WCB OPIOID Coverage **Quick Reference Guide**

For most injuries, WCB covers opioids during the acute stage of injury – for up to 12 weeks. In general, WCB will cover opioids when their use supports treatment goals and return to function. The recommendations and guidelines for approval are directly in line with current best practice and the Canadian Opioid Guideline for Chronic Non Cancer Pain.

QUANTITY LIMITS

All opioids have a quantity limit of 200 morphine equivalents (MEQ) per day as advised by the Canadian Opioid Guideline. This is NOT a recommended dosage level - it is the maximum that may be automatically approved. Prescriptions for amounts exceeding this quantity require special authorization.

For context, the 200 MEQ level is equivalent to approximately:

- · 133mg of oxycodone per day
- · 40mg of hydromorphone per day

BENEFIT STATUS OF OPIOIDS

Automatic access to opioids (and other medications) is linked to the nature of the workplace injury/illness. The following table is a general guide for the benefit status of opioids. The information below is not all-inclusive and is subject to change over time.

| Nature of Injury | Formulary | Examples of Medications Covered | Access to Coverage |
|--|------------------------------------|--|--|
| Musculoskeletal Bones/Nerves/Spinal cord Wounds Burns Intracranial Injuries Environmental Trauma Digestive System Diseases Other Traumatic Injuries | Acute Opioid Formulary (AOF) | Short acting tramadol alone and in combination with acetaminophen Oral short acting acetaminophen/codeine combinations, (e.g. Tylenol No.3®), acetaminophen/oxycodone combinations (e.g. Endocet®), & ASA/oxycodone combinations Oral short acting codeine, oxycodone, morphine, hydromorphone Oxycodone, morphine, & hydromorphone suppositories Long acting opioids may be available through special authorization | Automatic access within quantity limits for a period of 12 weeks from the date of injury. Special authorization is required for access beyond 12 weeks from date of injury. |
| NeoplasmsTumorsCancer | Critical Opioid Formulary (COF) | All of the AOF contents plus: Oral long acting codeine, morphine, hydromorphone (certain products only) Injectable hydromorphone, morphine | Automatic access within quantity limits for a period of 24 weeks from the date of injury. Special authorization is required for access beyond 24 weeks from date of injury. |
| Blood & Blood Forming Organs Circulatory Respiratory Genitourinary System Disease & Disorder Skin Infectious Psychological | No Opioid Formulary | n/a | Special authorization is required for ANY opioids |

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Common opioid products that will require a special authorization in EVERY case:

- · oral long acting oxycodone (Oxyneo®)
- fentanyl patch
- methadone
- · buprenorphine/naloxone

For a complete list of drugs/products which require special authorization, refer to

Special Authorization Drugs & Coverage Criteria at wcb.ns.ca/formulary

Opioid products that are NOT covered by WCB:

- · Jurnista®
- · oxycodone/naloxone (Targin®)
- · buprenorphine patch
- pentazocine
- · meperidine

TRAMADOL

Although tramadol products (e.g., Tramacet®) are not currently regulated in the same manner as other opioids, these medications are included in WCB's opioid formularies and are subject to time-limited access.

SOME FACTORS CONSIDERED WHEN REVIEWING OPIOID SPECIAL AUTHORIZATION REQUESTS

The following list reflects the Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain:

- · Diagnosis effective therapy for the diagnosis(es), further investigation/consultation, non-opioid/alternative therapies failed or adjunctive, co-morbid disorders impacting recovery.
- Ensuring that opioids do not form the first line of treatment for longer-term or chronic injuries.
- · Special consideration will be given if the injury/disease is cancer and/or terminal.
- · Ensuring that opioids are part of an integrated, multi-disciplinary approach to pain management.
- · Review of the individual's response to opioid, for example, clinically meaningful improvement in function, adverse effects, medical complications, contraindications, and/or risk of misuse.

Note: Continuing to increase an opioid dose if the response has been insignificant may be ineffective as opioids have a graded response (the lowest dose has the greatest benefit).

LAXATIVES

Laxative medications (including docusate sodium, bisacodyl, senna glycosides, mineral salts, PEG, lactulose) will be automatically covered if the patient is on an opioid.

REMEMBER

- Time limits for opioid coverage start at the **date of injury**. There may be a lag between injury date and first office visit/ prescription, meaning coverage period for opioid formularies will be shortened.
- · Formulary contents are periodically reviewed and updated (new products, generics, de-listed drugs). There may be delays between new product availability on the market and consideration for inclusion in WCB's formulary.

GUIDELINES & RESOURCES - TREATMENT OF CHRONIC NON-CANCER PAIN

Information and resource materials are available through:

- · College of Physicians & Surgeons of NS (righttoolforthejob.ca)
- · Atlantic Mentorship Network for Pain and Addiction (atlanticmentorship.com)
- Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain (nationalpaincentre.mcmaster.ca)

Links to additional resources may be found at wcb.ns.ca/formulary

SPECIAL AUTHORIZATION REQUESTS

Requests must be submitted via fax to Medavie Blue Cross using the forms specified below. Forms can be downloaded from **wcb.ns.ca/formulary**

Request Type

Continued coverage past the initial automatic coverage period
An opioid not in the assigned formulary

An opioid requiring special authorization

What to Submit

Opioid Special Authorization Request Form AND
Substance Abuse Assessment Form

For continued coverage please submit the request(s) via fax 2 weeks prior to the coverage term date.

This information is current as of May 2015.

QUESTIONS?

DID YOU KNOW? You can

and one prescriber. Call

Medavie Blue Cross for

restrict WCB opioid coverage

to one dispensing pharmacy

details at 1-855-496-5810.

Subsequent requests

Opioid Special Authorization Request Form