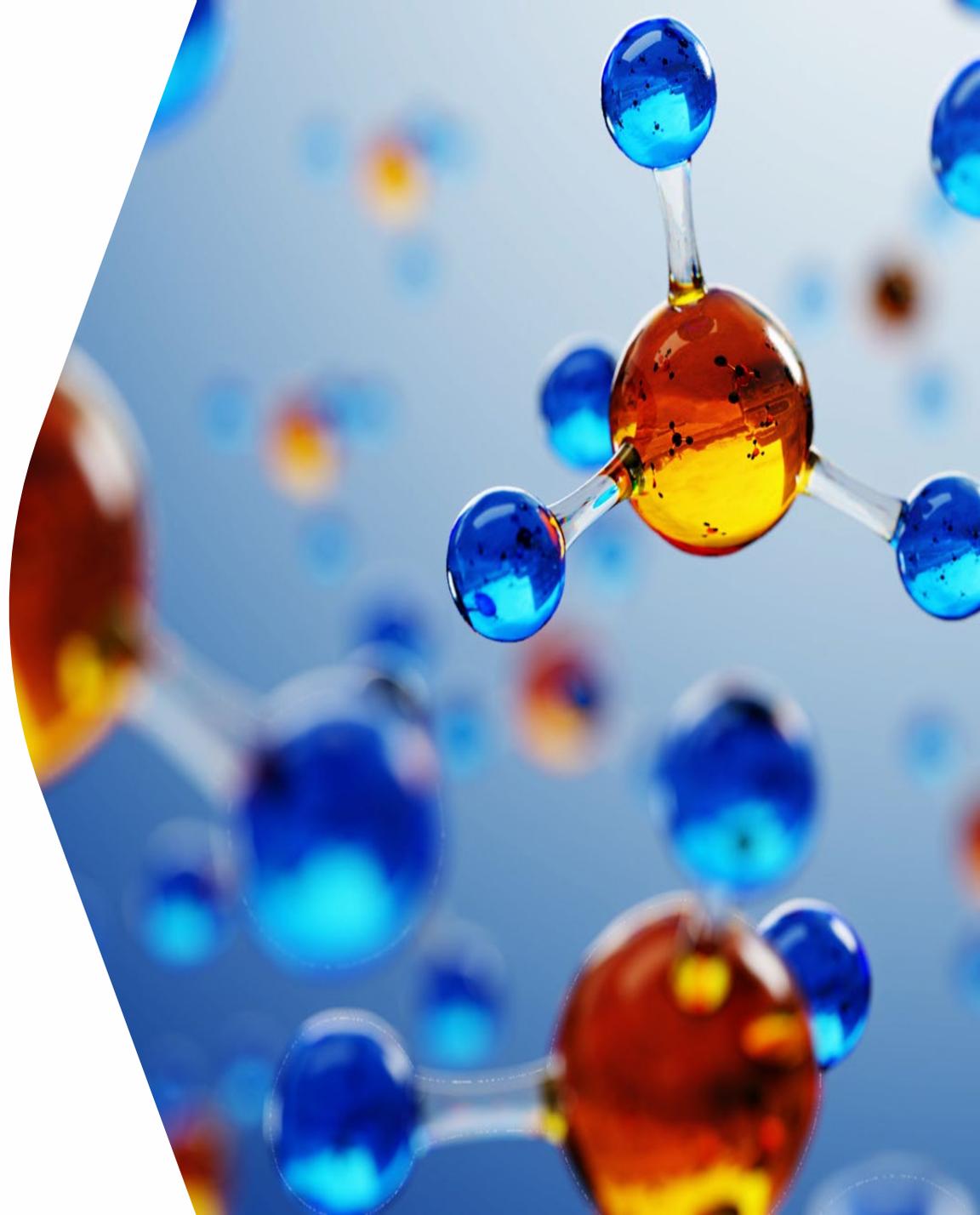


Cost of Addiction in the Workplace

October 8, 2020



Introduction



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Hazelden Betty Ford Foundation

Hazelden Betty Ford Foundation

- The Hazelden Betty Ford Foundation is a force of healing and hope for individuals, families and communities affected by addiction to alcohol and other drugs.
- As the nation's leading nonprofit provider of comprehensive inpatient and outpatient treatment for adults and youth, the Foundation has 17 locations nationwide and collaborates with an expansive network throughout health care.
- With a legacy that began in 1949 and includes the 1982 founding of the Betty Ford Center, the Foundation today also encompasses a graduate school of addiction studies, a publishing division, an addiction research center, recovery advocacy and thought leadership, professional and medical education programs, school-based prevention resources and a specialized program for children who grow up in families with addiction.

