



Surgeon General Calls on Employers to Combat Opioid Epidemic

Many employers can design plans to reduce addiction risks

By Stephen Miller, CEBS

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Surgeon General Jerome Adams called on employers to "step up" to combat the opioid epidemic.

"As employers, you already understand that the health of your employees has an impact on your bottom line," said Adams, an anesthesiologist who was confirmed by the Senate as the 20th U.S. surgeon general last August. "My challenge to you is to think about how you can impact health beyond the walls of your office, beyond the factory."

Adams spoke April 19 in Washington, D.C., at Business Health Agenda 2018, a conference sponsored by the National Business Group on Health (NBGH), an association of large employers.

Addiction is a public health crisis, Adams noted, with an estimated 2.1 million people in the U.S. struggling with an opioid-use condition.

"There's a person dying of an opioid overdose every 12 and a half minutes," he said. "Four out of five people who use heroin started with a prescription opioid."

While these drugs can be helpful for a short time, they pose serious addiction risks. "For most people, frankly, the risks outweigh the benefits," Adams said.

More than a third of people with an opioid prescription don't realize they're taking an opioid to treat pain, he pointed out. Common opioids are OxyContin (a brand of oxycodone), Vicodin (which contains hydrocodone), morphine and methadone.

"There are levers that you, as employers, have through your plan administration to help people understand what an opioid is. You have control over a lot of prescribing, and you can say [to health providers], 'If you're going to prescribe opioids to my employees, you better tell them that they're taking an opioid and let them know what the dangers are.'"

Turn Off the Spigot

Employers, especially large self-insured organizations, can ensure that health providers are following Centers for Disease Control and Prevention (CDC) guidelines, Adams said. "Use your levers on the health care deliver side."

Dental prescriptions for opioids is the first step for many toward addiction, he pointed out. "If you tell your employees and their families that you're not going to pay for more than 10 pills if they go to the dentist, that will have a quicker impact than anything I can do as surgeon general to educate the prescribers in the community."

Or, implement a three-day limit on opioid prescriptions for initial pain treatment, given that the CDC found that the probability of addiction increases on day four. A three-day limit on opioids has just become the law in Florida (<http://www.governing.com/topics/health-human-services/tns-opioids-pills-florida-scott.html>).

[SHRM members-only HR Q&A: What laws should companies be aware of when implementing a drug testing program? (www.shrm.org/resourcesandtools/tools-and-samples/hr-qa/pages/ourcompany'spresidentwouldliketoimplementadrug-testingprogramwhataresomeguidelines.aspx)]

Promote Best Practices

"It's important that you know what successful treatment programs look like," Adams said. For instance, best-practice providers are offering:

- Personalized diagnosis, assessment and treatment planning.
- Access to Food and Drug Administration-approved non-opioid medications.
- Behavioral health interventions delivered by trained professionals.
- Long-term disease management coaching.
- Coordinated care for co-existing diseases and disorders.
- Support services such as mutual-aid groups that can provide emotional and practical support for recovery.

"I've heard feedback from employers that don't want to pay for fly-by-night programs that are not evidence-based. We're working to help you understand what *is* evidence-based, and I'm asking that you work with me to make sure once you know the criteria that you pay for [effective treatments] for your employees," Adams said.

Also, identify pain-management centers of excellence (<https://www.practicalpainmanagement.com/treatments/centers-excellence-pain-management-past-present-future-trends>) and "reward people for doing the right thing by incentivizing providers to accept those best practices for alternatives to opioids, such as physical therapy, music therapy and acupuncture, and other modalities that many plans aren't paying for and that aren't packaged in a way that makes them easily accessible," he said.

Reach Out

"Each and every one of you who is an HR director should know someone at your county or state health department, because they're the ones who know what's going on in your communities," Adams said. "They know the risks as well as the programs that can help reverse those trends beyond the levers that you have on the workplace wellness site."

In addition, large employers can help small and medium-size businesses in their communities by sharing practices around what's working and what's not. "Share your data so they understand they can have an impact," Adams said. "Bring them to the table with local social-services providers."

April 28 is National Prescription Drug Take-Back Day, (https://www.deadiversion.usdoj.gov/drug_disposal/takeback/) "and we want you to be a part of it and to help promote it" through employee communications, Adams said. "We want to get these medications off of shelves in homes; we want to get rid of the killer that's in your medicine cabinet."

Stepping Up

NBGH's *Large Employers' 2018 Health Care Strategy and Plan Design Survey* found that the vast majority of big employers (80 percent) are concerned about abuse of prescription opioids and that many are taking steps to address the opioid epidemic. The survey was conducted last year from May 22 to June 2.

(Click on graphic to view in a separate window.)

Combating Opioid Abuse

Large U.S. employers are taking steps to counter the abuse of prescription opioids.

Altered health plans to restrict use of prescription opioids

30%

Added programs to manage prescription opioid use

21%

Source: National Business Group on Health's *Large Employers' 2018 Health Care Strategy and Plan Design Survey*.

(https://cdn.shrm.org/image/upload/v1/Benefits/17-1595_Opiod_Abuse_drjnge?_ga=2.265987724.2021460664.1524498069-2009563368.1521131016)

"The opioid crisis is a growing concern among large employers, and with good reason," said Brian Marcotte, NBGH president and CEO.

"The misuse and abuse of opioids could negatively impact employee productivity, workplace costs, the availability of labor, absenteeism and disability costs, workers' compensation claims, as well as overall medical expenses."

"Companies incur significant financial and legal risks, such as an increased use of ER services, hospitalizations, related medical costs, and more workers' comp claims," due to opioid use, Linda Keller, employee benefits practice leader for Hub International, a Chicago-based benefits and insurance broker, wrote last October on The SHRM Blog (<https://blog.shrm.org/blog/take-steps-to-protect-your-company-from-employee-opioid-abuse>). "The cost per claim as a result of opioid abuse continues to grow, as well as the number of painkillers per claim."

Related SHRM Articles:

Employers Urged to Stock Opioid Overdose Antidote (www.shrm.org/ResourcesAndTools/legal-and-compliance/employment-law/Pages/employers-Naloxone.aspx), *SHRM Online* Employment Law, April 2018

Employers Take Steps to Address Opioid Crisis (www.shrm.org/ResourcesAndTools/hr-topics/benefits/pages/steps-to-address-opioid-crisis.aspx), *SHRM Online* Benefits, November 2017

Take Steps to Protect your Company from Employee Opioid Abuse (<https://blog.shrm.org/blog/take-steps-to-protect-your-company-from-employee-opioid-abuse>), The SHRM Blog, November 2017

Combating the Prescription Drug Crisis (www.shrm.org/hr-today/news/hr-magazine/0316/pages/combating-the-prescription-drug-crisis.asp), *HR Magazine*, October 2017

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