



Just Released Quest Diagnostics 2017 Drug Testing Index Results Show Startling Changes Affecting Employers

Insights

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It's deja vu all over again.

Yogi Berra

All employers should review the yearly release of Quest Diagnostics' Annual Drug Testing Index, which since 1988 has provided the nation's most accurate information on employee drug use changes.

I quoted the sage, Yogi Berra for several reasons to frame my discussion of trends.

Reason 1 – until the last few years, workplace drug issues had fallen off of most employers' screens because the positive test rate fell from a whopping 13.6% in 1988 to 3.5% in 2012 – 20+ years of decline. In 2013, they began to rise again, led by a staggeringly fast rise in opiates positivity.

Reason 2 – not only have the 30+ state laws legalizing medical and/or recreational marijuana created practical challenges, new state laws and aggressive Northeastern states' courts are attacking the until-recently protected right of employers everywhere to require employees to report to work free from the presence of unlawful drugs – and relied upon the Federal criminal Schedule, which treats marijuana as a Schedule-1 illegal drug. So yep, workplace drug issues are back.

Reason 3 – cocaine use is vigorously rising in some areas ... really?! Are we going to have to download and watch old *Miami Vice* episodes?

From **Quest Diagnostic's May 8, 2018 release** of its analysis of 10,000,000 2017 drug test results.

Prescription opiate positivity rate drops by double digits, while cocaine rises by double digits in certain states Methamphetamine positivity skyrockets in Midwestern and Southern United States Marijuana positivity rises considerably in states that recently enacted recreational use statutes, finds national analysis by Quest Diagnostics.

2017 data suggests shifting patterns of drug use, with cocaine and amphetamines positivity surging in some areas of the country and marijuana positivity rising sharply in states with newer recreational use statutes.

May 8, 2018 Quest Diagnostics Annual Drug Testing Index

Rate for Cocaine increased for the 5th consecutive year.

Double-digit year-over-year increases in at least four of the five past years were seen in:

- Nebraska (91% increase between 2016 and 2017),
- Idaho (88% increase),
- Washington (31%),
- Nevada (25%),
- Maryland (22% increase), and
- Wisconsin (13%).

Between 2013 and 2017, methamphetamine positivity skyrocketed:

- **167%** in the East North Central division of the Midwest (Illinois, Indiana, Michigan, Ohio, Wisconsin);
- **160%** in the East South Central division of the South (Alabama, Kentucky, Mississippi, Tennessee);
- **150%** in the Middle Atlantic division of the Northeast (New Jersey, New York, Pennsylvania); and
- **140%** in the South Atlantic division of the South (Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia).

Prescription opiates continue decline in workforce testing data.

This is great progress, but the battle has barely started.

“The depth of our large-scale analysis supports the possibility that efforts by policymakers, employers, and the medical community to decrease the availability of opioid prescriptions and curtail the opioid crisis is working to reduce their use, at least among the working public,”

Kim Samano, PhD scientific director, Quest Diagnostics.

Before we lose interest in what many of us think is the worst US Drug problem and potentially devastating for the economy, let's humanize the statistics.

More Americans die of overdoses than in car crashes and gun homicides combined. In 2016, 64,000 people died due to drug abuse.

- 23% related to prescription pain relievers.
- 24% related to heroin.
- 31% related to non-methadone, synthetic opioids (e.g., fentanyl)

In 2016, over 11.8 million people used heroin or misused prescription opioid pain relievers.

- In 2015, 919,400 people 25 – 54 years old were not in labor force due to opioids.
- From 1999-2015, the decline in labor force participation cumulatively cost economy 12.1 billion work hours.
- During that period, the reduction in work hours slowed real annual economic growth rate by 0.2%, which translates to around \$702.1 billion in real output.

American Action Forum (AAF), “The Labor Force And Output Consequences Of The Opioid Crisis” (March 2018).

Costs of Drug Using Employees Generally.

According to one reputable recent analysis, Drug-using employees are:

- 2.2 times more likely to request early dismissal or time off,
- 2.5 times more likely to have absences of eight days or more,
- 3 times more likely to be late for work,
- **3.6 times more likely to be involved in a workplace accident, and**
- 5 times more likely to file a workers’ compensation claim.

Common sense and experience tells you that these estimates are probably accurate, especially with regard to accidents and workers comp claims.

And Yet, the Societal Trend is to Downplay Drug Usage, at least for Marijuana.

Many of us do not much care what people do in the privacy of their home so long as it does not harm society. With the new state Marijuana laws and anti-employer court decisions in a few, mainly Northeastern States, one large public retailer announced that they would no longer test applicants. Many high tech employers have lost interest in testing, perhaps in part because they do not want to lose good high performing employees whose use if after hours (Don’t Ask-Don’t Tell for the drug world). I get it.

But should most employers cease drug testing and/or relax their stance on marijuana?

I believe that for most employers the answer is no. The rise in non-marijuana use is devastating for American families and the economy. Employer enforcement is very much essential, as well as:

- Reexamination of Rehab, EAP, and Wellness efforts.
- New “Workplace Drug Education” and training beyond the tired old 1990s “*Drugs Don’t Work*” efforts.
- Employee involvement and intervention, similar to efforts to reduce workplace violence, bullying, and harassment.

- Education and assistance for employees whose families are dealing with drug issues, such as for children.

Moreover, Marijuana's active elements can affect judgment and higher levels of reflexes days after use, and show no visible signs. I fully understand the desire of people to use medical marijuana, but such use can present serious dangers and harm performance ... and unlike alcohol impairment is difficult to catch.

But ... and this is a big but ... employers must review those old drug policies, monitor state laws, and contact their attorney. The answers are neither black and white nor simple. The Legal pitfalls are great. See [January 4 & 5, 2018 Posts](#), **Over 30 States have Medical and/or recreational Marijuana Laws.**

Howard

NOTE: FOR THOSE OF YOU WHO HAVE MISSED MY REGULAR ROUNDUPS ON SUBJECTS BEYON SAFETY AND LAW, GO TO HOWARDMAVITY.COM, FOR TWO RECENT POSTS ON WINE, BOOKS, PODCASTS, MOVIES AND OTHER TOPICS, AS WELL AS A RECENT POST ON SEX HARASSMENT AND PAY EQUITY.