Controlling High Blood Pressure (CBP) 2025

Healthcare Effectiveness Data Information Set® (HEDIS) is a widely used set of performance measures developed and maintained by NCQA. These are used to drive improvement efforts surrounding best practices.
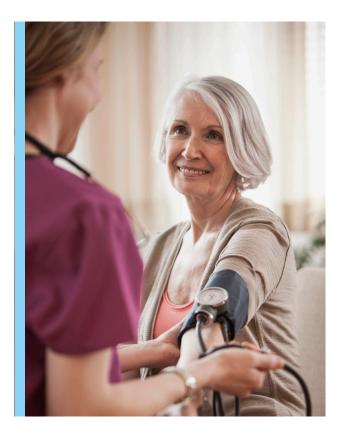
HEDIS Measure

This HEDIS measure looks at the percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled ($< 140/90$ mm Hg) during the measurement year.

Numerator

Patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose most recent blood pressure (BP) was adequately controlled ($< 140/90$ mmHg) during the measurement year

Denominator (Eligible Patients)

Patients 18 to 85 years of age with a diagnosis of hypertension or hypertensive disease (patients who have had at least two visits on different dates of services with a diagnosis of HTN on or between January 1, 2024, and June 30, 2025. **Note:** One or both visits to identify the HTN event/diagnosis can be an outpatient visit, outpatient telehealth visit, telephone visit, e-visit, or virtual check-in.

Exclusions:
- Patients who use hospice services or elect to use a hospice benefit any time during the measurement year
- Patients who die any time during the measurement year
- Patients receiving palliative care any time during the measurement year

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

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Exclusions (cont.):

- Patients who had an encounter for palliative care anytime during the measurement year. Do not include laboratory claims (claims with POS code 81). Patients with a diagnosis that indicates end-stage renal disease (ESRD) any time during the member's history on or prior to December 31 of the measurement year. Do not include laboratory claims (claims with POS code 81).
- Patients with a procedure that indicates ESRD, dialysis, nephrectomy, or kidney transplant any time during the member's history on or prior to December 31 of the measurement year
- Patients with a diagnosis of pregnancy any time during the measurement year
- Medicare patients 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
- Patients 66 to 80 years of age as of December 31 of the measurement year (all product lines) with frailty and advanced illness:
  - Patients must meet both frailty and advanced illness criteria to be excluded.
- Patients 81 years of age and older as of December 31 of the measurement year (all product lines) with at least two indications of frailty with different dates of service during the measurement year

Closing the Gap

Documentation needed:

- Identify the most recent BP reading noted in 2025. If multiple BPs on same date of service, use lowest systolic and lowest diastolic Values
- All eligible BP readings in the appropriate medical record should be considered, regardless of practitioner type and setting (excluding acute inpatient and ED visit settings)
- The BP reading must occur on or after the date when the second diagnosis of hypertension occurred
- BP readings from remote monitoring devices and electronically submitted directly to provider may be used; must clearly document that reading was taken by electronic device and interpreted by provider
- BP readings taken by the patient using a digital device and documented in the chart may be used
- BP readings taken the same day the patient receives a common, low-intensity or preventive procedure may be used (vaccinations, injections, TB test, eye exam, wart removal, etc.)
- Do not include BP readings:
  - Taken during an acute inpatient stay or an ED visit
  - Taken on the same day as a diagnostic or therapeutic test/procedure that requires a change in diet or medication on or one day before the day of the test/procedure, except fasting blood tests
- Must submit office or other outpatient evaluation and management (E&M) code with CPT® II Code. Report both a systolic and diastolic CPT II Code:
  - CPT II 3074F: systolic < 130
  - CPT II 3075F: systolic 130 to 139
  - CPT II 3077F: systolic > 140 (will not close gap)
  - CPT II 3078F: diastolic < 80
  - CPT II 3079F: diastolic 80 to 89
  - CPT II 3080F: diastolic > 90 (will not close gap)

- Examples of noncompliant BP:
  - BP reading > 140/90 mmHg
  - No BP reading during 2025
  - Incomplete BP reading (systolic or diastolic level missing)
  - BP measurement will be used from the last visit of the calendar year, regardless of the provider who submits the reading
- **Note:** Two patient identifiers are required.

Best Practices:

- Ensure diagnosis of HTN is appropriate to avoid incorrectly placing the patient into this measure.
- Document BP at each patient visit.
- Use CPT II codes to document blood pressure values.
- Re-check BP readings ≥140/90 at end of appointment and/or the other arm and document all re-checks.
- List the date of service and BP reading together. If BP is listed on the vital flow sheet, ensure the date is also noted.
- Add ticklers to electronic medical record (EMR) for advanced illness and frailty exclusions.
- Encourage patients to avoid caffeine and nicotine an hour prior to appointment time.
- For non-compliant reading, schedule patients for a nursing or telehealth visit to recheck BP in two weeks.
- Encourage members to use OTC benefits to purchase a digital BP cuff for home readings.
- Results must be precise — Do not round.

Let's Work Together

Measure is closed via:

- Claims
- Consolidated Clinical Document Architecture (CCDA)
- SFTP/Flat files
- Cotiviti

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

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