HTN Identification

i4C Indicator CDM-HTN-001: HTN Identification v 2.1

Category: CDM/Hypertension

Purpose:

This indicator is used to identify patients with Hypertension.

Source:

Not derived from any existing primary care measurement framework; introduced through OntarioMD collaboration with EMR vendors participating in the EMR Physician Dashboard Proof of Concept.

Base Population:

All patients with an Active demographic status recorded in the EMR who have a confirmed HTN diagnosis or who may be considered for HTN diagnosis based on other EMR data.

Indicator Segments:

HTN Coded: Count of patients confirmed with HTN diagnosis through entry of any of the following diagnosis codes within the current diagnosis/problem section of the cumulative patient profile:

Diagnosis Code(s)	Code System	Diagnosis Description
401 or starting with 401	ICD-9	Essential Hypertension
402 or starting with 402	ICD-9	Hypertensive heart disease
403 or starting with 403	ICD-9	Hypertensive chronic kidney disease
404 or starting with 404	ICD-9	Hypertensive heart and chronic kidney disease
405 or starting with 405	ICD-9	Secondary hypertension
I10	ICD-9	Essential (primary) hypertension
1201005	SNOMED-CT	Benign essential hypertension
10725009	SNOMED-CT	Benign hypertension (disorder)
59621000	SNOMED-CT	Essential hypertension (disorder)
38341003	SNOMED-CT	Hypertensive disorder, systemic arterial (disorder)

Consider HTN: Documented as text but not coded: Count of patients without a coded HTN diagnosis but who may be considered for diagnosis based on any of the following text entered in the problem/diagnosis or past medical/surgical history section of the cumulative patient profile:

- 'HTN'
- 'HPT'
- 'Hypertensive'
- 'Hypertension'

Consider HTN: Dx in 2+ bills: Count of patients without a confirmed HTN diagnosis but who may be considered for diagnosis based on two or more bills with an attached diagnosis of 401, 402 or 403.

Consider HTN: Total: Unique count of patients without a confirmed HTN diagnosis but who may be considered for diagnosis based on HTN documented with a text diagnosis or problem, or an HTN Dx in 2+ bills.

HTN Excluded: Count of patients without a without a coded HTN diagnosis AND who are excluded for diagnosis consideration through EMR functionality that allows patients to be manually excluded for consideration.

The functionality for manual exclusion from diagnosis consideration is optional so this indicator segment might not appear across all EMR offerings.

Suggested Indicator Use:

Physician or Practice use of this indicator is to review charts in the consider segments and add the appropriate diagnosis code to the patient chart.

Measurements of Interest:

Physician or practice use of this indicator is to review charts in the "Consider HTN:" segments and add an HTN diagnosis code to the patient chart where an appropriate diagnosis can be confirmed.