

The Opioid Epidemic in the Labor Force

Extent of Pain Reliever Misuse in
Context

Erin Peterson, MPH

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Agenda

1. What is IBI, why are we interested?
2. What are we hoping to answer?
3. How big of a problem is opioid use in the workforce?
4. What about in Kentucky?
5. Are there strategies for employers?
6. Questions

About IBI

What do we do?

- We focus on workforce health and productivity
- Our aim is to help business leaders understand the value of employee health
- We do this through:
 - Research, data, tools, peer-to-peer learning opportunities

What is the value of employee health to businesses?



But there's
more to it



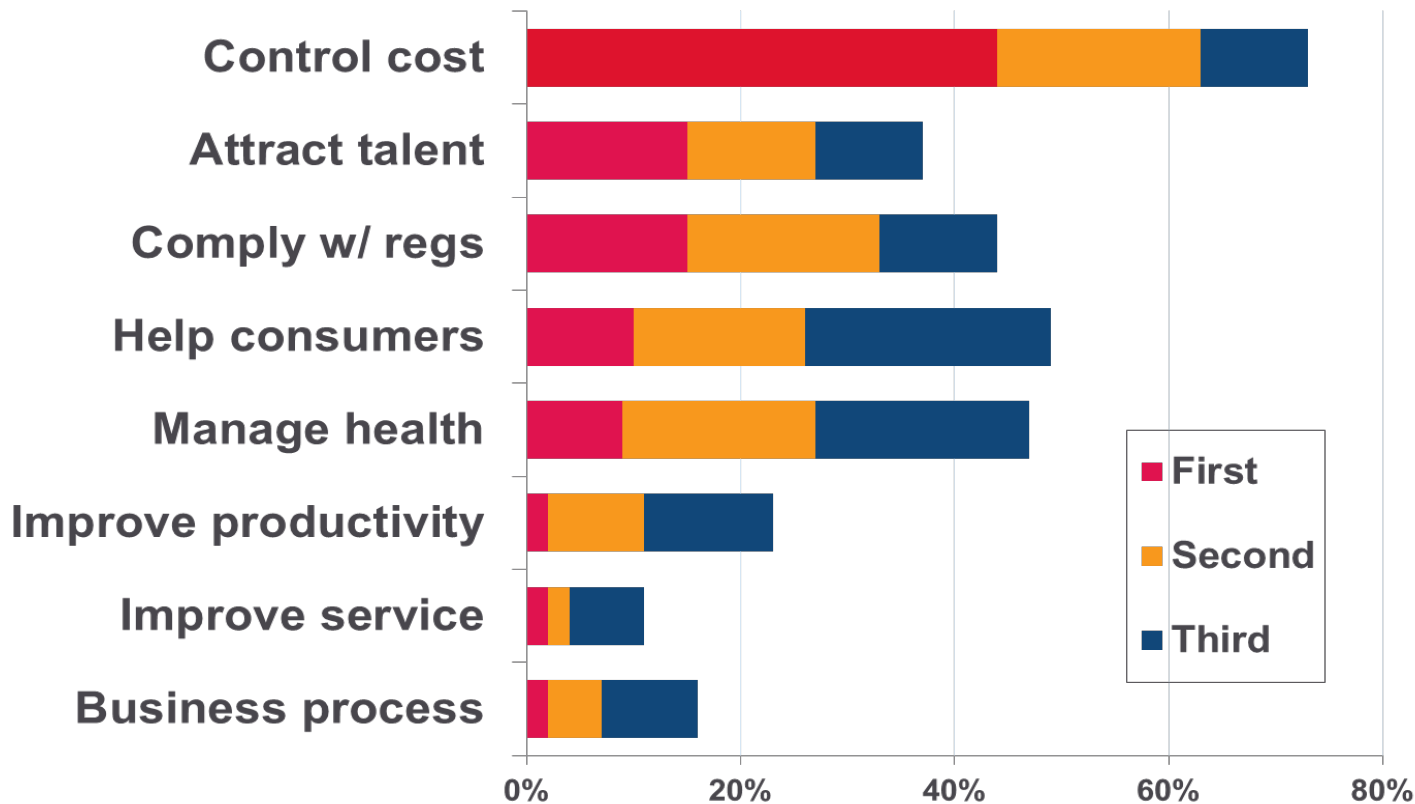
view health benefits as an **important tool** to achieving strategic goals:

- attracting, retaining, and engaging **talent**
- helping employees become better **health care consumers**
- helping employees better **manage their health**

