

HEDIS® Tip Sheet*

Controlling High Blood Pressure (CBP)

The National Committee for Quality Assurance (NCQA) developed Healthcare Effectiveness Data and Information Set (HEDIS) measures as a tool for performance improvement. Blue Cross and Blue Shield of Texas collects HEDIS data from providers to measure and improve the quality of care our members receive. The NCQA recommends tracking the HEDIS CBP measure.

Why Is the HEDIS CBP Measure Important?

High blood pressure increases the risk of heart disease and stroke, the leading causes of death in the United States.¹ Controlling hypertension can reduce this risk as well as the risk of kidney disease, vision loss, peripheral artery disease and sexual dysfunction.²

CBP Measure Description³

This measure focuses on percent of members 18 to 85 years old with a diagnosis of hypertension and whose blood pressure during the measurement year in the outpatient⁴ setting is controlled as follows:

- Systolic blood pressure (SBP) < 140 mmHg
- Diastolic blood pressure (DBP) < 90 mmHg

Note: if no blood pressure is recorded or if the reading is incomplete (systolic or diastolic documentation is missing) during the measurement year the member is counted as *not controlled*

Medical Record Documentation and Best Practices

- Discuss with our members the importance of taking medications as prescribed, smoking cessation, increased physical activity and eating a low-sodium diet
- Discuss with our members the importance of returning for follow-up visits
- Reach out to members who cancel or miss appointments and assist them with rescheduling as soon as possible



* Measurement Year (MY) 2020 and MY 2021

1 NCQA HEDIS MY 2020 & MY 2021, HEDIS measure for CBP, accessed 7/14/2020; <https://www.ncqa.org/hedis/measures/controlling-high-blood-pressure/>

2 American Heart Association, Health Threats From High Blood Pressure; accessed 7/14/2020; <https://www.heart.org/en/health-topics/high-blood-pressure/health-threats-from-high-blood-pressure>

3 NCQA HEDIS MY 2020 & MY 2021 Technical specifications for health plans, volume 2, Washington DC, 2020

4 Includes telephone, e-visit, virtual check-in, nonacute inpatient encounter or remote monitoring event
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Coding Instructions

Use CPT®, HCPCS and ICD-10 to close care gaps

CPT II Codes

Office visit, most recent BP measurement

SBP < 130 mmHg: 3074F

SBP 130-139 mmHg: 3075F

SBP >= 140 mmHg: 3077F

DBP < 80 mmHg: 3078F

DBP 80-89 mmHg: 3079F

DBP >= 90 mmHg: 3080F

ICD-10

Essential (primary) hypertension: I10

Hypertensive heart disease without heart failure: I11.9

Hypertensive chronic kidney disease (stage 1 to 4, or unspecified): I12.9

Hypertensive heart and chronic kidney disease without heart failure (stage 1 to 4, or unspecified): I13.10

CPT

Ambulatory BP monitoring for >= 24 hours

Recording, scanning analysis, interpretation and report: 93784

Recording only: 93786

Scanning analysis with report: 93788

Review with interpretation and report: 93790

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