

**Alberta WCB  
Policies &  
Information**

Chapter:

**BENEFITS**

Subject:

**HEALTH CARE**

Authorization:

Date:

**BoD Resolution 2022/06/16**

**November 29, 2022**

**APPLICATION 4: PRESCRIBED OPIOID ANALGESICS (NARCOTICS)**

**1. *Why does WCB have a policy for prescribed opioid analgesics (opioids), also called narcotics?***

WCB has a responsibility to ensure treatment:

- is safe, effective, and appropriate, and
- supports the worker in recovery and a successful return to work, and
- is based on current medical knowledge.

This policy supports workers and authorized prescribers (see Question 3) by providing clarity about coverage available for opioids prescribed for the treatment of work-related injury and disease. As part of an overall approach to effective, appropriate claims management, WCB ensures that prescribed opioids support treatment goals including safe and early recovery, return to function, and return to work\*.

The policy reflects current medical evidence, advice, and knowledge about the benefits and risks of opioids prescribed for acute and chronic pain management. WCB periodically reviews medical evidence and published accepted standards of care to ensure the policy aligns with the most updated evidence.

See Addendum B for medical references.

\*For more information on how WCB evaluates safe return to work (including suitable modified work and safety sensitive positions), see Policy 04-05, Part II, Application 4.

For more information on how WCB evaluates whether workers and employers have met their duty to cooperate (including when the worker is not able to conform to the employer’s safety policy, or when the employer is not able to provide suitable modified work), see Policy 04-11, Part II, Application 1.

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**2. *What is a prescribed opioid?***

For the purposes of this policy, a prescribed opioid refers to a prescription medication, legally available in Canada, including but not limited to those identified by the College of Physicians & Surgeons of Alberta (CPSA) in their Advice to the Profession (see Addendum B).

**3. *Who can prescribe opioids?***

Opioids may be prescribed by authorized prescribers. In this policy, an authorized prescriber is an individual authorized to prescribe opioid medication within Alberta or the jurisdiction where the worker is receiving treatment. The authorized prescriber must follow the medical guidelines outlined in Question 4.

**4. *What medical guidelines must authorized prescribers follow when prescribing opioids?***

Authorized prescribers must follow the CPSA’s Standards of Practice\* (see Addendum B) when prescribing any medication linked to a substance use disorder or substance-related harm, including opioids.

WCB expects authorized prescribers will follow the Standard and its associated Guidelines, including but not limited to the following:

- to the extent possible, establish the underlying cause of the pain and identify the appropriate course of treatment, and
- prior to prescribing opioids, carry out an adequate trial of non-opioid analgesics, and
- prescribe the lowest effective dose of opioids and, if prescribing a dose that exceeds the Guidelines, carefully justify the prescription, and
- not prescribe benzodiazepines, hypnotics, and/or sedatives at the same time as opioids, and

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*Medical guidelines for authorized prescribers (continued)*

- continue to prescribe opioids only if there is measurable clinical improvement in function and pain that outweighs the risks of continued opioid therapy.

\*Regardless of the jurisdiction in which the authorized prescriber practices, they must, at a minimum, adhere to the CPSA’s Standards of Practice and its associated guidelines.

**5. What conditions are required to approve coverage of prescribed opioids?**

WCB only approves coverage for prescribed opioids when:

- there is only one prescriber, and
- the prescribed opioids are not given by injection, except in immediate post-injury, operative, peri-operative (around the time of the surgical procedure while in hospital or clinic), or palliative/end-of-life situations, and
- the prescribed medication is generally limited to one long-acting and/or one short-acting opioid analgesic at any given time.

See Questions 8 through 10 for additional criteria.

**6. What types of treatment does WCB approve coverage for?**

WCB may approve coverage for prescribed opioids for:

- acute or post-operative care (see Question 7)
- long-term opioid therapy, including treatment for chronic, non-malignant pain (see Question 9)
- palliative care (see Question 11)

**7. When does WCB approve coverage for opioids for acute or post-operative care?**

WCB may approve coverage for prescribed opioids during the acute or post-operative period for a maximum of **two weeks**. Authorized prescribers should prescribe no more than needed.