Objectives

- Stigma and its impact on how workplaces address substance use
- The costs of addiction to the workplace
- Strategies employers are utilizing to improve access, reduce costs and manage risk
- Share knowledge and data to help you and your organizations

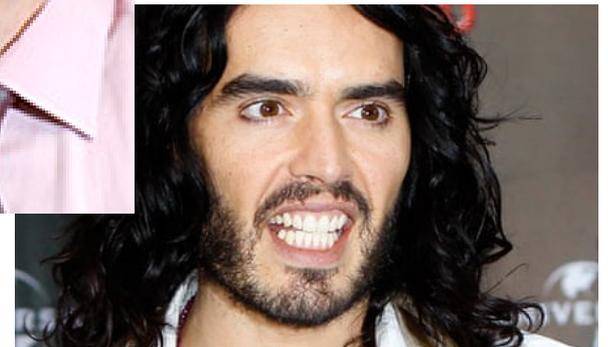
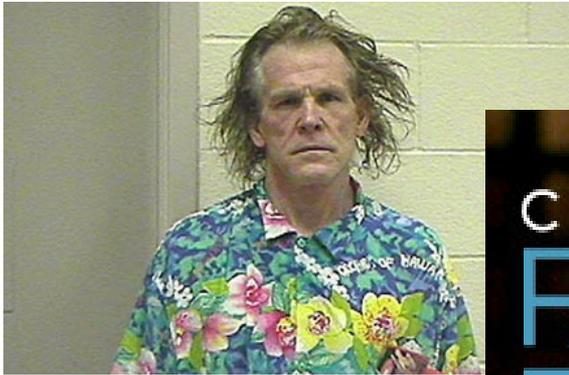
Stigma

Who do you think of when you picture an alcoholic or drug addict?

Homeless?



Celebrities?



Workplace?



Family?



Addiction Affects Everyone

Regardless of....

- Education
- Profession
- Wealth/Power
- Geographic location
- Religion
- Political affiliation



The size of the problem

- 8% of the population over the age of 12 needs treatment for alcohol dependence
- 4% of the population is addicted to drugs
- Over 24 million people need treatment
- Impact over 75 million family members

Source: SAMHSA [Alcohol Treatment: Need, Utilization, and Barriers](#)

This is not a new problem



...and neither are the bad decisions



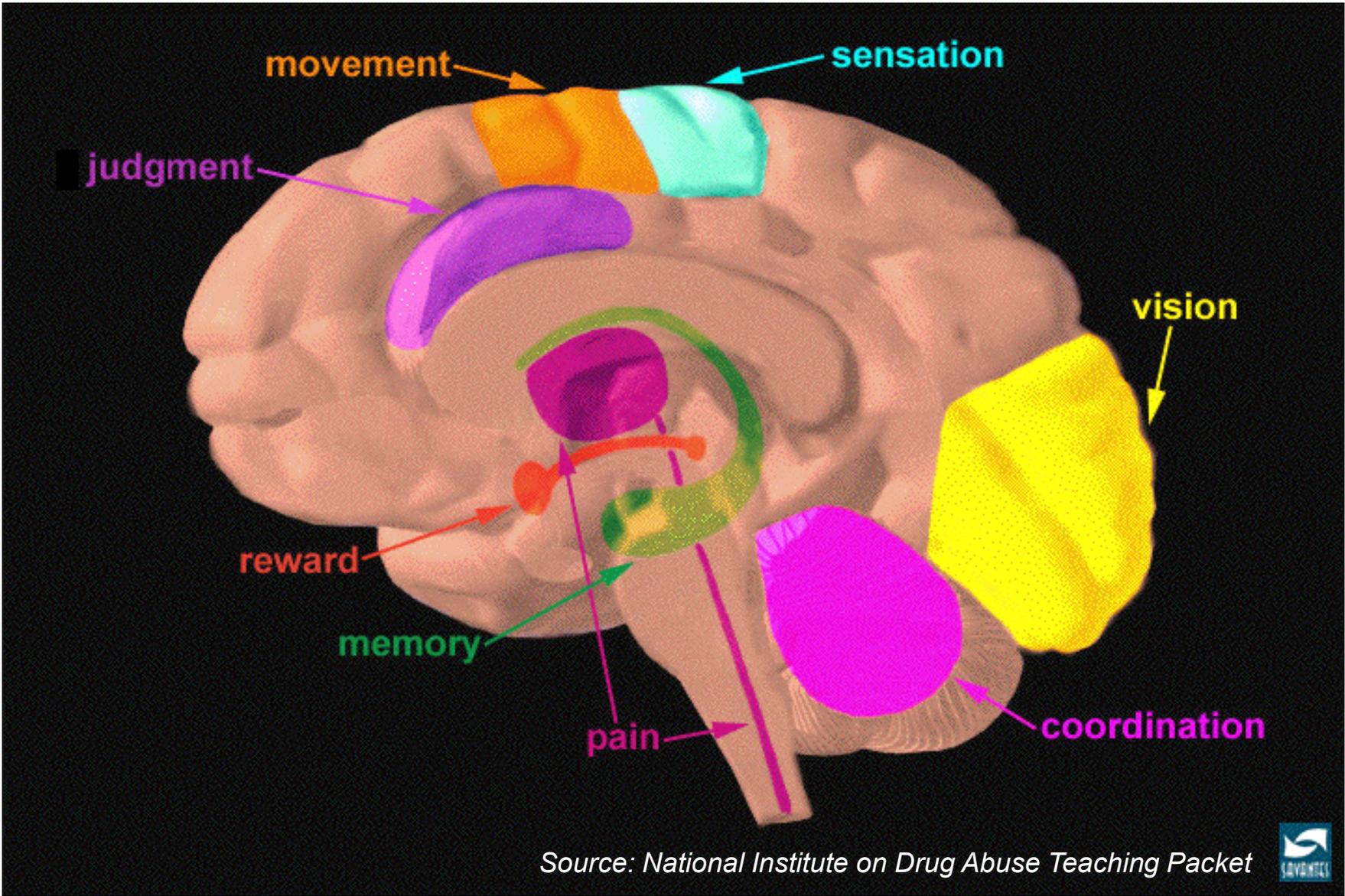
Why do we use alcohol and other drugs?

