Untreated substance use disorders are among the most costly health conditions in the United States: together, drug and alcohol problems cost the nation’s economy $276 billion a year. Screening is the first step in helping employees get treatment for drug or alcohol problems.

ASSURE THAT YOUR HEALTH PLAN:

✓ Encourages confidential screening for substance use disorders
✓ Educates providers about the importance of screening

WHAT IS SCREENING?

Screening is a process through which individuals are identified according to characteristics that suggest they may be abusing substances. Screening identifies the need, but does not substitute, for a complete assessment.

Screening and Treatment Can Cut Costs

Screening is the first step in helping employees get treatment for drug or alcohol problems. Treatment, in turn, helps to:

♦ Reduce turnover costs: Replacing an employee costs from a few thousand dollars for an hourly worker to as much as $100,000 for a top executive, not including the loss of institutional knowledge, service continuity, and coworker productivity and morale that can accompany employee turnover.

♦ Reduce healthcare costs: Healthcare costs for employees with untreated drug or alcohol problems are about twice those for other employees. Total savings from investing in substance abuse treatment can exceed costs by a 12 to 1 ratio.

♦ Improve productivity: Substance abuse treatment improves work performance and productivity while reducing absenteeism, interpersonal conflicts, and drug- and alcohol-related accidents.

♦ Reduce risk: Employees with substance use disorders that are undetected and untreated are at higher risk than other employees for on-the-job accidents.

How Employers Can Promote Screening

Employers can take the following steps to ensure screening of employees who are at risk for substance abuse:

♦ Provide comprehensive health benefits that cover substance use screening, treatment, and aftercare.
  - Comprehensive coverage ensures that employees have access to the individualized care they need at every stage.
  - One study found that providing comprehensive substance use benefits costs just $.06 more per member per year than imposing a $10,000 limit on those benefits.

♦ Evaluate current health plans to determine whether they require their providers to screen for drug and alcohol problems. If an existing plan doesn’t, the employer may be paying more for healthcare than necessary.

♦ Establish standards and outcome measures for health plans to meet when they require routine screening for substance use problems in physicians'
offices, emergency rooms, clinics and behavioral health centers. For instance, a company might negotiate with its plan to include within the terms of a new contract improvements in the identification rate of alcohol problems.

Ask Your Health Plan Provider About Screening

One simple way employers can encourage health plans to provide access to drug and alcohol screening for employees is by remembering to ask a few key questions about a plan’s coverage and standards regarding substance use services:

♦ Does the health plan cover confidential substance use screening for all employees and brief intervention services for individuals who would benefit from them?
♦ Does the plan encourage physicians and other clinicians to screen for, diagnose and treat substance use problems in primary care settings, hospital emergency rooms and trauma centers?
♦ Does the plan work with other health plans, treatment providers and community groups to promote common approaches to screening and treatment for drug and alcohol problems?

Measuring Health Plan Performance

To maximize their investment, employers should also develop performance measures for health plans related to substance use services. Performance measures establish clear standards of accountability. Examples of appropriate performance measures related to substance abuse services include identifying the percentage of adults diagnosed with substance abuse or dependence who received a related service (treatment initiation) and identifying the percentage of adults diagnosed with substance abuse or dependence who received two additional services within 30 days after initiating treatment (treatment engagement).

Establishing performance measures can help employers evaluate their current health plans and compare among plans when making contractual decisions and negotiating rates, fees and services. Performance measures also can help companies hold their health plans accountable for providing the highest quality of care.

♦ The National Committee for Quality Assurance (www.nccqa.org) provides the Health Plan Employer Data and Information Set (HEDIS), a performance measurement tool that contains measures for initiation and engagement in alcohol and drug treatment.
♦ The National Business Coalition on Health (www.nbch.org) offers another online resource, “eValue8 Request for Information,” that provides an annual assessment of health plan quality using hundreds of benchmarks, including screening and treatment for alcohol use disorders.

For More Information

- National Business Coalition on Health’s eValue8 Tool, www.evalex8.org/eValue8
- Substance Abuse and Mental Health Services Administration, www.samhsa.gov

References