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**8. *What if pain exceeds two weeks and additional opioid treatment is recommended?***

In most cases, opioid treatment is not required for acute or post-operative pain beyond **two** weeks. However, in exceptional circumstances and if medically required, WCB may approve an additional two-week extension (for a total of **four** weeks) when the authorized prescriber anticipates the worker will require opioid treatment:

- **for up to an additional two weeks.** The reason for this extension should be submitted, as well as the treatment goal and plan to reduce opioids. WCB may approve payment for a maximum of four weeks in total.
- **beyond four weeks,** to allow the authorized prescriber to confirm the worker’s need for long-term opioid therapy and to complete the treatment agreement with the worker (see Question 9).

**9. *When does WCB approve coverage for opioids for long-term opioid therapy?***

Long-term opioid therapy, including treatment for chronic, non-malignant pain, is to treat pain that lasts past the time of normal tissue healing, usually more than **four weeks** following a compensable injury or surgery for the compensable condition.

WCB may approve coverage for prescribed opioids during this treatment when:

- the pain has lasted longer than **four weeks** from the date of injury or surgery, and
- the prescribed opioids are part of an integrated, multi-disciplinary approach to pain management, and
- there is evidence that treatment with prescribed opioids results in demonstrable improvement in the worker’s function (e.g., a 30% reduction in pain symptoms), progress towards return to work, and substantial

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*Coverage for long term  
opioid therapy (continued)*

reduction in pain that outweighs the risks of continued  
opioid therapy, and

- there is a confirmed treatment goal, and
- there is a written treatment agreement between the worker and the authorized prescriber, which identifies the prescriber, conditions regarding early refills, and the risks associated with prescribed opioid use, and
- the treatment agreement is on file with WCB before treatment begins.

**10.** *What are the requirements for authorized prescribers when prescribing opioids during long-term opioid therapy?*

The authorized prescriber must provide a progress report within four weeks of initiating long-term opioid therapy, and every three months thereafter. The manner and form of the reporting is determined by WCB and includes, but is not limited to:

- the dosage (typically less than 90 morphine equivalents) and frequency of prescribed medication, and
- baseline and periodic updates on function level, and
- pain intensity, and
- opioid-related harms, and
- any modification to the treatment plan, and
- any other information WCB requests.

**11.** *When does WCB approve coverage for opioids for palliative care?*

WCB may approve coverage for prescribed opioids in the later stages of a terminal disease (end-of-life care) during palliative care. At this point, the worker is in the end stages of a terminal compensable injury or disease.

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**12. *Are there circumstances where WCB may not approve payment of prescribed opioids?***

WCB may not authorize payment for opioids when:

- the pain is idiopathic (there is no known cause), and/or
- the pain is primarily due to psychological factors, and/or
- there is a history of remote, recent, or current substance abuse.

**13. *Under what circumstances would WCB suspend or discontinue authorization of prescribed opioids?***

WCB may suspend or discontinue authorization of payment for prescribed opioids when:

- increases in dosage do not result in improvement in function, including progress towards return to work and a clinically significant reduction in pain, or
- the prescribed opioids result in harm (medical complications and/or significant, serious side effects, e.g., non-physiological processes required for bodily functions, medications required to counteract side effects reasonably attributable to opioids), or
- medical advice indicates the prescribed opioids are delaying or imperiling the injured worker’s recovery, return to function, and/or work, or
- there is evidence of repeated dosage adjustment that has not been prescribed or authorized, or
- there is evidence that the prescribed opioids are being misused, used in a manner not intended by the authorized prescriber, or inconsistent with the intended purposes of the medication.

**14. *Will WCB authorize services to assist with medication management?***

WCB may refer an injured worker for medication assessment and management including addiction assessment and treatment, opioid cessation, and/or rehabilitation programs.

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**15.** *When is this policy application effective?*

This policy application [Application 4 – Prescribed Opioid Analgesics (Narcotics)] is effective for all new prescriptions (including renewals) as of January 1, 2023.

**Previous versions**

- [Policy 0406 Part II - April 2018](#)
- [Policy 0406 Part II - June 2017](#)
- [Policy 0406 Part II - August 2015](#)
- [Policy 0406 Part II - December 2010](#)
- [Policy 0406 Part II - May 2006](#)