

SNAPSHOT OF SUCCESS



NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
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Identifying Clinic Patients with Undiagnosed Hypertension

Public Health Issue

- Controlling blood pressure is a key step for preventing heart attacks, strokes and chronic kidney disease.
- Identifying people who have high blood pressure is the first step in getting their blood pressure controlled.
- There are potentially millions of Americans with uncontrolled high blood pressure who are seen by health professionals every year but remain undiagnosed, according to estimates from the Centers for Disease Control and Prevention.

Program Action

- The Montana Department of Public Health and Human Services (MDPHHS) initiated a project to help patient-centered medical home (PCMH) clinics in the state identify undiagnosed hypertensive patients within their patient populations.
- In the first year, a pilot with a single PCMH demonstrated the feasibility of the project. In year 2, seven PCMHs were funded through an application process to receive \$5,000 for one year. In year 3, another five were funded for a year through an application process focused on PCMHs with a low prevalence of patients with hypertension (< 20%) relative to the national estimate of 29% of adult PCMH patients with a diagnosis of hypertension. This focus on prevalence helps identify clinics that are likely to have a larger pool of unidentified hypertensive patients. Statewide data on Montana PCMHs are available [here](#).
- With partners including Health Technology Services, MDPHHS provides technical assistance on how to apply a hypertension algorithm within the electronic health record (EHR) to identify patients with potentially undiagnosed hypertension. Each clinic constructed a hypertension algorithm specific to their EHR that identifies patients using this definition: patients who had 2 blood pressure (BP) readings >140/90 mmHg without receiving a hypertension diagnosis. All clinics use the same definition.
- Clinics follow up with the identified patients in a number of ways: mail, e-mail, patient portal, direct phone outreach, and other methods patients identified as "preferred" to set up a recheck of their BP. One site used a student nurse to conduct outreach and also trained providers to place information in the correct place in the EHR.
- MDPHHS offers clinics patient education materials and BP measurement cuffs (funded by the Master Settlement Agreement) that clinics can lend to patients for measuring their blood pressure at home, along with guidance on setting up a protocol for the cuff loaner program.

Impact

- MDPHHS receives aggregate data on undiagnosed hypertension from funded PCMH clinics, which helps them meet performance measure B.5.01 for Centers for Disease Control and Prevention (CDC) funding under their 1305 cooperative agreement. Funding additional clinics for similar work will augment this data reporting and help identify more patients with undiagnosed hypertension.
- Of a patient sample of 455 in year two, 100 out of 294 patients who returned for a blood pressure re-check were newly diagnosed with hypertension based on their re-checked BP reading and began treatment.
- In year three, nearly 1000 patients were identified as potentially undiagnosed hypertensives by EHR algorithms. Clinics are currently working on setting up return visits for re-evaluation of these patients.

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