Cardiovascular Disease Prevention and Management

Cardiovascular disease is the leading cause of death in the United States with over 850,000 deaths in 2019. The CDC-funded DP18-1815 cooperative agreement supports all 51 state health departments (including Washington DC) to strengthen prevention and management of cardiovascular disease.

State health departments (recipients) are working with health care systems and community partners to enhance the effective use of health information and clinical quality measures to improve diagnosis and tracking of patients with high blood pressure and high blood cholesterol, institutionalize the use of team-based care approaches to better manage these diagnosed patients, and strengthen community-clinical linkages to connect them with the resources they need to manage their health.

This snapshot reflects cumulative performance measures progress reported by recipients from Baseline (2018) to Year 3 (2021) and outcomes specific to the selected health care systems recipients worked with in Year 3.

Improve diagnosis and monitoring of high blood pressure and high blood cholesterol

DP18-1815 recipients have engaged health care systems to enhance the collection and tracking of standard, evidence-based cardiovascular disease (CVD) clinical quality measures (CQMs) within their electronic health records. Recipients then work with providers to use these measures to identify patients within priority populations with high blood pressure and high blood cholesterol, recommend appropriate interventions, refer them to lifestyle programs, and monitor patients through the care cycle.

Number (percentage) of clinics and health care system sites using standardized CQMs to track differences between priority and overall populations for:

**Blood pressure control**
- (4.7 fold increase from 2018 in systems using CQMs to track blood pressure control)
- 198 (35%)
- 937 (67%)

**Cholesterol management**
- (2.8 fold increase from 2018 in systems using CQMs to track cholesterol management)
- 155 (32%)
- 435 (50%)

Number of patients within health care systems that have systems to report standardized CQMs to identify, manage, and treat patients with hypertension (143% increase in patients from 2018)
- 5,056,315
- 12,285,965
- 9,063,860

Note: Based on recipient reported data from July 1, 2020 to June 30, 2021; the number of recipients reporting differs for each measure. Data represents proportional progress achieved to date with respect to total population each recipient aims to engage by target year 2023.
1,782 pharmacists provide MTM for patients with HBP to promote medication self-management and lifestyle modification, an increase of 29 pharmacists (1.6%) from 2018.

1,695 pharmacists provide MTM for patients with HBC to promote medication self-management and lifestyle modification, an increase of 3 pharmacists (.2%) from 2018.

10,796 Community Health Workers (CHWs) are covered under state efforts to expand CHW curricula and training delivery vehicles, CHW certification systems, and/or CHW payment mechanisms, an increase of 5,405 (100%) from 2018.

These efforts have ultimately reduced cardiovascular disease risks among adults with known high blood pressure and high blood cholesterol.

- 67% of adults with known high blood pressure have achieved blood pressure control (7% improvement from 2018).
- 61% of patients considered at high-risk of cardiovascular events have their cholesterol managed with statin therapy (22% improvement from 2018).
- 67% of patients with a diagnosis of hyperlipidemia who have been prescribed a lipid lowering therapy (29% improvement from 2018).

Note: Based on recipient reported data from July 1, 2020 to June 30, 2021; the number of recipients reporting differs for each measure. Data represents proportional progress achieved to date with respect to total population each recipient aims to engage by target year 2023.

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