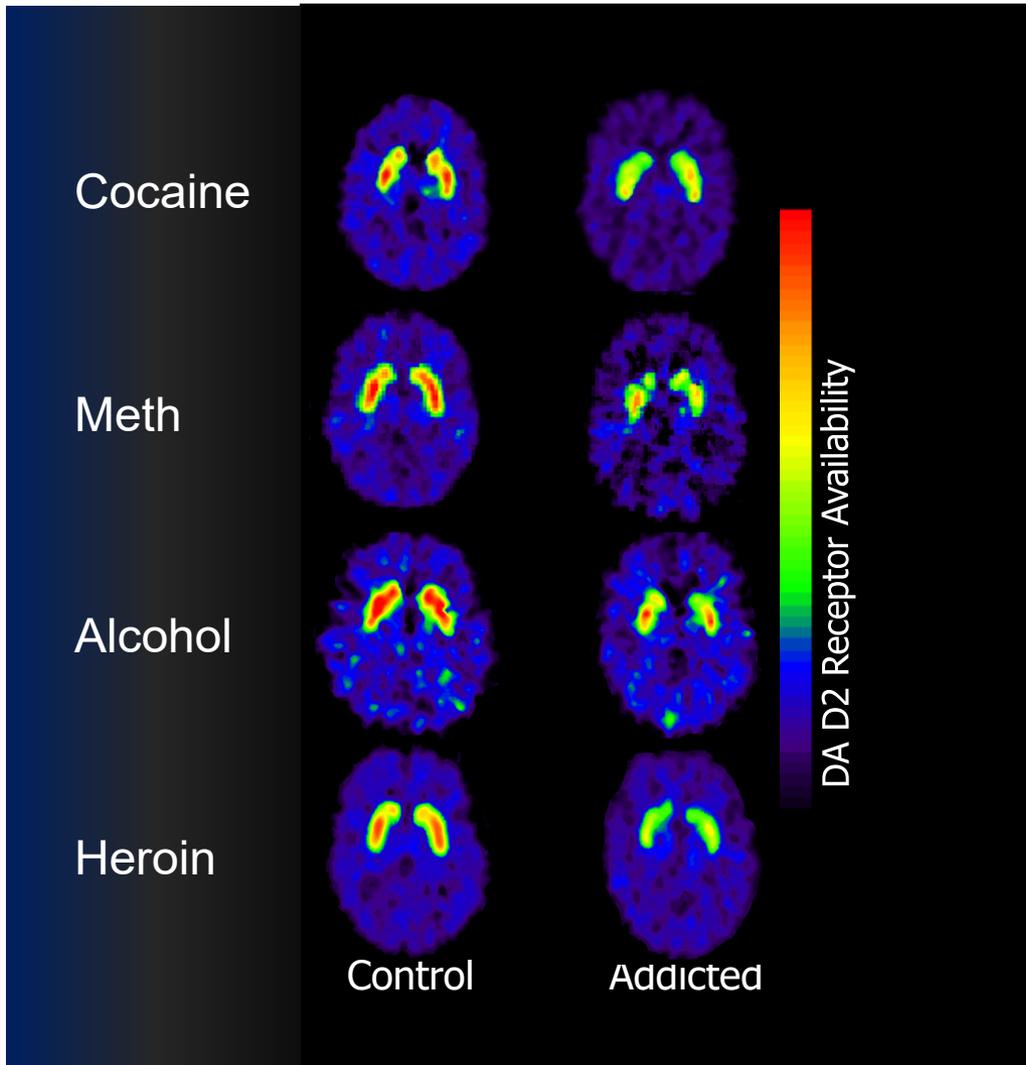
A major reason people take a drug is they like what it does to their brains



Addiction is a chronic illness

- 1956 AMA recognized addiction as a disease and further defined it as brain disease
- Studies found that the excessive intake of alcohol and/or drugs change the brain chemistry that controls rational thought and behavior





Dopamine D2 Receptors are Lower in Addiction

Adapted from Volkow et al., Neurobiology of Learning and Memory 78: 610-624, 2002.

