Comprehensive Diabetes Care (CDC): Blood Pressure Control

Patient Profile
MVP members 18–75 years of age with Diabetes (Type 1 and Type 2) and who have had adequate blood pressure control (Systolic < 140 and Diastolic < 90) during the current calendar year.

Refer to the Comprehensive Diabetes Care (CDC) Overview Tip Sheet for exclusions to this sub-measure.

How to Implement Best Practices and Improve Performance

• Be sure to repeat and document the blood pressure measurement at any visit where the initial reading is ≥ 140 systolic and/or ≥ 90 diastolic. There is no limit to the number of blood pressure readings taken at any one visit. The systolic and diastolic values do not have to be from the same reading. The health plan will report the lowest SBP and lowest DBP submitted for that date of service.

• Routinely schedule blood pressure re-check appointments for patients after adjustments in therapy.

• For patients with repeated systolic blood pressure readings of 140 or higher and/or diastolic blood pressure readings of 90 or higher late in the calendar year, schedule a blood pressure re-check appointment prior to January 1.

• Self-reported blood pressure readings or those taken from a patient’s Blood Pressure Diary cannot be used.

• Ranges and thresholds cannot be accepted; only exact systolic and diastolic readings can be submitted.

• Statements such as “rule out HTN,” “possible HTN,” “white-coat HTN,” “questionable HTN,” and “consistent with HTN” are not sufficient to confirm the diagnosis, if such statements are the only notations of hypertension in the medical record.

• Please be sure to record exact systolic and diastolic values; do not round a result.

• Blood pressure values taken from ED visits or acute inpatient settings are not eligible for submission.

• The latest documented blood pressure value of the year will be used for reporting purposes. Blood pressure readings from dates on which the patient had a diagnostic test or procedure that required an alteration in diet or medication within the previous 24 hours (with the exception of fasting blood work), are not eligible. In that event, submit the blood pressure reading otherwise closest to the end of the calendar year.

When excluding blood pressure readings from the numerator, the intent is to identify diagnostic or therapeutic procedures that require a medication regimen, a change in diet, or a change in medication. For example:

• A colonoscopy requires a change in diet (NPO on the day of procedure) and a medication change (a medication is taken to prep the colon).

• Dialysis, infusions, and chemotherapy are all therapeutic procedures that require a medication regimen.

• A nebulizer treatment with albuterol is considered a therapeutic procedure that requires a medication regimen.

• Injection of lidocaine prior to mole removal is considered a diagnostic procedure (if the mole is being tested) or a therapeutic procedure (if removal of the mole is the treatment) that requires a change in medication (lidocaine administered for pain control) during the procedure.

• A patient forgetting to take regular medications on the day of the procedure is not considered a required change in medication, and therefore the blood pressure reading is eligible.
Blood pressure readings taken on the same day that the patient receives a common low-intensity or preventive procedure are eligible for use. For example, the following procedures are considered common low-intensity or preventive procedures:

- Vaccinations
- Injections (e.g., allergy, vitamin B-12, insulin, steroid, toradol, Depo-Provera, testosterone)
- TB test
- IUD insertion
- Eye exam with dilating agents

Information related to all 2019 HEDIS measures has been extracted from the NCQA 2019 HEDIS Technical Specifications Volume 2.

**Billing Codes**

**CPT Codes**

**Systolic CPT II Codes:**
- Systolic Greater Than/Equal To 140 3077F
- Systolic Less Than 140 3074F, 3075F

**Diastolic CPT II Codes:**
- Diastolic Greater Than/Equal to 90 3080F
- Diastolic 80-89 3079F
- Diastolic Less Than 80 3078F

**Remote Blood Pressure Monitoring CPT Codes:**
- 93784, 93788, 93790, 99091