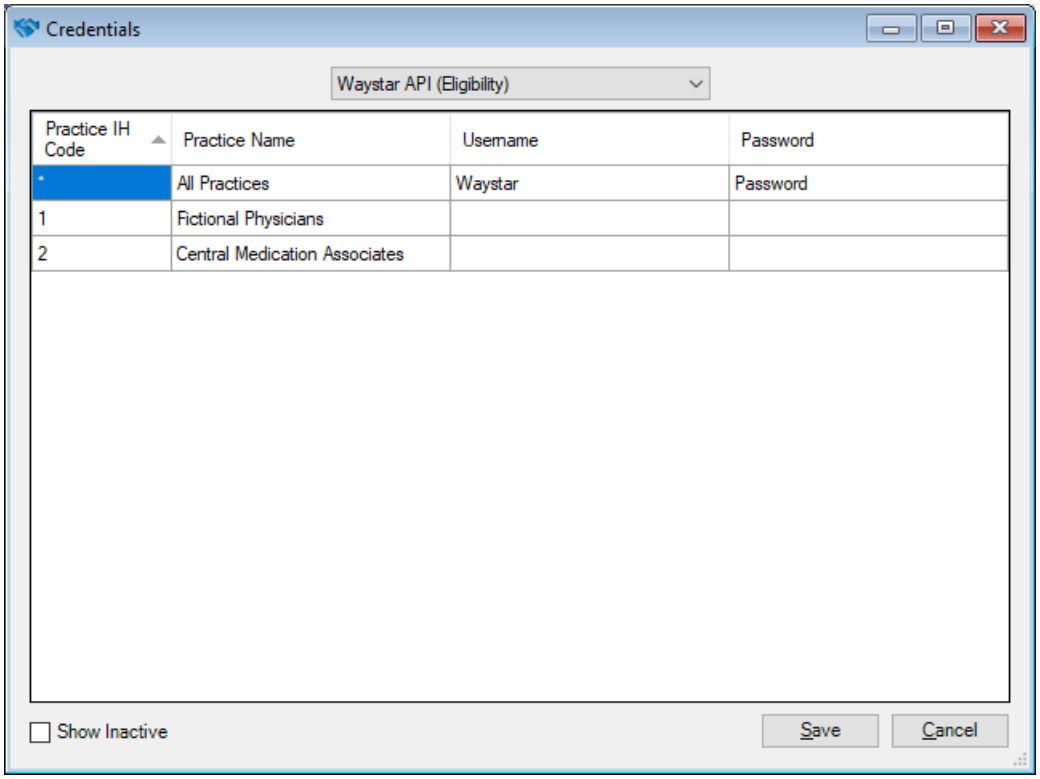


Figure 4 – Credentials

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