

Controlling High Blood Pressure (CBP)

Patient Profile

MVP members 18–85 years of age who have had two outpatient visits with a diagnosis of hypertension in the first six months of the measurement year (2021) and the year prior to the measurement year (2020), and whose blood pressure was adequately controlled as of the final recorded blood pressure reading of the calendar year.

Adequate control is defined as meeting the following criteria:

- Members 18–85 years of age whose blood pressure was <140/90 mm Hg (systolic blood pressure [SBP]<140 and diastolic blood pressure [DBP]<90)

Exclusions include:

- Members with end-stage renal disease (ESRD), dialysis, a kidney transplant, or nephrectomy during the measurement year
- Members who are pregnant during the measurement year
- Members who have had a non-acute inpatient admission in the measurement year
- Members who have used palliative care or hospice services during the measurement year
- Medicare members, 66 years of age and older living in long-term institutional settings or are enrolled in an Institutional Special Needs Plan any time during the measurement year
- Members 60-80 years of age and older with frailty and advanced illness in the measurement year.
- Members dispensed on dementia medication; Donepezil, Galantamine, Rivastigmine, Memantine, and Donepezil-memantine
- Members 81 years and older as of December 31 of the measurement year and with frailty

How to Implement Best Practices and Improve Performance

- To identify members as eligible for this measure they have to have at least two visits on different dates of service with a diagnosis of hypertension during the first six months of the measurement year or the year prior to the measurement year.
- Both visits can be a phone visit, online assessment (e-visits or virtual check-in), or outpatient telehealth visit.
- 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. Submit all documented BP readings taken on the same date of service. MVP will report the lowest systolic and diastolic values submitted for that date.
- 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.
- Blood pressure readings from remote monitoring devices are allowed to be taken by the member from any digital device.
- Ranges and thresholds cannot be accepted; only exact systolic and diastolic readings can be submitted.
- 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, 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.
- 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 for submission.

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 (this list is just for reference, and is not exhaustive):

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

Information related to all 2021 HEDIS measures has been extracted from the NCQA 2021 HEDIS Technical Specifications Volume 2.

2021 Coding for Controlling High Blood Pressure (CBP)

Codes for CBP	Use of these codes will make the member a pass for CBP
Diastolic Blood Pressure	CPT-CAT II: 3078F-3080F
	LOINC: 8462-4
	SNOMED CT US: 271650006
Diastolic 80-89	CPT-CAT-II: 3079F
Diastolic Less Than 80	CPT-CAT-II: 3078F
Diastolic Greater Than/Equal to 90	CPT-CAT II: 3080F
Essential Hypertension	ICD-10 CM: I10
	SNOMED CT US: 1201005, 10725009, 46481004, 48146000, 56218007, 59621000, 59720008, 65518004, 78975002, 371125006, 426457004, 762463000, 461301000124109, 1078301000112109
Online Assessments	CPT: 98969-98972, 99421-99423, 99444, 99457
	HCPCS: G0071, G2010, G2012, G2061, G2062, G2063
Outpatient Without UB Rev	CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99455-99456
	HCPCS: G0402, G0438-G0439, G0463, T1015
Remote Blood Pressure Monitoring	CPT: 93784, 93788, 93790, 99091, 99453, 99454, 99457, 99473, 99474
	SNOMED CT US: 448678005, 725956001
Systolic Blood Pressure	CPT-CAT II: 3074F, 3075F, 3077F
	LOINC: 8480-6
	SNOMED CT US: 271649006

