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[Workers' Comp](#)

# Ask The Pharmacist: Urine Drug Testing in Workers' Compensation

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## Who should receive urine drug testing and how often?

Urine drug testing (UDT) plays an important role in workers' compensation, serving as an essential tool for pharmacy benefit managers (PBMs) to ensure safe and effective use of medications by injured employees. UDT helps PBMs monitor adherence to prescribed medications and detect potential misuse by identifying the presence of prescribed, non-prescribed and illicit substances. This testing supports compliance with treatment plans while simultaneously assisting in preventing fraudulent claims.

The [Official Disability Guidelines](#) (ODG) recommends testing at the onset of chronic opioid treatment and then at an ongoing frequency based on documented risk stratification for addiction and aberrant behavior. Specific risk stratification methods and testing instruments aren't listed in the guidelines; however, there is mention of attributes that may warrant certain risk level.\*

### Low risk:

- None of the below risk factors are present

### Moderate risk:

- Opioid changes without success
- Stable addiction disorder
- Unstable and/or dysfunctional social situations
- Co-morbid psychiatric disorders

### High risk:

- Active substance abuse disorder
- History of UDT positive for illicit substances

It's recommended that injured employees considered low risk receive UDT once a year. The frequency increases to two to three times a year if the injured employee is considered moderate risk and as frequently as monthly for those considered high risk. It is important to note that the ODG explicitly states, "the frequency of urine drug testing may be dictated by state and local laws."

UDT isn't the only method for confirming compliance with opioid treatment. It's only one tool and does not replace others such as pill counts, [Prescription Drug Monitoring Program \(PDMP\)](#) checks, opioid contracts, etc. As with any tool, UDT isn't without its limitations. There's still the potential for false positive and false negative test results. However, with the ever-improving testing technology this is becoming less of a concern.

The information obtained by conducting UDT in the appropriate injured employee population at the recommended frequency helps to ensure safety and compliance. Inconsistent results such as negative result for a prescribed drug or positive result for a non-prescribed drug or illicit substance can lead to timely intervention that otherwise may have gone unnoticed.

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**References:**

<https://www.odgbymcg.com/>

*\*This isn't a comprehensive list of risk factors, nor is this meant to be the only means of risk stratification*



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