



TOOLBOX TALK:

OPIOIDS IN THE WORKPLACE AND THE IMPACT ON WORKERS' COMPENSATION

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The proactive role employers can take:

In 2010, more than 38,000 people died of drug overdoses, of which 16,651 were tied to prescription opioids alone or in combination with other prescription medications or alcohol. Overdose deaths from prescription opioids now exceed deaths from both heroin and cocaine combined. Drug overdoses, predominately from opioids, now exceed car crashes as the leading cause of unintentional death.

Opioid prescription medications are both a health and a safety issue in your workplace. These medications are powerful, highly addictive drugs that have the potential to cause impairment, increase the risk of workplace incidents, errors and injury even when taken as prescribed. Prescription painkillers also profoundly increase workers' compensation costs, increase the length of worker disability and increase work time lost.

This prescription painkiller epidemic poses a unique challenge for employers. These are legal drugs prescribed by licensed providers for pain that sometimes is caused by workplace – related injuries. Drug – free Workplace Programs, including the scope of drug testing, the handling of positive results and policies about prescription drug use in the workplace, need to be revisited.

Employers have legitimate legal concerns about privacy, protection of personal medical information and possible violation of the confidential provider-patient relationship. An employee who tests positive for these legal drugs may present a legitimate prescription, and he or she may or may not have a dependency or an addiction problem. However, this employee may still be impaired and putting him or herself and the workplace at risk for injuries, incidents, errors, and more.

A clear, written policy has never been more important. Unlike blood alcohol levels, proving an objective measure of unsafe impairment is difficult. The involvement of legal counsel in tandem with human resources and employee relations is critical to ensure the policy includes protections for risk management, injury prevention liability.

Employee education is a must and employers should address several areas when sharing information with employees about opioid medications. The effects of opioid medications can create serious risks at work. Employees need to be clear about the policy and potential impairment from prescription medications. Making job descriptions available to employees to share with medical providers is helpful. While illegal drugs used to be the focus, it is now important to offer frequent reminders of the prescription drug policy for your workplace.

Employee home safety education is vital and contains four key messages:

Safe Storage – Opioid medications should be stored securely

Safe Disposal – Once an individual is finished taking an opioid painkiller, her or she should seek a

Safe disposal opportunity within the community.

Don't Mix - Opioid medications should not be mixed with alcohol, sedatives, or other Psychotherapeutic medications.

Don't Share- Opioid medications should not be given to or borrowed by friends/relatives.

It is important for managers to be current on their workplace policy for prescription drug use, understanding potential signs of impairment and the updated process and scope of drug testing. Managers should communicate this information regularly with employees during individual and team meetings.

It is in an employer's best interest to identify opioid abuse and to support confidential access to treatment. Employer – sponsored treatment is a cost - effective solution. Replacing an employee costs and employer 25 percent to 200 percent of its annual compensation. These costs do not include the loss of company knowledge, continuity and productivity.

There have been many workplace studies measuring the incident rates of companies before and after implementing drug testing indicate that drug testing is an important safety factor. One of the most prominent of these studies involved the Southern Pacific Railroad. Following the implementation of drug testing, incidents resulting in injuries dropped from 2,234 incidents in the year before drug testing was introduced to just 322 after drug-testing. This represents a 71.2 percent decrease in incidents.

Research on the impact of opioid medications in workers' compensation is nothing short of staggering. National Council on Compensation Insurance's study of prescription drugs in workers' compensation confirms that prescription painkillers' cost per claim continues to grow. The number of painkillers per claim is increasing as well.

Part of the key findings from the Workers' Compensation Research in 2012 study of longer-term use of opioids found that narcotic painkillers were frequently used by injured workers for pain relief. More than three or four injured workers who had more than seven days of lost time and no surgery took prescription pain medications for pain relief.

The Hopkins-Accident Research Fund Study in 2012 found that workers prescribed even one opioid had average total claim costs more than three times greater than claimants with similar claims who didn't get opioids.

In conclusion it is evident prescription opioid epidemic – overprescribing, misuse, abuse, and overdose is impacting the workplace. Evidence demonstrates serious risk to employees and substantial costs for employers.

Employers committed to safe and healthy workplaces have a responsibility to address the opioid epidemic. These employers can do so with strong employee policies, alliances with health benefits and workers' compensation plan providers, education, expanded drug – free workplace testing and access to treatment programs.

References

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