

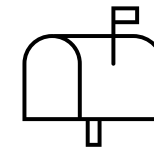


SCHOOL OF PHARMACY

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



MAY CLINICAL INTERVENTION LETTERS



TOTAL 148



MAY COMMUNITY EDUCATION
(Population Health Initiatives)

OPIOID+BENZO+GABAPENTINOID

- Intervention: Identification of Medicaid patients who were concurrently prescribed opioids, benzodiazepines and gabapentin or pregabalin.
- The primary concern is the additive respiratory depressive effects.

128 LETTERS SENT

GINIA
ment of
Health & Human
Resources
AU FOR
ICAL SERVICES

M
MARSH
M
SCHOOL OF PH

May Community Letter Provider Comments



1. "Patient deceased!"
2. "I will discuss this with patient at next visit."
3. "Discussed with patient. She has been taking both medications for a long time and has not experienced any adverse interactions of the medication."
4. "Patient is aware of risk and benefit."
5. "Patient only on benzodiazepines briefly due to acute anxiety and grief reaction due to losing spouse. She is no longer taking them and is managed on SNRI."
6. "Patient has taken methadone and lorazepam for many years. Her doses are slowly being weaned. She is in the process of establishing care with a psychiatrist. She has reduced her doses by more than 50%."
7. "Patient currently NOT on a PPI."
8. "I prescribed this patient Voltaren gel which has decreased systemic absorptions due to potential toxicities."

Community Opioid+Benzo+Gabapentinoid Fax Feedback

Month Received	# of Individual faxes Received	Useful	Made Changes	No Changes	No longer a patient	Never was a patient	Notice not Useful
May, 2020	9	4	1	2	0	0	2

WARNING AND LOCK-IN LETTERS

MONTH	WARNING	LOCK-IN
MAY	0	3
JUNE	1	0
JULY	0	0
AUGUST	0	0



JUNE CLINICAL INTERVENTION LETTERS

- DX of CHF w NSAIDS 2
- Dx of HFrEF w/Diltiazem or Verapamil 1
- DX of CHF w TZDs 2
- DX of GERD w PPI Therapy > 60 Days 23
- Rx of Opioid and Benzodiazepine 53

TOTAL 81



JULY CLINICAL INTERVENTION LETTERS

▶ Rx of Opioid and Benzodiazepine	1
▶ Dx of GERD w/PPI Therapy > 60 Days	30
▶ Dx of CHF w/NSAIDs	14
▶ Dx of CHF w/Select Drugs	5
▶ Dx of H. Pylori w/PPI Therapy >14 days	4
▶ Dx of CHF w/TZDs	<u>3</u>
▶ TOTAL	57

AUGUST CLINICAL INTERVENTION LETTERS



▶ Rx of Opioid and Benzodiazepine	97
▶ Dx of GERD w/PPI Therapy >60 days	52
▶ Dx of CHF w/NSAIDS	44
▶ Dx of H. Pylori w/PPI Therapy > 14 days	9
▶ Dx of HFREF w/Select Drugs	4
▶ Dx of CHF w/Dronedarone	<u>2</u>
▶ Total	208

Fax Clinical Intervention Feedback Form Data



Month Received	# of Individual faxes	Found notice Useful	Reviewed the patient and made pharmacotherapy changes	Reviewed patient, but, for medical or other reasons, no pharmacotherapy changes were made	This individual is no longer a patient	This individual was never a patient of mine	I did not find this notice useful
May	7	2		3	2		
June	3	1		2			
July	11	6		3	1		1
August	17	6	2	6	1		2
September	8	4		3			1
TOTALS	46	19	2	17	4		4
		21/46 = 45% useful					

MAY 15-SEPTEMBER 15



Prescriber Calls	2
Patient Calls	<u>21</u>
TOTAL CALLS	23

DUR HOTLINE CALLS RECEIVED

RETURNED LETTERS



**RETURN
TO SENDER**

gg59095348 GoGraph.com

Returned Letter Month	Nurse Prac/PA	MD/Do
May	0	1
June	9	17
July	2	5
August	10	10
September	0	0
TOTALS	21	33

PROVIDER COMMENTS CLINICAL INTERVENTION



1. "Patient deceased!"
2. "I will discuss this with patient at next visit."
3. "Discussed with patient. She has been taking both medications for a long time and has not experienced any adverse interactions of the medication."
4. "Patient is aware of risk and benefit."
5. "Patient only on benzodiazepines briefly due to acute anxiety and grief reaction due to losing spouse. She is no longer taking them and is managed on SNRI."
6. "Patient has taken methadone and lorazepam for many years. Her doses are slowly being weaned. She is in the process of establishing care with a psychiatrist. She has reduced her doses by more than 50%."
7. "Patient currently NOT on a PPI."
8. "I prescribed this patient Voltaren gel which has decreased systemic absorptions due to potential toxicities."
9. "Thanks. I will closely monitor this patient."

Estimated Cost Savings

The WVBMS-Marshall DUR Coalition partnership reviewed 4503 members: 2308 and 2195 for the Clinical and Lock-In Programs, respectively. Of the Clinical members reviewed, 58% (1335) received an intervention (letter). For the Lock-In Program, 36% (798) of those reviewed received a “warning letter” and 2% (48) were locked-in. Table 1.

