



BOWDITCH

# TOOLS FOR MITIGATING THE OPIOID AFFECT IN THE WORKPLACE

KEN DUCKWORTH – BLUE CROSS BLUE SHIELD OF MASSACHUSETTS

TIM VAN DYCK & AMY CONDON – BOWDITCH

BOWDITCH & DEWEY, LLP | MAY 15, 2019

# The State of the Opioid Epidemic

## What do we know about the Opioid Crisis?



Roughly

**21-29%**

of patients prescribed opioids for chronic pain misuse them.<sup>2</sup>

Between

**8-12%**

develop an opioid use disorder.<sup>3, 4, 5</sup>

An estimated

**4-6%**

who misuses prescription opioids transition to heroin.<sup>3, 4, 5</sup>

About

**80%**

of people who use heroin first misused prescription opioids.<sup>3</sup>

Opioid overdoses increased

**30%**

from July 2016 through September 2017 in 52 areas in 45 states.<sup>6</sup>

The Midwestern region saw opioid overdoses increase

**70%**

from July 2016 through September 2017.<sup>6</sup>

Opioid overdoses in large cities increased by

**54%**

in 16 states.<sup>6</sup>

1. [cdc.gov/drugoverdose/epidemic/index.html](https://www.cdc.gov/drugoverdose/epidemic/index.html).

2. National Drug Early Warning System (NDEWS) - New Hampshire HotSpot Study Finds Extensive Poly Drug Use in Fentanyl-related Deaths

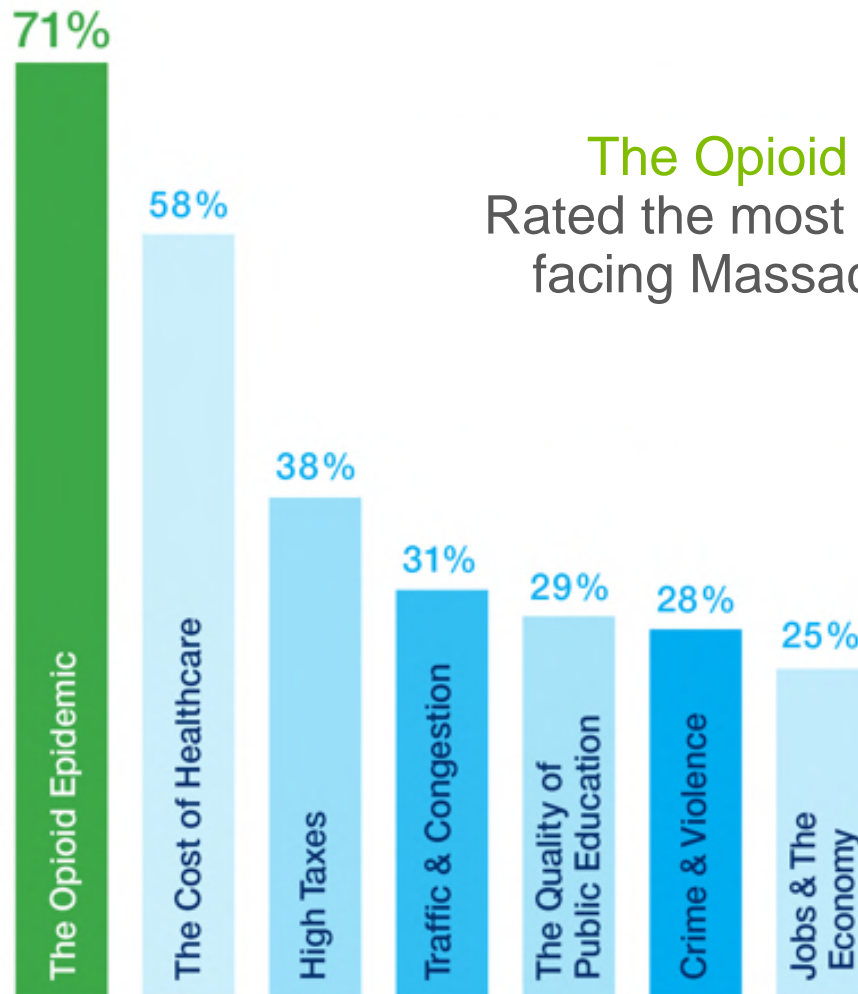
3. NIDA-Funded Opioid Research

4. FDA grants marketing authorization of the first device for use in helping to reduce the symptoms of opioid withdrawal (FDA, November 2017)

