Measure Description: The percentage of members 18-85 years of age who had a diagnosis of hypertension (HTN) and who adequately controlled their blood pressure during the measurement year.

- Two diagnoses of hypertension must be captured between January 1 of the year prior to the measurement year and June 30 of the measurement year.
- The adequately controlled BP reading must occur on or after the date of the second diagnosis of HTN.
  - Adequate control is defined as <140/90 mm Hg. The highest controlled BP is 139/89 mm Hg. (Both the systolic and diastolic must be below the above readings to be considered "controlled.")

# Eligible Population

Members ages 18-85 years as of December 31 of the measurement year.

## **Product Lines**

Commercial, Medicaid, Medicare

## Data Collection Method

Administrative (claims), Supplemental data, Hybrid (medical record)

The CBP measure is hybrid. Any care not received via claims during the measurement year will result in medical record requests during the HEDIS medical record review project.

#### **Exclusions**

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

- Members who are in hospice.
- Members who are in palliative care.
- Members 66 years of age and older as of December 31 of the measurement year who have both a frailty and an advanced illness diagnosis.

# Measure Compliance (numerator) – Blood Pressure Controlled

Identify the most recent BP reading taken during the measurement year. The member is numerator compliant if the BP is <140/90 mm Hg (or a systolic level of 139 or less and a diastolic level of 89 or less).

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

BP readings should be clearly documented in the clinical notes and reported through claims.





# Numerator Compliance, (continued)

BP readings do not count if:

- Taken during an acute inpatient stay or ED 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 a fasting blood test.

### Numerator Codes

The complete NCQA approved code set list can be referenced in the coding guide at <a href="https://healthplan.org/providers/patient-care-programs/quality-measures">healthplan.org/providers/patient-care-programs/quality-measures</a>.

### Blood Pressure Reading

BP readings should be clearly documented in the clinical notes and reported through claims

Code Type	Code	Code Description
СРТ	3074F	Systolic Less Than 130
СРТ	3075F	Systolic 130-139
СРТ	3077F	Systolic Greater Than/Equal To 140
СРТ	3078F	Diastolic Less Than 80
СРТ	3079F	Diastolic 80-89
CPT	3080F	Diastolic Greater Than/Equal To 90

The Health Plan has a team of member advocates, health coaches, social workers and nurses who can assist you and your patients to remove or overcome any barriers to care through benefit assistance, community resource referrals or enrollment in a THP clinical program. To refer a patient who is a THP member for assistance, call 1.877.903.7504 and let us know what we can do to help your patient receive and adhere to your recommended plan of care.

