



Controlling High Blood Pressure Guide

Importance of Controlling High Blood Pressure

High blood pressure (HBP) is a serious issue in the United States, which affects one in three Americans. Working with your patients to improve control of their HBP is not only important for their overall health and wellbeing, it is also a key performance metric for many governmental and commercial contracts.

Denominator

Patients 18-85 years of age who had a visit and diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period.

Numerator

Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140mmHg and diastolic blood pressure < 90 mmHg) during the measurement period.

CPT Category II Codes for Controlling Blood Pressure

Measure is to be submitted a minimum of **once per performance period** for patients with hypertension seen during the period. The most recent quality code submitted will be used for performance calculation.

Measure	CPT II Code	Description
Controlling Blood Pressure	3074F	Most recent systolic blood pressure < 130 mmHg
	3075F	Most recent systolic blood pressure 130-139 mmHg
	3077F	Most recent systolic blood pressure ≥140 mmHg
	3078F	Most recent diastolic blood pressure less than 80 mmHg
	3079F	Most recent diastolic blood pressure 80-89 mmHg
	3080F	Most recent diastolic blood pressure ≥ 90 mmHg

Key Considerations

- Only blood pressure readings performed by a clinician or a remote monitoring device that is capable of transmitting blood pressure data to the clinician are acceptable for compliance with this measure
- Blood pressure readings taken by a remote monitoring device and conveyed by the patient to the clinician are also acceptable with the discretion of the clinician to confirm that the device is acceptable and reliable
- If no blood pressure reading is taken during the measurement period, the patient's blood pressure is assumed "not controlled"

* If initial blood pressure is 140 or greater systolic and/or diastolic is 90 or greater, retake blood pressure and keep all readings recorded in the patient's chart. **Rationale** - The blood pressure readings can be combined to measure the lowest of each systolic and diastolic reading



Exclusions

- ESRD, Dialysis/Renal Transplant before or during the measurement period (**G9231**)
- Pregnancy during the measurement period (**G9231**)
- Hospice or palliative care services given any time during the measurement period (**G0094 or G9740**)
- Patients 66 years or older in Institutional Special Needs Plans (SNP) or residing in long-term care with a POS code 32, 33, 34, 54, or 56 for >90 consecutive days (**G9910**)
- Patients 66-80 years old with at least one claim/encounter for frailty during the measurement period **AND** a dispensed dementia medication (Donepezil, Galantamine, Rivastigmine, Memantine) during the measurement period or the year prior to the measurement period (**G2115**)
- Patient 66-80 years old with at least one claim for frailty during the measurement period **AND** either one acute inpatient encounter with a diagnosis of advanced illness or 2 outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period (**G2116**)
- Patients 81 years or older with at least one claim for frailty during the measurement period (**G2118**)
- Patients whose most recent blood pressure reading is adequately controlled (systolic < 140 and diastolic < 90 mmHg) during the measurement period (**G8752 and G8754**)
- Blood pressure measurement not documented, reason not given (**G8756**)

Blood Pressure Readings Not Included in Measure

- Acute IP stay or ED visit
- Taken on the same days as a diagnostic test/procedure that requires a change in diet or change in medication on the one day before the day of the test or procedure, except for fasting blood tests
- Taken by the patient using a manual cuff and stethoscope

Recommendations to Improve Performance

- This measure is collected through chart review, so it is essential to provide medical records as requested by the health plan to improve performance
 - For all visits, record BP readings in the patient chart with the date of service
- Educate staff on proper technique for taking blood pressure readings
- Implement a process to re-take & document any systolic BP ≥ 140 or diastolic BP ≥ 90
- Perform outreach to patients with HTN who have not had a follow-up appointment
- Review diet, medications, exercise regimen, and treatment adherence with the patient at each visit
- Assess whether transportation is a concern and encourage patients to inquire about health plan and public transportation services available to them

Disclaimer: *This information is not intended to dictate or substitute your professional judgment in a particular patient.*

References

[CMS, Web Interface HTN-2: Controlling High Blood Pressure \(2023\)](#)

[Arkansas Blue Cross and Blue Shield, Controlling Blood Pressure \(2023\)](#)

[Humana, Quality Indicator Reference for Physicians \(2023\)](#)

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