 Yukon Workers' Compensation Health and Safety Board	Part:	Health Care Assistance		
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[SAFE USE OF MEDICATIONS](#)

GENERAL INFORMATION

Section 36 of the *Workers' Compensation Act* S.Y. 2008 (the *Act*) states that the Yukon Workers' Compensation Health and Safety Board (YWCHSB) may provide payment for health care assistance. This includes medications appropriate to treat an injured worker's compensable injury and any associated subsequent disorders that arise from the compensable injury.

PURPOSE

There can be risks and negative side effects associated with any medication. In particular, opioids (narcotic pain medication) can be harmful if not used safely and monitored appropriately. This policy establishes parameters for the appropriate coverage and safe use of medications, including opioids, in the treatment of compensable injuries. It outlines the responsibilities of the injured worker, the prescribing medical practitioner, the dispensing agency and the YWCHSB.

DEFINITIONS

1. **Addiction:** An addiction is the use of psychoactive substances (that is, substances affecting one's mind or behaviour), leading to a loss of control, compulsive and continued use resulting in adverse social, physical and psychological consequences.
2. **Compendium of Pharmaceuticals and Specialties (CPS):** The most widely used source of medication information in Canada. It is published by the Canadian Pharmacists' Association and lists medications commonly used to treat various medical conditions.
3. **Drug Identification Number (DIN):** The number located on prescription and non-prescription medication product labels. The DIN confirms that the medication is in compliance with Canadian law.
4. **Injury:** As in Section 3 of the *Act*, an injury is disablement, occupational disease or death caused by work-related events.

5. **Medical Practitioner:** Includes those health care providers, recognized by the YWCHSB, who are responsible for the ongoing care of the worker. This includes medical doctors, medical specialists, dentists and other health care providers recognized under the *Medical Profession Act*, the *Dental Profession Act*, the *Registered Nurses Profession Act* or by the YWCHSB.
6. **Medication:** A pharmaceutical agent prescribed (or recommended, in the case of over-the-counter medications) by a medical practitioner and labeled with a Drug Identification Number (DIN). Some classes of medications involve a high risk of physical dependence, tolerance and addiction with prolonged use or high doses:
 - Opioids: refers to natural or synthetic narcotic analgesics (pain medication) used to treat moderate-to-severe pain (for example, morphine, codeine, Oxycodone and Darvon).
 - Tranquilizers and hypnotics: refers to medications used to treat anxiety, sleeplessness and muscle spasms (for example, barbiturates and benzodiazepines).
7. **Physical Dependence:** Refers to a physiological state (as opposed to a psychological state) whereby a person becomes dependent on the continued regular use of a drug to the extent that to stop taking it leads to withdrawal (which may be relieved in total or in part by re-administering the substance). In contrast, a *psychological dependence* is characterized by a subjective sense of need for a specific substance. Physical or psychological dependencies do not necessarily correlate with addiction, and may be a normal consequence of long-term opioid use.

PREVENTION

Preventing workplace injuries is everyone's responsibility. When a work-related injury does occur, medication must be used safely and appropriately to foster a timely return to work and to prevent unintended subsequent conditions.

POLICY STATEMENT

The YWCHSB supports the provision of necessary and appropriate health care services to:

- promote effective recovery from a work injury;
- maintain or enable early and safe return to work for injured workers; and
- reduce the severity of symptoms where the work injury has a significant impact on daily living activities.

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The YWCHSB may cover the cost of medications – including opioids – under this policy where these medications have been prescribed by a licensed medical practitioner and dispensed by a licensed pharmacist or authorized health care provider.

AUTHORIZING PAYMENT FOR MEDICATIONS – KEY PROVISIONS

General

The YWCHSB authorizes payment for medications where:

- the medication is prescribed or recommended by a medical practitioner or other health care provider authorized to write prescriptions;
- the use is consistent with accepted medical practice in Canada, the manufacturer's instructions and is prescribed or recommended in accordance with the *Compendium of Pharmaceuticals and Specialties (CPS)*;
- the medication has a valid Drug Identification Number (DIN);
- the medication is appropriate to address the worker's medical needs arising out of their work-related injury;
- the medication is expected to improve or maintain the workers' functional abilities, thus enabling the worker to safely stay at work or improve the likelihood of a safe and timely return to work; and
- the medication is expected to minimize the risk of further injury or aggravation of the compensable injury.

Mitigation

Injured workers have a duty, under Section 14 of the *Act*, to mitigate their injury. Within the context of this policy, this duty extends to using the medication safely and as directed. Wherever possible, an injured worker is expected to obtain their prescription from the medical practitioner overseeing their recovery and to purchase their prescription from their usual pharmacy.