Addiction is a chronic and progressive illness

Stages:

1. Control of starting and stopping
2. Control of starting but loss of control of stopping
3. Loss of any control

Case example—Mount Prospect IL

- Authorities later said the driver's blood-alcohol level was nearly three times the legal limit when she dropped off her 45 students from school
- Bus driver allowed to work despite suspicions of drinking by co-workers and supervisors



Addiction in the Workplace

- Most people who abuse alcohol or illicit drugs are employed.
- 76 percent of illicit drug users are employed either full or part-time.
- Of the nearly 43 million adult binge drinkers, 81 percent are employed either full- or part-time
- Of the 12.4 million heavy drinkers, 80 percent are employed.

Positive tests and deaths are increasing

- Data from Quest Laboratories
- During the first few months of 2020, drug deaths increased by about 13%
- The rate of workforce drug positivity hit a sixteen-year high in 2019
 - Increases: **marijuana**, cocaine & methamphetamine
 - Decrease: opiates
- Retail, Accommodation and Food Service industries—highest positivity rates

Source: EHS Today

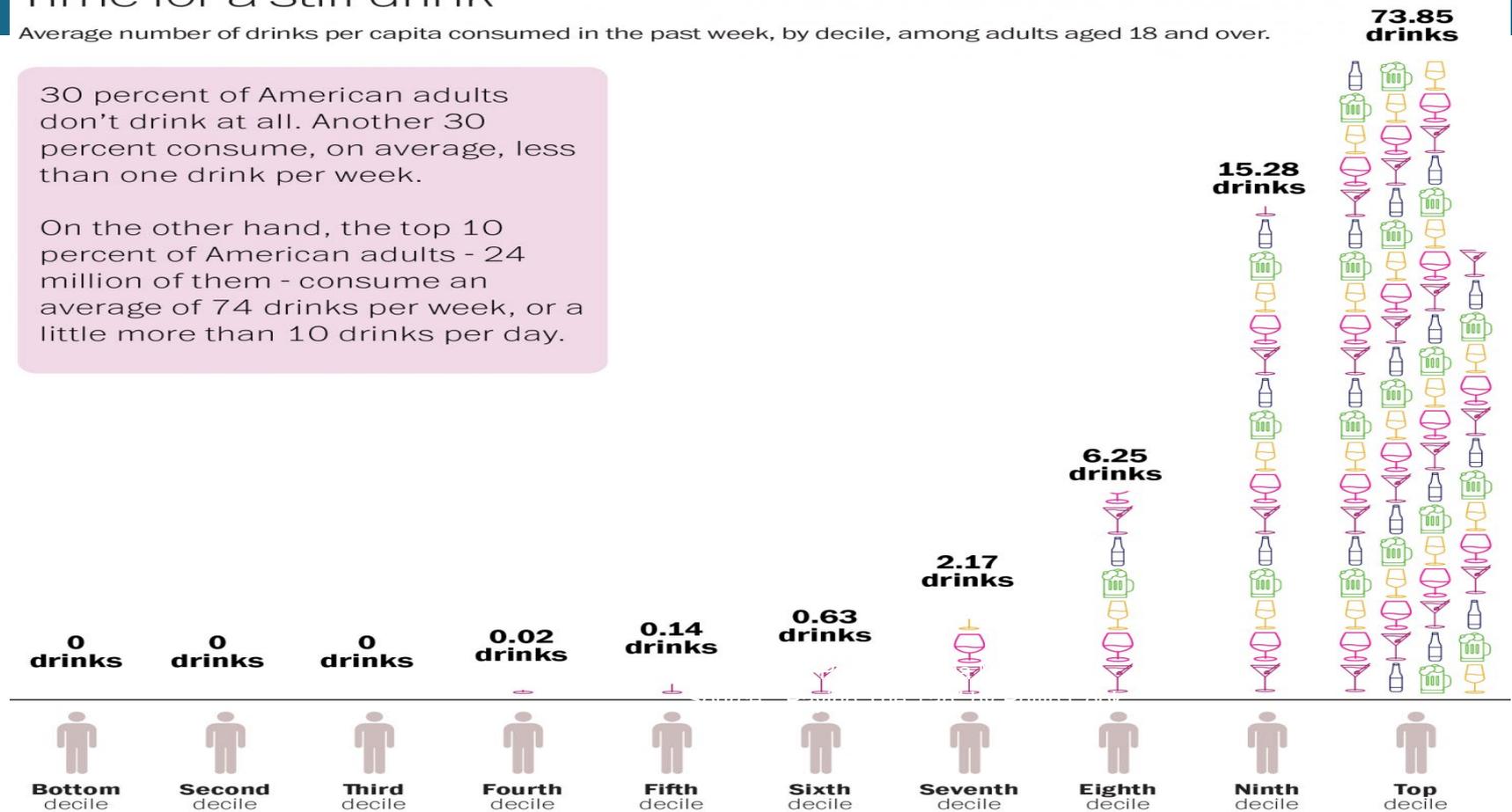
Not all use is the same

Time for a stiff drink

Average number of drinks per capita consumed in the past week, by decile, among adults aged 18 and over.

