



Blood Pressure Control for Patients with Diabetes (BPD)

HEDIS® Measurement Year 2023

Measure Description: The percentage of members 18-75 years of age with a diagnosis of diabetes (Type 1 and Type 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.

Eligible Population

- Members 18-75 years of age with a diagnosis of diabetes (Type 1 and 2).
- Members who are in hospice or palliative care are excluded from the eligible population.

Exclusions

Members are excluded from the measure if they meet the following criteria:

- Members 66 years of age and older as of Dec. 31 of the measurement year who have both a frailty and an advanced illness diagnosis.
- Members with a diagnosis of polycystic ovarian syndrome, gestational diabetes or steroid induced diabetes and do not have a diagnosis of diabetes during the measurement year or the year prior.

Measure Compliance (numerator) - Blood Pressure Control

Identify the most recent BP reading taken during the measurement year. The member is numerator compliant if the BP is <140/90 mm Hg (or a systolic level of 139 or less and a diastolic level of 89 or less).

The member is not compliant if the BP reading is ≥140/90 mm Hg or is missing, if there is no BP reading during the measurement year, or if the reading is incomplete (i.e., the systolic or diastolic level is missing).

BP readings should be clearly documented in the clinical notes and reported through claims.

Numerator Codes

The complete NCQA approved code set list can be referenced in the coding guide at healthplan.org/providers/patient-care-programs/quality-measures.

For questions, please contact your practice management consultant. To identify your practice management consultant please refer to healthplan.org/providers/overview/meet-practice-management-consultant.

Code Type	Codes
CPT II Systolic BP Level	3074F < 130 mm Hg 3075F 130-139 mm Hg 3077F ≥ 140 mm Hg
CPT II Diastolic BP Level	3078F < 80 mm Hg 3079F 80-89 mm Hg 3080F ≥ 90 mm Hg

Please Note:

BP readings do not count if:

- taken during an acute inpatient stay or an ED visit.
- taken on the same day as a diagnostic test or a diagnostic or therapeutic procedure that requires a change in diet or change in medication on or one day before the day of test or procedure, with the exception of a fasting blood test.



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Strategies for Improvement

- Utilize NCQA coding tips to actively reflect care rendered.
- Coordinate care with specialists such as endocrinologists, neurologists, and cardiologists.
- Stress importance of medication adherence and their effect on blood pressure readings.
- Counsel on health lifestyle changes; this could include improved diet and increased exercises and their effect on blood pressure control. An example of this might include low sodium diet and decreased carbs, 150 minutes of physical activity a week.
- Repeat blood pressures in the office when either a systolic or diastolic reading, or both readings, do not meet the compliance threshold (<140/90 mm Hg). Separate repeated measurements by 1-2 minutes.

Hybrid Measure Note:

The BPD measure is hybrid. Any care not received via claims during the measurement year will result in medical record requests during the HEDIS medical record review project.

*The Health Plan has a team of member advocates, health coaches, social workers and nurses who can assist you and your patients to remove or overcome any barriers to care through benefit assistance, community resource referrals or enrollment in a THP clinical program. To refer a patient who is a THP member for assistance, call **1.877.903.7504** and let us know what we can do to help your patient receive and adhere to your recommended plan of care.*

Elements of Blood Pressure Assessment

- Instruct the patient to avoid caffeine, exercise, and smoking for at least 30 minutes before the visit
- Have the patient relax, sitting in a chair (feet on floor with back supported) for at least five minutes
- Refrain from talking during the rest period and measurement
- Remove all clothing covering the area where the cuff will be placed
- Use the correct cuff size and support the patients arm
- Position the middle of the cuff on the patient's upper arm at the level of the right atrium (the midpoint of the sternum)