

Controlling High Blood Pressure (CBP)

By working together, we can improve health outcomes for your patients, our members. The Healthcare Effectiveness Data and Information Set (HEDIS[®]) helps us measure many aspects of performance. This tip sheet provides key details of the HEDIS measure for controlling high blood pressure.

What is the measure?

The percentage of patients between the ages of 18 to 85 with a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90) during the measurement year. Members are identified by event and diagnosis.

Events:

- At least two visits on different dates of service on or between January 1 of the year prior to the measurement year and June 30 of the measurement year
 - Any of the following visit codes combination:
 - Outpatient visit; a telephone visit, an e-visit or virtual check-in
- And

Diagnosis: Any diagnosis of hypertension

Representative Blood Pressure

Representative BP reading taken and documented during the measurement year on or after the date of the second hypertension diagnosis and showing adequate control.

Adequate control is based on the following:

- A systolic BP reading of **less than** 140 mm Hg
- A diastolic BP reading of **less than** 90 mm Hg

If multiple BP measurements occur on the same date of service, use the lowest systolic and lowest diastolic BP reading on that date.

Codes for Reporting Blood Pressure Readings

CPT Category II

Systolic

- 3074F – Most recent systolic BP less than 130 mm Hg
- 3075F – Most recent systolic BP 130 - 139 mm Hg
- 3077F – Most recent systolic BP greater than or equal to 140 mm Hg

Diastolic

- 3078F – Most recent diastolic BP less than 80 mm Hg
- 3079F – Most recent diastolic BP 80 - 89 mm Hg
- 3080F – Most recent diastolic BP greater than or equal to 90 mm Hg

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Exclusions

Members are excluded from the measure if they meet the following criteria.

- Hospice care or using hospice services anytime in the measurement year
 - **CPT:** 993377-9378
 - **HCPCS:** GO182, G9473 – G9479, Q5003 – Q5008, Q5010, S9126, T2042 – T2046
- Receiving palliative care any time during the measurement year
 - **ICD-10:** Z51.5
 - **HCPCS:** G9054, M1017
- Medicare members age 66 and older as of December 31 of the measurement year who are either enrolled in an institutional special needs plan (I-SNP) or living long-term in an institution
- Members age 66 - 80 years of age as of December 31 of the measurement year who meet **both** frailty and advanced illness criteria
- Members age 81 years of age and older as of December 31 of the measurement year with frailty during the measurement year
- Members with a diagnosis of pregnancy during the measurement year
- End-stage renal disease any time during the member's history
 - **ICD-10:** N18.5; N18.6; Z99.2
- Dialysis any time during the member history
 - **CPT:** 90935; 90937; 90945; 90947; 90997; 90999; 99512
 - **HCPCS:** G0257; S9339
- Nephrectomy any time during the member history
 - **CPT:** 50220; 50225; 50230; 50234; 50236; 50340; 50370; 50543; 50545; 50546; 50548
- Kidney transplant any time during the member history
 - **ICD-10:** Z94.0
 - **CPT:** 50360, 50365, 50380

Unacceptable Setting for Blood Pressure Readings

- BP readings taken during an acute inpatient stay or emergency department visit
- BP readings taken on the same day as a diagnostic test or procedure that requires a change in diet or medication on – or one day before – test or procedure; this does not include fasting blood test
- BP readings taken by the member using a non-digital device such as with a manual blood pressure cuff and a stethoscope

Note: The member is not compliant if the BP reading is $\geq 140/90$ mm Hg or missing, if there is no BP reading during the measurement year, or if the reading is incomplete (i.e., the systolic or diastolic level is missing).

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Best Practices

- BP readings should be clearly documented in the clinical notes and reported through claims with the CPT II codes.
- Encourage your patient to monitor their BP at home using a digital BP machine. BP readings taken by the member and documented in the member's medical record meet criteria for this measure.
- Ranges and thresholds do not meet criteria for this measure. A distinct numeric result for both the systolic and diastolic BP reading is required for numerator compliance.
- A BP documented as an "average BP" (e.g., "average BP: 139/70") is eligible for use.
- Document all systolic and diastolic readings if multiple BP taken on the same date.
- Submit CPT II codes to report the lowest systolic and diastolic blood pressure readings taken on the same date.
- Recheck BP greater or equal to 140/90.

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