Appropriateness of Medications

Payment for medication expenses will be determined by the YWCHSB. The medication must be appropriate to the compensable injury and the injured worker. Accordingly, the YWCHSB will consider:

- the recommendation of the treating medical practitioner responsible for the injured worker's ongoing care;


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- the intended benefit of the medication in relation to the compensable injury (in some cases, a ‘companion’ medication is required to address side effects from the primary medication); and
- whether the dosage, frequency of use and total amount prescribed is clearly indicated in reports submitted to the YWCHSB.

Where appropriate, the YWCHSB may, in consultation with the YWCHSB’s Medical Consultant, consider current scientific evidence and evidence-based guidelines developed by professional health organizations in Canada and the United States regarding the use of a particular medication in relation to an injured worker.

The YWCHSB may refuse or limit the authorization of payment for medications that are determined, in consultation with the YWCHSB Medical Consultant, to be inappropriate, ineffective or harmful, including those that may lead to dependency or addiction.

Opioids (Pain Medication), Tranquilizers and Hypnotics

Non-opioid medication should be the first choice for treating pain, especially pain associated with minor or mild soft tissue injuries. However, the short-term use of opioid medication to treat moderate-severe pain (from the initial workplace injury, subsequent surgery or recurrence) is considered reasonable and appropriate, and may be covered by the YWCHSB.

When determined appropriate by the YWCHSB, payment may be authorized for opioids, tranquilizers and hypnotics for:

- a period of hospitalization for the work-related injury;
- up to one month following the workplace injury; or
- related subsequent surgery or recurrence of injury.

At any time, the payment for opioid medication will be discontinued if:

- the current status of the injured worker’s compensable injury or condition no longer requires opioids;
- there is insufficient evidence to support a conclusion that the treatment is beneficial to the compensable injury or condition;
- there is evidence (in the opinion of the medical practitioner or the YWCHSB) that the treatment is causing more harm than benefit;
- the treatment (in the opinion of the medical practitioner or the YWCHSB) is contributing to a psychological dependence or addiction; or
- the treatment is a contributing factor to the worker’s inability to fully participate in medical rehabilitation or return to work efforts.

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Where the use of medication is extended by the medical practitioner for a period greater than one month, he or she must provide a satisfactory medical explanation of special or extenuating circumstances for the extension, in writing, to the YWCHSB.

The YWCHSB Medical Consultant may provide an opinion as to the appropriateness and reasonableness of the prescription extension, and to determine the need for a therapeutic agreement (that is, a written document establishing expectations, roles, responsibilities and consequences between the YWCHSB, injured worker and other parties deemed necessary by the YWCHSB).

The YWCHSB may refer the injured worker to the YWCHSB Medical Consultant for an assessment, where the use of opioids, tranquilizers or hypnotics is suspected of interfering with the worker's recovery and return to work goals.

Over-the-Counter Medications

When determined to be appropriate and recommended, in writing, by a medical practitioner, the YWCHSB may authorize payment for non-prescription medications.

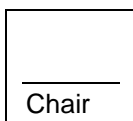
Off-Label Use of Prescription Medications

Off-label" refers to the prescription and use of medications for purposes other than the purpose for which they were initially developed. These medications must be approved by Health Canada and described in the CPS. The YWCHSB may authorize payment for off-label use of medications on a case-by-case basis, if, in the opinion of the YWCHSB Medical Consultant, such use is reasonable and appropriate for the compensable injury.

Medications Not Authorized for payment

The YWCHSB will not authorize payment for:

- cannabis;
- amphetamines;
- barbiturates (exception - phenobarbital may be covered if prescribed for seizure disorders following a severe head injury);
- anabolic steroids;
- illegal drugs or substances; or
- medications used for purposes other than medically prescribed.



Use of medications as described above may be considered by the YWCHSB as interfering with recovery and treatment goals. Determining future entitlement of benefits and services in such situations will be addressed under YWCHSB policy, "Mitigation of Loss".

Criteria for Reimbursement of Medication Expenses

To be eligible for reimbursement of medication expenses, the injured worker's use of medication must follow the provisions of this policy.

Where a generic medication is equivalent and available to replace a brand-name medication, the YWCHSB will pay for what the generic equivalent costs, unless there is a valid medical reason that the brand-name medication is required, or the brand-name medication is available at a lower price than the generic equivalent.

Original receipts must be submitted to the YWCHSB within one month of purchase in order to be considered for reimbursement.

Receipts from on-line pharmacies will not be reimbursed, unless the YWCHSB has a direct-billing agreement with that pharmacy.

Addiction

There may be circumstances where the YWCHSB or the treating medical practitioner believes that the injured worker's need for opioids, tranquilizers or hypnotics is mostly psychological in nature, and such dependence is contributing to behaviours not favourable to or interfering with the goals of recovery and return to work. In such circumstances, the YWCHSB may discontinue authorization for payment of opioids, tranquilizers or hypnotics in consultation with the treating medical practitioner and the YWCHSB Medical Consultant.

