

RE-SCREEN COMPREHENSIVE DIABETES CARE (CDC) HBA1C AND CONTROLLING HIGH BLOOD PRESSURE (CBP)



Members should be re-screened throughout the year per clinical guideline recommendations. The HEDIS measure CDC takes the last HbA1c reading and the last blood pressure reading during the year. The HEDIS measure CBP takes the last blood pressure reading during the year.

The HEDIS measure CDC looks at the percentage of members ages 18-75 with diabetes (type 1 & type 2) who were compliant in all four of the following sub-measures: HbA1c Testing and Control, Retinal Eye Exam, Blood Pressure control and Medical Attention for Nephropathy.

HbA1c Testing: Completed at least once per year per the NCQA HEDIS measure however clinical recommendations call for an HbA1c check every six (6) months for members with controlled values and HbA1c checks every three (3) months for members with uncontrolled values.

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| HbA1c Testing and Control | CPT: 83036, 83037 |
| | CPT II: 3044F (<7.0%) signifying control, 3051F (7.0%-9.0%), 3052F (>9.0%) |

Blood Pressure Control: Blood pressure reading taken during an outpatient visit, non-acute inpatient encounter or remote monitoring event during the year. Blood pressure reading is compliant for the CDC measure if the blood pressure is <140/90 mm Hg.

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| Blood Pressure | CPT II: 3074F, 3075F, 3077F-3080F |
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The HEDIS measure CBP looks at members 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled during the measurement year. The blood pressure reading collected for HEDIS measure compliance must be the most recent blood pressure reading during the measurement year on or after the second diagnosis of hypertension. The blood pressure reading must be taken during an outpatient visit, non-acute inpatient encounter, or remote monitoring event (see below comments). Compliance can be captured through CPT II codes.

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| ICD-10 |
| I10 – Essential Hypertension |
| OUTPATIENT CODES |
| CPT: 99201 - 99205, 99211 - 99215, 99241 - 99245, 99341 - 99350, 99381 - 99387, 99391 - 99397, 99401 - 99404, 99411, 99412, 99429, 99455, 99456, 99483 |
| HCPCS: G0402, G0438, G0439, G0463, T1015 |
| NON-ACUTE INPATIENT CODES |
| CPT: 99304 - 99310, 99315, 99316, 99318, 99324 - 99328, 99334, -99337 |
| REMOTE BLOOD PRESSURE MONITORING CODES |
| CPT: 93784, 93788, 93790, 99091 |

| DESCRIPTION | CPT II |
|------------------------------------|--------------|
| Diastolic 80-89 | 3079F |
| Diastolic Greater Than/Equal To 90 | 3080F |
| Diastolic Less Than 80 | 3078F |
| Systolic Greater Than/Equal To 140 | 3077F |
| Systolic Less Than 140 | 3074F, 3075F |

To improve HEDIS scores:

- Schedule follow-up appointments and/or BP and A1c re-checks if the BP or A1c is not controlled
- *Include CPT coding identified above*
**HEDIS rules state that the last BP taken during the year on or after the date of the second diagnosis of hypertension is the only one that counts towards meeting the measure! In addition the last A1c taken during the year is the only one that counts towards meeting the measure*
- Document the blood pressure value exactly as taken. For example, if a blood pressure reading is 139/80 it should be documented as such and not rounded to 140/80.
- HEDIS rules state that the organization may include BP readings from remote monitoring devices that are digitally stored and transmitted to the provider. There must be documentation in the medical record that clearly states the reading was taken by an electronic device, and results were digitally stored and transmitted to and interpreted by the provider.