30 percent of American adults don't drink at all. Another 30 percent consume, on average, less than one drink per week.

On the other hand, the top 10 percent of American adults - 24 million of them - consume an average of 74 drinks per week, or a little more than 10 drinks per day.



WASHINGTONPOST.COM/WONKBLOG

Source: "Paying the Tab," by Philip J. Cook

Cannabis Users

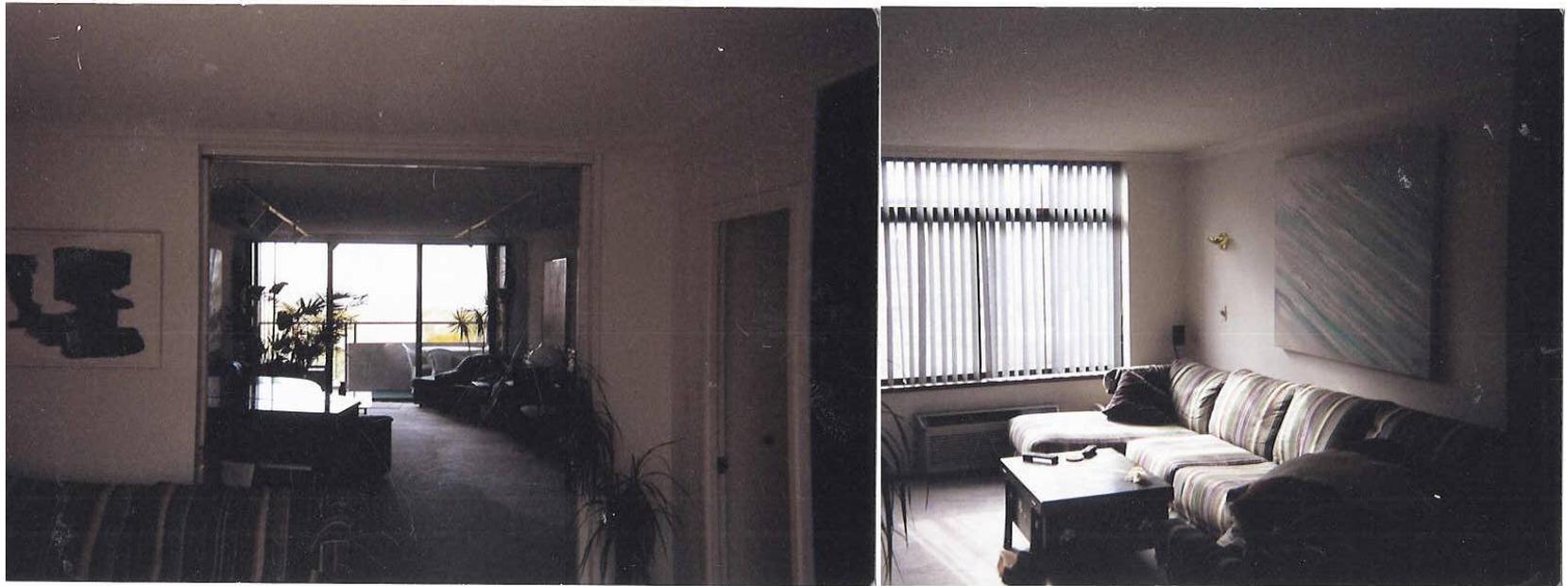
- According to the National Survey on Drug Use and Health, the number of daily cannabis users has increased from approximately three million Americans in 2005 to eight million (about one in five cannabis users) in 2017. By contrast, only one in 15 drinkers consumes alcohol daily.

Marijuana Addiction

- Millions of Americans can pick up, and put down, marijuana relatively easily. But that's not the case for everyone. For some, marijuana use poses a substantial likelihood of developing an addiction.
- The National Institute on Drug Abuse recently released data that suggests that 30 percent of those who use marijuana may have some degree of “marijuana use disorder.”

Impact of Addiction in the Workplace

Before



During



Psychosis



Today



COVID-19 and Alcohol Use



COVID-19 and Alcohol Use

- Retail alcohol sales up 55%
- Online alcohol sales up 243%
- 50% of people working from home drinking during work hours
- Virtual happy hours and cocktail parties
- Isolation, stress
- Many people are at risk

COVID—CDC Statistics

Based on a June survey of U.S. adults the CDC report found a prevalence of:

- Anxiety/depression symptoms: 31%
- Trauma/stressor-related disorder symptoms: 26%
- Started or increased substance use: 13%
 - During the first few months of 2020, drug deaths increased by about 13% compared with last year, attributable partly to social isolation and other disruptions caused by COVID-19.
- Seriously considered suicide: 11%

The Cost to the Workplace

The Cost of Addiction in the Workplace

Total cost \$100 billion per year to business:

- 2 times more unexcused absences
- 3 times more late days
- Responsible for more than 40% of industrial fatalities
- Involved in 25% of the acts of workplace violence
- 5 times more likely to injure themselves or other workers
- 5 times higher workers compensation claims
- 3 times higher health care costs (38% of bed usage)
- 2.5 million Emergency Department visits resulting from medical emergencies involving drug misuse or abuse

The Cost of Addiction-Healthcare

A study conducted at Steelcase Corp. by the University of Michigan determined that for every Steelcase employee who had the following concerns, the company paid more per year in health care costs.