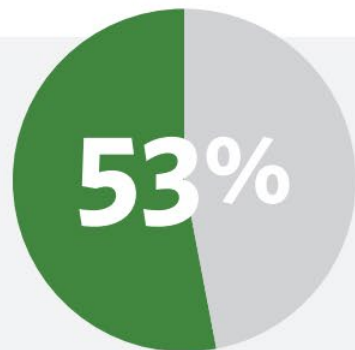
And there's additional value



CFOs' most important goals



And! There's a gap in measurement



say they would be able to make better decisions about benefits if health-related improvements in job performance were **linked to business metrics**

However only
6%
measure the **ROI**
of their benefits



And only
23%
measure **any outcome**



What IBI provides: Tools



BENCHMARKING


Find opportunities for improvement.

Benchmarking is a powerful tool to help you understand where there may be opportunities to improve your disability program relative to specific industry groups.



ABSENCE COST ESTIMATOR

Understand the total cost of absence in your company.



MEDICATION ADHERENCE SAVINGS CALCULATOR

Estimate potential savings from improving medication adherence

What IBI provides: Peer to Peer Learning Opportunities

July 23

Symposium (Philadelphia)

Data & Analytics Symposium

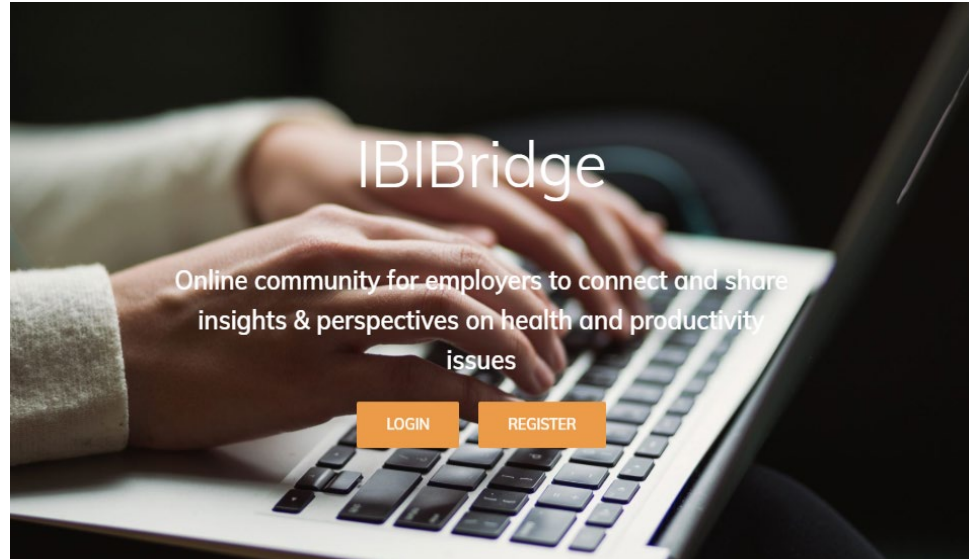
This event is being hosted by The Integrated Benefits Institute and The Greater Philadelphia Business Coalition on Health and will take place July 23 at the Philadelphia Airport Marriott. More details on this event are forthcoming.

September 14-16

Conference (Chicago)

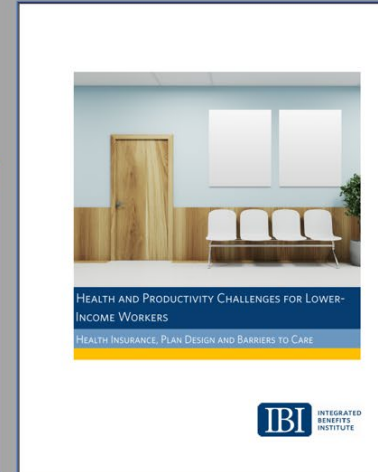
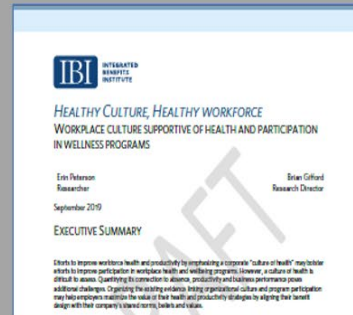
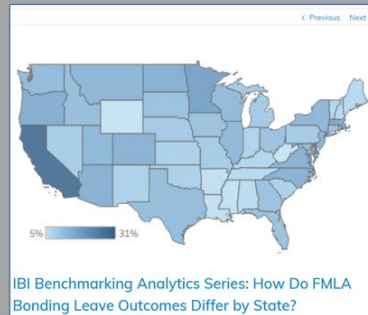
IBI/Conference Board Health and Productivity Forum

The Forum annually convenes more than 500 thought leaders, employers, and their industry partners to explore innovative solutions in managing the “whole picture” of health, wellbeing, productivity and business performance. The Forum will take place this year on September 15-16, 2020 at the Marriott Marquis Chicago with pre-conference workshops beginning in the afternoon of the 14th.



