

HEDIS TIPS:

Controlling High Blood Pressure

MEASURE DESCRIPTION

Patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose last BP of the year was adequately controlled based on the following criteria: 18 to 59 years of age whose BP was <140/90 mmHg, 60-85 years of age with a diagnosis of diabetes whose BP was <140/90 mmHg, 60-85 years of age without a diagnosis of diabetes whose BP was <150/90 mmHg. Patients are included in the measure if prior to June 30 of the measurement year there was a claim/encounter with a diagnosis of hypertension (ICD-9: 401.xx).

Exclusions: Diagnosis of pregnancy, nonacute inpatient admission, or documented evidence of ESRD, kidney transplant, or dialysis during measurement year.

USING CORRECT BILLING CODES

Codes to Identify Hypertension	
Description	ICD-9 Code
Hypertension	401.0, 401.1, 401.9

HOW TO IMPROVE HEDIS SCORES

- Calibrate the sphygmomanometer annually.
- Select appropriately sized BP cuff.
- If the BP is high at the office visit (140/90 or greater), take it again. HEDIS allows the lowest systolic and lowest diastolic readings in the same day and oftentimes the second reading is lower.
- Do not round BP values up. If using an automated machine, record exact values.
- Review hypertensive medication history and patient compliance, and consider modifying treatment plans for uncontrolled blood pressure, as needed. Have the patient return in three months.
- If more than one blood pressure was taken during visit, then all blood pressure taken on that final date of service needs to be documented.
- The notation of hypertension may appear on or before June 30 of the measurement year, including prior to the measurement year.
- Statements such as "rule out HTN," "possible HTN," "consistent with HTN," "whitecoat HTN," and "questionable HTN" are not sufficient to confirm the diagnosis if such statements are the only notations of hypertension in the medical record.