



CR-101 (October 2017) (Implements RCW 34.05.310)

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WSR 23-17-094

Agency: Department of Health—Washington Medical Commission

Subject of possible rule making: Physicians and Physician Assistants general provision for opioid prescribing and tapering rules. The Washington Medical Commission (commission) is considering amending the following rules to modernize the language, add clarity, and bring the rules more in line with current practice: WAC 246-918-801 (physician assistants) Exclusions, WAC 246-918-845 (physician assistants) Patient Evaluation and Patient Record—Subacute Pain, WAC 246-918-855 (physician assistants) Patient Evaluation and Patient Record—Chronic Pain, WAC 246-918-870 (physician assistants) Periodic Review—Chronic Pain, WAC 246-918-900 (physician assistants) Tapering Considerations—Chronic Pain, WAC 246-919-851 (physicians) Exclusions, WAC 246-919-895 (physicians) Patient Evaluation and Patient Record—Subacute Pain, WAC 246-919-905 (physicians) Patient Evaluation and Patient Record—Chronic Pain, WAC 246-919-920 (physicians) Periodic Review—Chronic Pain, and WAC 246-919-950 (physicians) Tapering Considerations—Chronic Pain. The Washington Medical Commission (commission) is considering amending these WACs to modernize the language, add clarity, and bring the rules more in line with current practice.

Statutes authorizing the agency to adopt rules on this subject: RCW 18.71.017 and 18.130.050.

Reasons why rules on this subject may be needed and what they might accomplish:

On November 3, 2022, the Center for Disease Control and Prevention (CDC) released an update to their 2016 "Clinical Practice Guideline for Prescribing Opioids for Chronic Pain", entitled "CDC Clinical Practice Guideline for Prescribing Opioids for Pain" (Guideline). The Guideline expands its scope to include opioid prescribing for all pain (with certain exemptions). As such, the Guideline more closely parallels the Washington State opioid prescribing rules developed in 2017-2018 and implemented in January of 2019, mandated by Engrossed Substitute House Bill (ESHB) 1427 (chapter 297, Laws of 2017), and covering all Washington State opioid prescriber groups – including all allopathic physicians and physician assistants overseen by the commission. However, there are some differences.

The commission contracted with Gregory Terman, MD, who is a former Pro Tempore Commissioner of the commission as well as a Professor of Anesthesiology and Pain Medicine at the University of Washington in Seattle, to do a comprehensive comparison of the commission's opioid prescribing rules covering physicians (WAC 246-919-850 through 246-919-990) and physician assistants (WAC 246-918-800 through 246-918-835) to the Guideline. Dr. Terman was also asked to recommended changes to the commission's opioid prescribing rules based on the differences found between the commission's opioid prescribing rules and the Guideline. Dr. Terman provided the commission with a report, titled "Comparing and Contrasting the 2022 CDC Opioid Prescribing Guideline and the 2019 Washington State Prescribing Rules" (Report). Based on the recommendations in the Report, the Commissioners voted to initiate rulemaking on the following items:

- 1. Exempting patients with Sickle Cell Disease.
- 2. State in rule that not all chronic pain patients need to be tapered off opioids.
- 3. Clearer rules regarding biological specimen testing.

Rules on this subject may be needed to allow patients with Sickle Cell Disease receive the care they need in an efficient manner, provide physicians and physician assistants more clarity on when and how to taper patients to whom they prescribe opioids for chronic pain, and will provide rules that address how to work with patients that have an aberrant biological specimen test.

Identify other federal and state agencies that regulate this subject and the process coordinating the rule with these agencies: None	
Process for developing new rule (check all that apply	y):
☐ Negotiated rule making☐ Pilot rule making	
☐ Agency study	
☐ Agency study ☐ Other (describe) Collaborative rulemaking	
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Interested parties can participate in the decision to adopt the new rule and formulation of the proposed rule before publication by contacting:	
	(If necessary)
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Additional comments: To join the interested parties email	