What IBI provides:

Research



IBI's Materials in 2019

Summary Findings

Pain relievers are the most commonly misused prescription medications

1 in 20 employees showed patterns of abuse or dependence

Larger issue is epidemic of pain

3 in 5 employees used prescription pain meds—mostly without abuse or dependence

Prescription pain meds linked to absences

Users absent twice as often as others & appropriate use largest driver of substance-related absence

Guidance to help employers develop effective substance use policies

Why opioids?

How does the opioid crisis impact employers?

- Rise in overdoses and suicides are driving shorter US life expectancy
 - Highest overdose death rates are among 25-54 years old (CDC, November 2018)
 - Rates of overdose are increasing (CDC, 2018)
- Business implications
 - Staffing, safety, lost productivity

- How widespread is substance use among an employed population?
- What is the larger social context for opioid abuse?
 - Appropriate use of pain medications?
 - Use of other substances

Purpose

How big is the problem?

Substances included in this analysis

Medical Legal Illicit	Pain relievers	Tranquilizers	Stimulants	Sedatives
	Alcohol	Tobacco		
	Marijuana*	Cocaine	Methamphetamine†	Heroin†

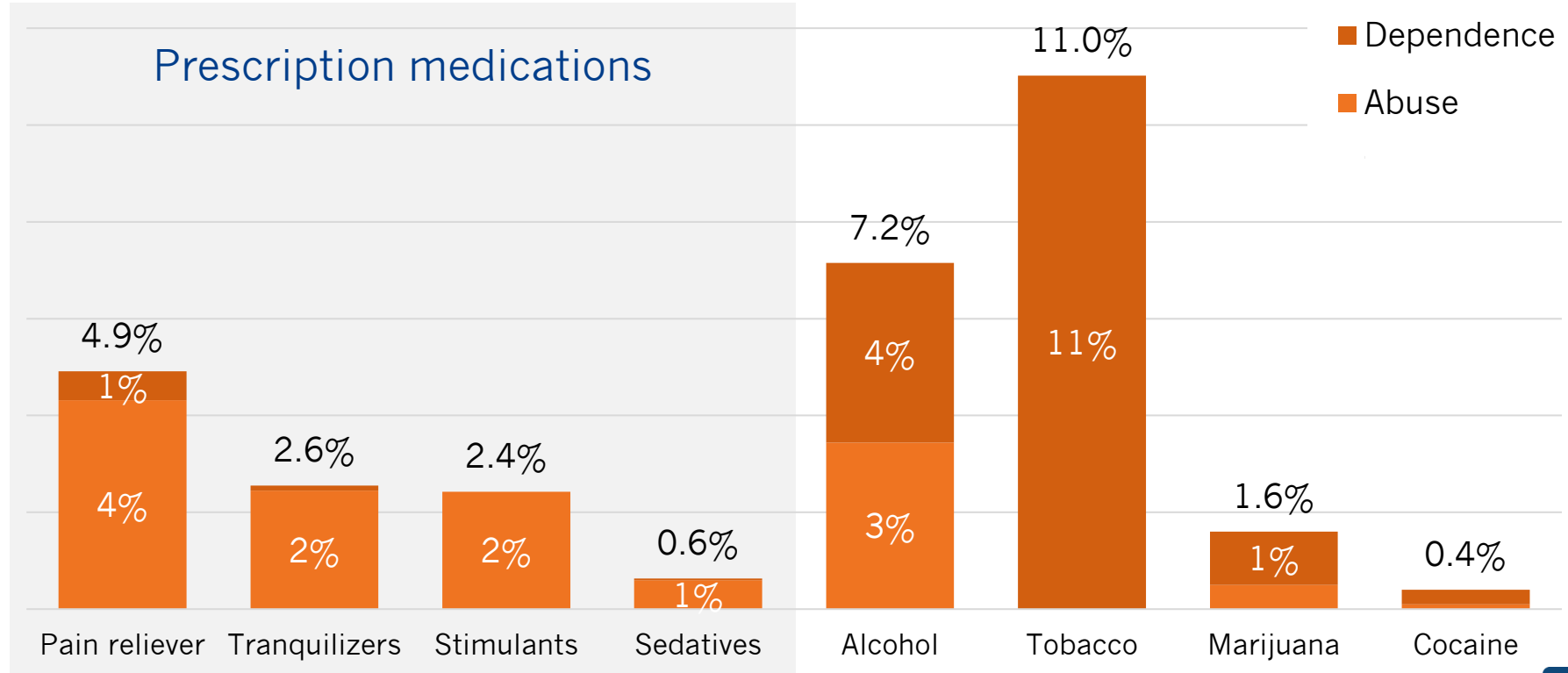
*Although some states have legalized marijuana (AK, CA, CO, MA, ME, MI, NV, OR, VT and WA) and more have legalized the medical use of marijuana (AK, AZ, CT, DE, FL, HI, IL, LA, MD, MN, MO, MT, ND, NH, NJ, NM, NY, OH, OK, PA, RI, UT and WV), this dataset does not allow us to control for the legal status of this substance by state. In addition, marijuana remains a designated illicit substance by the federal government.

