

Coding Reference Guide Measure Year 2024
 Blood Pressure Control for Patients with Diabetes (BPD)



Measure Description

Members 18-75 years of age with diabetes (Type 1 or Type 2) whose blood pressure (BP) was adequately controlled (<140/90 mmHg) during 2024. Members are identified with diabetes by claim/encounter and pharmacy data during 2023 or 2024.

<p>Systolic Blood Pressure</p> <p>Do not use Acute Inpatient or Emergency Department BP readings</p>	<p>CPT-CAT-II: 3074F: Most recent systolic blood pressure <130 mm Hg 3075F: Most recent systolic blood pressure 130-139 mm Hg 3077F: Most recent systolic blood pressure ≥140 mm Hg Do not include the following modifier codes: 1P, 2P, 3P, 8P</p> <hr/> <p>LOINC: 75997-7: Systolic blood pressure—Continuous non-invasive monitoring 8459-0: Systolic blood pressure—Sitting 8460-8: Systolic blood pressure—Standing 8461-6: Systolic blood pressure—Supine 8480-6: Systolic blood pressure 8508-4: Brachial artery—Systolic blood pressure 8546-4: Brachial artery—Left Systolic blood pressure 8547-2: Brachial artery—Right Systolic blood pressure 89268-7: Systolic blood pressure—Lying in L-lateral position</p> <hr/> <p>SNOMED: 271649006: Systolic blood pressure (observable entity)</p>
<p>Diastolic Blood Pressure</p>	<p>CPT-CAT-II: 3078F: Most recent diastolic blood pressure <80 mm Hg 3079F: Most recent diastolic blood pressure 80-89 mm Hg 3080F: Most recent diastolic blood pressure ≥90 mm Hg Do not include the following modifier codes: 1P, 2P, 3P, 8P</p> <hr/> <p>LOINC: 75995-1: Diastolic blood pressure—Continuous non-invasive monitoring 8453-3: Diastolic blood pressure—Sitting 8454-1: Diastolic blood pressure—Standing 8455-8: Diastolic blood pressure—Supine</p>

<p>Do not use Acute Inpatient or Emergency Department BP readings</p>	<p>LOINC (cont.): 8462-4: Diastolic blood pressure 8496-2: Brachial artery—Diastolic blood pressure 8514-2: Brachial artery—Left Diastolic blood pressure 8515-9: Brachial artery—Right Diastolic blood pressure 89267-9: Diastolic blood pressure—Lying in L-lateral position</p> <p>SNOMED: 271650006: Diastolic blood pressure (observable entity)</p>
<p>The following will exclude Members from this measure:</p>	
<p>Hospice Encounter During 2024</p>	<p>HCPCS: G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046</p> <p>SNOMED: 183919006, 183920000, 183921001, 305336008, 305911006, 385765002</p> <p>UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659</p>
<p>Hospice Intervention During 2024</p>	<p>CPT: 99377, 99378</p> <p>HCPCS: G0182</p> <p>SNOMED: 170935008, 170936009, 385763009</p>
<p>Palliative Care Assessment During 2024</p>	<p>SNOMED: 718890006, 718893008, 718895001, 718898004, 718899007, 718901003, 718903000, 718904006, 718957007, 718967002, 718969004, 718971004, 718973001, 718974007, 718975008, 718976009, 761865002, 761866001, 761867005, 457511000124100</p>
<p>Palliative Care Encounter During 2024</p>	<p>ICD10CM: Z51.5 Do not include laboratory claims with POS code 81</p> <p>HCPCS: G9054, M1017</p> <p>SNOMED: 305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101</p>

**Palliative Care Intervention
During 2024****SNOMED:**103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106,
433181000124107**Patients who died any time during 2024****Tips and Best Practices to Help Improve Performance**

- Repeat the blood pressure measurement when the initial reading is ≥ 140 systolic or ≥ 90 diastolic
- Schedule blood pressure re-check appointments after changes in dosage or medication
- Utilize the monthly Gaps in Care Report (GIC) for a list of MVP Members and the services they still need
- Consider using alerts and flags within the Electronic Health Record (EHR) for screening tests
- Document preventive care, medical, and surgical history in the medical record with specific date and results
- Use correct diagnosis and procedure codes and submit claims and encounter data in a timely manner
- Encourage billing staff to use CPT Category II (CPT-CAT-II) codes, which are intended to facilitate the collection of information about the quality of care delivered by coding specific services or test results that support performance measures. CPT-CAT-II codes will decrease the need for record abstraction and chart review and minimize the administrative burden
- Stock patient areas and exam rooms with educational materials such as those found here:
 - [High Blood Pressure | cdc.gov](#)
 - [Medical Health - MVP Health Care](#)