Blood Pressure Management

Coding Specifications

Codes required to document patient has advanced chronic kidney disease (CKD) and a visit occurred:

A ICD-9-CM diagnosis code for advanced CKD and a CPT code are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

Advanced CKD ICD-9-CM diagnosis codes

■ 585.4, 585.5 (CKD, stage iv or v)

AND

CPT codes

- **99201, 99202, 99203, 99204, 99205**
- 99212, 99213, 99214, 99215

Quality codes for this measure:

G-code and CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code or combination of codes.)

- **G8476:** Most recent blood pressure has a systolic measurement of <130 mmHg and a diastolic measurement of <80 mmHg
- **G8477:** Most recent blood pressure has a systolic measurement of ≥130 mmHg and/or a diastolic measurement of ≥80 mmHg
- **G8478:** Blood pressure measurement not performed or documented, reason not specified
- CPT II 0513F: Elevated blood pressure plan of care documented
- *CPT II 0513F-8P*: No documentation of elevated blood pressure plan of care, reason not otherwise specified

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