

Blood Pressure Control for Patients With Diabetes (BPD) 2025

Healthcare Effectiveness Data Information Set® (HEDIS) is a widely used set of performance measures developed and maintained by NCQA. To help you better serve our members and drive improved efforts surrounding HEDIS, we have compiled some tips and best practices. With your help, we can continually build towards a future of shared success.

This measure looks at the percentage of members 18 to 75 years of age with diabetes (type 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.

Record Your Efforts:

- Members 18 to 75 years of age whose BP is <140/90 mm Hg
- If there are multiple BP readings on the same date of service, use the lowest systolic and lowest diastolic BP on that date as the representative BP.
- BP readings taken by the member using a digital monitor and documented in the member's medical record are eligible for use in reporting (provided the BP does not meet any exclusion criteria).

What Does Not Count?

Do not include BP readings:

- Taken during an acute inpatient stay or an emergency department visit.
- Taken on the same day as a diagnostic test or diagnostic or therapeutic procedure that requires a change in diet or change in medication on or one day before the day of the test or procedure, with the exception of fasting blood tests.
- Taken by the member using a non-digital device such as with a manual blood pressure cuff and a stethoscope.

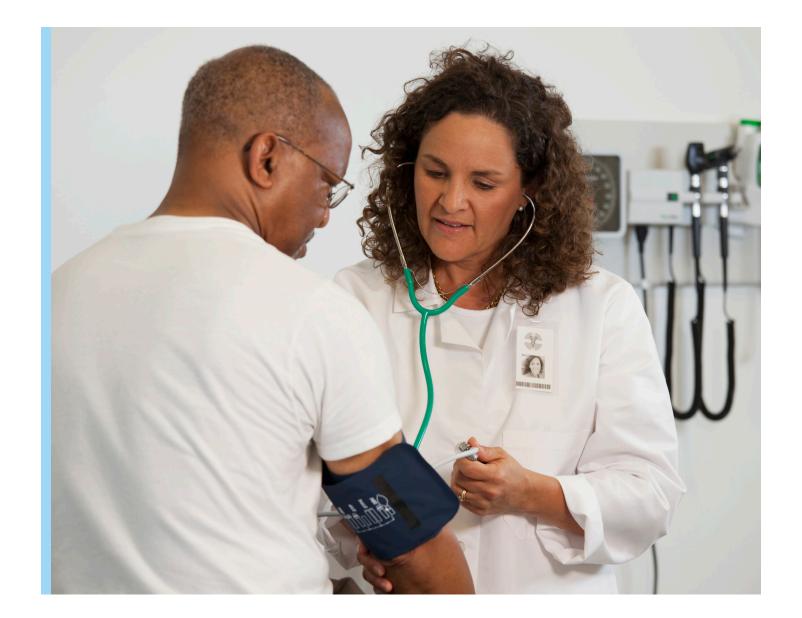


Note: HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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Description	Codes
	CPT®-CAT II: 3078F: Most recent diastolic blood pressure less than 80 mm Hg (HTN, CKD, CAD) (DM) 3079F: Most recent diastolic blood pressure 80-89 mm Hg (HTN, CKD, CAD) (DM) 3080F: Most recent diastolic blood pressure greater than or equal to 90 mm Hg (HTN, CKD, CAD) (DM)
Diastolic blood pressure	LOINC: 75995-1: Diastolic blood pressure by Continuous non-invasive monitoring 8453-3: Diastolic blood pressure—sitting 8454-1: Diastolic blood pressure—standing 8455-8: Diastolic blood pressure—supine 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
Diastolic less than 90	CPT-CAT II: 3078F: Most recent diastolic blood pressure less than 80 mm Hg (HTN, CKD, CAD) (DM) 3079F: Most recent diastolic blood pressure 80-89 mm Hg (HTN, CKD, CAD) (DM)
Systolic and diastolic result	CPT-CAT II: 3074F: Most recent systolic blood pressure less than 130 mm Hg (DM) (HTN, CKD, CAD) 3075F: Most recent systolic blood pressure 130-139 mm Hg (DM) (HTN, CKD, CAD) 3077F: Most recent systolic blood pressure greater than or equal to 140 mm Hg (HTN, CKD, CAD) (DM) 3078F: Most recent diastolic blood pressure less than 80 mm Hg (HTN, CKD, CAD) (DM) 3079F: Most recent diastolic blood pressure 80-89 mm Hg (HTN, CKD, CAD) (DM) 3080F: Most recent diastolic blood pressure greater than or equal to 90 mm Hg (HTN, CKD, CAD) (DM)
Systolic blood pressure	CPT-CAT II: 3074F: Most recent systolic blood pressure less than 130 mm Hg (DM) (HTN, CKD, CAD) 3075F: Most recent systolic blood pressure 130-139 mm Hg (DM) (HTN, CKD, CAD) 3077F: Most recent systolic blood pressure greater than or equal to 140 mm Hg (HTN, CKD, CAD) (DM) LOINC: 75997-7: Systolic blood pressure by 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
