



March 19th, 2018

Via Email to kendall.bourdon@ic.nc.gov

Charlton L. Allen, Chairman
North Carolina Industrial Commission
1233 Mail Service Center
Raleigh, NC 27699-1233

RE: AAPAN's Comments on Proposed Rules for the Utilization of Opioids and Pain Management in Workers' Compensation

Dear Chairman Allen:

I am writing to submit comments on behalf of the American Association of Payers, Administrators and Networks (AAPAN) regarding the Industrial Commission's proposed rule on the utilization of opioids in the workers' compensation system. AAPAN is the national trade association for provider networks, payers, and other Workers' Compensation organizations, including pharmacy benefit managers (PBMs). Through our members, we work on behalf of thousands of injured workers throughout the country, including in North Carolina.

Our members have taken steps across the country to reduce opioid use among injured workers and we applaud the efforts of the North Carolina Industrial Commission to address this critical issue. AAPAN's members support the overall intent of the proposed regulation and offer the following comments for the Commission's consideration.

Proposed Section 04 NCAC 10M.0101: Purpose and Applicability of the Rules

Currently, the proposed rule is silent regarding how to transition or manage injured workers who are currently receiving targeted medications that exceed the recommendations in the proposed rule. It is vital that injured workers who are taking opioids above the recommended 50 MED threshold have a drawdown plan in place to mitigate any additional adverse effects. AAPAN recommends that language be added that would provide for a six-month timeframe for evaluating and developing a treatment plan for workers currently receiving targeted medications that fall outside or exceed the proposed recommendations.

Proposed Section 04 NCAC 10M.0102: Definitions

Under the proposed definitions section of this rule we recommend that the definition of "confirmatory urine drug test" be changed to allow for greater flexibility in identifying potential abuse of not only

targeted medications but illicit drugs as well. AAPAN supports the use of urine drug testing anytime opioids have been prescribed for longer than 30-days. We recommend that the Commission remove language capping tests to 21 drug classes to ensure that the confirmatory test adequately addresses and assesses as many potential risk factors.

AAPAN also recommends that the definition of “targeted controlled substance” be removed and replaced with the term “opioid(s)” throughout the entire proposed rule. We believe that the inclusion of “targeted controlled substance,” and the tying of it to the controlled substance statute, will cause future unnecessary updates on drugs that are not pertinent to the workers’ compensation system.

Section .0200 Utilization Rules For Opioid And Other Pharmacological Pain Management Treatment

AAPAN supports the proposed requirements regarding the use of transcutaneous, transdermal, transmucosal, or buccal opioid preparations. Nevertheless, we believe that this section can be strengthened by requiring prior authorization for these medications.

Proposed Section 04 NCAC 10M.0301: Opioid Antagonists

Under the current proposed section, additional guidance is needed for prescribers when treating an employee as described in subsection (a) (3-6). When treating injured workers with these risk factors, an opioid should be prescribed only after *all* other potential treatment options to relieve pain have been exercised. We also recommend that anytime an employee presents with any of the risk factor noted in Subsection (a) (3-6), and where a prescription opioid has been deemed *necessary*, that the prescribing an opioid antagonist be required.

Proposed Section 04 NCAC 10M.0401 Nonpharmacological Treatment For Pain

To ensure that alternative pain treatment modalities are not limited to only those outlined in the proposed rule, we suggest the following clarifying language:

A health care provider shall consider and may prescribe non-pharmacological treatments for pain. Examples of these treatments include, **but are not limited to**, the following: physical therapy, chiropractic, acupuncture, massage, cognitive behavioral therapy, biofeedback, and functional restoration programs.

Expanding treatment options outside of those listed above allows for the future use of new and innovative approaches to treat injured workers.

Proposed Section 04 NCAC 10M.0501 Treatment For Substance Use Disorder Involving A Target Controlled Substance

AAPAN agrees that if a medical provider, in their medical opinion, believes that an injured worker would benefit from an evaluation for the discontinuation or tapering of a targeted controlled substance that a referral to a specialist is needed. We recommend that the language be strengthened to allow for a carrier or employer to refer an employee to a specialist for evaluation and treatment. Also, to foster collaboration between the referring provider, the substance abuse disorder specialist, and the medical director of the employer and/or insurance carrier, we suggest that treatment be pre-approved through the prior authorization process.

Effective Date

In addition to the comments outlined above we recommend that the effective date be changed to 6-months after final rule adoption. This timeline allows for a necessary period for employers, carriers, and PBMs to prepare and implement the opioid utilization protocols.

Conclusion

We commend the Commission for addressing this vital issue and support the intent of the proposed rule. We hope that our comments will serve as guidance and help the Commission enhance and strengthen the goal of reducing the overutilization of opioids. Thank you for considering comments, please do not hesitate to reach out if we can provide any additional support or information.

Sincerely,

A handwritten signature in black ink that reads "Julian Roberts". The signature is written in a cursive style with a large initial "J".

Julian Roberts
President
American Association of Payers Administrators and Networks (AAPAN)
3774 Lavista Road, Suite 101
Tucker, GA 30084
o: 404/634-8911 e: jroberts@aapan.org