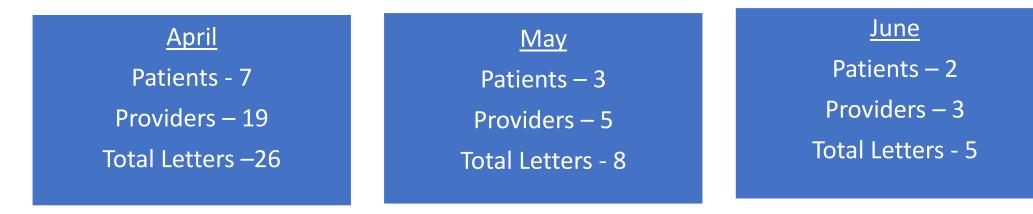




2nd Quarter Summary of Activities for WV BMS' RetroDUR Committee by the Marshall Coalition September 2022



Lock-In Warning Letters sent to Patients and Providers



LOCK-IN LETTERS MAILED



April			
0			
May			
0			
June			
0			

CLINICAL INTERVENTION LETTERS MAILED	APR	MAY	JUN
Rx of opioid and Benzodiazepine	43	60	88
Dx of GERD w/PPI Therapy >90 days	55	49	33
Dx of DM w/o ACE or ARB	6	7	7
Dx of ASCVD w/o Statin	6	3	4
Rx of GLP-1 Agonist and DPP-4 inhibitor	0	0	0
Dx of CHF w/NSAIDS	13	13	14
Dx of CHF w/Select Drugs	0	2	0
Dx of H. Pylori w/PPI Therapy >14 days	4	0	0
Dx of HFrEF w/Diltiazem or Verapamil	2	1	3
Dx of CHF w/TZDs	0	0	0
Dx of Diabetes and HFrEF w/o SGLT2 Inhibitor	3	9	4
Dx of CHF w/ Dronedarone	0	0	0
MME >=50 w/o Naloxone	45	54	40
Diabetes and Heart Failure w/o Statin	7	2	13
Hepatitis C Dx w/o Treatment	18	17	16
TOTALS	204	219	223

April Clinical Intervention Feedback

CLINICAL INTERVENTION	USEFUL	MADE CHANGES	NO CHANGES	NO LONGER A PATIENT	NEVER WAS A PATIENT	NOTICE NOT USEFUL	TOTAL FAXES RECEIVED
Rx of Opioid and Benzodiazepine	5		7	1			13
Dx of GERD w/PPI Therapy >90 days	3		6			1	8
Dx of DM w/o ACE or ARB							
Dx of ASCVD w/o Statin							
Rx of GLP-1 Agonist and DPP-4 Inhibitor							
Dx of CHF w/NSAIDS	2			1			2
Dx of CHF w/Select Drugs							
Dx of H. Pylori w/PPI Therapy>14 days			1				1
Dx of HFrEF w/Diltiazem or Verapamil							
Dx of CHF w/TZDs							
Dx of Diabetes and HFrEF w/o SGLT2 Inhibitor	1						1
Dx of CHF w/ Dronedarone							
MME >=50 w/o Naloxone	7	3	2				11
Diabetes w/o Statin			2				2
Warning	2		1	1			3
Totals	20	3	19	3		1	41

May Clinical Intervention Feedback

					NEVER		
		MADE	NO	NO LONGER			TOTAL FAXES
CLINICAL INTERVENTION	USEFUL	CHANGES	CHANGES	A PATIENT	PATIENT	USEFUL	RECEIVED
Rx of Opioid and Benzodiazepine	4		2			1	5
Dx of GERD w/PPI Therapy >90 days	3		2		1		6
Dx of DM w/o ACE or ARB							
Dx of ASCVD w/o Statin							
Rx of GLP-1 Agonist and DPP-4 Inhibitor							
Dx of CHF w/NSAIDS	2		1				2
Dx of CHF w/Select Drugs							
Dx of H. Pylori w/PPI Therapy>14 days							
Dx of HFrEF w/Diltiazem or Verapamil							
Dx of CHF w/TZDs							
Dx of Diabetes and HFrEF w/o SGLT2							
Inhibitor							
Dx of CHF w/ Dronedarone							
MME >=50 w/o Naloxone	4		1			1	5
Diabetes w/o Statin							
Warning	1						1
HEP C Fax received	1		6				1
TOTALS	15		12		1	2	20

June Clinical Intervention Feedback

		MADE	NO	NO LONGER	NEVER WAS A	NOTICE NOT	TOTAL FAXES
CLINICAL INTERVENTION	USEFUL	CHANGES	CHANGES	A PATIENT	PATIENT	USEFUL	RECEIVED
Rx of Opioid and Benzodiazepine	2	3	4	1		2	9
Dx of GERD w/PPI Therapy >90 days		0					
Dx of DM w/o ACE or ARB		0					
Dx of ASCVD w/o Statin		0					
Rx of GLP-1 Agonist and DPP-4 Inhibitor		0					
Dx of CHF w/NSAIDS	1	1					1
Dx of CHF w/Select Drugs		0					
Dx of H. Pylori w/PPI Therapy>14 days		0					
Dx of HFrEF w/Diltiazem or Verapamil		0					
Dx of CHF w/TZDs		0					
Dx of Diabetes and HFrEF w/o SGLT2 Inhibitor		0					
Dx of CHF w/ Dronedarone		0					
MME >=50 w/o Naloxone	3	3	1				3
Diabetes w/o Statin		0					
Warning		0	1				1
HEP C Fax received	2	2		1			3
		0					
TOTALS	8	9	6	2		2	17

Provider Comments



Will assess and discuss at future visit.