† Prevalence of use was less than 1% and therefore not included in these slides

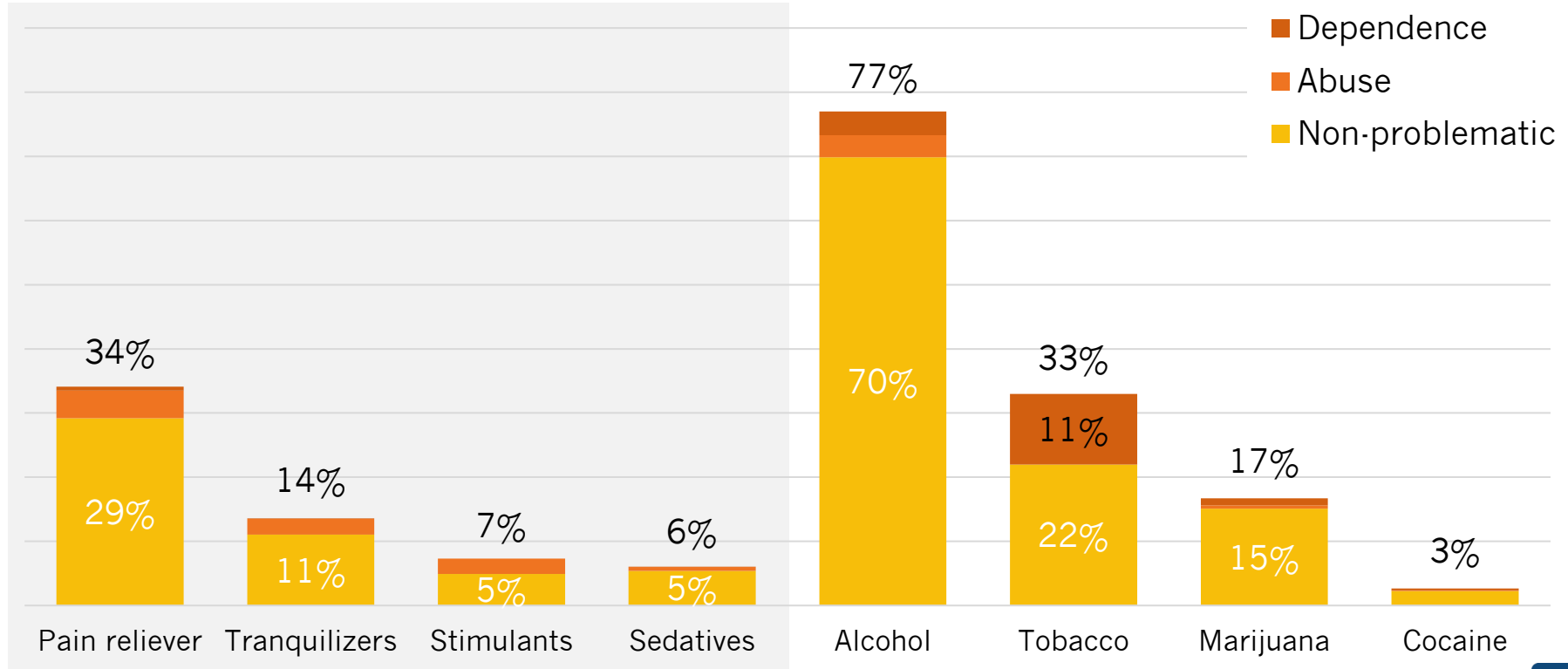
Categorization of Use

No Use	Use					
	Non-Problematic				Problematic	
	Prescribed medical substances	Without behavioral implications			With behavioral implications	
		Legal substances	Medical substances without a prescription	Illicit substances	Abuse	Dependence

