

PROVIDER BULLETIN

HEDIS News You Can Use Controlling High Blood Pressure (CBP)



Importance of Controlling High BP

Known as the “silent killer,” hypertension, increases the risk of heart disease and stroke, which are the leading causes of death in the United States.

NCQA developed the Controlling High Blood Pressure (CBP) measure to assess adults who had a diagnosis of hypertension and whose blood pressure (BP) is adequately controlled.

This bulletin offers tips, best practice suggestions, coding information, and links to resources to help Aetna providers deliver high-quality, timely care and ensure the proper billing of these services.



Measure Requirements

The CBP Measure looks at individuals 18-85 with a diagnosis of hypertension during the measurement year whose BP is adequately controlled. NCQA defines **adequately controlled** hypertension as:

- Adults with a diagnosis of HTN whose last BP of the measurement year was **<140/90 mm Hg**.

**** New Info ****

NCQA now accepts member reported blood pressures documented in the medical record as compliant for the CBP measure.



Coding Information

The CBP measure is no longer required to be completed only by chart review to obtain HEDIS project rates. Offices should code blood pressure readings as described below to improve rates and reduce chart requests for medical record review.

- **CPT II Codes:**
 - 3074F: systolic BP < 130
 - 3075F: systolic BP 130-139
 - 3077F: systolic BP ≥ 140
 - 3078F: diastolic BP < 80
 - 3079F: diastolic BP 80-89
 - 3080F: diastolic BP ≥ 90



Gaps in Care

Although you may have recorded a BP in a patient chart, below are a few reasons why it may show as being a ‘Gap in Care’:

- BP not done during the measurement year; BP needs to be monitored at least annually
- BP reading is not able to be used
 - Paper chart- reading is illegible
 - EMR- reading was incorrectly entered
- BP cannot be used if taken:
 - Same day as a diagnostic test
 - If diagnostic or therapeutic procedure requires diet or medication change on or one day before the test or procedure





Importance of Controlling High Blood Pressure

Studies have made it abundantly clear that hypertension is a major health problem in the U.S. and around the world.

- An estimated 80 million Americans—about one-third of the adult population—suffer from hypertension, putting them at increased risk of strokes, heart attacks and other disorders.
- Only about half (54%) of people with high blood pressure have their condition under control
- High blood pressure was a primary or contributing cause of death for more than 410,000 Americans in 2014—that’s more than 1,100 deaths each day
- High blood pressure costs the nation \$48.6 billion each year. This total includes the cost of health care services, medications to treat high blood pressure, and missed days of work



Great CBP Resources

AMA: Targeting High Blood Pressure

<https://www.ama-assn.org/delivering-care/hypertension/when-targeting-high-bp-draw-evidence-based-framework>

CDC: About High Blood Pressure Fact Sheet

<https://www.cdc.gov/bloodpressure/>

American Heart Association: High Blood Pressure Myths

<https://www.heart.org/en/health-topics/high-blood-pressure/the-facts-about-high-blood-pressure/common-high-blood-pressure-myths>

High Blood Pressure Fact sheet

https://www.heart.org/-/media/data-import/downloadables/f/9/8/pe-abh-what-is-high-blood-pressure-ucm_300310.pdf?la=en



Here For You

Thank you for the excellent care provided to our members!

For questions or for more information, send an email to:

FLMedicaidQualityDept@aetna.com



BEST PRACTICES

Tips to improve CBP results

MEASURE ACCURATELY

- Use an automated BP device when possible
- Use the proper size blood pressure cuff for each patient on a bare arm
- Use the exact reading, don’t round up
- Ensure patients legs are uncrossed and flat on the floor.
 - Crossing the legs can raise the systolic by 2-8mg.
- The elbow should be at the same level as the heart.
 - If the arm hangs below the heart and unsupported the measured BP can be raised by 10-12 mmHg
- Retake at the end of visit if the BP is 140/90 or higher
 - Consider switching arms

PATIENT EDUCATION

- Educate patients about the risks of uncontrolled blood pressure and lifestyle changes
- Reinforce the importance of medication adherence
- Schedule follow up visits for blood pressure readings until the blood pressure is controlled
- Encourage patients to have medical records from specialists transferred to your office to provide a complete picture of changes in BP over time.

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