Severe esophagitis on EGD 12/21

This patient was prescribed Naloxone in 2020 and got from Walgreens. She has naloxone and has never needed to use it.

Naloxone prescribed for patient previously, but I will prescribe it again.

Hepatitis C Dx w/o Treatment - Each patient failed to show up to follow-up

Saw patient in MFM for pregnancy. She cancelled her second PPV visit with us.

Patient has not been seen in a long time and was immediately sent to the ER.

The patient is not consistent with appointments and labs at this time. I am continuing to evaluate the patient for treatment.

Patient dosage was changed to oxycodone 10 mg. Patient can not take Tylenol. Patient changed to Bypass pharmacy and did not like it so he changed to Beckley Pharmacy with a change of pharmacy consent form.

HEPC - each patient did not show up to follow-up

Naloxone is available in patients home and spouse has been trained to use it.

Thanks, but patient has rotator cuff issues but can't have surgery due to recent dx of primary lung cancer. He is in major pain and anxiety.

The patient has adenocarcinoma of the salivary gland.

Provider Comments

Both patients have been on 2 medications for a long time and didn't have any adverse effects.

My patient was treated for HEPC C with Epclusa x 12 weeks.

This patient is being tapered from oxycodone-acetaminophen.

Will assess and discuss at future visit.

Severe esophagitis on EGD 12/21

This patient was prescribed Naloxone.

This Hep C patient failed to show at follow-up

Saw patient in MFM for pregnancy. She cancelled her second PPV visit with us.

The patient has not been consistent with appointments and labs at this time.

Patient dosage was changed to oxycodone 10 mg.

Patient did not show up for HEPC followup.

Naloxone is available in patients home and spouse has been trained to use it.

This patient has been on 2 medications for a long time and didn't have adverse effects.

My patient was treated for HEPC with Epclusa x 12 weeks.

This patient is no longer under my care.

Provider Comments



Opioid and Benzo - Thank you for doing this! Although I didn't make any changes today, I made a note to discuss with her regarding her Pain RX from ED and use of prescribed benzos.

He got 10 oxy in May x 1. Are we no longer allowed to treat panic and acute pain?

O &B Thank you!

ASCVD w/o Statin- patient is on Atorvastatin 20 mg daily

MME>50 w/o naloxone - patient a nursing home resident under close nursing care.

O & B Patient stable on current regimen

O&B Patient has terminal cancer

Hep C Patient showed self resolution from lab work collected 3-22-22

O&B as always, I evaluate and treat patients with their best interest in mind. I am aware of all meds and issues the patient has. This is time consuming and has little value, but I understand the issue.

Opioid and Benzo Patient has had trouble getting Fentanyl patch from her pharmacy and her pharmacy has sent her to other ones to fill.

HEP C - although HCV antibody was positive, his viral load was not detected meaning he has cleared the virus.

RETURNED LETTER COUNT

APRIL	7	3.43%
MAY	45	20.5%
JUNE	27	12.1%
TOTAL	79	12.2%



DUR HOTLINE CALLS RECEIVED

April – June CALLS	
PHARMACISTS	9
PRESCRIBERS	0
PATIENT CALLS	25
TOTAL CALLS	34

REVIEW COUNTS TOTAL PATIENTS

APR-JUN	Reviews	Letters	Lockin	Reviews	Letters	Lockin	Reviews	Letters	Lockin	TOTAL
	41	37		50	42	0	75	50	0	295
	37	28					3	0		68
	54	45		56	51	0	56	43		305
	44	33	0	52	44	0	64	60	0	297
	54	42	0	52	46	0	79	63	0	336
	53	43								96
	44	30		57	50		1	0		182
	50	39		49	40	0	68	52		298
Grand Total	377	297	0	316	273	0	346	268	0	1877

Clinical Intervention Reviews

	APRIL			ΜΑΥ			JUNE			
	Reviews	Letters	Lockins	Reviews	Letters	Lockins	Reviews	Letters	Lockins	TOTAL
Dx of AFib & Stage 4+ CKD w/Sotalol	1	. 1								2
Dx of ASCVD w/o Statin	16	5 7		15	10		11	6		65
Dx of CHF w/Dronedarone	1	. 1		1	1					4
Dx of CHF w/NSAIDS	24	19		16	13		14	12		98
Dx of CHF w/TZDs	4	4		3	2		2	2		17
DX of Diabetes w/o Statin	13	12		13	13		20	19		90
Dx of DM w/o ACE or ARB	10) 10		11	9		14	12		66
Dx of GERD w/PPI Therapy >90 Days	63	53		48	47		59	41		311
Dx of H.Pylori w/PPI Therapy >14 Days	1	. 1		5	4					11
Dx of HEPC w/o Treatment	73	5 71		66	66		70	57		403
Dx of HFrEF w/Diltiazem or Verapamil	2	2 2		3	1		2	1		11
Dx of HFrEF w/o SGLT2 Inhibitor	14	14		18	18		18	17		99
MME >=50 w/o Naloxone RX	78	3 77		54	51		66	58		384
Rx of Opioid & Benzodiazepine	75	5 25		53	31		66	40		290
Lockin	2	0	C) 10	7	C) 4	3	0	26
Grand Total	377	297	C) 316	273	C	346	268	0	1877

2022 2nd QUARTER Newsletter

Posted on BMS Website