5. Illicit Drug Use, Illicit Drug Use Disorders, and Drug Overdose Deaths in Metropolitan and Nonmetropolitan Areas — United States (MMWR) (CDC, October 2017)

6. Underlying Factors in Drug Overdose Deaths (JAMA, October 2017)

# Impact on Massachusetts

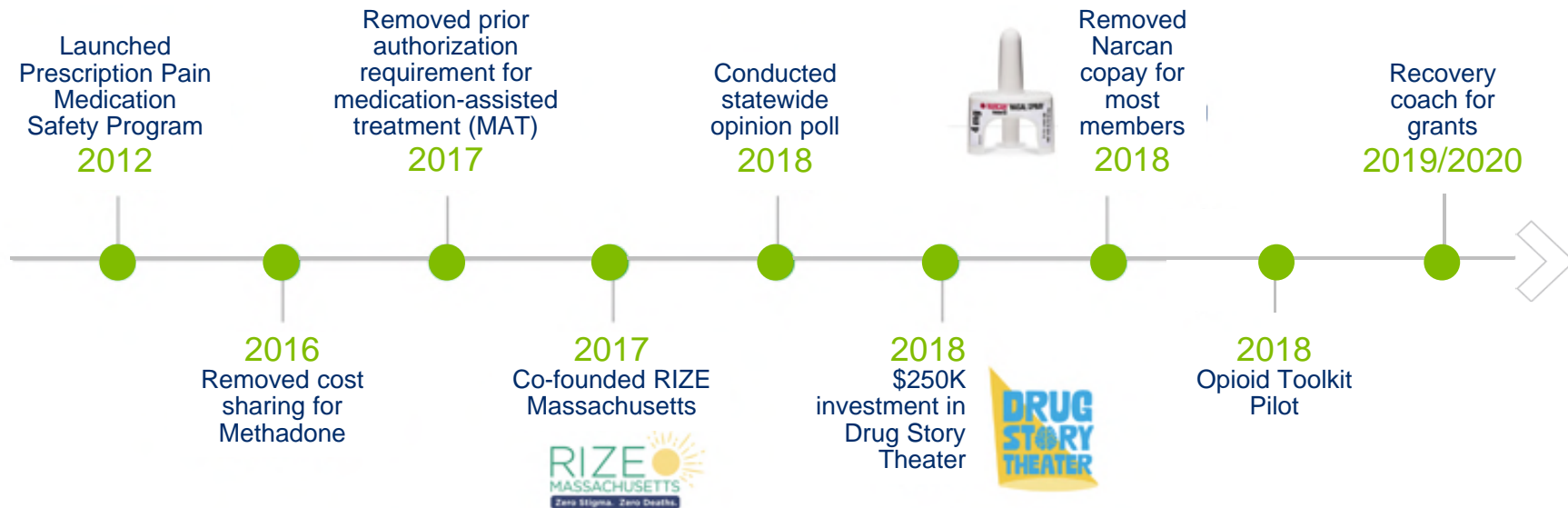


**The Opioid Epidemic:**  
Rated the most serious problem  
facing Massachusetts today

1 in 4

Massachusetts residents know  
someone who has died from  
an opioid overdose.

