

WAC 296-20-03056 Opioid authorization requirement for the sub-acute phase (6-12 weeks). Before the department or self-insurer authorizes payment for opioids beyond the acute phase, the provider must perform and document the following:

- Verify that the worker had clinically meaningful improvement in function and pain with the use of opioids in the acute phase.
- If indicated, use a validated instrument to screen the worker for comorbid psychiatric conditions (e.g., depression, anxiety, or post traumatic stress disorder) which may impact the response to opioid treatment.
- Verify that the worker has no contraindication to the use of opioids.
- Access the state's prescription monitoring program database, if available, to ensure that the controlled substance history is consistent with the prescribing record and the worker's report.
- Use a validated screening instrument to verify the absence of a current substance use disorder (excluding nicotine) or a history of opioid use disorder.
- Administer a baseline urine drug test to verify the absence of cocaine, amphetamines, alcohol, and nonprescribed opioids.
- Verify that the worker has no evidence of or is not at high risk for serious adverse outcomes from opioid use.

[Statutory Authority: RCW 51.04.020 and 51.04.030. WSR 13-12-024, § 296-20-03056, filed 5/28/13, effective 7/1/13.]