

UNITEDHEALTH GROUP

Hypertension Control Program

A Community Intervention for Hypertension Control Using Health Worker Outreach and Algorithmic Software-driven Blood Pressure Management

Background

Why? For years, hypertension (HTN) has remained under-diagnosed and poorly controlled, especially in Black and brown communities.

Objective: Create more effective control of HTN in specific communities through use of a multi-faceted solution combining blood pressure (BP) and social determinants of health (SDOH) screening by community health workers, a remote software-driven HTN management program driven by navigators under medical supervision, partnership with a local organization, and no cost medication.

Program Process (ول • Twice a day, BP levels Between Apr 2022 - Feb 512 patients with BP Patients received an An initial virtual (with or Patients received a cellularly activated BP cuff for self-measured BP 2023, community health workers screened 1,609 >140/90 consented to without video) with the prescription for blood were received by the join the BP management supervising physician was scheduled. pressure as indicated. A platform controlled by patients for uncontrolled program. SDOH were (SMBP). Blood work to navigator coordinated a navigator. BP and SDOH in obtained for 210 of them. assess kidney function was with pharmacy to • A recommendation predominately Black and ensure patient received obtained for titration or medically under served medications. additional medications community in Detroit. was reviewed by the supervising MD. (Q)PATIENT DEMOGRAPHICS • Median BP was 149/91mmHg, (IQR 144-159/87-98 Average age of enrolled patients was 62±11 years



Program success was evaluated based on the proportion of patients who reached BP targets through HEDIS patient satisfaction surveys.

Program Results

SCREEN/REFER FOR SOCIAL NEEDS

- Of the 1,609 patients screened initially 945 (59%) were found to have uncontrolled BP
- HTN severity on enrollment was:
 - Stage 1: 10%
 - Stage 2: 69%
 - Stage 3: 21%

- 88% of participants achieved HEDIS BP target of <140/90 at <12 weeks
- 46% reached BP of <130/80 at <12 weeks
- >94% of SDOH needs were addressed for those who accepted assistance







KEY LEARNINGS



Screening in a medically underserved community resulted in higher-than-expected rate of uncontrolled BP



Screening revealed a high rate of stage 3 disease of HTN



Program provides proof of concept and should inform future HTN programs