Controlling High Blood Pressure (CMS165)

The following is for educational purposed only and is not intended to be clinical or legal advice. The information provided in the Measure Details section is based on specification published by CMS at https://ecqi.healthit.gov/ecqm/ec/2023/cms165v11

Measure Details

Description *

Percentage of patients 18-85 years of age who had a diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90mmHg) during the measurement period

Initial Population

Patients 18-85 years of age by the end of the measurement period who had a visit and diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period

Denominator

Equals Initial Population

Numerator

Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period

Denominator Exclusion

- Patients with evidence of end stage renal disease (ESRD), dialysis or renal transplant before or during the measurement period
- Also exclude patients with a diagnosis of pregnancy during the measurement period
- Exclude patients who are in hospice care for any part of the measurement period
- Exclude patients receiving palliative care during for any part of the measurement period.
- Exclude patients 66 and older by the end of the measurement period who are living long term in an institution for more than
 90 consecutive days during a nursing home any time on or before the end of the measurement period
- Exclude patients 66 and older by the end of the measurement period with an indication of frailty for any part of the measurement period who also meet any of the following advanced illness criteria:
 - $\circ \qquad \text{Advanced illness with two outpatient encounters during the measurement period or the year prior} \mathsf{OR}$
 - Advanced illness with one inpatient encounter during the measurement period or the year prior OR Taking dementia medications during the measurement period or the year prior

Overview

What is Documented	When is it Documented	Where in QMER
Qualifying Encounter	During Measurement Period (2023)	Coded SOAP Note
Diagnosis of Essential Hypertension	Starting before 2023 or the first six months	DxCPT Module
Blood Pressure	Each visit during measurement period (2023)	Vitals Module

Exclusions/Exceptions	Where in QEMR
Patients with evidence of end stage renal disease	History Module
Patient with a history of renal transplant	History Module
Patients pregnant during any time during the measurement period	History Module
Patients who are in palliative care for any part of the measurement period	History Module
Patients who are in hospice care for any part of the measurement period	History Module

2022 to 2023 Changes

NA

Set Up

All codification shown is an example for incrementation, for a full list of accepted codes please visit <u>Value Set Authority</u> <u>Center</u>.

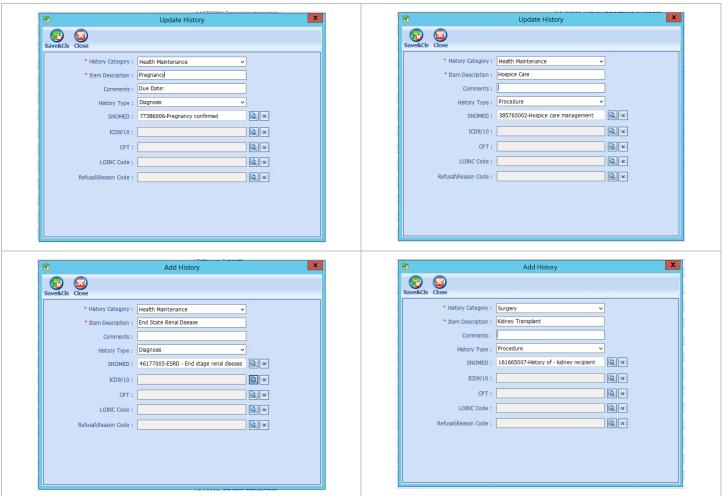
Qualifying Encounter

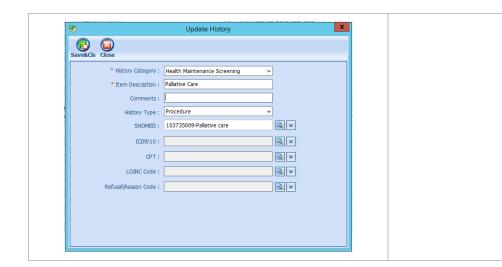
No set up required

Building Exclusion History Items

Build the history items below:

- 1. Log into QEMR > Navigate to Edit > History
- 2. Highlight desired History Category list on left side bar
- 3. Click New hot button
- 4. Complete the Update History Screen as seen below
- 5. Click Save & Close hot button





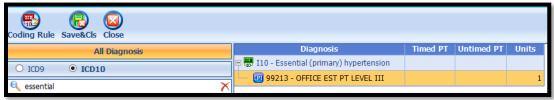
Workflow

Qualifying Encounter

Following standard office workflow, document patient visit(s) via SOAP notes and code with CPT and diagnosis codes using either DxCPT, SmartDx or Smart CPT modules.

Diagnosis of Essential Hypertension

For this measure a diagnosis of Essential (Primary) Hypertension must be documented during the first six months of the measurement period or nay time before via **Dx and CPT** Follow standard in-office coding workflow for coding exams



Document Blood Pressure

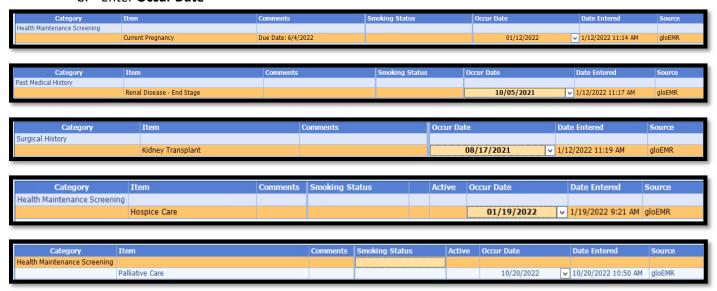
Following standard office procedure enter blood pressure into the Vitals Module



Document Exclusion if Applicable

To document smoking status, follow steps below:

- Navigate to History Module > Applicable History category
 - a. Double-click Applicable History Item
 - b. Enter Occur Date



Incrementing Details

Occur Dates

To increment ANY measure using the History Module the Occur Dater MUST be documented using appropriate date based upon Measure Description.

Exam Coding

If exam notes (Past Exams) are not coded with Diagnosis Code and CPT code measures will not increment.

Measure Specific Codes

The codification shown in this document are examples of qualifying documentation. To see a full list please visit <u>Value</u> <u>Set Authority Center</u>.

CMS Guidance *

- In reference to the numerator element, only blood pressure readings performed by a clinician, or a remote monitoring device are acceptable for numerator compliance with this measure. This includes blood pressures taken in person by a clinician and blood pressures measured remotely by electronic monitoring devices capable of transmitting the blood pressure data to the clinician. Blood pressure readings taken by a remote monitoring device and conveyed by the patient to the clinician are also acceptable. It is the clinician's responsibility and discretion to confirm the remote monitoring device used to obtain the blood pressure is considered acceptable and reliable and whether the blood pressure reading is considered accurate before documenting it in the patient's medical record.
- Do not include BP readings taken during an acute inpatient stay or an ED visit.
- If no blood pressure is recorded during the measurement period, the patient's blood pressure is assumed "not controlled".
- If there are multiple blood pressure readings on the same day, use the lowest systolic and the lowest diastolic reading as the most recent blood pressure reading.
- Ranges and thresholds do not meet criteria for this measure. A distinct numeric result for both the systolic and diastolic BP reading is required for numerator compliance.
- This <u>eCQM</u> is a patient-based measure