



# Blood Pressure Control for Patients with Diabetes (BPD)

HEDIS® Measurement Year 2022 Measures

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

## Eligible Population

- **NEW for measurement year 2022:** Members 18-75 years of age in the measurement year with a diagnosis of (Type 1 and Type 2) whose blood pressure (BP) was:
  - Adequately controlled (less than 140/90 mm Hg) during the measurement year.

## Blood Pressure Control

Identify the most recent BP reading taken during the measurement year. The goal is for the patient to have adequately controlled BP (systolic BP of 139 or less and diastolic BP of 89 or less). The member is not compliant if the BP reading is  $\geq 140/90$  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).

**Please Note:** BP reading 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/population-health](http://healthplan.org/providers/patient-care-programs/population-health).

For questions, please contact your practice management consultant. To identify your practice management consultant please refer to [healthplan.org/providers/overview/meet-provider-servicing-team](http://healthplan.org/providers/overview/meet-provider-servicing-team)

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

### Please Note:

BP readings do not count if:

- BP taken during an acute inpatient stay or an ED visit.
- BP 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 fasting blood test.
- Taken by the member using a non-digital device such as with a manual blood pressure cuff and a stethoscope.



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.

## Exclusions

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

- Hospice care or using hospice services anytime in the measurement year
  - Codes for Hospice Care**
    - CPT: 99377, 99378
    - HCPCS: G0182, G9473 – G9479, Q5003 – Q5010, S9126, T2042 – T2046
- Receiving palliative care anytime in the measurement year
  - Codes for Palliative Care**
    - ICD: 10 Z51.5
    - HCPCS: G9054, M1017
- Medicare members age 66 and older as of Dec. 31 of the measurement year who are either enrolled in an institutional special needs plan (I-SNP) or living long-term in an institution.
- Members age 66 and older as of Dec. 31 of the measurement year who meet *both* frailty and advanced illness criteria.
- Members with a diagnosis of Polycystic ovarian syndrome, gestational diabetes or steroid induced diabetes during measurement year or the year prior to measurement year and *do not* have a diagnosis of diabetes during the measurement year or the year prior to the measurement year.