10221.0100

Sixty-second Legislative Assembly of North Dakota

Introduced by

FIRST DRAFT:

Prepared by the Legislative Council staff for the Workers' Compensation Review Committee September 2010

- 1 A BILL for an Act to create and enact four new sections to title 65 of the North Dakota Century
- 2 Code, relating to workers' compensation coverage of prescriptive drugs as part of pain therapy;
- 3 and to provide for application.

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4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. A new section to title 65 of the North Dakota Century Code is created and enacted as follows:

General opioid therapy acute stage coverage.

- This section applies to an injured employee with pain resulting from a
 nonmalignant compensable condition or to an injured employee receiving pain
 therapy for another nonterminal compensable condition.
- 2. The organization does not cover an opioid therapy prescribed on an outpatient basis extending beyond thirty days following an initial injury or initial discharge or following a subsequent operative procedure, unless the prescriber submits an objectively supportable required prescriber's treatment plan. The organization does not cover an opioid therapy prescribed on an outpatient basis extending beyond six weeks following an initial injury or initial discharge or following a subsequent operative procedure, unless the prescriber prequalifies the injured employee for long-term opioid therapy coverage
- 3. Qualification for coverage beyond the coverage provided for under subsection 2 requires prior authorization from the organization. Authorization requests must include documentation as required by the organization.
- SECTION 2. A new section to title 65 of the North Dakota Century Code is created and enacted as follows:
 - Long-term opioid therapy coverage.

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a.

1 This section applies to an injured employee with pain resulting from intractable 2 chronic nonmalignant, nonterminal pain. As used in this section, intractable 3 chronic nonmalignant, nonterminal pain may be referred to as "chronic pain" and is 4 pain persisting beyond the expected normal healing time for an injury, for which 5 traditional medical approaches have been unsuccessful. 6 2. This section does not apply to an injured employee with pain resulting from a 7 malignant process, such as cancer, or when the pain therapy is aimed at relieving 8 intractable pain and suffering in the terminally ill when other measures fail, if the 9 diagnosis is a compensable condition. 10 Opioid maintenance analgesia therapy may be provided if the therapy results in <u>3.</u> 11 greater function, allows an injured employee to resume working, or improves pain 12 control with limited side effects for chronic pain patients. 13 A candidate for opioid maintenance analgesia therapy: <u>4.</u> 14 Must have an established diagnosis that is consistent with chronic pain; a. 15 b. Must have been nonresponsive to non-opioid treatment; 16 May not be using illegal drugs or abusing alcohol; and C. 17 Must be a reliable injured employee who is known to the prescriber and is d. 18 expected to be compliant with the treatment protocol. 19 The organization may not cover long-term opioid maintenance analgesia therapy 5. 20 for an injured employee who meets the criteria for the diagnosis of chronic pain 21 syndrome and who has persistent pain out of proportion to physical findings or with 22 no demonstrable lessening. 23 If an injured employee has a personal history of addiction, poor impulse control, a 6. 24 comorbid psychiatric disorder, or poor response to opioids in the past for a similar 25 condition, organization coverage of long-term opioid maintenance analgesia 26 therapy requires prior authorization from the organization. An authorization 27 request under this subsection must include documentation as required by the 28 organization. 29 Coverage of continuation of long-term opioid maintenance analgesia therapy is 7. 30 subject to the following restrictions:

Low to moderate dose opioid therapy must provide at least partial analysia.