Addiction Intervention

Opioids, tranquilizers and hypnotics may lead to dependency or addiction, even when used appropriately. Where reasonable medical evidence supports a diagnosis of addiction resulting from treatment for a compensable injury, the YWCHSB will cover costs of addiction intervention (see the YWCHSB policy, "Subsequent Disorders and Conditions Resulting from a Work-related Injury"). Intervention may include a gradual withdrawal of the medication from the injured worker's regimen, referral to a specialist or referral to a multidisciplinary intervention (such as a reputable addiction rehabilitation program) as determined by the YWCHSB.

Where addiction intervention is authorized by the YWCHSB, the following conditions apply:

- authorization for payment will be on a “one-time” basis. Intervention for relapses will not be covered;
- where there is a delay in accessing appropriate intervention, the YWCHSB will review ongoing authorization for payment for opioids, tranquilizers or hypnotics with the treating physician;
- the goal of the intervention will be discontinuing use over a short period of time, expected not to exceed 12 weeks;
- following the intervention, the YWCHSB will no longer authorize payment for opioids, tranquilizers or hypnotics for that worker, except on an exceptional basis related to emergency medical treatment; and
- if the worker refuses to mitigate the effects of the addiction by refusing appropriate intervention programming without just cause (as determined by the YWCHSB), authorization for opioids, tranquilizers or hypnotics will cease. A decision regarding further entitlement to benefits and services will be made under the YWCHSB policy, “Mitigation of Loss”.

ROLES AND RESPONSIBILITIES

Medical Practitioner

In addition to diagnosing and treating the injured worker, and performing other roles and responsibilities as described in YWCHSB policy, “Overview: Provision of Health Care Assistance”, medical practitioners will:

- identify, recommend or prescribe the most appropriate medication for the compensable injury;
- prescribe or recommend a generic equivalent to a brand-name medication;
- ensure that the worker receives timely and appropriate pharmaceutical support, including the timely and appropriate cessation of medication therapy;
- clearly indicate, in reports provided to the YWCHSB, the intended benefit of the medication, and the dosage, frequency and total amount of medication prescribed or recommended;
- ensure that the worker is advised of any significant impact the medication may have on the timely achievement of the goals of recovery and safe return to work; and
- participate, where required, in the development and monitoring of therapeutic agreements.

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YWCHSB

The YWCHSB will:

- authorize payment for medications that are consistent with the provisions of this policy;
- determine the need for a therapeutic agreement between the injured worker, medical practitioner, dispensing agency and the YWCHSB; and
- consult with medical practitioners where it is unclear as to the intended benefits of the prescribed or recommended medication, its dosage or the frequency of use.

Worker

Each worker has a duty to mitigate the effects of their injury, including using medication safely and as directed. Actively and fully participating in their recovery includes, but is not limited to, discussing a medication's effects with their medical practitioner or the YWCHSB. It is important for an injured worker who suspects that the prescribed medication may be interfering with their ability to fully and safely engage in treatment and return to work efforts to communicate their concerns to their medical practitioner.

Employer

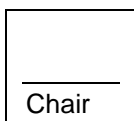
The employer's co-operation and commitment in the return to work process is critical in facilitating the injured worker's return to work. Subsection 40(1) of the *Act* outlines the minimum requirements for employers of injured workers regarding co-operation in the early and safe return to work process.

APPLICATION

This policy applies to the Board of Directors, President/CEO and staff of the YWCHSB and to the Workers' Compensation Appeal Tribunal; and all workers and employers covered by the *Act*.

EXCEPTIONAL CIRCUMSTANCES

In situations where the individual circumstances of a case are such that the provisions of this or any health care services policy cannot be applied or to do so would result in an unfair or an unintended result, the YWCHSB will decide the case based on its individual merits and justice in accordance with YWCHSB policy, "Merits & Justice of the Case". Such a decision will be considered for that specific case only and will not be precedent setting.


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APPEALS

Decisions made by the YWCHSB under this policy can be appealed directly in writing to the hearing officer of the YWCHSB in accordance with subsection 53(1) of the *Act*. Notice of the appeal must be filed within, and not after, 24 months of the date of the decision made by the YWCHSB, in accordance with section 52 of the *Act*.

A worker may appeal directly to the Workers' Compensation Appeal Tribunal (WCAT) any decision made under subsection 14(2) or subsection 40(6) of the *Act*. Notice of the appeal must be filed within 24 months of the date of the decision by the YWCHSB, in accordance with section 52 of the *Act*.

ACT REFERENCES

Sections 14, 36, 40, 42(1), 52, 53, 54.

POLICY REFERENCES

HC-01, "Overview: Provision of Health Care Assistance"

EN-02, "Merits and Justice of the Case"

EN-10, "Subsequent Disorders or Conditions Resulting From a Work-related Injury"

RE-02-2, "Duty to Co-operate, Part 2 of 4: Roles and Responsibilities"

RE-02-4, "Duty to Co-operate, Part 4 of 4: Penalties for Non Co-operation"

RE-03, "Mitigation of Loss"

HISTORY

New

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