

Controlling High Blood Pressure (CBP)

2025

Members 18–85

COMMERCIAL | MEDICARE | MEDICAID

Measure definition

Members with a diagnosis of hypertension (HTN) and adequately controlled blood pressure (<140/90 mm Hg) during measurement year



Medical record requirements

- Member legal name and date of birth
- Provider/practice identifier
- Provider Business Group (PBG) name and number
- Date of service (DOS)
- Applicable lab/test results and date collected



Commonly used claim codes*

Systolic B/P:

- **3075F:** 130–139 mm Hg
- **3074F:** < 130 mm Hg
- **3077F:** ≥ 140 mm Hg

Diastolic B/P:

- **3079F:** < than 90 (80–89 mm Hg)
- **3078F:** < than 80 mm Hg
- **3080F:** ≥ 90 mm Hg

Exclusions:

- End-stage renal disease: **N18.6**
- Kidney transplant: **50360**
- Dialysis procedure: **90935**
- Dependence on renal dialysis: **Z99.2**

Medical record submission methods may not be applicable to all plan types.
For more details, you can reach out to your HEDIS plan representative.

Required exclusions (Other exclusions may also apply)

- Members with a diagnosis, history or evidence of a procedure that indicates end-stage renal disease (ESRD), dialysis, nephrectomy or kidney transplant any time during the member's history on or prior to December 31 of the measurement year
- Members with a diagnosis of pregnancy anytime during the measurement year
- Members who have died during the measurement year
- Members in hospice or using hospice services during the measurement year
- Members receiving palliative care anytime during the measurement year
- Members who had an encounter for palliative care anytime during the measurement year
- **Medicare** members 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) anytime during the measurement year
 - Living long-term in an institution anytime during the measurement year as identified by the LTI flag in the Monthly Membership Detail Data File

- Members 66–80 years of age and older by the end of the measurement year with BOTH frailty and advanced illness criteria to be excluded:
 - Frailty: At least two indications of frailty with different dates of service during the measurement period
 - Advanced illness: Either of the following during the measurement period or the year prior to the measurement period:
 - Advanced illness on at least two different dates of service
 - Dispensed dementia medication
- Members 81 years of age and older as of December 31 of the measurement year with at least two indications of frailty with different dates of service during the measurement year

Insights and recommendations

Blood pressure (BP) control (< 140/90 mm Hg)

- Identify most recent BP reading taken during the measurement year
- If there are multiple BPs on same date of service, use the lowest systolic and lowest diastolic BP
- Member-reported BP readings during any type of non-acute visit, including telehealth visits, are eligible for use when documented in member's medical record
- Capture BP value through CPTII codes to decrease medical record requests and chart reviews
- Blood pressure documented as "average BP" (e.g., "average BP: 139/70") is acceptable if a distinct value is included

Don't include BP readings:

- Taken during an acute inpatient stay or emergency department visit
- Taken on same day as a diagnostic or therapeutic test/procedure that requires a change in diet or medication on or one day before day of the test or procedure (except for fasting blood tests)
- Taken by member using a non-digital device such as with a manual blood pressure cuff and stethoscope
- Without a distinct numeric result for both systolic and diastolic values; ranges and thresholds aren't acceptable

*FOR COMMONLY USED CODES: Not a comprehensive list of codes.

For measures that require claims data only, we cannot accept supplemental data sources such as data feeds and medical record collection methods.

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