



Controlling Blood Pressure Tip Sheet

What is the CMS Star Rating Program?

CMS uses a five-star quality rating system to measure the experiences Medicare beneficiaries have with their health plan and healthcare system – the Star Rating Program. Health plans are rated on a scale of 1 to 5 stars, with 5 being the highest. These ratings are then published on the Medicare Plan Finder at [medicare.gov](https://www.medicare.gov) to raise the quality of care for Medicare beneficiaries, strengthen beneficiary protections and help consumers compare health plans more easily.

Measure Description

Weight: 3

The percent of plan members aged 18 to 85 who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mm Hg).

Measure Source

- Claims & Chart Review.
- 1/1 – 12/31.

Stars/Quality Specifications

Eligible patient has had:

- Both a systolic BP <140 mm Hg and diastolic BP of <90 mm Hg on the most recent reading during the measurement year on or after the second diagnosis of hypertension.

Coding and Documentation Tips

- If initial patient blood pressure is elevated, blood pressure should be rechecked during the same visit.
- If patient self-reports digital blood pressure reading communicated by EMR messaging or phone conversation, add recent reading as an addendum to patient's last visit in their EMR.
- Encourage patients to check their blood pressure regularly and record their readings.
- Encourage patients to utilize Hally videos/articles that outline how to manage their blood pressure as well as give access to heart healthy recipes, fitness videos and more: [Hally health Website](#)
- Document patient reported blood pressure readings in electronic medical record.
- Advise patients to take blood pressure medications as prescribed.

Exclusions

A member may be eligible to be excluded if they:

- Are 81 years or older with frailty during the measurement year.
- Are 66-80 years old with frailty and advanced illness codes in the measurement year.
- Are dispensed a dementia medication.
- ESRD, Kidney transplant, Pregnancy and/or non-acute inpatient admission within the measurement year.

Members may be excluded from this measure due to frailty and/or advanced illness codes. Click the following link to review the master code list for exclusions: [Exclusion Codes](#)

If you have any questions, please contact your Provider Relations Specialist.