Addiction and abuse of powerful pain killers, known as opioids, has reached alarming levels in the United States as a result of overprescribing and illegal street sales of these drugs. The American Medical Association has characterized the opioid crisis as an epidemic.

The addiction to and abuse of these pain killers, along with illicit synthetic opioids such as fentanyl, contributed to an estimated 72,000 drug-overdose deaths in 2017, according to the Centers for Disease Control and Prevention. Additionally, this epidemic has caused thousands of American families and individuals to confront disruptive financial and emotional hardships.

While much of the media coverage surrounding opioids has focused on factors that have led to the epidemic, personal tragedies and the effect the crisis is having on public resources, its impact in the workplace has not received much attention or resources.

Many employers, however, are affected by the epidemic. A 2017 National Safety Council survey found that 71 percent of employers reported the opioid crisis affects their workers, managers and resources. However, only 19 percent said they were prepared to deal with employees addicted to or abusing opioids.

To help remedy this important workforce issue in the Greater Baltimore region and Maryland, the Greater Baltimore Committee’s Health Care Committee has developed a set of guidelines for employers. The recommendations are meant to ensure that employers have policies and insurance coverage in place to help prevent and address drug addiction and that affected employees receive proper medical treatment for themselves or a family member.

The Health Care Committee, which studied the issue and related best practices, encourages employers to view opioid addiction as a medical condition, not a criminal act, and to help workers receive proper treatment so they can succeed as productive employees. This requires the employer to work proactively, but confidentially, to provide the needed assistance.

“The key to recovery is support and compassion. Patients in pain and patients with a substance use disorder need comprehensive treatment, not judgment.”

- Patrice A. Harris, M.D., M.A., Chair, American Medical Association Opioid Task Force
HOW EMPLOYERS CAN COMBAT THE OPIOID EPIDEMIC

Have a clear, written drug-free workplace policy and enforce it with approved testing performed by a certified lab.

Encourage employees to safely dispose of unused medications. Work with local law enforcement to host a disposal day.

Educate supervisors on the signs of addiction and non-judgmental approaches to encourage available treatment in the context of state and federal law.

Ensure that your employee health care plan covers high quality mental health benefits and employee assistance programs.

Educate employees and empower them with information on the effects of opioids, when to use them, alternative pain relief options and how to talk to their health care provider before consuming the drugs for treatment.

Evaluate the members of workers’ compensation physician panels and require that panel members have a certification of education on the use of alternative treatment options for the treatment of pain.

Require evidence-based, safe prescribing guidelines from your Pharmacy Benefits Manager (PBM) or limit initial prescriptions without prior approval.

Establish drug management programs to restrict high users or those suspected of doctor shopping to a single pharmacy or prescriber as allowed by state or federal law.

Require that the PBM supply data on high users and extreme prescribers of high-risk drugs, as allowed by state or federal law.

Educate employees on the safe storage of opioids, the danger of mixing drugs and the risks of sharing drugs.

Protect confidentiality in all interactions.
Opioid-related Insurance Policies

Insurance policies can help prevent individuals from developing opioid use disorders and assist those with opioid use disorders to access evidence-based treatment.

Employers with self-insured employee health plans should incorporate the strongest benefits for prevention and treatment of opioid use disorders in health and workers’ compensation plans.

By providing plans that conform to the best practices listed below, employers can better protect the well-being of their employees and help establish these practices as an expectation for all insurers and pharmacy benefit managers.

Best Practices for Health and Workers’ Compensation Insurance Plans:

Prevention

- Limit first-time opioid analgesic prescriptions for non-cancer, non-end-of-life pain to five days or as recommended by current Centers for Disease Control and Prevention guidelines.
- Require prior authorization for high-dose opioid analgesic prescriptions (e.g., > 90 morphine milligram equivalents per day).
- Establish a utilization management program for patients that are prescribed opioids for chronic pain.
- Use a drug management program for high-risk patients as appropriate and allowed by state or federal law.
- Monitor prescribing data and intervene with extreme prescribers of high-risk drugs, as allowed by state or federal law.
- Provide coverage for non-opioid pain management, including non-pharmacological options (e.g., physical therapy, acupuncture, etc.) and pharmacological options (e.g., Lidocaine, NSAIDs, Lyrica, EXPAREL (liposomal bupivacaine)).

Treatment

- Provide coverage for all three FDA-approved medications (methadone, buprenorphine and naltrexone) for the treatment of opioid use disorder with no prior authorization requirements, duration limits or dosage limits.
- Waive prescription co-pays for at least one formulation of naloxone and provide coverage for opiate reversal medications.
- Provide and encourage medication assisted treatment in intensive outpatient programs while making residential treatment centers available as appropriate.