

## This Month's Meaningful Use FAQ

Every month, the Hawai'i Pacific Regional Extension Center (HPREC) will send you, as a participant of the HPREC program, a new frequently asked question (FAQ) related to the EHR Incentive Program Meaningful Use requirements. To view previous month's enewsletters, visit our archive by clicking [HERE](#).

### Meaningful Use Core Measure 8 for Eligible Professionals

#### Description

Record and chart changes in the following vital signs:

- (A) Height
- (B) Weight
- (C) Blood pressure
- (D) Calculate and display body mass index (BMI)
- (E) Plot and display growth charts for children 2-20 years, including BMI

#### Attestation Requirements

- DENOMINATOR: Number of unique patients age 2 or over seen by the EP during the EHR reporting period.
- NUMERATOR: Number of patients in the denominator who have at least one entry of their

#### REMINDERS!

- Eligible professionals (EPs) participating in the Medicare EHR Incentive Program have until February 29th, 2012 to register and attest to meeting Meaningful Use in calendar year (CY) 2011.
- February 29th is also the last day for EPs to submit any pending Medicare Part B claims from CY 2011.
- If the EP did not meet the \$24,000 threshold in Part B allowed charges by the end of the CY 2011, CMS expects to issue an incentive payment to the EP in April 2012 for 75% of the EP's Part B charges from 2011.

For more information, please visit our Meaningful Use FAQs Archive at <http://www.hawaiihe.org/programs/regional-extension-center-program/meaningful-use-faqs-archive>.

height, weight, and blood pressure recorded as structured data.

- **EXCLUSION:** An EP who sees no patients 2 years or older would be excluded from this requirement. Additionally, an EP who believes that all three vital signs of height, weight, and blood pressure have no relevance to their scope of practice would be excluded from this requirement. EPs must select **NO** next to the appropriate exclusion, then click the **APPLY** button in order to attest to the exclusion.

The resulting percentage (NUMERATOR ÷ DENOMINATOR) must be more than 50% in order for an EP to meet this measure.

#### [Additional Information](#)

- If an EP believes that one or two of these vital signs are relevant to their scope of practice, then they must record all three vital signs in order to meet the measure of this objective and successfully demonstrate meaningful use.
- In cases where taking an actual height measurement is inappropriate, self-reported or estimated height can be used.
- Height, weight, and blood pressure do not have to be updated by the EP at every patient encounter.