

## Blood Pressure 101 for Healthcare Providers

Produced by the Alabama Department of Public Health  
Distance Learning and Telehealth Division


## Faculty

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### High Blood Pressure the Problem

## 80 Million Adults Have HBP




Blood Pressure Category	Systolic (mmHg)	and	Diastolic (mmHg)
Normal / Ideal	less than 120		less than 80
Prehypertension	120-139	or	80-89
Hypertension stage 1	140-159	or	90-99
Hypertension stage 2	160 or higher	or	100 or higher
Hypertensive crisis	higher than 180	or	higher than 110


**1 IN 3 AMERICANS IS LIVING WITH HBP TODAY**

Prevalence of HPB varies by race and ethnicity:


Whites  
roughly  
1 in 3




Blacks  
roughly  
2 in 5



Latinos  
roughly  
1 in 4



Asians  
roughly  
1 in 5

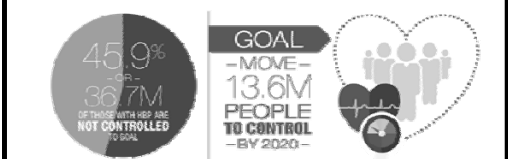


AHA 2015 Statistical Update

## Why Controlling BP is Important


- Morbidity and mortality due to cardiovascular diseases are directly related to BP
- In people with hypertension (HTN) and elevated BP, when BP is lowered there, is less vascular damage to organs (i.e. heart, brain, eyes and kidneys)
- We have known since the 60s and the landmark VA-1 and VA-2 trials that treating high blood pressure with medication reduces risk for heart attacks, strokes and death

## Our Goal for Better Control




**From 2009 to 2012 among US adults with HBP**


**54.1%**  
HBP is controlled




**76.5%**  
are currently treated



**82.7%**  
are aware they have HBP



**17.3%**  
remain undiagnosed



AHA 2015 Statistical Update

### AHA/ACC/CDC HBP Treatment Algorithm

- In November 2013, AHA partnered with the ACC and the CDC to publish a scientific statement recognizing best practices in clinical care that have significantly increased HBP control rates and put forth a customizable algorithm based on these practices



### AHA/ACC/CDC HBP Treatment Algorithm

- In July 2015, AHA began a focused drive to promote and implement the algorithm among healthcare systems and clinics



What is Target: BP?

### What is Target: BP?

✓ A call to action motivating medical practices, practitioners and health services organizations to prioritize blood pressure control



✓ Recognition for healthcare providers who attain high levels of blood pressure control in their patient populations, particularly those who achieve 70, 80 percent or higher control

✓ A source for tools and assets for healthcare providers to use in practice, including the AHA/ACC/CDC Hypertension Treatment Algorithm and the AMA's M.A.P. Checklist

<http://targetbp.org/>

### Who is our Target Audience?

- Primary Care System
  - Federally Qualified Health Clinic (FQHC)
  - Federally Designated Rural Health Clinic (RHC)
  - Indian Health Service practice/clinic
  - Practice/Clinic with mission to serve publicly insured, underinsured, or uninsured



### Who is our Target Audience?

- Private Clinical System (non-FQHC)
- Government Agency or Organization providing care to patients



## Why launch Target: BP now?



SPRINT study results



Increased access to care



Policies incentivize HCP's to better control



AHA 2020 goals are imminent



Support and sync with MH initiatives for higher BP Control

## Why Should a Clinic Participate?

- We know what medicines work but systems aren't in place to drive control rates
- Algorithm and systems approach described in AHA's treatment algorithm are proven to increase control rates within a clinical setting
- Sites will receive recognition from the AHA

## Why Should a Clinic Participate?

- Help meet required performance metrics
- Improved health and care of their patients!

<http://targetbp.org/>

## Target:BP™ Recognition Program

- Overview
  - Recognize clinical practices and health care systems for:
    - Participation in the Target: BP program;
    - Improvement in blood pressure control; and
    - Achievement of a designated blood pressure control rate threshold and sustainability of results

## Target:BP™ Recognition Program

- Accommodate either self-reported aggregate data or patient population data submission and validation, providing flexible options for practices with varying resources
- Provide performance and benchmark data in dashboard
- Offer opportunities for improvement and achievement through adoption and implementation of program tools/resources



M.A.P. Overview


### Barriers to success

- Patient factors
  - Non-adherence
  - Financial
  - Literacy
- Physician factors
  - Time
  - Financial
  - Knowledge of evidence



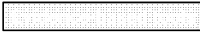
### Barriers to success

- System factors
  - Quality reporting
  - Work flow
  - Leadership (buy-in)



### The M.A.P. Framework

- M** Measure blood pressure accurately
- A** Act rapidly to manage uncontrolled hypertension
- P** Partner with patients, families and communities to promote self-management

Actionable data  Adaptive change