



Blood Pressure Documentation and Hypertension Treatment Quick Guide

This guide was developed in keeping with Peoples Health evidence-based practice guidelines. For the complete **Diagnosis and Management of Hypertension in the Primary Care Setting** guideline, visit the Provider Portal (<http://providers.peopleshealth.com>) and access the *Policies and Guidelines* tab.

DOCUMENTATION AND CODING

- Submit one CPT II code for the systolic pressure and one CPT II code for the diastolic pressure.
- For patients with hypertension, ensure the chart clearly states a diagnosis of hypertension — symbols are not valid documentation (e.g., ⬆ blood pressure).
- Code appropriate ICD-9-CM code from category 401.XX code set for hypertension.

Blood Pressure Reading	CPT II Code	ICD-9-CM Code
Systolic < 130mmHg	3074F	Use category 401.XX codes for hypertension
Systolic 130-139mmHg	3075F	
Systolic ≥ 140mmHg	3077F	
Diastolic < 80mmHg	3078F	
Diastolic 80-89mmHg	3079F	
Diastolic ≥ 90mmHg	3080F	

THERAPY RECOMMENDATIONS FOR PATIENTS WITH UNCOMPLICATED HYPERTENSION

Blood Pressure Classification	Lifestyle Changes	Initial Drug Therapy	Systolic Pressure (mmHg)	Diastolic Pressure (mmHg)
Prehypertension	Yes	No	120-139	80-89
Stage 1 hypertension	Yes	Thiazide-type diuretics, unless contraindicated or not tolerated (consider ACEIs, ARBs, beta-blockers and calcium-channel blockers)	140-159	90-99
Stage 2 hypertension	Yes	Drug therapy with two drugs for most patients, to include a thiazide-type diuretic, unless contraindicated or not tolerated (consider ACEIs, ARBs, beta-blockers and calcium-channel blockers)	≥ 160	≥ 100

Therapy Recommendations for Patients with Comorbidities

Patients with Diabetes

Try these preferred agents first:

ACEI ARB

If preferred agents are contraindicated, try alternative agents:

Calcium-channel blocker Beta-blocker

Patients with Systolic Heart Failure

Try these preferred agents first:

ACEI ARB Beta-blocker

If preferred agents are contraindicated, try alternative agents:

Beta-blocker Hydralazine nitrate Aldosterone antagonist

If alternative agents are contraindicated, try other agents:

Diuretic (for treating volume overload) Long-acting dihydropyridine calcium-channel blocker (e.g., amlodipine)

Patients with Chronic Kidney Disease

Try these preferred agents first:

ACEI ARB Diuretic (thiazide or loop, based on kidney function)

If preferred agents are contraindicated, try alternative agents:

Beta-blocker Nondihydropyridine calcium-channel blocker (e.g., diltiazem or verapamil) Long-acting dihydropyridine calcium-channel blocker (e.g., amlodipine)

Patients with Myocardial Infarction

Try these preferred agents first:

ACEI Beta-blocker

If preferred agents are contraindicated, try alternative agents:

Thiazide-type diuretic Nondihydropyridine calcium-channel blocker (e.g., diltiazem or verapamil)

Patients After a Stroke

Try these preferred agents:

ACEI Thiazide-type diuretic

If alternative agents are contraindicated, try other agents:

Long-acting dihydropyridine calcium-channel blocker (e.g., amlodipine)

MONITORING HYPERTENSION THERAPY

- See the patient within one month of therapy initiation for hypertension to determine control, degree of patient adherence and presence of adverse effects.
- Once the patient's pressure is controlled (less than 140/90mmHg), follow up at three- to six-month intervals (depending on patient status).

ADJUSTING HYPERTENSION THERAPY

If pressure continues to be elevated, consider one of the following:

- Increase the dose of the original medication.
- Add another agent.
- Consider a consultation with a Peoples Health clinical pharmacist on adjustment of medication.
- Involve other health professionals, including specialists, in follow-up.

WORKING WITH PEOPLES HEALTH ON LIFESTYLE CHANGES

Appropriate lifestyle changes for patients, in tandem with medication therapy, can further help control blood pressure. Peoples Health is available to facilitate these changes for your patients.

- **Nutrition:** You can refer patients with hypertension to our Chronic Care Improvement dietitians for insight on proper nutrition to support their blood pressure goals. To refer a patient, contact our Chronic Care Improvement Team.
- **Exercise:** The *Peoples Health Fitness* benefit offers your Peoples Health patients complimentary membership at one of our network fitness facilities to make it easier for them to meet fitness goals.
- **Smoking cessation:** For your Peoples Health patients who smoke, all of our plans cover smoking cessation services.



If you have questions or would like more information, contact the Chronic Care Improvement Team

1-866-547-1750

Monday through Friday, from 8 a.m. to 5 p.m.

PEOPLES HEALTH

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