- Smoker: (Baseline) \$5,800
- Hypertension: 15%
- Overweight: 78%
- Excessive alcohol consumption: Over 2 times more expensive (109%)

Substance Use Cost Calculator

(Professional Industry—1000 employees and 1610 dependents)

• PA Professionals

- Number of employees with problem substance use: 114
- Likely number of 1,000 employees' family members who are problem drinkers: 149
- Total number of people struggling 223
- Total healthcare and related costs for problem drinkers \$605,729

• Cost:

- Total healthcare costs \$605,729
- Lost days at work 33

<http://www.alcoholcostcalculator.org/business>

Following 3 areas have the highest % of substance use disorder:

Accommodation and food services 16.9
Construction 14.3
Arts, entertainment and recreation 12.9

Number of People with Chronic Illness

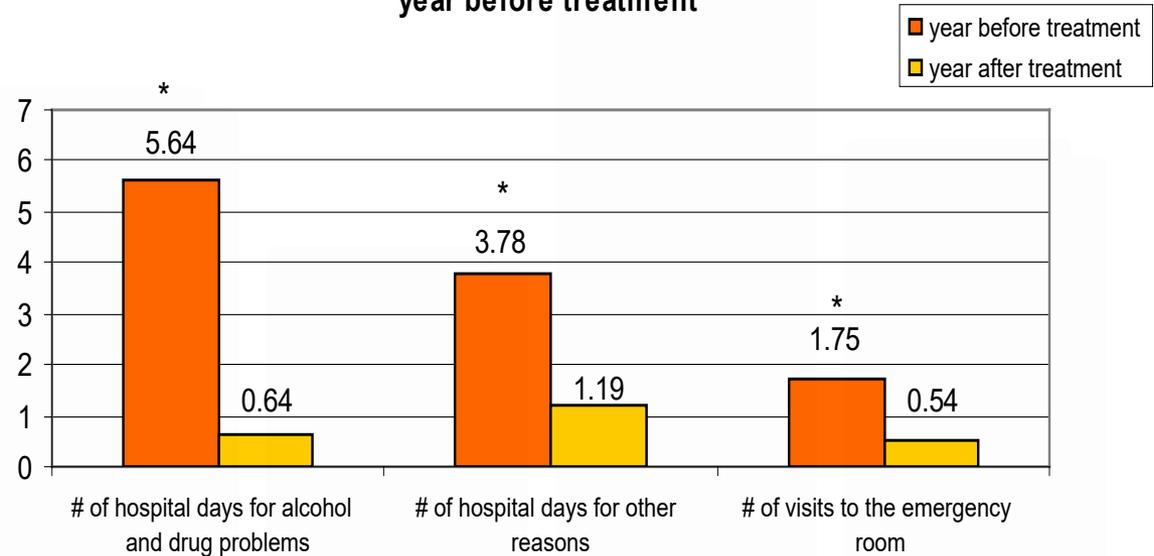
- 60% of adults in US have a chronic health condition
- Diabetes: 16 million Americans diagnosed and 16 million not-yet-diagnosed.
- Heart disease: 22 million adults in the US
- Hypertension: 50 million Americans
- Addiction: 22 million Americans (also consider the multiplier impact of addiction on overall)

<https://www.cdc.gov/chronicdisease/about/index.htm>

Health care cost impact

There is a significant reduction in the use of health care services by patients after substance use treatment.