# A History of Driving Systematic Change



# A Public Health Approach to the Crisis:

## 4 Stages to Recovery



### Prevention

- Alternatives to opioid medications for pain management
- Alternative pain management methods
- Proper disposal of unused medication
- Educating youth on the dangers of opioid misuse with Drug Story Theater



### Intervention

- Know when and where to seek help
- Be prepared in the event of an opioid overdose
- Lower/Eliminate copays for Narcan
- Blue Cross Blue Shield of MA Narcan tool kit



### Treatment

- Determine which treatment option is best for each individual
- Continue to lead other states in using medication assisted treatment (MAT)



### Recovery

- Work with a Recovery Coach
- Focus on rebuilding the foundation of a healthy life
- Our case managers can guide members to recovery, step by step

# Where We Are Today

OPIOID TOOLKIT PILOT TRAINING



OPIOID TOOLKIT PILOT



OPIOID RESOURCE CENTER



Get involved today.  
Visit our Opioid Resource  
Center to learn more.

[bluecrossma.com/opioid](https://bluecrossma.com/opioid)

BOWDITCH

WHAT CAN EMPLOYERS DO?

## BREAK THE STIGMA



- Stigma is a significant driver of costs and employee health outcomes
- Stigma causes a hesitancy to recognize and treat conditions
- Stigma is the primary reason employees delay SUD treatment until symptoms significantly impact daily functioning
- BMC Grayken Center for Addiction
- [www.bmc.org/addiction/employer-resource-library](http://www.bmc.org/addiction/employer-resource-library)



## ASSESS AND ENGAGE THE ORGANIZATION



- Examine costs to the organization
- Review medical and disability claims to assess employee needs
- Conduct confidential employee survey / focus groups
- Educate leadership and managers on the epidemic
- Deliver supportive messaging from Senior Leadership
- Establish an Advisory Team
- Gather and share personal stories from employees

## DEVELOP POLICIES AND PRACTICES



- Start at employee orientation with a statement of support and available resources
- Ensure insurance benefits support employees
- Establish a Drug and Alcohol Free Workplace policy
- Make information on available leaves readily available
- Form employee support groups
- Decide whether to have Narcan on site

## EMPLOYEE ASSISTANCE PROGRAMS



- Employer-based programs designed to address issues that may impact an employee's wellbeing or productivity
- Includes mental health, substance use, legal/financial concerns
- Short-term counseling, referrals to mental health and SUD providers
- Generally under-utilized due to a fear of non-confidentiality, lack of program awareness
- Poorly integrated with Human Resources and return to work / disability management

## EDUCATING MANAGERS



- Provide training on the epidemic
- Train on signs of opioid use and appropriate manager response
- Schedule team meetings to ensure employees are aware of resources and support
- Provide feedback to Human Resources on employee questions and issues

## LAWS APPLICABLE TO SUBSTANCE USE DISORDER

- Americans with Disabilities Act; M.G.L. c. 151B
- FMLA; Massachusetts Paid Family and Medical Leave law
- Substance Use Disorder is a recognized disability
- Employers cannot discriminate against an employee who
  - Is in recovery, and
  - Can perform the job with or without a reasonable accommodation (MAT's, time to attend support groups, leave to obtain treatment)
- A history of SUD cannot be used to terminate an employee
- Employers can 1) discipline an employee for illegal substance use; and for 2) failing to perform the job satisfactorily

## SIGNS OF SUBSTANCE USE DISORDER



- Spending time alone and avoiding time with family and friends
- Losing interest in activities
- Being very tired and sad
- Eating more or less than usual
- Being overly energetic, talking fast and saying things that don't make sense
- Being nervous or cranky
- Quickly changing moods
- Missing important appointments
- Getting into trouble with the law
- Attending work on an erratic schedule
- Experiencing financial hardship

## MANAGER RESPONSE TO SUBSTANCE USE DISORDER CONCERN



- Identify the performance issue
- Do not make assumptions – present the facts
- When speaking to the employee, state what the performance issue is, your expectations moving forward, and the consequences for failure to change behavior
- Provide information on available resources
- Document, document, document

## QUESTIONS?

BOWDITCH



**KEN DUCKWORTH**

[Kenneth.Duckworth@bcbsma.com](mailto:Kenneth.Duckworth@bcbsma.com)



**AMY CONDON**

[acondon@bowditch.com](mailto:acondon@bowditch.com)



**TIM VAN DYCK**

[tvandyck@bowditch.com](mailto:tvandyck@bowditch.com)