Thank you for allowing the National Safety Council (NSC) to submit this statement for the record. NSC is a mission-based organization, focused on eliminating the leading causes of preventable death and injury. We focus our efforts and thought leadership on impacting safety through three strategic pillars: Workplace, Roadway and Impairment – until the data tells us otherwise. Our 15,500 member companies represent employees at nearly 50,000 U.S. worksites.

More than 72,000 people died of a drug overdose in 2017 – more than two thirds of those deaths involved opioids. For the first time in U.S. history, a person is more likely to die from an accidental opioid overdose than a car crash.1 There is much more we can do as a nation to save these lives, and NSC commends this committee for holding this hearing today.

Last week on Feb. 25, the National Safety Council, in partnership with more than 50 organizations, released a comprehensive, inclusive strategy to address opioid misuse in this country. The National Plan to Address Opioid Misuse2 lays out actions that must be taken to effectively confront each stage of the addiction life cycle, from prevention to recovery.

The National Plan addresses one area that NSC finds is often overlooked by policymakers – the role employers can play to address this epidemic. Opioid use, misuse, and impairment are serious issues facing today’s workplace. In 2017, 95% of people who overdosed were of working age,3 and 75% of adults with a substance use disorder are in the workforce.4 The Bureau of Labor Statistics reports that overdoses at work from non-medical use of drugs or alcohol increased by at least 25% annually between 2013-2017.5 Although we know employers play a critical role in solving the nation’s opioid crisis, only 17% of employers feel extremely prepared to deal with the situation.6 Employers are in a unique position to affect change because they often can spot signs and symptoms of misuse early. In the National Plan to Address Opioid Misuse, employers are urged to create return-to-work policies during and following treatment, accommodate employees who are prescribed opioids and stock naloxone in workplace first aid kits, among other actions.

What is the Cost of Opioid Use Disorder to a Workplace?

1 https://injuryfacts.nsc.org/all-injuries/preventable-death-overview/odds-of-dying/
2 https://www.nsc.org/home-safety/safety-topics/opioids/national-plan-to-address-opioid-misuse
3 https://www.cdc.gov/niosh/topics/opioids/data.html
4 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5671784/
5 https://www.cdc.gov/niosh/topics/opioids/data.html
Impaired employees pose a safety hazard to themselves, their co-workers and their work environment, particularly in safety-sensitive positions. Even when taken as prescribed, opioid painkillers have the capacity to cause impairment – a significant safety risk that increases the chances of workplace incidents, errors and injury, and may affect employees’ ability to commute to and from work. Opioids can impair thinking and reaction time, which can lead to serious errors when performing tasks that require focus, attention to detail or the need to react quickly.

NSC recommends that employers train supervisors to spot signs of impairment at work in order to avoid potential safety risks. This training also has benefits when thinking of other impairing substances as well as other impairing conditions (fatigue, etc.). Here are some common signs of potential impairment at work:

<table>
<thead>
<tr>
<th>Physical</th>
<th>Mental</th>
<th>Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rapid shift in physical appearance (hygiene, weight loss or gain)</td>
<td>Inappropriate verbal or emotional responses or behaviors</td>
<td>Calling in sick frequently</td>
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<tr>
<td>Tremors</td>
<td>Irritability</td>
<td>Unexplained tardiness, early departure, extended breaks</td>
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<tr>
<td>Unsteady gait, loss in manual dexterity, working in an unsafe manner</td>
<td>Memory loss</td>
<td>Errors in judgment</td>
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<tr>
<td>Odor of alcohol or other drugs</td>
<td>Unusual isolation from colleagues</td>
<td>Deterioration in performance and quality of work</td>
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<td></td>
<td>Lack of concentration, confusion, forgetfulness, lying</td>
<td>Testing positive on a drug screen</td>
</tr>
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</table>

There is an economic cost as well. The White House Council of Economic Advisors estimated that the opioid crisis alone cost the U.S. economy $696 billion in 2018. Opioid misuse impacts a workplace’s bottom line, safety and employee health and wellness. Employers face significant healthcare costs associated with opioid misuse, including opioid prescriptions and treatment for opioid use disorder and overdose. Additionally, people with opioid use disorders frequently have increased absenteeism and reduced productivity, which have a significant impact on business.

Business leaders can understand more about the cost of substance use (including prescription drug use and misuse, alcohol use and misuse, opioid and heroin use and misuse, marijuana use and misuse, as well as use and misuse of other illicit drugs) in their workplace via the NSC substance use cost calculator.

