



NETWORK *Notification*

Notice Date: October 15, 2026
To: Ohio Medicaid and MyCare Providers
From: CareSource® and CareSource® MyCare Ohio (HMO D-SNP)
Subject: Improving Blood Pressure Control Through Accurate Blood Pressure Documentation and CPT II Coding Best Practices

Summary

CareSource and CareSource MyCare Ohio are committed to improving outcomes for members with hypertension, as well as supporting providers in accurately documenting blood pressure readings for quality measurement and care management purposes. Recent provider education efforts have focused on appropriate Current Procedural Terminology (CPT) II coding and evidence-based blood pressure measurement techniques to improve Controlling Blood Pressure (CBP) performance and ensure accurate clinical documentation.

Impact

Accurate blood pressure documentation and submission of appropriate CPT II codes help:

- Improve Healthcare Effectiveness Data and Information Set (HEDIS®) Controlling Blood Pressure (CBP) measure performance.
- Reduce the need for medical record retrieval and chart abstraction.
- Ensure member blood pressure control is accurately reflected in quality reporting.
- Support early identification and management of members with uncontrolled hypertension.

CPT II Coding Reminders

Provider should report the most recent blood pressure reading using CPT II codes for members with hypertension when supported by documentation.

Systolic Blood Pressure

- 3074F: Most recent systolic BP less than 130 mm Hg
- 3075F: Most recent systolic BP 130-139 mm Hg
- 3077F: Most recent systolic BP ≥140 mm Hg

Diastolic Blood Pressure

- 3078F: Most recent diastolic BP less than 80 mm Hg
- 3079F: Most recent diastolic BP 80-89 mm Hg
- 3080F: Most recent diastolic BP ≥90 mm Hg

Providers should ensure both systolic and diastolic blood pressure measurements are documented and coded appropriately.

Blood Pressure Measurement Best Practices

To improve blood pressure accuracy during office visits, we encourage providers to:

- Document blood pressure readings at every appropriate visit.
- Allow members to rest for at least five minutes before obtaining a reading.
- Use the correct cuff size based on the member's arm circumference.
- Avoid rounding blood pressure values.
- Repeat the blood pressure at the end of the visit when the initial reading is $\geq 140/90$ mm Hg.
 - Handing the member a card with a reminder to have their blood pressure rechecked can be a helpful reminder to complete the second reading.
 - Review methods the member can use to reduce their blood pressure during the visit.
- Educate members on medication adherence, lifestyle modification, nutrition, physical activity and the impact of caffeine on blood pressure readings.
- Encourage the use of validated digital blood pressure devices for self-measured blood pressure monitoring.

Importance

Accurate blood pressure measurement and documentation are foundational to appropriate hypertension management. Implementing standardized measurement techniques and CPT II coding practices helps ensure members receive timely interventions while allowing providers to receive proper recognition for delivering quality care. Additionally, provider education on blood pressure measurement and coding has been identified as a key strategy within CareSource and CareSource MyCare Ohio hypertension quality improvement initiatives.

Questions?

For questions regarding quality measures, CPT II coding, or provider education resources, please contact your CareSource and/or CareSource MyCare Ohio Provider Engagement Representative or Provider Services.

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