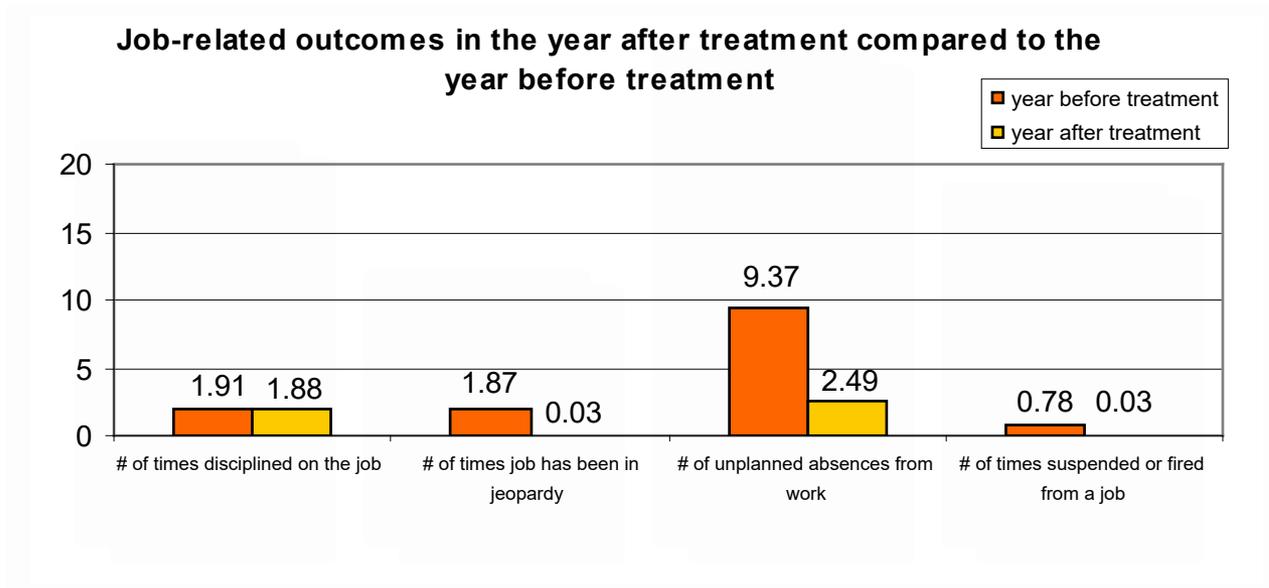
Healthcare-related outcomes in the year after treatment compared to the year before treatment



Hazelden Betty Ford & BCBS Joint research

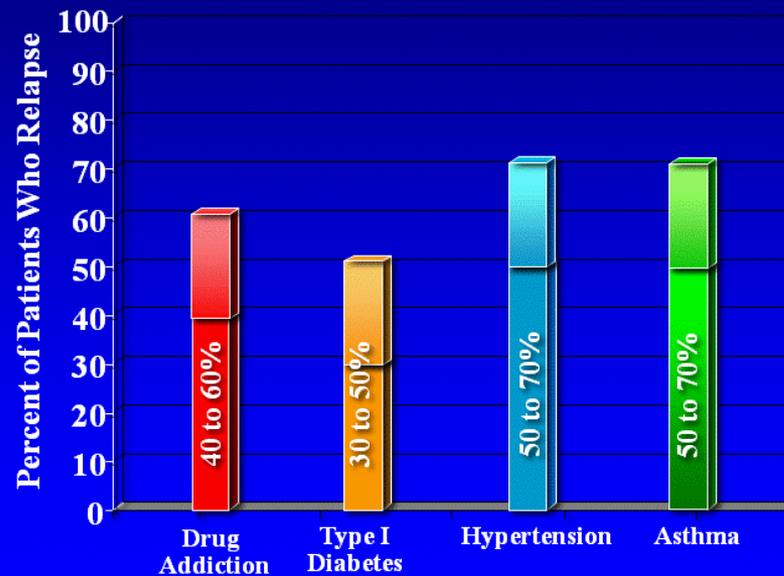
Results: Workplace productivity

A significant decrease in the number of unplanned absences from work (absenteeism), firings, and other job troubles occurred in the year after treatment



Chronic Illness Outcomes

Relapse Rates Are Similar for Drug Addiction & Other Chronic Illnesses



McLellan et al., JAMA, 2000.

NIDA

Lessons from Colorado

- The yearly number of emergency department visits related to marijuana **increased 54 percent** after the legalization of recreational marijuana (2013 compared to 2017).
- The percent of suicide incidents in which toxicology results were positive for marijuana has **increased** from **14 percent** in 2013 to **23 percent** in 2017.

Substance Use in the Workplace

Three dimensions significantly predict substance use in the workplace:

1. Availability of alcohol and/or illicit drugs
2. Extent to which an individual's coworkers use or work while impaired
3. The level of tolerance by coworkers of alcohol and/or drug use or working while impaired/intoxicated.

What can employers do?

1. Employers have to address the way the world is now and not use the same old drug and alcohol policy and recognize that assessing marijuana impairment is much more complicated.
2. Train supervisors on how to make mandatory referrals to EAP/HR (will have to rely now more on behavior)
3. Review corporate culture (parties, entertainment etc.)
4. Support employees returning to work from addiction treatment like any other chronic disease
5. Make sure you have proper insurance coverage with identified **center of excellence partners** and address substance use disorders

What is a Center of Excellence?

- “Formally defined, a center of excellence is a program within a healthcare institution which is assembled to supply an exceptionally high concentration of expertise and related resources centered on a particular area of medicine, delivering associated care in a comprehensive, interdisciplinary fashion to afford the best patient outcomes possible.”

