



HEDIS® Measures Provider Tip Sheet: Coding for Controlling Blood Pressure (CBP)

As part of Community First Health Plans' ongoing efforts to improve care and ensure compliance with the Healthcare Effectiveness Data and Information Set (HEDIS®) measures, we want to remind our network of Providers about the importance of accurate coding and documentation. Accurate coding and documentation are essential for meeting HEDIS requirements and ensuring timely and proper reimbursement.

HEDIS Measure Description

Coding for Controlling Blood Pressure (CBP) tracks the percentage of adults aged 18 to 85 with a hypertension diagnosis, who were screened for CBP according to established guidelines, and whose blood pressure is controlled. Blood pressure is considered controlled if the most recent reading during the measurement year is <140/90mm Hg.

Recommended Screening Guidelines

Clinical practical guidelines recommend screening patients within this population who meet these restrictions or requirements during the measurement year or in the previous years.

Coding Guidelines

Systolic Blood Pressure:	
Description	CPT II Code
<130 mm Hg	3074F
130-139 mm Hg	3075F
≥ 140 mm Hg	3077F

Diastolic Blood Pressure:	
Description	CPT II Code
<80 mm Hg	3078F
80-89 mm Hg	3079F
≥ 90 mm Hg	3080F

ICD-10 Code I10 - Essential (Primary) Hypertension

HEDIS Best Practices

Key requirements for HEDIS compliance: Documentation of the lowest systolic and diastolic blood pressure reading from the most recent blood pressure notation in the medical record during the measurement year.

- Document exact blood pressure readings (no rounding).
- Take blood pressure and record it in the patient's medical record at every office visit, telehealth visit, e-visit, or other virtual check-in.
- If the initial readings are $\geq 140/90$, recheck at the end of the visit.
- Communicate and provide specific goals regarding management of medical condition(s).
- Schedule follow-ups for uncontrolled blood pressure.
- Encourage patients to use a validated digital device to track and report their blood pressure values. If the reading is captured with a digital device, patient-reported data is acceptable to document in the medical record.
- Ranges and thresholds do not meet the criteria for this measure. A distinct numeric result for both the systolic and diastolic blood pressure readings is required.
- Educate on what to do to maintain compliance with medications and lifestyle, especially during special circumstances like traveling or celebrations.
- Provide information/education about different blood pressure medications (printed materials, videos, self-study programs, referrals to community organizations, etc.).

Community First Resources

Refer Community First Members to these additional no-cost resources:

- » [Healthy Heart: Blood Pressure Management Program](#): This program offers Members education and resources to help them manage their high blood pressure by making healthy lifestyle changes
- » [YMCA Blood Pressure Self-Monitoring Program](#): Participating Members may be eligible for a 4-month YMCA family membership and a blood pressure cuff, while supplies last

References

1. Centers for Disease Control and Prevention (2024, December 13). *Managing High Blood Pressure*. CDC. <https://www.cdc.gov/high-blood-pressure/living-with/index.html>
2. Centers for Disease Control and Prevention (2024, December 13). *Team-Based Care to Improve Blood Pressure Control*. CDC. <https://www.cdc.gov/high-blood-pressure/php/data-research/team-based-care/index.html>

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