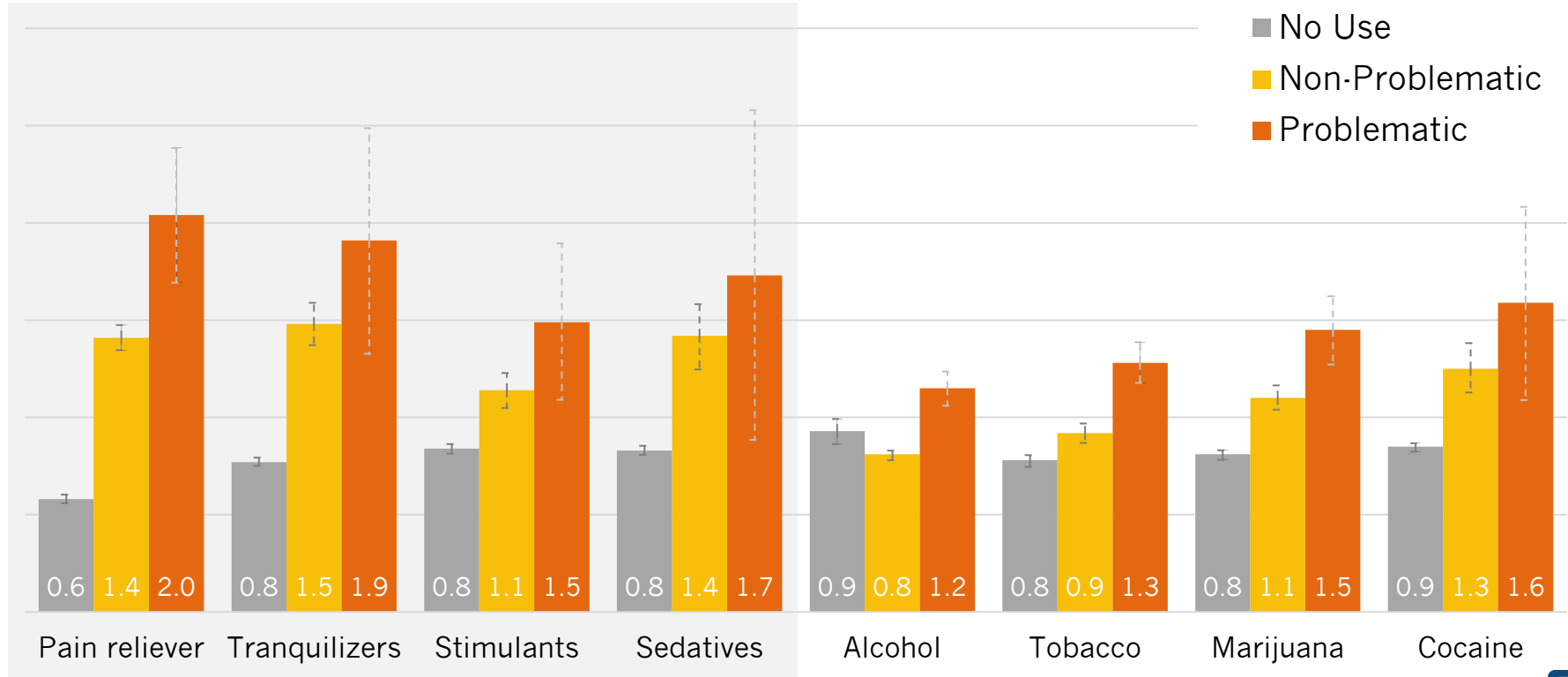
Pain Relievers Are the Most Common Type of Misused Medication



