

DOCUMENTATION TIPS

Measure 317: Preventive Care and Screening:

Screening for High Blood Pressure and Follow-Up Documented

Electronic health records (EHRs) collect and organize notes, medication lists, and patient information using various formats. With providers also documenting this information in unique ways, this can potentially cause confusion and an increased timeline for measure mapping with DataDerm. This tip sheet can help you manage reporting requirements for performance measures and streamline standard documentation practices to allow seamless data pull into DataDerm.

The DataDerm team will work with you to connect DataDerm with your EHR to extract data. To make the process as smooth as possible, it helps to document key elements of patient care. DataDerm cannot read scanned images of any kind, including scanned images for labs, letters to physicians, pathology reports, follow-up plans, and dates. If you have scanned images with information needed for your measures, please add a note in your chart with the date and required patient information for this data to be accurately collected.

This tip sheet can assist paper-based practices in standardizing documentation practices. Keeping notes in the patient's paper chart of all documentation requirements will assist you when reporting for this measure.

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For all patients 18 years and older, document the following in your notes:

- The CPT or HCPCS code for the patient encounter during the reporting period
- 90791, 90792, 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99281, 99282, 99283, 99284, 99285, 99215, 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99385, 99386, 99387, 99395, 99396, 99397, D7140, D7210, G0101, G0402, G0438, G0439
- Note in the medical record the patient was screened for high blood pressure (BP)
- If blood pressure is pre-hypertensive or hypertensive, document a follow-up plan. The follow-up plan can include:
 - Pre-Hypertensive BP Reading:
 - Rescreen BP yearly
 - First Hypertensive BP Reading:
 - Rescreen BP every year within a minimum of > 1 day and < 4 weeks
 - Second Hypertensive BP Reading:
 - Follow-up Intervention (must include one or more):
 - Anti-Hypertensive Pharmacologic Therapy
 - Laboratory Tests
 - Electrocardiogram (ECG)

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AND

- Recommend Lifestyle Modifications (must include one or more):
 - Weight Reduction
 - Dietary Approaches to Stop Hypertension (DASH) Eating Plan
 - Dietary Sodium Restriction
 - Increased Physical Activity
 - Moderation in alcohol (ETOH) Consumption

OR

- Referral to Alternative/Primary Care Provider
- If the patient is not eligible for blood pressure screening, note in the medical record if applicable:
 - Patient has an active diagnosis of hypertension (G9744)
- If blood pressure screening or follow-up plan is not provided, document medical or patient reason(s) for not performing the screening or intervention. If applicable, include:
 - Patient refuses to participate (either BP measurement or follow-up)
 - Patient is in an urgent or emergent situation where time is of the essence and to delay treatment would jeopardize the patient's health status.
 - This may include but is not limited to severely elevated BP when immediate medical treatment is indicated

Additional Tips:

- Collect **once per performance period** for patients 18 and older seen during the performance period.
- See measure specifications for additional codes that can assist in seamless measure mapping from your EHR to DataDerm, if applicable (e.g. G8783).
- GQ, GT, 95, and POS 02 telehealth modifiers make cases ineligible.