

Controlling High Blood Pressure

Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates by using this tip sheet about the Controlling High Blood Pressure measure, best practices and more resources.

The percentage of patients ages 18-85 who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled at <140/90 mmHg during the measurement period.

LOB
Commercial
Medicare
Medicaid

CMS Weight
x3

HEDIS
2024

Compliance

Adequate control: Both a representative systolic BP <140 mm Hg and a representative diastolic BP of <90 mm Hg.

Representative BP: The most recent BP reading during the measurement year on or after the second diagnosis of hypertension. If multiple BP measurements occur on the same date, or are noted in the chart on the same date, use the lowest systolic and lowest diastolic BP reading. If no BP is recorded during the measurement year, assume that the member is “not controlled.”

Best Practices

- It is important to document patient reported vitals in the official medical record when conducting telehealth, telephone or online assessment visits. Please encourage patients to use a digital device to track and report their BP during every visit.
- Always list the date of service and BP reading together. – If BP is listed on the vital flow sheet, it must have a date of service.
- It’s critical to follow up with a member for a BP check after their initial diagnosis. Schedule member’s follow-up visit prior to discharging from clinic. – Members who have an elevated BP during an office visit in Aug., Sep. or Oct. should be brought back in for a follow-up visit before Dec. 31.
- If your office uses manual blood pressure cuffs, don’t round up the BP reading. – For example: 138/89 mmHg rounded to 140/90 mmHg
- If a member’s initial BP reading is elevated at the start of a visit, you can take multiple readings during the same visit and use the lowest diastolic and lowest systolic to document the overall reading. Retake the member’s BP after they’ve had time to rest.
- Place a BP Recheck reminder at exam room to recheck blood pressure if initial blood pressure was 140/90 or higher.
- Do not include readings taken same day as a diagnostic test/procedure or therapeutic procedure that requires diet change or med change; with exception of fasting blood tests

QUALITY MEASURE GUIDE

Learn more about EPIC workflow by following:
<https://uhcommunity.uhhospitals.org/UHAccountableCareOrganization/EPIC%20%20Quick%20Tips/Forms/AllItems.aspx>

Exclusion	Timeframe
<ul style="list-style-type: none"> • Members in hospice or using hospice services • Members receiving palliative care • Members who died • Members with a diagnosis of pregnancy 	<p>Any time during the measurement year</p>
<p>Patients ages 81 and older as of Dec. 31 of the measurement year who had at least 2 diagnoses of frailty on different dates of service</p>	<p>Frailty diagnoses must be in the measurement year and on different dates of service</p>
<ul style="list-style-type: none"> • Members 66-80 years of age as of December 31 of the measurement year with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to qualify as an exclusion: <ul style="list-style-type: none"> a. Frailty: At least 2 diagnoses of frailty on different dates of service during the measurement year. Do not include claims where the frailty diagnosis was from an independent lab (POS 81). b. Advanced Illness: Indicated by one of the following: <ul style="list-style-type: none"> i. At least 2 diagnoses of advanced illness on different dates of service during the measurement year or year prior. Do not include claims where the advanced illness diagnosis was from an independent lab (POS 81). ii. Dispensed dementia medication Donepezil, Donepezil-memantine, galantamine, rivastigmine or memantine 	<p>Any time in a member's history through Dec. 31 of the measurement year</p>
<p>Medicare members ages 66 and older as of Dec. 31 of the measurement year who are either: • Enrolled in an Institutional Special Needs Plan (I-SNP) • Living long term in an institution*</p>	<p>Any time during the measurement year on or before December 31 of the measurement year</p>
<ul style="list-style-type: none"> • Dialysis • End-stage renal disease (ESRD) • Kidney transplant • Nephrectomy 	<p>On or before Dec. 31 of the measurement year</p>