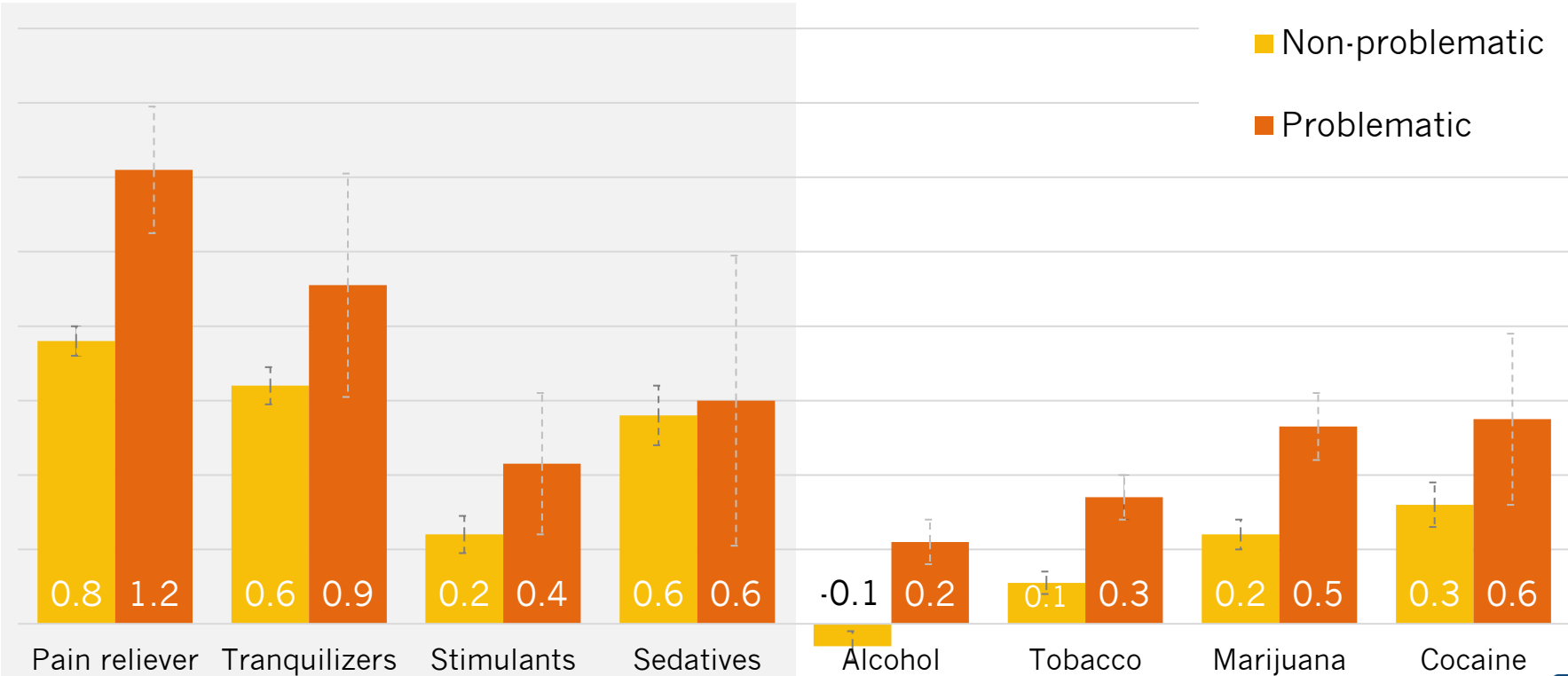
Most Substance Use is Non-problematic



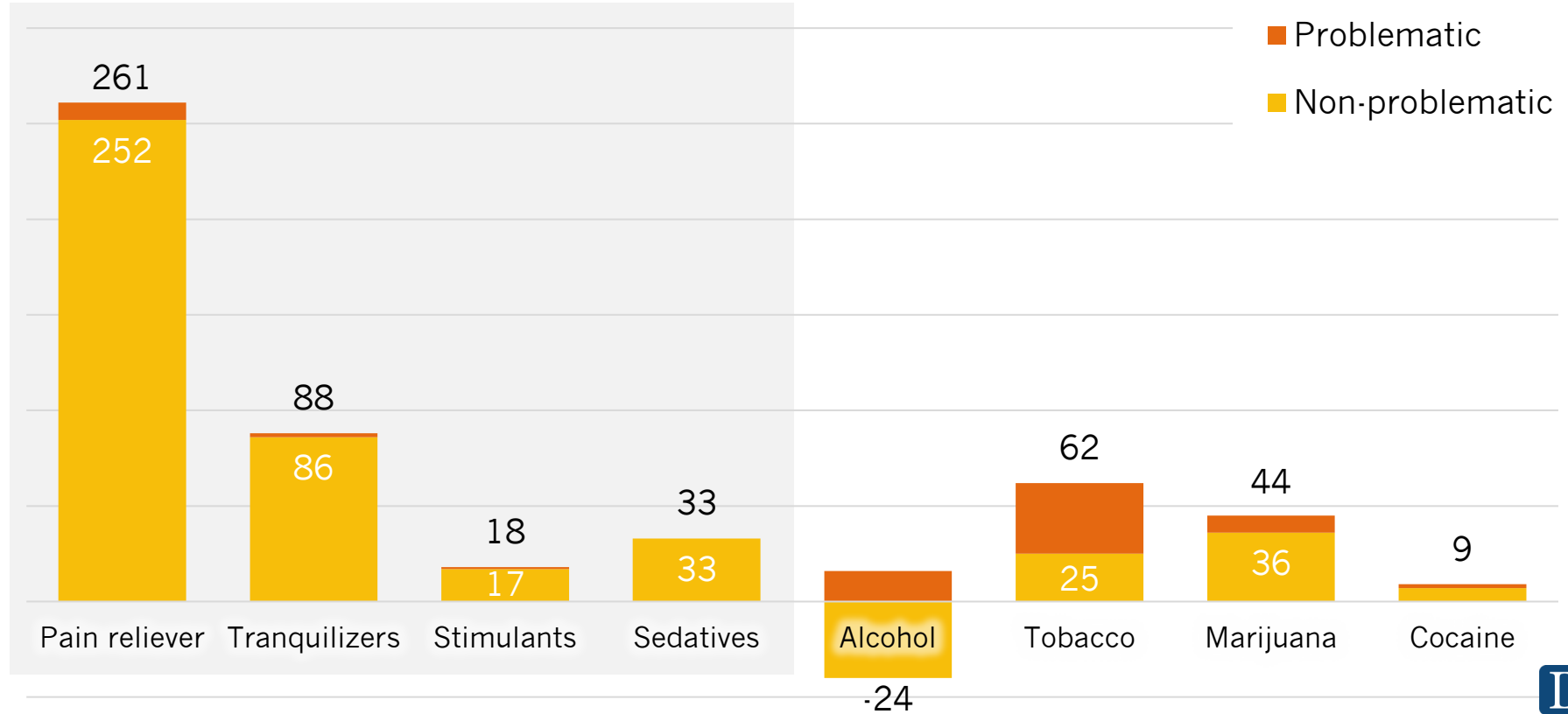
Substance Users Are Absent More Often



Problematic Prescription Pain Users Have The Most Absences



The Appropriate Use of Prescription Pain Medications Is the Largest Driver of Lost Work Time

