

## Blood Pressure Control for Patients with Diabetes (BPD)

### Measure Description

The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.

**Note:** BP readings taken on the same day that the member receives a common low-intensity or preventive procedure (e.g., vaccinations, injections, TB test, IUD insertion, Eye exam with dilating agent, wart or mole removal) are eligible for use. BP readings *not* eligible for use:

- BP taken during an ED visit or acute inpatient stay.
- 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, except for fasting blood tests.
- BP taken by the member using a non-digital device.

**Product Lines:** Commercial, Medicaid, Medicare

### Codes Included in the Current HEDIS® Measure

Description	Code
Diabetes	ICD-10: E10.xxxx, E11.xxxx, E13.xxxx, O24.xxxx
ED Visit - Exclusions	CPT: 99281-99285 UBREV: 0450-0452, 0456, 0459, 0981 POS: 23
Acute Inpatient - Exclusions	CPT: 99221-99223, 99231-99236, 99238, 99239, 99251-99255, 99291 POS: 21, 51
Systolic Blood Pressure	CPT II: 3074F (if Systolic <130 mm Hg) = COMPLIANT CPT II: 3075F (if Systolic 130-139 mm Hg) = COMPLIANT CPT II: 3077F (if Systolic ≥ 140 mm Hg) = NOT COMPLIANT Do <i>not</i> include CPT II codes with a CPT CAT II modifier: 1P-2P, 8P. Do <i>not</i> include BPs taken in an acute inpatient setting or during an ED visit with POS 23.
Diastolic Blood Pressure	CPT II: 3078F (if Diastolic <80 mm Hg) = COMPLIANT CPT II: 3079F (if Diastolic 80-89 mm Hg) = COMPLIANT CPT II: 3080F (if Diastolic ≥ 90 mm Hg) = NOT COMPLIANT Do <i>not</i> include CPT II codes with a CPT CAT II modifier: 1P-2P, 8P. Do <i>not</i> include BPs taken in an acute inpatient setting or during an ED visit with POS 23.

### Medications

#### Diabetes Medications

Description	Prescription
Alpha-glucosidase Inhibitors	Acarbose, Miglitol
Amylin Analogs	Pramlintide

Description	Prescription
Antidiabetic Combinations	Alogliptin-metformin, Alogliptin-pioglitazone, Canagliflozin-metformin, Dapagliflozin-metformin, Dapagliflozin-saxagliptin, Empagliflozin-linagliptin, Empagliflozin-linagliptin-metformin, Empagliflozin-metformin, Ertugliflozin-metformin, Ertugliflozin-sitagliptin, Glimepiride-pioglitazone, Glipizide-metformin, Glyburide-metformin, Linagliptin-metformin, Metformin-pioglitazone, Metformin-repaglinide, Metformin-rosiglitazone, Metformin-saxagliptin, Metformin-sitagliptin
Insulin	Insulin aspart, Insulin aspart-insulin aspart protamine, Insulin degludec, Insulin degludec-liraglutide, Insulin detemir, Insulin glargine, Insulin glargine-lixisenatide, Insulin glulisine, Insulin isophane human, Insulin isophane-insulin regular, Insulin lispro, Insulin lispro-insulin lispro protamine, Insulin regular human, Insulin human inhaled
Meglitinides	Nateglinide, Repaglinide
Biguanides	Metformin
Glucagon-like Peptide-1 (GLP1) Agonists	Albiglutide, Dulaglutide, Exenatide, Liraglutide, Lixisenatide, Semaglutide
Sodium Glucose Cotransporter 2 (SGLT2) Inhibitor	Canagliflozin, Dapagliflozin, Empagliflozin, Ertugliflozin
Sulfonylureas	Chlorpropamide, Glimepiride, Glipizide, Glyburide, Tolazamide, Tolbutamide
Thiazolidinediones	Pioglitazone, Rosiglitazone
Dipeptidyl Peptidase-4 (DDP-4) Inhibitors	Alogliptin, Linagliptin, Saxagliptin, Sitagliptin

#### ***Dementia Medications for Exclusions***

Description	Prescription
Cholinesterase Inhibitors	Donepezil, Galantamine, Rivastigmine
Miscellaneous Central Nervous System Agents	Memantine
Dementia Combinations	Donepezil-memantine

## Ways Providers can Improve HEDIS® Performance

- Retake the BP if reading is high at the office visit (>140/90 mm Hg) as HEDIS® allows the use of the lowest systolic and diastolic readings on the same day, and often, the second reading is lower.
- Refer patients for Health Management interventions and coaching by contacting Health Care Services at Molina Healthcare.
- Schedule follow-up visits for blood pressure control after diagnosis or medication adjustment.
- Schedule telehealth appointments to diagnose patients with diabetes and acquire controlled blood pressure readings. *Note: Blood pressure readings may be taken by any digital device.*
- Make sure the proper cuff size is used.
- Reinforce the importance of medication adherence and encourage patients to report side effect.

## Ways Health Plans can Improve HEDIS® Performance

- Send blood pressure cuffs to members who have upcoming in-home visit or telehealth visit to record reading.
- Locate and partner with local/community organizations that are working to eliminate barriers to care for target population. This includes blood pressure resources, diabetes disease management resources or educational centers, YMCA, gyms etc.

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- Educate members on the importance of medication adherence, how to correctly capture blood pressure readings, and when to call their doctor about side effects.
- Identify members who are historically not compliant and enroll in disease management/case management program.

## Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement period. Members who die any time during the measurement year.
- Members that are receiving palliative care at any time during the measurement year.
- Members who had an encounter for palliative care (ICD-10-CM code Z51.5) any time during the measurement year. Do not include laboratory claims (POS: 81).
- 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) any time during the measurement year.
  - Living long-term in an institution any time during the measurement year as identified by the LTI flag in the Monthly Membership Detail Data File.
- Members 66 years of age and older as of December 31 of the measurement year (all product lines) with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to be excluded:
  - **Frailty.** At least two indications of frailty with different dates of service during the measurement year. Do not include laboratory claims (POS: 81).
- **Advanced Illness.** Either of the following during the measurement year or the year prior to the measurement year: (a) Advanced illness on at least two different dates of service. Do not include laboratory claims (POS: 81); (b) Dispensed dementia medication.
- Dispensed Dementia Medications: Donepezil and Rivastigmine

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