



Quarterly November 2020 Summary of Activities for WV BMS' RetroDUR Committee by the Marshall Coalition



### Warning Letters to Patients and Providers

### <u>September</u>

2 – Members

3 – Providers

5

#### <u>October</u>

7 – Members

10 - Providers

17

#### **November**

No data

### LOCK-IN LETTERS

<u>September</u>

1- Member

1- Provider

2

<u>October</u>

0

**November** 

No data

### **Clinical Intervention Letters**

CLINICAL INTERVENTION	September	October
Rx of opioid and Benzodiazepine	66	32
Dx of GERD w/PPI Therapy >60 days	69	40
Dx of DM w/o ACE or ARB	40	
Dx of ASCVD w/o Statin	29	
Dx of CHF w/NSAIDS	23	12
Dx of H. Pylori w/PPI Therapy >14 days	5	3
Dx of HFrEF w/Diltiazem or Verapamil	1	1
Dx of CHF w/TZDs	1	1
TOTALS	234	89

- ${f 1.}$  "Chronic GERD dx with uncontrolled SPPi. EGD in near future."
- 2. "Medical Practice was closed March 30, 2020. Retired."
- 3. "Never a patient of mine, follows with my colleague Dr. \*\*\*\*\*"
- 4. "Will reduce hydrocodone."
- 5. "Patient is symptomatic with acid reflux and abdominal pain when off PPI."
- "To discuss GERD at upcoming appointment."
- 7. "I saw this patient for a colleague in our practice."
- 8. "I have discussed this at length with the patient. She understands the risks versus benefits. She is reluctant to change D/T multiple co morbidities, her s/s are improved with the use of the meds. I will discuss with her again at next visit."
- 9. "This patient is deceased."
- 10. "Patient had dental extractions and got one narcotic from us and then developed dry socket and got one more prescription."
- 11. Gastritis/GERD not responsive to H2 blockers alone. PPI controls symptoms. Symptoms return when weaned from PPI."
- 12. "NSAID has not been filled since 8/2020."
- 13. "She doesn't have any current NSAID medications prescriber on her record."
- 14. "Please add any suggestions that you may have which treat chronic arthritic pain without narcotic use that is covered by insurance."
- 15. "NSAID has not been filled since 8/2020"
- 16. "Chronic GERD, failed management."

## September – October Provider Comments

# SEPTEMBER CLINICAL INTERVENTION LETTER PROVIDER FEEDBACK

Month Received	Clinical Intervention	# of Letters sent per intervention	Useful	Made Changes	No Changes	No longer a patient	Never was a patient	Notice not Useful	Total Faxes Received
September 2020	Rx of opioid and Benzodiazepine	66	2		2			1	5
	Dx of GERD w/PPI Therapy >6o Days	69	1		1			1	3
	Dx of CHF w/NSAIDS	23	1			1			2
	Dx of H. Pylori s/PPI Therapy >14 day	5	1		2				2
	TOTALS	163	5		5	1		2	12

# OCTOBER CLINICAL INTERVENTION LETTER PROVIDER FEEDBACK

Month Received	Clinical Intervention	# of Letters sent per intervention	Useful	Made Changes	No Changes	No longer a patient	Never was a patient	Notice not Useful	Total Faxes Received
October 2020	Rx of opioid and Benzodiazepine	32	5	1	3	1	3		11
	Dx of GERD w/PPI Therapy >6o days	40	1		6				4
	Dx of CHF w/NSAIDS	12	8	1	3				7
	Dx of H. Pylori w/PPI Therapy >14 days	3					1		1
	TOTALS	8 <sub>7</sub>	14	2	12	1	4		23

## September – November 2020

Prescriber Calls

0

**Patient Calls** 

<u>13</u>

**TOTAL CALLS** 

13

# DUR HOTLINE CALLS RECEIVED

Returned
Letters
Incorrect
Provider
Addresses

Month Letter Returned	Nurse Prac/PA	MD/DO
SEPTEMBER	3	1
OCTOBER	<u>11</u>	14
TOTALS	14	15
	Returned Letters	29