Systolic less than 140	CPT-CAT II: 3074F: Most recent systolic blood pressure less than 130 mm Hg (DM) (HTN, CKD, CAD) 3075F: Most recent systolic blood pressure 130-139 mm Hg (DM) (HTN, CKD, CAD)



Exclusions:

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year
- Members who died any time during the measurement year
- Members receiving palliative care any time during the measurement year
- Members who had an encounter for palliative care anytime during the measurement year

- Medicare members 66 years of age and older as of December 31 of the measurement year who meet either of the following:
 - Enrolled in an Institutional SNP (I-SNP) any time during the measurement year
- Living long-term in an institution any time during the measurement year
- Members 66 years of age and older as of December 31 of the measurement year (all product lines) with frailty and advanced illness (members must meet both frailty and advanced illness criteria to be excluded)

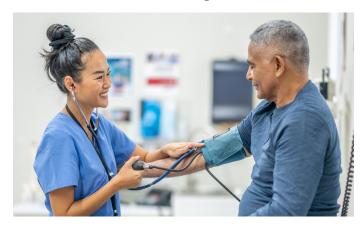
Note: The logical observation identifiers names and codes (LOINC) are for reporting clinical observations and laboratory testing. The codes listed are informational only; this information does not guarantee reimbursement. If applicable, refer to your provider contact or health plan contact for reimbursement information. For a complete list of CPT codes, go to the American Medical Association website at **ama-assn.org**.

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Helpful Tips:

- Improve the accuracy of BP measurements performed by your clinical staff by:
 - Providing training materials from the American Heart Association.
 - Conducting BP competency tests to validate the education of each clinical staff member.
 - Making a variety of cuff sizes available.
- Instruct your office staff to recheck BP for all members with initial recorded readings greater than systolic 139 mm Hg and diastolic of 89 mm Hg during outpatient office visits; have your staff record the recheck in the member's medical records.
- Refer high-risk members to our hypertension programs for additional education and support.
- Educate members and their spouses, caregivers, or guardians about the elements of a healthy lifestyle such as:
 - Heart-healthy eating and a low-salt diet.
 - Smoking cessation and avoiding secondhand smoke.
 - Adding regular exercise to daily activities.
 - Home BP monitoring.
 - Ideal body mass index (BMI).
 - The importance of taking all prescribed medications as directed.

- Remember to include the applicable CPT
 Category II reporting code above on the claim
 form to help reduce the burden of HEDIS
 medical record review.
- If using an electronic medical record system, consider electronic data sharing with your health plan to capture all coded elements. Contact your provider relationship management representative for additional details and questions.



Other Available Resources

You can find more information and tools online at:

- nhlbi.nih.gov
- cdc.gov/bloodpressure/index.htm

Please visit **My Diverse Patients** for additional information about eLearning experiences on provider cultural competency and health equity.



https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare

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