Centers of excellence in healthcare institutions: what they are and how to assemble them

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5516836>

Why are Substance Use Disorder Centers of Excellence Needed

1. The Awareness Reduces Stigma
2. Better Performance for Employers
 - a) Lower costs and better outcomes
3. Increased Member Satisfaction
 - a) Lower out-of-pocket costs
 - b) Better outcomes
 - c) Increased Member satisfaction
4. Alignment with Trusted Providers

Industry Fraud and Ethics

- The addiction treatment space has come under scrutiny the last couple years for unethical, illegal and unsafe business and clinical practices
- State and Federal Laws have been created to curb patient brokering and patient incentives
- Google implemented LegitScripts consumer protection and limited advertising to ethical providers

Blue Distinction Areas of Specialty Care

- Bariatric Surgery
- Cancer Care
- Cardiac Care
- CAR-T
- Fertility Care
- Ocular
- Knee and Hip Replacement
- Maternity Care
- Spine Surgery
- **Substance Use Treatment and Recovery Disorder**
- Transplants

Substance Use Centers of Excellence

Performance from Cigna

Outperforming other in-network facilities & out-of-network facilities

Lower Costs		Better outcomes
Cost per admission	Cost per customer (all utilization in one year)	Readmission rates
Out-of-network facilities cost 240%, or \$16,799, more than COE facilities	Out-of-network facilities cost 350%, or \$31,597, more than COE facilities	Out-of-network facilities have a 71% higher readmit rate than COEs
Other in-network facilities cost 19%, or \$1,349, more than COE facilities	Other in-network facilities cost 28%, or \$2,494, more than COE facilities	Other in-network facilities have a 22% higher readmit rate than COEs

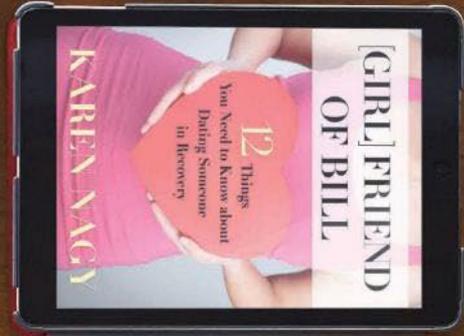
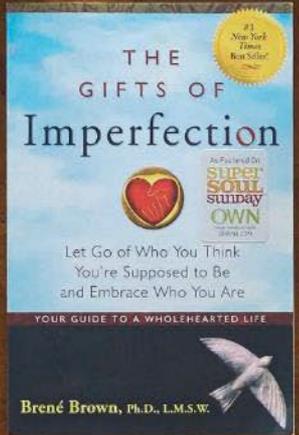
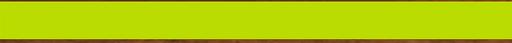
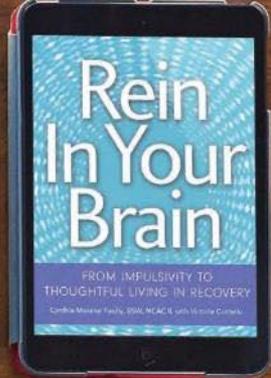
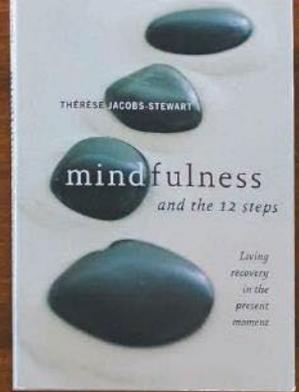
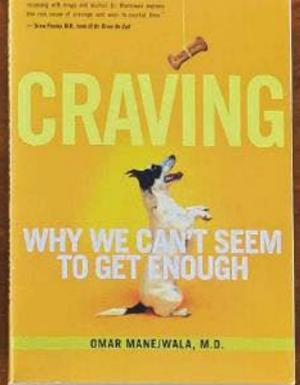
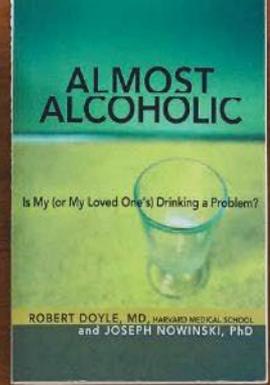
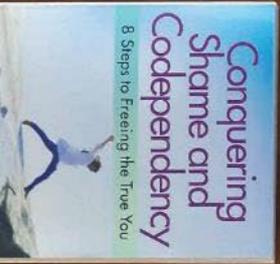
Hazelden Betty Ford / COE Results

Employer/Customer Example

- Problem: excessive out of network spend and poor outcomes
- Employer introduced Hazelden Betty Ford to their Payer and gave the Payer the directive to work with Hazelden Betty Ford to solve the problem
- After 6 months of working together the Employer reports seeing a “decrease” in out of network spend and after 1 year a “significant decrease”

Final thoughts

- How can we support you and your organization?
- Schedule a meeting with me to discuss your needs and creative solutions we have provided to payers and employers
- Contact: Cusher@hazeldenbettyford.org
- Cell: 203-895-6238



THANK YOU