1		<u>b.</u>	Every thirty days during the first three months and every sixty days during the		
2			next six months, progress of the therapy must be documented on forms		
3			provided by the organization.		
4		<u>C.</u>	Annually, the organization shall evaluate every injured employee on long-term		
5			opioid maintenance analgesia therapy to determine the need for continuing		
6			the therapy.		
7		<u>d.</u>	At the prescriber's organization's request, every injured employee on		
8			long-term opioid maintenance analgesia therapy is subject to random drug		
9			screens for the presence of both prescribed and illegal substances. Failure of		
10			the screen or of timely compliance with the request results in termination of		
11			opioid maintenance analgesia therapy.		
12		<u>e.</u>	A treatment agreement between the patient and the prescriber restricting		
13			treatment access and limiting prescriptions to an identified single physician		
14			must be in place.		
15	SEC	СТІО	N 3. A new section to title 65 of the North Dakota Century Code is created and		
16	enacted as	follo	ws:		
17	Prescribers of long-term opioid therapy coverage.				
18	<u>1.</u>	<u>In tl</u>	he case of prescription of long-term opioid maintenance analgesia therapy, the		
19		orga	anization may require:		
20		<u>a.</u>	Upon request of the organization, the prescribing physician shall immediately		
21			administer a drug screen that will detect the presence of prescribed and		
22			unprescribed medications.		
23		<u>b.</u>	Upon request of the organization or the injured employee, the prescriber shall		
24			provide a treatment plan that addresses concerns of the organization and of		
25			the injured employee.		
26		<u>C.</u>	Upon request of the organization, the prescriber shall reduce the prescription		
27			levels or provide objective justification why such a reduction is not in the		
28			injured employee's best interest.		
29		<u>d.</u>	The prescriber shall provide information to the injured employee regarding		
30			chemical dependency programs.		

1	<u>e</u>	The prescriber shall provide the organization and the injured employee with a			
2		titration plan for the reduction and possible discontinuation of the opioid			
3		maintenance analgesia therapy.			
4	<u>2.</u> <u>If</u>	the prescriber or injured employee does not comply with one or more of the			
5	<u>re</u>	equirements of this section or if the probability of imminent harm to the injured			
6	<u>e</u>	mployee is high, after the organization provides reasonable notification to the			
7	<u>in</u>	jured employee the organization may discontinue coverage of the opioid			
8	<u>m</u>	aintenance analgesia therapy.			
9	SECTI	ON 4. A new section to title 65 of the North Dakota Century Code is created and			
10	enacted as follows:				
11	Presc	riber treatment plans for treatment of nonmalignant pain with opioids.			
12	<u>1.</u> W	/ithin the first thirty days of treatment of an injured employee under an opioid			
13	<u>m</u>	aintenance analgesia therapy, the prescriber shall submit a written treatment			
14	p	an to the organization. The written treatment plan must include the following:			
15	<u>a</u>	Time-limited goals, including a time schedule to wean the injured employee			
16		from opioid use;			
17	<u>b</u>	Consideration of relevant prior medical history;			
18	<u>C.</u>	A summary of conservative care rendered to the injured employee which			
19		focuses on return to work;			
20	<u>d</u>	A statement of why prior or alternative conservative measures may have			
21		failed or are not appropriate as sole treatment;			
22	<u>e</u>	A summary of any consultations that have been obtained, particularly those			
23		that have addressed factors that may be barriers to recovery;			
24	<u>f.</u>	A screen for factors that may significantly increase the risk of abuse or			
25		adverse outcomes, such as a history of alcohol or other substance abuse; and			
26	g	An opioid treatment agreement that has been signed by the injured employee			
27		and the prescriber. This agreement must be renewed every six months. The			
28		treatment agreement must outline the risks and benefits of opioid use, the			
29		conditions under which opioids will be prescribed, the prescriber's need to			
30		document overall improvement in pain and function, and the injured			
31		employee's responsibilities.			

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1	<u>2.</u>	If the prescriber or injured employee does not comply with one or more of the
2		requirements of this section or if the probability of imminent harm to the injured
3		employee is high, after the organization provides reasonable notification to the
4		injured employee the organization may discontinue coverage of the opioid
5		maintenance analgesia therapy.
6	SEC	CTION 5. APPLICATION. Regardless of the date of injury, this Act applies to all
7	workers' co	mnensation claims on or after the effective date of this Act