**How Employers Can Make a Difference**

Having an integrated, proactive approach is essential to preventing opioid misuse and supporting employees who have an opioid use disorder in seeking treatment and recovery. NSC offers a free, comprehensive online toolkit for employers to begin addressing opioids in their organizations, with specific materials for human resource professionals, supervisors, environmental health and safety professionals, and employees themselves. From a variety of educational tools to a step-by-step guide

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7 “Safety-Sensitive” refers to jobs that impact safety of the employee and the safety of others as a result of performing that job. For example, 49 CFR §382.107 defines safety sensitive for commercial motor vehicle operators.
8 https://www.whitehouse.gov/articles/full-cost-opiod-crisis-2-5-trillion-four-years/
9 https://www.nsc.org/forms/substance-use-employer-calculator
10 https://www.nsc.org/pages/prescription-drug-employer-kit
for getting started, the toolkit will help engage employees on the risks of opioid use, develop drug-related human resource policies, recognize signs of impairment and support employees who are struggling with opioid misuse. NSC will hold a workshop11 in Pittsburgh on June 5 to help employers understand how to implement these tools, and we welcome an opportunity to more widely distribute these resources.

NSC also recommends that employers evaluate their benefits to ensure they have an employee assistance program (EAP) for employees. Additionally, employers should advertise this benefit and help employees understand how and why to use it, and the fact that it is confidential, to increase historically low utilization rates.12 Workers compensation is another way employers can take a role in initial prevention and utilizing other evidence-based methods of pain treatment.

Employers should also evaluate their health insurance plans to determine if alternative, including non-pharmacological, pain treatment is available. Similarly, employers should ensure that their health insurance plans cover medications for addiction treatment and other evidence-based treatment options for substance use disorders.

NSC also recommends employers:

• Provide robust employee education (e.g., a substance-free awareness program, comprehensive communications on substance use and impairment)
• Help the organization understand the varying factors that impact addiction (e.g., understanding how addiction differs from person to person and how those behaviors may manifest in the workplace, reduction of stigma, cultural changes and differences, industry challenges, etc.)
• Develop policies and procedures for dealing with impaired workers both in the immediacy of impairment, as well as follow-up policies and procedures post-impairment
• Provide assistance for those who voluntarily seek help for impairment issues
• Make provisions for early intervention and rehabilitation and assistance for employees with a substance use disorder (e.g., peer advocacy programs, EAPs, Member Assistance Programs [MAP], benefits available through employer group health policies, benefits available through union health and welfare funds, etc.)
• Communicate and consistently enforce steps of disciplinary actions for violations of the substance use policy
• Develop clearly defined return-to-work policies (both after an injury, and during / after treatment for a substance use disorder)

NSC has heard from employers the positive impact of helping their employees get into treatment and through recovery. Workers in recovery13 have lower turnover rates and are less likely to miss work days, less likely to be hospitalized and have fewer doctor visits. An NSC survey found:14

• Employers were most concerned about the costs of benefits (86%), ability to hire qualified workers (90%) and costs of workers' compensation (86%) than misuse of opioids (79 – 83%, depending on the type of opioids) and illegal drug sale or use (75%)

11 https://safety.nsc.org/opioids-workshop
13 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5671784/
• Over 75% of employers know they have been affected in some way by employee opioid use, with 38% experiencing impacts related to absenteeism or impaired worker performance
• Only 17% believe their organization is extremely well prepared to deal with opioid use in the workplace

While employee training and education are main drivers of preparedness, only 28% offer opioid-specific training and education to their workforce.

Legislation

Congress can do more to help employers understand the important role they play. Last Congress, the National Safety Council supported bipartisan legislation, H.R. 5892, which would have established an advisory committee on opioids in the workplace. NSC encourages Congress to re-introduce similar legislation.

Additionally, Congress should lead in providing resources to state labs for toxicology testing to gain a better understanding of the opioid epidemic and other drug problems in the United States. By allowing funding for opioid use disorder to be used to upgrade labs to the National Safety Council model guidelines that have already been adopted in several states, policymakers can see and evaluate data from multiple states using the same parameters and make better policy decisions. These guidelines provide recommendations for the toxicological investigation of suspected impaired driving fatalities. People with substance use disorder are often operating on our roadways, and too often with deadly results.

Conclusion

Today, we have nearly 21 million Americans living with substance use disorder, according to the U.S. Surgeon General. That's more than the total number of people living with cancer and more than the population of the state of New York. Federal leadership is needed to ensure the safety and wellbeing of every one of these constituents.

Thank you for your leadership on the opioid crisis. We must work together to put an end to these needless deaths and help those who have been affected by this epidemic.

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