2021 Coding for Controlling High Blood Pressure (CBP)

Systolic Greater Than/Equal to 140	CPT-CAT II: 3077F
Systolic Less Than 140	CPT-CAT II: 3074F, 3075F
Telehealth Modifier	CPT Modifier: 95, GT
Telehealth POS	POS: 02
Telephone Visits	CPT: 98966-98968, 99441-99443
Exclusion from CBP	Use of these codes will exclude member from CBP
Acute Inpatient	CPT: 99221-99223, 99231-99233, 99238-99239, 99251-99255, 99291
Advanced Illness	ICD-10 CM: Multiple codes such as A81.00, A81.01, A81.09, C25.1-C25.9, C71.0-C71.0, C77.0-C94.32, F01.50-F10.97, G10-G31.83 through N18.6
	SNOMED CT US: Multiple codes such as 2810004, 4817008, 6475002, 26852004, 33144001, 41309000, 54502004, 56841008
Dialysis Procedure	CPT: 90935, 90937, 90945, 90947, 90997, 90999, 99512
	HCPCS: G0257, S9339
	ICD-10 PCS: 3E1M39Z, 5A1D00Z, 5A1D60Z, 5A1D70Z, 5A1D80Z, 5A1D90Z
ED	CPT: 99281-99285
	SNOMED CT US Edition: 4525004
	UBREV Codes: 0450-0452, 0456, 0459, 0981
Frailty Device	HCPCS: E0100, E0105, E0130, E0135, E0140-E0141, E0143-E0144, E0147-E0149, E0163, E0165, E0167-E0168, E0170-E0171, E0250-E0251, E0255-E0256, E0260-E0261, E0265-E0266, E0270, E0290-E0297, E0301-E0304, E0424-E0425, E0430-E0431, E0433-E0435, E0439-E0444, E0462, E0465-E0466, E0470-E0472, E0561-E0562, E1130, E1140, E1150, E1160-E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295-E1298
Frailty Diagnosis	CD-10 CM: Over 200 codes ranging from L89.000-L89.029, L89.100-L89.150, L89.200-L89.229, L89.300-L89.329, L89.40-L89.46, L89.500-L89.529, L89.600-L89.629, L89.810-L89.899, L89.90-L89.96, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD-W18.30XS
	SNOMED CT US: 74 codes including 16728003, 52702003, 129588001, 214437002, 217157004, 823018004, 10637151000119101
Frailty Encounter	CPT: 99504, 99509
	HCPCS: G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000-5, T1019-22, T1030-31
Frailty Symptom	ICD-10 CM: R26.0-R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64
	SNOMED CT US: 135 codes including 4468000, 26544005, 78691002, 160684002, 162239000, 224960004, 250033003, 262285001, 272036004, 784318009, 16419651000119103
History of Kidney Transplant	ICD-10 CM: Z94.0
	SNOMED CT US: 48994000, 161665007
Hospice Encounter	HCPCS: G9474-79, Q5003-8, Q5010, S9126, T2042-46
	SNOMED CT US: 183919006, 183920000, 183921001, 305336008, 305911006
	UB Rev: 0115, 0125, 0135, 0145, 0155, 0235, 0650-52, 0655-59
Hospice Intervention	CPT: 99377-78
	HCPCS: G08182
	SNOMED CT US: 170935008-9, 385763009
Inpatient Stay	UB Rev: 0100-0101, 0110-0114, 0116-0124, 0126-0134, 0136-0144, 0146-0154, 0156-0160, 0164, 0167, 0169-0174, 0179, 0190-0194, 0199-0204, 0206-0214, 0219, 1000-1002

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Kidney Transplant	CPT: 50360, 50365, 50380
	HCPCS: S206
	ICD-10 PCS: 0TY00Z0-0TY00Z2, 0TY10Z0-0TY10Z2
	SNOMED CT US: 70536003, 175899003, 175901007, 175902000, 236138007, 313030004, 711411006, 711413009, 765478004, 711411006, 711413009, 765478004, 765479007, 782655004, 6471000179103
Nephrectomy	CPT: 50340, 50370
	ICD-10 PCS: 0TB00ZX, 0TB00ZZ, 0TB03ZX, 0TB03ZZ, 0TB04ZX, 0TB04ZZ, 0TB07ZX, 0TB07ZZ, 0TB08ZX, 0TB08ZZ, 0TB10ZX, 0TB10ZZ, 0TB13ZX, 0TB13ZZ, 0TB14ZX, 0TB14ZZ, 0TB17ZX, 0TB17ZZ, 0TB18ZX, 0TB18ZZ
	SNOMED CT US: 88930008
Non-acute Inpatient Stay	UB Rev: 0022, 0024, 0118, 0128, 0138, 0148, 0158, 0190-0194, 0199, 0524-0525, 0550-0552, 0559, 0660-0663, 0669, 1000-1002
	UBTOB: 134 codes including 0180-0185, 0210-0215, 0280-0285, 0650-0655, 0860-0865018F, 018M, 018X
Observation	CPT: 99217-99220
Outpatient	CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99429, 99455-99456, 99483
	HCPCS: G0402, G0438, G0439, G0463, T1015
	SNOMED CT US: 77406008, 84251009, 185463005, 185464004, 185465003, 281036007, 439740005, 3391000175108, 44971000124105
	UB Rev: 0510-0517, 0519-0523, 0526-0529, 0982-0983
Palliative Care Assessment	SNOMED CT US: 718973001, 718974007-718976009, 761865002, 761866001, 761867005, 457511000124100
Palliative Encounter	HCPCS: G9054, M1017
	ICD-10 CM: Z51.5
	SNOMED CT US: 305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101
Palliative Intervention	SNOMED CT US: 103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106, 433181000124107
Pregnancy	ICD-10 CM: Over 5,000 codes Ranging from: O00.0–O00.2 and O00.8–O04.89 through 09A.519 and Z03.71 through Z36.8A
	SNOMED CT US: Multiple codes including, but limited to, 195005, 223003, 682004, 9040024886009, 4910006, 7860005, 8333008, 9901000, 10562009, 12095001, 12803000, 15394000, 15511008, 19058009,