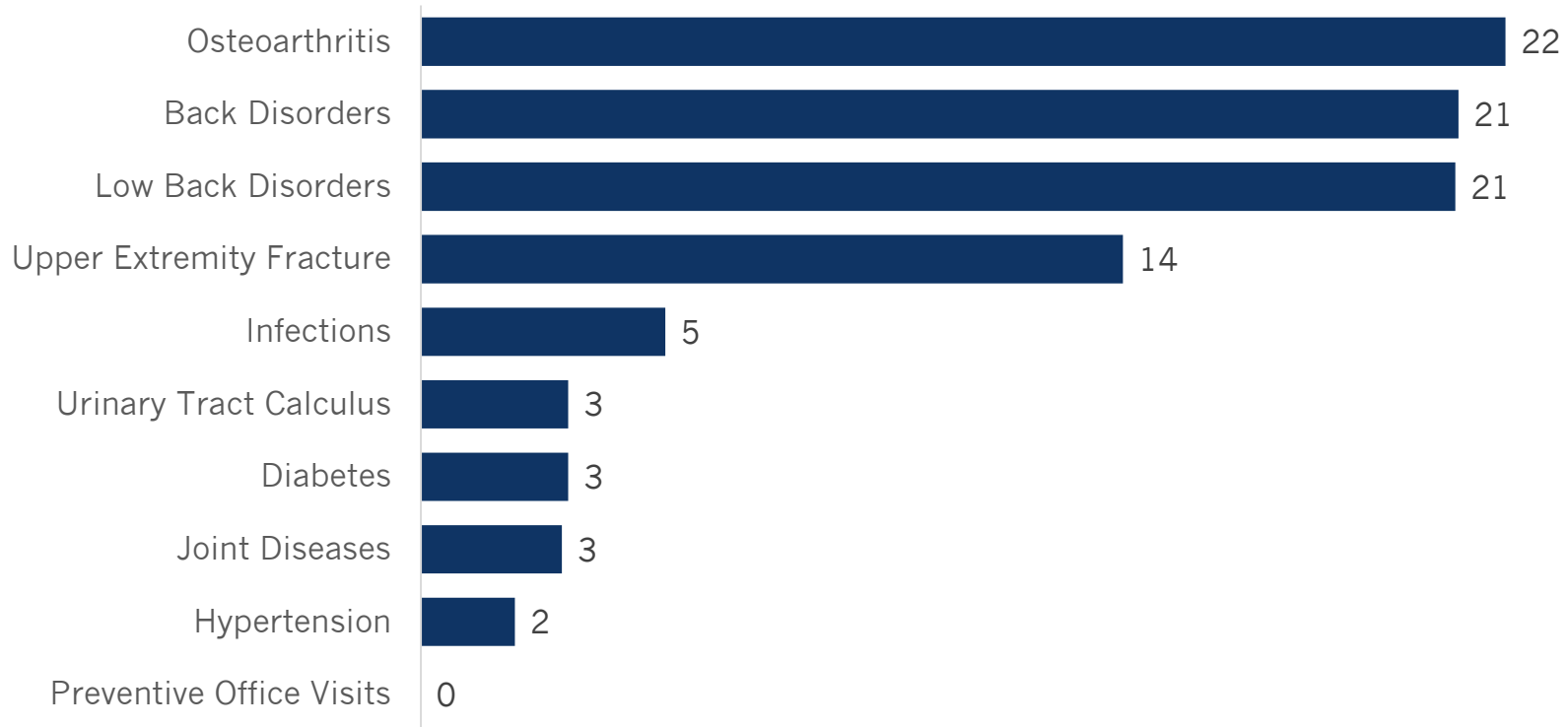


And in Kentucky?

Top 10 Conditions for Opioid Use in Kentucky (2017)

Rank	Condition
1	Low Back Disorders
2	Osteoarthritis
3	Preventive Office Visits
4	Joint Diseases (eg Arthritis)
5	Diabetes
6	Infections
7	Back Disorders (Not Low Back)
8	Urinary Tract Calculus (blockage)
9	Hypertension (High Blood Pressure)
10	Upper Extremity (Hand & Arm) Fracture

More employees with osteoarthritis and back disorders enter the disability leave system



Implications

Use of prescription
pain medications
reflects a larger pain
management issue

What can employers do?

Guidance for Employers

Understand your risks

Raise awareness in your workforce

Leverage partners' expertise

Prevent pain management from becoming abuse

Ensure employees are treated for substance use disorders

Understand Your Risks



Health Risk Assessments

- Identify conditions, medications with abuse potential
- Include: alcohol, tobacco, illicit drugs; painful conditions
- Ensure confidentiality – consider partnering with 3rd party



Track Spending and Trends

- For prescriptions with abuse potential, including opioids
- Identify possible drug-seeking behaviors, high opioid prescribers
- Check opioid prescriptions follow guidelines

Raise Awareness



Training & Education

- Identify problematic behavior
- Sensitivity training
- Destigmatize substance abuse



Employee Resources

- Time-off policies – FMLA, intermittent leave
- Services – EAP, detox programs, rehabilitation, treatment, opioid alternatives for pain



Drug-Free Policy

- Include specific references to opioids and other substances with potential for abuse
- Outline consequences of violation

Prevent Abuse



Injuries

- Identify and respond immediately
- Access to treatment
- Early referrals to pain management specialists



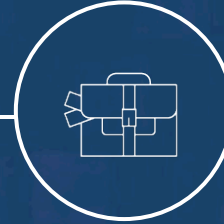
Risk

- Identify injured employees
- Risk factors for developing chronic pain
- Physical, cognitive, emotional factors



Coordination

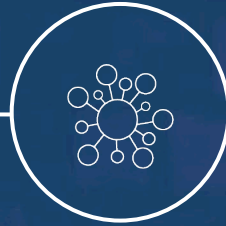
- Between employee, treatment providers, case managers, pharmacy benefits managers, HR



Strategies

- Return-to work
- Graduated returns, flexible schedules, temporary job reassignment, work accommodations

Ensure Evidence Based Treatment



Evidence Based Treatments

- Cognitive behavioral therapy
- Motivational interviewing
- Brief interventions
- Relapse prevention
- Community reinforcement
- Contingency management
- Pharmacological treatment

Leverage Partners' Expertise



Clinical Experience

- Disability
- Absence management
- Stay-at-work
- Return-to-work



Drug Testing

- Federally certified labs
- Screen for opioids
- Reviewed and approved by an attorney



Regulations

- Health Insurance Portability and Accountability Act
- Americans with Disabilities Act
- Family and Medical Leave Act
- Local sick-leave laws

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Guidance exists to help employers



Thank you!
Questions?

epeterson @ibiweb.org