

Health Guide

Considerations to help your patients improve their health

PORTIA BRONSON

DOB: 06-16-1983

Member ID#: 80769783502

Plan: Blue Cross and Blue Shield of Alabama

Prepared for LINDSEY BARTON

A recent review of pharmacy claims has identified the following drug therapy opportunities for your patient.



Bottom line: Non-adherent to antihypertensive medication

Action requested: Evaluate drug refill patterns

The Adherence hypertension program identifies patients whose proportion of days covered (PDC) is less than 80%. This patient's PDC is 61% over the previous 365 days. Common reasons for non-adherence may include: side effects, affordability, or changes in the drug regimen. Please provide a new prescription if the regimen has changed, and/or discuss the importance of adherence and ways to address barriers with your patient.

Medication History: For a complete listing of the pharmacy claims associated with this drug therapy opportunity, please see Drug Therapy Opportunity **Adh HTN** on the Supplemental Information page(s).



Bottom line: Non-adherent to diabetes medication

Action requested: Evaluate drug refill patterns

The Adherence diabetes program identifies patients whose proportion of days covered (PDC) is less than 80%. This patient's PDC is 77% over the previous 365 days. Common reasons for non-adherence may include: side effects, affordability, or changes in the drug regimen. Please provide a new prescription if the regimen has changed, and/or discuss the importance of adherence and ways to address barriers with your patient.

Medication History: For a complete listing of the pharmacy claims associated with this drug therapy opportunity, please see Drug Therapy Opportunity **Adh DM** on the Supplemental Information page(s).

12/15/22
L. Barton, CLH

Due to the potential for claim submission errors, please validate the above information. This information is not intended to replace your clinical judgment and is being provided to you for purposes of quality, care coordination, and other health care operations as permitted by the Health Insurance Portability and Accountability Act (HIPAA). Only a physician in direct consultation with the patient may determine whether or not to pursue potential drug therapy opportunities. If you have received a profile for a patient for whom you are not the prescriber and/or have not provided care, please complete the form found on the back of this letter and fax with a copy of this letter to 1-877-869-8127. Please shred or otherwise destroy this document to protect patient confidentiality.

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Supplemental Information

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This supplement is provided for drug therapy opportunities involving multiple prescribers or prescriptions. This document provides a more detailed view of medications that have been dispensed to the patient.

The chart below identifies the pharmacy claims submitted for your patient during a recent review. It is current as of **11-16-2022**.

Drug Therapy Opportunity	Date Filled	Drug Name/ Strength	Quantity	Days Supply	Pharmacy Name/Phone	Prescriber of Record Name/Phone
Adh DM	10-06-2022	TRULICITY INJ 3/0.5	6.0	84	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	09-28-2022	GLIPIZIDE ER TAB 5MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	MARANDA FAIN 334-244-3281
Adh DM	09-28-2022	METFORMIN TAB 500MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	09-03-2022	GLIPIZIDE ER TAB 5MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	MARANDA FAIN 334-244-3281
Adh HTN	09-03-2022	LISINOPRIL TAB 20MG	90.0	90	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	09-03-2022	METFORMIN TAB 500MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	07-19-2022	METFORMIN TAB 500MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	06-15-2022	GLIPIZIDE ER TAB 5MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	MARANDA FAIN 334-244-3281
Adh HTN	06-15-2022	LISINOPRIL TAB 20MG	90.0	90	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	06-15-2022	TRULICITY INJ 3/0.5	6.0	84	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	03-08-2022	GLIPIZIDE ER TAB 2.5MG	30.0	30	WAL-MART STORES EAST LP 334-284-4282	LINDSEY BARTON 334-568-2120
Adh DM	03-07-2022	METFORMIN TAB 500MG	30.0	30	WAL-MART STORES EAST LP 334-284-4282	LINDSEY BARTON 334-568-2120
Adh DM	01-19-2022	GLIPIZIDE ER TAB 2.5MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh HTN	01-19-2022	LISINOPRIL TAB 20MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120



Drug Therapy Opportunity	Date Filled	Drug Name/ Strength	Quantity	Days Supply	Pharmacy Name/Phone	Prescriber of Record Name/Phone
Adh DM	01-19-2022	METFORMIN TAB 500MG	30.0	30	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120
Adh DM	01-12-2022	TRULICITY INJ 3/0.5	6.0	84	WAL-MART STORES EAST LP 334-272-2043	MARANDA FAIN 334-244-3281
Adh DM	12-03-2021	TRULICITY INJ 3/0.5	2.0	28	WAL-MART STORES EAST LP 334-272-2043	LINDSEY BARTON 334-568-2120