Learn about BWC’s nationally significant opioid rule for prescribers

Oct. 1 is the implementation date for BWC’s new *opioid prescribing rule*. It applies to all BWC-certified prescribing physicians. This rule will help prevent opioid dependence for Ohio’s injured workers through its three primary goals that:

- Encourage prescribers to incorporate best clinical practices when prescribing opioids for treating Ohio’s injured workers;
- Establish provisions and criteria for treating opioid dependence that arises secondary to treatment with opioid medications covered by BWC;
- Provide and strengthen BWC’s peer review processes for opioid prescribing that addresses serious noncompliance with best practices.

To help injured workers better understand the risks of taking opioids for the long term, we are working on educational materials that you may share with injured workers.

**Best clinical practices**

Each of the rule’s sections relate to one of these goals. For example, we will not reimburse for opioid prescriptions written by physicians who fail to comply with Ohio’s best practices as outlined by the Ohio State Medical Board and reinforced by the Ohio Administrative Code (OAC).

BWC is the first state agency in Ohio to link best prescribing practices to prescription coverage. In addition, BWC is the first agency to use an OAC rule to ensure appropriate and responsible opioid prescribing. Because injured workers have a vulnerability that differs from the general population, an additional level of opioid prescribing oversight is required by physicians. The rule outlines the details needed for this necessary oversight.

**Checkpoints:** Tighter controls on duration and daily dose of opioids, as measured by milligrams of Morphine Equivalent Dose (MED)

Pay attention to the duration of time an injured worker may be on opiates. For example, prescriber duration dose checkpoints to review pain treatment plans are:
50 mg MED/Day for more than six weeks after injury or during the subacute injury phase;
80 mg MED/Day or for more than 42 to 84 days;
80 to 120 mg MED/Day or for more than 12 weeks for the chronic pain phase.

Opioid treatment programs reimbursed
Be aware of red flags that may arise when treating the injured worker. Fortunately, BWC made sure the rule includes policies for supporting an injured worker and his or her physician if the injured worker receiving opioids covered by BWC wants to stop using them. BWC will reimburse for opioid treatment programs that include medication assisted treatment, behavioral and psychological counseling and inpatient detoxification. If necessary, BWC will reimburse for up to 18 months as long as the injured worker follows the plan developed collaboratively with his or her physician.

For added safeguards, this rule allows the injured worker to relapse twice during the 18-month period. In addition, the injured worker may complete these programs without adding drug dependency as an allowed claim condition as long as the injured worker has a treatment plan.

Peer review
Peer review will now be included as an external process for BWC prescribers as outlined in the rule. Although this process falls outside our progressive disciplinary process, it also could result in BWC decertifying a physician. The statue does protect physicians who are involved in the peer review process from being sued similar to a hospital medical review committee.

Information
For more information about this rule, you may email feedback.medical@bwc.state.oh.us.

* (OAC 4123-6-21.7)

New drug testing policy and procedure effective Sept. 23
BWC revised the Drug Testing policy and procedure (MP-21-01) with an effective date of Sept. 23, 2016. BWC will now reimburse for drug tests that include the standard drug panel listed in the policy when the injured worker takes a prescription drug that BWC has not reimbursed or authorized. For example, this includes a prescription for non-claim related conditions such as hypertension or diabetes.

For BWC to consider reimbursement, the provider must indicate the testing is medically necessary for treating the allowed conditions in the claim. For example, this includes developing a treatment plan for prescriptions that do not interfere with medications the injured worker is already taking.

In addition, BWC removed the drug testing billing Healthcare Common Procedure Coding System (HCPCS) codes from the Drug Testing policy and procedure. The policy does have a hyperlink to the 2016 BWC Coding Clarification, Proper Coding of Qualitative and Quantitative Drug Screens policy alert. That policy alert provides HCPCS billing codes and reimbursement rate information that providers must use for the payment of qualitative and quantitative drug screens.

Find the updated policy here on Sept. 23.
2016 – 2017 ICD-10 annual updates are coming

The International Classification of Diseases coding set has been frozen since 2012 in preparation for the nationwide ICD-10 implementation that went into effect Oct. 1, 2015. Beginning Oct. 1, 2016, the code freeze is no longer in effect. BWC will update all related systems to accept the newly added and revised codes, and to delete expired codes as of Oct. 1, 2016.

Summary of changes
ICD-10-CM (Clinical Modification) includes 1,943 new codes, 422 revised codes and 305 deleted (expired) codes. You can find this list here.

ICD-10-PCS (Procedure Coding System) includes 3,651 new codes and 487 revised codes. You can find this list here.

BWC will update other resources used by providers, including the bill groupings document and the list for inappropriate codes for claim allowances by Oct. 1, 2016. You can find these lists on our website under Medical Providers.

Updating codes
BWC will update all claims with allowances that include a soon-to-be expiring ICD-10 code with a valid ICD-10 code by Oct. 1, 2016. The ICD-10 code is mapped to the narrative description. Keep in mind, the narrative description is the legal claim allowance.

BWC will no longer reimburse for bills submitted with expired ICD-10 codes after that date.

If you have questions, email them to feedback.medical@bwc.state.oh.us.

System Update: Expect disruptions Nov. 9 – 14

To modernize operations and improve customer service, BWC will replace our core claims and policy management systems this November. The transition to this new system will occur over Veterans’ Day weekend, Nov. 10 – 14.

Beginning the afternoon of Nov. 10, many BWC systems, including web and phone services, will be unavailable. In addition, some employer-related systems will have limited functionality beginning at 5 p.m., Nov. 9. We expect to resume normal operations on Tuesday, Nov. 15.

Specific information on outages will be forthcoming as the transition date approaches. In the meantime, we encourage customers to review deadlines and complete any time-sensitive transactions including billing as soon as possible in advance of the transition. For information throughout the transition, make sure to follow us on Twitter @OhioBWC.

Our goal is to make this transition as seamless as possible for all of our customers. Steps we have taken to
minimize disruption include thorough system testing, extensive employee training and practice, and timing the transition with a three-day holiday weekend.

Thank you for your patience. We look forward to continuing to provide you with great customer service.