

## 2026 Measurement Year

# MCAS/STAR MEASURE: CONTROLLING HIGH BLOOD PRESSURE (CBP)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan Total Care Advantage’s (HMO D-SNP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) / Centers for Medicare & Medicaid (CMS) Star Measure scores by providing guidance and resources. This tip sheet provides the key components to the MCAS measure, “Controlling High Blood Pressure (CBP).”

**Measure Description: This measures the percentage of members ages 18 to 85 who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.**

### This measure requires the following:

- ▶ Two separate outpatient visits with a diagnosis of hypertension, including telephone, e-visits or virtual check-ins, on or between Jan. 1, 2025 and June 30, 2026. Visit types do not need to be the same.
- ▶ The most recent BP assessment in the measurement year that was on or after the second HTN diagnosis date.
- ▶ Blood pressure readings reported or taken by the member using a digital device, as well as blood pressure readings obtained from any remote digital device, count toward the measure.
- ▶ If multiple BP measurements occur on the same date, or are noted in the chart on the same date, the lowest systolic and lowest diastolic BP reading is used.

**Data Collection Method:** Hybrid<sup>1</sup>

### CBP Clinical Code Sets

- ▶ For billing, reimbursement, and reporting of services completed, submit claims timely with the appropriate medical codes for all clinical conditions evaluated and services completed.
- ▶ Use CPT-II codes to report BP results on claims and clinical data systems such as electronic health records.

### Codes used to identify members diagnosed with essential hypertension.

Description	ICD-10-CM
Essential Hypertension	I10

### Codes used to identify BP.

Description	CPT II	LOINC
Systolic	3074F, 3075F, 3077F	75997-7, 8459-0, 8480-6, 8508-4, 8546-4, 8547-2
Diastolic	3078F, 3079F, 3080F	75995-1, 8453-3, 8462-4, 8496-2, 8514-2, 8515-9

### Codes used to identify clinic setting of BP reading.

Description	CPT	HCPCS
Outpatient	99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429, 99455, 99456, 99483	G0402, G0438, G0439, G0463, T1015
Telephone Assessment	98966-98968, 99441-99443	
Online Assessment	98970-98972, 98980, 98981, 99421-99423, 99457, 99458	G0071, G2010, G2012, G2250, G2251, G2252
Remote BP Monitoring	99457	
Telehealth	98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016	

**Exclusion Criteria – Members with any of the following conditions are excluded from the CBP measure:**

- ▶ Members receiving hospice care during the measurement year.
- ▶ Members receiving palliative care during the measurement year.
- ▶ Members 66 to 80 years of age as of Dec. 31, 2025 who were diagnosed with at least two indications of frailty **and** advanced illness, with different dates of service during the measurement year or year prior.
- ▶ Members 81 years of age and older as of Dec. 31, 2025 who were diagnosed with at least two indications of frailty with different dates of service during the measurement year.
- ▶ Members with evidence of end-stage renal disease (ESRD), dialysis, nephrectomy or kidney transplant.
- ▶ Members with a pregnancy diagnosis during the measurement year.
- ▶ Members who die any time during the measurement year.

**Best Practices:**

- ▶ Use the Inovalon® Provider Enablement Quality Gaps Insights to identify members with gaps in care.
- ▶ For patients seen via telehealth, clearly document BP readings reported or taken by the patient or obtained by any remote digital device.
- ▶ Instruct staff to always take a repeat reading if an abnormal BP value is obtained.
- ▶ Encourage the use of proper technique when obtaining BP readings:
  - Ensure the patient's bladder is empty.
  - Do not have a conversation.
  - Support the patient's back and feet.
  - Use the correct cuff size.
  - Place the cuff on the bare arm.
  - Support the arm at heart level.
  - Keep the patient's legs uncrossed.
- ▶ Treat associated cardiovascular risk factors as part of managing hypertension to lower overall cardiovascular risk.
- ▶ Encourage lifestyle changes (improved diet, exercise, smoking cessation, stress reduction).
- ▶ Initiate appropriate pharmacologic treatment to lower blood pressure.
- ▶ Make sure patients receive at least one blood pressure check per year.
- ▶ GCHP's team of nurses, social workers and care management coordinators work together to empower members to exercise their options and access the services appropriate to meet their individual health needs to promote quality outcomes. GCHP Care Management includes complex and non-complex care management that offers transition to adult services, disease specific education, identification of social determinants of health and linkage to appropriate resources in the community.
  - To learn more, please call GCHP's Care Management Team at:
    - » Providers, call: 1-805-437-5777
    - » Members, call: 1-805-437-5656
    - » GCHP website, Care Management: [Click Here](#)
- ▶ GCHP offers free health education services, materials, classes, and online resources to help members achieve a healthy lifestyle. Providers can contact the Health Education Department or refer patients / guardians / caregivers to the following information:
  - Providers, call: 1-805-437-5961
  - Members, call: 1-888-301-1228 / TTY 711
  - GCHP website, Health Education Webpage (resources in English and Spanish): [Click Here](#)

<sup>1</sup>For those measures in which there is an option to choose between the hybrid and administrative reporting methodology, Gold Coast Health Plan has chosen to report using the hybrid methodology. Measures reported using the hybrid data collection method report on a sample of the eligible population (usually 411) and use both administrative and medical record data sources to evaluate if services were performed.