Opioid Abuse in the Workplace

Our nation’s opioid crisis is the deadliest drug epidemic in U.S. history. According to the CDC, the number of opioid-related overdose deaths has quadrupled since 1999. In fact, six out of 10 overdose deaths are the result of opioid abuse. And for every person who dies from a drug overdose, another 130 individuals are living with an addiction.

Ohio currently leads the opioid epidemic, with more overdose deaths than any other state – and it’s having a significant impact on our workforce, especially given opioids are often prescribed to treat work-related injuries or conditions protected under the ADA.

This has left employers grappling with issues of lost productivity, higher absenteeism, greater risk of workplace injuries, an increase in positive drug tests, workplace theft and higher healthcare costs. Many businesses are even experiencing labor shortages due to more difficulty in hiring and retaining a sufficient number of workers who can successfully pass a drug test.

In response, employers are becoming an integral part of a massive effort to help educate, support and rehabilitate opioid-dependent workers. Although they can’t diagnose or treat opioid-dependent workers, employers can help by providing educational resources and better access to treatment. Many employers are actually rethinking their zero-tolerance drug policies and opting for a more flexible approach, including:

• The revival of “last-chance agreements” that offer drug-dependent workers a second chance to get clean – as opposed to immediate termination – after the first positive drug test. This provides an opportunity for employees to obtain treatment and get back into the workforce. However, employers still reserve the legal right to enforce disciplinary actions and/or termination for drug-related workplace misconduct.

• Expanding supervisor training programs to include proper methods for detecting signs of drug use, how to conduct fitness-for-duty evaluations and reasonable suspensive drug testing, and procedures for assisting workers with access to employee assistance programs (EAPs) or other treatment programs.

• Offering employee education programs and EAPs that provide information on harmful effects of opioid abuse, recognizing signs of drug abuse, proper handling and storage of medicine, and how to access treatment for a worker or loved one. In addition, employers may want to consider appointing a compliance officer to oversee these programs and address any confidentiality issues associated with drug testing.

Although there’s no “perfect” solution, employers can take these proactive steps to help address and combat the growing opioid crisis in the workplace.

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Don’t Overlook Medicare When Delaying Retirement

Ten thousand people turn 65 every day in the United States. However, traditional retirement at 65 and the pursuit of Medicare is no longer the norm and the pursuit of Medicare while actively employed has now taken its place. Employer-sponsored group health plans are not what they once were, premiums and deductibles are on the rise and an increasing number of people are finding Medicare is a more cost-effective option for health insurance.

If you pursue Medicare, the Part B premium (currently $134/month) becomes the baseline. While payroll deductions for employer coverage may at first seem consistent with the Part B premium, it is deductible only that change the conversation and drive the cost comparison. Today, most people in employer plans are faced with $2,500 deductibles on average.

The movement into Medicare and supplemental coverages alleviates that financial burden. You may have copays with Medicare coverages, but you will not face thousands of dollars in out-of-pocket deductibles before your plan or policy pays.

When weighing options, it’s always an exercise in mathematics. Finding the most comprehensive coverage for the best price should be everyone’s goal.

If you’re approaching Medicare eligibility and are planning on working beyond your 65th birthday, don’t make the assumption your employer plan is your best option. Ask questions. Shop your options.

Even if you’re over 65, still working, and still on your employer plan, it’s not too late to weigh options. Typically, you can separate from an employer plan at any time. Loss of coverage, even if voluntary, allows you to move to Medicare without penalty.

We all know that the new constant with healthcare is change. Medicare is wilder misunderstood and often thought to be far more expensive than it is in reality. The good news: if you’re employed, soon to be 65 and not planning to retire, you have choices. And you might be able to free up dollars that you can redirect to your retirement fund – even better news.