

HEDIS® Tip Sheet

Effectiveness of Care Measure

Controlling Blood Pressure

Learn how to improve your HEDIS¹ rates. This tip sheet gives key details about the Controlling High **Blood Pressure (CBP) measure, best practices,** codes and more resources.

Measure	The percentage of patients ages 18–85 who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90) during the measurement year. Note: Patients must have at least two visits on different dates of services with a diagnosis of HTN on or between January 1 of the year prior to the measurement year and June 30 of the measurement year. Visit type does not need to be the same for the two visits.
Exclusions	 The measure excludes patients who meet the following criteria: Patients ages 66 and older enrolled in an Institutional Special Needs Plan (I-SNP) or living long-term in an institution. Ages 66–80 with frailty and advanced illness. Ages 81 and older with frailty. In hospice care. Received palliative care in the measurement year. Have evidence of end-stage renal disease (ESRD), dialysis, nephrectomy, or kidney transplant. Have a diagnosis of pregnancy. Had nonacute, inpatient admission.
Telehealth- specific changes	 Removed the restriction that only one of the two visits with a HTN diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Added telephone visits, e-visits, and virtual check-ins to the advanced illness exclusion. Added telephone visits, e-visits, and virtual check-ins as appropriate settings for BP readings. Requirements for remote monitoring were removed to allow BPs to be taken by any digital device.
	(continued)





¹HEDIS®: Healthcare Effectiveness Data and Information Set

• Determine the representative blood pressure (BP):

- Identify the most recent BP reading noted during the measurement year on or after the second diagnosis of HTN.
- If multiple BP readings were recorded on a single date, use the lowest systolic and lowest diastolic BP on that date as the representative BP. The systolic and diastolic results do not need to be from the same reading.
- If no BP is recorded during the measurement year or if the reading is incomplete, assume that the patient is "not controlled."
- Bill BP CPT II codes on each office visit claim along with a HTN condition.
- Remote measurements by any digital device are acceptable.
- The BP reading cannot be used if:
 - Taken during an acute inpatient stay or emergency department visit.
 - Taken on the same day as a diagnostic test or diagnostic or therapeutic procedure that requires a change in diet or change in medication on or one day before the day of the test or procedure, with the exception of fasting blood tests.
 - Taken by a patient using a non-digital device, such as a manual blood pressure cuff and a stethoscope.
- Instruct staff to take a repeat reading if abnormal BP is obtained.
- Educate patient about the risks of HTN and encourage lifestyle changes.
- Initiate proper pharmacologic treatment to lower BP.
- Promote the use of proper technique by staff taking BP readings if indicated (See Tips to Get an Accurate Blood Pressure Reading).
- Data files will require an outpatient visit on same date of service with provider's National Provider Identifier (NPI) when submitting BPs.

Essential hypertension diagnosis ICD-10 CODE: I10

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CPT codes

Best

practices

Blood pressure CPT II codes	
Description	CPT II Code
Diastolic < 80 mm Hg	3078F
Diastolic between 80-89 mm Hg	3079F
Diastolic ≥ 90 mm Hg	3080F
Systolic < 130 mm Hg	3074F
Systolic between 130–139 mm Hg	3075F
Systolic ≥ 140 mm Hg	3077F

Resources

Centers for Disease Control and Prevention: www.cdc.gov/bloodpressure/index.htm. American Heart Association: www.heart.org/en/health-topics/high-blood-pressure. National Committee for Quality Assurance (NCQA). HEDIS* Measurement Year 2022 Technical Specifications for Health Plans, Volume 2, Washington, D.C., 2021



Tips to Get an Accurate Blood Pressure Reading

Follow these recommendations for obtaining accurate blood pressure measurements:

	Ask the patient not
_	to smoke, exercise,
	or drink caffeinated
	beverages or alcohol for
	at least 30 minutes before
	measurement.

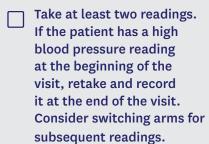
Have patient empty their
bladder.

	Have the patient rest calmly
	in a chair, for at least five
	minutes with arm resting
	comfortably on a flat surface
	at heart level.

	Ensure patient is sitting
	upright with back supported
	and feet flat on the floor
	(legs uncrossed).

\Box	Patient's arm should be
	bare. Use proper cuff size
	and make sure the bottom
	of the cuff is placed directly
	above the bend of the
	elbow.

	Do not talk to the patient
	while taking their blood
	pressure.



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