Table 1. Marshall DUR Coalition Measures of Frequency						
Program	Metrics	Reviewed	Letters	Letter Rate	Lock-in	Lock-in Rate
Clinical	Prescription of GLP-1 Agonist & DPP-4 inhibitor	105	44	42%		
	Diagnosis of HFrEF w/Diltiazem or Verapamil	10	8	80%		
	Diagnosis of CONGESTIVE HEART FAILURE w/NSAIDS	98	44	45%		
	Diagnosis of H. Pylori w/PPI Therapy >14 Days	39	17	44%		
	Diagnosis of CONGESTIVE HEART FAILURE w/TZDs	5	5	100%		
	Diagnosis of DM w/o ACE or ARB	161	88	55%		
	Diagnosis of ASCVD w/o Statin	158	26	16%		
	Diagnosis of CONGESTIVE HEART FAILURE w/Select Drugs	53	31	58%		
	Diagnosis of GERD w/PPI Therapy >60 Days	286	156	55%		
	Prescription of Opioid & Benzodiazepine	1387	911	66%		
	Diagnosis of HFrEF w/Select Drugs	4	3	75%		
	Diagnosis of CONGESTIVE HEART FAILURE w/Dronedarone	2	2	100%		
	Total		2308	1335	58%	
Lock-In	Lock-In Program	2195	798	36%	48	2%

The Marshall DUR Coalition overall saw a 78% reduction in patients being admitted or visiting the ED, a 71% reduction in claims, and a 64% reduction in charges between the pre-post intervention periods. *Table 2.*

Table 2.	Marshall DUR Coalition Pre-Post Intervention Measures			
	Intervention Period		Change (Amt)	Change (%)
	Pre	Post		
Patients	37	8	-29	-78%
Claims	59	17	-42	-71%
Financial Est.	\$284,260	\$102,586	-\$181,673	-64%

Table 2.	RDUR Pre-Post Intervention Measures				For related ed visits/admissions.
	Intervention Period		Change (Amt)	Change (%)	
	Pre	Post			
Patients	37	8	-29	-78%	
Claims	59	17	-42	-71%	
Financial Est.	\$284,260	\$102,586	-\$181,673	-64%	
Table 3.	RDUR Clinical Program Pre-Post Intervention Measures				
	Intervention Period		Change (Amt)	Change (%)	Annual Estimate
	Pre	Post			
Patients	29	5	-24	-83%	
Claims	45	10	-35	-78%	
Financial Est.	\$203,633	\$78,469	-\$125,164	-61%	-\$500,658
Table 4.	RDUR Lock-In Program Pre-Post Intervention Measures				
	Intervention Period		Change (Amt)	Change (%)	Annual Estimate
	Pre	Post			
Patients	8	3	-5	-63%	
Claims	14	7	-7	-50%	
Financial Est.	\$80,626	\$24,117	-\$56,509	-70%	-\$226,036

Program	Period		Change (Amt)	Change (%)
	Pre	Post		
Patients				
Dx of Abuse in last year	15	1	-14	-93%
Dx of CHF w/NSAIDS	4	0	-4	-100%
Dx of CHF w/Select Drugs	3	2	-1	-33%
Dx of CHF w/TZDs	1		-1	-100%
<i>Dx of Dependence in last year</i>	<i>1</i>	<i>2</i>	<i>1</i>	<i>100%</i>
Dx of DM w/o ACE or ARB	1		-1	-100%
Dx of GERD w/PPI Therapy >60 Days	2		-2	-100%
Rx of Opioid & Benzodiazepine	2		-2	-100%
Lock-In Program	8	3	-5	-63%
Claims				
Dx of Abuse in last year	24	1	-23	-96%
Dx of CHF w/NSAIDS	8	1	-7	-88%
Dx of CHF w/Select Drugs	6	5	-1	-17%
Dx of CHF w/TZDs	1		-1	-100%
<i>Dx of Dependence in last year</i>	<i>1</i>	<i>3</i>	<i>2</i>	<i>200%</i>
Dx of DM w/o ACE or ARB	1		-1	-100%
Dx of GERD w/PPI Therapy >60 Days	2		-2	-100%
Rx of Opioid & Benzodiazepine	2		-2	-100%
Lock-In Program	14	7	-7	-50%
Financial Est.				
Dx of Abuse in last year	\$43,402	\$5,144	-\$38,259	-88%
Dx of CHF w/NSAIDS	\$87,939	\$180	-\$87,759	-100%
<i>Dx of CHF w/Select Drugs</i>	<i>\$27,781</i>	<i>\$47,969</i>	<i>\$20,189</i>	<i>73%</i>
Dx of CHF w/TZDs	\$8,203		-\$8,203	-100%
<i>Dx of Dependence in last year</i>	<i>\$141</i>	<i>\$25,176</i>	<i>\$25,035</i>	<i>17730%</i>
Dx of DM w/o ACE or ARB	\$5,534		-\$5,534	-100%
Dx of GERD w/PPI Therapy >60 Days	\$29,616		-\$29,616	-100%
Rx of Opioid & Benzodiazepine	\$1,017		-\$1,017	-100%
Lock-In Program	\$80,626	\$24,117	-\$56,509	-70%

September Community Education Letters (Population Health Initiatives)

- ▶ Intervention: Patients concurrently prescribed opioids and antipsychotics as defined in the National Target Support Act.

- ▶ 158 Letters

