

Monitoring Opioid Treatment in Workers' Comp. Claims

By Regina M. Parker

DUE TO THE WIDESPREAD USE OF OPIOIDS among injured workers, many states including Pennsylvania are assisting doctors and pharmacists in addressing the overprescription and over use of the painkillers. The Workers' Compensation Section hosted a Philadelphia Bar Association CLE program titled "Opioids and Overuse in the Workers' Compensation Section" on Aug. 10. The panel included Brian Lee Mayhugh Ph.D.; Frank N. Ciprero, attorney at Pond Lehocky Stern Giordano; and Danielle DeRosa, attorney at Dickie, McCamey & Chilcote, P.C. and cochair, Workers' Compensation Section

The U.S. is the highest consumer of opiates, consuming 99 percent of all hydrocodone produced. The rate of prescriptions per 100 people in Pennsylvania is between 82 and 95 annually and half of the overdoses in the U.S. are on prescription drugs. Of those prescription drugs, the overwhelming number are opiates. The number grows when you compare

it to heroin and cocaine addictions. As we implement safety measures to address the opioid epidemic, Dr. Mayhugh told attendees that we are faced with certain consequences. Some states have adopted very rigorous prescription-monitoring programs that have caused patients to travel to states with less stringent programs.

Dr. Mayhugh said that we need to educate and be aware of the potential dangers of pain medications while preserving the role played by opioids in the healing process.

During long-term use, patients tend to develop physical dependence, leading to a vicious cycle of addiction, Dr. Mayhugh said. The focus should be on helping injured workers cognitively and altering the way they feel about themselves, their family and social issues.

While safety measures are needed, Ciprero said that regulations should not be adopted that are aimed at taking away the injured worker's right to seek or the provider's right to offer treatment. There is a perception that every injured worker taking opioids is overusing, but many injured

workers are benefitting from prescribed opioids and are in comprehensive supervised programs.

Prescription opioid drug abuse and dependency often delay an injured worker's return to work and ultimately cause a

significant increase in medical exposure, DeRosa said. She said that if an injured worker becomes dependent on prescription pain killers, in time the medical portion of the claim often become the largest
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Frank N. Ciprero (left to right), Danielle DeRosa and Brian Lee Mayhugh Ph.D at the Philadelphia Bar Association CLE on Aug. 10.

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expense. She talked about the importance of the employer pre-screening panel physicians to eliminate doctors who are quick to over prescribe or hesitant to try other treatment methods. In Pennsylvania, if

certain criteria are met, for the first 90 days after an injury, the employer can require the injured worker to treat with panel physicians. They should be well versed in the CDCs treatment guidelines and take a conservative approach to opioids. After the 90-day period has expired, DeRosa said attendees should take advan-

tage of the Utilization Review process to prevent unreasonable and unnecessary opioid use. In many instances, the employer may want to retain an expert to conduct a medical records review to address if or how the medications are being inappropriately abused. The expert should also address a weaning schedule versus attempting to

force the injured worker to quit cold-turkey.

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