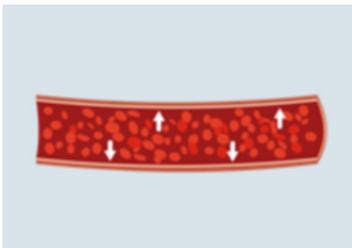


Hypertension Disparities in Medicare Fee-For-Service Beneficiaries



Hypertension, or high blood pressure, is one of the most common diseases in the world. The Centers for Disease Control and Prevention (CDC) report that nearly half (45%) of adults in the United States have hypertension in 2017–2018, and prevalence increased with age; three-quarters of adults aged 60 and over had hypertension.¹ Hypertension is the most important modifiable risk factor for coronary heart disease (the leading cause of death in the US), stroke, congestive heart failure, and end-stage renal disease. The CDC reports that unmanaged hypertension results in nearly 1,300 deaths every day.²

In 2017, 57% of all Medicare fee-for-service (FFS) beneficiaries had a diagnosis of hypertension.³ As shown on Figure 1, there are disparities associated with claims related to hypertension. Black/African American (65%) beneficiaries had the highest prevalence of hypertension among all racial and ethnic groups, followed by Asian/Pacific Islander and White (both at 57%), Hispanic (56%), and American Indian/Alaska Native (54%). The number of Medicare FFS enrollees with hypertension also varied by geographic areas (Figure 2). Alaska, Montana and Wyoming had the lowest prevalence rate (41%) and Alabama, Louisiana and Mississippi had the highest prevalence rate (65%).

Figure 1. Prevalence of Hypertension among Medicare Beneficiaries by Race/Ethnicity, 2017³

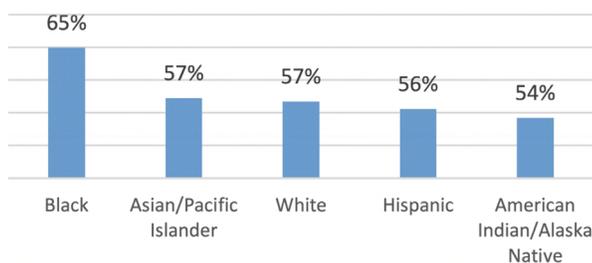


Figure 2. Hypertension Prevalence by States among Medicare FFS Beneficiaries, 2017⁴

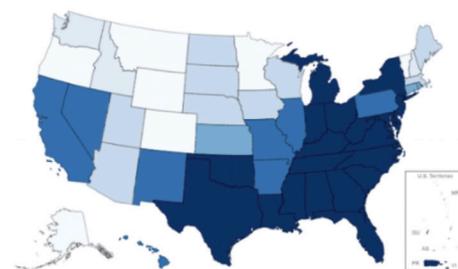
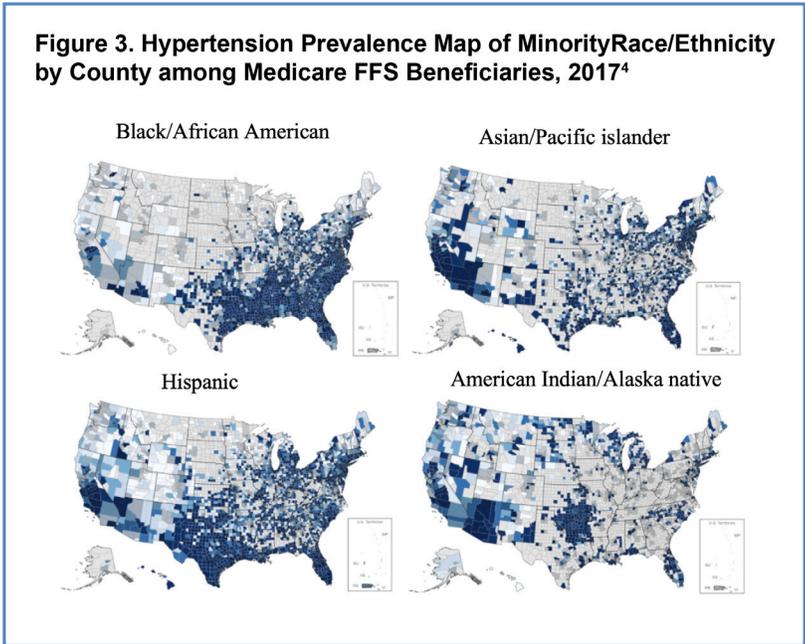


Figure 3 shows geographic differences in hypertension prevalence among minority racial and ethnic groups. Hypertension prevalence for Black/ African American in 2017 was concentrated in the south and up the middle Atlantic. For Asian/ Pacific Islander, the prevalence was more concentrated on the west coast, especially California, as well as small groups throughout the south, northeast, and east north central. Prevalence for Hispanics was in more spread across the country from the west to the south and small groups around east north central and along the east coast. Lastly, prevalence for American Indian/ Alaska Natives was concentrated in the west, throughout California, Nevada, and especially in Arizona and Oklahoma.



Hypertension can be successfully managed with medication to lower blood pressure but there’s only one way to know if you have it: Have your doctor measure it. As part of the Affordable Care Act, Medicare pays for a free annual wellness visit which includes blood pressure screening, yet a claims’ analysis found that fewer than 27% of Medicare beneficiaries took advantage of this benefit in 2017.

Beneficiary Resources

- [Medicare & You: Medicare's Preventive Benefits](#)
- [Medicare & You: High Blood Pressure and Osteoporosis](#)
- [“Welcome to Medicare” preventive visit](#)
- [Yearly “wellness” visits](#)
- [Chronic care management services](#)
- [Million Hearts](#)
- [High Blood Pressure & Kidney Disease](#)

Provider Resources

- [Connected Care: The Chronic Care Management Resource](#)
- [Merit-based Incentive Payment System \(MIPS\)](#)
- [Decision Memo for Ambulatory Blood Pressure Monitoring \(ABPM\) \(CAG-00067R2\)](#)
- [Hypertension Control Change Package for Clinicians](#)
- [Hypertension Resources for Health Professionals](#)
- [Hypertension - American Medical Association](#)

References/Sources

1. Centers for Disease Control and Prevention. Hypertension Among Adults in the United States: National Health and Nutrition Survey, 2017-2018.
<https://www.cdc.gov/nchs/data/databriefs/db364-h.pdf>
2. Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death, 1999-2017. CDC WONDER Online Database. Atlanta, GA: Centers for Disease Control and Prevention; 2018.
3. Centers for Medicare & Medicaid Services. Chronic Conditions.
<http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/index.html>
4. Centers for Medicare & Medicaid Services. Mapping Medicare Disparities Tool.
<https://data.cms.gov/mapping-medicare-disparities>

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