The Surgeon General's Call to Action to Control Hypertension







Employers and Health Plan Purchasers





High blood pressure control is possible.

Nearly 1 in 2 adults has high blood pressure (also known as hypertension). This common condition puts people at higher risk of heart disease and stroke, which are two of the leading causes of death, disability, and health care costs.

Millions of people who have high blood pressure do not have it under control. Control is possible, but little progress has been made in the past 10 years. Some population groups also have higher rates of disease and death associated with high blood pressure, which creates health disparities across communities, and programs and interventions likely require tailoring to increase effectiveness.

We know that high blood pressure can be controlled to reduce health risks. Many different groups will need to come together to support the use of proven strategies in every community and for every population group. High blood pressure control must be a national priority.

How You Can Help

In the United States, more than 150 million full-time workers spend more than one-third of their day, 5 days a week, at their workplace or working remotely. For employers and individuals who purchase health plans, there are short-term costs associated with treatments and interventions designed to improve high blood pressure control. Examples include antihypertensive medications, home blood pressure monitors, and approved lifestyle programs.

But over time, these treatments and interventions reduce the risk and costs associated with adverse cardiovascular outcomes. These costs include hospitalization for a heart attack, stroke, or heart failure, as well as care services related to cardiac rehabilitation or management of end-stage kidney disease. They also include costs associated with employees who are less productive or miss work because of illness.

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Actions You Can Take

- Select health plans that reduce or eliminate out-of-pocket costs for antihypertensive medications, especially in forms that encourage medication adherence. Examples of these forms include longer-duration prescriptions (90 vs. 30 days), fixed-dose combination pills, and lower dosing frequency (one time a day).
- Select health plans that provide coverage for automated home blood pressure monitors and reimburse clinicians to train patients to use these monitors and interpret the readings submitted by patients.
- Provide environmental supports to help people be more physically active at the worksite. Examples include free onsite exercise facilities, subsidized or discounted offsite exercise facilities, walking trails, bicycle racks, and signs that encourage activity.
- Provide organized individual or group physical activity programs, such as walking or weight training classes. Allow employees time to participate during the workday.
- Provide virtual programs for physical activity or nutrition education that can be accessed remotely.
- Provide a variety of healthy food and drink options in vending machines and cafeterias in the workplace. Encourage healthier choices through pricing, price incentives, marketing, and education.
- Serve as hypertension control champions in your local community. Join community coalitions that promote healthy lifestyle opportunities and clinical enhancements to improve high blood pressure control.

Selected Resources

Centers for Disease Control and Prevention:

- Physical Activity Breaks for the Workplace Resource Guide
- Tips for Offering Healthier Options and Physical Activity at Workplace Meetings and Events
- 6|18 Initiative: Accelerating Evidence into Practice, Control High Blood Pressure
- Worksite Health ScoreCard Manual

Million Hearts®: Cardiovascular Health: Action Steps for Employers

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