

Controlling High Blood Pressure

2018

Measure Description: Percentage of patients 18-85 years of age who had a diagnosis of hypertension (high blood pressure) and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period.

Purpose: Uncontrolled hypertension can have serious complications, including heart disease and stroke. Better control of blood pressure has been shown to reduce the probability that these complications will occur.

Measure Specifications

Data Source: Electronic Health Record

Improvement Target: TBD

Benchmark: 70.6%

Denominator: Patients age 18 – 85 received an office visit in 2018 and who had a diagnosis of essential hypertension within the first six months of 2018 or any time prior to 2018.

Exclusions: Patients with the following conditions are excluded from the denominator:

- End stage renal disease
- Pregnancy diagnosis in 2018
- Hospice care in 2018

Numerator: Patients whose blood pressure at the most recent visit is adequately controlled (systolic < 140 mmHg and diastolic < 90 mmHg) in 2018.

- Only blood pressure readings performed by a clinician in the provider office are counted. Readings from the patient’s home are not counted.
- If no blood pressure is recorded in 2018, 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.

OHA Resources: <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx>

Strategies for Improvement

- Retake blood pressure when the initial reading is above 140/90 and capture the updated value in the Electronic Health Record. This can be done using visual cues, like red hearts on the door, to prompt the provider or medical assistant to retake the blood pressure before the patient leaves.
- Confirm the date of the office visit matches the date of the vitals entered in to the EHR.
- Use the gap lists provided by WOA for targeted patient outreach and care management.