Retrospective Drug Utilization Review Program

Retrospective Drug Utilization Review (rDUR) occurs after the prescription has been dispensed. It is a program that evaluates a members' drug history to identify prescribing issues. Alerts are sent by mail or fax to physicians, addressing prescribing practices and uses that are unsafe, ineffective, or otherwise inconsistent with evidence-based standards of care. rDUR complements the Concurrent DUR (cDUR) program by identifying physicians who for some reason may be resistant to the messages generated by concurrent monitoring. rDUR is a safety management strategy. The program's goals are to make the use of prescription drugs safer for PharmPiX clients' members and improve the quality of care by providing this information to the prescriber. The rDUR program intervenes on high-risk related problems and notifies physicians of safety risks identified through the review and provides recommendations for management.

The rDUR program retrospectively identifies opportunities to enhance compliance with clinical practice guidelines and evaluate cost-reduction opportunities. Many patients are receiving complex medication regimens and also receiving medications from different physicians. These regimens include various medications with different dosing schedules and instructions. This increases the potential for therapeutic duplication and drug interactions. Making those medications regimens simpler, pharmacy costs can decrease and quality of life improves. Patient computerized records are screened to determine whether the drug therapy met approved criteria. Issues addressed by rDUR are, but not limited to the following:

A. Drug-Drug Interactions: Identify patients who are receiving two or more drugs that when taken together can cause undesirable effects.

B. Over Utilization: Identify patients who receive drugs at excessive dosage levels or for inappropriately extend periods of time.

C. Polypharmacy: Identifies patients who take more than 10 prescriptions per month.

D. Under Utilization: Identifies patients who may be non-compliant with their maintenance medications.

E. Drug-Pregnancy: Identifies patients who may be at risk of teratogenic effects or pregnancy complications from the use of certain drugs. Women who may be pregnant based on drug makers and are on pregnancy category medications D or X.

F. Addictive Substance: Identify patients receiving a large number of prescriptions for controlled substances or receiving a large daily dose of a controlled substance. Patients receiving medication for either cancer or HIV are excluded.

G. Duplicate Therapy: Identify patients who have two or more current prescriptions for medications within one of the targeted therapy classes.

H. Long-Term Hypnotic: Identify patients who have received a large cumulative day supply for hypnotic medication.

PharmPix provides a great of flexibility with program design to meet clients need.