

Plan of Care

Coding Specifications

Codes required to document patient has Hypertension and a visit occurred:

An ICD-9-CM diagnosis code for Hypertension 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.

Hypertension ICD-9-CM diagnosis codes

- 401.0, 401.1, 401.9, 402.00, 402.01, 402.10, 402.11, 402.90, 402.91, 403.00, 403.01, 403.10, 403.11, 403.90, 403.91, 404.00, 404.01, 404.02, 404.03, 404.10, 404.11, 404.12, 404.13, 404.90, 404.91, 404.92, 404.93

AND

CPT codes

- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215
- 99304, 99305, 99306, 99307, 99308, 99309, 99310
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

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.)

- **G8677:** Most recent systolic blood pressure < 130 mmHg
- **G8678:** Most recent systolic blood pressure 130 to 139 mmHg
- **G8675:** Most recent systolic blood pressure ≥ 140 mmHg
- **G8679:** Most recent diastolic blood pressure < 80 mmHg
- **G8680:** Most recent diastolic blood pressure 80–89 mmHg
- **G8676:** Most recent diastolic blood pressure ≥ 90 mmHg
- **CPT II 4050F:** Hypertension plan of care documented as appropriate
- **CPT II 4050F–8P:** Hypertension plan of care not documented, reason not otherwise specified

Physician Performance Measures (Measures) and related data specifications, developed by the Physician Consortium for Performance Improvement® (the Consortium), are intended to facilitate quality improvement activities by physicians.

These Measures are intended to assist physicians in enhancing quality of care. Measures are designed for use by any physician who manages the care of a patient for a specific condition or for prevention. These performance Measures are not clinical guidelines and do not establish a standard of medical care. The Consortium has not tested its Measures for all potential applications. The Consortium encourages the testing and evaluation of its Measures.

Measures are subject to review and may be revised or rescinded at any time by the Consortium. The Measures may not be altered without the prior written approval of the Consortium. Measures developed by the Consortium, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the Measures require a license agreement between the user and American Medical Association, on behalf of the Consortium. Neither the Consortium nor its members shall be responsible for any use of these Measures.

THE MEASURES ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND

© 2006 American Medical Association. All Rights Reserved

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, the Consortium and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

THE SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

CPT® contained in the Measures specifications is copyright 2010 American Medical Association.

LOINC® copyright 2004 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms® (SNOMED CT®) copyright 2002–2004 College of American Pathologists. All rights reserved.

Physician Quality Reporting System 2011 Measure 235, Effective Date 01/01/2011

© 2006 American Medical Association. All Rights Reserved.

CPT® copyright 2010 American Medical Association