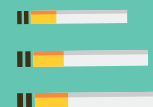


Opioid and tobacco use have created a dual health crisis in Indiana. While the state has taken important steps to address these epidemics, they still claim thousands of Hoosier lives and cost billions of dollars each year.

- In 2017, more than **1,700 Hoosiers** died from a drug overdose, an all-time high and a **75% increase** since 2011.



- Tobacco use is **seven times as deadly**, causing more than **12,500 premature deaths** in Indiana every year.



Indiana taxpayers and businesses **pay more than \$8.3 billion annually** in healthcare costs and lost productivity due to tobacco consumption and secondhand smoke. In 2017, the state's opioid epidemic added another **\$4.3 billion** in economic damages. Employers pay a high share of these costs through lost productivity in the workplace, a shortage of qualified applicants for job openings and higher insurance premiums. As more companies look at health rankings when deciding where to set up operations, Indiana's tobacco and opioid epidemics also make the state a less desirable place for businesses to locate.



Tobacco and opioid use are **two leading root causes** of Indiana's poor health rankings and affect all Hoosiers—by impacting either their health or their wallets. These two public health challenges can only be effectively addressed with action by all stakeholders. Indiana employers can tackle opioid and tobacco use by pursuing a number of proven strategies.

Recommendations for Addressing Opioid Misuse

- **Offering comprehensive health benefit plans and assistance programs for opioid use disorder (OUD):** Employers can best support employees with OUD by implementing robust employee assistance programs and health benefit plans that provide comprehensive coverage for treatment. Such plans include medication-assisted treatment (MAT), which has been proven to be the most effective approach to treating OUD; do not require co-pays; and guarantee confidential OUD services. Employees should regularly be made aware of the presence of these services and how to access them.
- **Providing employment to individuals in recovery:** Treatment efforts for OUD will not be successful unless people have opportunities to engage in meaningful employment during their recovery. As such, employers who truly wish to assist in addressing the opioid crisis in Indiana should seek to actively recruit employees in recovery. This can be accomplished by eliminating or retooling policies that prevent the hiring of people with non-violent criminal offenses, as well as developing relationships with local job training programs for low-income individuals, felony offenders and people experiencing homelessness.

Recommendations for Curbing Tobacco Use

- **Covering smoking cessation in health benefit plans:** Employers should offer health benefit plans that include both counseling and coverage for pharmaceutical-based treatment, which in combination have strong evidence for promoting smoking cessation. Employers can also provide additional resources and assistance to employees who are trying to quit smoking, such as self-help materials and social support.
- **Promoting Indiana's tobacco quitline:** Employers should encourage their workforce to utilize the state's free tobacco quitline (1-800-QUIT NOW) to help them kick their habit. In Indiana, preferred employers can obtain materials to educate their employees on tobacco use and can include direct referrals to the quitline in their workplaces.
- **Offering financial incentives:** Employers can offer financial incentives, such as cash rewards and commitment contracts, to help employees quit smoking. Major companies, such as General Electric and CVS, have implemented such programs and seen strong results.

Sources

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